

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 07/03/2019		Time of Crash 00:08 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 1	Number Injured 0	Speed Limit 25 Latitude _____ Longitude _____		State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other: <input type="checkbox"/>	
AT INTERSECTION:				< LOCATION >		NOT AT INTERSECTION:						9	
Route# Direction Name of Roadway/Street At Route# Direction Name of Intersecting Roadway/Street Also at Intersection with Route# Direction Name of Intersecting Roadway/Street				NORTH 25 CROSBY RD								2	
				Route# Direction Address # Name of Roadway/Street								10	
				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								11	
Route# Direction Name of Intersecting Roadway/Street				Feet N S E W of _____ Landmark _____								7	
<input checked="" type="checkbox"/> Vehicle 1 0 #Occupants		<input checked="" type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 190000686						3	
License # _____ St _____ DOB/Age _____				Reg # AU56709				Reg Type PAN		Reg State CT		12	
Sex _____ Lic. Class 18 18 Lic. Restrictions 19 CDL _____				Veh Year 2011				Veh Make BMW		Veh Config. 1 20			
Operator _____ Last _____ First _____ Middle _____				Owner GIAMALIS STEPHEN N				Last _____ First _____ Middle _____				1	
Address _____				Address 10 SEA BREEZE AV				Last _____ First _____ Middle _____					
City _____ State _____ Zip _____				City NIAHTIC				State CT		Zip 06357			
Insurance Company AMERICAN COMMERCE INS				Vehicle Action Prior to Crash 11 21				Damaged Area Code: (Circle Up to Three)					
Vehicle Travel Direction: N X E W Responding to Emergency? _____				Event Sequence 1 22 22 22 22				2 3 4					
Citation # (If Issued) _____				Most Harmful Event 1 23				1 9 10 Undercarriage					
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 1 24 24				5 11 Totaled					
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed N				8 7 6					
Please fill out for operator and all occupants involved												13	
Name (Last First Middle)				Address				Age/DOB				Sex	
Operator				See Above				-----				---	
Please Select One of the Following: <input type="checkbox"/> Vehicle #Occupants <input type="checkbox"/> Non-Motorist A Type 14 Action 15 Location 16 Condition 17 <input type="checkbox"/> Hit/Run <input type="checkbox"/> Moped												1	
License # _____ St _____ DOB/Age _____				Reg # _____				Reg Type _____		Reg State _____			
Sex _____ Lic. Class 18 18 Lic. Restrictions 19 CDL _____				Veh Year _____				Veh Make _____		Veh Config. 20			
Operator _____ Last _____ First _____ Middle _____				Owner _____ Last _____ First _____ Middle _____									
Address _____				Address _____				Last _____ First _____ Middle _____					
City _____ State _____ Zip _____				City _____				State _____		Zip _____			
Insurance Company _____				Vehicle Action Prior to Crash 21				Damaged Area Code: (Circle Up to Three)					
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Please fill out for operator and all occupants involved												13	
Name (Last First Middle)				Address				Age/DOB				Sex	
Operator/Non-Motorist				See Above				-----				---	

→ 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 July 3, 2019 at approximately 00:08 hours I responded to 25 Crosby Rd for a report of a hit and run that had just occurred.

Upon arrival, I spoke with Nicholas Giamalis who reported that he heard a bang and went outside and observed damage to MV1's left rear bumper. MV1 was parked facing southbound in front of 25 Crosby Rd. Nicholas said that a gray Chevy sedan driving northbound on Crosby Rd towards Commonwealth Ave. Officer Kayla Donahue canvased the area with negative results. Nicholas said that he was the last person to use the vehicle but the vehicle is owned by his father, Stephen Giamalis.

Based on the travel direction of the unknown vehicle and the location of the dent, it is likely that MV1 was backed into by an unknown motor vehicle. It does not appear that anyone witnessed the actual crash and there

(Continued on next page)

Witnesses:

Name (Last, First, Middle)	Address	Phone #	Statement
GIAMALIS, NICHOLAS, REID	10 SEA BREEZE AVE NIANTIC, CT 06357	-----	N

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

CHARLES P GUARINO	38802	NEWTON POLICE DEPART	07/03/2019
Police Officer Name (Please Print)	Signature	ID/Badge #	Department
			Precinct/Barracks
			Date

