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: 13-9346

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: 5/31/13 — DAY: FRI — TIME: MILITARY: 1155

CRASH OCCURRED ON: 825 Hunt Rd Lebanon OH

WITHIN THE INTERSECTION OF: —

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

LOC JUR FH'9 FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A — UNIT NO. 01 — NO OF OCCUPANTS 01 — OPERATING ☒ — PARKED ☐ — DRIVERLESS ☐ — HIT & RUN ☐ — NON CONTACT ☐ — INSURANCE CO OR AGENT: Geico 4298-10-99-60

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): Robinson, Kristin L. — ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 525 W. Silver ST Lebanon OH 45036

PHONE NO.: (513) 331-9416 — BIRTH DATE: 9/20/84 — AGE: 28 — SEX: F — SOCIAL SECURITY NO.: — — STATE: OH — DRIVER'S LICENSE NO.: SA896198 — OCCUPATION: —

OWNER (IF SAME AS DRIVER, WRITE SAME): Robinson, Shawn — ADDRESS: Same — PHONE: Same

VEH YR: 2002 — MAKE: Jeep — MODEL: SW — COLOR: GRN — STYLE: ~~OH~~ — STATE: OH — LICENSE PLATE NO.: FJU 7539 — TOWING SERVICE: N/A — VEH/PED DIR: FROM N TO E

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: Cincinnati Ins A01 0202484

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): Hammiel, Randi L. — ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 453 S. East ST Lebanon OH 45036

PHONE NO.: (513) 571-6063 — BIRTHDATE: 10/30/77 — AGE: 35 — SEX: F — SOCIAL SECURITY NO.: — — STATE: OH — DRIVER'S LICENSE NO.: RC779846 — OCCUPATION: —

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

VEH YR: 2007 — MAKE: Chevy — MODEL: SW — COLOR: Blu — STYLE: — — STATE: OH — LICENSE PLATE NO.: DKB 7270 — TOWING SERVICE: Jacobs — 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 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 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
6 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 4, B 4, 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 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 — O 1 TESTED ☐ YES ☒ NO

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

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1155	1156	1203	1212	20	37

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M 5 D 31 Y 13	☐ YES ☒ NO	Sgt Buchanan	104	129

State PII-012 2/13/03