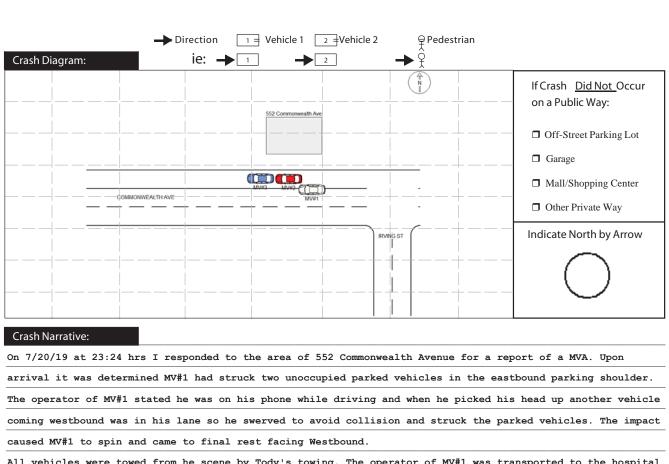
	Poli	ice Use Only		Commonweal	th o	f Massa	ach	useti	ts		RM	V Docun	nent Number	
	Date of Crash 07/20/2019	Time of Crash 23:24 24HR	NEWTON	Motor		icle Cra Report	sh	Numb Vehicl 3		ared La	eed Limititude _ ngitude_		State Police Local Police MBTA Police Other:	Xi D
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1 4	Route# Direc	tion	Name of R	oadway/Street	I	Route# Direction	on A	ddress #		N	ame of I	Roadway/	Street	
					-	Feet	N S E	W of		ile Marker		or	Exit Number	-
	Route# Direc	etion N	Name of Intersecting Also at Intersection		-	Feet [N S E	W of						
2 1					-	Feet [N S E	W of	Ro	ute#	Intersec	ting Road	dway/Street	2
	Route# Direc	tion	Name of Intersecti	ng Roadway/Street							La	ndmark		_
3	XVehicle1	#Occupants	Hit/Run	Moped Case N	umber		1	9000007	48					
	License#	10 1	St MA	_ DOB/Age	Reg#_1	IML142			Reg	g Type_PA	AN	Reg	State MA	-
	Sex_M_ Lic.	Class D 18 1	Lic. Restrictions	19 CDL		ear_2009		h Make_	INFINI	П		_ Veh Coi	nfig. 20	
4 1	Operator OSU	Last	LUKE First	J Middle	Owner	OSULLIVAN Las	t	PAT	RICK Firs	t		Middle		- 1
	Address 103 C			MA 02020		S 103 CENTRE	ST					MA -	02023	-
	City DOVER Insurance Com		State	MA Zip 02030	City D	Action Prior to	Crach		21				Zip 02023 Circle Up to Thre	ee)
5	1	Direction: N	S W W Respon	nding to Emergency?		Sequence 2		22 22	22	0	€		4	
		ssued) T1442692				Iarmful Event	2.	3			9	$\langle \rangle$	10 Undercarr 5 11 Totaled	iage
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⁶ 1				: ChSec	Underr	ide/Override	2.	Tov	wed Y	8	7		6	
	Please t Name (Last Fir		ator and all occupa	ants involved Address		Age/DOB	Sex	26 Seat Safe Pos. Syst	ty Airbag Em Status	29 Eje Switch Co	30 31 Ect Trap de Code	32 Injury Tra Status Co	33 nsp. de Medical Facili	2
	Operator			See Above				99	1	99 0	0	9 2	NWH	
7														
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	License#	18 1	St	DOB/Age	Reg#_	IBMS83			Reg	g Type_PA	AN	Reg	State MA	_]
	Sex Lic.		Lic. Restrictions	CDL Endorsment				eh Make_				_ Veh Co		
⁸ 1	Operator	Last	First	Middle		SOUZA FERI	t		Firs	t		Middle		-
	Address		G	7.		S 546 COMMO	JNVVEA	ALIHA	VE			MA Z		-
	City	pany COMMER		zZip	- 1,	EWTON Action Prior to	Croch		21	Damag			Zip Circle Up to Thre	ee)
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	Pl Name (Last Fi		operator and all o	ccupants involved Address		Age/DOB	Sex	26 Seat Safe Pos. Sys	7 28 ty Airbag stem Statu	29 Airbag Eje Switch Co	80 31 Trap ode Code	Injury Tra	33 nsp. ode Medical Facil	lity
		Non-Motorist		See Above										

Pol	lice Use Only		Common	wealth	of Mass	achu	setts]	RMV Do		t Number	
Date of Crash 07/20/2019	Time of Crash	City/To NEWTON	wn M o		icle Cra	ash	Number Vehicles			Limit <u>35</u> de	Si	tate Police ocal Police IBTA Police	X
.,,,	24HR				Report		3	1	Longit		0	ther:	
	AT INTE	RSECTION:	<	LOCA	TION	>		NOT	AT II	NTERS	SECT	ION:	_
Route# Direc	ction		Roadway/Street		Route# Direct	ion Ad	dress #		Name	e of Road	way/Stre	eet	_
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					Feet	N S E	W of						
Route# Direc	ction	Name of Interse	cting Roadway/Street							Landma	ark		
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Operator			Endorsme	ent	AVAGYAN								_
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		ator and all occu	pants involved						30 Eiect I	31 32 Frap Injury	2 33 y Transp.		
Name (Last Fi			Address See Above		Age/DOB		os. \$ystem	Status Switc	h Code (Code Statu	S Code	Medical Facili	ity
1				-									
Please Select (of the Follow	I Vehicle	e# Occupan	s Non-Motorist	A Type	14 Action	15 Loca	tion	16 Condi	tion	17	Hit/Ru	ın Mop	ed
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Operator	/Non-Motorist		See Above	e									
													-



All vehicles were towed from he scene by Tody's towing. The operator of MV#1 was transported to the hospital for potential injuries.

The Operator of MV#1 is being issued MA Citation T1442692 for 90/24 OUI Drugs, 89/4a Marked Lane Violation and 90/13B Impeded Operation/Phone Use and MA Citation T1442693 for 90/24 Operating to Endanger.

Witnesses:							
Name (Last, First, Middle)		Address				Phone #	Statement
Property Damage:	,						
Owner (Last, First, Middle)	Address		Phone #	34-Type	Desc	ription of Damaged Property	
	-		l				
Truck and Bus Information:	_		(From Vehic	le Section)			35
Truck and Bus Information:	_		(From Vehic	le Section)		Carrier Issuing Authority	
			· 				
Carrier Name		(City			St Zip_	Code
Carrier NameAddressUS DOT #:	State Number	(City			St Zip_ Interstate	Code
Carrier NameAddressUS DOT #:	State Numberss Vehicle Weight	38	City Issuing State	ICC#:_		St Zip Interstate	Code
Carrier NameAddressUS DOT #:Gross	State Numberss Vehicle Weight	38	City Issuing State	ICC#:_		St Zip Interstate	Code
Carrier Name	State Numberss Vehicle Weight Reg Type	38 Reg State	City Issuing State Reg Year	ICC #:_ Tr	ailer L	St Zip Interstate	7 Code 36

CHRISTOPHER J BOUDREAU		1	NEWTON POLICE DEPARTM		07/21/2019
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date