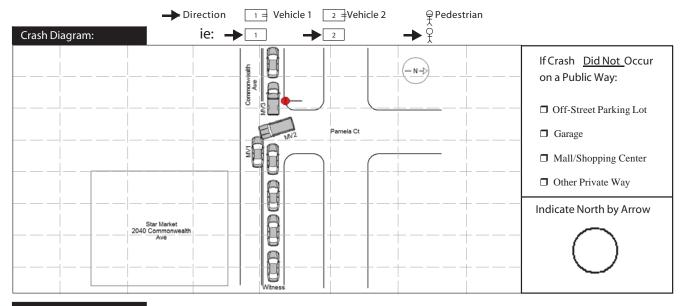
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2			ator and all occu		_ Unde	erride/Override			Fowed	<u>Y</u>	30	31	32	33		13
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	Operator			See Above					99 1	1	0	0	9 2	2 NEWTO	N WELLESLEY	-
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<sup>7</sup> <b>3</b>	Please Select C of the Followi		2 <u>1</u> #Occupan	ts Non-Motorist A	A Type	14 Action	15 Lo	ocation	16	Condit	ion	17	Пн	it/Run	Moped	
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	l '	pany QUINCY N		1	Vehi	cle Action Prio	to Cras	 h Г	4 21	Da				Circle Up		
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	Operator/	Non-Motorist		See Above			-		99 1	. 1	0	0	9 9	97 NEWTO	N WELLESLEY	-
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		ce Use Only		Commonwo						-			nent Number	
	Date of Crash 04/08/2019	Time of Crash 16:20	City/Tov NEWTON	MIOU		nicle Cr	ash	Number Vehicles		Latin	ed Limi tude _		State Police Local Police MBTA Police	e XX
L		24HR				Report		3	2		gitude_		Other:	
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ł	Violation 3: ChSec Violation 4: ChSec  Please fill out for operator and all occupants involved					rride/Override		26 27 Seat Safety	ed N 28 2 Airbag Airb	9 30 ag Eject	31 Trap	32 Injury Tra	33 nsp.	—
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H	Operator			See Above				99	4 4	0	0	10 1		
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	Please Select O of the Followir	\/Ahicle	e# Occupants	Non-Motorist A	Туре	14 Action	15 Loc	cation	16 Cond	ition	17	Hit	t/Run M	oped
F			G,	DOD/A	D #				D T			D.	<u> </u>	
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4	Operator		Lie. Resulctions	Endorsment		er		AI IVIANU				_ v cn C0l	mg.	
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			operator and all	occupants involved				26 27 Seat Safety	28 2 Airbag Airb	9 30 ag Eject	31 Trap	Injury Tra	33 nsp.	
$\vdash$	Name (Last Fir Operator/I	Non-Motorist		Address See Above		Age/DOB	Sex	Pos. Syste	m Status Swi	tch Cod	le Code	Status C	ode Medical F	acility
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$\perp$						1	$\perp$		1	$\perp$	-	$\perp$		



## Crash Narrative:

On 04/08/2019, at 1620 hrs, I responded to the area of 2040 Commonwealth Ave for a three car MVA with injuries. Upon arrival, I observed all three vehicles facing westbound on Commonwealth Ave. MV1 had heavy front end damage and airbag deployment. MV2 also had heavy front end damage and airbag deployment. MV3 had minor rear end damage. The operator of MV1 was brought to Newton Wellesley Hospital by Cataldo medics.

The operator of MV2 stated she was on Pamela Ct attempting to take a left onto Commonwealth Ave. There was heavy traffic headed westbound and a vehicle stopped to let MV2 go. As MV2 was taking a left onto

Commonwealth Ave, MV1 was traveling westbound in the eastbound lane around traffic and struck MV2. MV2 then in turn struck MV3s rear end. The operator of MV3 stated that he wasn't sure what occurred because the accident was behind him.

