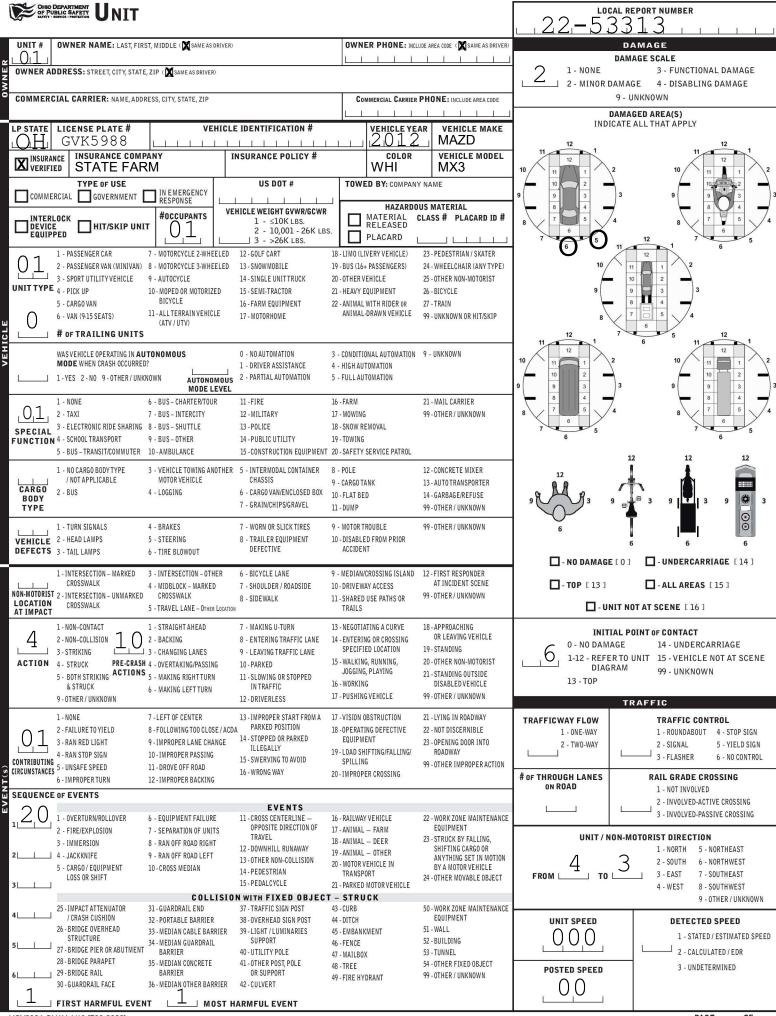
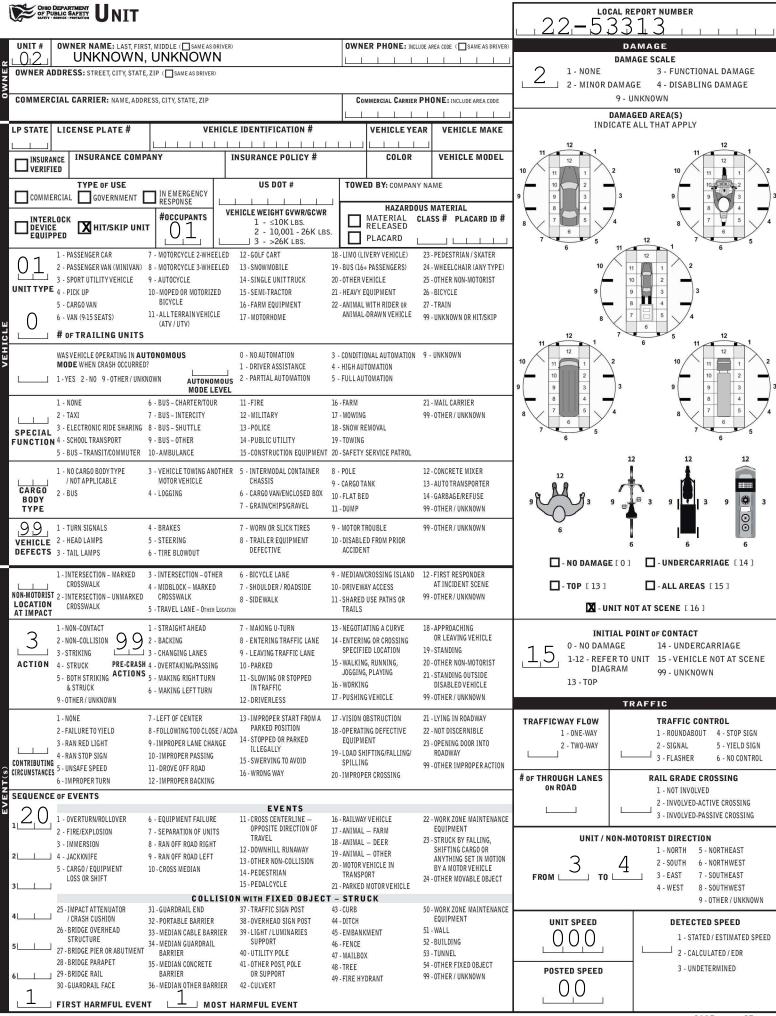
CHIND DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT										LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2 OH-3															<u> </u>	1 1	1 1			
$\square \text{ OH-IP} \square \text{ OTHER } \text{ REPORTING AGENCY NAME* } \text{ NCIC*} \\ \square \text{ SECONDARY CRASH} \square \text{ OH-IP} \square \text{ OTHER } \text{ AGENCY NAME* } \text{ NCIC*} \\ \square \text{ SECONDARY CRASH} \square \text{ OH-IP} \square \text{ OTHER } \text{ AGENCY NAME* } \text$										2	HIT/SK 1 - SO			R OF UNITS	0	1.	ANIM.	AL		
COUNTY* LOCALITY* 1- CITY LOCATION: CITY, VILLAGE, TOWNSHIP*											CRASH DATE / TIME* CRASH SEVERITY									
2-VILLAGE 3-TOWNSHIP Jackson (Township of)											10312022 1155 2 - SERIOUS INJURY									
											LATITUDE DECIMAL DEGREES SUSPECTED									
	IALL				CR_	ш				3 - MINOR INJURY SUSPECTED										
	IMBER PREFIX 1	MILEPOST, HOUSE #) ROAD TYPE						LONG	TUDE DE	4 - INJURY POSSIBLE										
			L						Ţ		PROPER <sup>-</sup> ONLY	TY DAN	/IAGE							
REFERENCE POINT	DIRECTION FROM REFERENCE			ТҮРЕ						INTERSE	CTION RE	LATED								
1 - INTERSECTION 2 - MILE POST	2 - SOU	- ALLEY - AVENUE	WITHIN INTERSECTION OF ON APPRO								PPROAC	ACH								
└───┘ 3 - HOUSE #	3 - HOUSE # 3 - EAST 4 - WEST SR - STATE ROUTE BL - BOULEVARD MP - MILEPOST										WITH	IN INTE	RCHANGI	EAREA	NUME	BER OF AF	PROA	CHES		
