

# TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER

**20-010020**

PHOTOS TAKEN  
 SECONDARY CRASH  
 OH-2  OH-3  
 OH-1P  OTHER  
 PRIVATE PROPERTY

LOCAL INFORMATION  
 REPORTING AGENCY NAME  
**BUTLER TWP PD**  
 NCIC  
**05724**

HIT/SKIP  
 1 - SOLVED  
 2 - UNSOLVED  
 NUMBER OF UNITS  
**2**  
 UNIT IN ERROR  
 98 - ANIMAL  
 99 - UNKNOWN  
**1**

COUNTY **57** LOCALITY **3** LOCATION: CITY, VILLAGE, TOWNSHIP  
**Butler**

CRASH DATE / TIME  
**2/7/20 11:37 am**  
 CRASH SEVERITY  
 1 - FATAL  
 2 - SERIOUS INJURY SUSPECTED  
 3 - MINOR INJURY SUSPECTED  
 4 - INJURY POSSIBLE  
 5 - PROPERTY DAMAGE ONLY  
**5**

ROUTE TYPE ROUTE NUMBER PREFIX LOCATION ROAD NAME ROAD TYPE  
**Little York** **RD**

LATITUDE DECIMAL DEGREES  
**39.857933**

ROUTE TYPE ROUTE NUMBER PREFIX REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) ROAD TYPE  
**Downing** **ST**

LONGITUDE DECIMAL DEGREES  
**84.205847**

REFERENCE POINT DIRECTION FROM REFERENCE ROUTE TYPE ROAD TYPE  
**1** 1 - NORTH 1R - INTERSTATE ROUTE (CTP)  
 2 - MILE POST 2 - SOUTH 2US - FEDERAL US ROUTE  
 3 - HOUSE # 3 - EAST 3SR - STATE ROUTE  
 4 - WEST 4 - WEST  
 DISTANCE FROM REFERENCE DISTANCE UNIT OF MEASURE  
 1 - MILES  
 2 - FEET  
 3 - YARDS  
 CR - NUMBERED COUNTY ROUTE  
 TR - NUMBERED TOWNSHIP ROUTE  
 AL - ALLEY HW - HIGHWAY RD - ROAD  
 AV - AVENUE LA - LANE SQ - SQUARE  
 BL - BOULEVARD MP - MILEPOST ST - STREET  
 CR - CIRCLE OV - OVAL TE - TERRACE  
 CT - COURT PK - PARKWAY TL - TRAIL  
 DR - DRIVE PI - PIKE WA - WAY  
 HE - HEIGHTS PL - PLACE

INTERSECTION RELATED  
 WITHIN INTERSECTION OR ON APPROACH  
 WITHIN INTERCHANGE AREA  
 NUMBER OF APPROACHES  
**3**  
 ROADWAY  
 ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT  
**1** 1 - ON ROADWAY 9 - CROSSOVER  
 2 - ON SHOULDER 10 - DRIVEWAY/ALLEY ACCESS  
 3 - IN MEDIAN 11 - RAILWAY GRADE CROSSING  
 4 - ON ROADSIDE 12 - SHARED USE PATHS OR TRAILS  
 5 - ON GORE 13 - BIKE LANE  
 6 - OUTSIDE TRAFFIC WAY 14 - TOLL BOOTH  
 7 - ON RAMP 199 - OTHER / UNKNOWN  
 8 - OFF RAMP  
**2** 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT  
 2 - REAR-END  
 3 - HEAD-ON  
 4 - REAR-TO-REAR  
 5 - BACKING  
 6 - ANGLE  
 7 - SIDESWIPE, SAME DIRECTION  
 8 - SIDESWIPE, OPPOSITE DIRECTION  
 9 - OTHER / UNKNOWN

DIRECTION OF TRAVEL MEDIAN TYPE  
 1 - NORTH  
 2 - SOUTH  
 3 - EAST  
 4 - WEST  
 1 - DIVIDED FLUSH MEDIAN (<4 FEET)  
 2 - DIVIDED FLUSH MEDIAN (≥4 FEET)  
 3 - DIVIDED, DEPRESSED MEDIAN  
 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)  
 9 - OTHER/UNKNOWN

