OF PUBLIC SAFETY TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FO	OR SUPPLEMENT REPORT	2023-	OCAL REPORT NUMBE							
PHOTOS TAKEN UN-2 UN-3		NUMBER OF UNITS								
SECONDARY CRASH PRIVATE PROPERTY Heath PD	0 4 5 0 7	HIT/SKIP 1 - SOLVED	UNIT IN ERROR 98 - ANIMAL							
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*		2 - UNSOLVED		99 - UNKNOWN						
4 5 1 2-VILLAGE HEATH	1.0312023.0725.5 1- FATAL									
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH LOCATION ROAD NAME	ROAD TYPE		2 - SERIOUS INJURY LATITUDE DECIMAL DEGREES SUSPECTED							
ROUTE TYPE ROUTE NUMBER PREFIX 1- NORTH 2- SOUTH 2- SOUTH IRVING WICK	,D ,R	40,024	9 4 6	3 - MINOR INJURY SUSPECTED						
		-		1 - INJURY POSSIBLE						
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 4 - WEST	,D R	-82,473	816	5 - PROPERTY DAMAGE ONLY						
	D TYPE		INTERSECTION RELATE							
2 MILE DOST	HIGHWAY RD - ROAD	WITHIN INTE	RSECTION OR ON APPRO	Na 16 (Na (Na.						
3-HOUSE # US-FEDERAL OS ROUTE	US - FEDERAL US ROUTE AV - AVENUE LA - LANE SQ - SQUARE BL - BOULEVARD MP - MILEPOST ST - STREET									
DISTANCE DISTANCE CR - NUMBERED COUNTY ROUTE CR - CIRCLE OV - (CE CR - NIMBERED COUNTY ROUTE CR - CIRCLE OV - OVAL TE - TERRACE									
FROM REFERENCE UNIT OF MEASURE 1 - MILES 1 - NUMBERED TOWNSHIP 2 - FEET ROUTE CT - COURT PK - I DR - DRIVE PI - I		ROADWAY ROADWAY DIVIDED								
HE - HEIGHTS PL -	PLACE	L KOADWAY DIV								
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COL 1 - ON ROADWAY 9 - CROSSOVER 1 - NOT COLLISION 4 - REA		DIRECTION OF TRAVE	National Parties	AN TYPE						
0 4 2 - ON SHOULDER 10-DRIVEWAY/ALLEY ACCESS 1 BETWEEN 5-BACK		1 - NORTH 2 - SOUTH	1 - DIVIDED (< 4 FEE	FLUSH MEDIAN T)						
□□□□ 3-IN MEDIAN II-RAILWAY GRADE CROSSING □□□□ VEHICLES IN 6-AND	GLE ESWIPE, SAME DIRECTION	3 - EAST	3 - EAST 2 - DIVIDED FLUSH MEDIAN							
5 - ON GORE TRAILS 2 - REAR-END 8 - SID	ESWIPE, OPPOSITE DIRECTION	4-WEST	4 - WEST 3 - DIVIDED, DEPRESSED ME 4 - DIVIDED, RAISED MEDIAI							
7 - ON RAMP 14-TOLL BOOTH	HER/UNKNOWN		(ANY TYPE) 9 - OTHER/UNKNOWN							
8-OFF RAMP 99-OTHER/UNKNOWN			9-UTHER/U							
WORK ZONE RELATED	CRASH IN WORK ZONE DRE THE 1ST WORK ZONE	CONTOUR	CONDITIONS	SURFACE						
WORKERS PRESENT 2 - LANE SHIFT/CROSSOVER WAR	NING SIGN	1	1	2 1 - CONCRETE						
D-WORK ON SHOOLDER	INCE WARNING AREA ISITION AREA									
E DECREO SANDENDE AND CONTRACTOR OF A CARDO	VITY AREA MINATION AREA	3 - CURVE LEVEL	2 - BLACKTOP, BITUMINOUS, ASPHALT							
_	THE PARTY OF THE P	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK						
LIGHT CONDITION WEATHER 1-DAYLIGHT 1-CLEAR 6-SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 4 - S								
2 2 - DAWN/DUSK 01 2 - CLOUDY 7 - SEVERE CROS			6 - WATER (STANDING, MOVING)	STONE 5 - DIRT						
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED 3 - FOG, SMOG, SMOKE 8 - BLOWING SAN 4 - RAIN 9 - FREEZING RAI	D, SOIL, DIRT, SNOW IN OR FREEZING DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN						
5 - DARK — UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNK 9 - OTHER / UNKNOWN	NOWN		9 - OTHER/UNKNOWN							
NARRATIVE				Indicate the north						
UNIT #1 WAS ATTEMPTING TO TURN LEFT ONTO				direction with an "N" on the						
AEROSPACE DRIVE FROM EASTBOUND IRVING WICK				compass diagram.						
