OHIO DEPARTMENT TRAFFIC CRASH		LOCAL REPORT NUMBER*										
PHOTOSTAKEN OH-2 X 0H-3	LOCAL INFORMATION		19-14418									
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY	REPORTING AGENCY NAME* JACKSON TWP POL	LICE DEPARTME	HIT/SKIP 1 - SOLVED 1 - SOLV									
COUNTY* LOCALITY* LOCATION: CITY		CRASH DATE / TIME * CRASH SEVERITY										
76 3 2-VILLAGE Jackson	2 - SERIOUS INJURY											
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	LOCATION ROAD NAME MEGA		LATITUDE DECIMAL DEGREES SUSPECTED 3-MINOR INJURY SUSPECTED SUSPECTED									
4-WL31	REFERENCE ROAD NAME (ROAD,	ROAD TYPE	LONGITUDE DECIMAL DEGREES 4 - INJURY POSSIB									
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	4572			5 - PROPERTY DAMAGE ONLY								
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE			INTERSECTION RE	LATED						
3 2- MILE POST 2- SOUTH US	70.5	ALLEY HW - HIGHWA ' - AVENUE LA - LANE	Y RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH								
	- STATE ROUTE CR	- BOULEVARD MP - MILEPOS R - CIRCLE OV - OVAL	ST ST - STREET TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES								
FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE CT	Y TL - TRAIL WA - WAY	ROADWAY									
2 - FEET	ROUTE DR	/IDED										
LOCATION OF FIRST HARMFUL EVEN		NNER OF CRASH COLLISION		DIRECTION OF TRAVEL MEDIAN TYPE								
1.0.0	VALLEY ACCESS 9 BET	LAK	1 - NORTH 1 2 - SOUTH	(< 4	IDED FLUSH MEDIAN FEET)							
4 - ON ROADSIDE 12-SHARED U		HICLES IN 6-ANGLE ANSPORT 7-SIDESWIP	E, SAME DIRECTION	3 - EAST 4 - WEST	IDED FLUSH MEDIAN FEET)							
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REA 3 - HEA		E, OPPOSITE DIRECTION IKNOWN	3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN								
7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / UN						Y TYPE) ER/UNKNOWN						
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH	IN WORK ZONE	CONTOUR	CONDITIONS	S SURFACE						
WARKERS BRESENT	· LANE CLOSURE · LANE SHIFT/CROSSOVER	1 - BEFORE THE WARNING S	I 1ST WORK ZONE IGN									
1 —	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE W. 3 - TRANSITION		1 - STRAIGHT LEVEL	1 - CONCRETE							
	INTERMITTENT OR MOVING WORK	4 - ACTIVITY AF 5 - TERMINATIO		2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP, 3 - CURVE LEVEL 3 - SNOW 2 - SPHALT								
LIGHT CONDITION	WEATH		,	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK						
1 - DAYLIGHT	1 - CLEAR 2 - CLOUDY	6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIF OIL, GRAVEL	4 - SLAG, GRAVEL, STONE						
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	7 - SEVERE CROSSWINDS E 8 - BLOWING SAND, SOIL		6 - WATER (STANDING, MOVING) 5 - DIRT									
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR F 99 - OTHER / UNKNOWN	REEZING DRIZZLE	7 - SLUSH 9 - OTHER/UNKNOV	9 - OTHER/UNKNOWN							
9 - OTHER / UNKNOWN					7-011EN/ONKNO	VIV						
NARRATIVE			, , ,		·	Indicate the north direction with						
UNIT #1 WAS PARKED IN A PARKING ST. NW. UNIT #2 WAS PARKING IN A	PARKING SPOT (SOUTH)	OF UNIT				an "N" on the compass diagram.						
