



CR NUMBER <b>24-8463</b>	ACCIDENT DATE <b>10/9/24</b>	ACCIDENT TIME <b>1201</b>	DAY OF WEEK <b>SUN</b>	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) <b>Firestone Parking Lot 202 E Main St</b>			WEATHER <b>No Adverse</b>	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB <b>SAME AS OWNER</b>			DRIVER LAST FIRST MIDDLE DOB <b>Parked + unoccupied</b>	
ADDRESS			ADDRESS	
CITY, STATE, ZIP PHONE NUMBER			CITY, STATE, ZIP PHONE NUMBER	
DRIVER'S LICENSE NUMBER STATE			DRIVER'S LICENSE NUMBER STATE	
VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>Marty Travis R</b>			VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>Perlik Jane Ellen</b>	
ADDRESS <b>251 Grant St.</b>			ADDRESS <b>1432 Colony Dr.</b>	
CITY, STATE, ZIP PHONE NUMBER <b>Ravenna, OH 44266</b>			CITY, STATE, ZIP PHONE NUMBER <b>Streetsboro, OH 44241</b>	
VEHICLE YEAR MAKE MODEL COLOR <b>2002 Chevy Trailblazer Red</b>			VEHICLE YEAR MAKE MODEL COLOR <b>2020 Chevy Equinox Red</b>	
LICENSE PLATE NUMBER STATE <b>FZW4966 OH</b>			LICENSE PLATE NUMBER STATE <b>EMA5242 OH</b>	
INSURANCE COMPANY <b>Progressive</b>			INSURANCE COMPANY <b>Grange</b>	
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT			PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT	
DESCRIBE HOW ACCIDENT OCCURRED <b>Unit 2 was parked an unoccupied in the Firestone parking lot. Unit 1 struck Unit 2 when reversing from a parking space -</b>				
OFFICER /SUPERVISOR SIGNATURE <b>[Signature] #251</b>			SKETCH HOW ACCIDENT OCCURRED	
			INDICATE NORTH BY ARROW  NOT TO SCALE	
				
			<b>Firestone 202 E Main St</b>	