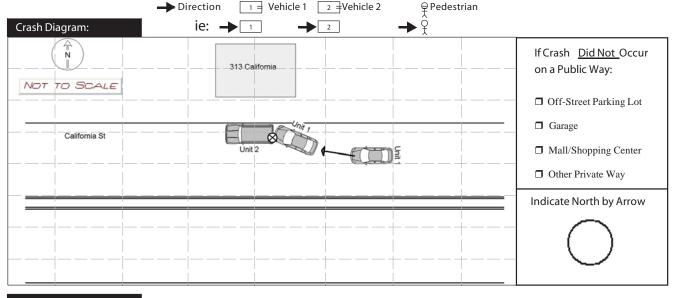
Poli	ce Use Only		Commonv	vealth	of Massa	achus	etts		F	RMV Do	cumen	t Number	
Date of Crash 10/04/2019	Time of Crash	City/Tov NEWTON	14100		hicle Cra	$\mathbf{sh} \mid_{\mathbf{v}}^{\mathbf{N}}$	Number Vehicles	Number Injured	Speed : Latitud	Limit <u>25</u> le	S L	tate Police ocal Police IBTA Police	X
10/042019	24HR				Report		2	1	Longit		O	ther:	<u> </u>
	AT INTER	RSECTION:	<	LOCA	ATION	>		NOT	AT I	NTERS	SECT	ION:	
					WEST	313		CALIFO	RNIA S	Г			
Route# Direct	tion		Roadway/Street		Route# Direction	on Addre	ess#		Name	of Roady	way/Stre	eet	_
-		A	.t		Feet I	N S E W	of _		_ • _	or			_
Route# Direc	tion N	Name of Intersecting	g Roadway/Street					Mile Ma	arker		Е	xit Number	
		Also at Inters	ection with		Feet [N S E W	of	Route#	Inte	ersecting l	Roadwa	y/Street	-
		N. CI.	: P 1 (G)		Feet [N S E W	of						
Route# Direct	10n	Name of Intersec	ting Roadway/Street				-			Landma	rk		$\overline{}$
XVehicle1	#Occupants	Hit/Run	Moped	Case Numbe	r	1900	0001008						
License#		St_MA	DOB/Age	Reg	1LMD95			Reg Typ	e PAN	F	Reg Stat	e_MA	
Sex_M_ Lic. (Class D 18 18	8 Lic. Restrictions		Veh	Year_2019	Veh N	lake_HO	NDA		Veh	Config	20	
Operator HAI		KEITH	Endorsment	: Own	er (Same as oper	rator)		First			iddle		_
Address 12 UT	ICA ST	First	Middle	Addı	ess	-				M	iddle		_
City LEXING		Sta	te_MA Zip_02420	City						State	Zip		_
Insurance Com	pany PROGRES	SSIVE		Vehi	cle Action Prior to	Crash	1 21	Da	maged A	Area Cod	e: (Circ	le Up to Thre	æ)
Vehicle Travel	Direction: N	S E X Respo	onding to Emergency?	N Even	t Sequence 2	22 22		22 2		3	4		
Citation # (If Is	ssued) T2079021			Most	Harmful Event	23			_	9) _	10 Undercarri	age
Violation	1: Ch90/24/Sec	Violation	2: Ch 90/24/ Fec	_ Drive	ا er Contributing Co	ode 14	24 97	24	-			11 Totaled	
Violation	3: ChSec	c Violation	4: ChSec	_ Unde	erride/Override	25	Towed	ຄ`		7	6		
		ator and all occup				2 Seat	6 27 t Safety A	28 29 irbag Airbag status Switch	30 Eject T	31 32 rap Injury Code Status	33 Transp.		
Name (Last First Operator	st Middle)		Address See Above		Age/DOB	Sex Pos.				Code Status	Code 2	NWH	у
											+		
											-		
Please Select C of the Followin	IX Vahida	2 <u>0</u> #Occupants	Non-Motorist A	Туре	14 Action 1	5 Locatio	on 10	Conditi	ion	17	Hit/Ru	ın Mop	ed
License#	J.	St	DOD/A	Descri	5YR125			Reg Typ	- PAN		Reg Stat	. MA	_
Sex Lic. (18 18		DOB/AgeCDL		Year_2019	Voh M			e		Config	20	-
Operator	1435	Lie. Restrictions	Endorsment		er MEIRA		LOURD			v cn	Comig	· _	
Address	Last	First	Middle		ress 313 CALIFO	t		First		М	iddle		-
		Sto	teZip		NEWTON					State MA	7in	02458	
	pany COMMER				cle Action Prior to	Crach	21] Da			_ ^	le Up to Thre	:e)
Vehicle Travel			oonding to Emergency?		t Sequence 1	22 22	22	<u>22</u> 2		3	_ 4	•	
Citation # (If Is		S E X Res	oriding to Emergency		Harmful Event	23				A		10 Undercarri	age
1		Violetion	2: ChSec		er Contributing Co	ode 1	24	24 1	← _/	9	6)	11 Totaled	
					erride/Override	25	Towed_	N 8		7	ر 6		
			4: ChSec occupants involved		and Overfide	20 Seat			30 Eject T	31 32 rap Injury	33		
Name (Last Fi	rst Middle)		Address		Age/DOB	Sex Pos	s. System	status Swite	h Code	rap Injury Code Statu		Medical Facil	ity
Operator/	Non-Motorist		See Above				-		+				
							+		1 1				
													7



