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

LOCAL REPORT NO. 12-17396 | ☐ 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: 10 | 8 | 12 | DAY: MON | TIME: MILITARY: 1523

CRASH OCCURRED ON: LEBANON HIGH SCHOOL, 1916 DRAKE RD. | WITHIN THE INTERSECTION OF:

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

[redacted] | LOC JUR FH'9 FILT [redacted]

DRIVER-PEDESTRIAN-VEHICLE SECTION

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

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

PHONE NO. | BIRTH DATE m | D | Y | AGE | SEX | SOCIAL SECURITY NO. | STATE | DRIVER'S LICENSE NO. | OCCUPATION

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

VEH YR | MAKE | MODEL | COLOR | STYLE | STATE | LICENSE PLATE NO. | 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 0 | OPERATING ☐ PARKED ☒ DRIVERLESS ☐ HIT & RUN ☐ NON-CONTACT ☐ | INSURANCE CO OR AGENT: PREMIER INS.

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

PHONE NO. | BIRTHDATE m | D | Y | AGE | SEX | SOCIAL SECURITY NO. | STATE | DRIVER'S LICENSE NO. | OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME): ANN STENGL | ADDRESS: 1021 McBURNEY DR. | PHONE: 513-850-9933

VEH YR: 93 | MAKE: INFINITI | MODEL: J30 | COLOR: SLV | STYLE: 4S | STATE: OH | LICENSE PLATE NO.: FLM 7953 | 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

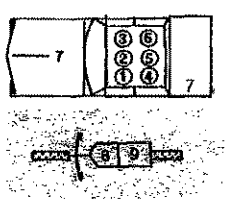
C — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m | D | Y | AGE | ADDRESS | PHONE | SEX

D — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m | D | Y | AGE | ADDRESS | PHONE | SEX

E — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m | D | Y | AGE | ADDRESS | PHONE | SEX

F — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m | D | Y | AGE | ADDRESS | PHONE | SEX

POSITION: A B C D E F



P-PEDESTRIAN

INJURIES: A B C D E F

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

CONDITION: A B

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

A B C — INJURED TAKEN TO — By

D E F

A B C — INJURED TAKEN TO — By

D E F

RESTRAINTS: A B 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

A ☐ ORC ☐ CITY ORD. — OFFENSE CHARGED AND DESCRIPTION

O ☐ ORC. ☐ CITY ORD. — OFFENSE CHARGED AND DESCRIPTION

EJECTION: A B C D E F

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

DRUGS: A TESTED ☐ YES ☐ No | O TESTED ☐ YES ☐ NO

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

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1523	1524	1529	1543		14

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M 10 D 16 Y 12	☐ YES ☒ NO	J. OEHLER	124	

State Pti-012 2/13/03