



CR NUMBER 21-14453	ACCIDENT DATE 9-3-21	ACCIDENT TIME 1337	DAY OF WEEK FRI	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1600 S. Water St.			WEATHER	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB Petrich Edith P 11/12/48	DRIVER LAST FIRST MIDDLE DOB Rainey Marilyn D 2/24/49			
ADDRESS 1006 S. Willow St.	ADDRESS 3113 Sandy Lake Road			
CITY, STATE, ZIP PHONE NUMBER Kent, OH 44240	CITY, STATE, ZIP PHONE NUMBER Ravenna, OH 44266			
DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE 7 OH			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE SAME	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Rainey David H.			
ADDRESS	ADDRESS 3113 Sandy Lake Road			
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER Ravenna, OH 44266			
VEHICLE YEAR MAKE MODEL COLOR 2018 CHEV EQU MAR	VEHICLE YEAR MAKE MODEL COLOR 2020 CHEV EQU SILVER			
LICENSE PLATE NUMBER STATE JLW6964 OH	LICENSE PLATE NUMBER STATE SHA4821 OH			
INSURANCE COMPANY STATE FARM	INSURANCE COMPANY ERIE INS			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT 	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT 			

DESCRIBE HOW ACCIDENT OCCURRED

Unit 1 backed from a parking spot, into Unit 2 traveling in the lot causing damages

SKETCH HOW ACCIDENT OCCURRED

INDICATE NORTH BY ARROW
Not To Scale



OFFICER / SUPERVISOR SIGNATURE

[Handwritten Signature] #250 Wheel