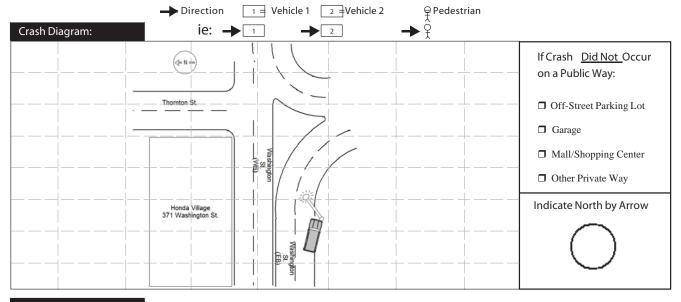
Pol	ice Use Only		Common	wealth	of Massa	achus	etts		R	MV Doo	cumen	t Number	
Date of Crash 05/15/2020	Time of Crash 21:00	City/Tow NEWTON	m Mo	otor Ve	hicle Cra	sh $\begin{bmatrix} N \\ V \end{bmatrix}$	umber ehicles	Number Injured	Speed I Latitude		St	tate Police ocal Police IBTA Police	□ Xi
03/13/2020	21:00 24HR			Police	Report		1	0	Longitu		M O	ther:	<u> </u>
	AT INTER	RSECTION:	<	LOCA	ATION :	>		NOT	AT IN	TERS	ECT	ION:	
					EAST	399		WASHIN	NGTON S	ST			
Route# Direc	tion	Name of R	oadway/Street		Route# Direction	n Addre	ess#		Name	of Roadw	ay/Stre	eet	
		A	t		Feet N	N S E W	of –		•	– or			
Route# Direc	ction N	Name of Intersecting	Roadway/Street			1~1~1		Mile Ma	arker		E	xit Number	_
		Also at Interse			Feet N	N S E W	of	Route#		rsecting R	oadwa	v/Street	_
]					Feet N	N S E W	of			8		,	
Route# Direc	tion	Name of Intersect	ng Roadway/Street							Landmar	k		
XVehicle1	_1_#Occupants	X Hit/Run	Moped	Case Numbe	er	2000	000295						
License#		St MA	_ DOB/Age	- Reg	# 82F930			Reg Tyn	e PAN	R	eg Stat	e MA	
Sex_M Lic.	18 1		19 300		Year 2016							20	_
	UILAR Last	_	R Endorsme	ent	or (Same as oper								
Address 71 Co	Last ONGRESS AVE	First (apt. 3)	Middle		Last	t		First			ddle		_
City CHELSE			MA Zip 02150								Zin		-
'		SSIVE DIRECT IN			cle Action Prior to		21	_			_ ^	le Up to Thre	_
			nding to Emergency		at Sequence 20^{2}		22	<u> </u>		3	4		
	ssued)		name to Emergency		Harmful Event	23 23				$\perp \Lambda$		10 Undercarr	riage
1			: ChSec		er Contributing Co		24	24 (1)	← /	9	5	11 Totaled	
1			: Ch Sec		erride/Override	25	Towed	Y 0		7	6		
Please	fill out for oper	ator and all occupa	ants involved			26 Seat		28 29 Airbag Airbag Status Switch	30 Eject Tr	31 32 ap Injury ode Status	33 Transp.		\dashv
Name (Last Fin	st Middle)	<u> </u>	Address See Abov		Age/DOB	Sex Pos.		Status Switch	99 0		Code 1	Medical Facili	ity
-1								* *			-		\dashv
													\dashv
Please Select (of the Followi		e# Occupants	Non-Motorist	t A Type	14 Action 1	5 Locatio	n 1	6 Condit	ion	17	Hit/Ru	ın Mop	ed
		σ.	DOD/4	D.	"						g		
	License # St DOB/Age					g # Reg Type Reg State 2 h Year Veh Make Veh Config.							-
Sex Lic. Operator		Lic. Restrictions	CDL Endorsme	ent			таке			ven	Connig		
Address	Last	First	Middle		er	t		First		Mi	ddle		-
		State	eZip						C.	toto	7in		-
Insurance Com		State	: Zip		cle Action Prior to		21	_			_ ^	le Up to Thre	_
Vehicle Travel		S E W Resp	onding to Emergency			2 22	22	22 2		3	4	•	ĺ
	ssued)	^	onding to Emergency		Harmful Event	23						10 Undercarr	riage
1			2: ChSec		er Contributing Co	vda	24	24 1	← _/	9	5	11 Totaled	
1			2: ChSec 4: ChSec		erride/Override	25	l Towed_			7	6		
			ccupants involved		JIIIII OVEITIUE	26 Seat		28 29 Airbag Airbag	30 Figst F	31 32 ap Injury	33 Transp		\dashv
Name (Last F	irst Middle)		Address	S	Age/DOB	Sex Pos	Safety P System	Status Swite	ch Code C	ap Injury ode Status	Transp. Code	Medical Facil	lity
Operator/	Non-Motorist		See Above	e			-		+				=
									+				



