OHIO DEPARTMENT TRAFFIC CRASH	REPORT *DENOTES MA	ANDATORY FIELD FOR SUPPL	23-38476								
PHOTOSTAKEN X 0H-2 X 0H-3											
SECONDARY CRASH OH-1P OTHER OTHER PRIVATE PROPERTY	REPORTING AGENCY NAME* JACKSON TWP POL	LICE DEPARTME L	HIT/SKIP 1 - SOLVED 2 - UNSOLVED	olved $\bigcirc \bigcirc \bigcirc$							
1 7 C 1 - CITY	/, VILLAGE,TOWNSHIP*			CRASH DATE / TIME* CRASH SEVERITY							
J. NODTU	Township of)	2 - SERIOUS INJURY									
2 - SOUTH 3 - EAST	WHIPPLE		ROAD TYPE	3 - MINOR INJURY							
	REFERENCE ROAD NAME (ROAD,	ROAD TYPE	LONGITUDE DECIMAL DEGREES 4 - INJURY POSSIE								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST				- - -		5 - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE			INTERSECTION RELA						
1 - INTERSECTION 1 - NORTH IR -	100	- ALLEY HW- HIGHWAY - AVENUE LA - LANE	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
3 - HOUSE # 3 - EAST	STATE ROUTE BL	- BOULEVARD MP - MILEPOST	ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- CIRCLE OV - OVAL - COURT PK - PARKWAY	TE - TERRACE TL - TRAIL	ROADWAY							
	ROUTE	- DRIVE PI - PIKE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED						
LOCATION OF FIRST HARMFUL EVEN		NER OF CRASH COLLISION/IN		DIRECTION OF TRAVEL MEDIAN TYPE							
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	ALLEY ACCESS C BET	COLLISION 4-REAR-TO-REA WEEN 5-BACKING MOTOR	AR	1 - NORTH 1 - DIVIDED FLUSH MEDIAN (<4 FEET)							
3 - IN MEDIAN 11 - RAILWAY GI 4 - ON ROADSIDE 12 - SHARED US	RADE CROSSING L VEHI	ICLES IN 6-ANGLE NSPORT 7-SIDESWIPE,	SAME DIRECTION	3 - EAST 2 - DIVIDED FLUSH MEDIAN							
5 - ON GORE TRAILS	2 - REAF	R-END 8 - SIDESWIPE,	PPOSITE DIRECTION	4 - WEST 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN							
7 - ON RAMP 14-TOLL BOOTH	Н	D-ON 9-OTHER/UNK	NOWN		(ANY						
8 - OFF RAMP 99-OTHER/UN		T									
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH IN 1 - BEFORE THE 1	ST WORK ZONE	CONTOUR	conditions	SURFACE					
I —	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIG 2 - ADVANCE WAR		1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRET							
LAW ENFORCEMENT PRESENT	OR MEDIAN INTERMITTENT OR MOVING WORK	3-TRANSITION A 4-ACTIVITY ARE		2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP,							
	OTHER	5 - TERMINATION		3 - CURVE LEVEL 3 - SNOW ASPHALT							
LIGHT CONDITION	WEATHE	ER		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,					
9 1 - DAYLIGHT 2 - DAWN/DUSK	O O 1-CLEAR	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL 6 - WATER (STANDIN	STONE					
3 - DARK – LIGHTED ROADWAY	8 - BLOWING SAND, SOIL, D		NOW MOVING)								
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FRE 99 - OTHER / UNKNOWN	EZING DRIZZLE	7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER/UNKNOWN						
9 - OTHER / UNKNOWN											
NARRATIVE		- " '	, , ,	1 1 1 1		Indicate the north direction with					
UNIT 1'S VEHICLE WAS PARKED IN TH A WITNESS CAME INTO THE BUSINES		_				an "N" on the compass diagram.					
