

CR NUMBER 21-13764	ACCIDENT DATE 8-25-21	ACCIDENT TIME 0235	DAY OF WEEK Wed.	<input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input checked="" type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 157 Lounge - 157 S. Water St.			WEATHER Clear / No Adverse	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Ray Alec William 10-3-99		DRIVER LAST FIRST MIDDLE DOB		
ADDRESS 714 Cloverleaf Ct.		ADDRESS		
CITY, STATE, ZIP PHONE NUMBER Mansfield, OH 44904		CITY, STATE, ZIP PHONE NUMBER		
DRIVER'S LICENSE NUMBER STATE OH		DRIVER'S LICENSE NUMBER STATE		
VEHICLE OWNER'S NAME LAST FIRST MIDDLE SAME AS ABOVE		VEHICLE OWNER'S NAME LAST FIRST MIDDLE Tritt Jeffery Paul		
ADDRESS		ADDRESS 2600 Norton Rd.		
CITY, STATE ZIP PHONE NUMBER		CITY, STATE, ZIP PHONE NUMBER Stow, OH 44224		
VEHICLE YEAR MAKE MODEL COLOR 2007 Volvo XC80 Black		VEHICLE YEAR MAKE MODEL COLOR 2015 GMC Acadia Blue		
LICENSE PLATE NUMBER STATE JMJ1640 OH		LICENSE PLATE NUMBER STATE GYZ2107 OH		
INSURANCE COMPANY Progressive		INSURANCE COMPANY		
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input checked="" 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		
DESCRIBE HOW ACCIDENT OCCURRED				
Unit 1 backed out of his parking spot behind 157 Lounge - 157 S. Water St. Unit 1's left rear struck Unit 2's right rear, causing minor damage.				
OFFICER / SUPERVISOR SIGNATURE Lt. Short #228		SKETCH HOW ACCIDENT OCCURRED		
		INDICATE NORTH BY ARROW		
		E. Erie St.		