DRIVE WEST. UNIT #1 STATED HE HAD FROST ON	Evaluati	ScenePD ™ - Evaluation Edition Evaluation Edition Edition		2—						
HIS WINDSHIELD AND DID NOT NOTICE HE WAS	Evaluation Edition Evaluation Edition	on Landii	Evaluation Edit	ion						
MAKING A WIDE LEFT TURN. UNIT #1 WENT OFF	Evaluati	Evaluation Edition								
THE RIGHT SIDE OF THE ROADWAY, STRUCK A	Evaluation Edition	PRIVATE DRIVE	Evaluation Edition	ion						
STREET SIGN, AND CAME TO REST IN A DITCH. UNIT	Not To Scale	Evaluation Edition	Evaluation Edition IRVING WICK DRIVE WEST							
#1 WAS BEING POLLED OUT OF THE DITCH BY A	Evaluation Edition	Unit 18	Evaluation Edition	···						
PASSERBY WHEN POLICE ARRIVED ON SCENE.	Evaluati EstreEET SIGN	Evaluation Evaluation	Edition							
- '	Evaluation Edition	Evaluation	Evaluation Edit Evaluation Edition	ion						
-	Evaluation Edition Evaluation Edition	Evaluation Edit on	AEROSPACE DR							
		Evaluation	Evaluation Edition Edition	ion						
	Evaluati Evaluation Edition Evaluation Edition	Evaluation Edition on Edition								
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL	DATE / TIME	Trancite (877) 908-4777 SCENE CLEARED	DATE / TIME	REPORT TAKEN BY						
10312023 0725 10312023 0726 103120	ANNUAL PROPERTY.	L 0 3 1 2 0 2 3		Walter Discussion and Additional Confession						
TOTAL TIME OTHER TOTAL OFFICER'S NAME*		ICER'S NAME*		MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME MINUTES HUNT	Smart	IOEN 3 NAME		SUPPLEMENT (CORRECTION OR ADDITION						
OFFICER'S BADGE NUMBER*		BY OFFICER'S BADGE N	NUMBER*	TO AN EXISTING REPORT SENT TO ODPS)						
0 _ 7 1 _ 3 _	0 0 7		5 0							

30 - GUARDRAIL FACE

■ FIRST HARMFUL EVENT

2

■ MOST HARMFUL EVENT

3

OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST						2 0 2 3 - 0 0 0 1 2 1 7 3												
UNIT #											D	ATE OF	BIRTH		AG	ŝΕ	GENDER	
0 1	CHOCCE, PEDRO EDUARDO									0 5 / 0 4 / 1 9 9 9 2 4 M								
2	DDRESS: STREET, CITY, STATE, ZIP 27 UNION ST H12 NEWARK, OH 43055																	
	INJURED I	TAKEN TO	D: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			□ DOT-	COMPLIA	SEATI	NG POSITIO	AIR BAG U	ISAGE EJE	ECTION	TRAPPED					
INJURIES OL STATE O H	BY							0 4	MC HELMET 0 1				1 1 1					
OL STATE	OPERATOR L	PERATOR LICENSE NUMBER			CODE				FENSE DESC		ICEC			CITATION NUMBER				
O H OLCLASS	ENDORSEMENT	NT RESTRICTION SELECT UP TO 3 DRIV			IVER ALCOHOL / DRUG SUSPECTED			_	CONDITION	OFFENSES ALCOHOL TEST				130103123001 DRUG TEST(S)				
