

CR NUMBER 17-12140	ACCIDENT DATE 6/8/17	ACCIDENT TIME 1827	DAY OF WEEK Thu	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1218 Dean Ct. Kent.			WEATHER No Adverse	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Unoccupied	DRIVER LAST FIRST MIDDLE DOB Unknown			
ADDRESS		ADDRESS		
CITY, STATE, ZIP		CITY, STATE, ZIP		
PHONE NUMBER		PHONE NUMBER		
DRIVER'S LICENSE NUMBER		DRIVER'S LICENSE NUMBER		
STATE		STATE		
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Burston, Shalanda M		VEHICLE OWNER'S NAME LAST FIRST MIDDLE Unknown		
ADDRESS 358 Town Square Dr.		ADDRESS		
CITY, STATE ZIP Kent, OH 44240		CITY, STATE, ZIP		
PHONE NUMBER (216) 303-3587		PHONE NUMBER		
VEHICLE YEAR MAKE MODEL COLOR 2008 Chry Sebring Red	VEHICLE YEAR MAKE MODEL COLOR			
LICENSE PLATE NUMBER STATE E575739 OH-temp	LICENSE PLATE NUMBER STATE			
INSURANCE COMPANY		INSURANCE COMPANY		
PARTS OF <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT VEHICLE DAMAGED	PARTS OF <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT VEHICLE DAMAGED			
DESCRIBE HOW ACCIDENT OCCURRED Unit 1 was parked in the lot at 1218 Dean Ct. From approx. 1200-1827 another unknown vehicle struck unit 1. Unit 1 had damage to front left of the vehicle. No suspects. Owner of unit 1 did not know who her insurance was through.				
OFFICER/SUPERVISOR SIGNATURE Bursting 210		SKETCH HOW ACCIDENT OCCURRED		
		INDICATE NORTH BY ARROW 		
		"Not to scale"		
		1218		
		(Empty space for additional sketch details)		