

**CRASH DATABASE**  
**FULL EXPORT RECORD LAYOUT AND**  
**CODE DOCUMENTATION**

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**For Use with Crash Years 2008**

**Revised: 09/18/2008**



Ohio Department of Public Safety  
Information Technology Office  
1970 W. Broad Street  
PO Box 182081  
Columbus, OH 43218-2081

[ohiopublicsafety.com](http://ohiopublicsafety.com)

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

CRASH					
Description	Field Size	Position Start	Position End	Data Type	Value Description
Document Number	11	1	11	Character	Unique number assigned to each crash. It will be the same for the crash level record, unit level record and people level record. The first four numbers will designate the crash year.
Local Report#	10	12	21	Character	The unique identifier within a given year that identifies a given crash within a state. Locally Assigned Report Number
N.C.I.C.#	5	22	26	Character	Reporting Agency NCIC - NCIC Lookup Table
Report Taken By	1	27	27	Character	Who reported the crash. 1 Police agency 2 Motorist
#Units	2	28	29	Number	Total number of motorists/non-motorists Involved May contain blanks
Crash Severity	1	30	30	Number	Number for the most severe injury, or in the absence of injury, property damage involved in the crash. 1 Fatal Injury Crash 2 Injury Crash 3 Property Damage Only (PDO) Crash 4 Unknown Injury/Damage Crash
Hit/Skip	1	31	31	Number	Hit/Skip Crash Information. 1 Not Hit/Skip 2 Solved 3 Unsolved 4 Unknown
County#	2	32	33	Number	County where crash occurred using the county code. <b>See County Lookup Table</b>
City, Village, Township	1	34	34	Number	Select One 1 City 2 Village 3 Township 4 Unknown
FIPS Place Code	5	35	39	Number	FIPS Lookup Table. May contain blanks
Name (of City, Village or Township)	30	40	69	Character	The name of the political subdivision where crash occurred. <b>See FIPS Lookup Table (PLACE_NAME)</b>
Date of Crash	8	70	77	Date	Numerical date on which the crash occurred in the following format: MMDDYYYY

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Description	Field Size	Position Start	Position End	Data Type	Value Description
Time of Crash	4	78	81	Date	Time of the crash using military (2400 clock) time.
Day of Week	1	82	82	Number	Day of week crash occurred. 1 Sunday 2 Monday 3 Tuesday 4 Wednesday 5 Thursday 6 Friday 7 Saturday
Crash Prefix	1	83	83	Character	Crash location prefix. If a street is divided into North/South, or East/West sections, the prefix is required. N - North S - South E - East W - West
Crash Location	28	84	111	Character	The street name or route number on which the crash actually occurred
Crash Location – Road Type – Street Designation	2	112	113	Character	For each crash, the Crash Location Road Type will be one of the following based on the Type Location Point Used. If the Type Location Point Used is a named street or a numbered street, the Crash Location Road Type will be: AV Avenue BO Boulevard CI Circle CO Court DR Drive HE Heights HI Highway LA Lane PA Parkway PI Pike PL Place RO Road SQ Square ST Street TE Terrace TL Trail WA Way

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Description	Field Size	Position Start	Position End	Data Type	Value Description
Type of Location Point Used	1	114	114	Number	1 – Named Street 2 – Numbered Street 3 – Numbered Route May contain blanks
Distance from Reference	3	115	117	Number	Number of Miles from Reference <u>DISTANCE CHART</u> 1ft - 53ft = 001 54ft - 106ft = 002 107ft - 159ft = 003 160ft - 212ft = 004 213ft - 265ft = 005 266ft - 318ft = 006 319ft - 371ft = 007 372ft - 424ft = 008 425ft - 477ft = 009 478ft - 530ft = 010 1/8 mile = 012 1/5 mile = 017 1/4 mile = 025 1/3 mile = 033 1/2 mile = 050 1 mile = 100  1060' = 020 1590' = 030 2120' = 040 2650' = 050 3180' = 060 3710' = 070 4240' = 080 4770' = 090 5300' = 100 May contain blanks.
Direction from Reference	1	118	118	Character	Direction from the reference used. N - North S - South E - East W - West

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CRASH					
Description	Field Size	Position Start	Position End	Data Type	Value Description
Reference Prefix	1	119	119	Character	Reference location prefix. If a street is divided into North/South, or East/West sections, the prefix is required. N - North S - South E - East W - West
Reference Point	28	120	147	Character	Street Address, Milepost Marker, Intersection Where Crash Occurred
Reference Type (Designation)	2	148	149	Character	AV Avenue BO Boulevard CI Circle CO Court CR County Road DR Drive HE Height HI Highway IR Interstate LA Lane MP Mile Post PA Parkway PI Pike PL Place RO Road SQ Square SR State Route ST Street TE Terrace TR Trail US Federal US Route WA Way *Also see Appendix A for details
Reference Point Used	2	150	151	Number	Identification of type of reference point. 01 State Line 02 Intersection Of Two Streets 03 County Line 04 House Number 05 Township Boundary 06 Mile Post 07 Corporation Limit

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Description	Field Size	Position Start	Position End	Data Type	Value Description
					08 Place Name Without Reference 09 Driveway 10 Street Or Route Without Reference May contain blanks
Filler	16	152	167		
Private Property Indicator	1	168	168	Character	Did the report occurred on private property? Y Yes N No
Photos Taken	1	169	169	Character	Were any photos taken relative to the crash? Y Yes N No
Weather	2	170	171	Number	Weather conditions at the time of the crash. 01 Clear 02 Cloudy 03 Fog, Smog, Smoke 04 Rain 05 Sleet, Hail (Freezing Rain Or Drizzle) 06 Snow 07 Severe Crosswinds 08 Blowing Sand, Soil, Dirt, Snow 09 Other 10 Unknown
Road Conditions - Primary	2	172	173	Number	Road conditions at crash scene. Primary is the overall road condition at time of crash 01 Dry 02 Wet 03 Snow 04 Ice 05 Sand, Mud, Dirt, Oil, Gravel 06 Water (Standing, Moving) 07 Slush 10 Other 11 Unknown
Road Conditions - Secondary	2	174	175	Number	Road conditions at crash scene. Secondary is the location condition that contributed to crash. 01 Dry 02 Wet

