OHO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER •									
	LOCAL INFORMATION	19MPD0300								
	REPORTING AGENCY NAME *	•	NCIC *	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL				
PRIVATE PROPERTY	Millersburg	03801	2 - UNSOLVED	1	1 99 - UNKNOWN					
COUNTY* LOCALITY* LOCATION: CITY	Y. VILLAGE, TOWNSHIP*			CRASH DATE	/ TIME*	CRASH SEVERITY 1 - FATAL				
38 2 2-VILLAGE Millersburg				02/27/2019 09:00 5 2 - SERIOUS IN						
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE	CIMAL DEGREES	SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	Private Property		DR	40.5531	133	3 - MINOR INJURY SUSPECTED [;]				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	REFERENCE ROAD NAME (ROAD, M	ILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE of	CIMAL DEGREES	4 - INJURY POSSIBLE				
3 - EAST	91 South Clay Street			-81.916	S - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE			INTERSECTION RE	LATED				
	/ W/2000 1 1 1/1/15 5	ALLEY HW - HIGHWAY	1000 E 20 14	WITHIN INTER	RSECTION OR ON APP	PROACH				
3 - HOUSE # 2 - SOUTH 3 - EAST	CCDEDALLIC DOLLE	AVENUE LA - LANE BOULEVARD MP - MILEPOST	SO - SOUARE ST - STREET	— —						
	- 1 4200	CIRCLE OV - OVAL	TE - TERRACE	MINIM INTE	RCHANGE AREA	NUMBER OF APPROACHES				
	NUMBERED COUNTY ROUTE I	COURT PK - PARKWAY DRIVE PI - PIKE	TL - TRAIL WA - WAY	ROADWAY						
2 - FEET TR -	ARTHUCOCO TOMANCUID	HEIGHTS PL - PLACE		ROADWAYD	IVIDED					
LOCATION OF FIRST HARMFUL EVEN		NER OF CRASH COLLISION/IN	1PACT	DIRECTION OF TRAI	/EL N	MEDIAN TYPE				
1 - ON ROADWAY 9 - CROSSOVER 1 1 2 - ON SHOULDER 10 - DRIVEWAY/	1 7	COLLISION 4 - REAR-TO-REAR EEN 5 - BACKING	l	1 - NORTH		DED FLUSH MEDIAN				
3 - IN MEDIAN 11 - RAILWAY GI	RADE CROSSING TWO	MOTOR 6 - ANGLE		2 - SOUTH 3 - EAST	2 - DIVID	EET) DED FLUSH MEDIAN				
4 - ON ROADSIDE 12 - SHARED US 5 - ON GORE TRAILS		SPORT 7 - SIDESWIPE, SAN		4 - WEST	(≥4 F	EET) DED, DEPRESSED MEDIAN				
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE	2 - REAR				3	DED, RAISED MEDIAN				
7 - ON RAMP 14 - TOLL BOOTS 8 - OFF RAMP 99 - OTHER / UN		O-ON 9OTHER / UNKN	IOWN		(ANY 9 - OTHE	TYPE) :R / UNKNOWN				
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN	WORK ZONE	CONTOUR	CONDITIONS	SURFACE				
; 	- LANE CLOSURE	1 - BEFORE THE 1ST		11	111	12				
2	- LANE SHIFT/ CROSSOVER	WARNING SIGN 2 - ADVANCE WAR		1 - STRAIGHT	1 - DRY	1 - CONCRETE				
LAW ENFORCEMENT PRESENT	- WORK ON SHOULDER OR MEDIAN	3 - TRANSITION AF	REA	LEVEL	2 - WET	2 - BLACKTOP, BITUMINOUS,				
4 - INTERMITTENT OR MOVING WORK 4 - A			ARFA	2 - STRAIGHT GRADE	3 - SNOW 4 - ICE	ASPHALT				
5	- OTHER	5 - TERMINATION A		3 - CURVE LEVEL 4 - CURVE GRADE	5 - SAND, MUD, DII OIL, GRAVEL	RT, 3 - BRICK/BLOCK 4 - SLAG , GRAVEL,				
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	WEATHER 6 - SNOW		9 - OTHER	6 - WATER (STAND)	ING, STONE				
