

CRASH DATABASE

**FULL IMPORT RECORD LAYOUT AND
CODE DOCUMENTATION**

**CRASH REPORT (OH-1)
SUBMISSION STRUCTURE**

Full Crash Data Electronic Submission

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Introduction

Crash submission from various data suppliers is done via paper or partial electronic methods at present. Ohio Department of Public Safety took an initiative to make this data transfer fully electronic and automated. Participating Law Enforcement Agencies can now supply crash data (OH-1) electronically over the internet using secure web service interface. This web service will accept entire crash files, including image files, and return the message of success/failure and any error messages to the Law Enforcement Agency in real time.

Instructions for Submission

Agencies will need to confirm validity of the crash upload files before supplying data through the web service. Agencies will supply a sample data file to our ECSVerify Web Service. Refer to the programming guide on page 47 of this document. Upon successful validation of the sample data, agencies will be provided access to the web service for automated data supply. The sample data validation can be done on the vendor's own timeframe. Agencies will need to provide ODPS test data results. Once this data is validated, agencies will be directed to get a secure access to ODPS web service by contacting Eram Kennedy at ekennedy@dps.state.oh.us. The agency can then start supplying data to ODPS.

Ohio Department of Public Safety will use an ECS Security Key to authenticate the participating agencies and communication will be done over a secure channel to protect the data. ODPS technical staff will help agencies set up the security requirements and provide support upon any technical problems relating to the communication. The web service's upload method will accept text files and image files in byte format for one crash and will send a response in an XML format.

According to W3C, a Web service is a "software system identified by a URI, whose public interfaces and bindings are defined and described using XML." A web service allows you to programmatically access distributed resources over the network using normal object-oriented calls. Web services are built upon common standards, such as HTTP and XML. Since web services are available through a standard interface that uses industry standard protocols, web services allow disparate systems to work together. In order to provide services to the Law Enforcement Agency community, the ECS System has implemented a web service.

This web service makes electronic crash data submission possible over the internet. At present crash data is being submitted to ODPS in various formats, e.g. part paper and part electronic. This web service will allow any authorized law enforcement agency to submit/upload their crash data electronically. To facilitate electronic communication for the data submission in this application a common data format or protocol has been designed. This data format is called the ECS format and is available in the "ECS File Layout.doc" document. The ECS format describes how data should be laid out in the text file with length of the text and permitted values. For example; Day of Crash should be in the format MON, TUE etc. and should be placed in slots 61 to 63 characters, in the text file on the crash line which begins with C.

Web Service Overview

Refer to our programming guide document. Please contact Eram Kennedy at ekennedy@dps.state.oh.us for more information on this.

The Upload web service will perform the tasks of; accepting an input data file and image file associated with the crash, performing

validations, inserting the data into the database and report back to the law enforcement agency. Web service response is always in an XML file.

A law enforcement agency must submit data to the ECS application in the form of a single text file and image (jpg) file associated with the crash. The Upload web service has two methods available for uploading a crash record:

- **UploadFileByteArray** Agencies can supply crash data in the form of file byte array using this method. Arguments accepted by this method are as given below:
 - DataFileByte – Crash record in filebytearray format
 - ImageFileByte – Image file in filebytearray format

For the image file naming convention and other specifications please refer the CRASH DIAGRAM SPECIFICATIONS section of this document. Text files and image files of any other type will cause an exception that will be recorded in an XML file that will be sent back to the law enforcement agency for correcting.

The text file should have data in a format that follows a pre-defined layout. The Record layout is defined in “Crash Submission Data Format” section below.

There is a set of Validations/Edits that the data in the text file must pass. The UploadFile method checks the data in the text file against these Validations/Edits. If the Data passes all the Validations/Edits successfully, the data is saved in the database and an appropriate success message is recorded in an XML file, else the error codes corresponding to each Validation/Edit are recorded in that file. This XML file will be sent back to the law enforcement agency for correcting. The set of Validations/Edits and their error codes can be found in the Business Rules Validation section of this document.

Web Service Credentials

The process to provide credentials for Law Enforcement Agency to access application is implemented using an ECS Security Key.

The web service will be accessible to authenticated Law Enforcement Agency. The Law Enforcement Agency will have to utilize their ECS Security Key on any of their machines used to submit crashes electronically. They will have to contact ODPS for the Key. Please contact Eram Kennedy at ekennedy@dps.state.oh.us for more information on this.

Crash Submission Data Format:

The Ohio Department of Public Safety (ODPS) will accept crash data in a text file format. The file format is defined below with crash, unit, people and witness related information in separate lines. Edit checks performed on each field are in the column called Validations. This provides the edit messages along with the description.

CRASH					
Field Description	New Form	Length	Start	End	Validations
Record Type	Code 'C' for Crash	1	1	1	
Local Report Number	Locally Assigned Report Number	14	2	15	LRN01 - LOCAL REPORT NUMBER cannot be more than 14 characters. LRN02 - LOCAL REPORT NUMBER is not entered. LRN03 - LOCAL REPORT NUMBER must be unique for agency and crash date.
Crash Severity	1 = Fatal Injury 2 = Injury 3 = Property Damage Only (PDO)	1	16	16	CSV01 - The CRASH SEVERITY value must be 1 - 3. CSV02 - If the CRASH SEVERITY is fatal, at least one Person must have a fatal injury. CSV03 - If the CRASH SEVERITY is <u>not</u> listed as fatal, there cannot be a person with a fatal injury. CSV04 - The DIAGRAM is required <u>EXCEPT</u> when UNIT IN ERROR = 98 and CRASH SEVERITY is 3 (PDO). CSV05 - If the CRASH SEVERITY is injury, at least one person must have an injury. CSV06 - If the CRASH SEVERITY is PDO, there cannot be any person with an injury or fatality.
Hit/Skip	1 = Solved 2 = Unsolved	1	17	17	HSK01 - HIT/SKIP must be 1-2 or blank. Boxes that may be left blank for the Hit/Skip Unit are: <u>Traffic Crash Report</u> PDO Under State Reportable Dollar Amount; School Bus Related; Work Zone Related. <u>Unit</u> Owner Name, Phone and Address, LP State, License Plate Number, Vehicle Identification Number, Vehicle Year, Make, Model, Color, Proof of Insurance Shown, Insurance Company, Policy Number, Towed By, Carrier Name, Address, City, State, Zip, Phone, US DOT, Vehicle Weight GVWR/GCWR, HM Placard ID

CRASH					
Field Description	New Form	Length	Start	End	Validations
					No., HM Class Number, Has HM Placard, Non-Motorist Location Prior to Impact, Type of Use, In Emergency Response, Special Function, Vehicle Defect, and Unit Speed. <u>Motorist/Non-Motorist/Occupant</u> Name, Date of Birth, Age, Gender, Address, EMS Agency, Medical Facility, Injured Taken To, DOT Compliant Motorcycle Helmet, Ejection, Trapped, OL State, Operator License Number, OL Class, No Valid OL, M/C End, Condition, Alcohol Test Value, Offense Charged, Offense Description, Citation Number, and Hands-Free Device Used. Other boxes should be completed with the number designating "Unknown" for the specific data requested.
Local Information	Optional area for local crash information such as named areas, district#, precinct#, private property location, etc.	20	18	37	No Edits.
Photos Taken	1 = Yes (check box on form) 2 = No	1	38	38	PHT01 - The PHOTOS TAKEN field must be 1 or 2 .
OH-2	1 = Yes (check box on form) 2 = No	1	39	39	OHF01 - OH-2 must be 1 or 2.
OH-3	1 = Yes (check box on form) 2 = No	1	40	40	OHF02 - OH-3 must be 1 or 2.
OH-1P	1 = Yes (check box on form) 2 = No	1	41	41	OHF03 - OH-1P must be 1 or 2.
Other	1 = Yes (check box on form) 2 = No	1	42	42	OHF04 - OTHER must be 1 or 2.
Under State Reportable \$ Amount	1=Yes (check box on form) 2=No	1	43	43	USR01 – Do not send crash reports to ODPS that are under the reporting threshold, except for OSHP crashes.
Private Property Indicator	1 = Yes (check box on form) 2 = No	1	44	44	PVP01 – Only OSHP PRIVATE PROPERTY crashes are to be submitted to ODPS.
Reporting Agency NCIC	The N.C.I.C agency identifier for the reporting agency.	5	45	49	NCI01 - The REPORTING AGENCY NCIC cannot be blank. NCI02 - The REPORTING AGENCY NCIC value was not found in the list of valid codes.
Reporting Agency Name	Report name of agency that has responsibility for filing the crash	30	50	79	RAN01 - REPORTING AGENCY NAME cannot be blank.

CRASH					
Field Description	New Form	Length	Start	End	Validations
	report.				
Number Of Units	Total of actual number of motor vehicles and non-motorists involved in crash.	2	80	81	NUT01 - The NUMBER OF UNITS filled out for the report must match the # UNITS entered.
Unit in Error	Indicate by unit number the motorist/non-motorist which had the most causative bearing on the crash. 98 = Animal in error 99 = Undetermined	2	82	83	UIE01 - The UNIT IN ERROR must be one of the units reported as being involved in the crash, an Animal (98), or Undetermined (99). UIE03 - The UNIT IN ERROR for the Crash must exist.
County	Indicate county where crash occurred using the county code.	2	84	85	COY01 - COUNTY where Crash occurred must be 1 – 88.
In City, Village, Township	1 = City 2 = Village 3 = Township	1	86	86	CVT01 - CITY, VILLAGE, TWP must be 1, 2 or 3.
Enter Name of City, Village, Township	The name of the political subdivision where crash occurred.	30	87	116	CTY01 - The CITY was not found for given FIPS and County.
Crash Date	Enter numerical date on which the crash occurred.	8	117	124	DOC01 - The CRASH DATE cannot be greater than the DATE CRASH REPORTED. DTC02 - The CRASH DATE must be a valid. MMDDYYYY
Time of Crash	Record time of the crash using military (2400 clock) time.	4	125	128	TOC02 - TIME OF CRASH (HOUR) must be 00-23. TOC03 - TIME OF CRASH (MINUTES) must be 00-59.
Day of Week	SUN = Sunday MON = Monday TUE = Tuesday WED = Wednesday THU = Thursday FRI = Friday SAT = Saturday	3	129	131	DOW01 – Invalid day of week reported. DOW02 – DAY OF WEEK not valid when compared to CRASH DATE.
FIPS Place Code	FIPS Place Code– Collected but not on form.	5	132	136	FPC02 - FIPS Place Code is invalid (FIPS_PLACE table) or blank. FPC01 – FIPS Code not found in county listed.
Latitude - Degrees/Minutes/Seconds	DD	11	137	147	LAT01 - LATITUDE MUST be in the following format. (DD:MM:SS.SS). LAT05- Latitude minutes must be between 1 and 59.

CRASH					
Field Description	New Form	Length	Start	End	Validations
Longitude - Degrees/Minutes/Seconds	DD	11	148	158	LON01 - LONGITUDE MUST be in the following format, (DD:MM:SS.SS). LON05- Longitude minutes must be between 1 and 59 .
Decimal Degrees – Latitude		9	159	167	LAT06 - LATITUDE MUST be in the following format. (DD.DDDDDD). Note: DD cannot hold a “-“or negative/minus sign. LAT02 - LATITUDE must be in correct format. LAT03 - The LATITUDE is not valid for the COUNTY #. LAT04 - When valid LATITUDE is provided, a valid LONGITUDE must be provided also.
Decimal Degrees – Longitude		9	168	176	LON06 - LONGITUDE MUST be in the following format, (DD.DDDDDD). Note: DD cannot hold a “-“or negative/minus sign. LON02 - When a valid LONGITUDE is provided, valid LATITUDE must be provided also. LON03 - Longitude must be in correct format. LON04 - The LONGITUDE is not valid for the COUNTY #.
Divided/Undivided Roadway	1 = Divided (check boxes on form) 2 = Undivided	1	177	177	DUR01 - DIVIDED/UNDIVIDED ROADWAY must be 1 or 2.
Divided Lane Direction of Travel	N = Northbound S = Southbound E = Eastbound W = Westbound	1	178	178	DDT01 – DIVIDED LANE DIRECTION OF TRAVEL must be N, S, E, W or blank. DDT02 – If DIVIDED/UNDIVIDED ROADWAY is 1 then DIVIDED LANE DIRECTION OF TRAVEL cannot be blank. DDT03– If DIVIDED/UNDIVIDED ROADWAY is 2 then DIVIDED LANE DIRECTION OF TRAVEL must be blank.
Number of Thru Lanes		2	179	180	NTL01 - NUMBER OF THRU LANES must be entered. NTL02 - NUMBER OF THRU LANES must be numeric. NTL03 – Enter the Number of Thru Lanes Only. Values 1 – 9 Only.
Location Route Type	IR - Interstate Route (The Turnpike is also an IR) US - Federal US Route SR - State Route CR - numbered County Route	2	181	182	LRT01 – If LOCATION ROUTE NUMBER is entered, LOCATION ROUTE TYPE must be entered. LRT02 – LOCATION ROUTE TYPE entered is invalid. LRT03 – LOCATION ROUTE TYPE is required field if LOCATION ROAD NAME is