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CRASH					
Description	Field Size	Position Start	Position End	Data Type	Value Description
					03 Snow 04 Ice 05 Sand, Mud, Dirt, Oil, Gravel 06 Water (Standing, Moving) 07 Slush <b>08 Debris**</b> 09 Rut, Holes, bumps, Uneven Pavement** 10 Other 11 Unknown <b>**Should be used for Secondary Road Conditions only.</b>
Light Conditions - Primary	1	176	176	Number	Lighting conditions at the time of the crash. Primary means normal conditions. 1 Daylight 2 Dawn 3 Dusk 4 Dark – Lighted Roadway 5 Dark – Roadway Not Lighted 6 Dark – Unknown Roadway Lighting 7 Glare 8 Other 9 Unknown
Light Conditions - Secondary	1	177	177	Number	Lighting conditions at the time of the crash. Secondary are causative conditions. 1 Daylight 2 Dawn 3 Dusk 4 Dark – Lighted Roadway 5 Dark – Roadway Not Lighted 6 Dark – Unknown Roadway Lighting 7 Glare 8 Other 9 Unknown
Road Contour	1	178	178	Number	Contour of road at crash scene. 1 Straight Level 2 Straight Grade 3 Curve Level 4 Curve Grade 5 Unknown

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Description	Field Size	Position Start	Position End	Data Type	Value Description
Occurrence	1	179	179	Number	Where the crash occurred. 1 On Roadway 2 On Shoulder 3 In Median 4 On Roadside 5 On Gore 6 Outside Trafficway 7 Unknown
Manner of Collision or Impact	1	180	180	Number	The manner in which crash occurred. 1 Not Collision Between Two 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
Type of Intersection	2	181	182	Number	The intersection code to indicate where the crash occurred 01 Not a Intersection 02 Four-way Intersection 03 T-Intersection 04 Y-intersection 05 Traffic circle/roundabout 06 Five-point, or more 07 On ramp 08 Off ramp 09 Crossover 10 Driveway 11 Railway grade crossing 12 Shared-use paths or trails 13 Unknown
School Bus Related	1	183	183	Number	Is a school bus is related to the crash? 1 No 2 Yes, School Bus Directly Involved 3 Yes, School Bus Indirectly Involved 4 Unknown
Work Zone Related	1	184	184	Number	Was crash in or related to a construction, maintenance or utility work

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Description	Field Size	Position Start	Position End	Data Type	Value Description
					zone? 1 No 2 Yes (Complete List Below) 3 Unknown If Yes, see also Type of Work Zone, Location of Crash in Work Zone and Workers Present
Location of Crash in Work Zone	1	185	185	Number	The location of the crash in relation to the work zone. 1 Before The First Work Zone Warning Sign 2 Advance Warning Area 3 Transition Area 4 Activity Area 9 Unknown May contain blanks
Type of Work Zone	1	186	186	Number	Indicates work zone type 1 Lane Closure 2 Lane Shift/Crossover 3 Work On Shoulder Or Median 4 Intermittent Or Moving Work 5 Other 9 Unknown May contain blanks
Workers Present	1	187	187	Number	Were workers present when crash occurred? 1 Yes 2 No 3 Unknown May contain blanks
Vehicle (Unit) Error	2	188	189	Number	The motorist/non-motorist which had the most causative bearing on the crash. Example: (Unit#) 01, 02, 03, 98, 99 etc. 99 No error 98 Animal in error May contain blanks
Date Crash Reported To Police Agency	8	190	197	Date	Numerical date on which the crash was reported to the police agency in the following format: MMDDYYYY May contain blanks
Time Crash Reported To Police Agency	4	198	201	Date	Time the crash was reported to the police agency using military (2400 clock) time.
Total Minutes	5	202	206	Number	Total number of minutes used to complete the investigation.

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Description	Field Size	Position Start	Position End	Data Type	Value Description
					May contain blanks
Officer Badge Number	5	207	211	Character	Investigative Officer's ID Number
Supplement Flag	1	212	212	Number	Was a report supplement sent? 1 Supplement Checked 2 No Supplement May contain blanks
Revision Date	4	213	216	Character	Revision date preprinted on upper right corner of the crash form.
Alcohol Related - Generated Field	1	217	217	Number	Was alcohol involved? 0 No 1 Yes -Alcohol/Drugs Suspected in Yes-Alcohol Suspected (2), Yes-HBD Not Impaired (3), or Yes- Alcohol/ Drugs Suspected (5) May contain blanks
Drug Related - Generated Field	1	218	218	Number	Were drugs involved? 0 No 1 Yes -Alcohol/Drugs Suspected includes Yes-Drugs Suspected (4) and Yes-Alcohol/ Drugs Suspected (5) May contain blanks
Total Injured - Generated Field	3	219	221	Number	Total number of people injured.
Total Killed - Generated Field	3	222	224	Number	Total number of people killed.
CD/Data File Volume Number	15	225	239	Character	Vendor assigned Volume Number to CD/data file; where images are stored
Animal Related - Generated Field	1	240	240	Number	Was an animal involved in the crash? 0 No Animal Involved 1 Animal - Deer 2 Animal - Farm 3 Animal - Other
Bicycle Related	1	241	241	Number	Was a bicycle involved? 0 No 1 Yes -Unit Type of Bicycle (37) or Pedalcyclist (39) Involved
Motorcycle Related	1	242	242	Number	Was a motorcycle involved? 0 No 1 Yes -Unit Type of Motorcycle (18) Involved ( <i>does NOT include Motorized Bicycle (19)</i> )

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Description	Field Size	Position Start	Position End	Data Type	Value Description
Speed Related	1	243	243	Number	Was excessive speed involved? 0 No 1 Yes -Circumstances of Exceeded Speed Limit (4) or Unsafe Speed (5) or Unit Speed greater than Posted Speed ( <i>when posted speed is not null or 0</i> )
Pedestrian Related	1	244	244	Number	Was a pedestrian involved? 0 No 1 Yes -Unit Type of Pedestrian (38) or Skater (40) Involved
Semi-Truck Related	1	245	245	Number	Was a semi truck involved? 0 No 1 Yes -Unit Type of Truck/Tractor-Boat (12), Tractor/Semi-Trailer (13), Tractor/Double-Short (14), Tractor/Double-Long (15) or Tractor/Triples (17) Involved
Small Truck Related	1	246	246	Number	Was a truck involved? 0 No 1 Yes -Unit Type Pickup (7), Panel/Van (8), Single Unit Truck; 2 Axles, 6 Tires (9), Single Unit Truck; 3 or More Axles (10), Truck/Trailer (11), Fifth Wheel Or Converter Dolly (16) Involved
Youth Related	1	247	247	Number	Was a driver age 16-25 involved? 0 No 1 Yes
Teen Related	1	248	248	Number	Was a p driver, occupant or pedestrian age 12-20 involved? 0 No 1 Yes
Drinking Driver < 21 Related	1	249	249	Number	Was a drinking driver under the age of 21 involved? 0 No 1 Yes
Senior Related	1	250	250	Number	Was a driver age 65 or over involved? 0 No 1 Yes
Latitude	11	251	261	Number	Latitude for GPS Location Identification Format: DD:MM:SS.SS D-Degrees, MM-Minutes, SS.SS-Decimal Seconds
Longitude	12	262	273	Number	Longitude for GPS Location Identification Format: DDD:MM:SS.SS

