OHIO DEPARTMENT OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	TRAFFIC	CRASH	REPORT*DENOTES	S MANDATORY	FIELD FOR SUPPL	EMENT REPORT	ı	OCAL REPORT NU	IMBER*			
PHOTOS TAKEN	OH-2	OH-3	AL INFORMATION									
SECONDARY CRAS	OH-1P	OTHER REPO	ORTING AGENCY NAME*			NCIC*		NUMBER OF UNIT	TS UI	_		
	PRIVATE PRO		Vernon Police Depa	rtment		04201	1 - SOLVED 2 - UNSOLVED		1	99 - UNKNOWN		
	1 - CITY	атіом : СПҮ, VI unt Vernon	LLAGE, TOWNSHIP*				CRASH DATE/ 07/30/2025 12	.40 [_	1 - F	FATAL		
72 3	NUMBER PREFIX 1	- NORTH LOCA	ATION ROAD NAME			ROAD TYPE		5	INITS UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY RELATED N APPROACH NUMBER OF APPROACHES AY MEDIAN TYPE IVIDED FLUSH MEDIAN 4 FEET) IVIDED FLUSH MEDIAN 4 FEET) IVIDED, DEPRESSED MEDIAN IVIDED, DEPRESSED MEDIAN IVIDED, RAISE MEDIAN IVIDED, RAISE MEDIAN IVIDED, THER/UNKNOWN INS SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/			
ОСАТІС	3	- SOUTH - EAST - WEST PAN	NCHO'S TACO'S			AV	40.384101		4 - 1	NJURY POSSIBLE		
B ROUTE TYPE ROUTE	NUMBER PREFIX 1	WLSI	RENCE ROAD NAME (ROA	D, MILEPOST,	HOUSE #)	ROAD TYPE						
REFERE	3	FACT	MOUNT VERNON	AVENUE			-82.481217					
REFERENCE POINT	DIRECTION FROM REFERENCE	E ID INTE	ROUTE TYPE RSTATE ROUTE (TP) AL	- ALLEY	ROAD TYPE HW-HIGHWAY	RD - ROAD	I	INTERSECTION RE				
3 1 - INTERSECTIO 2 - MILE POST 3 - HOUSE #	1 - NOF 2 - SOL 3 - EAS	T US - FEDE	RAL US ROUTE AV E ROUTE BL	- AVENUE - BOULEVARD	LA - LANE MP - MILEPOST	SQ - SQUARE ST - STREET			PPROAC			
DISTANCE	4 - WES	CR - NUME ROUT	CT CT	- CIRCLE - COURT - DRIVE	OV - OVAL PK - PARKWAY PI - PIKE	TE - TERRACE TL - TRAIL WA - WAY	WITHIN INTER			OF APPROACHES		
FROM REFERENCE	UNIT OF MEASUR 1 - MILE	ROUT		- HEIGHTS	PL - PLACE			ROADWAY				
	2 - FEET 3 - YARI						ROADWAY DI	VIDED				
LOCATION 1 - ON ROADW	ON OF FIRST HARN VAY 9 - C	IFUL EVENT ROSSOVER			H COLLISION/IM		DIRECTION OF TRAVE 1 - NORTH	- "				
6 2 - ON SHOUL 3 - IN MEDIAN	11 - R	RIVEWAY/ALLEY AILWAY GRADE	5 _{TW} (O MOTOR 6	5 - BACKING 6 - ANGLE		2 - SOUTH 3 - EAST 4 - WEST	2 - DIVI	DED FLU	JSH MEDIAN		
4 - ON ROADS 5 - ON GORE 6 - OUTSIDE T	12 - S	ROSSING HARED USE PA ^T RAILS	THS OR TRA	NSPORT	7 - SIDESWIPE, S DIRECTION 3 - SIDESWIPE, O		4 - WEST	3 - DIVI	DED, ĎE			
7 - ON RAMP 8 - OFF RAMP	13 - B 14 - T	IKE LANE OLL BOOTH	3 - HEA	AD-ON	DIRECTION O - OTHER/UNKNO					NOWN		
	99 - C	THER/UNKNOW	N									
WORK ZONE RE	LATED		RK ZONE TYPE CLOSURE		ON OF CRASH IN		CONTOUR	CONDITIONS	3	SURFACE		
WORKERS PRES	SENT	2 - LANE	SHFT/CROSSOVER ON SHOULDER	, i	WARNING SIGN ADVANCE WARN		1	1		2		
LAW ENFORCEM	MENT PRESENT	OR ME 4 - INTER WORK	MITTENT OR MOVING	4	TRANSITION ARE ACTIVITY AREA TERMINATION A				YET 2 - BLACKTO NOW BITUMIN			
ACTIVE SCHOOL	L ZONE	5 - OTHE		3-	TERMINATION A	KEA	1 - STRAIGHT LEVEL 2 - STRAIGHT	1 - DRY 2 - WET 3 - SNOW		2 - BLACKTOP,		
LIGHT	T CONDITION			WEATHER			GRADE 3 - CURVE LEVEL	4 - ICE 5 - SAND, MUD, D		ASPHALT 3 - BRICK/BLOCK		
1 - DAYLIGHT 2 - DAWN/DUS	SK		1 - CLEAR 2 - CLOUDY		ERE CROSSWIND		4 - CURVE GRADE 9 - OTHER/ UNKNOWN	OIL, GRAVEL 6 - WATER (STAN MOVING)	DING,	STONE		
4 - DARK - RO	GHTED ROADWAY DADWAY NOT LIGHT IKNOWN ROADWAY	ED L	3 - FOG, SMOG, SMO 4 - RAIN 5 - SLEET, HAIL		ZING RAIN OR F		Onniversi	7 - SLUSH 9 - OTHER/UNKNO		9 - OTHER/		
9 - OTHER/UN	IKNOWN		,		ER/UNKNOWN							
NARRATIVE					DIAGRAM							
Unit 1 was parke			narked parking spac		DIAGRAM							
			parking space, uno Unit 2 in the left fro							R Z		
corner. Unit 1 fle	ed the scene w		rting the collision an					/		Not To Scale Key:		
located the same	e day.								Unit 1	= 2012 Hyundai Sonata		
									Unit 2	2 = 2019 Chevrolet Trax		
									4	= Direction of travel		
										= Building		
					Sun T	Unit 1						
							<u> </u>					
						Pancho's Taco's	Colonial City					
						110 Mount Vernon Avenu Mount Vernon, Ohio 4305	te 110 Mount Verno 50 Mount Vernon, O	in Avenue hio 43050				
CRASH REPORTE	ED DATE/TIME	DISPA	ATCH DATE/TIME	AR	 RRIVAL DATE/TIN	/IE	SCENE CLEARED	D DATE/TIME	REF	PORT TAKEN BY		
07/30/2025 12:1	5 12:29	07/30/202	25 12:31	О	7/30/2025 13:3	5		OLICE AGENCY IOTORIST				
TOTAL TIME ROADWAY CLOSED	TOTAL TIME OTHER TOTAL OFFICER'S NAME*					CHECKED BY C	OFFICER'S NAME*		片			
0	ROADWAY CLOSED INVESTIGATION TIME MINUTES Trowbridge, Justin 0 80 146 OFFICER'S BADGE NUMBER*					CHECKED BY C	Y OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
	292-23									,		

~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	O DEPARTMENT													
OF F	PUBLIC SAFETY	OTORIST / NOI	N-MO	TORIS	ST						OCAL REPO	ORT NUMB	ER*	
UNIT#	NAME. LACT	, FIRST, MIDDLE							M-P250	_	NE BIRTU		AGE	GENDER
1		NEN. WYATT STEV	ENI						06/14/2		JF BIK I FI		18	M
	SS: STREET, CIT	<u> </u>									NCLUDE AREA CO	DDE	10	IVI
₩	·	•	OUNT VI	ERNON,	OH 43050)								
INJURIE 5	S INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAK	EN TO: MEDICAL	FACILITY (NAME,		SAFETY EQUIPMENT USED 4		OMPLIANT	TING POSITION	AIR BAG USA	GE EJECTION 4	TRAPPED 1
	TE OPERATOR L	ICENSE NUMBER		OFFENSE	CHARGED			OFFENSE DESC	CRIPTION			CITATION	N NUMBER	<u> </u>
OL STAT	VM55419	14		MTV 3	31.34			Failure To				MVP4	20125000	003134
OL CLAS	SS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECTION	DIS		_			CONDITION					PE RESUL	T SELECT UP TO 4
4			7 I"				IIVA	9	1	1 .		1	╗╟⊓┎	
UNIT #	NAME: LAST	, FIRST, MIDDLE								DATE C	F BIRTH		AGE	GENDER
ADDRE INJURIE	SS: STREET, CIT	Y, STATE, ZIP							CONTACT	PHONE - I	NCLUDE AREA CO	DDE		•
INJURIE	S INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAK	EN TO: MEDICAL	FACILITY (NAME,	CITY)	SAFETY EQUIPMENT	□ DOT-C		TING POSITION	AIR BAG USA	GE EJECTION	TRAPPED
NNO L	BY							USED						
OL STAT	TE OPERATOR L	ICENSE NUMBER		OFFENSE	CHARGED			OFFENSE DESC	CRIPTION	•		CITATION	NUMBER	
OL CLAS	SS ENDORSEMENT	RESTRICTION SELECTION	T UP TO 3 DRI	VER	ALCOHOL / DI	RUG SUSPECTE	D	CONDITION	ALO	COHOL TES	ST	D	RUG TEST(S	3)
	SELECT UP TO 2		DIS	TRACTED	ALCOHOL			CONDITION	STATUS T	YPE V	/ALUE S	STATUS TY	PE RESUL	T SELECT UP TO 4
					OTHER DR	UG				<u> </u>		<u> </u>	<u> </u>	<u> </u>
UNIT#	NAME: LAST	, FIRST, MIDDLE								DATE C	F BIRTH		AGE	GENDER
ADDRE	SS: STREET, CIT	Y, STATE, ZIP							CONTACT	PHONE - I	NCLUDE AREA CO	DDE	<u> </u>	