CRASH					
Field Description	New Form	Length	Start	End	Validations
	TR - numbered Township Route				blank.
Location Route Number	The route number (and suffix if applicable) on which the crash actually occurred.	5	183	187	LOC01 – If LOCATION ROUTE TYPE is entered, LOCATION ROUTE NUMBER must be entered.
LocPrefix	N = North S = South E = East W = West	1	188	188	LOC02 - The LOC PREFIX value must be 'N','S','E', 'W' or blank LOC05 – If LOC PREFIX is entered, Location Road Name must be entered.
Location Road Name	The street name on which the crash actually occurred.	28	189	216	LOC04 - LOCATION ROAD NAME is a required field if LOCATION ROUTE NUMBER is blank.
Location Road Type	AL = Alley AV = Avenue BL = Boulevard CR= Circle CT = Court DR = Drive HE = Heights HW = Highway LA = Lane MP = Milepost PK = Parkway PI = Pike PL = Place RD = Road SQ = Square ST = Street TE = Terrace TL = Trail WA = Way	2	217	218	LRT04- LOCATION ROAD TYPE must be a valid entry; can be blank if LOCATION ROAD NAME is blank. LOC06 - The CRASH LOCATION ROAD TYPE must be valid. If Location Road Name entered then Location Road Type MP – Milepost is not a valid road type.
Distance from Reference	Distance from Reference Point where the crash occurred.	3	219	221	MFR01 - The DISTANCE FROM REFERENCE must be numeric, can only be blank if no DISTANCE FROM REFERENCE MEASUREMENT and no DIR FROM REFERENCE are entered. Sample Input: 478 Feet/Yard Reference - Reference Distance Ref Measurement = 2 or 3 054 Feet/Yard Reference - Reference Distance Ref Measurement = 2 or 3 .50 Half a Mile Reference - Reference Distance Ref Measurement = 1 1.0 One Mile Reference - Reference Distance Ref Measurement = 1 1.5 One and a half Mile - Reference Distance Ref Measurement = 1
Distance from Reference	Check Box on OH-1 that converts	1	222	222	DRM01 - DISTANCE FROM REFERENCE MEASUREMENT must be 1,2,3 or blank

CRASH					
Field Description	New Form	Length	Start	End	Validations
Measurement	electronically to: 1 = Miles 2 = Feet 3 = Yards (check boxes on form)				when DISTANCE FROM REFERENCE and DIR FROM REFERENCE are blank.
Dir from Reference	N = North S = South E = East W = West	1	223	223	RPT01 - The DIR FROM REFERENCE must be blank when DISTANCE FROM REFERENCE MEASUREMENT and DISTANCE FROM REFERENCE are blank.
Reference Route Type	IR - Interstate Route (the Turnpike is also an IR) US - Federal US Route SR - State Route CR - numbered County Route TR - numbered Township Route	2	224	225	RRT01 – If REFERENCE ROUTE NUMBER is entered, REFERENCE ROUTE TYPE must be entered. RRT02 – REFERENCE ROUTE TYPE entered is invalid. RRT03 – REFERENCE ROUTE TYPE is required if REFERENCE NAME is blank.
Reference Route Number	The reference route number (and suffix if applicable) which are being used as the crash location reference.	5	226	230	RRN01 – The REFERENCE ROUTE NUMBER must be numeric with the exception of the last character can be a letter and length cannot exceed 5. For example '45' is valid and '45A' is valid. "'4A5' is not valid. RRN02 – If REFERENCE ROUTE TYPE is entered, REFERENCE ROUTE NUMBER must be entered. REFERENCE ROUTE NUMBER cannot be the same as LOCATION ROUTE NUMBER.
Ref Road Prefix	N = North S = South E = East W = West	1	231	231	RPT02 – The REF ROAD PREFIX value is invalid. Must be a N, S, E, W or blank. RPT07 – If REF ROAD PREFIX is entered, Reference Name must be entered.
Reference Name	Street Name or House Number or Mile Post Number	28	232	259	RFN01 – REFERENCE ROAD NAME and Ref Prefix cannot be the same as LOCATION ROAD NAME and Location Prefix. REFERENCE ROAD NAME and Reference Road Type cannot be the same as LOCATION ROAD NAME and Location Road Type. RFN02 – REFERENCE NAME is a required field if REFERENCE ROUTE NUMBER is blank. RFN03 – If Reference Road Name is entered, Reference Road Type must be entered. Reference Road Name cannot be the same as LOCATION ROAD NAME. Reference Road Type Can be blank only if REFERENCE POINT USED = HOUSE NUMBER.
Reference Road Type	AL = Alley	2	260	261	RPT04 – The REFERENCE ROAD TYPE must be valid.

CRASH					
Field Description	New Form	Length	Start	End	Validations
	AV = Avenue BL = Boulevard CR= Circle CT = Court DR = Drive HE = Heights HW = Highway LA = Lane MP = Milepost PK = Parkway PI = Pike PL = Place RD = Road SQ = Square ST = Street TE = Terrace TL = Trail WA = Way				RPT08 – If Reference Road Type is entered, Reference Road Name must be entered. RPT12 – REFERENCE_POINT_USED is 2-Mile Post, REFERENCE_ROAD_TYPE must be MP.
Reference Point Used	Check Box on OH-1 that converts electronically to: 1 = Intersection 2 = Mile Post 3 = House Number	1	262	262	RPT11 – When Reference Point Used is 2-Mile Post, the reference must be numeric. For example, if reference is MP 15, the value submitted should be 0015 or MP 13.2 should be 013.2. RPT05 – When REFERENCE POINT USED is 3, the REFERENCE ROAD TYPE must be blank. RPT09 – If REFERENCE POINT USED is 2 – Mile Post, REF ROAD PREFIX must be blank. CONC28 – REFERENCE POINT USED must be 1, 2 and 3.
Crash Location	01 = Not an 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/Alley access	2	263	264	TOI01 – CRASH LOCATION value must be 01-12 or 99. TOI02 – If the CRASH LOCATION IS 11 (Railway Grade Crossing), any unit's TRAFFIC CONTROL must be 1, 2, 7, 8, 9, 11, 12, or 15. TOI03 – If the CRASH LOCATION is 7 (On-Ramp), any unit's TRAFFIC CONTROL must be 1, 2, 3, 4, 5, 10, 11, 12, 13, 14, 15, or 16. TOI04 – If the CRASH LOCATION is 8 (Off-Ramp), any unit's TRAFFIC CONTROL must be 1, 2, 3, 4, 5, 10, 11, 12, 13, 14, 15, or 16.

CRASH					
Field Description	New Form	Length	Start	End	Validations
	11 = Railway grade crossing 12 = Shared-use paths or trails 99 = Unknown				
Intersection Related	1 = Yes (check box on form) 2 = No	1	265	265	IRI01 – INTERSECTION RELATED must be 1 or 2.
Location of First Harmful Event	1 = On Roadway 2 = On Shoulder 3 = In Median 4 = On Roadside 5 = On Gore 6 = Outside Trafficway 9 = Unknown	1	266	266	OCC01 – LOCATION OF FIRST HARMFUL EVENT value must be 1-6 or 9.
Road Contour	1 = Straight Level 2 = Straight Grade 3 = Curve Level 4 = Curve Grade 9 = Unknown	1	267	267	RCO01 – The ROAD CONTOUR at the time of the crash must be valid (1- 4 or 9).
Road Conditions – Primary	01 = Dry 02 = Wet 03 = Snow 04 = Ice 05 = Sand, Mud, Dirt, Oil, Gravel 06 = Water (Standing, Moving) 07 = Slush 08 = Debris** 09= Rut, Holes, bumps, Uneven Pavement** 10 = Other 99 = Unknown **Secondary Road Conditions Only	2	268	269	PRC01 – The value for PRIMARY ROAD CONDITIONS at the time of the Crash must be valid (01 – 07, 10, or 99). PRC02 – PRIMARY ROAD CONDITION cannot be the same as SECONDARY ROAD CONDITIONS except 10 = Other or 99 = Unknown.
Road Conditions – Secondary	01 = Dry 02 = Wet 03 = Snow 04 = Ice 05 = Sand, Mud, Dirt, Oil, Gravel 06 = Water (Standing, Moving)	2	270	271	SRC01 – The value for SECONDARY ROAD CONDITIONS at the time of the crash is invalid; must be 01 – 10, or 99 or blank if SECONDARY ROAD CONDITIONS do not apply.

CRASH					
Field Description	New Form	Length	Start	End	Validations
	07 = Slush 08 = Debris** 09= Rut, Holes, bumps, Uneven Pavement** 10 = Other 99 = Unknown **Secondary Road Conditions Only				
Manner of Crash Collision/Impact	1 = Not Collision Between Two Motor 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	1	272	272	MOC01 – The MANNER OF COLLISION OR IMPACT must be 1- 9. MOC02 – If the MANNER OF COLLISION OR IMPACT for the crash is Backing (5); the PRE-CRASH ACTIONS for a motorist in the crash must be Backing. MOC03 – If the MANNER OF COLLISION OR IMPACT for the crash is from 2 to 8, there must be multiple motorists, not units. MOC04 – Not Collision Between Two Motor Vehicles in Transport (1) or Unknown (9) are the only valid choices for MANNER OF COLLISION OR IMPACT for one motorist crashes .
Weather	1 = Clear 2 = Cloudy 3 = Fog, Smog, Smoke 4 = Rain 5 = Sleet, Hail 6 = Snow 7 = Severe Crosswinds 8 = Blowing Sand, Soil, Dirt, Snow 9 = Other/Unknown	1	273	273	WTR02 – The value for WEATHER at the time of the crash is invalid. Or WEATHER value must be 1- 9.
Road Surface	1 = Concrete 2 = Blacktop, Bituminous, Asphalt 3 = Brick/Block 4 = Slag, Gravel, Stone 5 = Dirt 6 = Other	1	274	274	RSF01 – ROAD SURFACE must be 1 – 6.
Light Conditions – Primary	1 = Daylight 2 = Dawn 3 = Dusk 4 = Dark – Lighted Roadway 5 = Dark – Roadway Not Lighted 6 = Dark – Unknown Roadway Lighting 7 = Glare*	1	275	275	PLC01 – The value for PRIMARY LIGHT CONDITION at the time of the crash must be valid (1-6, 8, or 9). PLC02 – PRIMARY LIGHT CONDITIONS cannot be the same as SECONDARY LIGHT CONDITIONS except 8 = Other or 9 = Unknown. PLC03 – PRIMARY LIGHT CONDITION must be valid for TIME OF CRASH. (Dawn: 0400 to 0900, Daylight: 0600 to 2100, Dusk: 1600 to 2100).

CRASH					
Field Description	New Form	Length	Start	End	Validations
	8 = Other 9 = Unknown * Secondary Light Conditions only				
Light Conditions – Secondary	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 * Secondary Light Conditions only	1	276	276	SLC01 – The value for SECONDARY LIGHT CONDITIONS at the time of crash is invalid. SECONDARY LIGHT CONDITION must be between 1 and 9 or blank if SECONDARY LIGHT CONDITIONS do not apply. SLC02 – SECONDARY LIGHT CONDITIONS must be valid for TIME OF CRASH. (Dawn: 0400 to 0900, Daylight: 0600 to 2100, Dusk: 1600 to 2100).
School Zone Related	1 = Yes (check box on form) 2 = No	1	277	277	SZR01 – School Zone Related must be 1 or 2.
School Bus Related	1 = No 2 = Yes, School Bus Directly Involved 3 = Yes, School Bus Indirectly Involved (check boxes on form)	1	278	278	SBR01 – The value for SCHOOL BUS RELATED must be 1-3. SBR02 – If SCHOOL BUS RELATED is 2, at least one Unit’s SPECIAL FUNCTION must be 4 – School Bus and Unit Type must be 21 or 22. SBR03 – If Special Function is 4-School Bus, then SCHOOL BUS RELATED must be 2 or 3.
Work Zone Related	1 = Yes (check box on form) 2 = No If Yes, also complete Type of Work Zone, Location of Crash in Work Zone and Workers Present)	1	279	279	WZR01 – WORK ZONE RELATED value must be 1-2. WZR02 – The WORK ZONE TYPE must be between 1 and 5 for WORK ZONE RELATED =1.
Workers Present	1 = Yes (check box on form) 2 = No	1	280	280	WKR01- WORKERS PRESENT value must be 1-2. WKR02 Workers Present must be entered if WORK ZONE RELATED = 1.
Law Enforcement Present in Work Zone	1 = No (check boxes on form) 2 = Officer Present 3 = Law Enforcement Vehicle Only	1	281	281	PWZ01 – LAW ENFORCEMENT PRESENT value must be 1-3. PWZ02 – LAW ENFORCEMENT PRESENT IN WORK ZONE must be entered if WORK ZONE RELATED = 1.

