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

LOCAL REPORT NO. 2013-00011430 | ☐ 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: 07/03/13 | DAY Wed | TIME: MILITARY 15:22

CRASH OCCURRED ON | WITHIN THE INTERSECTION OF

IF NOT IN INTERSECTION ____ MILES ____ FEET N W E S OF (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.) 558 W. Main ST Lebanon OH 45036 | CITY CODE

LOC | LOC | LOC JUR FH'9 FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A | UNIT NO. 1 | NO OF OCCUPANTS 1 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN NON CONTACT ☐ | INSURANCE CO OR AGENT USI Midwest Cincinnati

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): Haas, Michael | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): VR Transportation 1301-290 Aviation Blvd. Hebron Ky 41048

PHONE NO. 859-689-7100 | BIRTH DATE 05/21/81 | AGE 32 | SEX M | SOCIAL SECURITY NO. — | STATE Ky | DRIVER'S LICENSE NO. H99267348 | OCCUPATION Truck Driver

OWNER (IF SAME AS DRIVER, WRITE SAME): VR Transportation | ADDRESS: Same | PHONE: Same

VEH YR 2007 | MAKE FRHT | MODEL | COLOR white | STYLE semi | STATE Ky | LICENSE PLATE NO. A28423 | TOWING SERVICE n/A | VEH/PED DIR FROM N TO S

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

8 | UNIT NO. 2 | NO OF OCCUPANTS 0 | OPERATING ☐ | PARKED ☒ | DRIVERLESS ☐ | HIT & RUN ☐ | NON-CONTACT ☐ | INSURANCE CO. OR AGENT Progressive

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): Winkler, Jonathan Lee | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 285 Portland Blvd Lebanon OH 45036

PHONE NO. 513-292-3128 | BIRTHDATE 04/06/80 | AGE 33 | SEX M | SOCIAL SECURITY NO. — | STATE OH | DRIVER'S LICENSE NO. RW197265 | OCCUPATION unk

OWNER (IF SAME AS DRIVER, WRITE SAME): Same | ADDRESS: Same | PHONE: Same

VEH YR 2002 | MAKE Dodge | MODEL unk | COLOR Blk | STYLE Trk | STATE OH | LICENSE PLATE NO. FFV5884 | TOWING SERVICE — | VEH/PED DIR FROM S TO N

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

OCCUPANT SECTION

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

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

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 | B TESTED ☐ YES ☐ NO

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

A | B | C | INJURED TAKEN TO | By
D | E | F

A | B | C | INJURED TAKEN TO | By
D | E | F

A ☐ ORC ☐ CITY ORD. OFFENSE CHARGED AND DESCRIPTION

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

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1522	1523	1528	1550	10	38

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M 7 D 30 Y 13	☐ YES ☒ NO	Garrison	114	

State Ptl-012 2/13/03