OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2 NO OH-3	19-611/3										
SECONDARY CRASH PRIVATE PROPERTY	REPORTING AGENCY NAME* JACKSON TWP PO	NICE DEDARTME	HIT/SKIP 2 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL						
COUNTY* LOCALITY* LOCATION: CIT	0,7,6,2,4	CRASH DATE / TIME* CRASH SEVERITY									
76 3 1-CITY 2-VILLAGE 3-TOWNSHIP Jackson	12292019 1600 1-FATAL										
J NORTH	2 - SERIOUS INJURY SUSPECTED										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	AMHERST		RD		3	- MINOR INJURY SUSPECTED					
	D, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	- INJURY POSSIBLE							
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	3972			5 - PROPERTY DAMAG ULI ONLY							
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPI		INTERSECTION RELATED							
3 2- MILE POST 2- SOUTH US		.L - ALLEY HW- HIGHWA V - AVENUE LA - LANE	Y RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
10 (00-100-d)	- STATE ROUTE	L - BOULEVARD MP - MILEPO R - CIRCLE OV - OVAL	ST ST - STREET TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE CT	T - COURT PK - PARKWA		ROADWAY							
2 - FEET	ROUTE HI	/IDED									
LOCATION OF FIRST HARMFUL EVEN		NNER OF CRASH COLLISION		DIRECTION OF TRAVEL MEDIAN TYPE							
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY	VALLEY ACCESS G BE	T COLLISION 4 - REAR-TO-F TWEEN 5 - BACKING /O MOTOR	REAR	1 - NORTH , 2 - SOUTH	1 - DIVIDED F (<4 FEET	/IDED FLUSH MEDIAN 4 FEET)					
3 - IN MEDIAN 11 - RAILWAY G 4 - ON ROADSIDE 12 - SHARED U	GRADE CROSSING L - VEI	HICLES IN 6-ANGLE	E, SAME DIRECTION	3 - EAST		- DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE			E, OPPOSITE DIRECTION	4 - WEST 3 - DIVIDED, DEPRESSED N 4 - DIVIDED, RAISED MEDIA							
7 - ON RAMP 14-TOLL BOOT	Н	AD-ON 7-OTHER 70	WINIOW IV	(ANY TYPE) 9 - OTHER/UNKNOWN							
S-OTT KAWII	WORK ZONE TYPE	LOCATION OF CRASH	IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE					
WORKERS PRESENT	LANE CLOSURE		E 1ST WORK ZONE	1 1	r 1	1 1 T					
3-	LANE SHIFT/CROSSOVER WORK ON SHOULDER	2 - ADVANCE W	ARNING AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE					
LAW ENFORCEMENT PRESENT 4-	OR MEDIAN INTERMITTENT OR MOVING WOR	3-TRANSITION 4-ACTIVITY A		2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS,					
ACTIVE SCHOOL ZONE 5-	OTHER	5 - TERMINATI	ON AREA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT 3 - BRICK/BLOCK					
LIGHT CONDITION	WEATH			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL,					
1 - DAYLIGHT 2 - DAWN/DUSK	1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWIND	S	6-WATER (STANDING, 5-DIE							
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOK 4 - RAIN	, DIRT, SNOW REEZING DRIZZLE	MOVING) 5 51.1.1 7 - SLUSH 9 - OTHER/U								
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN						
NARRATIVE		1 1 1	J L I			Indicate the north					
BETWEEN 12/29/19 1600 - 12/30/19 000	0 HRS OWNER OF LINI	T #1			+++	direction with an "N" on the					
OBSERVED DAMAGE TO THE REAR P THEIR VEHICLE. THE DAMAGE WOUL	ASSENGER SIDE BUMPE	ER OF				compass diagram.					
VEHICLE WAS PARKED AT THE RESID	DENCE BETWEEN 1600 -	0000 HRS.									
UNKNOWN DRIVER OF UNIT #2 STRU- LOT AT THE RESIDENCE.	CK UNIT #1 IN THE REAR	R PARKING _									
MD		_									
		-									
		-									
		-									
		-									
		_									
CRASH REPORTED DATE / TIME	ARRIVAL DATE	TIME	SCENE CLEARED	DATE/TIME R	REPORT TAKEN BY						
ANALYSIS CONTROL CONTR	02019 0019	12302019	5	12302019							
TOTAL TIME OTHER TOTAL			CHECKED BY OFFI			MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUT	TATE, NATHAN	ADGE NUMBER*		LOUGH, TIMOTHY ED BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)							
0 0 6	56 OFFICER'S BA	1 3 8									

SHO DEPARTMENT MOTORIST / NON-MOTORIST						19-61173									
UNIT #								DATE OF BIRTH			\top	AGE	GENDER F		
	PARKED, UNOCCUPIED														
ORIS ADDRESS	DDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	JRIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT								SEATING POSIT	ION AIR BAG	GUSAGE	EJECTION	TRAPPED		
N ON	TAKEN BY			USED		DOT-COMPLIANT MC HELMET			L	i i	li i				
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS				OFFENSE DESC	RIPTION			CITATION NUMBER			
OTOR							CODE								
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		DHOL / DRUG SUSPI		CONDITION		YPE VALUE	STATUS	TYPE	RESULT	SELECT UP TO 4	
. ,	l 11 1		BY		=	THER DRUG	KIJUANA	ļ. ,				1	11 11	IF II 1	
