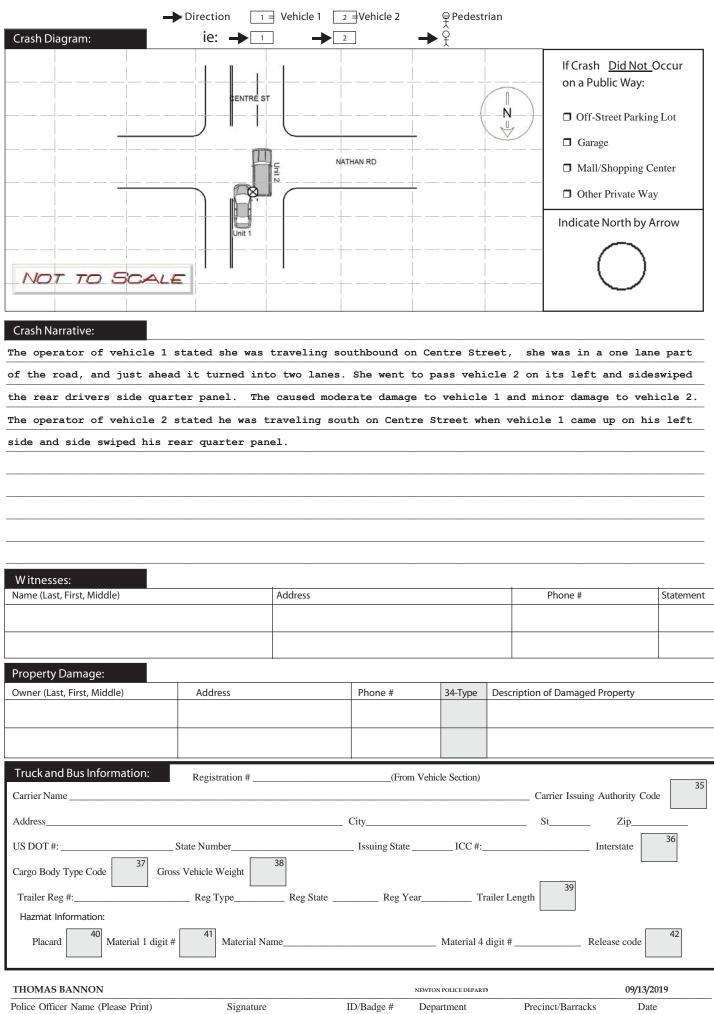
| | Poli | ice Use Only | | | Common | wealth | of Massa | ach | use | etts | | | RM | V Docun | nent Number | |
|----------|--|--------------------------|---------------|--|--------------------------|-----------|---|-----|--------------------|------------------------|------------------------------|------------------------------|---------------------------|-------------------------------|---|----------|
| | Date of Crash 09/13/2019 | Time of Crash | | City/Tow | m Mo | otor Vel | nicle Cra | sh | | mber | Numb Injur | | ed Lim itude _ | | State Police Local Police MBTA Police | N X |
| | 03/13/2013 | 17:54 24HR | NEWTON | | | Police | Report | | 2 | | 0 | | ongitude | | Other: | |
| | | AT INTERSECTION: < | | | | LOCA | LOCATION > | | | | NOT AT | | | | CTION: | ₽ |
| | | | | | | | SOUTH CENTRE ST | | | | | | | | | ŀ |
| | Route# Direction Name of Roadway/Street | | | | | | Route# Direction Address # Name of Roadway/Street | | | | | | | | Street | _ |
| \dashv | At | | | | | | Feet NSEW of • or | | | | | | | | | _ |
| - | Route# Direction Name of Intersecting Roadway/Street | | | | | | Feet N S E W of — or Exit Number | | | | | | | | | |
| - 1 | Also at Intersection with | | | | | | Feet N S E W of | | | | | | | | | |
| \neg | | | | | | | Feet N | SI | E W | of | Route | :# | Interse | cting Roac | dway/Street | |
| | Route# Direc | etion | | | | | | | | La | ndmark | | - | | | |
| | XVehicle 1 | #Occupants | Case Number | | | | | | | | | | | | | |
| | License # St MA DOB/Age Reg # 487VK7 Reg Type PAN Reg State MA | | | | | | | | | | | | | | ٦ | |
| | Sex_F Lic. 0 | 18 1 | | strictions | 19 | - | Year_2016 | | | | _ | | | _ | 20 | |
| - 1 | Operator ALM | | RACE | | Endorsm | ent | CHASE BAN | | | | RGAN | | | _ ven eoi | iiig. | ŀ |
| | | Last EW STREET (apt | F | First | Middle | | Ess BX 901098 | | | | First | | | Middle | | ļ |
| - 1 | | | | g. · | MA 7: 02138 | | FT WORTH | | | | | | Gr | TX - | Z _{ip} 76101 | |
| - 1 | City CAMBRIDGE State MA Zip 02138 Insurance Company GOVERNMENT EMPLOYEE | | | | | | | C | | 2 | [] | | | | Circle Up to Three | e) |
| \dashv | | • | | | | | cle Action Prior to | | 22 | 22 | 22 (| Ü | 3 | , | 4 | ' |
| | | Direction: N | | Respo | nding to Emergency | | t Sequence 1 2 | 2 | 23 | | | | | | 10 Undercarria | age |
| | , | (ssued) | | | | | Harmful Event | 1 | | 4 | 24 | ← | 9 | [| 5 11 Totaled | -8- |