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CRASH					
Description	Field Size	Position Start	Position End	Data Type	Value Description
					DD-Degrees, MM-Minutes, SS.SS-Decimal Seconds
Road Surface	1	274	274	Number	Type of road surface where crash occurred: 1 Concrete 2 Blacktop, Bituminous, Asphalt 3 Brick/Block 4 Slug, Gravel, Stone 5 Dirt 6 Other 7 Unknown May contain blanks This data is only obtained on electronic applications.
Number of Lanes	1	275	275	Number	Total number of lanes in the roadway on which this motor vehicle was traveling. 1 1 (Lane) 2 2 (Lanes) 3 3 (Lanes) 4 4 (Lanes) 5 5 (Lanes) 6 6 (Lanes) 7 7 or more (Lanes) 8 Unknown (Number of Lanes) May contain blanks  For undivided highways: - Total "Thru" Lanes in Both Directions (excluding designated turn lanes). For divided highways: - Total "Thru" Lanes for the Roadway (on which the motor vehicle under consideration was traveling). See Appendix H for diagram of the trafficway.  This data is only obtained on electronic applications.
OH 2 Flag	1	276	276	Number	OH-2 (Diagram/Narrative Continuation) report associated. 1 = Yes 2 = No
OH 3 Flag	1	277	277	Number	OH-3 (Witness Statement) associated. 1 = Yes 2 = No

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Description	Field Size	Position Start	Position End	Data Type	Value Description
OH_1P_Flag	1	278	278	Number	OH-1P (Occupant Addendum) associated. 1 = Yes 2 = No
OH Other Flag	1	279	279	Number	Other (Local Report Used) 1 = Yes 2 = No
Reporting Agency	20	280	299	Character	Name of agency that has the responsibility for filing the crash report. <b>NCIC Lookup Table (AGENCY_NAME)</b>
Local Information	20	300	319	Character	Optional area for local crash information such as named areas, district#, precinct#, private property location, etc.
Narrative	2000	320	2319	Character	Brief and concise view of the crash explaining how and why the crash happened in simple, easy to understand English. Refer to units by number and be sure the narrative corresponds to the codes recorded in other field and crash diagram.
Dispatch Time	4	2320	2323	Number	The Military Time when law enforcement was dispatched to the scene of the crash (HHMI format).
Arrived Time	4	2324	2327	Number	The military time when law enforcement arrived at the scene of the crash (HHMI format).
Cleared Time	4	2328	2331	Number	The military time when law enforcement cleared the scene of the crash (HHMI format).
Other Minutes	4	2332	2335	Number	The actual number of minutes required to complete the crash investigation/report after leaving the crash scene. This would include additional time at a hospital, interviews, and/or notifications (HHMI format).
Officer First Name	15	2336	2350	Character	Investigating officer's first name.
Officer Middle Name	15	2351	2365	Character	Investigating officer's middle name.
Officer Last Name	25	2366	2390	Character	Investigating officer's last name.
Checked By	25	2391	2415	Character	Name, initials or badge number of person checking the report for completeness, accuracy and legibility.
Report Filed Date	8	2416	2423	Number	The date law enforcement concluded crash investigation and filed report. (MMDDYYYY format).
Report Taken At	1	2424	2424	Number	1 = Police agency 2 = Motorist
			<b>2424</b>		

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Column Name	Field Size	Position Start	Position End	Data Type	Value Description
Document Number	11	1	11	Character	Unique number assigned to each crash. It will be the same for the crash level record, unit level record and people level record. The first four numbers will designate the crash year. (Format YYYYPPNNNNNN)
Unit Number	2	12	13	Number	Sequential number assigned to uniquely identify each vehicle/ non-motorist involved in the crash
Number of Occupants	2	14	15	Number	Total Number Of Occupants Including The Driver 00 – No Occupants or Unknown
Insurance	1	16	16	Number	Is the vehicle covered by insurance? 1 – Insurance Name Present 2 – No Insurance 3 – None listed
Vehicle Year	4	17	20	Number	Year Assigned By Vehicle Manufacturer May contain blanks
Filler	2	21	22		Filler
License Plate State Issue	2	23	24	Character	Two digit code of license plate state of issuance. (Example: OH, KY, IN)
License Plate Number	8	25	32	Character	Alphanumeric Identifier Assigned By The State, Foreign Country, U.S. Government, Indian Nation
Towing Service	1	33	33	Number	Was the vehicle towed? 1 Yes 2 No
Vehicle- Non-motorist -From	1	34	34	Number	Direction from which the vehicle/non-motorist was traveling. 1 North 2 South 3 East 4 West 5 Northeast 6 Northwest 7 Southeast 8 Southwest 9 Unknown
Vehicle- Non-motorist -To	1	35	35	Number	Direction toward which the vehicle/non-motorist was traveling. 1 North 2 South 3 East 4 West 5 Northeast

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Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					6 Northwest 7 Southeast 8 Southwest 9 Unknown
Most Damaged Area	2	36	37	Number	The area of the vehicle that had the most damage. 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 15 Unknown
Damage Scale	1	38	38	Number	The severity of the vehicle damage. 1 None 2 Non-Functional 3 Functional Damage 4 Disabling Damage 5 Severe 6 Unknown
Type of Unit	2	39	40	Number	The type of vehicle/non-motorist unit. <u>Motorist</u> 01 Sub-Compact 02 Compact 03 Mid Size 04 Full Size 05 Minivan 06 Sport Utility Vehicle 07 Pickup 08 Panel/Van 09 Single Unit Truck; 2 Axles, 6 Tires

