	Poli	ice Use Only		Commony	wealth	of Mass	achu	setts	}		RM	V Docu	ment Nun	ıber	1
	Date of Crash 06/17/2019	Time of Crash	City/To	wn Mo	tor Vel	hicle Cra	ash [Number Vehicles			ed Limi tude _		State Po	olice Dolice Nolice	
	06/17/2019	12:07 24HR			Police	Report		2	0		gitude_		MBTA 1 Other:	Police	
		AT INTER	LOCA	LOCATION > NOT AT INTERSECTI						CTION:	;	2			
	NOR	TH CENTR	E ST												2
$egin{bmatrix} 1 \\ 1 \end{bmatrix}$	Route# Direction Name of Roadway/Street At					Route# Direction Address # Name of Roadway/Street								2 10	
		CENTR		Feet NSEW of or								2			
	Route# Direc				Mile I				Marker Exit Number				_		
			Also at Inters		Feet NSEW of Route# In						Intersecting Roadway/Street				
2 1				Feet N S E W of									2 11		
	Route# Direc	tion		Landmark											
3	XVehicle1	#Occupants	Case Numbe	Jumber 1900000623											
	License#		St MA	Door											
	Sex_F Lic. 0	18 1	_	Reg # 8PEA70 Reg Type PAN Reg State MA Veh Year 2004 Veh Make JEEP Veh Config.											
[4]	Operator PER		t	-											
⁴ 5		Last		er (Same as ope						Middl	e		1 12		
	Address 37 MSGR REYNOLDS WAY (apt. 239)					ess							7:		
	City BOSTON State MA Zip 02118 Insurance Company NGM INSURANCE					City State Zip Vabiala Action Prior to Crash									
5				vehicle Action Phot to Clash 6											
1		Direction: X		onding to Emergency?		t Sequence 1	23				\bigcap	\overline{A}	10 Uno	dercarriage	
		ssued) T1441501				Harmful Event	1	24	24 1	←	9		1 1 Tot	_	
⁶ 1				2: ChSec		er Contributing C	ode 1		8		<u> </u>)	6		
1			Violation	_ Unde	Underride/Override Towed 1									13	
		Please fill out for operator and all occupants involved Name (Last First Middle) Address Address				Age/DOB	Sex Sex Pe	26 27 eat Safety os. System	28 29 30 Airbag Airbag Eject Status Switch Code		31 Trap Code	31 32 33 Frap Injury Transp. Code Status Code M		Medical Facility	
	Operator			See Above				99	4 4	0	0	10 1	l		_
⁷ 7	Please Select C of the Followi	IX Vahicla	2 <u>1</u> #Occupant	s Non-Motorist A	A Type	14 Action	15 Loca	tion	16 Conc	lition	17	П	it/Run	Moped	
	License#	MA				5RL93B		D T PAN				Reg State MA			
	Sex_M Lic. Class D 18 18 Lic. Restrictions B CDL Operator MIRANDA ANDREW ALBERT						Val-	Reg Type PAN						20	
8						You round you coming.									
⁸ 1		Last ARATOGA ST		Owner (Same as operator) Last First Middle											
				ess											
	City BOSTON		City					Jamaga	_State		Zip Circle Up t	to Throa)			
		pany ARBELLA		ponding to Emergency?		cle Action Prior t	o Crash 22 22	6 22	22 0	U	a Area	`	4	o inice)	
	Vehicle Travel	7.		Most Harmful Event 1 23 10 Undercarriage 5 11 Totaled											
	Citation # (If I														
			ec Violation		Driver Contributing Code 5										
١			ec Violation	Unde	Underride/Override Towed Y]		
	Pl Name (Last Fi		operator and all	occupants involved		Age/DOB		26 27 eat Safety Pos. Syster	Airbag Airb n Status Sw	ag Eject	Trap le Code	Injury I'r	ansp.	cal Facility	
	Operator/	Non-Motorist		See Above			-	99	4 4	0	0	10 1	ı		

