THEFT OTHOR OFFICE DEPARTMENT

PRIVATE PROPERTY ACCIDENT REPORT

20-15959 DATE THE 245 The masses DOWN OR DUSK .OCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) WEATHER DARK DARK S27 E. Main St. No Advesse VEHICLE NO. 1 VEHICLE NO. 2 (OR PROPERTY DAMAGED) DRIVER LAST FIRST MIDDLE DOB DRIVER LAST FIRST MIDDLE DOB DRIVER LAST FIRST MIDDLE DOB DRIVER LAST FIRST MIDDLE DOB Charney Samuel P. Aboress Most Mage Advesse ADDRESS Idos Vice roots Aue CTV. STATE 2P PHONE NUMBER STATE ORIVER'S LICENSE NUMBER STATE DRIVER'S LICENSE NUMBER STATE OH ORIVER'S LICENSE NUMBER STATE OH MIDDLE OH ORIVER'S LICENSE NUMBER STATE OH STATE OH ORIVER'S LICENSE NUMBER STATE OH MIDDLE OH ORIVER'S LICENSE NUMBER GTV, STATE, ZIP PHONE NUMBER OH VEHICLE OWNER'S NAME LAST FIRST MIDDLE ORIVER'S LICENSE NUMBER STATE OH OH VEHICLE OWNER'S NAME <t< th=""><th>CR NUMBER</th><th>ACCIDENT</th><th>ACCIDEN</th><th>T</th><th>DAY OF</th><th></th><th></th><th>ICHT</th></t<>	CR NUMBER	ACCIDENT	ACCIDEN	T	DAY OF			ICHT	
OCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) WATHER SZJENS NO Advesse VENICLE NO. 1 No Advesse DRIVER UAST FIRST MIDDLE DOB DRIVER UAST Scancel P. No Control Property DAMAGED) DRIVER UAST FIRST MIDDLE DOB DRIVER UAST Scancel P. No Control Property DAMAGED) DRIVER UAST FIRST MIDDLE DOB DRIVER UAST FIRST MIDDLE DOB DRIVER UAST FIRST MIDDLE MORESS ADDRESS ADDRESS DRIVER NUMBER STATE DRIVER NUMBER STATE DRIVERS INCENSE NUMBER STATE DRIVERS INCENSE NUMBER STATE DRIVERS INCENSE NUMBER STATE DRIVERS INCENSE NUMBER CITY. STATE, ZIP PHONE NUMBER STATE DORIGE YEAR MODEL ADDRESS COLOR SCIENCE NUMBER STATE UERISE PLATE NUMBER STATE UERISE NAME NADRESS COLOR CITY. STATE ZIP PHONE NUMBER VEHICLE VEAR MAKE MARE <td< td=""><td>20-15959</td><td>DATE</td><td></td><td>45</td><td>WEEK</td><td></td><td>DAW</td><td>N OR DUSK</td></td<>	20-15959	DATE		45	WEEK		DAW	N OR DUSK	
S27 E. Main St. No Advense. VEHICLE NO. 1 VEHICLE NO. 2 (OR PROPERTY DAMAGED) DRIVER LAST FIRST MIDDLE DOB DRIVER LAST FIRST MIDDLE DOB Chansy Samuel P. ADDRESS ADDRESS ADDRESS LOW STATE P. PHONE NUMBER CITY, STATE JP PHONE NUMBER ORIVER ILCENSE NUMBER STATE DRIVER SICENSE NUMBER STATE DRIVER SICENSE NUMBER STATE DRIVER SICENSE NUMBER STATE DRIVER SICENSE NUMBER OH VEHICLE OWNER'S NAME LAST FIRST MIDDLE VEHICLE OWNER'S NAME LAST FIRST MIDDLE ADDRESS ADDRESS ADDRESS CITY, STATE ZIP VEHICLE OWNER'S NAME LAST FIRST MIDDLE VEHICLE OWNER'S NAME MODEL COLO GUARENT NAME MODRESS ADDRESS CITY, STATE ZIP PHONE NUMBER UCHNSE PLATE NUMBER VEHICLE YEAR MAKE MODEL COLOR VEHICLE VEHICLE WAR MURANCE CONFANT REAC DRAGESO - GO-GAC REA	LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION)								
