



TRAFFIC CRASH REPORT

ACS 11-3-14

LOCAL REPORT NUMBER *	CRASH SEVERITY	HITS/SKIP
14MPD1831	3 1-FATAL 2-INJURY 3-PDO	<input type="checkbox"/> 1-SOLVED <input type="checkbox"/> 2-UNSOLVED

LOCAL INFORMATION		REPORTING AGENCY NCIC *	REPORTING AGENCY NAME *	NUMBER OF UNITS	UNIT IN ERROR
KILLBUCK SAVINGS BANK SOUTH		03801	MILLERSBURG POLICE DEPARTMENT	1	01 98-ANIMAL 99-UNKNOWN

COUNTY *	CITY *	CITY, VILLAGE, TOWNSHIP *	CRASH DATE *	TIME OF CRASH	DAY OF WEEK
38	<input checked="" type="checkbox"/> VILLAGE *	MILLERSBURG	11/1/2014	17:45	SAT

DEGREES / MINUTES / SECONDS		DECIMAL DEGREES	
LATITUDE	LONGITUDE	LATITUDE	LONGITUDE
40320107	-81550705		

ROADWAY DIVISION	DIVIDED LANE DIRECTION OF TRAVEL	NUMBER OF THRU LANES	ROAD TYPES OR MILEPOST ²
<input checked="" type="checkbox"/> UNDIVIDED	<input type="checkbox"/> N-NORTHBOUND <input type="checkbox"/> E-EASTBOUND <input type="checkbox"/> S-SOUTHBOUND <input type="checkbox"/> W-WESTBOUND	2	AL-ALLEY CR-CIRCLE HE-HEIGHTS MP-MILEPOST PL-PLACE ST-STREET WA-WAY AV-AVENUE CT-COURT HW-HIGHWAY PK-PARKWAY RD-ROAD TE-TERRACE BL-BOULEVARD DR-DRIVE LA-LANE PI-PIKE SQ-SQUARE TL-TRAIL

LOCATION ROUTE TYPE ¹	LOCATION ROUTE NUMBER	LOC PREFIX	LOCATION ROAD NAME	LOCATION ROAD TYPE ²	ROUTE TYPES ¹
		S N.S. E.W.	1642 WASHINGTON	ST	IR-INTERSTATE ROUTE (INC. TURNPIKE) CR-NUMBERED COUNTY ROUTE US-US ROUTE TR-NUMBERED TOWNSHIP ROUTE SR-STATE ROUTE

DISTANCE FROM REFERENCE	DIR FROM REF	REFERENCE ROUTE NUMBER	REF PREFIX	REFERENCE NAME (ROAD, MILEPOST, HOUSE #)	REFERENCE ROAD TYPE ¹
	N.S. E.W.		S N.S. E.W.	WASHINGTON ST	

REFERENCE POINT USED	CRASH LOCATION	INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT
3 1-INTERSECTION 2-MILE POST 3-HOUSE NUMBER	01-NOT AN INTERSECTION 02-FOUR-WAY INTERSECTION 03-T-INTERSECTION 04-Y-INTERSECTION 05-TRAFFIC CIRCLE/ROUNDBOUT 06-FIVE-POINT OR MORE 07-ON RAMP 08-OFF RAMP 09-CROSSOVER 10-DRIVEWAY/ALLEY ACCESS	<input type="checkbox"/>	2 1-ON ROADWAY 5-ON GORE 2-ON SHOULDER 6-OUTSIDE TRAFFICWAY 3-IN MEDIAN 9-UNKNOWN 4-ON ROADSIDE

ROAD CONTOUR	ROAD CONDITIONS	WEATHER
2 1-STRAIGHT LEVEL 4-CURVE GRADE 2-STRAIGHT GRADE 9-UNKNOWN 3-CURVE LEVEL	02 PRIMARY SECONDARY 01-DRY 02-WET 03-SNOW 04-ICE 05-SAND, MUD, DIRT, OIL, GRAVEL 06-WATER (STANDING, MOVING) 07-SLUSH 08-DEBRIS*	4 1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL 6-SNOW 7-SEVERE CROSSWINDS 8-BLOWING SAND, SOIL, DIRT, SNOW 9-OTHER/UNKNOWN

