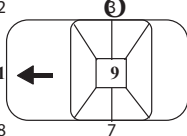
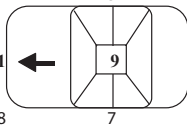


Police Use Only			Commonwealth of Massachusetts				RMV Document Number							
Date of Crash 12/19/2019		Time of Crash 14:43 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 0	Speed Limit 20 Latitude _____ Longitude _____		State Police <input type="checkbox"/> 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 73 WALNUT 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								10		
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with												11		
Route# Direction Name of Intersecting Roadway/Street												4		
<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 190001315						3		
License # --- St MA DOB/Age --- Sex F Lic. Class D 18 18 Lic. Restrictions B 19 CDL _____ Operator ROCHWERGER PENNI Address 7 MUDUCH RD City NATICK State MA Zip 01760 Insurance Company COMMERCE				Reg # 85ZX45 Reg Type PAN Reg State MA Veh Year 2015 Veh Make TOYOTA Veh Config. 2 20 Owner (Same as operator) Address _____ City _____ State _____ Zip _____ Vehicle Action Prior to Crash 2 21 Damaged Area Code: (Circle Up to Three) Event Sequence 10 22 22 22 22 2 Most Harmful Event 10 23 Driver Contributing Code 1 24 24 Underride/Override 25 Towed N								12		
Vehicle Travel Direction: N X E W Responding to Emergency? N Citation # (If Issued) _____ Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____												13		
Please fill out for operator and all occupants involved												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 ----- --- 1 4 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 type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		7
License # --- St DOB/Age --- Sex _____ Lic. Class 18 18 Lic. Restrictions 19 CDL _____ Operator _____ Address _____ City _____ State _____ Zip _____ Insurance Company PLYMOUTH ROCK				Reg # 1CZR67 Reg Type PAN Reg State MA Veh Year 2011 Veh Make TOYOTA Veh Config. 1 20 Owner ESPINAL NIKITA Address 37 PIERCE ST City HYDE PARK State MA Zip 02136 Vehicle Action Prior to Crash 11 21 Damaged Area Code: (Circle Up to Three) Event Sequence 10 22 22 22 22 2 Most Harmful Event 10 23 Driver Contributing Code 1 24 24 Underride/Override 25 Towed N								8		
Vehicle Travel Direction: N X E W Responding to Emergency? N Citation # (If Issued) _____ Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____												13		
Please fill out for operator and all occupants involved												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 ----- --- 3 99 4 99 0 0 10 1										
ESPINAL, NIKITA				37 PIERCE ST HYDE PARK, MA 02136										

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 → Pedestrian

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:

On 12/19/2019 at 14:43 hours Newton Police dispatch received numerous phone calls about a white male whose face was covered in blood and was riding on an electric motorized scooter south bound on Walnut St near number 100. Walnut St is a public way in the city of Newton. Approximately two tenths of a mile south 100 Walnut St, Ofc Garcia stopped the male on the scooter. Ofc Garcia stated that the male on the scooter was evasive when answering his questions and claimed that he did not realize that his face was covered in blood. The male on the scooter was identified as Gregory David Brown. Brown was transported to Newton Wellesley Hospital for treatment. Prior to Brown being transported I was dispatched to the area of 100 Walnut St for a report of a male on an scooter who had crashed into a south bound vehicle in traffic on Walnut St and another vehicle that was parked in front of number 73. Upon my arrival I spoke with Penni Rochwerger and

(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

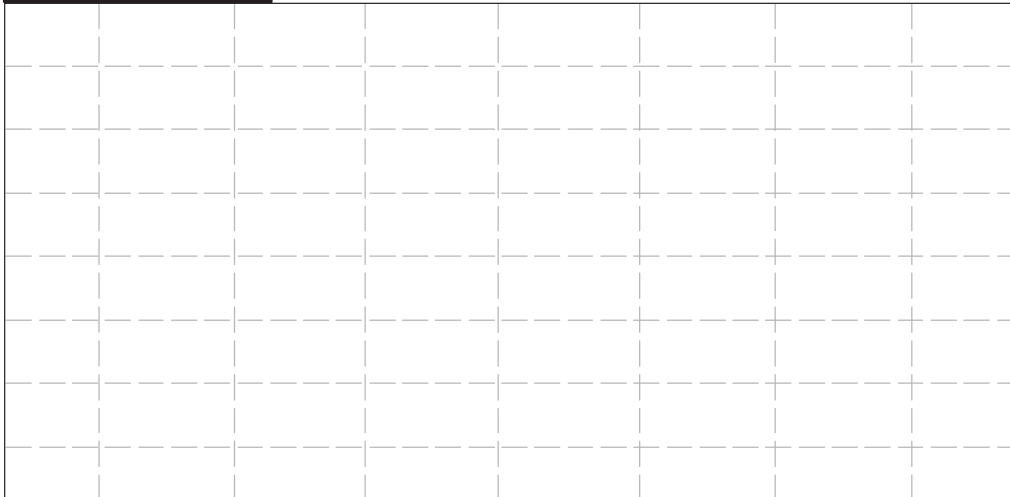
Hazmat Information:

Placard Material 1 digit # Material Name _____ Material 4 digit # _____ Release code

→ Direction 1 Vehicle 1 2 Vehicle 2 Pedestrian

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:

lacerations, and that he refused medical aid and continued to ride his scooter south bound towards the entrance to Walnut St. I left a message for Marucci to contact me and as of the writing of this report she has yet to do so. While at the hospital I ran Brown's name and date of birth via the MA RMV data base in order to issue him a citation for not wearing a helmet. The query of Brown via the MA RMV data base revealed that Brown's MA driver's license statutes was suspended. On 07/11/2018 admitted to a finding of sufficient facts to one count of MGL 90/24 OUI liquor. Brown received a Continued With Out Finding for 18 months. In addition Brown pleaded guilty to an additional count of MGL 90/24V Child Endangerment While OUI. Brown received a 90 day sentence in the Middlesex House of Correction which was suspended for 18 months. Brown also received a one year loss of his driver's license. Brown is on active probation out of Newton District

(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 A MCSWEENEY

NEWTON POLICE DEPART

12/20/2019

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

Crash Narrative:

Court until 07/21/2020.

Biased upon the statements made to me I issued Brown MA Criminal Application T 2012526 for violations of MGL 90/24(2) Leaving The Scene Of An Accident Property Damage , MGL 90/1E Operation Of A Motorized Scooter Without A Valid License and MGL 90/1E Operation Of A Motorized Scooter With Out A Helmet. As of 12/20/2019 Brown was discharged from Newton Wellesley Hospital.

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

MICHAEL A MCSWEENEY			NEWTON POLICE DEPT		12/20/2019
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11 :24:00					