

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO		<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3		Lebanon Police		0830300		ODHS USE ONLY - 00 NOT MARK ABOVE				LOCAL FILE NO 15-11585																													
REPORT TAKEN	<input type="checkbox"/> AT STATION <input checked="" type="checkbox"/> AT SCENE	NO OF VEH PEDESTRIANS INVOLVED 2		CRASH SEVERITY (CHECK MOST SEVERE) <input type="checkbox"/> FATAL <input type="checkbox"/> INJURY <input checked="" type="checkbox"/> PROPERTY DAMAGE ONLY				COMBINED VEH/PROP LOSS	<input type="checkbox"/> OVER \$150 <input type="checkbox"/> UNDER \$150	HIT SKIP	<input type="checkbox"/> SOLVED <input type="checkbox"/> UNSOLVED																														
IN COUNTY OF WARREN				IN <input checked="" type="checkbox"/> CITY LEBANON				DATE OF CRASH: DAY	07/18/15	FRI	TIME MILITARY		1942																												
CRASH OCCURRED ON						WITHIN THE INTERSECTION OF																																			
726 E. Main St. Parking Lot																																									
IF NOT IN INTERSECTION (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO)										CITY CODE	8303																														
LOG-1	LOG-2	LOC	JUR	FH9	FILT																																				
A	UNIT NO. 01	NO OF OCCUPANTS 61	OPERATING	PARKED	DRIVERLESS	HIT & RUN	NON CONTACT	INSURANCE CO. OR AGENT	Liberty Mutual																																
DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI)						ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)																																			
Wolfe, James A.						4900 Waterloo Rd. Burlington Ky 41005																																			
PHONE NO.	859-512-4001	BIRTH DATE	09/21/54	AGE	60	SEX	M	SOCIAL SECURITY NO.	STATE	KY	DRIVER'S LICENSE NO.	W-94-539-840																													
OWNER (IF SAME AS DRIVER, WRITE SAME)						ADDRESS						PHONE																													
Same																																									
VEH YR	2012	MAKE	Dodge	MODEL	Ram	COLOR	silver	STYLE	TR	STATE	KY	LICENSE PLATE NO.	540N7M																												
CIRCLE DAMAGE AREAS				9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER		DAMAGE SEVERITY <input checked="" type="checkbox"/> NON-FUNCTIONAL <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING		DAMAGE SCALE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY		VEHICLE DISPOSITION <input type="checkbox"/> DRIVEN AWAY <input checked="" type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED		FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE																													
8	UNIT NO. 02	NO OF OCCUPANTS 0	OPERATING	PARKED	DRIVERLESS	HIT & RUN	NON CONTACT	INSURANCE CO. OR AGENT	Liberty Mutual																																
DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI)						ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)																																			
Hunter, Terrie L.																																									
PHONE NO.		BIRTH DATE		AGE		SEX		SOCIAL SECURITY NO.	STATE		DRIVER'S LICENSE NO.																														
OWNER (IF SAME AS DRIVER, WRITE SAME)						ADDRESS						PHONE																													
Same																																									
VEH YR	2005	MAKE	Chevy	MODEL	Trailblazer	COLOR	Green	STYLE	SW	STATE	OH	LICENSE PLATE NO.	6LW5651																												
CIRCLE DAMAGE AREAS				9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER		DAMAGE SEVERITY <input type="checkbox"/> NON-FUNCTIONAL <input checked="" type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING		DAMAGE SCALE <input type="checkbox"/> NONE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY		VEHICLE DISPOSITION <input type="checkbox"/> DRIVEN AWAY <input checked="" type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED		FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE																													
C	FROM UNIT NO.	NAME (LAST, FIRST, MI)				BIRTH DATE	AGE	POSITION				INJURIES																													
		ADDRESS				m D y		A	B	C	D	E	F	A	B	C	D	E	F																						
D.	FROM UNIT NO.	NAME (LAST, FIRST, MI)				BIRTH DATE	AGE	POSITION				INJURIES																													
		ADDRESS				m D y						1 FATAL 2 SERIOUS VISIBLE 3 MINOR VISIBLE 4 NO VISIBLE INJURY 5 NOT INJURED																													
E	FROM UNIT NO.	NAME (LAST, FIRST, MI)				BIRTH DATE	AGE	POSITION				CONDITION																													
		ADDRESS				m D y						A B C D E F																													
F	FROM UNIT NO.	NAME (LAST, FIRST, MI)				BIRTH DATE	AGE	POSITION				CONDITION																													
		ADDRESS				m D y						1 APPARENTLY NORMAL 2 SICK 3 FATIGUED 4 APPARENTLY ASLEEP 5 PHYSICAL DEFECT 6 OTHER CONDITION 7 UNKNOWN																													
RESTRAINTS												ALCOHOL																													
A	B	C	INJURED TAKEN TO									By			A	B	C	D	E	F																					
D	E	F	INJURED TAKEN TO									By			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																										
OFFENSE CHARGED AND DESCRIPTION												ALCOHOL																													
A	<input type="checkbox"/> ORC CITY ORD.											A						B						C																	
OFFENSE CHARGED AND DESCRIPTION												1 NO ALCOHOL DETECTED 2 HBD ABILITY IMPAIRED 3 HBD ABILITY NOT IMPAIRED 4 HBD ABILITY UNKNOWN																													
RECEIVED CALL 1942												DISPATCHED 1944						ARRIVED 1951						CLEARED 2009						OTHER TIME 20						TOTAL MINUTES 38					
DATE REPORT FILED												PHOTOS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						OFFICER'S NAME Jenkinson						BADGE NO. 112						CHECKED BY											
POLICE ACTION												EJECTION						DRUGS																							
A												A						A																							
O												1 NOT EJECTED 2 PARTIAL 3 TOTAL 4 TRAPPED INSIDE VEHICLE						1 NO DRUGS DETECTED 2 USING PRESCRIBED DRUG 3 USING ILLICIT DRUG																							

DRIVER-PEDESTRIAN-VEHICLE SECTION

OCCUPANT SECTION

POLICE ACTION