(Continued on next page)

Witnesses:			i
Name (Last, First, Middle)	Address	Phone #	Statement
	57 ROWE ST		
MCGUIRE, KATHERINE, L	NEWTON,MA 02466		Y
	57 ROWE ST		
MCGUIRE , WAYNE, H	NEWTON,MA 02466		Y

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

Truck and Bus Information:	Registration #	(From Vehic	le Section)		
Carrier Name				_ Carrier Issui	ing Authority Code
Address		City		_ St	Zip
US DOT#:S	State Number	Issuing State	ICC #:		_ Interstate 36
Cargo Body Type Code Gross	Vehicle Weight 38			39	
Trailer Reg #:	Reg Type Reg State	Reg Year	Trailer Leng		
Hazmat Information:					
Placard 40 Material 1 digit #	41 Material Name		Material 4 digit #		Release code 42

	→ Direction	_1 ≡ Vehicle 1	2 =Vehicle 2	<b>₽</b> Pedestr	an	
Crash Diagram:	ie: →□	1 -	2	→Ŷ		
					l l	Crash <u>Did Not</u> Occur n a Public Way:
		_	_	<u> </u>		Off-Street Parking Lot
						Garage
	į	į				Mall/Shopping Center
	 	_		<del> </del>		Other Private Way
		_		++	Inc	dicate North by Arrow
Crash Narrative:						
The operator of MV1 sta	ted she was trav	eling west	bound on Commo	onwealth Ave	and was plann	ing on taking a left
into the Star Market pa	arking lot which	was approx	imately 250 fe	eet down the	street. She st	tated she thought
there were two lanes in	the westbound d	irection a	t that point i	n the roadway	y. MV2 then pu	ulled out in front of
her and they collided.						
Two witnesses who were	traveling westbo	und in tra	ffic a few vel	nicles behind	MV3 both sta	ated that MV1 drove
erratically into the or	ncoming lane and	around tra	ffic heading w	restbound. One	e witness stat	ted "the car was
almost completely in t	the opposite lane	" and the	other witness	agreed. A mon	ment later the	ey stated they heard
the crash but did not s	see it. They also	stated th	at she almost	crashed into	a car turning	g eastbound out of
the Star Market exit pr	rior to the accid	ent.				
(Continue	ed on next page)					
Witnesses:						
Name (Last, First, Middle)		Address			Phone	e# Statement
Property Damage:		-				-
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Dam	naged Property
Truck and Bus Information:	Registration # _		(Fro	m Vehicle Section)		25
Carrier Name					Carrier Is	ssuing Authority Code 35
Address			City		St	
US DOT #:	State Number		Issuing State	eICC #:_		Interstate 36
Cargo Body Type Code 37	Gross Vehicle Weight	38				
 Trailer Reg #:	Reg Type_	Reg Stat	te Reg Y	ear Tra	iler Length	,
Hazmat Information:						J
Placard 40 Material 1 o	digit # 41 Material	Name		Material 4 c	igit #	Release code42

24734

Signature

ID/Badge #

NEWTON POLICE DEPARTM

Department

04/08/2019

Date

Precinct/Barracks

ALEXANDER C SPINNEY

Police Officer Name (Please Print)

	Direction 1	→ Vehicle 1 2	≥ ≠Vehicle 2	₹Pedestri	an	
Crash Diagram:	ie: → 1	<b>→</b> 2	2	→ ♀		
					If Crash <u>Did</u>	
					on a Public W	ray:
					☐ Off-Street F	Parking Lot
					Garage	
					☐ Mall/Shopp	oing Center
					☐ Other Priva	te Way
		 		+	Indicate North	
					marcate North	, Iby Allow
						)
		+				/
Crash Narrative:						
MV1 and MV2 were towed f	rom the scene by	Tody's. The	operator of	MV2 was bro	ought to Newton Welles	ley Hospital
by her mother. The opera	tor of MV1 was c	ited for C90	S23 operat:	ing after rev	voked license, C90 S23	operating
after revoked registration	on, C90 S24 oper	ating to enda	inger, and (	C89 S4a marke	ed lanes violation. Al	1
aforementioned streets a	re public ways m	aintained by	the City of	Newton.		
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:		-			'	
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Damaged Proper	ty
Truck and Bus Information:			(From	,		35
Carrier Name					Carrier Issuing Authori	ity Code
Address			City		St Zij	p
US DOT #:	State Number		Issuing State	ICC #:	Interstat	te 36
Cargo Body Type Code 37	bross Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Ye	ar Tra	iler Length 39	
Hazmat Information:	•		-			
Placard 40 Material 1 dig	it # 41 Material N	Jame		Material 4 d	ligit # Release c	ode 42
ALEXANDER C SPINNEY		24734	1	NEWTON POLICE DEPARTA		04/08/2019

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)