

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO. OH-2 OH-3 **Lebanon Police** 0830300

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: **2/24/14** DAY **MON** TIME: MILITARY **1242**

CRASH OCCURRED ON **1248 Columbus AVE.** WITHIN THE INTERSECTION OF **Dollar tree Lot**

IF NOT IN INTERSECTION (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.) CITY CODE

LOCAL FILE NO

DRIVER-PEDESTRIAN-VEHICLE SECTION

LOC JUR FH'9 FILT

A UNIT NO. **1** NO OF OCCUPANTS **1** OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO OR AGENT **Farmers**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **Robinson, Orville** ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) **878 Miller Rd Lebanon OH**

PHONE NO. **513-615-0864** BIRTH DATE **4/13/41** AGE **41** SEX **M** SOCIAL SECURITY NO. STATE **OH** DRIVER'S LICENSE NO. **RR478427** OCCUPATION

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

VEH YR **04** MAKE **Cadi** MODEL **45** COLOR **White** STYLE STATE **OH** LICENSE PLATE NO. **DWX7970** TOWING SERVICE VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS 9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER DAMAGE SEVERITY NON-FUNCTIONAL FUNCTIONAL DISABLING DAMAGE SCALE LIGHT MODERATE 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 **Geico**

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) **Hiter, Randi** ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) **4730 Guerley Rd Apt 2 Cincinnati OH**

PHONE NO. **513-598-0196** BIRTHDATE **7/12/84** AGE **29** SEX **F** SOCIAL SECURITY NO. STATE **OH** DRIVER'S LICENSE NO. **RN128198** OCCUPATION

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

VEH YR **04** MAKE **OMC** MODEL **SW** COLOR **Blue** STYLE STATE **OH** LICENSE PLATE NO. **GBH4738** TOWING SERVICE VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS 9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER DAMAGE SEVERITY NON-FUNCTIONAL FUNCTIONAL DISABLING DAMAGE SCALE LIGHT MODERATE 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 POSITION INJURIES

D. FROM UNIT NO. NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

E FROM UNIT NO. NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

F FROM UNIT NO. NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

CONDITION

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

RESTRAINTS

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 B YES NO TESTED TESTED

DRUGS

A TESTED B TESTED C TESTED D TESTED

YES NO YES NO

POLICE ACTION

A B C INJURED TAKEN TO By

D E F INJURED TAKEN TO By

A OFFENSE CHARGED AND DESCRIPTION ORC CITY CRD

B OFFENSE CHARGED AND DESCRIPTION ORC CITY CRD

RECEIVED CALL **1242** DISPATCHED **1243** ARRIVED **1248** CLEARED **1257** OTHER TIME **10** TOTAL MINUTES **25**

DATE REPORT FILED **2/24/14** PHOTOS YES NO OFFICER'S NAME **Morris** BADGE NO. **131** CHECKED BY

EJECTION

A B C D E F

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

ALCOHOL

A YES NO B YES NO TESTED TESTED

DRUGS

A TESTED B TESTED C TESTED D TESTED

YES NO YES NO

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