

OR NUMBER <i>22-10654</i>	ACCIDENT DATE <i>06-27-22</i>	ACCIDENT TIME <i>0705</i>	DAY OF WEEK <i>Mon</i>	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) <i>600 N. Mantua St, Kent OH</i>			WEATHER <i>Clear</i>	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB <i>Kessinger, Michael A 09-03-86</i>	DRIVER LAST FIRST MIDDLE DOB <i>Batt, III Anthony E 09-18-1994</i>			
ADDRESS <i>11796 Mantua Center RD</i>	ADDRESS <i>4511 Vista Cir</i>			
CITY, STATE, ZIP PHONE NUMBER <i>Mantua OH 44255</i>	CITY, STATE, ZIP PHONE NUMBER <i>Kent OH 44240</i>			
DRIVER'S LICENSE NUMBER STATE <i>OH</i>	DRIVER'S LICENSE NUMBER STATE <i>OH</i>			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE <i>S.A.A</i>	VEHICLE OWNER'S NAME LAST FIRST MIDDLE <i>Green Travis A</i>			
ADDRESS	ADDRESS <i>1915 SR 59 LOT 144</i>			
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER <i>Kent OH 44240</i>			
VEHICLE YEAR MAKE MODEL COLOR <i>2016 Chev 1500 Blue</i>	VEHICLE YEAR MAKE MODEL COLOR <i>1994 Ford F450 white</i>			
LICENSE PLATE NUMBER STATE <i>7874PF OH</i>	LICENSE PLATE NUMBER STATE <i>PME706A OH</i>			
INSURANCE COMPANY <i>STATE Farm 842-5102-D14-35C</i>	INSURANCE COMPANY <i>Berkshire Hathaway Ins Co/OZAPB114108-01</i>			
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT <i>Dent in front L-fender</i>	PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT <i>Bumper</i>			
DESCRIBE HOW ACCIDENT OCCURRED				
<i>Unit 1 pulled into the Sheets parking lot and was driving w. to park. Unit 2 pulled away from the fuel pumps and struck Unit 1.</i>				
OFFICER/SUPERVISOR SIGNATURE <i>[Signature]</i>			SKETCH HOW ACCIDENT OCCURRED	
NOT TO SCALE				