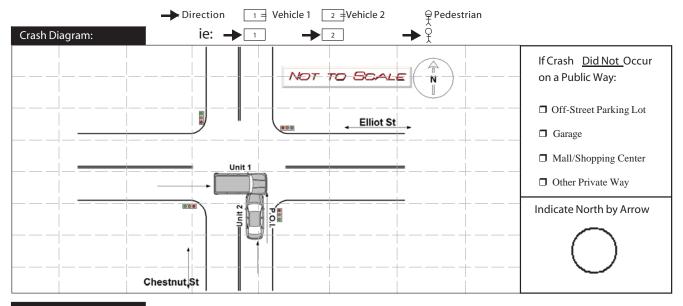
| | Poli | ce Use Only | | Commonwea | alth (| of Mass | ach | use | tts | |] | RMV | Documo | ent Number | |
|--------------------------------------|----------------------------------------------------|-----------------------------------|-----------------------------------------------------------------------------|-----------------------------|----------------------------------------|-------------------------------------------------|-----------|----------|-------------------|--------------------|------------------|-----------------|---------------------------|---------------------------------------------|------------|
| | Date of Crash | Time of Crash | 1 | Motor Motor | · Veh | nicle Cra | ash | | | lumber njured | Speed Latitud | | 25 | State Police Local Police MBTA Police | □ Xi |
| | 01/26/2019 | 09:58 24HR | NEWTON | Po | lice | Report | | 2 | |) | Longit | | | MBTA Police Other: | |
| | | AT INTER | RSECTION | < | LOCA | TION | > | | | NOT | AT II | NTE | RSEC' | TION: | 2 |
| | NOR | TH CHEST | NUT ST | | | | | | | | | | | | 2 |
| $egin{bmatrix} 1 \\ 1 \end{bmatrix}$ | Route# Direc | tion | Name | of Roadway/Street | | Route# Directi | ion A | ddress | # | | Name | e of Ro | oadway/S | treet | 2 |
| | EAST ELLIOT ST | | | | | Feet NSEW of • or | | | | | | 2 | | | |
| | Route# Direc | | | ting Roadway/Street | | | - 1 | | | Mile Ma | | | | Exit Number | _ |
| | | | | ersection with | | Feet NSEW of Route# Intersecting Roadway/Street | | | | | | - L | | | |
| 2 1 | | | | | | Feet NSEW of | | | | | | | | 3 | |
| \equiv | Route# Direc | tion | Name of Inter | secting Roadway/Street | | | | | _ | | | Lanc | lmark | | |
| 3 | XVehicle1 | 1_#Occupants | Hit/Ru | n Moped Case | Number | • | 1 | 190000 | 0109 | | | | | | |
| | License# | | St ¹ | MA DOB/Age | Pag# | 147NF4 | | | D | og Type | PAN | | Reg Si | tata MA | |
| | Sex_F_ Lic. 0 | Class D 18 15 | | 19 | _ | _{Zear} 2017 | | | | | | | | 20 | - |
| 4 | | INN | | Endorsment A | | | | | | | | | | iig. | - 1 |
| 3 | ll . | RRIAGE LANE | First | Middle | | (Same as ope | | | 1 | | | | Middle | | - 1 |
| | City MEDFIE | | | State MA Zip 02052 | | ess | | | | | | | 7: | in | - |
| | ' | pany ALLSTATI | | Zip | | le Action Prior t | | . [| 21 | | | | | ircle Up to Thr | _ |
| 5 | 1 | Direction: N | | esponding to Emergency? | | | | | 1 22 22 | | | 3 | | | |
| 1 | | | | sponding to Emergency? | | Sequence 1 | 2 | 3 | | | | $ \mathcal{L} $ | | 10 Undercari | riage |
| | , | ssued) | | on 2: ChSec | | Harmful Event | | 1 24 | 4 2 | 1 4 | ⊢ | 9 | . ! | 5 11 Totaled | |
| ⁶ 1 | 1 | | | on 4: ChSec | | r Contributing C | | 1 7 |] | 8 | | 7 | | 5 | |
| 1 | | | | cupants involved | Under | rride/Override | | | Fowed Y | 28 29 ag Airbag | 30 Eject | 31 Frap Ir | 32 3 | 33 | 1 |
| | Name (Last Fir | | | Address | | Age/DOB | Sex | Pos. \$ | ystem Stat | us Switch | Code | code 5 | njury Trans tatus Code | sp. e Medical Facil | 1 1 |
| | Operator | | | See Above | | | | | 1 4 | 99 | 0 | 0 5 | 5 1 | | _ |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| ⁷ 2 | Please Select C of the Followi | | 2 <u>1</u> #Occupa | nnts Non-Motorist A Ty | уре | 14 Action | 15 Loc | cation | 16 | Conditi | on | 17 | Hit/ | Run Mop | ed |
| | License# | | St_ ¹ | MA DOB/Age | Reg # 49A810 Reg Type PAN Reg State MA | | | | | tate_MA | _ | | | | |
| | Sex_M Lic. Class 99 18 18 Lic. Restrictions 99 CDL | | | | | Veh Year 2015 Veh Make MAZDA Veh Config. 1 | | | | | fig. 20 | | | | |
| ⁸ 1 | Operator SAN | NAGUARAY | MANUEL | Endorsment JESUS QUIJOSA | C. Owne | | | | | | | _ | | | |
| 1 | Address 16 CC | DNNECTICUT F | PLACE First | Middle | Addre | 2SS 73 NORTH | WARR | EN AV | /ENUE | First | | | Middle | | _ |
| | City BROCK | TON | | State_MA Zip 02301 | City BROCKTON State MA Zip 02301 | | | | | | | ip_02301 | | | |
| | Insurance Com | pany ALLSTATI | E | | | le Action Prior t | o Crash | ı [| 21 | Da | maged A | Area C | Code: (Ci | ircle Up to Thr | ee) |
| | Vehicle Travel | _ | | Responding to Emergency? | | Sequence 1 | 22 2 | | 22 22 | 0 | | 3 | | 4 | |
| | Citation # (If I | | Most Harmful Event 1 23 | | | | | | iage | | | | | | |
| | Violatio | | Driver Contributing Code 3 24 19 24 5 11 Totaled | | | | | | | | | | | | |
| | Violatio | Underride/Override 25 Towed Y 6 | | | | | | | | | | | | | |
| | Pl | | 26 27 28 29 30 31 32 33 Seat Safety Airbag Airbag Eject Frap Injury Fransp. | | | | 33 sp. | \dashv | | | | | | | |
| | Name (Last Fi | rst Middle) Non-Motorist | | Address See Above | | Age/DOB | Sex | Pos. | System Sta 1 3 | stus Switch | Code | Code S | Status Coo | | lity |
| | Орегатог | 1,011 1410101151 | | See Above | | | 1 | | 1 3 | 99 | U | 0 | <i>y</i> 1 | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | · · | | | | | | | | | | | | | |