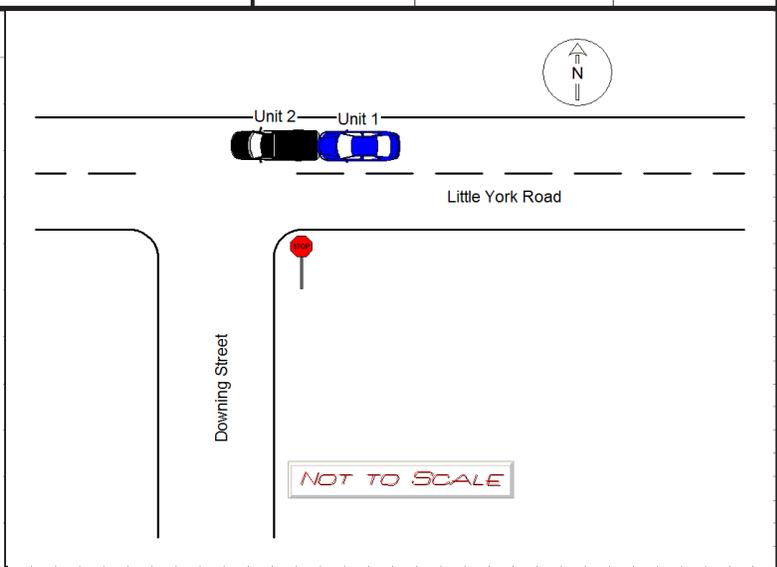
WORK ZONE RELATED  
 WORKERS PRESENT  
 LAW ENFORCEMENT PRESENT  
 ACTIVE SCHOOL ZONE  
 WORK ZONE TYPE  
 1 - LANE CLOSURE  
 2 - LANE SHIFT/CROSSOVER  
 3 - WORK ON SHOULDER OR MEDIAN  
 4 - INTERMITTENT OR MOVING WORK  
 5 - OTHER  
 LOCATION OF CRASH IN WORK ZONE  
 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN  
 2 - ADVANCE WARNING AREA  
 3 - TRANSITION AREA  
 4 - ACTIVITY AREA  
 5 - TERMINATION AREA

CONTOUR CONDITIONS SURFACE  
**2** **2** **2**  
 1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE  
 2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP, BITUMINOUS, ASPHALT  
 3 - CURVE LEVEL 3 - SNOW 3 - BRICK/BLOCK  
 4 - CURVE GRADE 4 - ICE 4 - SLAG, GRAVEL, STONE  
 9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 5 - DIRT  
 6 - WATER (STANDING, MOVING) 9 - OTHER/UNKNOWN  
 7 - SLUSH  
 9 - OTHER/UNKNOWN

LIGHT CONDITION WEATHER  
**1** 1 - DAYLIGHT 1 - CLEAR 6 - SNOW  
 2 - DAWN/DUSK 2 - CLOUDY 7 - SEVERE CROSSWINDS  
 3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW  
 4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE  
 5 - DARK - UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN  
 9 - OTHER / UNKNOWN

NARRATIVE

Unit #1 was traveling west on Little York Rd. in right lane, and when at Downing St., failed to stop within the assured clear distance ahead and collided with the rear of Unit #2 which was traveling west on Little York Rd. in the right and was stopped in traffic.



CRASH REPORTED DATE / TIME **2/7/20 11:37 am** DISPATCH DATE / TIME **2/7/20 11:39 am** ARRIVAL DATE / TIME **2/7/20 11:43 am** SCENE CLEARED DATE / TIME **2/7/20 12:24 pm** REPORT TAKEN BY  
 POLICE AGENCY  
 MOTORIST  
 SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP'S)

TOTAL TIME ROADWAY CLOSED **30** OTHER INVESTIGATION TIME **0** TOTAL MINUTES **45** OFFICER'S NAME **Ofc. David Naas** OFFICER'S BADGE NUMBER **6** CHECKED BY OFFICER'S NAME **Ofc. Chris Hammond** CHECKED BY OFFICER'S BADGE NUMBER **9**



# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
20-010020

UNIT # 1	NAME: LAST, FIRST, MIDDLE TRIMBACH, MICAH ROBERT	DATE OF BIRTH 06/25/2001	AGE 18	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 6385 BRANTFORD RD, DAYTON, OH, 45414		CONTACT PHONE - INCLUDE AREA CODE 9373215827		
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 04
OL STATE OH	OPERATOR LICENSE NUMBER <i>redacted per ORC 4501:1-12</i>	OFFENSE CHARGED 4511.21A	LOCAL CODE	OFFENSE DESCRIPTION Assured Clear Distance Ahead
OL CLASS 4	ENDORSEMENT SELECT UPTO 2	RESTRICTION SELECT UPTO 3	DRIVER DISTRACTED BY 7	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
		CONDITION 1	ALCOHOL TEST STATUS TYPE VALUE 1 1 1	DRUG TEST(S) STATUS TYPE RESULT SELECT UPTO 4 1 1

