



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER*	CRASH SEVERITY	HIT/SKIP
18 MPD 0637	3 1 - FATAL 2 - INJURY 3 - PDO	<input type="checkbox"/> 1 - SOLVED <input type="checkbox"/> 2 - UNSOLVED

LOCAL INFORMATION 18MPD0637		REPORTING AGENCY NCIC*	REPORTING AGENCY NAME*	NUMBER OF UNITS	UNIT IN ERROR
<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"/> PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	<input type="checkbox"/> PRIVATE PROPERTY	03801	Millersburg Police Department	2
COUNTY*	<input type="checkbox"/> CITY* <input checked="" type="checkbox"/> VILLAGE* <input type="checkbox"/> TOWNSHIP*	CITY, VILLAGE, TOWNSHIP*	CRASH DATE*	TIME OF CRASH	DAY OF WEEK
Holmes	Millersburg	Millersburg	04/18/2018	1707	Wed

DEGREES/MINUTES/SECONDS	LONGITUDE	DECIMAL DEGREES	LONGITUDE
LATITUDE	81:55:02.90	LATITUDE	
40:33:07.50			

ROADWAY DIVISION	DIVIDED LANE DIRECTION OF TRAVEL	NUMBER OF THRU LANES	ROAD TYPES OR MILEPOST
<input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	<input type="checkbox"/> N - NORTHBOUND <input type="checkbox"/> S - SOUTHBOUND <input type="checkbox"/> E - EASTBOUND <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 NUMBER	LOG PREFIX	LOCATION ROAD NAME	LOCATION ROAD TYPE
	S N,S E,W	Clay	ST

DISTANCE FROM REFERENCE	DIR FROM REF	REFERENCE ROUTE	REFERENCE ROUTE NUMBER	REF PREFIX	REFERENCE NAME (ROAD, MILEPOST, HOUSE #)	REFERENCE ROAD TYPE
At	<input type="checkbox"/> MILES <input type="checkbox"/> FEET <input type="checkbox"/> YARDS	<input type="checkbox"/> N,S E,W		S N,S E,W	187	

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

ROAD CONTOUR	ROAD CONDITIONS	WEATHER
<input checked="" type="checkbox"/> 1 - STRAIGHT LEVEL <input type="checkbox"/> 2 - STRAIGHT GRADE <input type="checkbox"/> 3 - CURVE LEVEL <input type="checkbox"/> 4 - CURVE GRADE <input type="checkbox"/> 9 - UNKNOWN	<input checked="" type="checkbox"/> 01 PRIMARY SECONDARY 01 - DRY 02 - WET 03 - SNOW 04 - ICE 05 - SAND, MUD, DIRT, OIL, GRAVEL 06 - WATER (STANDING, MOVING) 07 - SLUSH 08 - DEBRIS*	<input checked="" type="checkbox"/> 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

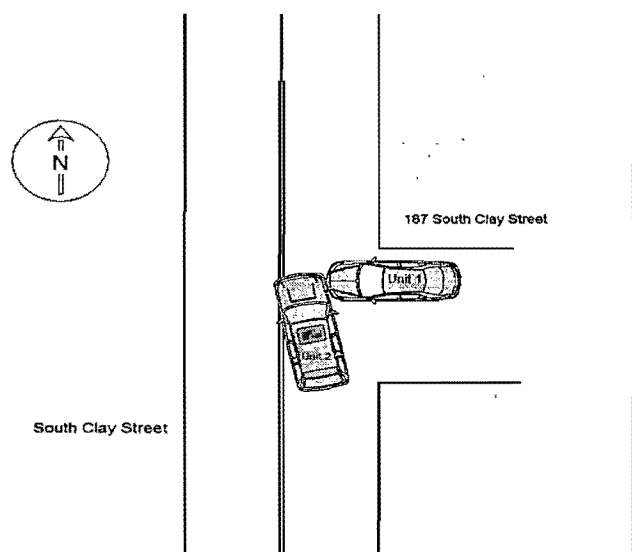
MANNER OF CRASH COLLISION/IMPACT	WEATHER
<input checked="" type="checkbox"/> 6 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, -SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN	<input checked="" type="checkbox"/> 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	LIGHT CONDITIONS	SCHOOL BUS RELATED
<input checked="" type="checkbox"/> 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 6 - OTHER	<input checked="" type="checkbox"/> 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"/> SCHOOL ZONE RELATED <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)	<input type="checkbox"/> 1 - LANE CLOSURE <input type="checkbox"/> 2 - LANE SHIFT/CROSSOVER <input type="checkbox"/> 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	<input type="checkbox"/> 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN <input type="checkbox"/> 2 - ADVANCE WARNING AREA <input type="checkbox"/> 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA

