OHIO DEPARTMENT TRAFFIC CRASH	REPORT *DENOTES MA	ANDATORY FIELD FOR SUP	LOCAL REPORT NUMBER*							
PHOTOS TAKEN OH-2 X 0H-3			NCIC*							
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY	REPORTING AGENCY NAME* JACKSON TWP POL	NUMBER OF UNITS	OF UNITS UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN							
COUNTY* LOCALITY* LOCATION: CIT		CRASH DATE / TIME * CRASH SEVERITY								
3 NORTH	(Township of)		DOAD TYPE	2 - SERIOUS INJURY						
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	LOCATION ROAD NAME DRESSLER		ROAD TYPE	AL SOMEONE SALES CONTROL	LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY SUSPECTED					
	REFERENCE ROAD NAME (ROAD,	, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	5577			L		5 - PROPERTY DAMAGE ONLY				
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPI	3		INTERSECTION RELA	Manhadana				
2 MILE POST 2 COUTU	AV	- ALLEY HW- HIGHWA - AVENUE LA - LANE	AY RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH						
3- HOUSE # 3- EAST	- I EDERAL OS ROOTE	- BOULEVARD MP - MILEPO		WITHIN INTERCHANGE AREA NUMBER OF APPROACHES						
	- NUMBERED COUNTY ROUTE CR	- CIRCLE OV - OVAL - COURT PK - PARKWA	TE - TERRACE AY TL - TRAIL	ROADWAY						
1 - MILES 2 - FEET	- NUMBERED TOWNSHIP DR	- DRIVE PI - PIKE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED					
LOCATION OF FIRST HARMFUL EVEN		INER OF CRASH COLLISION	/IMPACT	DIRECTION OF TRAVEL MEDIAN TYPE						
O C 1 - ON ROADWAY 9 - CROSSOVER	1 - NOT	COLLISION 4-REAR-TO-F		1 - NORTH	1 - DIVIDE	D FLUSH MEDIAN				
1. 0. 0	TWO	O MOTOR HICLES IN 5 - BACKING 6 - ANGLE		2 - SOUTH (< 4 FEET) 3 - EAST 2 - DIVIDED FLUSH MEDIAN						
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS		NSPORT 7 - SIDESWIP	E, SAME DIRECTION E, OPPOSITE DIRECTION	4-WEST (≥4 FEET)						
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEAI					D, RAISED MEDIAN				
7 - ON RAMP 14-10LL BOOT 8 - OFF RAMP 99-OTHER/UN						/UNKNOWN				
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH	IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE				
WARKERS BRESENT	· LANE CLOSURE · LANE SHIFT/CROSSOVER	1 - BEFORE TH WARNING S	E 1ST WORK ZONE SIGN	I		LI				
1 -	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE W		1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRE						
	INTERMITTENT OR MOVING WORK	4 - ACTIVITY A	REA	2 - STRAIGHT GRADE 2 - WET 2 - BLACKT 3 - CURVE LEVEL 3 - SNOW 2 - BITUMII ASPHAL						
ACTIVE SCHOOL ZONE 5 -	OTHER	5 - TERMINATI	UN AREA	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 - SLAG, GRAVEL, STONE				
2 - DAWN/DUSK	2 - CLOUDY	7 - SEVERE CROSSWIND	-	6 - WATER (STANDING, MOVING) 5 - DIRT						
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	4 - RAIN	E 8 - BLOWING SAND, SOIL 9 - FREEZING RAIN OR F			9 - OTHER/UNKNOWN					
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN		9 - OTHER/UNKNOWN						
NARRATIVE		LIII	1 1 1			Indicate the north				
UNIT #1 WAS PARKED FROM EAST TO) WEST IN A PARKING SP	PACE AT			+	direction with an "N" on the				
LISTED INCIDENT LOCATION. UNIT #2 WEST IN LISTED INCIDENT LOCATION						compass diagram.				
SHE THOUGHT HER CAR WAS IN PAR	RK AND TOOK HER FOOT	OFF THE								
BRAKE AND ROLLED INTO UNIT #1, C. UNITS. UNIT #2 IS AT FAULT.	AUSING MINOR DAMAGE	то вотн								
MD		<u> </u>								
		-								
		-				_				
		_								
						_				
		F. L.								
AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	DISPATCH DATE/TIME	ARRIVAL DATE		SCENE CLEARED I	- Contract C	REPORT TAKEN BY POLICE AGENCY				
	82020 1339	08182020		08182020	1414	MOTORIST				
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT		TOPHER	640 81 30	FICER'S NAME* ON STEVEN SUPPLEMENT						
	D BY OFFICER'S BADGE NUMBER* (CORRECTION OR ADDITIO									
		1,0,2	ــــــــــــــا إثــــــــــا	1 1 1	2,2,					