UNIT # 2	NAME: LAST, FIRST, MIDDLE PUGH, IAN CHRISTOPHER	DATE OF BIRTH 07/29/2003	AGE 16	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 372 N AMERICAN BLVD, VANDALIA, OH, 45377		CONTACT PHONE - INCLUDE AREA CODE 9378135892		
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 04
OL STATE OH	OPERATOR LICENSE NUMBER <i>redacted per ORC 4501:1-12</i>	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS 4	ENDORSEMENT SELECT UPTO 2	RESTRICTION SELECT UPTO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
		CONDITION 1	ALCOHOL TEST STATUS TYPE VALUE 1 1 1	DRUG TEST(S) STATUS TYPE RESULT SELECT UPTO 4 1 1

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT SELECT UPTO 2	RESTRICTION SELECT UPTO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
		CONDITION	ALCOHOL TEST STATUS TYPE VALUE	DRUG TEST(S) STATUS TYPE RESULT SELECT UPTO 4

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN
2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2 - TEST REFUSED
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C	3 - CORRECTIVE LENSES	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	3 - TALKING ON HAND-HELD COMMUNICATION DEVICE	4 - TEST GIVEN, RESULTS KNOWN
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M/C MOPED ONLY	5 - EXCEPT CLASS A BUS	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	
<b>INJURED TAKEN BY</b>	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	<b>EJECTION</b>	<b>OL ENDORSEMENT</b>	7 - EXCEPT TRACTOR-TRAILER	6 - PASSENGER	<b>ALCOHOL TEST TYPE</b>
1 - NOT TRANSPORTED / TREATED AT SCENE	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE
2 - EMS	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	9 - LEARNER'S PERMIT RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	10 - LIMITED TO DAYLIGHT ONLY	9 - OTHER / UNKNOWN	3 - URINE
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER	11 - LIMITED TO EMPLOYMENT	<b>CONDITION</b>	4 - BREATH
<b>SAFETY EQUIPMENT</b>	12 - PASSENGER IN UNENCLOSED CARGO AREA	<b>TRAPPED</b>	Q - MOTOR SCOOTER	12 - LIMITED - OTHER	1 - APPARENTLY NORMAL	5 - OTHER
1 - NONE USED	13 - TRAILING UNIT	1 - NOT TRAPPED	R - THREE-WHEEL MOTORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	2 - PHYSICAL IMPAIRMENT	<b>DRUG TEST TYPE</b>
2 - SHOULDER BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS	14 - MILITARY VEHICLES ONLY	3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	1 - NONE
3 - LAP BELT ONLY USED	15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	4 - ILLNESS	2 - BLOOD
4 - SHOULDER & LAP BELT USED	99 - OTHER / UNKNOWN		X - TANKER / HAZMAT	16 - OUTSIDE MIRROR	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	3 - URINE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING				17 - PROSTHETIC AID	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	4 - BREATH
6 - CHILD RESTRAINT SYSTEM - REAR FACING				18 - OTHER	9 - OTHER / UNKNOWN	5 - OTHER
7 - BOOSTER SEAT						<b>DRUG TEST RESULT(S)</b>
8 - HELMET USED						1 - AMPHETAMINES
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						2 - BARBITURATES
10 - REFLECTIVE CLOTHING						3 - BENZODIAZEPINES
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						4 - CANNABINOIDS
99 - OTHER / UNKNOWN						5 - COCAINE
						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS

**OWNER**

UNIT # **1** OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)  
**TRIMBACH, LISA MARIA**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)  
**6385 BRANTFORD RD, DAYTON, OH, 45414**

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER)  
**9376025613**

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**VEHICLE**

LP STATE **OH** LICENSE PLATE # **HEK1982** VEHICLE IDENTIFICATION # **1G1PF5SC6C7176752** VEHICLE YEAR **2012** VEHICLE MAKE **Chevrolet**

INSURANCE VERIFIED  INSURANCE COMPANY **cincinnati ins** INSURANCE POLICY # **A010684540** COLOR **BLU** VEHICLE MODEL **Cruze**

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

US DOT #

HAZARDOUS MATERIAL:  MATERIAL RELEASED CLASS #  PLACARD

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  #OCCUPANTS **1** VEHICLE WEIGHT GVWR/GCWR: 1 - ≤10K LBS., 2 - 10,001 - 26K LBS., 3 - >26K LBS.