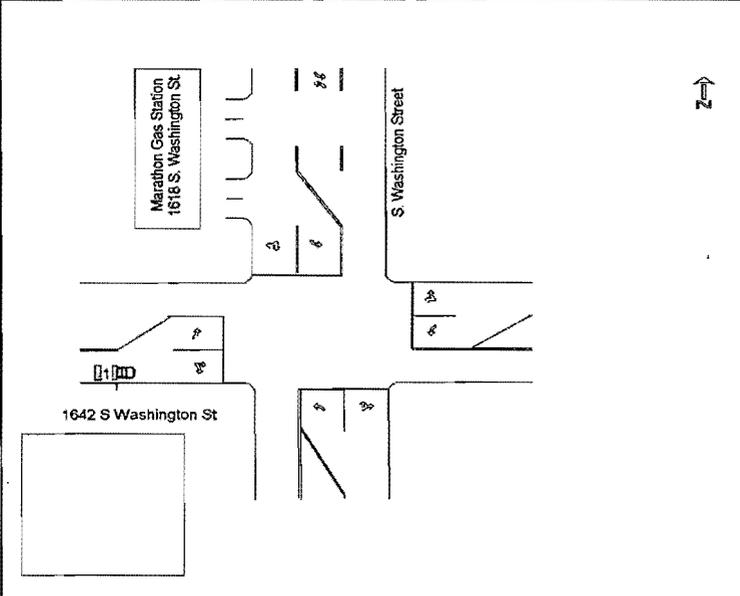
MANNER OF CRASH COLLISION/IMPACT	WEATHER
1 1-NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2-REAR-END 3-HEAD-ON 4-REAR-TO-REAR 5-BACKING 6-ANGLE 7-SIDESWIPE, SAME DIRECTION 8-SIDESWIPE, OPPOSITE DIRECTION 9-UNKNOWN	4 1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL 6-SNOW 7-SEVERE CROSSWINDS 8-BLOWING SAND, SOIL, DIRT, SNOW 9-OTHER/UNKNOWN

ROAD SURFACE	LIGHT CONDITIONS	SCHOOL ZONE RELATED	SCHOOL BUS RELATED
2 1-CONCRETE 4-SLAG, GRAVEL, STONE 2-BLACKTOP, BITUMINOUS, ASPHALT 5-DIRT 3-BRICK/BLOCK 6-OTHER	1 PRIMARY SECONDARY 1-DAYLIGHT 2-DAWN 3-DUSK 4-DARK-LIGHTED ROADWAY 5-DARK-ROADWAY NOT LIGHTED 6-DARK-UNKNOWN ROADWAY LIGHTING 7-GLARE* 8-OTHER	<input type="checkbox"/>	<input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED

WORK ZONE RELATED	TYPE OF WORK ZONE	LOCATION OF CRASH IN WORK ZONE
<input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	1-LANE CLOSURE 2-LANE SHIFT/CROSSOVER 3-WORK ON SHOULDER OR MEDIAN 4-INTERMITTENT OR MOVING WORK 5-OTHER	1-BEFORE THE FIRST WORK ZONE WARNING SIGN 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA

NARRATIVE

Unit #1 was traveling East bound in private drive for Wal-Mart/Killbuck Savings Bank South when the passenger side portion of his truck struck the US Post Office drop box knocking it off its base completely. Unit #1 did not stop and continued to Pizza Hut where the vehicle was located. Driver of Unit #1 advised he heard the noise but just thought it was equipment in his truck shifting and did not notice he had hit the mail box.



