

CR NUMBER 26-94	ACCIDENT DATE 01-03-26	ACCIDENT TIME 2103	DAY OF WEEK SAT	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
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LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1645 Franklin AVE Kent Ohio			WEATHER Clear
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VEHICLE NO. 1	VEHICLE NO. 2 (OR PROPERTY DAMAGED)			
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DRIVER LAST FIRST MIDDLE DOB McGee Aidan T 8-1-03	DRIVER LAST FIRST MIDDLE DOB Hossian Kazi M 8-14-05
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ADDRESS 6332 Cougar Path	ADDRESS 10897 48th AVE Unit J11
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CITY, STATE, ZIP Liberty Twp OH 44044	PHONE NUMBER	CITY, STATE, ZIP Allendale MI	PHONE NUMBER
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DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE MI
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VEHICLE OWNER'S NAME LAST FIRST MIDDLE McGee Terrence P JR.	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Sayeef Ahmed
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ADDRESS SA	ADDRESS 1111 Independence AVE Apt 1860
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CITY, STATE ZIP	PHONE NUMBER	CITY, STATE ZIP	PHONE NUMBER
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VEHICLE YEAR MAKE MODEL COLOR 2011 Toyt YB Silver	VEHICLE YEAR MAKE MODEL COLOR 13 KIA Optima White
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LICENSE PLATE NUMBER STATE GFE7125 OH	LICENSE PLATE NUMBER STATE KLQ8307 OH
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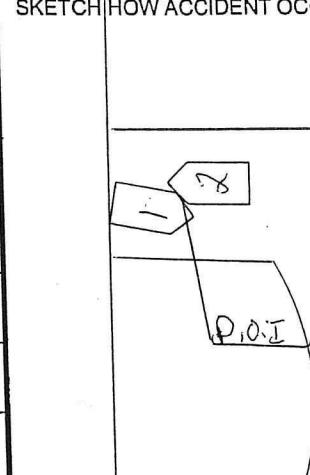
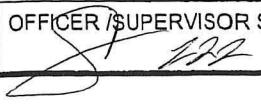
INSURANCE COMPANY Cincinnati Casualty Co 02461-28605	INSURANCE COMPANY NONE
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PARTS OF <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT	PARTS OF <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT
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VEHICLE DAMAGED	VEHICLE DAMAGED
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DESCRIBE HOW ACCIDENT OCCURRED

Unit 1 was turning from north to east into Jordan Ct Apts off Franklin AVE. Unit 2 was traveling from east to west through the parking lot of the complex. As Unit 1 turned, it was struck by Unit 2.

SKETCH	HOW ACCIDENT OCCURRED	INDICATE NORTH BY ARROW
		
OFFICER / SUPERVISOR SIGNATURE 	NOT TO SCALE	