UNIT TYPE: **1** (1-PASSENGER CAR, 2-PASSENGER VAN, 3-SPORT UTILITY VEHICLE, 4-PICK UP, 5-CARGO VAN, 6-VAN (9-15 SEATS), 7-MOTORCYCLE 2-WHEELED, 8-MOTORCYCLE 3-WHEELED, 9-AUTOCYCLE, 10-MOPED OR MOTORIZED BICYCLE, 11-ALL TERRAIN VEHICLE (ATV /UTV), 12-GOLF CART, 13-SNOWMOBILE, 14-SINGLE UNIT TRUCK, 15-SEMI-TRACTOR, 16-FARM EQUIPMENT, 17-MOTORHOME, 18-LIMO (LIVERY VEHICLE), 19-BUS (6+ PASSENGERS), 20-OTHER VEHICLE, 21-HEAVY EQUIPMENT, 22-ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23-PEDESTRIAN / SKATER, 24-WHEELCHAIR (ANY TYPE), 25-OTHER NON-MOTORIST, 26-BICYCLE, 27-TRAIN, 99-UNKNOWN OR HIT/SKIP)

# of TRAILING UNITS **0**

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? **0** (1-YES 2-NO 9-OTHER / UNKNOWN) AUTONOMOUS MODE LEVEL: 0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: **1** (1-NONE, 2-TAXI, 3-ELECTRONIC RIDE SHARING, 4-SCHOOL TRANSPORT, 5-BUS - TRANSIT/COMMUTER, 6-BUS - CHARTER/TOUR, 7-BUS - INTERCITY, 8-BUS - SHUTTLE, 9-BUS - OTHER, 10-AMBULANCE, 11-FIRE, 12-MILITARY, 13-POLICE, 14-PUBLIC UTILITY, 15-CONSTRUCTION EQUIPMENT, 16-FARM, 17-MOWING, 18-SNOW REMOVAL, 19-TOWING, 20-SAFETY SERVICE PATROL, 21-MAIL CARRIER, 99-OTHER / UNKNOWN)

CARGO BODY TYPE: **1** (1-NO CARGO BODY TYPE / NOT APPLICABLE, 2-BUS, 3-VEHICLE TOWING ANOTHER MOTORVEHICLE, 4-LOGGING, 5-INTERMODAL CONTAINER CHASSIS, 6-CARGO VAN/ENCLOSED BOX, 7-GRAIN/CHIPS/GRAVEL, 8-POLE, 9-CARGO TANK, 10-FLAT BED, 11-DUMP, 12-CONCRETE MIXER, 13-AUTO TRANSPORTER, 14-GARBAGE/REFUSE, 99-OTHER / UNKNOWN)

VEHICLE DEFECTS: **1** (1-TURN SIGNALS, 2-HEAD LAMPS, 3-TAIL LAMPS, 4-BRAKES, 5-STEERING, 6-TIRE BLOWOUT, 7-WORN OR SLICK TIRES, 8-TRAILER EQUIPMENT DEFECTIVE, 9-MOTOR TROUBLE, 10-DISABLED FROM PRIOR ACCIDENT, 99-OTHER / UNKNOWN)

NON-MOTORIST LOCATION AT IMPACT: **1** (1-INTERSECTION - MARKED CROSSWALK, 2-INTERSECTION - UNMARKED CROSSWALK, 3-INTERSECTION - OTHER, 4-MIDBLOCK - MARKED CROSSWALK, 5-TRAVEL LANE - OTHER LOCATION, 6-BICYCLE LANE, 7-SHOULDER / ROADSIDE, 8-SIDEWALK, 9-MEDIAN/CROSSING ISLAND, 10-DRIVEWAY ACCESS, 11-SHARED USE PATHS OR TRAILS, 12-FIRST RESPONDER AT INCIDENT SCENE, 99-OTHER / UNKNOWN)

