OHIO DEPARTMENT TRAFFIC CRASH		LOCAL REPORT NUMBER*							
PHOTOS TAKEN UN-2 W ON-3 L	LOCAL INFORMATION 20-U 14 1 /								
SECONDARY CRASH	JACKSON TWP POLICE DEPARTME 0,7,6,2,4 1-SOLVED 1-SOLVED 0,2 98-ANIMAL 2-UNSOLVED 0,2 99-UNKNOW!								
COUNTY* LOCALITY* LOCATION: CITY	CRASH DATE / TIME* CRASH SEVERITY 1 - FATAL 5 1 - FATAL								
76 3 2-VILLAGE Jackson (2 - SERIOUS INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	ROAD TYPE RD	3 - MINOR INJURY							
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	ROAD TYPE	LONGITUDE DE	LONGITUDE DECIMAL DEGREES 4-INJURY POSSIBLE						
	4825			 		5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TY	PE		INTERSECTION RELA				
3 1-INTERSECTION 1-NORTH IR -	INTERSTATE ROUTE(TP) AL FEDERAL US ROUTE AV	/AY RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH						
3 - HOUSE # 3 - EAST	STATE ROUTE BL	- BOULEVARD MP - MILEI	OST ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- CIRCLE OV - OVAL - COURT PK - PARK	TE - TERRACE VAY TL - TRAIL	ROADWAY					
	ROUTE DR - DRIVE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE ROADWAY DIVIDED								
LOCATION OF FIRST HARMFUL EVENT		INER OF CRASH COLLISIO		DIRECTION OF TRAVEL MEDIAN TYPE					
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	ALLEY ACCESS 5 BET	COLLISION 4-REAR-TO WEEN 5-BACKING MOTOR		1 - NORTH 2 - SOUTH	(< 4 FE				
3-IN MEDIAN 11-RAILWAY GF 4-ON ROADSIDE 12-SHARED US	VLI	HICLES IN 6-ANGLE INSPORT 7-SIDESW	PE, SAME DIRECTION	3 - EAST 4 - WEST	(≥4 FE	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)			
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAI 3 - HEA		PE, OPPOSITE DIRECTION UNKNOWN	3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN					
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNI				(ANY TYPE) 9 - OTHER/UNKNOWN					
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRAS	H IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE			
L WORKERS PRESENT	LANE CLOSURE LANE SHIFT/CROSSOVER	WARNING				LI			
	VORK ON SHOULDER OR MEDIAN	2 - ADVANCE 3 - TRANSITI	WARNING AREA IN AREA	1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,			
	NTERMITTENT OR MOVING WORK	4 - ACTIVITY 5 - TERMINA		3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT			
LIGHT CONDITION	WEATH	ER .		4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK			
1 - DAYLIGHT	1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 4 - SLAG, GRAY STONE					
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMOKE	7 - SEVERE CROSSWIN E 8 - BLOWING SAND, SO	AND, SOIL, DIRT, SNOW MOVING			5 - DIRT 9 - OTHER/UNKNOWN			
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	9 - FREEZING RAIN OR 99 - OTHER / UNKNOW			7 - SLUSH 9 - OTHER/UNKNOWN					
9 - OTHER / UNKNOWN									
NARRATIVE		- ' '	, , ,		4	Indicate the north direction with			
UNIT #1 WAS BACKING OUT OF A MAR BEGAN TO BACK OUT OF HIS SPOT AF	TER UNIT #1. BOTH UNI	ITS				an "N" on the compass diagram.			
