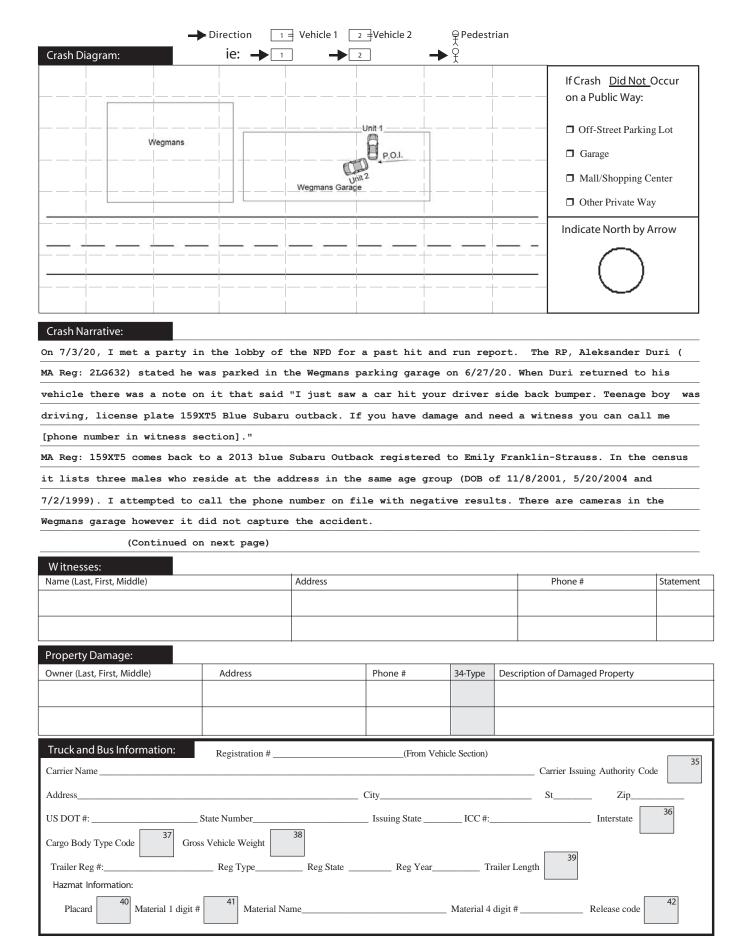
	Poli	ce Use Only		Commonwea	lth (of Massa	achus	etts			RMV	/ Docui	ment Nur	mber		
	Date of Crash 07/03/2020	Time of Crash 10:31 24HR	City/Tov NEWTON	MIOTOI		icle Cra Report	l v	fumber ehicles	Numbe Injured	Latit	d Limi ude gitude_		State Police Local For MBTA Other:	olice Police Police	XXI	
						Dlice Report 2 0 Longitude Other: LOCATION > NOT AT INTERSECTION:								l:	┪	
															2	
1	Route# Direc	tion	Name of I	Roadway/Street		Route# Directio	n Addre	ess #	DOTES			oadway	/Street		- -	
99	-											_ 2				
	Route# Direction Name of Intersecting Roadway/Street					Feet NSEW of or Exit Number										
	Koute# Direc	tion IN	Feet NSEW of													
2			Route# Intersecting Roadway/Street Feet N S E W of										2			
99	Route# Direction Name of Intersecting Roadway/Street					Landmark										
3	XVehicle1	#Occupants	X Hit/Run	Moped Case N	Number 2000000358											
	License #		C+	DOP/A go	Pag#	2LG632			Pag Tr	no PAN	J.	Dog	State MA			
	License # St DOB/Age					Reg # 2LG632 Reg Type PAN Reg State MA VV V 2000 VV V MERC VV C S 1										
4	Sex Lic. Class Lic. Restrictions CDL Operator					Veh Year 2000 Veh Make MERC Veh Config. 1 Owner DURI ALEKSANDER										
1				Middle	Owner DURI ALEKSANDER Last First Middle Address 544 GREAT PLAIN AVE											
				7.												
	City State Zip Insurance Company GEICO					City NEEDHAM State MA Zip 02492 Vehicle Action Prior to Crash 11 Damaged Area Code: (Circle Up to Three)										
5			CEW D	r . F . a N			2 22	22	22 2	, umage	3	(4	10 11110		
1				onding to Emergency? N	Event Sequence 2 10 Undercarriage									age		
	,	ssued)		o di		Harmful Event	2	24	24	+	9		1 1 To			
⁶ 1				2: ChSec		Contributing Co	ode		8		7		6			
