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SCHOOL BUS VIOLATION COMPLAINT FORM

Date and time of violation:					_ PM		
		Date	Tim	ne			
Location of violation (exact	address i	f known)					
School district			School	bus number			
Direction of bus:	bound.	Direction of viola	ator:	bound.			
At the time of the violation,	was the b	ous stopped? Ye	s No _				
At the time of the violation,	were the	flashing red lights	on? Yes_	No			
Name of student(s) loading or unloading							
Location of student(s) at the time of the violation							
Description of violator's veh	nicle: Lice	nse number and s	state				
Make of vehicle		Model		_ Color			
Additional vehicle identification	ers				_		
Description of driver: Sex _	Ra	ace Age	Build	l	_		
Additional driver identifier	rs						
Number of passengers Description of passengers							
Bus driver's synopsis of incident:							
Name of driver completing report (printed):							
Address and best phone number to reach driver:							
In my judgment, the actions Ohio Revised Code by pas roadway to load or unload time of the violation. I hav incident and they were four the red lights were operation.	sing a sto children, a e checked nd to be in onal at the	pped school bus of the flashing real the condition of a proper working condition.	while the bus ed lights on th the flashing ro order. I have	was stopped e bus were a ed lights on t	d on a public activated at the he bus after this		
Signature of bus driver:							