CRASH					
Field Description	New Form	Length	Start	End	Validations
Type of Work Zone	1 = Lane Closure 2 = Lane Shift/Crossover 3 = Work On Shoulder Or Median 4 = Intermittent Or Moving Work 5 = Other	1	282	282	TWZ01 – Type of Work Zone must be 1 – 5 if Work Zone Related = 1. TWZ02 – Type of Work Zone can only be blank if WORK_ZONE_RELATED = 2.
Location of Crash in Work Zone	1 = Before The First Work Zone Warning Sign 2 = Advance Warning Area 3 = Transition Area 4 = Activity Area 5 = Termination Area	1	283	283	LWZ01– The LOCATION_OF_CRASH_IN_WORK_ZONE for a WORK ZONE RELATED Crash must be 1-5. LWZ02 – Location of crash in Work Zone can only be blank if WORK ZONE RELATED = 2.
Narrative	Brief and concise view of the crash,	2000	284	2283	NAR01 – NARRATIVE cannot be blank.
Report Taken By	1 = Police 2 = Motorist (check boxes on form)	1	2284	2284	RTB01 – The REPORT TAKEN BY field must be a 1-2. If Report Taken By is = 2 (Motorist) then rules checking will be consider/behave like hit/skip.
Supplement (Correction or Addition to an Existing Report Sent to ODPS)	1 = Supplement Box Checked (this is a supplement). 2 = Supplement Box Not Checked (this is not a supplement).	1	2285	2285	SUP01 – Supplement = 1 and crash with same NCIC, LR#, Date of Crash not found on Crash Database. CONC41 – SUPPLEMENT must be 1-2.
Date Crash Reported	The Date on which the call was placed notifying the police agency about the crash.	8	2286	2293	CRD01 – DATE CRASH REPORTED for the crash must be in MMDDYYYY format. DCR01 – DATE CRASH REPORTED cannot be greater than the Current Date.
Time Crash Reported	The military time at which the call was placed notifying the police agency about the crash.	4	2294	2297	CRT01 – TIME CRASH REPORTED (HOUR) must be 00-23. CRT02 – TIME CRASH REPORTED (MINUTES) must be 00-59.
Dispatch Time	The military time when law enforcement was dispatched to the scene of the crash.	4	2298	2301	DIS01 – DISPATCH TIME (HOUR) must be 00-23. DIS02 – DISPATCH TIME (MINUTES) must be 00-59.
Arrival Time	The military time when law enforcement arrived at the scene of the crash.	4	2302	2305	ARR01 – ARRIVAL TIME (HOUR) must be 00-23. ARR02 – ARRIVAL TIME (MINUTES) must be 00-59.
Time Crash Scene Cleared	The military time when law enforcement cleared the scene of the crash.	4	2306	2309	CLR01 – TIME CRASH SCENE CLEARED (HOUR) must be 00-23. CLR02 – TIME CRASH SCENE CLEARED (MINUTES) must be 00-59.
Other Investigation Time	The actual number of minutes required to complete the crash	4	2310	2313	OTH01 – OTHER INVESTIGATION TIME must be numeric if entered.

CRASH					
Field Description	New Form	Length	Start	End	Validations
	investigation/report after leaving the crash scene.				
Total Minutes	Number minutes to complete investigation.	4	2314	2317	TMN01 – TOTAL MINUTES to complete Investigation must be numeric.
Officer's Name	Investigating officer's name.	50	2318	2367	OFF01 – OFFICER'S NAME cannot be blank.
Officer Badge Number	Investigating Officer ID Number	6	2368	2373	BAD01 – OFFICER BADGE NUMBER cannot be blank.
Checked by	Name, initials or badge number of person checking the report for completeness, accuracy.	30	2374	2403	CHK01 – CHECKED BY cannot be blank.
Revision Date	Revision date preprinted on lower left corner of form. Report OH-1 (Rev. 01/12) = 0112	4	2404	2407	RVD – The REVISION DATE for the crash report is invalid.
Page of	For local use only.				Local use only not used by ODPS.
System Edits					<p>SCD01 – Internal Error Occurred While Processing Crash Record, Record Not Saved.</p> <p>YNA01 – Crashes for the year of crash supplied are not accepted now.</p> <p>REC01 – Multiple crash records found. Only one crash record permitted per transaction.</p> <p>CRL01 – Crash Record Length is invalid.</p> <p>CUP01 – Crash record found, person record found before unit. Record either out of order or unit record missing.</p> <p>DUP02 – Crash already accepted. Without supplement box checked.</p> <p>CNF01 – A Crash Record was not found that relates to the Unit (a unit record was entered with no crash information).</p>

Units					
Field Description	New Form	Length	Start	Finish	Validations
Record type	Code 'U' for Units.	1	1	1	
Reporting Agency NCIC	See CRASH – NCIC Description.	5	2	6	
Date/Time of Crash	See CRASH – DATE_OF_CRASH Description. MMDDYYYYHHMM	12	7	18	
Local Report Number	See CRASH – LOCAL_REPORT_NUM Description.	14	19	32	
Unit Number	Sequential 2-digit number starting with "01" for each unit (motorist / non-motorist) involved in the crash.	2	33	34	UTN01 – UNIT NUMBER is duplicated for a Crash. UTN02 – UNIT NUMBER must be a numeric value and greater than zero.
Owner First Name	Record the first name of vehicle owner.	15	35	49	
Owner Middle Name	Record the middle name of vehicle owner.	15	50	64	
Owner Last Name	Record the last name of vehicle owner.	25	65	89	OLN01 – Units, OWNER LAST NAME cannot be blank. For non-motorist and hit/skip unit this can be blank.
Owner Phone	Enter motorist/non-motorist telephone number.	10	90	99	OPH01 – OWNER PHONE must be 10 digits or blank.
Owner Address	Record the address of the vehicle owner.	20	100	119	OAD01 – OWNER ADDRESS cannot be blank. For non-motorist and hit/skip unit this can be blank.
Owner City	Record the city of the vehicle	15	120	134	OCY01 – Units, OWNER CITY cannot be blank. For non-motorist and

Units					
Field Description	New Form	Length	Start	Finish	Validations
	owner.				hit/skip unit this can be blank.
Owner State	Record the state of the vehicle owner.	2	135	136	OST01 – Units, OWNER STATE must be valid 2 character code and cannot be blank. For non-motorist and hit/skip unit this can be blank.
Owner Zip	Record the zip of the vehicle owner.	9	137	145	UZN01 – Units, OWNER ZIP in unit record may be alpha and/or numeric; cannot be blank. For non-motorist and hit/skip unit this can be blank. UNZ02 – Owner zip code length. For US addresses the number of characters in zip code must be either 5 or 9.
License Plate State Issue	Write the 2 digit code of driver license state of issuance. (Example: OH, KY, IN)	2	146	147	LPS01 – LICENSE PLATE STATE ISSUE must be valid 2 character code or blank (see state list provided by ODPS). LPS02 – If LICENSE PLATE STATE ISSUE entered, a valid LICENSE PLATE NUMBER must be entered unless unit is a HIT/SKIP vehicle.
License Plate Number	Enter the license plate number of the vehicle supplying the power.	10	148	157	LPN01 – If LP # entered, a valid LP STATE must be entered otherwise a HIT/SKIP must be entered.
Vehicle Identification Number	Vehicle Identification Number	17	158	174	VIN01 – VIN cannot be blank for a Motor Vehicle. VIN02- VIN is Invalid.
Number Occupants	Total 2-digit number of occupants in or on this unit involved in the crash. (Example 01, 02, 03).	2	175	176	NOC01 – The # OF OCCUPANTS must be numeric (0-99). NOC02 – The # OF OCCUPANTS reported for Unit is greater than the number of occupants found. NOC03 – Person record information is required. OCC02: The number of People filled out for the Unit must be equal to the # OF OCCUPANTS entered on unit.
Damage Scale	1 = None 2 = Minor 3 = Functional Damage 4 = Disabling Damage 9 = Unknown	1	177	177	DMS01 – DAMAGE SCALE must be 1-4, or 9.
Damaged Area – Center Front	Shaded area of image (02) – Center Front 1 = Checked/Marked 2 = Unchecked/Not Marked	1	178	178	DMG02 – DAMAGED AREA 02 value must be between 1 and 2.
Damaged Area – Right Front	Shaded area of image (03) –	1	179	179	DMG03 – DAMAGED AREA 03 value must be between 1 and 2.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	Right Front 1 = Checked/Marked 2 = Unchecked/Not Marked				
Damaged Area – Right Side	Shaded area of image (04) – Right Side 1 = Checked/Marked 2 = Unchecked/Not Marked	1	180	180	DMG04 – DAMAGED AREA 04 value must be between 1 and 2.
Damaged Area – Right Rear	Shaded area of image (05) – Right Rear 1 = Checked/Marked 2 = Unchecked/Not Marked	1	181	181	DMG05 – DAMAGED AREA 05 value must be between 1 and 2.
Damaged Area – Rear Center	Shaded area of image (06) – Rear Center 1 = Checked/Marked 2 = Unchecked/Not Marked	1	182	182	DMG06 – DAMAGED AREA 06 value must be between 1 and 2.
Damaged Area – Left Center	Shaded area of image (07) – Left Center 1 = Checked/Marked 2 = Unchecked/Not Marked	1	183	183	DMG07 – DAMAGED AREA 07 value must be between 1 and 2.
Damaged Area – Left Side	Shaded area of image (08) – Left Side 1 = Checked/Marked 2 = Unchecked/Not Marked	1	184	184	DMG08 – DAMAGED AREA 08 value must be between 1 and 2.
Damaged Area – Left Front	Shaded area of image (09) – Left Front 1 = Checked/Marked 2 = Unchecked/Not Marked	1	185	185	DMG09 – DAMAGED AREA 09 value must be between 1 and 2.
Damaged Area – Top and Windows	Shaded area of image (10) – Top and Windows 1 = Checked/Marked 2 = Unchecked/Not Marked	1	186	186	DMG10 – DAMAGED AREA 10 value must be between 1 and 2.
Vehicle Year	Enter the model year of the vehicle using 4 digits.	4	187	190	YAR01 – The YEAR the unit was manufactured is not numeric or blank. YAR02 – The Year the unit was manufactured is < 1850. YAR03 – The Year the unit was manufactured cannot be greater than two years from current year. CONU38 – VEHICLE YEAR must be between 1850 and 2050 if UNIT TYPE is 01-09 or 12-22.

