

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 06/17/2020		Time of Crash 21:16 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 1	Number Injured 1	Speed Limit 30 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:						9	
WEST COMMONWEALTH AVE										2			
Route# Direction Name of Roadway/Street				Route# Direction Address # Name of Roadway/Street						10			
At				Feet N S E W of _____ or _____									
NORTH WALNUT ST													
Route# Direction Name of Intersecting Roadway/Street				Mile Marker Exit Number									
Also at Intersection with				Feet N S E W of _____						11			
Route# Direction Name of Intersecting Roadway/Street				Route# Intersecting Roadway/Street						3			
				Landmark									
<input checked="" type="checkbox"/> Vehicle 1 #Occupants				<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 200000336					
License # --- St MA DOB/Age ---				Reg # 6DZ359		Reg Type PAN		Reg State MA					
Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year 2016		Veh Make GMC		Veh Config. 2 20					
Operator SCHNEIDER KURT V				Owner (Same as operator)								12	
Address 717 MOODY ST				Address									
City WALTHAM State MA Zip 02453				City		State		Zip					
Insurance Company COMMERCE INS				Vehicle Action Prior to Crash 1 21		Damaged Area Code: (Circle Up to Three)							
Vehicle Travel Direction: N S E W Responding to Emergency? N				Event Sequence 4 22 22 22 22		2 3 4							
Citation # (If Issued) _____				Most Harmful Event 4 23		1 9		10 Undercarriage		5 11 Totaled			
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 1 24 24		6 7							
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed N									
Please fill out for operator and all occupants involved												13	
Name (Last First Middle) Address				Age/DOB		Sex		26 Seat Pos.		27 Safety System		28 Airbag Status	
Operator See Above				-----		---		99		4		99	
												30 Eject Code	
												31 Trap Code	
												32 Injury Status	
												33 Transp. Code	
												Medical Facility	
												N/A	
Please Select One of the Following: <input type="checkbox"/> Vehicle #Occupants				<input checked="" type="checkbox"/> Non-Motorist A Type 2 14		Action 1 15		Location 4 16		Condition 1 17		<input type="checkbox"/> Hit/Run	
												<input type="checkbox"/> Moped	
License # _____ St _____ DOB/Age _____				Reg # _____		Reg Type _____		Reg State _____					
Sex M Lic. Class 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year _____		Veh Make _____		Veh Config. 20					
Operator BOLTAYEV AZIZ				Owner									
Address 39 DARTMOUTH (apt. 2)				Address									
City WALTHAM State MA Zip 02453				City		State		Zip					
Insurance Company _____				Vehicle Action Prior to Crash 21		Damaged Area Code: (Circle Up to Three)							
Vehicle Travel Direction: N S E W Responding to Emergency? _____				Event Sequence 22 22 22 22		2 3 4							
Citation # (If Issued) T2015009				Most Harmful Event 23		1 9		10 Undercarriage		5 11 Totaled			
Violation 1: Ch 85/11B Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 24 24		6 7							
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed _____									
Please fill out for operator and all occupants involved													
Name (Last First Middle) Address				Age/DOB		Sex		26 Seat Pos.		27 Safety System		28 Airbag Status	
Operator/Non-Motorist See Above				-----		---						29 Airbag Switch	
												30 Eject Code	
												31 Trap Code	
												32 Injury Status	
												33 Transp. Code	
												Medical Facility	
												8 2 BETH ISREAL	

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

NOT TO SCALE

WALNUT ST

COMM AVE

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:**

On Wednesday 6/17/2020 at approx 2116hrs, while assigned to N-494, I responded to the intersection of Walnut St and Comm Ave for MVA involving a bicyclist.

The bicyclist, Aziz Boltayev, said he was traveling NB on Walnut St and attempted to cross Comm Ave. He stated that he was in the middle of the intersection when Comm Ave' light signal turned green. Contact was made to MV1s driver side front panel. Boltayev was transported to Beth Israel with serious injuries to his legs. Boltayev was not wearing a helmet nor wearing reflective clothing. His bicycle, a blue Schwinn, had no front head lamp attached in violation of MGL c85 s11B. A citation was issued and mailed to Boltayev. He was wearing a light colored shirt and shorts.

Operator of MV1 states that he was on Comm Ave heading WB and stopped at a red light at the intersection of

(Continued on next page)

**Witnesses:**

Name (Last, First, Middle)	Address	Phone #	Statement

**Property Damage:**

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property
BOLTAYEV, AZIZ,	39 DARTMOUTH WALTHAM, MASSACHUSETTS	929-215-3331	97	SCHWINN BIKE

**Truck and Bus Information:**

Registration # \_\_\_\_\_ (From Vehicle Section)

Carrier Name \_\_\_\_\_ Carrier Issuing Authority Code

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate

Cargo Body Type Code  Gross Vehicle Weight

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length

**Hazmat Information:**

Placard  Material 1 digit #  Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code

KEVIN DURICKAS      NEWTON POLICE DEPT      06/17/2020

Police Officer Name (Please Print)      Signature      ID/Badge #      Department      Precinct/Barracks      Date

CDP1 11 -24-00

