



→ 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:**

Owner of V1 stated he was in the YMCA swimming. When he came out he was notified V1 was involved in a MVA.

Owner of V1 stated he had to be at an appointment so he left. Later in the day, the Owner of V1 called for assistance. Owner of V1 showed me minor damage (cracked bumper). It should be noted I could not see the damage until he pointed it out. I had to bend down to see the damage.

Witness stated she saw V2 back up into V1. Witness stated she took an image of V2 and told the Opr of V2 she hit V1. Witness went into the YMCA and gave them the information. V2 left the scene.

I called the Owner/Opr of V2. Opr of V2 stated she was unaware of the damage. Opr of V2 stated she thought she felt a bump while backing up, got out of V2, looked for damage, did not see any, and left. Opr of V2 stated she was backing up to leave the parking space.

(Continued on next page)

**Witnesses:**

Name (Last, First, Middle)	Address	Phone #	Statement
KOPLIKAJ, ZERINA,	,	----	N

**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

DANIEL ANDERSON	32456	NEWTON POLICE DEPART	02/17/2020
Police Officer Name (Please Print)	Signature	ID/Badge #	Department
			Precinct/Barracks
			Date

CDP1 11 -24:00

