

CR NUMBER 20-15736	ACCIDENT DATE 9-28-20	ACCIDENT TIME 2016	DAY OF WEEK MON	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 429 E. MAIN ST.			WEATHER RAIN	

VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST	FIRST	MIDDLE	DOB		DRIVER LAST	FIRST	MIDDLE	DOB	
SCHIVCKERT, JOHANNA 11-13-96									
ADDRESS 1852 COMANCHE PL.					ADDRESS				
CITY, STATE, ZIP			PHONE NUMBER		CITY, STATE, ZIP			PHONE NUMBER	
KENT, OH, 44240									
DRIVER'S LICENSE NUMBER			STATE		DRIVER'S LICENSE NUMBER			STATE	
			OH						
VEHICLE OWNER'S NAME LAST FIRST MIDDLE					VEHICLE OWNER'S NAME LAST FIRST MIDDLE				
SAME									
ADDRESS					ADDRESS				
CITY, STATE ZIP			PHONE NUMBER		CITY, STATE, ZIP			PHONE NUMBER	
VEHICLE YEAR	MAKE	MODEL	COLOR		VEHICLE YEAR	MAKE	MODEL	COLOR	
2018	FORD	ECOSPORT	RED						
LICENSE PLATE NUMBER		STATE			LICENSE PLATE NUMBER		STATE		
HPC 6244		OH							
INSURANCE COMPANY PROGRESSIVE					INSURANCE COMPANY				
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input 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  
 VEH 1 WAS N/B IN THE PARKING LOT OF CHIPOLTE, 429 E. MAIN ST. VEH 1. WAS TURNING TO THE WEST. DID NOT SEE THE POLE IN THE PARKING LOT AND STRUCK IT, CAUSING DISABLING DAMAGE. THE POLE WAS NOT DAMAGED.

OFFICER/SUPERVISOR SIGNATURE <i>[Signature]</i>	SKETCH HOW ACCIDENT OCCURRED	INDICATE NORTH BY ARROW	
	DRAWING APPROX. NOT TO SCALE.		
	429 E. MAIN ST.		