OHIO DEPARTMENT TRAFFIC CRASH		ANDATORY FIELD FOR S	LOCAL REPORT NUMBER*									
PHOTOS TAKEN OH-2 OH-3	LOCAL INFORMATION											
SECONDARY CRASH OH-1P OTHER OH-1P OTHER	REPORTING AGENCY NAME* JACKSON TWP POL	LICE DEPARTI	ncic* 7,6,2,4,	600 M.COSSOSO	HIT/SKIP 1 - SOLVED 1 2 - UNSOLVED 1 - SOLVED 1 2 - UNSOLVED 1 3 - UNSOLVED 1 3 - UNSOLVED 1 4 - UNSOLVED 1 5 - UNSOLVED							
COUNTY* LOCALITY* LOCATION: CIT	Y, VILLAGE, TOWNSHIP*		CRASH DATE / TIME* CRASH SEVERITY									
2-VILLAGE Jackson ((Township of)	02282020 1545 LATITUDE DECIMAL DEGREES 1 - FATAL 2 - SERIOUS INJURY SUSPECTED										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	VILLA PADOVA		LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY									
		DR ROAD TYPE	LONGITUE	E DECIMAL DEGREES	4 -	SUSPECTED INJURY POSSIBLE						
2 - SOUTH 3 - EAST	REFERENCE ROAD NAME (ROAD, 5335	,,						PROPERTY DAMAGE				
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD T	YPE			INTERSECT	ON RELATED	ONLY				
2 MILE POST 2 COUTU	AV.	- ALLEY HW- HIGH		O - ROAD	WITHIN INTERSECTION OR ON APPROACH							
3- HOUSE # 3- EAST US.	I EDERAL OS ROOTE	- AVENUE LA - LAN - BOULEVARD MP - MIL	- SQUARE - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES								
	NUMBERED COUNTY ROUTE CR	- CIRCLE OV - OVA - COURT PK - PAR	- TERRACE	ROADWAY								
	NUMBERED TOWNSHIP DR	- DRIVE PI - PIKE	A - WAY	ROADWAY DIVIDED								
3-YARDS	HE MAN	-										
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER	1 - NOT	NER OF CRASH COLLIS COLLISION 4 - REAR-1		.1	DIRECTION OF TRAVEL MEDIAN TYPE 1 - NORTH 1 - DIVIDED FLUSH MEDIAN							
1. 0. 0	TWO	WEEN 5-BACKIN D MOTOR ICLES IN 6-ANGLE			2 - SOUT 3 - EAST) LUSH MEDIAN						
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS		NSPORT 7 - SIDESV	VIPE, SAME	DIRECTION THE DIRECTION	4 - WEST (≥4 FEET) 3 - DIVIDED, DEPRESSED MI							
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEA		/ UNKNOW		4 - DIVIDED, RAISED MEDIAN (ANY TYPE)							
7 - 0N RAMP 14 - TOLL BOOT 8 - 0FF RAMP 99 - 0THER / UN						9	OTHER/UN					
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRA	SH IN WOF	RK ZONE	CONTOUR	COND	ITIONS	SURFACE				
WORKERS PRESENT	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE WARNIN		ORK ZONE	<u></u>							
LAW ENFORCEMENT PRESENT	E WARNING ION AREA	G AREA	1 - STRAIGHT LEV	1 - CONCRETE								
	OR MEDIAN INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVIT 5 - TERMIN		٨	2 - STRAIGHT GRADE 2 - WET 2 - BLACKTO 3 - CURVE LEVEL 3 - SNOW ASPHALT							
	1		ATTON ARE	Α	4 - CURVE GRADE 4 - ICE 3 - BRICK/BLOCK							
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	ER 6 - SNOW			9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 4 - S							
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	7 - SEVERE CROSSWI		WOM	6 - WATER (STANDING, MOVING) 5 - DIRT								
4 - DARK – ROADWAY NOT LIGHTED	9 - FREEZING RAIN C	R FREEZIN		9 OTHER								
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOV	VN		9 - OTHER/UNKNOWN							
NARRATIVE	4	-						Indicate the north				
UNIT #1 ADVISED THAT THEY CHECKE								direction with an "N" on the compass diagram.				
BEFORE STARTING TO BACK OUT OF OBSERVED UNIT #2 ALSO BACKING O	UT AND ATTEMPTED TO	PULL					+	Compass anagram.				
FORWARD. UNIT #1 ADVISED UNIT #2 UNIT #2 ADVISED THAT THEY DID NO												
IN SIGHT OR IN MOTION BEFORE BAC												
SPOT. UNIT #2 ADVISED THAT THEY I VEHICLE. UNIT #1 AND #2 STATEMEN								-				
DETERMINE AT-FAULT UNIT.												
MD		-										
		_										
		-						-				
		-						1				
								-				
CRASH REPORTED DATE / TIME	ARRIVAL DATE / TIME			SCENE CLEAR	ED DATE / TIME	RI	REPORT TAKEN BY					
	DISPATCH DATE / TIME	03052020		5,7, [(03,0,5202		1	POLICE AGENCY				
TOTAL TIME OTHER TOTA	L OFFICER'S NAME*	Сне	CKED BY OFFI	CER'S NAME*		MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME MINUT	TATE, NATHANI		ON, STEVEN D BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ADDIT) 10 AMERICAN REPORT SENT TO OR									
0 0 3	35 OFFICER'S BAI	JACONED I	2 2									

