

CR NUMBER <b>24-16337</b>	ACCIDENT DATE <b>10-28-24</b>	ACCIDENT TIME <b>1826</b>	DAY OF WEEK <b>Mon</b>	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) <b>312 W Main St Parking lot</b>			WEATHER <b>N/A</b>	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB <b>Fleming Sharon Kay 01/10/54</b>	DRIVER LAST FIRST MIDDLE DOB			
ADDRESS <b>5283 Deer Trace Dr</b>	ADDRESS			
CITY, STATE, ZIP PHONE NUMRFR <b>Kent, OH 44240</b>	CITY, STATE, ZIP PHONE NUMBER			
DRIVER'S LICENSE NI MRFR STATE <b>OH</b>	DRIVER'S LICENSE NUMBER STATE			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>Same</b>	VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>Sullivan Vester Keith</b>			
ADDRESS	ADDRESS <b>5309 Deer Trace Dr</b>			
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER <b>Kent OH 44240</b>			
VEHICLE YEAR MAKE MODEL COLOR <b>2017 Ford CMax Red</b>	VEHICLE YEAR MAKE MODEL COLOR <b>2016 Ford F-150 Maroon</b>			
LICENSE PLATE NUMBER STATE <b>GLA9330 OH</b>	LICENSE PLATE NUMBER STATE <b>43244M OH</b>			
INSURANCE COMPANY <b>Allstate</b>	INSURANCE COMPANY <b>Gimbel Insurance</b>			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" 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 <b>Unit 2 was parked. Unit 1 pulled into the parking spot next to Unit 2. Unit 1 struck Unit 2 while it parked. Unit 1 then moved parking spots away from the accident</b>				
			SKETCH HOW ACCIDENT OCCURRED <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;">312 W Main St</div> <div style="text-align: right; margin-top: 20px;">                     INDICATE NORTH BY ARROW   N                      MTS                 </div> <div style="text-align: center; margin-top: 20px;"> </div>	
OFFICER /SUPERVISOR SIGNATURE <b>[Signature] #55</b>				