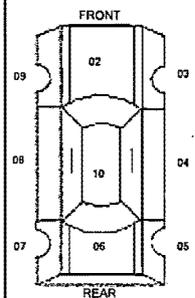


10-26-13 SLS



TRAFFIC CRASH REPORT

LOCAL INFORMATION				LOCAL REPORT NUMBER * 15MPD1863		CRASH SEVERITY 3 1-FATAL 2-INJURY 3-PDO		HITS/KIP 2 1-SOLVED 2-UNSOLVED			
<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER		<input type="checkbox"/> PRIVATE PROPERTY REPORTING AGENCY NCIC * 03801		REPORTING AGENCY NAME * MILLERSBURG POLICE DEPARTMENT			NUMBER OF UNITS 1		UNIT IN ERROR 01 98-ANIMAL 99-UNKNOWN		
COUNTY * 38		<input checked="" type="checkbox"/> CITY * MILLERSBURG		CITY, VILLAGE, TOWNSHIP * MILLERSBURG		CRASH DATE * 10/19/2015		TIME OF CRASH 00:15		DAY OF WEEK MON	
DEGREES / MINUTES / SECONDS LATITUDE 40325863				DECIMAL DEGREES LONGITUDE -81555059							
ROADWAY DIVISION <input type="checkbox"/> DIVIDED <input type="checkbox"/> UNDIVIDED		DIVIDED LANE DIRECTION OF TRAVEL <input type="checkbox"/> N-NORTHBOUND <input type="checkbox"/> E-EASTBOUND <input type="checkbox"/> S-SOUTHBOUND <input type="checkbox"/> W-WESTBOUND		NUMBER OF THRU LANES 2		ROAD TYPES OR MILEPOST 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 SO-SQUARE TL-TRAIL					
LOCATION ROUTE TYPE 1 <input type="checkbox"/>		LOCATION ROUTE NUMBER <input type="checkbox"/>		LOC PREFIX N.S. E.W.		LOCATION ROAD NAME CLAY		ROUTE TYPES ¹ <input checked="" type="checkbox"/> ST LOCATION ROAD TYPE 2 IR-INTERSTATE ROUTE (INC. TURNPIKE) CR-NUMBERED COUNTY ROUTE US-US ROUTE TR-NUMBERED TOWNSHIP ROUTE SR-STATE ROUTE			
DISTANCE FROM REFERENCE POINT MILES FEET YARDS		DIR FROM REF N.S. E.W.		REFERENCE ROUTE TYPE <input type="checkbox"/>		REFERENCE ROUTE NUMBER <input type="checkbox"/>		REFERENCE NAME (ROAD, MILEPOST, HOUSE #) 475 S WASHINGTON		REFERENCE ROAD TYPE <input type="checkbox"/>	
REFERENCE POINT USED 3 1-INTERSECTION 2-MILE POST 3-HOUSE NUMBER		CRASH LOCATION 04 01-NOT AN INTERSECTION 02-FOUR-WAY INTERSECTION 03-T-INTERSECTION 04-Y-INTERSECTION 05-TRAFFIC CIRCLE/ROUNDBOUT		06-FIVE-POINT, OR MORE 07-CN RAMP 08-OFF RAMP 09-CROSSOVER 10-DRIVEWAY/ALLEY ACCESS		11-RAILWAY GRADE CROSSING 12-SHARED-USE PATHS OR TRAILS 99-UNKNOWN		<input type="checkbox"/> INTERSECTION RELATED		LOCATION OF FIRST HARMFUL EVENT 1 1-ON ROADWAY 5-ON GORE 2-ON SHOULDER 6-OUTSIDE TRAFFICWAY 3-IN MEDIAN 9-UNKNOWN 4-ON ROADSIDE	
ROAD CONTOUR 2 1-STRAIGHT LEVEL 4-CURVE GRADE 2-STRAIGHT GRADE 9-UNKNOWN 3-CURVE LEVEL		ROAD CONDITIONS PRIMARY 01 SECONDARY <input type="checkbox"/> 01-DRY 02-WET 03-SNOW 04-ICE 05-SAND, MUD, DIRT, OIL, GRAVEL 06-WATER (STANDING, MOVING) 07-SLUSH 08-DEBRIS *		09-RUT, HOLES, BUMPS, UNEVEN PAVEMENT* 10-OTHER 99-UNKNOWN *SECONDARY CONDITION ONLY							
MANNER OF CRASH COLLISION/IMPACT 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 9-UNKNOWN 8-SIDESWIPE, OPPOSITE DIRECTION				WEATHER 1 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 2 1-CONCRETE 4-SLAG, GRAVEL, STONE 2-BLACKTOP, BITUMINOUS, ASPHALT 5-DIRT 3-BRICK/BLOCK 6-OTHER		LIGHT CONDITIONS 4 PRIMARY <input type="checkbox"/> SECONDARY <input type="checkbox"/> 1-DAYLIGHT 2-DAWN 3-DUSK 4-DARK - LIGHTED ROADWAY 5-DARK - ROADWAY NOT LIGHTED 6-DARK - UNKNOWN ROADWAY LIGHTING 7-GLARE* 8-OTHER *SECONDARY CONDITION ONLY		<input type="checkbox"/> SCHOOL ZONE RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED							
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)		TYPE OF WORK ZONE <input type="checkbox"/> 1-LANE CLOSURE 4-INTERMITTENT OR MOVING WORK <input type="checkbox"/> 2-LANE SHIFT/CROSSOVER 5-OTHER <input type="checkbox"/> 3-WORK ON SHOULDER OR MEDIAN		LOCATION OF CRASH IN WORK ZONE <input type="checkbox"/> 1-BEFORE THE FIRST WORK ZONE WARNING SIGN 4-ACTIVITY AREA <input type="checkbox"/> 2-ADVANCE WARNING AREA 5-TERMINATION AREA <input type="checkbox"/> 3-TRANSITION AREA							
NARRATIVE Unit one was traveling south bound on S. Clay St. when he entered the property of 475 S. Washington St.. The tire marks started at the driveway, and continued through the yard on the east side of the residence and ended at the intersection of S. Clay St. and S. Washington St. where unit one struck a road sign damaging the post.											
REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST		<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)									
DATE CRASH REPORTED 10/19/2015		TIME CRASH REPORTED 00:33		DISPATCH TIME 00:35		ARRIVAL TIME 00:41		TIME CLEARED 00:50		OTHER INVESTIGATION TIME 30	TOTAL MINUTES 45
OFFICER'S NAME* PTL. CARRIE S. ANDREWS					OFFICER'S BADGE NUMBER 125		CHECKED BY 100				

