OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*										
PHOTOS TAKEN UN-2 W ON-3 L	LOCAL INFORMATION		19-28682								
CECONDARY CRACH											
COUNTY* LOCALITY* 76 3 2-VILLAGE Jackson (crash date/time* crash severity 06212019 1044 5 1-FATAL									
3-10WNSHIP - 112-111	2 - SERIOUS INJURY										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	ROAD TYPE AV	LATITUDE DE	3 - MINOR INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	REFERENCE ROAD NAME (ROAD,	, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	SUSPECTED 4 - INJURY POSSIBLE						
2 - SOUTH 3 - EAST	2905	,				5 - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION REL						
2 MILE POST 2 COUTH		- ALLEY HW- HIGHWAY - AVENUE LA - LANE	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
3- HOUSE # 3- EAST	STATE ROUTE BL	- BOULEVARD MP - MILEPOS	ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- CIRCLE OV - OVAL - COURT PK - PARKWAY	TE - TERRACE TL - TRAIL	ROADWAY							
	ROUTE	- DRIVE PI - PIKE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIVIDED							
LOCATION OF FIRST HARMFUL EVENT	I	INER OF CRASH COLLISION/I		DIRECTION OF TRAVEL MEDIAN TYPE							
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	ALLEY ACCESS 9 BET	COLLISION 4-REAR-TO-RE WEEN 5-BACKING MOTOR	.AK	1 - NORTH 2 - SOUTH	DED FLUSH MEDIAN FEET)						
3-IN MEDIAN 11-RAILWAY GF 4-ON ROADSIDE 12-SHARED US	RADE CROSSING L VEH	HICLES IN 6-ANGLE INSPORT 7-SIDESWIPE	SAME DIRECTION	3 - EAST 4 - WEST	(≥4	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAI 3 - HEAI		OPPOSITE DIRECTION	3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN							
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNI				(ANYTYPE) 9 - OTHER/UNKNOWN							
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH I	N WORK ZONE	CONTOUR	CONDITIONS	SURFACE					
WORKERS PRESENT	ANE CLOSURE ANE SHIFT/CROSSOVER	1 - BEFORE THE WARNING SI		9	_9_	. 9.					
— 3-V	VORK ON SHOULDER OR MEDIAN	2 - ADVANCE WA 3 - TRANSITION		1 - STRAIGHT LEVEL	1 - CONCRETE						
4 - I	NTERMITTENT OR MOVING WORK OTHER	100 TO THE	ĒΑ	2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOF BITUMING ASPHALT							
			VANCA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK					
LIGHT CONDITION 1 - DAYLIGHT	WEATHI	6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 4 - SI							
2 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMOKE	7 - SEVERE CROSSWINDS E 8 - BLOWING SAND, SOIL,	MONTANO			3 - DIKT					
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	9 - FREEZING RAIN OR FR 99 - OTHER / UNKNOWN	EEZING DRIZZLE		9 - OTHER/UNKNOWN							
9-OTHER/UNKNOWN	5 - SLEET, HAIL				9 - OTHER/UNKNOW	N					
NARRATIVE			1 1	1 1 1		Indicate the north direction with					
UNIT #1 STATES HE WAS STOPPED AT THE ROADWAY WHILE STILL IN THE LI		[an "N" on the compass diagram.					
STATES UNIT #2 THEN BUMPED HIM. UCAR IN REVERSE AND RAN INTO UNIT	JNIT #2 STATES UNIT #1										
INDEPENDENT WITNESSES AND NO A	VAILABLE CCTV TO FIND					_					
AT FAULT.	THO I BE DETERMINED I	WHO WAS									
U-416		-									
KB											
						+ + -					
						+ + + -					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / 1	TMF T	SCENE CLEARED I	DATE / TIME	REPORT TAKEN BY					
AND THE PROPERTY OF THE PROPER	12019 1103	06212019	500000000000000000000000000000000000000	06212019	-contract Contract	POLICE AGENCY					
TOTAL TIME OTHER TOTAL	OFFICER'S NAME*			FFICER'S NAME*							
	BADER, CHRISTOPHER COLL					IS, JASON SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO GOPS)					
0 0 5	5 OFFICER'S BAI	CHECKED	6 7								

