

REPORT # 16-1227	REPORTING AGENCY CAMBRIDGE P.D.	N.C.I.C. 3001	REPORT TAKEN <input type="checkbox"/> AT STATION <input checked="" type="checkbox"/> AT SCENE	NO. VEH. INVOLVED 1	CRASH SEVERITY <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO
HIT SKIP Solved <input type="checkbox"/> Unsolved <input type="checkbox"/>	IN COUNTY OF GUERNSEY	IN CITY OF CAMBRIDGE	DATE OF CRASH 2/24/2016	TIME:MILITARY 00:39	
UNIT ERROR 1	PHOTOS TAKEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CAMBRIDGE POLICE DEPARTMENT PRIVATE PROPERTY CRASH REPORT			
CRASH OCCURRED ON / AT INTERSECTION Tractor Supply Parking Lot					

UNIT # 1	# OF OCC. 1	DRIVERS NAME (LAST, FIRST, MIDDLE) Porter, Dawn M.					
ADDRESS (STREET, CITY, STATE, ZIP CODE) 530 CO RT 58, Mexico NY 13114							
DATE OF BIRTH 6/11/1968	DRIVER LICENSE #942 084 022	STATE NY	PHONE (HOME)	PHONE WORK/CELL 1-800-99809100	LICENSE PLATE NO. 1039oc	STATE Nebraska	
OWNERS NAME Crete Trucking			OWNERS ADDRESS				
VEHICLE INFORMATION	YEAR	MAKE	MODEL	COLOR Red	INSURANCE Hartford Ins Police # SO- EASR20503	TOW SERVICE	OWNER PHONE 1-800-99809100

UNIT #	# OF OCC.	DRIVERS NAME (LAST, FIRST, MIDDLE)					
ADDRESS (STREET, CITY, STATE, ZIP CODE)							
DATE OF BIRTH / /	DRIVER LICENSE #	STATE	PHONE (HOME)	PHONE WORK/CELL	LICENSE PLATE NO.	STATE	
OWNERS NAME			OWNERS ADDRESS				
VEHICLE INFORMATION	YEAR	MAKE	MODEL	COLOR	INSURANCE	TOW SERVICE	OWNER PHONE

DESCRIBE WHAT HAPPENED: REFER TO UNITS BY NUMBER

While attempting to turn around in the parking lot of Tractor Supply, Unit 1 struck a pole with the drivers side of her trailer. This caused the pole to fall over.

RECEIVED CALL 39:52	DISPATCHED 00:39	ARRIVED 00:41	CLEARED 1:09	OTHER TIME 0	TOTAL TIME 28 mins	DATE CRASH REPORTED 2/24/2016
OFFICERS NAME Ptl. Baker		BADGE # 79	CHECKED BY		BADGE #	DATE REPORT FILED 2/24/2016
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