

REPORT # 15-8939	REPORTING AGENCY CAMBRIDGE P.D.	N.C.I.C. 3001	REPORT <input type="checkbox"/> AT STATION TAKEN <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 type="checkbox"/>	IN COUNTY OF GUERNSEY	IN CITY OF CAMBRIDGE	DATE OF CRASH 12 / 1 / 15	TIME:MILITARY 11:26	
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 YMCA parking lot					

UNIT # 1	# OF OCC. 1	DRIVERS NAME (LAST, FIRST, MIDDLE) TIFFANY M. MILHOAN					
ADDRESS (STREET, CITY, STATE, ZIP CODE) 6739 CLAY PIKE RD CAMBRIDGE, OH 43725							
DATE OF BIRTH 11/19/1981	DRIVER LICENSE #RU066721	STATE Oh	PHONE (HOME) 740-255-3623	PHONE WORK/CELL	LICENSE PLATE NO. GEZ6850	STATE Oh	
OWNERS NAME TROY MILHOAN			OWNERS ADDRESS SAME				
VEHICLE INFORMATION	YEAR 2014	MAKE FORD	MODEL F-150	COLOR BLACK	INSURANCE UNITED OHIO INS. CO	TOW SERVICE	OWNER PHONE

UNIT # 2	# OF OCC. 1	DRIVERS NAME (LAST, FIRST, MIDDLE) LORI L. WOLFE					
ADDRESS (STREET, CITY, STATE, ZIP CODE) 6606 SARCHETS RUN RD CAMBRIDGE, OH 43725							
DATE OF BIRTH 10/13/1963	DRIVER LICENSE #RL482583	STATE OH	PHONE (HOME) 740-584-0632	PHONE WORK/CELL	LICENSE PLATE NO. BFZ8646	STATE Oh	
OWNERS NAME TIM WOLFE			OWNERS ADDRESS SAME				
VEHICLE INFORMATION	YEAR 2007	MAKE PONTIAC	MODEL	COLOR GREY	INSURANCE STATE FARM	TOW SERVICE	OWNER PHONE

DESCRIBE WHAT HAPPENED: REFER TO UNITS BY NUMBER

UNIT 1 WAS BACKING OUT OF A PARKING SPOT. UNIT 1 THEN STRUCK UNIT 2 THAT WAS PARKED IN A PARKING SPOT. UNIT 2 HAS A SMALL SCRATCH ON THE LEFT SIDE OF THE FRONT BUMPER AND UNIT 1 NO DAMAGE. UNIT 1 IS AT FAULT.

RECEIVED CALL 11:26	DISPATCHED 11:26	ARRIVED 11:33	CLEARED 11:48	OTHER TIME 30	TOTAL TIME 52	DATE CRASH REPORTED 12/1/2015
OFFICERS NAME Smith	BADGE # 80	CHECKED BY	BADGE #	DATE REPORT FILED / /		
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