OF PUBLIC SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOSTAKEN OH-2 OH-3	LOCAL INFORMATION		20-11674						
SECONDARY CRASH X PRIVATE PROPERTY	$\frac{1}{2}$								
	/, VILLAGE,TOWNSHIP*			CRASH DATE / TIME* CRASH SEVERITY					
1 NORTH	Township of)		02232020 1624 LATITUDE DECIMAL DEGREES 1 - FATAL 2 - SERIOUS INJURY SUSPECTED						
SR 236 2-SOUTH 3-EAST	ERIE		3 - MINOR INJURY SUSPECTED						
4-WL31	REFERENCE ROAD NAME (ROAD,	, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	4503			_		5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION FROM REFERENCE ID	ROUTE TYPE INTERSTATE ROUTE(TP) AL	ROAD TYPE - ALLEY HW- HIGHWAY	RD - ROAD		INTERSECTION REL	A.V.A.T.A.A.B.V.T.			
2 MILE POST 2 COUTH	FEDERAL US ROUTE AV	- AVENUE LA - LANE	SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH					
4-WEST SR-	STATE ROUTE	- BOULEVARD MP - MILEPOST - CIRCLE OV - OVAL	ST - STREET TE - TERRACE						
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR -	NUMBERED TOWNSHIP DR	- COURT PK - PARKWAY - DRIVE PI - PIKE	ROADWAY						
2 - FEET	ROUTE	☐ ROADWAY DIV	WAY DIVIDED						
LOCATION OF FIRST HARMFUL EVENT	1 - NOT	INER OF CRASH COLLISION/IMI COLLISION 4 - REAR-TO-REAR		DIRECTION OF TRAVEL MEDIAN TYPE 1 - NORTH 1 - DIVIDED FLUSH MEDIAN					
2 - ON SHOULDER 10-DRIVEWAY/	TWO	WEEN 5-BACKING O MOTOR HICLES IN 6-ANGLE		2 - SOUTH (< 4 FEET)					
4 - ON ROADSIDE 12 - SHARED US 5 - ON GORE TRAILS		NSPORT 7 - SIDESWIPE, SA		3 - EAST (2 - DIVIDED FLOSH MEDIAN (24 FEET) 4 - WEST 3 - DIVIDED, DEPRESSED MEDIAN					
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 7 - ON RAMP 14-TOLL BOOTH	3 - HEAI	1 10 10 10		4 - DIVIDED, RAISED MEDIAN (ANYTYPE)					
8-OFF RAMP 99-OTHER/UN	KNOWN				9 - OTHEI	R/UNKNOWN			
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH IN V		CONTOUR	CONDITIONS	SURFACE			
WORKERS PRESENT 2-1	LANE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARN		1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE					
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN INTERMITTENT OR MOVING WORK	3-TRANSITION AR	EA	2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP,					
	OTHER	5 - TERMINATION A		3 - CURVE LEVEL 3 - SNOW BITUMINOUS, ASPHALT 4 - CURVE GRADE 4 - ICE 3 RRIGHT/RL OCK					
LIGHT CONDITION	WEATHE				5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,			
9 1 - DAYLIGHT 2 - DAWN/DUSK	99 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL 6 - WATER (STANDIN	STONE IG, 5 - DIRT			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE 4 - RAIN	8 - BLOWING SAND, SOIL, DI 9 - FREEZING RAIN OR FREE			MOVING) 7 - SLUSH 9 - OTHER/UNKN				
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN		9 - OTHER/UNKNOWN					
NARRATIVE		_ I I I I				Indicate the north			
UNIT 1 ADVISED THAT THEY WERE BA					+	direction with an "N" on the compass diagram.			
SPOT IN THE NORTH END OF THE LOT BACKING OUT OF THEIR SPOT IN THE	SOUTH END OF THE LOT					Compass diagrams			
ADVISED THEY TRIED TO MOVE BUT I	T WAS TO LATE.								
