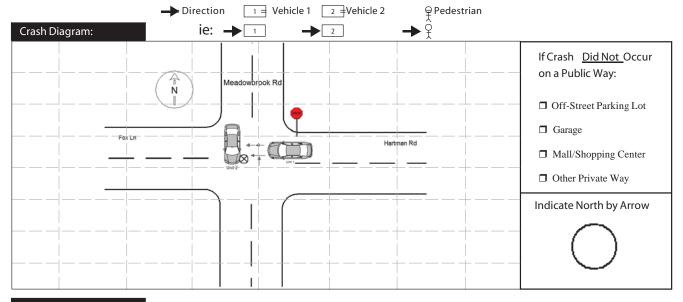
Г	Poli	ce Use Only		Comr	nonwea	lth o	of Massa	achus	etts			RM	V Docu	ıment	Number	
	Date of Crash 06/17/2020	Time of Crash 16:31 24HR	NEWTON	Town			icle Cra Report	l v	umber ehicles	Num Inju	ed Lat	eed Lim		Sta Lo MI Ot	ate Police cal Police BTA Police her:	N Xi
r			RSECTION	[:		LOCAT		>		_		INT				
Ì	********															
	Route# Direct		MAN RD Name	of Roadway/Stre	et	I	Route# Direction	n Addre	ess#	-	N	ame of I	Roadwa	y/Stree	et	_
\neg	SOUT	ΓH MEAD	OWBROOK R			-	Feet	S E W	of -	Mil	– –– Marker	• —	or	Fv	it Number	_
ľ	Route# Direct	tion N		cting Roadway/Str	reet		Feet N	N S E W	of	IVIII	Vivianci			LA	it ivuilioci	_
_			Also at II	tersection with				NSEW		Rou	e#	Intersec	ting Ro	adway	/Street	-
	Route# Direct	tion	Name of Inte	rsecting Roadway	/Street		rect 1	1 S E W	01			La	ndmark			_
1	XVehicle1	_1_#Occupants	Hit/Ru	ın Mor	oed Case I	Number		2000	000333			La	numark			
┪	License#		St	MA DOB/Age		D#5	7WNP80			D '	r P.A	N	D-	- C4-4-	MA	
	Sex_F Lic. (18 1	18	19			ear 2008								20	-
- 1			Lic. Restrict FRANCES	E	DL ndorsment		(Same as oper	.a.t.o.u)						oning.	1	
	A January 22 PR	Last LINCETON RD	First		Middle		Las	t					Midd	le		_
- 1	City BROOKL			State_MA Zip	02467		SS							7:		-
	•	pany COMMER					e Action Prior to		2	_				-	e Up to Thr	- 1
\neg				esponding to Em				22 22	22		e D	3		4		
			1 1 1 - 7	esponding to Em	ergency ?_1		Sequence 1	23					\overline{A}) 1	10 Undercarr	riage
		ssued)		ion 2: Ch	200		Harmful Event	1	24	24	•	9		5 1	11 Totaled	
┪							Contributing Co	25		. N	9	7	<u> </u>	6		
+				ccupants involve		Underr	ide/Override	26	Towed		29 3	30 31	32	33		
-	Name (Last Firs		ator and an oc		Address		Age/DOB	Sex Pos.	System	28 Airbag A Status \$	29 3 irbag Eje witch Coo	30 31 Ct Trap de Code	32 Injury T Status	ransp.	Medical Facili	ity
-	Operator			Se	e Above				- 1	4	1 0	0	10	1		
-																
	Please Select O of the Followir		e2 <u>2</u> #Occup	pants Non-M	Motorist A Typ	e 1	4 Action 1	5 Locatio	n	16 Co	ndition	17	□ ŀ	lit/Rur	п Мор	ed
ſ	License#			MA DOB/Ag	e	Reg # <u>7CF791</u> Reg				_Reg	g Type PAN Reg State MA			MA	_]	
	Sex_F_ Lic. C	Class D 18 1	Lic. Restrict		CDL	Veh Year 2020 Veh Make MERZ Veh Config. 1										
1	Operator CHI	ANG	ANNE	E	ndorsment	Owner (Same as operator) Last First Middle								_		
┨	Address 35 MI	EADOWBROO!	K RD		Middle	Last First MiddleAddress								_		
	City NEWTON	N		State_MA_Zip	02459	StateZip								_		
	Insurance Comp	pany STANDAI	RD FIRE INSU	JRANCE		Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)								ee)		
Vehicle Travel Direction: XSEW Responding to Emergency? N Citation # (If Issued)					_ Event Sequence 1 22 22 22 2 3 4											
					Most Harmful Event 1 23 10 Undercarriage							riage				
Violation 1: ChSec Violation 2: ChSec						Driver Contributing Code 1 24 24										
Violation 3: Ch Sec Violation 4: Ch Sec							Underride/Override 25 Towed Y 8									
	Ple	ease fill out for	r operator and	all occupants in				26 Seat	27 Safety	28 Airbag A	29 3 irbag Eje	0 31 ct Trap		33 ransp.		
					Address		Age/DOB	Sex Pos	. System	Status	Switch Co	ode Code	Status	Code	Medical Faci	ility
	Name (Last Fir		1	Se	e Above				- 1	4	1 0	0			- Wiedieur Tuer	
	Name (Last Fir	rst Middle)		Se 35 MEADOWBRO MA 02459	e Above			F 3	- 1		1 0 1 0	0	10	1	Trouteur Tue.	



