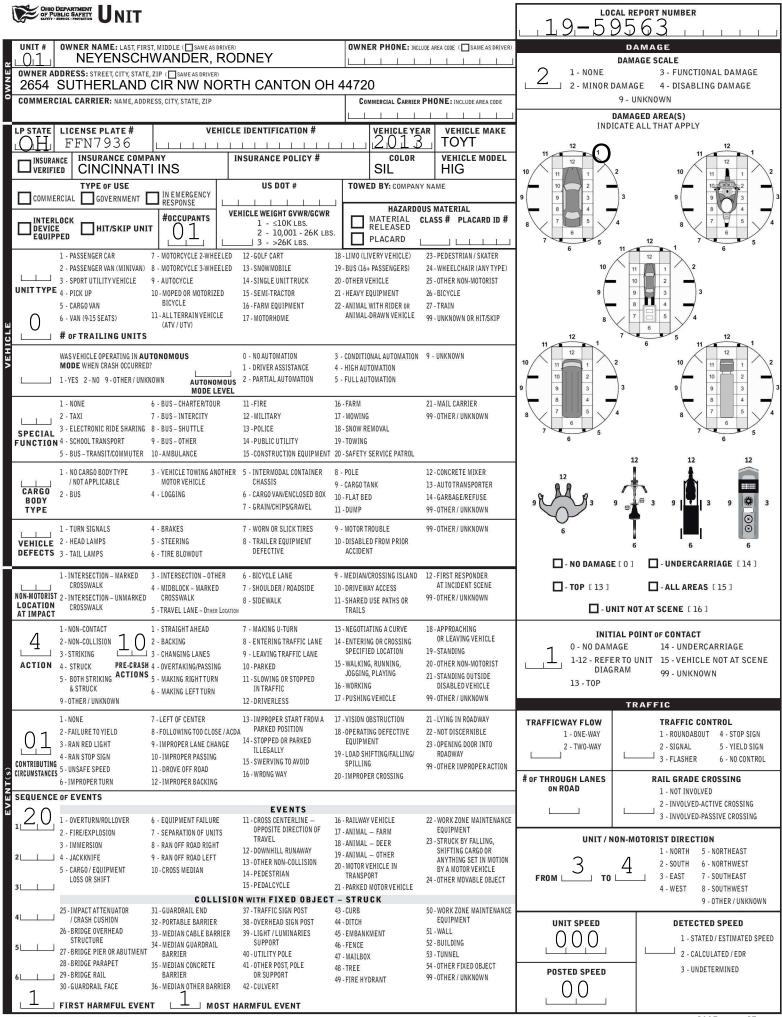
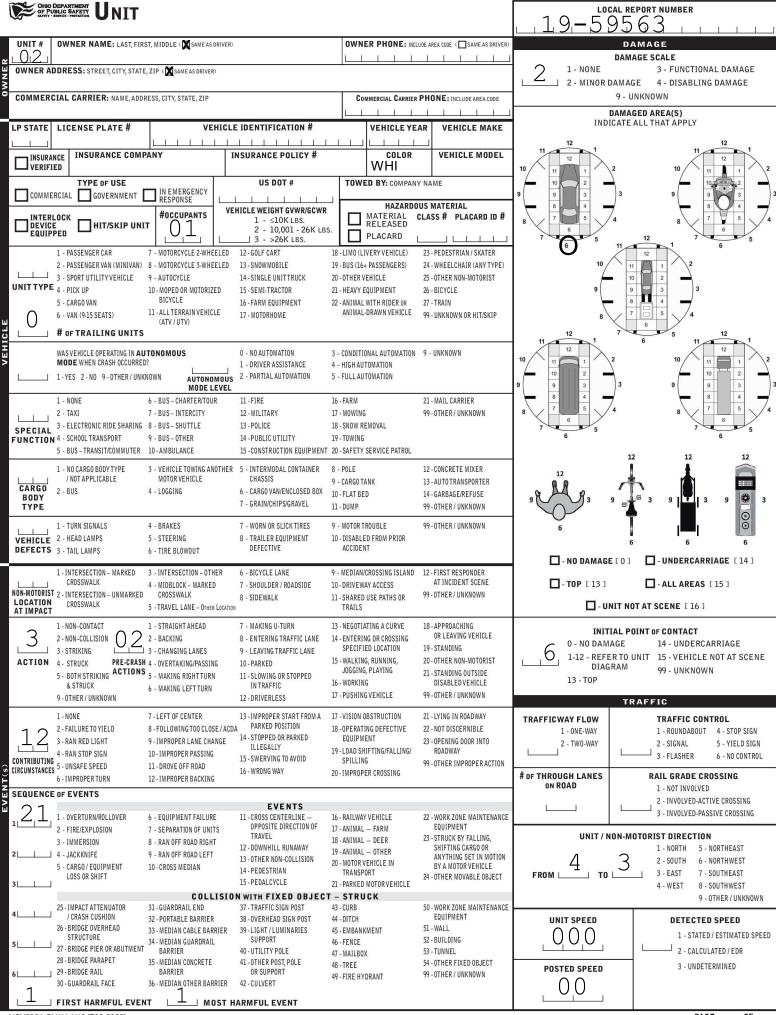
CHILD DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT										LOCAL REPORT NUMBER*									
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION											L 9		956			<u> </u>	<u> </u>		
SECONDARY CRASH OF ID OTHER REPORTING AGENCY NAME* NCIC*									2		OLVED	()	2 DF UNITS	0	1.	ANIMA	AL		
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE. TOWNSHIP*									<u>                                     </u>	CRASH DATE / TIME * _ CRASH SEVERITY									
7.6     3. 2-VILLAGE 3. TOWNSHIP       Jackson (Township of)											202	019 	132		·	FATAL SERIOUS	INJUR	Y	
ROUTE TYPE ROUTE NU	ROAD TYPE					LATITUDE DECIMAL DEGREES						SUSPECTED							
	3	2 - SOUTH 3 - EAST 4 - WEST	WHIPPLE						1	3 - MINOR I SUSPEC									
	2	2 - SOUTH	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) ROA													INJURY F			
		B - EAST - WEST	7313								5 - PROPERTY DAMAGE								
neference point	DIRECTION FROM REFERENCE	TH IR -I		ROUTE TYPE ROAD TYPE ERSTATE ROUTE(TP) AL - ALLEY HW- HIGHWAY RD - ROAD									INTERSE						
3 2- MILE POST	1 - NOR 2 - SOU 	TH US-F	- FEDERAL US ROUTE AV - AVENUE LA - LANE						SQUARE	WITHIN INTERSECTION OR ON APPROACH									
