

Police Use Only			Commonwealth of Massachusetts				RMV Document Number																																																																					
Date of Crash 10/27/2020		Time of Crash 18:39 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 1	Number Injured 0	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:																																																																						
<div>15</div> <div>Route# Direction Name of Roadway/Street</div> <div>At</div> <div>Route# Direction Name of Intersecting Roadway/Street</div> <div>Also at Intersection with</div> <div>Route# Direction Name of Intersecting Roadway/Street</div>						<div>29</div> <div>NORTH 546 PARKER ST</div> <div>Route# Direction Address # Name of Roadway/Street</div> <div>Feet N S E W of _____ Mile Marker _____ Exit Number _____</div> <div>Feet N X E W of _____ DEDHAM ST</div> <div>Route# Intersecting Roadway/Street</div> <div>Feet N S E W of _____</div> <div>Landmark</div>																																																																						
						<div>210</div>																																																																						
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<input checked="" type="checkbox"/> Vehicle 1 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 200000616																																																																						
<div>41</div> <div>License # --- St MA DOB/Age ---</div> <div>Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____</div> <div>Operator MCNEILL BRIAN</div> <div>Address 40 BRISTOL RD</div> <div>City WELLESLEY State MA Zip 02481</div> <div>Insurance Company COMMERCE</div> <div>Vehicle Travel Direction: X S E W Responding to Emergency? N</div> <div>Citation # (If Issued) T2013042</div> <div>Violation 1: Ch 89/4A Sec _____ Violation 2: Ch 90/13B Sec _____</div> <div>Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____</div>						<div>312</div> <div>Reg # 3GDM90 Reg Type PAN Reg State MA</div> <div>Veh Year 2015 Veh Make LEXS Veh Config. 1 20</div> <div>Owner (Same as operator)</div> <div>Address _____</div> <div>City _____ State _____ Zip _____</div> <div>Vehicle Action Prior to Crash 1 21 Damaged Area Code: (Circle Up to Three)</div> <div>Event Sequence 21 22 22 22 22 2 3 4</div> <div>Most Harmful Event 21 23</div> <div>Driver Contributing Code 9 24 19 24</div> <div>Underride/Override 25 Towed Y</div> <div>10 Undercarriage 5 11 Totaled</div>																																																																						
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→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

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 Tuesday, October 27th 2020 at 18:40 hours, Myself N-499 and Ofc Crowe N498 responded to 546 Parker St for a single vehicle accident into a city tree. Upon arrival, I identified Mass Reg # 3GDM90, 2015 LEXS RX350, Color Gray had crashed into a City Tree. The airbags had not been deployed. The operator was no longer in the vehicle upon my arrival. He was identified as registered owner Brian Mcneill.

Mcneill admitted he had operated the vehicle. Mcneill stated he was driving North on Parker St toward RT 9 headed home to Wellesley. Mcneill stated he was on his phone texting and lost sight of the road. Mcneill's vehicle veered off the side of the road and side swiped a City of Newton Tree causing heavy right side damage and loss of the front right tire. Mcneill's wife came to the scene to pick him up and drive him home. The set of golf clubs in the trunk of the vehicle was documented in the MV Inventory Crash Form. Mcneill

(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
CITY OF NEWTON,,	1000 COMMONWEALTH AVE NEWTON, MASSACHUSETTS 02		3	CITY TREE

**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

NICHOLAS JAMES GAMBLE      NEWTON POLICE DEPARTM      10/27/2020

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

CDP1 11 24:00

→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

Crash Diagram:

ie: → 1 → 2 →



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:

suffered no injuries and signed a patient refusal with the medics. Tody's towed the vehicle. Mcneill was given MA Uniform Citation # T2013042 for the amount of \$ 210 for M.G.L Ch 89/S4A Marked Lanes Violation and M.G.L Ch. 90/S13B Texting While Driving Violation. Pictures were taken of the accident and submitted to Newton IT Bureau.

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:

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

Carrier Name \_\_\_\_\_ Carrier Issuing Authority Code 35

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

NICHOLAS JAMES GAMBLE

NEWTON POLICE DEPART

10/27/2020

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

