

CR NUMBER 17-23108	ACCIDENT DATE 11-16-17	ACCIDENT TIME 1100	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) 931 E. Main St (Parking lot)			WEATHER Cloudy	
VEHICLE NO. 1		VEHICLE NO. 2 (OR PROPERTY DAMAGED)		
DRIVER LAST FIRST MIDDLE DOB Walter, Emily M. 02-13-96	DRIVER LAST FIRST MIDDLE DOB			
ADDRESS 7210 Lonesome Pine Tr.	ADDRESS			
CITY, STATE, ZIP PHONE NUMBER Medina OH 44256 330-483-2047	CITY, STATE, ZIP PHONE NUMBER			
DRIVER'S LICENSE NUMBER STATE TM374057 OH	DRIVER'S LICENSE NUMBER STATE			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Walter, Warren C.	VEHICLE OWNER'S NAME LAST FIRST MIDDLE DeLuca, Irma			
ADDRESS 7210 Lonesome Pine Tr.	ADDRESS 1121 Sharlene Dr.			
CITY, STATE ZIP PHONE NUMBER Medina OH 44256 330-483-2047	CITY, STATE, ZIP PHONE NUMBER Youngstown OH 44511 330-727-5915			
VEHICLE YEAR MAKE MODEL COLOR 2010 Mazda 6 Black	VEHICLE YEAR MAKE MODEL COLOR 2017 Honda HRV Silver			
LICENSE PLATE NUMBER STATE FX3331 OH	LICENSE PLATE NUMBER STATE HGM3250 OH			
INSURANCE COMPANY Erie - 2055103780	INSURANCE COMPANY			
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT Scratches	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT Scratches			
DESCRIBE HOW ACCIDENT OCCURRED Unit 1 was pulling into a parking space at 931 E. Main St and sideswiped unit 2.				
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>OFFICER /SUPERVISOR SIGNATURE P.J. Madaway 216 / dt [Signature] #241</p> </div> <div style="width: 50%;"> <p>SKETCH HOW ACCIDENT OCCURRED</p> <div style="text-align: right;"> <p>N → #101 to scale</p> </div> </div> </div>				