

Commonwealth of Massachusetts

Police Use Only			Motor Vehicle Crash Police Report				RMV Document Number				
Date of Crash 11/20/2019	Time of Crash 21:27 24HR	City/Town NEWTON	Number Vehicles 1	Number Injured 0	Speed Limit 25 Latitude Longitude	State Police Local Police MBTA Police Other:					
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:				
Route# Direction Name of Roadway/Street At			EAST 140 BRANDEIS RD Route# Direction Address # Name of Roadway/Street Feet N S E W of Mile Marker Exit Number				2 9				
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with			Feet N S E W of Route# Intersecting Roadway/Street NEWTON SOUTH HIGHSCHOOL				2 10				
Route# Direction Name of Intersecting Roadway/Street			Feet N S E W of Landmark				1 11				
<input checked="" type="checkbox"/> Vehicle 1 # Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 1900001189		
License # --- St MA DOB/Age ---			Reg # 8NH737 Reg Type PAN Reg State MA			Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL ---			Veh Year 2002 Veh Make TOYOTA Veh Config. 1 20		
Operator DECTER JACOB			Owner DECTER MARJORIE			Address 20 VINE ST			Address 20 VINE ST		
City NEWTON State MA Zip 02467			City NEWTON State MA Zip 02467			Insurance Company SAFETY INSURANCE			Vehicle Action Prior to Crash 97 21 Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: N S X W Responding to Emergency? N			Event Sequence 40 22 20 22 97 22 22			Most Harmful Event 20 23			Driver Contributing Code 14 24 10 24		
Citation # (If Issued)			Underride/Override 25 Towed Y			Diagram: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33			11 Totaled		
Violation 1: Ch --- Sec --- Violation 2: Ch --- Sec ---			Violation 3: Ch --- Sec --- Violation 4: Ch --- Sec ---			Please fill out for operator and all occupants involved			Operator See Above		
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility			Operator See Above			Operator See Above			Operator See Above		
Please Select One of the Following: <input type="checkbox"/> Vehicle # Occupants <input type="checkbox"/> Non-Motorist A Type 14 Action 15 Location 16 Condition 17			<input type="checkbox"/> Hit/Run <input type="checkbox"/> Moped			Please fill out for operator and all occupants involved			Operator See Above		
License # --- St --- DOB/Age ---			Reg # --- Reg Type --- Reg State ---			Sex --- Lic. Class 18 18 Lic. Restrictions 19 CDL ---			Veh Year --- Veh Make --- Veh Config. 20		
Operator ---			Owner ---			Address ---			Address ---		
City --- State --- Zip ---			City --- State --- Zip ---			Insurance Company ---			Vehicle Action Prior to Crash 21 Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: N S E W Responding to Emergency? ---			Event Sequence 22 22 22 22			Most Harmful Event 23			Driver Contributing Code 24 24		
Citation # (If Issued)			Underride/Override 25 Towed ---			Diagram: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33			10 Undercarriage 11 Totaled		
Violation 1: Ch --- Sec --- Violation 2: Ch --- Sec ---			Violation 3: Ch --- Sec --- Violation 4: Ch --- Sec ---			Please fill out for operator and all occupants involved			Operator/Non-Motorist See Above		
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility			Operator/Non-Motorist See Above			Operator/Non-Motorist See Above			Operator/Non-Motorist See Above		

→ 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:

MV 1 was traveling eastbound on Brandeis Rd and struck a bush and the curb in front of Newton South High School. The front right tire was popped and left rear tire was popped. There was also significant damage to the undercarriage of the vehicle. Due to the vehicle being disabled on school grounds, it was towed by Today's towing. Inventory sheet completed and filed. Refer to NPD incident 19050207.

A city bush and curb was damaged from the accident noted in the crash diagram and property section.

Witnesses:

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

Property Damage:

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property
NEWTON, CITY OF,	1000 COMMONWEALTH AVE NEWTON, MASSACHUSETTS 0	617-796-1000	3	CURB
NEWTON, CITY OF,	1000 COMMONWEALTH AVE NEWTON, MASSACHUSETTS 0	617-796-1000	3	BUSH

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