

Local Traffic Crash Report

Local Report Number _____

Report Taken	<input type="checkbox"/> Headquarters <input type="checkbox"/> Substation	Total Number of Vehicles and Pedestrians Involved 2	Combined Vehicle and Property Loss (Account for the total of all vehicles and property damaged) <input type="checkbox"/> Over \$150 <input type="checkbox"/> Under \$150
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In County Of Clermont	• Within corporate limits of (if not, file with correct agency)	Date of Crash M S D 24 Y 15	Day Sunday	Time 2:27	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>
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Crash Occurred On 1205 Stonelichwoods Dr. Batavia, OH 45103	Within The Intersection Of
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If Not In Intersection (List Nearest Intersecting Street, Milepost, House No.) Miles _____ Feet _____ W _____ S _____ E _____ Of _____

Unit No. A 01	No. Of Occupants	Operating <input checked="" type="checkbox"/> Parked <input type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/>	Insurance Co. Or Agent Nationwide
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Driver - Pedestrian Name (Last, First, MI) Cathena Reno	Address (No., Street, State, Zip Code) 1003 Stonelichwoods Dr. Batavia, OH 45103
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Phone No.	Birth Date M 2 D 9 Y 81	Age 34	Sex F	State OH	Drivers License No. RA 521258	Occupation mortgage work
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Owner (If Same As Driver, Write Same) Cathena Reno	Address 1003 Stonelichwoods Dr. Batavia, OH 45103
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Veh. Year 2006	Make Chrysl	Model Pacifica	Color white	Style 4DR	State OH	License Plate No. FNF 1205	Towing Service	Veh/Ped Dir From S To N
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Circle Damage Areas		9 Top 10 Undercar 11 Load 12 Trailer	Damage Severity <input checked="" type="checkbox"/> Non-Functional <input type="checkbox"/> Functional <input type="checkbox"/> Disabling	Damage Scale <input type="checkbox"/> None <input checked="" type="checkbox"/> Light <input type="checkbox"/> Moderate <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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Unit No. B 02	No. Of Occupants	Operating <input type="checkbox"/> Parked <input checked="" type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/>	Insurance Co. Or Agent State Farm
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Driver - Pedestrian Name (Last, First, MI) Math Winkler	Address (No., Street, State, Zip Code) 1205 Stonelichwoods Dr. Batavia, OH 45103
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Phone No.	Birth Date M 9 D 20 Y 84	Age 30	Sex M	State OH	Drivers License No. SA 890693	Occupation glass faber
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Owner (If Same As Driver, Write Same) Math Winkler	Address 1205 Stonelichwoods Dr. Batavia, OH 45103
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Veh. Year 2004	Make Dodge	Model neon	Color silver	Style 4DR	State OH	License Plate No. FCF 2208	Towing Service	Veh/Ped Dir From _____ To _____
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Circle Damage Areas		9 Top 10 Undercar 11 Load 12 Trailer	Damage Severity <input checked="" type="checkbox"/> Non-Functional <input type="checkbox"/> Functional <input type="checkbox"/> Disabling	Damage Scale <input type="checkbox"/> None <input checked="" type="checkbox"/> Light <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy	Vehicle Disposition <input type="checkbox"/> Driven Away <input checked="" type="checkbox"/> Remained At Scene <input type="checkbox"/> Towed	Fire <input type="checkbox"/> No Fire <input type="checkbox"/> Fire Due To Crash <input type="checkbox"/> Other Fire
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Driver - Pedestrian - Vehicle Section

