

CR NUMBER <i>22-713</i>	ACCIDENT DATE <i>11/17/22</i>	ACCIDENT TIME <i>0757</i>	DAY OF WEEK <i>Monday</i>	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) <i>10601 Fraternity Cir. Kent, OH 44240</i>			WEATHER <i>Snow</i>	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB	DRIVER LAST FIRST MIDDLE DOB <i>Shipleay David B. 11-11-1955</i>			
ADDRESS	ADDRESS <i>1220 Barker Blvd. Apt. #1</i>			
CITY, STATE, ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER <i>Kent, OH 44240</i>			
DRIVER'S LICENSE NUMBER STATE	DRIVER'S LICENSE NUMBER STATE <i>OH</i>			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE	VEHICLE OWNER'S NAME LAST FIRST MIDDLE <i>Bowers Lawn Care</i>			
ADDRESS	ADDRESS <i>1352 Sunset Way Blvd.</i>			
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER <i>Kent, OH 44240</i>			
VEHICLE YEAR MAKE MODEL COLOR	VEHICLE YEAR MAKE MODEL COLOR <i>2008 Chevrolet 2500 Red</i>			
LICENSE PLATE NUMBER STATE	LICENSE PLATE NUMBER STATE <i>PGK2548 OH</i>			
INSURANCE COMPANY	INSURANCE COMPANY <i>Auto Owners Ins. Company 5114320600</i>			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT <i>No damage reported</i>			
DESCRIBE HOW ACCIDENT OCCURRED				
<i>Video footage was obtained of the accident. It was determined that the driver of Unit #2 backed into Unit #1 while plowing snow. The driver of Unit #2 was operating a vehicle owned by Bowers Lawn Care at the time of the accident. Driver of Unit #2 cited for hit/skip.</i>				
See the initial report (Page 1) for additional information.			SKETCH HOW ACCIDENT OCCURRED INDICATE NORTH BY ARROW	
Addendum to original report				
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OFFICER /SUPERVISOR SIGNATURE <i>S. Conner #214</i>				