O INJURIE	S INJURED	EMS AGENCY (NAME)		IN HIDED TAK	N TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT DOT-COMPLIANT						AIR BAG USA	GE EJECTION	TRAPPED	
INJURIE OL STAT	TAKEN BY	EMO AGENOT (NAME)		INJURED TAK	EN TO: MEDICAL	. PACILITY (NAME,	J,			OMPLIANT				
OL STAT	TE OPERATOR L	ICENSE NUMBER		OFFENSE	SE CHARGED LOCAL OFFENSE DESC				CRIPTION			CITATION	NUMBER	٠
			1		ER LA COULO / DRUG SUSPECTED					OOLIOL TE			RUG TEST(S	
OL CLAS	SS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT						CONDITION						SELECT UP TO 4
					_					_ •				
1 - FATAL	INJURIES	SEATING POSITION 1 - FRONT - LEFT SIDE			1 - CLA	OL CLASS SS A							NONE GIVEN	
2 - SUSPE INJURY	CTED SERIOUS Y	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLO 3 - DEPLO	YED FRONT	2 - CLA 3 - CLA	SS B SS C				2 - MANU AN EL	ALLY OPERA ECTRONIC	TING 2 - 3 -	TEST REFUS TEST GIVEN,	ED
INJURY	ECTED MINOR Y BLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE	FRON	Γ/SIDE	(OH	IO = D)		4 - FARM WAIVE	R	DEVIC	E (TEXTING,		CONTAMINAT SAMPLE / UN TEST GIVEN,	USABLE
	PARENT INJURY	PASSENGER) 5 - SECOND - MIDDLE	9 - DEPLO	DYMENT				6 - EXCEPT CLA	ASS A &	3 - TALKII	NG ON		KNOWN TEST GIVEN,	
INJUR	RED TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE						7 - EXCEPT TRACTOR-TF	RAILER	DEVIC	E		UNKNOWN	
	RANSPORTED / ED AT SCENE	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE		EJECTION	O	LENDORSEMENT		RESTRICTIO	NS	COMM	IUNICATION	-HELD	ALCOHOL TES	ST TYPE
2 - EMS 3 - POLICE		9 - THIRD - RIGHT 10 - SLEEPER SECTION OF	1 - NOT E	JECTED	H - HAZ	MAT		RESTRICTIO 10 - LIMITED TO I	NS	5 - OTHEI AN EL	R ACTIVITY W ECTRONIC D	EVICE 2-	NONE BLOOD	
9 - OTHER	R / UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	3 - TOTAL	LY EJECTED	P - PAS N - TAN	SENGER KER		11 - LIMITED TO	.IT	7 - OTHEI	R DISTRACTION	ON 4-	URINE BREATH OTHER	
		ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP			R - THR	EE-WHEEL		12 - LIMITED - OT	HER	8 - OTHEI	R DISTRACTION	ON	0111211	
1 - NONE		WITH CAP) 12 - PASSENGER IN		TRAPPED	S - SCH	IOOL BUS		(SPECIAL BR HAND CONTI	RAKES, ROLS, OR				DRUG TEST	TVDE
USED	LDER BELT ONLY	UNENCLOSED CARGO AREA 13 - TRAILING UNIT			TRA	ILERS		DEVICES)					NONE BLOOD	1172
	DER & LAP BELT	14 - RIDING ON VEHICLE EXTERIOR	3 - FREED	DRIVER DATE OF BIRTH NUMBED TAKEN TO MEDICAL FACILITY NAME CATTOR STATUS ST					3 -	URINE OTHER				
SYSTE	RESTRAINT M - FORWARD	(NON-TRAILING UNIT) 15 - NON-MOTORIST	MEANS					16 - OUTSIDE MIR	RROR	2 - PHYSI 3 - EMOT	CAL IMPAIRM IONAL (E.G.,	MENT		
	G RESTRAINT M - REAR FACING	99 - OTHER / UNKNOWN							J AID	DISTU	RBED)	RY,	DRUG TEST RE	SULT(S)
7 - BOOST 8 - HELME	TER SEAT									5 - FELL A	ASLEEP, FAIN		AMPHETAMIN BARBITURAT	
USED (ECTIVE PADS (ELBOW, KNEES,									OF ME	DICATIONS /	4 -	BENZODIAZE CANNABINOI	
ETC.) 10 - REFLE 11 - LIGHTI	CTIVE CLOTHING NG -											N 6-	COCAINE OPIATES / OF OTHER	PIOIDS
PEDES ONLY	STRIAN / BICYCLE												NEGATIVE RI	ESULTS
99 - OTHER	R / UNKNOWN													

		HIO D	EPARTMI BLIC SAFI ERVICE - PROTE	ETY C	OCCUPANT / '	WITNES	S ADDENDUM					LOC	OCAL REPORT NUMBER*				
_											M-P2502517						
	UNIT	#	NAM	E: LAS	ST, FIRST, MIDDLE						DAT	E OF E	BIRTH			AGE	GENDER
OCCUPANT	ADDF	RESS	S:STRE	ET, C	TY, STATE, ZIP						CONTACT PHON	E - INCLU	JDE AREA	CODE			
	INJUR	IES	INJURE TAKEN BY	ED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	_ITY (NAME, CITY)	SAFETY EQUIPMEN USED	NT T	DOT-COMPLIANT MC HELMET	SEATING	POSITION	AIR BAG I	JSAGE	EJECTION	TRAPPED
Ī	UNIT	#	NAM	E: LAS	ST, FIRST, MIDDLE						DAT	E OF E	BIRTH			AGE	GENDER
CCUPANT	ADDF	RESS	S:STRE	ET, C	ITY, STATE, ZIP						CONTACT PHON	E - INCLU	JDE AREA	CODE			
	INJUR	IES	INJURE TAKEN BY		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	_ITY (NAME, CITY)	SAFETY EQUIPMEN USED	NT	DOT-COMPLIANT MC HELMET	SEATING	POSITION	AIR BAG I	JSAGE	EJECTION	TRAPPED
Ī	UNIT	- #	NAM	E: LAS	ST, FIRST, MIDDLE						DAT	E OF E	BIRTH			AGE	GENDER
CUPANT	ADDF	RESS	S:STRE	ET, C	ITY, STATE, ZIP						CONTACT PHON	E - INCLU	IDE AREA	CODE			
00	INJUR	IES	INJURE TAKEN BY	ED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	_ITY (NAME, CITY)	SAFETY EQUIPMEN USED	NT T	DOT-COMPLIANT MC HELMET	SEATING	POSITION	I AIR BAG I	JSAGE	EJECTION	TRAPPED
	UNIT	_ <u>_</u> `#	NAM	E: LAS	L BT, FIRST, MIDDLE					<u> </u>	DAT	E OF E	OF BIRTH AGE G				
CCUPANT	ADDF	RESS	S:STRE	ET, C	ITY, STATE, ZIP						CONTACT PHON	E - INCLU	JDE AREA	CODE			
0	INJUR	IES	INJURE TAKEN BY		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMEN USED	NT T	DOT-COMPLIANT MC HELMET	SEATING	POSITION	AIR BAG I	JSAGE	EJECTION	TRAPPED
Ī				INJ	URY	SAFE	TY EQUIPMENT USED		SEATIN	IG POS	TION			AIR BA	G US	AGE	
	3 - S 4 - P 5 - N	SUSP SUSP OSS IO AF	PECTED PECTED SIBLE IN PPAREI	MINC JURY NT IN.		3 - LAP BELT C 4 - SHOULDER 5 - CHILD RES FORWARD	CCUPANT BELT ONLY USED ONLY USED BALAP BELT USED TRAINT SYSTEM - FACING TRAINT SYSTEM -	2 - FRONT 3 - FRONT 4 - SECON (MOTO) 5 - SECON 6 - SECON 7 - THIRD (MOTO) 8 - THIRD 9 - THIRD 10 - SLEEP 11 - PASSE	RCYCLE DE - MIDDLE - RIGHT SE RCYCLE FOR SERVICE SE - MIDDLE SE RCYCLE SE - RIGHT - RI	DRIVER; SIDE SIDE PASSEN LE I SIDE DE SIDE CA ON OF TOTHER	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE CAR) 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN F TRUCK CAB R ENCLOSED CARGO						
	3 - P	OLIC	R / UNI		/N IDER	7 - BOOSTER S 8 - HELMET US 9 - PROTECTIN (ELBOW, KI 10 - REFLECTIV	SED /E PADS USED NEES, ETC.)	WITH C 12 - PASSE CARGO 13 - TRAILIN 14 - RIDING	AP) NGER IN L AREA NG UNIT ON VEHIC RAILING L OTORIST	UNENCI CLE EX UNIT)		2 - F 3 - T	PARTIA	LLY EJECT Y EJECTE PLICABLE	D		
	M - MALE U - OTHER / UNKNOWN 11 - LIGHTING - PEDESTRIAN						ONLY					2 - E N 3 - F	EXTRIC MEANS FREED MEANS	APPED ATED BY M BY NON-M	ИЕСН	ANICAL .NICAL	
S												E OF E	BIRTH		,		GENDER
VITNES					ONTANA ITY, STATE, ZIP						05/22/1999 CONTACT PHON	E - INCLU	JDE AREA	CODE	12	<u> </u>	М
>						S, FREDERIG	CKTOWN, OH 43019										
ESS			ST, FIR				,				DAT	E OF E	BIRTH			AGE	GENDER
NLIW	ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHON	E - INCLU	JDE AREA	CODE	•		
ESS	NAME	AME: LAST, FIRST, MIDDLE									DAT	E OF E	EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS OF BIRTH AGE 26 NCLUDE AREA CODE OF BIRTH AGE OF BIRTH AGE OF BIRTH AGE			GENDER	
