

CR NUMBER 16-19302	ACCIDENT DATE 8-29-16	ACCIDENT TIME 1052	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) 1214 ANITA DR.			WEATHER SUNNY 80°	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB RANSOM, SHAMIKA M. 5-4-75		DRIVER LAST FIRST MIDDLE DOB JORDAN, JESSICA L. 1-26-93		
ADDRESS 5541 N. FREEDOM ST.		ADDRESS 1315 ANITA DR. #303		
CITY, STATE, ZIP PHONE NUMBER RAVENNA, OH 44266 330 903 6286		CITY, STATE, ZIP PHONE NUMBER KENT, OH 44240 330-554-8628		
DRIVER'S LICENSE NUMBER STATE RS986990 OH		DRIVER'S LICENSE NUMBER STATE TW559888 OH		
VEHICLE OWNER'S NAME LAST FIRST MIDDLE SAME		VEHICLE OWNER'S NAME LAST FIRST MIDDLE SAME		
ADDRESS 1		ADDRESS 1		
CITY, STATE ZIP PHONE NUMBER 1		CITY, STATE, ZIP PHONE NUMBER 1		
VEHICLE YEAR MAKE MODEL COLOR 2009 HYUNDAI SONATA GRAY		VEHICLE YEAR MAKE MODEL COLOR 2000 HONDA CRV SILVER		
LICENSE PLATE NUMBER STATE FTV 6276 OH		LICENSE PLATE NUMBER STATE GOW 1058 OH		
INSURANCE COMPANY THE GENERAL		INSURANCE COMPANY SAFE AUTO		
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT BUMPER		PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT BUMPER		
DESCRIBE HOW ACCIDENT OCCURRED UNIT #2 WAS BACKING UP WHEN IT STRUCK UNIT #1, CAUSING MINOR DAMAGE TO BOTH UNITS.				
OFFICER /SUPERVISOR SIGNATURE P. O. Roman #230 293		SKETCH HOW ACCIDENT OCCURRED 'NOT TO SCALE' 1214 ANITA DR		
		INDICATE BY ARROW		
		IMPACT AREA		
		1 2		