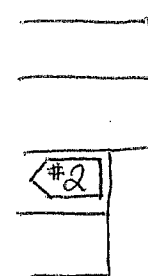


CR NUMBER <b>22-20191</b>	ACCIDENT DATE <b>12/2-12/3</b>	ACCIDENT TIME <b>9am-9:30pm</b>	DAY OF WEEK <b>Fri-Sat</b>	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) <b>1605 Stratford Dr. Kent, OH</b>			WEATHER <b>Unknown</b>	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB <b>Unknown</b>			DRIVER LAST FIRST MIDDLE DOB <b>Unoccupied</b>	
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			VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>Grizzo, Ronald Michael</b>	
ADDRESS			ADDRESS <b>436 Pugwash Cir.</b>	
CITY, STATE ZIP PHONE NUMBER			CITY, STATE, ZIP PHONE NUMBER <b>Sagamore Hills, Oh 44067</b>	
VEHICLE YEAR MAKE MODEL COLOR			VEHICLE YEAR MAKE MODEL COLOR <b>2009 Audi A5 Camo</b>	
LICENSE PLATE NUMBER STATE			LICENSE PLATE NUMBER STATE <b>HXX7154 Ohio</b>	
INSURANCE COMPANY			INSURANCE COMPANY <b>Grange</b>	
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 checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT	
DESCRIBE HOW ACCIDENT OCCURRED				
<p>Unit 2 was parked in the parking space at 9am on Dec. 2.                  The driver of unit 2 came out at 9:30pm on Dec. 3 and noticed                  the front passenger light bracket was on the ground.                  Minor damage to the passenger                  quarter panel. Unknown which                  vehicle hit unit 2.</p>				
OFFICER /SUPERVISOR SIGNATURE <b>PH. Bruno 254</b>			SKETCH HOW ACCIDENT OCCURRED 	
			INDICATE NORTH BY ARROW	