UNIT 1 THAT A BLACK IN COLOR HYUN VEHICLE AND THEN LEFT THE SCENE	NDAI SEDAN STRUCK HEF	R _									
OBTAIN A REGISTRATION ON THE SUS	SPECT VEHICLE AND THE	E CCTV _									
OR THE REGISTRATION ON THE SUSF		IMPACT									
LF											
		-									
		-									
		-									
						1					
78 (Control 1982)	DISPATCH DATE / TIME	ARRIVAL DATE / TI	3000000	SCENE CLEARED I	-coange, inc. Companions	REPORT TAKEN BY					
07032023 1942 070	32023 1946 [07032023 1	.951 (7,0,32,023	2026	POLICE AGENCY					
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT			CHECKED BY OFFI			MOTORIST SUPPLEMENT					
	DETZ, EVAN	DGE NUMBER*		D BY OFFICER'S BADGE NUMBER* (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)							
	. U	<u> 1,3,4</u> ,		1 _ 2 _ 4 _							

PAGE

OHIO DEL OF PUBLI SAZETY - SERV	SOUND DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						23-38476									
UNIT #	T # NAME: LAST, FIRST, MIDDLE								DAT	E OF BIRTH			AGE	GENDER		
$\overline{\Omega}$	PARKED, UNOCCUPIED							N								
ADDRESS: NON / INJURIES OL STATE	RESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE									
E INJURIES	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN					SAFETY EQUIPMENT		<u> </u>	SEATING POSITION	ON ATR BA	I AG USAGE	EJECTION	TRAPPED			
NON	TAKEN BY		INCORES TAKENTO.					USED	DOT-C	OMPLIANT LMET	1	I I	ia oonal	1	I	
OL STATE	OPERATOR L	OR LICENSE NUMBER OFFENSE CHAI			RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	TION N	IUMBER	[<u> </u>		
010R																
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER Tracted		OHOL / DRUG SUSPI		CONDITION		YPE YPE	VALUE	STATUS		G TEST(S RESULT	SELECT UP TO 4	
			".		=	THER DRUG	HOOANA			•			1			
UNIT #	NAME: LAST,	771-0-000 - 0-7-0-0-0-0-0-0-0-0-0-0-0-0-0-0							DATE OF BIRTH					AGE	GENDER	
\cup	UNKNO	WN, UNKNOWN													N	
ADDRESS:	STREET, CITY, ST	TATE, ZIP							CONTACT	ONTACT PHONE - INCLUDE AREA CODE						
O UNIVI		EMS AGENCY (NAME)		IMILIBED	TAKEN TO	- MEDICAL FACILITY	(NAME CITY)	SAFETY FOILIDMENT			SEATING POSITION	N ATD DA	C HEACE	EJECTION	TRAPPED	
NON	TAKEN BY	LINS AGENOT (NAME)		INSURED	IAKLNIO	. MEDICAL PACIEIT	MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 9			OMPLIANT LMET	01	AIR BA	IU USAUL	EJECTION	INAFFED	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION			CITA	TION N	IUMBER		
ADDRESS: UNKN INJURIES OL STATE	1				CODE											
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	TRACTED	_	OHOL / DRUG SUSPI		CONDITION		YPE YPE	TEST VALUE	STATUS		G TEST(S RESULT	SELECT UP TO 4	
1 1	1 11		BY	9	=	THER DRUG	MIJUANA	ļ. ,	l ur	II.	r r r r	r i		11 11	11° II	
UNIT#								DATE OF BIRTH AGE GEI						GENDER		
ADDRESS:	STREET, CITY, ST	TATE, ZIP							CONTACT	PHONE	- INCLUDE AREA	CODE				
ADDRESS:	INJURED	EMS AGENCY (NAME)		Linuinena	FALCENTO	: MEDICAL FACILITY		CAFETY FOUIDMENT		1	SEATING POSITION	N AVD DA	1	LEIEGERON		
NO N	TAKEN BY	EMS AGENCT (NAME)		INJURED	IAKENTO	. MEDICAL PACILITY	(NAME, CITY)	USED	□ ВОТ-С	OMPLIANT	SEATING POSITI	JN AIR BA	IG USAGE	EJECTION	TRAPPED	
	OPERATOR L	DR LICENSE NUMBER OFFENSE CHAI			RGED	LOCAL	OFFENSE DESC	RIPTION	C			CITATION NUMBER				
OL STATE						CODE										