ACTION: **3** (1-NON-CONTACT, 2-NON-COLLISION, 3-STRIKING, 4-STRUCK, 5-BOTH STRIKING & STRUCK, 9-OTHER / UNKNOWN, 1-STRAIGHT AHEAD, 2-BACKING, 3-CHANGING LANES, 4-OVERTAKING/PASSING, 5-MAKING RIGHT TURN, 6-MAKING LEFT TURN, 7-MAKING U-TURN, 8-ENTERING TRAFFIC LANE, 9-LEAVING TRAFFIC LANE, 10-PARKED, 11-SLOWING OR STOPPED IN TRAFFIC, 12-DRIVERLESS, 13-NEGOTIATING A CURVE, 14-ENTERING OR CROSSING SPECIFIED LOCATION, 15-WALKING, RUNNING, JOGGING, PLAYING, 16-WORKING, 17-PUSHING VEHICLE, 18-APPROACHING OR LEAVING VEHICLE, 19-STANDING, 20-OTHER NON-MOTORIST, 21-STANDING OUTSIDE DISABLED VEHICLE, 99-OTHER / UNKNOWN)

CONTRIBUTING CIRCUMSTANCES: **8** (1-NONE, 2-FAILURE TO YIELD, 3-RAN RED LIGHT, 4-RAN STOP SIGN, 5-UNSAFE SPEED, 6-IMPROPER TURN, 7-LEFT OF CENTER, 8-FOLLOWING TOO CLOSE / ACDCA, 9-IMPROPER LANE CHANGE, 10-IMPROPER PASSING, 11-DROVE OFF ROAD, 12-IMPROPER BACKING, 13-IMPROPER START FROM A PARKED POSITION, 14-STOPPED OR PARKED ILLEGALLY, 15-SWERVING TO AVOID, 16-WRONG WAY, 17-VISION OBSTRUCTION, 18-OPERATING DEFECTIVE EQUIPMENT, 19-LOAD SHIFTING/FALLING/SPILLING, 20-IMPROPER CROSSING, 21-LYING IN ROADWAY, 22-NOT DISCERNIBLE, 23-OPENING DOOR INTO ROADWAY, 99-OTHER IMPROPER ACTION)

SEQUENCE OF EVENTS: **20**

1 **20** 1-OVERTURN/ROLLOVER, 2-FIRE/EXPLOSION, 3-IMMERSION, 4-JACKKNIFE, 5-CARGO / EQUIPMENT LOSS OR SHIFT, 6-EQUIPMENT FAILURE, 7-SEPARATION OF UNITS, 8-RAN OFF ROAD RIGHT, 9-RAN OFF ROAD LEFT, 10-CROSS MEDIAN, 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL, 12-DOWNHILL RUNAWAY, 13-OTHER NON-COLLISION, 14-PEDESTRIAN, 15-PEDALCYCLE, 16-RAILWAY VEHICLE, 17-ANIMAL - FARM, 18-ANIMAL - DEER, 19-ANIMAL - OTHER, 20-MOTOR VEHICLE IN TRANSPORT, 21-PARKED MOTOR VEHICLE, 22-WORK ZONE MAINTENANCE EQUIPMENT, 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE, 24-OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK: **1** (25-IMPACT ATTENUATOR / CRASH CUSHION, 26-BRIDGE OVERHEAD STRUCTURE, 27-BRIDGE PIER OR ABUTMENT, 28-BRIDGE PARAPET, 29-BRIDGE RAIL, 30-GUARDRAIL FACE, 31-GUARDRAIL END, 32-PORTABLE BARRIER, 33-MEDIAN CABLE BARRIER, 34-MEDIAN GUARDRAIL BARRIER, 35-MEDIAN CONCRETE BARRIER, 36-MEDIAN OTHER BARRIER, 37-TRAFFIC SIGN POST, 38-OVERHEAD SIGN POST, 39-LIGHT / LUMINARIES SUPPORT, 40-UTILITY POLE, 41-OTHER POST, POLE OR SUPPORT, 42-CULVERT, 43-CURB, 44-DITCH, 45-EMBANKMENT, 46-FENCE, 47-MAILBOX, 48-TREE, 49-FIRE HYDRANT, 50-WORK ZONE MAINTENANCE EQUIPMENT, 51-WALL, 52-BUILDING, 53-TUNNEL, 54-OTHER FIXED OBJECT, 99-OTHER / UNKNOWN)

