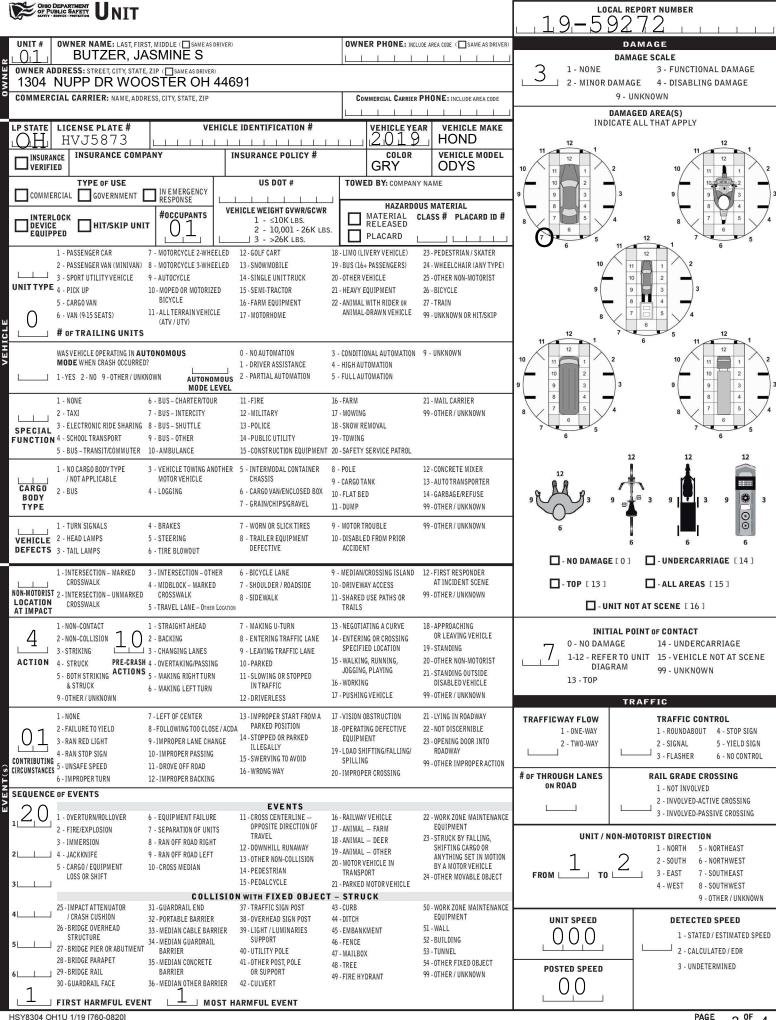
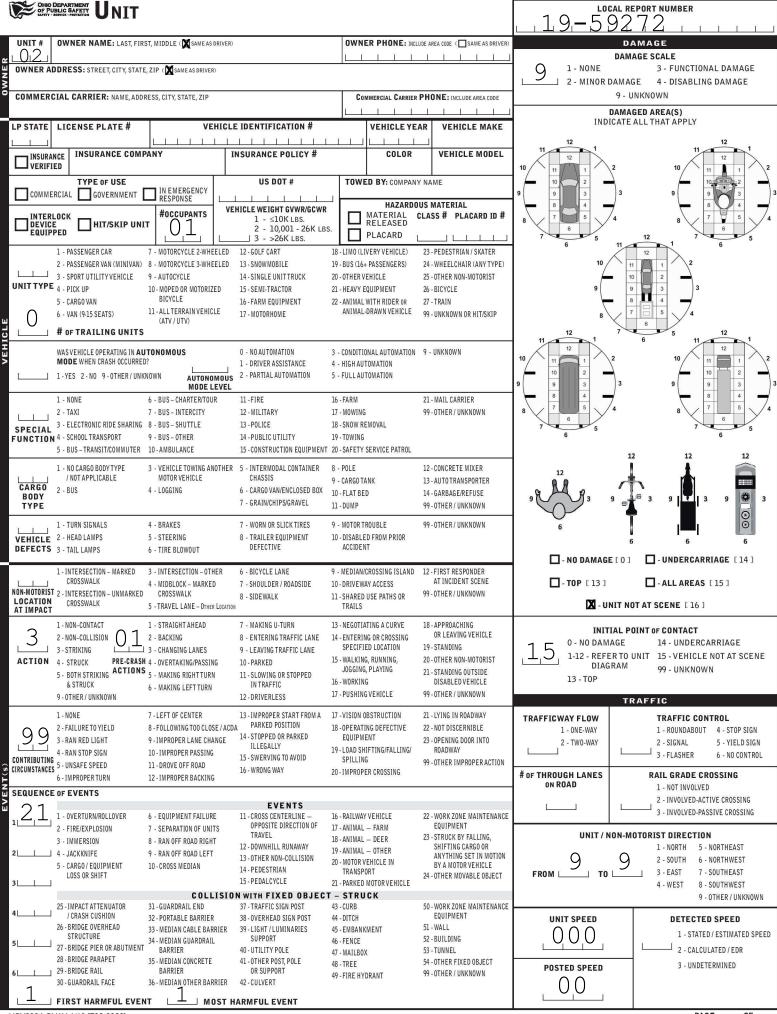
| CHILD BEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT | | | | | | | | | | 19-59272 | | | | | | | | |
|--|---|---|---|--------------------|----------------------|-------|---|-------------------------------|---------------------------------------|--|----------|-----------------------|------------------|----------------------|---------|--|--|--|
| ☐ PHOTOS TAKEN 0H-2 X 0H-3 | 1.000 | | | | | | | | | | | | | | | | | |
| SECONDARY CRASH | 5 [*] 2,4 | 2 | HIT/SK 1 - SO 1 2 - UN | | | | | 1. | E RROR - ANIMA - UNKNO | | | | | | | | | |
| COUNTY* LOCALITY* LOCATION: CITY | CRASH DATE / TIME* CRASH SEVERITY | | | | | | | | | | | | | | | | | |
| 2-VILLAGE 3-TOWNSHIP Jackson (Township of) | | | | | | | | | | 12182019 2126 2 - SERIOUS INJURY | | | | | | | | |
| ROAD TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST WHIPPLE | | | | | | | | | | LATITUDE DECIMAL DEGREES SUSPECTED | | | | | | | | |
| 3 - EAST | | | | ĄV | ш | | | 3 - MINOR INJURY SUSPECTED | | | | | | | | | | |
| ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH | MILEPOST, H | ILEPOST, HOUSE #) ROAD TYPE | | | | | | TUDE DE | 4 - INJURY POSSIBLE | | | | | | | | | |
| ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | | | | L | | | _ • | | 1 1 | | | PROPERT ONLY | TY DAM | AGE | | | | |
| REFERENCE POINT DIRECTION | | | ТҮРЕ | | | | INTERSECTION RELATED | | | | | | | | | | | |
| 3 1-INTERSECTION 2-MILE POST 1-NORTH 2-SOUTH US | - ALLEY - AVENUE | HW-H LA-L | IGHWAY ANE | RD - R(SQ - S(| | 민미 | WITH | IN INTER | RSECTIO | N OR ON A | PPROAC | н | | | | | | |
| └───┘ 3 - HOUSE # | 3 - HOUSE # 4 - WEST SR - STATE ROUTE BL - BOULEVARD MP - MILEPOST ST - S | | | | | | | | | WITHIN INTERCHANGE AREA NUMBER OF APPROACHES | | | | | | | | |
| DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE CR - | ERRACE RAIL | ROADWAY | | | | | | | | | | | | | | | | |
| 1 - MILES TR - 2 - FEET | /AY | | ROAD | WAY DIV | IDED | | | | | | | | | | | | | |
| 3 - YARDS | | | | | | | | | | | | | | | | | | |
| LOCATION OF FIRST HARMFUL EVEN | | DIRECTION OF TRAVEL MEDIAN TYPE 1 - NORTH 1 - DIVIDED FLUSH MEDIAN | | | | | | | | | | | | | | | | |
