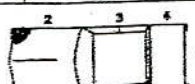
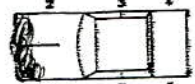


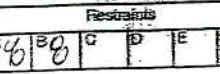
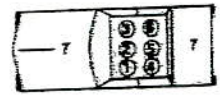
Local Traffic Crash Report

Local Report Number 000180051274

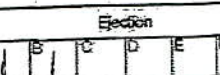
| | | | | | |
|--|--|--|----------------------------|--|-------------------------|
| Report Taken <input type="checkbox"/> Headquarters <input type="checkbox"/> Substation | | Total Number of Vehicles and Pedestrians Involved <u>2</u> | | Combined Vehicle and Property Loss (Account for the total of all vehicles and property damaged) <input checked="" type="checkbox"/> Over \$150 <input type="checkbox"/> Under \$150 | |
| In County Of <u>CLERMONT</u> | | • Within corporate limits of: (If not, file with correct agency) | | Date of Crash M <u>12</u> D <u>26</u> Y <u>18</u> | Day <u>WEDNESDAY</u> |
| Crash Occurred On <u>3027 SR132</u> | | Within The Intersection Of <u>N/A</u> | | | |
| If Not In Intersection (List Nearest Intersecting Street, Milepost, House No.) Miles <u>0</u> Feet <u>0'</u> W <u>S</u> E OF <u>3027</u> | | | | | |
| Unit No. <u>A 1</u> | | No. Of Occupants <u>1</u> | | Operating <input checked="" type="checkbox"/> Parked <input type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/> | |
| Driver - Pedestrian Name (Last, First, MI) <u>WINTER, MAXWELL</u> | | Address (No., Street, State, Zip Code) <u>130 SANTA MARIA AMELIA, OH 45102</u> | | | |
| Phone No. | | Birth Date M <u>1</u> D <u>8</u> Y <u>94</u> | Age <u>24</u> | Sex <u>M</u> | State <u>OH</u> |
| Owner (If Same As Driver, Write Same) <u>SAME</u> | | Drivers License No. <u>TR 796396</u> | | Occupation <u>PAINTER</u> | |
| Veh. Year <u>2001</u> | | Make <u>FORD</u> | Model <u>EDGE/LINE</u> | Color <u>RED</u> | Style <u>VAN</u> |
| Circle Damage Areas  | | 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 | | Veh/Ped Dir From <u>W</u> To <u>E</u> | |
| Unit No. <u>B 2</u> | | No. Of Occupants <u>1</u> | | Operating <input checked="" type="checkbox"/> Parked <input type="checkbox"/> Driverless <input type="checkbox"/> Non-Contact <input type="checkbox"/> | |
| Driver - Pedestrian Name (Last, First, MI) <u>PESINA, ELIZABETH</u> | | Address (No., Street, State, Zip Code) <u>37 MANEFLOWER AMELIA, OH 45102</u> | | | |
| Phone No. | | Birth Date M <u>3</u> D <u>24</u> Y <u>94</u> | Age <u>24</u> | Sex <u>F</u> | State <u>OH</u> |
| Owner (If Same As Driver, Write Same) <u>SAME</u> | | Drivers License No. <u>US 463388</u> | | Occupation <u>UNKNOWN</u> | |
| Veh. Year <u>2008</u> | | Make <u>NISSAN</u> | Model <u>PATHFINDER</u> | Color <u>MAROON</u> | Style <u>SW</u> |
| 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 type="checkbox"/> Moderate <input checked="" 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 | | Veh/Ped Dir From <u>W</u> To <u>E</u> | |
| From Unit No. <u>C</u> | | Name (Last, First, MI) | | Birth Date M <u> </u> D <u> </u> Y <u> </u> | Age |
| Address | | Phone | | Sex | |
| From Unit No. <u>D</u> | | Name (Last, First, MI) | | Birth Date M <u> </u> D <u> </u> Y <u> </u> | Age |
| Address | | Phone | | Sex | |
| From Unit No. <u>E</u> | | Name (Last, First, MI) | | Birth Date M <u> </u> D <u> </u> Y <u> </u> | Age |
| Address | | Phone | | Sex | |
| From Unit No. <u>F</u> | | Name (Last, First, MI) | | Birth Date M <u> </u> D <u> </u> Y <u> </u> | Age |
| Address | | Phone | | Sex | |
| From Unit No. <u>G</u> | | Name (Last, First, MI) | | Birth Date M <u> </u> D <u> </u> Y <u> </u> | Age |
| Address | | Phone | | Sex | |
| From Unit No. <u>H</u> | | Name (Last, First, MI) | | Birth Date M <u> </u> D <u> </u> Y <u> </u> | Age |
| Address | | Phone | | Sex | |
| From Unit No. <u>I</u> | | Name (Last, First, MI) | | Birth Date M <u> </u> D <u> </u> Y <u> </u> | Age |
| Address | | Phone | | Sex | |
| Date Report Filed M <u>12</u> D <u>26</u> Y <u>18</u> | | Desk Officer's Name & Badge # <u>SUMMERS 2039</u> | | | |

