

CR NUMBER 24-3717	ACCIDENT DATE 03-10-2024	ACCIDENT TIME 6:50 PM	DAY OF WEEK SUN	<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) 11032 E MAIN ST., KENT, OH 44240	WEATHER SNOW
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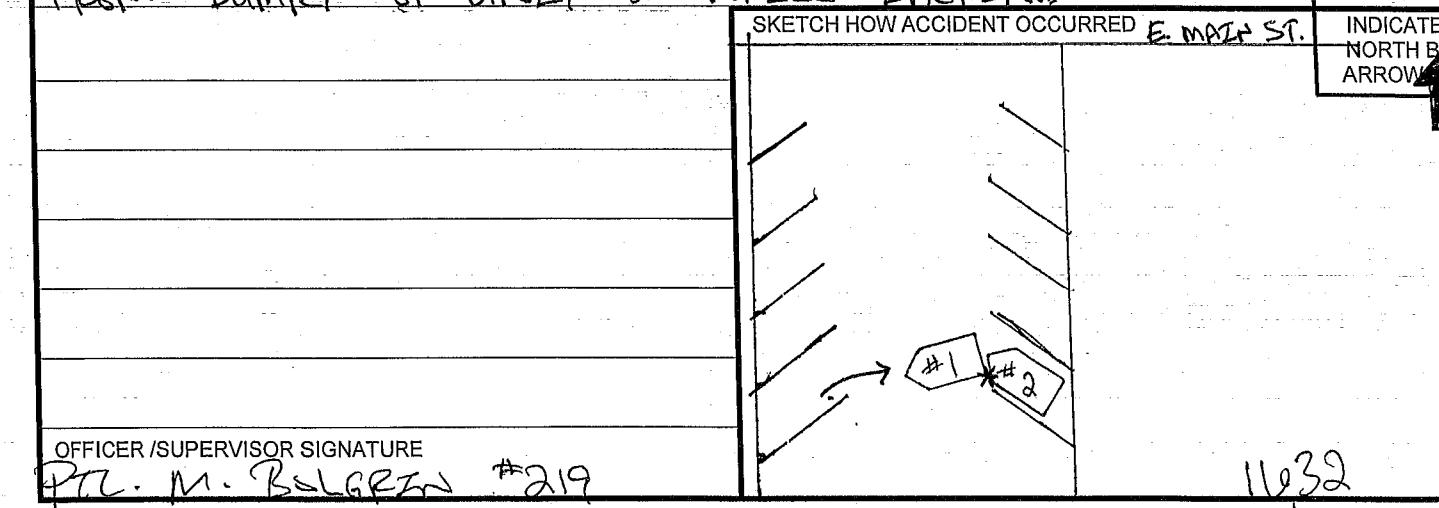
VEHICLE NO. 1	VEHICLE NO. 2 (OR PROPERTY DAMAGED)
DRIVER LAST FIRST MIDDLE DOB TORRES, DESTINY ROSE 02-11-2000	DRIVER LAST FIRST MIDDLE DOB * PARKED UNOCCUPIED *
ADDRESS 570 HARVEY ST, APT 102	ADDRESS
CITY, STATE, ZIP PHONE NUMBER KENT, OH 44240	CITY, STATE, ZIP PHONE NUMBER
DRIVER'S LICENSE NUMBER STATE OHIO	DRIVER'S LICENSE NUMBER STATE

VEHICLE OWNER'S NAME LAST FIRST MIDDLE SAME AS ABOVE	VEHICLE OWNER'S NAME LAST FIRST MIDDLE KAEHNE, BRIAN, JOHN
ADDRESS	ADDRESS 1005 WOODGLEN AVE
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER NEWTON FALLS, OH 44444

VEHICLE YEAR MAKE MODEL COLOR 2012 FORD FOCUS GRAY	VEHICLE YEAR MAKE MODEL COLOR 2012 DODGE CHALLENGER SILVER
LICENSE PLATE NUMBER STATE JKG 10032 OHIO	LICENSE PLATE NUMBER STATE JHC 4062 OHIO
INSURANCE COMPANY STATE FARM	INSURANCE COMPANY PROGRESSIVE
PARTS OF VEHICLE <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT DAMAGED REAR PASSENGER BUMPER	PARTS OF VEHICLE <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT DAMAGED FRONT DRIVER SIDE BUMPER

DESCRIBE HOW ACCIDENT OCCURRED

UNIT #1 WAS BACKING OUT OF A PARKING SPACE. UNIT #2 WAS LEGALLY PARKED IN A SPACE, ACROSS THE DRIVE, BEHIND UNIT #1. UNIT #1 STRUCK THE FRONT BUMPER OF UNIT #2 WHILE BACKING.



11032