UNIT 2 ADVISED THAT BEFORE BACKI LOT, LOOKED BOTH WAYS BEFORE BACKI									
REVERSE AND FELT A BUMP.	<u> </u>								
DUE TO CONFLICTING STATEMENT, IT	IS UNKNOWN WHO IS A	T FAULT.							
LF						+ + -			
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIN	1	SCENE CLEARED D	DATE / TIME	REPORT TAKEN BY			
AND	32020 1626		3000-30	2232020	500A09007 No.2 EARCHALANDO	POLICE AGENCY			
TOTAL TIME OTHER TOTAL	L OFFICER'S NAME*		CHECKED BY OFFI	CER'S NAME*	MOTORIST				
	TATE, NATUANI	DGE NUMBER*	ESCOLA CHECKED I	A, JOSH BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OF ADDITION TO AN EXERTING REPORT SENT TO GOPS)					
0 0 4	· 1	1,3,8,		1					

PAGE

OHIO DES	OHIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST					20-11674							
UNIT # 0 1	NAME: LAST, FIRST, MIDDLE GAMBS, JESSE K						DATE OF BIRTH AGE 41				gender M		
ADDRESS:	SS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
8965 (8965 GLADYS ST NW MASSILLON OH 44646							I I I	1 1		111		
NON /	INJURED TAKEN BY	AKEN		INJURED	NJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY USED			DOT-COMPLIANT SEATING POSITION		AIR BAG USA	AGE EJECTION	TRAPPED 1	
ADDRESS: 8965 (INJURIES OL STATE				OFFENS	OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	RIPTION	·	CITATION NUMBER		
ol class	ENDORSEMENT SELECT UP TO 2			VER ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUA			condition	STATUS TYPE VALUE		STATUS T	RUG TEST(S YPE RESUL	T SELECT UP TO 4	
UNIT_#	NAME: LAST, F	FIRST, MIDDLE	0.	THER DRUG				DATE OF BIRTH		AGE	GENDER		
02	STEPHEN, ROSEMARY L							113	01958		61	F	
ADDRESS: 3415	STREET, CITY, ST BROADH	ate,zip AVEN AVE NW MA	ASSILL	ON OF	H 446	646			CONTACT	PHONE - INCLUDE AREA CO	DDE	1 1	1 1
3415 E INJURIES	INJURED TAKEN BY				INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPME USED O			SAFETY EQUIPMENT USED 9	DOT-C	MPLIANT 7	A AIR BAG USAGE EJECTION TRAPPED		
OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CHA		SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER STRACTED	_	OHOL / DRUG SUSPI		condition		COHOL TEST YPE VALUE		RUG TEST(S	T SELECT UP TO 4
'1				9		THER DRUG		<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>
UNIT#	* NAME: LAST, FIRST, MIDDLE							,	DATE OF BIRTH	r r i	AGE	GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CO	DDE		-1	
INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG US	AGE EJECTION	TRAPPED
ADDRESS:	TAKEN BY				USED				MC HE				
OL STATE	OPERATOR L	RATOR LICENSE NUMBER OFFEI			FFENSE CHARGED LOCAL OFFENSE DESI			RIPTION		CITATIO	CITATION NUMBER		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		DISTRACTED		OHOL / DRUG SUSPI	ECTED RIJUANA	CONDITION		YPE VALUE		RUG TEST(S	T SELECT UP TO 4
تـــــا				1	0.	THER DRUG							
INJU 1 - FATAL	JRIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DEI	AIR BAG		OL CLASS 1-CLASS A	S	OL RESTRIC 1-ALCOHOL INTER		DRIVER DISTRACT 1 - NOT DISTRACTED		TEST STA	ATUS
