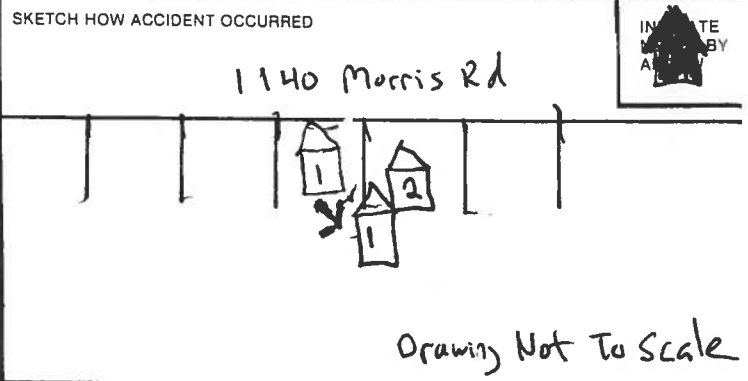


C.R. NO. 21-15819	ACCIDENT DATE 9-25-21	ACCIDENT TIME 0257	DAY OF WEEK Saturday	LIGHT CONDITIONS <input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER, OR OTHER LOCATION DESCRIPTION) Parking Lot of 1140 Morris Rd				WEATHER cloudy / Dark
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE BIRTHDATE Trimmer Darcy J 5-02-02	DRIVER LAST FIRST MIDDLE BIRTHDATE			
ADDRESS 5090 SR 734		ADDRESS		
CITY, STATE, ZIP Jeffersonville, OH 43128	PHONE NUMBER	CITY, STATE, ZIP	PHONE NUMBER	
DRIVER'S SOCIAL SECURITY NUMBER 8476		DRIVER'S SOCIAL SECURITY NUMBER		
DRIVER'S LICENSE STATE NUMBER OH	DRIVER'S LICENSE STATE NUMBER			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Trimmer Darcy O	VEHICLE (OR PROPERTY) OWNER'S NAME LAST FIRST MIDDLE Sibounheuang Kongkham			
ADDRESS 5090 SR 734		ADDRESS 1905 Meadow Ln		
CITY, STATE, ZIP Jeffersonville, OH 43128	PHONE NUMBER	CITY, STATE, ZIP Orville, OH 44667	PHONE NUMBER	
VEHICLE YEAR MAKE MODEL 2014 Ford Focus	VEHICLE YEAR MAKE MODEL 2008 Lexus ES 350			
LICENSE PLATE YEAR STATE NUMBER 2022 OH 6UT 8321	LICENSE PLATE YEAR STATE NUMBER 2022 OH HDC-5887			
INSURANCE COMPANY/AGENCY Travelers 9964 85804	INSURANCE COMPANY/AGENCY Progressive			
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT	PARTS OF VEHICLE DAMAGED OR PROPERTY DAMAGE <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT			

DESCRIBE HOW ACCIDENT OCCURRED

Units 1 and 2 were parked next to each other at 1140 Morris Rd. The driver of Unit 1 backed her vehicle up. When doing so her front right fender struck the bumper of Unit #2.



VEHICLE NO 1 REPORTING PERSON'S SIGNATURE
[Signature]

VEHICLE NO 2 REPORTING PERSON'S SIGNATURE

OFFICER/SUPERVISOR SIGNATURE
Lt. *[Signature]* #228