OHIO DEPARTMENT TRAFFIC CRASH	REPORT *DENOTES MA LOCAL INFORMATION	ANDATORY FIELD FOR SUPPL	19-54658								
PHOTOSTAKEN OH-2 OH-3											
SECONDARY CRASH PRIVATE PROPERTY	OTHER REPORTING AGENCY NAME* NOTICE* NICTION HIT/SKIP NUMBER OF UNITS O 2 1 - SOLVED O 2 1 - SOLVED O 2 1 - SOLVED O 2 99 - UNIT IN ERROR O 3 99 - UNIT IN ERROR O 4 99 - UNIT IN ERROR O 5 99 - UNIT IN ERROR O 6 99 - UNIT IN ERROR O 7 6 2 4 1 2 1 - SOLVED										
COUNTY* LOCALITY* LOCATION: CITY		crash date/time* crash severity 11212019 1704 5 1-FATAL									
J NORTH	(Township of)	D040 TVD5	2 - SERIOUS INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	PORTAGE		ROAD TYPE	di sondicionale inside di consti	CIMAL DEGREES	3 - MINOR INJURY SUSPECTED					
	ROAD TYPE	LONGITUDE DE									
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	4450		- 		5 - PROPERTY DAMAGE ONLY						
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE			INTERSECTION REL	ATED					
3 2- MILE POST 2- SOUTH US-		- ALLEY HW- HIGHWAY - AVENUE LA - LANE	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
30 (0.510-0.)	STATE ROUTE CR	- BOULEVARD MP - MILEPOST - CIRCLE OV - OVAL	ST - STREET TE - TERRACE								
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- COURT PK - PARKWAY - DRIVE PI - PIKE	TL - TRAIL		ROADWAY						
2 - FEET	WA - WAY	ROADWAY DIV	/IDED								
LOCATION OF FIRST HARMFUL EVEN		NER OF CRASH COLLISION/IN		DIRECTION OF TRAVE	0.000.0	DIAN TYPE					
1. 0. 0	ALLEY ACCESS 6 BET	COLLISION 4-REAR-TO-REA WEEN 5-BACKING MOTOR	AK	1 - NORTH 1 - DIVIDED FLUSH MEDIAN (<4 FEET)							
4 - ON ROADSIDE 12-SHARED US	RADE CROSSING L VEHI	ICLES IN 6 - ANGLE NSPORT 7 - SIDESWIPE,	SAME DIRECTION	3 - EAST 2 - DIVIDED FLUSH MEDIAN (≥4 FEET)							
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAF 3 - HEAD	1 10 X			4 - DIVID	ED, DEPRESSED MEDIAN ED, RAISED MEDIAN					
7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / UN			TYPE) R/UNKNOWN								
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN	WORK ZONE	CONTOUR	CONDITIONS	SURFACE					
1-	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1 WARNING SIG									
T LAW ENFORCEMENT PRECENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WAR		1 - STRAIGHT LEVEL	1 - CONCRETE						
4-	INTERMITTENT OR MOVING WORK	4 - ACTIVITY ARE	4	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - BLACKTOP, BITUMINOUS, ASPHALT						
	OTHER	5 - TERMINATION	AREA	4 - CURVE GRADE	ASFRALI						
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	ER 6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL STONE							
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG. SMOG. SMOKE	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, D	IRT, SNOW	6 - WATER (STANDING, MOVING) 5 - DIRT							
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN		ZING RAIN OR FREEZING DRIZZLE 7-SLUSH 9-OTHE								
9 - OTHER / UNKNOWN	J- SEEEI, MAIL	77- THER OWN			9 - OTHER/UNKNOWN	N					
NARRATIVE			1 1 1			Indicate the north direction with					
UNIT #1 STATES HE WAS STOPPED W WHEN UNIT #2 CAME THROUGH THE I		_				an "N" on the compass diagram.					
