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

LOCAL REPORT NO. — ☐ 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: 02 | 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: 09 / 08 / 13 | DAY: Thu | TIME: MILITARY: 1415

CRASH OCCURRED ON: 1300 Columbus Ave. Entrance | WITHIN THE INTERSECTION OF: US RT 42

IF NOT IN INTERSECTION: ____ MILES ____ FEET N W E S OF (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.) | CITY CODE: 05303

LOC 1 | LOC 2 | LOC JUR | FH9 | FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A — UNIT NO. 01 | NO OF OCCUPANTS 01 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN NON CONTACT ☐ | INSURANCE CO OR AGENT: State Auto Ins. Co.

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): Richmond, Elizabeth H | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 120 Pamela Dr. Morrow, OH 45152

PHONE NO.: 513-899-2613 | BIRTH DATE: 10 / 14 / 37 | AGE: 75 | SEX: F | SOCIAL SECURITY NO.: — | STATE: OH | DRIVER'S LICENSE NO.: RG741337 | OCCUPATION:

OWNER (IF SAME AS DRIVER, WRITE SAME): Busam Motor Sales | ADDRESS: 1501 E. Kemper Rd. Cincinnati, OH 45246 | PHONE:

VEH YR: 2013 | MAKE: Subaru | MODEL: Outback | COLOR: Maroon | STYLE: SW | STATE: OH | LICENSE PLATE NO.: DYT1680 | TOWING SERVICE: Case | VEH/PED DIR: FROM TO

CIRCLE DAMAGE AREAS: 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. 02 | NO OF OCCUPANTS 01 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN NON-CONTACT ☐ | INSURANCE CO OR AGENT: Allstate

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): Phillips, Cloteen | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 363 Settlemyre Rd. Oregonia, OH 45054

PHONE NO.: 527-932-9834 | BIRTHDATE: 04 / 18 / 31 | AGE: 82 | SEX: F | SOCIAL SECURITY NO.: | STATE: OH | DRIVER'S LICENSE NO.: RC780929 | OCCUPATION:

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

VEH YR: 2002 | MAKE: Mitsubishi | MODEL: Lancer | COLOR: Silver | STYLE: 4S | STATE: OH | LICENSE PLATE NO.: FZB3690 | TOWING SERVICE: Case Towing | 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

OCCUPANT SECTION

C — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE | AGE | ADDRESS: same | PHONE | SEX

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

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

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

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

P-PEDESTRIAN

INJURIES: A 3 | B 4 | C | D | E | F

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

CONDITION: A 1 | B 1

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 4 | 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 1 ☐ 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 1 TESTED ☐ YES ☒ NO

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

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1415	1415	1419	1515	30	90

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M D Y	☐ YES ☒ NO	Jenkins	112	

State Ptl-012 2/13/03

13-15272