

CR NUMBER 20-524	ACCIDENT DATE 01-08-20	ACCIDENT TIME 1507	DAY OF WEEK WED	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 132 W. School St (Parking lot)			WEATHER Cloudy	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Fankhauser Mark K. 02-04-70	DRIVER LAST FIRST MIDDLE DOB Walker-Albright Kearen Jean 11-30-55			
ADDRESS	ADDRESS 4630 King Meadow Trail			
CITY, STATE, ZIP	CITY, STATE, ZIP Kent OH 44240			
PHONE NUMBER	PHONE NUMBER			
DRIVER'S LICENSE NUMBER STATE RT920503 OH	DRIVER'S LICENSE NUMBER STATE RO-065625 OH			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Same	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Albright, Raymond W			
ADDRESS	ADDRESS 4630 King Meadow Trail			
CITY, STATE ZIP	CITY, STATE, ZIP Kent OH 44240			
PHONE NUMBER	PHONE NUMBER			
VEHICLE YEAR MAKE MODEL COLOR 2010 Lexus RX350 Grey	VEHICLE YEAR MAKE MODEL COLOR 2018 Toyota Camry Red			
LICENSE PLATE NUMBER STATE 6TY8885 OH	LICENSE PLATE NUMBER STATE HJT1744 OH			
INSURANCE COMPANY Eric # 0065114073	INSURANCE COMPANY State Farm # 676644305355			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT passenger door	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT Fender scratches			
DESCRIBE HOW ACCIDENT OCCURRED Unit 2 was stopped in a line of cars in the parking lot at 132 W. School St. Unit 1 sideswiped Unit 2 while driving through the lot.				
SKETCH HOW ACCIDENT OCCURRED *Not to scale 				
OFFICER / SUPERVISOR SIGNATURE Pt. Hadaway #2114 Lt. Ememoser #2209				