UNIT #	NAME: LAST, I	FIRST, MIDDLE								DATE OF BIRTH			AGE	GENDER	
02	UNKNO	WN, UNKNOWN									1 1		III	M	
	: STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
ā	NOWN										+-				
INJURIES 0	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED T	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED O				Прот-с∘		ION AIR BAG	USAGE	EJECTION	TRAPPED	
OL STATE		ICENSE NUMBER		OFFENS	E CHAF	RGED	LOCAL	OFFENSE DESC		CITA	CITATION NUMBER				
TORIS							CODE								
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALC	HOL / DRUG SUSPI	ECTED	CONDITION		OHOL TEST YPE VALUE	STATUS	DRU G	TEST(S	SELECT UP TO 4	
			BY		=	LCOHOL MAI	RIJUANA		100		2 22		10.00		
UNIT #	NAME: LAST E	FIRST MIDDLE			<u></u> □ 0	THER DRUG				DATE OF BIRTH		\vdash	AGE	GENDER	
	# NAME: LAST, FIRST, MIDDLE									г г	1 0				
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
DIOR											1 1		1	1 1	
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□DOT-Co		ION AIR BAG	GUSAGE	EJECTION	TRAPPED	
N L	」 BY L						шш	MC HELMET							
OL STATE	OPERATOR L	OPERATOR LICENSE NUMBER OFFENSE CHA			E CHAI	RGED	CODE	OFFENSE DESC	SCRIPTION			CITATION NUMBER			
OL CLASS	S ENDORSEMENT RESTRICTION SELECT UP TO 3 DR					CONDITION	ALCOHOL TEST			DRUG TEST(S)					
	SELECT UP TO 2	SELECT UP TO 2 DIS		TRACTED ALCOHOL MARIJUANA		RIJUANA		STATUS TYPE VALUE		STATUS	TATUS TYPE RESUL		SELECT UP TO 4		
INII	URIES	SEATING POSITION		IR BAG	0	THER DRUG OL CLAS	s	OL RESTRIC	LION(S)	DRIVER DISTRA		т	EST STA	TUS	
1 - FATAL	UKIES	1 - FRONT - LEFT SIDE	1 - NOT DEF						1 - NOT DISTRACTED	CIION	1 - NONE GIVEN				
	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT – MIDDLE	2 - DEPLOY				2 - CDL INTRASTAT		2 - MANUALLY OPERAT ELECTRONIC COMM		2 - TEST REFUSED				
	- SUSPECIED MINOR INJURY 2 FROM T DICHT CIDE			IYED SIDE 3 - CLASS C IYED BOTH FRONT / SIDE 4 - REGULAR CLASS			3 - CORRECTIVE LE 4 - FARM WAIVER	NSES	DEVICE (TEXTING, TYPING, DIALING)						
5 - NO APPAREI	(MOTORCYCLE PASSENGER)			E M/C MODED ONLY			5 - EXCEPT CLASS	5 TAERING ON HANDOTT							
INJURED	INJURED TAKEN BY 5 - SECOND - MIDDLE			6 - NO VALID OL & CLASS B BUS				4 - TALKING ON HAND-HELD			UNKNOWN				
	NOT TRANSPORTED 6 - SECOND - RIGHT SIDE /TREATED AT SCENE 7 - THIRD - LEFT SIDE			7 - EXCEPT TRACT JECTION OL ENDORSEMENT 8 - INTERMEDIATE 8 - INTERMEDIATE						ALCOHOL TEST TYPE					
2 - EMS	9 THIRD MIDDLE		1 - NOT EJE	ECTED H - HAZMAT RE			RESTRICTIONS		ELECTRONIC DEVICE 1 - NONE 6 - PASSENGER 2 - BLOOD						
3 - POLICE 9 - OTHER / UNI	3-POLICE 2-PARTIAL 9-OTHER/UNKNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY		LLY EJECTED M - MOTORCYCLE ' EJECTED P - PASSENGER			9 - LEARNER'S PER RESTRICTIONS	IIIII	7 - OTHER DISTRACTIO	3 - URINE						
SAFFTY	10 CLEEDED SECTION		4 - NOT APP	PLICABLE N - TANKER			10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT		INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE		4 - BREATH E 5 - OTHER				
	11 DACCENCED IN OTHER		Q - WOTOR SCOULER			12 - LIMITED – OTHER		THE VEHICLE 9 - OTHER / UNKNOWN		DRUG TEST TYPE					
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT		1 - NOTTRA	TDICATED BY			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND				1 - NONE				
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		MECHANICAL MEANS 3 - FREED BY T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT			CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL		2 - BLOOD 3 - URINE					
	5 - CHILD RESTRAINT SYSTEM – CARGUAREA FORWARD FACING 13 - TRAILING UNIT		NON-MECHANICAL MEANS GENDER			14 - MILITARY VEHICLES ONLY		2 - PHYSICAL IMPAIRMENT		4 - OTHER					
	6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		F-FEMALE				AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST RESULT(S)				
	7 - BOOSTER SEAT 15 - NON-MOTORIST		M - MALE U - OTHER / UNKNOWN				16 - OUTSIDE MIRRO 17 - PROSTHETIC AII		4- ILLNESS 5- FELL ASLEEP, FAINTED,		1 - AMPHETAMINES 2 - BARBITURATES				
8 - HELMET USED 99 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED			U - UTILIK / UNKNUWN				18 - OTHER		FATIGUED, ETC.		3 - BENZODIAZEPINES				
(ELBOW, KNEES, ETC.)								6- UNDER THE INFLUE OF MEDICATIONS / D	4 - CANNABINOIDS 5 - COCAINE						
10 - REFLECTIVE CLOTHING 11 - LIGHTING – PEDESTRIAN									/ALCOHOL 9- OTHER/UNKNOWN	6 - OPIATES / OPIOIDS					
	/ BICYCLE ONLY 99 - OTHER / UNKNOWN										7 - OTHER 8 - NEGATIVE RESULTS				
												U-NEU	TITE NEOUI	-10	

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