OHIO DEPARTMENT TRAFFIC CRASH	REPORT *DENOTES MA	IANDATORY FIELD FOR S	LOCAL REPORT NUMBER*									
PHOTOSTAKEN OH-2 X 0H-3												
SECONDARY CRASH OH-1P OTHER NOTE: OH-1P OTHER NOTE: OH-1P OTHER	REPORTING AGENCY NAME* JACKSON TWP POI	LICE DEPARTI	HIT/SKIP 1 - SOLVED 2 - UNSOLVED	NUMBER OF UNITS	O 2 98 - ANIMAL 99 - UNKNOWN							
COUNTY* LOCALITY* LOCATION: CIT	CRASH DATE / TIME * CRASH SEVERITY											
Jackson 3 2-VILLAGE Jackson	2 - SERIOUS INJURY											
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY											
	REFERENCE ROAD NAME (ROAD), MILEPOST, HOUSE #)	ST ROAD TYP	LONGITUDE D	ECIMAL DEGREES	SUSPECTED 4 - INJURY POSSIBLE						
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	4150			5 - PROPERTY DAMAI								
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TY			INTERSECTION RELA	2000						
3 1-INTERSECTION 1-NORTH IR 2-SOUTH IIS	70.00	L - ALLEY HW - HIGH V - AVENUE LA - LANE		WITHIN INTERSECTION OR ON APPROACH								
	- STATE ROUTE CR	L - BOULEVARD MP - MILE R - CIRCLE OV - OVAL	POST ST - STREET TE - TERRACI									
FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE CT	WAY TL - TRAIL WA - WAY		ROADWAY								
2 - FEET 3 - YARDS	ROUTE	R - DRIVE PI - PIKE E - HEIGHTS PL - PLAC	ROADWAY DIV	VIDED								
LOCATION OF FIRST HARMFUL EVEN		NNER OF CRASH COLLISI T COLLISION 4-REAR-T		DIRECTION OF TRAVEL MEDIAN TYPE								
0 6 2 - ON SHOULDER 10-DRIVEWAY	VALLEY ACCESS 9 BET	TWEEN 5 - BACKIN		1 - NORTH 2 - SOUTH	(< 4 F	DED FLUSH MEDIAN FEET)						
4 - ON ROADSIDE 12-SHARED U	SE PATHS OR TRA		IPE, SAME DIRECTION	3 - EAST 4 - WEST	(≥4 F	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)						
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEA		TIPE, OPPOSITE DIRECTIO UNKNOWN		3 - DIVIDED, DEPRESSED MEDIAI 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)							
7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / UI						R/UNKNOWN						
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRA		CONTOUR	CONDITIONS	SURFACE						
WORKERS PRESENT 2-	WARNING											
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN	☐☐☐ 3 - TRANSIT		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,						
	· INTERMITTENT OR MOVING WORK · OTHER	4 - ACTIVITY 5 - TERMINA		3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT						
LIGHT CONDITION	WEATH	HER		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,						
1 - DAYLIGHT 2 - DAWN/DUSK	1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWII	NDS		OIL, GRAVEL 6 - WATER (STANDIN	STONE						
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKI 4 - RAIN	(E 8 - BLOWING SAND, SO 9 - FREEZING RAIN O		:	MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN						
5 - DARK — UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	The ALL PROPERTY OF THE PROPER	99 - OTHER / UNKNOW			4							
NARRATIVE		L1				✓ Indicate the north						
ON 07/19/2019, AT APPROXIMATELY 1	700 HOURS, UNIT #1 WAS	S PARKED			+++	direction with an "N" on the						
IN THE PARKING LOT OF 4150 BELDE PARKED, UNIT #1 WAS STRUCK BY U						compass diagram.						
VEHICLE IN THE BACK DRIVER SIDE OF THE SCENE WITHOUT LEAVING ANY		#2 LEFT										
JA												
						_						
		-										
		-										
						_ -						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DAT	E/TIME	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY						
	92019 1744	07192019	SOUTH CONTRACTOR OF THE SOUTH O	07192019	C-CLOSESSIA INC. D-CLOSESSOCIOS	POLICE AGENCY						
TOTAL TIME OTHER TOTAL	AL OFFICER'S NAME*	1	CHECKED BY OF	ICER'S NAME*		MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME MINUT	ROUSE, WAT IT	ADGE NUMBER*	Снеске	LOUGH, TIMOTHY D BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ADD TO AR ENSITING REPORT SENT								
0 0 3	31 OFFICER'S BA	, 1, 2 , 2	2		3 , 1							

