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	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 10 / 11 / 15	DAY Sun	TIME MILITARY 1830

CRASH OCCURRED ON Colony Square — WITHIN THE INTERSECTION OF

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

LOG-1	LOG-2	LOC	JUR	FHO	FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A — UNIT NO 1 — NO OF OCCUPANTS 2 — OPERATING ☒ PARKED ☐ DRIVERLESS ☐ HIT & RUN ☐ NON CONTACT ☐ — INSURANCE CO OR AGENT Auto Insurance

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI)	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)
Richter, Abigail	217 S. Nixon Camp Rd Orgegolne, OH, 45054

PHONE NO	BIRTH DATE	AGE	SEX	SOCIAL SECURITY NO	STATE	DRIVER'S LICENSE NO	OCCUPATION
513-312-9725	12 10 97 (m D y)	17	F	N/A	OH	UG159596	N/A

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

VEH YR	MAKE	MODEL	COLOR	STYLE	STATE	LICENSE PLATE NO	TOWING SERVICE	VEH PED DIR
2002	Ford	Truck	Red	Truck	OH	897 YMS	None	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

8 — UNIT NO 2 — NO OF OCCUPANTS 1 — OPERATING ☒ PARKED ☐ DRIVERLESS ☐ HIT & RUN ☐ NON-CONTACT ☐ — INSURANCE CO OR AGENT Safeco

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI)	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)
Smith, Billy	946 Preston Street, Waynesville, OH, 45068

PHONE NO	BIRTHDATE	AGE	SEX	SOCIAL SECURITY NO	STATE	DRIVER'S LICENSE NO	OCCUPATION
513-897-0177	08 09 51 (m D y)	64	M	N/A	OH	RS408233	None

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

VEH YR	MAKE	MODEL	COLOR	STYLE	STATE	LICENSE PLATE NO	TOWING SERVICE	VEH PED DIR
2001	Chevy	SW	BLK	SUV	OH	GHE5501	None	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

	FROM UNIT NO	NAME (LAST, FIRST, MI)	BIRTHDATE	AGE
C		ADDRESS	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

POSITION: A B C D E F

INJURIES: A B C D E F

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

P-PEDESTRIAN

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 ☐ YES ☒ NO TESTED — B ☐ YES ☒ NO TESTED

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 ☐ YES ☒ NO — D TESTED ☐ 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
1830	1831	1834	1845	0000	0011

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO	CHECKED BY
10 11 15 (M D Y)	☐ YES ☒ NO	E. Holmes	122	

State Ptl-012 2/13/03