

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 12/03/2019		Time of Crash 13:58 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 0	Speed Limit 25 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	
Route# _____ Direction _____ Name of Roadway/Street _____ At _____				SOUTH 364 WOODWARD ST Route# _____ Direction _____ Address # _____ Name of Roadway/Street _____ Feet [N][S][E][W] of _____ Mile Marker _____ Exit Number _____ Feet [N][S][E][W] of _____ Feet [N][S][E][W] of _____ Route# _____ Intersecting Roadway/Street _____ Landmark _____								2	10
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____ Also at Intersection with _____												11	2
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____													
<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 190001243							
License # _____ St MA DOB/Age _____ Sex M Lic. Class A 18 M 18 Lic. Restrictions 1 19 CDL _____ Operator BUTERA BRAD Address 126 ADAMS AVE City NEWTON State MA Zip 02465 Insurance Company CITY OF NEWTON				Reg # M88537 Reg Type MVN Reg State MA Veh Year 2011 Veh Make VOLVO Veh Config. 97 20 Owner CITY OF NEWTON Address 110 CRAFTS ST City NEWTON State MA Zip 02458 Vehicle Action Prior to Crash 10 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 19 24 24 Underride/Override 25 Towed N Citation # (If Issued) N/A Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____								12	1
Please fill out for operator and all occupants involved												13	1
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 ----- --- 99 4 99 0 0 10 1 N/A									
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 DOB/Age _____ Sex M Lic. Class D 18 M 18 Lic. Restrictions 1 19 CDL _____ Operator CACERES MARCO Address 364 WOODWARD STREET City NEWTON State MA Zip 02468 Insurance Company GEIKO				Reg # 26P270 Reg Type PAN Reg State MA Veh Year 2006 Veh Make MERCEDES Veh Config. 1 20 Owner (Same as operator) Address _____ City _____ State _____ Zip _____ Vehicle Action Prior to Crash 10 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 1 24 24 Underride/Override 25 Towed N Citation # (If Issued) N/A Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____								13	1
Please fill out for operator and all occupants involved												13	1
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 ----- --- 99 4 99 0 0 10 1 N/A									

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

NOT TO SCALE

Woodward Street

Unit 1

Unit 2

364 Woodward Street

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

Indicate North by Arrow

↑ N

Crash Narrative:

On Tuesday, December 3, 2019, while assigned to Traffic unit N525, I responded to 364 Woodward Street, Newton for a crash involving a City of Newton owned vehicle. The weather at the time of the accident was light snow. The road surface was wet. Woodward Street is a public way maintained by the City of Newton.

I spoke with the operator of MV1, Brad Butera (S94383997). Butera stated he was operating a City of Newton owned 2011 Volvo Front Loader (MA MVN: M88537) on Woodward Street while clearing the roadways during a declared snow emergency. Butera stated he was backing up Southbound across Woodward Street in the area of 364 Woodward Street after clearing some snow. Butera stated he looked and did not see any vehicles behind him. Butera stated he was backing the Front Loader up and the rear back of his vehicle crashed into the front hood area of MV2. I did not observe any obvious damage to the bucket area. Butera

(Continued on next page)

Witnesses:

Name (Last, First, Middle)	Address	Phone #	Statement
FREDERICK, EMILY,	364 WOODWARD STREET NEWTON, MA	-----	Y

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

MICHAEL R GAUDET NEWTON POLICE DEPT 12/03/2019

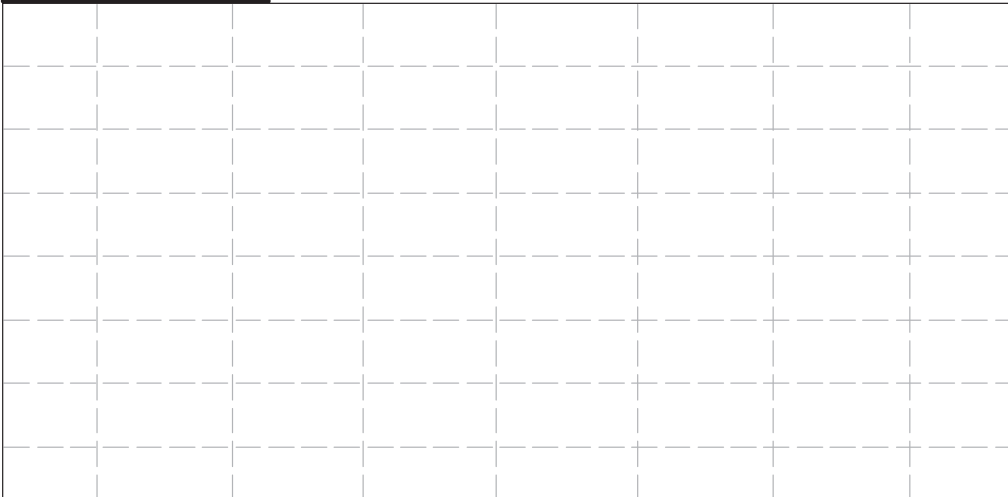
Police Officer Name (Please Print) Signature ID/Badge # Department Precinct/Barracks Date

CDP1 11 -24:00

→ 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:

reported no injuries. Butera stated the operator of MV2 stated "My fault" to him during their exchange after the crash. Butera is an employee of the City of Newton DPW.

I spoke with the operator of MV2, Marco Caceres (S67223904). Caceres stated he was operating his 2006 Mercedes E350 (MA: 26P270) Westbound on Woodward Street. Caceres stated he saw a Front Loader ahead of him clearing snow in the roadway. Caceres stated he stopped his vehicle in the roadway and then began backing into the driveway of his residence (Southbound) located at 364 Woodward Street. Caceres stated as he was backing into his driveway, MV1 began backing up towards him. Caceres stated he was honking his horn numerous time. Caceres stated the rear of MV1 crashed into the front hood area of his vehicle. I observed damage to the front driver side hood area. Caceres reported no injuries.

(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 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

MICHAEL R GAUDET

NEWTON POLICE DEPT

12/03/2019

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

Crash Narrative:	
I spoke with a witness to the crash, Emily Frederick. Frederick stated she was clearing snow off of her car in the driveway of 364 Woodward Street. Frederick stated she heard a car honking and looked up into the roadway. Frederick stated she observed MV1 crashed into the front end of MV2.	
Photos were taken of both vehicles and submitted to the IT Bureau.	

Property Damage:				
Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property

MICHAEL R GAUDET			NEWTON POLICE DEPARTM		12/03/2019
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11 :24:00					