OHO DEPARTMENT TRAFFIC C		LOCAL REPORT NUMBER *										
MPHOTOS TAKEN	OH -3 LOCAL	24-60184										
SECONDARY CRASH	OTHER REPOR	NCIC *	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR									
1 - CITY			CRASH DATE / TIME* CRASH SEVERITY									
3 - TOWNSHIP	ntville (Towns	ROAD TYPE	10/30/2024 11:48 LATITUDE DECIMAL DEGREES 5 2 - SERIOUS INJURY SUSPECTED									
SR 162 1 13	- NORTH LOCAT - SOUTH - EAST - WEST	41.099		3 - MINOR INJURY SUSPECTED								
	- NORTH REFER	ROAD TYPE	LONGITUDE D	ECIMAL DEGREES	4 - INJURY POSSIBLE							
# SR 3 1 13	- SOUTH - EAST		-81.867	010	5 - PROPERTY DAMAGE ONLY							
REFERENCE POINT DIRECTION FROM REFERENCE	- WEST		INTERSECTIO									
1 - INTERSECTION 1 - NOR	Vaccous III and the second	WITHIN INTE	RSECTION OR ON	I APPROACH								
2 - MILE POST 3 - HOUSE # 4 2 - SOU 3 - EAS	US - FEDER	SQ - SQUARE ST - STREET	MITHIN INTE	PCHANGE AREA	NUMBER OF APPROACHES							
DISTANCE DISTANCE OF CRUCKE OV - OVAL TE - TERRACE OF COURT OF PARKINAN THE TRAIL PROPERTY OF THE PROPERTY OF												
FROM REFERENCE UNIT OF MEASURE 1 - MILES CR - NUMBERED COUNTY ROUTE DR - DRIVE PI - PIKE WA - WAY												
150.00 3 2 - FEET ROADWAY DIVIDED ROADWAY DIVIDED ROADWAY DIVIDED												
	LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT DIRECTION OF TRAVEL MEDIAN TYPE											
1	ROSSOVER DRIVEWAY/ALLEY	1 1	COLLISION 4 - REAR-TO-REAR /EEN 5 - BACKING		1 - NORTH 1 - DIVIDED FLUSH MEDIAN 2 - SOUTH (<4 FEET)							
3 - IN MEDIAN 11 - F	AILWAY GRADE C	ROSSING TWO	MOTOR CLES IN 6 - ANGLE		3 - EAST	L 2 - E	<4 FEET) DIVIDED FLUSH MEDIAN					
	HARED USE PATH RAILS		ISPORT 7 - SIDESWIPE, SAM		4 - WEST		≥4 FEET 1 DIVIDED, DEPRESSED MEDIAN					
6 - OUTSIDE TRAFFIC WAY 13 - E		2 - REAR				4 - [DIVIDED, RAISED MEDIAN					
7 - ON RAMP 14 - TOLL BOOTH 3 - HEAD-ON 9 - OTHER / UNKNOWN (ANY TYPE) 8 - OFF RAMP 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN												
