OHIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT  LOUIS VICTORIAN PARTICIPATION  LOCAL INFORMATION										1	19-18002										
PHOTOSTAKEN DON-2 NON-2										ت	- / -	<u> </u>	<u> </u>		1	1	1_1	1			
SECONDARY CRASH	OH-1P OTHER REPORTING AGENCY NAME* NCIC*										HIT/SKIP 1 - SOLVED	.	UMBER	MBER OF UNITS UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN							
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*										CRASH DATE / TIME* CRASH SEVERITY								OVVIN			
7.6 3 2-VILLAGE Jackson (Township of)										04162019 1518 5 1-FATAL											
1 NOTTH AND THE STATE OF THE ST										Z-SERIOUS INJURY											
ROUTE TYPE ROUTE NUI	4	WALES								ال	3 - MINOR INJURY SUSPECTED										
ROUTE TYPE ROUTE NUI	MBER PREFIX 1		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)								LONGITUD	NJURY P	OSSIB	LE							
ROUTE TYPE ROUTE NUI	3	- EAST - WEST	5508							5 - PROPERTY DAMAGE ONLY											
REFERENCE POINT	E JTE(TP) AI			TYPE			INTERSECTION RELATED														
3 1- INTERSECTION 2- MILE POST	L - ALLEY V - AVENUE	HW - H LA - L	IGHWAY ANE	RD - SQ -	ROAD SQUARE	WITHIN INTERSECTION OR ON APPROACH															
└── 3 - HOUSE #	3 - HOUSE # 3 - EAST 4 - WEST SR - STATE ROUTE BL - BOULEVARD MP - MILEPOST ST - STREE									WITHIN INTERCHANGE AREA NUMBER OF APPROACHES											
DISTANCE FROM REFERENCE	FROM REFERENCE UNIT OF MEASURE CT - COURT PK - PARKWAY TL - TRAIL									ROADWAY											
	1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY ROUTE HE - HEIGHTS PL - PLACE											ROADWAY DIVIDED									
J IMAGE												DIDECTION OF TRAVEL									
LOCATION OF FIRST HARMFUL EVENT  1 - ON ROADWAY 9 - CROSSOVER  MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 4 - REAR-TO-REAR										DIRECTION OF TRAVEL MEDIAN TYPE  1 - NORTH 1 - DIVIDED FLUSH MEDIAN											
2 - ON SHOULDE 3 - IN MEDIAN	L TW	BETWEEN 5 - BACKING TWO MOTOR VEHICLES IN 6 - ANGLE						2 - SOUTH 2 - SOUTH 2 -					( <4 FEET ) - DIVIDED FLUSH MEDIAN								
4 - ON ROADSID		SHARED USE	PATHS OR	PATHS OR TRANSPORT 7 - SIDESWIPE, SAME							4 - WEST	2	( ≥4 FEET ) 3 - DIVIDED, DEPRESSED MEDIAN								
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 3 - HEAD-ON 9 - OTHER / UNKNOWN										4 - DIVIDED, RAISED MEDIAN (ANY TYPE)											
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNKNOWN											9 - OTHER/UNKNOWN										
WORK ZONE RELAT	ED		WORK ZONE TY	PE	LOCATIO	N OF C	RASH II	WORK	ZONE	CONTOUR CONDITIONS SURF.						_	2				
WORKERS PRESEN			ANE CLOSURE 1 - BEFORE THE 1ST ANE SHIFT/CROSSOVER WARNING SIGN						RK ZONE		9		_9_			9					
LAW ENFORCEMEN	3-W	WORK ON SHOULDER 2 - ADVANCE WARNIN						REA	1 - ST	RAIGHT LEV	EL 1	- DRY	Y 1 - CONCRETE								
<del>-</del>		OR MEDIAN  INTERMITTENT OR MOVING WORK  3 - TRANSITION AREA  4 - ACTIVITY AREA						2 - STRAIGHT GRADE 2 - WET 3 - CURVE LEVEL 3 - SNOW					2 - BLACKTOP, BITUMINOUS,								
ACTIVE SCHOOL ZO	NE	5 - 0	OTHER 5 - TERMINATION AREA						4 - CURVE GRADE 4 - ICE						ASPHALT 3 - BRICK/BLOCK						
	ONDITION		7 01	WEATHER						9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, 4 - SL						4 - SLAG, STON	GRAV				
9 1 - DAYLIGHT 2 - DAWN/DUSK			9 9 1 - CLEAR 6 - SNOW 2 - CLOUDY 7 - SEVERE CROSSWINDS								6			- WATER (STANDING,			E				
3 - DARK – LIGHT 4 - DARK – ROAD	ED	3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, 4 - RAIN 9 - FREEZING RAIN OR FREEZI									MOVIN - SLUSH	MOVING) SLUSH			5 - DIRT 9 - OTHER/UNKNOWN						
5 - DARK – UNKN	IOWN ROADWAY									9 - OTHER/UNKN					own						
9 - OTHER / UNKI	NUWN					1		J		1				J			10 ATOMY	4000			
NARRATIVE	VED DD1\/E	DI 500 5													1	Indica directi an "N"	on wit	h			
UNIT #1 WAS PARI LOCATED AT MAR										,	$\nabla$	compa									
IN FRONT OF THE TO REVERSE OUT		_												-							
OF UNIT #1 WITH 1	HE	_												-							
SCENE WITHOUT LEAVING ANY INFORMATION AS REQUIRED BY OHIGH LAW. NO INJURIES REPORTED.																					
