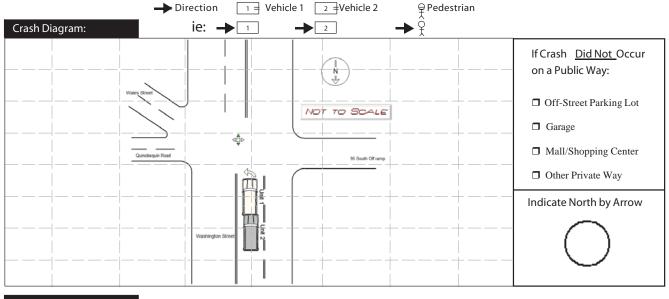
	Poli	ce Use Only		Comm	onwealt	h o	f Mas	ssac	huse	etts			RM	V Doc	cumer	ıt Number	
	Date of Crash 09/04/2020	Time of Crash 07:43 24HR	NEWTON	own ]	Motor V Polic		icle C Report		Nu Ve	ımber hicles	Numl Injur 0	ed La	eed Lim titude _ ongitude		S L N C	tate Police ocal Police IBTA Police Other:	XI D
			RSECTION:			CAT		>			NC	T A	ΓΙΝΤ	ERS	ECT	ION:	$\Box$ $-$
	SOU	TH QUINO	BEQUIN			Т											2
1 1	Route# Direc			of Roadway/Street		R	Route# Dire	ection	Addres	ss #		N	Name of	Roadw	ay/Str	eet	$ {2}$
_	WES <sup>-</sup>	т WASHI	INGTON ST	At			Fee	t N S	S E W	of -			•	or			2
	Route# Direc			ing Roadway/Street	t	- -					Mile	Marke	r		E	xit Number	_
			Also at Inte	ersection with		_ -	Fee	t N S	EW	of	Rout	e#	Interse	cting R	Coadwa	ıy/Street	-
2 <b>1</b>		<del></del>	N Clater			_ -	Fee	t N S	E W	of							7
3	Route# Direc	tion	Name of Inters	ecting Roadway/St	reet								La	ndmar	k		4
	XVehicle1	#Occupants	Hit/Rur	Moped	Case Nu	mber			20000	00497							1
	License#		St_N		I	Reg # <u>5</u>	050ZC				_Reg T	ype_P	AN	R	.eg Sta		_
	Sex_F Lic.	Class D 18 1	8 Lic. Restriction			Veh Yea	ar_2014		Veh Ma	ake_AC	CURA			_Veh	Config	g. 20	
4	Operator MA	HERAS	KRISTIE		orsment iddle (	Owner _	(Same as	perato	r)		First			Mi	ddle		- 1
3	Address 891 C	ENTRAL AVEN	NUE	IVI			s							IVII	uuie 		. <del> </del> ^
	City NEEDHA	AM	S	tate_MA_Zip_02	2492 (	City							State	e	Zip		.
	Insurance Com	pany_COMMER	CE			Vehicle Action Prior to Crash  2  Damaged Area Code: (Circle Up to Three)								e)			
5 <b>1</b>	Vehicle Travel	Direction: N	S E X Res	sponding to Emerg	gency?NI	Event S	Sequence	1 22	22	22	22		3		<b>(</b>		
	Citation # (If I	ssued) N/A			ľ	Most H	armful Eve	nt 1	23	·		4	.   \	$f \mid$	ഉ	10 Undercarri 11 Totaled	age
	Violation	1: ChSec	Violatio	n 2: ChSec	I	Driver (	Contributing	Code	1	24	24			<u>\</u>			
<sup>6</sup> 1	Violation	3: ChSec	Violatio	n 4: ChSec	: t	Underri	de/Override		25	Towe	1 <u>N</u>	3	7		<b>_</b> 0	1	
	Please to Name (Last Fir		ator and all occ	upants involved	ldress	26 27 28 29 30 31 32 33   Seat Safety Airpag Fiject Trap Injury Transp.   Age/DOB   Sex   Pos. System Status Switch   Code   Code   Status   Code   Medi					Medical Facilit	<sub>y</sub> 1					
	Operator			See A	Above					99	4 9	9 0	0	10	1	N/A	
7 <b>4</b>	Please Select C	I A Venicle	2 <u>1</u> #Occupa	nts Non-Mo	torist A Type	14	4 Action	15	Location		Con	ndition	17		Hit/R	un Mope	ed
	License#		St N	1A DOB/Age	I	Reg # 3253701				Reg Type PAN			p	Reg State_PA		-	
	Sex_F_ Lic. (	18 1		19			Year_2018 Veh Make_H			ake HY					20		
<sup>8</sup> <b>2</b>	Operator OW		LEIGHA		orsment	Owner (Same as operator)						· [					
2	Address 27 HANCOCK STREET  Address 27 HANCOCK STREET				iddle	Last First Middle Address											
	City DORCHESTER State MA Zip 02125						CityStateZip										
		pany PROGRES				Vehicle Action Prior to Crash  1 Damaged Area Code: (Circle Up to Three)							ee)				
		le Travel Direction: NSEX Responding to Emergency?N					Event Sequence 1 22 22 22 22 2 3 4										
	Citation # (If Issued) T1270756  Violation 1: Ch 90/23/T <sub>Sec</sub> Violation 2: Ch 90/9/B Sec  Violation 3: Ch 19/75 Sec Violation 4: ChSec						Most Harmful Event 1 23 10 Undercarriage  Driver Contributing Code 19 24 24 5 11 Totaled							age			
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	Pl	ease fill out for		ll occupants invo	lved			T	26 Seat	27 Safety	28 Airbag A	29 rbag Ej	30 31 Trap	32 Injury	33 Transp		
	Name (Last Fi Operator/	rst Middle) Non-Motorist			Above		Age/DO		ex Pos.	System	Status S	witch C	Code Code	Status 10	Code 1	Medical Facili	ity
	*							+									
									+	-				-			
												- 1					



