

LOCAL REPORT NO. 21-083639

ENGLEWOOD POLICE PRIVATE PROPERTY ACCIDENT REPORT

REPORT NUMBER
21-083639

REPORT TAKEN <input type="checkbox"/> AT STATION <input checked="" type="checkbox"/> AT SCENE		NO OF VEHICLES PEDESTRIANS INVOLVED 2		HIT SKIP <input type="checkbox"/> SOLVED <input type="checkbox"/> UNSOLVED <input type="checkbox"/>		
IN COUNTY OF MONTGOMERY	DATE 11/07/2021	DAY SUN	TIME MILITARY 17:55	DATE REPORTED 11/07/2021	DAY REPORTED Sun	TIME REPORTED 17:55

ACCIDENT OCCURRED
115 E WENGER RD

<input checked="" type="checkbox"/> 3 LIGHT	<input checked="" type="checkbox"/> 1 WEATHER	<input checked="" type="checkbox"/> 1 ROAD CONDITIONS	DRIVER/WITNESS STATEMENT(S) <input checked="" type="checkbox"/> VERBAL <input type="checkbox"/> WRITTEN
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		

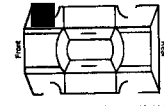
A UNIT NO. 01	NO OF OCCUPANTS 01	OPERATING <input checked="" type="checkbox"/>	PARKED <input type="checkbox"/>	DRIVERLESS <input type="checkbox"/>	HIT&RUN <input type="checkbox"/>	NON CONTACT <input type="checkbox"/>	INSURANCE CO. GEICO	PHONE NUMBER (800) 207-7847
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DRIVER PEDESTRIAN NAME (LAST, FIRST, MI) STEWART, TEVIN, GEOVONTA	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 2800 W HILLCREST AVE DAYTON OH, 45406
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PHONE NO. redacted per ORC 14	BIRTH DATE 07/28/1992	AGE 29	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) SAME	ADDRESS SAME	PHONE NUMBER redacted
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VEH YR 2020	MAKE Kia	MODEL Sorento	COLOR GREY	STYLE SW	STATE OH	LICENSE PLATE NO. JKQ6868	TOWING SERVICE	VEH/PED DIR FROM S To E
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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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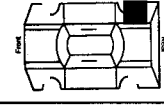
B UNIT NO. 02	NO OF OCCUPANTS 01	OPERATING <input checked="" type="checkbox"/>	PARKED <input type="checkbox"/>	DRIVERLESS <input type="checkbox"/>	HIT&RUN <input type="checkbox"/>	NON CONTACT <input type="checkbox"/>	INSURANCE CO. ALLSTATE	PHONE NUMBER (937) 836-3300
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DRIVER PEDESTRIAN NAME (LAST, FIRST, MI) SWANSON, LOWELL, KERMIT	ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 507 S MAIN ST APT 910 ENGLEWOOD OH, 45322
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PHONE NO. red per ORC 149.43(A)	BIRTH DATE 02/24/1962	AGE 59	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) SAME	ADDRESS SAME	PHONE NUMBER redacted
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VEH YR 2017	MAKE Chevrolet	MODEL Equinox	COLOR MAROON	STYLE SW	STATE OH	LICENSE PLATE NO. JLY8356	TOWING SERVICE	VEH/PED DIR FROM W To E
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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 was leaving Popeyes chicken and was making a right turn to leave. Unit 2 had backed up then was proceeding straight to leave the parking lot. Unit 2 did not have to stop to leave the parking lot. Unit 1 would have had to yield to traffic leaving the parking lot. Unit 1 had passenger side front end damage. Unit 2 had passenger side rear damage.

Unit 1 insurance police number: 6082000768 Geico
Unit 2 insurance police number: 992898101 Allstate

RECEIVED CALL 17:55	CLEARED 18:40	OFFICER'S NAME Ofc. T.J. Ricker	BADGE NO. 249	CHECKED BY 139
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