OHIO DEPARTMENT TRAFFIC CRASH		ANDATORY FIELD F	20-40593								
PHOTOSTAKEN OH-2 OH-3	LOCAL INFORMATION										
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY	JACKSON TWP POLICE DEPARTME 0,7,6,2,4 1-solved 1-solved 0,2 98-ANIM 1-solved 1-solve										
COUNTY* LOCALITY* LOCATION: CITY		CRASH DATE / TIME * CRASH SEVERITY 06142020 1420 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	LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY									
4-WEST	REFERENCE ROAD NAME (ROAD,	ROAD TYPE	LONGITUDE	CHERECTER							
2 - SOUTH 3 - EAST	5544	,	.,		_ 5 - PROPERTY DAMAGE						
REFERENCE POINT DIRECTION	ROUTE TYPE	ROA	DTYPE	INTERSECTION RELATED							
2 MILE POST 2 COUTU	The state of the s	- ALLEY HW-	HIGHWAY	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH						
3 - HOUSE # 3 - EAST	STATE ROUTE BL	BOULEVARD MP-	ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- CIRCLE OV -	DVAL PARKWAY	TE - TERRACE TL - TRAIL	ROADWAY						
1 - MILES TR - 2 - FEET 3 - YARDS	ROUTE	R - DRIVE PI - E - HEIGHTS PL -	ROADWAY DIVIDED								
LOCATION OF FIRST HARMFUL EVEN		INER OF CRASH COL			DIRECTION OF TRAVEL MEDIAN TYPE						
9 - CROSSOVER 2 - ON SHOULDER 9 - CROSSOVER 10 - DRIVEWAY/	ALLEY ACCESS 5 BET	COLLISION 4-REATWEEN 5-BAG O MOTOR	CKING	к	1 - NORTH , 2 - SOUTH	IDED FLUSH MEDIAN 4 FEET.)					
4 - ON ROADSIDE 12-SHARED US		HICLES IN 6-AND ANSPORT 7-SID		AME DIRECTION	3 - EAST 4 - WEST	(≥	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)				
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REA 3 - HEA		ESWIPE, 0F IER / UNKN	PPOSITE DIRECTION	3 - DIVIDED, DEPRESSED MEDIAI 4 - DIVIDED, RAISED MEDIAN						
7 - ON RAMP 14-TOLL BOOTI 8 - OFF RAMP 99-OTHER / UN					(ANY TYPE) 9 - OTHER/UNKNOWN						
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF	CRASH IN V	WORK ZONE	CONTOUR	CONDITION	S SURFACE				
WARKERS PRESENT	LANE CLOSURE LANE SHIFT/CROSSOVER		RETHE 1S NING SIGN	T WORK ZONE							
- 3-1	WORK ON SHOULDER OR MEDIAN	S SE STATE OF SECURITION	NCE WARN		1 - STRAIGHT LEVEL	1 - CONCRETE					
4-	INTERMITTENT OR MOVING WORK OTHER	95	VITY AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT				
LIGHT CONDITION	WEATH				4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK				
1 1-DAYLIGHT	1 - CLEAR	6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DI OIL, GRAVEL	4 - SLAG, GRAVEL, STONE				
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMOKE	SWINDS D, SOIL, DII	RT, SNOW	W 6 - WATER (STANDING, MOVING) 5 - DIR							
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RA 99 - OTHER / UNK		ZING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNO	9 - OTHER/UNKNOWN				
9 - OTHER / UNKNOWN						7 - OTHER/ORKING					
NARRATIVE			1 1	L I			Indicate the north direction with				
UNIT #1 WAS PARKED IN A MARKED P LOCATION, UNOCCUPIED. UNIT #2 W/		_					an "N" on the compass diagram.				
PARKING SPACE WHEN HIS FOOT SLI GAS. CAUSING HIM TO CRASH INTO U											
TO MODERATE DAMAGE, NOT REQUIR OFFICER WITNESSED THE CRASH.							-				
JA		_									
		_									
		_					1 1 1-				
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL	DATE / TIN	/E	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY				
Participation Access to the Commence of the Co	42020 1420	061420		***************************************	06142020		POLICE AGENCY				
TOTAL TIME OTHER TOTAL	The state of the s			CHECKED BY OFFI	FFICER'S NAME*						
ROADWAY CLOSED INVESTIGATION TIME MINUT	DISSLER, BRITT	\longrightarrow	HALL, JA	ASON D BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ADDITI) TO AN EXISTING REPORT SENT TO 00							
0 0 2	0.5 OFFICER'S BA	1,4	_3,	JEURED I	1,2,3						

