

# Local Traffic Crash Report

Local Report Number 001800035147

Report Taken <input type="checkbox"/> Headquarters <input type="checkbox"/> Substation	Total Number of Vehicles and Pedestrians Involved <b>2</b>	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
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In County Of <b>CLERMONT</b>	• Within corporate limits of: (If not, file with correct agency)	Date of Crash <b>M 08 031 Y 18</b>	Day <b>FRIDAY</b>	Time <b>1618</b>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>
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Crash Occurred On <b>Savannah Cir.</b>	Within The Intersection Of
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If Not In Intersection Miles _____ Feet _____ W _____ N _____ E _____ S _____ Of <b>176</b> (List Nearest Intersecting Street, Milepost, House No.)
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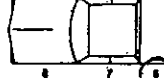
Unit No. <b>A 1</b>	No. Of Occupants <b>1</b>	Operating <input checked="" type="checkbox"/> Parked <input type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/>	Insurance Co. Or Agent <b>General # OH 7021757</b>
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Driver - Pedestrian Name (Last, First, MI) <b>Fryman, Ronald A</b>	Address (No., Street, State, Zip Code) <b>219 Savannah Cir. Batavia, Oh. 45103</b>
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PHYSICAL	Birth Date <b>M 01 02 Y 62</b>	Age <b>56</b>	Sex <b>M</b>	State <b>Oh.</b>	Drivers License No. <b>TH736087</b>	Occupation
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Owner (If Same As Driver, Write Same) <b>Same</b>	Address	Phone
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Veh. Year <b>1999</b>	Make <b>Dodge</b>	Model <b>Ram 1500</b>	Color <b>SILVER</b>	Style <b>TR</b>	State <b>OH</b>	License Plate No. <b>HDV9460</b>	Towing Service	Veh/Ped Dir From <b>S</b> To <b>N</b>
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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>B 2</b>	No. Of Occupants <b>0</b>	Operating <input type="checkbox"/> Parked <input checked="" type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/>	Insurance Co. Or Agent <b>PROGRESSIVE # 919030896</b>
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Driver - Pedestrian Name (Last, First, MI)	Address (No., Street, State, Zip Code)
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Phone No.	Birth Date	Age	Sex	State	Drivers License No.	Occupation
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Owner (If Same As Driver, Write Same) <b>HARRY, JOHN W 7588 SR 221 Georgetown, Oh. 45121</b>	Address	Phone
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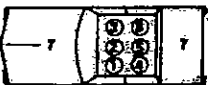
Veh. Year <b>2013</b>	Make <b>Hyun.</b>	Model <b>Elantra</b>	Color <b>BLUE</b>	Style <b>4DR</b>	State <b>Oh.</b>	License Plate No. <b>6SX4695</b>	Towing Service	Veh/Ped Dir From <b>S</b> To <b>N</b>
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Driver - Pedestrian - Vehicle Section

Occupant Section

From Unit No. <b>C</b>	Name (Last, First, MI)	Birth Date M D Y	Age	Position					
	Address	Phone	Sex	A	B	C	D	E	F

From Unit No. <b>D</b>	Name (Last, First, MI)	Birth Date M D Y	Age				
	Address	Phone	Sex				

From Unit No. <b>E</b>	Name (Last, First, MI)	Birth Date M D Y	Age				
	Address	Phone	Sex				

From Unit No. <b>F</b>	Name (Last, First, MI)	Birth Date M D Y	Age	Restraints					
	Address	Phone	Sex	A	B	C	D	E	F

From Unit No. <b>G</b>	Name (Last, First, MI)	Birth Date M D Y	Age	<ul style="list-style-type: none"> <li>1 Not Used</li> <li>2 None Available</li> <li>3 Lap Belt Used</li> <li>4 Lap/Shoulder Belt Used</li> <li>5 Shoulder Belt Used</li> <li>6 Child Safety Seat</li> <li>7 Air Bag Used</li> <li>8 Use Not Reported</li> </ul>			
	Address	Phone	Sex				

From Unit No. <b>H</b>	Name (Last, First, MI)	Birth Date M D Y	Age	Ejection			
	Address	Phone	Sex				

From Unit No. <b>I</b>	Name (Last, First, MI)	Birth Date M D Y	Age	<ul style="list-style-type: none"> <li>1 Not Ejected</li> <li>2 Partial</li> <li>3 Total</li> <li>4 Trapped Inside Vehicle</li> </ul>			
	Address	Phone	Sex				

Date Report Filed <b>M 08 031 Y 18</b>	Desk Officer's Name & Badge # <b>TOP [Signature] #3052</b>
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Local Report Number: 001800035147  
 Describe What Happened: unit #1 was backing up after picking up his grand daughter.  
 Refer To Units By Number: unit #1 was not paying attention and backed into unit #2 that was parked on the street. I advised the owner of unit #2 that there was no street parking with in the trailer park. owner of unit #2 advised that she knew that, but maintenance told her to park on the street until they could move a trailer

<b>Weather Conditions</b> 1 No Adverse Weather 2 Rain 3 Snow 4 Fog 5 High Wind 6 Other	1	<b>First Harmful Event</b> 3 Two MV In Trasport 1 Head On 2 Rear-End 3 Backing 4 Sideswipe Meeting 5 Sideswipe Passing 6 Angle	
<b>Road Conditions</b> 1 Dry 2 Wet 3 Snow 4 Ice 5 Dirt/Sand 6 Other	1	<b>One MV In Trasport</b> (Collision) 7 Parked 8 Pedestrian 9 Animal 10 Train 11 Pedal Cycle 12 Other Non-MV 13 Fixed Object 14 Other Object	
<b>Light</b> 1 Daylight 2 Dawn 3 Dusk 4 Dark No.Lights 5 Dark Lighted 6 Other	1	<b>Non-Collision</b> 15 Fall From or In MV 16 Overturning 17 Other Non-Collision	
<b>Road Contour</b> 1 Straight Level 2 Straight Grade 3 Curve Level 4 Curve Grade	1	<b>Location</b> 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	
<b>Occurence</b> 1 On Roadway 2 Off Left Side 3 Off Right Side 4 On Opposing Lane of Divided Highway	1		
<b>Special Area</b> 1 Road Construction/Maintenance Area 2 School Zone			

<b>Type of Unit</b>	# 1	A 5	B 2	<b>Pre-Crash Actions</b>	A 10	B 9	<b>Contributing Factor</b>	A 15	B 18
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<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/Buggy 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 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	<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>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  <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																					
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				<b>Traffic Control</b> A 1 B 1  <b>Driver</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 Environment Markings 13 Other  <b>Pedestrian</b> 14 No Controls 15 Crosswalk Lines 16 Warning Walk Device	<b>Fixed Object Struck</b> A B 1 None 2 Utility Pole 3 Traffic Sign 4 Bridge/Culvert 5 Guard Rail 6 Fence 7 Tree 8 Scrubbery 9 Car 10 Ditch 11 Embankment 12 Building 13 Mail Box 14 Construction Baricage 15 Fire Hydrant 16 Other Object	<table border="1"> <tr> <td>Truck Load</td> <td>A</td> <td>B</td> </tr> <tr> <td>Truck Axles</td> <td>A</td> <td>B</td> </tr> </table>	Truck Load	A	B	Truck Axles	A	B	<table border="1"> <tr> <td>Truck Load</td> <td>A</td> <td>B</td> </tr> <tr> <td>Truck Axles</td> <td>A</td> <td>B</td> </tr> </table>	Truck Load	A	B	Truck Axles	A	B											
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