WORK ZONE RELATED	wo	ORK ZONE TYPE	LOCATION OF CRASH IN	WORK ZONE	CONTOUR	CONDITION	ONS SURFACE					
WORKERS PRESENT	1 - LANE	CLOSURE		EFORE THE 1ST WORK ZONE								
		SHIFT/ CROSSOVER	WARNING SIGN 2 - ADVANCE WARN	NING AREA	1 - STRAIGHT	1 - DRY	1 - CONCRETE					
LAW ENFORCEMENT PRESENT		K ON SHOULDER EDIAN	3 - TRANSITION AR	EA	LEVEL 2 - STRAIGHT	2 - WET	2 - BLACKTOP, BITUMINOUS,					
4 - ACTIVITY AREA 2 - STRAIGHT 3 - SNOW BITT ACTIVE SCHOOL ZONE 5 - TERMINATION AREA 5 - TERM												
L. Marines and L. Mar	3 - CURVE LEVEL 4 - CURVE GRADE	5 - SAND, MUE OIL, GRAVE	Management of the Control of the Con									
LIGHT CONDITION 1 - DAYLIGHT			9 - OTHER	6 - WATER (STA	ANDING, STONE							
1 1 2 - DAWN/DUSK		1 - CLEAR 1 , 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS		/UNKNOWN	MOVING) 7 - SLUSH	5 - DIRT 9 - OTHER					
3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHT	ED		8 - BLOWING SAND, SOIL, DIR 9 - FREEZING RAIN OR FREEZI	53		9 - OTHER / UN	NKNOWN / UNKNOWN					
5 - DARK - UNKNOWN ROADWA'		4 - RAIN 5 - SLEET, HAIL	99 - OTHER / UNKNOWN	NG DRIZZLE								
9 - OTHER / UNKNOWN												
NARRATIVE												
Unit 1 was westbound on Wedgeword roadway from the north. The driver												
the front, causing disabling damage						Ņ						
injuries were reported.						1						
						₩						
				Wedgewo	od Rd. (S.R. 162)							
			- 3r 1 <u> </u>	y								
				latin	1							
					-		To Wooster Pike					
							(SR 3)					
	Not To Scale											
CRASH REPORTED DATE / TIME	DISPA	ATCH DATE / TIME	ARRIVAL DATE / TIP	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY						
10/30/2024 11:48	10/3	30/2024 11:50	10/30/2024 11:5	55	10/30/202	24 12:24	POLICE AGENCY					
TOTAL TIME OTHER	TOTAL	OFFICER'S NAME*	HECKED BY OFFICE	1 / 1/		MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME	MINUTES	Searle, Cory		aFond, Christo	1710		SUPPLEMENT (CORRECTION OR ADDITION					
	OFFICER'S BAD	CHECKED BY	OFFICER'S BADGE	TO AN EXISTING REPORT SENT TO ODPS)								