AND CLIPPED THE FRONT OF HIS SEN TRAILER. UNIT #2 THEN LEFT THE SC	MI WITH THE REAR OF UN	NIT #2									
PERSONAL INFORMATION. IT IS UNC	LEAR IF UNIT #2 KNEW HE	E _				-					
STRUCK UNIT #1. REPORTING OFFICE THE STORE FOR CCTV, BUT NEITHER	OF THE TWO OUTSIDE C	CAMERAS _				_					
COULD HAVE PICKED UP THE INCIDER #1 UNABLE TO GIVE WRITTEN STATER	MENT DUE TO THE LANG										
BARRIER. STATEMENT ON BODY CAN	А										
SEE OH 2.											
JA											
		-									
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TI	MF T	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY					
Personal Control Contr	12019 1708	11212019	30000	1,1,2,1,2,0,1,9	CHECKS PRINT CHECK CHECKS CONTROL CONT	POLICE AGENCY					
TOTAL TIME OTHER TOTA	L OFFICER'S NAME*		CHECKED BY OFFI	CER'S NAME*		MOTORIST					
	BADEN, CHRIST	FOPHER DGE NUMBER* 1		N, STEVEN BY OFFICER'S BADGE 1	NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
0 0 4	12 OFFICER'S BAD			2,2,							

J FIRST HARMFUL EVENT

PAGE

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							19	19-54658									
UNIT # NAME: LAST, FIRST, MIDDLE JELOVAC, ZORAN								053	DATE OF BIRTH AGE GENDER 52 M								
TORIST	ADDRESS: STREET, CITY, STATE, ZIP 5075 W COLLEGE AVE Suite: 21 GREENDALE WI 53129									CONTACT	CONTACT PHONE - INCLUDE AREA CODE L						
N-M0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	OMPLIANT	SEATING POSITION	N AIR BAI	USAGE	EJECTION	TRAPPED	
ON/	لـــــــــــــــــــــــــــــــــــــ	BY								∟ мс н		<u>`∩†</u>			$\perp \perp$	ر لـ ــــــــــــــــــــــــــــــــــ	
TORIST	OL STATE	******	.ICENSE NUMBER *	OFFENSE CHAR			RGED	CODE	OFFENSE DESC	RIPTION		CIT			TATION NUMBER		
W	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		/ER TRACTED		OHOL / DRUG SUSPE		condition		COHOL YPE		STATUS	DRUG TYPE	RESULT	SELECT UP TO 4	
						0.	THER DRUG								النال		
	02	NAME: LAST, UNKNO	FIRST, MIDDLE WN, UNKNOWN							DATE OF BIRTH AGE GENE							
RIST		STREET, CITY, ST	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
MOTO	OH	INJURED	EMS AGENCY (NAME)		Iunen T	AVENTO	MEDICAL FACILITY		SAFETY EQUIPMENT			SEATING POSITION	N AVD DAG				
NON-	INJURIES	TAKEN BY	EWS AGENCY (NAME)	INJURED TAKEN TO:					USED	DOT-COMPLIANT 0 1		01	T T T T T T T T T T T T T T T T T T T	GUSAGE	EJECTION	TRAPPED	
TORIST /	OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CHAR			RGED	LOCAL CODE	OFFENSE DESC	RIPTION	CIT			TATION NUMBER			
MO	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIST	/ER TRACTED		OHOL / DRUG SUSPE		CONDITION		COHOL		STATUS	DRUG TYPE	TEST(S	SELECT UPTO 4	
				BY		=	THER DRUG	NIJUANA		ے اِنے					عالـــال		
	UNIT # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDE							
ST	ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE							
OTORI										L L L L L L L L L L L L L L L L L L L							
NON-M	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME) INJURED TAKEN T			AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING POSITION MC HELMET			N AIR BAG	AIR BAG USAGE EJECTION TRAPPED			
DRIST /	OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CHAR			RGED LOCAL CODE		OFFENSE DESC	RIPTION			CITA	CITATION NUMBER			
MOT	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		DRIVER ALCO		OHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO				
