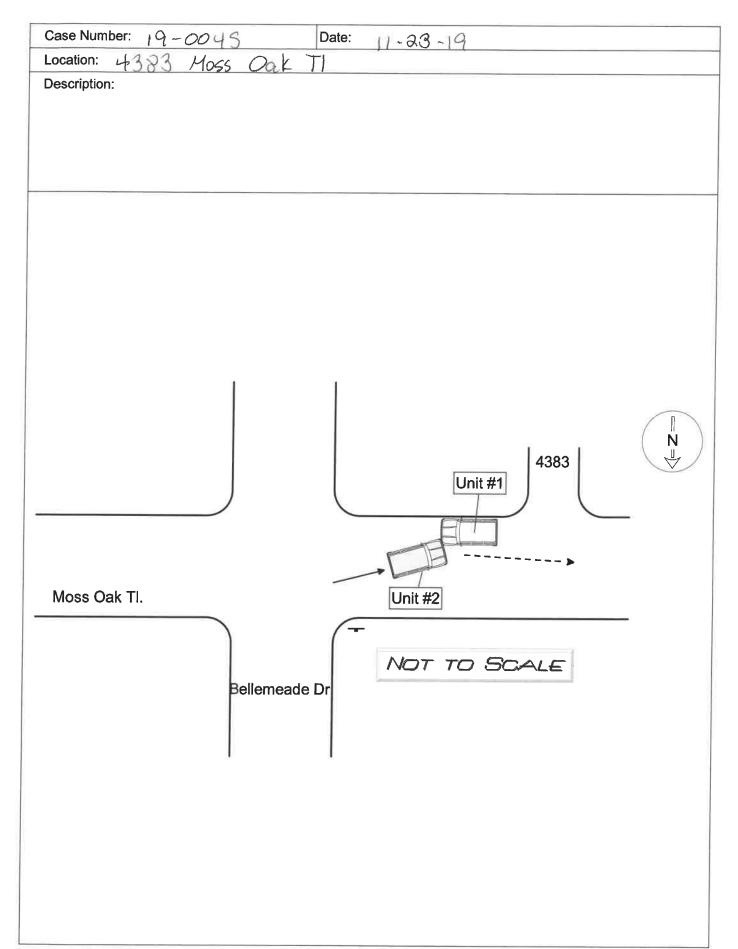
CRASH	REPORT *DENOT	ES MANDATORY F	FIELD FOR S	UPPLEM	ENT REPOR			LOCAL REPO		R*	
PHOTOSTAKEN OH-2 OH-3	Local INFORMATION Hit Skip Crash					1 19	) - C	000	45		1 !
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAMI			. O.	ncic* 2 <sub>1</sub> 9 <sub>1</sub> 0 <sub>1</sub> 5	1 2 1.	SOLVED	NUMBER OF	$\mathbf{c}$	1 / .	NIMAL
1 2 0 1 1 1 1 1 1 1 1	ITY, VILLAGE, TOWNSHIP*						UNSOLVE SH DATE	, L	CR	ASH SEVERI L - FATAL	INKNOWN TY
3-TOWNSHIP Bellbroo	LOCATION ROAD NAME				ROAD TYPE			DECIMAL DEGREES	J. J.	2 - SERIOUS II	
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	Moss Oak				ŢL	39		9685	3	- MINOR INJ SUSPECTE	URY
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH	REFERENCE ROAD NAME (R	OAD, MILEPOST,	HOUSE #)		ROAD TYPE			DECIMAL DEGREES		- INJURY PO	SSIBLE
						,-84,	10	5320		ONLY	DAMAGE
FROM REFERENCE	ROUTE TYPE - INTERSTATE ROUTE(TP)	AL - ALLEY	HW- HIGH	WAY R	D - ROAD	□ wr	THIN INT	INTERSECTI ERSECTION OR			
3- HOUSE # 3- EAST	- FEDERAL US ROUTE - STATE ROUTE	AV - AVENUE BL - BOULEVARD		POST S	Q - SQUARE T - STREET	□ wr	THIN INT	ERCHANGE AR	EA NUN	MBER OF APP	ROACHES
FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE	CR - CIRCLE CT - COURT	OV - OVAL PK - PARK		E - TERRACE L - TRAIL			ROAD	WAY		Ŋ.
20 2 1- MILES TR	- NUMBERED TOWNSHIP ROUTE	DR - DRIVE HE - HEIGHTS	PI - PIKE		A - WAY	ROA	IDWAY DI	VIDED			
LOCATION OF FIRST HARMFUL EVE		MANNER OF CRAS			т	DIRECTION				N TYPE	
O 1 2-ON SHOULDER 10-DRIVEWAY	VALLEY ACCESS 6	BETWEEN TWO MOTOR	5 - BACKING 6 - ANGLE			2 .	NORTH SOUTH		( <4 FEET	FLUSH MEDIA *) FLUSH MEDIA	
4 - ON ROADSIDE 12 - SHARED U 5 - ON GORE TRAILS	SE PATHS OR	TRANSPORT	7 - SIDESWI		DIRECTION ITE DIRECTION		EAST WEST		(≥4 FEET		