Units					
Field Description	New Form	Length	Start	Finish	Validations
Vehicle Make (VMA)	The make given by the manufacturer to a line of vehicles.	4	191	194	MAK01 – MAKE reported is not found in the table provided by ODPS when UNIT TYPE is 01-09 or 12-22.
Vehicle Model (VMO)	The model name or numbers given by the manufacturer to a model of vehicle.	3	195	197	MOD01 – MODEL reported is not found in the table provided by ODPS when UNIT TYPE is 01-09 or 12-22.
Vehicle Color	List the color of the vehicle using general colors.	3	198	200	COL01 – COLOR reported is not found in the table provided by ODPS when UNIT TYPE is 01-09 or 12-22.
Proof of Insurance Shown	1 = Yes 2 = No (check box on form)	1	201	201	INS01 – The INSURANCE value must be a 1 or 2 when UNIT TYPE is 01-09 or 12-22.
Insurance Company	The insurance carrier and/or agent which insures the liability of the owner/operator.	20	202	221	ICO01 – If PROOF OF INSURANCE SHOWN is 1 (Yes), the INSURANCE COMPANY must be entered.
Policy Number	Policy number of Insurance.	15	222	236	PNI01 – If PROOF OF INSURANCE SHOWN = 1, the Policy Number may be entered.
Towed By	If vehicle was removed by a wrecker, record the name of the towing company.	20	237	256	TWS01 – If the unit was towed so the TOWED BY is required.
Carrier Name	Enter the carrier's company name.	20	257	276	CCN01– CARRIER NAME cannot be blank if commercial vehicle. CARRIER NAME can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable.
Carrier Address	Enter the carrier's company street address.	20	277	296	CCA01 – CARRIER ADDRESS cannot be blank if commercial vehicle. CARRIER ADDRESS can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable.
Carrier City	Enter the carrier's company city.	15	297	311	CCC01 – CARRIER CITY cannot be blank if Commercial Vehicle. CARRIER CITY can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable.
Carrier State	Enter the carrier's company state.	2	312	313	CAD01 – If commercial vehicle, CARRIER STATE must be valid. CCS01 – Carrier State cannot be blank if commercial vehicle. CARRIER STATE can be blank if Vehicle Weight GVWR/GCWR = 1-Less

Units					
Field Description	New Form	Length	Start	Finish	Validations
					Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable.
Carrier Zip	Enter the carrier's company zip.	9	314	322	CAD02 – CARRIER ZIP may be an alpha and/or numeric value if commercial vehicle or blank. CARRIER ZIP can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable.
Carrier Phone	Enter the carrier's company phone number.	10	323	332	CCP01 – CARRIER PHONE is invalid, must be 10 digits if commercial vehicle or blank.
US DOT	The US DOT census number of carrier	7	333	339	DOT01 – Commercial crashes must have US DOT completed only if the Unit's Type of Use = 2 (Commercial) and if the Cargo Body Type is between 02-15 or 99.
HM Placard Id No	4- digit placard number or name taken from the middle of the diamond or the rectangle box.	4	340	343	PLA01 – HM PLACARD ID NO is invalid should be 4 digit code on placard if commercial vehicle.
HM Class Number	1-digit placard number from bottom of diamond.	1	344	344	DIA01 – HM CLASS NUMBER from the HAZARDOUS MATERIALS PLACARD is required if commercial vehicle (1-digit placard number from bottom of diamond, may contain blanks). DIA02 – HM CLASS NUMBER must be numeric if commercial vehicle or blank DIA03 – If HAS HM PLACARD = 1, then HM CLASS NUMBER must be entered.
Weight	1 = Less Than Or Equal To 10,000 Pounds 2 = 10,001 – 26,000 3 = More Than 26,000	1	345	345	GVW01 – GVWR value must be 1-3 or blank only if non-commercial.
Hazardous Material Released	1 = Yes (check box on form) 2 = No	1	346	346	COUN19 – HAZARDOUS SPILL must be 1 -2.(must have a unit type of 1-8, 12-20).
Cargo Body Type	01 = No Cargo Body Type/ Not	2	347	348	CBT01 – If the CARGO BODY TYPE is 2, the UNIT TYPE must be 21.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	Applicable 02 = Bus/Van (9- 15 Seats,inc. Driver) 03 = Bus (16+ inc. Driver) 04 = Vehicle Towing Another Motor Vehicle 05 = Logging 06 = Intermodal Container Chassis 07 = Cargo Van/Enclosed Box 08 = Grain/Chips/Gravel 09 = Pole 10 = Cargo Tank 11 = Flat Bed 12 = Dump 13 = Concrete Mixer 14 = Auto Transporter 15 = Garbage/Refuse 99 = Other/ Unknown				CBT02 – If the CARGO BODY TYPE is 3, the UNIT TYPE must be 22. CBT03 – CARGO BODY TYPE must be 01-15, or 99.
Trafficway Description	1 = Two-Way, Not Divided 2 = Two-Way, Not Divided, Continuous Left Turn Lane 3 = Two-Way, Divided, Unprotected (Painted or Grass >4 Feet) Median 4 = Two-Way, Divided, Positive Median Barrier 5 = One-Way Trafficway	1	349	349	TWD01- Trafficway Description must be 1-5. Can be blank only if Unit's Pre-Crash Actions = 10 (Parked) TWD02 – If Divided/Undivided Roadway is 1 (divided) then at least one Unit's Traffic way Description value must be 3 or 4. TWD03 – If Divided/Undivided Roadway is 2 (undivided) then at least one Unit's Trafficway Description value must be 1, 2 or 5.
Hit/Skip Unit	1 = Yes (check box on form) 2 = No	1	350	350	HAR01- HIT/SKIP must be 1 or 2. HAR02 – If HIT/SKIP = 1 or 2 at least one vehicle must be HIT/SKIP. HAR03 – If HIT/SKIP in the Unit Section = 1 , then HIT/SKIP in the Crash Section cannot be blank.
Non-Motorist Location Prior to Impact	01 = Intersection – Marked Crosswalk 02 = Intersection – Unmarked Crosswalk 03 = Intersection – Other	2	351	352	NML01 – NON-MOTORIST LOCATION prior to impact must be valid 01-12, or 99. Can be Blank for Motorist Unit. NML02 – If Unit Type is 23-27 then Non-Motorist Location Prior to Impact must be completed. Otherwise leave Non-Motorist Location Prior to

Units					
Field Description	New Form	Length	Start	Finish	Validations
	04 = Midblock – Marked Crosswalk 05 = Travel Lane – Other Location 06 = Bicycle Lane 07 = Shoulder/Roadside 08 = Sidewalk 09 = Median/Crossing Island 10 = Driveway Access 11 = Shared Use Paths or Trails 12 = Non-Trafficway Area 99 = Other/Unknown				Impact blank.
Type of Use	1 – Personal 2 – Commercial 3 – Government	1	353	353	TOW01 – TYPE OF USE must be 1, 2 or 3. Can be blank only if Unit’s Pre-Crash Actions = 10 (Parked).
In Emergency Response	1 = Yes 2 = No	1	354	354	EMU01 – IN EMERGENCY RESPONSE value must be 1-2. For non-motorist and hit/skip this value can be blank.
UNIT TYPE	<u>Passenger Vehicles (< 9 seats)</u> N - Sub-Compact 02 – Compact 03 – Mid Size 04 – Full Size 05 – Minivan 06 – Sport Utility Vehicle 07 – Pickup 08 – Van 09 – Motorcycle 10 – Motorized Bicycle 11 – Snowmobile/ATV 12 – Other Passenger Vehicle <u>Med/Heavy Trucks or Combination Units</u> <u>GVWR/GCWR > 10,000 lbs.</u> 13 – Single Unit Truck or Van 2 Axles, 6 Tires	2	355	356	TOU01 – The UNIT TYPE is Invalid 01-27, or 99. TOU02 – 10-Sleeper Section of Cab is a valid SEATING POSITION <u>only</u> for UNIT TYPES (16, 17, 18,19). TOU03 – UNIT TYPE of 26-Pedestrian/Skater must have a Person Type of ‘p’ TOU10 – If UNIT TYPE is 09, 10 or 11 then SAFETY EQUIPMENT for the Motorist must be 01 or 08.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	14 – Single Unit Truck; 3+ Axles 15 – Single Unit Truck / Trailer 16 – Truck/Tractor (Bobtail) 17 – Tractor/Semi-Trailer 18 – Tractor/Doubles 19 – Tractor/Triples 20 – Other Med/Heavy Vehicle <u>Bus/Van/Limo (9 or more, including Driver)</u> 21 – Bus /Van (9-15 Seats Including the Driver) 22 – Bus (16+ Seats, Including the Driver) <u>Non-Motorist</u> 23 – Animal with Rider 24 – Animal with Buggy, Wagon, Surrey 25 – Bicycle/Pedacyclist 26 – Pedestrian/Skater 27 – Other Non-Motorist 99 – Unknown or Hit/Skip				<i>For Non-Motorist, these values can be Blank:</i> Owner Name, Owner Phone, Owner Address, Driver Name, Driver Phone, Driver Address, Damage Scale, Damage Area, LP State, License Plate Number, VIN, Vehicle Year, Vehicle Make, Vehicle Model, Vehicle Color, Towed By, Carrier Name, Carrier Address, Carrier City, Carrier State, Carrier Zip, Carrier Phone, US DOT, Vehicle Weight, Hazardous Material Placard ID, Hazardous Material Released, Type of Use, In Emergency Response, Has Hazardous Material Placard, Special Function, Most Damaged Area, Impact Area, Vehicle Defects.
Has HM Placard	1 = Yes (check box on form) 2 = No	1	357	357	HMP02 – Has HM Placard must be 1 or 2
Special Function	01 = None 02 = Taxi 03 = Rental Trucks (over 10,000 lbs.) 04 = Bus – School (Public or Private) 05 = Bus – Transit 06 = Bus – Charter	2	358	359	SFN01 – SPECIAL FUNCTION must be 01 – 22. SFN02 – SPECIAL FUNCTION of 04 – 08 must have a UNIT TYPE of 21 or 22.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	07 = Bus – Shuttle 08 = Bus – Other 09 = Ambulance 10 = Fire 11 = Highway/Maintenance 12 = Military 13 = Police 14 = Public Utility 15 = Other Government 16 = Construction Equip. 17 = Farm Vehicle 18 = Farm Equipment 19 = Motorhome 20 = Golf Cart 21 = Train 22 = Other (explain in narrative)				
Most Damaged Area	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 99 = Unknown	2	360	361	MDA01 – MOST DAMAGED AREA must be 01 – 14, 99.
Impact Area	01 = None 02 = Center Front 03 = Right Front 04 = Right Side 05 = Right Rear 06 = Rear Center 07 = Left Rear	2	362	363	POI01 – IMPACT AREA must be 1-14, 99.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	08 = Left Side 09 = Left Front 10 = Top And Windows 11 = Undercarriage 12 = Load/Trailer 13 = Total (All Areas) 14 = Other 99 = Unknown				
Action	1 = Non-contact 2 = Non-collision 3 = Striking 4 = Struck 5 = Both striking and struck 9 = Unknown	1	364	364	ACT01 – ACTION must be 1-5, or 9
Pre-Crash Actions	<u>Motorist</u> 01 = Straight Ahead 02 = Backing 03 = Changing Lanes 04 = Overtaking/Passing 05 = Making Right Turn 06 = Making Left Turn 07 = Making U-Turn 08 = Entering Traffic Lane 09 = Leaving Traffic Lane 10 = Parked 11 = Slowing or Stopped In Traffic 12 = Driverless 13 = Negotiating a Curve 14 = Other Motorist Action <u>Non-Motorist Action</u> 15 = Entering or Crossing Specified Location 16 = Walking, Running, Jogging, Playing, Cycling 17 = Working 18 = Pushing vehicle 19 = Approaching or Leaving Vehicle	2	365	366	PCA01 – PRE-CRASH ACTIONS is invalid. Must be 01-21, or 99. PCA02 – If a parked car is in the SEQUENCE OF EVENTS for a unit, the PRE-CRASH ACTIONS for another unit on the crash must be 10-Parked. PCA03 – Vehicle with PRE-CRASH ACTION of 10 –Parked should only have person type ‘O’ – Occupant (no drivers in parked vehicles). PCA04 – If UNIT TYPE is 01-22, PRE-CRASH ACTIONS must be 01-14, or 99. PCA05 – If UNIT TYPE is 23-27, PRE-CRASH ACTIONS must be 15-21, or 99. PCA06 – Parked Unit count must be less than Total Units involved in the crash.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	20 = Standing 21 = Other Non-Motorist Action 99 = Unknown				
Contributing Circumstances, Motorist/Non-Motorist	<u>Motorist</u> 01 = None 02 = Failure to Yield 03 = Ran Red Light 04 = Ran Stop Sign 05 = Exceeded Speed Limit 06 = Unsafe Speed 07 = Improper Turn 08 = Left of Center 09 = Followed Too Closely/ACDA 10 = Improper Lane Change/ Passing / Off Road/ 11 = Improper Backing 12 = Improper Start From Parked Position 13 = Stopped or Parked Illegally 14 = Operating Vehicle Negligent Manner 15 = Swerving to Avoid (Due To External Conditions) 16 = Wrong Side or Wrong Way 17 = Failure to Control 18 = Vision Obstruction 19 = Operating Defective Equipment 20 = Load Shifting/Falling/Spilling 21 = Other Improper Action <u>Non-motorist</u> 22 = None 23 = Improper Crossing 24 = Darting 25 = Lying And/Or Illegally In	2	367	368	<p>CCR05 – For the CONTRIBUTING CIRCUMSTANCES of Improper Turn(7), the only valid PRE-CRASH ACTIONS are 5, 6 or 7.</p> <p>CCR06 – For the CONTRIBUTING CIRCUMSTANCES of Parked Illegally(13), the only valid PRE-CRASH ACTIONS are 10.</p> <p>COUN35 – If Contributing Circumstances is coded as a “19=Operating Defective Equipment”, then record the type of defect that contributed to the crash in VEHICLE DEFECTS.</p> <p>CCR08 – The CONTRIBUTING CIRCUMSTANCES value must be 22 – 31, or 99 for a Non-Motorist.</p> <p>CCR02 – CONTRIBUTING CIRCUMSTANCES for Motorist/Non-Motorist is Invalid must be 01-31, or 99.</p> <p>CCR04 – For the CONTRIBUTING CIRCUMSTANCES of Improper Backing (11), the only valid PRE-CRASH ACTION is 2.</p> <p>CCR09 – If UNIT TYPE is 01-22, CONTRIBUTING CIRCUMSTANCES must be 01-21, or 99.</p>