FIRST HARMFUL EVENT **1** MOST HARMFUL EVENT **1**

**DAMAGE**

DAMAGE SCALE: **3** (1-NONE, 2-MINOR DAMAGE, 3-FUNCTIONAL DAMAGE, 4-DISABLING DAMAGE, 9-UNKNOWN)

**DAMAGED AREA(S)**  
 INDICATE ALL THAT APPLY

NO DAMAGE [0]  UNDERCARRIAGE [14]

TOP [13]  ALL AREAS [15]

UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT: **12** (0-NO DAMAGE, 1-12-REFER TO UNIT DIAGRAM, 13-TOP, 14-UNDERCARRIAGE, 15-VEHICLE NOT AT SCENE, 99-UNKNOWN)

**TRAFFIC**

TRAFFICWAY FLOW: **2** (1-ONE-WAY, 2-TWO-WAY)

TRAFFIC CONTROL: **6** (1-ROUNDOABOUT, 2-SIGNAL, 3-FLASHER, 4-STOP SIGN, 5-YIELD SIGN, 6-NO CONTROL)

# OF THROUGH LANES ON ROAD: **2**

RAIL GRADE CROSSING: **3** (1-NOT INVOLVED, 2-INVOLVED-ACTIVE CROSSING, 3-INVOLVED-PASSIVE CROSSING)

UNIT / NON-MOTORIST DIRECTION: FROM **3** TO **4** (1-NORTH, 2-SOUTH, 3-EAST, 4-WEST, 5-NORTHEAST, 6-NORTHWEST, 7-SOUTHEAST, 8-SOUTHWEST, 9-OTHER / UNKNOWN)

UNIT SPEED: **35**

POSTED SPEED: **35**

DETECTED SPEED: **1** (1-STATED / ESTIMATED SPEED, 2-CALCULATED / EDR, 3-UNDETERMINED)

**OWNER**

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)  
 PUGH, IAN CHRISTOPHER OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER)  
 9378135892

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)  
 372 N AMERICAN BLVD, VANDALIA, OH, 45377

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

**DAMAGE SCALE**

3 1 - NONE 3 - FUNCTIONAL DAMAGE  
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
 9 - UNKNOWN

**VEHICLE**

LP STATE OH LICENSE PLATE # HUV3303 VEHICLE IDENTIFICATION # 1FTDF15Y8RLA88733 VEHICLE YEAR 1994 VEHICLE MAKE Ford

INSURANCE VERIFIED  INSURANCE COMPANY nationwide INSURANCE POLICY # 923450376882 COLOR DGN VEHICLE MODEL F-150

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE US DOT # 1 TOWED BY: COMPANY NAME

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  #OCCUPANTS 1 VEHICLE WEIGHT GVWR/GCWR: 1 - ≤10K LBS., 2 - 10,001 - 26K LBS., 3 - >26K LBS. HAZARDOUS MATERIAL:  MATERIAL RELEASED CLASS #   PLACARD ID #

**DAMAGED AREA(S)**  
 INDICATE ALL THAT APPLY

NO DAMAGE [0]  UNDERCARRIAGE [14]  
 TOP [13]  ALL AREAS [15]  
 UNIT NOT AT SCENE [16]

UNIT TYPE 4

# of TRAILING UNITS 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0

1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL

SPECIAL FUNCTION 1

CARGO BODY TYPE 1

VEHICLE DEFECTS 1

**INITIAL POINT OF CONTACT**

6 0 - NO DAMAGE 14 - UNDERCARRIAGE  
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
 13 - TOP 99 - UNKNOWN

