

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO **15-14304** 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 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 **8/17/15** DAY **Mon** TIME **1501**

CRASH OCCURRED ON **50 S. Broadway** WITHIN THE INTERSECTION OF _____

IF NOT IN INTERSECTION _____ MILES _____ FEET W _____ N _____ E _____ S _____ OF _____ LIST NEAREST INTERSECTING STREET MILEPOST HOUSE NO _____ CITY CODE _____

LOCAL FILE NO

DRIVER-PEDESTRIAN-VEHICLE SECTION

LOG-1 _____ LOG-2 _____ LOC _____ JUR _____ FH9 _____ FILT _____

A UNIT NO **1** NO OF OCCUPANTS **1** OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO OR AGENT **Geico**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **Kingsland, Ashley** ADDRESS (NO. STREET, CITY, STATE, ZIP CODE) **318 E. Pekin Rd, Lebanon, OH, 45036**

PHONE NO **513-850-0615** BIRTHDATE **2/1/98** AGE **17** SEX **F** SOCIAL SECURITY NO **NIA** STATE **OH** DRIVER'S LICENSE NO **UG430467** OCCUPATION **NIA**

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

VEH YR **1998** MAKE **Buick** MODEL **4D** COLOR **Red** STYLE **4D** STATE **OH** LICENSE PLATE NO **GFE9236** TOWING SERVICE **NIA** VEH PED DIR FROM TO _____

CIRCLE DAMAGE AREAS 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 **0** OPERATING PARKED DRIVERLESS HIT & RUN NON-CONTACT INSURANCE CO OR AGENT **State Farm**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **Helvey, Robin** ADDRESS (NO. STREET, CITY, STATE, ZIP CODE) **1340 Saycville Rd, Warsaw, Ky, 41095**

PHONE NO **859-440-3066** BIRTHDATE **10/5/66** AGE **49** SEX **M** SOCIAL SECURITY NO **NIA** STATE **KY** DRIVER'S LICENSE NO **H9550401** OCCUPATION **NIA**

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

VEH YR **2015** MAKE **Ford** MODEL **4D** COLOR **Silver** STYLE **4D** STATE **KY** LICENSE PLATE NO **7810565** TOWING SERVICE **NIA** VEH PED DIR FROM TO _____

CIRCLE DAMAGE AREAS 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

OCCUPANT SECTION

FROM UNIT NO	NAME (LAST, FIRST, MI)	BIRTHDATE	AGE	POSITION						INJURIES											
				A	B	C	D	E	F	A	B	C	D	E	F						
C																					
D																					
E																					
F																					

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
 8 OTHER CONDITION
 7 UNKNOWN

POLICE ACTION

A ORC. CITY ORD OFFENSE CHARGED AND DESCRIPTION _____

O ORC. CITY ORD OFFENSE CHARGED AND DESCRIPTION _____

RECEIVED CALL **1501** DISPATCHED **1502** ARRIVED **1506** CLEARED **1512** OTHER TIME **0000** TOTAL MINUTES **0000**

DATE REPORT FILED **8/17/15** PHOTOS YES NO OFFICER'S NAME **E. Holmes** BADGE NO. **122** CHECKED BY _____

RESTRAINTS

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

EJECTION

1 NOT EJECTED
 2 PARTIAL
 3 TOTAL
 4 TRAPPED INSIDE VEHICLE

ALCOHOL

A YES NO TESTED B YES NO TESTED

DRUGS

A YES NO TESTED O YES NO TESTED

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

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