NARRATIVE

Unit 1 was exiting the Lutheran Church parking to go northbound. Unit 1 failed to yield to Unit 2 that was northbound on S. Clay St. Unit 1 stated he did not see you Unit 2.



REPORT TAKEN BY	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)
<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
04/18/2018	1709	1710	1712	1754	45	89

OFFICER'S NAME*	OFFICER'S BADGE NUMBER	CHECKED BY
Markley, Michelle	102	



UNIT

LOCAL REPORT NUMBER

18 MPD 0637

UNIT NUMBER 1	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) Smeby, Eric, D	OWNER PHONE NUMBER 330-231-8342	DAMAGE SCALE 4	DAMAGE AREA FRONT REAR	
OWNER ADDRESS: CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER) 121 S Crawford St, Millersburg, OH, 44654			1 - NONE		
LP STATE OH	LICENSE PLATE NUMBER FES7759	VEHICLE IDENTIFICATION NUMBER 1B3EL46X35N529012	2 - MINOR		
VEHICLE YEAR 2005	VEHICLE MAKE Dodge	VEHICLE MODEL Stratus	3 - FUNCTIONAL		
PROOF OF INSURANCE SHOWN <input checked="" type="checkbox"/>	INSURANCE COMPANY Habrums	POLICY NUMBER 116417800285804406	4 - DISABLING		
CARRIER NAME, ADDRESS, CITY, STATE, ZIP			9 - UNKNOWN		
CARRIER PHONE					
US DOT	VEHICLE WEIGHT GVWR/GCWR <input type="checkbox"/> 1 - LESS THAN OR EQUAL TO 10K LBS <input type="checkbox"/> 2 - 10,001 TO 26,000K LBS <input type="checkbox"/> 3 - MORE THAN 26,000K LBS.	CARGO BODY TYPE 01 01 - NO CARGO BODY TYPE/NOT APPLICABLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VAN/ENCLOSED BOX 08 - GRAIN, CHIPS, GRAVEL	TRAFFICWAY DESCRIPTION 1 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS 4+ FT); MEDIA 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY <input type="checkbox"/> HIT / SKIP UNIT		
HM PLACARD ID NO.	HAZARDOUS MATERIAL <input type="checkbox"/> RELATED	09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE / REFUSE 99 - OTHER/UNKNOWN			
HM CLASS NUMBER					
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 - BI-CYCLE LANE 07 - SHOULDER/ROADSIDE 08 - SIDEWALK 09 - MEDIAN/CROSSING ISLAND 10 - DRIVE WAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN	TYPE OF USE 1 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE 04 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	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 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 MED/HEAVY VEHICLE 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/PEDALCYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST		
SPECIAL FUNCTION 01 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 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)	MOST DAMAGED AREA 02 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	ACTION 3 1 - NON CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
PRE-CRASH ACTIONS 01 MOTORIST 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN 99 - UNKNOWN	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	NON-MOTORIST 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 CIRCUMSTANCE PRIMARY 02 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 99 - UNKNOWN	11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENT MANNER 15 - SWERING TO AVOID (DUE TO EXTERNAL CONDITIONS) 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 20 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	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 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 5 <input checked="" type="checkbox"/> STATED <input type="checkbox"/> ESTIMATED	POSTED SPEED 25	TRAFFIC CONTROL 16 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/DON'T WALK 15 - OTHER 16 - NOT REPORTED	UNIT DIRECTION FROM 3 TO 4 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN		



