

# Local Traffic Crash Report

Local Report Number 0001640520

Total Number of Vehicles and Pedestrians Involved: 05  
 Report Taken:  Headquarters  Substation  
 In County Of: OS  
 \* Within corporate limits of: (if not, file with correct agency)  
 Date of Crash: M 3 12 18  
 Day: Monday  
 Time: 1017 AM

Crash Occurred On: 5327 Hutchinson Hwy  
 Within The Intersection Of: Hutchinson Hwy  
 (List Nearest Intersecting Street, Milepost, House No.)

Miles: \_\_\_\_\_  
 Feet: \_\_\_\_\_  
 Unit: A  
 No. of Occupants: 2  
 Driver - Pedestrian Name (Last, First, MI): Jeffers, Anthony Wayne  
 Birth Date: M 12 01 18  
 Sex: F  
 Age: 18  
 Drivers License No.: US698875  
 State: OH  
 Address (No., Street, State, Zip Code): 2535 Hwy 50 Apt 42  
 Occupation: Student  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.: United Ohio Insurance Co.  
 Or Agent: \_\_\_\_\_

Unit: B  
 No. of Occupants: 01  
 Driver - Pedestrian Name (Last, First, MI): Young, Ivan Ross  
 Birth Date: M 3 00 18  
 Sex: F  
 Age: 18  
 Drivers License No.: VA396740  
 State: OH  
 Address (No., Street, State, Zip Code): 5355 SR 132 Batavia, OH 43103  
 Occupation: Student  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.: American Family  
 Or Agent: \_\_\_\_\_

Unit: C  
 No. of Occupants: 01  
 Driver - Pedestrian Name (Last, First, MI): Beck, Kathleen Elizabeth  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Address (No., Street, State, Zip Code):  
 Occupation:  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.:  
 Or Agent: \_\_\_\_\_

Unit: D  
 No. of Occupants: 01  
 Driver - Pedestrian Name (Last, First, MI):  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Address (No., Street, State, Zip Code):  
 Occupation:  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.:  
 Or Agent: \_\_\_\_\_

Unit: E  
 No. of Occupants: 01  
 Driver - Pedestrian Name (Last, First, MI):  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Address (No., Street, State, Zip Code):  
 Occupation:  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.:  
 Or Agent: \_\_\_\_\_

Unit: F  
 No. of Occupants: 01  
 Driver - Pedestrian Name (Last, First, MI):  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Address (No., Street, State, Zip Code):  
 Occupation:  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.:  
 Or Agent: \_\_\_\_\_

Unit: G  
 No. of Occupants: 01  
 Driver - Pedestrian Name (Last, First, MI):  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Address (No., Street, State, Zip Code):  
 Occupation:  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.:  
 Or Agent: \_\_\_\_\_

Unit: H  
 No. of Occupants: 01  
 Driver - Pedestrian Name (Last, First, MI):  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Address (No., Street, State, Zip Code):  
 Occupation:  
 Phone No.:  
 Owner (If Same As Driver, Write Same):  
 Insurance Co.:  
 Or Agent: \_\_\_\_\_

## Occupant Section

## Driver - Pedestrian - Vehicle Section

Date Report Filed: M 3 12 18  
 Desk Officer's Name & Badge: [Handwritten Name] 0520

From Unit: 01  
 Name (Last, First, MI):  
 Address:  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12

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 Name (Last, First, MI):  
 Address:  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12

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 Name (Last, First, MI):  
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 Name (Last, First, MI):  
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 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12

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 Name (Last, First, MI):  
 Address:  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12

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

1 Not Ejected  
 2 Partial  
 3 Total  
 4 Trapped Inside Vehicle

Section: A B C D E F

Restraints: A B C D E F

P-PEDESTRIAN

Damage Severity:  Non-Functional  Functional  Disabling  
 Damage Scale:  Light  Moderate  Heavy  
 Vehicle Disposition:  Driven Away  Remained At Scene  Towed  
 Fire:  No Fire  Fire Due To Crash  Other Fire

Year: 2011  
 Make: Ford  
 Model: Fusion  
 Color: White  
 Style: HXR  
 License Plate No.: OH HXR 2003  
 Towing Service: N/A  
 Verified Dr: [Handwritten Name]

Owner (If Same As Driver, Write Same): Young, Ivan Ross  
 Address: 5355 SR 132 Batavia, OH 43103  
 Phone No.:  
 Birth Date: M 3 00 18  
 Sex: F  
 Age: 18  
 Drivers License No.: VA396740  
 State: OH  
 Occupation: Student

Owner (If Same As Driver, Write Same): [Handwritten Name]  
 Address: [Handwritten Address]  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Occupation:

