

CR NUMBER 20-16233	ACCIDENT DATE 10-13-20	ACCIDENT TIME 1511	DAY OF WEEK TUE	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1066 S. Water St (Kent Social Services)			WEATHER Clear	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Al-Sherifi Ali Abdulrazzak 10-10-97	DRIVER LAST FIRST MIDDLE DOB Khan Javed F. 09-14-63			
ADDRESS 1630 Artemis Dr.	ADDRESS 7645 Seasons Rd			
CITY, STATE, ZIP Kent OH 44240	PHONE NUMBER		CITY, STATE, ZIP Kent OH 44240	
DRIVER'S LICENSE NUMBER		STATE OH		
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Al-Sherifi Adel		VEHICLE OWNER'S NAME LAST FIRST MIDDLE Same		
ADDRESS 3929 Lor. Run St		ADDRESS		
CITY, STATE, ZIP Kent OH 44240		CITY, STATE, ZIP Kent OH 44240		
VEHICLE YEAR MAKE MODEL COLOR 2003 Honda Accord Black	VEHICLE YEAR MAKE MODEL COLOR 2016 Acura MDX White			
LICENSE PLATE NUMBER STATE 6W7931 OH	LICENSE PLATE NUMBER STATE 6PW5112 OH			
INSURANCE COMPANY Owner's Ins. Co #51-774632-00	INSURANCE COMPANY State Farm #C373306E0135			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT Scratches	PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT Scratches			
DESCRIBE HOW ACCIDENT OCCURRED Unit 2 was pulling into the parking lot at 1066 S. Water St as unit 1 was backing out of a parking space there. Unit 1 stopped while backing after noticing unit 2, and then continued backing. Unit 2 continued through the lot and both vehicles collided.				
			SKETCH HOW ACCIDENT OCCURRED <input checked="" type="checkbox"/> Not to scale N ↓	INDICATE NORTH BY ARROW
OFFICER /SUPERVISOR SIGNATURE Ptl. Bodaway 2110 / Lt. [Signature] #228				