1		3: ChSec_	Underride/Override Towed N 26 27 28 29 30 31 32 33 Seat Safety Airbag Airbag Eject Trap Injury Transp.									_				
	Please fill out for operator and all occupants involved Name (Last First Middle) Address					Age/DOB Sex Pos. System Status Switch Code Code Status Code Medical Facility								1		
	Operator			See Above				-			-					
⁷ 1	Please Select C of the Followin	IX Vehicle	2 <u>1</u> #Occupants	Non-Motorist A Type	e 1	4 Action 1:	5 Locatio	on 1	Cond	ition	17	Н	it/Run	Море	ed	
	License#	icense#St_MADOB/Age							Reg Ty	pe PAN	N .	Reg State_MA				
	Sex_M Lic. 0	Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL					Veh Year 2013 Veh Make SUBARU Veh Config. 20									
8	Operator STR	Operator STRAUSS SAMUEL CURTIS				Owner FRANKLIN-STRAUS: EMILY W										
99	Address 189 LINCOLN STREET Last First Middle Middle					Address 189 LINCOLN ST First Middle										
	City NEWTON State MA Zip 02461					City NEWTON State MA Zip 02461										
	Insurance Company PRIVILEGE UNDERWRITERS RECIPROCAL EXCHA					Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)									e)	
	Vehicle Travel Direction: NSEW Responding to Emergency?N					Event Sequence 2 22 22 22 22 3 4										
		Citation # (If Issued) N/A					Most Harmful Event 2 23									
		n 1: ChSe	Driver Contributing Code 19 24 24 5 11 Totaled													
	Violation 3: ChSecViolation 4: ChSec					Underride/Override 25 Towed N 8 7 6										
		ease fill out for	26 27 28 29 30 31 32 33 Seat Safety Airbag Airbag Eject Trap Injury Trans						33 ansp.							
	Name (Last Fi	rst Middle) Non-Motorist		Address See Above		Age/DOB	Sex Pos	s. System	Status Sw	itch Code	Code	Status C	Code Med	lical Facili	ty	
	Орегани.	1 1011-1410101131		See Above				77	± 99	0	U	10 1			\dashv	
-								+		-					\dashv	



ANDREW SCOTT VELLO

Police Officer Name (Please Print)

Signature

ID/Badge # Department Precinct/Barracks Date

-	Direction 1 = V	Vehicle 1 2	₹Vehicle 2	₽Pedestrian		
Crash Diagram:	ie: → 1	2	→	Ŷ		
					If Crash <u>Did Not</u> O	Occur
					☐ Off-Street Parking	g Lot
					☐ Garage	
į į	i i	į			☐ Mall/Shopping Ce	enter
	_				Other Private Way	
	- — — — — - — — — — — —			. — — — —	Indicate North by A	
		į	į		indicate North by A	llow
			+-			
					-	
Crash Narrative:						
Traffic Bureau update (Off	icer Gaudet): On	Monday, Ju	nly 6, 2020, I	attempted to	make contact with the	9
registered owner of MV2, E	mily Franklin-Str	auss (S5618	34971), with a	negative resu	ult. A Hit and Run	
inquiry was mailed to Ms.	Franklin-Strauss.					
On Wednesday, July 15, 202	0, I spoke with t	the operator	of MV2, Samue	el Strauss (S	90135443), via	
telephone. Strauss stated	he was operating	л MA: 159XT5	at the time of	of the crash	in the parking garage	
Strauss stated he was back	ing his vehicle u	p and heard	d a sound. St	rauss stated h	ne got out of his vehi	icle and
looked for damage on the p	arked car he back	ed up into.	Strauss sta	ted he stayed	on scene for 7-10 min	nutes
and left after he observed	no damage. Stra	uss stated	d a claim has h	peen filed and	d insurance is now inv	volved.
(Continued o	n next page)					
Witnesses:						
Name (Last, First, Middle)	A	Address			Phone #	Statement
Property Damage:						1
Owner (Last, First, Middle)	Address		Phone #	34-Type Descrip	otion of Damaged Property	
T 1 10 16 11						
Truck and Bus Information:	Registration #					35
Carrier Name					_ Carrier Issuing Authority Code	e
Address			•			36
US DOT #:	State Number38		Issuing State	ICC #:	Interstate	30
Cargo Body Type Code Gros	ss Vehicle Weight					
Trailer Reg #:	Reg Type	_ Reg State	Reg Year	Trailer Len	gth 39	
Hazmat Information:						
Placard 40 Material 1 digit #	Material Name	e		Material 4 digit #_	Release code	42
ANDREW SCOTT VELLO			NEWTON	POLICE DEPARTA	07/03/20	020
Police Officer Name (Please Print)	Signature	I			Precinct/Barracks Date	

	Direction	1 =	Vehicle	1 2	≥ =Vehicle 2	₽ Pedestr	ian					
Crash Diagram:	ie: →[1	į	→ [2	2	→ ♀						
								If Crash <u>Did Not</u> on a Public Way:	Occur			
		_ _		į				Off-Street Parkin	ıg Lot			
								☐ Garage				
								☐ Mall/Shopping C	Center			
		-						Other Private Wa				
		_ -						Indicate North by A				
		ĺ						indicate North by 7	Allow			
		-						- $-$				
Crash Narrative:												
Strauss stated he is an i	nexperienced	driv	er and	l did	not know wh	at to do in	a si	tuation like this. S	Strauss			
was advised that if he is	invovled in	a cr	rash in	the	future, he	should cont	act t	the local police depar	tment in			
the city the the crash oc	curs in so the	e po	olice o	an he	lp faciliat	e an exchan	ge of	information. Straus	s stated			
there was another passeng	er in the veh	icle	with	him a	t the time	of the cras	h nam	ed David Banteekhan.	Strauss			
could not provde any othe	r information	for	this	party	except that	t he lives	in Ne	wton and his Snapchat	name is			
D_David5935. I could not	find any oth	er i	nforma	tion	on this par	ty. No inj	uries	reported. Strauss is	a			
student at Newton South High School. No futher action will be taken.												
Witnesses:												
Name (Last, First, Middle)			Address					Phone #	Statement			
Property Damage:												
Owner (Last, First, Middle)	Address				Phone #	34-Type	Descri	ption of Damaged Property				
Truck and Bus Information:	Registration #				(From	Vehicle Section)			35			
Carrier Name								Carrier Issuing Authority Co	de			
Address		City St Zip										
US DOT #:	_ State Number		38		Issuing State _	ICC #:_		Interstate	36			
Cargo Body Type Code 37 Gr	oss Vehicle Weight		38									
Trailer Reg #:	Reg Type		 Reg S	tate	Reg Ye	ar Tr	ailer Lei	ngth 39				
Hazmat Information:												
Placard 40 Material 1 digit	# 41 Materia	ıl Nan	me			Material 4	digit#_	Release code	42			
ANDREW SCOTT VELLO						NEWTON POLICE DEPARTI		07/03/2	2020			

CDP1 11 ·24·00

Police Officer Name (Please Print)

ID/Badge #