| | |) MOTOR | 5 - BAC 5 - ANG | | | | 2 - SOUTH | | | | | (<4 FEET) | | | | | | |
| 4 - ON ROADSIDE 12-SHARED US | 7 - SIDE | SWIPE, | SAME DIRE | | 3 - EAST 4 - WEST | | | | 2 - DIVIDED FLUSH MEDIAN (≥4 FEET) | | | | | | | | | |
| 5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE | IRECTION | 3 - DIVIDED, DEPRESSED ME 4 - DIVIDED, RAISED MEDIAN | | | | | | | IAN | | | | | | | | | |
| 7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / UN | | (ANY TYPE) 9 - OTHER/UNKNOWN | | | | | | | | | | | | | | | | |
| | ONE | CONTOUR CONDITION | | | | | S SURFACE | | | | | | | | | | | |
| | WORK ZONE TYPE LANE CLOSURE | | BEFO | RETHEI | ST WORK Z | | | | | | | - | | | | | | |
| WORKERS PRESENT 2- 3- | 2. | WARNING SIGN 2 - ADVANCE WARNING AREA | | | | | | 1 - STRAIGHT LEVEL 1 - DRY | | | | 1 - CONCRETE | | | | | | |
| LAW ENFORCEMENT PRESENT | WORK ON SHOULDER OR MEDIAN INTERMITTENT OR MOVING WORK | 100 | 3 - TRANSITION AREA 4 - ACTIVITY AREA | | | | | 2 - STRAIGHT GRADE 2 - WET | | | | 2 - BLACKTOP, | | | - | | | |
| | OTHER | 8 | | INATION | | | 3 - CURVE LEVEL 3 - SNOW | | | | | | ASPE | MINOUS IALT | *, | | | |
| LIGHT CONDITION | WEATHI | ER | | | | | 4 - CURVE GRADE 4 - ICE 9 - OTHER/UNKNOWN 5 - SAND, MUD, D | | | | | 3 - BRICK/BLOCK | | | | | | |
| 1 - DAYLIGHT | 1-CLEAR | 6 - SNOW | | | | | OIL, GRAVE | | | | | | | | .L, | | | |
| 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY | 2 - CLOUDY | | EVERE CROSSWINDS LOWING SAND, SOIL, DIRT, SNOW | | | | | | 6 - WATER MOVING | | | | | | | | | |
| 4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING | | 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN | | | | | | | | | | 9 - OTHER/UNKNOW | | OWN | | | | |
| 9 - OTHER / UNKNOWN | 5 - SLEET, HAIL | 77- OTHER | / UNIKN | | | | | | | 9 - 0THE | R/UNKN0 | WN | | | | | | |
| NARRATIVE | , - | | _ 1 _ | l | 1 L | 1 | 1 | 1 | 1 1 | l | 1 | \wedge | | te the n | | | | |
| UNIT #1 WAS PARKED IN A PARKING S | SPOT FACING NORTH. IT | - | | | | | | - | | | | | an "N' | ion with " on the | | | | |
