



# STOW POLICE DEPARTMENT

PRIVATE PROPERTY ACCIDENT REPORT/MINOR  
TRAFFIC ACCIDENT REPORT

INCIDENT NUMBER  
**24-009590**

DATE  
**06.15.2024**

TIME  
**1648 HRS.**

Private Property  Private Property - Hit/Skip  Minor Traffic Accident

LOCATION - ADDRESS  
**4240 KENT RD. STOW, OH 44224**

VEHICLE #1

DRIVER #1 - NAME (Last, First, Middle) \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SSN \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ DRIVER'S LICENSE NUMBER \_\_\_\_\_ STATE \_\_\_\_\_

OWNER #1 - NAME (Last, First, Middle)  SAME AS DRIVER #1 \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SSN \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ DRIVER'S LICENSE NUMBER \_\_\_\_\_ STATE \_\_\_\_\_

VEHICLE LICENSE# \_\_\_\_\_ STATE \_\_\_\_\_ YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_

INSURANCE COMPANY \_\_\_\_\_ POLICY NUMBER \_\_\_\_\_

PARTS OF VEHICLE DAMAGED \_\_\_\_\_ CONTRIBUTING CIRCUMSTANCES \_\_\_\_\_

VEHICLE #2

DRIVER #2 - NAME (Last, First, Middle)  
**HAFFNER, LOUIS, R.** PHONE \_\_\_\_\_

ADDRESS  
**3434 LAKEVIEW BLVD.** CITY **STOW** STATE **OH** ZIP **44224**

SSN \_\_\_\_\_ DATE OF BIRTH **06.08.1974** DRIVER'S LICENSE NUMBER \_\_\_\_\_ STATE **OH**

OWNER #2 - NAME (Last, First, Middle)  SAME AS DRIVER #2 \_\_\_\_\_ PHONE \_\_\_\_\_

**ENTERPRISE RENTAL COMPANY**

ADDRESS  
**5130 HUDSON DR.** CITY **HUDSON** STATE **OH** ZIP **44236**

SSN \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ DRIVER'S LICENSE NUMBER \_\_\_\_\_ STATE \_\_\_\_\_

VEHICLE LICENSE #  
**BR6 0945** STATE **TN** YEAR **2024** MAKE **NISSAN** MODEL **ROBUE** COLOR **SILVER**

INSURANCE COMPANY  
**GEICO INS. CO.** POLICY NUMBER **35882**

PARTS OF VEHICLE DAMAGED  
**RIGHT REAR QUARTER PANEL** CONTRIBUTING CIRCUMSTANCES  
**NONE (PARKED CAR)**

DESCRIBE WHAT HAPPENED

**UNIT #2 WAS PARKED APPROXIMATELY 20 SPACES EAST OF THE KOHL'S FRONT ENTRANCE. UNIT #1 STRUCK UNIT #2 AS IT WAS PARKED IN A MARKED PARKING SPOT, UNATTENDED. UNIT #1 IS UNKNOWN WITH NO WITNESSES. UNIT #1 FLED THE SCENE. UNIT #2 SUSTAINED DAMAGE TO THE RIGHT REAR QUARTER PANEL.**

