

REPORT # 15-8454	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 2	CRASH SEVERITY <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO
HIT SKIP Solved <input type="checkbox"/> Unsolved <input checked="" type="checkbox"/>	IN COUNTY OF GUERNSEY	IN CITY OF CAMBRIDGE	DATE OF CRASH 11 / 09 / 2015	TIME:MILITARY 1923	
UNIT ERROR	PHOTOS TAKEN <input type="checkbox"/> YES <input type="checkbox"/> NO	CAMBRIDGE POLICE DEPARTMENT PRIVATE PROPERTY CRASH REPORT			
CRASH OCCURRED ON / AT INTERSECTION Clark St. at Circle K					

UNIT # 1	# 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

UNIT # 2	# OF OCC. 0	DRIVERS NAME (LAST, FIRST, MIDDLE) Bugay, Joesph D					
ADDRESS (STREET, CITY, STATE, ZIP CODE) 68004 Lofland Rd							
DATE OF BIRTH 04/28/1975	DRIVER LICENSE # #UC934686	STATE oh	PHONE (HOME)	PHONE WORK/CELL	LICENSE PLATE NO. 480YUX	STATE oh	
OWNERS NAME Joseph Bugay			OWNERS ADDRESS same				
VEHICLE INFORMATION	YEAR 2005	MAKE Ford	MODEL Taurus	COLOR silver	INSURANCE Geico	TOW SERVICE	OWNER PHONE

DESCRIBE WHAT HAPPENED: REFER TO UNITS BY NUMBER

Unit 2 was parked at Circle K and Unit 1 backed into Unit 2 causing damage to the passenger side door of Unit 2.

RECEIVED CALL 1923	DISPATCHED 1923	ARRIVED 1925	CLEARED 1935	OTHER TIME 30	TOTAL TIME 42	DATE CRASH REPORTED 11/09/2015
OFFICERS NAME Harper	BADGE # 83	CHECKED BY	BADGE #	DATE REPORT FILED / /		
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