

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO. 16-15059	<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3	Lebanon Police	0830300	ODHS USE ONLY - 00 NOT MARK ABOVE			
REPORT TAKEN <input type="checkbox"/> AT STATION <input checked="" type="checkbox"/> AT SCENE	NO OF VEH PEDESTRIANS INVOLVED	CRASH SEVERITY (CHECK MOST SEVERE) <input type="checkbox"/> FATAL <input type="checkbox"/> INJURY <input checked="" type="checkbox"/> PROPERTY DAMAGE ONLY		COMBINED VEH/PROP LOSS <input checked="" type="checkbox"/> OVER \$150 <input type="checkbox"/> UNDER \$150	HIT SKIP <input type="checkbox"/>	SOLVED <input type="checkbox"/>	UNSOLVED <input type="checkbox"/>
IN COUNTY OF WARREN		IN <input checked="" type="checkbox"/> CITY LEBANON		DATE OF CRASH: 8/12/16	DAY: FRI	TIME: MILITARY	
CRASH OCCURRED ON 1530 Walmart Dr, Lebanon OH 45036 WITHIN THE INTERSECTION OF							
IF NOT IN INTERSECTION (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.)							

LOG-1	LOG-2	LOC	JUR	FH'9	FILT
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A	UNIT NO.	NO OF OCCUPANTS	OPERATING	PARKED	DRIVERLESS	HIT & RUN	NON CONTACT	INSURANCE CO OR AGENT
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DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) Kemmerer, Joanne	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 2300 E. PeKin Rd., Waynesville, OH 45068
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PHONE NO. (513) 675-5850	BIRTH DATE 10/30/39	AGE 76	SEX F	SOCIAL SECURITY NO.	STATE OH	DRIVER'S LICENSE NO. RM144074	OCCUPATION
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OWNER (IF SAME AS DRIVER, WRITE SAME) Same	ADDRESS	PHONE
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VEH YR 05	MAKE Honda	MODEL Pilot	COLOR Red	STYLE SW	STATE OH	LICENSE PLATE NO. 310XKB	TOWING SERVICE	VEH/PED DIR FROM N TO S
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CIRCLE DAMAGE AREAS 	9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER	DAMAGE SEVERITY <input checked="" type="checkbox"/> NON-FUNCTIONAL <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING	DAMAGE SCALE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY	VEHICLE DISPOSITION <input checked="" type="checkbox"/> DRIVEN AWAY <input type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED	FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE
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8	UNIT NO.	NO OF OCCUPANTS	OPERATING	PARKED	DRIVERLESS	HIT & RUN	NON CONTACT	INSURANCE CO. OR AGENT
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DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) Cristobal, Rose	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 419 Fitchs Farm Ct, Lebanon, OH
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PHONE NO.	BIRTHDATE	AGE	SEX	SOCIAL SECURITY NO.	STATE	DRIVER'S LICENSE NO.	OCCUPATION
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OWNER (IF SAME AS DRIVER, WRITE SAME) Cristobal, Rose	ADDRESS	PHONE
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VEH YR 12	MAKE BMW	MODEL 328	COLOR White	STYLE 4S	STATE OH	LICENSE PLATE NO. GUV8688	TOWING SERVICE	VEH/PED DIR FROM Parked TO
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CIRCLE DAMAGE AREAS 	9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER	DAMAGE SEVERITY <input checked="" type="checkbox"/> NON-FUNCTIONAL <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING	DAMAGE SCALE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY	VEHICLE DISPOSITION <input checked="" type="checkbox"/> DRIVEN AWAY <input type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED	FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE
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C	FROM UNIT NO.	NAME (LAST, FIRST, MI)	BIRTHDATE	AGE	POSITION	INJURIES
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D.	FROM UNIT NO.	NAME (LAST, FIRST, MI)	BIRTHDATE	AGE	POSITION	INJURIES
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E	FROM UNIT NO.	NAME (LAST, FIRST, MI)	BIRTHDATE	AGE	POSITION	INJURIES
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F.	FROM UNIT NO.	NAME (LAST, FIRST, MI)	BIRTHDATE	AGE	POSITION	INJURIES
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P-PEDESTRIAN						RESTRAINTS	ALCOHOL
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A	B	C	INJURED TAKEN TO	By	A	B	C	O	E	F	ALCOHOL
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A	B	C	INJURED TAKEN TO	By	A	B	C	O	E	F	ALCOHOL
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A	ORC CITY ORD.	OFFENSE CHARGED AND DESCRIPTION	EJECTION	DRUGS
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RECEIVED CALL 1304	DISPATCHED 1305	ARRIVED 1315	CLEARED 1330	OTHER TIME	TOTAL MINUTES 26
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DATE REPORT FILED M 8 D 12 Y 16	PHOTOS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	OFFICER'S NAME T. Cooper	BADGE NO. 125	CHECKED BY
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DRIVER-PEDESTRIAN-VEHICLE SECTION

OCCUPANT SECTION

POLICE ACTION

LOCAL FILE NO