REPORT TAKEN BY	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)					
<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST						
DATE CRASH REPORTED	TIME CRASH REPORTED	DISPATCH TIME	ARRIVAL TIME	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
11/1/2014	17:46	17:46	17:52	18:18	20	52
OFFICER'S NAME*	OFFICER'S BADGE NUMBER	CHECKED BY				
PTL. JEFFREY S. LAY	109	100				



UNIT

LOCAL REPORT NUMBER
14MPD1831

UNIT NUMBER: 01, OWNER NAME: HOLMES RENTAL STATION INC, OWNER PHONE NUMBER: (330)852-3600, DAMAGE SCALE: 2, DAMAGE AREA: FRONT, 01-10, 02-10, 03-10, 04-10, 05-10, 06-10, 07-10, 08-10, 09-10

OWNER ADDRESS: 2465 SR 39 SUGARCREEK OH 44681, LP STATE: OH, LICENSE PLATE NUMBER: PUJ7192, VEHICLE IDENTIFICATION NUMBER: 1GBJK39658E134089, OCCUPANTS: 1

VEHICLE YEAR: 2008, VEHICLE MAKE: CHEVROLET, VEHICLE MODEL: OTHER, VEHICLE COLOR: WHITE, POLICY NUMBER: A2H00H00100396408, CARRIER NAME: US DOT, VEHICLE WEIGHT: 1-10K LBS, CARGO BODY TYPE: 01, TRAFFICWAY DESCRIPTION: 1

NON-MOTORIST LOCATION PRIOR TO IMPACT: 7, TYPE OF USE: 1, UNIT TYPE: 07, MED/HEAVY TRUCKS OR COMBD UNITS > 10K LBS, BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER), 21-BUS/VAN (9-15 SEATS, INC DRIVER)

SPECIAL FUNCTION: 01, MOST DAMAGED AREA: 04, IMPACT AREA: 04, ACTION: 3, 1-NON-CONTACT, 2-NON-COLLISION, 3-STRIKING, 4-STRUCK, 5-STRIKING/STRUCK, 9-UNKNOWN

PRE-CRASH ACTION: 01, MOTORIST: 01-STRAIGHT AHEAD, 02-BACKING, 03-CHANGING LANES, 04-OVERTAKING/PASSING, 05-MAKING RIGHT TURN, 06-MAKING LEFT TURN, 07-MAKING U-TURN, 08-ENTERING TRAFFIC LANE, 09-LEAVING TRAFFIC LANE, 10-PARKED, 11-SLOWING OR STOPPED IN TRAFFIC, 12-DRIVERLESS, 13-NEGOTIATING A CURVE, 14-OTHER MOTORIST ACTION, 15-ENTERING OR CROSSING SPECIFIED LOCATION, 16-WALKING, RUNNING, JOGGING, PLAYING, CYCLING, 17-WORKING, 18-PUSHING VEHICLE, 19-APPROACHING OR LEAVING VEHICLE, 20-STANDING, 21-OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCES: PRIMARY: 14, SECONDARY: 01-NONE, 02-FAILURE TO YIELD, 03-RAN RED LIGHT, 04-RAN STOP SIGN, 05-EXCEEDED SPEED LIMIT, 06-UNSAFE SPEED, 07-IMPROPER TURN, 08-LEFT OF CENTER, 09-FOLLOWED TOO CLOSELY/ACDA, 10-IMPROPER LANE CHANGE / PASSING/OFF ROAD, 11-IMPROPER BACKING, 12-IMPROPER START FROM PARKED POSITION, 13-STOPPED OR PARKED ILLEGALLY, 14-OPERATING VEHICLE IN NEGLIGENT MANNER, 15-SWERVING TO AVOID (DUE TO EXTERNAL CONDITION), 16-WRONG SIDE/WRONG WAY, 17-FAILURE TO CONTROL, 18-VISION OBSTRUCTION, 19-OPERATING DEFECTIVE EQUIPMENT, 20-LOAD SHIFTING/FALLING/SPILLING, 21-OTHER IMPROPER ACTION, 22-NONE, 23-IMPROPER CROSSING, 24-DARTING, 25-LYING AND/OR ILLEGALLY IN ROADWAY, 26-FALURE TO YIELD RIGHT OF WAY, 27-NOT VISIBLE (DARK CLOTHING), 28-INATTENTIVE, 29-FAILURE TO OBEY TRAFFIC SIGNS / SIGNALS / OFFICER, 30-WRONG SIDE OF THE ROAD, 31-OTHER NON-MOTORIST ACTION, VEHICLE DEFECTS: 01-TURN SIGNALS, 02-HEAD LAMPS, 03-TAIL LAMPS, 04-BRAKES, 05-STEERING, 06-TIRE BLOWOUT, 07-WORN OR SLICK TIRES, 08-TRAILER EQUIPMENT DEFECTIVE, 09-MOTOR TROUBLE, 10-DISABLED FROM PRIOR ACCIDENT, 11-OTHER DEFECTS

