

# Commonwealth of Massachusetts

[illegible]

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

franklin st

waverley ave

Unit 1

Unit 2

NOT TO SCALE

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 9-17-19 AT APPROX. 0858HRS. WHILE WORKING N492 I TOOK A REPORT FOR MOTOR VEHICLE ACCIDENT. UPON ARRIVAL AT THE INTERSECTION OF WAVERLEY AND FRANKLIN I SPOKE TO THE OPERATOR OF VEHICLE #1. DRIVER STATES HE WAS STOPPED TRAVELING E-BOUND ON FRANKLIN ST. HE STATES HE LOOKED LEFT AND RIGHT AND WAS TRYING TO MERGE INTO THE TRAFFIC ON WAVERLEY AVE. AS HE ENTERED THE TRAFFIC LANE HE WAS HIT ON THE LEFT SIDE BY VEHICLE #2. DRIVER OF VEHICLE #2 STATES SHE WAS TRAVELING S-BOUND ON WAVERLEY. SHE STATES VEHICLE #1 ENTERED THE TRAFFIC LANE AND SHE WAS UNABLE TO AVOID HITTING HIM. VEHICLE #1 HAD LEFT REAR SIDE DAMAGE AND AIRBAG DEPLOYMENT. VEHICLE #1 WAS TOWED BY TODYS. VEHICLE #2 HAD FRONT END DAMAGE BUT WAS STILL OPERATIONAL. ALL PARTIES REPORTED NO INJURIES. ALL PARTIES ADVISED TO CONTACT THEIR INSURANCE COMPANIES.

**Witnesses:**

Name (Last, First, Middle)	Address	Phone #	Statement

**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

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate

Cargo Body Type Code  Gross Vehicle Weight

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length

**Hazmat Information:**

Placard  Material 1 digit #  Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code

THOMAS P WALSH

NEWTON POLICE DEPT

09/17/2019

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date