

CR NUMBER 22-18443	ACCIDENT DATE 10-31-22	ACCIDENT TIME 4:08pm	DAY OF WEEK Monday	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
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LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1400 Fanchard Ave Kent, OH (Mac Trailer)	WEATHER Cloudy
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VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST FIRST MIDDLE DOB unoccupied	DRIVER LAST FIRST MIDDLE DOB unknown								
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 Davis, Leola, Carol	VEHICLE OWNER'S NAME LAST FIRST MIDDLE unknown								
ADDRESS 2304 Leonard St.	ADDRESS								
CITY, STATE ZIP PHONE NUMBER Kent, Ohio	CITY, STATE, ZIP PHONE NUMBER								
VEHICLE YEAR MAKE MODEL COLOR 2012 Ford focus blue	VEHICLE YEAR MAKE MODEL COLOR								
LICENSE PLATE NUMBER STATE JFQ1758 OH	LICENSE PLATE NUMBER STATE								
INSURANCE COMPANY All State	INSURANCE COMPANY								
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT								

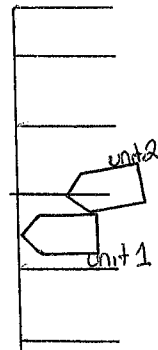
DESCRIBE HOW ACCIDENT OCCURRED

Unit One was parked in a parking spot. Unit One went to leave and observed damaged to the rear passenger side. Unit One obtain the plate of Unit Two. Unit two left before police arrival.

SKETCH HOW ACCIDENT OCCURRED

↑
north

INDICATE NORTH BY ARROW



OFFICER /SUPERVISOR SIGNATURE

[Handwritten Signature]
2154
Lt. J. G. [unclear]