Units					
Field Description	New Form	Length	Start	Finish	Validations
	Roadway 26 = Failure To Yield Right Of Way 27 = Not Visible (Dark Clothing) 28 = Inattentive 29 = Failure To Obey Traffic Signs/Signals/Officer 30 = Wrong Side Of The Road 31 = Other Non-Motorist 99 = Unknown				
Contributing Circumstances, Motorist/Non-Motorist Secondary	See Values in Contributing Circumstances, Motorist/Non-Motorist Primary	2	369	370	CCR01 – Contributing Circumstances, Motorist/Non-Motorist Secondary cannot be the same as Contributing Circumstances Motorist/Non-Motorist. See CONTRIBUTING CIRCUMSTANCES.
Vehicle Defects	Can use for any crash, not just the ones that select 19 in Contributing Circumstances. 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	2	371	372	VED01 – Value for VEHICLE DEFECTS must be 01 – 11 or blank. VED02 – If CONTRIBUTING CIRCUMSTANCES PRIMARY or SECONDARY is 19 – Operating Defective Equipment, VEHICLE DEFECTS cannot be blank.
Sequence Of Events – 1	<u>Non-Collision EVENTS</u> 01 = Overturn/Rollover 02 = Fire/Explosion 03 = Immersion 04 = Jackknife 05 = Cargo/Equipment Loss Or	2	373	374	SEQ01 – If there is a 26 –Pedestrian/Skater UNIT TYPE in the Crash And Action3-STRIKING or 4-STRUCK or 5-STRIKING/STRUCK 14-Pedestrian must be in the SEQUENCE OF EVENTS for one of the other units. SEQ02 – Has a SEQUENCE OF EVENTS that shows pedestrian, but no units are listed as pedestrians.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	Shift 06 = Equipment Failure (Blown Tire, Brake Failure, Etc) 07 = Separation Of Units 08 = Ran Off Road Right 09 = Ran Off Road Left 10 = Cross Median 11 = Cross Centerline – Opposite direction of travel 12 = Downhill Runaway 13 = Other Non-Collision 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 = Struck By Falling, Shifting Cargo or Anything Set in Motion By A Motor Vehicle 24 = Other Movable Object <u>Collision With Fixed Object – STRUCK</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 = Portable Barrier 33 = Median Cable Barrier 34 = Median Guardrail Barrier				SEQ03 – If there is only one motorist in the Crash, Motor Vehicle in Transport (20) is not a valid SEQUENCE OF EVENTS for the motorists unit. SEQ04 – 1 ST SEQUENCE OF EVENTS is invalid (1-52, 99). SEQ08 – SEQUENCE OF EVENTS cannot be blank between 1 st and last SEQUENCE OF EVENTS entered.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	35 = Median Concrete Barrier 36 = Median Other Barrier 37 = Traffic Sign Post 38 = Overhead Sign Post 39 = Light/Luminaries Support 40 = Utility Pole 41 = Other Post, Pole Or Support 42 = Culvert 43 = Curb 44 = Ditch 45 = Embankment 46 = Fence 47 = Mailbox 48 = Tree 49 = Fire Hydrant 50 = Work Zone Maintenance Equipment 51 = Wall, Building Tunnel 52 = Other Fixed Object 99 = Unknown Select Up To 6 In The Sequence Of Events				
Sequence Of Events – 2	See Sequence of Events – 1	2	375	376	
Sequence Of Events – 3	See Sequence of Events – 1	2	377	378	
Sequence Of Events – 4	See Sequence of Events – 1	2	379	380	
Sequence Of Events – 5	See Sequence of Events – 1	2	381	382	
Sequence Of Events – 6	See Sequence of Events – 1	2	383	384	
First Harmful Event	Record the number (1, 2, 3, 4, 5, or 6) from the sequence of events that produced the first property damage, injury, or death.	1	385	385	FHE01 – FIRST HARMFUL EVENT value must be between 1- 6. Cannot Reference blank SEQUENCE OF EVENT.
Most Harmful Event	Record the number (1, 2, 3, 4, 5, or 6) from the sequence of events that produced the most property damage, most severe	1	386	386	MHE01 – MOST HARMFUL EVENT must be between 1- 6. Cannot Reference blank SEQUENCE OF EVENT.

Units					
Field Description	New Form	Length	Start	Finish	Validations
	injury, or death.				
Unit Speed	Record the vehicles estimated speed in miles per hour based on driver's statement, or officer's estimate.	3	387	389	USP01 – If SPEED DETECTED is 1 or 2 then UNIT SPEED must be 0-200. COUN33 – UNIT SPEED must be between 0 and 200 or Blank.
Speed Detected	1 = Stated 2 = Estimated Speed (check boxes on form)	1	390	390	SPD01 – SPEED DETECTED Value is invalid. Must be 1, 2 or Blank SPD02 – When SPEED DETECTED is entered then UNIT SPEED must be provided.
Posted Speed	Posted speed limit for the vehicle at time of crash. The speed limit may vary from normal roadway speed limit when school or construction zones are legally posted.	2	391	392	PSP01 – POSTED SPEED must be between 05 and 75.
Traffic Control	01 = No Controls 02 = Stop Sign 03 = Yield Sign 04 = Traffic Signal 05 = Traffic Flashers 06 = School Zone 07 = Railroad Crossbucks 08 = Railroad Flashers 09 = Railroad Gates 10 = Construction Barricade 11 = Person (Flagger, Officer) 12 = Pavement Markings 13 = Crosswalk Lines 14 = Walk/Don't Walk 15 = Other 16 = Not Reported	2	393	394	TRV01 – TRAFFIC CONTROL Value must be between 1 and 16. TRV02: TRAFFIC CONTROL 14-Walk/Don't Walk can only be valid for person UNIT TYPE types 23-27 (non-motorists).
Vehicle- Non-motorist Direction –From (VEHICLE_DIRECTION_FROM)	1 = North 2 = South 3 = East 4 = West 5 = Northeast 6 = Northwest 7 = Southeast	1	395	395	DIR01 – The TO DIRECTION is invalid (1-North, 3-East, 4-West, 5-Northeast, 6-Northwest or 9-Unknown) considering the FROM DIRECTION (North) and PRE-CRASH ACTIONS (essentially straight). Valid values are 2-South, 7-Southeast or 8-Southwest. DIR02 – The TO DIRECTION is invalid (2-South, 3-East, 4-West, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM

Units						
Field Description	New Form	Length	Start	Finish	Validations	
	8 = Southwest 9 = Unknown				<p>DIRECTION (South) and PRE-CRASH ACTIONS (essentially straight). Valid values are 1-North, 5-Northeast and 6-Northwest.</p> <p>DIR03 – The TO DIRECTION is invalid (1-North, 2-South, 3-East, 5-Northeast, 7-Southeast or 9-Unknown) considering the FROM DIRECTION (East) and Pre- Crash Actions (essentially straight). Valid values are 4-West, 6-Northwest and 8-Southwest.</p> <p>DIR04 – The TO DIRECTION is invalid (1-North, 2-South, 4-West, 6-Northwest, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (West) and PRE-CRASH ACTIONS (essentially straight). Valid values are 3-East, 5-Northeast and 7-Southeast.</p> <p>DIR05 – The TO DIRECTION is invalid (1-North, 3-East, 5-Northeast, 6-Northwest, 7-Southeast or 9-Unknown) considering the FROM DIRECTION (Northeast) and PRE-CRASH ACTIONS (essentially straight). Valid values are 2-South,4-West and 8-Southwest.</p> <p>DIR06 – The TO DIRECTION is invalid (1-North, 4-West, 5-Northeast, 6-Northwest, 8-Southwest, 9-Unknown) considering the FROM DIRECTION (Northwest) and PRE-CRASH ACTIONS (essentially straight). Valid values are 2-South, 3-East and 7-Southeast.</p> <p>DIR07 – The TO DIRECTION is invalid (2-South, 3-East, 5-Northeast, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Southeast) and PRE-CRASH ACTIONS (essentially straight). Valid values are 1-North, 4-West and 6-Northwest.</p> <p>DIR08 – The TO DIRECTION is invalid (2-South, 4-West, 6-Northwest, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Southwest) and PRE-CRASH ACTIONS (essentially straight). Valid values are 1-North, 3-East and 5-Northeast.</p> <p>DIR09 – The TO DIRECTION is invalid (1-North, 2-South, 3-East, 5-Northeast, 7-Southeast or 9-Unknown) considering the FROM DIRECTION (North) and PRE-CRASH ACTIONS (turning right). Valid values are 4-West, 6-Northwest and 8-Southwest.</p> <p>DIR10 – The TO DIRECTION is invalid (1-North, 2-South, 4-West, 6-Northwest, 8-Southwest or 9-Unknown) considering the FROM</p>	

Units					
Field Description	New Form	Length	Start	Finish	Validations
					<p>DIRECTION (South) and PRE-CRASH ACTIONS (turning right). Valid values are 3-East, 5-Northeast and 7-Southeast.</p> <p>DIR11 –The TO DIRECTION is invalid (2-South, 3-East, 4-West, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (East) and PRE-CRASH ACTIONS (turning right). Valid values are 1-North, 5-Northeast and 6-Northwest.</p> <p>DIR12 – The TO DIRECTION is invalid (1-North, 3-East, 5-Northeast, 6-Northwest or 9-Unknown) considering the FROM DIRECTION (West) and PRE-CRASH ACTIONS (turning right). Valid values are 2-South, 7-Southeast and 8-Southwest.</p> <p>DIR13 – The TO DIRECTION is invalid (2-South, 3-East, 5-Northeast, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Northeast) and PRE-CRASH ACTIONS (turning right). Valid values are 1-North, 4-West and 6-Northwest.</p> <p>DIR14 – The TO DIRECTION is invalid (1-North, 3-East, 5-Northeast, 6-Northwest, 7-Southeast or 9-Unknown) considering the FROM DIRECTION (Northwest) and PRE-CRASH ACTIONS (turning right). Valid values are 2-South, 4-West and 8-Southwest.</p> <p>DIR15 – The TO DIRECTION is invalid (2-South, 4-West, 6-Northwest, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Southeast) and PRE-CRASH ACTIONS (turning right). Valid values are 1-North, 3-East and 5-Northeast.</p> <p>DIR16 – The TO DIRECTION is invalid (1-North, 4-West, 5-Northeast, 6-Northwest, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Southwest) and PRE-CRASH ACTIONS (turning right). Valid values are 2-South, 3-East and 7-Southeast.</p> <p>DIR17 – The TO DIRECTION is invalid (1-North, 2-South, 4-West, 6-Northwest, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (North) and PRE-CRASH ACTIONS (turning left). Valid values are 3-East, 5-Northeast and 7-Southeast.</p> <p>DIR18 – The TO DIRECTION is invalid (1-North, 2-South, 3-East, 5-Northeast, 7-Southeast or 9-Unknown) considering the FROM DIRECTION</p>

Units					
Field Description	New Form	Length	Start	Finish	Validations
					<p>(South) and PRE-CRASH ACTIONS (turning left). Valid values are 4-West, 6-Northwest and 8-Southwest.</p> <p>DIR19 – The TO DIRECTION is invalid (1-North, 3-East, 4-West, 5-Northeast, 6-Northwest or 9-Unknown) considering the FROM DIRECTION (East) and PRE-CRASH ACTIONS (turning left). Valid values are 2-South, 7-Southeast and 8-Southwest.</p> <p>DIR20 – The TO DIRECTION is invalid (2-South, 3-East, 4-West, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (West) and PRE-CRASH ACTIONS (turning left). Valid values are 1-North, 5-Northeast and 6-Northwest.</p> <p>DIR21 – The TO DIRECTION is invalid (1-North, 4-West, 5-Northeast, 6-Northwest, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Northeast) and PRE-CRASH ACTIONS (turning left). Valid values are 2-South, 3-East and 7-Southeast.</p> <p>DIR22 – The TO DIRECTION is invalid (2-South, 4-West, 6-Northwest, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Northwest) and PRE-CRASH ACTIONS (turning left). Valid values are 1-North, 3-East and 5-Northeast.</p> <p>DIR23 – The TO DIRECTION is invalid (1-North, 3-East, 5-Northeast, 6-Northwest, 7-Southeast or 9-Unknown) considering the FROM DIRECTION (Southeast) and PRE-CRASH ACTIONS (turning left). Valid values are 2-South, 4-West and 8-Southwest.</p> <p>DIR24 – The TO DIRECTION is invalid (2-South, 3-East, 5-Northeast, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (Southwest) and PRE-CRASH ACTIONS (turning left). Valid values are 1-North, 4-West and 6-Northwest.</p> <p>DIR25 – The TO DIRECTION is invalid (2-South, 3-East, 4-West, 5-Northeast, 6-Northwest, 7-Southeast, 8-Southwest or 9-Unknown) considering the FROM DIRECTION (North) and PRE-CRASH ACTIONS (U-turn). Valid value is 1-North.</p> <p>DIR26 – The TO DIRECTION is invalid (1-North, 3-East, 4-West, 5-Northeast, 6-Northwest, 7-Southeast, 8-Southwest or 9-Unknown)</p>

