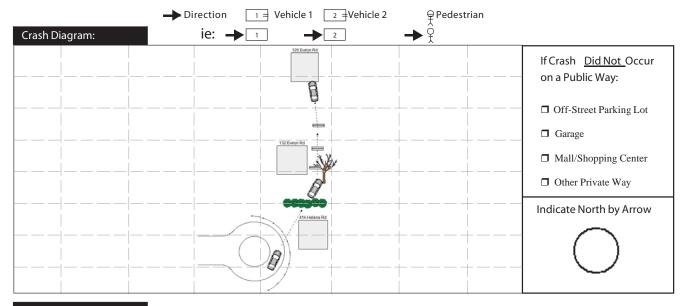
[Poli	ice Use Only		Commonweal	lth o	of Massa	achu	isetts	}		RMV	V Docun	nent Number	
	Date of Crash 05/20/2019	Time of Crash 15:14 24HR	NEWTON	MIOTOI		icle Cra Report	sh	Number Vehicles		ed Lat	ed Limi itude ngitude_		State Police Local Police MBTA Police Other:	XI D
l		1	RSECTION:		OCAT		>						CTION:	
1						EAST	136	i	EVEL	YN RD				
1	Route# Direc	tion	Name of Ro	adway/Street		Route# Direction	n Ad	dress #				Roadway/		
	Route# Direc	tion N	Name of Intersecting F	Roadway/Street	[Feet N	SE	W of		Marker		or	Exit Number	
	Routen Biree	Adoli I	Also at Intersec			Feet N	N S E	W of	Route		Intersec	ting Road	lway/Street	-
²	Route# Direc		Name of Intersecting	g Roadway/Street	.	Feet N	SE	W of						_ 1
3			ТТ								Laı	ndmark		\dashv
		#Occupants			Number			000000511						4
	License#	18 1		DOB/Age	-	8VVP40 ear_2003							State MA 20	-
4	Sex_M Lic. Operator PHI		Lic. Restrictions STUART	Endorsment		(Same as oper		i Make						- <u> </u> 7
1	Address 9 TRO		First	Middle		Last			First			Middle		_ 7
	City WABAN		State_	MA Zip 02468	City_						State	2	Zip	_
	Insurance Com	pany PROGRES	SSIVE DIRECT			e Action Prior to		4		Ü	ed Area	Code: (C	Circle Up to Thre	ee)
5		Direction: N		ding to Emergency?		Sequence 20 ²	23	1	1 22 2	!	3		4 10 Undercarr	riage.
	·	ssued) T1443637		ChSec		Harmful Event Contributing Co	23	10 24 9	24	←	9		5 (1) Totaled	
⁶ 1				ChSec		ride/Override	25				7		6	
	Please t		ator and all occupar		26 27 28 29 30 31 32 33 Seat Safety Airbag Airbag Eject Trap Injury Transp.							33 nsp.	ity 2	
	Operator	st Middle)		Address See Above		Age/DOB	Sex I	os. \$ystem 99		9 0	0 Code	Status Co	Medical Facili	ity
7 1	Please Select C of the Followi	Vehicle	e# Occupants	Non-Motorist A Type	e 1	4 Action 1	Loca		16 Con	dition	17	Hit	t/Run Mop	ed
	License#	18 1	St		Reg#_				Reg T	`ype		Reg	State	_]
	Sex Lic.		Lic. Restrictions	CDL Endorsment		ear		Make				Veh Co		
8 1	Operator	Last	First	Middle		Last	:		First			Middle		-
	Address		State	Zip		SS					State	. 2	Zin	-
	Insurance Com					e Action Prior to		2	_				Circle Up to Thre	ee)
	Vehicle Travel	Direction: N	S E W Respo	nding to Emergency?	Event	Sequence 2	2 22	22	22 2	2	3		4	
	Citation # (If I	ssued)			Most I	Harmful Event	23		1	—	9		10 Undercarr 5 11 Totaled	riage
	Violatio	n 1: ChS	ec Violation 2	:: ChSec	Driver	Contributing Co	ode 25	24	24		7		6	
ſ			ec Violation 4	: ChSec	Underr	ride/Override		Towed	28 Airbag Ai		0 31	32	33	
	Name (Last Fi			Address See Above		Age/DOB	Sex	Seat Safety Pos. System	Airbag Ai n Status S	rbag Ejec witch Co	t Trap de Code	Injury Tra	nsp. ode Medical Faci	lity
	Орегаюн	14011-1410101181		See Audve						+				



Crash Narrative:

On 5/20/19 at about 1510hrs I was dispatched to 136 Evelyn Rd for an MVA. En route to the location with Ofc Gourdeau, it was determined by first arriving Ofc Gourdeau that a vehicle had crashed through a fence at the end of Troy Lane and came to rest in the backyard of 126 Evelyn Rd.

