

Local Traffic Crash Report

Local Report Number **18-49850**

Report Taken <input type="checkbox"/> Headquarters <input checked="" 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
---	--	---

In County Of Clermont	• Within corporate limits of: (if not, file with correct agency):	Date of Crash M 12 D 15 Y 18	Day Saturday	Time 2002	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>
------------------------------	---	-------------------------------------	---------------------	------------------	--

Crash Occurred On Private	Within The Intersection Of LOCH LANARD
----------------------------------	---

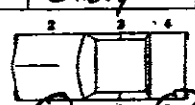
If Not In Intersection (List Nearest Intersecting Street, Milepost, House No.)
 Miles _____ Feet _____ W _____ N _____ E _____ S _____ of **LAUREL OAK**

Unit No. A 1	No. Of Occupants	Operating <input checked="" type="checkbox"/> Parked <input type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/>	Insurance Co. Or Agent SHAK FARM
---------------------	------------------	--	---

Driver - Pedestrian Name (Last, First, MI) Clifton, William	Address (No., Street, State, Zip Code) 1517 SPRUCE DR. AMELIA OH 45102
--	---

Phone No.	Birth Date M 10 D 28 Y 60	Age 58	Sex M	State OH	Drivers License No. RA 167951	Occupation
-----------	----------------------------------	---------------	--------------	-----------------	--------------------------------------	------------

Owner (If Same As Driver, Write Same) SAME	Address	Phone
---	---------	-------

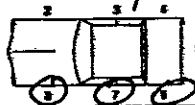
Veh. Year 2006	Make Chevy	Model Cobalt	Color Red	Style Sedan	State OH	License Plate No. DGA 4352	Towing Service N/A	Veh/Ped Dir From N To S	
Circle Damage Areas 			Damage Severity <input type="checkbox"/> Non-Functional <input checked="" type="checkbox"/> Functional <input type="checkbox"/> Disabling		Damage Scale <input type="checkbox"/> None <input type="checkbox"/> Light <input checked="" 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

Unit No. B 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 GEICO
---------------------	---------------------------	--	-------------------------------------

Driver - Pedestrian Name (Last, First, MI) Smithers, Brandi	Address (No., Street, State, Zip Code) 1386 Buxton Meadows AMELIA OH 45102
--	---

Phone No.	Birth Date M 1 D 9 Y 83	Age 25	Sex F	State OH	Drivers License No. TN 805388	Occupation
-----------	--------------------------------	---------------	--------------	-----------------	--------------------------------------	------------

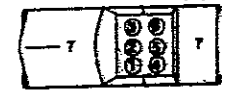
Owner (If Same As Driver, Write Same) Michelle FLUEHR	Address	Phone
--	---------	-------

Veh. Year 2017	Make Chevy	Model CRUZE	Color White	Style 4 Door	State OH	License Plate No. H6R-8674	Towing Service -	Veh/Ped Dir From W To E	
Circle Damage Areas 			Damage Severity <input type="checkbox"/> Non-Functional <input checked="" type="checkbox"/> Functional <input type="checkbox"/> Disabling		Damage Scale <input type="checkbox"/> None <input type="checkbox"/> Light <input checked="" 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 type="checkbox"/> No Fire <input type="checkbox"/> Fire Due To Crash <input type="checkbox"/> Other Fire

Driver - Pedestrian - Vehicle Section

Occupant Section

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



P-PEDESTRIAN

Restraints					
A	B	C	D	E	F
4	5				

- 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	1				

- 1 Not Ejected
- 2 Partial
- 3 Total
- 4 Trapped Inside Vehicle

Date Report Filed 12-15-18	Desk Officer's Name & Badge # Dep. PopHAM
-----------------------------------	--

Local Report Number: **18-49949**
 Describe What Happened Refer To Units By Number: **UNIT ONE WAS ON Loch Lamond making A Right turn onto LAUREL OAK. UNIT 2 WAS ON LAUREL OAK making A Left turn onto Loch Lamond. While Both units were turning they side swiped while they were passing. Both Parties claimed they were in their lanes. They Both moved their UEL before I arrived**

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 Hazard Event 2	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	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	Non-Collision 15 Fall From or In MV 16 Overturning 17 Other Non-Collision
--	---	---	---	---	--	--------------------------------	---	---	--	---

Type of Unit # 1 A # 3 B	Pre-Crash Actions A 2 B 3	Contributing Factor A 13 B 17	
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/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 Traffic Control A 2 B 2 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	Pedestrian Actions 18 Crossing in X-Walk 19 Crossing Other than X-Walk (With Traffic) 20 Walking in Road (Against Traffic) 21 Walking in Road (With Traffic) 22 Entering or Leaving Vehicle 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 Fixed Object Struck A 1 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 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 Tractor Trailer Rigs	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 Other Defects 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

Speed			Motorcycle Helmet Use		
Unit	Estimated	Legal	Unit	Driver	Pass
A	2	25	A		
B	2	25	B		