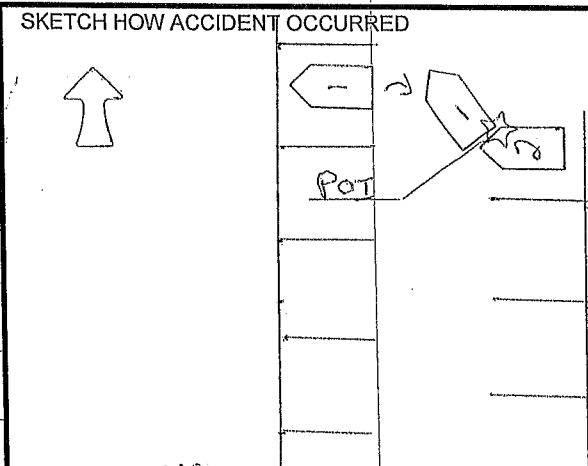


CR NUMBER 22-18552	ACCIDENT DATE 11-2-22	ACCIDENT TIME 2037	DAY OF WEEK WED	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 155 N. Water St Kent OH 44240			WEATHER NONE	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Shupe Arissa E 04-09-97	DRIVER LAST FIRST MIDDLE DOB Garlak David P 05-15-98			
ADDRESS 1161 Liberty Ave	ADDRESS 10813 Butternut RD			
CITY, STATE, ZIP PHONE NUMBER Bardonia OH 44203	CITY, STATE, ZIP PHONE NUMBER Chesterland OH 44026			
DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE OH			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE S.A.A.	VEHICLE OWNER'S NAME LAST FIRST MIDDLE S.A.A.			
ADDRESS	ADDRESS			
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER			
VEHICLE YEAR MAKE MODEL COLOR 2014 Chevy Cruze GRN	VEHICLE YEAR MAKE MODEL COLOR 2019 Ford Fusion White			
LICENSE PLATE NUMBER STATE JJC8657 OH	LICENSE PLATE NUMBER STATE JKZ4321 OH			
INSURANCE COMPANY State farm 2801244-SFP-35	INSURANCE COMPANY Farmers 36889			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" 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

Unit 1 backed into unit 2. Unit 2 was unoccupied.

OFFICER / SUPERVISOR SIGNATURE <i>[Signature]</i> #260 / <i>[Signature]</i> #228	SKETCH HOW ACCIDENT OCCURRED	INDICATE NORTH BY ARROW
		

NOT TO SCALE