| APPEARS THAT UNIT #2 MISJUDGED TO UNIT #1, AND UNIT #2 STRUCK UN | | | | | _ | | | | _ | | | compa | ass diagr | ram. | | | | |
| REAR LEFT TAIL LIGHT OF UNIT #1. | | | <u> </u> | | | | | _ | | _ | | | | | | | | |
| UNIT #2 LEFT THE SCENE. | | | | | | | | | | | | | | | _ | | | |
| THE BUSINESS DOES NOT HAVE CAM | | | _ | | | | | | | | | | | | - | | | |
| | LING COTOIDE. | | _ | | | | | | | | | | | | - | | | |
| MD | | | _ | | | | | | | | | | | | | | | |
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| | | | _ | | | | | | | | | | | | - | | | |
| | | | - | | | | | | | | | | | | | | | |
| CRASH REPORTED DATE / TIME | DISPATCH DATE / TIME | AR | L ∣ RIVAL | DATE / T | (ME | | SC | ENE CL | EARED | DATE / TI | ME | RE | PORT TA | KEN B) | Y | | | |
| 12182019 2126 121 | 82019 2130 | 1218 | 201 | L9,2 | 2,1,4,3 | 3 1 | 1,2,1 | 8,2 | 019 | , 22 | 209 | X | POLICEA | GENCY | 8 | | | |
| TOTAL TIME OTHER TOTAL OFFICER'S NAME* CHECKED BY OF | | | | | | | | | | | | | MOTORIS | т | | | | |
| ROADWAY CLOSED INVESTIGATION TIME MINUTES MCGRATH, JACOB | | | | | | | | | | | | SUPPLEI (CORRECTIO | ON OR ADD | ITION | | | | |
| 0 0 3 | | | | | | | | ICER'S | BADGE N | | 0 | | TO AN EXISTING F | EPORT SENT T | U ODPS) | | | |
| | | | - | | | | | | - | <u> </u> | <u> </u> | | | | | | | |





| | | OHO DEPARTMENT MOTORIST / NON-MOTORIST | | | | | | | | | 19-59272 | | | | | | | |
|--|---|--|--|--|--|----------------------------------|----------------------------------|-------------------|---|--------------------------|--|------------------------|--|--------------------------------------|--|--|--|--|
| | UNIT # | NAME: LAST, FIRST, MIDDLE | | | | | | | | | DATE OF BIRTH AGE GENDER | | | | | | | |
| | 01 | PARKED, UNOCCUPIED | | | | | | | | | | r r n | TT | Γ, | | | | |
| IST | ADDRESS: | street, city, state, zip | | | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| TOR | | | | | | | | | | | | | | | | | | |
| NON-MOTORIS | NJURIES | INJURED E TAKEN | EMS AGENCY (NAME) | | INJURED | TAKEN TO | : MEDICAL FACILITY | (NAME, CITY) | CONTRACTOR AND AN | | SEATING POSITION | AIR BAG USAG | E EJECTION | TRAPPED | | | | |
| ON/ | ī | BY | | | | | | | | | | d | | тт | | | | |