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOY				2 - CDL INTRASTAT		2 - MANUALLY OPERATING AN		2 - TEST REFUSED		
3 - SUSPECTED	ED MINOR INJURY 2 - FRONT - MIDDLE 3 - DEPLOY		ED SIDE	D SIDE 3 - CLASS C			3 - CORRECTIVE LENSES		DEVICE (TEXTING, TYPE	INC 3-	3 - IESI GIVEN, CUNTAWINATED		
4 - POSSIBLE IN	4 CECOND LEFT CIDE			(0110 B)			4 - FARM WAIVER	A DUG	DIALING)	4 - TEST GIVEN RESULTS KNOWN			
J- NU AFFAREN	(MOTORCYCLE PASSENGER) 9- DEPLOYA		LIVABLE 5- EXCEPT CLA			5 - EXCEPT CLASS		3 - TALKING ON HANDS-FR COMMUNICATION DEVI	CE 5 - TEST GIVEN, RESULTS				
INJURED	5- SECOND - MIDDLE			6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-HEL COMMUNICATION DEVI					
1 - NOT TRANSP /TREATED AT		CENE 7-THIRD - LEFT SIDE EJECTION				OL ENDORSEMENT 7 - EXCEPT TRACTO 8 - INTERMEDIATE				5 - OTHER ACTIVITY WITH	ALCOHOL TEST TYPE		
2 - EMS		(MOTORCYCLE SIDE CAR) 8 - THIRD – MIDDLE	MIDDLE			H - HAZMAT	H - HAZMAT RESTRICTIONS		ELECTRONIC DEVICE		1 - NONE 2 - BLOOD		
3 - POLICE 9 - OTHER / UNK	CNOWN	9 - THIRD - RIGHT SIDE	Z - PARTIALLI EJEGTED			M - MOTORCYCLE P - PASSENGER	DECEDICATIONS		RMIT 6 - PASSENGER 7 - OTHER DISTRACTION		3 - URINE		
	10 - SLEEPER SECTION 4 - NOT APPL			ICABLE N-TANKER 10		10 - LIMITED TO DAYLIGHT ONLY		INSIDE THE VEHICLE		4 - BREATH			
1 - NONE USED	11 DACCENCED IN OTHER			Q - MOTOR SCOOTER	12 LIMITED OTH		THE VEHICLE						
	OULDER BELT ONLY USED ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, 1 - NOT TRAPPI			PED S - SCHOOL BUS 13 - N		13 - MECHANICAL DEVICES 9 - OTHER / UNKN		9 - OTHER / UNKNOWN	DRUG TEST TYPE				
	- LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA				(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		1 - NONE 2 - BLOOD				
	5 - CHILD RESTRAINT SYSTEM - CARGO AREA 3 - FREED I		Y X - TANKER / HAZMAT		ADAPTIVE DEVI	ADAPTIVE DEVICES) 1 - APPAREN		MAL 3 - URINE					
FORWARD FA	FORWARD FACING 13 - TRAILING UNIT NON-ME		CHANICAL MEANS			3.5. MATARIA EN MATARIA		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED,		4 - OTHER			
	- CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR REAR FACING (NON-TRAILING UNIT)			F-FEMALE		AIR BRAKES		ANGRY, DISTURBED)	DF	DRUG TEST RESULT(S)			
	7 - BOOSTER SEAT 15 - NON-MOTORIST			M - MALE U - OTHER / UNKNOWN						1 - AMPHETAMINES 2 - BARRITURATES			
	8 - HELMET USED 99 - OTHER / UNKNOWN				U-UINEK/UNKNUWN		18 - OTHER		FATIGUED, ETC.		2 - BARBITURATES 3 - BENZODIAZEPINES		
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)							6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		4 - CANNABINOIDS			
) - REFLECTIVE CLOTHING						/ALCOHOL			5 - COCAINE 6 - OPIATES / OPIOIDS			
	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY							9- OTHER / UNKNOWN			7 - OTHER		
99 - OTHER / UNK	CNOWN										8 -	NEGATIVE RESU	ILTS

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