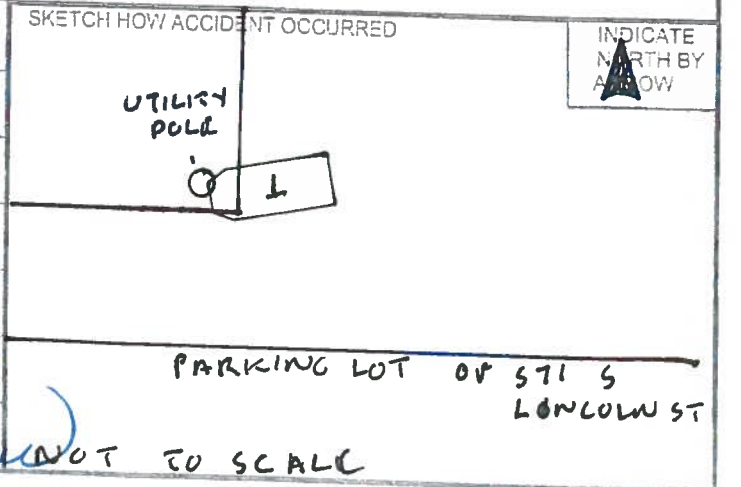


CR NUMBER 21-19367	ACCIDENT DATE 11/21/21	ACCIDENT TIME 0943	DAY OF WEEK SUN	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
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LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 571 S LINCOLN ST	WEATHER CLOUDY
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VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST FIRST MIDDLE DOB KUNKA LEONARD B	DRIVER LAST FIRST MIDDLE DOB								
ADDRESS 301 S DEPEYSTER ST	ADDRESS								
CITY, STATE, ZIP PHONE NUMBER KENT OH 44240 673-7732	CITY, STATE, ZIP PHONE NUMBER								
DRIVER'S LICENSE NUMBER STATE OH	DRIVER'S LICENSE NUMBER STATE								
VEHICLE OWNER'S NAME LAST FIRST MIDDLE CITY OF KENT	VEHICLE OWNER'S NAME LAST FIRST MIDDLE ALPHA XI DELTA								
ADDRESS 301 S DEPEYSTER ST	ADDRESS 571 S LINCOLN ST								
CITY, STATE, ZIP PHONE NUMBER KENT OH 44240 SAME	CITY, STATE, ZIP PHONE NUMBER KENT OH 44240 673-2445								
VEHICLE YEAR MAKE MODEL COLOR 2020 FORD EXPLORER GRAY	VEHICLE YEAR MAKE MODEL COLOR								
LICENSE PLATE NUMBER STATE IFMSK8A B3LGB23071	LICENSE PLATE NUMBER STATE								
INSURANCE COMPANY US SPECIALTY INS CO	INSURANCE COMPANY								
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT GRILL + FENDER	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT								

DESCRIBE HOW ACCIDENT OCCURRED
UNIT 1 WAS PULLING OUT OF THE PARKING LOT ONTO THE DRIVEWAY OF 571 S LINCOLN ST (WESTBOUND.) UNIT 1 RAN OFF THE RIGHT SIDE OF THE DRIVEWAY AND STRUCK A UTILITY POLE.



OFFICER / SUPERVISOR SIGNATURE
PTL DARRAH #0226

NOT TO SCALE
255