

CR NUMBER 23-18996	ACCIDENT DATE 11/29/23	ACCIDENT TIME 15:45	DAY OF WEEK Wednes	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
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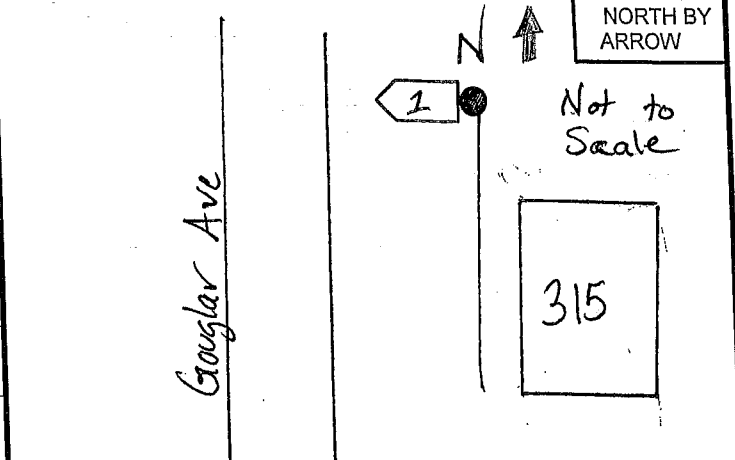
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 315 Gouglar Ave	WEATHER Clear
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VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST FIRST MIDDLE DOB Unoccupied	DRIVER LAST FIRST MIDDLE DOB								
ADDRESS	ADDRESS								
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 Negron Peter John	VEHICLE OWNER'S NAME LAST FIRST MIDDLE On Us LLC								
ADDRESS 2186 Timber Ridge Trl	ADDRESS 315 Gouglar Ave								
CITY, STATE, ZIP PHONE NUMBER Streetsboro, OH 44241	CITY, STATE, ZIP PHONE NUMBER Kent, OH 44240								
VEHICLE YEAR MAKE MODEL COLOR 2009 Jeep Wrangler Orange	VEHICLE YEAR MAKE MODEL COLOR								
LICENSE PLATE NUMBER STATE 873 ZOL OH	LICENSE PLATE NUMBER STATE								
INSURANCE COMPANY State Farm 4010642 SFP 35	INSURANCE COMPANY								
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 type="checkbox"/> LEFT <input type="checkbox"/> RIGHT Pole & Gate Sensor								

DESCRIBE HOW ACCIDENT OCCURRED

Unit 1 was parked and unoccupied but left in neutral. Unit 1 rolled through the parking lot and struck an automatic gate of 315 Gouglar Ave.

SKETCH HOW ACCIDENT OCCURRED



OFFICER/SUPERVISOR SIGNATURE

[Handwritten Signature]