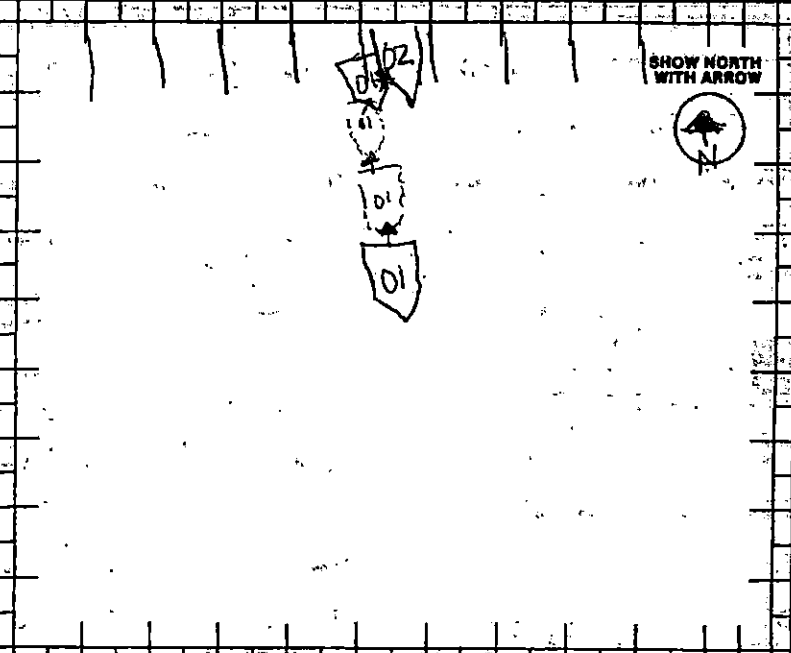
Occupant Section

C	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Position	
					A B C D E F	
D	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	 P-PEDESTRIAN	
						A B C D E F
E	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	 Restraints	
						A B C D E F
F	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Restraints 1 Not Used 2 None Available 3 Lap Belt Used 4 Lap/Shoulder Belt Used 5 Shoulder Belt Used 6 Child Safety Seat 7 Air Bag Used 8 Use Not Reported	
						A B C D E F
G	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Ejection 1 Not Ejected 2 Partial 3 Total 4 Trapped Inside Vehicle	
						A B C D E F
H	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age		
I	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age		

Date Report Filed M 5 D 24 Y 15	Desk Officer's Name & Badge # Det V Suppard 2520
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Local Report Number: [] Describe What Happened Refer To Units By Number: []

Unit 01 was backing and struck unit 02 which was parked. Damage was caused on unit 01 drivers side rear bumper and unit 02 rear driver side bumper.