1 2 - DAWN/DUSK	2 2-CLOUDY	7 - SEVERE CROSSWINDS		\UNKNOWN	MOVING) 7 - SLUSH	5 - DIRT 9 - OTHER				
3' - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED	1	8 - 8LOWING SAND, SOIL, DIR 9 - FREEZING RAIN OR FREEZI			9 - OTHER / UNKN	OMN \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
5 - DARK - UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	99 - OTHER / UNKNOWN	ING DRIZZLE							
9 - OTHER / UNKNOWN										
NARRATIVE										
Unit number one was Northbound in the parking lot when the top of her box truck				•						
parking for when the top of her box trock	struck the drive thos over the					Î				
						Ň				
				222						
		CSB	Bank	Bank Drive Thru						
				<u> </u>	50.000 1					
					-4					
					#1					
				<u> </u>	**************************************					
			was a second		Ī					
					1					
CRASH REPORTED DATE / TIME	ARRĮVAL DATE / TI	ME	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY					
02/27/2019 09:13	02/27/2019 09:	15	02/27/201	.9 09:43	X POLICE AGENCY					
TOTAL TIME OTHER TOTAL		HECKED BY OFFICE	R'S NAME*		MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINU		or Millions.				SUPPLEMENT (CORRECTION OR ADDITION				
30 60	OFFICER'S BAD		CHECKED B	y OFFICER'S BADGE	NUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)				



LOCAL REPORT NUMBER

19MPD0300

UNIT#	OWNER NAME: LAST, FIRST, N	ATTION F (T) SAME AS DOMEDO	10	OWNER PHONE:INCLUDE AS	REA CODE (SAME AS DRIVER)		AMAGE
1	U-HAUL OF ARIZONA			800-52	-	DA	MAGE SCALE
	ADDRESS: STREET, CITY, STATE, ZI	·A		000 321	5 7 L S T	1 - NONE	3 - FUNCTIONAL DAMAGE
~	CENTRAL AVE, PHOEN					3 2 - MINOR DAMA	GE 4 - DISABLING DAMAGE
	CIAL CARRIER: NAME, ADDRESS			CONNECTAL CARRIED DH	ONE: INCLUDE AREA CODE	9 -	UNKNOWN
COMMEN	CARL CARRIER: NAME, ADDRESS	5, CI17, SIMIE, ZIP		COMMERCIAL CARRIER FF	OTTE: INCLUDE AREA CODE	DAN	IAGED AREA(S)
					7		TE ALL THAT APPLY
LP STATE	LICENSE PLATE #	VEHICL	EIDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE		
AZ	AJ29052		4FS9KDC05761	2018	FORD	12	12
XINSUR VERIFI	ANCE INSURANCE COMPAN	1	NSURANCE POLICY #	COLOR	VEHICLE MODEL		7 12 10
LAIVERIF	ED LIBERTY	A	OS-2812044207097	WHI	E-450	10 11 2	10 11 1 2
	TYPE OF USE		US DOT #	TOWED BY: COMPANY	NAME		
СОММ	IERCIAL GOVERNMENT	IN EMERGENCY RESPONSE				9 1 3 3	9 9 3
INTER	LOCK	# OCCUPANTS VEHIC	CLE WEIGHT GVWR/GCWR		IS MATERIAL SS # PLACARD ID #		
DEVIC	E HIT/SKIP UNIT	1 1.	1 - ≤10K tBs. 2 - 10.001 - 26K tBs.	☐ RELEASED	33 # FLACARDID#		8 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
EQUIP	PEU	<u> </u>	☐ 3 - > 26K LBS.	PLACARD		7	12 7 5
	1 - PASSENGER CAR 6 - VA	N (9-15 SEATS)	12 - GOLF CART 18 - LIN	MO (LIVERY VEHICLE) 23 -	PEDESTRIAN/SKATER	·	
1 14	1	OTORCYCLE 2-WHEELED		•	WHEELCHAIR (ANY TYPE)	10	11 2
		OTORCYCLE 3-WHEELED	TRUCK		OTHER NON-MOTORIST	/-	10 2 -
UNITITY	VEHICLE 10 - M	IOPED OR MOTORIZED	13 - SEMI-! KACTUK	•	BICYCLE	9	3 3
