25-150 85	Partie Action Control	ACCIDENT  DATE 10(19/25 TIME 11		72 DAY OF WEEK SV		od DAYLIGHT □ DAWN OR DUSK □ DARK
LOCATION OF ACCIDEN	T (STREET NUMBER OR	OTHER LOC	ATION DESCR	RIPTION)	WEATHER	
1625 S. Water	· 5+.	Mariana de como calenga e 100 Maria			V	Rain
VEHICLE NO. 1	VEHICLE NO. 2 (OR PROPERTY DAMAGED)					
DRIVER LAST FIRST MIDDLE DOB			DRIVER LAST FIRST MIDDLE DOB			
Jones Dalton M 7/1/94			Johnson, David E 10/4/78			
ADDRESS 4471 Woodglen St.			ADDRESS 3608 Mount Pleasant St. NE			
CITY, STATE, ZIP PHONE NUMBER Kent, OH 44240			CITY, STATE, ZIP PHONE NUMBER Canton, OH 44721			
DRIVER'S LICENSE NUMBER STATE 0 屮			DRIVER'S LICENSE NUMBER STATE			
VEHICLE OWNER'S NAME	VEHICLE OWNER'S NAME LAST FIRST MIDDLE					
ADDRESS			ADDRESS			
CITY, STATE ZIP	PHONE NUM	BER	CITY, STATE	, ZIP		PHONE NUMBER
	MAKE MODEL CHYUN Santafe		VEHICLE		MAKE	MODEL COLOR Colorado Silver
LICENSE PLATE NUMBER STATE KNP6298 OH			LICENSE PLATE NUMBER STATE KNA 6069 0+1			
INSURANCE COMPANY Style farm: 404 2162 - SFP - 35			INSURANCE COMPANY State Form 402 4607 - SFP- 35.			
PARTS OF DEFRONT VEHICLE	PARTS OF G FRONT G REAR G LEFT G RIGHT VEHICLE					
DAMAGED DESCRIBE HOW ACCID	ENT OCCURRED		DAMAGED			
unit 2 wa	s parked in f	ront o	1620	5 5.	water	St. Unit 1
1	he drive th					
Unit 2 d	in not see	د س	1 + 1	and	bac	ucd ont of
the parkin	g spot, int	o Un	71.			
	, ,		SKETCH	HOW ACCI	DENT OCCU	JRRED 1625 INDICATE
			$-1 \leftarrow$	IN r		ARROW
			Not -	F0		
			Scal	e		$\rightarrow$
	=				نسا	
		<del></del>				
					5, W	19tor St.
OFFICER /SUPERVIS	OR SIGNATURE /					
Lt J. NO	OR SIGNATURE	ans.				