	Poli	ice Use Only		Comm	onweal	lth o	f Mass	ach	use	etts			1	RMV	Docu	ımen	t Number	
	Date of Crash	Time of Crash	,	Γown	Motor	Vehi	icle Cra	sh		mber	l			Limit le		- Si	ate Police ocal Police IBTA Police	□ X ì
	09/23/2019	19:13 24HR	NEWTON		Pol	ice F	Report		2		0			ude_			IBTA Police ther:	
		AT INTER	RSECTION		< L	OCAT	TION	>			N	OT A	II T	NTE	RSE	CT.	ION:	$\exists z$
			EAST 2014 WASHINGTON ST															
1 4	Route# Direction Name of Roadway/Street At						Route# Direction Address# Name of Roadway/Street											
-							Feet N S E W of or											
	Route# Direc	etion N	Name of Intersec	ting Roadway/Stree	et	— <u> </u> -		., 5 1	2 1 11	01 -	Mi	le Mark	er		,,	Е	xit Number	
				ersection with	-	-	Feet	N S I	EW	of	Po	ite# -	Int	arcact	ing Do	adwa	y/Street	- L
²						- -	Feet	N S I	E W	of	Ko	шст	1110	CISCCI	ing ixc	auwa	у/Зпест	4
	Route# Direction Name of Intersecting Roadway/Street						Landmark											
3	XVehicle1	_1_#Occupants	☐ Hit/Ru	n Mope	d Case N	lumber		:	19000	00972								
	License#		St ¹	MA DOB/Age		Reg # <u>7</u>	712ZT9				Rec	Type_	PAN		Re	o Stat	_e MA	-
	Sex_M Lic. 0	18 13		19			ear_2019	V	oh Me	ıko AU						_	20	-
4	Operator HAS		ROBERT	End	lorsment		VW CREDIT			EASIN					VCIIC	omig		- - - :
1	Address 52 EM	Last MERSON RD	First	M	fiddle		S 1401 FRANK				Firs				Mide	ile		- L
	City WELLES			State MA Zin 0	2481		s IBERTYVILLE			State IL Zip 60048 Damaged Area Code: (Circle Up to Three		-						
	City WELLESLEY State MA Zip 02481 Insurance Company LIBERTY MUTUAL						Action Prior to		, [21						_ ^ -		ee)
5		Direction: N		esponding to Emer					22	22	22		Ü	_		•		
1			1	sponding to Emer	gency ?		Sequence 1	2	23					I			10 Undercarr	iage
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⁶ 1							Contributing C		5 ¹		. N	8	V	7	<u> </u>	6		
1				on 4: ChSecupants involved		Underri	ide/Override	Τ		Towed 27 Safety		29	30 Eject	31	32 njury 1	33 ransp.		\dashv
	Name (Last Fir			A	ddress		Age/DOB	Sex	Pos.		Airbag Status	29 Airbag Switch	Eject 1 Code (31 Frap I Code S	njury 1 Status	ransp. Code	Medical Facili	ity 1
	Operator			See A	Above					99	4	4	0	0	10	1		
7 1	Please Select C	IX Vehicle	22 <u>3</u> #Occup	ants Non-Mo	otorist A Type	: 14	4 Action	15 Lo	cation	1	16 C	onditio	n	17	o,	Hit/Ru	ın Mop	ed
	License # St DE DOB/Age DOB/Age DOB/Age					Reg#_4		Reg Type AMN					Reg State_MA			7		
	License #							eh Ma						Veh Config. 2			_	
8	Operator GENTILELLA CHRISTOPHER Lic. Restrictions 1 CDL Endorsment					Veh Year 2009 Veh Make FORD Veh Config. 2 Owner FALLON SERVICE IN												
⁸ 2	Address 111 BROOK RD						Las	st			Firs	t			Midd	ile		-
	Address Tracectors City QUIINCY State MA Zip 02169					Address 111 (apt. 115) BROOK RD City QUINCY State MA Zip 02169												
	Insurance Company ARBELLA					-	Action Prior to	o Cuoal		21	 []	Dam				_ ^	le Up to Thre	ee)
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	Vehicle Travel Direction: N S W W Responding to Emergency? N						^	2	.3					\perp	\bigcap		10 Undercarr	riage
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				ion 2: ChS			Contributing C	L	1 7	Towed	N	0	V	7	للــ	6		
[dl occupants invo		Underri	ide/Override	<u> </u>	26 Seat		28 Airbag	29 Airbag	30 Eject I	31 Trap I	.32	33		\dashv
	Name (Last Fi	rst Middle)	operator and		Address		Age/DOB	Sex	Seat Pos.	System	Status	Switch	Code	Code	njury I Status	ransp. Code	Medical Faci	lity
	•	Non-Motorist	1	See A	Above					99	4	4	0	0	10	1		\blacksquare
	YU, JONHAO		(QUINCY, MA 0216				M	99	99	4	4	0	0	10	1		
	SAY, DEVAN		1	968 CENRAL AVE VEEDHAM, MA					11	99	5	4	0	0	10	1		
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