J FIRST HARMFUL EVENT

PAGE

OHIO DEL OF PUBLI MAZETY - BERY	OF PUBLIC SAFETY MATTI- METRIC - PROPERTIES MOTORIST / NON-MOTORIST							19-33152								
UNIT #	1								DA	TE OF BIRTH			AGE	GENDER		
0T	PARKED, UNOCCUPIED								F							
ADDRESS:	DRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	INJURED	EMS AGENCY (NAME)		INJUREDT	AKFNTO	: MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT		<u> </u>	SEATING POSITION	I ATR RA	AG USAGE	EJECTION	TRAPPED	
NON NO	TAKEN BY	LIII AGENOT (NAME)	(NAME) INSURED TAKEN TO			. MEDIONE I NOILII I	(IVAMIL, CITT)	USED	□ MC H	OMPLIANT E LMET	JEATING 1 OSTIT	AIR D	1	1 1	1 1	
ADDRESS: NON INJURIES OL STATE	OPERATOR LICENSE NUMBER OFFENSE CHAR				RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	ATION N	IUMBER			
010 																
1	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPI	E CTED RIJUANA	CONDITION		TYPE	VALUE	STATUS		G TEST(S	SELECT UP TO 4	
4						THER DRUG				•		L	1			
UNIT #	NAME: LAST,	77-0-000 - 0-7-0-0-0-0-0-0-0-0-0-0-0-0-0								DA	TE OF BIRTH			AGE	GENDER	
\cup		WN, UNKNOWN													M	
ADDRESS:	STREET, CITY, ST	TATE, ZIP							CONTACT	PHONE	E - INCLUDE AREA	CODE				
5	INJURED	EMS AGENCY (NAME)		TINHIBEDT	AVENTO	- MEDICAL FACILITY	(NAME CITY)	SAFETY FOILIDMENT			SEATING POSITION	N ATD DA	AC HEACE	FIECTION	TRAPPED	
NON	TAKEN BY	LINS AGENOT (NAME)		INJUNEDI	AKENTO	. MEDICAL FACILITY	TEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			OMPLIANT E LMET	SEATING FOSTIN	AIR B	AIR BAG USAGE EJECTION TRAPI		INAFFED	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION			CITATION NUMBER				
					CODE											
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		OHOL / DRUG SUSPI		CONDITION		COHOL TYPE	TEST VALUE	STATUS		G TEST(S RESULT	SELECT UPTO 4	
1 1	1 11		BY	1	=	LCOHOL MAF	RIJUANA	ļ. ,		The second		r	111	1 1	H H 1	
UNIT #								DATE OF BIRTH AGE G						GENDER		
									1 1	1 1	1 1					
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT	PHONE	E - INCLUDE AREA	CODE				
010	L							L	ш	I	1 1	1	1		1 1	
ADDRESS:	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	USED USED		OMPLIANT	SEATING POSITION	JN AIR BA	AG USAGE	EJECTION	TRAPPED	
	OPERATOR L	TOR LICENSE NUMBER OFFENSE CHAI			RGED	LOCAL	OFFENSE DESC	RIPTION				ATION NUMBER				
OL STATE						CODE										
OL CLASS				DISTRACTED			CONDITION	ALCOHOL TEST STATUS TYPE VALUE S			STATUS	DRUG TEST(S) TATUS TYPE RESULT SELECT UP TO 4				
			BY	5		LCOHOL MAF THER DRUG	RIJUANA			,				1	W 0 3	
INJU	IRIES	SEATING POSITION	A	IR BAG		OL CLASS	S	OL RESTRIC	TION(S)		VER DISTRAC	TION		TEST STA	TUS	
1 - FATAL	CEDIANA IN MINY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP			1 - CLASS A 1 - ALCOHOL INTER							1 - NONE GIVEN			
	- SUSPECTED SERIOUS INJURY 2 EDON'T MIDDLE		3 - DEPLOY	YED FRONT 2 - CLASS B YED SIDE 3 - CLASS C			2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,		NICATION	2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED				
	4 SECOND LEETSIDE			YED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER			DIALING)			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN			
5 - NO APPAREN	5 - NO APPARENT INJURY (MOTORCYCLE PASSENGER) 9 - DEPLOYMENT LINKNOV			WN	5 - EXCEPT CLASS 5 - M/C MOPED ONLY 6 - EXCEPT CLASS			J TALITING ON TIANDOTTI				CE 5 - TEST GIVEN, RESULTS				
	JURED TAKEN BY 5 - SECOND - MIDDLE TTRANSPORTED 6 - SECOND - RIGHT SIDE			6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE				UNKNOWN					
/TREATED A	ATED AT SCENE 7 - THIRD - LEFT SIDE EJECTION			OL ENDORSEMENT 8- INTERMEDIATE			E LICENSE 5 - OTHER ACTIVITY WITH				ALCOHOL TEST TYPE					
2 - EMS 3 - POLICE		8 - THIRD – MIDDLE 2 - PARTIALLY EJECTED		H - HAZMAT RESTRICTIONS M - MOTORCYCLE 9 - LEARNER'S PER							2 - BL00D					
9 - OTHER / UNK	10 SI FEREN SECTION		P - PASSENGER	10 LIMITED TO DAVI			7 - OTHER DISTRACTION VI IGHT ONLY INSIDE THE VEHICLE			3 - URINE 4 - BREATH						
SAFETY E	SAFETY EQUIPMENT OF TRUCK CAB		N - TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EMPLO		0 071150 01070 1071011 011701									
1 - NONE USED	NONE USED 11 - PASSENGER IN OTHER TRAPPED SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPED			R - THREE-WHEEL MO	TORCYCLE	ER EVICES	9 - OTHER / LINKNOWN			DRUG TEST TYPE						
	- LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY			SPECIAL BI		(SPECIAL BRAK CONTROLS, OR O	KES, HAND			1 - NONE 2 - BLOOD						
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		3 - FREED BY X - TANKER / HAZMAT			ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT		3 - URINE						
FORWARD FA	FORWARD FACING 13 - TRAILING UNIT 5 - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTERIOR		NON-ME	NON-MECHANICAL MEANS GENDER			15 - MOTOR VEHICLES WITHOUT		3 - EMOTIONAL (E.G., DEPRESSED,			4 - OTHER				
REAR FACIN	REAR FACING (NON-TRAILING UNIT)			F - FEMALE M - MALE			AIR BRAKES 16 - OUTSIDE MIRROR		ANGRY, DISTURBED) 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, FAINTED, FATIGUED, ETC.		D,	2 - BARBITURATES				
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						18 - OTHER		6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES 4 - CANNABINOIDS				
	10 - REFLECTIVE CLOTHING							OF MEDICATIONS / DRUGS / ALCOHOL			5 - COCAINE					
	11 - LIGHTING – PEDESTRIAN / BICYCLE ONLY							9-			9 - OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER		
99 - OTHER / UNK	CNOWN													GATIVE RESU	LTS	

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