| ORIST | DL STATE | OPERATOR LICENSE NUMBER | | | | SE CHAR | RGED | LOCAL CODE | OFFENSE DESC | RIPTION | i | CITATION | ATION NUMBER | | | | | |
| 010 | | | | | | | | | | | | | | | | | | |
| ≥ (| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | DIS | VER TRACTED | | DHOL / DRUG SUSP | | CONDITION | ALCOH STATUS TYPE | OL TEST VALUE | DRU STATUS TYP | JG TEST(S E RESUL |) I SELECT UP TO 4 | | | | |
| | ar. | | | BY | | | LCOHOL LI MAI | RIJUANA | | | | | | | | | | |
| | UNIT # | NAME: LAST, F | | | | | | | DATE OF BIRTH | | AGE | GENDER | | | | | | |
| | 02 | NAME: LAST, FIRST, MIDDLE UNKNOWN, UNKNOWN | | | | | | | | | M | | | | | | | |
| | ADDRESS: | SS: STREET, CITY, STATE, ZIP | | | | | | | | | | | | | | | | |
| NON-MOTORI | UNKN | IOWN | | | | | | | | T T T | 1 1 | 1 1 | 1 1 | 1 1 | | | | |
| W- | NJURIES | | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPA | | | | | | | | | | | | | |
| Ń. | T | TAKEN BY | | | | | | | USED 99 | | | | 1 1 1 , | | | | | |
| IST / | DL STATE | OPERATOR L | ICENSE NUMBER | | OFFEN | SE CHAF | RGED | LOCAL CODE | OFFENSE DESC | RIPTION | | CITATION | NUMBER | | | | | |
| MOTORIST | | | | | | | | | | | | | | | | | | |
| ž (| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | | 103 DRIVER ALCOHOL / DRUG SUSPECTED | | | | | ALCOH STATUS TYPE | OL TEST VALUE | DRI STATUS TYP | JG TEST(S E RESUL |) I select up to 4 | | | | |
| | | | | BY | | | | RIJUANA | | | | | | | | | | |
| _ 1 | UNIT # | | |] | | THER DRUG | | | | | | | | | | | | |
| | UNIT # | NAME: LAST, FIRST, MIDDLE | | | | | | | | DATE OF BIRTH AGE GENDER | | | | | | | | |
| 12 | ADDRESS: | STREET, CITY, STATE, ZIP | | | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| | | I O THE O OF I O | | | | | | | | | | | | | | | | |
| NON-MOTORI | NJURIES | | EMS AGENCY (NAME) | | INJURED | TAKEN TO | : MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT | | SEATING POSITION | AIR BAG USAG | E EJECTION | TRAPPED | | | | |
| NON | r | TAKEN By | | | | | | | USED | | | n. | | т 1 | | | | |
| IST / | DL STATE | OPERATOR LICENSE NUMBER | | | | | | | | RIPTION CITA | | | ATION NUMBER | | | | | |