Weather Conditions 1 No Adverse Weather 2 Rain 3 Snow 4 Fog 5 High Wind 6 Other	Road Conditions 1 Dry 2 Wet 3 Snow 4 Ice 5 Dirt/Sand 6 Other	Light 1 Daylight 2 Dawn 3 Dusk 4 Dark No Lights 5 Dark Lighted 6 Other	Road Contour 1 Straight Level 2 Straight Grade 3 Curve Level 4 Curve Grade	Occurrence 1 On Roadway 2 Off Left Side 3 Off Right Side 4 On Opposing Lane of Divided Highway	Special Area 1 Road Construction/Maintenance Area 2 School Zone	First Harmful Event 7 Two MV In Transport 1 Head On 2 Rear-End 3 Backing 4 Sideswipe Meeting 5 Sideswipe Passing 6 Angle One MV In Transport (Collision) 7 Parked 8 Pedestrian 9 Animal 10 Train 11 Pedal Cycle 12 Other Non-MV 13 Fixed Object 14 Other Object Non-Collision 15 Fall From or In MV 16 Overturning 17 Other Non-Collision	Location B 1 Intersection 2 Intersection-Related 3 Driveway Access 4 Railroad Crossing 5 Bridge-Passing Over 6 Bridge-Passing Under 7 Non Intersection 8 Private Property	
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Type of Unit # 1 3 2 2	Pre-Crash Actions A 10 B	Contributing Factor A 17 B						
Car 1 Sub Compact 2 Compact 3 Mid Size 4 Full Size Truck 5 Pickup 6 Panel/Van 7 Straight Truck 8 Straight Truck & Trailer 9 Truck Tractor 10 Tractor & Semi-Trailer 11 Tractor & Double Trailer Motorcycle 12 MC up to 350cc 13 MC up to 750cc 14 MC over 751cc 15 Motorized Bicycle	Bus 16 School Bus 17 Church 18 Public Emergency 19 Police Vehicle 20 Fire Truck 21 Ambulance/Rescue Other 22 Taxi 23 Motor Home 24 Train 25 Farm Vehicle 26 Farm Equipment 27 Snowmobile 28 Construction Equip. 29 Animal W/Fider 30 Animal W/Buggy 31 Bicycle 32 All Others P = Pedestrian	Driver Actions 1 Going Straight 2 Turning Right 3 Turning Left 4 Turning on Red Light 5 U-Turn 6 Stopped To Turn 7 Stopped in Traffic 8 Parking/Unparking 9 Parked 10 Backing 11 Passing 12 Changing Lanes 13 Merging/Exiting Ramp 14 Out of Control 15 Swerving 16 Driverless Vehicle 17 Other Driver Action Pedestrian Actions 18 Crossing In X-Walk 19 Crossing Other than X-Walk 20 Walking in Road (With Traffic) 21 Walking in Road (Against Traffic) 22 Playing in Road 23 Working On Road 24 Entering or Leaving Vehicle 25 Pushing/Working on Vehicle in Road 26 Other in Road 27 On Sidewalk or Shoulder Driver Error 1 None 2 Failure to Yield 3 Unsafe Speed 4 Following Too Closely or ACDA 5 Ran Red Light 6 Ran Stop or Yield Sign 7 Improper Turn 8 Improper Passing 9 Improper Lane Change 10 Improper Backing 11 Improper Start from Parked Position 12 Stopped or Parked Illegally 13 Left of Center 14 Failure to Control 15 Driver Inattention 16 Drove Off Road Reason Unknown 17 Other Driver Error Non-Driver Factor 18 Vehicle Defects 19 Load Shifting, Falling, Spilling 20 Pavement Defect 21 Shoulder Defect 22 Debris on Road 23 Downed Traffic Sign/Device 24 Vision Obstruction 25 Animal Actions 26 Pedestrian Actions Vehicle Defects Code if Contributing Factor is 18 <table border="1"> <tr> <td>Primary</td> <td>A</td> <td>B</td> </tr> <tr> <td>Secondary</td> <td>A</td> <td>B</td> </tr> </table>	Primary	A	B	Secondary	A	B
Primary	A	B						
Secondary	A	B						
Speed Unit Estimated Legal A 5 5 B Motorcycle Helmet Use Unit Driver Pass A B 1 No Helmet 3 Full Facial Cover 2 Full Coverage 4 Other Type Helmet	Traffic Control A B 1 No Controls 2 Stop Sign 3 Yield Sign 4 Traffic Signal 5 Traffic Flashers 6 School Zone 7 Railroad Crossbucks 8 Railroad Flashers 9 Railroad Gates 10 Construction Barricades 11 Police Officer 12 Pavement Markings 13 Other Driver 1 None 2 Utility Pole 3 Traffic Sign 4 Bridge/Culvert 5 Guard Rail 6 Fence 7 Tree 8 Shrubby 9 Curb 10 Ditch 11 Embankment 12 Building 13 Mail Box 14 Construction Barricade 15 Fire Hydrant 16 Other Object Pedestrian 14 No Controls 15 Crosswalk Lines 16 Walk/Don't Walk Device	Fixed Object Struck A B 1 None 2 Utility Pole 3 Traffic Sign 4 Bridge/Culvert 5 Guard Rail 6 Fence 7 Tree 8 Shrubby 9 Curb 10 Ditch 11 Embankment 12 Building 13 Mail Box 14 Construction Barricade 15 Fire Hydrant 16 Other Object Truck Load A B 1 Empty 2 Perishable Goods 3 General Freight 4 Metal/Heavy Machinery 5 Hazardous Gas 6 Hazardous Liquid 7 Hazardous Solid 8 Radioactive Material Truck Axles A B Tractor Trailer Rigs						