

# Commonwealth of Massachusetts

Police Use Only			Commonwealth of Massachusetts										RMV Document Number						
Date of Crash 11/22/2019	Time of Crash 08:09 24HR	City/Town NEWTON	Motor Vehicle Crash Police Report										Number Vehicles 2	Number Injured 1	Speed Limit 25 Latitude Longitude	State Police Local Police MBTA Police Other:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
AT INTERSECTION:			< LOCATION >										NOT AT INTERSECTION:						
NORTH NAHANTON ST																			
Route# Direction			Name of Roadway/Street										Route# Direction Address # Name of Roadway/Street						
At													Feet N S E W of Mile Marker Exit Number						
EAST WELLS AVE																			
Route# Direction			Name of Intersecting Roadway/Street										Route# Intersecting Roadway/Street						
Also at Intersection with													Feet N S E W of						
Route# Direction			Name of Intersecting Roadway/Street										Landmark						
<input checked="" type="checkbox"/> Vehicle 1 2 #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 1900001195										
License # --- St MA			DOB/Age -- --			Reg # 5CR666			Reg Type PAS			Reg State MA							
Sex M Lic. Class D 18 18			Lic. Restrictions 9 19			Veh Year 2017			Veh Make HONDA			Veh Config. 1 20							
Operator DALMACY WEDLY			Endorsment			Owner (Same as operator)			First Middle			1 12							
Address 73 ALMONT ST						Address			First Middle										
City MATTAPAN State MA Zip 02126						City State Zip													
Insurance Company L.M. GENERAL INS.						Vehicle Action Prior to Crash 3 21			Damaged Area Code: (Circle Up to Three)										
Vehicle Travel Direction: N S X W			Responding to Emergency? N			Event Sequence 1 22 22 22 22			2 3 4			10 Undercarriage							
Citation # (If Issued)						Most Harmful Event 1 23			1 24 24			11 Totaled							
Violation 1: Ch Sec Violation 2: Ch Sec						Driver Contributing Code 1 24 24			Underride/Override 25 Towed Y			8 7 6							
Violation 3: Ch Sec Violation 4: Ch Sec																			
Please fill out for operator and all occupants involved																		13	
Name (Last First Middle) Address Age/DOB Sex Seat Pos. 26 Safety System 27 Airbag Status 28 Airbag Switch 29 Eject Code 30 Trap Code 31 Injury Status 32 Transp. Code 33 Medical Facility																		1	
Operator See Above																			
SU, CHANG 116 SPRING ST W. ROXBURY, MA 02132																			
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 type="checkbox"/> Hit/Run <input type="checkbox"/> Moped																			
License # --- St MA																		Reg # 9KV198	
DOB/Age -- --																		Reg Type PAS	
Reg State MA																			
Sex M Lic. Class D 18 18																		Veh Year 2018	
Lic. Restrictions 9 19																		Veh Make HONDA	
Veh Config. 1 20																			
Operator ZYKORIE JOSHUA A																		Owner HONDA LEASE TRU:	
Address 63 BROADWAY ST (apt. 2)																		Address 600 KELLY WAY	
City ARLINGTON State MA Zip 02474																		City HOLYOKE State MA Zip 01040	
Insurance Company LIBERTY MUTUAL INS.																		Vehicle Action Prior to Crash 1 21	
Vehicle Travel Direction: X S E W																		Damaged Area Code: (Circle Up to Three)	
Responding to Emergency? N																		Event Sequence 1 22 22 22 22	
Citation # (If Issued) T2079214																		2 3 4	
Violation 1: Ch A7/17 Sec Violation 2: Ch Sec																		1 23	
Violation 3: Ch Sec Violation 4: Ch Sec																		1 24 24	
Underride/Override 25 Towed Y																		8 7 6	
Please fill out for operator and all occupants involved																		13	
Name (Last First Middle) Address Age/DOB Sex Seat Pos. 26 Safety System 27 Airbag Status 28 Airbag Switch 29 Eject Code 30 Trap Code 31 Injury Status 32 Transp. Code 33 Medical Facility																		1	
Operator/Non-Motorist See Above																			

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

NAHANTON ST

J.C.C. #333 WINCHESTER ST

WELLS AVE

Unit 1

Unit 2

NOT TO SCALE

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:**

The operator of Veh#1 was traveling North on Nahanton St. when he was stopped and was preparing to take a right onto Wells Ave. Veh #2 then struck him in the rear. Heavy damage to Veh#1 and the operator was transported to N.W.H. due to complaint of neck and back pain. The rear passenger of Veh#1 was checked out and cleared by Medics.

The operator of Veh#2 stated he was traveling due North on Nahanton St. when he looked down for a second and Veh#1 had stopped. Operator of Veh#2 stated he didn't have time to stop and struck the rear of Veh #1. The airbag disabled light came on his vehicle so this vehicle along with Veh#1 was towed by Tody's Towing. The operator of Veh#2 was cited in hand Mass# T2079214 for N.C.O. 19/75-Failure to use care in stopping.

**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

**ZACHARY S RAYMOND**      **NEWTON POLICE DEPT.**      **11/22/2019**

Police Officer Name (Please Print)      Signature      ID/Badge #      Department      Precinct/Barracks      Date

CDP1 11 -24:00