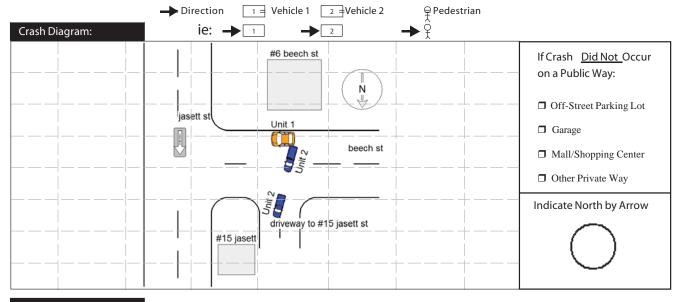
Date of Crash 02/08/2019 Time of Crash 11:02 AHR NEWTON NEWTON Police Report Police Police Police Police Police Police Police Police Police Report Police Report Police Report Police Po	2 2 1
AT INTERSECTION: AT INTERSECTION: Case Number Case	
Route# Direction Name of Roadway/Street At Route# Direction Name of Roadway/Street Route# Direction Name of Intersecting Roadway/Street Also at Intersection with Route# Direction Name of Intersecting Roadway/Street Feet N S E W of Route# Direction Name of Intersecting Roadway/Street Feet N S E W of Route# Direction Roadway/Street Feet N S E W of Route# Intersecting Roadway/Street Landmark License# St_DOB/Age Reg # 3PV346 Reg Type PAN Reg State MA	210
At Feet N S E W of Mile Marker Exit Number	313
Feet NSEW of Mile Marker Exit Number Route# Direction Name of Intersecting Roadway/Street Also at Intersection with Route# Direction Name of Intersecting Roadway/Street Route# Direction Name of Intersecting Roadway/Street SEW of Route# Intersecting Roadway/Street	
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with Also at Intersection with Feet NSEW of Route# Direction Name of Intersecting Roadway/Street Feet NSEW of Landmark 3	3
Feet N S E W of	31
3	-
License # St DOB/Age Reg # 3PV346	4
18 18 19	
Sex Lic. Class Lic. Restrictions CDL Veh Year 2019 Veh Make VOLK Veh Config. 1	
Endorsment	
Operator Operator	1 12
Address	
Incurance Company GOVT EMPLOYEES Valida Action Prior to Creak 21 Damaged Area Code; (Circle Up to Three	e)
Vehicle Travel Direction: N S W Responding to Emergency? Event Sequence 1 22 22 22 22 3 4	
Citation # (If Issued) 10 Undercarr 5 11 Totaled	ige
Violation 1: ChSec Violation 2: ChSec Driver Contributing Code 1 24 24	
Violation 3: ChSec Violation 4: ChSec Underride/Override	
Please fill out for operator and all occupants involved Name (Last First Middle) Address Age/DOB Ag	<u>2</u> 2
Operator See Above	_
	_
7	
Please Select One of the Following: Vehicle 2 0 #Occupants Non-Motorist A Type 14 Action 15 Location 16 Condition 17 Meticle 17 Mop	ed .
License # St DOB/Age Reg # 969-WR4	7
Sex Lic. Class	
Operator Owner Owner Last First Middle Last First Middle	
Address Address	
City State Zip City State Zip Ushicle Action Prior to Crash Damaged Area Code: (Circle Up to Three Company	e)
Vehicle Travel Direction: N K E W Responding to Emergency? Event Sequence 2 22 22 22 22 3 4	
Citation # (If Issued) 10 Undercarr 5 11 Totaled	ıge
Violation 1: ChSec Violation 2: ChSec Driver Contributing Code 19 24 24	
Violation 3: ChSec Violation 4: ChSec Underride/Override	_
Please fill out for operator and all occupants involved Name (Last First Middle) Address Age/DOB Sex Age/DOB	ty
Operator/Non-Motorist See Above	_
	\dashv



Crash Narrative:

Owner of vehicle #1 reports that a waste management driver alerted her that he observed a blue F250 pickup truck back up from the driveway across from her and hit her vehicle on the rear drivers side. operator of suspect truck then pulled back into the driveway before backing out again heading east towards jasett st. witness gave possible ma registration of 969-wr4 but the plate didn't match the description of the vehicle. I will check with residents of property of #15 jasett to see if they know anyone who operates a blue F250. There was no answer at the door at this time.

On February 10th, i went back to #15 jasett st and spoke with Jesse Grillo and told her about this accident.

i asked her if she new anyone who drove a blue ford f250 that might have came to her home looking for her or her husband? She stated no.

		i	
	Phone #	Statement	
		Y	
Phone #	34-Type	Description of Damaged Property	
		Carrier Issuing Authority Co	35 de
Issuing State	ICC #:_	Interstate	36
		39	
Reg Year	Tr		
	_ Material 4	digit # Release code	42
	(From Ver	Phone # 34-Type	Phone # 34-Type Description of Damaged Property

THOMAS J MCCARTHY			NEWTON POLICE DEPARTM	02/08/2019	
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date