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Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					10 Single Unit Truck; 3 Or More Axles 11 Truck/Trailer 12 Truck Tractor (Bobtail) 13 Tractor/Semi-Trailer 14 Tractor/Double – Short 15 Tractor/Double – Long 16 Fifth Wheel Or Converter Dolly 17 Tractor/Triples 18 Motorcycle 19 Motorized Bicycle 20 School Bus 21 Church Bus 22 Public Bus 23 Other Bus 24 Police Vehicle 25 Fire Truck 26 Ambulance/Rescue 27 Taxi 28 Motor Home 29 Train 30 Farm Vehicle 31 Farm Equipment 32 Snowmobile 33 Construction Equipment 34 All Others <u>Non-motorist</u> 35 Animal W/Rider 36 Animal W/Buggy 37 Bicycle 38 Pedestrian 39 Pedalcyclist (bicycle, tricycle, unicycle, pedal car) 40 Skater 41 Other-non motorist (wheelchair, etc) 42 Unknown
Speed Detected	1	41	41	Number	The information used to report the speed of the vehicle. 1 Stated 2 Estimated Speed

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UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					May contain blanks
Unit Speed	3	42	44	Number	Speed Of Vehicle May contain blanks
Posted Speed	2	45	46	Number	Posted speed limit of road. May contain blanks
Pre-Crash Actions	2	47	48	Number	The motorist / non-motorist activity immediately prior to the crash. <b>Motorist</b> 01 Movements Essentially Straight Ahead 02 Backing 03 Changing Lanes 04 Overtaking/Passing 05 Turning Right 06 Turning Left 07 Making U-Turn 08 Entering Traffic Lane 09 Leaving Traffic Lane 10 Parked 11 Slowing Or Stopped In Traffic 12 Driverless 13 Other 14 Unknown <b>Non-Motorist Action</b> 15 Entering or crossing specified Location 16 Walking, running, jogging, playing, cycling 17 Working 18 Pushing vehicle 19 Approaching or leaving vehicle 20 Playing or working on vehicle 21 Standing 22 Other 23 Unknown
Traffic Control	2	49	50	Number	The type of traffic control device applicable to the motorist / non-motorist at crash location. 01 No Controls 02 Stop Sign 03 Yield Sign 04 Traffic Signal 05 Traffic Flashers

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UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					06 School Zone 07 Railroad Crossbucks 08 Railroad Flashers 09 Railroad Gates 10 Construction Barricade 11 Police Officer 12 Pavement Markings 13 Crosswalk Lines 14 Walk/Don't Walk 15 Traffic Control Device Inoperative, Missing, Obscured 16 Other 17 Not Reported
Contributing Circumstances, Motorist/Non-Motorist	2	51	52	Number	The actions of the motorist / non-motorist which contributed to the crash. <u>Motorist</u> 01 None 02 Failure to Yield 03 Ran Red Light, or Stop Sign 04 Exceeded Speed Limit 05 Unsafe Speed 06 Improper Turn 07 Left of Center 08 Followed Too Closely/ACDA 09 Improper Lane Change/ Drove Off Road/ Improper Passing 10 Improper Backing 11 Improper Start From Parked Position 12 Stopped or Parked Illegally 13 Operating Vehicle In Erratic, Reckless, Careless, Negligent Or Aggressive Manner 14 Swerving to Avoid (Due To Wind, Slippery Surface, Vehicle, Object, Non-Motorist in Roadway, Etc) 15 Failure to Control 16 Vision Obstruction 17 Driver Inattention 18 Fatigue/Asleep 19 Operating Defective Equipment 20 Load Shifting/Falling/Spilling 21 Other Improper Action

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UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					22 Unknown <u>Non-motorist</u> 23 None 24 Improper Crossing 25 Darting 26 Lying And/Or Illegally In Roadway 27 Failure To Yield Right Of Way 28 Not Visible (Dark Clothing) 29 Inattentive 30 Failure To Obey Traffic Signs, Signals, Or Officer 31 Wrong Side Of The Road 32 Other 33 Unknown
Vehicle Defects	2	53	54	Number	If Contributing Circumstances was "19=Operating Defective Equipment", then this is the type of defect that contributed to the crash. 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 May contain blanks
Sequence of Events - 1	2	55	56	Number	The events in sequence for this vehicle. <u>Non-Collision</u> 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

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Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					09 Ran Off Road Left
					10 Cross Median/Centerline
					11 Downhill Runaway
					12 Other Non-Collision
					13 Unknown Non-Collision
					<u>Collision w/Person,Vehicle,Or Object Not Fixed</u>
					14 Pedestrian
					15 Pedalcycle
					16 Railway Vehicle (E.G. 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 Other Movable Object
					24 Unknown Movable Object
					<u>Collision With Fixed Object</u>
					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 Median Barrier
					33 Highway Traffic Sign Post
					34 Overhead Sign Post
					35 Light/Luminaries Support
					36 Utility Pole
					37 Other Post, Pole Or Support
					38 Culvert
					39 Curb
					40 Ditch
					41 Embankment
					42 Fence
					43 Mailbox
					44 Tree

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UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					45 Other Fixed Object (Wall, Building, Tunnel, Etc) 46 Work Zone Maintenance Equipment 47 Unknown Fixed Object 48 Other 49 Unknown
Sequence of Events - 2	2	57	58	Number	See Sequence of Events – 1 May contain blanks
Sequence of Events - 3	2	59	60	Number	See Sequence of Events – 1 May contain blanks
Sequence of Events - 4	2	61	62	Number	See Sequence of Events – 1 May contain blanks
First Harmful Event	2	63	64	Number	Of the 4 listed Sequence of Events the one that was the first harmful event. (1-4) 5 Unknown
Most Harmful Event	2	65	66	Number	Of the 4 listed Sequence of Events the one that was the most harmful event. (1-4) 5 Unknown
Action	1	67	67	Number	The Action of Motorist/Non-motorist; action does not imply fault. Non-contact includes motorists / non-motorists that are directly involved in the crash with no contact between units. Non collision action includes a vehicle directly involved without striking or being struck by another unit (fire, immersion, overturning, jackknife, carbon monoxide poisoning, etc.) 1 - Non-contact 2 - Non-collision 3 - Striking 4 - Struck 5 - Both striking and struck 6 - Unknown
Emergency Use	1	68	68	Number	Indicates vehicles such as military, police, ambulance, fire, volunteer fire, etc., which are on an emergency response 1 No 2 Yes 3 Unknown
Point of Impact	2	69	70	Number	The vehicle position that was first struck. 01 None 02 Center Front 03 Right Front