On arrival, I located the vehicle operator, identified as Mr Stuart Phillips who was operating MA Reg 8VVP40, an '03 Jaguar S Type model. Mr Phillips was walking around the backyard after the collision and appeared coherent as to what had transpired. He sustained a laceration to the top of his head and was bleeding heavily. We sat him down in a lawn chair prior to medics arrival to evaluate. When asked what happened, he stated he "hit the gas instead of the brakes". I asked him where did the accident begin? He stated he was turning around at the end of Troy Lane (a dead end cul de sac) and crashed through the fence there. Mr

(Continued on next page)

Witnesses:			
Name (Last, First, Middle)	Address	Phone #	Statement
	88 BROMFIELD ST		
POUPOLO, DAVID,	WATERTOWN,MA 02472		N
	8 RAILROAD AVE		
GISH, TIM,	WILMINGTON,MA 01887		N

Owner (Last, First, Middle)

Address
Phone # 34-Type Description of Damaged Property

41A HELENE RD
SOO HOO, KIT CHING,
NEWTON,MASSACHUSETTS 0; 617-244-5707

132 EVELYN RD
MCKEAG, AMY,
NEWTON,MASSACHUSETTS 0; 973-650-0001
P7 BUSHES, LAWN, TREE, RETAINING WALLS

MCKEAG, AM1,	NEWTON,MASSACHUSETTS	0, 375 050 0001	97 DOSITES	, LAVVIN, TKI	EL, RETAINING WALLS
Truck and Bus Information:	Registration #	(From Vehi	cle Section)		35
Carrier Name				Carrier Issui	ng Authority Code
Address		City		St	Zip
	State Number	Issuing State	ICC #:		_ Interstate 36
Cargo Body Type Code Gros	ss Vehicle Weight 38			39	
Trailer Reg #:	Reg Type Reg State	Reg Year	Trailer Lengt		
Hazmat Information:					
Placard 40 Material 1 digit #	Material Name		Material 4 digit #		Release code 42

	Direction 1	Vehicle 1 2	₹Vehicle 2	₽Pedestr	ian		
Crash Diagram:	ie: → 🛚 1	2	□ →	> ♀ ♀			
					I	Crash <u>Did Not</u> (n a Public Way:	Occur
						Off-Street Parking	g Lot
						Garage	
	į	į	į			Mall/Shopping Ce	enter
						Other Private Way	
	į		į			dicate North by A	now
		 			- — —		
Crash Narrative:							
Phillips was alert and s	peaking clearly.	I asked him	if he was on a	any medic	ation? He sta	ted he was tal	king
Plavix only, a blood thi	nner. I asked abo	out his medica	al history and	d he stat	ed he was rel	eased from Spa	alding
Rehab today for treatmen	t from a stroke a	and was receiv	ving occupation	onal ther	apy. Medics	arrived to eva	aluate
and he was transported t	o NWH for treatme	ent.					
An investigation of the	crash path of the	e vehicle reve	ealed the fol	lowing ba	sed on tire	tracks and dar	mage
left behind:							
The vehicle crashed thro	ugh the fence at	the end of the	he cul de sac	belongin	g to 41A Hele	ne Rd;	
Vehicle drove over that	back lawn, clippe	ed the back de	eck attached	to the re	ar of the hou	se; damaging	the base
of the deck and lattice	below;						
(Continued	on next page)						
Witnesses:							
Name (Last, First, Middle)		Address			Phon	e #	Statement
Property Damage:							
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Dan	naged Property	
CHOW, SHU,	126 EVELYN RD NEWTON,MASS		617-332-6976	97	LAWN, HOUSE, P.	ATIO, WINDOW AI	ND WELL
Truck and Bus Information:	Registration #		(From Veh	,			35
Carrier Name					Carrier Is	ssuing Authority Cod	e
Address			City		St	Zip	26
US DOT#:	State Number		_ Issuing State	ICC #:_		Interstate	36
Cargo Body Type Code 37	Gross Vehicle Weight	38				_	<u></u>
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr	ailer Length	Đị	
Hazmat Information:						_	
Placard 40 Material 1 dig	rit # 41 Material N	ame		_ Material 4	ligit #	Release code	42
						05/20/20	

