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. 13-2441

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: 01 D 09 Y 13 | DAY: WED | TIME: MILITARY: 1317

CRASH OCCURRED ON: 1530 Walmart Dr. | WITHIN THE INTERSECTION OF:

IF NOT IN INTERSECTION: ____ MILES ____ FEET N W E S OF (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.) | CITY CODE: 8303

LOC 1 | LOC 2 | LOC | JUR | FH9 | FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A — UNIT NO. 1 | NO OF OCCUPANTS 1 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN ☐ | NON CONTACT ☐ | INSURANCE CO OR AGENT: State Automobile Mutual Ins.

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): Schmidt, Hunter | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 5362 Elton Rd. Waynesville, OH 45068

PHONE NO.: 513-288-5544 | BIRTH DATE: 01 m 31 D 94 Y | AGE: 18 | SEX: M | SOCIAL SECURITY NO.: | STATE: OH | DRIVER'S LICENSE NO.: TR842211 | OCCUPATION:

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

VEH YR: 1997 | MAKE: Chevy | MODEL: Monte Carlo | COLOR: Blue | STYLE: 2S | STATE: OH | LICENSE PLATE NO.: FFV6895 | 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 1 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN ☐ | NON-CONTACT ☐ | INSURANCE CO. OR AGENT: Frankenmuth Mutual

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): Goldwasser, Jennifer A. | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 7827 Wild Turkey Walk Mason, OH 45036

PHONE NO.: 513-404-2632 | BIRTHDATE: 01 m 15 D 69 Y | AGE: 43 | SEX: F | SOCIAL SECURITY NO.: | STATE: OH | DRIVER'S LICENSE NO.: PY654114 | OCCUPATION:

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

VEH YR: 2005 | MAKE: GMC | MODEL: Yukon | COLOR: White | STYLE: SW | STATE: OH | LICENSE PLATE NO.: DKB1097 | 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

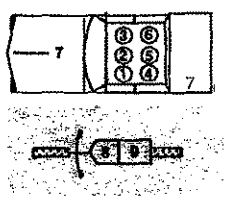
C — FROM UNIT NO. | NAME (LAST, FIRST, MI): | BIRTHDATE m D Y | AGE | ADDRESS: same | PHONE: | SEX

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

E — FROM UNIT O. | 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 1 | B 1 | C | D | E | F



P-PEDESTRIAN

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

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 1 ☐ YES ☒ NO TESTED | B 1 ☐ 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
1317	1318	1324	1333	20	29

DATE REPORT FILED (M D Y)	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
	☐ YES ☒ NO	Jenkinson	112	

State Ptl-012 2/13/03