OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*										
PHOTOSTAKEN OH-2 OH-3	LOCAL INFORMATION										
SECONDARY CRASH OH-1P OTHER TOPERTY	JACKSON TWP POL	NUMBER OF UNITS	ITS UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN								
COUNTY* LOCALITY* LOCATION: CITY		CRASH DATE / TIME * CRASH SEVERITY									
Jackson (Township of)		03182020 1330 1- FATAL 2- SERIOUS INJURY E LATITUDE DECIMAL DEGREES SUSPECTED								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 WEST	LOCATION ROAD NAME HIGH MILL		LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY								
	REFERENCE ROAD NAME (ROAD,	MILEPOST, HOUSE #)	ROAD TYPE	SUSPECTED LONGITUDE DECIMAL DEGREES 4 - INJURY POS							
2 - SOUTH 3 - EAST	7055	,		5 - PROPERTY DAM							
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			NTERSECTION RELA						
2 MILE POST 2 COUTH	av.	- ALLEY HW- HIGHWAY	l —	NTERSECTION OR ON APPROACH							
3- HOUSE # 3- EAST	I EDERAL OS ROOTE	- AVENUE LA - LANE - BOULEVARD MP - MILEPOST	SQ - SQUARE ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
10 (10)10(3)	NUMBERED COUNTY ROUTE CR	- CIRCLE OV - OVAL - COURT PK - PARKWAY	TE - TERRACE TL - TRAIL								
1 - MILES TR - 2 - FEET	NUMBERED TOWNSHIP DR	- DRIVE PI - PIKE	WA - WAY	ROADWAY DIVIDED							
LOCATION OF FIRST HARMFUL EVEN		- HEIGHTS PL - PLACE NER OF CRASH COLLISION/II	ираст	DIRECTION OF TRAVEL MEDIAN TYPE							
O C 1 - ON ROADWAY 9 - CROSSOVER	1 - NOT	COLLISION 4 - REAR-TO-RE		1 - NORTH	1 - DIVIDI	DIAN TYPE ED FLUSH MEDIAN					
2 - ON SHOULDER 10-DRIVEWAY/ 3 - IN MEDIAN 11-RAILWAY GI	TWO	MOTOR 5-BACKING DICLES IN 6-ANGLE		2 - SOUTH (< 4 FEET) 3 - EAST 2 - DIVIDED FLUSH N							
4 - ON ROADSIDE 12 - SHARED US 5 - ON GORE TRAILS	E PATHS OR TRAI	NSPORT 7 - SIDESWIPE, R-FND 8 - SIDESWIPE.	SAME DIRECTION OPPOSITE DIRECTION	4-WEST (≥4 FEET)							
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEAI	A 40 M		4 - DIVIDED, RAISED MEDIAN (ANY TYPE)							
7 - ON RAMP 14-TOLL BOOTS 8 - OFF RAMP 99-OTHER/UN					9 - OTHER	R/UNKNOWN					
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN		CONTOUR	CONDITIONS	SURFACE					
WARKERS PRESENT	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1 WARNING SIG		<u> </u>	_9_	9					
	NORK ON SHOULDER OR MEDIAN	2 - ADVANCE WAR		1 - STRAIGHT LEVEL	1 - CONCRETE						
4-1	INTERMITTENT OR MOVING WORK	4 - ACTIVITY ARE 5 - TERMINATION			ADE 2-WET 2-BLACKTOP, BITUMINOUS, ASPHALT						
			AREA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK					
LIGHT CONDITION 1 - DAYLIGHT	WEATHE 1-CLEAR	ER 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE					
2 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY	2 - CLOUDY	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, E	WONS TOI	6 - WATER (STANDING, MOVING) 5 - DIRT							
4 - DARK – ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING RAIN OR FRE	8		7 - SLUSH	9 - OTHER/UNKNOWN					
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN	ſ					
NARRATIVE	•	-1 1	1 1 1			Indicate the north					
OWNER OF UNIT 1 FOUND DAMAGE TO		H				direction with an "N" on the compass diagram.					
