



CR NUMBER 21-11638	ACCIDENT DATE 01-19-21	ACCIDENT TIME 1613	DAY OF WEEK Mon	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) Franklin Ave Gravel City Parking Lot			WEATHER Clear	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Moore, Brittany, A. 11-11-01	DRIVER LAST FIRST MIDDLE DOB McVeigh, Sherrice, A. 06-21-66			
ADDRESS 5298 Cline Rd	ADDRESS 430 W. Elm St			
CITY, STATE, ZIP Kent OH 44240	CITY, STATE, ZIP Kent OH 44240			
PHONE NUMBER	PHONE NUMBER			
DRIVER'S LICENSE NUMBER	DRIVER'S LICENSE NUMBER			
STATE OH	STATE OH			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Moore, David, L.	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Same			
ADDRESS 5298 Cline Rd.	ADDRESS			
CITY, STATE ZIP Kent OH 44240	CITY, STATE, ZIP			
PHONE NUMBER	PHONE NUMBER			
VEHICLE YEAR MAKE MODEL COLOR 2011 Kia Rio Black	VEHICLE YEAR MAKE MODEL COLOR 2008 Mercury Milan Silver			
LICENSE PLATE NUMBER STATE FKB5635 OH	LICENSE PLATE NUMBER STATE FOG9873 OH			
INSURANCE COMPANY State Farm # 85635210735D	INSURANCE COMPANY Trexis # 434003440138			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT Bumper / fender	PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT fender / Tire			
DESCRIBE HOW ACCIDENT OCCURRED Unit 2 was traveling southbound through the gravel parking lot northwest of Franklin Ave. Unit 1 backed into unit 2 as unit 2 was passing behind unit 1.				
			SKETCH HOW ACCIDENT OCCURRED Not to scale 	INDICATE NORTH BY ARROW
				
OFFICER/SUPERVISOR SIGNATURE [Signature]			Franklin Ave.	