| | | | | | 2: ChSec | | er Contributing Co | | 19 | | | | 7 | | 6 | |
| . | | 3: ChSec | Unde | rride/Override | 1 | | Towed | | 20 2 | 0 21 | 1 22 1 | 22 | 4 | | | |
| | Please 1 Name (Last Fir | fill out for opera | ator and a | III occupa | ants involved Address | s | Age/DOB | Sex | Seat Pos. | 27 Safety System | 28 Airbag Ai Status Sv | 29 3 bag Ejec itch Coc | 0 31 et Trap e Code | 32 Injury Tra Status Co | 33 nsp. de Medical Facility | |
| | Operator | | | | See Abov | ve | | | | 99 | 4 4 | 0 | 0 | 10 1 | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | + | | | \dashv |
| _ | | | | | | | 14 | =1 | | | | | 157 | | | 4 |
| | Please Select C of the Followin | | 2 <u>1</u> #C | Occupants | Non-Motoris | st A Type | Action 1 | Lo | cation | - | Cor | dition | 17 | Hit | t/Run Mope | d |
| ı | License# | , | - Reg# | Reg # 2YB852 Reg Type PAN Reg State MA | | | | | | | | | | | | |
| | Sex_M Lic. 0 | Class D 18 1 | Veh Y | Veh Year 2015 Veh Make MAZD Veh Config. 1 | | | | | | | | | | | | |
| | Operator SHI | IRPAL | ent Owne | Owner (Same as operator) | | | | | | | | | | | | |
| | | Last IGHT ST (apt. 16 | | Last First Middle Address | | | | | | | | | | | | |
| | City WALTH | | | City State Zip | | | | | | | | | | | | |
| | , | npany LM GENE | - | Damaged Area Code: (Circle Up to Three) | | | | | | | | | | | | |
| | | | | Vehicle Action Prior to Crash 2 21 Damaged Area Code: (Circle Op to Tirree) Event Sequence 1 22 22 22 22 2 3 4 | | | | | | | | | | | | |
| | Civil # (161 - 1) 23 | | | | | | | | 3 10 Undercarriage | | | | | | | |
| | Violation 1: ChSec Violation 2: ChSec Driver Contributing Code 1 9 Violation 1: ChSec Violation 2: ChSec Driver Contributing Code 1 7 Violation 2: ChSec Driver Contributing Code 1 7 Violation 3: Ch_ | | | | | | | | | | 4 | 5 11 Totaled | | | | |
| | | | | | | | | | | | 7 | Q | | | | |
| ļ | | | | | | | rride/Override | | T | | | 29 2 |) 31 | 32 | 33 | 4 |
| | Plo Name (Last Fi | | operator | and all o | occupants involved | | Age/DOB | Sex | 26 Seat Pos. | 27 Safety System | Airbag Ai Status S | 29 Siperbag Ejer |) 31 Trap de Code | Injury [Tra | nsp. ode Medical Facility | ty |
| | Operator/ | Non-Motorist | | | See Abov | /e | | | | 99 | 4 4 | 0 | 0 | 10 1 | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| L | | | | | | | | | | | | | | | | |



CDP1 11 ·24·00