STRUCK IN THE MIDDLE OF THE LANE UNIT #2 DISPUTED THAT HE WAS NOT									
OFFICERS REVIEWED SECURITY FOO BOTH UNITS MOVING DURING THE AC		HOWING _				_			
MD									
		-							
						-			
		-				1 1 1-			
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DAT	/TIME	SCENE CLEARED I	DATE / TIME	REPORT TAKEN BY			
01072020 1143 010	72020 1145	01072020	1150,	0,1,0,7,2,0,2,0	1241	M POLICE AGENCY			
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUTI		74011501	GA C 21 30	FFICER'S NAME*					
	Снескер	ON, STEVEN D BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION ON ADDITION TO AN EXISTING REPORT SENT TO GOPS)							
0 0 5	6 OFFICER'S BA	DGE NUMBER* 			2 , 2 ,				

PAGE

OHIO DES	OHO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						20-01417							
UNIT #	NAME: LAST, FIRST, MIDDLE ELLIS, WILLIE D						DATE OF BIRTH AGE GENDER 69 M							
ADDRESS:	SS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
1215 C	215 JACKSON AVE NW MASSILLON OH 44646 JURIES INJURED EMS AGENCY (NAME) INJURED TAKENTO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT							-	SEATING POSITION	N are no us	1 1	1 1		
INJURIES	INJURED TAKEN BY	INJURED TAKENTO			: MEDICAL FACILITY	(NAME, CITY)	USED 04	DOT-C	OMPLIANT 0 1	AIR BAG US	AGE EJECTION	TRAPPED 1		
ADDRESS: 1215 INJURIES OL STATE **X** **DI CLASS OL CLASS OL CLASS OL CLASS OL CLASS OL CLASS	E 100	PERATOR LICENSE NUMBER OFFENSE CHAR			RGED	LOCAL CODE	OFFENSE DES	CRIPTION		CITATION NUMBER				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RIVER STRACTED		DHOL / DRUG SUSPI LCOHOL MAI		CONDITION		COHOL TEST YPE VALUE		RUG TEST(S YPE RESUL	T SELECT UP TO 4	
UNIT #	NAMELIAST	EIRST MIDDLE	ווע		0	THER DRUG				DATE OF BIRTH		AGE	GENDER	
02	NAUMOVSKI, BLAGO								032			75	M	
ADDRESS: 3706 (STREET, CITY, ST	A ST NW MASSILL	ON OI	H 4464	 6				CONTACT	PHONE - INCLUDE AREA C	ODE			
3706 (INJURIES	INJURED TAKEN BY	RED EMS AGENCY (NAME) INJURED TAKEN TO:			: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION 1		N AIR BAG US	AIR BAG USAGE EJECTION TRAPPED			
OF STATE * * *	OPERATOR L	ICENSE NUMBER	OFFENSE CHAR			RGED	LOCAL	OFFENSE DES	CRIPTION	TION		CITATION NUMBER		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RIVER STRACTED		DHOL / DRUG SUSPI		CONDITION		COHOL TEST Type Value		RUG TEST(S	T SELECT UP TO 4	
			<u> </u>		0.	THER DRUG								
UNIT#	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMEN	[SEATING POSITION	N AIR BAG US	AGE EJECTION	TRAPPED	
NON /	TAKEN BY	AKEN					USED	DOT-C		1 1				
ADDRESS: INJURIES OL STATE	OPERATOR L	OR LICENSE NUMBER OFFENSE CHAR			RGED	CODE	OFFENSE DES	CRIPTION		CITATION NUMBER				
o ol class	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		ISTRACTED		DHOL / DRUG SUSPI	ECTED RIJUANA	CONDITION		COHOL TEST YPE VALUE		RUG TEST(S	T SELECT UP TO 4	
					0.	THER DRUG	V6		عالصال					
1 - FATAL	JRIES	SEATING POSITION 1- FRONT - LEFT SIDE	1 - NOT DE	AIR BAG		OL CLAS:	S	OL RESTRIC		1 - NOT DISTRACTED		TEST STA	ATUS	
