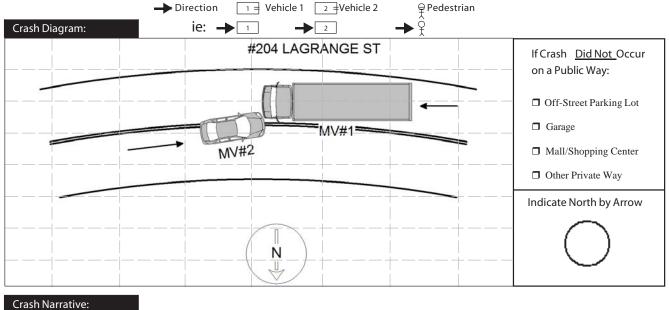
		ce Use Only					of Massa	_	sett	S						ıt Number	
	Date of Crash 03/25/2020	Time of Crash 07:49	City/ NEWTON	Town			icle Cra	sh	Number Vehicle				l Limit ide			tate Police ocal Police IBTA Police	X
L	09/29/2020	24HR					Report		2	2			itude_		C	other:	
		AT INTER	RSECTION	•	< L	OCAT	TION	>		N	OT A	AT I	NTF	ERSI	ECT	ION:	
							EAST	204		LAC	GRAN	GE S	Г				
1	Route# Direct	ion	Name	of Roadway/Stree	et	F	Route# Direction	on Ad	dress #			Nam	ne of R	Coadwa	ay/Str	eet	
\dashv				At			Feet 1	N S E	w of			_ •		or			
- -	Route# Direct	tion 1	Name of Intersec	ting Roadway/Stre	eet	— [-				M	ile Mar	ker			Е	Exit Number	
ľ			Also at In	tersection with		-	Feet [N S E	w of	Ro	ute#	In	ntersec	ting R	oadwa	ıy/Street	_
7						-	Feet [N S E	W of							-y	
╣,	Route# Directi	ion	Name of Inter	secting Roadway/	Street								Lar	ndmarl	k		
	Wehicle 1	2_#Occupants	Hit/Ru	n Mop	ed Case N	Number		20	0000024	16							
7	License#		St.	MA DOB/Age		Reg#_	R39550			Res	Tyne	CON	1	Re	eo Stat	te_MA	
	Sex_M Lic. C	Tass D 18 1		19	 DL	-	ear_2015	Vah	Maka						Config	20	_
- 1	Operator SERI		EDWARD	En	ndorsment		RYDER TRU		Wake_					· venv	Coming	·	
	Address 59 JAN	Last NVRIN AVE	First		Middle		S 229 JEFFERS	it.		Firs	st			Mid	idle		_
	City REVERE			State_MA_Zip_	02151		OCHESTER						State	NY	7in	14623	-
	Insurance Comp			June 2.ip _			e Action Prior to	Crash		21					_	ele Up to Thre	ee)
\dashv	Vehicle Travel			esponding to Eme	ergency? N			22 22	22	22	2		3		4	•	,
	Citation # (If Is			sponding to Eme	rigency:		Iarmful Event	23					\prod	7		10 Undercarr	riage
				on 2: ChS	Sac		L	ode 1	24	24	0	-	9		5	11 Totaled	
				on 4: ChS			Contributing Co	25		ved Y	0	<u> </u>	7		6		
+				cupants involved		Undern	ide/Override		26 2 eat Safe			30 Eject	31	32 Injury	33 Transp.		
-	Name (Last First				Address		Age/DOB	Sex P	os. Syste			Code		Status	Code	Medical Facili	ity
-	Operator			See 28 CROSBY ST	e Above				1	4		0	0	10	1		
-	BARROS, EMA	ANUEL	I	BROCKTON, MA	02302			M 3	1	4	99	0	0	10	1		
	Please Select O	ne V Vobisk	e2 <u>2</u> #Occup	ants Non M	Motorist A Type	14	4 Action 1	I5 Loca	tion	16	onditio		17		Hit/Ru	un Mop	and
۳,	of the Followin	ng: Verlicit			lotolistA Type	,	Action	Loca	uon		onuno)II		_	i iit/ Nt	Мор	Jeu
	License#	18	St _	MA DOB/Age	e	Reg # _4	1681HK			Re	g Type_	PAN	i	Re	eg Stat	te MA	-
-	Sex_M Lic. C	Class D 10	Lic. Restricti	ions 1 C	DLndorsment	Veh Ye	ear_2015	Veh	Make_	HOND	A			Veh	Config		
- 1	Operator JOH	Last	ERROL First		Middle	Owner	(Same as open	rator)		Firs	st			Mid	idle		-
┨	Address 71 PO	ND ST				Address	s										_
-	City HOLBRO	ОСК		State MA Zip	02343	City							_State_		_Zip		_
-	Insurance Comp	pany INTEGON	N NATIONAL			Vehicle	Action Prior to	Crash	1	21	Dan	naged	Area	Code:	: (Circ	le Up to Thre	ree)
-	Vehicle Travel I	Direction: N	S E X	Responding to Em	ergency?N	Event S	Sequence 1	22 22	22	22	0		3		4		
-	Citation # (If Is	sued)				Most H	Iarmful Event	1 23			Q ◀		9		5	10 Undercarr 11 Totaled	riage
-	Violation	n 1: ChS	ec Viola	tion 2: Ch	.Sec	Driver	Contributing Co	ode 9	24	24				<u>\</u>			
-	Violation	n 3: ChS	ec Viola	tion 4: Ch	_Sec	Underri	ide/Override	25	Tow	ed_Y	0		7		6		
ľ			r operator and	all occupants inv			A - /DOD		26 2 eat Safe	7 28 ty Airbag	29 Airbag	30 Eject		32 Injury	33 Transp	M. J. I.F.	11.6
\vdash	Name (Last Fire Operator/N	Non-Motorist		See	Address e Above		Age/DOB	Sex	Pos. Sys	tem Statu	Switch 4	Code 0	Code 0	Status 9	Code 2	Medical Faci BRIGHAM WOME	
			I									l .			1		
1	JOHNSON, SII	DNETTA		71 POND ST HOLBROOK, MA				F 3	1	3	4	0	1	7	2	BRIGHAM WOME	ENS