WIIN	ADDF	RESS	S:STRE	ET, C	ITY, STATE, ZIP				CONTACT PHON	E - INCLU	JDE AREA	CODE			•		

OHIO DEPARTMI OF PUBLIC SAFI SAFETY - SERVICE - PROTE	TRAFFIC	CRASH	REPORT*DENOTES	S MANDATORY FIELD FOR SUPPI	LEMENT REPORT	L	OCAL REPORT NUM	BER*						
PHOTOS TAKEN	OH-2	OH-3	AL INFORMATION			M-P2502551								
	OH-1P	OTHER REPO	ORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	l ——						
SECONDARY CR	PRIVATE PR		Vernon Police Depa	artment	04201	1 - SOLVED 2 - UNSOLVED CRASH DATE/		98 - ANIMAL 99 - UNKNOWN						
42 1	1 - CITY 2 - VILLAGE MO	unt Vernon				08/01/2025 08	.46	1 - FATAL 2 - SERIOUS INJURY						
	TE NUMBER PREFIX 1	- NORTH LOCA	ATION ROAD NAME		ROAD TYPE		5	SUSPECTED 3 - MINOR INJURY						
OCATION.	3	- SOUTH - EAST - WEST NE\	WARK		RD	40.373561		SUSPECTED 4 - INJURY POSSIBLE						
ROUTE TYPE ROU	TE NUMBER PREFIX 1	- NORTH REFE	RENCE ROAD NAME (ROA	D, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE		5 - PROPERTY DAMAGE ONLY						
E TER	3	- SOUTH - EAST - WEST AMI	ES		ST	-82.482173								
REFERENCE POI		DE F	ROUTE TYPE	ROAD TYPE			INTERSECTION RELA	ATED						
1 - INTERSECT 2 - MILE POST	1 - NOF 2 - SOL	TH US - FEDE	RAL US ROUTE AV	- ALLEY HW - HIGHWAY - AVENUE LA - LANE - BOULEVARD MP - MILEPOST	SQ - SQUARE	WITHIN INTER	SECTION OR ON APP	PROACH						
3 - HOUSE #	3 - EAS 4 - WES		BERED COUNTY CR	- CIRCLE OV - OVAL - COURT PK - PARKWAY	TE - TERRACE TL - TRAIL	WITHIN INTER	CHANGE AREA	MBER OF APPROACHES						
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASUR	TR - NUMI	BERED TOWNSHIP	- DRIVE PI - PIKE - HEIGHTS PL - PLACE	WA - WAY		ROADWAY							
	1 - MILE 2 - FEE ⁻ 3 - YAR	г				ROADWAY DI	VIDED							
	TION OF FIRST HARM			NER OF CRASH COLLISION/IM		DIRECTION OF TRAVEL	-	DIAN TYPE ED FLUSH MEDIAN						
1 - ON ROA 2 - ON SHO 3 - IN MEDI	ULDER 10 - D	CROSSOVER PRIVEWAY/ALLE` RAILWAY GRADE	Y ACCESS 3 BET	T COLLISION 4 - REAR-TO-REA FWEEN 5 - BACKING O MOTOR 6 - ANGLE	AK .	2 - SOUTH 3 - EAST	(< 4 FE							
4 - ON ROA 5 - ON GOR	DSIDE C	ROSSING SHARED USE PA	VEH	HICLES IN 7 - SIDESWIPE, S ANSPORT DIRECTION	SAME	4 - WEST	(>= 4 F							
7 - ON RAM	P 13 - B	RAILS BIKE LANE		AR-END 8 - SIDESWIPE, C AD-ON DIRECTION			(ANY 1							
8 - OFF RAI		OLL BOOTH OTHER/UNKNOW	N	9 - OTHER/UNKN	OWN		9 - OTHE	R/UNKNOWN						
		wo	RK ZONE TYPE	LOCATION OF CRASH IN	I WORK ZONE	CONTOUR	CONDITIONS	SURFACE						
WORK ZONE	RELATED	1 - LANE	CLOSURE	1 - BEFORE THE 1S										
WORKERS PF	RESENT		SHFT/CROSSOVER (ON SHOULDER	2 - ADVANCE WARN	DVANCE WARNING AREA RANSITION AREA CTIVITY AREA									
LAW ENFORC	EMENT PRESENT		MITTENT OR MOVING	4 - ACTIVITY AREA 5 - TERMINATION A		1 - STRAIGHT	3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, 3 - BRICK/BLOC							
ACTIVE SCHO	OOL ZONE	5 - OTHE				LEVEL 2 - STRAIGHT	2 - WET 3 - SNOW							
LIG	HT CONDITION			WEATHER		GRADE 3 - CURVE LEVEL	4 - ICE 5 - SAND, MUD, DIR	BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEI STONE 5 - DIRT 9 - OTHER/						
1 - DAYLIG 2 - DAWN/I	DUSK		1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWINI		4 - CURVE GRADE 9 - OTHER/	6 - WATER (STANDI	ING, STONE						
4 - DARK -	LIGHTED ROADWAY ROADWAY NOT LIGHT	TED L	4 - RAIN	9 - FREEZING RAIN OR F		UNKNOWN	MOVING) 7 - SLUSH 9 - OTHER/UNKNOV	9 - OTHER/						
5 - DARK - 9 - OTHER/	UNKNOWN ROADWAY UNKNOWN	LIGHTING	5 - SLEET, HAIL	DRIZZLE 99- OTHER/UNKNOWN			o omenomino.							
NARRATIVE	t 2 wore travelir	a couthbou	nd on Newark Road	DIAGRAM										
			Ames Street. Unit		ĺ _	_ 11 1		(P						
slow or stop a	nd struck Unit 2	in the rear-	end.			Unit 1		Not To Scale						
					Newark Road →			Key: Unit 1						
							(= 1998 Honda Civic						
					, a	·	Q	= 2015 Chevrolet Equinox						
				Ame Stre	s et	Unit 1		= Direction of travel						
				'		0		= Stop sign						
					₩ 30									
					—									
CRASH REPOR	TED DATE/TIME	nigo	ATCH DATE/TIME	ARRIVAL DATE/TIN	И Б Т	SCENE CLEARED	DATE/TIME I	REPORT TAKEN RV						
08/01/2025 08		08/01/2025		08/01/2025 08:56		8/01/2025 09:35		POLICE AGENCY						
TOTAL TIME	OTHER	TOTAL	OFFICER'S NAME*	00/01/2023 06.36		8/U 1/2025 U9:30 DFFICER'S NAME*	,	MOTORIST						
ROADWAY CLOSED	INVESTIGATION TIME	MINUTES	Trowbridge, Justin	1		IOEN O HAIVIL		SUPPLEMENT (CORRECTION OR						
0	Tiowbildge, Justin					PFFICER'S BADGE NU	MBER*	POLICE AGENCY MOTORIST						

Y8304 OH1 1/19 [760-0820]

OF OF	F PUBLIC SAFETY UNIT					LOC	AL REPORT NUMBER*
	ETY - SERVICE - PROTECTION O 4					M-P2502551	
UNIT #	OWNER NAME: LAST		SAME AS DRIVER)	OWNER PHONE: INCL	LUDE AREA CODE SAME AS DRIVER		DAMAGE
2	ANTILL, JAMES		04445 4.0 DDII/(FD)		DRIVER	1 - NONE	DAMAGE SCALE 3 - FUNCTIONAL DAMAGE
9000 k	ADDRESS: STREET, CIT	Y, STATE, ZIP ([_]: NT VERNON,	OH 43050			2 2 - MINOR DA	
COMME	RCIAL CARRIER: NAME, A	DDRESS, CITY, STA	ATE, ZIP	COMMERICAL CARR	IER PHONE: INCLUDE		9 - UNKNOWN
					AREA CODE		AMAGED AREA(S) CATE ALL THAT APPLY
LP STATE	LICENSE PLATE # KSG3240	2GNFLGEK	HICLE IDENTIFICATION #	VEHICLE Y	EAR VEHICLE MAKE Chevrolet		ONE NEE HINT AT ET
	LINEUDANCE COME		INSURANCE POLICY#	COLOR		11 12	11 12
VERIF	MINCE THE CENEDAL INCH	RANCE	1G-OH8124549	Gold	Equinox	10 11 1	2 10 11 12 2
	TYPE OF USE	IN EMERGENCY	US DOT#	TOWED BY: COM	MPANY NAME	10 2	
СОМ	MERCIAL GOVERNMENT	RESPONSE	VEHICLE WEIGHT GVWR/GCWR	HAZARD	OUS MATERIAL	9 3 4	9 3 4
INTE	ERLOCK ICE HIT/SKIP UN	# OCCUPANTS	1 - <= 10K LBS.	MATERIAL RELEASED	CLASS # PLACARD ID #	8 7 5	4 8 7 5 4
EQU	IIPPED		2 - 10,001 - 26K LBS. 3 - >= 26K LBS.	PLACARD		7 6	12 7 6
	2 - PASSENGER VAN	7 - MOTORCYCLE 2-WHEELED	13 - SNOWMOBILE	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN/ SKATER	10 /	12
3	3 - SPORT UTILITY	8 - MOTORCYCLE 3-WHEELED	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	_	10 2
UNIT TYP	4 - PICK UP 1	9 - AUTOCYCLE 0 - MOPED OR	17 - MOTORHOME	20 - OTHER VEHICLE 21 - HEAVY EQUIPMEN		9	9 3
	5 - CARGO VAN 1	MOTORIZED BICY 1 - ALL TERRAIN		22 - ANIMAL WITH RIDE OR ANIMAL-DRAWN	N 27 - TRAIN	8	7 6 74
0	# OF TRAILING UNITS	VEHICLE (ATV/UT)	V)	VEHICLE	99 - UNKNOWN OR HIT/SKIP	12	7 6 5 12
VEHICLE	WAS VEHICLE OPERATION	C.IN.	0 - NO AUTOMATION	3 - CONDITIONAL	9 - UNKNOWN	11 12	6 11 12
