

Police Use Only			Commonwealth of Massachusetts				RMV Document Number					
Date of Crash 02/13/2020	Time of Crash 11:40 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:							
EAST RIVER ST Route# Direction Name of Roadway/Street At SOUTH ALDEN PL Route# Direction Name of Intersecting Roadway/Street Also at Intersection with Route# Direction Name of Intersecting Roadway/Street			Route# Direction Address # Name of Roadway/Street Feet N S E W of _____ or _____ Mile Marker Exit Number Feet N S E W of _____ Route# Intersecting Roadway/Street Feet N S E W of _____ Landmark									
<input checked="" type="checkbox"/> Vehicle 1 2 #Occupants			<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 2000000147					
License # --- St MA DOB/Age --- Sex F Lic. Class D 18 18 Lic. Restrictions 9 19 CDL _____ Operator PASSERELLO KARA R Address 19 CRAVEN CIR City WALTHAM State MA Zip 02452 Insurance Company GOVT EMPLOYEE INS			Reg # 93H860 Reg Type PAN Reg State MA Veh Year 2005 Veh Make CADI Veh Config. 1 20 Owner (Same as operator) Address _____ City _____ State _____ Zip _____ Vehicle Action Prior to Crash 1 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 Y Citation # (If Issued) _____ 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			13									
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 4 0 0 10 1									
GUSTAFSON, JAKE 19 CRAVEN CIR WALTHAM, MA 02452 --- M 3 1 4 4 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	
License # --- St MA DOB/Age --- Sex M Lic. Class D 18 18 Lic. Restrictions 9 19 CDL _____ Operator MO TIMOTHY Address 40 ALDEN PL City NEWTON State MA Zip 02465 Insurance Company COMMERCE			Reg # 8718YY Reg Type PAN Reg State MA Veh Year 2013 Veh Make HOND Veh Config. 1 20 Owner MO YOUDE Address 40 ALDEN PL City NEWTON State MA Zip 02465 Vehicle Action Prior to Crash 6 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 4 24 24 Underride/Override 25 Towed Y Citation # (If Issued) T2080885 Violation 1: Ch 89/8 Sec _____ Violation 2: Ch _____ Sec _____ 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. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility			Operator/Non-Motorist See Above --- --- 1 4 4 0 0 10 1									

**Crash Narrative:**

The operator of MV#1 states that she was traveling east on River St when MV#2 entered her roadway from Alden Pl and crashed into her MV.

The operator of MV#2 stated that he had stopped at the stop sign on Alden Pl and was attempting to enter River St east bound after he didn't observe any MV's traveling on River St in either direction. According to operator #2, as soon as he entered River St crash occurred with MV#1.

No injuries, no tows and operator #2 cited.

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

GEORGE M CLAFLIN			NEWTON POLICE DEPT		02/13/2020
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11:24:00					