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Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					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 15 Unknown
Striking Vehicle: Override/Underride	1	71	71	Number	Override-Striking vehicle slides over another vehicle. Underride- Striking vehicle slides under another vehicle. (Striking Vehicle Only) 1 No underride or override 2 Underride, compartment intrusion 3 Underride, no compartment intrusion 4 Underride, compartment intrusion unknown 5 Override, motor vehicle in transport 6 Override, other vehicle 7 Unknown if underride or override
Non-motorist Location Prior to Impact	2	72	73	Number	Non-Motorists location in the roadway prior to impact. 01 Marked crosswalk at intersection 02 At intersection but no crosswalk 03 Non-intersection crosswalk 04 Driveway access crosswalk 05 In roadway 06 Not in roadway 07 Median (but no on shoulder) 08 Island 09 Shoulder 10 Sidewalk 11 Within 10 feet of roadway (but not shoulder, median, Sidewalk, or island) 12 Beyond 10 feet of roadway(within trafficway) 13 Outside trafficway 14 Shared use paths or trails

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UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					15 Unknown May contain blanks
Truck/Bus - Cargo Body Type	2	74	75	Number	Non-Motorists location in the roadway prior to impact. 01 Not Applicable 02 Bus (Seats More Than 15 People, Including Driver) 03 Van/Enclosed Box 04 Grain/Chips/Gravel 05 Pole 06 Cargo Tank 07 Flatbed 08 Dump 09 Concrete Mixer 10 Auto Transporter 11 Garbage/Refuse 12 Other 13 Unknown
Truck/Bus - Weight (GVWR)	1	76	76	Number	Weight Rating Of Power Unit Of The Motor Vehicle 1 Less Than Or Equal To 10,000 Pounds 2 10,001 – 26,000 3 More Than 26,000 May contain blanks
Truck/Bus - CDL Class	1	77	77	Character	The CDL class of the driver. 1 Class A 2 Class B 3 Class C 4 Class M 5 Class D
Truck/Bus - Carrier Name	20	78	97	Character	Trucking Company/Carrier name.
Truck/Bus - Carrier Address (Street)	20	98	117	Character	Trucking Company/Carrier address.
Truck/Bus - Carrier City	15	118	132	Character	Trucking Company/Carrier city.
Truck/Bus - Carrier State	2	133	134	Character	Trucking Company/Carrier state.
Truck/Bus - Carrier Zip	9	135	143	Number	Trucking Company/Carrier zip. May contain blanks
Truck/Bus - US Dot	7	144	150	Character	Department of Transportation number associated with the vehicle.
Truck/Bus - ICC MC	6	151	156	Character	Interstate Commerce Commission Motor Carrier number associated with the vehicle.
Truck/Bus - PUCO	6	157	162	Character	Public Utilities Commission of Ohio number associated with the vehicle.

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
Truck/Bus - Hazard Materials Placard?	1	163	163	Number	Did the vehicle have hazardous materials placard ? 1 No 2 Yes 3 Unknown May contain blanks
Truck/Bus - Placard Number	4	164	167	Character	Four digit placard number or name taken from the middle of the diamond or the rectangle box
Truck/Bus - Number From Diamond	1	168	168	Number	One digit placard number from bottom of diamond May contain blanks
Truck/Bus - Hazardous Material Released	1	169	169	Number	Were hazardous materials released from cargo compartment? 1 No – Hazardous Materials Not Released 2 Yes – Hazardous Materials Released 3 Not Applicable 4 Unknown May contain blanks
Truck/Bus - Commerical Trailer Registration State	2	170	171	Character	State of tuck/bus registration.
Truck/Bus - Commerical Trailer Registration Year	4	172	175	Number	Year of truck/bus registration – may contain blanks.
Truck/Bus - Commercial Trailer License Plate Number	8	176	183	Character	Truck/Bus license plate number.
Vehicle Identification Number (VIN)	20	184	203	Character	Vehicle identification number.
Vehicle Make (VMA)	4	204	207	Character	The make given by the manufacturer to a line of vehicles. See Make/Model Lookup Table (MAKE_CODE)
Vehicle Model (VMO)	3	208	210	Character	The model name or numbers given by the manufacturer to a model of vehicle. See Make/Model Lookup Table (MODEL_CODE)
Owner First Name	15	211	225	Character	First name of the vehicle owner.
Owner Middle Name	15	226	240	Character	Middle name of the vehicle owner.
Owner Last Name	25	241	265	Character	Last name of the vehicle owner.
Owner Address	20	266	285	Character	Address of the vehicle owner.
Owner City	15	286	300	Character	City of the vehicle owner.
Owner State	2	301	302	Character	State of the vehicle owner.
Owner Zip	9	303	311	Number	Zip code of the vehicle owner.
Vehicle Color Code	3	312	314	Character	Color of the Vehicle
					SIL           Aluminum
					AME           Amethyst

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					BGE Beige
					BLK Black
					BLU Blue
					DBL Dark Blue
					LBL Light Blue
					BRZ Bronze
					BRO Brown
					MAR Burgundy
					CAM Camouflage
					COM Chrome
					CPR Copper
					CRM Cream
					GLD Gold
					GRY Grey
					GRN Green
					DGN Dark Green
					LGR Light Green
					CRM Ivory
					LAV Lavender
					MAR Maroon
					MVE Mauve
					MUL Multicolored
					ONG Orange
					PNK Pink
					PLE Purple
					RED Red
					SIL Silver
					COM Stainless Steel
					TAN Tan
					TPE Taupe
					TEA Teal
					TRQ Turquoise
					WHI White
					YEL Yellow
Insurance Company	20	315	334	Character	The insurance carrier and/or agent which insures the liability of the owner/operator. 'None' is valid if financial responsibility is not proven. Non-motorist use = 'NA'.