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LAND 7 - ON RAMP 14 - TOLL BOOT	3-		9 - OTHER /							RAISED MEDI	
8-OFF RAMP 99-OTHER/U	NKNOWN							9	OTHER/UN	KNOWN	
	WORK ZONE TYPE  LANE CLOSURE		N OF CRAS - BEFORE TI	IE 1ST W		CONTO	DUR	CONDI		surfa	ICE
	LANE SHIFT/CROSSOVER WORK ON SHOULDER	lla a	WARNING - ADVANCE	VARNING	AREA	1 - STRAIGH	IT LEVEL	1 - DRY	41	1 - CONCRET	
4-	OR MEDIAN INTERMITTENT OR MOVING W		-TRANSITIO -ACTIVITY			2 - STRAIGH		2 - WET		2 - BŁACKTO BITUMIN	
	OTHER		-TERMINAT	ION AREA	Α	3 - CURVE L 4 - CURVE G		3 - SNOW 4 - ICE		ASPHALT 3 - BRICK/BI	
LIGHT CONDITION  1 - DAYLIGHT	1-CLEAR	ATHER 6 - SNOW				9 - OTHER/U	NKNOWN	5 - SAND, MU OIL, GRAV		4 - SLAG, GR STONE	AVEL,
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SM	7-SEVERE OKE 8-BLOWING			Now			6 - WATER (ST MOVING)	TANDING,	5 - DIRT	
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZIN 99 - OTHER			G DRIZZLE			7 - SLUSH 9 - OTHER/UN	KNOWN	9 - OTHER/UI	IKNOWN
9 - OTHER / UNKNOWN								7-0111210011	KNOWN		
NARRATIVE Unit 1 was legally parked in front of 4383	Moss Oak TI facing on	ntured Unit						1 ' 1 '		Indicate the	with
2 struck Unit 1 in the left front quarter par Moss Oak Ti.	el and then left heading	west on							A	an "N" on compass d	
SEE ATTACHED DRAWING											7-2
BC on											-
50 011											1
											-
											-
											1
											-
											+3
	ISPATCH DATE/TIME	ARR	IVAL DATE	TIME		SCENE CL	EARED D	ATE/TIME	RE	PORT TAKEN	BY
	32019 2142	11232	019	215	4 1	1232	019	2259		POLICE AGEN	CY
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUTE		)			nes, Jac					MOTORIST SUPPLEMENT	$\vdash$
1 30 10		BADGE NUMBER*	, 3	1		OFFICER'S	BADGE N		<b>- </b> ' ;	CORRECTION OR A 0 AN EXISTING REPORT SE	MOTTION
	Y77001 OH1 1/19 [760-0820] PAGE 1 OF 6										