SEE OH-3/SEE OH-2/SEE 380 & 459 BODY CAMS.															+						
U-459 / U-380																					
KB															-						
·																	-				
															-						
															_						
																		-			
																		-			
CRASH REPORTED D	ISPATCH DATE /	Noncomercial Supplication of Supplication Su						SCENE CLEARED DATE / TIME REPORT													
04162019	1519	9 041,62019 1525 0					04162019   1608					POLICE AGENCY  MOTORIST									
TOTAL TIME ROADWAY CLOSED INVE	NUAV AL AGEN VINCENTALITA I TOTAL								FICER'S NAME*  ON, STEVEN  SUPPLEMENT							/ENT					
	O 49 OFFICER'S BADGE NUMBER* CHI								D BY OFFICER'S BADGE NUMBER*							N or ADI	OITION TO ODPS)				
								1													

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OHIO DEL OF PUBLI SAZETY - SERV	OF PUBLIC SAFETY MOTORIST / NON-MOTORIST  MOTORIST / NON-MOTORIST										19-18002								
UNIT #	1									DA	TE OF BIRTH			AGE	GENDER				
$\overline{\Omega}$	PARKED, UNOCCUPIED									F									
ADDRESS:  NON / INJURIES  OL STATE	SS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE								
o ▼ INJURIES	S INJURED EMS AGENCY (NAME) INJURED TAKENTO: MEDICAL FAC							LITY (NAME, CITY) SAFETY EQUIPMENT			SEATING POSITION	ON AIR BA	AG USAGE	EJECTION	TRAPPED				
NON .	TAKEN BY		000000000000000000000000000000000000000			USED	Прот-с мс ні				1								
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATION NUMBER							
010R		_																	
≥ OL CLASS	CLASS ENDORSEMENT SELECTUPTO 2 RESTRICTION SELECT		DISTRACTED AL			OHOL / DRUG SUSPECTED  LCOHOL MARIJUANA  THER DRUG		CONDITION	STATUS TYPE		PE VALUE S			PE RESULT SELECT UP TO 4					
UNIT #	NAME: LAST,	FIRST, MIDDLE									TE OF BIRTH			AGE	GENDER				
$\cup$	02 unknown, unknown							ш	1 1	1 1	1 1			N_					
ADDRESS:	STREET, CITY, ST								CONTACT PHONE - INCLUDE AREA CODE										
O UNKI		NKNOWN		TINILIBED	FAVENTO	: MEDICAL FACILITY	(NAME OFFICE	SAFETY FOILIDMENT			SEATING POSITION	N ATD D	LC HEACE	FIECTION	TRADDED				
INJURIES	NJURIES INJURED EMS AGENCY (NAME) TAKEN BY			INJURED	IAKENTO	: WEDICAL PACILITY	(NAME, CITY)	USED 99	DOT-COMPLIANT SEATING PUST		01	ION AIR BAG USAI			TRAPPED				
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL CODE	OFFENSE DESC	ESCRIPTION				CITATION NUMBER						
ADDRESS:  UNKN INJURIES  OL STATE																			
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	RACTED		OHOL / DRUG SUSPI		CONDITION		COHOL TYPE	TEST VALUE	STATUS		G TEST(S RESULT	) 「SELECT UPTO 4				
	1 11		BY	9	=	LCOHOL MAI	RIJUANA	9		1		e :		11 11	п п				
UNIT #	UNIT # NAME: LAST, FIRST, MIDDLE									DA	TE OF BIRTH		T	AGE	GENDER				
										1 1	1 1	f f							
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE								
010	I I							I.		1	1 1	_	1		1 1				
ADDRESS:  INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		OMPLIANT	SEATING POSITION	ON AIR BA	AG USAGE	EJECTION	TRAPPED				
	OPERATOR L		OFFENSE CHARGED LOCAL OFFENSE D								CITA	CITATION NUMBER							
OL STATE				CODE															
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST STATUS TYPE VALUE		DRU STATUS TYP		RUG TEST(S) YPE RESULT SELECT UP TO 4						
			BY			LCOHOL MAI THER DRUG	RIJUANA	v.		,									