Crash Narrative:

On 01/26/19 at 09:58 hours, I responded to a two car motor vehicle accident at Chestnut and Elliot Streets with no reported injuries. Both streets are public ways and maintained by the City of Newton.

Operator of M/V # 1 (Quinn) states that she was stopped at the intersection of the above mentioned intersection going (EB) on Elliot Street. Once she received the green light signal she proceeded straight through and was struck by M/V # 2 on her passenger side. The vehicle sustained heavy damage to the passenger side front quarter panel area and it was towed by Tody's towing.

Operator of M/V # 2 (Sanaguaray) states that he was operating straight ahead (NB) on Chestnut

Street. He states that he thought the signal light was yellow when he proceeded through and does not recall what happened next. The vehicle sustained heavy front end damage and it was towed by Tody's towing.

(Continued on next page)

| Witnesses: | | | |
|----------------------------|-------------------|---------|-----------|
| Name (Last, First, Middle) | Address | Phone # | Statement |
| | 300 SECOND AVE | | |
| CHERSON , KAREN, T | NEEDHAM,MA 02494 | | N |
| | 12 WALPOLE STREET | | |
| QUACKENBUSH , JOHN, | DOVER,MA 02030 | | N |

| Truck and Bus Information: | Registration # | (From Vehic | ele Section) | | 25 |
|-------------------------------|---------------------|---------------|--------------------|---------------|-------------------|
| Carrier Name | | | | Carrier Issui | ng Authority Code |
| Address | | City | | St | Zip |
| US DOT #: | | Issuing State | ICC #: | | _ Interstate 36 |
| Cargo Body Type Code Gross | s Vehicle Weight 38 | | | 39 | |
| Trailer Reg #: | Reg Type Reg State | Reg Year | Trailer Lengt | th | |
| Hazmat Information: | | | | | |
| Placard 40 Material 1 digit # | Material Name | | Material 4 digit # | | Release code 42 |