Crash Narrative:

(Continued on next page)

MV1 (MA Reg: 1LMD95; Honda Accord 2019) was traveling west on California St when it came to rest on the shoulder of the road. MV2, (MA Reg: 5YR125; Honda CRV 2019) helped MV1 come to a stop because it was parked. Minor damage to MV1 front driver bumper and MV2 scratch on the rear bumper. MV2 owner, Lourdes Meira, exited her residence at 313 California St to witness MV1 pressed against her vehicle. Meira called 911 because she observed the driver of MV1 unconscious or asleep. Fire arrived on scene and gave two doses of Narcan to MV1 operator, Keith Harrington. Harrington gained consciousness and medics transported to NWH. Harrington admitted to injecting heroin today prior to this incident. Harrington to be summons for 90/24G-OUI Drugs, 2nd offense and 90/24E-Negligent Operation (MA Uniform Citation:T2079021). Citation given in hand at NWH by Ofc. Guarinio. Tody's towed MV1, towed motor vehicle form filled out. Used syringe

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) 35 Carrier Name _ ___ Carrier Issuing Authority Code _____ City____ Address__ US DOT #: State Number __ Issuing State _____ ICC #:___ Cargo Body Type Code Gross Vehicle Weight Reg Type_____ Reg State _____ Reg Year____ Trailer Length Trailer Reg #:_ Hazmat Information: Material Name______ Material 4 digit # ______ Release code Placard Material 1 digit #

ALEX N KANE		38800	NEWTON POLICE DEPARTM		10/04/2019
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date

_	Direction	→ Vehicle 1	2 #Vehicle 2	₹ Pedestr	ian	
Crash Diagram:	ie: →□	→ [:	2	▶ Ŷ		
Crash Diagram:				▶Ŷ. 	If Crash Did Not on a Public Way: Off-Street Parki Garage Mall/Shopping Other Private W Indicate North by	ng Lot Center ay
		·	_ — — — 🕂			
		i	i			
Crach Narrativo		-	-	'	<u> </u>	
Crash Narrative:	- C-1 1' -	- F 1 - W100 -				
from MV1 center console sa						
from center console beside	e used needle.	Container was	filed into p	property a	nd evidence to be tested.	An
immediate threat was filed	d and faxed to	RMV.				
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:						
Owner (Last, First, Middle)		Phone #	34-Type	Description of Damaged Property		
Truck and Bus Information:	Pagistration #		(From V	ehicle Section)		
Carrier Name	_		(11011) V6	, and the second second	Carrier Issuing Authority Co	35
Carrier Ivanic					Carrier issuing Audionty Co	ode
Address			City		St Zip	
US DOT#:	_ State Number		Issuing State	ICC #:_	Interstate	36
Cargo Body Type Code 37 Gro	oss Vehicle Weight	38				
		D 2	F **	_	39	
Trailer Reg #:	Reg Type	Reg State	Reg Year_	Tra	ailer Length	
Hazmat Information:	41				г	42]
Placard 40 Material 1 digit	# Material N	Vame		Material 4 o	digit # Release code	42
ALEX N KANE		38800	1	VTON POLICE DEPARTM	10/04	/2010

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)