COLLISION WITH FIXED OBJECT - STRUCK
31 - GUARDRAIL END 38 - OVERHEAD SIGN POST 45 - EM

39 - LIGHT / LUMINARIES

41 - OTHER POST, POLE

OR SUPPORT

SUPPORT

40 - UTILITY POLE

42 - CULVERT

MOST HARMFUL EVENT

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

37 - TRAFFIC SIGN POST

36 - MEDIAN OTHER BARRIER

BARRIER

- MEDIAN CABLE BARRIER

45 - EMBANKMENT

49 - FIRE HYDRANT 50 - WORK ZONE

EQUIPMENT

MAINTENANCE

46 - FENCE 47 - MAILBOX

48 - TREE

51 - WALL

52 - BUILDING

54 - OTHER FIXED

OBJECT 99 - OTHER / UNKNOWN

53 – TUNNEL

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

STRUCTURE

27 - BRIDGE PIER OR

28 - BRIDGE PARAPET

30 - GUARDRAIL FACE

FIRST HARMFUL EVENT

ARLITMENT

Motorist / Non-Motorist									LOCAL REPORT NUMBER							
UNIT #									24-60184 DATE OF BIRTH AGE GENDER							
1	BUONOCORE, NICHOLAS, AARON												30			
ADDRESS:	RESS: STREET, CITY, STATE, ZIP								CONT	05/03/1994 30 M CONTACT PHONE - INCLUDE AREA CODE					141	
44 LIBER	RTY ST, SEVI	LLE, OH, 44273														
INJURIES	JRIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDIKAL FACILITY (NAVE, CITY) SAFETY EQUIPMENT USED							SEATING AIR BAG USAGE EJECTION TRAPPEE								
9N 5	BY _1_			4			4	IIMC	HELMET	^r 1		1	1	1		
OL STATE	TE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL OFFENSE DESCRIP								MOIT			CITA	CITATION NUMBER			
OH																
OL CLASS	ENDORSEMEN	T RESTRICTION SELECT UP TO 3	DRI DIS	VER TRACTED	1	HOL / DRUG SUSPE		CONDITION	A	TYPE	OL TEST VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4	
4			ВУ	1	ı=	R DRUG		1	1	1		1	1			
UNIT #	NAME: LAST,	FIRST, MIDDLE								I	DATE OF BIRTH			AGE	GENDER	
		·														
ADDRESS:	: STREET, CITY, S	TATE, ZIP							CONT	ACT PHO	ONE - INCLUDE	AREA CODE				
INJURIES	INJURED E	MS Agency (NAME)		INJURED	TAKEN TO: I	MEDICAL FACILITY (NAME	спу}	SAFETY EQUIPMENT	<u> </u>		SEATING	AIR BA	G USAGE	EJECTION	1 TRAPPED	
-NON	TAKEN BY	,,					USED	DOT-COMPLIANT POSITION MC HELMET				***************************************				
OL STATE	OPERATOR LI	CENSE NUMBER		OFFEN:	SE CHARG	ED	LOCAL	OFFENSE DESCRI	I I			CITA	CITATION NUMBER			
oToR							CODE									
OL CLASS	ENDORSEMEN	RESTRICTION SELECT UP TO 3	DRI			IOL / DRUG SUSPI		CONDITION		LCOHO	DL TEST		DRUG	TEST(S)	
			BY	TRACTED		HOL MARUI R DRUG	JANA		SUTATE	TYPE	VALUE	SUTATE	TYPE	RESULTS	SELECT UP TO 4	
UNIT #	NAME: LAST,	FIRST, MIDDLE			<u> </u>				1	<u>1</u> [DATE OF BIRTH	1	┰	AGE	GENDER	
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONT	ACT PHO	ONE - INCLUDE .	AREA CODE				
010 									<u> </u>							
INJURIES INJURED EMS AGENCY (NAME)				INJURED TAKEN TO: MEDICAL FACILITY (NAME CITY) SAFETY EQUIPMENT USED				DOT-COMPLIANT POSITION MC HELMET			AIR BA	.G USAGE	EJECTION	TRAPPED		
M- INJURIES OL STATE	OL STATE OPERATOR LICENSE NUMBER				SE CHARG	FD	LOCAL	OFFENSE DESCRI	<u> </u>				INARED	1,		
TORS							CODE									
OL CLASS	L CLASS ENDORSEMENT RESTRICTION SELECT UP TO 3			DRIVER ALCOHOL / DRUG SUSPECTED			CONDITION	ALCOHOL TEST		DRUG TEST(S)		S)				
			DIST BY	FRACTED		HOL MAREIL R DRUG	JANA		SUTATS	TYPE	VALUE	2UTAT2	TYPE	RESULTS	SELECT UP TO 4	