		CYCLE	16 - FARM EQUIPMENT		- TRAIN - UNKNOWN OR HIT/SKIP	_	
		LL TERRAIN VEHICLE	17 - MOTORHOME		ONKNOWN ON AUGSOF	8 🗸	
	# of TRAILING UNITS	014)				12 7	5 12
VEHICLE	WAS VEHICLE OPERATING IN AL	ITONOMOUS	A NO (1174) (1777)			17 12 1	6 11 12 17
<u> </u>	MODE WHEN CRASH OCCURRED			CONDITIONAL AUTOMATION	A - NUKNOMN	10 / 11 / 2	
2	1		-	- HIGH AUTOMATION		/ 13 M 2	10 12 1
	1-YES 2-NO 9-OTHER/U	NKNOWN AUTONOMOU MODE LEVEL	JS 2 - PARTIAL AUTOMATION S -	FULL AUTOMATION		9 9 3 3	9 0 3 3
	1 - NONE	6 - BUS - CHARTER/TOUR		16 5404	21 - MAIL CARRIER		
	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	16 - FARM 17 - MOWING	99 - OTHER / UNKNOWN	8 2 2 4	8 7 5 4
1	3 - ELECTRONIC RIDE	8 - BUS - SHUTTLE	13 - POUCE	18 - SNOW REMOVAL	30 Willer, 21111101111		7 1 1 1
SPECIA	SHARING	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TOWING		6	8
FUNCTIO	N 4 - SCHOOL TRANSPORT S - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP.				
	3 - 003 - HOWSHITCOMMOTER			PATROL .			12 12 12
1 99	1 - NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN	12	
CARGO	/ NOT APPLICABLE	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE	12 - CONCRETE MIXER			
BODY	3 - VEHICLE TOWING	6 - CARGOVAN	9 - CARGO TANK	13 - AUTO TRANSPORTER		ه و در کی و ا	3 29 3 9 17 3 9 3 29 3
TYPE	ANOTHER MOTOR VEHICLE	/ENCLOSED BOX	10 - FLAT BED	14 - GARBAGE/REFUSE			†
	, 1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6	•
VEHICL	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIOR	₹		6 6 6
DEFECT		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		_	_
						- NO DAMAGE	0] L- UNDERCARRIAGE [14]
	1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWAL	7 - SHOULDER/ROADSIDE	10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN	X-TOP[13]	- ALL AREAS [15]
NON-	2 - INTERSECTION -	5 - TRAVEL LANE -	a - SIDEWALK	11 - SHARED USE PATHS OR TRAILS		[A]-10P[13]	- ALL AREAS [15]
MOTORIS'	. UNMARKED CROSSWALK	OTHER LOCATION	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER		u:	NIT NOT AT SCENE [16]
LOCATIO	3-Interded to the to	6 - BICYCLE LANE		AT INCIDENT SCENE			
	1 - NON-CONTACT	1 - STRAIGHT AHEAD 2 - BACKING	9 - LEAVING TRAFFIC LANE	15 - WALKING, RUNNING, JOGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE	INITIAL	POINT OF CONTACT
2	2 - NON-COLLISION	3 - CHANGING LANES	10 - PARKED	16 - WORKING	99 - OTHER / UNKNOWN	0 - NO DAMA	GE 14 - UNDERCARRIAGE
	3 - STRIKING	4 - OVERTAKING/PASSING		17 - PUSHING VEHICLE			TO UNIT 15 - VEHICLE NOT AT SCENE
ACTION		S - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	18 - APPROACHING OR LEAVING VEHICLE		DIAGRA	M 99 - UNKNOWN
	5 - BOTH STRIKING	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE			13 - TOP	
	& STRUCK	8 - ENTERING TRAFFIC	14 - ENTERING OR CROSSING	20 - OTHER NON-MOTORIS	57		
	9 - OTHER / UNKNOWN 1 - NONE	R - FOLLOWING TOO CLO	SPECIFIED LOCATION	18 - OPERATING DEFECTIVE	22 ODENING COOR 1: 77		TRAFFIC