WHEN SHE ARRIVED HOME. SHE HAD NURSING HOME IN SUMMIT COUNTY,						Compass diagrams					
NURSING HOME IN JACKSON TOWNSH		DULD									
HAVE BEEN NOTICED WHEN ENTERING HER DRIVING DOOR.											
LF						_ -					
		-									
		-									
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / T	ME T	SCENE CLEARED D	ATE/TIME	REPORT TAKEN BY					
	82020 1935	031,82020 2		03182020	CONTROL OF CONTROL CONTROL CONTROL	M POLICE AGENCY					
TOTAL TIME OTHER TOTAL	OFFICER'S NAME*		CHECKED BY OFFI			MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUT	CINDEA, STEFT	IEN dge number* _	ESCOLA	N N							
0 0 5	L	T I I I I I	2 4	TO ALL AND THE REPORT SERIES OF THE SERIES							

PAGE

OHI OF MAZO	SOURCE SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							20-17677								
UNIT	T# NAME: LAST, FIRST, MIDDLE									DA	TE OF BIRTH			AGE	GENDER	
<u>.U.</u> -	PARKED, UNOCCUPIED								F							
ADDRE	DRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
E O INJURI	ES INJURED	EMS AGENCY (NAME)		INJUREDT	AKFNTO	: MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT		Î	SEATING POSITI	ON ATR B	AG USAGE	EJECTION	TRAPPED	
ADDRE INJURI OL STA	TAKEN BY		INSURED TAKEN TO:					USED	MC H	OMPLIANT ELMET	1 1		1	1 1	I	
OL STA	TE OPERATOR I	OR LICENSE NUMBER OFFENSE CHAI			RGED	LOCAL	OFFENSE DESC	RIPTION		1	CITA	ATION N	IUMBER	1		
0T0R	_															
≥ OL CLA	SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPI	E CTED RIJUANA	CONDITION		TYPE	VALUE	STATUS		G TEST(S RESUL) T SELECT UP TO 4	
						THER DRUG	NIO O AIVA					L	1			
UNIT	# NAME: LAST,	FIRST, MIDDLE												AGE	GENDER	
UZ		WN, UNKNOWN										1 1		Ī	M	
ADDRE	SS: STREET, CITY, ST								CONTACT PHONE - INCLUDE AREA CODE							
O UIV		NKNOWN OH EMS AGENCY (NAME)		TALLIBERT	AVENTO	MEDICAL FACILITY	(NAME OFFICE	CAFETY FOILIDMENT			SEATING POSITI	ON ATD D	AC HEACE	EJECTION	TRADDED	
-NON	TAKEN	EMS AGENCY (NAME)		INJURED	AKENTO	: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN USED			DOT-COMPLIANT		01		9 USAGE	1 1	TRAPPED	
ADDREST NON-WOLORIST OF STA	TE OPERATOR I	ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION			CITA	ATION N	IUMBER		
10RI						CODE										
OL CLA	SS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECTION	DIS	VER TRACTED		OHOL / DRUG SUSPI		CONDITION		COHOL TYPE	TEST VALUE	STATUS		G TEST(S RESUL) T select up to 4	
	11 11		BY	9		LCOHOL MAI	RIJUANA	9 ,		1		l _e	11	311 31	H H 1	
UNIT	UNIT # NAME: LAST, FIRST, MIDDLE							DA	TE OF BIRTH			AGE	GENDER			
										1 1	1 1	1 1				
ADDRE	SS: STREET, CITY, S	FATE, ZIP							CONTAC	T PHONE	E - INCLUDE AREA	CODE				
ADDRE								L	ш	1	1 1	1	1		1 1	
INJURI O	ES INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		OMPLIANT	SEATING POSITI	ON AIR B	AG USAGE	EJECTION	TRAPPED	
		ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC				CITA	ATION N	UMBER	L	
MOTORIST							CODE									
OL CLA			TRACTED			CONDITION	ALCOHOL TEST STATUS TYPE VALUE S			STATUS	DRUG TEST(S) TATUS TYPE RESULT SELECT UP TO 4					
]	BY			LCOHOL MAI THER DRUG	RIJUANA									
Ĭ	NJURIES	SEATING POSITION	A	AIR BAG		OL CLAS	S	OL RESTRIC	TION(S)		VER DISTRAC	TION		TEST STA	TUS	