INI	l URIES	SEATING POSITION		AIR BAG	heard	OL CLAS	ss	OL RESTRICT	TION(S) Ingi	 VER DISTRA	CTION	7	i EST STA	THE	
1 - FATAL		1 - FRONT - LEFT SIDE	1 - NOT D	EPLOYED		1 - CLASS A		1 - ALCOHOL INTER	Quarter Sa	1 - N	OT DISTRACTED		1 - NON	NE GIVEN		
2 - SUSPECTED INJURY	SERIOUS	2 - FRONT - MIDDLE	3 - DEPLO	YED SIDE		2 - CLASS B		DEVICE 2 - CDL INTRASTATE		ELI	IANUALLY OPERA ECTRONIC OMMUNICATION		3 - TEST			
3 - SUSPECTED INJURY	MINOR	4 - SECOND - LEFT SIDE	FRONT, 5 - NOT AI	/SIDE		3 - CLASS C 4 - REGULAR CLA	SS	3 - CORRECTIVE LEN 4 - FARM WAIVER 5 - EXCEPT CLASS A		σ	EXTING, TYPING, IALING)	DEAICE	/UN	I I AMINATE IUSABLE I GIVEN,	D SAMPLE	
4 - POSSIBLE IN 5 - NO APPARE	કાર્ય લેવાં અંજ એક એક મુંચું સુંકાર્યકાર	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9 - DEPLO			(OHIO = D) 5 - M/C MOPED (6 - EXCEPT CLASS A & CLASS B BUS		3 - T/ C0	ALKING ON HANG OMMUNICATION	DEVICE		JLTS KNOV	VN	
		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	Ε	JECTIO	N	6 - NO VALID OL	JULI	7 - EXCEPT TRACTOL 8 - INTERMEDIATE L		CC	ALKING ON HANG OMMUNICATION	DEVICE		JLTS UNKN	IOWN	
1 - NOT TRAN	TAKEN BY SPORTED	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	1 - NOT EJ 2 - PARTIA	LLY EJECTE		OL ENDORS	MENT	RESTRICTIONS 9 - LEARNER'S PERM	li T	EL	ither activity w .ectronic devic Assenger	E	ALCO 1 - NON		SUTYPE	
/TREATED 2 - EMS	AT SCENE	10 - SLEEPER SECTION	3 - TOTALI 4 - NOT AI			H - HAZMAT		RESTRICTIONS 10 - LIMITED TO DA ONLY	YLIGHT	7-0	THER DISTRACTION IS THE THE THE VEHICLE TH		2 - BLOO 3 - URIN			
3 - POLICE		11 - PASSENGER IN OTHER ENCLOSED CARGO	I	RAPPE	D	M - MOTORCYCL P - PASSENGER	E	11 - LIMITED TO EM		T 8-0	THER DISTRACTK	ON	4 - BREA 5 - OTH	NTH		
9 - OTHER/U	INKNOWN	EUS, PICK-UP WITH CAP)	1 - NOT TE 2 - EXTRIC			N - TANKER		13 - MECHANICAL D	EVICES		THER / UNKNOW	N	and his terpidah	UG TES	ГТҮРЕ	
550000000000000000000000000000000000000	QUIPMENT	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREED			Q - MOTOR SCOOR - THREE-WHEEL		CONTROLS, OR ADAPTIVE DEVI	OTHER		PPARENTLY NORM	AAL.	1 - NON 2 - BLOG	OD		
2 - SHOULDER BELT ONLY 1		13 - TRAILING UNIT 14 - RIDING ON VEHICLE			MOTORCYCLE			14 - MILITARY VEHIC 15 - MOTOR VEHICL	23	LES ONLY 2 - PHYSICAL IMPAIRM ES 3 - EMOTIONAL (E.G.,			NT 3 - URINE 4 - OTHER			
USED 3 - LAP BELT OF 4 - SHOULDER		EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST				S - SCHOOL BUS T - DOUBLE & TRIPLE		WITHOUT AIR B 16 - OUTSIDE MIRRO 17 - PROSTHETIC AII	OR .	DE	PRESSED, ANGRY, STURBED) LNESS		DRUG TEST RESULT(S		ARABANASAN	
USED 5 - CHILD REST		99 - OTHER / UNKNOWN				TRAILERS X - TANKER / HAZ	MAT	18 - OTHER		5 - FE	LIVESS LL ASLEEP, FAINT ITIGUED, ETC.	ED,	2 - BAR8	HETAMINE SITURATES		
- FORWARD 6 - CHILD REST	FACING	į				GENIDE	n			6 - UI	NDER THE INFLUE EDICATIONS / DR	NCE OF	4 - CAN	ODIAZEPII NABINOIDS		
REAR FACI 7 - BOOSTER SI	NG					GENDE F - FEMALE				AL	COHOL THER / UNKNOW			TES / OPIO	IDS	
8 - HELMET US 9 - PROTECTIVE	ED					M - MALE U - OTHER / UNK	MOUNT				OHATOW	计设计标准 计压桶	7 - OTHE 8 - NEG/	ER ATIVE RESU	LTS	
(ELBOWS, K	(NEES, ETC)					3 - OTHER / ONK	, UNIN									
11 - LIGHTING / BICYCLE (- PEDESTRIAN															
99 - OTHER / U			easterii.	andaya (F									produkti.			

