

Local Traffic Crash Report

Local Report Number 201500090285

Report Headquarters Substation
 Taken Total Number of Vehicles and Pedestrians Involved
 Combined Vehicle and Property Loss (Account for the total of all vehicles and property damaged) Over \$150 Under \$150

In County Of Clermont
 Date of Crash M 09 D 24 Y 15
 Day Thursday Time 1700
 AM PM

Crash Occurred On Private Property
 Within The Intersection Of _____
 (List Nearest Intersecting Street, Milepost, House No.)

Miles 304 Feet W S E N
 Or 2285 Lighthouse Rd.
 Insurance Co. _____ Or Agent _____

Driver - Pedestrian Name (Last, First, MI) _____
 Address (No., Street, State, Zip Code) _____
 Birth Date _____ Sex _____ Age _____
 Phone No. _____
 513-383-3873 M 08 D 05 Y 46
 F OH R5358017

Owner (If Same As Driver, Write Same) _____
 Address _____
 Phone _____

Vehicle: Year _____ Make Honda Model Foreman Color GREEN
 License Plate No. _____ State _____
 Towing Service _____ VEH/PED DR _____
 Fire No Fire Fire Due To Crash Other Fire

Damage Areas: 9 Top, 10 Undercar, 11 Load, 12 Trailer
 Damage Severity: Non-Functional, Functional, Disabling
 Damage Scale: None, Light, Moderate, Heavy
 Vehicle Disposition: Driven Away, Remained At Scene, Towed

Unit No. _____ Occupants _____
 Operating Parked Driveway Non-Contact Or Agent _____
 Insurance Co. _____

Driver - Pedestrian Name (Last, First, MI) _____
 Address (No., Street, State, Zip Code) _____
 Birth Date _____ Sex _____ Age _____
 Phone No. _____
 SAME

Owner (If Same As Driver, Write Same) _____
 Address _____
 Phone _____

Vehicle: Year _____ Make _____ Model _____ Color _____ Style _____
 License Plate No. _____ State _____
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Driver - Pedestrian Name (Last, First, MI) _____
 Address (No., Street, State, Zip Code) _____
 Birth Date _____ Sex _____ Age _____
 Phone No. _____

Owner (If Same As Driver, Write Same) _____
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 Address (No., Street, State, Zip Code) _____
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 Insurance Co. _____

Driver - Pedestrian Name (Last, First, MI) _____
 Address (No., Street, State, Zip Code) _____
 Birth Date _____ Sex _____ Age _____
 Phone No. _____

Owner (If Same As Driver, Write Same) _____
 Address _____
 Phone _____

Occupant Section

Driver - Pedestrian - Vehicle Section

Date Report Filed M 09 D 24 Y 15
 Desk Officer's Name & Badge # Deputy Kramer #11206

From Unit _____ Name (Last, First, MI) _____
 Address _____
 Birth Date _____ Sex _____
 Age _____ Phone _____

From Unit _____ Name (Last, First, MI) _____
 Address _____
 Birth Date _____ Sex _____
 Age _____ Phone _____

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 Address _____
 Birth Date _____ Sex _____
 Age _____ Phone _____

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 Age _____ Phone _____

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 Birth Date _____ Sex _____
 Age _____ Phone _____

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Describe What Happened Refer To Units By Number: Unit 1 was trying to pull a lawn mower out of mud. Unit 1 was traveling up hill. Unit 1 then fell over onto the driver. Unit 1 remained on scene. Driver of Unit 1 was transported to the hospital.

Weather Conditions	First Harmful Event	
1 No Adverse Weather 2 Rain 3 Snow	Two MV in Transport 1 Head On 2 Rear-End 3 Backing 4 Sidewipe Meeting 5 Sidewipe Passing 6 Angle	
Road Conditions	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	
1 Dry 2 Wet 3 Snow	Non-Collision 15 Fall From or in MV 16 Overturning 17 Other Non-Collision	
4 Fog 5 High Wind 6 Other	Location 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	
Light	Location	
1 Daylight 2 Dawn 3 Dusk	1 Intersection-Related 2 Driveway Access 3 Railroad Crossing 4 Bridge-Passing Over 5 Bridge-Passing Under 6 Non Intersection 7 Private Property	
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		

Type of Unit	Pre-Crash Actions	Contributing Factor
# 1 A 32	A 1 B	A 1 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/Trailer 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 in Road 25 Pushing/Working on Vehicle in Road 26 Other in Road 27 On Sidewalk or Shoulder Traffic Control A 1 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 Fixed Object A 1 B 1 None 2 Utility Pole 3 Traffic Sign 4 Bridge/Culvert 5 Guard Rail 6 Fence 7 Tree 8 Shrubbery 9 Curb 10 Ditch 11 Embankment 12 Building 13 Mail Box 14 Construction Barricade 15 Fire Hydrant 16 Other Object	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 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 1 Turn Signals 2 Head Lamps 3 Tail Lamps 4 Brakes 5 Steering 6 Tire Blowout 7 Worn or Stuck Tires 8 Trailer Equipment Defective 9 Motor Trouble 10 Disabled from Prior Accident 11 Other Defects
Speed Unit Estimated Legal A B Motorcycle Helmet Use Unit Driver Pass A B	Vehicle Defects Code if Contributing Factor is 18 A B Primary Secondary	