UNIT

LOCAL REPORT NUMBER

18 MPD 0637

UNIT NUMBER 2	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) Troyer, Cuyler, D	OWNER PHONE NUMBER 330-231-7193	DAMAGE SCALE 4	DAMAGE AREA FRONT REAR
OWNER ADDRESS: CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER) 1817 SR 83, Millersburg, OH, 44654				
LP STATE OH	LICENSE PLATE NUMBER EXL9460	VEHICLE IDENTIFICATION NUMBER 2HKYF18447H519127	# OCCUPANTS 1	
VEHICLE YEAR 2007	VEHICLE MAKE Honda	VEHICLE MODEL Pilot	VEHICLE COLOR MVE	
<input checked="" type="checkbox"/> PROOF OF INSURANCE SHOWN	INSURANCE COMPANY State Farm	POLICY NUMBER 0223464C0435N	TOWED BY Rigz	
CARRIER NAME, ADDRESS, CITY, STATE, ZIP				CARRIER PHONE
US DOT	VEHICLE WEIGHT GVWR/GCWR <input type="checkbox"/> 1 - LESS THAN OR EQUAL TO 10K LBS <input type="checkbox"/> 2 - 10,001 TO 26,000K LBS <input type="checkbox"/> 3 - MORE THAN 26,000K LBS	CARGO BODY TYPE 01 01 - NO CARGO BODY TYPE/NOT APPLICABLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VAN/ENCLOSED BOX 08 - GRAB, CHIPS, GRAVEL	TRAFFICWAY DESCRIPTION 1 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS 4FT.); MEDIA 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY <input type="checkbox"/> HIT / SKIP UNIT	
HM PLACARD ID NO.	HAZARDOUS MATERIAL <input type="checkbox"/> RELATED	09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN		
HM CLASS NUMBER		09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN		
NON-MOTORIST LOCATION PRIOR TO IMPACT <input type="checkbox"/>	TYPE OF USE 1 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE 06 PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 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		
SPECIAL FUNCTION 01	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 EOP.	MOST DAMAGED AREA 03 01 - NONE 02 - CENTER FRONT 03 - RIGHT FRONT 04 - RIGHT SIDE 05 - RIGHT REAR 06 - REAR CENTER 07 - LEFT REAR	ACTION 4 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
PRE-CRASH ACTIONS 01	MOTORIST 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN 99 - UNKNOWN	07 - MAKING U-TURN 08 - ENTERING TRAFFIC LANE 09 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	NON-MOTORIST 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 CIRCUMSTANCE PRIMARY 01	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 11 - PASSING/OFF ROAD	11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENT MANNER 15 - SWERING TO AVOID (DUE TO EXTERNAL CONDITIONS) 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"/>
SEQUENCE OF EVENTS 1 20 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/>	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 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				
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				
COLLISION WITH FIXED OBJECT 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 20	POSTED SPEED 25	TRAFFIC CONTROL 01 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE	UNIT DIRECTION FROM 2 TO 1 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN
<input checked="" type="checkbox"/> STATED <input type="checkbox"/> ESTIMATED		07 - RAILROAD CROSSBUCKS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS	13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED	



MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

18 MPD 0637

UNIT NUMBER 1	NAME: LAST, FIRST, MIDDLE Smeby, Christopher, James	DATE OF BIRTH 06/01/1983	AGE 34	GENDER <input checked="" type="checkbox"/> M F - FEMALE M - MALE																																								
ADDRESS, CITY, STATE, ZIP 121 S. Crawford St, Millersburg, OH, 44654			CONTACT PHONE - INCLUDE AREA CODE 330-231-8342																																									
INJURIES <input checked="" type="checkbox"/>	INJURED TAKEN BY <input checked="" type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04																																								
DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION 01	AIR BAG USAGE <input checked="" type="checkbox"/>	EJECTION <input checked="" type="checkbox"/>	TRAPPED <input checked="" type="checkbox"/>																																								
OL STATE OH	OPERATOR LICENSE NUMBER RZ321395	OL CLASS 4	No VALID DL <input type="checkbox"/>	M/C END <input 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	OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE) 331.22	OFFENSE DESCRIPTION Right of way on Public Highways	CITATION NUMBER 11DPDDM																																								
HANDS-FREE <input type="checkbox"/>	DRIVER DISTRACTED BY <input checked="" type="checkbox"/>																																											
UNIT NUMBER 2	NAME: LAST, FIRST, MIDDLE Troyer, Vanessa, Troyer	DATE OF BIRTH 11/02/1985	AGE 32	GENDER <input checked="" type="checkbox"/> F F - FEMALE M - MALE																																								
ADDRESS, CITY, STATE, ZIP 1817 SR 83, Millersburg, OH, 44654			CONTACT PHONE - INCLUDE AREA CODE 330-231-7193																																									
INJURIES <input checked="" type="checkbox"/>	INJURED TAKEN BY <input checked="" type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04																																								
DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION 01	AIR BAG USAGE 4	EJECTION <input checked="" type="checkbox"/>	TRAPPED <input checked="" type="checkbox"/>																																								
OL STATE OH	OPERATOR LICENSE NUMBER SU165323	OL CLASS 4	No VALID DL <input type="checkbox"/>	M/C END <input 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	OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER																																								
HANDS-FREE <input type="checkbox"/>	DRIVER DISTRACTED BY <input type="checkbox"/>																																											
<table border="0"> <tr> <td>INJURIES</td> <td>INJURED TAKEN BY</td> <td>SAFETY EQUIPMENT USED</td> <td colspan="2">99 - UNKNOWN SAFETY EQUIPMENT</td> </tr> <tr> <td>1 - NO INJURY / NONE REPORTED</td> <td>1 - NOT TRANSPORTED / TREATED AT SCENE</td> <td>MOTORIST</td> <td colspan="2">NON-MOTORIST</td> </tr> <tr> <td>2 - POSSIBLE</td> <td>2 - EMS</td> <td>01 - NONE USED - VEHICLE OCCUPANT</td> <td>05 - CHILD RESTRAINT SYSTEM-FORWARD FACING</td> <td>09 - NONE USED</td> </tr> <tr> <td>3 - NON-INCAPACITATING</td> <td>3 - POLICE</td> <td>02 - SHOULDER BELT ONLY USED</td> <td>06 - CHILD RESTRAINT SYSTEM-REAR FACING</td> <td>10 - HELMET USED</td> </tr> <tr> <td>4 - INCAPACITATING</td> <td>4 - OTHER</td> <td>03 - LAP BELT ONLY USED</td> <td>07 - BOOSTER SEAT</td> <td>11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)</td> </tr> <tr> <td>5 - FATAL</td> <td>9 - UNKNOWN</td> <td>04 - SHOULDER AND LAP BELT ONLY USED</td> <td>08 - HELMET USED</td> <td>12 - REFLECTIVE COATING</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>13 - LIGHTING</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>14 - OTHER</td> </tr> </table>					