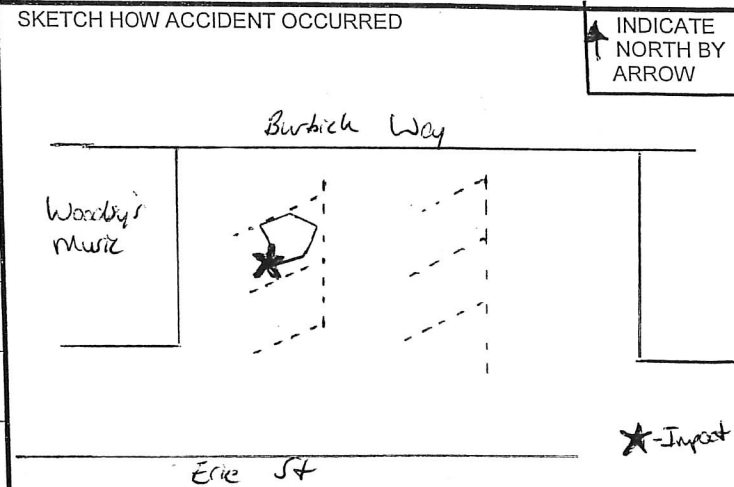


CR NUMBER 24-4993	ACCIDENT DATE 4/7/24	ACCIDENT TIME Between 0001 and 0250	DAY OF WEEK Sunday	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) Parking lot next to Burbick Way			WEATHER Clear	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB Lowe Joshua Paul 10/3/2002	DRIVER LAST FIRST MIDDLE DOB			
ADDRESS 3013 Green Acres Dr	ADDRESS			
CITY, STATE, ZIP PHONE NUMBER Youngstown OH 44505	CITY, STATE, ZIP PHONE NUMBER			
DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Lowe Scott Robert	VEHICLE OWNER'S NAME LAST FIRST MIDDLE			
ADDRESS 3013 Green Acres Dr	ADDRESS			
CITY, STATE ZIP PHONE NUMBER Youngstown OH 44505	CITY, STATE, ZIP PHONE NUMBER			
VEHICLE YEAR MAKE MODEL COLOR 2022 KIA K5 Chrome	VEHICLE YEAR MAKE MODEL COLOR			
LICENSE PLATE NUMBER STATE JNK 7514 OH	LICENSE PLATE NUMBER STATE			
INSURANCE COMPANY USA	INSURANCE COMPANY			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT Right rear fender, bumper, are broken off of vehicle. Paint scraped.	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT			
DESCRIBE HOW ACCIDENT OCCURRED Joshua had parked his car in the parking lot along Burbick Way. When he returned to his vehicle at approximately 0250 HRS he found the damage to the right rear bumper, fender, and scrapes above the wheel well. There was no attempt made by the person who struck the vehicle to make contact with him.				
OFFICER/SUPERVISOR SIGNATURE [Signature] #239			SKETCH HOW ACCIDENT OCCURRED 	
			Eric St ★-Impact	