VEHICLE NO. 1 VEHICLE NO. 2 (OR PROPERTY DAMAGED) DRIVER LAST FIRST MIDDLE DOB Changy Samuel P ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ACTIV, STATE, 21P PHONE NUMBER OFF, STATE ORIVERS INCOMER STATE ORIVERS INCOMER STATE ORIVERS INCOMER STATE UCENSE NUMBER CITY, STATE, 21P PHONE NUMBER CITY, STATE, 21P PHONE NUMBER OFF, STATE UCENSE NUMBER CITY, STATE, 21P PHONE NUMBER				DECON					
VEHICLE NO. 1 VEHICLE NO. 2 (OR PROPERTY DAMAGED) DRIVER LAST FIRST MIDDLE DOB DRIVER LAST FIRST MIDDLE DOB HLSSein, Aldelhadi A. 12:3:53 ADDRESS ADDRESS A. 12:50 PHONE NUMBER ADDRESS A. 12:50 ADDRESS ADDRESS A. 12:50 PHONE NUMBER ASLASSING ALL OUT 444004 DRIVERS INCENSE NUMBER ADDRESS CITY, STATE 2IP PHONE NUMBER CITY, STATE ZIP PHONE NUMBER CITY STATE ZIP PHONE NUMBER CITY STATE ZIP PHONE NUMBER CITY STATE ZIP PHONE NUMBER CITY STAT	Jd/E,1	No Adverse							
Change Samuel P. ADDRESS MUSCH School P. ADDRESS MUSCH School P. ADDRESS MUSCH School P. Most Mest School P. Mest School	VEHICLE NO. 1								
ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER STATE DRIVER'S ILCRESS NUMBER STATE OH OH STATE DRIVER'S ILCRESS NUMBER STATE OH OH DRIVER'S ILCRESS NUMBER STATE OH OH ADDRESS OH OH OH ADDRESS CITY, STATE, ZIP PHONE NUMBER STATE ADDRESS CITY, STATE, ZIP PHONE NUMBER STATE CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER STATE NUMER UICENSE PLATE NUMBER STATE NUMER VEHICLE PARTS OF O FRO	-		DRIVER LAST FIRST MIDDLE DOB						
IANK ADDRESS IANK MASTSHORE CITY, STATE, ZIP PHONE NUMBER ASDA SQUE, CHI HUMOBER STATE ORIVER'S LICENSE NUMBER STATE DRIVER'S LICENSE NUMBER CHI VEHICLE OWNER'S NAME LAST STATE CHI VEHICLE OWNER'S NAME LAST FIRST MIDDLE VEHICLE OWNER'S NAME LAST STATE CHI VEHICLE OWNER'S NAME LAST STATE CHI VEHICLE OWNER'S NAME LAST STATE CHI VEHICLE VEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL COLOR VEHICLE VENTE NUMBER STATE UICENSE NUMBER MUSCRAVE MAKE MODEL COLOR VEHICLE VEAR MAKE MAKE MODEL COLOR VEHICLE VENCIE NAKE MUSCRAVE MAKE MUSCRAVE MAKE DIESCRIBE HOW ACCIDENT OCCURRED VEHICLE MAGED	Chaney Sam	uel P.		Hassein Andelhadi A 12:2:80					
CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER STATE DRIVER'S LICENSE NUMBER CH VEHICLE OWNER'S NAME LAST FIRST MIDDLE ADDRESS ADDRESS ADDRESS CITY, STATE ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER STATE CITY, STATE, ZIP PHONE NUMBER STATE CITY, STATE, ZIP PHONE NUMBER STATE CITY, STATE, ZIP PHONE NUMBER STATE CITY, STATE, ZIP PHONE NUMBER SKETCH HOW ACCIDENT OCCURRED CITY, STATE, ZIP CITY, STATE, ZIP CITY, STATE, ZIP CITY, STATE, ZIP CITY, STATE, ZIP CITY, STATE, ZIP PHONE NUMBER STATE CITY, STATE, ZIP CITY, STATE, ZIP CITY, STATE, ZIP CITY, STATE, ZIP PHONE NUMBER STATE CITY, STATE, ZIP CITY,	ADDRESS /		ADDRESS						
