OHIO TRAFFIC CRASH REPORT — OH-1 (Rev. 1-82)

LOCAL REPORT NO: 15-19211 | ☐ 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: 2 | 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: 11 / 2 / 15 | DAY: MON | TIME (MILITARY): 1449

CRASH OCCURRED ON: BETHESDA ARROW SPRINGS, 100 ARROW SPRINGS BLVD | 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 FHP FILT

## DRIVER-PEDESTRIAN-VEHICLE SECTION

**A** — UNIT NO: | NO OF OCCUPANTS: | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN NON CONTACT ☐ | INSURANCE CO. OR AGENT: PEKIN INS

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): CARNAHAN, TIMOTHY | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 2640 SHAKER RD., FRANKLIN, OH 45005

PHONE NO: 513-465-4316 | BIRTH DATE: 4 / 12 / 52 | AGE: 63 | SEX: M | SOCIAL SECURITY NO: | STATE: OH | DRIVER'S LICENSE NO: RN103166 | OCCUPATION:

OWNER (IF SAME AS DRIVER, WRITE SAME): SAME | ADDRESS: | PHONE:

VEH YR: 199[illegible] | MAKE: CHEVY | MODEL: | COLOR: WHT | STYLE: VN | STATE: OH | LICENSE PLATE NO: PIX5521 | TOWING SERVICE: | VEH. PED. DIR. 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: 2 | OPERATING ☐ | PARKED ☒ | DRIVERLESS ☐ | HIT & RUN NON-CONTACT ☐ | INSURANCE CO. OR AGENT: PHILADELPHIA INS

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): REID, ASHLEY | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 208 E. NORTH ST. #8, MASON, OH

PHONE NO: 513-331-1319 | BIRTHDATE: 6 / 28 / 87 | AGE: 28 | SEX: F | SOCIAL SECURITY NO: | STATE: OH | DRIVER'S LICENSE NO: ST319585 | OCCUPATION:

OWNER (IF SAME AS DRIVER, WRITE SAME): ANTHONY WAYNE REHAB CENTER | ADDRESS: 8515 BLUFFTON RD, FORT WAYNE IN | PHONE: 937-823-0244

VEH YR: 2014 | MAKE: CHEVY | MODEL: EXPRESS | COLOR: WHT | STYLE: VW | STATE: IN | LICENSE PLATE NO: 30264 | TOWING SERVICE: | VEH. PED. DIR. 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 | ADDRESS | PHONE | SEX |
|---|---|---|---|---|---|---|---|
| C | | | | | | | |
| D | | | | | | | |
| E | | | | | | | |
| F | | | | | | | |

POSITION: A 1 | B 1 | C | D | E | F

INJURIES: A 5 | B 5 | C | D | E | F

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

CONDITION: A 1 | B 1

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

P-PEDESTRIAN

RESTRAINTS: A 8 | B 8 | C | D | E | F

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

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 1 | B 1 | C | D | E | F

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

DRUGS: A 1 TESTED ☐ YES ☒ NO | B 1 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

B ☐ ORC ☐ CITY ORD — OFFENSE CHARGED AND DESCRIPTION

| RECEIVED CALL | DISPATCHED | ARRIVED | CLEARED | OTHER TIME | TOTAL MINUTES |
|---|---|---|---|---|---|
| 1449 | 1450 | 1458 | 1524 | | 26 |

| DATE REPORT FILED | PHOTOS | OFFICER'S NAME | BADGE NO | CHECKED BY |
|---|---|---|---|---|
| M 11 D 3 Y 15 | ☐ YES ☒ NO | S. OEHLER | 124 | |

State Ptl-012 2/13/03