INJU	JRIES	SEATING POSITION	A	IR BAG	°	OL CLAS	5	OL RESTRIC	TION(S)		VER DISTRAC	TION		TEST STA	TUS				
1 - FATAL	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)				1 - CLASS A 2 - CLASS B	1 - ALCOHOL INTER 2 - CDL INTRASTAT	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN			1 - NONE GIVEN 2 - TEST REFUSED								
3 - SUSPECTED		2 - FRONT - MIDDLE	NT - MIDDLE 3 - DEPLOYED S			3 - CLASS C	3 - CORRECTIVE LE	ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,											
4 - POSSIBLE INJURY 5 - NO APPARENT INJURY		4 - SECOND - LEFT SIDE 5 - NOT APPLIC			NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS	4 - FARM WAIVER 5 - EXCEPT CLASS A BUS				4 - TEST GIVEN, RESULTS KNOWN						
INJURED	INJURED TAKEN BY  (MOTORCYCLE PASSENGE  5-SECOND - MIDDLE		9 - DEPLOY	MENT UNKNO	OWN	5 - M/C MOPED ONLY 6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	4	LKING ON HANDS-F MMUNICATION DEV				ULTS						
1 - NOT TRANSP	1 - NOT TRANSPORTED 6 - SECOND - RIGHT SIDE /TREATED AT SCENE 7 - THIRD - LEFT SIDE		EJECTION OL ENDORSEMENT						7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE			/ICE	ALC	OHOL TES	ST TYPE				
2 - EMS	2 - EMS (MOTORCY)		1 - NOT EJECTED			H - HAZMAT	ELECTRONIC DEV			1 NONE									
3 - POLICE	3 - POLICE 8 - THIRD - MIDDLE 9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE		2 - PARTIALLY EJECTED M - MOTORCYCLE 3 - TOTALLY EJECTED P - PASSENGER					9 - LEARNER'S PER RESTRICTIONS	6 - PASSENGER 7 - OTHER DISTRACTION			3 - URINE							
SAFETY EQUIPMENT  10 - SLEEPER SECTION OF TRUCK CAB			4 - NOT APPLICABLE N - TANKER					10 - LIMITED TO DAY	INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE			4 - BREATH E 5 - OTHER							
1- PASSENGER IN OTHER ENCLOSED CARGO AREA			TI	TRAPPED R-THREE-WHEEL MOTORCYCLE 12-LI					11 - LIMITED TO EMPLOYMENT 12 - LIMITED – OTHER			THE VEHICLE  9 - OTHER / UNKNOWN			DRUG TEST TYPE				
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 3 - LAP BELT ONLY USED PICK-UP WITH CAP)		1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS	(SPECIAL BRAK			ES, HAND			1 - NONE						
4 - SHOULDER 8	& LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	OSED MECHANICAL MEANS 3 - FREED BY			X - TANKER / HAZMAT ADAPTIV					CONDITION  1 - APPARENTLY NORMAL			2 - BLOOD 3 - URINE					
FORWARD FA		13 - TRAILING UNIT		CHANICAL M	EANS	GENDER 14 - MILITARY VEHICL 15 - MOTOR VEHICL			E THIOTOTE IMPAIRME										
6 - CHILD REST REAR FACIN	RAINT SYSTEM – G	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	(NON-TRAILING UNIT)				F - FEMALE AIR BRAKI M - MALE 16 - OUTSIDE N			ANG	ANGRY, DISTURBED)  4- ILLNESS			DRUG TEST RESULT(S)  1-AMPHETAMINES					
7 - BOOSTER SE 8 - HELMET US		15 - NON-MOTORIST 99 - OTHER / UNKNOWN			M - MALE U - OTHER / UNKNOWN				)	5 - FELL ASLEEP, FAINTED,			2 - BARBITURATES						
9 - PROTECTIVE	PADS USED						18 - OTHER		FATIGUED, ETC.  6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES 4 - CANNABINOIDS							
	(ELBOW, KNEES, ETC.)  10 - REFLECTIVE CLOTHING									OF MEDICATIONS / DRUG /ALCOHOL			5 - COCAINE						
11 - LIGHTING - I / BICYCLE OF										9 - OTI	HER / UNKNOWN		6 - 0PI 7 - 0TH	ATES / OPIOIC ER	S				
99 - OTHER / UNK												ATIVE RESU	LTS						

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