	2 - FAILURE TO YIELD	/ACDA	SE 13 - IMPROPER START FROM A PARKED POSITION	EQUIPMENT	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
	3 - RAN RED LIGHT	9 - IMPROPER LANE	14 - STOPPED OR PARKED	19 - LOAD SHIFTING	99 - OTHER IMPROPER	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN
1 99	4 - RAN STOP SIGN	CHANGE	ILLEGALLY	/FALUNG/SPILLING	ACTION	2 2 1 WO-WAY	6 2-SIGNAL 5-YIELD SIGN
CONTRIBU	S - UNSAFE SPEED TING 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	20 - IMPROPER CROSSING 21 - LYING IN ROADWAY			3 - FLASHER 6 - NO CONTROL
GRCUMST,	ANCES 7 - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NOT DISCERNIBLE		# of THROUGH LANES	RAIL GRADE CROSSING
2				*		ON ROAD	1 - NOT INVLOVED
SEOUEN	CE OF EVENTS	<u>\$117</u> 777777877.	gran gal ar a araansa	MIT MURICIPARENTE EN	······································	2	2 - INVOLVED-ACTIVE CROSSING
. 1 54	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF UNITS		19 - ANIMAL -OTHER	23 - STRUCK BY FALLING,		3 - INVOLVED-PASSIVE CROSSING
1 32	2 - FIRE/EXPLOSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	20 - MOTOR VEHICLE IN	SHIFTING CARGO OR	LINET CALCAL	MOTORICT NIDECTON
	3 - IMMERSION 4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	TRANSPORT	ANYTHING SET IN MOTION 8Y A MOTOR	ONTI VION	I-MOTORIST DIRECTION
2	5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN 11 - CROSS CENTERLINE -	15 - PEDALCYCLE 16 - RAILWAY VEHICLE	21 - PARKED MOTOR VEHICLE	VEHICLE	,	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST
	LOSS OR SHIFT	OPPOSITE DIRECTION	17 - ANIMAL - FARM	22 - WORK ZONE	24 - OTHER MOVABLE OBJECT		3 - EAST 7 - SOUTHEAST
3	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - DEER	MAINTENANCE EQUIPMENT		FROM 2 TO 1	4 - WEST 8 - SOUTHWEST
		Z - Na Warcolu	SION WITH FIXED OBJECT -				9 - OTHER / UNKNOWN
4 [25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES	4S - EMBANKMENT 46 - FENCE	52 + 8UILDING		
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRI		47 - MAILBOX	S3 - TUNNEL S4 - OTHER FIXED	UNIT SPEED	DETECTED SPEED
5	STRUCTURE	34 - MEDIAN GUARDRAIL	40 - UTILITY POLE	48 - TREE	OBJECT 99 - OTHER / UNKNOWN	-	T STATED SECTIONATED CORES
	27 - BRIDGE PIER OR ABUTMENT	BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE OR SUPPORT	49 - FIRE HYDRANT 50 - WORK ZONE	35 - OTHER / UNKNOWN	5	1 - STATED / ESTIMATED SPEED
61	28 - BRIDGE PARAPET	BARRIER	42 - CULVERT	MAINTENANCE EQUIPMENT			1 12-CALCULATED/EDR
B	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARR 37 - TRAFFIC SIGN POST	IER 43 - CURB 44 - DITCH	51 - WALL		POSTED SPEED	
							3 - UNDETERMINED
	FIRST HARMFUL EVEN	IT 1 MOS	ST HARMFUL EVENT				

OHO DEPARTMENT MOTORIST / NON-MOTORIST					LOCAL REPORT NUMBER 19MPD0300										
UNIT #				DATE OF BIRTH AGE				GENDER							