## Crash Narrative:

On Friday, September 4, 2020, while assigned to marked unit N493, I responded to the intersection of Washington Street and Wales Street, Newton for a motor vehicle crash. Washington Street, Wales Street, and Quinobequin Road are public ways maintained by the City of Newton. The weather at the time of the crash was clear and sunny. The road surface was dry.

I spoke with the operator of MV1, Kristie Maheras (S45345086). Ms. Maheras stated while operating her

2014 Acura MDX (MA: 5050ZC), she was stopped at a red light on Washington Street (W) at

Quinobequin Road (S). Ms. Maheras stated as the light turned green, she was going to take a left turn

onto Wales Street. Ms. Maheras stated at this time the vehicle behind her crashed into the rear of her

vehicle. I observed damage to the rear bumper/trunk area of MV1. Ms. Maheras reported no injuries.

(Continued o	n next page)							
Witnesses:								
Name (Last, First, Middle)	Add	lress				Phone #	<u> </u>	Statement
Property Damage:								
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description	on of Damag	ged Property	
Truck and Bus Information:	Registration #		(From Vehic	le Section)				25
Truck and Bus Information:  Carrier Name			(From Vehic			Carrier Issu	ing Authority Co	35 de
								de
Carrier Name		(	City			St	Zip	de
Carrier NameAddressUS DOT #:	State Number38	(	City			St	Zip	de
Carrier NameAddressUS DOT #:	State Number	(	City			St	Zip	de
Carrier NameAddressUS DOT #:	State Number	(	City Issuing State	ICC#:_		St	Zip	de
Carrier Name  Address US DOT #: Cargo Body Type Code37 Gros	State Number	(	City Issuing State	ICC#:_		St	Zip	de
Carrier Name	State Number	Reg State	City Issuing State	ICC #: Tr	ailer Lengt	St	Zip Interstate	de

MICHAEL R GAUDET NEWTON POLICE DEPARTN 09/04/2020
Police Officer Name (Please Print) Signature ID/Badge # Department Precinct/Barracks Date