| | → Direction | 1 = Veh | icle 1 | 2 = Vehicle 2 | ₽ Pedestr | an | | |
|-----------------------------|----------------------|----------|----------|-----------------|-----------------------|----------------|---------------------------------------------|-----------|
| Crash Diagram: | ie: → [| 1 | →_ | 2 | → $\hat{\xi}$ | | | |
| | | | | | | | If Crash <u>Did Not</u> on a Public Way: | Occur |
| | | _ | | | | | ☐ Off-Street Parkin | g Lot |
| | | | | | | | ☐ Garage | |
| | | | | | | | ☐ Mall/Shopping C | enter |
| | - — — — - | _ | | | + | | ☐ Other Private Wa | y |
| | - — — | _ | | | | | Indicate North by <i>F</i> | Arrow |
| | - — — — — - | | | + | | | | |
| | | | | | | | () | |
| | | _ | | | | | | |
| Crash Narrative: | | | | | | | | |
| There were two witnesses | s to the accider | nt. The | e first | one, Karen | Cherson, st | ated tha | t she was traveli | .ng |
| behind M/V # 2 when she | observed him sp | eeding | and run | n through th | e red light | striking | M/V # 1. She sa | id that |
| the light was red by at | least two secon | nds when | n M/V # | 2 went thro | ugh it. | | | |
| The second witness, John | n Quackenbush, s | states 1 | he was o | operating be | hind M/V # | l when he | observed their t | ravel |
| lane receive the green i | light signal. N | 1/V # 1 | then at | ttempted to | proceed thre | ough the | intersection when | it was |
| struck on the passenger | | | | | | | | |
| Based on the two witness | | | | | | | | |
| the above mentioned inte | | | | _ | | | | |
| operating a motor vehic | le without a li | cense a | and was | issued a MA | Uniform Ci | tation # | T1441052 for Ch. | 89/9 |
| (Continued | d on next page) | | | | | | | |
| Witnesses: | | 1 | | | | | 21 " | 16 |
| Name (Last, First, Middle) | | Addr | ess | | | | Phone # | Statement |
| | | | | | | | | |
| | | | | | | | | |
| Property Damage: | | | | | | | | |
| Owner (Last, First, Middle) | Address | | | Phone # | 34-Type | Description of | of Damaged Property | |
| | | | | | | | | |
| | | | | | | | | |
| Truck and Bus Information: | Registration # | | | (From | Vehicle Section) | | | |
| Carrier Name | | | | | | Ca | rrier Issuing Authority Co | de 35 |
| Address | | | | City | | S | t Zip | |
| US DOT #: | State Number | | | Issuing State _ | ICC #: | | Interstate | 36 |
| Cargo Body Type Code 37 | Gross Vehicle Weight | 38 | | | | | | |
| Trailer Reg #: | Reg Type | Re | eg State | Reg Yea | ur Tra | iler Length | 39 | |
| Hazmat Information: | | | | | | L | | |
| Placard 40 Material 1 di | git # 41 Materia | l Name | | | Material 4 d | ligit # | Release code | 42 |
| JEREMY L WILSON | | | 2522 | 7 | NEWTON POLICE DEPARTM | | 01/26/2 | 2019 |

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)

| - | Direction 1 = | Vehicle 1 2 | ≠Vehicle 2 | ₽Pedestria | n | |
|----------------------------------------------------|---------------------|---------------|-------------------|----------------------------------|---------------------------------------------|-----------|
| Crash Diagram: | ie: → 1 | 2 | | → ĝ | | |
| | | | | | If Crash <u>Did Not</u> on a Public Way: | _Occur |
| | | | | | Off-Street Parkin | ng Lot |
| | | | | | ☐ Garage | 15 201 |
| | _ | | | | | |
| | | | | | ☐ Mall/Shopping (| |
| | | | | | ☐ Other Private Wa | ay |
| | | | | +- | Indicate North by | Arrow |
| | | | | | | |
| Crash Narrative: | | | | | | |
| | | | | | five years and was assign | gned a |
| number of #S19552221 thro | ugh the MA RMV bu | it it shows i | no license | status. | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| W itnesses: Name (Last, First, Middle) | | Address | | | Phone # | Statement |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Property Damage: | | | T = | | | |
| Owner (Last, First, Middle) | Address | | Phone # | 34-Type D | Description of Damaged Property | |
| | | | | | | |
| | | | | | | |
| Truck and Bus Information: | Registration # | | (From | Vehicle Section) | | |
| Carrier Name | | | | | Carrier Issuing Authority Co | ode 35 |
| Address | | | City | | St Zip | |
| US DOT #: | State Number | | _ Issuing State _ | ICC #: | Interstate | 36 |
| Cargo Body Type Code 37 Gr | ross Vehicle Weight | 38 | | | | |
| Trailer Reg #: | Reg Type | Reg State | Reg Yea | ar Trail | er Length 39 | |
| Hazmat Information: | | | | | | |
| Placard 40 Material 1 digit | # 41 Material Nam | ne | | Material 4 dig | git # Release code | 42 |
| | | | | | | |
| JEREMY L WILSON Police Officer Name (Please Print) | Signature | 25227 | ID/Badge # | Newton Police Departs Department | 01/26/ Precinct/Barracks Da | |
| TORCE OTHER INTINE (FIERSE FIIIII) | Signature | | 12/Dauge # | Department | i icenico Darracks Da | |

CDP1 11 ·24·00