OHIO TRAFFIC CRASH REPORT — OH-1 (Rev. 1-82)

LOCAL REPORT NO. 12-20492 | ☐ OH-2 ☐ OH-3 | Lebanon Police | 0830300 | ODHS USE ONLY - DO NOT MARK ABOVE | LOCAL FILE NO

REPORT TAKEN: ☐ AT STATION ☒ AT SCENE | NO OF VEH PEDESTRIANS INVOLVED: 2 | CRASH SEVERITY (CHECK MOST SEVERE): ☐ FATAL ☐ INJURY ☒ PROPERTY DAMAGE ONLY | COMBINED VEH/PROP LOSS: ☒ OVER $150 ☐ UNDER $150 | HIT SKIP: ☐ SOLVED ☐ UNSOLVED

IN COUNTY OF WARREN | IN ☒ CITY LEBANON | DATE OF CRASH: 11 30 2012 | DAY: FRI | TIME: MILITARY: 1056

CRASH OCCURRED ON: PARKING LOT 1916 DRAKE RD, LEBANON, OH | WITHIN THE INTERSECTION OF: LEBANON HIGH SCHOOL

IF NOT IN INTERSECTION: ____ MILES 500 FEET N W (E) S OF (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.): DRAKE RD | CITY CODE: 8321

[redacted] | [redacted] | LOC JUR FH9 FILT | [redacted]

A — UNIT NO. 1 | NO OF OCCUPANTS 1 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN NON CONTACT ☐ | INSURANCE CO OR AGENT: STATE FARM

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): WOOD, TREVOR | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 782 OLEANDER CT, LEBANON, OH 45036

PHONE NO.: 513 315 5704 | BIRTH DATE: 10 15 94 | AGE: 18 | SEX: M | SOCIAL SECURITY NO. | STATE: OH | DRIVER'S LICENSE NO.: TU898333 | OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME): SPRINGER, PAUL, E | ADDRESS: 782 OLEANDER CT., LEBANON, OH 45036 | PHONE: 513 315 5704

VEH YR: 1999 | MAKE: JEEP | MODEL: SW | COLOR: GRN | STYLE: SW | STATE: OH | LICENSE PLATE NO.: CAP8127 | TOWING SERVICE | VEH/PED DIR FROM E TO W

CIRCLE DAMAGE AREAS: 1 2 3 4 5 6 7 8 — 9 TOP, 10 UNDER CAR, 11 LOAD, 12 TRAILER

DAMAGE SEVERITY: ☐ NON-FUNCTIONAL ☒ FUNCTIONAL ☐ DISABLING | DAMAGE SCALE: ☐ NONE ☐ MODERATE ☒ LIGHT ☐ HEAVY | VEHICLE DISPOSITION: ☒ DRIVEN AWAY ☐ REMAINED AT SCENE ☐ TOWED | FIRE: ☒ NO FIRE ☐ FIRE DUE TO CRASH ☐ OTHER FIRE

B — UNIT NO. 2 | NO OF OCCUPANTS 1 | OPERATING ☐ | PARKED ☒ | DRIVERLESS ☐ | HIT& RUN ☐ | NON-CONTACT ☐ | INSURANCE CO. OR AGENT: STATE FARM

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): [illegible] | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): [illegible]

PHONE NO.: [illegible] | BIRTHDATE: [illegible] | AGE | SEX | SOCIAL SECURITY NO. | STATE | DRIVER'S LICENSE NO. | OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME): BECKNER, LAURA, D | ADDRESS: 1590 ST IVES CT., LEBANON, OH 45036 | PHONE: 513 659 2238

VEH YR: 2007 | MAKE: JEEP | MODEL: SW | COLOR: GREY | STYLE: SW | STATE: OH | LICENSE PLATE NO.: FJB3138 | TOWING SERVICE | VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS: 1 2 3 4 5 6 7 8 — 9 TOP, 10 UNDER CAR, 11 LOAD, 12 TRAILER

DAMAGE SEVERITY: ☐ NON-FUNCTIONAL ☒ FUNCTIONAL ☐ DISABLING | DAMAGE SCALE: ☐ NONE ☐ MODERATE ☒ LIGHT ☐ HEAVY | VEHICLE DISPOSITION: ☐ DRIVEN AWAY ☒ REMAINED AT SCENE ☐ TOWED | FIRE: ☒ NO FIRE ☐ FIRE DUE TO CRASH ☐ OTHER FIRE

C — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS | PHONE | SEX

D — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS | PHONE | SEX

E — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS | PHONE | SEX

F — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS | PHONE | SEX

POSITION: A 1 | B | C | D | E | F

INJURIES: A 5 | B | C | D | E | F

1 FATAL
2 SERIOUS VISIBLE
3 MINOR VISIBLE
4 NO VISIBLE INJURY
5 NOT INJURED

P-PEDESTRIAN

CONDITION: A 1 | B

1 APPARENTLY NORMAL
2 SICK
3 FATIGUED
4 APPARENTLY ASLEEP
5 PHYSICAL DEFECT
8 OTHER CONDITION
7 UNKNOWN

A B C — INJURED TAKEN TO — By

D E F

A B C — INJURED TAKEN TO — By

D E F

RESTRAINTS: A 4 | B | C | D | E | F

1 NOT USED
2 NONE AVAILABLE
3 LAP BELT USED
4 LAP/SHOULDER BELT USED
6 SHOULDER BELT USED
6 CHILD SAFETY SEAT
7 AIR BAG USED
8 USE NOT REPORTED

ALCOHOL: A 1 ☐ YES ☒ NO TESTED | B ☐ YES ☐ NO TESTED

1 NO ALCOHOL DETECTED
2 HBD ABILITY IMPAIRED
3- HBD ABILITY NOT IMPAIRED
4 HBD ABILITY UNKNOWN

A ☐ ORC ☐ CITY ORD. — OFFENSE CHARGED AND DESCRIPTION

O ☐ ORC. ☐ CITY ORD. — OFFENSE CHARGED AND DESCRIPTION

EJECTION: A 1 | B | C | D | E | F

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

DRUGS: A 1 TESTED ☐ YES ☒ NO | O TESTED ☐ YES ☐ NO

1 NO DRUGS DETECTED
2 USING PRESCRIBED DRUG
3 USING ILLICIT DRUG

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1056	1101	1113	1120	0010	34

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M 11 D 30 Y 12	☐ YES ☒ NO	KVAILKO	115	

State Ptl-012 2/13/03