

Local Traffic Crash Report

Local Report Number 001800035892

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 checked="" 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 MO 9 05 18	Day wed.	Time 129	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>
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Crash Occurred On **Benton Road** Within The Intersection Of

If Not In Intersection (List Nearest Intersecting Street, Milepost, House No.)
Miles _____ Feet _____ W _____ S _____ E _____ Of **4955**

Unit No. 1	No. Of Occupants 1	Operating <input checked="" type="checkbox"/> Parked <input type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/>	Insurance Co. Or Agent National Insurance # 7005171-0
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Driver - Pedestrian Name (Last, First, MI) Dingo, John P.	Address (No., Street, State, Zip Code) 127 N. Sixth St. Batavia, Oh. 45103
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Phone No.	Birth Date M 10 28 41	Age 76	Sex M	State Oh.	Drivers License No. RG460604	Occupation
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Owner: (If Same As Driver, Write Same) **Same** Address _____ Phone _____

Veh. Year 2009	Make Toyota	Model Tacoma	Color Red	Style TK	State Oh.	License Plate No. 198WYC	Towing Service	Veh/Ped Dir From 5 To N
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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 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. 2	No. Of Occupants 1	Operating <input type="checkbox"/> Parked <input checked="" type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/>	Insurance Co. Or Agent Acc American Ins. # TSA H25097348
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Driver - Pedestrian Name (Last, First, MI) BARNES, Bryan A.	Address (No., Street, State, Zip Code) 58 Hamlin DR. Cincinnati, Oh. 45218
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Phone No.	Birth Date M 12 28 87	Age 30	Sex M	State Oh.	Drivers License No. TA961358	Occupation TRUCK DRIVER.
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Owner: (If Same As Driver, Write Same) **Same** Address **NEW BERN TRANSPORT CORP. 2121 Sunnybrook DR. Cincinnati, Oh. 45237** Phone _____

Veh. Year 1999	Make FRHT	Model TK	Color White	Style TK	State Oh.	License Plate No. PHP6995	Towing Service	Veh/Ped Dir From N To S
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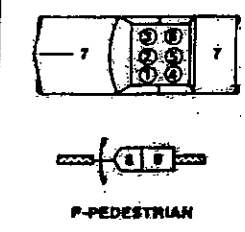
Circle Damage Areas 	Damage Severity <input checked="" type="checkbox"/> Non-Functional <input type="checkbox"/> Functional <input type="checkbox"/> Disabling	Damage Scale <input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Light <input type="checkbox"/> Moderate <input type="checkbox"/> 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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Driver - Pedestrian - Vehicle Section

Occupant Section

C	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Sex	Position A B C D E F
D	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Sex	Position A B C D E F
E	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Sex	Position A B C D E F
F	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Sex	Position A B C D E F
G	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Sex	Position A B C D E F
H	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Sex	Position A B C D E F
I	From Unit No.	Name (Last, First, MI)	Birth Date M D Y	Age	Sex	Position A B C D E F

Date Report Filed M 09 05 18	Desk Officer's Name & Badge # Tracy R. ... #3052
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- 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

- Ejection**
- | | | | | | |
|---|---|---|---|---|---|
| A | B | C | D | E | F |
| | | | | | |
- 1 Not Ejected
 - 2 Partial
 - 3 Total
 - 4 Trapped Inside Vehicle

Local Report Number
001800035892

Describe What Happened
Refer To Units By Number Unit #1 was backing out of parking spot and did

not see unit #2 that was stopped making a delivery. Unit #1 backed into the part of the trailer causing minor damage.

Weather Conditions 1

1 No Adverse Weather
2 Rain
3 Snow
4 Fog
5 High Wind
6 Other

Road Conditions 1

1 Dry
2 Wet
3 Snow
4 Ice
5 Dirt/Sand
6 Other

Light 1

1 Daylight
2 Dawn
3 Dusk
4 Dark No Lights
5 Dark Lighted
6 Other

Road Contour 1

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 3

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)

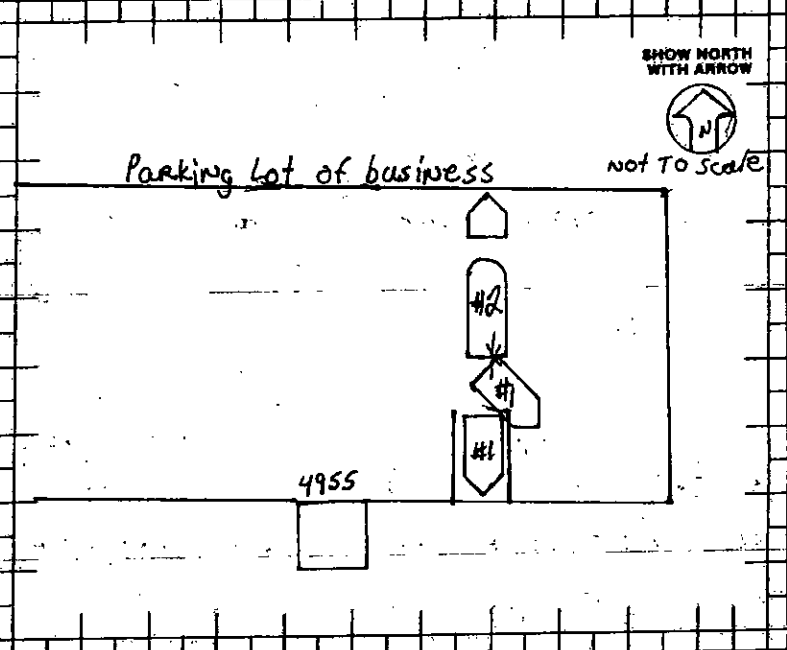
7 Parked
8 Pedestrian
9 Animal
10 Train
11 Pedal Cycle
12 Other Non-MV
13 Fixed Object
14 Other Object

Non-Collision

15 Fall From or In MV
16 Overtaking
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 Not Intersection
8 Private Property



Type of Unit

1 5 2 10

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 750cc
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/ Buggy
31 Bicycle
32 All Others

P = Pedestrian

Speed

Unit	Estimated	Legal
A	5	
B	Ø	

Motorcycle Helmet Use

Unit	Driver	Pass
A		
B		

1 No Helmet
2 Full Coverage
3 Full Facial Cover
4 Other Type Helmet

Pre-Crash Actions A 10 B 9

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 Disabled 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

Traffic Control A 1 B 1

1 No Control
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 Struck 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 Barricade
15 Fire Hydrant
16 Other Object

Driver

14 No Control
15 Crosswalk Lines
16 Water/Drain/Walk Device

Contributing Factor A 15 B 1

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 on 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

Primary	A	B
Secondary	A	B

Truck Load A B 3

1 Empty
2 Perishable Goods
3 General Freight
4 Motor Vehicle Machinery
5 Hazardous Gas
6 Hazardous Liquid
7 Hazardous Solid
8 Radioactive Material

Truck Axles A B 3

Tractor Trailer Rig

1 Turn Signals
2 Head Lamps
3 Tail Lamps
4 Brakes
5 Steering
6 Tire Blowout
7 Worn or Slack Tires
8 Trailer Equipment Defective
9 Motor Trouble
10 Disabled from Prior Accident
11 Other Defects