	WAS VEHICLE OPERATIN AUTONOMOUS MODE WHEN CRASH OCCURED	0	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTOMATION		10 11 1	2 10 11 1 2
لگا	1 - YES 2 - NO 9 - OTHER/L	AUTONON	ที่ous	5 - FULL AUTOMATIO		9 9 3	3 9 9 3
	1 - NONE	6 - BUS - CHARTER		16 - FARM	21 - MAIL CARRIER	8 4 7	
1	2 - TAXI 3 - ELECTRONIC RIDE	7 - BUS - INTERCITY 8 - BUS - SHUTTLE	13 - POLICE	17 - MOWING 18 - SNOW REMOVAL	99 - OTHER/UNKNOWN	8 7 6	8 6 6
SPECIAL	SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT	9 - BUS - OTHER 10 - AMBULANCE	14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19 - TOWING 20 - SAFETY SERVICE PATROL		7 6	7 6 5
	/COMMUTER		EQUIPMENT	PAIROL			12 12 12
1	1 - NO CARGO BODY TYPE / NOT	3 - VEHICLE TOWIN		8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12	I I
CARGO	APPLICABLE	VEHICLE 4 - LOGGING	6 - CARGO VAN/	10 - FLAT BED 11 - DUMP	14 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN		
BODY TYPE	2-803	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	III - DOMF	99 - OTTEN ONKNOWN	9 3 9	
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK	9 - MOTOR TROUBLE	99 - OTHER/UNKNOWN	6	
VEHICL	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER	10 - DISABLED FROM PRIOR ACCIDENT			6 6
DEFECT			EQUIPMENT DEFECTIVE			- NO DAMAG	E[0] - UNDERCARRIAGE[14]
	MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE 7 - SHOULDER/	ISLAND	3 12 - FIRST RESPONDER AT INCIDENT SCENE	- TOP [13]	- ALL AREAS [15]
NON-MOTOR LOCATION	IST 2 - INTERSECTION -			11 - SHARED USE PATH	S 99 - OTHER/UNKNOWN IS		
AT IMPACT		- TRAVEL LANE - OTHER LOCATION		OR TRAILS		UN	IIT NOT AT SCENE [16]
		1 - STRAIGHT AHEAD 2 - BACKING	LANE	CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT
4		3 - CHANGING LANE: 4 - OVERTAKING/	S 9 - LEAVING TRAFFIC 14 LANE	- ENTERING OR CROSSING	19 - STANDING 20 - OTHER NON-	0 - NO DAN	IAGE 14 - UNDERCARRIAGE
ACTION				SPECIFIED LOCATION - WALKING, RUNNING,	21 - STANDING OUTSIDE	6 1-12 - REFER DIAGRA	
	& STRUCK ACTIONS 9 - OTHER/UNKNOWN		TRAFFIC 16	JOGGING, PLAYING - WORKING	DISABLED VEHICLE 99 - OTHER/UNKNOWN	13 - TOP	
			12 - DRIVERLESS 17	7 - PUSHING VEHICLE			TRAFFIC
	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER		17 - VISION OBSTRUCTI 18 - OPERATING	ION 21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
1	3 - RAN RED LIGHT 4 - RAN STOP SIGN	CLOSE/ACDA 9 - IMPROPER LANE	POSITION	DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN
CONTRIBUT	5 - UNSAFE SPEED	CHANGE	PARKED ILLEGALLY SING 15 - SWERVING TO	19 - LOAD SHIFTING/ FALLING/SPILLING	INTO ROADWAY 99 - OTHER IMPROPER	2 - TWO-WAY	3 - FLASHER 6 - NO CONTROL
CIRCUMSTAN		11 - DROVE OFF ROA 12 - IMPROPER BACK	AD AVOID : KING 16 - WRONG WAY	20 - IMPROPER CROSSING	ACTION	# OF THROUGH LANES	RAIL GRADE CROSSING
© SEQUEN	CE OF EVENTS					ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING
	1 - OVERTURN/	6 - EQUIPMENT	EVENTS 11 - CROSS CENTERLINE	16 - RAII WAY VEHICLI	F 22 - WORK ZONE	2	1 3 - INVOLVED-PASSIVE CROSSING
1 20	ROLLOVER 2 - FIRE/EXPLOSION	FAILURE 7 - SEPARATION OF	OPPOSITE	17 - ANIMAL - FARM 18 - ANIMAL - DEER	MAINTENANCE EQUIPMENT		
	3 - IMMERSION 4 - JACKKNIFE	UNITS 8 - RAN OFF ROAD	TRAVEL 12 - DOWNHILL RUNAWA	19 - ANIMAL - OTHER	23 - STRUCK BY FALLING, SHIFTING	UNIT / NO	ON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST
2	5 - CARGO/EQUIPMENT LOSS OR SHIFT	RIGHT 9 - RAN OFF ROAD	13 - OTHER NON- LEFT COLLISION	IN TRANSPORT 21 - PARKED MOTOR	CARGO OR ANYTHING SET IN MOTION BY A		2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST
3		10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	VEHICLE	MOTOR VEHICLE 24 - OTHER MOVABLE	FROM 2 TO	4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN
			LISION WITH FIXED OBJECT		OBJECT		
4	ATTENUATOR/		RIER 38 - OVERHEAD SIGN	44 - DITCH	50 - WORK ZONE MAINTENANCE	UNIT SPEED	DETECTED SPEED
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	POST 39 - LIGHT/LUMINARIES	45 - EMBANKMENT 46 - FENCE	EQUIPMENT 51 - WALL	GIAIT SPEED	1 - STATED/ESTIMATED
5	27 - BRIDGE PIER OR	34 - MEDIAN GUARDI BARRIER	40 - UTILITY POLE	47 - MAILBOX 48 - TREE	52 - BUILDING 53 - TUNNEL		SPEED 2 - CALCULATED/EDR
6	28 - BRIDGE PARAPET	35 - MEDIAN CONCR BARRIER	OR SUPPORT	49 - FIRE HYDRANT	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED
	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT		99 - OTHER/UNKNOWN	25	
[1]	FIRST HARMFUL EVEN	т 1 моз	ST HARMFUL EVENT			35	
HSY8304	OH1 1/19 [760-0820]						•

Outo D	EPARTMENT																
OF PUE	BLIC SAFETY NEW PROTECTION	OTORIST / NOI	N-MO	TORIS	ST				M-P25		LOCAL REP	ORT NUMB	ER*				
UNIT#	NAME: LAST	, FIRST, MIDDLE							101-1 23		OF BIRTH		AGE	GENDER			
1		JOSEPH FRANK							08/05/2				18	М			
	S:STREET, CIT										INCLUDE AREA CO	DDE					
404 N (CATHERIN	IE ST, MOUNT VERI	NON, OI	H 43050	0												
INJURIES 5	TAKEN BY	EMS AGENCY(NAME)		INJURED TA	AKEN TO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 4	DOT-C	OMPLIANT	ATING POSITION	AIR BAG USA	ge EJECTION 4	TRAPPED 1			
OL STATE		LICENSE NUMBER			SE CHAR		LOCAL CODE	OFFENSE DESC					NUMBER				
OL STATE	VQ11846 ENDORSEMENT		TURTO 2 I DRI	MTV (333.03	3A HOL/DRUG SUSI	ECTED.			lear Dist соноцте							
	SELECT UP TO 2			TRACTED			RIJUANA	CONDITION	STATUS			STATUS TY					
4					ОТ	THER DRUG				<u>1 .</u>			<u> </u>	<u> </u>			
UNIT #		, FIRST, MIDDLE									OF BIRTH		AGE	GENDER			
2	,	DEBRA M							04/28/				45	F			
≅	S:STREET, CIT IRMONT A	Y, STATE, ZIP AVE, MOUNT VERNO	ом он	43050					CONTAC	I PHONE -	INCLUDE AREA CO	DDE					
107 FA INJURIES	INJURED	EMS AGENCY (NAME)			AKEN TO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY			ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED			
NON 5	TAKEN BY							USED 4	DOT-C	OMPLIANT LMET	1	1	4	1			
	OPERATOR I	LICENSE NUMBER		OFFENS	SE CHAR	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATION	NUMBER	<u> </u>			
OH OH	UT47403	5															
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		HOL / DRUG SUSI		CONDITION		COHOL TE							
			BY	$\lceil 1 \rceil \mid$	=	.COHOL MA THER DRUG	RIJUANA	1		1 .			╗╟╓┎				
UNIT #	NAME: LAST	, FIRST, MIDDLE		<u> </u>						DATE (OF BIRTH	<u> </u>	AGE	GENDER			
ADDRESS	S:STREET, CIT	Y, STATE, ZIP							CONTAC	T PHONE -	INCLUDE AREA CO	DDE	<u> </u>	I .			
