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

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: 10/13/13 | DAY: SUN | TIME: MILITARY: 1703

CRASH OCCURRED ON: 718 E. Main (Skyline Chili Parking Lot) | 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 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: Nationwide

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): Willmann, Andrew | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 308 W Park Ave. Lebanon, OH 45036

PHONE NO.: (513) 500-3571 | BIRTH DATE: 5/28/82 | AGE: 31 | SEX: M | SOCIAL SECURITY NO. | STATE: OH | DRIVER'S LICENSE NO.: RV490275 | OCCUPATION: –

OWNER (IF SAME AS DRIVER, WRITE SAME): Full Throttle Floor Removal LLC | ADDRESS: 308 W. Park Ave. Lebanon, OH 45036 | PHONE: (513) 500-3571

VEH YR: 06 | MAKE: CHEV | MODEL | COLOR: White | STYLE: TK | STATE: OH | LICENSE PLATE NO.: PHM7649 | TOWING SERVICE: N/A | 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: Progressive

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): Gregory, Brooklyn | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 171 Pacemont Rd. Columbus, OH 43202

PHONE NO.: (513) 252-4956 | BIRTHDATE: 5/7/87 | AGE: 26 | SEX: F | SOCIAL SECURITY NO. | STATE: OH | DRIVER'S LICENSE NO.: SP257258 | OCCUPATION: –

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

VEH YR: 06 | MAKE: Toyt | MODEL | COLOR: Silver | STYLE: 2S | STATE: OH | LICENSE PLATE NO.: BKIOSU | TOWING SERVICE: N/A | 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 | AGE | ADDRESS: same | PHONE | SEX

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

E — FROM UNIT O. | NAME (LAST, FIRST, MI) | BIRTHDATE | AGE | ADDRESS | PHONE | SEX

F — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE | 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
1703	1704	1713	1724	0	11

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
M D Y	☐ YES ☒ NO	J. Haller	123	

State Ptl-012 2/13/03