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

UNITS					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
Towing Service	20	335	354	Character	Name of the towing company that removed the vehicle.
Owner Phone	10	355	364	Number	Motorist/non-motorist vehicle owner' phone number.
Damage Area 02	1	365	365	Number	Indication that there was damage to the center front: of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked.
Damage Area 03	1	366	366	Number	Indication that there was damage to the right front of the vehicle 1 - Checked/Marked 2 - Unchecked/Not Marked
Damage Area 04	1	367	367	Number	Indication that there was damage to the right side of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked
Damage Area 05	1	368	368	Number	Indication that there was damage to the right rear of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked
Damage Area 06	1	369	369	Number	Indication that there was damage to the rear center of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked
Damage Area 07	1	370	370	Number	Indication that there was damage to the left center of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked
Damage Area 08	1	371	371	Number	Indication that there was damage to the left side of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked
Damage Area 09	1	372	372	Number	Indication that there was damage to the left front of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked
Damage Area 10	1	373	373	Number	Indication that there was damage to the top and windows of the vehicle. 1 - Checked/Marked 2 - Unchecked/Not Marked
Carrier Phone	10	374	383	Number	Carrier company's phone number.
			<b>383</b>		

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

PEOPLE					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
Document Number	11	1	11	Character	Unique number assigned to each crash. It will be the same for the crash level record, unit level record and people level record. The first four numbers will designate the crash year. (Format YYYYPPNNNNNN)
Unit Number	2	12	13	Number	Unit number of motorist/non-motorist
Type of Person	1	14	14	Character	Type of person. D Driver O Occupant P Pedestrian
Filler	9	15			Filler
Occupant/Driver First Name	15	24	38	Character	First Name of Occupant/Driver
Occupant/Driver Middle Name	15	39	53	Character	Middle Name of Occupant/Driver
Occupant/Driver Last Name	25	54	78	Character	Last Name of Occupant/Driver
Occupant/Driver Date of Birth	8	79	86	Date	Occupant/Driver Date of Birth MMDDYYYY May contain blanks
Occupant/Driver Age	3	87	89	Number	Age of Occupant/Driver May contain blanks
Occupant/Driver Gender (Sex)	1	90	90	Character	Gender of Occupant/Driver F Female M Male U Unknown
State of Issue License	2	91	92	Character	State that issued the driver's license.
Drivers License Number	10	93	102	Character	Driver's license number
Transported to Medical Facility By	1	103	103	Number	Mode of transportation to medical facility 1 Not Transported 2 EMS 3 Police 4 Other 5 Unknown May contain blanks
Seating Position	2	104	105	Number	The location of this occupant in, or outside of the vehicle prior to the crash. 01 Front Seat - Left Side (Motorcycle Driver) 02 Front Seat - Middle 03 Front Seat - Right Side

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

PEOPLE					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					04 Second Seat - Left Side (Motorcycle Passenger) 05 Second Seat – Middle 06 Second Seat – Right Side 07 Third Row - Left Side (Motorcycle Passenger/Side Car) 08 Third Row – Middle 09 Third Row - Right Side 10 Sleeper Section Of Cab (Truck) 11 Passenger In Other Enclosed Passenger Of Cargo Area (Non Trailing Unit Such As A Bus, Etc) 12 Passenger In Unenclosed Passenger Of Cargo Area 13 Trailing Unit 14 Riding On Vehicle Exterior (Non-Trailing Unit) 15 Other 16 Non-Motorist 17 Unknown
Safety Equipment Used	2	106	107	Number	Safety restraint equipment in use by the occupant at the time of the crash. <u>Motorist</u> 01 None Used – Vehicle Occupant 02 Shoulder Belt Only Used 03 Lap Belt Only Used 04 Shoulder And Lap Belt Used 05 Child Safety Seat Used 06 Helmet Used 07 Restraint Use Unknown <u>Non-motorist</u> 08 None Used 09 Helmet used 10 Protective pads used (elbows, knees, shins, etc) 11 Reflective clothing 12 Lighting 13 Other 14 Unknown
Air Bag Usage	1	108	108	Number	1 Not-Deployed 2 Deployed-Front 3 Deployed-Side 4 Deployed Both Front/Side 5 Not Applicable

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

PEOPLE					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					6 Deployment Unknown
Air Bag Switch Status	1	109	109	Number	Deployment status of an air bag protecting this occupant 1 On-Off Switch Not Present 2 Switch In On Position 3 Switch In Off Position 4 Unknown Position
Ejection	1	110	110	Number	Ejection status for occupant. 1 Not Ejected 2 Totally Ejected 3 Partially Ejected 4 Not Applicable 5 Unknown
Trapped	1	111	111	Number	Persons unable to free themselves or cannot be freed from the vehicle due to vehicle damage 1 Not trapped 2 Extricated By Mechanical Means 3 Freed By Non-Mechanical Means 4 Unknown
Injuries	1	112	112	Number	The injury severity of occupant involved in crash. 1 No Injury 2 Possible 3 Non-Incapacitating 4 Incapacitating 5 Fatal Injury 6 Unknown
Condition	1	113	113	Number	The motorist / non-motorist apparent condition at time of crash. 1 Apparently Normal 2 Physical Impairment 3 Emotional (E.G., Depressed, Angry, Disturbed) 4 Illness 5 Fell Asleep, Fainted, Fatigued, Etc 6 Under The Influence Of Medications/Drugs/Alcohol 7 Other 8 Unknown May contain blanks
Alcohol/Drugs Suspected	1	114	114	Number	The motorist / non-motorist apparent condition at time of crash. 1 None 2 Yes – Alcohol Suspected

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

PEOPLE					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					3 Yes – Had Been Drinking/Not Impaired 4 Yes – Drugs Suspected 5 Yes – Alcohol and Drugs Suspected 6 Unknown May Contain Blanks
Alcohol Test Status	1	115	115	Number	Status of the alcohol chemical test performed 1 None Given 2 Test Refused 3 Test Given, Contaminated Sample/Unusable 4 Test Given, Results Known 5 Test Given, Results Unknown 6 Unknown May contain blanks
Alcohol Test Type	1	116	116	Number	Specimen type for alcohol test performed. 1 None 2 Blood 3 Urine 4 Breath 5 Other May contain blanks
Actual Alcohol Test Value	3	117	119	Character	The three digits of any alcohol concentration known. <i>Example: An alcohol result of .14% would be displayed as 140.</i> May contain blanks
Drug Test Status	1	120	120	Number	Status of the drug chemical test performed. 1 None Given 2 Test Refused 3 Test Given, Contaminated Sample/Unusable 4 Test Given, Results Known 5 Test Given, Results Unknown 6 Unknown May contain blanks
Drug Test Type	1	121	121	Number	Indicate specimen type for drug test performed. 1 None 2 Blood 3 Urine 4 Other May contain blanks
Drug Test 1 Results	1	122	122	Number	Indication of 1 <sup>st</sup> drug presence through drug screening.