INJURIES OL STATE																	
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TA	AKEN TO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		OMPLIANT	ATING POSITION	AIR BAG USA	AGE GENDE 45 F AGE GENDE 45 F AGE GENDE 4 1 ATION NUMBER AGE GENDE ATION NUMBER DRUG TEST(S) S TYPE RESULT SELECT UP TO. TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 5 - TEST				
Ø OL STATE		LICENSE NUMBER		OFFENS	SE CHAR	CED	Lienii	OFFENSE DESC	MC HE	LMET		G POSITION AIR BAG USAGE EJECTION TRA					
STOL STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHAR	KGED	LOCAL	OFFENSE DESC	KIPTION			CITATION	INUMBER				
OL CLASS	ENDORSEMENT	RESTRICTION SELECTION			ALCO	HOL / DRUG SUSI	PECTED	CONDITION		COHOL TE			,	<i>!</i>			
	SELECT UP TO 2		☐ BY DIS	TRACTED	AL	COHOL MA	RIJUANA		STATUS	TYPE	VALUE S	STATUS TY	PE RESUL	T SELECT UP TO 4			
					ОТ	THER DRUG											
1 - FATAL	JRIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT D		_	OL CLASS 1 - CLASS A		1 - ALCOHOL IN		1 - NOT I	ER DISTRACTION	1 -	NONE GIVEN				
2 - SUSPECT INJURY 3 - SUSPECT		(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLO	YED FRON YED SIDE YED BOTH		2 - CLASS B 3 - CLASS C 4 - REGULAR CLA	ee	DEVICE 2 - CDL INTRAS 3 - CORRECTIVI		AN EL	JALLY OPERA LECTRONIC MUNICATION	3 -	TEST GIVEN,				
INJURY 4 - POSSIBLE		4 - SECOND - LEFT SIDE (MOTORCYCLE	FRON	T / SIDE PPLICABLE		(OHIO = D) 5 - M/C MOPED O		4 - FARM WAIVE 5 - EXCEPT CLA	R	DEVI	CE (TEXTING, NG, DIALING)		SAMPLE / UN	USABLE			
	RENT INJURY	PASSENGER) 5 - SECOND - MIDDLE	9 - DEPLO UNKNO	YMENT		6 - NO VALID OL		6 - EXCEPT CLA CLASS B BUS		3 - TALK HAND	ING ON S-FREE	5 -	KNOWN TEST GIVEN,				
INJURED	TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE						7 - EXCEPT TRACTOR-TF 8 - INTERMEDIA		DEVI	MUNICATION CE ING ON HAND		UNKNOWN				
	NSPORTED / AT SCENE	CAR) 8 - THIRD - MIDDLE		EJECTION		OL ENDORSE	MENT	RESTRICTIO 9 - LEARNER'S F	NS		MUNICATION			T TYPE			
2 - EMS 3 - POLICE	INUCALOMAI	9 - THIRD - RIGHT 10 - SLEEPER SECTION OF	1 - NOT E	JECTED ALLY EJEC	TED	H - HAZMAT M - MOTORCYCLE		RESTRICTIO 10 - LIMITED TO I		AN EI	R ACTIVITY V ECTRONIC D	EVICE 2-	BLOOD				
9 - OTHER / L	JINKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO		LY EJECTE PPLICABLE		P - PASSENGER N - TANKER		ONLY 11 - LIMITED TO EMPLOYMEN	IТ		ENGER ER DISTRACTI E THE VEHIC	ON 4-	BREATH				
SAFETY	QUIPMENT	AREA (NON-TRAILING UNIT, BUS, PICK-UP				Q - MOTOR SCOO R - THREE-WHEE MOTORCYCLE	L	12 - LIMITED - OT 13 - MECHANICA	HER	8 - OTHE	R DISTRACTI	ON					
1 - NONE US	ED	WITH CAP) 12 - PASSENGER IN		TRAPPED		S - SCHOOL BUS T - DOUBLE & TR		(SPECIAL BR	ROLS, OR	9 - OTHE	R / UNKNOWI	N	DRUG TEST	TYPE			
USED	ONLY USED	UNENCLOSED CARGO AREA 13 - TRAILING UNIT	1 - NOT T 2 - EXTRI	CATED BY		TRAILERS X - TANKER / HAZ	MAT	OTHER ADAM DEVICES) 14 - MILITARY VE					NONE				
	R & LAP BELT	14 - RIDING ON VEHICLE EXTERIOR	3 - FREED	ANICAL ME. DBY MECHANICA				ONLY 15 - MOTOR VEH			CONDITION RENTLY NOR	3 -	URINE				
	STRAINT FORWARD	(NON-TRAILING UNIT) 15 - NON-MOTORIST	MEANS		\L	GENDER F - FEMALE		WITHOUT AIR	RROR	3 - EMO	ICAL IMPAIRN FIONAL (E.G.,						
FACING 6 - CHILD RE SYSTEM -						M - MALE U - OTHER / UNKN	IOWN	17 - PROSTHETIO	AID		RESSED, ANGI JRBED) ESS	×Υ,	DRUG TEST RE	SULT(S)			
7 - BOOSTER 8 - HELMET U	R SEAT					5 - FELL FATIO	ASLEEP, FAIN BUED, ETC.	2 -	AMPHETAMIN BARBITURAT	ES							
9 - PROTECT USED (EL										6 - UNDE OF M	R THE INFLU	ENCE 3 - 4 -	BENZODIAZE CANNABINOI	PINES			
ETC.) 10 - REFLECT 11 - LIGHTING	IVE CLOTHING										SS / ALCOHOL R / UNKNOWI	N 6-	COCAINE OPIATES / OF OTHER	PIOIDS			
PEDESTR ONLY	IAN / BICYCLE												NEGATIVE RE	ESULTS			
99 - OTHER / L	JNKNOWN																

OHIO DEPARTME OF PUBLIC SAFE SAFETY - SERVICE - PROTEIN	TRAFFIC	CRASH	REPORT*DENOTES	S MANDATORY	FIELD FOR SUPPL	EMENT REPORT	L	OCAL REPORT	NUMBER	*		
PHOTOS TAKEN	OH-2	OH-3	AL INFORMATION				M-P2502573 HIT/SKIP NUMBER OF UNITS UNIT IN ERROR					
	OH-1P	OTHER REPO	ORTING AGENCY NAME*			NCIC*		NUMBER OF U	JNITS			
SECONDARY CR.	PRIVATE PR		Vernon Police Depa	rtment		04201	1 - SOLVED 2 - UNSOLVED CRASH DATE/		CRAS	98 - ANIMAL 99 - UNKNOWN		
42 1	1 - CITY 2 - VILLAGE MO	unt Vernon					08/03/2025 09:		1	- FATAL - SERIOUS INJURY		
	TE NUMBER PREFIX 1	- NORTH LOCA	ATION ROAD NAME			ROAD TYPE		<u> </u>	5	SUSPECTED - MINOR INJURY		
осатіс	3	- SOUTH - EAST CO	SHOCTON			AV	40.402725			SUSPECTED - INJURY POSSIBLE		
B ROUTE TYPE ROUT	E NUMBER PREFIX 1	- NORTH REFE	RENCE ROAD NAME (ROA	D, MILEPOST,	HOUSE #)	ROAD TYPE			5	- PROPERTY DAMAGE ONLY		
ER RE	3	- SOUTH - EAST - WEST UPI	PER GILCHRIST			RD	-82.444364					
REFERENCE POIN	IT DIRECTION		ROUTE TYPE		ROAD TYPE			INTERSECTION	RELATE)		
1 - INTERSECT		RTH IR - INTE	RAL US ROUTE AV	- ALLEY - AVENUE	HW - HIGHWAY LA - LANE	SQ - SQUARE	WITHIN INTER	SECTION OR O	N APPRO	ACH		
1 3 - HOUSE #	3 - EAS	ST SR - STAT	BERED COUNTY CR	- BOULEVARD - CIRCLE - COURT	MP - MILEPOST OV - OVAL PK - PARKWAY	ST - STREET TE - TERRACE TL - TRAIL	WITHIN INTER	CHANGE AREA				
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASUR	THE INCIVIT	BERED TOWNSHIP DR	- DRIVE - HEIGHTS	PI - PIKE PL - PLACE	WA - WAY		ROADW		R OF APPROACHES		
THOM NET ENERGE	1 - MILE 2 - FEE ⁻ 3 - YAR	S ROU	E				ROADWAY DI	VIDED				
	TION OF FIRST HARM	IFUL EVENT			H COLLISION/IM		DIRECTION OF TRAVEL	- I	MEDIAN			
1 - ON ROA 2 - ON SHO 3 - IN MEDIA	ULDER 10 - D	CROSSOVER DRIVEWAY/ALLE' RAILWAY GRADE	Y ACCESS 6 BET	TWEEN 5	: - REAR-TO-REA : - BACKING : - ANGLE	.R	1 - NORTH 2 - SOUTH 3 - EAST		< 4 FEET)	LUSH MEDIAN LUSH MEDIAN		
4 - ON ROA 5 - ON GOR	DSIDE C	CROSSING SHARED USE PA	VEH		' - SIDESWIPE, S DIRECTION	AME	4 - WEST		= 4 FEET			
	TRAFFIC WAY T	RAILS BIKE LANE		AR-END 8	- SIDESWIPE, O DIRECTION	PPOSITE		4 - [RAISE MEDIAN		
8 - OFF RAM		OLL BOOTH OTHER/UNKNOW	N	9	- OTHER/UNKN	NWC		9 - 0	OTHER/UN	IKNOWN		
				_								
WORK ZONE I	RELATED		RK ZONE TYPE CLOSURE		ON OF CRASH IN BEFORE THE 1S		CONTOUR	CONDITIO	ons I	SURFACE		
WORKERS PR	RESENT	2 - LANE	SHFT/CROSSOVER ON SHOULDER	١ ١	WARNING SIGN ADVANCE WARN			1		2		
LAW ENFORC	EMENT PRESENT		MITTENT OR MOVING	4 - 4	TRANSITION ARI ACTIVITY AREA							
ACTIVE SCHO	OOL ZONE	WORF 5 - OTHE		5-	TERMINATION A	REA	1 - STRAIGHT LEVEL	1 - DRY 2 - WET		1 - CONCRETE 2 - BLACKTOP,		
	HT CONDITION	1		WEATHER			2 - STRAIGHT GRADE 3 - CURVE LEVEL	3 - SNOW 4 - ICE 5 - SAND, MUI	DIRT	BITUMINOUS, ASPHALT 3 - BRICK/BLOCK		
1 - DAYLIGI	HT		1 - CLEAR	6 - SNOV		nc	4 - CURVE GRADE 9 - OTHER/	OIL, GRAVI 6 - WATER (ST	ĒĹ Ĺ	4 - SLAG, GRAVEL, STONE		
	JUSK LIGHTED ROADWAY ROADWAY NOT LIGHT	ren [2 - CLOUDY 3 - FOG, SMOG, SMO 4 - RAIN	KE 8 - BLOV	RE CROSSWIND VING SAND, SOIL ZING RAIN OR F	, DIRT, SNOW	UNKNOWN	MOVING) 7 - SLUSH	,,	5 - DIRT 9 - OTHER/		
	UNKNOWN ROADWAY		5 - SLEET, HAIL	DRIZ		NEEZII VO		9 - OTHER/UN	KNOWN	UNKNOWN		
NARRATIVE					DIAGRAM					l		
			on Avenue. Unit 2 w				1	1 /	A			
_	to strike the Ur		when Unit 1 turned	іеπ		Walmart Er	ntrance		<u> </u>			
								Not	To Scale			
						Coshocton	Avenue					
					_				<u> </u>	- 600		
					_			Unit 2 —————U	nit 2 — — —	——Unit 2		
								Ç		- C		
					_	Unit 1	Unit 1					
					_							
					_			Coshoctor	Avenue			
								1				
CRASH REPOR	TED DATE/TIME	DISP	ATCH DATE/TIME	AR	RIVAL DATE/TIN	1E	SCENE CLEARED	DATE/TIME	RI	EPORT TAKEN BY		