INJURIES	INJURED TAKEN BY	SAFETY EQUIPMENT USED	99 - UNKNOWN SAFETY EQUIPMENT		1 - NO INJURY / NONE REPORTED	1 - NOT TRANSPORTED / TREATED AT SCENE	MOTORIST	NON-MOTORIST		2 - POSSIBLE	2 - EMS	01 - NONE USED - VEHICLE OCCUPANT	05 - CHILD RESTRAINT SYSTEM-FORWARD FACING	09 - NONE USED	3 - NON-INCAPACITATING	3 - POLICE	02 - SHOULDER BELT ONLY USED	06 - CHILD RESTRAINT SYSTEM-REAR FACING	10 - HELMET USED	4 - INCAPACITATING	4 - OTHER	03 - LAP BELT ONLY USED	07 - BOOSTER SEAT	11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	5 - FATAL	9 - UNKNOWN	04 - SHOULDER AND LAP BELT ONLY USED	08 - HELMET USED	12 - REFLECTIVE COATING					13 - LIGHTING					14 - OTHER
INJURIES	INJURED TAKEN BY	SAFETY EQUIPMENT USED	99 - UNKNOWN SAFETY EQUIPMENT																																									
1 - NO INJURY / NONE REPORTED	1 - NOT TRANSPORTED / TREATED AT SCENE	MOTORIST	NON-MOTORIST																																									
2 - POSSIBLE	2 - EMS	01 - NONE USED - VEHICLE OCCUPANT	05 - CHILD RESTRAINT SYSTEM-FORWARD FACING	09 - NONE USED																																								
3 - NON-INCAPACITATING	3 - POLICE	02 - SHOULDER BELT ONLY USED	06 - CHILD RESTRAINT SYSTEM-REAR FACING	10 - HELMET USED																																								
4 - INCAPACITATING	4 - OTHER	03 - LAP BELT ONLY USED	07 - BOOSTER SEAT	11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)																																								
5 - FATAL	9 - UNKNOWN	04 - SHOULDER AND LAP BELT ONLY USED	08 - HELMET USED	12 - REFLECTIVE COATING																																								
				13 - LIGHTING																																								
				14 - OTHER																																								
<table border="0"> <tr> <td>SEATING POSITION</td> <td colspan="2">AIR BAG USAGE</td> <td colspan="2"></td> </tr> <tr> <td>01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)</td> <td>07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)</td> <td>12 - PASSENGER IN UNENCLOSED CARGO AREA</td> <td colspan="2">1 - NOT DEPLOYED</td> </tr> <tr> <td>02 - FRONT - MIDDLE</td> <td>08 - THIRD - MIDDLE</td> <td>13 - TRAILING UNIT</td> <td colspan="2">2 - DEPLOYED FRONT</td> </tr> <tr> <td>03 - FRONT - RIGHT SIDE</td> <td>09 - THIRD - RIGHT SIDE</td> <td>14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)</td> <td colspan="2">3 - DEPLOYED SIDE</td> </tr> <tr> <td>04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)</td> <td>10 - SLEEPER SECTION OF CAB (TRUCK)</td> <td>15 - NON-MOTORIST</td> <td colspan="2">4 - DEPLOYED BOTH FRONT/SIDE</td> </tr> <tr> <td>05 - SECOND - MIDDLE</td> <td>11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICKUP WITH CAP)</td> <td>16 - OTHER</td> <td colspan="2">5 - NOT APPLICABLE</td> </tr> <tr> <td>06 - SECOND - RIGHT SIDE</td> <td></td> <td>99 - UNKNOWN</td> <td colspan="2">9 - DEPLOYMENT UNKNOWN</td> </tr> </table>					SEATING POSITION	AIR BAG USAGE				01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	12 - PASSENGER IN UNENCLOSED CARGO AREA	1 - NOT DEPLOYED		02 - FRONT - MIDDLE	08 - THIRD - MIDDLE	13 - TRAILING UNIT	2 - DEPLOYED FRONT		03 - FRONT - RIGHT SIDE	09 - THIRD - RIGHT SIDE	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	3 - DEPLOYED SIDE		04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	10 - SLEEPER SECTION OF CAB (TRUCK)	15 - NON-MOTORIST	4 - DEPLOYED BOTH FRONT/SIDE		05 - SECOND - MIDDLE	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICKUP WITH CAP)	16 - OTHER	5 - NOT APPLICABLE		06 - SECOND - RIGHT SIDE		99 - UNKNOWN	9 - DEPLOYMENT UNKNOWN						
SEATING POSITION	AIR BAG USAGE																																											
