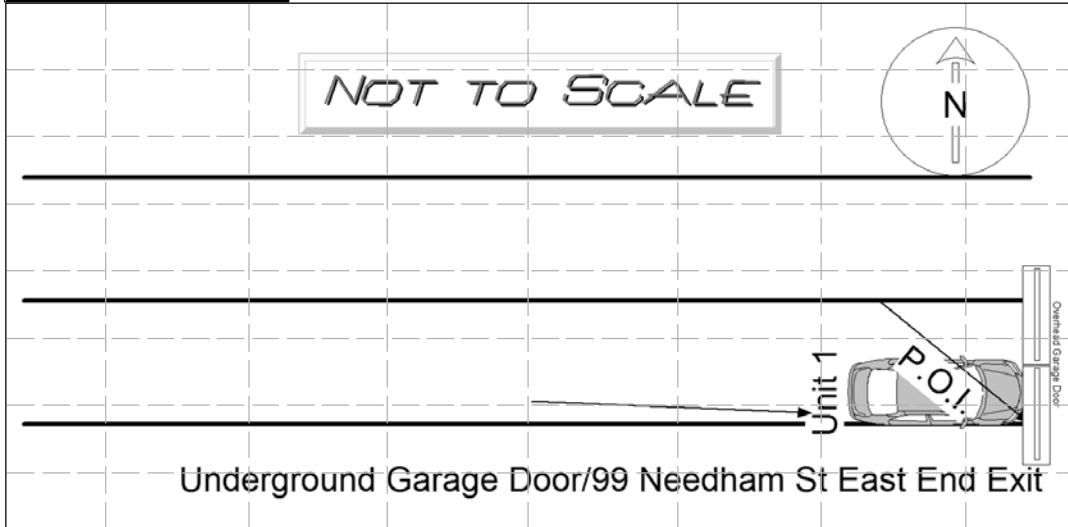


Police Use Only		Commonwealth of Massachusetts						RMV Document Number			
Date of Crash 03/19/2019	Time of Crash 14:10 24HR	City/Town NEWTON		Motor Vehicle Crash Police Report				Number Vehicles 1	Number Injured 0	Speed Limit 15 Latitude _____ Longitude _____	State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other:
AT INTERSECTION:				< LOCATION >	NOT AT INTERSECTION:						
											2 9
Route# Direction Name of Roadway/Street At				EAST 99 NEEDHAM ST Route# Direction Address # Name of Roadway/Street							2 10
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with				Feet N S E W of Mile Marker Exit Number							
Route# Direction Name of Intersecting Roadway/Street				Feet N S E W of Route# Intersecting Roadway/Street AVALON PARKING GARAGE							11 3
Vehicle 1 Occupants Hit/Run Moped Case Number 190000303											
License # St MA DOB/Age Reg # RW12721 Reg Type PAN Reg State MA											
Sex F Lic. Class D 18 18 Lic. Restrictions 2 19 CDL Endorsment Veh Year 2003 Veh Make SUBARU Veh Config. 1 20											
Operator WEINSTEIN GERTRUDE P Last First Middle Owner (Same as operator) Last First Middle											12 7
Address 89 NEEDHAM STREET (apt. 2206)				Address City State Zip							
City NEWTON State MA Zip 02461				City State Zip							
Insurance Company LIBERTY MUTUAL				Vehicle Action Prior to Crash 1 21 Damaged Area Code: (Circle Up to Three)							
Vehicle Travel Direction: N S X W Responding to Emergency?				Event Sequence 35 22 22 22 22 2 Most Harmful Event 35 23 Driver Contributing Code 19 24 24 Underride/Override 25 Towed N							
Citation # (If Issued)				10 Undercarriage 5 11 Totaled							
Violation 1: Ch Sec Violation 2: Ch Sec											
Violation 3: Ch Sec Violation 4: Ch Sec											
Please fill out for operator and all occupants involved											13 30
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility											
Operator See Above				1 4 99 0 0 5 1							
Please Select One of the Following: Vehicle Occupants Non-Motorist A Type 14 Action 15 Location 16 Condition 17 Hit/Run Moped											
License # St DOB/Age Reg # Reg Type Reg State											
Sex Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsment Veh Year Veh Make Veh Config. 20											
Operator Last First Middle Owner Last First Middle											
Address City State Zip				Address City State Zip							
Insurance Company				Vehicle Action Prior to Crash 21 Damaged Area Code: (Circle Up to Three)							
Vehicle Travel Direction: N S E W Responding to Emergency?				Event Sequence 22 22 22 22 2 Most Harmful Event 23 Driver Contributing Code 24 24 Underride/Override 25 Towed							
Citation # (If Issued)				10 Undercarriage 5 11 Totaled							
Violation 1: Ch Sec Violation 2: Ch Sec											
Violation 3: Ch Sec Violation 4: Ch Sec											
Please fill out for operator and all occupants involved											
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility											
Operator/Non-Motorist See Above				1 4 99 0 0 5 1							

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian
ie: → 1 → 2 →

Crash Diagram:



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 03/20/19 at 09:43 hours, I responded to the Avalon Apartments at Newton Highlands located at 99 Needham Street for a past hit and run that occurred at the east end garage exit on 03/19/19 at 14:10 hours.

I spoke to Senior Community Manager Karen Schueler who showed me video surveillance footage from yesterday's accident. In the video, you can see a blue Subaru Forester attempting to exit the east end of the garage to the property. The operator of the Subaru is identified by Ms. Schueler as a resident of the building as Gertrude Weinstein. After Weinstein scans her garage pass to exit, she then over steers towards the right and strikes the overhead garage door opening device. She then continues to exit the garage scraping the entire passenger side of her car along the device that is attached to the wall.

I viewed the garage door and there was significant damage as it became detached from the wall. The door had

(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
, AVALON APTS,	99 NEEDHAM STREET NEWTON, MASSACHUSETTS 0	617-658-7031	97	EXIT GARAGE DOOR DAMAGED

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

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

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:

to be placed out of service.

After I spoke to Ms. Weinstein who admitted to striking the side of the garage door but only thought there was damage to her vehicle. No citation issued as the underground garage to the building is private property and not a public way.

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