

OHIIO TRAFFIC CRASH REPORT OH-1 (Rev. 1-82)

LOCAL REPORT NO. OH-2 OH-3 Lebanon Police 0830300 ODHS USE ONLY - 00 NOT MARK ABOVE REPORT TAKEN AT STATION AT SCENE NO OF VEH PEDESTRIANS INVOLVED 1 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 24 16 DAY TUE TIME: MILITARY 1335 CRASH OCCURRED ON Private Property WITHIN THE INTERSECTION OF 975 Kingsview

LOG 1 LOG 2 LOC JUR FH9 FILT A UNIT NO. 1 NO OF OCCUPANTS 1 OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO OR AGENT Allstate DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) Boeing, Dakota ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 5656 Corwin Road, Waynesville, OH 45068 PHONE NO. 513-292-2742 BIRTH DATE 08/07/95 AGE 20 SEX M SOCIAL SECURITY NO. STATE OH DRIVER'S LICENSE NO. TV51C958 OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME) Boeing, Vicki ADDRESS Same PHONE Same VEH YR 1999 MAKE Audi MODEL 4S COLOR Brown STYLE OH LICENSE PLATE NO. GQE6135 TOWING SERVICE CASE VEH/PED DIR FROM TO CIRCLE DAMAGE AREAS DAMAGE SEVERITY DAMAGE SCALE VEHICLE DISPOSITION FIRE

8 UNIT NO. NO OF OCCUPANTS OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO. OR AGENT DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) PHONE NO. BIRTHDATE 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 DAMAGE SEVERITY DAMAGE SCALE VEHICLE DISPOSITION FIRE 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

A B C INJURED TAKEN TO By D E F INJURED TAKEN TO By A B C OFFENSE CHARGED AND DESCRIPTION ORC CITY OR D OFFENSE CHARGED AND DESCRIPTION ORC CITY OR D RESTRAINTS ALCOHOL

RECEIVED CALL 1335 DISPATCHED 1335 ARRIVED 1340 CLEARED 1400 OTHER TIME 10 TOTAL MINUTES 35 DATE REPORT FILED 5 24 16 PHOTOS YES OFFICER'S NAME Eoy BADGE NO. 119 CHECKED BY EJECTION DRUGS

DRIVER-PEDESTRIAN-VEHICLE SECTION

OCCUPANT SECTION

POLICE ACTION

LOCAL FILE NO