08/03/2025 09	:32	5 09:34	08/03/202	25 09:43	lo	8/03/2025 10:37	7		POLICE AGENCY			
TOTAL TIME	OTHER INVESTIGATION TIME	TOTAL	OFFICER'S NAME*		Т	CHECKED BY C	OFFICER'S NAME*		74	MOTORIST		
ROADWAY CLOSED		MINUTES 63	Brookover, Hunter			CHECKED BY C	OFFICER'S BADGE NU	MBER*	\dashv	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING		
	0 0 63 OFFICER'S BADGE NUMBER* 292-3						IOLINO DADGE NO	(CORRECTION OR				

OF OF	F PUBLIC SAFETY UNIT					LOC	AL REPORT NUMBER*
~	0					M-P2502573	
UNIT#	OWNER NAME: LAST, MURNEN, SARA	AH K	<u></u>	OWNER PHONE: INC	LUDE AREA CODE SAME AS DRIVER		DAMAGE DAMAGE SCALE
	ADDRESS: STREET, CITY ACKLAND ST, GA					1 - NONE 2 - MINOR DA	3 - FUNCTIONAL DAMAGE AMAGE 4 - DISABLING DAMAGE
M	RCIAL CARRIER: NAME, A	•		COMMERICAL CARE	RIER PHONE: INCLUDE AREA CODE]	9 - UNKNOWN
I P STATE	LICENSE PLATE #	T VE	HICLE IDENTIFICATION #	VEHICLE Y			AMAGED AREA(S) CATE ALL THAT APPLY
OH	GHN6466	JTMDJREV	'8JD240205	2018	Toyota	12	12
INSUF VERIF	RANCE INSURANCE COMP STATE FARM INSURA		INSURANCE POLICY # 1758933-SFP-35	Silver	R VEHICLE MODEL	10	2 10 11 12 2
	TYPE OF USE	IN EMERGENCY	US DOT#	TOWED BY: CO	MPANY NAME	10 2	10 2
	MERCIAL GOVERNMENT	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR		DOUS MATERIAL CLASS # PLACARD ID #	8 4	
DEV	ERLOCK ICE HIT/SKIP UN IIPPED		1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 ->= 26K LBS.	RELEASED PLACARD		8 7 6 5	4 8 7 6 5 4
1 UNIT TYP	2 - PASSENGER VAN (MINIVAN) 3 3 - SPORT UTILITY PE VEHICLE 9 4 - PICK UP 11 5 - CARGO VAN	7 - MOTORCYCLE 2-WHEELED 3- MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 0 - MOPED OR MOTORIZED BICY 1 - ALL TERRAIN VEHICLE (ATV/UT		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMEN 22 - ANIMAL WITH RIDI OR ANIMAL-DRAW VEHICLE	ER 26 - BICYCLE	10 9 8	11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2 2	WAS VEHICLE OPERATIN AUTONOMOUS MODE WHEN CRASH OCCURED 1 - YES 2 - NO 9 - OTHER/U 1 - NONE 2 - TAXI 2 - TAXI	NKNOWN AUTONOI MODE LE 6 - BUS - CHARTER 7 - BUS - INTERCIT	EVEL Z/TOUR 11 - FIRE Y 12 - MILITARY	0N 4 - HIGH AUTOMATI 5 - FULL AUTOMATI 16 - FARM 17 - MOWING		11 12 1 10 11 1 1 9 9 3 3 8 7 5	6 11 12 1 2 10 11 12 1 3 9 9 3 3 4 8 7 5 4
SPECIAL	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT /COMMUTER		14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL		7 6 5	7 6 5
CARGO BODY TYPE	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWIN ANOTHER MOTO VEHICLE 4 - LOGGING		10 - FLAT BED 11 - DUMP	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN	9 3 5	3 9 3 9
VEHICLI DEFECT		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	6 - NO DAMAGI	6 6 6
	MARKED	- INTERSECTION - OTHER	6 - BICYCLE LANE 7 - SHOULDER/	ISLAND	G 12 - FIRST RESPONDER AT INCIDENT SCENE		- ALL AREAS [15]
NON-MOTOR LOCATION AT IMPACT	IST 2 - INTERSECTION - UNMARKED 5	- MIDBLOCK - MARKED CROSSW - TRAVEL LANE -		10 - DRIVEWAY ACCES 11 - SHARED USE PATH OR TRAILS	S 99 - OTHER/UNKNOWN HS		IIT NOT AT SCENE [16]
		OTHER LOCATION 1 - STRAIGHT AHEAI 2 - BACKING		3 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT
3 ACTION	3 - STRIKING 4 - STRUCK 5 - BOTH	3 - CHANGING LANE 4 - OVERTAKING/ PASSING 5 - MAKING RIGHT T 6 - MAKING LEFT TU	S 9 - LEAVING TRAFFIC 1 LANE 10 - PARKED URN 11 - SLOWING OR 1 IRN STOPPED IN TRAFFIC 1	4 - ENTERING OR CROSSING SPECIFIED LOCATION	19 - STANDING 20 - OTHER NON-	0 - NO DAN 1-12 - REFER DIAGRA 13 - TOP	IAGE 14 - UNDERCARRIAGE TO UNIT 15 - VEHICLE NOT AT SCENE
	4 NONE	7 1 557 05 05175			CON OL LAND IN		TRAFFIC
CONTRIBUT		7 - LEFT OF CENTE 8 - FOLLOWING TO CLOSE/ACDA 9 - IMPROPER LANI CHANGE 10 - IMPROPER PAS 11 - DROVE OFF RO.	O FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY SING 15 - SWERVING TO	17 - VISION OBSTRUCT 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER	ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
(S)			KING 16 - WRONG WAY	CROSSING	511011	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED
	CE OF EVENTS 1 - OVERTURN/	6 - EQUIPMENT	EVENTS 11 - CROSS CENTERLINI			4	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 20	ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	FAILURE 7 - SEPARATION OF UNITS	OPPOSITE F DIRECTION OF TRAVEL	17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER	MAINTENANCE EQUIPMENT 23 - STRUCK BY	UNIT / NO	DN-MOTORIST DIRECTION
2	4 - JACKKNIFE 5 - CARGO/EQUIPMENT	8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWA 13 - OTHER NON-	AY20 - MOTOR VEHICLE IN TRANSPORT	FALLING, SHIFTING CARGO OR ANYTHING	<u> </u>	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST
3	LOSS OR SHIFT	9 - RAN OFF ROAD 10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	21 - PARKED MOTOR VEHICLE	SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 3 то	4 - WEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN
4		31 - GUARDRAIL ENI	LISION WITH FIXED OBJECT D 37 - TRAFFIC SIGN POST RIER 38 - OVERHEAD SIGN		50 - WORK ZONE MAINTENANCE		
	CRASH CUSHION 26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	POST 39 - LIGHT/LUMINARIES	45 - EMBANKMENT 46 - FENCE	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED/ESTIMATED SPEED
5	27 - BRIDGE PIER OR	34 - MEDIAN GUARD BARRIER 35 - MEDIAN CONCR	40 - UTILITY POLE	47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED		SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED
6	28 - BRIDGE PARAPET	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT		OBJECT 99 - OTHER/UNKNOWN	POSTED SPEED	S. S. EL ENWINED
1	FIRST HARMFUL EVEN		ST HARMFUL EVENT			35	
HSY8304	OH1 1/19 [760-0820]						

OHIO D OF PUE SAFETY - SE	DEPARTMENT BLIC SAFETY ERVICE - PROTECTION	OTORIST / NOI	N-MO	TORIS	ST						LOCAL REP	ORT NUMB	ER*	
LINUT #	L NAME, LACT	FIRST MIDDLE							M-P250		OF BIRTH		I ACE	GENDER
UNIT #		, FIRST, MIDDLE							05/06/1		OF BIRTH		AGE 62	F
ADDRESS	S:STREET, CITY	<u>* </u>									- INCLUDE AREA C	ODE	02	
₩	,	RD, NORTH MANKA	ATO, MN	1 56003	}									
INJURIES 5 OL STATE MN	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TA	AKEN TO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 4	DOT-C	OMPLIANT	EATING POSITION	AIR BAG USA	ige Ejection 4	TRAPPED 1
OL STATE		ICENSE NUMBER		OFFENS			LOCAL CODE	OFFENSE DESC				CITATIO	NUMBER	
	H9780996		Inni	MTV 3				Right Of W	,			M-25-2		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		TRACTED		COHOL MA	RIJUANA	CONDITION		YPE			PE RESUL	T SELECT UP TO 4
4	$ \bigcup \bigcup$			1	=	THER DRUG		1		1 .			1 🗆 🛚	
UNIT #	NAME: LAST	, FIRST, MIDDLE		•					•	DATE	OF BIRTH	•	AGE	GENDER
2		N, SARAH K							10/04/1	1962			62	F
ADDRESS	S:STREET, CITY								CONTACT	PHONE -	- INCLUDE AREA C	ODE		
ō		ST, GAMBIER, OH 4	13022	1				In						1
INJURIES 5 SI OL STATE OH	TAKEN BY	EMS AGENCY (NAME)		INJURED TA	KEN TO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 4	DOT-C	OMPLIANT	EATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED 1
Ø OL STATE		ICENSE NUMBER		OFFENS	F CHAR	RGFD	LOCAL	OFFENSE DESC		LIVILI	<u> </u>	<u> </u>	N NUMBER	الا
ОН	RL613986					.022	CODE	0.1.2.102.020						
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	TUP TO 3 DRI		ALCO	HOL / DRUG SUSI	PECTED	CONDITION		COHOL TI			RUG TEST(S	
	SELECT UP TO 2		- BIS	TRACTED	AL	COHOL MA	RIJUANA	1	STATUS 1	1 1 .	VALUE	STATUS T	PE RESUL	T SELECT UP TO 4