≥ OL CLASS	SELECT UP TO 2		DIS	DRIVER ALCOHOL / DRUG SUSPECTED DISTRACTED ALCOHOL MARIJUANA		CONDITION	ALCOHOL TEST STATUS TYPE VALUE S		STATUS	TATUS TYPE RESULT SELECT UP TO						
1 1	шт		BY	3		THER DRUG	NIJUANA	l _{r 1}	l ili			i i	11	11 11		
	JRIES	SEATING POSITION	А	IR BAG		OL CLAS	5	OL RESTRIC		DRI	ER DISTRAC	TION		TEST STA		
	FATAL 1 - FRONT – LEFT SIDE 1 - NOT DEPL 2 - SUSPECTED SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - DEPLOYE							1 - ALCOHOL INTER 2 - CDL INTRASTAT	STATE ONLY 2 - MANUALLY OPERATING			NG AN				
	2 FRONT DICHTCIDE		3 - DEPLOY				3 - CORRECTIVE LENSES 4 - FARM WAIVER		DEVICE (TEXTING, TYPING,			ON 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE				
	POSSIBLE INJURY 3 - FROM 1 - RIGHT SIDE 4 - DEPLOYED B(NO APPARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - NOT APPLICA			ICABLE (OHIO = D) 5 - EXCEPT CL			5 - EXCEPT CLASS	S A BUS 3 - TALKING ON HANDS-FR			4 - TEST GIVEN, RESULTS KNOWN					
INJURED	IJURED TAKEN BY 5- SECOND – MIDDLE 9- DEPLOYMENT UNKNOWN			OWN	5 - M/C MOPED ONLY 6 - EXCEPT CLASS 6 - NO VALID OL & CLASS B BUS							UNKNOWN				
1 - NOT TRANSP /TREATED A			7 - EXCEPT TRACT N OL ENDORSEMENT 8 - INTERMEDIATE						/ICE	ALCOHOL TEST TYPE						
2 - EMS	(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED 8 - THIRD - MIDDLE 2 - RAPTALLY EJECTED		H - HAZMAT RESTRICTIONS			ELECTRONIC DEVICE				1 - NONE 2 - BLOOD						
3 - POLICE 9 - OTHER/UNK	CNOWN	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED		M - MOTORCYCLE 9 - LEARNER'S PEI P - PASSENGER RESTRICTIONS		7 - OTHER DISTRACTION			3 - URINE						
SAFETY E	FETY EQUIPMENT 10 - SLEEPER SECTION 4 - NOT APPLICABLE OF TRUCK CAB		N - TANKER Q - MOTOR SCOOTER	10 - LIMITED TO DAY 11 - LIMITED TO EM		PLOYMENT 8 - OTHER DISTRACTION O			4 - BREATH UTSIDE 5 - OTHER							
1 - NONE USED	ENCLOSED CARGO AREA			R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		THE VEHICLE 9 - OTHER / UNKNOWN			DRUG TEST TYPE					
	LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY			S - SCHOOL BUS 13 - MECHANICAL (SPECIAL BRA T - DOUBLE & TRIPLE TRAILERS CONTROLS, OR		ES, HAND			1 - NONE 2 - BLOOD							
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA 3		3 - FREED B				ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL		3 - URINE					
FORWARD FA	FORWARD FACING 13-TRAILING UNIT - CHILD RESTRAINT SYSTEM 14-RIDING ON VEHICLE EXTERIOR		NON-ME	N-MECHANICAL MEANS GENDER			15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED,			4 - OTHER				
REAR FACIN	EAR FACING (NON-TRAILING UNIT)			F - FEMALE M - MALE			AIR BRAKES 16 - OUTSIDE MIRROR		ANGRY, DISTURBED) 4- ILLNESS			1 - AMPHETAMINES				
7 - BOOSTER SE 8 - HELMET US	00 00000			U - OTHER / UNKNOWN			17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		D,	2 - BARBITURATES				
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)							10 - UI NEK		6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			3 - BENZODIAZEPINES 4 - CANNABINOIDS			
10 - REFLECTIVE	0 - REFLECTIVE CLOTHING								/ALCOHOL 9- OTHER / UNKNOWN			5 - COCAINE 6 - OPIATES / OPIOIDS				
/ BICYCLE OF	LIGHTING – PEDESTRIAN / BICYCLE ONLY								9- UIF	ILA / UNKNUWN		7 - 0Th				
99 - OTHER / UNK	CNOWN												8 - NE	GATIVE RESU	_TS	

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