4	SELECT UP TO 2	DIS' BY				1	STATUS	TYPE . 1	VAI	LUE		TYPE R	RESULT	SELECT UP TO 4				
UNIT #	NAME: LAST, F	FIRST, MIDDLE				THER DRUG		<u> </u>				ATE OF	 Birth		AG	GE GE	GENDER	
ADDRESS:	: STREET, CITY, ST.	ATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE								
O INJURIES	INJURED	EMS AGENCY (NAME)		IN HIBED	TAVENTO	MEDICAL FACILITY	(NAME CITY)	SAFE	ETY EQUIPMENT			CE ATI	NG POSITION	N AIR BAG U	ISACE EIE	ECTION	TRAPPED	
NON INJUNIES	TAKEN BY		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFE' USED				DOT-COMPLIANT MC HELMET			1	AIR BAU U	ISAUC EJE	LUTION	IKAFFED				
ADDRESS: NON INJURIES OL STATE	OPERATOR L	R LICENSE NUMBER		OFFENSE CHARGED LOCAL CODE			OF	FENSE DESC	RIPTION					CITATION NUMBER				
OL CLASS	ENDORSEMENT	ENDORSEMENT RESTRICTION SELECT UP TO 3 DR			VER ALCOHOL / DRUG SUSPECTED			_	CONDITION	ALCOHOL TEST				DRUG TEST(S)				
UL CLASS	SELECT UP TO 2	RESTRICTION SELECT		TRACTED		_	RIJUANA	"	JUNDITION	STATUS	TYPE		LUE				SELECT UP TO 4	
UNIT #	NAMELIAGE	TIRCT MIRRIE			0	THER DRUG		Ш				ATE OF	DIDTH	L			GENDER	
ONII #	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDEI								
ADDRESS:	: STREET, CITY, ST	ATE, ZIP								CONTAC	CT PHO	NE - INCL	UDE AREA C	ODE.				
010														1 1				
ADDRESS:	INJURED I TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) USED			ETY EQUIPMENT		COMPLIA HELME	NT	NG POSITIO	AIR BAG U	ISAGE EJE	ECTION	TRAPPED			
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL CODE			0F	FENSE DESC	RIPTION				CITATION NUMBER					
OL STATE OL OL CLASS	SELECT UP TO 2		UD TO 2 DDI	VER	AL C	NAOL / DRILE CHEDI	CTED	ļ.,	ONDITION	ALCOHOL TEST			DRUG TEST(S)					
OL CLASS				TRACTED						STATUS TYPE VALUE				STATUS TYPE RESULT SELECT UP TO				
L IN III	JRIES	SEATING DOCUTION		ATD BAC	0	THER DRUG	•		OL DESTRIC	TION(S)		• LLL	JETDAC:	FION	TEC	T STA	THE	
1 - FATAL	JRIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DEP	PLOYED 1-CLASS A			ar annual and	OL RESTRIC ALCOHOL INTER				TION TEST STATUS 1 - NONE GIVEN						
	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT – MIDDLE	2 - DEPLOY					2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED N 3 - TEST GIVEN, CONTAMINATED				
4 - POSSIBLE IN	SIBLE INJURY 3 - FRONT - RIGHT SIDE			- DEPLOYED BOTH FRONT / SIDE 4 - REGULAR CLASS				4 - FARM WAIVER				DEVICE (TEXTING, TYPING, DIALING)			SAMPLE / UNUSABLE			
5 - NO APPAREN	(MOTORCYCLE PASSENGER)			5 - NOT APPLICABLE (OHIO = D) 9 DEDLOYMENT INIVIOUS 5 - M/C MOPED ONLY				5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A			3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			4-TEST GIVEN, RESULTS KNOWN 5-TEST GIVEN, RESULTS				