01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	12 - PASSENGER IN UNENCLOSED CARGO AREA	1 - NOT DEPLOYED																																									
02 - FRONT - MIDDLE	08 - THIRD - MIDDLE	13 - TRAILING UNIT	2 - DEPLOYED FRONT																																									
03 - FRONT - RIGHT SIDE	09 - THIRD - RIGHT SIDE	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	3 - DEPLOYED SIDE																																									
04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	10 - SLEEPER SECTION OF CAB (TRUCK)	15 - NON-MOTORIST	4 - DEPLOYED BOTH FRONT/SIDE																																									
05 - SECOND - MIDDLE	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICKUP WITH CAP)	16 - OTHER	5 - NOT APPLICABLE																																									
06 - SECOND - RIGHT SIDE		99 - UNKNOWN	9 - DEPLOYMENT UNKNOWN																																									
<table border="0"> <tr> <td>EJECTION</td> <td>TRAPPED</td> <td>OPERATOR LICENSE CLASS</td> <td>CONDITION</td> <td>ALCOHOL/DRUG SUSPECTED</td> </tr> <tr> <td>1 - NOT EJECTED</td> <td>1 - NOT TRAPPED</td> <td>1 - CLASS A</td> <td>1 - APPARENTLY NORMAL</td> <td>1 - NONE</td> </tr> <tr> <td>2 - TOTALLY EJECTED</td> <td>2 - EXTRICATED BY MECHANICAL MEANS</td> <td>2 - CLASS B</td> <td>2 - PHYSICAL IMPAIRMENT</td> <td>2 - YES - ALCOHOL SUSPECTED</td> </tr> <tr> <td>3 - PARTIALLY EJECTED</td> <td>3 - EXTRICATED BY NON-MECHANICAL MEANS</td> <td>3 - CLASS C</td> <td>3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED)</td> <td>3 - YES - HBD NOT IMPAIRED</td> </tr> <tr> <td>4 - NOT APPLICABLE</td> <td></td> <td>4 - REGULAR CLASS (ORIG. 'D')</td> <td>4 - ILLNESS</td> <td>4 - YES - DRUGS SUSPECTED</td> </tr> <tr> <td></td> <td></td> <td>5 - MC/MOPED ONLY</td> <td></td> <td>5 - YES - ALCOHOL AND DRUGS SUSPECTED</td> </tr> </table>					EJECTION	TRAPPED	OPERATOR LICENSE CLASS	CONDITION	ALCOHOL/DRUG SUSPECTED	1 - NOT EJECTED	1 - NOT TRAPPED	1 - CLASS A	1 - APPARENTLY NORMAL	1 - NONE	2 - TOTALLY EJECTED	2 - EXTRICATED BY MECHANICAL MEANS	2 - CLASS B	2 - PHYSICAL IMPAIRMENT	2 - YES - ALCOHOL SUSPECTED	3 - PARTIALLY EJECTED	3 - EXTRICATED BY NON-MECHANICAL MEANS	3 - CLASS C	3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED)	3 - YES - HBD NOT IMPAIRED	4 - NOT APPLICABLE		4 - REGULAR CLASS (ORIG. 'D')	4 - ILLNESS	4 - YES - DRUGS SUSPECTED			5 - MC/MOPED ONLY		5 - YES - ALCOHOL AND DRUGS SUSPECTED										
EJECTION	TRAPPED	OPERATOR LICENSE CLASS	CONDITION	ALCOHOL/DRUG SUSPECTED																																								
1 - NOT EJECTED	1 - NOT TRAPPED	1 - CLASS A	1 - APPARENTLY NORMAL	1 - NONE																																								
2 - TOTALLY EJECTED	2 - EXTRICATED BY MECHANICAL MEANS	2 - CLASS B	2 - PHYSICAL IMPAIRMENT	2 - YES - ALCOHOL SUSPECTED																																								
3 - PARTIALLY EJECTED	3 - EXTRICATED BY NON-MECHANICAL MEANS	3 - CLASS C	3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED)	3 - YES - HBD NOT IMPAIRED																																								
4 - NOT APPLICABLE		4 - REGULAR CLASS (ORIG. 'D')	4 - ILLNESS	4 - YES - DRUGS SUSPECTED																																								
		5 - MC/MOPED ONLY		5 - YES - ALCOHOL AND DRUGS SUSPECTED																																								