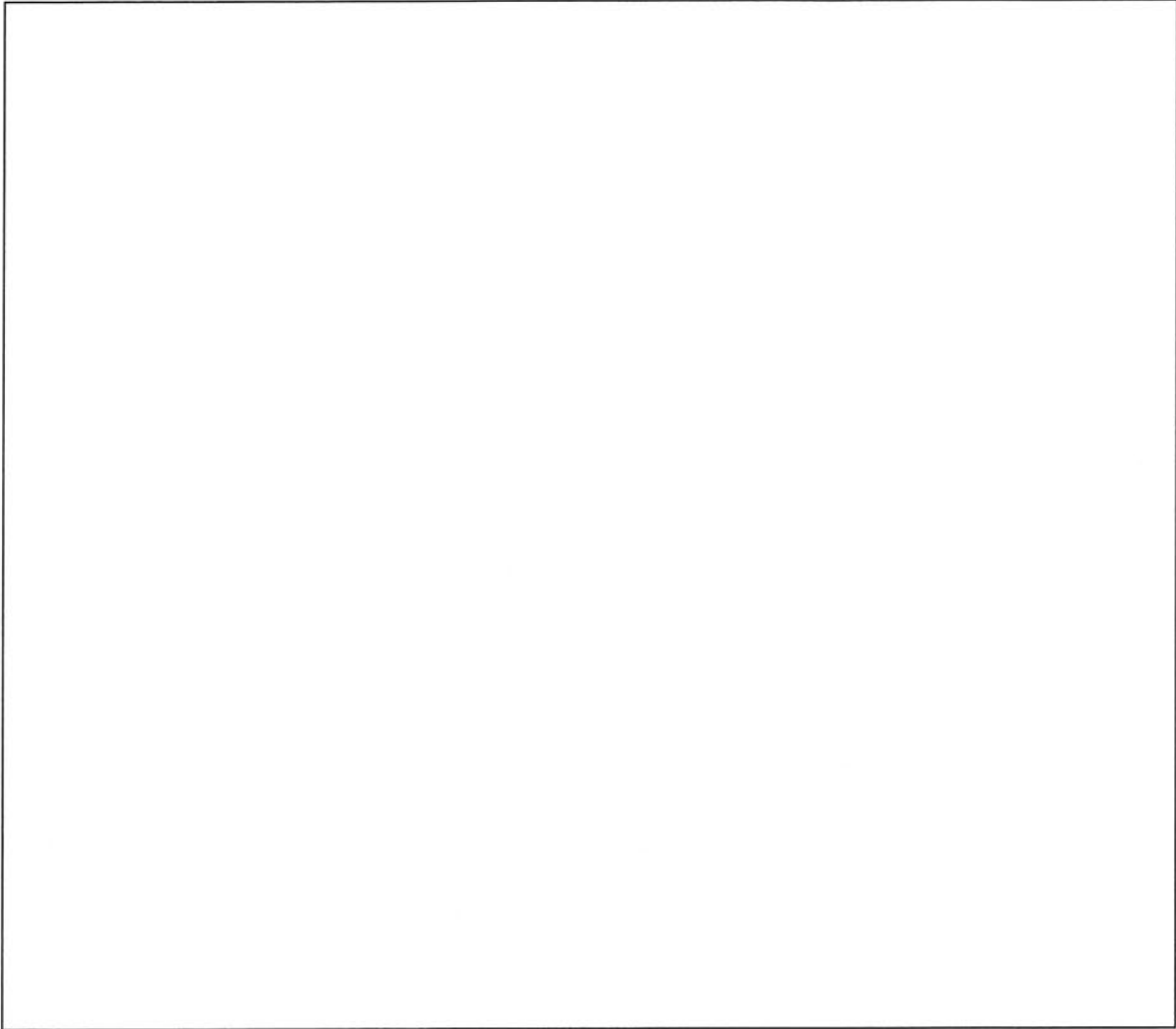
See Reverse Side for Diagram

SUBMITTED BY:  
**R. SIMONE U-769** DATE  
**06.15.2024**

APPROVING OFFICER:  
**SA J-Y-#117** DATE  
**06.15.24**

# STOW POLICE DEPARTMENT

## FIELD SKETCH (not drawn to scale)



### WEATHER

- CLEAR
- RAIN
- SNOW
- FOG
- OTHER

### LIGHT

- DAYLIGHT
- DAWN
- DUSK
- DARK – LIGHTED ROAD
- DARK – NOT LIGHTED
- DARK – UNK LIGHTING
- UNKNOWN

### SURFACE

- DRY
- WET
- SNOW
- ICE
- OTHER

### ROAD

- CONCRETE
- BLACKTOP
- DIRT
- OTHER

LOCAL REPORT NUMBER 24-009590	REPORTING AGENCY Stow Police Dept.	DATE OF CRASH M 06   D 15   Y 24
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FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, LOUIS HAFNER HEREBY MAKE THIS VOLUNTARY STATEMENT TO  
PRINTED

P. SIMONE U-769 AT Stow Police Dept.  
OFFICER'S NAME LOCATION

I parked outside of Kohl's in the Stow Shopping Center at about 4:00 PM today. After making a purchase, I had been inside the store for about 10 minutes. The vehicle was parked about 20 spaces away from the building directly in front of Kohl's. I came out at 4:10 PM and found damage on the right side of the rear bumper.

Q) WERE YOU OR ANYONE ELSE INSIDE THE VEHICLE AT THE TIME?

A) NO. LHH

Q) DID YOU SEE THE CRASH OCCUR?

A) NO. LHH

Q) WAS THERE ANY OTHER WITNESSES?

A) NO. LHH

Q) IS THERE ANY DESC. FOR THE VEHICLE THAT STRUCK YOU?

A) NO. LHH

Q) WHAT WAS THE DAMAGED AREA OF YOUR CAR?

A) (R) REAR QUARTER PANEL. LHH

Q) DO YOU HAVE ANYTHING ELSE TO ADD TO THIS? A) NO. LHH

ADDRESS OF WITNESS 3434 LAKEVIEW BLVD, Stow OH 44224	PHONE [REDACTED]
SIGNATURE OF WITNESS X <i>[Signature]</i>	OFFICER'S SIGNATURE X <i>[Signature]</i> - 769