1	GARVER, DONNA, J				08/26/1977					41	F				
_	<u> </u>	CITY, STATE, ZIP				CONT		NE - INCLUDE	AREA CODE	L		L			
710 S W	ASHINGTON STREET LOT 10, MILLERSBURG, OH, 44654					330-275-8834									
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	Taken to: I	MEDICAL FACILITY (NAM	E, CITY)	SAFETY EQUIPMENT	po	Т-Сомрид	SEATING NT POSITION	AIR BA	G USAGE	EJECTIO	N TRAPPED
INJURIES 5 OL STATE OH	BY 1							99		HELMET			1	1	1
OL STATE	OPERATOR I	LICENSE NUMBER		OFFEN:	SE CHARG	iED .	LOCAL	OFFENSE DESCRI	PTION			CITA	TON N	JMBER	
OH OH	RU069234	,													
OL CLASS	ENDORSEME	NT RESTRICTION SELECT UP TO 3	DRIV	VER FRACTED	p=====	HOL / DRUG SUSI		CONDITION			DL TEST		_	HSI(
4		3	BY	IRACIED 1		OHOL MARI ER DRUG	JUANA	1	status 1	TYPE 1	VALUE	STATUS	TYPE 1	RESULTS	SELECT UP TO 4
UNIT #	NAME: LAS	r, first, middle									DATE OF BIRTH		Ť	AGE	GENDER
															ľ
ADDRESS:	STREET, CITY,	STATE, ZIP							CONT	ACT PHO	ONE - INCLUDE	AREA CODE			L
Ö ————		W						-	<u> </u>					_	
INJURIES OL STATE	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	Taken to: I	MEDICAL FACILITY (NAM	E, CITY)	SAFETY EQUIPMENT USED		T-Complia		AIR BA	G USAGE	EJECTIO	N TRAPPED
OL STATE		LICENSE NUMBER		OFFEN:	SE CHARG	ED	LOCAL	OFFENSE DESCRI				CITA	TION N	UMBER	
TORE							CODE		. ,					DINDLIK	
OL CLASS	ENDORSEME	NT RESTRICTION SELECT UP TO 3	DRI		1	HOL / DRUG SUSI	ECTED	CONDITION	А	LCOHO	L TEST		DRUG	TEST(S)
			DIST	TRACTED		L	ANAUI		STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4
UNIT #	\$100 ET. 1 ACT	r Finer Adopte			Потне	ER DRUG			_				<u> </u>		
ONII #	NAINE: LAS	T, FIRST, MIDDLE								•	DATE OF BIRTH	ı		AGE	GENDER
ADDRESS:	STREET, CITY,	STATE, ZIP							CONT	ACT PHO	ONE - INCLUDE	AREA CODE			<u> </u>
TOR															
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO: 1	MEDICAL FACILITY (NAN	E, CITY)	SAFETY EQUIPMENT	Про	Т-Сомрци	SEATING INT POSITION	AIR BA	G USAGI	EJECTIO	N TRAPPED
ON /	вү 📖								Шм	HELME					
ADDRESS: INJURIES OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHARG	iED	LOCAL	OFFENSE DESCRI	PTION			CITA	TION N	UMBER	
MOM 01 61 184	ENDORSEME		1		T				Δ.	LCOU	N TECT		DDII	- marke to de-	·C\
OL CLASS	ENDORSEME	NT RESTRICTION SELECT UP TO 3		VER IRACTED	1	HOL / DRUG SUSI DHOL MARI	JUANA	CONDITION	ALCOHOL TEST STATUS TYPE VALUE STA		STATUS	TYPE	RESULTS	SELECT UP TO 4	
			BY		ОТНЕ	ER DRUG									
IUII	URIES	SEATING POSITION	79	AIR BA	G	OL CL/	ASS	OL RESTRIC	TION(S) DR	IVER DISTRA	CTION	I	EST ST.	ATUS
1 - FATAL 2 - SUSPECTED	SERIOUS.	(MOTORCYCLE DRIVER)		YED FRON		1 - CLASS A		1 - ALCOHOL INTER DEVICE	LOCK		OT DISTRACTED			NE GIVEN TREFUSED	
INJURY 3 - SUSPECTED		3 - FRONT - RIGHT SIDE	- DEPLO	YED SIDE YED BOTH		2 - CLASS B 3 - CLASS C		2 - CDL INTRASTATI 3 - CORRECTIVE LEA		``C	ECTRONIC OMMUNICATION			T GIVEN, ITAMINAT	ED SAMPLE