OFFICER RUPERVISOR SIGNATUGE CTV. STATE. 21P PHONE NUMBER ORIVER'S INCENSE NUMBER STATE OH ORIVER'S INCENSE NUMBER OH VEHICLE OWNER'S NAME LAST ORIVER'S INCENSE NUMBER OH VEHICLE OWNER'S NAME LAST ORIVER'S INCENSE NUMBER OH VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL COLOR VEHICLE VEHICLE YEAR MAKE MODEL COLOR VEHICLE VEHICLE YEAR NUMBER STATE LICENSE PLATE NUMBER NUMBER STATE ULICENSE PLATE NUMBER NUMBER STATE MINURAL COLORANT <td>1218 Westsh</td> <td></td> <td colspan="5">1605 Viceross AUR</td>	1218 Westsh		1605 Viceross AUR						
DRIVER'S LICENSE NUMBER STATE DRIVER'S LICENSE NUMBER STATE CH VEHICLE OWNER'S NAME LAST FIRST MIDDLE ADDRESS ADDRES	CITY, STATE, ZIP PHONE NUMBER '			CITY, STATE, ZIP PHONE NUMBER					
Office Division Office State VEHICLE OWNER'S NAME LAST FIRST MIDDLE VEHICLE OWNER'S NAME LAST FIRST MIDDLE ADDRESS ADDRESS ADDRESS CITY, STATE, ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL VENICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL VENICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL VENICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL LICENSE PLATE NUMBER STATE LICENSE PLATE NUMBER STATE NUBER Tare MSURANCE COMPANY MSURANCE COMPANY MISURANCE COMPANY MISURANCE COMPANY MISURANCE MISURANCE MISURANCE MISURANCE MISURANCE DAMAGED NUMACIDENT OCCURRED NUMACIDENT OCCURRED NUMACIDENT OCCURRED NUMACIDENT OCCURRED MISURANCE MISU									
VEHICLE OWNER'S NAME LAST FIRST MIDDLE ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS CITY, STATE ZIP PHONE NUMBER CITY, STATE ZIP PHONE NUMBER STATE HISURANCE COMPANY COLORAP	onne			SIALE					
ADDRESS ADDRESS CITY, STATE ZIP PHONE NUMBER CITY, STATE ZIP PHONE NUMBER CITY, STATE ZIP PHONE NUMBER CITY, STATE ZIP PHONE NUMBER DOLA DO	VEHICLE OWNER'S NAME								
ADDRESS ADDRESS ADDRESS CITY, STATE ZIP PHONE NUMBER CITY, STATE CITY,	<		ULC	VEHICLE OWNE	· · · · · · · · · · · · · · · · · · ·		FIRST	MIDDLE	
CITY, STATE ZIP PHONE NUMBER CITY, STATE, ZIP PHONE NUMBER VEHICLE YEAR MAKE MODEL COLOR VEHICLE YEAR MAKE MODEL COLOR 2016 Match & Real State HAWSGOT OH INSURANCE COMPANY INSURANCE COMPANY PARTS OF 0 FRONT & REAR 0 LEFT 0 RIGHT VEHICLE DAMAGED BULLET 0 RIGHT PARTS OF 0 FRONT 0 REAR 0 LEFT 0 RIGHT VEHICLE DAMAGED BULLET 0 RIGHT VEHICLE DAMAGED NONe DESORIBE HOW ACCIDENT OCCURRED VEHICLE "I Gass stopped in the drive thru of S2T E. Main ST. taking South. Vehicle "2 Gass stopped behind Mehicle # 1. Vehicle "A colled torated into the rear of Vehicle". BAREN ST. Each Stopped to the rear of Vehicle "I. SKETCH HOW ACCIDENT OCCURRED OFFICER ISUPERVISOR SIGNATUSE	ADDRESS		ADDRESS		ame				
VEHICLE YEAR MAKE MODEL COLOR DOILG MCADE & Red DOILG MCADE & Red DOILG MCADE & Red DOILG MCADE & REAR HALWISGOT OH INSURANCE COMPANY DATES OF DERONT & REAR D LEFT D RIGHT VEHICLE DAMAGED BLUDGE DESCRIBE HOW ACCIDENT DOCURRED VEHICLE #1 GLES STATED VEHICLE #									