-	4 - WES	ST SR - S	CR - CIRCLE OV - OVAL TE						STREET TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES									
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASUF 1 - MIL	RE	- NUMBERED COUNTY ROUTE CT - COURT PK - PARKWAY TL - T						TRAIL	ROADWAY									
2-FEET ROUTE DECOMPOSITION DR - DRIVE PI - PIKE WA- WAY 3-YARDS DR - HEIGHTS PL - PLACE ROADWAY DIVIDED																			
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT										DIRECTION OF TRAVEL MEDIAN TYPE									
$0.6^{1-\text{ON ROADWA}}$		CROSSOVER DRIVEWAY/A	ALLEY ACCESS	b BET	WEEN .	OLLISION 4 - REAR-TO-REAR /EEN 5 - BACKING						NORTH			VIDED FLUSH MEDIAN				
3 - IN MEDIAN	11-	RAILWAY GR	ADE CROSSING	L VEH	ICLES IN	5 - ANG	LE		FOTION	2 - SOUTH 3 - EAST				2 - DIVIDED FLUSH MEDIAN (≥4 FEET)					
4 - ON ROADSII 5 - ON GORE		SHARED USE TRAILS	- PATHS OR	1 RA 2 - REA				, SAME DIF , OPPOSITE	ECTION DIRECTION		4 - '	WEST		3 - DIV	IDED, DE	EPRESSE		IAN	
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 3 - HEAD-ON 9 - OTHER / UNKNOWN 7 - ON RAMP 14-TOLL BOOTH 3- HEAD-ON 9 - OTHER / UNKNOWN											4 - DIVIDED, RAISED MEDIAN (ANY TYPE)								
8-OFF RAMP 99-OTHER / UNKNOWN											9 - OTHER/UNKNOWN								
WORK ZONE RELA	TED		WORK ZONE TY	PE	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE						CONTO	UR	CO	CONDITIONS			SURFACE		
