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	NO OF VEH PEDESTRIANS INVOLVED	CRASH SEVERITY (CHECK MOST SEVERE)	COMBINED VEH/PROP LOSS	HIT SKIP
☐ AT STATION ☒ AT SCENE	2	☐ FATAL ☐ INJURY ☒ PROPERTY DAMAGE ONLY	☐ OVER $150 ☒ UNDER $150	☐ SOLVED ☒ UNSOLVED

IN COUNTY OF	IN	CITY	DATE OF CRASH	DAY	TIME MILITARY
WARREN	☒	LEBANON	11 / 19 / 15	THUR	1657

CRASH OCCURRED ON	WITHIN THE INTERSECTION OF
650 E. Main St. (McDonald's)	

IF NOT IN INTERSECTION	LIST NEAREST INTERSECTING STREET MILEPOST HOUSE NO	CITY CODE
____ MILES ____ FEET N W E S OF		

LOG-1	LOG-2	LOC	JUR	FHP	FILE

DRIVER-PEDESTRIAN-VEHICLE SECTION

A

UNIT NO	NO OF OCCUPANTS	OPERATING	PARKED	DRIVERLESS	HIT & RUN	NON CONTACT	INSURANCE CO OR AGENT
1		☒	☐	☐	☒	☐	

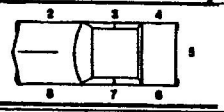
DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI)	ADDRESS (NO, STREET, CITY, STATE, ZIP CODE)

PHONE NO	BIRTH DATE (m / y)	AGE	SEX	SOCIAL SECURITY NO	STATE	DRIVER'S LICENSE NO	OCCUPATION

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

VEH YR	MAKE	MODEL	COLOR	STYLE	STATE	LICENSE PLATE NO	TOWING SERVICE	VEH PED DIR (FROM / TO)

CIRCLE DAMAGE AREAS



9 TOP
10 UNDER CAR
11 LOAD
12 TRAILER

DAMAGE SEVERITY	DAMAGE SCALE	VEHICLE DISPOSITION	FIRE
☐ NON FUNCTIONAL ☐ FUNCTIONAL ☐ DISABLING	☐ NONE ☐ MODERATE ☐ LIGHT ☐ HEAVY	☐ DRIVEN AWAY ☐ REMAINED AT SCENE ☐ TOWED	☐ NO FIRE ☐ FIRE DUE TO CRASH ☐ OTHER FIRE

8

UNIT NO	NO OF OCCUPANTS	OPERATING	PARKED	DRIVERLESS	HIT & RUN	NON-CONTACT	INSURANCE CO OR AGENT
2	0	☐	☒	☐	☐	☐	Westfield Insurance

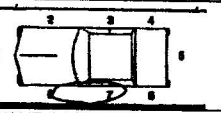
DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI)	ADDRESS (NO, STREET, CITY, STATE, ZIP CODE)

PHONE NO	BIRTHDATE (m / D / y)	AGE	SEX	SOCIAL SECURITY NO	STATE	DRIVER'S LICENSE NO	OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME)	ADDRESS	PHONE
[redacted] Eicher, Darlene	5910 S.R. 124 Hillsboro, OH 45133	(937)763-1474

VEH YR	MAKE	MODEL	COLOR	STYLE	STATE	LICENSE PLATE NO	TOWING SERVICE	VEH PED DIR (FROM / TO)
03	CHRY	SW	Grey	SW	OH	GPY7457	N/A	

CIRCLE DAMAGE AREAS



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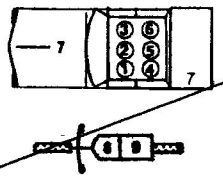
OCCUPANT SECTION

	FROM UNIT NO	NAME (LAST, FIRST, MI)	BIRTHDATE (m / D / y)	AGE	POSITION (A B C D E F)	INJURIES (A B C D E F)
C		ADDRESS	PHONE	SEX		
D		NAME (LAST, FIRST, MI)	BIRTHDATE (m / D / y)	AGE		
		ADDRESS	PHONE	SEX		
E		NAME (LAST, FIRST, MI)	BIRTHDATE (m / D / y)	AGE		
		ADDRESS	PHONE	SEX		
F		NAME (LAST, FIRST, MI)	BIRTHDATE (m / D / y)	AGE		
		ADDRESS	PHONE	SEX		



P-PEDESTRIAN

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

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		B	
☐ YES ☐ NO TESTED		☐ YES ☐ NO TESTED	

1 NO ALCOHOL DETECTED
2 HBD ABILITY IMPAIRED
3- HBD ABILITY NOT IMPAIRED
4 HBD ABILITY UNKNOWN

EJECTION (A B C D E F)

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

DRUGS

A		0	
TESTED ☐ YES ☐ No		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		

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

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1657	1700	1703	1712	0	9

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

State Ptl-012 2/13/03