DISTANCE FROM REFERENCE	FROM REFERENCE UNIT OF MEASURE ON NOMBERED COUNT NOOTE CT - COURT PK - PARKWAY TL - TRAIL											ROADWAY								
1 - MILES 2 - FEET ROUTE A VUMBERED TOWNSHIP ROUTE DR - DRIVE DR - DRIVE HE - HEIGHTS PL - PIKE WA - WAY ROADWAY DIVIDED ROADWAY DIVIDED																				
Image: Line state s																				
LOCATION OF FIRST HARMFUL EVENT ANNUER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 4 - REAR-TO-REAR 1 - NOT COLLISION 4 - REAR-TO-REAR										DIRECTION OF TRAVEL MEDIAN TYPE 1 - NORTH 1 - DIVIDED FLUSH MEDIAN										
3 - IN MEDIAN			ALLEY ACCESS RADE CROSSING	U TWC	MOTOR 7							2 - SOUTH 3 - EAST				( <4 FEET ) 2 - DIVIDED FLUSH MEDIAN				
4 - ON ROADSIE	DE 12-		E PATHS OR	TRA	NSPORT 7	SPORT 7 - SIDESWIPE, SAME DIRECTION						/EST		(≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN						
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 3 - HEAD-ON 9 - OTHER / UNKNOWN										4 - DIVIDED, RAISED MEDIA (ANY TYPE)										
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99- OTHER / UNKNOWN												9 - OTHER/UNKNOWN								
WORK ZONE RELATED WORK ZONE TYPE LOCATION OF CRASH IN WORK ZONE										CONTOUR CONDITI				NDITION	INS SURFACE			n C		
WORKERS PRESEN			LANE CLOSURE		1 - BEFORE THE 1ST WORK ZONE WARNING SIGN									1	1 Г.Т.					
