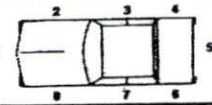
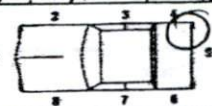
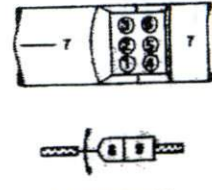


Local Traffic Crash Report

Local Report Number 2015-83590

Report Taken <input type="checkbox"/> Headquarters <input type="checkbox"/> Substation	Total Number of Vehicles and Pedestrians Involved <u>2</u>	Combined Vehicle and Property Loss (Account for the total of all vehicles and property damaged) <input checked="" type="checkbox"/> Over \$150 <input type="checkbox"/> Under \$150																			
In County Of <u>CLEMON</u>	• Within corporate limits of: (If not, file with correct agency)	Date of Crash: <u>M 09 D 04 Y 15</u> Day: <u>FRIDAY</u> Time: <u>1:20</u> PM																			
Crash Occurred On <u>PARKING LOT</u>		Within The Intersection Of <u>(WENOWS BAR + BRILL)</u>																			
If Not In Intersection (List Nearest Intersecting Street, Milepost, House No.) <u>1220 S.R. 125</u>																					
A Unit No. <u>1</u>	No. Of Occupants <u>2</u>	Operating <input checked="" type="checkbox"/> Parked <input type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/> Insurance Co. Or Agent <u>MOTORIST MUTUAL (COMMERCIAL)</u>																			
Driver - Pedestrian Name (Last, First, MI) <u>WARLOW, COURTNEY N.</u>		Address (No., Street, State, Zip Code) <u>34 CHAPEL RD. AMELIA, OH 45102</u>																			
Phone No. <u>513-401-0707</u>	Birth Date <u>M 03 D 11 Y 96</u>	Age <u>19</u> Sex <u>F</u> State <u>OH</u> Drivers License No. <u>UA395690</u> Occupation																			
Owner (If Same As Driver, Write Same) <u>LOUISO LAWN: LANDSCAPING</u>		Address <u>1223 OLD SR 74, BATAVIA, OH 45103</u> Phone <u>(513) 279-5605</u>																			
Veh. Year <u>1999</u> Make <u>FORD</u> Model <u>F-SERIES</u> Color <u>WHITE</u> Style <u>TRK</u> State <u>OH</u> License Plate No. <u>PEY9283</u> Towing Service	Veh/Ped Dir From <u>E</u> To <u>N</u>																				
Circle Damage Areas 	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"/> 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																			
B Unit No. <u>2</u>	No. Of Occupants <u>0</u>	Operating <input type="checkbox"/> Parked <input checked="" type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/> Insurance Co. Or Agent <u>PROGRESSIVE</u>																			
Driver - Pedestrian Name (Last, First, MI) <u>JACK & KAREN STRICKER</u>		Address (No., Street, State, Zip Code) <u>1710 LITTLE RD, MOSCOW OHIO 45153</u>																			
Phone No.	Birth Date	Age Sex State Drivers License No. Occupation																			
Owner (If Same As Driver, Write Same) <u>JACK & KAREN STRICKER</u>		Address <u>1710 LITTLE RD, MOSCOW OHIO 45153</u> Phone <u>513-312-6822</u>																			
Veh. Year <u>2008</u> Make <u>CHEVY</u> Model <u>TRAILBLAZER</u> Color <u>GREY</u> Style <u>SUV</u> State <u>OH</u> License Plate No. <u>FMP6078</u> Towing Service	Veh/Ped Dir From To																				
Circle Damage Areas 	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"/> 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																			
C From Unit No. <u>1</u>	Name (Last, First, MI) <u>HERNANDEZ, LEO</u>	Birth Date <u>M 11 D 26 Y 62</u> Age	Position A <u>1</u> B C D E F																		
Address <u>1223 OLD SR 74, BATAVIA, OHIO 45103</u>	Phone <u>279-5665</u>	Sex <u>M</u>	 <p>P-PEDESTRIAN</p> <p>Restraints</p> <table border="1" style="width:100%; text-align:center;"> <tr> <td><u>4</u></td> <td>B</td> <td><u>4</u></td> <td>D</td> <td>E</td> <td>F</td> </tr> </table> <p>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</p> <p>Ejection</p> <table border="1" style="width:100%; text-align:center;"> <tr> <td>A</td> <td>B</td> <td>C</td> <td>D</td> <td>E</td> <td>F</td> </tr> <tr> <td><u>1</u></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p>1 Not Ejected 2 Partial 3 Total 4 Trapped Inside Vehicle</p>	<u>4</u>	B	<u>4</u>	D	E	F	A	B	C	D	E	F	<u>1</u>					
<u>4</u>	B	<u>4</u>		D	E	F															
A	B	C		D	E	F															
<u>1</u>																					
D From Unit No.	Name (Last, First, MI)	Birth Date M D Y		Age																	
E From Unit No.	Name (Last, First, MI)	Birth Date M D Y		Age																	
F From Unit No.	Name (Last, First, MI)	Birth Date M D Y		Age																	
G From Unit No.	Name (Last, First, MI)	Birth Date M D Y		Age																	
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 <u>M 09 D 04 Y 15</u>	Desk Officer's Name & Badge <u>DET. HUNTER</u>																				

Driver - Pedestrian - Vehicle Section

Occupant Section

Local Report Number
2015-83590

Describe What Happened
Refer To Units
By Number

UNIT #2 WAS PARKED AND UNOCCUPIED.

DRIVER OF UNIT #1 PULLED FORWARD OUT OF HER SPOT AND BEGAN TURNING RIGHT TO GO TO THE PARKING LOT EXIT WHEN THE REAR PASSENGER-SIDE WHEEL STRUCK UNIT #1.

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 8 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 7 # 2 4	Pre-Crash Actions A 2 B	Contributing Factor A 15 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/Rider 30 Animal W/Suggy 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 (With Traffic) 20 Walking in Road (Against Traffic) 21 Walking on Road 22 Playing in Road 23 Working on Road 24 Entering or Leaving Vehicle in Road 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
Speed Unit Estimated Legal A 2 N/A B	Motorcycle Helmet Use Unit Driver Pass A B	Traffic Control A 12 B 12 Fixed Object Struck A 1 B 1 Driver 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 Pedestrian 14 No Controls 15 Crosswalk Lines 16 Walk/Don't Walk Device	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	Vehicle Defects Code if Contributing Factor is 18 Primary A B Secondary A B 1 Turn Signals 2 Head Lamps 3 Tail Lamps 4 Brakes 5 Steering 6 Tire Blowout 7 Worn or Slick Tires 8 Trailer Equipment Defective 9 Motor Trouble 10 Disabled from Prior Accident 11 Other Defects	