	5 - SECOND - MIDDLE 5 - SECOND - DICHT CIDE 6 - NO VALID OL				& CLASS B BUS	TALKING 0	LKING ON HAND-HELD											
1 - NOT TRANSP /TREATED A	EATED AT SCENE 7 - THIRD – LEFT SIDE		E.	CIECTION OF ENDODGEMENT			EXCEPT TRACTO INTERMEDIATE		5 -	5 - OTHER ACTIVITY WITH AN			ALCOHOL TEST TYPE 1 - NONE					
2 - EMS 3 - POLICE	0 THIRD MIDDLE		1 - NOT EJE	IT EJECTED H - HAZMAT RTIALLY EJECTED M - MOTORCYCLE			0	RESTRICTIONS 9 - LEARNER'S PERMIT			ELECTRONIC DEVICE 6 - PASSENGER			2 - BLOOD				
	THER / UNKNOWN 9-THIRD - RIGHT SIDE 3-TOTA		3-TOTALLY				RESTRICTIONS			7 -	7 - OTHER DISTRACTION			3 - URINE				
SAFETY E	10 - SLEEPER SECTION 4 - NOT APPLICABLE OF TRUCK CAB 4 - NOT APPLICABLE		PLICABLE	N - TANKER 10 - LIMITED TO DA Q - MOTOR SCOOTER 11 - LIMITED TO EN				PLOYMENT 8 - OTHER DISTRACTION				4-BREATH OUTSIDE 5-OTHER						
1 - NONE USED 2 - SHOULDER E	SED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAPILING UNIT, BUS, 1 - NOT TRAPI		RAPPED R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - 0					THE VEHICLE 9 - OTHER / UNKNOWN			DRUG TEST TYPE							
	AP BELT ONLY USED PICK-UP WITH CAP) 2 - E:			RICATED BY T - DOUBLE & TRIPLE TRAILERS				(SPECIAL BRAKES, HAND CONTROLS, OR OTHER			CONDITION			1 - NONE 2 - BLOOD				
	- CHILD RESTRAINT SYSTEM - CARGO AREA		3 - FREED BY			X - TANKER / HAZMAT		ADAPTIVE DEVI				1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT			3 - URINE			
	FORWARD FACING 13 - TRAILING UNIT - CHILD RESTRAINT SYSTEM 14 - RIDING ON VEHICLE EXTERIOR		NON-ME	NON-MECHANICAL MEANS				15 - MOTOR VEHICLES WITHOUT AIR BRAKES			JT 3 - EMOTIONAL (E.G., DEPRESSED			ESSED,	4 - OTHER			
REAR FACIN	REAR FACING (NON-TRAILING UNIT)								OUTSIDE MIRRO	R	ANGRY, DISTURBED) 4- ILLNESS				DRUG TEST RESULT(S) 1-AMPHETAMINES			
7 - BOOSTER SE 8 - HELMET US	20 25 15 11 11 11 11 11 11 11 11 11 11 11 11							17 - PROSTHETIC AID 18 - OTHER			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			, 2	2 - BARBITURATES			
	PROTECTIVE PADS USED ELBOW, KNEES, ETC.)										6-1	6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS /ALCOHOL			3 - BENZODIAZEPINES 4 - CANNABINOIDS			
10 - REFLECTIVE															5 - COCAINE			
11 - LIGHTING - I / BICYCLE OF	HTING – PEDESTRIAN CYCLE ONLY										9- OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER				
99 - OTHER / UNK	- OTHER / UNKNOWN														8 - NEGATIVE RESULTS			