		3-1	LANE SHIFT/CROS WORK ON SHOULE		2 - ADVANCE WARNING AREA						1 - STRAIGHT LEVEL 1 - DRY				1 - CONCRETE					
	NIPRESENT		OR MEDIAN INTERMITTENT O	R MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA					2 - STRAIGHT GRADE 2 - WET					2 - BLACKTOP, BITUMINOUS,					
ACTIVE SCHOOL ZO	ONE	5 - 1	OTHER		5 - TERMINATION AREA					3 - CURVE LEVEL 3 - SNOW 4 - CURVE GRADE 4 - ICE				V	ASPHALT					
	CONDITION			WEATH	ir.					9 - OTHER/UNKNOWN 5 - SAND, MUD										
1 - DAYLIGHT 2 - DAWN/DUSK			1 - CL 2 - CL		6 - SNOW 7 - SEVERE CROSSWINDS					0IL, GRA 6 - WATER (					STONE					
3 - DARK – LIGH	ITED ROADWAY DWAY NOT LIGHT	ED	3 - F0 4 - RA		8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE					MOVING 7 - SLUSH					9 - OTHER/UNKNOW			NOWN		
5 - DARK – UNKI	NOWN ROADWAY		100 Control 100 Co	EET, HAIL		99 - OTHER / UNKNOWN					9 - OTHER/U				NKNOWN					
9 - 0THER / UNK	KNOWN																			
NARRATIVE						- 1									A	S direct	te the ion wit	h		
UNIT #1 WAS PAR						-									A B		" on the ass diag			
CANTON, OHIO, W	VHEN UNIT #	2 DID ST	RIKE UNIT #1	1 LEAVING V	/ISIBLE	L												-		
DAMAGE ON THE ALSO DAMAGED (																		-		
LEAVING A BUSIN	LEFT										_									
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CRASH REPORTED I	1155		DISPATCH DATE / 1 2 ∩ 2 2	011000000000000			DATE/T		۔   <sub>۱</sub>				DATE/TI 1 0			POLICE A				
10312022 1155 10312022 1155 10312022 1200 10312022 1   TOTAL TIME OTHER TOTAL OFFICER'S NAME*												230		MOTORIS						
ROADWAY CLOSED INVESTIGATION TIME MINUTES CARVER, EMMALEE							SPROWL													
0									CHECKED	D BY OFFICER'S BADGE NUMBER*							TO ODPS)			
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	Sound department MOTORIST / NON-MOTORIST										22-53313							
	UNIT #	# NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER							
F= 1	01										09111980 42 F							
2		a 9a 8a	ST SW CANTON	CONTACT PHONE - INCLUDE AREA CODE														
0		-	EMS AGENCY (NAME)	011 447	SEATING POSITION AIR BAG USAGE EJECTION TRAPPED													
W-NON /	]	TAKEN BY					: MEDICAL FACILITY		SAFETY EQUIPMENT USED									
MOTORIST	STATE	OPERATOR L		OFFENSE CHARGED LOCAL CODE				OFFENSE DESC	RIPTION		CITA	TION NUMBER						
TOM	DL CLASS	ENDORSEMENT	RESTRICTION SELECT				) HOL / DRUG SUSPI	DRUG SUSPECTED			COHOL TEST	CTATUC	DRUG TEST					
	4	SELECT UP TO 2		BY	BY ALCOHOL			RIJUANA	1	STATUS T	YPE VALUE	STATUS	TYPE RESU	LT SELECT UP TO 4				
-	UNIT #	NAME: LAST, F	FIRST, MIDDLE		]		inen bilou		[]		DATE OF BIRTH	Ļļ		GENDER				
	02	WINSTO	ON, BARBARA J						082	201953	L L	69	F.					
-		STREET, CITY, ST.	ATE, ZIP STON GREEN CR (		CONTACT PHONE - INCLUDE AREA CODE													
D N I		INJURED	EMS AGENCY (NAME)				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	T DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED								
NON /	1	TAKEN BY												11				
<b>ORIST</b>	X X	OPERATOR L	OFFENSE CHAR			RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITA	ATION NUMBER						
LOW	DL CLASS	ENDORSEMENT SELECT UP TO 2	UPT03 DRIVER DISTRACTED			DHOL / DRUG SUSPI		CONDITION		YPE VALUE	STATUS	DRUG TEST TYPE RESU	S) LT SELECT UP TO 4					
1	4	тт		BY	1	Η.	LCOHOL MAN	RIJUANA	г - т	r ur		r r		штт				
	UNIT #	NAME: LAST, F	FIRST, MIDDLE	1	_					DATE OF BIRTH		AGE	GENDER					
	ADDRESS:	STREET, CITY, ST	ATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE													
NON-MOTORI	INJURIES		EMS AGENCY (NAME)		INJURED	AKENTO	: MEDICAL FACILITY	(NAME, CITY)			SEATING POSITIO	N AIR BAG	G USAGE EJECTIO	IN TRAPPED				
< L	OL STATE				OFFENS		2050	LOCAL		Шмс не								