WORKERS PRESEN	NT		LANE SHIFT/CROSSOVER WARNING SIGN								1	_				L			
LAW ENFORCEME	NT PRESENT		/ORK ON SHOULDER 2 - ADVANCE WARN R MEDIAN 3 - TRANSITION AR						REA		1 - STRAIGHT LEVEL 1 - DRY 2 - STRAIGHT GRADE 2 - WET				1 - CONCRETE				
ACTIVE SCHOOL Z	R MOVING WORK	100 (0 100/05)						3 - CURVE LEVEL 3 - SNOW					2 - BLACKTOP, BITUMINOUS, ASPHALT						
		5-0	INER	THER 5 - TERMINATION AREA						4 - CURVE GRADE 4 - ICE 3 - BRICK/							к		
LIGHT ( 1 - DAYLIGHT	CONDITION		1 - CL	WEATHER 1-CLEAR 6-SNOW												4 - SLAG STON		EL,	
2 - DAWN/DUSK	( HTED ROADWAY		T T T	2 - CLOUDY 7 - SEVERE CROSSWINDS						6 - WATER (STA MOVING)					010 000-000-00				
4 - DARK – LIGP		3 - FOG, SMOG, SMOKE       8 - BLOWING SAND, SOIL, DIRT, SNOW         4 - RAIN       9 - FREEZING RAIN OR FREEZING DRIZZLE						7 - SLUSH					9 - OTHER/UNKNOW			10WN			
5 - DARK – UNK 9 - OTHER / UNI	KNOWN ROADWAY KNOWN	LIGHTING	5 - SL	EET, HAIL	HAIL 99 - OTHER / UNKNOWN						9 - OTHER/UNK								
NARRATIVE						L.L.	I.	1		L	L	1 1		J	$\wedge$	Indica	te the n	north	
UNIT #1 WAS PAR		PARKING	SPOT AT 7	313 WHIPPI	F AVF				_					<		> directi an "N'	ion with ' on the	h e	
N.W. UNIT #2 WA	S BACKING	OUT OF A	PARKING S	SPOT. UNIT	#2										$\sim$	compa	iss diag	ram.	