Driver - Pedestrian - Vehicle Section

Occupant Section



- RESTRAINTS**
- | | | | | | |
|---|---|---|---|---|---|
| A | B | C | D | E | F |
|---|---|---|---|---|---|
- 1 Not Used
 - 2 None Available
 - 3 Lap Belt Used
 - 4 Exp/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: [] Describe What Happened: UNIT #2 WAS BITTING TO TURN ONTO SR132
 Refer To Units: UNIT #1 STRUCK UNIT #2 WHILE ATTEMPTING TO TURN ONTO
 By Number: SR132. DRIVER FOR UNIT #1 ADVISED HE ONLY SCRAPPED THE FROST OFF THE DRIVER SIDE OF THE WINDSHIELD AND DID NOT SEE UNIT #2. NO INJURIES REPORTED.

| | | | |
|---|---|---|--|
| Weather Conditions 1 No Adverse Weather 2 Rain 3 Snow 4 Fog 5 High Wind 6 Other | 1 | First Harmful Event 4 | |
| Road Conditions 1 Dry 2 Wet 3 Snow 4 Ice 5 Dirt/Sand 6 Other | 1 | Two MV In Transport 1 Head On 2 Rear-End 3 Backing 4 Sideswipe Meeting 5 Sideswipe Passing 6 Angle | |
| Light 1 Daylight 2 Dawn 3 Dusk 4 Dark No Lights 5 Dark Lighted 6 Other | 1 | 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 | |
| Road Contour 1 Straight Level 2 Straight Grade 3 Curve Level 4 Curve Grade | 1 | Non-Collision 15 Fall From or in MV 16 Overturning 17 Other Non-Collision | |
| Occurrence 1 On Roadway 2 Off Left Side 3 Off Right Side 4 On Opposing Lane of Divided Highway | 1 | Location 8 | |
| Special Area 1 Road Construction/Maintenance Area 2 School Zone | | | |

| | | | | | | | | |
|--|---|--|---|---|--|--|---|---|
| Type of Unit | A | B | Pre-Crash Actions | A | B | Contributing Factor | A | B |
| # 1 | 6 | # 2 | 4 | 1 | 6 | 15 | 1 | |
| Car 1 Sub Compact 2 Compact 3 Mid-Size 4 Full Size | | Bus 16 School Bus 17 Church 18 Public | 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 25 Pushing/Working on Vehicle in Road 26 Other in Road 27 On Sidewalk or Shoulder | 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 | 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 15 | |
| Truck 5 Pickup 6 Panel/Van 7 Straight Truck 8 Straight Truck & Trailer 9 Truck Tractor 10 Tractor & Semi-Trailer 11 Tractor & Double Trailer | | Emergency 19 Police Vehicle 20 Fire Truck 21 Ambulance/Rescue | Traffic Control A 1 B 1 | Fixed Object/Struck A 1 B 1 | Truck Load A / B | Primary A / B | Secondary A / B | |
| Motorcycle 12 MC up to 350cc 13 MC up to 750cc 14 MC over 751cc 15 Motorized Bicycle | | 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 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 | Truck Axes A / B | Tractor Trailer Rigs A / B | Vehicle Defects 1 Turn Signals 2 Head Lamps 3 Tail Lamps 4 Brakes 5 Steering 6 Tire Blowout 7 Worn or Sick Tires 8 Trailer Equipment Defective 9 Motor Trouble 10 Disabled from Prior Accident 11 Other Defects | |
| Speed Unit Estimated Legal | | Motorcycle Helmet Use Unit Driver Pass | | | | | | |
| A 5-10 / | | A / | | | | | | |
| B / | | B / | | | | | | |
| 1 No Helmet 3 Full Facial Cover | | 2 Full Coverage 4 Other Type Helmet | | | | | | |