99 - OTHER / UNKNOWN

29 - BRIDGE RAIL

30 - GUARDRAIL FACE

J FIRST HARMFUL EVENT

BARRIER

36 - MEDIAN OTHER BARRIER

OR SUPPORT

42 - CULVERT

49 - FIRE HYDRANT

PAGE

U	OHIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							20-53082								
	01	NAME: LAST, FIRST, MIDDLE FRANZ, KENNEDY M						DATE OF BIRTH AGE GENDER 20 M								
RIST		STREET, CITY, ST.								CONTACT PHONE - INCLUDE AREA CODE						
010			LN DELAWARE (DH 430												
NON-N	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO:			: MEDICAL FACILITY	CAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED		DOT-COMPLIANT SEATING POSITION OF THE COMPLIANT		IN AIR BAG I	JSAGE I	EJECTION 1	TRAPPED 1	
MOTORIST / NON-MOTORIST	OL STATE	OPERATOR L	ICENSE NUMBER	DISTRACTED			RGED	ED LOCAL OFFENSE DESC		RIPTION	CITATION NUMBER					
MO	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT				DHOL / DRUG SUSPI		CONDITION		YPE VALUE		DRUG TYPE	RESULT	SELECT UP TO 4	
	لــــــا	ــــــــــــــــــــــــــــــــــــــ		اللا		0.	THER DRUG									
	02	JACKSON, KAITLYN E							040		_ 	age 18	F ENDER			
FORIST		STREET, CITY, ST.	ATE, ZIP N NEW PHILADEL	.PHIA	OH 446	63				CONTACT	PHONE - INCLUDE AREA	CODE				
/ NON-MOTORIST	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	FACILITY (NAME, CITY) SAFETY EQUIPMENT USED ()		T DOT-COMPLIANT SEATING POSITION MC HELMET		ON AIR BAG I	N AIR BAG USAGE EJECTION TRAPPED			
TORIST / N	OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN:	SE CHAI	RGED	LOCAL CODE	OFFENSE DESC			CITATI	CITATION NUMBER			
MOTO	OL CLASS ENDORSEMENT RESTRICTION SELECT UP TO 3 DR			RIVER STRACTED		DHOL / DRUG SUSPI	G SUSPECTED CONDITION			ALCOHOL TEST STATUS TYPE VALUE			TEST(S	SELECT UPTO 4		
				B1			LCOHOL MAI THER DRUG	RIJUANA			•	STATUS	TYPE			
	UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GE					GENDER		
RIST	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
MOTO	***********		5146 A 65110V		T		MEDIAN FACTORY		LOAFETY FOUNDAMENT		0547110 000177	<u> </u>		1	1 1	
/ NON-MOTORIST	INJURIES	S INJURED TAKEN INJURED TAKEN Year Year		TAKENTO	: MEDICAL FACILITY (NAME, CITY) USED		DOT-COMPLIANT SEATING POSITION MC HELMET		ON AIR BAG U	JSAGE I	EJECTION	TRAPPED				
MOTORIST	OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAI	RGED LOCAL CODE		OFFENSE DESC	RIPTION		CITATI	ON NÜI	MBER		
ωW	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DI	DISTRACTED		DHOL / DRUG SUSPECTED LCOHOL MARIJUANA		CONDITION	STATUS TYPE VALUE				TEST(S RESULT	RESULT SELECT UP TO 4	
				<u> </u>]	0.	THER DRUG				•	ــالِــــــــــــــــــــــــــــــــــ		اللا		
	2948	RIES	SEATING POSITION		AIR BAG				OL RESTRIC					ST STA	TUS	
	- FATAL - SUSPECTED	1 - FRONT – LEFT SIDE 1 - NOT DEPLOYED (MOTORCYCLE DRIVER) 2 - DEPLOYED FROM							1 - ALCOHOL INTER 2 - CDL INTRASTAT				1 - NONE GIVEN GAN 2 - TEST REFUSED			
3	3 - SUSPECTED MINOR INJURY		2 - FRONT - MIDDLE	3 - DEPLO			3 - CLASS C		3 - CORRECTIVE LE	ENSES ELECTRONIC COMMU		VICATION 3 - TEST GIVEN, CONTAMINATED				
