
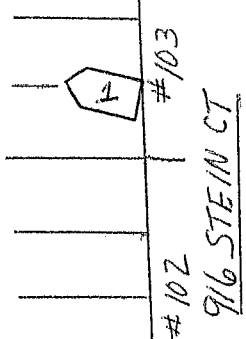


CR NUMBER 23-4529	ACCIDENT DATE 3-23-23	ACCIDENT TIME 1854	DAY OF WEEK THURS	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 916 STEIN CT #103 KENT OH 44240			WEATHER RAIN	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB	DRIVER LAST FIRST MIDDLE DOB			
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 GRUND, DANYELLE MARIE	VEHICLE OWNER'S NAME LAST FIRST MIDDLE VILLAGE OF FRANKLIN CROSSINGS			
ADDRESS 918 CARLISLE CT #201	ADDRESS 900 BART LN.			
CITY, STATE ZIP PHONE NUMBER KENT, OH 44240	CITY, STATE, ZIP PHONE NUMBER KENT, OH 44240			
VEHICLE YEAR MAKE MODEL COLOR 2019 DODGE JOURNEY WHT	VEHICLE YEAR MAKE MODEL COLOR			
LICENSE PLATE NUMBER STATE Q334642 OH	LICENSE PLATE NUMBER STATE			
INSURANCE COMPANY STATE FARM #3887041-SFP-35	INSURANCE COMPANY			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT	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 failed to control when backing E/B in the parking lot behind 916 Stein Ct. Unit 1 struck the building of 916 Stein Ct #103 causing damage to the building and Unit 1. There were no reported injuries.				
		SKETCH HOW ACCIDENT OCCURRED NOT TO SCALE		INDICATE NORTH BY ARROW 
				
OFFICER/SUPERVISOR SIGNATURE Pt. Fuller #221 / [Signature] #224				