#1, WHEN UNIT #2 STRUCK UNIT #1, C TO UNIT #1 PASSENGER REAR. UNIT												
DRIVER SIDE FRONT.		_				_						
JA		-				_						
		-				_						
		-										
		-				1 -						
		-				1 -						
		-				1 -						
						- - - 						
A CONTROL OF THE CONT	DISPATCH DATE / TIME	ARRIVAL DATE /		SCENE CLEARED		REPORT TAKEN BY						
03262019 1711 032	62019 1711	03262019	1723	73262019	1735	POLICE AGENCY MOTORIST						
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT		OLAS		FICER'S NAME* ON, STEVEN MOTORIST SUPPLEMENT								
		ADGE NUMBER* 9		D BY OFFICER'S BADGE NUMBER* (CORRECTION on ADDITION TO AN EXISTING REPORT SENT TO COPS)								
	1											

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						19-14418										
UNIT #	0.1									06061956 Age Gender						
address: street, city, state, zip 12879 REDWOOD AVE NW UNIONTOWN OH 44685								CONTACT PHONE - INCLUDE AREA CODE								
INJURIES ON THE STATE OF THE ST	INJURED TAKEN BY	EMS AGENCY (NAME) INJURED TAKEN TO:				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	□ дот-с	OMPLIANT ELMET	SEATING POSITIO	IN AIR BA	g usage	EJECTION	TRAPPED	
ADDRESS: 12879 INJURIES OL STATE	E OPERATOR LICENSE NUMBER OFFENSE CHAF				RGED	LOCAL	OFFENSE DESC	RIPTION			CITA	CITATION NUMBER				
1	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DISTRACTED			OHOL / DRUG SUSPI		CONDITION		COHOL TYPE	COHOL TEST YPE VALUE STATU		DRUG TEST(S) US TYPE RESULT SELECT UP			
4			BY ALCOHOL MARIJUANA OTHER DRUG				1									
02		AME: LAST, FIRST, MIDDLE (UEXIU, ZHOU							ALADOMIC COM PROMETORIOS STATE						F ENDER	
ADDRESS: 5171 \	STREET, CITY, ST	RWILL ST NW NO	RTH CA	1OTNA	N OH	l 44720			CONTACT PHONE - INCLUDE AREA CODE							
ADDRESS: 5171 \ OL STATE X X X X X X X X X X X X X X X X X X X	INJURED TAKEN BY	EMS AGENCY (NAME) INJURED TAKEN TO			: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	□ ВОТ-С МС Н	OMPLIANT E LMET	SEATING POSITIO	IN AIR BA	G USAGE	EJECTION	TRAPPED 1		
TOR STATE	OPERATOR L	ICENSE NUMBER	MBER OFFENSE CHAR			RGED	LOCAL CODE	OFFENSE DESC	SCRIPTION			CITATION NUMBER				
ol class	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DRI'DIS'BY	VER TRACTED	A	OHOL / DRUG SUSPI		condition 1		COHOL TYPE	TEST VALUE	STATUS		G TEST(S RESULT	SELECT UP TO 4	
UNIT #	IT# NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE					AGE	GENDER			
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE									
ADDRESS:	IURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEI			: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		OMPLIANT ELMET	SEATING POSITIO	IN AIR BA	G USAGE	EJECTION	TRAPPED			
OT CLASS		ICENSE NUMBER	CENSE NUMBER OFFENSE CHAF			RGED	LOCAL CODE	OFFENSE DESC				CITA	CITATION NUMBER			
© UL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DISTRACTED		OHOL / DRUG SUSPI	E CTED Rijuana	CONDITION	MDTITON -		COHOL TEST TYPE VALUE S		DRUG TEST(TATUS TYPE RESU		SELECT UP TO 4		
		SEATING DOSITION	ـ ابـــ	ID DAC		THER DRUG		OL DESTRIC	L L		/ER DISTRAC	TION			TUE	
INJU 1 - FATAL	IRIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DEP	IR BAG		OL CLASS 1-CLASS A	S	OL RESTRIC 1-ALCOHOL INTER			/ER DISTRAC T DISTRACTED	TION		T est sta Ie given	TUS	