	Motorist / Non-Motorist					1 19	19-000045						
	UNIT #	NAME: LAS	IAME: LAST, FIRST, MIDDLE					l I				GENDER	
	<u>UZ</u>	Doe, John					N						
OTORIST	ADDRESS	: STREET, CITY,	STATE, ZIP						CONTACT	PHONE ~ INCLUDE AREA	CODE	L 1	
/ NON-MO	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAI	KENTO: MEDICAL FACILIT	(NAME, CITY	SAFETY EQUIPMENT	DOT-C	SEATING POSITION OF THE STATE O	AIR BAG USAGE	EJECTION	TRAPPED
TORIC	OL STATE	OPERATOR	LICENSE NUMBER		OFFENSE	CHARGED	LOCAL	OFFENSE DES	CRIPTION		CITATION	IUMBER	
OW (	DL CLASS	ENDORSEMEN SELECT UP TO 2			TRACTED [	ALCOHOL / DRUG SUSH	PECTED RIJUANA	condition 9		COHOL TEST YPE VALUE	STATUS TYPE	G TEST(S	SELECT UPTO 4
<u>.</u>	UNIT #	NAME. LAST				OTHER DRUG				PATE OF DADY			الالالا
	UN11 #	NAME: LAST	, FIRST, MIDDLE							DATE OF BIRTH		AGE	GENDER
TORIST	ADDRESS:	L : STREET, CITY, S	TATE, ZIP						CONTACT	PHONE - INCLUDE AREA O	ODE	H 17	
NON-MOTORIS	NJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAK	ENTO: MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMENT	DOT-CO	MPLIANT	N AIR BAG USAGE	EJECTION	TRAPPED
	L STATE	OPERATOR	LICENSE NUMBER		OFFENSE	CHARGED	LOCAL	OFFENSE DESC	RIPTION	1	CITATION N	UMBER	
0 M	L CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELEC		VER TRACTED	ALCOHOL / DRUG SUSP	ECTED RIJUANA	CONDITION	STATUS T	OHOL TEST YPE VALUE	STATUS TYPE	RESULT	SELECT UP TO 4
-	# TINU	NAMELIAST	FIRST, MIDDLE		L	OTHER DRUG				DATE OF BIRTH		0.05	CENDED.
١.		,	· Mon, middle							DAIL OF DIKIN		AGE	GENDER
OTORIST	ADDRESS:	STREET, CITY, ST	TATE, ZIP						CONTACT	PHONE - INCLUDE AREA CO	DDE	<del></del>	
	NJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKE	ENTO: MEDICAL FACILITY	(NAME, CITY)		DOT-Co	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
₽ L		BY L						USED	MC HEL				
OTORIST	L STATE	OPERATOR L	ICENSE NUMBER		OFFENSE (	CHARGED	CODE	OFFENSE DESC	RIPTION		CITATION N	JMBER	
≊ 0	L CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RACTED		CTED Rijuana	CONDITION	STATUS TY	OHOL TEST PE VALUE S		RESULT	SELECT UP TO 4
Ŀ	וחוחו	RIES	SEATING POSITION	A	IR BAG	OTHER DRUG	5	OL RESTRICT	ION(S)	DRIVER DISTRACT	ION T	JLLIL EST STAT	US
	ATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPL		1 - CLASS A		1 - ALCOHOL INTERL	OCK DEVICE	1 - NOT DISTRACTED	1 - NONE		5
		ERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE		2 - CLASS B 3 - CLASS C		2 - COL INTRASTATE 3 - CORRECTIVE LEN		2 - MANUALLY OPERATING ELECTRONIC COMMUNI	CATION 3-TEST	REFUSED GIVEN, CONTA	AMINATED
	OSSIBLE INJ		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		D BOTH FRONT/			4 - FARM WAIVER		DEVICE (TEXTING, TYPI DIALING)	NG, SAME	LE/UNUSAB	LE
	IO APPARENT		(MOTORCYCLE PASSENGER)	5 - NOT APPL 9 - DEPLOYM	ICABLE ENT UNKNOWN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS A 6 - EXCEPT CLASS A	BUS	3 - TALKING ON HANDS-FRE COMMUNICATION DEVICE	E 5-TEST	GIVEN, RESU GIVEN, RESU	
_	NJURED T	AKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE			6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTOR	TOAII ED	4 - TALKING ON HAND-HELI COMMUNICATION DEVICE	F		
- 1	TREATED AT		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		CTION	OL ENDORSEM	MENT	8 - INTERMEDIATE L		5 - OTHER ACTIVITY WITH A	ALCO	HOL TEST	TYPE
2-E	OLICE OLICE		8-THIRD - MIDDLE	1 - NOT EJEC 2 - PARTIALL		H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PERM	IT	ELECTRONIC DEVICE 6 - PASSENGER	2 - BL00		
9-0	THER/UNKN	OWN	9-THIRD - RIGHT SIDE 10-Sleeper Section	3-TOTALLY E		P - PASSENGER		RESTRICTIONS  10 - LIMITED TO DAYL	ICUT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE	3 - URINI 4 - BREA		
\$A	FETY EQ	UIPMENT	OF TRUCK CAB	4-NOTAPPL	ICABLE	N -TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EMPL		8 - OTHER DISTRACTION OU			- 1
	ONE USED HOLL DER BEI	LT ONLY USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	TR 1-NOTTRAP	APPED	R - THREE-WHEEL MOT	ORCYCLE	12 - LIMITED - OTHER 13 - MECHANICAL DEV		7 - OTHER / UNKNOWN	DRU	G TEST T	YPE
	AP BELT ONLY		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRICAT	ED BY	S - SCHOOL BUS T - DOUBLE & TRIPLE T	RAILERS	(SPECIAL BRAKES	, HAND	CONDITION	1 - NONE 2 - BLOOK		
		AP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREED BY	CAL MEANS	X - TANKER / HAZMAT		ADAPTIVE DEVICE	(2)	1 - APPARENTLY NORMAL	3 - URINE		
F	DRWARD FACI	ING	13 - TRAILING UNIT	NON-MECH	IANICAL MEANS	GENDER		14 - MILITARY VEHICL 15 - MOTOR VEHICLES		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.g., DEPRES	4 - OTHE	}	1
	HILD RESTRA Ear facing	INT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F-FEMALE		AIR BRAKES  16 - OUTSIDE MIRROR		ANGRY, DISTURBED)	DRUG	EST RES	ULT(S)
	OOSTER SEAT ELMET USED		15 - NON-MOTORIST 99 - OTHER / UNKNOWN			M - MALE U - OTHER / UNKNOWN		17 - PROSTHETIC AID		4 - ILLNESS 5 - FELL ASLEEP, FAINTED,	1 - AMPH 2 - BARBI	ETAMINES TURATES	
9 - PI	ROTECTIVE P	ADS USED						18-OTHER		FATIGUED, ETC. 6 - UNDER THE INFLUENCE		DIAZEPINES	
	LBOW, KNEE! EFLECTIVE CI									OF MEDICATIONS / DRUGS /ALCOHOL	5 - COCAI		
11 - LI	GHTING - PE	DESTRIAN								9-OTHER/UNKNOWN	6 - OPIAT	ES / OPIOIDS	
	HER/UNKNO						IV.				7 - OTHER 8 - NEGAT	IVE RESULTS	



