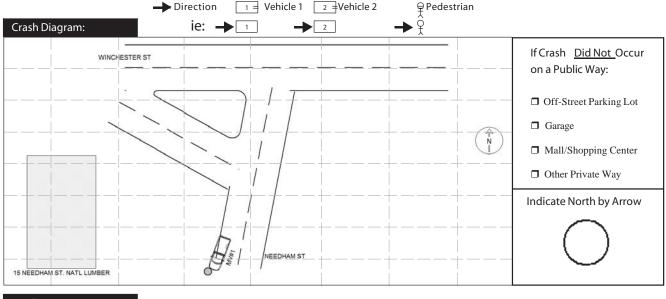
	Poli	ce Use Only		Common	wealth	of Mas	sach	use	tts		RV	IV Doc	umen	t Number	
	Date of Crash 10/16/2019	Time of Crash 23:38	City/Tov NEWTON	vn Mo	otor V	ehicle C	rash	Nun Vehi			Speed Lir Latitude		St	tate Police ocal Police IBTA Police	<u> </u>
	10/10/2019	23:38 24HR	NEWTON		Police	Report		1	0		Longitude			IBTA Police other:	
		AT INTER	RSECTION:	<	LOC	ATION	>		ľ	NOT A	AT INT	ERSI	ECT	ION:	
						sou	тн 1	15	NI	EEDHA	M ST				⊦
	Route# Direc	tion	Name of	Roadway/Street		Route# Dire	ction	Address	#		Name of	Roadwa	ay/Stre	eet	_
	At				Feet NSEW of or							╌			
	Route# Direction Name of Intersecting Roadway/Street				Mile Marker Exit Number										
			Also at Inters	ection with		FeetF	N S	E W of		loute#	Inters	ecting R	oadwa	y/Street	-
3	1					Feet NSEW of									
	Nodes Breeton Name of intersecting Roadway/Breet					Landmark									
7	XVehicle1	1_#Occupants	Hit/Run	Moped	Case Numl	er		1900001	1054						-
	License#		St MA	DOB/Age	Re	7TM878			R	eg Type	PAN	Re	eg Stat	e MA	
	Sex_M Lic.	18 1	_	19		n Year 2004								20	
				Endorsme	ent	ner (Same as o	perator)							,-	F
1	Address 24 M	Note				Owner Game as operator)  Last First Middle  Address								-  -	
	City NEEDH		Sta	e_MA Zip_02492		у						:e	Zip		
	'	pany PILGRIM				nicle Action Pric			21				_ ^	le Up to Thre	
				onding to Emergency	 /? <b>N</b> Eve	ent Sequence	20 22 22		22 22	0_		3	4		
		ssued)		υ υ,		st Harmful Ever		23			$\wedge$			10 Undercarr	iage
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2	Violation	3: ChSec	Violation	4: ChSec		derride/Override		25	owed Y	<b>6</b>		7	6		
	Please fill out for operator and all occupants involved										30 3 Eject Trap Code Code	1 32 Injury	33 Transp.		$\dashv$
	Name (Last Fir Operator	st Middle)		Address See Abov		Age/DOB	Sex		ystem Stati	s Switch	Code Code	Status 10	Code 1	Medical Facili	ty
	1									1					
1	Please Select C of the Followi	Vehicle	e# Occupants	Non-Motoris	t A Type	14 Action	15 Lo	ocation	16	Conditio	on 17		Hit/Ru	ın Mop	ed
			G,	DOD/A		Dag # Dag Type Dag Sto					┥				
	License #   St   DOB/Age					g # Reg Type Reg State  h Year Veh Make Veh Config.					20	-			
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L	Address	Last	First	Middle		rnerdress			F	irst		Mid	idle		-
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	Name (Last Fi	rst Middle)	1	Addres	SS	Age/DOI		Pos. S	System Sta	tus Switch	Code Coo		Transp. Code	Medical Facil	lity
	Operator/	Non-Motorist		See Abov	e		-			+					_
												+			-



## Crash Narrative:

On 10/16/19 at 2338 I responded to the area of 15 Needham St for a report of a single vehicle accident with the car into a pole and no one inside the vehicle. Upon arrival MA Reg 7TM878 was facing SW on Needham St leaned up against a telephone pole (#2) with heavy front end damage. Units searched the area for the operator and Officer Keefe located the party in the McDonalds up the street. The operator of MV#1 stated he was turning right onto Needham St from Winchester St when his power steering locked and he couldn't redirect his truck away from the curb and telephone pole. He further stated he left his truck because it was raining and his door wouldn't close. Medics responded to evaluate the operator, who signed a patient refusal. Tody's towing responded and towed the vehicle.

Witnesses:								
Name (Last, First, Middle)	Address				Phone #	Statement		
Property Damage:								•
Owner (Last, First, Middle)	Phone # 34-Type Des			Descrip	tion of Damage			
, EVERSOURCE,			4	#2				
Truck and Bus Information:  Carrier Name	Registration #		(From Vehic	cle Section)		_ Carrier Issuin	ng Authority Coo	35 le
Address			City			_ St	Zip	
	Issuing State ICC #: In					_ Interstate	36	
Cargo Body Type Code Gross	s Vehicle Weight	38				39		
Trailer Reg #: Reg Type Reg State Reg Year Trailer Length								
Hazmat Information:								
Placard 40 Material 1 digit #	41 Material Na	me	Material 4 digit # Release code					42