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOYI	ED FRONT		2 - CLASS B 2 - CDL INTRAST										
3 - SUSPECTED		2 - FRONT – MIDDLE 3 - FRONT – RIGHT SIDE	3 - DEPLOYI						3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE			
4 - POSSIBLE IN 5 - NO APPAREN		4 - SECOND - LEFT SIDE	5 - NOT APP	ED BOTH FROI LICABLE	NI/SIDE	/ SIDE			DIALINO/			4 - TEST GIVEN RESULTS KNOWN				
J NO ALTANEN	(MOTORCYCLE PASSENGER) 9 - DEPLOYMENT LINKNOW			WN	5 - M/C MOPED ONLY 6 - EXCEPT CLASS			J TALITING ON TIANDOT			ICE 5 - TEST GIVEN, RESULTS					
	4 CECOND DIGHT CIDE			6 - NO VALID OL		& CLASS B BUS 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE COMMUNICATION DEVICE				UNKNOWN						
	NOT TRANSPORTED 7-THIRD - LEFT SIDE FJECTION				OL ENDORSEMENT 7 - EXCEPT TRACT 8 - INTERMEDIATE						ALCOHOL TEST TYPE					
2 - EMS	(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED				H - HAZMAT RESTRICTIONS			ELECTRONIC DEVICE			1 - NONE 2 - BLOOD					
3 - POLICE	(11011/11)	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	TUIDN DICHT CINE			M - MOTORCYCLE 9 - LEARNER'S PE RESTRICTIONS		RMIT 6 - PASSENGER 7 - OTHER DISTRACTION			3 - URINE					
9-01HER/UNK	9 - OTHER / UNKNOWN 3 - THIRD - NORTH SIDE 3 - TOTALLY EJECTED 10 - SLEEPER SECTION 4 - NOT APPLICABLE			P - PASSENGER N - TANKER 10 - LIMITED TO DAY		110105 7115 115 115 115 115 115 115 115 115 1		4 - BREATH								
SAFETY EQUIPMENT OF TRUCK CAB			Q - MOTOR SCOOTER		11 - LIMITED TO EMI	PLOYMENT	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE			E 5-OTHER						
1 - NONE USED	ENCLOSED CARGO AREA			R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		9 - OTHER / UNKNOWN			DRUG TEST TYPE					
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPED 3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY				S - SCHOOL BUS 13 - MECHANICAL D (SPECIAL BRAK			ES, HAND				1 - NONE				
	4-SHOOLDER & LAP BELL USED TE TAGGETTE IN CHERCEGE			NICAL MEANS 1 - DOUBLE & TRIPLE TRAILERS X - TANKER / HA7MAT			CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL			2 - BL00D 3 - URINE				
			3 - FREED B NON-ME	ECHANICAL MEANS			14 - MILITARY VEHICLES ONLY			2 - PHYSICAL IMPAIRMENT		4 - OTHER				
	6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR			GENDER			15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED,							
REAR FACING	REAR FACING (NON-TRAILING UNIT)			F - FEMALE M - MALE			16 - OUTSIDE MIRROR		ANGRY, DISTURBED) 4 - ILLNESS			DRUG TEST RESULT(S) 1-AMPHETAMINES				
	7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HELMET USED 99 - OTHER / UNKNOWN			U - OTHER / UNKNOWN			17 - PROSTHETIC AID		5 - FELL ASLEEP, FAINTED,		D,	2 - BARBITURATES				
9 - PROTECTIVE PADS USED							18 - OTHER		FATIGUED, ETC.		`F	3 - BENZODIAZEPINES				
(ELBOW, KNE	(ELBOW, KNEES, ETC.)									6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			4 - CANNABINOIDS			
10 - REFLECTIVE CLOTHING							0			/ ALCOHOL 9 - OTHER / UNKNOWN			5 - COCAINE 6 - OPIATES / OPIOIDS			
11 - LIGHTING – PEDESTRIAN / BICYCLE ONLY							7-011	ER / ONKNOWN		7 - OTH		•				
99 - OTHER / UNK	CNOWN												8 - NEG	ATIVE RESU	_T\$	

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