INJURY 4 - POSSIBLE IN	Sut to a second	Samo our cre contraction		PPLICABLE		4 - REGULAR CL	ASS	4 - FARM WAIVER 5 - EXCEPT CLASS A		n	EXTING, TYPING, TALLING) ALKING ON HANI	ne ence		IUSABLE I GIVEN,	
5 - NO APPARE	V., .	6 - SECOND - RIGHT SIDE	- DEPLO	YMENT UN	AKNOWN	(OHIO = D) 5 - M/C MOPED	ONLY	6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTO	7 7 43	, c	OMMUNICATION ALKING ON HAN	DEVICE	5 - TES	ULTS KNO T GIVEN,	and the second
INJURIES	TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	: NOTE	JECTIO	N	6 - NO VALID O	L	8 - INTERMEDIATE I		` c	OMMUNICATION THER ACTIVITY V	DEVICE	N 6 1/2 11	ULTS UNK	· · · · · · · · · · · · · · · · · · ·
1 - NOT TRAN	ISPORTED	9 - THIRD - RIGHT SIDE	- Partia	LLY EJECTE Y EJECTEE		OL ENDOR	EMENT	9 - LEARNER'S PERM RESTRICTIONS	AIT	6-P	ECTRONIC DEVIC ASSENGER		1 - NO	VE.	ESTATIVIPE
/TREATED 2 - EMS	AI SCENE	OF TRUCK CAB		PPLICABLE		H - HAZMAT	1.	10 - LIMITED TO DA	YLIGHT	41	THER DISTRACTION IS THE VEHICLE	E	2 - BLO 3 - URI	VE	
3 - POLICE		11 - PASSENGER IN OTHER ENCLOSED CARGO	TON -	RAPPE	D	M - MOTORCYC P - PASSENGER	LE	11 - LIMITED TO EM	er 🤞	‡ 0	THER DISTRACTION UTSIDE THE VEHI	CLE	4 - BRE 5 - OTH	ATH IER	
9 - OTHERY U		BUS, PICK-UP WITH CAP)	- EXTRIC		ANG	N - TANKER	**************************************	13 - MECHANICAL I (SPECIAL BRAKI	S, HAND		THER / UNKNOW		DR 1-NO	UG TES	T TYPE
1 - NONE USE	QUIPMENT	UNENCLOSED CARGO AREA : 13 - TRAILING UNIT	- FREED	BY 💮	AL MEANS	Q - MOTOR SCO R - THREE-WHE	W.	CONTROLS, OR ADAPTIVE DEVI	CES)	7	PPARENTLY NORI HYSICAL IMPAIRN		2 - BLO 3 - URI	OD 😂	
2 - SHOULDER USED	BELT ONLY	14 - RIDING ON VEHICLE EXTERIOR				MOTORCYC S - SCHOOL BU		14 - MILITARY VEHI 15 - MOTOR VEHIC WITHOUT AIR E	LES	∗3 - E	MOTIONAL (E.G., PRESSED, ANGRY,		4 - OTI	IER	
3 - LAP BELT OF 4 - SHOULDER	NLY USED	(NON-TRAIUNG UNIT) 15 - NON-MOTORIST				T - DOUBLE & T	RIPLE	16 - OUTSIDE MIRR 17 - PROSTHETIC A	OR.	DI	STURBED) LNESS		ž.	HETAMIN	RESULT <i>is</i> Es
USED 5 - CHILD REST		99 - OTHER / UNKNOWN				X - TANKER / H.	AZMAT	18 - OTHER		5 - F l	ELL ASLEEP, FAINT ATIGUED, ETC.	red,	2 - BAR	BITURATES ZODIAZEP	
	TRAINT SYSTEM				agranda media	GEND	ER			[6 - U	NOER THE INFLUI			NABINOIC	
- REAR FACT 7 - BOOSTER S	EAT		Š			F - FEMALE			. 19		LCOHOL THER / UNKNOW	N.		TES / OPI	DIDS
8 - HELMET US 9 - PROTECTIVI	É, PADS ÚSED			1	ole.	M - MALE U - OTHER / UN	KNOWN		ve .					ATIVE RES	ULTS
10 - REFLECTIV															
11 - LIGHTING / BICYCLE (ONLY			200				1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	i de						

OHIO TRAFFIC ACCIDENT - OH2 NARRATIVE

LOCAL REPORT NUMBER 19MPD0300	REPORTING AGENCY Millersburg		DATE OF CRASH 02/27/2019	
IN COUNTY OF	ACCIDENT LOCATION			1
Holmes County	Private Property			4
Owner of damaged bank drive	thru -			
Commercial and Savings Bank				
91 South Clay street				
Millersburg, Ohio 44654				
330-674-0829		•		
•				
	V.			
		•		

OFFICERS SIGNATURE	BADGE NO.
	101