	4 - PUSSIBLE INJUNT		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYED BOTH FRONT / SIDE			4 - REGULAR CLASS (OHIO = D)	110 - D)			DIALING)			SAWFLE/ UNUSABLE		
5			(MOTORCYCLE PASSENGER)	5 - NUT APPLICABLE			5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS			
	INJURED TAKEN BY 5- SECOND - MIDDLE			YMENI UNKNO	JWN	6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BUS		4 - TALKING ON HAND-HELD			UNKNOWN			
1		IOT TRANSPORTED 6 - SECOND - RIGHT SIDE TREATED AT SCENE 7 - THIRD - LEFT SIDE				7 - EXCEPT TRAC			R-TRAILER	/ICE	ALCOHOL TEST TYPE					
1,			(MOTORCYCLE SIDE CAR)	EJECTION 1 - NOT EJECTED			H - HAZMAT RESTRICTIONS			LICENSE	H AN	AN 1 - NONE				
	3- PULICE		8 - THIRD - MIDDLE	2 - PARTIALLY EJECTED		M - MOTORCYCLE 9 - LEARNER'S		9 - LEARNER'S PER	RMIT 6 - PASSENGER		2 - BL00D					
(7-UITER/UNKNUWN		9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION	3 - TOTALLY EJECTED		P - PASSENGER RESTRICTION		THOUSE THE MENTAL E			3 - URINE 4 - BREATH					
	SAFETY EQUIPMENT OF TRUCK CAB 4 - NO		4 - NOT AF	JI APPLICABLE N - IANKER			TO ELIMITED TO DATE LOTTE OTHER				5 - OTHER					
	- NONE USED	NONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		TRAPPED	Q - WOTOR SCOUTER			12 - LIMITED - OTHE	ER		DRUG TEST TYPE					
		OULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT T		1 - NOTTR	APPED S - SCHOOL BUS 13 - MI				13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND		1-NONE					
	5 E. 11 BEEL VIIIEL VOED		PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRIC	CATED BY ANICAL MEANS	ŝ	T - DOUBLE & TRIPLE TRAILERS CONTROLS, OR (OTHER CONDITION			2 - BL00D				
	5 - CHILD RESTRAINT SYSTEM -		CARGO AREA	3 - FREED BY		X - TANKER / HAZMAT		ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL	'	3 - URINE				
	FORWARD FA	FORWARD FACING 13 - TRAILING UNIT NO		NON-M	MECHANICAL MEANS GENDER			15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPR		4 - OTHER),				
6	6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTER REAR FACING (NON-TRAILING UNIT)		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	F			F-FEMALE	MALE AIR BRAKES		ANGRY, DISTURBED)		DRUG TEST RESULT(S)				
7	7 - BOOSTER SEAT 15 - NO		15 - NON-MOTORIST			M - MALE		16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		4 - ILLNESS 5 - FELL ASLEEP, FAINTED,		1 - AMPHETAMINES				
	O HEEMET OOLS		99 - OTHER / UNKNOWN			U - UTHER / UNKNOWN	o omen om		3 - OTHER			2 - BARBITURATES 3 - BENZODIAZEPINES				
(9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)								6 - UNDER THE INFLUENC OF MEDICATIONS / DRI		4 - CANNARINOIDS					
10	- REFLECTIVE CLOTHING							OF MEDICATIO /ALCOHOL		5 - COCAINE						
11	11 - LIGHTING - PEDESTRIAN										9 - OTHER / UNKNOWN			ES / OPIOID	S	
00	/ BICYCLE ONLY D-OTHER/UNKNOWN									7 - OTHER 8 - NEGATIVE R				TS		

HSY8306 OH1M 1/19 [760-1500] PAGE 4 0F 4