Crash Narrative:

On 05/15/2020, at 2100 hours, I responded to the area 399 Washington St. for a single vehicle accident.

Upon arrival, I observed a red Toyota Highlander (MA Reg. 82F930) with heavy front end damage from colliding with and knocking down a cement light pole. The operator of the vehicle had fled the scene prior to our arrival. The registered owner is Orlin R. Aguilar. Inside the vehicle were 'Five Star Moving' logs indicating that Aguilar works at 95 Adams St. The route Aguilar would take home from his employer's address to his house in Chelsea would take him past the crash location. Chelsea PD was contacted to check on Aguilar's wellbeing. Ofc. Serrano of CPD located Aguilar in his apartment taking a shower. He appeared intoxicated with redness on his nose and face. Aguilar stated his car was stolen and he had no idea why it would be in Newton. Chelsea PD's wellbeing check was performed over a half hour after the accident and,

(Continued on next page)

W itnesses:							
Name (Last, First, Middle)	Address			Phone #	Phone #		
Property Damage:	,						
Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Dama	ged Property		
NEWTON, CITY, OF	1000 COMMONWEALTH AV NEWTON,MASSACHUSETT		3	LIGHT POLE			
Truck and Bus Information: Carrier Name	Registration #	`	ŕ	Carrier Issu	ning Authority Coc	e 35	
Address		City		St	Zip		
US DOT #:	_ State Number	Issuing State	ICC #:_		Interstate	36	
Cargo Body Type Code 37 Gro	oss Vehicle Weight 38			39			
Trailer Reg #:	Reg Type Reg State	Reg Year	Tr				
Hazmat Information:							
Placard 40 Material 1 digit	# Material Name		Material 4	digit #	Release code	42	

→	Direction	1_	∃ Vehic	ie T	2 #Vehicle 2	¥'	edestr	ian			
Crash Diagram:	ie: -	1		→ [2	→ ♀					
									on a Po	h Did Not Oublic Way: Street Parking age I/Shopping Court Private Way e North by A	g Lot enter
Crash Narrative:											
according to GPS, Aguilar'	s home is	14 mi	nutes	from	the crash	Location	. Dis	patch o	contacted U	ber and L	vft to
inquire if Aquilar was pic											
Honda Village across from											
surveillance footage. Pict											
responded and towed the ve	hicle. Wa	shingt	on St.	is a	public way	y mainta	ined	by the	City of Ne	wton.	
Witnesses:											
Name (Last, First, Middle)			Addres	S					Phone #		Statement
Property Damage:											
Owner (Last, First, Middle)	Address				Phone #	34	-Туре	Descript	ion of Damaged	Damaged Property	
Truck and Bus Information:	Registrati	on #			(Fro	m Vehicle S	ection)				
Carrier Name									Carrier Issuing	Authority Cod	35 le
Address					City				St	Zip	
											36
37	State Number		38		Issuing Stat		ICC #:_			Interstate	
Cargo Body Type Code Gros	ss Vehicle Wei	ght	33								
Trailer Reg #:	Reg Type		Reg	State _	Reg Y	ear	Tra	ailer Leng	th 39		
Hazmat Information:											
Placard 40 Material 1 digit #	41 Ms	aterial Na	ame			Ma	terial 4	digit#	R	elease code	42
Transfer i digit #	1416					1716		Bat "			
				247						05/15/2	

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)