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

PEOPLE					
Column Name	Field Size	Position Start	Position End	Data Type	Value Description
					1 None 2 Marijuana 3 Cocaine 4 Opiates 5 Amphetamines 6 PCP 7 Other 8 Unknown at Time of Reporting May contain blanks
Drug Test 2 Results	1	123	123	Number	Indication of 2 <sup>nd</sup> drug presence through drug screening 1 None 2 Marijuana 3 Cocaine 4 Opiates 5 Amphetamines 6 PCP 7 Other 8 Unknown at Time of Reporting May contain blanks
Citation Number	11	124	134	Character	Citation number from traffic ticket.
Citation Local Code	1	135	135	Number	1 No 2 Yes May contain blanks
Occupant/Driver Address	20	136	155	Character	Address of motorist/non-motorist.
Occupant/Driver City	15	156	170	Character	City of motorist/non-motorist.
Occupant/Driver State	2	171	172	Character	State of motorist/non-motorist.
Occupant/Driver Zip	9	173	181	Number	Zip code of motorist/non-motorist.
Occupant/Driver Home Phone	10	182	191	Number	Motorist/ non-motorist home telephone number including area code.
Occupant/Driver Work Phone	10	192	201	Number	Motorist/ non-motorist work telephone number including area code.
Transported By	20	202	221	Character	Name of who transported the patient to the medical facility. Example: <i>Rescue 38.</i>
Injured Taken To	20	222	241	Character	The medical facility that received the patient.
Offense Charged	10	242	251	Character	The offense number charged to the motorist/non-motorist that directly related to the crash.
Offense Description	20	252	271	Character	The offense charged to motorist/non-motorist that directly related to the crash.
			<b>271</b>		

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

<b>CRASH_ODOT (Ohio Department of Transportation)</b>					
<b>Description</b>	<b>Field Size</b>	<b>Position Start</b>	<b>Position End</b>	<b>Data Type</b>	<b>Value Description</b>
<b>Document Number</b>	<b>11</b>	1	11	Number	Crash Document Number. Unique number assigned by Ohio Department of Public Safety.
<b>NLF ID</b>	<b>14</b>	12	25	Character	ODOT Route Identifier
<b>Jurisdiction</b>	<b>1</b>	26	26	Character	FIPS Lookup Table. May contain blanks.
<b>District</b>	<b>2</b>	27	28	Character	ODOT District
<b>County</b>	<b>3</b>	29	31	Character	Three letter county abbreviation assigned by ODOT.
<b>Route Type</b>	<b>2</b>	32	33	Character	Route prefix assigned by ODOT(i.e. IR, US, SR)
<b>Route Number</b>	<b>5</b>	34	38	Character	Route where the crash occurred.
<b>Route Suffix</b>	<b>1</b>	39	39	Character	1 character ODOT route suffix. If not IR, US or SR number, then should be R.
<b>Slm Log</b>	<b>4</b>	40	43	Number	ODOT Straight line mileage (aka, SLM, log, logpoint, etc.) Format 99.99.
<b>County True Log</b>	<b>6</b>	44	49	Number	ODOT County true mileage. Format: 9999.99
<b>State True Log</b>	<b>8</b>	50	57	Number	ODOT State true mileage. Format: 9999.99
<b>Btrs Link Beg Nbr</b>	<b>9</b>	58	66	Number	Unique identifier representing a specific point in space.
<b>Latitude</b>	<b>9</b>	67	76	Number	ODOT latitude Format: 99.999999
<b>Longitude</b>	<b>10</b>	77	85	Number	ODOT longitude Format: S999.99999
<b>Fips Code</b>	<b>5</b>	86	90	Character	ODOT FIPS code.
<b>Flip Indicator</b>	<b>1</b>	91	91	Character	ODOT flip record indicator 0 = original record 1 = original record, but duplicate exists in another file (mainframe only) 2 = in mainframe indicates a duplicate record. 2 and 3 = indicates the area is intersection or related and the street on and reference fields have been switched. X = indicates the original street on field was a named route which has been replaced with a route number.
<b>Probable Intersection Related</b>	<b>1</b>	92	92	Character	Possible intersection related flag note: driveways are not examined for intersection related (y = yes possibly intersection related,

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Crash Database Export Layout**

					n = no, does not seem to indicate intersection related).
<b>Crash Type</b>	<b>2</b>	93	94	Character	ODOT determined Crash Type
<b>Fatalities Found Count</b>	<b>3</b>	95	97	Number	Number of fatalities in crash.
<b>Injuries Found Count</b>	<b>3</b>	98	100	Number	Number of injuries in crash.
<b>Severity Generated</b>	<b>1</b>	101	101	Number	Crash severity.
<b>Units Found Count</b>	<b>2</b>	102	103	Number	Number of units in crash.
<b>Public Property Damage</b>	<b>1</b>	104	104	Character	Did the crash occur on private property? Y = Yes N = No
<b>Crash Location Text</b>	<b>28</b>	105	133		Location of crash
<b>Reference Point Text</b>	<b>28</b>	134	161		Reference to crash location
<b>Filler</b>	<b>1</b>	162	162		
		<b>162</b>			