				اكا	01	THER DRUG			النال	<u> </u>		النا	<u> </u>	<u> </u>
UNIT #	NAME: LAST	, FIRST, MIDDLE								DATE	OF BIRTH		AGE	GENDER
ADDRESS	S:STREET, CITY	Y, STATE, ZIP							CONTACT	T PHONE -	INCLUDE AREA C	ODE		
INJURIES OL STATE	I			_				T						
INJURIES	TAKEN BY	EMS AGENCY (NAME)		INJURED TA	KEN TO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-C	OMPLIANT	EATING POSITION	AIR BAG USA	IGE EJECTION	TRAPPED
Ø OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHAR	RGED	LOCAL CODE	OFFENSE DESC	CRIPTION CITAT			CITATIO	N NUMBER	
	ENDODOEMENT.	DECEMBER 1	Inni	VED 1	41.00	Hat (BBHa alla			A1	COHOL TI	ECT		RUG TEST(S	21
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DRIV DIST	TRACTED		COHOL MA		CONDITION		YPE				T SELECT UP TO 4
	$ \sqcup \sqcup $			\sqcup		THER DRUG				_ ⋅		$\sqcup \sqcup \sqcup$	[
	JRIES	SEATING POSITION		AIR BAG		OL CLASS 1 - CLASS A		OL RESTRICT			/ER DISTRACTIO		TEST STA	
1 - FATAL 2 - SUSPECT INJURY	ED SERIOUS	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE		YED FRON	IT	2 - CLASS B 3 - CLASS C		1 - ALCOHOL IN DEVICE 2 - CDL INTRAS		2 - MAN	DISTRACTED UALLY OPERA ELECTRONIC	ATING 2 -	NONE GIVEN TEST REFUS TEST GIVEN,	
3 - SUSPECT INJURY		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLO FRONT	YED BOTH		4 - REGULAR CLA (OHIO = D)		3 - CORRECTIVI 4 - FARM WAIVE	E LENSES ER	COM DEV	IMUNICATION ICE (TEXTING,		CONTAMINATION SAMPLE / UN	USABLE
4 - POSSIBLE 5 - NO APPAI	E INJURY RENT INJURY	(MOTORCYCLE PASSENGER)	9 - DEPLO			5 - M/C MOPED O 6 - NO VALID OL	NLY	5 - EXCEPT CLA 6 - EXCEPT CLA	SS A &	3 - TALF	NG, DIALING) (ING ON		TEST GIVEN, KNOWN	
INILIPED	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	UNKNO	JWN				7 - EXCEPT TRACTOR-TE			DS-FREE IMUNICATION ICE	5-	TEST GIVEN, UNKNOWN	RESULIS
1 - NOT TRAI	NSPORTED /	(MOTORCYCLE SIDE CAR)						8 - INTERMEDIA RESTRICTIO	TE LICENSE NS	4 - TALK	KING ON HAND IMUNICATION	D-HELD	ALCOHOL TES	ST TYPE
2 - EMS 3 - POLICE	AT SCENE	8 - THIRD - MIDDLE 9 - THIRD - RIGHT 10 - SLEEPER SECTION OF	1 - NOT E			OL ENDORSEM H - HAZMAT		9 - LEARNER'S F RESTRICTIO 10 - LIMITED TO I	NS		ICE ER ACTIVITY \ ELECTRONIC D		NONE BLOOD	
9 - OTHER / L	UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	3 - TOTAL	ALLY EJECT LY EJECTE PPLICABLE	D	M - MOTORCYCLE P - PASSENGER N - TANKER		ONLY 11 - LIMITED TO	DATEIOITI	6 - PAS	SENGER ER DISTRACT	ION 3 -	URINE BREATH	
		ENCLOSED CARGO AREA (NON-TRAILING	4 - NOT A	FFLICABLE		Q - MOTOR SCOO R - THREE-WHEE		EMPLOYMEN 12 - LIMITED - OT	HER	INSII 8 - OTH	DE THE VEHIC ER DISTRACT	ILE 5 -	OTHER	
	EQUIPMENT	UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN		TRAPPED		MOTORCYCLE S - SCHOOL BUS		13 - MECHANICA (SPECIAL BR HAND CONTI	AKES,		SIDE THE VEH ER / UNKNOW			
1 - NONE US 2 - SHOULDE USED	R BELT ONLY	UNENCLOSED CARGO AREA	1 - NOT TI	RAPPED		T - DOUBLE & TRI TRAILERS X - TANKER / HAZ		OTHER ADAM DEVICES)				1 -	DRUG TEST	TYPE
3 - LAP BELT 4 - SHOULDE	ONLY USED ER & LAP BELT	2 - EXTRIO MECHA 3 - FREED	ANICAL ME	ANS	A - TAINNER / HAZ	IVIA	14 - MILITARÝ VE ONLY			CONDITION	2 - 3 -	BLOOD URINE		
5 - CHILD RE			MECHANICA	\L	GENDER		15 - MOTOR VEH WITHOUT AII 16 - OUTSIDE MIR	R BRAKES	2 - PHY	ARENTLY NOF SICAL IMPAIRI		OTHER		
FACING 6 - CHILD RE	- FORWARD STRAINT			F - FEMALE M - MALE U - OTHER / UNKN	JOWN	17 - PROSTHETIC 18 - OTHER		DEP	TIONAL (E.G., RESSED, ANG 'URBED)	RY,	DRUG TEST RE	ESIII T/S)		
SYSTEM - 7 - BOOSTER	REAR FACING					5 STILK / GINN				4 - ILLN 5 - FELL	ESS . ASLEEP, FAII		AMPHETAMIN	NES
8 - HELMET U 9 - PROTECT	TIVE PADS								6 - UND	GUED, ETC. ER THE INFLU	JENCE 3 -	BARBITURAT BENZODIAZE	PINES	
ETC.)	BOW, KNEES,									DRU	MEDICATIONS GS / ALCOHOI ER / UNKNOW	L 5-	CANNABINOI COCAINE OPIATES / OF	
11 - LIGHTING PEDESTR												7 -	OTHER NEGATIVE RI	
ONLY 99 - OTHER / L	UNKNOWN													

OHIO DEPARTMENT OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	TRAFFIC	CRASH	REPORT*DENOTES	S MANDATORY I	FIELD FOR SUPPL	EMENT REPORT	L	OCAL REPORT NU	JMBER*		
PHOTOS TAKEN			L INFORMATION				M-P2502577	NUMBER OF UNITS UNIT IN ERROR 98 - ANIMAL			
		OTHER REPO	DRTING AGENCY NAME*			NCIC*	HIT/SKIP	NUMBER OF UNI	TS U	_	
SECONDARY CRASH	PRIVATE PRO	PERTY Mt \	/ernon Police Depa	rtment		04201	1 - SOLVED 2 - UNSOLVED	2	1	98 - ANIMAL 99 - UNKNOWN	
COUNTY* LOCALITY*	CITY	ATION: CITY, VI	LLAGE, TOWNSHIP*				CRASH DATE/	гіме*		I SEVERITY FATAL	
1 /2 1 2-1		unt Vernon					08/03/2025 11	:23 5	2 -	SERIOUS INJURY SUSPECTED	
ROUTE TYPE ROUTE NU		NORTH LOCA	ATION ROAD NAME			ROAD TYPE	LATITUDE		J 3−	MINOR INJURY SUSPECTED	
ГОСАТ	3 -	E 4 O E	ANDUSKY			ST	40.405067		4 -	INJURY POSSIBLE PROPERTY	
ROUTE TYPE ROUTE NUI		NORTH REFE	RENCE ROAD NAME (ROA	D, MILEPOST,	HOUSE #)	ROAD TYPE	LONGITUDE			DAMAGE ONLY	
REFER	3 -	EAST WEST 668					-82.492420				
REFERENCE POINT	DIRECTION FROM REFERENCE	F	ROUTE TYPE		ROAD TYPE			INTERSECTION RE	LATED		
1 - INTERSECTION 2 - MILE POST		TH US - INTER	RAL US ROUTE AV	- ALLEY - AVENUE	HW - HIGHWAY LA - LANE	RD - ROAD SQ - SQUARE	WITHIN INTER	SECTION OR ON A	PPROA	СН	
3 - HOUSE #	3 - EAS	T SR - STAT CR - NUME	BERED COUNTY CR	- CIRCLE - COURT	MP - MILEPOST OV - OVAL PK - PARKWAY	TE - TERRACE	WITHIN INTER	CHANGE AREA			
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURI		BERED TOWNSHIP	- DRIVE - HEIGHTS	PI - PIKE PL - PLACE	WA - WAY		ROADWA		OF APPROACHES	
THOM NET EXERTE	1 - MILES 2 - FEET	s Root	E				ROADWAY DI	VIDED			
	3 - YARD	os									
LOCATION 1 - ON ROADWA	N OF FIRST HARM AY 9 - C	FUL EVENT ROSSOVER			H COLLISION/IMI - REAR-TO-REA		DIRECTION OF TRAVEI 1 - NORTH	1	IEDIAN IDED FL	TYPE USH MEDIAN	
6 2 - ON SHOULDE 3 - IN MEDIAN	ER 10 - D	RIVEWAY/ALLEY AILWAY GRADE	ACCESS 7 BET	WEEN 5	- BACKING - ANGLE		2 - SOUTH 3 - EAST		FEET) IDED FL	USH MEDIAN	
4 - ON ROADSID 5 - ON GORE		ROSSING HARED USE PAT		IICLES IN 7 NSPORT	' - SIDESWIPE, S. DIRECTION	AME	4 - WEST	3 - DIVI		EPRESSED MEDIAN	
6 - OUTSIDE TRA 7 - ON RAMP	13 - B	RAILS IKE LANE	2 - REA 3 - HEA	AD-ON	- SIDESWIPE, O DIRECTION			(AN'	Y TYPE)		
8 - OFF RAMP		OLL BOOTH THER/UNKNOW	N	9	- OTHER/UNKNO	OWN		9-016	IER/UNI	KNOWN	
WORK ZONE RELA	ATED		RK ZONE TYPE CLOSURE		ON OF CRASH IN BEFORE THE 1S						
WORKERS PRESE	ENT .	2 - LANE	SHFT/CROSSOVER ON SHOULDER	١	WARNING SIGN ADVANCE WARN			1		2	
LAW ENFORCEMENT	ENT PRESENT		MITTENT OR MOVING	4-7	TRANSITION ARE ACTIVITY AREA		LEVEL 2 - WET 2 - BLACKTOF				
ACTIVE SCHOOL Z	ZONE	WORK 5 - OTHE		5 -	TERMINATION AI	REA				1 - CONCRETE 2 - BLACKTOP,	
							2 - STRAIGHT GRADE	3 - SNOW 4 - ICE		BITUMINOUS, ASPHALT	
1 - DAYLIGHT C	CONDITION		1 - CLEAR	WEATHER 6 - SNOV	V		3 - CURVE LEVEL 5 - SAND, MUD, DIRT, 3 - BRICK/BI 4 - CURVE GRADE 9 - OTHER/ 6 - WATER (STANDING, STONE STONE CONTROL STONE CONTROL STONE CONTROL CO				
2 - DAWN/DUSK 3 - DARK - LIGH	ITED ROADWAY	lΓ	2 - CLOUDY 3 - FOG, SMOG, SMO	KE 8 - BLOV		, DIRT, SNOW	UNKNOWN	MOVING) 7 - SLUSH	IDING,	5 - DIRT 9 - OTHER/	
5 - DARK - UNKN	DWAY NOT LIGHT NOWN ROADWAY		4 - RAIN 5 - SLEET, HAIL	DRIZZ		REEZING		9 - OTHER/UNKN	OWN	UNKNOWN	
9 - OTHER/UNK	NOWN			99- OTHE	ER/UNKNOWN						
NARRATIVE UNIT #1 WAS TR	RAVELING W	EST BOUN	D IN THE PRIVATE	LOT OF	DIAGRAM						
	•	BURRATA	WIIDFIRED PIZZA)						1		
ATTEMPTING TO	J PARK.										