Year: 2007  
 Make: Toyota  
 Model: Corolla (V6)  
 Color: Gray  
 Style: HXR  
 License Plate No.: OH F35204  
 Towing Service: N/A  
 Verified Dr: [Handwritten Name]

Owner (If Same As Driver, Write Same): [Handwritten Name]  
 Address: [Handwritten Address]  
 Phone No.:  
 Birth Date: M 12 01 18  
 Sex: F  
 Age: 18  
 Drivers License No.: US698875  
 State: OH  
 Occupation: Student

Owner (If Same As Driver, Write Same): [Handwritten Name]  
 Address: [Handwritten Address]  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Occupation:

Owner (If Same As Driver, Write Same): [Handwritten Name]  
 Address: [Handwritten Address]  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Occupation:

Owner (If Same As Driver, Write Same): [Handwritten Name]  
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 Age: 12  
 Drivers License No.:  
 State: OH  
 Occupation:

Owner (If Same As Driver, Write Same): [Handwritten Name]  
 Address: [Handwritten Address]  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Occupation:

Owner (If Same As Driver, Write Same): [Handwritten Name]  
 Address: [Handwritten Address]  
 Phone No.:  
 Birth Date: M 02 02 12  
 Sex: F  
 Age: 12  
 Drivers License No.:  
 State: OH  
 Occupation:

Local Report Number: 18W10500  
 Describe What Happened: Unit 01 was at the stop sign  
near Hwy 50 on CR2 schools and backed into  
Unit 02

<b>Weather Conditions</b> 1 No Adverse Weather 2 Rain 3 Snow 4 Fog 5 High Wind 6 Other	<b>Road Conditions</b> 1 Dry 2 Wet 3 Snow 4 Ice 5 Dirt/Sand 6 Other	<b>Light</b> 1 Daylight 2 Dawn 3 Dusk 4 Dark No Lights 5 Dark Lighted 6 Other	<b>Road Contour</b> 1 Straight Level 2 Straight Grade 3 Curve Level 4 Curve Grade	<b>Occurrence</b> 1 On Roadway 2 Off Left Side 3 Off Right Side 4 On Opposing Lane of Divided Highway	<b>Special Area</b> 1 Road Construction/Maintenance Area 2 School Zone	<b>First Harmful Event</b> <u>3</u> <b>Two MV In Transport</b> 1 Head On 2 Rear-End 3 Backing 4 Sideswipe Meeting 5 Sideswipe Passing 6 Angle <b>One MV In Transport (Collision)</b> 7 Parked 8 Pedestrian 9 Animal 10 Train 11 Pedal Cycle 12 Other Non-MV 13 Fixed Object 14 Other Object <b>Non-Collision</b> 15 Fall From or In MV 16 Overturning 17 Other Non-Collision	<b>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	<b>Diagram</b> SHOW NORTH WITH ARROW ↑ Hwy 50 CR2 MS CR2 HS Kerr's Curve
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<b>Type of Unit</b> # <u>01</u> <u>1</u> # <u>02</u> <u>1</u>	<b>Pre-Crash Actions</b> A <u>10</u> B <u>6</u>	<b>Contributing Factor</b> A <u>10</u> B <u>1</u>
<b>Car</b> 1 Sub Compact 2 Compact 3 Mid Size 4 Full Size  <b>Truck</b> 5 Pickup 6 Panel/Van 7 Straight Truck 8 Straight Truck & Trailer 9 Truck Tractor 10 Tractor & Semi-Trailer 11 Tractor & Double Trailer  <b>Motorcycle</b> 12 MC up to 350cc 13 MC up to 750cc 14 MC over 751cc 15 Motorized Bicycle  <b>Bus</b> 16 School Bus 17 Church 18 Public  <b>Emergency</b> 19 Police Vehicle 20 Fire Truck 21 Ambulance/Rescue  <b>Other</b> 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/Buggy 31 Bicycle 32 All Others  P = Pedestrian	<b>Driver Actions</b> 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  <b>Pedestrian Actions</b> 18 Crossing in X-Walk 19 Crossing Other than X-Walk (With Traffic) 20 Walking in Road (Against Traffic) 21 Walking in Road 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  <b>Traffic Control</b> A <u>2</u> B <u>2</u> 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  <b>Pedestrian</b> 14 No Controls 15 Crosswalk Lines 16 Walk/Don't Walk Device	<b>Driver Error</b> 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  <b>Truck Load</b> 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  <b>Truck Axes</b> A B 1 Tractor Trailer Rigs
<b>Speed</b> Unit Estimated Legal A <u>05</u> B <u>0</u>	<b>Motorcycle Helmet Use</b> Unit Driver Pass A A B B	<b>Non-Driver Factor</b> 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  <b>Vehicle Defects</b> Code if Contributing Factor is 18 <b>Primary</b> A B <b>Secondary</b> 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