| TOR | <u>г</u> т | | | | | | CODE | | | | | | | | | | | |
| × (| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | | VER | | OHOL / DRUG SUSP | | CONDITION | ALCOH STATUS TYPE | OL TEST VALUE | DRI STATUS TYP | JG TEST(S E RESUL |) I select up to 4 | | | | |
| | | | | BY | | Ξ | LCOHOL MAI | RIJUANA | | | | | | | | | | |
| | INJU | RIES | SEATING POSITION | | AIR BAG | | OL CLAS | S | OL RESTRIC | TION(S) D | RIVER DISTRACT | ION | | TUS | | | | |
| | | | | | IOT DEPLOYED 1 - CLASS A | | | | 1 - ALCOHOL INTER | LOCK DEVICE 1 | - NOT DISTRACTED | | ONE GIVEN | | | | | |
| 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY | | | 2 - FRONT - MIDDLE | 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE | | | 2 - CLASS B 3 - CLASS C | | 2 - CDL INTRASTATI 3 - CORRECTIVE LE | | - MANUALLY OPERATING ELECTRONIC COMMUNI | ICATION 3 - TE | 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED | | | | | |
| 4 - POSSIBLE INJURY | | | 3 - FRONT – RIGHT SIDE | 4 - DEPLOYED BOTH FRONT / SIDE | | | 4 - REGULAR CLASS | | 4 - FARM WAIVER | 1020 | DEVICE (TEXTING, TYP) DIALING) | ING, SAMPLE / UNUSABLE | | | | | | |
| 5 - NO APPARENT INJURY | | | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 5 - NOT APP | | | (OHIO = D) 5 - M/C MOPED ONLY | | 5 - EXCEPT CLASS A | , | - TALKING ON HANDS-FR COMMUNICATION DEVI | | | | | | | |
| INJURED TAKEN BY 5- SECOND - MIDDLE | | | | 9-DEPLOY | MENT UNKNO |) W N | 6 - NO VALID OL | | 6 - EXCEPT CLASS A & CLASS B BUS | | -TALKING ON HAND-HEL | UI UI | UNKNOWN | | | | | |
| 1. | NOT TRANSP | | 6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE | E | JECTION | | OL ENDORSE | MENT | 7 - EXCEPT TRACTO | | COMMUNICATION DEVI - OTHER ACTIVITY WITH | ALCOHOL TEST TYPE | | | | | | |
| 2 - EMS | | | (MOTORCYCLE SIDE CAR) | H - HAZMAT | | 8 - INTERMEDIATE RESTRICTIONS | LIGENGE | ELECTRONIC DEVICE | 1 - N | 1 - NONE | | | | | | | | |
| 3 - POLICE | | | 8-THIRD – MIDDLE 2-PARTIALLY EJECTED 9-THIRD – RIGHT SIDE 3-TOTALLY EJECTED | | | | M - MOTORCYCLE | | 9 - LEARNER'S PER RESTRICTIONS | | - PASSENGER - OTHER DISTRACTION | | 2 - BLOOD 3 - URINE | | | | | |