30 - GUARDRAIL FACE

J FIRST HARMFUL EVENT

36 - MEDIAN OTHER BARRIER

42 - CULVERT

OHIO DEL OF PUBL MATETY - SERV	SONIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						20-40593							
UNIT #	NAME: LAST, FIRST, MIDDLE PARKED, UNOCCUPIED						DATE OF BIRTH				AGE	GENDER N		
ADDRESS:	STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
ADDRESS:	INJURED TAKEN BY	EMS AGENCY (NAME) INJURED TAKEN TO			: MEDICAL FACILITY	MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DMPLIANT	ATING POSITION	AIR BAG US	AGE EJECTIO	N TRAPPED	
OL CLASS	E OPERATOR LICENSE NUMBER OFFENSE CHAI			RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATION NUMBER				
OL CLASS	ENDORSEMENT SELECT UP TO 2				RACTED ALCOHOL / DRUG SUSPECTED C ALCOHOL MARIJUANA OTHER DRUG			CONDITION	ALCOHOL TEST STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4		
UNIT # 0 2		01 AME: LAST, FIRST, MIDDLE SEILER, JERRY DEAN						ACRESSON.			0F BIRTH		AGE 8 0	GENDER M
ADDRESS:	: STREET, CITY, ST	•	RON (OH 443	19				CONTACT		NCLUDE AREA CO	DE		
3682 INJURIES	INJURED TAKEN BY	TAKEN			TAKEN TO	MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT SEATING POSITION O 1			AIR BAG US	AGE EJECTIO	TRAPPED 1
OL STATE	OPERATOR L	ICENSE NUMBER OFFENSE C			SE CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATION NUMBER		
ol class	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RIVER STRACTED	ДА	OHOL / DRUG SUSP LCOHOL MAI THER DRUG		condition 1		YPE			RUG TEST(YPE RESU	S) LT SELECT UP TO 4
UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				AGE	GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - I	NCLUDE AREA CO	DE I			
ADDRESS:	ES INJURED TAKEN INJURED TAKEN BY			TAKEN TO	MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			□ ВОТ-С	DMPLIANT	ATING POSITION	AIR BAG US	AGE EJECTIO	N TRAPPED	
OL CLASS	OPERATOR L	ATOR LICENSE NUMBER OFFENSE C			SE CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATION NUMBER		
OL CLASS	ENDORSEMENT SELECT UP TO 2		DI BY	RIVER STRACTED	□ A		ECTED Rijuana	CONDITION			VALUE S			LT SELECT UP TO 4
INJU	JRIES	SEATING POSITION		AIR BAG		THER DRUG OL CLAS	s	OL RESTRIC	TION(S)		R DISTRACT	ION	TEST ST	
3 - SUSPECTED 4 - POSSIBLE IN 5 - NO APPAREN INJURED 1 - NOTTRANSP /TREATED A' 2 - EMS 3 - POLICE 9 - OTHER / UNK	NJURY IT INJURY TAKEN BY ORTED T SCENE	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OFTRUCK CAB	9 - DEPLOYMENT UNKNOWN EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE		1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL OL ENDORSE H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER	MENT	1 - ALCOHOL INTER 2 - CDL INTRASTAT 3 - CORRECTIVE LE 4 - FARM WAIVER 5 - EXCEPT CLASS. 6 - EXCEPT CLASS. 7 - EXCEPT TRACTC 8 - INTERMEDIATE RESTRICTIONS 9 - LEARNER'S PEFRESTRICTIONS 10 - LIMITED TO DAY 11 - LIMITED TO EM	E ONLY 2 - MANUALLY OPERATING ELECTRONIC COMMUNI DEVICE (TEXTING, TYPI DIALING) 3 - TALKING ON HANDS-FR COMMUNICATION DEVICE R-TRAILER LICENSE 5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE MIT 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE PLOYMENT 8 - OTHER DISTRACTION OF THE VEHICLE 9 - OTHER DISTRACTION OF THE VEHICLE			CATION ING, 2 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH			
3 - LAP BELT ON 4 - SHOULDER & 5 - CHILD RESTIFORWARD FA 6 - CHILD RESTIREAR FACIN 7 - BOOSTER SE 8 - HELMET US 9 - PROTECTIVE (ELBOW, KNI 10 - REFLECTIVE 11 - LIGHTING - / BICYCLE OI	1 - NONE USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM – FORWARD FACING 6 - CHILD RESTRAINT SYSTEM – REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN		APPED CATED BY ANICAL MEANS BY		R - THREE-WHEEL MC S - SCHOOL BUS T - DOUBLE & TRIPLE X - TANKER / HAZMAT GENDER F - FEMALE M - MALE U - OTHER / UNKNOWN	TRAILERS	12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER		9 - OTHER / UNKNOWN CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 9 - OTHER / UNKNOWN			DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER DRUG TEST RESULT(S) 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS		

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