

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO. 5-9258 OH-2 OH-3 **Lebanon Police** 0830300 ODHS USE ONLY - 00 NOT MARK ABOVE

REPORT TAKEN AT STATION AT SCENE NO OF VEH PEDESTRIANS INVOLVED 0 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: DAY 7/15/15 THU TIME: MILITARY 1509

CRASH OCCURRED ON Colony Square Lebanon, Ohio, 45036 WITHIN THE INTERSECTION OF _____

IF NOT IN INTERSECTION _____ (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.) CITY CODE _____

LOCAL FILE NO

DRIVER-PEDESTRIAN-VEHICLE SECTION

LOG-1 LOG-2 LOC JUR FH'9 FILT

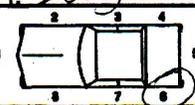
A UNIT NO. 1 NO OF OCCUPANTS 0 OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO OR AGENT Nation wide

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) Guerra, Jay ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 3 Stillwell Drive, Lebanon, Ohio, 45036

PHONE NO. 513-850-0618 BIRTH DATE 1/30/72 AGE 43 SEX M SOCIAL SECURITY NO. N/A STATE OH DRIVER'S LICENSE NO. RQ725867 OCCUPATION N/A

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

VEH YR 2014 MAKE Dodge MODEL 45 COLOR Silver STYLE 45 STATE OH LICENSE PLATE NO. GDR7138 TOWING SERVICE N/A VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS  9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER DAMAGE SEVERITY NON-FUNCTIONAL FUNCTIONAL DISABLING DAMAGE SCALE NONE LIGHT MODERATE HEAVY VEHICLE DISPOSITION DRIVEN AWAY REMAINED AT SCENE TOWED FIRE NO FIRE FIRE DUE TO CRASH OTHER FIRE

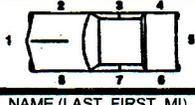
8 UNIT NO. 2 NO OF OCCUPANTS ? OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO OR AGENT Unknown

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) unknown ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) unknown

PHONE NO. _____ BIRTHDATE _____ AGE _____ SEX _____ SOCIAL SECURITY NO. _____ STATE _____ DRIVER'S LICENSE NO. _____ OCCUPATION _____

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

VEH YR unknown MAKE unknown MODEL _____ COLOR White STYLE _____ STATE _____ LICENSE PLATE NO. unknown TOWING SERVICE _____ VEH/PED DIR FROM TO

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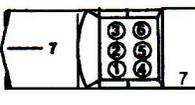
OCCUPANT SECTION

C FROM UNIT NO. _____ NAME (LAST, FIRST, MI) _____ BIRTHDATE m | d | y AGE _____ POSITION A B C D E F INJURIES A B C D E F

D. FROM UNIT NO. _____ NAME (LAST, FIRST, MI) _____ BIRTHDATE m | d | y AGE _____ POSITION A B C D E F INJURIES A B C D E F

E FROM UNIT NO. _____ NAME (LAST, FIRST, MI) _____ BIRTHDATE m | d | y AGE _____ POSITION A B C D E F INJURIES A B C D E F

F FROM UNIT NO. _____ NAME (LAST, FIRST, MI) _____ BIRTHDATE m | d | y AGE _____ POSITION A B C D E F INJURIES A B C D E F

 **P-PEDESTRIAN**

RESTRAINTS _____

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

1 APPARENTLY NORMAL 2 SICK 3 FATIGUED 4 APPARENTLY ASLEEP 5 PHYSICAL DEFECT 6 OTHER CONDITION 7 UNKNOWN

POLICE ACTION

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

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

A ORC OFFENSE CHARGED AND DESCRIPTION _____

O ORC OFFENSE CHARGED AND DESCRIPTION _____

RECEIVED CALL 1509 DISPATCHED 1510 ARRIVED 1514 CLEARED 1520 OTHER TIME 0000 TOTAL MINUTES 0011

DATE REPORT FILED 6/4/15 PHOTOS YES NO OFFICER'S NAME E Halma BADGE NO. 122 CHECKED BY _____

1 NOT EJECTED 2 PARTIAL 3 TOTAL 4 TRAPPED INSIDE VEHICLE

ALCOHOL A YES NO B YES NO

DRUGS A TESTED NO B TESTED NO

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