| 9- OTHER / UNKNOWN 10 - SLEEF | | | 10 - SLEEPER SECTION | 3 - TOTALLY EJECTED 4 - NOT APPLICABLE | | | P - PASSENGER N - TANKER | | 10 - LIMITED TO DAY | | | | 4 - BREATH | | | | | |
| SAFETY EQUIPMENT OF TRUCK CAB 1 - NONE USED 11 - PASSENGER IN OTHER | | | | - | Q - MOTOR SCOOTER | | | | 11 - LIMITED TO EMP | LUTIMENT | - OTHER DISTRACTION O THE VEHICLE | UTSIDE 5-01 | 5 - OTHER | | | | | |
| | ENCLOSED CARGO AREA | | | | TRAPPED R - THREE-WHEEL MOTORCYCLE - NOTTRAPPED S - SCHOOL BUS | | | | 12 - LIMITED – OTHE 13 - MECHANICAL DE | 9 | - OTHER / UNKNOWN | | | | | | | |
| 3. | LAP BELT ON | LY USED | PICK-UP WITH CAP) | 2 - EXTRICATED BY MECHANICAL MEANS | | | T - DOUBLE & TRIPLE | TRAILERS | (SPECIAL BRAKE CONTROLS, OR O | | CONDITION | | 1 - NONE 2 - BLOOD | | | | | |
| | | LAP BELT USED AINT SYSTEM - | CARGO AREA 3 - FREED BY | | | X - TANKER / HAZMAT | | | ADAPTIVE DEVI | - | 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT | | 3 - URINE | | | | | |
| | FORWARD FACING | | 13 - TRAILING UNIT | 3 - TRAILING UNIT NON-MECHANICAL MEANS 4 - RIDING ON VEHICLE EXTERIOR | | | GENDER 15 - MOTOR VEHICL | | | | 1 01 | 4 - OTHER | | | | | | |
| 6. | 6 - CHILD RESTRAINT SYSTEM - REAR FACING | | (NON-TRAILING UNIT) | | | | F - FEMALE | | AIR BRAKES 16 - OUTSIDE MIRRO | _ | - EMOTIONAL (E.G., DEPRE ANGRY, DISTURBED) | DRU | DRUG TEST RESULT(S) | | | | | |
| | 7 - BOOSTER SEAT | | 15 - NON-MOTORIST | | | M - MALE U - OTHER / UNKNOWN | | | | | 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, | | | 1 - AMPHETAMINES 2 - BARBITURATES | | | | |
| | 8 - HELMET USED 9 - PROTECTIVE PADS USED | | 99 - OTHER / UNKNOWN | | | | | | 18-0THER | | FATIGUED, ETC. | | | 3 - BENZODIAZEPINES | | | | |
| | (ELBOW, KNEES, ETC.) | | C.) | | | | | | | 6- | UNDER THE INFLUENCE OF MEDICATIONS / DRUG | GS 4-CA | 4 - CANNABINOIDS 5 - COCAINE | | | | | |
| | REFLECTIVE LIGHTING - F | | | | | | | | | 9. | /ALCOHOL OTHER/UNKNOWN | - ODIATES / OPIOIDS | | | | | | |
| / BICYCLE ONLY 99 - OTHER / UNKNOWN | | | | | | | | | | | | | | 7 - OTHER 8 - NEGATIVE RESULTS | | | | |
| | | NOWN | | | | | | | | | | 8 - NI | EGATIVE RESU | LTS | | | | |

HSY8306 OH1M 1/19 [760-1500]