SEQUENCE OF EVENTS: 1-47, 2-01, 3-01, 4-01, 5-01, 6-01, FIRST HARMFUL EVENT: 1, MOST HARMFUL EVENT: 1, NON-COLLISION EVENTS: 01-OVERTURN/ROLLOVER, 02-FIRE/EXPLOSION, 03-IMMERSION, 04-JACKKNIFE, 05-CARGO/EQUIPMENT LOSS OR SHIFT, 06-EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC), 07-SEPARATION OF UNITS, 08-RAN OFF ROAD RIGHT, 09-RAN OFF ROAD LEFT, 10-CROSS MEDIAN, 11-CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL, 12-DOWNHILL RUNAWAY, 13-OTHER NON-COLLISION

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED: 14-PEDESTRIAN, 15-PEDALCYCLE, 16-RAILWAY VEHICLE (TRAIN, ENGINE), 17-ANIMAL - FARM, 18-ANIMAL - DEER, 19-ANIMAL - OTHER, 20-MOTOR VEHICLE IN TRANSPORT, 21-PARKED MOTOR VEHICLE, 22-WORK ZONE MAINTENANCE EQUIPMENT OR ANYTHING SET IN MOTION B OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE, 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE, 24-OTHER MOVABLE OBJECT, 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, BUILDING, TUNNEL, 52-OTHER FIXED OBJECT

UNIT SPEED: 25, POSTED SPEED: 0, TRAFFIC CONTROL: 12, UNIT DIRECTION: FROM 4 TO 3, 1-NORTH, 2-SOUTH, 3-EAST, 4-WEST, 5-NORTHEAST, 6-NORTHWEST, 7-SOUTHEAST, 8-SOUTHWEST, 9-UNKNOWN



MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

14MPD1831

Motorist / Non-Motorist

UNIT NUMBER 01	NAME: LAST, FIRST, MIDDLE Miller, Mervin, A		DATE OF BIRTH 01/28/1987	AGE 27	GENDER M F - FEMALE M - MALE
ADDRESS, CITY, STATE, ZIP 842 Forlow St, Millersburg, OH, 44654				CONTACT PHONE - INCLUDE AREA CODE (330)473-3342	
INJURIES 1	INJURED TAKEN BY 1	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>
SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER SR967511	OL CLASS 4	NO VALID OL <input type="checkbox"/>	MIC END <input checked="" type="checkbox"/>	CONDITION 1
ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST STATUS 1	DRUG TEST TYPE 1
OFFENSE CHARGED <input type="checkbox"/> LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY 1

INJURIES	INJURED TAKEN BY	SAFETY EQUIPMENT USED	99 - UNKNOWN SAFETY EQUIPMENT
1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL	1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT ONLY USED	NON-MOTORIST 05 - CHILD RESTRAINT SYSTEM-FORWARD FACING 06 - CHILD RESTRAINT SYSTEM-REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED 09 - NONE USED 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER

SEATING POSITION	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	12 - PASSENGER IN UNENCLOSED CARGO AREA	AIR BAG USAGE
01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 02 - FRONT - MIDDLE 03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE	08 - THIRD - MIDDLE 09 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF CAB (TRUCK) 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OTHER 99 - UNKNOWN	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN

EJECTION	TRAPPED	OPERATOR LICENSE CLASS	CONDITION	ALCOHOL/DRUG SUSPECTED
1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO IS "D") 5 - MCMOPED ONLY	1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL 7 - OTHER	1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED

ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	DRUG TEST STATUS	DRUG TEST TYPE	DRIVER DISTRACTED BY
1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING / E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION