

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO **15-22410**  OH-2  OH-3 **Lebanon Police** **0830300** **ODHS USE ONLY - 00 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 DAY MONTH YEAR TIME MILITARY

CRASH OCCURRED ON **700 MONROE RD** WITHIN THE INTERSECTION OF

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

LOG-1 LOG-2 LOC JUR FH'9 FILT

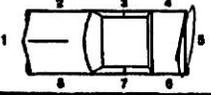
A UNIT NO **1** NO OF OCCUPANTS **1** OPERATING  PARKED  DRIVERLESS  HIT & RUN  NON-CONTACT  INSURANCE CO OR AGENT **MARKEL INS.**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **SOWERS JACOB L.** ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) **641 JACKSON LN #K MIDDLETON OH 45042** MTA **7000275202**

PHONE NO **740-704-8275** BIRTH DATE **4/14/91** AGE **24** SEX **M** SOCIAL SECURITY NO STATE **OH** DRIVER'S LICENSE NO **TF942528** OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME) **INTEGRITY AMBULANCE SERV.** ADDRESS **100 INTEGRITY PLACE GREENVILLE OH 45331** PHONE

VEH YR **2010** MAKE **FORD** MODEL **AM** COLOR **WHITE** STYLE **SW** STATE **OH** LICENSE PLATE NO **623YRN** 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  NONE  LIGHT  MODERATE  HEAVY VEHICLE DISPOSITION  DRIVEN AWAY  REMAINED AT SCENE  TOWED FIRE  NO FIRE  FIRE DUE TO CRASH  OTHER FIRE

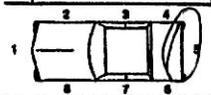
8 UNIT NO **2** NO OF OCCUPANTS **0** OPERATING  PARKED  DRIVERLESS  HIT & RUN  NON-CONTACT  INSURANCE CO OR AGENT **AMERICAN SERV.**

DRIVER, PEDESTRIAN NAME (LAST, FIRST, MI) ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) **CAS261#2015**

PHONE NO BIRTH DATE AGE SEX SOCIAL SECURITY NO STATE DRIVER'S LICENSE NO OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME) **SOUTHWEST T LLC** ADDRESS **10999 REED HARTMAN HWY #STE 10 BUEASH OHIO** PHONE **513-652-4133**

VEH YR **2015** MAKE **DODGE** MODEL **SW** COLOR **RED** STYLE **OH** LICENSE PLATE NO **GKB7362** 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  NONE  LIGHT  MODERATE  HEAVY VEHICLE DISPOSITION  DRIVEN AWAY  REMAINED AT SCENE  TOWED FIRE  NO FIRE  FIRE DUE TO CRASH  OTHER FIRE

DRIVER-PEDESTRIAN-VEHICLE SECTION

OCCUPANT SECTION

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

A	B	C	D	E	F	A	B	C	D	E	F
ADDRESS						5					

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

A	B	C	D	E	F	1 FATAL 2 SERIOUS VISIBLE 3 MINOR VISIBLE 4 NO VISIBLE INJURY 5 NOT INJURED					
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E FROM UNIT NO NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

A	B	C	D	E	F	CONDITION					
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E FROM UNIT NO NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

A	B	C	D	E	F	1 APPARENTLY NORMAL 2 SICK 3 FATIGUED 4 APPARENTLY ASLEEP 5 PHYSICAL DEFECT 6 OTHER CONDITION 7 UNKNOWN					
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A B C INJURED TAKEN TO By A B C D E F ALCOHOL

A	B	C	D	E	F	A	B	C	D	E	F
INJURED TAKEN TO						1 NOT USED 2 NONE AVAILABLE 3 LAP BELT USED 4 LAP/SHOULDER BELT USED 6 CHILD SAFETY SEAT 7 AIR BAG USED 8 USE NOT REPORTED					

A B C INJURED TAKEN TO By A B C D E F ALCOHOL

A	B	C	D	E	F	A	B	C	D	E	F
INJURED TAKEN TO						1 NO ALCOHOL DETECTED 2 HBD ABILITY IMPAIRED 3 HBD ABILITY NOT IMPAIRED 4 HBD ABILITY UNKNOWN					

A  ORC OFFENSE CHARGED AND DESCRIPTION  CITY ORD

O  ORC OFFENSE CHARGED AND DESCRIPTION  CITY ORD

RECEIVED CALL **1432** DISPATCHED **1433** ARRIVED **1438** CLEARED **1446** OTHER TIME **0000** TOTAL MINUTES **15**

DATE REPORT FILED **12/28/15** PHOTOS  YES  NO OFFICER'S NAME **HOLBROOK** BADGE NO. **127** CHECKED BY

POLICE ACTION