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER							
UNIT # NAME: LAST, FIRST, MIDDLE								DA	24-60184 DATE OF BIRTH AGE GENDER						
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHON	E - INCLUDE ARI	EA CODE		-			
9 1311	IRIES	INJURED	Te	MS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NA	NAE CITY	SAFETY EQUIPMENT		SEATING	AIR BAG USAG	E EIECTIOI	N TRAPPED		
		TAKEN BY	EMS AGENCY (NAME)						DOT-COMPLIANT MC HELMET	POSITION	HIN DAG GSAC) Citings	THORITED .		
บกเ	SNIT # NAME: LAST, FIRST, MIDDLE								DA	TE OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHON	E - INCLUDE AR	EA CODE	···	····		
O IN II	INJURIES INJURED EMS AGENCY (NAME) INJURIES INJURED TAKEN TO: MEDICAL FACRITY (HAVE CITY) SAFETY EQUIPMENT									SEATING	AIR BAG USAG	E EJECTIOI	N TRAPPED		
		INJURED EMS AGENCY (NAME) TAKEN BY						John Ligot, Marty	DOT-COMPLIANT MC HELMET	POSITION	All DAG GAA	Dieno	, marred		
UNI	T#	NAME: LA	J <u>I</u> VST	, FIRST, MIDÐLE					DA	TE OF BIRTH	1	AGE	GENDER		
ADD	RESS:	STREET, CIT	Υ, 9	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
-	IRIES	INJURED	Τr	MS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NA	INE COV)	SAFETY EQUIPMENT		SEATING	AIR BAG USAG	E EJECTION	TRAPPED		
		TAKEN BY		TOWN PROBLEM IN THE PROPERTY OF THE PROPERTY O		Y	January Legal Maria		DOT-COMPLIANT MC HELMET	POSITION					
UNI	T #	NAME: LA	-Ί \SΤ	, FIRST, MIDDLE		<u> </u>			DA	TE OF BIRTH	<u> </u>	AGE	GENDER		
j.															
ADD	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
e INJL	NJURIES INJURED EMS AGENCY (NAME) INJURED TAKE				INJURED TAKEN TO: MEDICAL FACILITY (NA	LVE.CITY)	SAFETY EQUIPMENT		SEATING	AIR BAG USAG	E EJECTIOI	TRAPPED			
		TAKEN BY			•	MC HELMET	POSITION			1					
		IN.	Ţ	RIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG L	SAGE			
1 -	FATA	AL			1 - NONE U	나는 하는 사람은 사람들이 가지를 하는 것을 받는데 없었다.	사용 등 시간 상대 등을 받아하는 모나나다	IT - LEFT SIDE	.	1 - NOT I	DEPLOYED				
1,500	2 - SUSPECTED SERIOUS INJURY VEHICLE OCCUP 2 - SHOULDER BELT					E OCCUPANT DER BELT ONLY USED	2 - FRON	FORCYCLE DRIVE IT - MIDDLE IT - RIGHT SIDE	:K)	i filozof y distribuido e	OYED FROM	T			
	2 - 2025ECTED MINOK INJOKA			3 - LAP BEL	T ONLY USED			DYED SIDE DYED BOTH							
5 -	5 - NO APPARENT INJURY 4 - SHOUL				DER & LAP BELT USED ESTRAINT SYSTEM -	ORCYCLE PASSE ND - MIDDLE	NGER)		T/SIDE						
	\$25,5 kg 1,5 kg 2,5				RD FACING		ND - RIGHT SIDI	Ē		APPLICABLI YMFNT HI	PPLICABLE YMENT UNKNOWN				
					6 - CHILD R REAR FA	ESTRAINT SYSTEM -	NG (MOTORCYCLE SIDE CAR) EJECT								
			7 - BOOSTE		8 - THIRD - MIDDLE					1 - NOT EJECTED					
			8 - HELMET		10 - SLEE	PER SECTION O	an en en en alleggelande en die tre dielege		TIALLY EJECTED						
9 -				TIVE PADS USED 'S, KNEES, ETC)	医翼形的复数形式 经收益	SENGER IN OTHI GO AREA (NON-T	网络拉拉斯 电电路电极电路 化电路管 电影響		a department of the partment	LY EJECTED PPLICABLE					
10,770.70	GENDER 10 - REFLEC			TIVE CLOTHING		H AS A BUS, PICK-UI SENGER IN UNE			TRAPP						
	/ RICV			ng - Pedestrian Le only		GO AREA ILING UNIT		1 - NOT	Mpg9980936000ps	PED .					
	■ M - MALE					/ UNKNOWN	14 - RIDI	NG ON VEHICLE	EXTERIOR		CATED BY	ANIC			
	U - OTHER / UNKNOWN						医睫状态 化气度 化二烷 经复元证券 化二烷基酚	-trailing Unit) V-MOTORIST		3 - FREED	ANICAL ME) BY	ANS			
							99 - OTH	IER / UNKNOWN	l	NON-	MECHANIC	AL MEA	NS		
v.	1E: LAS	ST, FIRST, MI	IDD	NE .					DA	TE OF BIRTH		AGE	GENDER		
ADD	RESS:	STREET, CIT	γ, 9	STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	A CODE				
\$															
NAN	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GI							
ADD ADD	RESS	STREET, CIT	γ. •	STATE, ZIP				İ	CONTACT PHONE	- INCHIDE VOS	A CODE				
3			-, -	-, - ··							2000				
NAM	NAME: LAST, FIRST, MIDDLE							DA	TE OF BIRTH	GENDER					
E ADD	BECC.	STREET, CIT	ν 4	STATE 710				****	CONTACT PHONE	- DICHES ASS	A COPT				
ADD	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	aritekli (* 11	1,4	. (, , , L, L)					CONTRE! PRONE	- INCLUDE ARE	A CODE				