## OHIO TRAFFIC CRASH REPORT DIAGRAM/NARRATIVE CONTINUATION

LOCAL REPORT NUMBER	DATE OF CRASH	
19-000045	Bellbrook Police Department	M 11 D 23 Y 2019
IN COUNTY OF Greene	CRASH LOCATION  Moss Oak TL	
road. I spoke to a witness, Jason Bo car engine revving up and observed	and observed Unit 1 with damage to the front driver side and pier owman, who advised he heard the crash. He stated he looked of a light colored possible mini van heading westbound on Moss C	out his window and heard a
**************************************		
***************************************		
	OFFICER'S SIGNATURE  X Johnston, Ryan	BADGE NUMBER 43



## OHIO TRAFFIC CRASH REPORT DIAGRAM/NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 19-000045	REPORTING AGENCY Bellbrook Police De	DATE OF CRASH M 11  D 23  Y 2019					
IN COUNTY OF	CRASH LOCATION						
traveling westbound on Moss Oak TI. assembly, including yellow lens, a left	Unit 2 struck Unit 1 with fender shield, a jack plus	rox. 1320 hrs. I looked at Unit 1 and deter its left front quarter panel. I recovered pie g cover. I observed part numbers on the	eces of a headlight eft fender shield				
a 2012 to 2015 Nissan Rogue, the rig collected the various car pieces and the	ht front jack plug cover (h	JG000). I identified the left fender splash nole cover) as belonging to a 2011 to 2015 operty.	Nissan Rogue. I				
			i i				
			ı				
		OFFICER/O CICALTURE	I BADOF MINUS				
		OFFICER'S SIGNATURE  X Johnston, Ryan	BADGE NUMBER 43				

LOCAL	1.0	REPORTING	DATE OF CRASH
REPORT	14-45	AGENCY D III D ()	M 1) /07 / YIQ
NUMBER	101	Dellowak I.V.	1.11 0) 11

## FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

Tagair C. Bauman	HEREBY MAKE THIS VOLUNTARY STATEMENT
1. Jason C. Bowman (PRINTED)	
- la + #45	AT 4303 M 000 00 10 To 1
Johnston #43 (OFFICERS NAME)	AT 4383 Mass Oak Trail (LOCATION)
There is no bours	head a crash lookehast my
1 100072	engine revuing at high RPM reding away. It may have been
window, heard an	engine reving at high RPM
and the vehicle spe	eding away. It may have been
a chear month of	Vehicle went west on Moss oak
T = 0 120	Venicle medij wesij en 1 ibss back
Tel	
·	
9 6	
	. =
5 4391 Moss Oak Trl r	PHONE
S 1311 1.035 CAR III I	OFFICERS SIGNATURE

LOCAL	10
REPORT	10
MIMBER	- 1

19-45

REPORTING AGENCY

Bellbrook P. O.

MII DZZ /YIQ

## FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

· 60 -1	
1. Jeff Shaw	HEREBY MAKE THIS VOLUNTARY STATEMENT TO
1 his ct a #43	AT 4382 M COOK Tool
Johnston #43 (OFFICERS NAME)	AT 4383 Mass Oak Trail (LOCATION)
El was sleeping i	is my house when my
neighbor wohe me	up and told me my
car had been but and	un! Car was parties
infant of my house	when hit.
0	
V V	
	*
· · · · · · · · · · · · · · · · · · ·	
	*
ar oc	
RESS	PHONE
NESS 4383 Mass Oak Trail Bellbrook 10 NATURE NESS WWW.	OFFICEDS SIGNATURE
IESS W M	HUB HUB
7003 1/82	(