

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 11/14/2019		Time of Crash 17:48 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 0	Speed Limit 30 Latitude _____ Longitude _____		State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other: <input type="checkbox"/>	
AT INTERSECTION:				< LOCATION >		NOT AT INTERSECTION:						9	
SOUTH CHESTNUT ST										2			
Route# Direction Name of Roadway/Street				Route# Direction Address # Name of Roadway/Street						10			
At				Feet N S E W of _____ or _____									
ELLIOT ST				Mile Marker Exit Number									
Route# Direction Name of Intersecting Roadway/Street				Feet N S E W of _____						11			
Also at Intersection with				Route# Intersecting Roadway/Street						2			
Route# Direction Name of Intersecting Roadway/Street				Landmark									
<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants		<input checked="" type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 1900001174							
License # --- St MA DOB/Age ---				Reg # 8ZA768 Reg Type PAN Reg State MA									
Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year 2019 Veh Make LEXUS Veh Config. 1 20									
Operator WILKENS MARGARET K				Owner POST MOTORS INC								12	
Address 10 MYRTLE ST				Address 330 ARSENAL ST									
City MILLIS State MA Zip 02054				City WATERTOWN State MA Zip 02472									
Insurance Company TOKIO MARINE AMER.				Vehicle Action Prior to Crash 2 21				Damaged Area Code: (Circle Up to Three)					
Vehicle Travel Direction: N X E W Responding to Emergency? N				Event Sequence 1 22 22 22 22				2 3 4					
Citation # (If Issued) _____				Most Harmful Event 1 23				10 Undercarriage					
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 1 24 24				11 Totaled					
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed N				8 7 6					
Please fill out for operator and all occupants involved												13	
Name (Last First Middle) Address Age/DOB Sex				26 Seat Pos. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code				Medical Facility				1	
Operator See Above				-----				1 5 99 0 0 10 1					
Please Select One of the Following: <input checked="" type="checkbox"/> Vehicle 2 1 #Occupants <input type="checkbox"/> Non-Motorist A Type 14 Action 15 Location 16 Condition 17 <input checked="" type="checkbox"/> Hit/Run <input type="checkbox"/> Moped													
License # --- St MA DOB/Age ---				Reg # 3PA394 Reg Type PAN Reg State MA									
Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year 2013 Veh Make NISSAN Veh Config. 1 20									
Operator BURNS SAMANTHA M				Owner (Same as operator)									
Address 160 WILLIS AVE				Address _____									
City SEEKONK State MA Zip 02771				City _____ State _____ Zip _____									
Insurance Company ARBELLA				Vehicle Action Prior to Crash 1 21				Damaged Area Code: (Circle Up to Three)					
Vehicle Travel Direction: N X E W Responding to Emergency? N				Event Sequence 1 22 22 22 22				2 3 4					
Citation # (If Issued) T2081072				Most Harmful Event 1 23				10 Undercarriage					
Violation 1: Ch 90/24/C Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 99 24 24				5 11 Totaled					
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed N				8 7 6					
Please fill out for operator and all occupants involved													
Name (Last First Middle) Address Age/DOB Sex				26 Seat Pos. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code				Medical Facility					
Operator/Non-Motorist See Above				-----				99 99 99 0 0 99 1					

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

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:

I, Officer Sullivan, spoke with Margaret Wilkens MA OLN#S33922902 at Newton PD Headquarters at approximately 1745hrs. 11/14/2019. M. Wilkens was involved in an MVA in the area of Chestnut St.@Elliot St. (Newton)

. M. Wilkens appeared upset as crying. I asked if she were injured. She stated her neck was sore but she'd be ok. I asked if she had hit her head or if there were airbag deployment to which she answered "no". I asked her if she wanted EMS to medically evaluate her to which she also stated "no". M. Wilkens stated she was rear ended by another woman who refused to give her any information.

M. Wilkens stated after being rear ended she and the other woman were outside of their vehicles checking for visible damage. M. Wilkens stated it was dark and difficult to see. The other woman stated their was no damage to M. Wilkens car. M. Wilkens told her the vehicle (V1) she was driving was not hers and is

(Continued on next page)

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

→ Direction 1 Vehicle 1 2 Vehicle 2 Pedestrian

Crash Diagram:

ie: → 1 → 2 →



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:

in fact a rental. V1; MA Reg. 8ZA768, 2019 Lexus/NX300H color gray. M. Wilkens stated the other woman returned to her vehicle and drove away. M. Wilkens thought she was going to her vehicle to get her license and vehicle information. M. Wilkens also had recorded with her cell phone the brief interaction with the other operator.

M. Wilkens described the other woman as in her mid 20's average build approx. 5'5" with brown hair (in a pony tail), M. Wilkens took a photo of the other vehicle's (V2) license plate MA Reg. 3PA394, 2013 Niss/Altima color Brown. V2 is registered to Samantha Burns MA OLN# S88523502.

for further info reference NPD Incident report #19049137

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 35

Address _____ City _____ St _____ Zip _____

US DOT #: _____ State Number _____ Issuing State _____ ICC #: _____ Interstate 36

Cargo Body Type Code 37 Gross Vehicle Weight 38

Trailer Reg #: _____ Reg Type _____ Reg State _____ Reg Year _____ Trailer Length 39

Hazmat Information:

Placard 40 Material 1 digit # 41 Material Name _____ Material 4 digit # _____ Release code 42

DANIEL S SULLIVAN

NEWTON POLICE DEPT

11/14/2019

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date