Units					
Field Description	New Form	Length	Start	Finish	Validations
					<p>considering the FROM DIRECTION (South) and PRE-CRASH ACTIONS (U-turn). Valid value is 2-South.</p> <p>DIR27 – The TO DIRECTION is invalid considering the FROM DIRECTION (East) and PRE-CRASH ACTIONS (U-turn). Valid value is 3-East.</p> <p>DIR28 – The TO DIRECTION is invalid considering the FROM DIRECTION (West) and PRE-CRASH ACTIONS (U-turn). Valid value is 4-West.</p> <p>DIR29 – The TO DIRECTION is invalid considering the FROM DIRECTION (Northeast) and PRE-CRASH ACTIONS (U-turn). Valid value is 5-Northeast.</p> <p>DIR30 – The TO DIRECTION is invalid considering the FROM DIRECTION (Northwest) and PRE-CRASH ACTIONS (U-turn). Valid value is 6-Northwest.</p> <p>DIR31 – The TO DIRECTION is invalid considering the FROM DIRECTION (Southeast) and PRE-CRASH ACTIONS (U-turn). Valid value is 7-Southeast.</p> <p>DIR32 – The TO DIRECTION is invalid considering the FROM DIRECTION (Southwest) and PRE-CRASH ACTIONS (U-turn). Valid value is 8-Southwest.</p> <p>DIR33 – The TO DIRECTION is invalid considering the FROM DIRECTION (North) and PRE-CRASH ACTIONS (parked). Valid value is 2-South.</p> <p>DIR34 – The TO DIRECTION is invalid considering the FROM DIRECTION (South) and PRE-CRASH ACTIONS (parked). Valid value is 1-North.</p> <p>DIR35 – The TO DIRECTION is invalid considering the FROM DIRECTION (East) and PRE-CRASH ACTIONS (parked). Valid value is 4-West.</p> <p>DIR36 – The TO DIRECTION is invalid considering the FROM DIRECTION (West) and PRE-CRASH ACTIONS (parked). Valid value is 3-East.</p> <p>DIR37 – The TO DIRECTION is invalid considering the FROM DIRECTION (Northeast) and PRE-CRASH ACTIONS (parked). Valid value is 8-Southwest.</p>

Units					
Field Description	New Form	Length	Start	Finish	Validations
					<p>DIR38 – The TO DIRECTION is invalid considering the FROM DIRECTION (Northwest) and PRE-CRASH ACTIONS (parked). Valid value is 7-Southeast.</p> <p>DIR39 – The TO DIRECTION is invalid considering the FROM DIRECTION (Southeast) and PRE-CRASH ACTIONS (parked). Valid value is 6-Northwest.</p> <p>DIR40 – The TO DIRECTION is invalid considering the FROM DIRECTION (Southwest) and PRE-CRASH ACTIONS (parked). Valid value is 5-Northeast.</p> <p>DIR41 – Vehicle Non-Motorist DIRECTION must be valid (1 North, 2 South, 3 East, 4 West, 5 Northeast, 6 Northwest, 7 Southeast, 8 Southwest, 9 Unknown).</p> <p>CONU36 – VEHICLE DIRECTION FROM must be between 1 and 9.</p>
Vehicle- Non-motorist Direction –To	1 = North 2 = South 3 = East 4 = West 5 = Northeast 6 = Northwest 7 = Southeast 8 = Southwest 9 = Unknown	1	396	396	<p>CONU37 – VEHICLE DIRECTION TO must between 1 and 9.</p> <p>See VEHICLE-NON-MOTORIST DIRECTION-FROM.</p>

People					
Field Description		Length	Start	End	
Record Type	Code 'P' for People	1	1	1	
Reporting Agency NCIC	See CRASH – NCIC Description	5	2	6	
Date/Time of Crash	See CRASH CRASH DATE Description MMDDYYYYHHMM	12	7	18	
Local Report Number	See CRASH – LOCAL_REPORT_NUM Description	14	19	32	
Type of Person	D = Driver O = Occupant P = Pedestrian	1	33	33	DRV01 – There can only be one driver per motorized unit. PED01 – A Pedestrian cannot have Occupants. PEF02 – Pedestrians must have one Person attached, but it must also be of Type of Person of P (pedestrian) and the # OCC question must be answered Zero. ODP01 – Person type must be an 'D', 'O', or 'P'.
Unit Number	See UNIT – UNITNO Description.	2	34	35	SYSP03 – UNITNO cannot be null.
Last Name	Last Name of Motorist / Non-Motorist.	25	36	60	LNMO1 – Motorist/Non-Motorist Last Name cannot be blank. For hit/skip unit this can be blank.
First Name	First name of Motorist / Non-Motorist.	15	61	75	FNMO1 – If the person record is populated, the Motorist/Non-Motorist first name is required. For hit/skip unit this can be blank.
Middle Name	Middle Name of Motorist / Non-Motorist.	15	76	90	No Edits
Date of Birth	Numerical date of birth of the motorist / non-motorist in MMDDYYYY format.	8	91	98	DOB01 – The DATE OF BIRTH cannot greater than the Current Date or cannot be Blank and Date of Birth expected format is MMDDYYYY.
Age	Age of motorist / non-motorist using 3 digits.	3	99	101	AGE01 – The AGE of the person must be numeric or cannot be Blank. AGE02 – AGE of Person is Incorrect (if age is blank or 000, calculate the age with the date of birth and date of crash).

People					
Field Description		Length	Start	End	
					AGE03 – AGE is invalid when calculated using DATE OF BIRTH and CRASH DATE.
Gender	F = Female M = Male	1	102	102	GEN01 – GENDER value must be M or F.
Address	Address of Motorist / Non-Motorist.	20	103	122	ADM01 – Motorist / Non-Motorist Address cannot be blank. For hit/skip unit this can be blank.
City	City of Motorist / Non-Motorist.	15	123	137	CTM01 – Motorist / Non-Motorist City cannot be blank. For hit/skip unit this can be blank.
State	State of Motorist / Non-Motorist.	2	138	139	STM01 – Motorist/Non Motorist State must be valid and cannot be blank. For hit/skip unit this can be blank.
Zip	Zip of Motorist / Non-Motorist.	9	140	148	PZN01 – Motorist/Non-Motorist Zip code in person address may be alpha and/or numeric; Invalid Person ZIP code length. For US addresses, the number of characters in ZIP code must be 5-9; cannot be blank. For hit/skip unit this can be blank.
Contact Phone	Motorist / non-motorist contact telephone number including area code.	10	149	158	HPN01 – CONTACT PHONE # must be 10 digits or blank.
Injuries	1 = No Injury / None Reported 2 = Possible 3 = Non-Incapacitating 4 = Incapacitating 5 = Fatal	1	159	159	INJ01 – Person INJURY value must be 1-5. INJ02 – If an INJURY value is 2-4, the CRASH SEVERITY must be 2-Injury. INJ03 – If an INJURY value is 5, the CRASH SEVERITY must be 1-Fatal.
Injured Taken By	1 = Not Transported/Treated at Scene 2 = EMS 3 = Police 4 = Other 9 = Unknown	1	160	160	ITB01 – INJURED TAKEN BY must be 1-4 or 9. Can be blank if injuries = 1.
EMS Agency	List who transported the patient to the medical facility.	20	161	180	EMA01 – TRANSPORTED BY must be entered if INJURED TAKEN BY is 2.
Medical Facility Injured Taken To	The medical facility receiving the patient.	20	181	200	ITT01 – INJURED TAKEN TO must be entered if INJURED TAKEN BY is 2-4.
Safety Equipment Used	<u>Motorist</u> 01 = None Used – Vehicle Occupant	2	201	202	SEU01 – If Unit Type = 9- Motorcycle ,then SAFETY EQUIPMENT USED should not be 02-07 or 09-14.

People					
Field Description		Length	Start	End	
	02 = Shoulder Belt Only Used 03 = Lap Belt Only Used 04 = Shoulder And Lap Belt Used 05 =Child Restraint System– Forward Facing 06=Child Restraint System– Rear Facing 07 =Booster Seat 08 = Helmet Used <u>Non-motorist</u> 09 = None Used 10 = Helmet used 11 = Protective pads used (elbows, knees, shins, etc) 12 = Reflective clothing 13 = Lighting 14 = Other 99 – Unknown Safety Equipment				SEU02 – Driver SAFETY EQUIPMENT USED cannot be 05, 06, 07 or 09-14. SEU03 –The SAFETY EQUIPMENT USED value for the person is invalid (1-14, 99). SEU04 – Motorcycle SAFETY EQUIPMENT USED should not be 09-14 . SEU05 – Restraint for Bicycle cannot be 2, 3, or 4. SEU06 – If UNIT TYPE is 01 – 22, SAFETY EQUIPMENT USED must be 01-08, 99. SEU07 – If UNIT TYPE is 23-27, SAFETY EQUIPMENT USED must be 09-14, 99, or blank. SEU08 – SAFETY EQUIPMENT USED cannot be Blank.
DOT Compliant Motorcycle Helmet	1 = Yes (check box) 2 = No	1	203	203	DOT02 – If SAFETY EQUIPMENT USED is 08, then DOT COMPLIANT MOTORCYCLE HELMET must be 1 or 2.
Seating Position	01 = Front Seat – Left Side (Motorcycle Driver) 02 = Front Seat – Middle 03 = Front Seat – Right Side 04 = Second Seat – Left Side (Motorcycle Passenger) 05 = Second Seat – Middle 06 = Second Seat – Right Side 07 = Third – Left Side (Motorcycle Side Car) 08 = Third – Middle 09 = Third – Right Side 10 = Sleeper Section Of Cab (Truck) 11 = Passenger In Other Enclosed Cargo Area (Non Trailing Unit Such As A Bus,	2	204	205	SPN01 – The SEATING POSITION of the Person must be between 01 and 16, or 99. SPN02 – The SEATING POSITION selected is invalid for unit types 09 and 10; Must be 01, 04, 07 or 99.

People					
Field Description		Length	Start	End	
	Pick-up with Cap) 12 = Passenger In Unenclosed Cargo Area 13 = Trailing Unit 14 = Riding On Vehicle Exterior (Non-Trailing Unit) 15 = Non-Motorist 16 = Other 99 = Unknown				
Air Bag Usage	1 = Not-Deployed 2 = Deployed-Front 3 = Deployed-Side 4 = Deployed Both Front/Side 5 = Not Applicable 9 = Deployment Unknown	1	206	206	ABU01 – AIR BAG USAGE value must be 1-5, or 9.
Ejection	1 = Not Ejected 2 = Totally Ejected 3 = Partially Ejected 4 = Not Applicable	1	207	207	EJT01 – Person EJECTED from vehicle value must be 1-4.
Trapped	1 = Not trapped 2 = Extricated By Mechanical Means 3 = Freed By Non-Mechanical Means	1	208	208	TRP01 – Person TRAPPED value must be 1-3.
OL State	Enter the 2 digit code of OL state of issuance.	2	209	210	DLS03 – Person Driver License STATE must be entered if you have entered a DL Number. DLS04 – Operator License/OL STATE must be valid 2 character code (see state list provided by ODPS.
Operator License Number	OL number for the motorist. (Increased size to 25 characters.)	25	211	235	DLF01 – If OH is in DRIVER LICENSE STATE, DL # format must be Ohio's format. DLS02 – If the DRIVER LICENSE STATE is entered the DL NUMBER is required.
OL Class	1 = Class A 2 = Class B 3 = Class C 4 = Regular Class (Ohio is 'D') 5=M/C Moped <u>Only</u>	1	236	236	OLC01 – OL Class must be 1-5 or blank for no OL.

