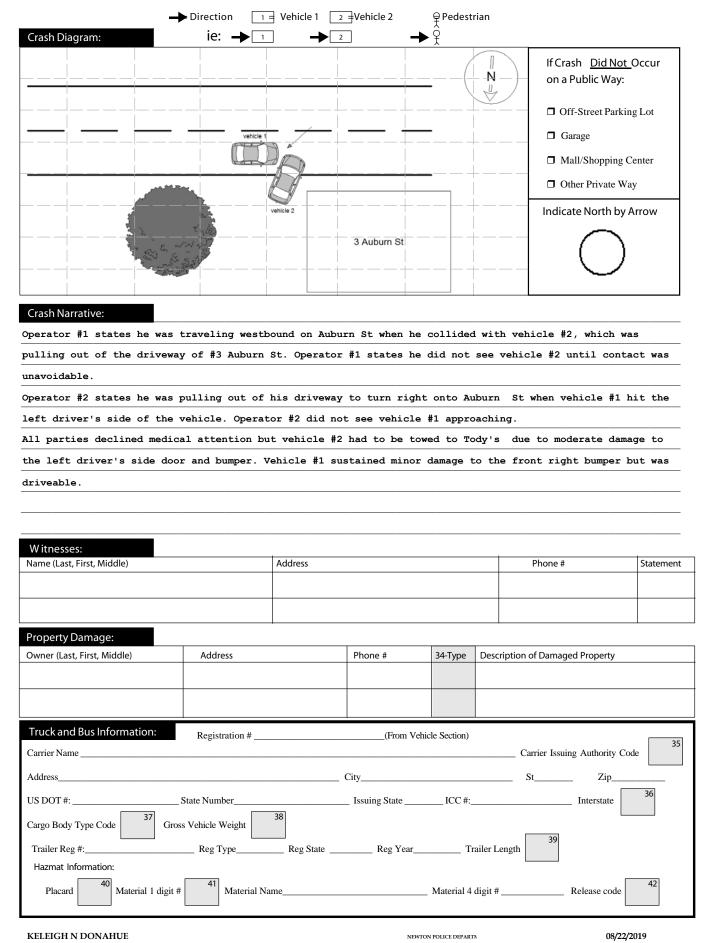
	Poli	ice Use Only		Comn	nonwea	lth (	of Massa	chu	ıset	ts	[		RMV	Docu	ment N	Number		
	Date of Crash Time of Crash Ci 08/22/2019 16:41 NEWTON		,	Motor Vel			icle Cra	sh [	Number Vehicles				eed Limit 25		State Police Local Police MBTA Police			
	00/22/2019	24HR			Pol	ice l	Report		2	0			tude_		Oth	ra Police er:		
		AT INTE	RSECTION	1	< I	OCA	TION :		N	OT A	AT I	NTE	ERSE	CTIC	TION:		-	
							WEST 3 AUBURN ST											Ľ
1 <b>1</b>	Route# Direction Name of Roadway/Street				et	Route# Direction Address # Name							e of R	e of Roadway/Street				2
_	At						Feet NSEW of or										Ľ	
	Route# Direction Name of Intersecting Roadway/Street						Mile Marker Exit Number									_	l	
	Also at Intersection with						Feet N S E W of Route# Intersecting Roadway/Street									_	3	
1 Pour de Disseries Nous of Interese							Feet NSEW of								,			
	Route# Direction Name of Intersecting Roadway/Street												Lan	dmark				Г
<sup>3</sup> 99	XVehicle1	_1_#Occupants	Number	umber 1900000863														
	License#		St	MA DOB/Age		Reg#	2KB612			Re	o Tyne	PAN		Rec	State 1	MA		
	S M 1: CI D 19 CDI						Reg # 2KB612         Reg Type PAN         Reg State MA           Veh Year 2012         Veh Make VOLKSWAGON         Veh Config.											
1	Operator MCGRATH JAMES P Endorsment						Owner (Same as operator)											
1	Address 34 TIVERTON AVE				Middle									Middl	le		_	
	City HAVERHILL State MA Zip 01835					Address           City         StateZip												
	Insurance Company COMMERCE					Vehicle Action Prior to Crash  1 Damaged Area Code: (Circle Up to Three)												
5		Direction: N		esponding to Eme	ergency?			2 99 22		22	0_		3		4			
		(ssued)	11123	oponumg to 2mm	orgeney			1 23					$\downarrow \downarrow$	Λ		Undercarı	riage	
	,	,		on 2: ChS	Sec		Contributing Co		24	99 24	1	-	<u>  9</u>		5 11	Totaled		
1				on 4: ChS			ride/Override	25		wed N	8		7	_لا_	6			
	Please fill out for operator and all occupants involved					Chach	inde/ 5 verride		26 Seat Saf		29 Airbag	30 Eject	31 Trap I Code S	32 Injury Ti	33 ransp.			
•	Name (Last Fir			See	Address e Above		Age/DOB	Sex F	os. Sys	tem Status	Switch 99	Code	Code S	Status C	Code N	fedical Facil	ity	_1
	Орегию								93	, 4	99	0	0	10	+			
-																		
<b>1</b>	Please Select C of the Followi	IX Vehicle	e2 <u>2</u> #Occup	ants Non-M	Motorist A Type	e 1	Action 15	Loca	ition	16	Conditio	on	17	Пн	lit/Run	Мор	oed	
	License # St MA DOB/Age					Reg # 2YV988 Reg Type PAN Reg						g State_	MA					
	Sex M Lic. Class D 18 18 Lic. Restrictions 1 CDL						TOVOTA								1 20			
3	Operator ZHANG ERIC Endorsment						GUAN		WEI						ا ت			
1	Last First Middle Address 3 AUBURN ST						SS 3 AUBURN S			Fir	st			Middl	le			
	City NEWTON State MB Zip 02465						NEWTON						State	MA	Zip_02	465	_	
	Insurance Company GOVT EMPLOYEE						e Action Prior to	Crash	3	21	Dar				•	Up to Thr	ee)	
	Vehicle Travel Direction: N S E Responding to Emergency?						Sequence 1 2	2 99 22	22	22	2		3		4			
	Citation # (If Issued)						. [-	1 23				. ^	$\downarrow \downarrow$		1	Undercarr	riage	
	Violation 1: Ch Sec Violation 2: Ch Sec						Contributing Co		24	24	1	-			5 11	Totaled		
	Violation 3: Ch Sec Violation 4: Ch Sec					Underride/Override  Driver Contributing Code  4  Towed  Y  6												
ſ				all occupants in		J			26 Seat Saf		29 Airbag	30 Eject	31 Trap I	32 njury Ti	33 ransp.			
ŀ	Name (Last Fi		-		Address e Above		Age/DOB		Pos. Sy	stem Statu	s Switch	Code	Code	Status	Code 1	Medical Faci	ility	
}		JANOH-IMOTOTIST	3	AUBURN ST	ADOVE				99		99	0		10				
ŀ	GUAN, WEI			NEWTON, MA 02	2465			F 6	99	4	99	0	0	10 1	1			ĺ
																		ĺ



Police Officer Name (Please Print) Signature ID/Badge # Department Precinct/Barracks

Date