OPER OF MV#1 STATED THAT HE WAS TRAVELLING EB ON LAGRANGE ST (#204), BELOW THE SPEED LIMIT, WHEN MV#2 APPROACHED WB, AND CROSSED THE DOUBLE YELLOW LINES. MV#2 THEN STRUCK THE DRIVER SIDE FRONT END OF MV#1. OPER OF MV#2 STATED THAT HE WAS TRAVELLING WB ON LAGRANGE ST, BELOW THE SPEED LIMIT, AND DOES NOT RECALL HOW THE ACCIDENT HAPPENED.

PASSENGER OF MV#2 STATED THAT THEY WERE TRAVELLING EB ON LAGRANGE ST, WHEN THEIR VEHICLE SLIGHTLY DRIFTED OVER THE DOUBLE YELLOW LINES, AND STRUCK MV#1.

PASSENGER #2 WAS TRAPPED IN THE FRONT PASSENGER SEAT AND WAS EXTRICATED BY NFD.

BOTH VEHICLES TOWED BY TODYS WITH FRONT END DAMAGE.

OFC GAUDET PHOTOGRAPHED THE SCENE.

Witnesses:						
Name (Last, First, Middle)		Address			Phone	e # Statement
		25 CROSSTC				Υ
FINNEGAN , DONNA,	,	W ROXBURY	Y,MA 02132			ĭ
Property Damage:						
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Dam	naged Property
Truck and Bus Information:	Registration #		(From Vehi	icle Section)		
Truck and Bus Information:	Registration #		`	,	Carrier Is	suing Authority Code 35
						suing Authority Code
Carrier Name			_ City		St	suing Authority Code Zip
Carrier NameAddressUS DOT #:	State Number		_ City		St	suing Authority Code Zip
Carrier NameAddressUS DOT #:	State Number		_ City		St	zuing Authority Code Zip Interstate 36
Carrier NameAddressUS DOT #:	State Number	38	_ City Issuing State	ICC #:_	St	zuing Authority Code Zip Interstate 36
Carrier Name Address US DOT #: Cargo Body Type Code37	State Number	38	_ City Issuing State	ICC #:_	St	zuing Authority Code Zip Interstate 36