Crash Narrative:

On Wednesday, June 17th 2020 at 1631 hours, I responded to Meadowbrook Rd at Hartman Rd for a 2 vehicle accident with no injuries. Vehicle # 1 (Mass Reg # 7WNP80 2008 LEXS SEDAN COLOR BLACK) was being operated by registered owner Frances Schwartz. Vehicle # 2 (Mass Reg # 7CF791 2020 MERZ SEDAN COLOR BLACK) was being operated by registered owner Anne Chiang. Vehicle # 1 was headed west on Hartman Rd approaching the stop sign at the intersection of Meadowbrook Rd. Vehicle # 2 was driving southbound on Meadowbrook Rd. Stuart Rothman of 83 Meadowbrook Rd was standing in his front yard and witnessed the accident. The witness stated Vehicle # 1 did not stop at the stop sign and continued straight into Meadowbrook Rd toward Fox Ln. Vehicle # 1 crashed into Vehicle # 2 as a result. There was major damage to the left rear end of Vehicle # 2. Tody's towed Vehicle # 2. Vehicle # 1 suffered minor damage and was able to (Continued on next page)

Witnesses:			
Name (Last, First, Middle)	Address	Phone #	Statement
ROTHMAN, STUART,	149 BEARD WAY NEEDHAM,MA 02492		N
Property Damage:			

Property Damage:						
Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damag	ged Property	
Truck and Bus Information:	Registration #	(From Veh	icle Section)			
Carrier Name				Carrier Issu	ning Authority Code	35
Address		City		St	Zip	
US DOT #:	_ State Number	Issuing State	ICC #:_		Interstate	36
Cargo Body Type Code 37 Gr	ross Vehicle Weight 38			39		
Trailer Reg #:	Reg Type Reg Sta	ate Reg Year	Tra			
Hazmat Information:						
Placard 40 Material 1 digi	# 41 Material Name		_ Material 4	digit #	Release code	42

NICHOLAS JAMES GAMBLE			NEWTON POLICE DEPARTM		06/17/2020
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDR1 11 -24:00					

•	Direction	1 = Vehicle	2 = Vehicle 2	Pedestr	ian	
Crash Diagram:	ie: →[1	2	→ 🖁		
					If Crash <u>Did No</u> on a Public Way	
		_			☐ Off-Street Parl	ring Lot
					☐ Garage	ting Lot
		_ 		-		Contor
					Other Private	
		 _		 		
					Indicate North b	y Arrow
)
						′
Crash Narrative:						
be operated. According to				1, the sun wa	as in her eyes and she d	id not see
the other vehicle approach	ching. Both ve	hicles ha	ive insurance.			
W itnesses:						
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	- rogistation ii		(11011	,	Carrier Issuing Authority	Code 35
Address			City		St Zip	
US DOT #:	State Number		Issuing State	ICC #:	Interstate	36
Cargo Body Type Code 37 G	ross Vehicle Weight	38				
Trailer Reg #:		Reg S	tate Reg Ye	ar Tra	niler Length	
Hazmat Information:				110		
Placard 40 Material 1 dig	it # 41 Material	Name		Material 4 c	ligit # Release code	42
NICHOLAS JAMES GAMBLE				NEWTON POLICE DEPARTM	06/1	7/2020

ID/Badge #

Department

Signature

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)