Department

Signature

Precinct/Barracks

Date

→	Direction 1	yehicle 1 2	₹Vehicle 2	Pedestr	ian	
Crash Diagram:	ie: → 1	2	■ →	· Ŷ		
					l l	sh <u>Did Not</u> Occur Public Way:
					 Off	f-Street Parking Lot
						rage
			!		□ Ма	all/Shopping Center
	· — — — — —				□ Oti	ner Private Way
	-				Indica	te North by Arrow
	- — — — —	 				
					- — —	
Crash Narrative: Vehicle travelled over the	natio than a	mached through	h ahmubbanu da		hankmant landing	to the backward
of 132 Evelyn Rd;	pacio, chen c		n shrubbery do	wii ali elli	Dankment Teading	
Vehicle drove through backy	yard of 132 Ev	elyn, then co	ntinued along	the side	of the house w	here it drove over
damaging three retaining wa						
After driving over the thin				ugh the	backyard of 126	Evelyn, causing
significant lawn damage;					-	
Vehicle continued until it	hit the back	of the house	at 126 Evelyn;	there,	it drove over th	e rear patio
before it struck a ground I	level basement	window and w	indow well;			
It came to a rest there who	ere the vehicl	e caught on f	ire under the	hood. Wi	tnesses helped e	xtinguish the fire
(Continued or	n next page)					
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Dranavty Damaga						
Property Damage: Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Damage	d Property
				71	μ	
Truck and Bus Information:	Registration #		(From Vehic	,		35
Carrier Name					Carrier Issuin	g Authority Code
Address			City		St	
US DOT #:	State Number		Issuing State	ICC #:_		Interstate 36
Cargo Body Type Code Gros	s Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tra	ailer Length 39	
Hazmat Information:						
Placard 40 Material 1 digit #	41 Material N	Name		Material 4	digit # 1	Release code 42
ADAM D GABRIEL		25117	, NEWTO	N POLICE DEPART!	1	05/20/2019

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Precinct/Barracks

Date

→	Direction 1	Vehicle 1 2	≠Vehicle 2	₽Pedestr	ian			
Crash Diagram:	ie: → 1	2	→	·Ŷ				
						If Crash <u>Did Not</u> on a Public Way:	Occur	
						☐ Off-Street Parking	g Lot	
						☐ Garage		
į				į		☐ Mall/Shopping Co	enter	
	· — — — — — 					☐ Other Private Way	y	
						Indicate North by A	rrow	
Crash Narrative:	ncident report	#19020129) u	ntil NFD arriv	ed to kn	ock it dov	m. Significant		
front lawn damage to 126 h	Evelyn occurred	d as well as 1	NFD was arrivi	ng on sc	ene to wha	t was first repo	rted as	
a structure fire.								
Several photos of the area	were taken by	myself. The	memory chip wa	s TOT th	e I.T. bur	reau to be attach	ed to	
this report. Tody's towing	towed the vehi	cle out of the	he backyard by	accessi	ng the rea	ar driveway of 13	2 Evelyn	
Rd.								
Mr Phillips cited for Negl:	igent Operation	and an Imme	diate Threat f	or Licen	se Suspens	sion/Revocation f	axed to	
the RMV. Troy Lane is a pul	blic way in the	City of New	ton.					
(Continued or	n next page)							
Witnesses:								
Name (Last, First, Middle)		Address				Phone # Sta		
Property Damage:								
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description o	f Damaged Property		
Truck and Bus Information:	Registration #		(From Vehi	cle Section)			35	
Carrier Name					Car	rier Issuing Authority Cod		
Address			City		St	Zip		
US DOT #:	State Number		Issuing State	ICC #:_		Interstate	36	
Cargo Body Type Code Gros	ss Vehicle Weight	38				39		
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tra	ailer Length	39		
Placard 40 Material 1 digit #	41 Material Na	ame		Material 4 o	ligit #	Release code	42	
ADAM D GABRIEL		25117	NEWTO	N POLICE DEPARTM		05/20/2	019	

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Date

	Direction	1 =	Vehicle 1	2	±Vehicle 2	₽Pedes	trian		
Crash Diagram:	ie: →	1	-	2	·				
Crash Diagram:	ie: →					→ Ŷ		If Crash Did Not Con a Public Way: Off-Street Parking Garage Mall/Shopping Ce Other Private Way Indicate North by A	Lot
Crash Narrative:									
Witnessee									
Witnesses:			A al al u a a a					Dhana #	Chahamana
Name (Last, First, Middle)		- 1	Address					Phone #	Statement
Property Damage:									
Owner (Last, First, Middle)	Address				Phone #	34-Type	Dec	cription of Damaged Property	
Owner (Last, First, Middle)	Address				THORE #	эт турс	DCS	emption of burnaged Froperty	
Truck and Bus Information:	Registration #				(From \	Vehicle Section)			35
Carrier Name								Carrier Issuing Authority Code	9
Address				(City			St Zip	
US DOT#:	State Number				Issuing State	ICC#		Interstate	36
37	١		38		_ 199 u mg	100		Morstate	
	Gross Vehicle Weight							39	
Trailer Reg #:	Reg Type		_ Reg Stat	te	Reg Year	· T	railer l	Length	
Hazmat Information:								_	
Placard 40 Material 1 dig	git # 41 Materia	ıl Nam	ne			Material 4	l digit i	# Release code	42
ADAM D GABRIEL				25117	Ni	EWTON POLICE DEPAR	TN	05/20/20	19

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Date