	SERIOUS INJURY	(MOTORCYCLE DRIVER)		YED FRONT		2 - CLASS B 2 - CDL INTRASTA				2 - MANUALLY OPERATING	AN 2 - TEST REFUSED			
	D MINOR INJURY 2 - FRONT - MIDDLE 3 - DEPLOYED S							3 - CORRECTIVE L		ELECTRONIC COMMUN DEVICE (TEXTING, TYP				
4 - POSSIBLE IN 5 - NO APPAREN	A SECOND LEET SIDE			IN I / SIDE	4 - REGULAR CLASS 4 - FARM WAIVER (OHIO = D) 5 - EXCEPT CLASS				DIALING) 3 - TALKING ON HANDS-FR	4 TEST GIVEN RESULTS KNOWN				
	(MOTORCYCLE PASSENGER) 9 - DEPLOYMENT UNKNOWN			OWN	5 - M/C MOPED ONLY	MOPED ONLY 6 - EXCEPT CLASS A			COMMUNICATION DEVI	E TEAT ANIEN BEAULTA				
1- NOT TRANSP	TAKEN BY	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACT		4 - TALKING ON HAND-HEL COMMUNICATION DEVI	LD			
/TREATED AT		7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)		EJECTION		OL ENDORSE	MENT	8 - INTERMEDIATI		5 - OTHER ACTIVITY WITH	ΔN	LCOHOL TE NONE	ST TYPE	
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOT EJ	IECTED Ally Ejected		H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PE		6 - PASSENGER		BL00D		
9 - OTHER / UNK	CNOWN	9 - THIRD - RIGHT SIDE 3 - TOTALLY EJECTED		P - PASSENGER	P - PASSENGER RESTRICTIONS		7 - OTHER DISTRACTION		3 - URINE					
CAFETY F	10 - SLEEPER SECTION 4 - NOT APPLICABLE TY EQUIPMENT 4 - NOT APPLICABLE		N - TANKER	KER 10 - LIMITED TO DAY		0. 071150 01070 1071011 01		4 - BREATH UTSIDE 5 - OTHER						
1 - NONE USED		11 - PASSENGER IN OTHER		TRAPPED		Q - MOTOR SCOOTER	TOPOVOLE	12 - LIMITED TO EN		THE VEHICLE			TVDE	
2 - SHOULDER B	DER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPED			S - SCHOOL BUS	S - SCHOOL BUS 13 - MECHANICAL D			EVICES 9 - OTHER / UNKNOWN		DRUG TEST TYPE 1 - NONE				
	P BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY ONLIDER & LAP REIT LISED 12 - PASSENGER IN UNENCLOSED MECHANICAL MEA			3	T - DOUBLE & TRIPLE TRAILERS CONTROL		CONTROLS, OR	(1/2 = 0)		2 - BL00D				
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA 3 - FREED BY		BY	X - TANKER / HAZMAT				1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT		3 - URINE				
FORWARD FA	FORWARD FACING 13 - TRAILING UNIT NON-MECHAN		ECHANICAL M	GENDER 15		15 - MOTOR VEHICLES WITHOUT		3 - EMOTIONAL (E.G., DEPRE		4 - OTHER				
	REAR FACING (NON-TRAILING UNIT)			F-FEMALE		AIR BRAKES 16 - OUTSIDE MIRROR		ANGRY, DISTURBED)	DF	DRUG TEST RESULT(S)				
	- BOOSTER SEAT 15 - NON-MOTORIST			M - MALE U - OTHER / UNKNOWN		17 - PROSTHETIC AID		4- ILLNESS 5- FELL ASLEEP, FAINTED		1 - AMPHETAMINES 2 - BARBITURATES				
	8 - HELMET USED 99 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED						18 - OTHER		FATIGUED, ETC.		3 - BENZODIAZEPINES			
(ELBOW, KNE	(ELBOW, KNEES, ETC.)									6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		4 - CANNABINOIDS		
10 - REFLECTIVE										/ ALCOHOL 9 - OTHER / UNKNOWN		COCAINE OPIATES / OPIOI	DS	
/ BICYCLE ON	1 - LIGHTING - PEDESTRIAN / BICYCLE ONLY								7 VIIIEN VIINIVIII		7 - OTHER			
99 - OTHER / UNK	CNOWN										8 -	NEGATIVE RESU	ILTS	

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