STRUCK UNIT #1 DAMAGE TO UNIT		-																	
INDEPENDENT W		-												-					
THAT UNIT #2 WAS A WHITE PICK-UP TRUCK (UNKNOWN MAKE AND MODEL). WITNESS ALSO PROVIDED A PLATE FOR UNIT #2 (FYE1317). THAT REGISTRATION DOES NOT COME BACK TO ANY VEHICLE																			
REGISTERED IN C						_													
LOCATION.																		-	
_MD									_						_				
					_							_							
		-			_														
		-												-					
						_												-	
						_												-	
CRASH REPORTED	DATE / TIME	D	ISPATCH DATE /	TIME	AR	RIVAL	DATE / T	IME		SC	ENEC	LEARED	DATE / TII	VIE I	RE	PORT TA	KEN B'	Y	
12202019	1327	122	02019,	1329	1220	201	L9,	133	9	1,2,2	2,0,2	019	14	09		POLICE A	GENCY	1	
TOTAL TIME OTHER TOTAL OFFICER'S NAME* CHECKED BY									ED BY OFF	FFICER'S NAME*									
								JO							SUPPLEN (CORRECTIO TO AN EXISTING R	N OR ADD	DITION TO ODPS)		
																	ULRI		





		DHO DEPARTMENT IF PUBLIC SAFETY MITT MANY AND TORIST / NON-MOTORIST										19-59563							
	UNIT #	NAME: LAST, FIRST, MIDDLE										TE OF BIRTH		AGE	GENDER				
	01	PARKED, UNOCCUPIED										, , , , , , , ,   , ,   F							
	ADDRESS:	STREET, CITY, ST	ATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE															
0 T 0 F		2																	
NON-MOTORI	INJURIES	INJURED I TAKEN BY	EMS AGENCY (NAME)	INJURED	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPME					-COMPLIAN		)N AIR BAG	USAGE	EJECTION	TRAPPED				
<u>_</u>	OL STATE	OPERATOR L		OFFEN	OFFENSE DESC	RIPTION			CITAT	TATION NUMBER									
OTORI																			
ž	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DISTRACTED			HOL / DRUG SUSPECTED		CONDITION	STATUS	TYPE	H <b>OL TEST</b> E VALUE STATUS		DRUG TEST(S) 5 TYPE RESULT SELECT					
1	т				BY ALCOHOL MARIJUANA			1 1											
	UNIT #	NAME: LAST, F	FIRST, MIDDLE								TE OF BIRTH		AGE	GENDER					
	02	UNKNO	WN, UNKNOWN									1 1 1			М				
RIST		STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE									
OTORI	UNKN				_					ш									
M-NON	INJURIES	INJURED I TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO:			: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		-COMPLIAN		ON AIR BAG	USAGE	EJECTION	TRAPPED			
<u> </u>	OL STATE		ICENSE NUMBER	OFFENSE CHAR			RED	LOCAL							TATION NUMBER				
TORIS		of ERRICK E			UT EN	SE UNA		CODE	UTTERSE DESC		TION			CITATION NOMBER					
0 M	DL CLASS	ENDORSEMENT SELECT UP TO 2		IVER STRACTED		COHOL / DRUG SUSPECTED		CONDITION	A STATUS	LCOHO TYPE	L TEST VALUE	STATUS	DRUG TYPE	TEST(S) RESULT	SELECT UP TO 4				
				BY			LCOHOL 🔟 MAF THER DRUG	RIJUANA											
_1	UNIT #	NAME: LAST, F									TE OF BIRTH				GENDER				
IST	ADDRESS:	STREET, CITY, ST	ATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE														
OTOR																			
NON-MOTORI	INJURIES	URIES INJURED EMS AGENCY (NAME)				TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		-COMPLIAN		)N AIR BAG	USAGE	EJECTION	TRAPPED			
<b>_</b>	OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL OFFENSE CODE					RIPTION						<u> </u>			
TORIS		of English E																	
N N	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER STRACTED		DHOL / DRUG SUSPE		CONDITION	A STATUS	TYPE	L TEST VALUE	STATUS	DRUG TYPE	TEST(S) RESULT	SELECT UP TO 4			
	-	,		BY	( 		LCOHOL 🔟 MAF THER DRUG	RIJUANA								w a 5			
	INJU	RIES	SEATING POSITION		AIR BAG		OL CLASS	S	OL RESTRIC	TION(S)		• VER DISTRAC	TION	TE	ST STAT	rus			
