

CR NUMBER 25-1130	ACCIDENT DATE 1-27-25	ACCIDENT TIME 7:30a-9:15a	DAY OF WEEK Monday	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1800 Rhodes Rd.			WEATHER no adverse	

VEHICLE NO. 1	VEHICLE NO. 2 (OR PROPERTY DAMAGED)
DRIVER LAST FIRST MIDDLE DOB unoccupied	DRIVER LAST FIRST MIDDLE DOB unknown
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 Mudiyanse, Ruwan	VEHICLE OWNER'S NAME LAST FIRST MIDDLE unknown
ADDRESS 1800 Rhodes Rd Apt. 701	ADDRESS
CITY, STATE ZIP PHONE NUMBER Kent, OH 44240	CITY, STATE, ZIP PHONE NUMBER
VEHICLE YEAR MAKE MODEL COLOR 2012 Honda Accord Gray	VEHICLE YEAR MAKE MODEL COLOR
LICENSE PLATE NUMBER STATE KGH2254 OH	LICENSE PLATE NUMBER STATE
INSURANCE COMPANY Progressive	INSURANCE COMPANY
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input 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 parked his vehicle at around 7:30am this morning. Unit 1 went to leave around 9:15am and noticed the driver side door had adent. Did not observe another vehicle with damage. No camera

footage.

OFFICER / SUPERVISOR SIGNATURE
[Signature] 254 / [Signature] #255