**OHIO DEPARTMENT OF PUBLIC SAFETY  
Crash Database Export Layout**

## Changes to Crash Export Layout

### Since 08/07/2001:

<b>Date</b>	<b>Level</b>	<b>Description</b>
08/07/2001	CRASH	Animal Related field added
09/12/2001	CRASH	Animal Related field Value Description corrected (from 0...1, 0...3)
09/20/2001	CRASH	Distance Reference Chart added to Appendix A
10/31/2001	CRASH	Generated Fields added: Bicycle Related, Motorcycle Related, Speed Related, Pedestrian Related, Semi-Truck Related, Small Truck Related, Youth Related, Teen Related, DUI-21 Related and Senior Related.
11/15/2001	CRASH	Number fields which may contain blanks noted.
	UNITS	Number fields which may contain blanks noted.
	PEOPLE	Number fields which may contain blanks noted; Date of birth format noted (MMDDYYYY)
01/02/2002	CRASH	Alcohol and Drug Related field - more detailed descriptions added.
06/18/2002	UNITS	Notation on number of Occupants: 00 – No Occupants or Unknown.
06/19/2002	CRASH	New Latitude (DD:MM:SS.SS) and Longitude (DDD:MM:SS.SS) fields added because of increase in size; previous fields changed to "Filler"
07/02/2003	TITLE PAGE	Change in wording from For Use with Crash Years 2002 to For Use with Crash Years 2002 & 2003.
06/26/2004	TITLE PAGE	Change in wording from For Use with Crash Years 2004 to For Use with Crash Years 2004.
	CRASH	Addition of ACRS fields: Road Surface and Number of Lanes.
	UNITS	Addition of ACRS fields: VIN, Vehicle Model. Modification of Vehicle Make field.
06/28/2004	CRASHES	Addition to description for Number of Lanes.
04/29/2008	CRASH	Addition of fields: OH 2 Flag, OH 3 Flag, OH 1P Flag, OH Other Flag, Reporting Agency, Local Information, Narrative, Dispatch Time, Arrived Time, Cleared Time, Other Minutes, Officer First Name, Officer Middle Name, Officer Last Name, Checked By, Report Filed Date, Report Taken At.
	UNITS	Addition of fields: Owner First Name, Owner Middle Name, Owner Last Name, Owner Address, Owner City, Owner State, Owner Zip, Vehicle Color Code, Insurance Company, Towing Service, Owner Phone, Damage Area 02, Damage Area 03, Damage Area 04, Damage Area 05, Damage Area 06, Damage Area 07, Damage Area 08, Damage Area 09, Damage Area 10, Carrier Phone
	PEOPLE	Addition of fields: Address, City, State, Zip, Home Phone, Work Phone, Transported By, Injured Taken To, Offense Charged, Offense Description.
09/04/2008	UNITS	Carrier Name, Carrier Address, Carrier City, Carrier State, Carrier Zip, Carrier Phone, Owner Street Address, Owner Zip, Owner Phone will not be displayed if Unit Type 20 (School Bus), 24 (Police Vehicle), 25 (Fire Vehicle), or 26 (Rescue Vehicle).
09/04/2008	PEOPLE	Alcohol Test Type, Alcohol Test Status, Alcohol Test Value, Drug Test Type, Drug Test Status, Drug Test Result1, Drug Test Result2, Driver Street Address, Driver Zip, Driver Home Phone will not be displayed if Unit Type 20 (School Bus), 24 (Police Vehicle), 25 (Fire Vehicle), or 26 (Rescue Vehicle).
09/18/2008	ODOT	Updated Crash Odot Record Layout.

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Crash Database Export Layout**

**Appendix A Location Format**

Break out into two separate fields

Position 84-111      Crash Location (CRASH\_LOCATION)  
Position 112-113      Street Designation (CRASH\_LOCATION\_ROAD\_TYPE)

Crash Location

If Type of Location Point Used (TYPE\_LOCATION\_POINT\_USED) = 1 (named street)  
Street name in Crash location (CRASH\_LOCATION)

In street designation (CRASH\_LOCATION\_ROAD\_TYPE) use from the following list

AV = Avenue  
BO = Boulevard  
CI = Circle  
CO = Court  
DR = Drive  
HE = Heights  
HI = Highway  
LA = Lane  
PA = Parkway  
PI = Pike  
PL = Place  
RO = Road  
SQ = Square  
ST = Street  
TE = Terrace  
TR = Trail  
WA = Way

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Crash Database Export Layout**

**Appendix A Location Format (Continued)**

If Type of Location Point Used (TYPE\_LOCATION\_POINT\_USED ) = 2 (numbered street)

Change all numbered streets to a number example Fourth St change to '0004' in Crash Location (CRASH\_LOCATION)

In street designation (CRASH\_LOCATION\_ROAD\_TYPE ) use from the following list

AV = Avenue  
BO = Boulevard  
CI = Circle  
CO = Court  
DR = Drive  
HE = Heights  
HI = Highway  
LA = Lane  
PA = Parkway  
PI = Pike  
PL = Place  
RO = Road  
SQ = Square  
ST = Street  
TE = Terrace  
TR = Trail  
WA = Way

If Type of Location Point Used (TYPE\_LOCATION\_POINT\_USED ) = 3 (numbered route)

Report all numbered routes in numeric format example SR62 is reported as 0062 in the Crash Location (CRASH\_LOCATION)

In street designation (CRASH\_LOCATION\_ROAD\_TYPE ) use from the following list

IR = Interstates  
US = Federal US Routes  
SR = State Routes  
CR = Numbered County Road  
TR = Numbered Township Road

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**Appendix A Location Format (Continued)**

**Reference**

Break out in two separate fields

Position 120-147      Reference Point (REFERENCE\_POINT)  
Position 148-149      Reference Designation (REFERENCE\_TYPE)

If Reference Point Used =      01 (state line)  
(REFERENCE\_POINT\_USED) 03 (county line)  
   04 (house number)  
   05 (township boundary)  
   07 (corporation limit)  
   08 (place name without reference)  
   09 (driveway)  
   10 (street of route without reference)

Place name of reference point on Reference Point (REFERENCE\_POINT)  
Place spaces in Reference Designation (REFERENCE\_TYPE)

If Reference Point Used (REFERENCE\_POINT\_USED) = 02 (intersection of two streets)  
Place name of street in Reference Point (REFERENCE\_POINT)  
Place reference Designation use the listing under the location description (REFERENCE\_TYPE)

If Reference Point Used (REFERENCE\_POINT\_USED) = 06 (milepost)  
Place number of mile post in Reference Point (REFERENCE\_POINT) using the following example MP15 report as 0015  
Place 'MP' in Reference Designation (REFERENCE\_TYPE)

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**Distance from Reference (Miles from Reference):**

**DISTANCE CHART**

1ft - 53ft = 001  
54ft - 106ft = 002  
107ft - 159ft = 003  
160ft - 212ft = 004  
213ft - 265ft = 005  
266ft - 318ft = 006  
319ft - 371ft = 007  
372ft - 424ft = 008  
425ft - 477ft = 009  
478ft - 530ft = 010  
1/8 mile = 012  
1/5 mile = 017  
1/4 mile = 025  
1/3 mile = 033  
1/2 mile = 050  
1 mile = 100

1060' = 020  
1590' = 030  
2120' = 040  
2650' = 050  
3180' = 060  
3710' = 070  
4240' = 080  
4770' = 090  
5300' = 100

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