	FATAL		1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER			IOT DISTRACTED			GIVEN				
	2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY		2 - FRONT - MIDDLE	3 - DEPLO	YED FRONT YED SIDE		2 - CLASS B 3 - CLASS C	2 - CDL INTRASTAT		E	ANUALLY OPERATII	NICATION	2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED						
	4 - POSSIBLE INJURY		3 - FRONT – RIGHT SIDE 4 - SECOND – LEFT SIDE		ED BOTH FRONT / SIDE 4 - REGULAR CLASS (0HIO = D)				4 - FARM WAIVER		DEVICE (TEXTING, TYPING, DIALING)			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN					
5	5 - NO APPARENT INJURY		(MOTORCYCLE PASSENGER)		PPLICABLE YMENT UNKN	5 - EXCEPT CLASS A 6 - EXCEPT CLASS A		3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			5 - TEST GIVEN, RESULTS UNKNOWN								
INJURED TAKEN BY         5-36000 - MIDDLE           1-NOT TRANSPORTED         6-SECOND - RIGHT SIDE			5 - SECOND – MIDDLE 6 - SECOND – RIGHT SIDE				6 - NO VALID OL	& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAII FR		ALKING ON HAND-HI								
	/TREATED AT SCENE 2 - EMS		7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)		JECTION		OL ENDORSEN	MENT	8 - INTERMEDIATE			THER ACTIVITY WIT	H AN	ALCOHOL TEST TYPE 1-NONE					
	3 - POLICE		8 - THIRD - MIDDLE	1 - NOT EJECTED 2 - PARTIALLY EJECTED			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PER	( 51.005105			NGER 2		2 - BL00D				
9	9 - OTHER / UNKNOWN		9 - THIRD – RIGHT SIDE 10 - SLEEPER SECTION		Y EJECTED		P - PASSENGER		RESTRICTIONS 10 - LIMITED TO DAY	THOLDE THE H		THER DISTRACTION			URINE BREATH				
SAFETY EQUIPMENT			OF TRUCK CAB	UCK CAB			N - TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EMP	PLOYMENT 8-01		3 - OTHER DISTRACTION OUTSIDE							
	ENCLOSED CA		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	AREA			R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED – OTHE 13 - MECHANICAL DE	9 - OTHER / UNKNOWN				DRUG TEST TYPE					
	3 - LAP BELT ONLY USED		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	CATED BY		S - SCHOOL BUS T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAKE CONTROLS, OR O	ES, HAND		CONDITION	1 - NONE 2 - BLOOD							
	4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM –		12 - PASSENGER IN UNENCLOSED CARGO AREA	ANICAL MEANS	Y X - TANKER / HA			ADAPTIVE DEVI	CES) 1 - APPARENTLY NORMAL			L	3 - URINE						
	FORWARD FACING		13 - TRAILING UNIT		HANICAL MEANS Gender			14 - MILITARY VEHIC 15 - MOTOR VEHICLE		E THISTORE INTAINENT			4 - OTHER						
6	6 - CHILD RESTRAINT SYSTEM - REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		F - FEMALE			AIR BRAKES 16 - OUTSIDE MIRRO	ANGRY, DISTURBED)			DRUG TEST RESULT(S)							
	7 - BOOSTER SEAT		15 - NON-MOTORIST 99 - OTHER / UNKNOWN		M - MALE U - OTHER / UNKNOWN		16 - OUTSIDE MIRRO 17 - PROSTHETIC AID		5 - FI	4 - ILLNESS 5 - FELL ASLEEP, FAINTED,			1 - AMPHETAMINES 2 - BARBITURATES						
	8 - HELMET USED 9 - PROTECTIVE PADS USED							18-0THER		FATIGUED, ETC. 6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES						
10	(ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING									01	OF MEDICATIONS / DRUGS /ALCOHOL			4 - CANNABINOIDS 5 - COCAINE					
	11 - LIGHTING - PEDESTRIAN											9- OTHER / UNKNOWN			6 - OPIATES / OPIOIDS				
99	/ BICYCLE ON • OTHER / UNK															7 - OTHER 8 - NEGATIVE RESULTS			
		M 1/10 1760 150																	

HSY8306 OH1M 1/19 [760-1500]