J FIRST HARMFUL EVENT

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J FIRST HARMFUL EVENT

PAGE

OHIO DES	SONO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							20-14596								
0 1	NAME: LAST, FIRST, MIDDLE MARKLE, KELSEY L								DATE OF BIRTH AGE GENDER 28 F							
ADDRESS:	SS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE						
1004	004 DOGWOOD AVE NE NORTH CANTON OH 44720															
INJURIES	INJURED TAKEN BY				: MEDICAL FACILITY	(NAME, CITY)	USED C	OLIPMENT	□ ВОТ-С		ION AIR B	AG USAGE	EJECTION	TRAPPED 1		
ADDRESS: 1004 [INJURIES OL STATE *** *** OL CLASS	OPERATOR LICENSE NUMBER *********				SE CHAI	RGED	LOCAL CODE	OFFENS	SE DESC	RIPTION	CIT	CITATION NUMBER				
OL CLASS	ENDORSEMENT SELECT UP TO 2				VER ALCOHOL / DRUG SUSPECTED TRACTED ALCOHOL MARIJUANA			CONDI	ITION	STATUS T	STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UP1				
				OTHER DRUG						•						
02	FLUHAF					030	0 6 1 9 5 6		63	F ENDER						
ADDRESS: 1260 L	DRESS: STREET, CITY, STATE, ZIP 160 LEECREST ST NW MASSILLON OH 44646									CONTACT	PHONE - INCLUDE ARE	A CODE			1 1	
1260 L	INJURED TAKEN BY				TAKEN TO	AKENTO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN USED				DOT-COMPLIANT SEATING POSITION			N AIR BAG USAGE EJECTION TRAPPED			
TORIST X X	OPERATOR L				FFENSE CHARGED LOCAL OFFEN				SE DESC	SCRIPTION			CITATION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	DORSEMENT RESTRICTION SELECT UP TO 3 DR		IVER STRACTED	CTED -			CONDI	ITION		COHOL TEST	STATUS		G TEST(S) 「 SELECT UP TO 4	
			BY			LCOHOL MAI THER DRUG	RIJUANA	L								
UNIT #	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH				AGE	GENDER		
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQ	UIPMENT		SEATING POSIT	ION ATR R	AG USAGE	FJECTION	TRAPPED	
ADDRESS:	TAKEN BY	TAKEN			USED					MC HELMET						
OL STATE	OPERATOR L	OR LICENSE NUMBER OFF			FFENSE CHARGED LOCAL OF CODE			OFFENS	SE DESC	SCRIPTION			CITATION NUMBER			
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DISTRACTED			COHOL MARIJUANA		CONDI	ITION	STATUS TYPE VALUE		STATUS		RESULT	SELECT UPTO 4	
تــــــا					0.	THER DRUG	-						1			
INJU 1 - FATAL	IRIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT DE	AIR BAG PLOYED		1 - CLASS A	S			TION(S) LOCK DEVICE	1 - NOT DISTRACTED	CTION		TEST STA E GIVEN	TUS	
	CTED SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - DEPLOY								NTRASTAT							
