

CR NUMBER <b>26-7230</b>	ACCIDENT DATE <b>05/08/2026</b>	ACCIDENT TIME <b>1813 hrs.</b>	DAY OF WEEK <b>FRIDAY</b>	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) <b>SHEETZ, 600 N. MANTUA ST. KENT, OHIO 44240</b>				WEATHER <b>RAIN</b>
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB <b>SHAFFER-STRATHMAN, WILLIAM, EUGENE 5/5/1971</b>	DRIVER LAST FIRST MIDDLE DOB <b>MOONEY, RYAN, JAMES 07/11/1986</b>			
ADDRESS <b>1719 TULIP HILL DR.</b>		ADDRESS <b>1673 CALLANDER DR.</b>		
CITY, STATE, ZIP PHONE NUMBER <b>MIDLOTHIAN, VA 231122415</b>		CITY, STATE, ZIP PHONE NUMBER <b>HUDSON, OHIO 44236</b>		
DRIVER'S LICENSE NUMBER STATE <b>VA</b>		DRIVER'S LICENSE NUMBER STATE <b>OH</b>		
VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>SAME AS ABOVE</b>		VEHICLE OWNER'S NAME LAST FIRST MIDDLE <b>SAME AS ABOVE</b>		
ADDRESS		ADDRESS		
CITY, STATE ZIP PHONE NUMBER		CITY, STATE, ZIP PHONE NUMBER		
VEHICLE YEAR MAKE MODEL COLOR <b>2024 JEEP WRANGLER GRAY</b>	VEHICLE YEAR MAKE MODEL COLOR <b>2025 FORD RANGER GREEN</b>			
LICENSE PLATE NUMBER STATE <b>DANUPE VA</b>	LICENSE PLATE NUMBER STATE <b>JFK-2451 OH</b>			
INSURANCE COMPANY: <b>GEICO-4447656846</b>	INSURANCE COMPANY: <b>PROGRESSIVE:962161945</b>			
PARTS OF <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT VEHICLE <b>NONE OBSERVED</b> DAMAGED	PARTS OF <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT VEHICLE <b>SCRATCHES ON REAR BUMPER- DRIVERS SIDE</b> DAMAGED			
DESCRIBE HOW ACCIDENT OCCURRED				
UNIT 1 WAS PARKED BY THE AIR PUMPS. UNIT 2 WAS BACKING UP FROM PUMP 10. UNIT 2 BACKED INTO UNIT 1'S PASSENGER SIDE				
TIRES.				
OFFICER /SUPERVISOR SIGNATURE <i>[Signature]</i> #230 / <i>[Signature]</i> #214		SKETCH HOW ACCIDENT OCCURRED		
		INDICATE NORTH BY		
		Not To Scale		