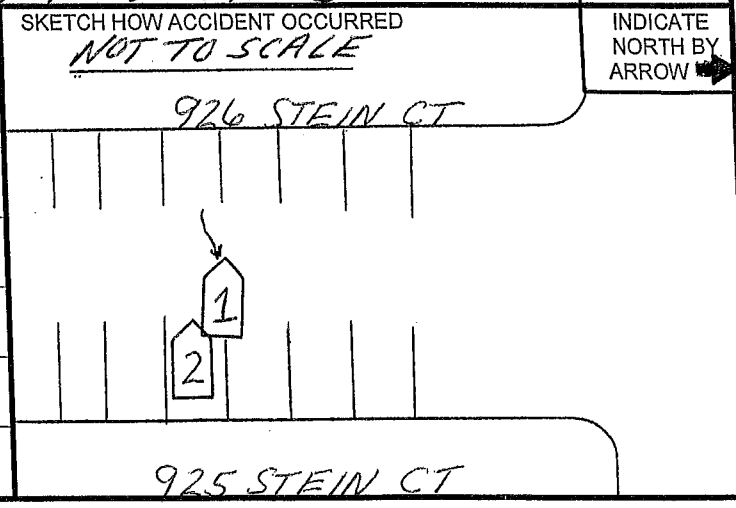


CR NUMBER 23-18934	ACCIDENT DATE 11-28-23	ACCIDENT TIME 1333	DAY OF WEEK TUE	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
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LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 925 Stein Ct	WEATHER Light Snow Flakes
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VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST FIRST MIDDLE DOB DAVIS, WINSTON 6-2-79	DRIVER LAST FIRST MIDDLE DOB								
ADDRESS 11021 LA ROSE AVE	ADDRESS								
CITY, STATE, ZIP PHONE NUMBER CLEVELAND, OH 44105	CITY, STATE, ZIP PHONE NUMBER								
DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE								
VEHICLE OWNER'S NAME LAST FIRST MIDDLE SAME	VEHICLE OWNER'S NAME LAST FIRST MIDDLE PINSON VERNON								
ADDRESS	ADDRESS 925 STEIN CT #204								
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER KENT, OH 44240								
VEHICLE YEAR MAKE MODEL COLOR 2006 GMC ENVOY TAN	VEHICLE YEAR MAKE MODEL COLOR 2013 CHEVY MALIBU BEIGE								
LICENSE PLATE NUMBER STATE KEB 4508 OH	LICENSE PLATE NUMBER STATE JGL4173 OH								
INSURANCE COMPANY UNKNOWN	INSURANCE COMPANY PROGRESSIVE #974666548								
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT	PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT								

DESCRIBE HOW ACCIDENT OCCURRED
 Unit 2 was parked unoccupied facing W/B in front of 925 Stein Ct. Unit 1 was parked facing W/B in front of 926 Stein Ct. Unit 1 backed up E/B and struck Unit 2 in the front, causing significant damage. Unit 1 driver never exited the vehicle and fled the scene.



OFFICER / SUPERVISOR SIGNATURE
 Lt. [Signature] #228