

LOCAL REPORT NO. 21-066594

ENGLEWOOD POLICE PRIVATE PROPERTY ACCIDENT REPORT

REPORT NUMBER
21-066594

REPORT TAKEN <input type="checkbox"/> AT STATION <input checked="" type="checkbox"/> AT SCENE		NO OF VEHICLES PEDESTRIANS INVOLVED 02		HIT SKIP <input type="checkbox"/> SOLVED <input type="checkbox"/> UNSOLVED		
IN COUNTY OF MONTGOMERY	DATE 09/02/2021	DAY THU	TIME MILITARY 9:00	DATE REPORTED 09/02/2021	DAY REPORTED Thu	TIME REPORTED 9:04

ACCIDENT OCCURRED
1100 W NATIONAL RD

<input checked="" type="checkbox"/> LIGHT	<input checked="" type="checkbox"/> WEATHER	<input checked="" type="checkbox"/> ROAD CONDITIONS	DRIVER/WITNESS STATEMENT(S)
1 DAY LIGHT 2 DAWN 3 DUSK	4 DARK NO LIGHTS 5 DARK-LIGHTED 6 OTHER	1 NO ADVERSE WEATHER 2 RAIN 3 SNOW	4 FOG 5 HIGH WIND 6 OTHER
1 DRY 2 WET 3 SNOW	4 ICE 5 DIRT/SAND 6 OTHER	<input checked="" type="checkbox"/> VERBAL <input type="checkbox"/> WRITTEN	

A UNIT NO. 01	NO OF OCCUPANTS 02	OPERATING <input checked="" type="checkbox"/>	PARKED <input type="checkbox"/>	DRIVERLESS <input type="checkbox"/>	HIT&RUN <input type="checkbox"/>	NON CONTACT <input type="checkbox"/>	INSURANCE CO. STATE FARM	PHONE NUMBER (937) 492-3444
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DRIVER PEDESTRIAN NAME (LAST, FIRST, MI) KNECHT, DANIEL, P	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 4437 SATELLITE AVE DAYTON OH, 45315
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PHONE NO. redacted per ORC 14	BIRTH DATE 12/07/1988	AGE 32	SEX M	DRIVERS LICENSE NUMBER redacted per ORC 4501:1-12	STATE OH	SOCIAL SECURITY NUMBER XXX-XX-XXXX
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OWNER (IF SAME AS DRIVER, WRITE SAME) KNECHT, KITEARA, ELAYNA JADE	ADDRESS 4437 SATELLITE AVE, DAYTON, OH, 45415	PHONE NUMBER redacted
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VEHYR 2012	MAKE Toyota	MODEL Camry	COLOR GREY	STYLE 4D	STATE OH	LICENSE PLATE NO. HES9865	TOWING SERVICE	VEH/PED DIR FROM N To S
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CIRCLE DAMAGE AREAS	9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER	DAMAGE SEVERITY <input checked="" type="checkbox"/> NON-FUNCTIONAL <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING	DAMAGE SCALE <input type="checkbox"/> NONE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY	VEHICLE DISPOSITION <input checked="" type="checkbox"/> DRIVEN AWAY <input type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED	FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE
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B UNIT NO. 02	NO OF OCCUPANTS 03	OPERATING <input checked="" type="checkbox"/>	PARKED <input type="checkbox"/>	DRIVERLESS <input type="checkbox"/>	HIT&RUN <input type="checkbox"/>	NON CONTACT <input type="checkbox"/>	INSURANCE CO. PROGRESSIVE	PHONE NUMBER (888) 671-4405
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DRIVER PEDESTRIAN NAME (LAST, FIRST, MI) SONDEREGGER, DECEMBER, ROSE	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 6708 MORROW DR CLAYTON OH, 45415
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PHONE NO. red per ORC 149.43(A)	BIRTH DATE 11/25/1985	AGE 35	SEX F	DRIVERS LICENSE NUMBER redacted per ORC 4501:1-12	STATE OH	SOCIAL SECURITY NUMBER XXX-XX-XXXX
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OWNER (IF SAME AS DRIVER, WRITE SAME) SONDEREGGER, CHAD, WAYNE	ADDRESS 6708 MORROW DR, DAYTON, OH, 45415	PHONE NUMBER redacted
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VEHYR 2018	MAKE Chevrolet	MODEL Suburban	COLOR BLUE	STYLE SW	STATE OH	LICENSE PLATE NO. 628ZLC	TOWING SERVICE	VEH/PED DIR FROM N To S
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CIRCLE DAMAGE AREAS	9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER	DAMAGE SEVERITY <input checked="" type="checkbox"/> NON-FUNCTIONAL <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING	DAMAGE SCALE <input type="checkbox"/> NONE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY	VEHICLE DISPOSITION <input checked="" type="checkbox"/> DRIVEN AWAY <input type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED	FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE
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DESCRIBE WHAT HAPPENED
REFER TO UNITS BY NUMBER

Unit #1 and Unit #2 were traveling in a through lane in the private property parking lot of 1100 W National Rd. (Klept Early Learning Center).

Unit #1 failed to maintain and assured clear distance ahead and struck Unit #2.

RECEIVED CALL 9:04	CLEARED 9:28	OFFICER'S NAME Ofc. S.E. Tharp	BADGE NO. 214	CHECKED BY 139
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