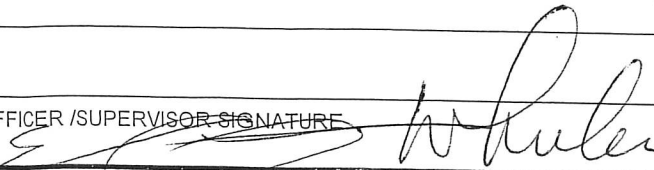
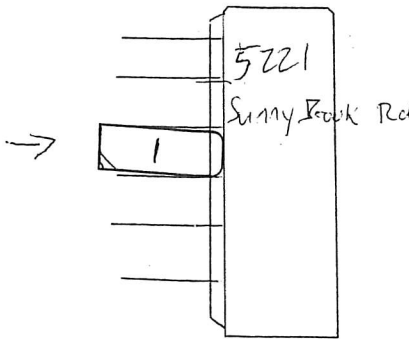


CR NUMBER 24-19026	ACCIDENT DATE 12/26/24	ACCIDENT TIME 1203	DAY OF WEEK Thurs	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK	
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 5221 Sunnybrook Rd			WEATHER N/A		
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Denault John Albert 6/14/52			DRIVER LAST FIRST MIDDLE DOB		
ADDRESS 5221 Sunnybrook Rd Apt 522			ADDRESS		
CITY, STATE, ZIP PHONE NUMBER Kent OH 44240			CITY, STATE, ZIP PHONE NUMBER		
DRIVER'S LICENSE NUMBER STATE OH			DRIVER'S LICENSE NUMBER STATE		
VEHICLE OWNER'S NAME LAST FIRST MIDDLE same			VEHICLE OWNER'S NAME LAST FIRST MIDDLE The NRP Group		
ADDRESS			ADDRESS		
CITY, STATE ZIP PHONE NUMBER			CITY, STATE, ZIP PHONE NUMBER 844 677 0002		
VEHICLE YEAR MAKE MODEL COLOR 2020 Toyota Rav 4 white			VEHICLE YEAR MAKE MODEL COLOR		
LICENSE PLATE NUMBER STATE 41720N OH			LICENSE PLATE NUMBER STATE		
INSURANCE COMPANY State Farm			INSURANCE COMPANY		
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input 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 1 was pulling into his parking spot and backed out. Unit 1 drove over the curb and into the building wall.					
OFFICER /SUPERVISOR SIGNATURE 			SKETCH HOW ACCIDENT OCCURRED		
					INDICATE NORTH BY ARROW N ↑ NTS