OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO.	OH-2 / OH-3		ODHS USE ONLY - DO NOT MARK ABOVE	LOCAL FILE NO
		Lebanon Police 0 8 3 0 3 0 0		14-8651

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

IN COUNTY OF WARREN	IN ☒ CITY	DATE OF CRASH	DAY	TIME: MILITARY
	LEBANON	5 D 22 Y 14	THUR	1535

CRASH OCCURRED ON	WITHIN THE INTERSECTION OF
1530 Walmart Dr. (Walmart Parking Lot)	

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

LOC 1 | LOC 2 | LOC | JUR | FH'9 | FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A — UNIT NO. 1

NO OF OCCUPANTS	OPERATING	PARKED	DRIVERLESS	HIT & RUN NON CONTACT	INSURANCE CO OR AGENT
	☒	☐	☐	☐	German Mutual Ins. Co.

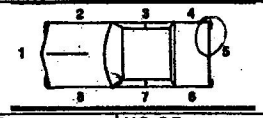
DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI)	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)
Brothers, Pamela	1786 Brimstone Rd. Wilmington, OH 45177

PHONE NO.	BIRTH DATE	AGE	SEX	SOCIAL SECURITY NO.	STATE	DRIVER'S LICENSE NO.	OCCUPATION
(937) 481-4978	m 2 D 6 Y 47	67	F		OH	RJ470230	

OWNER (IF SAME AS DRIVER, WRITE SAME)	ADDRESS	PHONE
Brothers, James	Same	Same

VEH YR	MAKE	MODEL	COLOR	STYLE	STATE	LICENSE PLATE NO.	TOWING SERVICE	VEH/PED DIR
01	HYUN		Maroon	4S	OH	FBM6054	N/A	FROM E TO W

CIRCLE DAMAGE AREAS



9 TOP
10 UNDER CAR
11 LOAD
12 TRAILER

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

8 — UNIT NO. 2

NO OF OCCUPANTS	OPERATING	PARKED	DRIVERLESS HIT& RUN NON-CONTACT	INSURANCE CO. OR AGENT
1	☒	☐	☐	Allstate

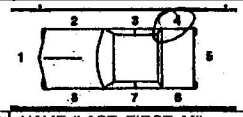
DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI)	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)
Owens, Alyssa	1679 U.S. 42 Lebanon, OH 45036

PHONE NO.	BIRTHDATE	AGE	SEX	SOCIAL SECURITY NO.	STATE	DRIVER'S LICENSE NO.	OCCUPATION
(386) 453-3776	m 3 D 15 Y 93	21	F		OH	TL638102	

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

VEH YR	MAKE	MODEL	COLOR	STYLE	STATE	LICENSE PLATE NO.	TOWING SERVICE	VEH/PED DIR
07	Ford		White	SW	OH	GBF7113	N/A	FROM S TO N

CIRCLE DAMAGE AREAS



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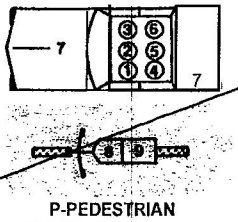
☐ DISABLING		☐ TOWED	☐ OTHER FIRE

OCCUPANT SECTION

	FROM UNIT NO.	NAME (LAST, FIRST, MI)	BIRTHDATE	AGE	POSITION	INJURIES
C			m D Y		A B C D E F	A B C D E F
		ADDRESS: same	PHONE	SEX		
D.		NAME (LAST, FIRST, MI)	BIRTHDATE	AGE		
		ADDRESS	PHONE	SEX		
E		NAME (LAST, FIRST, MI)	BIRTHDATE	AGE		
		ADDRESS	PHONE	SEX		
F.		NAME (LAST, FIRST, MI)	BIRTHDATE	AGE		
		ADDRESS	PHONE	SEX		



P-PEDESTRIAN

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

CONDITION

A	B

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

RESTRAINTS

A	B	C	D	E	F

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

ALCOHOL

A	TESTED	B	TESTED
	☐ YES ☐ NO		☐ YES ☐ NO

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

EJECTION

A	B	C	D	E	F

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

DRUGS

A	TESTED	0	TESTED
	☐ YES ☐ NO		☐ YES ☐ NO

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

POLICE ACTION

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
1535	1548	1553	1602	0	9

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M D Y	☐ YES ☒ NO	I. Haller	123	