OHIO TRAFFIC CRASH REPORT 13-8698 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: 05/28/13 | DAY Wed | TIME: MILITARY 1046

CRASH OCCURRED ON | WITHIN THE INTERSECTION OF

IF NOT IN INTERSECTION ____ MILES ____ FEET N W E S OF (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO) 1515 GennTown Dr Lebanon OH 45036 | CITY CODE

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

DRIVER-PEDESTRIAN-VEHICLE SECTION

A | UNIT NO. 01 | NO OF OCCUPANTS 1 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN ☐ | NON CONTACT ☐ | INSURANCE CO OR AGENT Co. Risk Sharing Authority

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): Bourasso, Scott M | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 1053 Hunters Run Apt 74 Lebanon OH. 45036

PHONE NO.: 513-282-9273 | BIRTH DATE: 07/01/68 | AGE: 44 | SEX: M | SOCIAL SECURITY NO.: — | STATE: OH | DRIVER'S LICENSE NO.: TN 670243 | OCCUPATION: Driver

OWNER (IF SAME AS DRIVER, WRITE SAME): Warren County Commissioners | ADDRESS: 406 Justice Dr Lebanon OH 45036 | PHONE: unk

VEH YR: 2009 | MAKE: Ford | MODEL: E350 | COLOR: white | STYLE: BS | STATE: OH | LICENSE PLATE NO.: 061420 | TOWING SERVICE: — | VEH/PED DIR: FROM S TO N

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

B | UNIT NO. 2 | NO OF OCCUPANTS 0 | OPERATING ☐ | PARKED ☒ | DRIVERLESS ☐ | HIT & RUN ☐ | NON-CONTACT ☐ | INSURANCE CO. OR AGENT Geico

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): Hipsher Andrea M | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 6806 Mount Holly Rd. Waynesville OH 45068

PHONE NO.: 513-265-3307 | BIRTHDATE: 09/08/82 | AGE: 25 | SEX: F | SOCIAL SECURITY NO.: — | STATE: OH | DRIVER'S LICENSE NO.: TD650113 | OCCUPATION: unk

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

VEH YR: 2002 | MAKE: Saturn | MODEL: SL1 | COLOR: Blk | STYLE: 4S | STATE: OH | LICENSE PLATE NO.: EWV 2743 | TOWING SERVICE: — | VEH/PED DIR: FROM E TO W

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 C D E F

P-PEDESTRIAN

INJURIES: A 5 B C D E F

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

CONDITION: A 1 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

A ☐ ORC ☐ CITY ORD. OFFENSE CHARGED AND DESCRIPTION

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

RESTRAINTS: A 8 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 1 ☐ 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 C D E F

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

DRUGS: A 1 TESTED ☐ YES ☒ NO | B TESTED ☐ YES ☐ NO

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

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1046	1047	1055	1107	00	41

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M 06 D 04 Y 13	☐ YES ☒ NO	Gazelson	114	N. Trout

State Pti-012 2/13/03