1 - FATAL	(MOTORCYCLE DRIVED)		1 - NOT DEF 2 - DEPLOY				1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN			1 - NONE GIVEN 2 - TEST REFUSED				
	2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 2 - FRONT – MID		3 - DEPLOY	OYED SIDE		3 - CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUN		VICATION 3 - TEST GIVEN, CONTAMINATED				
	4 SECOND LEET SIDE			4 - DEPLOYED BOTH FRONT / SIDE 4 - REGULAR CLASS 5 - NOT APPLICABLE (OHIO = D)			4 - FARM WAIVER 5 - EXCEPT CLASS	4 - FARM WAIVER 5 - EXCEPT CLASS A BUS			DIALING) 3 - TALKING ON HANDS-FREE			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN		
	(MOTORCYCLE PASSENGER) 9 - DEP			PLOYMENT UNKNOWN 5 - M/C MOPED ONLY 6 -			6 - EXCEPT CLASS	6 - EXCEPT CLASS A & CLASS B BUS			COMMUNICATION DEVICE			5 - TEST GIVEN, RESULTS UNKNOWN		
1 - NOT TR	NJURED TAKEN BY OTTRANSPORTED 6 - SECOND - RIGHT SIDE			7 - EXCEPT TRA			7 - EXCEPT TRACTO	TOR-TRAILER COMMUNICATION DEVIC			VICE	ALCOHOL TEST TYPE				
2 - EMS				EJECTION OL ENDORSEMENT 8- NOT EJECTED H - HAZMAT			8 - INTERMEDIATE LICENSE RESTRICTIONS		5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE			1 - NONE				
3 - POLICE	0 THIRD DICHT CIDE			DECTDIO			9 - LEARNER'S PER RESTRICTIONS					2 - BLOOD 3 - URINE				
	10 - SLEEPER SECTION 4 - NOT API		PLICABLE N - TANKER			10 - LIMITED TO DAYLIGHT ONLY		INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE			4 - BREATH E 5 - OTHER					
	I - NONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA TRAPPED			Q - MOTOR SCOOTER 11 - LIMITED TO EN R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTH			THE VEHICLE			OUTSIDE	DRUG TEST TYPE					
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA		PPED S - SCHOOL BUS			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND		9 - OTHER / UNKNOWN			1-NONE					
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		MECHAN	MECHANICAL MEANS X - TANKER / HA7MAT			CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL		2 - BLOOD 3 - URINE					
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA FORWARD FACING 13 - TRAILING UNIT		3 - FREED E NON-ME	NON-MECHANICAL MEANS GENDER			14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT		4 - OTHER					
	6 - CHILD RESTRAINT SYSTEM – REAR FACING (NON-TRAILING UNIT)			F-FEMALE			AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		RESSED,	DRUG TEST RESULT(S)				
	7 - BOOSTER SEAT 15 - NON-MOTORIST			M - MALE U - OTHER / UNKNOWN			16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		4 - ILLNESS 5 - FELL ASLEEP, FAINTED,		D,	1 - AMPHETAMINES 2 - BARBITURATES				
9 - PROTEC	9 - PROTECTIVE PADS USED							18 - OTHER		FATIGUED, ETC. 6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES			
	(ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING								OF MEDICATIONS / DRUGS /ALCOHOL			4 - CANNABINOIDS 5 - COCAINE				
11 - LIGHTII	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY								9 - OTHER / UNKNOW			6 - OPIATES / OPIOIDS				
	OTHER / UNKNOWN											7 - OTHER 8 - NEGATIVE RESULTS				

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