People					
Field Description		Length	Start	End	
No Valid OL	1 = Yes 2 = No	1	237	237	VOL01 – NO VALID OL must be 1, 2 or blank.
Motorcycle Endorsement	1 = Yes (Check Box on Form) 2 = No	1	238	238	MEN01 – If UNIT TYPE = 9, then Motorcycle Endorsement must be 1 or 2.
Condition	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	1	239	239	CON01 – Condition value must be 1-7.
Alcohol/Drug Suspected	1 = None 2 = Yes – Alcohol Suspected 3 =Yes – HBD Not Impaired 4 =Yes – Drugs Suspected 5 =Yes – Alcohol And Drugs Suspected	1	240	240	ADS01 – ALCOHOL/DRUGS SUSPECTED value must be 1- 5.
Alcohol Test Status	1 = None Given 2 = Test Refused 3 = Test Given, Contaminated Sample/Unusable 4 = Test Given, Results Known 5 = Test Given, Results Unknown	1	241	241	ADS02 – ALCOHOL TEST STATUS must be 1-5 if ALCOHOL/DRUGS SUSPECTED is 2 or 5.
Alcohol Test Type	1 = None 2 = Blood 3 = Urine 4 = Breath 5 = Other	1	242	242	ATT01 – ALCOHOL TEST TYPE value must be 1-5. ATT02 – ALCOHOL TEST TYPE value was given for an occupant.
Alcohol Test Value	Enter the three digits of any alcohol concentration known.	3	243	245	ATV01 – ALCOHOL TEST VALUE must be between 000 and 500 if not blank ATV02 – If ALCOHOL TEST STATUS is #4, then ALCOHOL TEST

People					
Field Description		Length	Start	End	
					VALUE is required.
Drug Test Status	1 = None Given 2 = Test Refused 3 = Test Given, Contaminated Sample/Unusable 4 = Test Given, Results Known 5 = Test Given, Results Unknown	1	246	246	DTS01 – DRUG TEST STATUS value must be 1-5.
Drug Test Type	1 = None 2 = Blood 3 = Urine 4 = Other	1	247	247	DTT01 – DRUG TEST TYPE value must be 1-4. DTT02 – DRUG TEST TYPE was populated when test not given. DTT03 – DRUG TEST TYPE must be 1 if Drug Test Status is NONE.
Offense Charged	One offense per unit (the causative offense). The offense number charged to motorist/non-motorist that directly related to the crash.	10	248	257	OFC01 – If LOCAL CODE, OFFENSE DESCRIPTION or CITATION NUMBER is entered, OFFENSE CHARGED must be entered also.
Local Code	1 = Yes (check box on form) 2 = No	1	258	258	LCC02 – CITATION LOCAL CODE must be a 1 or 2. LCC01 – If OFFENSE CHARGED, OFFENSE DESCRIPTION or CITATION NUMBER is entered LOCAL CODE must be entered also.
Offense Description	One offense per unit (the causative offense). The offense charged to motorist/non-motorist that directly related to the crash.	20	259	278	OFD01 – OFFENSE DESCRIPTION must be entered if OFFENSE CHARGED is entered. OFD02 – If LOCAL CODE, OFFENSE CHARGED or CITATION NUMBER is entered OFFENSE DESCRIPTION must be entered also.
Citation Number	Number From Uniform Ticket One offense per unit (the causative offense). The citation number charged to motorist/non-motorist that directly related to the crash. List all letters and/or numbers of the citation number.	15	279	293	CIT01 – CITATION NUMBER must be entered if OFFENSE CHARGED is entered. CIT02 – If LOCAL CODE, OFFENSE DESCRIPTION or OFFENSE CHARGED is entered CITATION NUMBER must be entered also.

People					
Field Description		Length	Start	End	
Hands-free Device Used	1 = Yes (check Box on Form) 2 = No	1	294	294	HFD01 – Hands-free Device Used must be 1 or 2 if Type of Person = 'D'
Driver Distracted By 1	1= No Distraction Reported 2 = Phone 3 = Texting/Emailing 4 = Electronic Communication Device 5 = Other Electronic Device (Navigation Device, DVD Player, Radio etc.) 6 = Other Distraction Inside the Vehicle 7 = External Distraction (outside the vehicle)	1	295	295	DDB01 – DRIVER DISTRACTED BY 1 cannot be blank if TYPE OF PERSON = 'D'. DDB02 – DRIVER DISTRACTED BY 1 must be 1-7. DDB03 – DRIVER DISTRACTED BY 1 cannot be same as DRIVER DISTRACTED BY 2. DDB04 – DRIVER DISTRACTED BY 2 must be 1-7 or blank. DDB05 – DRIVER DISTRACTED BY 2 cannot be same as DRIVER DISTRACTED BY 1.
Driver Distracted By 2	1= No Distraction Reported 2 = Phone 3 = Texting/Emailing 4 = Electronic Communication Device 5 = Other Electronic Device (navigation device, DVD player, Radio etc.) 6 = Other Distraction Inside the Vehicle 7 = External Distraction (outside the vehicle)	1	296	296	DDB03 – DRIVER DISTRACTED BY 2 cannot be same as DRIVER DISTRACTED BY 1. DDB02 – DRIVER DISTRACTED BY 2 must be 1-7 or blank.
Internal People Edits					IPR01 – Internal error occurred while processing person record. Crash record not saved. PRL01 – Person record length is not valid. PNF01 – Person record not found related to unit which is related to Crash.
Witness Edits					IWR01 – Internal error occurred while processing witness record. Crash record not saved.

People					
Field Description		Length	Start	End	
					WNR01 – Witness record not related to crash WRL01 – Witness record length not valid.

WITNESS							
Field Description	Title on Crash Report	Pg #	Size	Start Position	End Position	Data Type	Description/Values
Record Type		-	1	1	1	AN	Code 'W' for Witness
Reporting Agency NCIC (NCIC)	N.C.I.C #	1	5	2	6	AN	See CRASH – NCIC Description
Date/Time of Crash (DATE_OF_CRASH)	Date/Time of Crash	1	12	7	18	N	See CRASH – DATE_OF_CRASH Description MMDDYYYYHHMI
Local Report Number (LOCAL_REPORT_NUM)	Local Report#	1	14	19	32	AN	See CRASH – LOCAL_REPORT_NUM Description
Witness First Name (FIRST_NAME)	Name (First)	1	15	33	47	AN	First name of Witness.
Witness Middle Name (MIDDLE_NAME)	Name (Middle)	1	15	48	62	AN	Middle Name of Witness.
Witness Last Name (LAST_NAME)	Name (Last)	1	25	63	87	AN	Last Name of Witness.
Witness Address (ADDRESS)	Address (Street, City, State, Zip Code)	1	20	88	107	AN	Address of Witness.
Witness City (CITY)	Address (Street, City, State, Zip Code)	1	15	108	122	AN	City of Witness.
Witness State (STATE)	Address (Street, City, State, Zip Code)	1	2	123	124	AN	State of Witness.
Witness Zip (ZIP)	Address (Street, City, State, Zip Code)	1	9	125	133	N	Zip of Witness.
Witness Phone	Phone	1	10	134	143	N	Phone Number of Witness.

TL 143

CRASH DATA FILE NAMING SPECIFICATIONS:

Crash data files submitted should follow the following naming specification. Following this naming specification for crash data file is not mandatory:

File Extension: .txt
Filename: NCIC + DATE_OF_CRASH + LOCAL_REPORT_NUM (AAAAAMMDDYYYYHHMIAAAAAAAAAA.TXT)
Filename Length: 32
Example 1: 057170103200419452004000287.txt
(NCIC = 05717, DATE_OF_CRASH = 01/03/2004 19:45, LOCAL_REPORT_NUM = 2004000287)

Example 2: OHP0201162004121502-0037-02.txt
(NCIC = OHP02, DATE_OF_CRASH = 01/16/2004 12:15, LOCAL_REPORT_NUM = 02-0037-02)

Example 3: 07600010120040136048_____.txt
(NCIC = 07600, DATE_OF_CRASH = 01/01/2004 01:36, LOCAL_REPORT_NUM = 048)

Text Data File

The crash record layout:
The first record will be the Crash record and all of the related information to the Crash. Next will come Unit number one and all of the related information for that Unit. Then all of the people related to that unit. The last record would be any Witness statements. Each record will be a fixed field format. Each record will have a specified record length depending on the type of record. Below is a sample record layout. Notice the first record starts with "C" denoting a Crash Record. Then Unit number one and so on.

Sample:
C10006605 3N1Y212208401APPPRE POLICE DEPART0201090120.....
U0840109012010141210006605 01.....
P0840109012010141210006605 01.....
U0840109012010141210006605 02.....
P0840109012010141210006605 02.....
W0840109012010141210006605.....

CRASH DIAGRAM SPECIFICATIONS:

All crash diagrams submitted via web service must follow the given guidelines below. If image supplied does not follow any of the requirements given, the crash record will not be inserted into the ODPS system and will be returned to the law enforcement agency.

DIAGRAM
<p>Image file File Type: .jpg Image Size: 240 x 240 pixels Size: <= 100 KB Filename: NCIC + DATE_OF_CRASH + LOCAL_REPORT_NUM (AAAAAMMDDYYYYHHMIAAAAAAAAAA.JPG)</p> <p><i>Example 1:</i> 057170103200419452004000287.JPG (NCIC = 05717, DATE_OF_CRASH = 01/03/2004 19:45, LOCAL_REPORT_NUM = 2004000287)</p> <p><i>Example 2:</i> OHP0201162004121502-0037-02.JPG (NCIC = OHP02, DATE_OF_CRASH = 01/16/2004 12:15, LOCAL_REPORT_NUM = 02-0037-02)</p> <p><i>Example 3:</i> 07600010120040136048_____.JPG (NCIC = 07600, DATE_OF_CRASH = 01/01/2004 01:36, LOCAL_REPORT_NUM = 048)</p>

Revisions made to Crash Report (OH-1) Submission Structure:

Revision Date 06/04/2012:

- Longitude – Degrees/Minutes/Seconds – ~~Note: DD cannot hold a “-“or negative/minus sign. Note deleted.~~
- Decimal Degrees – Latitude LAT06 – LATITUDE MUST be in the following format. (DD.DDDDDD).
Note: DD cannot hold a “-“or negative/minus sign. (Note added)
- Decimal Degrees – Longitude LON06 – LONGITUDE MUST be in the following format, (DD.DDDDDD).
Note: DD cannot hold a “-“or negative/minus sign. (Note added)
- SRC01 – The value for SECONDARY ROAD CONDITIONS at the time of the crash is invalid; must be 01 – 10, or 99 or blank if SECONDARY ROAD CONDITIONS do not apply.
- SLC01 – The value for SECONDARY LIGHT CONDITIONS at the time of crash is invalid. SECONDARY LIGHT CONDITION must be between 1 and 9 or blank if SECONDARY LIGHT CONDITIONS do not apply.

- ~~Policy Number (Insurance) PNI01 – If PROOF OF INSURANCE SHOWN = 1, the Policy Number must be entered. Rule deleted.~~
- CCS01 – Contributing Circumstances, Motorist/Non-Motorist Secondary cannot be the same as Contributing Circumstances Motorist/Non-Motorist.
- ~~HMP01 – Vehicle has HAZARDOUS MATERIALS PLACARD Value must be 1,2,3, if commercial vehicle or blank. Rule Deleted.~~

Revision Date 06/07/2012:

- ~~OFN01 – OWNER FIRST NAME cannot be blank. Rule deleted.~~
- UZN01 – OWNER ZIP in unit record may be alpha and/or numeric; cannot be blank.

Revision Date 06/08/2012:

- ~~IRI02: If CRASH_LOCATION is 2, 3, 4, 5, or 6, then Intersection related must be 1. Rule Deleted.~~
- WKR01- WORKERS PRESENT value must be 1-2,~~or blank.~~
- ~~PWZ04 – Can only be blank if WORK_ZONE_RELATED = 2. Rule Deleted.~~
- PWZ01 – LAW ENFORCEMENT PRESENT value must be 1-3,~~or blank.~~
- ~~PWZ05 – Can only be blank if WORK_ZONE_RELATED = 2. Rule Deleted.~~
- LWZ02 – Location of crash in Work Zone ~~must be entered~~ can only be blank if WORK ZONE RELATED = ~~1~~ 2.

Revision Date 06/28/2012:

- ~~TOC01 – The TIME OF CRASH cannot be greater than the TIME RECEIVED CALL. Rule Deleted.~~
- PRC02 – PRIMARY ROAD CONDITION cannot be the same as SECONDARY ROAD CONDITIONS except 10 = Other or 99 = Unknown.
- PLC02 – PRIMARY LIGHT CONDITIONS cannot be the same as SECONDARY LIGHT CONDITIONS except 8 = Other or 9 = Unknown.

- LOC05 – If LOC PREFIX is entered, Location Road Name must be entered. **(New Rule)**
- RPT07 – If REF ROAD PREFIX is entered, Reference Name must be entered. **(New Rule)**
- RPT08 – If Reference Road Type is entered, Reference Road Name must be entered. **(New Rule)**
- RPT12 – REFERENCE_POINT_USED is 3- 2-Mile Post, but REFERENCE_ROAD_TYPE is not must be MP.
- RFN02 – If Reference Road Name is entered, Reference Road Type must be entered. **(New Rule)**
- RPT09 – If REFERENCE POINT USED is 2 – Mile Post, REF ROAD PREFIX must be blank. **(New Rule)**

Revision Date 07/11/2012:

- ~~RPT06 – When REFERENCE POINT USED is 3- House Number, the REFERENCE NAME must be 6 digits. Rule Deleted.~~
- PNI01 – If PROOF OF INSURANCE SHOWN = 1, the Policy Number must may be entered.
- DOT01 – Commercial crashes must have US DOT completed. **Rule replaced due to error in previous document.**
- EMU01 – IN EMERGENCY RESPONSE value must be 1-2. For non-motorist and hit/skip this value can be blank.

