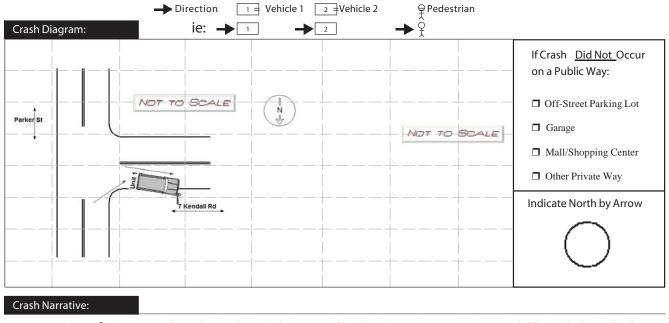
	Polic	ce Use Only		Commonweal	lth o	f Mass	achi	usett	S		RM	V Docu	ıment l	Number	
	ate of Crash 2/14/2019	Time of Crash 10:41 24HR	City/Town	Motor		icle Cra Report	ash	Numbe Vehicle		red La	eed Lim		Stat Loc MB Oth	te Police cal Police TA Police ter:	N N D
			SECTION:		OCAT		>				Γ INT		CTI	ON:	
						WEST	7		KEN	DALL I	ROAD				2
1 Ro	oute# Directi	ion		oadway/Street	R	Route# Directi	on A	ddress #		N	Name of I	Roadwa	y/Stree	t	_ 2 10
	At					Feet NSEW of or Exit Number							4 Namelson		
Ro	oute# Direct	ion N	Jame of Intersecting Also at Interse		<u> </u>	Feet	N S E	w of	IVIII	ie marke	1		EXI	t Number	
2			Also at interse	ction with			N S E		Rou	ite#	Intersec	cting Ro	adway/	Street	1
2 Ro	oute# Directi	ion —	Name of Intersecti	ng Roadway/Street	[- 1 ~ 1 -				La	ndmark			$-\frac{1}{1}$
3 X	Vehicle1	1_#Occupants	Hit/Run	Moped Case N	lumber		1	90000018	9						7
		•	St MA		Reg#8	RYK456				т Р	AN	D	G	МА	4
	cense#_ 	18 D		DOB/Age	_	ar 2004		h Maka T						20	
		Last		Endorsment SIMA HAEJOO		WEISSMAN La									1
1 Ad	ddress 52 HE	Last ATHERLAND	ROAD First	Middle	Address	S 52 HEATHE	st RLANI	ROAD	First			Midd	le		1
Cit	ty NEWTON	1	State	MA Zip 02461									2461		
Ins	surance Comp	oany COMMER	CE		Vehicle	Action Prior t	o Crash	1	21	Damag	ged Area	Code:	(Circle	Up to Three	e)
5 Vel	ehicle Travel	Direction: N	S E X Respon	nding to Emergency?	Event S	Sequence 40		2 22	22	O	3		4		
Cit	tation # (If Is	sued)			Most H	Iarmful Event	31 23		24	1	9			0 Undercarria 1 Totaled	ge
6				: ChSec	Driver	Contributing C	ode 25	1 24	24	8	7		6		
⁶ 3				: ChSec	Underri	ide/Override		Tow	red N		30 31	32			1:
N	Please fi		ator and all occupa	Address		Age/DOB	Sex	Seat Safety Pos. System	7 28 y Airbag m Status S	Airbag Ejo Switch Co	30 31 ect Trap ode Code	32 Injury Status	ransp.	Medical Facility	07
	Operator			See Above				1	4	99 0	0	5	1		
	ease Select O the Followin	Vehicle	# Occupants	Non-Motorist A Type	14	4 Action	Loc	eation	16 Co	ondition	17	ı	lit/Run	Море	d
Lic	License # St DOB/Age Sex Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsment				Reg # Reg Type Reg						eg State				
- 1					Veh YearVeh MakeVeh Config.							20			
8 Op	perator	Last	First	Middle	Owner	La	st		First			Midd	le		
- 1	ddress				Address	s									
Cit	ty		State	Zip	J						State				
	surance Comp				Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)									;)	
Vehicle Travel Direction: NSEW Responding to Emergency?					Event Sequence 10 Undercarriage								ıge		
Cit	Citation # (If Issued)					Most Harmful Event 5 11 Totaled									
	Violation 1: ChSec Violation 2: ChSec Violation 3: ChSec Violation 4: ChSec						Driver Contributing Code Underride/Override Towed 8 7 6								
<u> </u>				ccupants involved	Unutill	overing.				29 Airbag Ej	30 31 Trap	32 Injury T	33 ransp.		\dashv
1	Name (Last Fire	st Middle) Non-Motorist		Address See Above		Age/DOB	Sex	Pos. Syste	em Status	Switch C	ode Code		Code	Medical Facilit	у
	орегают/1	.511 1110101131		500 710070											



Operator of MV # 1 states that she took a right turn off of Parker Street on to Kendall Road when she lost control due to snow and ice on the right side of the road. The vehicle then veered off to the right over the curb and struck a United States Post Office Relay Mailbox knocking it completely over. The mailbox was located in front of 7 Kendall Road. No injuries reported by the operator and the vehicle sustained minor front end damage to the right side. I did observe an accumulation of snow and ice on the right side of Kendall Road that came out approximately one foot from the curb.

Newton Center Post Office was notified regarding the mailbox. There was no mail in the box at the time.

Witnesses:										
Name (Last, First, Middle)	Address		Phone	Phone #						
Property Damage:	·									
Owner (Last, First, Middle)		Phone #	34-Type	Description of Dama	scription of Damaged Property					
Truck and Bus Information: Registration #(From Vehicle Section) 35										
Carrier Name					Carrier Issu	uing Authority Cod	e			
Address		(City		St	Zip				
US DOT #:	State Number		_ Issuing State	ICC #:_		Interstate	36			
Cargo Body Type Code Gross Vehicle Weight 38										
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr	ailer Length 39					
Hazmat Information:										
Placard 40 Material 1 digit #	Material Nar	me		Material 4	digit #	_ Release code	42			

JEREMY L WILSON		25227	NEWTON POLICE DEPARTM		02/14/2019
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date