	BY		=	ALCOHOL MARIJUANA OTHER DRUG		ļ. ,		I a		Ŷ	Ĩ	11 11					
Ľ	INJU	RIES	SEATING POSITION	А	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)		ER DISTRACT		T	EST STA		
	(MOTORCYCLE DRIVED)		1 - NOT DEP 2 - DEPLOYE				1 - ALCOHOL INTER 2 - CDL INTRASTAT				C A N	1 - NONE GIVEN AN 2 - TEST REFUSED					
	2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 2		2 - FRONT - MIDDLE	3 - DEPLOYE			3 - CLASS C					ELECTRONIC COMMUNICATI DEVICE (TEXTING, TYPING,		TION 3 TEST GIVEN CONTAMINATED			
4	4 - POSSIBLE INJURY 3 - FRONT - RIGHT SIDE		4 - DEPLOYE	EPLOYED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER	DIALING)			SAMPLE / UNUSABLE						
(MOTORCYCLE PASSENGER)			5 - NOT APP	LICABLE MENT UNKNO	NA/AI	5 - M/C MOPED ONLY		5 - EXCEPT CLASS			3 -TALKING ON HANDS-FREE COMMUNICATION DEVICE 4 - TEST GIVEN, RESULTS KNI 5 - TEST GIVEN, RESULTS						
INJURED TAKEN BY 5- SECOND - MIDDLE			9-DEPLOTI	WENT UNKNU	VVIV	6 - NO VALID OL		& CLASS B BUS	4	4 - TAL	KING ON HAND-HEL	_D	IINKNOWN				
]	1 - NOT TRANSPORTED 6 - SECOND – RIGHT SIDE /TREATED AT SCENE 7 - THIRD – LEFT SIDE		E.	LECTION OF ENDORGEMENT			7 - EXCEPT TRACTO		COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN			ALCOHOL TEST TYPE					
2	2 - EMS (MOTORCYCLE SIDE CAR)		1 - NOT EJE				8 - INTERMEDIATE LICENSE RESTRICTIONS		ELECTRONIC DEVICE			1 - NONE					
	O THIRD DICHT CIDE			ALLY EJECTED M - MOTORCYCLE			9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER			2 - BLOOD 3 - URINE					
9	7- UTHER/ UNKNOWN		3 - TOTALLY 4 - NOT APP	LY EJECTED P - PASSENGER PPLICABLE N - TANKER			10 - LIMITED TO DAY	7 - OTHER DISTRACTION INSIDE THE VEHICLE			4 - BREATH						
	SAFETY EQUIPMENT OFTRUCK CAB			Q - MOTOR SCOOTER			11 - LIMITED TO EMI	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE			5 - OTHER						
	ENCLOSED CARGO AREA			TRAPPED R - THREE-WHEEL MOTORCYCLE			12 - LIMITED - OTHE 13 - MECHANICAL DI	9 - OTHER / UNKNOWN			DRUG TEST TYPE						
	- LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRICATED BY			S-SCHOOL BUS		(SPECIAL BRAKES, HAND		CONDITION			1 - NONE			
4	4 - SHOULDER & LAP BELT USED		12 - PASSENGER IN UNENCLOSED CARGO AREA	ED MECHANICAL MEANS 3 - FREED BY			CONTROLO		ADAPTIVE DEVI	ROLS, OR OTHER TIVE DEVICES)		1 - APPARENTLY NORMAL		2 - BLOOD 3 - URINE			
5	5 - CHILD RESTRAINT SYSTEM – FORWARD FACING		13 - TRAILING UNIT	NON-MECHANICAL MEANS					14 - MILITARY VEHI	- FOUNTHALE			NT 4-OTHER				
6	O OTTED RESTRICT STOTEM		14 - RIDING ON VEHICLE EXTERIOR	IOR					15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		ESSED,	DRUG TEST RESULT(S)			
7	KEAKTAONO		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRROR		4- ILLNESS			1 - AMPHETAMINES			
			99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN	17 - PROSTHETIC AII 18 - OTHER			FELL ASLEEP, FAINTED, FATIGUED, ETC.		2 - BARBITURATES				
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)								TO VITTER		6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			3 - BENZODIAZEPINES 4 - CANNABINOIDS				
10	10 - REFLECTIVE CLOTHING											COHOL	us	5 - COCAINE			
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY									9- 0TH	ER / UNKNOWN			TES / OPIOID	S			
99	99 - OTHER / UNKNOWN										7 - OTHER 8 - NEGATIVE RESULTS						

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