			BOUND IN THE PI		1	1		1	1	port to arrival annual	
LOT OF 668 N SA	ANDUSKY S	TREET (BU	RRATA WIIDFIRE	O PIZZA).	(,		- and B &				
	-	-	URN BESIDE UNIT	#2 SIDE				THE WORLD SHEET			
SWIPING THE FF	RONT LEFT	OF UNIT #2	2.				,	affini 4 hours	\ \ \		
UNIT #1 THEN FL	LED THE SC	ENE.							$\setminus \setminus$		
					Not To	Scale					
					1451 10	23410	_				
								MIL MACHET ANDROLE	•		
CRASH REPORTED	CRASH REPORTED DATE/TIME DISPATCH DATE/TIME						SCENE CLEARED	DATE/TIME	I —	PORT TAKEN BY	
08/03/2025 12:34					25 12:42	o	8/03/2025 12:58	3		POLICE AGENCY	
TOTAL TIME	TOTAL TIME OTHER TOTAL OFFICER'S NAME*					CHECKED BY C	OFFICER'S NAME*		H	MOTORIST	
KOADWAT GEGGED		MINUTES	Guthrie, Alexis	PED*		OUTOVER BY	VELICEBIO DA 202	MDCD*	💳 (CORRECTION OR	
0	30	52	OFFICER'S BADGE NUME 292-29	seK*		CHECKED BY C	OFFICER'S BADGE NU	MRFK.		ADDITION TO AN EXISTING REPORT SENT TO ODPS)	

~ 1 < 0.00	DEPARTMENT											
OF P SAFETY	PUBLIC SAFETY SERVICE - PROTECTION	OTORIST / NOI	N-MO	TORIS	ST			NA DOS		L REPORT NU	IMBER*	
UNIT #	I NAME LACT	, FIRST, MIDDLE					M-P250		DTU	1 405	LOENDED	
			CON					00/00/0		кін		GENDER
1	SS: STREET, CIT	RE, CAMERON CAR	SON							- ADEA CODE	21	IVI
₩	,	T, MOUNT VERNON	, OH 43	050				CONTACT	I PHONE - INCLUD	E AREA CODE		
INJURIES 5	S INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAK	EN TO: MEDICAL F	ACILITY (NAME, CIT	SAFETY EQUIPMENT USED 99		OMPLIANT	7 I C		TRAPPED 1
OL STAT	E OPERATOR L	ICENSE NUMBER		OFFENSE	CHARGED	LOCAL	OFFENSE DES	CRIPTION		CITAT	TION NUMBER	
OL STAT	VB20312	3		4549.0	21A		Accident L	eaving S	cene/Privat	e Pr MVF	P42012500	002921
OL CLAS	SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED	ALCOHOL / DRU		CONDITION			STATUS		
4				9	OTHER DRU	Marijuan. G	9		1 .	1		
UNIT #	NAME: LAST	, FIRST, MIDDLE		<u>— '</u>					DATE OF BI	RTH	AGE	GENDER
ADDRES	SS: STREET, CIT	Y, STATE, ZIP						CONTACT	T PHONE - INCLUD	E AREA CODE	.	
INJURIES	S INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAK	EN TO: MEDICAL F	ACILITY (NAME, CIT	Y) SAFETY EQUIPMENT	DOT-C		OSITION AIR BAG	USAGE EJECTION	TRAPPED
NON/	BY						USED				$ \sqcup $	
OL STAT	E OPERATOR L	ICENSE NUMBER		OFFENSE	CHARGED	LOCAL		CRIPTION	•	CITAT	TION NUMBER	•
OL CLAS		RESTRICTION SELECTION			ALCOHOL / DRU	JG SUSPECTED	CONDITION					
	SELECT UP TO 2		I BY	TRACTED	ALCOHOL	MARIJUAN		STATUS	TYPE VALUE	STATUS	TYPE RESUL	T SELECT UP TO 4
					OTHER DRU	G		<u> </u>	<u> </u>			<u> </u>
UNIT #	NAME: LAST	, FIRST, MIDDLE							DATE OF BI	RTH	AGE	GENDER
ADDRES	SS: STREET, CIT	Y, STATE, ZIP						CONTACT	T PHONE - INCLUD	E AREA CODE	I	ı
INJURIES		EMS AGENCY (NAME)		INJURED TAK	EN TO: MEDICAL F	ACILITY (NAME, CIT	Y) SAFETY			OSITION AIR BAG	USAGE EJECTION	TRAPPED
INJURIES OL STAT	BY						USED] [
OL STAT	E OPERATOR L	ICENSE NUMBER		OFFENSE	OFFENSE CHARGED LOCAL OFFENSE DESC					CITAT	TION NUMBER	
OL CLAS	S ENDORSEMENT	RESTRICTION SELECT	T UP TO 3 DRI	VER I	ALCOHOL / DRU	IG SUSPECTED		AL	COHOL TEST		DRUG TEST(S	3)
	SELECT UP TO 2			TRACTED	ALCOHOL		CONDITION	STATUS T	TYPE VALUE	STATUS		
					OTHER DRU				.			
1 - FATAL	NJURIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT D		1 - CLASS		1 - ALCOHOL II		1 - NOT DISTR	ACTED	1 - NONE GIVEN	
INJURY	CTED SERIOUS CTED MINOR	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLO	YED FRONT YED SIDE YED BOTH	3 - CLASS		DEVICE 2 - CDL INTRAS 3 - CORRECTIV		AN ELECTR	ONIC	3 - TEST GIVEN,	
INJURY		4 - SECOND - LEFT SIDE (MOTORCYCLE	FRONT	F / SIDE PPLICABLE	(OHIO)		4 - FARM WAIV 5 - EXCEPT CL	ER	DEVICE (TE	XTING,	SAMPLE / UN	IUSABLE
	PARENT INJURY	PASSENGER) 5 - SECOND - MIDDLE	9 - DEPLO UNKNO	YMENT	6 - NO VA		6 - EXCEPT CL CLASS B BU	ASS A &	3 - TALKING O	N	KNOWN	
INJURE	ED TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE					7 - EXCEPT TRACTOR-1		DEVICE		UNKNOWN	
	RANSPORTED / ED AT SCENE	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE		EJECTION	OL E	NDORSEMENT	8 - INTERMEDI RESTRICTION 9 - LEARNER'S	ONS	COMMUNIC		ALCOHOL TES	ST TYPE
2 - EMS 3 - POLICE		9 - THIRD - RIGHT 10 - SLEEPER SECTION OF	1 - NOT E		H - HAZM	AT	RESTRICTION 10 - LIMITED TO	ONS	5 - OTHER ACT		1 - NONE 2 - BLOOD	
9 - OTHER	/ UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	3 - TOTAL	LY EJECTED PPLICABLE		ENGER	ONLY 11 - LIMITED TO		7 - OTHER DIS	TRACTION	4 - BREATH	
		ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP			R - THRE		12 - LIMITED - O 13 - MECHANIC	THER	8 - OTHER DIS	TRACTION	5- OTHER	
1 - NONE U	Y EQUIPMENT USED	WITH CAP) 12 - PASSENGER IN		TRAPPED	S - SCHO	RCYCLE OL BUS LE & TRIPLE	(SPECIAL B	RAKES,				
2 - SHOULI USED	DER BELT ONLY	UNENCLOSED CARGO AREA	1 - NOT TI 2 - EXTRIC		TRAIL		OTHER ADA DEVICES)		COMPLIANT TYPE VALUE STATUS TYPE TONNE SAMPLE/VUINSABI ALCOHOL TEST TYPE 1 - NONE SAMPLE/VUINSABI ALCOHOL TEST TYPE 1			
	LT ONLY USED DER & LAP BELT	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR		ANICAL MEAI	NS		14 - MILITARY V ONLY 15 - MOTOR VEI				3 - URINE	
5 - CHILD F	RESTRAINT M - FORWARD	(NON-TRAILING UNIT) 15 - NON-MOTORIST	NON-M MEANS	MECHANICAL S	F - FEMA	GENDER	WITHOUT A	IR BRAKES	2 - PHYSICAL I	MPAIRMENT	4 - OTHER	
FACING 6 - CHILD F	S RESTRAINT	99 - OTHER / UNKNOWN			M - MALE		17 - PROSTHET 18 - OTHER	IC AID	DEPRESSE DISTURBED	D, ANGRY,	DRUG TEST RE	ESULT(S)
7 - BOOSTI									5 - FELL ASLEI		1 - AMPHETAMII	NES
	CTIVE PADS ELBOW, KNEES,								6 - UNDER TH	INFLUENCE	3 - BENZODIAZE	PINES
ETC.) 10 - REFLEC	CTIVE CLOTHING								DRUGS / AL	COHOL	5 - COCAINE 6 - OPIATES / OI	
	NG - TRIAN / BICYCLE											ESULTS
ONLY 99 - OTHER	/ UNKNOWN											