UNIT NUMBER 01		OWNER NAME: LAST, FIRST, MIDDLE <input type="checkbox"/> (SAME AS DRIVER) UNKNOWN		OWNER PHONE NUMBER - INC, AREA C <input type="checkbox"/> (SAME AS DRIVER)		DAMAGE SCALE <input type="checkbox"/> 1 - NONE <input type="checkbox"/> 2 - MINOR <input type="checkbox"/> 3 - FUNCTIONAL <input type="checkbox"/> 4 - DISABLING <input type="checkbox"/> 9 - UNKNOWN		DAMAGE AREA 											
OWNER ADDRESS: CITY, STATE, ZIP <input type="checkbox"/> (SAME AS DRIVER) UNKNOWN UNKNOWN UNKNOWN																			
LP STATE		LICENSE PLATE NUMBER		VEHICLE IDENTIFICATION NUMBER		OCCUPANTS 1													
VEHICLE YEAR 0		VEHICLE MAKE		VEHICLE MODEL		VEHICLE COLOR													
<input type="checkbox"/> PROOF OF INSURANCE SHOWN		INSURANCE COMPANY		POLICY NUMBER		TOWED BY													
CARRIER NAME, ADDRESS, CITY, STATE, ZIP								CARRIER PHONE - INCLUDE AREA CODE											
US DOT		VEHICLE WEIGHT GVWR/GCWR <input type="checkbox"/> 1 - LESS THAN OR EQUAL TO 10K LBS. <input type="checkbox"/> 2 - 10,001 TO 26,000 LBS. <input type="checkbox"/> 3 - MORE THAN 26,000 LBS.		CARGO BODY TYPE 01 01 - NO CARGO BODY TYPE/NOT APPLICABLE 09 - POLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 10 - CARGO TANK 03 - BUS (16+ SEATS, INC DRIVER) 11 - FLAT BED 04 - VEHICLE TOWING ANOTHER VEHICLE 12 - DUMP 05 - LOGGING 13 - CONCRETE MIXER 06 - INTERMODAL CONTAINER CHASSIS 14 - AUTO TRANSPORTER 07 - CARGO VAN/ENCLOSED BOX 15 - GARBAGE/REFUSE 08 - GRAIN, CHIPS, GRAVEL 99 - OTHER/UNKNOWN		TRAFFICWAY DESCRIPTION 1 1 - T WO-WAY, NOT DIVIDED 2 - T WO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - T WO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS >4FT.) MEDIAN 4 - T WO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY <input checked="" type="checkbox"/> HIT / SKIP UNIT													
HM PLACARD ID NO.		<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED		NON-MOTORIST LOCATION PRIOR TO IMPACT <input type="checkbox"/> 01 - INTERSECTION - MARKED CROSSWALK 02 - INTERSECTION - NO CROSSWALK 03 - INTERSECTION OTHER 04 - MIDBLOCK - MARKED CROSSWALK 05 - TRAVEL LANE - OTHER LOCATION 06 - BICYCLE LANE 07 - SHOULDER/ROADSIDE 08 - SIDEWALK 09 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN		TYPE OF USE <input type="checkbox"/> 1 - PERSONAL <input type="checkbox"/> 2 - COMMERCIAL <input type="checkbox"/> 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		UNIT TYPE 99 99 - UNKNOWN OR HIT/SKIP		PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) 01 - SUB-COMPACT 02 - COMPACT 03 - MID SIZE 04 - FULL SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORIZED BICYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE		MEDI/HEAVY TRUCKS OR COMBO UNITS > 10K LBS 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES 14 - SINGLE UNIT TRUCK ; 3+ AXLES 15 - SINGLE UNIT TRUCK / TRAILER 16 - TRUCK/TRACTOR (BOBTAIL) 17 - TRACTOR/SEMI-TRAILER 18 - TRACTOR/DOUBLE 19 - TRACTOR/TRIPLES 20 - OTHER MEDI/HEAVY VEHICLE		BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 21 - BUS/VAN (9-15 SEATS, INC DRIVER) 22 - BUS (16+ SEATS, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, SURREY 25 - BICYCLE/PEDACYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST					
SPECIAL FUNCTION <input type="checkbox"/> 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 10K LBS) 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER		09 - AMBULANCE 10 - FIRE 11 - HIGHWAY/MAINTENANCE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIP.		17 - FARM VEHICLE 18 - FARM EQUIPMENT 19 - MOTOR/HOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)		MOST DAMAGED AREA <input type="checkbox"/> 01 - NONE 02 - CENTER FRONT 03 - RIGHT FRONT 04 - RIGHT SIDE 05 - RIGHT REAR 06 - REAR CENTER 07 - LEFT REAR		08 - LEFT SIDE 09 - LEFT FRONT 10 - TOP AND WINDOWS 11 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL (ALL AREAS) 14 - OTHER		99 - UNKNOWN		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		NON-MOTORIST 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 17		MOTORIST 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		NON-MOTORIST 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		NON-MOTORIST 22 - NONE 23 - IMPROPER CROSSING 24 - DARTING 25 - LYING AND/OR ILLEGALLY IN ROADWAY 26 - FAILURE 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 <input type="checkbox"/> 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 08 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/>		FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1		99 - UNKNOWN		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 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION B OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT		COLLISION WITH FIXED 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 35		POSTED SPEED 35		TRAFFIC CONTROL 01 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE 07 - RAILROAD CROSSBUCKS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS 13 - CROSSWALK LINES 14 - WALK/DONT WALK 15 - OTHER 16 - NOT REPORTED		UNIT DIRECTION FROM 1 TO 2 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN													
<input type="checkbox"/> STATED <input checked="" type="checkbox"/> ESTIMATED																			



MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

15mpd1863

Motorist / Non-Motorist	UNIT NUMBER 01	NAME: LAST, FIRST, MIDDLE unknown, driver,	DATE OF BIRTH	AGE 0	GENDER U F - FEMALE M - MALE	
	ADDRESS, CITY, STATE, ZIP 1 1 1 1			CONTACT PHONE - INCLUDE AREA CODE		
	INJURIES <input type="checkbox"/>	INJURED TAKEN BY 1	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 99	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>
	SEATING POSITION 01	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED 1		
OL STATE	OPERATOR LICENSE NUMBER	OL CLASS <input type="checkbox"/>	NO VALID OL <input type="checkbox"/>	M/C END <input type="checkbox"/>	CONDITION 7	
ALCOHOL/DRUG SUSPECTED 5	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 <input type="checkbox"/>						
INJURIES 1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL		INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN		SAFETY EQUIPMENT USED MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT ONLY USED 99 - UNKNOWN SAFETY EQUIPMENT 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 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 07 - THIRO - LEFT SIDE (MOTORCYCLE SIDE CAR) 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) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OTHER 99 - UNKNOWN			AIR BAG USAGE 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN			
EJECTION 1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	OPERATOR LICENSE CLASS 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO IS "D") 5 - MCMOPED ONLY	CONDITION 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	ALCOHOL/DRUG SUSPECTED 1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED		
ALCOHOL TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	ALCOHOL TEST TYP 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	DRUG TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING / E-MAILING 4 - ELECTRONIC COMMUNICATION DEVIC 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION		