OHIO DEPARTMENT TRAFFIC CRASH		ANDATORY FIELD FOR SUPP	23-00096							
PHOTOSTAKEN OH-2 OH-3	LOCAL INFORMATION									
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY	REPORTING AGENCY NAME* NCIC* HIT/SKIP NUMBER OF UNITS O 2 98 - ANIM PO 2 99 - UNIX									
COUNTY* LOCALITY* LOCATION:CITY 76 3 2-VILLAGE Jackson (CRASH DATE / TIME * CRASH SEVERITY 1 - FATAL 5 1 - FATAL 1 - FATAL									
Z-VILLAGE Jackson (2 - SERIOUS INJURY									
2 - SOUTH 3 - EAST	ROAD TYPE AV	3 - MINOR INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DI	ECIMAL DEGREES	SUSPECTED 4 - INJURY POSSIBLE					
T S EAST	5005			.		5 - PROPERTY DAMAGE ONLY				
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION REL					
2 MILE POST 2 COUTU	INTERSTATE ROUTE(TP) AL FEDERAL US ROUTE AV	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
3- HOUSE # 3- EAST	FEDERAL US ROUTE STATE ROUTE AV BL	ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
	NUMBERED COUNTY ROUTE I	R - CIRCLE OV - OVAL COURT PK - PARKWAY	TE - TERRACE TL - TRAIL	ROADWAY						
	ROUTE	R - DRIVE PI - PIKE E - HEIGHTS PL - PLACE	ROADWAY DIVIDED							
LOCATION OF FIRST HARMFUL EVEN	T MAN	NNER OF CRASH COLLISION/I	MPACT	DIRECTION OF TRAVEL MEDIAN TYPE						
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY		COLLISION 4-REAR-TO-RE	AR	1 - NORTH		DIVIDED FLUSH MEDIAN (<4 FEET)				
3 - IN MEDIAN 11- RAILWAY G	RADE CROSSING L VEH	O MOTOR HICLES IN 6 - ANGLE		2 - SOUTH 3 - EAST	2 - DIVID	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)				
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS	2 - REA	ANSPORT 7 - SIDESWIPE AR-END 8 - SIDESWIPE	OPPOSITE DIRECTION	4 - WEST 3 - DIVIDED, DEPRESSED						
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 7 - ON RAMP 14-TOLL BOOT	J-IILA	AD-ON 9 - OTHER / UN	KNOWN	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)						
8-OFF RAMP 99-OTHER/UN	KNOWN	_			9 - OTHEI	R/UNKNOWN				
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH I 1 - BEFORE THE		CONTOUR	CONDITIONS	SURFACE				
WORKERS PRESENT 2-	WARNING SI	GN	L CTRAIGHT LEVEL		1 - CONCRETE					
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN	3-TRANSITION	AREA	1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	2 - BLACKTOP,				
	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY ARI		3 - CURVE LEVEL	BITUMINOUS, ASPHALT					
LIGHT CONDITION	WEATH	IER		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK				
1 - DAYLIGHT	1 - CLEAR	6 - SNOW			STONE					
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN	7 - SEVERE CROSSWINDS E 8 - BLOWING SAND, SOIL,	SOIL, DIRT, SNOW MOVING)			5 - DIRT 9 - OTHER/UNKNOWN				
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	9 - FREEZING RAIN OR FR 99 - OTHER / UNKNOWN	EEZING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOWN						
9 - OTHER / UNKNOWN										
NARRATIVE		- ' '	, , ,			Indicate the north direction with				
UNIT #1 WAS PARKED FROM WEST TO LOT (5TH SPOT IN FRONT OF LIGHT F						an "N" on the compass diagram.				
WALKED INTO THE PARKING LOT AND HAD BEEN DAMAGED. THE PLASTIC F						_				
PUSHED INWARD. BUSINESS DOES N FOOTAGE. UNIT #2 IS HIT-SKIP VEHIC	NOT APPEAR TO HAVE VI									
	AL. LEFT THE SCENE.	-								
_GM						-				
						-				
		-				-				
		-				-				
	DISPATCH DATE/TIME	ARRIVAL DATE /1		SCENE CLEARED	e-crost space . Proc. Exclusive-control	REPORT TAKEN BY				
	12023 1246	01012023		01012023	1318	MOTORIST				
TOTAL TIME OTHER TOTA ROADWAY CLOSED INVESTIGATION TIME MINUT		ALEE	CHECKED BY OFFI	DFFICER'S NAME* I.A. JOSH SUPPLEMENT						
0 0 3	OFFICER'S BA		D BY OFFICER'S BADGE NUMBER* (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)							
		1,3,8			2 , 4					

PAGE

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OHIO DEL OF PUBLI MAZETT - 868Y	SONO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						23-00096								
UNIT #	NAME: LAST, FIRST, MIDDLE WILLIAMS, SHARELL						DATE OF BIRTH AGE GEN 37 F								
ADDRESS:	S: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
1102	02 NORWOOD AVE YOUNGSTOWN OH 44510							ш		Î	Î.		1 1		
INJURIES	INJURED TAKEN BY				TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	USED 99	DOT-CO		TON AIR B	AG USAGE 1	EJECTION 1	TRAPPED 1	
ADDRESS: 1102 INJURIES OL STATE **********************************	OPERATOR LICENSE NUMBER *********			RGED	LOCAL CODE	OFFENSE DESC	RIPTION	CITA	CITATION NUMBER						
OL CLASS	ENDORSEMENT SELECT UP TO 2				VER ALCOHOL / DRUG SUSPECTED TRACTED ALCOHOL MARIJUANA		CONDITION	STATUS T	STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UPTO					
					OTHER DRUG							J L	عالـــا إــــــــــــــــــــــــــــــــ		
0 2	NAME: LAST, FIRST, MIDDLE UNKNOWN, UNKNOWN							, ,		T I	AGE	gender N			
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
UNKI	NOWN	EMC ACENOV COLOR		I		MEDICAL FACILITY	100000000000000000000000000000000000000	CAFETY FOUNDAMENT		CEATING DOCK	TON				
ADDRESS: UNKI INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED				SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION 0			1	1 I	TRAPPED	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN:	OFFENSE CHARGED LOCAL OFFENSE DES			OFFENSE DESC	RIPTION			CITATION NUMBER			
OL CLASS			RIVER STRACTED	_	OHOL / DRUG SUSPI			ALCOHOL TEST STATUS TYPE VALUE			DRU TYPE	RESUL	T SELECT UP TO 4		
			BY	<i>(</i>		THER DRUG	RIJUANA					1			
UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE					GENDER		
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT	PHONE - INCLUDE ARE	A CODE				
0 TO	I							T		<u> </u>		1			
ADDRESS:	INJURED TAKEN BY I I INJURED TO I			ED TAKENTO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMI USED				DOT-CO		TON AIR BA	AG USAGE	EJECTION	TRAPPED		
OL CLASS	OPERATOR L	OR LICENSE NUMBER OFFENSE			SE CHAI	RGED LOCAL OFFENSE DESC			RIPTION			CITATION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DI	RIVER STRACTED		OHOL / DRUG SUSPI		CONDITION		COHOL TEST YPE VALUE	STATUS		G TEST(S) T select up to 4	
1 7	1 11 1		BY	′ i	=	LCOHOL MAI THER DRUG	RIJUANA	ļ, ,	1 11		l H	111			
INJU	JRIES	SEATING POSITION		AIR BAG		OL CLAS	S	OL RESTRIC	TION(S)	DRIVER DISTRA	CTION	1	EST STA		
1 - FATAL	SERIOUS INJURY	1 - FRONT - LEFT SIDE 1 - NOT DEPLOY (MOTORCYCLE DRIVER)							OHOL INTERLOCK DEVICE 1 - NOT DISTRACTED INTRASTATE ONLY 2 - MANUALLY OPERATIN			1 - NONE GIVEN			
3 - SUSPECTED		2 - FRONT – MIDDLE	3 - DEPLO					3 - CORRECTIVE LE		ELECTRONIC COMMUNICATIO		2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED			
4 - POSSIBLE IN	INJURY 3 - FRONT - RIGHT SIDE 4 - DEPLOYE		YED BOTH FRO	BOTH FRONT / SIDE 4 - REGULAR CLASS 4 - FARM W			4 - FARM WAIVER	R DEVICE (TEXTING, TYPE			PING, SAMPLE/UNUSABLE				
5 - NO APPAREN	(MOTORCYCLE PASSENGER)			E M/C MODED ONLY			5 - EXCEPT CLASS	J TALKING ON TIANDOT K			E TEAT ANIEN BEAUTA				
INJURED	TAKEN BY 5 - SECOND - MIDDLE 9 - DEPLOYMENT UNKNOWN			JWN	6 - NO VALID OL 6 - EXCEPT CLASS B BUS						IINKNOWN				
1 - NOT TRANSP /TREATED A					7 - EXCEPT TRACTION OF THE PROPERTY OF THE PRO						ALCOHOL TEST TYPE				
2 - EMS		(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED			H - HAZMAT 8 - INTERMEDIATE RESTRICTIONS			EL FOTBOLIO			1 - NONE				
3 - POLICE		8 - THIRD – MIDDLE 2 - PARTIALLY EJECTED 9 - THIRD – RIGHT SIDE 2 - TOTALLY EJECTED		M - MOTORCYCLE	DECEDICATIONS						2 - BL00D 3 - URINE				
9 - OTHER / UNK	HER/UNKNOWN 3-TOTALLY EJI 10 - SLEEPER SECTION 4 - NOT APPLIC			CIED P - PASSENGER			10 - LIMITED TO DAY	THE THE VEHICLE			4 - BREATH				
SAFETY E	OF TRUCK CAB			Q - MOTOR SCOOTER	Q - MOTOR SCOOTER 11 - LIMITED TO EM		THE VEHICLE			TSIDE 5-OTHER					
1 - NONE USED	ENCLOSED CARGO AREA				R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHE			ER 9 - OTHER / LINKNOWN			DRUG TEST TYPE				
3 - LAP BELT ON	troit italian out, boo,			FD BY			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS OR OTHER		CONDITIO	N	1 - NONE				
4 - SHOULDER 8	HOOLDER & LAF BELL OSED 12 1100211021111011021021		ANICAL MEANS	IICAL MEANS Χ-ΤΔΝΚΕΡ/ ΗΔ7ΜΔΤ			CONTROLS, OR OTHER ADAPTIVE DEVICES) 1 - A		1 - APPARENTLY NORM	E 52005					
	CHILD RESTRAINT SYSTEM -			CHANICAL MEANS GENDER			14 - MILITARY VEHICLES ONLY		2 - PHYSICAL IMPAIRMENT		4 - OTHER				
6 - CHILD REST	RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR			F-FEMALE		15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST RESULT(S)					
REAR FACING 7 - BOOSTER SE	an i Avino			M - MALE			16 - OUTSIDE MIRRO			1 - AMPHETAMINES					
8 - HELMET US	OO ATUEN (INVANANCE)				U - OTHER / UNKNOWN			17 - PROSTHETIC AII			EATIGHED ETC		BARBITURATES		
	- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)							25 VIIIER		6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		3 - BENZODIAZEPINES 4 - CANNABINOIDS			
	ECTIVE CLOTHING							/ALCOHOL	5 - COCAINE						
	IGHTING – PEDESTRIAN BICYCLE ONLY								9 - OTHER / UNKNOWN	6 - OPIATES / OPIOIDS 7 - OTHER			OS		
	- OTHER / UNKNOWN												ATIVE RESU	LTS	

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