NON-MOTORIST LOCATION AT IMPACT

ACTION 4

CONTRIBUTING CIRCUMSTANCES 1

SEQUENCE OF EVENTS

1 20

2

3

4

5

6

1

**TRAFFIC**

TRAFFICWAY FLOW 2

TRAFFIC CONTROL 6

# OF THROUGH LANES ON ROAD 2

RAIL GRADE CROSSING

**NON-COLLISION**

1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT

2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE

3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT

4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT

5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE

**COLLISION WITH FIXED OBJECT - STRUCK**

25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT

26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL

27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING

28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL

29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT

30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 55 - OTHER / UNKNOWN

49 - FIRE HYDRANT

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

**UNIT / NON-MOTORIST DIRECTION**

FROM 3 TO 4

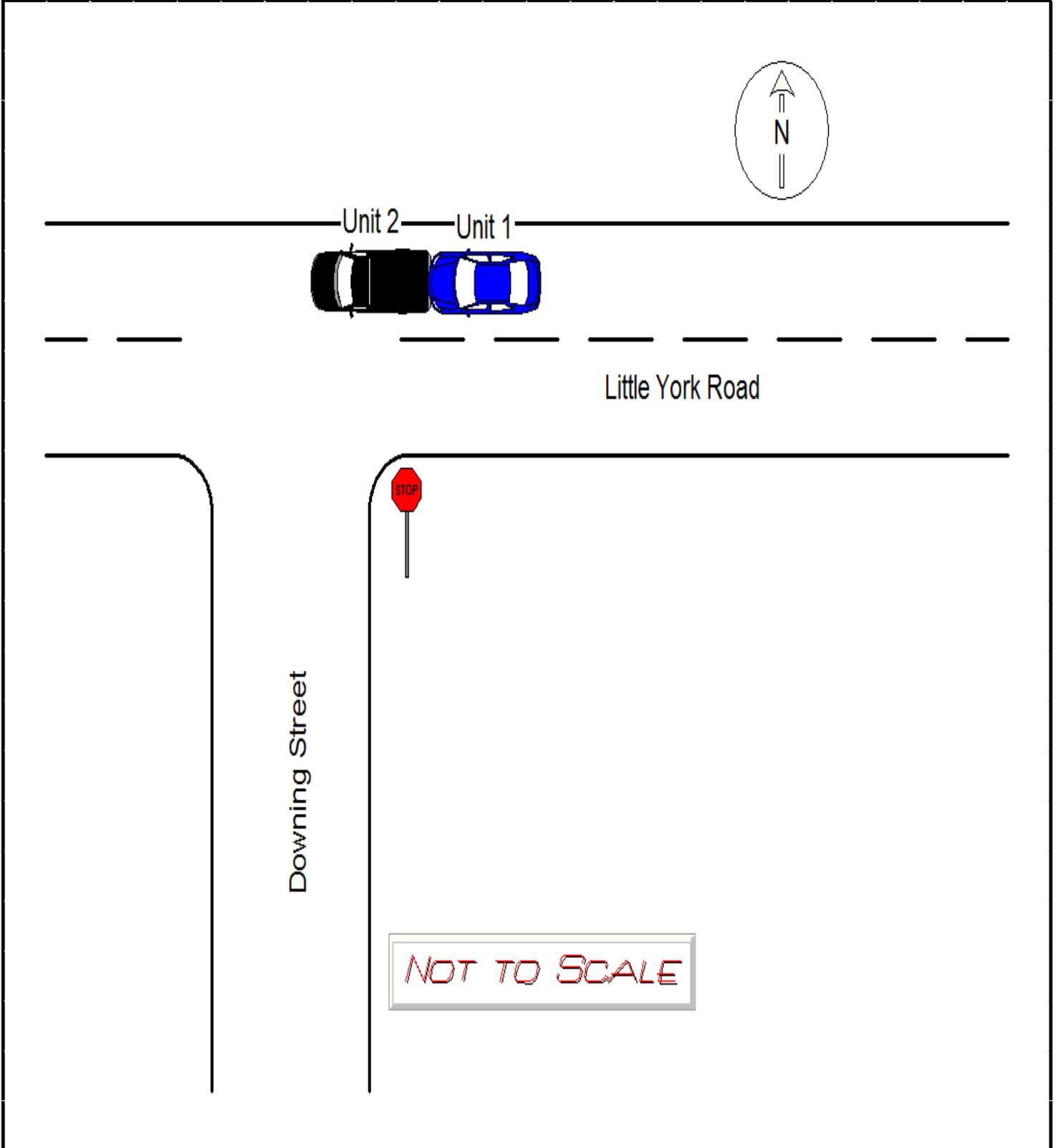
UNIT SPEED 0

POSTED SPEED 35

DETECTED SPEED 1



LOCAL REPORT NUMBER 20-010020	REPORTING AGENCY BUTLER TWP PD	DATE OF CRASH M 2   D 7   Y 2020
IN COUNTY OF MONTGOMERY	CRASH LOCATION Little York Road/ Downing Street	



OFFICER'S SIGNATURE <input checked="" type="checkbox"/> Ofc. David Naas	BADGE NUMBER 6
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