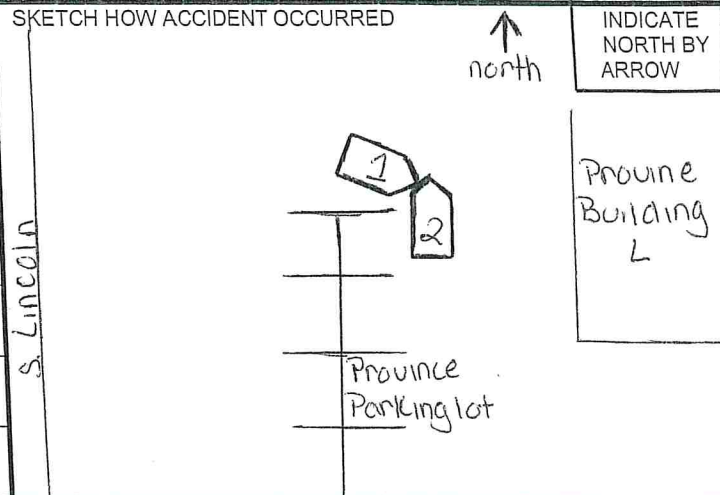


CR NUMBER 22-15164	ACCIDENT DATE 9-8-22	ACCIDENT TIME 17:38	DAY OF WEEK Thursday	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 609 S. Lincoln St.			WEATHER clear	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Kondrat Emma Rose 3-16-03	DRIVER LAST FIRST MIDDLE DOB Dixon Julia Kaye 12-17-2000			
ADDRESS 3745 Surfside Cir.	ADDRESS 101 Tomahawk Dr.			
CITY, STATE, ZIP PHONE NUMBER Reminderville, OH 44202	CITY, STATE, ZIP PHONE NUMBER Avon Lake, OH 44012			
DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE OH			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Kondrat Cynthia A.	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Dixon Douglas L.			
ADDRESS same	ADDRESS same			
CITY, STATE ZIP PHONE NUMBER same	CITY, STATE, ZIP PHONE NUMBER same			
VEHICLE YEAR MAKE MODEL COLOR 2019 Jeep Compass black	VEHICLE YEAR MAKE MODEL COLOR 2010 Subaru Forester White			
LICENSE PLATE NUMBER STATE GX74329 OH	LICENSE PLATE NUMBER STATE B2L8116 OH			
INSURANCE COMPANY Progressive-936780811	INSURANCE COMPANY Nationwide-9234-3-339253			
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT	PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT			

DESCRIBE HOW ACCIDENT OCCURRED

Unit One + Unit Two were driving in the Province parking lot. Unit One was making a right hand turn. Unit two was continuing straight. Unit One struck Unit Two at the drive side front wheel and panel. Unit Two is not driveable. No traffic signs in the parking lot.

SKETCH HOW ACCIDENT OCCURRED



OFFICER / SUPERVISOR SIGNATURE

[Handwritten Signature]
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