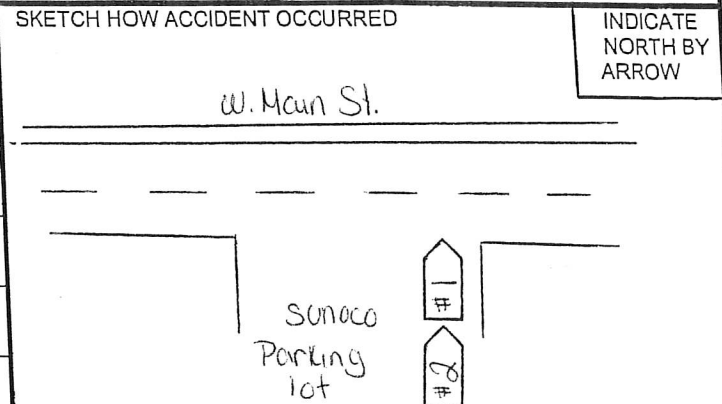


CR NUMBER 25-961	ACCIDENT DATE 1-23-25	ACCIDENT TIME 5:43pm	DAY OF WEEK Thursday	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1152 W. Main St. Kent, OH 44240			WEATHER Snowing	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Howell Joshua W. 2-23-85	DRIVER LAST FIRST MIDDLE DOB Borkhammer, Angel 4-1-1998			
ADDRESS 451 S. Prospect St.	ADDRESS 7410 Hughes Rd.			
CITY, STATE, ZIP PHONE NUMBER Ravenna, OH 44266	CITY, STATE, ZIP PHONE NUMBER Ravenna, OH 44266			
DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Good Lauri	VEHICLE OWNER'S NAME LAST FIRST MIDDLE same			
ADDRESS 185 Lindsey Rd.	ADDRESS			
CITY, STATE ZIP PHONE NUMBER Munroe Falls, OH 44262	CITY, STATE, ZIP PHONE NUMBER			
VEHICLE YEAR MAKE MODEL COLOR 2012 Kia Sorento black	VEHICLE YEAR MAKE MODEL COLOR 2023 Nissan Rogue Red			
LICENSE PLATE NUMBER STATE JUN1621 OH	LICENSE PLATE NUMBER STATE TRNNGRM OH			
INSURANCE COMPANY Progressive: 940973187	INSURANCE COMPANY State farm: 3892683-SFP-35			
PARTS OF <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT VEHICLE DAMAGED	PARTS OF <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT VEHICLE DAMAGED			

DESCRIBE HOW ACCIDENT OCCURRED

Unit 1 and Unit 2 were exiting the Sunoco Gas Station parking lot. Unit 1 went to back up to turn around and struck Unit 2.



OFFICER / SUPERVISOR SIGNATURE

[Signature] 254 / Lt / *[Signature]*

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