CR NUMBER	ACCIDENT	ACCIDEN	IT	DAY OF		d DAYLIGHT	
21-15385	DATE 9-17-21	TIME /	549	WEEK		DAWN OR DUSK	
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) WEATHER							
201 E Main	FRIC						
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST FIRST MIDDLE DOB			DRIVER LAST FIRST MIDDLE DOB				
BROTHERS PICHARU L 2-16-44			COSGROVE TYLER M 7-15-99				
ADDRESS 60073 PATLICIA AME			ADDRESS 2826 4th & NW				
CITY, STATE, ZIP PHONE NUMBER LAKENA OH 4426			CITY, STATE, ZIP PHONE NUMBER CANTON OH 44708				
DRIVER'S LICENSE NUMBER STATE			DRIVER'S LICENSE NUMBER STATE				
VEHICLE OWNER'S NAME	VEHICLE OWNER'S NAME LAST FIRST MIDDLE PODLE KASEY D						
ADDRESS	ADDRESS 14516 LINCOLN S-						
CITY, STATE ZIP PHONE NUMBER			CITY, STATE, ZIP PHONE NUMBER N isweence of 49666				
VEHICLE YEAR MAKE MODEL COLOR 13 FOLD FISO RED			VEHICLE YEAR MAKE MODEL COLOR 82 VOLIL TAK BUK				
LICENSE PLATE NUMBER STATE Diubyzis Oft			LICENSE PLATE NUMBER STATE  JFH4/190 6H				
INSURANCE COMPANY			INSURANCE COMPANY				
PARTS OF FRONT REAR LEFT RIGHT VEHICLE DAMAGED			PARTS OF D FRONT D REAR D LEFT D RIGHT VEHICLE DAMAGED				
DESCRIBE HOW ACCIDENT OCCURRED							
BOTH UNIT 1 AND UNIT TO WERE PULLING INTO							
201 E MAIN ST. THEY EACH ENTERED FROM DIFFERENT							
ENTRY POINTS UNIT 1 STRUCK UNIT 2							
SKET¢H HOW ACCIDENT OCCURRED INDICATE							
			\$	V NOOIDEIV	OOCONNE	Zol	NORTH BY ARROW
			hel ourch	i !		_	17
			-   <sup>2</sup> / <sub>2</sub>	(	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2	NOT TO SOME
						V	- Junio
Re /	2 2 115	2,4					
OFFICER ISUPERVISOR S	IGNATURE /				E	Main	