


CR NUMBER 24-17390	ACCIDENT DATE 11/15/2024	ACCIDENT TIME 2335-2345	DAY OF WEEK Friday	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1671 Franklin Ave, Kent, OH - Jordan Court Apts. South Parking Stalls			WEATHER Rain	
VEHICLE NO. 1 Unknown			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB	DRIVER LAST FIRST MIDDLE DOB Unoccupied			
ADDRESS	ADDRESS			
CITY, STATE, ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER			
DRIVER'S LICENSE NUMBER STATE	DRIVER'S LICENSE NUMBER STATE			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Spangler Abbi Nicole			
ADDRESS	ADDRESS 1671 Franklin Ave Apt. 22			
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER Kent, OH 44240			
VEHICLE YEAR MAKE MODEL COLOR Red	VEHICLE YEAR MAKE MODEL COLOR 2009 Ford Escape Black			
LICENSE PLATE NUMBER STATE	LICENSE PLATE NUMBER STATE 5UB7613 OH			
INSURANCE COMPANY	INSURANCE COMPANY Allstate			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT Passenger side bumper/rear	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT Passenger side doors			
DESCRIBE HOW ACCIDENT OCCURRED				
Unit 1 was backing out of a parking stall. Unit 1 struck Unit 2 in the passenger side doors. Unit 2 sustained functional damage. Unit 1 fled the scene without reporting the accident.				
OFFICER /SUPERVISOR SIGNATURE 				
SKETCH HOW ACCIDENT OCCURRED <div style="float: right; border: 1px solid black; padding: 5px; margin-top: 10px;">                     INDICATE NORTH BY ARROW                      N ↑                 </div> 