<table border="0"> <tr> <td>ALCOHOL TEST STATUS</td> <td>ALCOHOL TEST TYPE</td> <td>DRUG TEST STATUS</td> <td>DRUG TEST TYPE</td> <td>DRIVER DISTRACTED BY</td> </tr> <tr> <td>1 - NONE GIVEN</td> <td>1 - NONE</td> <td>1 - NONE GIVEN</td> <td>1 - NONE</td> <td>1 - NO DISTRACTION REPORTED</td> </tr> <tr> <td>2 - TEST REFUSED</td> <td>2 - BLOOD</td> <td>2 - TEST REFUSED</td> <td>2 - BLOOD</td> <td>2 - PHONE</td> </tr> <tr> <td>3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE</td> <td>3 - URINE</td> <td>3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE</td> <td>3 - URINE</td> <td>3 - TEXTING/EMAILING</td> </tr> <tr> <td>4 - TEST GIVEN, RESULTS KNOWN</td> <td>4 - BREATH</td> <td>4 - TEST GIVEN, RESULTS KNOWN</td> <td>4 - OTHER</td> <td>4 - ELECTRONIC COMMUNICATION DEVICE</td> </tr> <tr> <td>5 - TEST GIVEN, RESULTS UNKNOWN</td> <td>5 - OTHER</td> <td>5 - TEST GIVEN, RESULTS UNKNOWN</td> <td></td> <td>5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD)</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>6 - OTHER INSIDE THE VEHICLE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>7 - EXTERNAL DISTRACTION</td> </tr> </table>					ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	DRUG TEST STATUS	DRUG TEST TYPE	DRIVER DISTRACTED BY	1 - NONE GIVEN	1 - NONE	1 - NONE GIVEN	1 - NONE	1 - NO DISTRACTION REPORTED	2 - TEST REFUSED	2 - BLOOD	2 - TEST REFUSED	2 - BLOOD	2 - PHONE	3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE	3 - URINE	3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE	3 - URINE	3 - TEXTING/EMAILING	4 - TEST GIVEN, RESULTS KNOWN	4 - BREATH	4 - TEST GIVEN, RESULTS KNOWN	4 - OTHER	4 - ELECTRONIC COMMUNICATION DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN	5 - OTHER	5 - TEST GIVEN, RESULTS UNKNOWN		5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD)					6 - OTHER INSIDE THE VEHICLE					7 - EXTERNAL DISTRACTION
ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	DRUG TEST STATUS	DRUG TEST TYPE	DRIVER DISTRACTED BY																																								
1 - NONE GIVEN	1 - NONE	1 - NONE GIVEN	1 - NONE	1 - NO DISTRACTION REPORTED																																								
2 - TEST REFUSED	2 - BLOOD	2 - TEST REFUSED	2 - BLOOD	2 - PHONE																																								
3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE	3 - URINE	3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE	3 - URINE	3 - TEXTING/EMAILING																																								
4 - TEST GIVEN, RESULTS KNOWN	4 - BREATH	4 - TEST GIVEN, RESULTS KNOWN	4 - OTHER	4 - ELECTRONIC COMMUNICATION DEVICE																																								
5 - TEST GIVEN, RESULTS UNKNOWN	5 - OTHER	5 - TEST GIVEN, RESULTS UNKNOWN		5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD)																																								
				6 - OTHER INSIDE THE VEHICLE																																								
				7 - EXTERNAL DISTRACTION																																								
UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER																																								
				<input type="checkbox"/> F - FEMALE <input type="checkbox"/> M - MALE																																								
ADDRESS, CITY, STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE																																									
INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED																																								
DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED																																								
UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER																																								
				<input type="checkbox"/> F - FEMALE <input type="checkbox"/> M - MALE																																								
ADDRESS, CITY, STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE																																									
INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED																																								
DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED																																								