

## Commonwealth of Massachusetts

Police Use Only			Motor Vehicle Crash Police Report				RMV Document Number				
Date of Crash 07/01/2020	Time of Crash 08:28 24HR	City/Town NEWTON	Number Vehicles 1	Number Injured 0	Speed Limit 5 Latitude Longitude	State Police Local Police MBTA Police Other:					
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:				
Route# Direction Name of Roadway/Street At			WEST 345 WASHINGTON ST Route# Direction Address # Name of Roadway/Street				2 9				
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with			Feet N S E W of Mile Marker Exit Number				2 10				
Route# Direction Name of Intersecting Roadway/Street			Feet N S E W of Route# Intersecting Roadway/Street				11 1				
Route# Direction Name of Intersecting Roadway/Street			Landmark								
<input checked="" type="checkbox"/> Vehicle 1 # Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 200000355		
License # --- St MA DOB/Age ---			Reg # R89489 Reg Type CON Reg State MA			Sex M Lic. Class A 18 18 Lic. Restrictions 1 19 CDL ---			Veh Year 2009 Veh Make INTL Veh Config. 10 20		
Operator BARROS MARCOS			Owner BURKE DISTRIBUTING			Address 29 LINDSEY ST			Address 89 TEED RD		
City NEW BEDFORD State MA Zip 02740			City RANDOLPH State MA Zip 02368			Insurance Company ZURICH INSURANCE			Vehicle Action Prior to Crash 10 21 Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: N S X W Responding to Emergency? N			Event Sequence 23 22 22 22 22			Citation # (If Issued) ---			Most Harmful Event 23 23		
Violation 1: Ch --- Sec --- Violation 2: Ch --- Sec ---			Driver Contributing Code 1 24 24			Violation 3: Ch --- Sec --- Violation 4: Ch --- Sec ---			Underride/Override 25 Towed N		
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 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code Medical Facility			Operator See Above			Operator/Non-Motorist See Above		
Please Select One of the Following: <input type="checkbox"/> Vehicle # Occupants <input type="checkbox"/> Non-Motorist A Type 14 Action 15 Location 16 Condition 17			<input type="checkbox"/> Hit/Run <input type="checkbox"/> Moped			Operator/Non-Motorist			Operator/Non-Motorist		
License # --- St --- DOB/Age ---			Reg # --- Reg Type --- Reg State ---			Sex --- Lic. Class 18 18 Lic. Restrictions 19 CDL ---			Veh Year --- Veh Make --- Veh Config. 20		
Operator ---			Owner ---			Address ---			Address ---		
City --- State --- Zip ---			City --- State --- Zip ---			Insurance Company ---			Vehicle Action Prior to Crash 21 Damaged Area Code: (Circle Up to Three)		
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Operator/Non-Motorist			Operator/Non-Motorist			Operator/Non-Motorist			Operator/Non-Motorist		
Operator/Non-Motorist			Operator/Non-Motorist			Operator/Non-Motorist			Operator/Non-Motorist		
Operator/Non-Motorist			Operator/Non-Motorist			Operator/Non-Motorist			Operator/Non-Motorist		

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

345 Washington St.

Vehicle #1

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:**

Operator of vehicle # 1 stated he was backing up in the Dunkin Donuts parking lot to make a delivery. While backing a portion of the trailer struck the Dunkin Donuts/ Heriz Rug Gallery Knocking the sign over.

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**Witnesses:**

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

**Property Damage:**

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property
			97	DUNKIN DONUTS SIGN

**Truck and Bus Information:**

Registration # R89489 (From Vehicle Section)

Carrier Name BURKE DISTRIBUTING CO Carrier Issuing Authority Code 35

Address 89 TEED DR City RANDOLPH St MA Zip 02368

US DOT #: 3174925 State Number BP460045 Issuing State MASSAC ICC #: 1 Interstate 36

Cargo Body Type Code 97 Gross Vehicle Weight 2

Trailer Reg #: 93547 Reg Type TRL Reg State MASSAC Reg Year 2007 Trailer Length 97

**Hazmat Information:**

Placard 40 Material 1 digit # 41 Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code 42