VEHICLE YEAR MAKE MODEL COLOR 2016 Mazch 6 Red 2013 Chary Impedia Block LICENSE PLATE NUMBER STATE HAWSGOT OH HAWSGOT OH INSURANCE COMPANY INSURANCE COMPANY	CITY, STATE ZIP	PHONE NUMBE	ER	CITY, STATE, Z	IP		PHONE NU	IMBER	
2016 March 6 Red 2012 2012 Chany Impedia Color LICENSE PLATE NUMBER STATE LICENSE PLATE NUMBER STATE INSURANCE COMPANY INSURANCE COMPANY OH BURANCE COMPANY INSURANCE COMPANY Gelia Hardon - 16-96-90 Processive 912 904946 PARTS OF a FRONT & REAR a LEFT a RIGHT PARTS OF a FRONT & REAR a LEFT a RIGHT VEHICLE DAMAGED DAMAGED Rumas DESCRIBE HOW ACCIDENT OCCURRED VEHICLE VEHICLE I are stapped in the drive thru of 527 E. Main ST. taking Scath. Vehicle #2 are stapped behind Mehicle # 1. Vehicle # a rolled torustal into the rear of Vehicle #1. SKETCH HOW ACCIDENT OCCURRED I brows in I brows in I brows in I brows in									
LICENSE PLATE NÜMBER STATE LICENSE PLATE NÜMBER STATE LICENSE PLATE NÜMBER STATE HAWSGOT OH HAWSGOT OH HAWSGOT OH HAWSGOT OH HAWSGOT OH NSURANCE COMPANY Gelico 4026-16-96-90 PARTS OF 0 FRONT & REAR 0 LEFT 0 RIGHT VEHICLE DAMAGED BUMOSC DAMAGED NONE DESCRIBE HOW ACCIDENT OCCURRED VEHICLE AMAGED NONE DESCRIBE HOW ACCIDENT OCCURRED VEHICLE AMAGED NONE ST. Eacing Searth. Vehicle #2 are stopped behind Mehicle # 1. Vehicle #2 rolled forward into the rear of Vehicle #1. SKETCH HOW ACCIDENT OCCURRED VEHICLE BANAGED NORTH BY ABROW OFFICER /SUPERVISOR SIGNATURE			LOR			KE	MODEL	COLOR	
HINWSGO OH HEYTSTION STATE HNWSGO OH HEYTSTIOH STATE INSURANCE COMPANY INSURANCE COMPANY INSURANCE COMPANY Cacico 40286-16-96-90 Processive 912904946 PARTS OF 0 FRONT & REAR 0 LEFT 0 RIGHT PARTS OF 0 FRONT 0 REAR 0 LEFT 0 RIGHT VEHICLE DAMAGED Describe HOW ACCIDENT OCCURRED DAMAGED VEHICLE Total acts stagged in the drive thrue of S27 E. Main ST. tacing Searth. Vehicle #2 acts stagged behind Mehicle # 1. Vehicle #2 rolled torated into the rear of Vehicle #1. SKETCH HOW ACCIDENT OCCURRED Warin Qurkin				2012	Cherry	Ima	ala	Black	
INSURANCE COMPANY Geico 4026-16-96-90 PARTS OF DERONT & REAR DLEFT DRIGHT VEHICLE DAMAGED DESCRIBE HOW ACCIDENT DOCURRED VEHICLE DAMAGED DESCRIBE HOW ACCIDENT DOCURRED VEHICLE DAMAGED DESCRIBE HOW ACCIDENT DOCURRED VEHICLE DAMAGED DATA ST ST. Eacing Searth. Vehicle #2 and stopped behind Mehicle # 1. Vehicle #2 rolled forund into the rear of Kehicle #1. SKETCH HOW ACCIDENT DOCURRED SKETCH HOW ACCIDENT OCCURRED DUNKIN DONUTS S27 E.MEN ST. ST. Eacing Searth. Vehicle #2 and stopped behind Mehicle # 1. Vehicle #2 rolled forund into the rear of Kehicle #1. SKETCH HOW ACCIDENT OCCURRED OFFICER /SUPERVISOR SIGNATURE OFFICER /SUPERVISOR SIGNATURE	entre entre			LICENSE PLATE (NUMBER STATE					
Control of the second state of the second of				INSURANCE COMPANY					
