



CR NUMBER 23-11057	ACCIDENT DATE 07-15-23	ACCIDENT TIME	DAY OF WEEK SATURDAY	<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) 238 E. MAIN ST KENT, OH 44720 (DRIVEWAY)	WEATHER CLOUDY / RAIN
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VEHICLE NO. 1	VEHICLE NO. 2 (OR PROPERTY DAMAGED)
DRIVER LAST FIRST MIDDLE DOB UNKNOWN	DRIVER LAST FIRST MIDDLE DOB PARKED, UNOCCUPIED
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	VEHICLE OWNER'S NAME LAST FIRST MIDDLE STANTON HOLLY RAE
ADDRESS	ADDRESS 3965 ALEESA DR SE
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER WARREN, OH 44484
VEHICLE YEAR MAKE MODEL COLOR	VEHICLE YEAR MAKE MODEL COLOR 2015 FORD MUSTANG RED
LICENSE PLATE NUMBER STATE	LICENSE PLATE NUMBER STATE HWU 4650 OHIO
INSURANCE COMPANY	INSURANCE COMPANY NATIONWIDE #9234J418692
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT REAR PASSENGER QUARTER PANEL

DESCRIBE HOW ACCIDENT OCCURRED

UNIT 2 WAS PARKED UNOCCUPIED IN THE DRIVEWAY OF 238 E. MAIN ST. AN UNKNOWN UNIT 1, SIDESWIPPED THE REAR PASSENGER SIDE OF UNIT 2.

OFFICER / SUPERVISOR SIGNATURE PTL M. BOLGREN #219 / Lt. [Signature] #228	SKETCH HOW ACCIDENT OCCURRED		INDICATE NORTH BY ARROW 						
									
				238					
						E. MAIN ST			