→	▶ Direction 1	ı ≡ Vehicle 1 2	_ <del> </del> Vehicle 2	Pedestri	an	
Crash Diagram:	ie: → 🛚	<b>→</b> [2	⋾	<b>P</b> Ŷ		
					If Crash <u>Did Not</u> O on a Public Way:	ccur
					Off-Street Parking	Lot
		į		į	☐ Mall/Shopping Cer	nter
	-	-		+	Other Private Way	
				+	Indicate North by Ar	row
		 -				
				į		
Crash Narrative:						
I then spoke with the opera	ator of MV2, L	eigha Owen (S	A0520153). Ms	s. Owen st	ated she was operating her	
2018 Hyundai Tucson (PA: 32	253701) on Was	hington Stree	t (W) at Quino	obequin Ro	ad (S). The	
front driver side area of N	1s. Owen's veh	icle crashed	into the rear	of the ve	hicle in front of her	
(MV1). I observed damage	to the front	driver side a	rea of MV1. N	Ms. Owen r	eported no injuries. A	
query of Ms. Owen's license	status throu	gh Newton Dis	patch showed i	it was sus	pended. The temporary	
Pennsylvania registration f						ctive
insurance. Tody's towing n						
Massachusetts Uniform Citat					<del>-</del>	
Suspension), Chapter 90, Se		gistered MV),	and Newton Ci	ity Ordina	nce Chapter 19, Section	
(Continued or	next page)					
W itnesses: Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage: Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Damaged Property	
				2	,-	
Truck and Bus Information:	Registration #		(From Veh	icle Section)		35
Carrier Name			C'.		Carrier Issuing Authority Code	
Address			•			36
US DOT #:	s Vehicle Weight	38	issuing state	ICC #:	Interstate	
Trailer Reg #:		Dag State	Dag Vas-	т:	lor Longth 39	
Hazmat Information:	keg iype	Keg State	keg Year	1 rai	ici Lengtii	
Placard 40 Material 1 digit #	<i>A</i> 1					
	Material N	Name		_ Material 4 d	git # Release code	42

ID/Badge #

Department

Signature

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)

Crash Diagram:  it:	-	Direction 1	→ Vehicle 1 2	±Vehicle 2	Pedestr	rian		
	Crash Diagram:	ie: → 1	2	□ →	<b>P</b> P			
Witnesses: 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:  Carrier Name  Carrier Name  Carrier Name  Carrier State Number  US DOT #: State Number  Lessuing State   ICC #: Interstate  State Number  Lessuing State   ICC #: Interstate  Trailer Reg #: Reg Type   Reg State   Reg Year   Trailer Length  Trailer Reg #: Reg Type   Reg State   Reg Year   Trailer Length  Hazmat Information:  Placant  Material 1 digit # 41 Material Name   Material 4 digit # Release code   42	Crash Diagram:		_		^	If	n a Public Way:  J Off-Street Parking  J Garage  J Mall/Shopping Ce  J Other Private Way	g Lot enter
Witnesses: 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:  Carrier Name  Carrier Name  Carrier Name  Carrier State Number  US DOT #: State Number  Lessuing State   ICC #: Interstate  State Number  Lessuing State   ICC #: Interstate  Trailer Reg #: Reg Type   Reg State   Reg Year   Trailer Length  Trailer Reg #: Reg Type   Reg State   Reg Year   Trailer Length  Hazmat Information:  Placant  Material 1 digit # 41 Material Name   Material 4 digit # Release code   42								
Witnesses:  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:  Carrier Name  Carrier Issuing Authority Code  Address  City  State Number  Lough Body Type Code  Trailer Reg #:  Reg Type  Reg State  Reg Year  Trailer Length  Trailer Reg #:  Reg Type  Reg State  Material 4 digit # Release code  Address  Address  Material 4 digit # Release code  Address  Address  Reg Year  Address  Material 4 digit # Release code  Address  Address								
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 Carrier Issuing Authority Code  Address City St Zip  US DOT #: State Number Issuing State ICC #: Interstate 36  Cargo Body Type Code 37 Gross Vehicle Weight 38  Trailer Reg #: Reg Type Reg State Reg Year Trailer Length 39  Hazmat Information:  Placard 40 Material 1 digit # 41 Material Name Material 4 digit # Release code 42	Washington Street, Wales	Street, and Quir	nobequin Road	are public w	ays maint	ained by the	City of Newton	n
Address Phone # Statement  Property Damage:  Owner (Last, First, Middle) Address Phone # 34-Type Description of Damaged Property  Truck and Bus Information:  Carrier Name Carrier Name Carrier Issuing Authority Code  Address City St Zip  US DOT #: State Number Issuing State ICC #: Interstate 36  Cargo Body Type Code 37 Gross Vehicle Weight 38  Trailer Reg #: Reg Type Reg State Reg Year Trailer Length 39  Hazmat Information:  Placard 40 Material 1 digit # 41 Material Name Material 4 digit # Release code 42								
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MICHAELR GAUDET NEWTON POLICE DEPARTS 00/04/2020								
	MICHAEL R CALIDET			21774	ON BOLICE DEBARA		09/04/20	120

ID/Badge #

Department

Signature

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)