TORIS	UL STATE	UPERATUR L	DPERATOR LICENSE NUMBER				GED		UFFENSE DESC	SCRIPTION CITATION NUMBER								
Ň	OL CLASS	ENDORSEMENT RESTRICTION SELECT		DISTRACTED			DHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST			DRUG TEST(S) ATUS TYPE RESULT SELECT UP TO 4					
L	T				1		THER DRUG	do o AltA				<u>с і</u>						
	294 - 1943. 1	RIES	SEATING POSITION		IR BAG		OL CLASS	5	OL RESTRIC		DRIVER DISTRAC	TION	TEST ST	TATUS				
	1 - FATAL 2 - SUSPECTED SERIOUS INJURY		1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	PLOYED 1 - CLASS A   ED FRONT 2 - CLASS B				1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERATIN	GAN	1 - NONE GIVEN 2 - TEST REFUSED						
3	3 - SUSPECTED MINOR INJURY		2 - FRONT - MIDDLE	ED SIDE 3 - CLASS C				3 - CORRECTIVE LE		ELECTRONIC COMMUN DEVICE (TEXTING, TY		3 - TEST GIVEN, CONTAMINATED						
	4 - POSSIBLE INJURY		3 - FRONT – RIGHT SIDE 4 - SECOND – LEFT SIDE	YED BOTH FRONT / SIDE 4 - REGULAR CLASS (0HIO = D)				4 - FARM WAIVER		DIALING)	110,	SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN						
5	- NO APPAREN	T INJURY	(MOTORCYCLE PASSENGER)	5 - NOT APP	LICABLE 5 - M/C MOPED ONLY				5 - EXCEPT CLASS A 6 - EXCEPT CLASS A	J TAEKING ON TRADOT NEE			5 - TEST GIVEN, RESULTS					
INJURED TAKEN BY 5 - SECOND - MIDDLE				7-DEPLUT		VVIN	6 - NO VALID OL		& CLASS B BUS	4 - TALKING ON HAND-HELD			UNKNOWN					
1	1 - NOT TRANSPORTED 6 - SECOND – RIGHT SI /TREATED AT SCENE 7 - THIRD – LEFT SIDE			F	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO			ALCOHOL TEST		EST TYPE				
2	2 - EMS		(MOTORCYCLE SIDE CAR)	ECTED H - HAZMAT				8 - INTERMEDIATE RESTRICTIONS	LICENSE	ELECTRONIC DEVICE			1 - NONE					
3 - POLICE			8 - THIRD - MIDDLE	2 - PARTIAL	ALLY EJECTED M - MOTORCYCLE				9 - LEARNER'S PER	MIT	6 - PASSENGER		2 - BLOOD 3 - URINE					
9	OTHER/UNK	NOWN	9 - THIRD – RIGHT SIDE 10 - SLEEPER SECTION	EJECTED P - PASSENGER			RESTRICTIONS 10 - LIMITED TO DAY	LIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE		4 - BREATH							
SAFETY EQUIPMENT OF TRUCK CAB			4 - NOT APP	LICABLE		N - TANKER Q - MOTOR SCOOTER				8 - OTHER DISTRACTION	OUTSIDE	5 - OTHER						
					<b>IRAPPED</b> R - THREE-WHEEL MOTORCYCLE				12 - LIMITED – OTHE	R	THE VEHICLE	DRUG TEST TYPE						
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS,			1-NOTTRA			S - SCHOOL BUS		13 - MECHANICAL DE (SPECIAL BRAKE		9 - OTHER / UNKNOWN		1 - NONE					
	- LAP BELT ON	LY USED LAP BELT USED	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	ITED BY	ICAL MEANS				THER	ER CONDITION			2 - BL00D					
		RAINT SYSTEM -	CARGO AREA	Y		X - TANKER / HAZMAT		ADAPTIVE DEVI		1 - APPARENTLY NORMAL		3 - URINE						
	FORWARD FA	CING	13 - TRAILING UNIT	NON-ME	CHANICAL MEANS GENDER				15 - MOTOR VEHICLE		2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPR							
6	6 - CHILD RESTRAINT SYSTEM - REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F - FEMALE		AIR BRAKES	D	ANGRY, DISTURBED)	DRUG TEST RESU							
7	7 - BOOSTER SEAT		15 - NON-MOTORIST	M - MALE U - OTHER / UNKNOWN				16 - OUTSIDE MIRRO 17 - PROSTHETIC AID		4 - ILLNESS 5 - FELL ASLEEP, FAINTEI	)	1 - AMPHETAMINES 2 - BARBITURATES						
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 INFLUENC OF MEDICATIONS / DRU		4 - CANNABINOIDS					
10 - REFLECTIVE CLOTHING											/ALCOHOL		5 - COCAINE					
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY											9 - OTHER / UNKNOWN		6 - OPIATES / OPIOIDS 7 - OTHER					
99	· OTHER / UNK										7 - OTHER 8 - NEGATIVE RESULTS							
													5 HEGHTTERES					

HSY8306 OH1M 1/19 [760-1500]