PARTS OF D FRONT & REAR D LEFT D RIGHT VEHICLE DAMAGED DESCRIBE HOW ACCIDENT OCCURRED DESCRIBE HOW ACCIDENT OCCURRED VEHICLE #1 GLS Stopped in the drive thru of S27 E. Main ST. Eacing Searth. Vehicle #2 GLS Stopped behind Mehicle #1. Vehicle #2 rolled torated into the rear of Vehicle #1. SKETCH HOW ACCIDENT OCCURRED SKETCH HOW ACCIDENT OCCURRED Durkin Donuts S27 E. Main OFFICER /SUPERVISOR SIGNATURE	Geica 4026-1								
VEHICLE DAMAGED Burger DAMAGED None DESCRIBE HOW ACCIDENT OCCURRED Vehicle #1 Grs Stopped in the drive thru of S27 E. Main ST. Earing South. Vehicle #2 Grs Stopped behind Mehicle # 1. Vehicle #2 rolled torated into the rear of Vehicle #1. SKETCH HOW ACCIDENT OCCURRED SKETCH HOW ACCIDENT OCCURRED Dunkin Donuts S27 E. Main ST. ST. ST. ST. Dunkin Donuts S27 E. Main ST. ST. ST. ST. ST. ST. ST. ST.	PARTS OF D FRONT	PARTS OF D FRONT D REAR DIFET D RIGHT							
DESCRIBE HOW ACCIDENT OCCURRED Vehicle #1 acs stagged in the drive thru of S27 E. Main ST. Eacing Searth. Vehicle #2 cas stagged behind Mehicle # 1. Vehicle #2 rolled torand into the rear of Vehicle #1. SKETCH HOW ACCIDENT OCCURRED NORTH BY NORTH BY									
Vehicle #1 Gas stagged in the drive thru of S27 E. Main SJ. Eacing South. Vehicle #2 Gas stagged behind Mehicle # 1. Vehicle # 2 rolled torutard into the rear of Vehicle # 1. SKETCH HOW ACCIDENT OCCURRED SKETCH HOW ACCIDENT OCCURRED Dunkin Donuts S27 E. Main ST. S3 S27 E. Main ST. S S27 E. Main ST. S S S S S S S S S S S S S		DAMAGED	Nou	ne_					
SKETCH HOW ACCIDENT OCCURRED SKETCH HOW ACCIDENT OCCURRED DUNKIN DONUTS S27 E.Main ST. J J OFFICER /SUPERVISOR SIGNATURE	DESCRIBE HOW ACCIDENT OCCURRED								
SKETCH HOW ACCIDENT OCCURRED SKETCH HOW ACCIDENT OCCURRED Dunkin Donuts S27 E.Main ST. J OFFICER /SUPERVISOR SIGNATURE	VENICIC I	uns stager	2 in	the driv	e thru	_ of	527	E. Main	
SKETCH HOW ACCIDENT OCCURRED SKETCH HOW ACCIDENT OCCURRED Dunkin Donuts S27 E.Main ST. J OFFICER /SUPERVISOR SIGNATURE	ST Fring Sand Value #2 4 11								
SKETCH HOW ACCIDENT OCCURRED SKETCH HOW ACCIDENT OCCURRED DUNKIN DONUTS S27 E.Main ST. J J OFFICER /SUPERVISOR SIGNATURE	ming which venicle & and Stopped behind Mehicle								
SKETCH HOW ACCIDENT OCCURRED Dunkin Donuts S27 E.Mcin ST. OFFICER /SUPERVISOR SIGNATUBE	# 1. Vehicle # 2 rolled For the to the to the the								
OFFICER /SUPERVISOR SIGNATURE	wind into the rear of Venicle 1.								
OFFICER /SUPERVISOR SIGNATURE									
OFFICER /SUPERVISOR SIGNATURE									
OFFICER /SUPERVISOR SIGNATURE				-					
OFFICER /SUPERVISOR SIGNATURE				SKETCH HC	DW ACCIDENT	OCCURRE	D	NINDICATE	
OFFICER /SUPERVISOR SIGNATURE								ABROW	
OFFICER /SUPERVISOR SIGNATURE				2	Donuts	>			
OFFICER /SUPERVISOR SIGNATURE					(222 C 11)			5	
OFFICER /SUPERVISOR SIGNATURE					SAICIN	CV2 31.		S	
OFFICER /SUPERVISOR SIGNATURE								r l	
OFFICER /SUPERVISOR SIGNATURE)	Ť	
OFFICER /SUPERVISOR SIGNATURE								U	
								5	
								O	
t. Main STI		SIGNATURE / 1/	1225		5				
					r., /V	kin	Sri		

Revised 7/22/2009