

CR NUMBER 17-11283	ACCIDENT DATE 05-27-17	ACCIDENT TIME 1014	DAY OF WEEK SAT	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1600 S. water St (Parking Lot)			WEATHER Clear	

VEHICLE NO. 1	VEHICLE NO. 2 (OR PROPERTY DAMAGED)
DRIVER LAST FIRST MIDDLE DOB Kuhns Ashley Jo Lynette 07-02-92	DRIVER LAST FIRST MIDDLE DOB Heritage Jeannette J. 12-13-90
ADDRESS 860 Cleveland Rd #E	ADDRESS 8600 STHY 44 2
CITY, STATE, ZIP PHONE NUMBER Ravenna OH 44266 330-968-5232	CITY, STATE, ZIP PHONE NUMBER Ravenna OH 44266 330-687-9170
DRIVER'S LICENSE NUMBER STATE TP318007 OH	DRIVER'S LICENSE NUMBER STATE TG526838 OH
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Same	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Heritage Jason
ADDRESS	ADDRESS 8600 STAT 44
CITY, STATE ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER Ravenna OH 44266 330-687-9189
VEHICLE YEAR MAKE MODEL COLOR 2008 Chevrolet Impala Red	VEHICLE YEAR MAKE MODEL COLOR 2007 Ford Fusion Grey
LICENSE PLATE NUMBER STATE GXT1621 OH	LICENSE PLATE NUMBER STATE GRZ4464 OH
INSURANCE COMPANY Gimbel-SSV3401807130-3	INSURANCE COMPANY Nationwide 9234P350664
PARTS OF <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT VEHICLE DAMAGED Scratches / paint	PARTS OF <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT VEHICLE DAMAGED Side scratches / dents
DESCRIBE HOW ACCIDENT OCCURRED Unit 1 was backing out of a parking spot as unit 2 was driving westbound through the lot at 1600 S. water St. Unit 1 backed into unit 2 causing minor damage.	
OFFICER / SUPERVISOR SIGNATURE 	SKETCH HOW ACCIDENT OCCURRED <div style="text-align: center;"> 1600 S. water St → N <small>* Not to scale</small> </div> <div style="text-align: center; margin-top: 20px;"> </div>