

CR NUMBER 23-9655	ACCIDENT DATE 06/22/23	ACCIDENT TIME 12:45pm	DAY OF WEEK THURS	<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) RIVER MERCHANT, 911 N MANTUA ST, KENT, OH 44240	WEATHER CLOUDY
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VEHICLE NO. 1	VEHICLE NO. 2 (OR PROPERTY DAMAGED) PARKED UNOCCUPIED
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DRIVER LAST FIRST MIDDLE DOB * SAME AS OWNER *	DRIVER LAST FIRST MIDDLE DOB
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ADDRESS	ADDRESS
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CITY, STATE, ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER
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DRIVER'S LICENSE NUMBER STATE OHIO	DRIVER'S LICENSE NUMBER STATE OHIO
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VEHICLE OWNER'S NAME LAST FIRST MIDDLE PIDENOUR JAMES ELMER	VEHICLE OWNER'S NAME LAST FIRST MIDDLE NOVARTIS SERVICES INC.
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ADDRESS 3603 EDGEWOOD DR	ADDRESS 7561 W. LAKE BLVD
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CITY, STATE, ZIP PHONE NUMBER STOW, OH 44224	CITY, STATE, ZIP PHONE NUMBER KENT, OH 44240
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VEHICLE YEAR MAKE MODEL COLOR 2011 DODGE RAM 1500 BROWN	VEHICLE YEAR MAKE MODEL COLOR 2022 TOYOTA RAV4 GRAY
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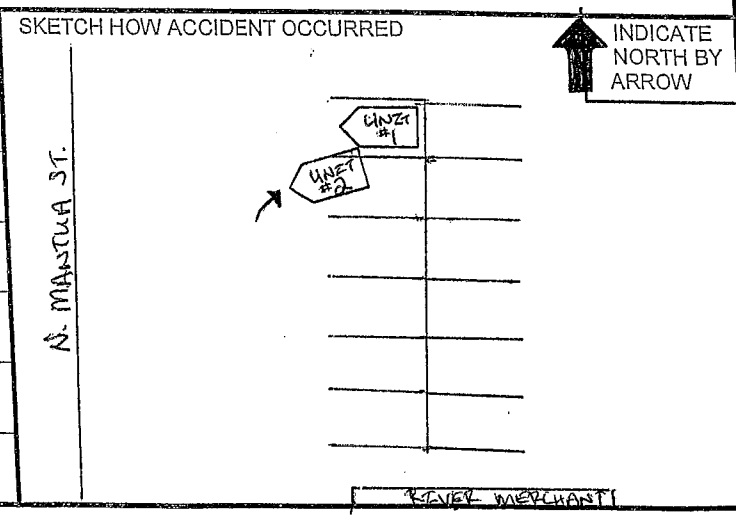
LICENSE PLATE NUMBER STATE HNB 9647 OHIO	LICENSE PLATE NUMBER STATE JWQ 8001 OHIO
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INSURANCE COMPANY ENCOMPASS INS. #281837134	INSURANCE COMPANY OLD REPUBLIC INS. #MWTB31442023
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PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT REAR PASSENGER'S BUMPER	PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT FRONT DRIVERS' BUMPER/ QUARTER PANEL
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DESCRIBE HOW ACCIDENT OCCURRED

UNIT 1 WAS BACKING INTO A PARKING SPACE.
 UNIT 2 WAS PARKED IN A PARKING SPACE.
 UNIT 1 IMPROPERLY BACKED, STRIKING UNIT 2.



OFFICER /SUPERVISOR SIGNATURE
M. BELGREN #219 *Wheeler*