PAGE

J FIRST HARMFUL EVENT

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						19-28682									
UNIT #	0.1							07271943 AGE GENI							
ADDRESS: STREET, CITY, STATE, ZIP 1200 SALWAY SW NORTH CANTON OH 44720								CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME) INJURED TAKENTO: MEDICAL				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING POSIT	ION AIR BA	IG USAGE	EJECTION	TRAPPED 1	
ADDRESS ADDRESS 1200 INJURIES T STATE	TE OPERATOR LICENSE NUMBER OFFENS			SE CHAI	RGED	LOCAL OFFENSE DESC						CITATION NUMBER			
ol class	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DISTRACT					condition	STATUS 1	STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4				
UNIT_#	NAME: LAST, F	FIRST, MIDDLE	OTHER DRUG							DATE OF BIRTH			AGE	GENDER	
02	NGUYEN, PHONG THANH							09201974 44 M							
7041	S: STREET, CITY, ST. TIDEWAT	ER ST NE CANTO	N OH	44708					CONTACT	F PHONE - INCLUDE AREA	A CODE				
ADDRESS ADDRES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO:			: MEDICAL FACILITY	ILITY (NAME, CITY) SAFETY EQUIPMENT USED 9		DOT-COMPLIANT SEATING POSITION AND THE COMPLIANT		ION AIR BA	AIR BAG USAGE EJECTION T		TRAPPED	
OL STATE	OPERATOR L	ICENSE NUMBER	ER OFFENSE CHAI			RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATION NUMBER				
ol class	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ДА	DHOL / DRUG SUSPE		condition 1		TYPE VALUE	status 1		RESULT	SELECT UPTO 4	
UNIT #	NAME: LAST, F	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH			AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
ADDRESS INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED.	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	OMPLIANT SEATING POSIT	ION AIR BA	G USAGE	EJECTION	TRAPPED	
	BY L	OR LICENSE NUMBER OFFENSE CHA			SE CHAF	RGED	LOCAL	OFFENSE DESC	RIPTION	CITA	CITATION NUMBER				
OL STATE	ENDORSEMENT	MENT RESTRICTION SELECT UPTO 3 DRIVER			CODE CODE			CONDITION	ALCOHOL TEST			DRUG TEST(S)			
UL CLASS	SELECT UP TO 2		DIS BY	TRACTED		LCOHOL MAF	RIJUANA	CONDITION	STATUS	TYPE VALUE	STATUS		RESULT	SELECT UPTO 4	
L	UDVEC			ID DAG		THER DRUG		OL DECEDIO	TION(C)	DRIVER DICEDA	CTION			TUC	
1 - FATAL	URIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT DEF	AIR BAG		OL CLASS 1-CLASS A	•	OL RESTRIC 1-ALCOHOL INTER	77.0	1 - NOT DISTRACTED	CIIUN	-	TEST STA E GIVEN	105	
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOY						2 - CDL INTRASTATE ONLY 2 - MANUALLY OPERATIN						
3 - SUSPECTE	MINOR INJURY	2 - FRONT – MIDDLE	3 - DEPLOY				3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,		N 3 - TEST GIVEN, CONTAMINATED				
4 - POSSIBLE I	4 - POSSIBLE INJURY 3 - FRONT - RIGHT SIDE 4 - DEPLO		4 - DEPLOY	ED BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER		DIALING)		SAMPLE / UNUSABLE				
5 - NO APPARE	5 - NO APPARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - NOT AP		5 - NOT APP				5 - EXCEPT CLASS	A BUS	3 - TALKING ON HANDS						
INJURED TAKEN BY 5- SECOND - MIDDLE 9- DEPLOYI			MENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLAS: 6 - NO VALID OL & CLASS B BU:						UNKNOWN						
1 - NOT TRANS		6 - SECOND - RIGHT SIDE				0 - NO VALID OL		7 - EXCEPT TRACTO	D.TDAILED	4 - TALKING ON HAND-F COMMUNICATION DE					
/TREATED		7 - THIRD - LEFT SIDE	E.	JECTION		OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WI				ST TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR)	1 - NOT EJE	CTED		H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVIC	E	1 - NON 2 - BLO			
3 - POLICE	0 THIRD DICHT CIDE						9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER		3 - URINE				
9 - OTHER/UN	7-UIREK/UNKNUWN J-IUIALLI				10 - LIMITED TO DAYLIGHT ONLY		7 - OTHER DISTRACTION INSIDE THE VEHICLE		4 - BREATH						
SAFETY EQUIPMENT OFTRUCK CAB 4 - NOT APPL				11 - LIMITED TO EMPLOYMENT		8 - OTHER DISTRACTION OUTSIDE									
1 - NONE USED 11 - PASSENGER IN OTHER TRAPPED				Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHE			ER THE VEHICLE			DDUG TEST TVDE					
2 - SHOULDER BELT ONLY USED ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPE			PPED	PED S - SCHOOL BUS 13 - MECHANICAL I						DRUG TEST TYPE 1 - NONE					
3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA		ATED BY T - DOUBLE & TRIPLE TRAILERS			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		2 - BL00D						
CARGO AREA 2 FREED		X - TANKER / HA7MAT		ADAPTIVE DEVICES)		1 - APPARENTLY NORMAL		3 - URINE							
■ 5-CHILD RESTRAINT SYSTEM =			GENDER		14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT		4 - OTHER						
6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR			F-FEMALE			AIR BRAKES		 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 		DRUG TEST RESULT(S)					
REAR FACING (NON-TRAILING UNIT) 7 - BOOSTER SEAT 15 - NON-MOTORIST			M - MALE					4- ILLNESS			1 - AMPHETAMINES				
7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HELMET USED 99 - OTHER / UNKNOWN			U - OTHER / UNKNOWN			17 - PROSTHETIC AID 5 - FELL ASLEEP, FA		5 - FELL ASLEEP, FAINT							
9 - PROTECTIVE PADS USED					18 - OTHER		FATIGUED, ETC. 6 - UNDER THE INFLUENCE		3 - BENZODIAZEPINES						
(ELBOW, KNEES, ETC.)							OF MEDI		OF MEDICATIONS / D	DRUGS 4 - CANNABINOIDS					
10 - REFLECTIV										/ALCOHOL		5 - COC/		10	
11 - LIGHTING – PEDESTRIAN / BICYCLE ONLY						9 - OTHER / UNKNOW			6 - OPIATES / OPIOIDS 7 - OTHER						
99 - OTHER / UN	KNOWN												ATIVE RESU	LTS	

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