	TED MINOR INJURY 2 - FRONT - MIDDLE 3 - DEPLOY 5 IN LIDEY 3 - FRONT - RIGHT SIDE 4 DEPLOY						ECTIVE LE	NSES	DEVICE (TEXTING,							
5 - NO APPAREN	PPARENT INJURY 4 - SECOND - LEFT SIDE 5 - NOT APP			/ED BOTH FRONT / SIDE						51/121/10/			4 - TEST GIVEN RESULTS KNOWN			
	(MOTORCYCLE PASSENGER) 9 - DEPLOYMEN 5 - SECOND - MIDDLE			YMENT UNKNO						A COMMUNICATION DEVIC			5 - TEST GIVEN, RESULTS			
1 - NOT TRANSP	4 CECOND DIGHT CIDE				6 - NO VALID OL & CLASS B BUS 7 - EXCEPT TRACTO							.D CF				
/TREATED AT		ENE 7-THIRD - LEFT SIDE EJECTION			OL ENDORSEMENT 8- INTERMEDIATE							AN 1-NONE				
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE 2 - PARTIALLY EJECTED			H - HAZMAT RESTRICTIONS M - MOTORCYCLE 9 - LEARNER'S PEI						2 - BL00D					
9 - OTHER / UNK	NOWN 9-THIRD-RIGHT SIDE 3-TOTALLY EJECTED			P - PASSENGER RESTRICTIONS			7 - OTHER DISTRACTION			3 - URINE						
SAFFTY F	10 - SLEEPER SECTION 4 - NOT APPLICABLE OF TRUCK CAB 4 - NOT APPLICABLE				N - TANKER 10 - LIMITED TO DA			0. 071150 01070 1071011 011			4 - BREATH JTSIDE 5 - OTHER					
1 - NONE USED	IF USED 11 - PASSENGER IN OTHER TRAPPED				Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE 11 - LIMITED - OTHE			ER THE VEHICLE								
	DULDER BELT ONLY USED ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPED				S - SCHOOL BUS 13 - MECHANICAL D						DRUG TEST TYPE 1 - NONE					
	LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHAN		VICAL MEANS			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		2 - BL00D						
5 - CHILD RESTI	- CHILD RESTRAINT SYSTEM - CARGO AREA 3 - FREED I		Y X - TANKER / HAZMAT				ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT		3 - URINE 4 - OTHER					
	ONWARD FACING		EUNANIUAL M	ANICAL MEANS GENDER			15 - MOTO	15 - MOTOR VEHICLES WITHOUT		3 - EMOTIONAL (E.G., DEPRESSED		ED,				
6 - CHILD RESTI	REAR FACING (NON-TRAILING UNIT)				F - FEMALE				AIR BRAKES 16 - OUTSIDE MIRROR		ANGRY, DISTURBED) 4 - ILLNESS		DRUG TEST RESULT(S) 1 - AMPHETAMINES			
	BOOSTER SEAT 15 - NON-MOTORIST			M - MALE U - OTHER / UNKNOWN			17 - PROSTHETIC AID			5 - FELL ASLEEP, FAINT	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 INFLUE OF MEDICATIONS / D	4 - CANNABINOIDS					
) - REFLECTIVE CLOTHING LIGHTING – PEDESTRIAN										/ALCOHOL 9-OTHER/UNKNOWN	5 - COCAINE 6 - OPIATES / OPIOIDS				
/ BICYCLE ON	/ BICYCLE ONLY											7 - OTHER				
99 - OTHER / UNKNOWN												8 - NEGATIVE RESULTS				

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