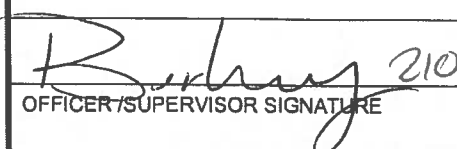


CR NUMBER 17-12140	ACCIDENT DATE 6/8/17	ACCIDENT TIME 1827	DAY OF WEEK Thu	DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1218 Dean Ct. Kent.			WEATHER No Adverse	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Unoccupied		DRIVER LAST FIRST MIDDLE DOB Unknown		
ADDRESS		ADDRESS		
CITY, STATE, ZIP PHONE NUMBER		CITY, STATE, ZIP PHONE NUMBER		
DRIVER'S LICENSE NUMBER STATE		DRIVER'S LICENSE NUMBER STATE		
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Burstons, Shalaunda M		VEHICLE OWNER'S NAME LAST FIRST MIDDLE Unknown		
ADDRESS 358 Town Square Dr.		ADDRESS		
CITY, STATE ZIP PHONE NUMBER Kent, OH 44240 (216) 303-3587		CITY, STATE, ZIP 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 		SKETCH HOW ACCIDENT OCCURRED "Not to Scale"		
		<div style="border: 1px solid black; padding: 10px; width: fit-content;"> <p>INDICATE NORTH BY ARROW</p> <p>Dean Ct. ↓</p> <p>1</p> </div>		
		1218		