



→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

WASHINGTON STREET

WALNUT PK

IMPACT AREA

V1

V2

N

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

Indicate North by Arrow

**Crash Narrative:**

On the above date/time I responded to the area of Washington Street at Walnut Pk for a report of a crash involving two motor vehicles.

Upon arrival I met with the operator of vehicle one Mr. Wang, he stated he was traveling west on Washington Street in the left lane. He stated vehicle two pulled out of Walnut Pk striking his vehicle on the passenger side.

I spoke to the operator of vehicle two, Ms. Bing stated she was on Walnut Pk facing south she stated she looked left (east) then looked right (west) and did not observe any vehicles. She stated as she was looking right she traveled through the intersection to turn left (east) onto Washington Street, she stated vehicle one was in a blind spot and did not observe vehicle one until the last second and stopped.

(Continued on next page)

**Witnesses:**

Name (Last, First, Middle)	Address	Phone #	Statement

**Property Damage:**

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property

**Truck and Bus Information:**

Registration # \_\_\_\_\_ (From Vehicle Section)

Carrier Name \_\_\_\_\_ Carrier Issuing Authority Code

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate

Cargo Body Type Code  Gross Vehicle Weight

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length

**Hazmat Information:**

Placard  Material 1 digit #  Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code

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#### Crash Diagram:



If Crash Did Not Occur  
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Indicate North by Arrow



#### Crash Narrative:

She stated vehicle one turned into her vehicle.

Also in her vehicle were her three children who were all in child seats.

YIZE ZHAO d.o.b. 4-20-14

sitting in second seat right side

LEZHAN ZHAO-JIANG d.o.b. 5-4-16

sitting third row left side

LEYI ZHAO- JIANG d.o.b. 5-4-16

sitting third row right side.

There were no reported injuries and all parties were advised of the process.

#### Witnesses:

Name (Last, First, Middle)	Address	Phone #	Statement

#### Property Damage:

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property

#### Truck and Bus Information:

Registration # \_\_\_\_\_ (From Vehicle Section)

Carrier Name \_\_\_\_\_ Carrier Issuing Authority Code 35

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate 36

Cargo Body Type Code 37 Gross Vehicle Weight 38

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length 39

#### Hazmat Information:

Placard 40 Material 1 digit # 41 Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code 42

ROCCO D MARINI

13963

NEWTON POLICE DEPART

02/26/2019

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date