

CR NUMBER <b>26-7686</b>	ACCIDENT DATE <b>05-17-26</b>	ACCIDENT TIME <b>1700</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>BACK PARKING LOT @ MIKE'S PLACE RESTAURANT: 1700 S. WATER ST., KENT, OH 44240</b>				WEATHER <b>CLEAR</b>

VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST FIRST MIDDLE DOB <b>KACKLEY, MYKAH, MARCE 05-08-03</b>	<b>* PARKED, UNOCCUPIED *</b>				DRIVER LAST FIRST MIDDLE DOB				
ADDRESS <b>1405 WESTWOOD AVE</b>					ADDRESS				
CITY, STATE, ZIP <b>ALLIANCE, OH 44601</b>	PHONE NUMBER				CITY, STATE, ZIP	PHONE NUMBER			
DRIVER'S SOCIAL SECURITY NUMBER					DRIVER'S SOCIAL SECURITY NUMBER				
DRIVER'S LICENSE NUMBER STATE <b>OH</b>					DRIVER'S LICENSE NUMBER STATE				
VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>INDEPENDENCE OF PORTAGE COUNTY</b>					VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>TRARES, WENDY, CATHERINE</b>				
ADDRESS <b>575 E. LAKE ST.</b>					ADDRESS <b>3528 WEBB RD</b>				
CITY, STATE, ZIP <b>RAVENNA, OH 44266</b>					CITY, STATE, ZIP <b>RAVENNA, OH 44266</b>				
VEHICLE YEAR MAKE MODEL COLOR <b>2019 FORD TRANSIT WHITE</b>					VEHICLE YEAR MAKE MODEL COLOR <b>2018 CHEVROLET MALIBU WHITE</b>				
LICENSE PLATE NUMBER STATE <b>206ZJN OHIO</b>					LICENSE PLATE NUMBER STATE <b>JDX 3713 OHIO</b>				
INSURANCE COMPANY <b>NATIONWIDE</b>					INSURANCE COMPANY <b>STATE FARM</b>				
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT <b>NO DAMAGE OBSERVED</b>					PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT <b>REAR BUMPER, CORNER (PASSENGER SIDE)</b>				

DESCRIBE HOW ACCIDENT OCCURRED

**UNIT #1 WAS PULLING INTO A PARKING SPOT. UNIT #2 WAS LEGALLY PARKED IN A PARKING SPOT. UNIT #1 STRUCK THE REAR BUMPER OF UNIT #2.**

OFFICER /SUPERVISOR SIGNATURE <b>PIG. M. BOLGRON #219</b>	SKETCH HOW ACCIDENT OCCURRED		INDICATE NORTH BY ARROW ↑ N S. WATER ST.
	* NOT TO SCALE *		