Revision Date 07/19/2012:

- NOC03 – Person record information is required.

Revision Date 07/26/2012:

- RFN023 – If Reference Road Name is entered, Reference Road Type must be entered.
- CCSR01 – Contributing Circumstances, Motorist/Non-Motorist Secondary cannot be the same as Contributing Circumstances Motorist/Non-Motorist.
- TWD01- Trafficway Description must be 1-5. Can be blank only if Unit's Pre-Crash Actions = 10 (Parked) **(Can be blank portion added to rule)**
- TOW01 – TYPE OF USE must be 1, 2 or 3. Can be blank only if Unit's Pre-Crash Actions = 10 (Parked). **(Can be blank portion added to rule)**

Revision Date 07/31/2012:

- NML01 – NON-MOTORIST LOCATION prior to impact must be valid 01-12, or 99. Can be Blank for Motorist Unit. **(Can be blank portion added to rule)**

Revision Date 08/06/2012:

- RFN03 – If Reference Road Name is entered, Reference Road Type must be entered. Reference Road Type Can be blank only if REFERENCE POINT USED = HOUSE NUMBER. **(Can be blank portion added to rule)**

Revision Date 08/15/2012:

WITNESS							
Field Description	Title on Crash Report	Pg #	Size	Start Position	End Position	Data Type	Description/Values
Local Report Number (LOCAL_REPORT_NUM)	Local Report#	1	10 14	19	28 32	AN	See CRASH – LOCAL_REPORT_NUM Description (Changed Size and End Position)
Witness First Name (FIRST_NAME)	Name (First)	1	15	29 33	43 47	AN	First name of Witness. (Changed Start and End Positions)
Witness Middle Name (MIDDLE_NAME)	Name (Middle)	1	15	44 48	58 62	AN	Middle Name of Witness. (Changed Start and End Positions)
Witness Last Name (LAST_NAME)	Name (Last)	1	25	59 63	83 87	AN	Last Name of Witness. (Changed Start and End Positions)
Witness Address (ADDRESS)	Address (Street, City, State, Zip Code)	1	20	84 88	103 107	AN	Address of Witness. (Changed Start and End Positions)
Witness City (CITY)	Address (Street, City, State, Zip Code)	1	15	104 108	118 122	AN	City of Witness. (Changed Start and End Positions)
Witness State (STATE)	Address (Street, City, State, Zip Code)	1	2	119 123	120 124	AN	State of Witness. (Changed Start and End Positions)
Witness Zip (ZIP)	Address (Street, City, State, Zip Code)	1	9	121 125	129 133	N	Zip of Witness. (Changed Start and End Positions)
Witness Phone	Phone	1	10	130 134	139 143		Phone Number of Witness. (Changed Start and End Positions)

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Revision Date 08/30/2012:

- ATV01 – ALCOHOL TEST VALUE must be between 000 and ~~300~~ 500 if not blank.
- HAR02 – If HIT/SKIP = 1 **or 2** at least one vehicle must be HIT/SKIP. **(Added “or 2”)**

Revision Date 09/14/2012:

- RRN01 - The REFERENCE ROUTE NUMBER contain a 4 digit road number (a 5th place alpha character is allowed when necessary) when REFERENCE ROUTE TYPE is entered. **must be numeric with the exception of the last character can be a letter and length cannot exceed 5. For example ‘45’ is valid and ‘45A’ is valid. “4A5’ is not valid.**
- LRT05 – if LOCATION ROAD NAME is entered, then LOCATION ROAD TYPE must be entered. **Rule Deleted.**

Revision Date 10/03/2012:

- SUP01 – Supplement = 1 and crash with same NCIC, LR#, Date of Crash, Time of Crash, County and FIPS Code not found on Crash Database.
- RPT03 – When REFERENCE POINT USED is 1 or 2, REFERENCE ROAD TYPE must be entered. **Rule Deleted.**

Revision Date 10/11/2012:

- CAD02 – CARRIER ZIP is not a numeric value may be an alpha and/or numeric value if commercial vehicle or blank.

Revision Date 10/17/2012:

Injured Taken By	1 = Not Transported/Treated at Scene 2 = EMS 3 = Police 4 = Other 5 9 = Unknown	1	160	160	ITB01 – INJURED TAKEN BY must be 1-5 4 or 9. Can be blank if injuries = 1.
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Revision Date 11/21/2012:

- TWD03 – If Divided/Undivided Roadway is 2 (undivided) then at least one Unit's Trafficway Description value must be 1, 2 and or 5. are the only valid options.

Revision Date 12/11/2012:

- PZN01 – Motorist / Non-Motorist Zip code in person address may be alpha and/or numeric; Invalid Person ZIP code length. For US address, the number of characters in ZIP code must be 5-9; cannot be blank.
- DOT01 – Commercial crashes must have US DOT completed only if the Unit's Type of Use = 2 (Commercial) and if the Cargo Body Type is between 02-15 or 99.

Revision Date 01/23/2013:

- **For Non-Motorist, these values can be NULL Blank:** Owner Name, Owner Phone, Owner Address, Driver Name, Driver Phone, Driver Address, Damage Scale, Damage Area, LP State, License Plate Number, VIN, Vehicle Year, Vehicle Make, Vehicle Model, Vehicle Color, Towed By, Carrier Name, Carrier Address, Carrier City, Carrier State, Carrier Zip, Carrier Phone, US DOT, Vehicle Weight, Hazardous Material Placard ID, Hazardous Material Released, Type of Use, In Emergency Response, Has Hazardous Material Placard, Special Function, Most Damaged Area, Impact Area, Vehicle Defects. (Added)
- SEQ03 – If there is only one motorist in the Crash, Motor Vehicle in Transport (20) is not a valid SEQUENCE OF EVENTS for any the motorists unit.
- ADM01 – Motorist / Non-Motorist Address cannot be blank. For non-motorist and hit/skip unit this can be blank. (Added)
- CTM01 – Motorist / Non-Motorist City cannot be blank. For non-motorist and hit/skip unit this can be blank. (Added)
- FNM01 – If the person record is populated, the Motorist/Non-Motorist first name is required. For non-motorist and hit/skip unit this can be blank. (Added)
- LNM01 – Motorist/Non-Motorist Last Name cannot be blank. For non-motorist and hit/skip unit this can be blank. (Added)
- OAD01 – Units, OWNER ADDRESS cannot be blank. For non-motorist and hit/skip unit this can be blank. (Added)
- OCY01 – Units, OWNER CITY cannot be blank. For non-motorist and hit/skip unit this can be blank. (Added)
- OLN01 – Units, OWNER LAST NAME cannot be blank. For non-motorist and hit/skip unit this can be blank. (Added)
- OST01 – Units, OWNER STATE must be valid 2 character code and cannot be blank. For non-motorist and hit/skip unit this can be blank. (Added)
- PZN01 – Motorist/Non-Motorist Zip code in person address may be alpha and/or numeric; Invalid Person ZIP code length. For US addresses, the number of characters in ZIP code must be 5-9; cannot be blank. For Non-Motorist and hit/skip unit this can be blank. (Added)

- STM01 – Motorist / ~~Non-Motorist~~ State **must be valid and** cannot be blank. **For non-motorist and hit/skip unit this can be blank. (Added)**
- UZN01 – **Units**, OWNER ZIP in unit record may be alpha and/or numeric; cannot be blank. **For non-motorist and hit/skip unit this can be blank. (Added)**
- FHE01 – FIRST HARMFUL EVENT value must be between 1-6 **or blank. (Added)**
- MHE01 – MOST HARMFUL EVENT must be between 1-6 **or blank. (Added)**

Revision Date 02/05/2013:

- “Instructions For Submission” (Page 4) and “Service Credentials” (Page 5) all reference to Security Certificates changed to **ECS Security Key.**
- RTB01 – The REPORT TAKEN BY field must be a 1-2. **If Report Taken By is = 2 (Motorist) then rules checking will be consider/ behave like hit/skip.**
- ADM01 – Motorist / Non-Motorist Address cannot be blank. ~~For Non-Motorist~~ and hit/skip unit this can be blank.
- CTM01 – Motorist / Non-Motorist City cannot be blank. ~~For non-motorist and~~ hit/skip unit this can be blank.
- FNM01 – If the person record is populated, the Motorist/Non-Motorist first name is required. ~~For non-motorist and~~ hit/skip unit this can be blank.
- LNM01 – Motorist/Non Motorist Last Name cannot be blank. ~~For non-motorist and~~ hit/skip unit this can be blank.
- PZN01 – Motorist/Non-Motorist Zip code in person address may be alpha and/or numeric; Invalid Person ZIP code length. For US addresses, the number of characters in ZIP code must be 5-9; cannot be blank. ~~For Non-Motorist and~~ hit/skip unit this can be blank.
- STM01 – Motorist/Non-Motorist State must be valid and cannot be blank. ~~For non-motorist and~~ hit/skip unit this can be blank.
- LRN03 - LOCAL REPORT NUMBER must be unique for agency and crash ~~year~~ **date.**
- SUP01 – Supplement = 1 and crash with same NCIC, LR#, Date of Crash, ~~Time of Crash~~ not found on Crash Database.

Revision Date 03/08/2013:

- LOC06 - The CRASH LOCATION ROAD TYPE must be valid. **If Location Road Name entered then Location Road Type MP – Milepost is not a valid road type. (Added)**
- RRN02 – If REFERENCE ROUTE TYPE is entered, REFERENCE ROUTE NUMBER must be entered. **REFERENCE ROUTE NUMBER cannot be the same as LOCATION ROUTE NUMBER. (Added)**
- RFN03 – If Reference Road Name is entered, Reference Road Type must be entered. **Reference Road Name cannot be the same as LOCATION ROAD NAME.** Reference Road Type Can be blank only if REFERENCE POINT USED = HOUSE NUMBER. **(Added)**

Revision Date 04/12/2013:

- SEQ01 – If there is a 26 –Pedestrian/Skater UNIT TYPE in the Crash **And Action3-STRIKING or 4-STRUCK or 5-STRIKING/STRUCK** 14-Pedestrian must be in the SEQUENCE OF EVENTS for one of the other units. **(Added)**
- RFN01 – REFERENCE ROAD NAME and Ref Prefix cannot be the same as LOCATION ROAD NAME and Location Prefix. REFERENCE ROAD NAME and Reference Road Type cannot be the same as LOCATION ROAD NAME and Location Road Type. **(New Rule)**

Revision Date 05/03/2013:

- RPT01 - The DIR FROM REFERENCE must be N, S, E, W or blank when DISTANCE FROM REFERENCE MEASUREMENT and DISTANCE FROM REFERENCE MEASUREMENT **TYPE** are blank.

Revision Date 07/16/2013:

- **SEQ08 – SEQUENCE OF EVENTS cannot be blank between 1st and last SEQUENCE OF EVENTS entered. (New)**
- FHE01 – FIRST HARMFUL EVENT value must be between 1-6 ~~or blank.~~ **Cannot reference blank SEQUENCE OF EVENT. (Added)**
- MHE01 – MOST HARMFUL EVENT must be between 1-6 ~~or blank.~~

Cannot reference blank SEQUENCE OF EVENT. (Added)

Revision Date 07/26/2013:

- RPT01 - The DIR FROM REFERENCE must be N, S, E, W or blank when DISTANCE FROM REFERENCE MEASUREMENT and DISTANCE FROM REFERENCE MEASUREMENT TYPE are blank.

Revision Date 12/12/2013:

- OCC02: The number of People filled out for the Unit must be less than or equal to the # OF OCCUPANTS entered on unit.
- CARRIER NAME can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable. (New)
- CARRIER ADDRESS can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable. (New)
- CARRIER CITY can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable. (New)
- CARRIER STATE can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable. (New)
- CARRIER ZIP can be blank if Vehicle Weight GVWR/GCWR = 1-Less Than or Equal to 10k pounds and CARGO BODY TYPE = 1-No Cargo Body Type/Not Applicable. (New)

Revision Date 02/10/2015:

- UZN02: Invalid Owner zip code length. For US addresses the number of characters in the zip must be either 5 or 9.

Revision Date 04/09/2015:

- NTLO3 – Enter the Number of Thru Lanes Only. Values 1 – 9 Only. (New)