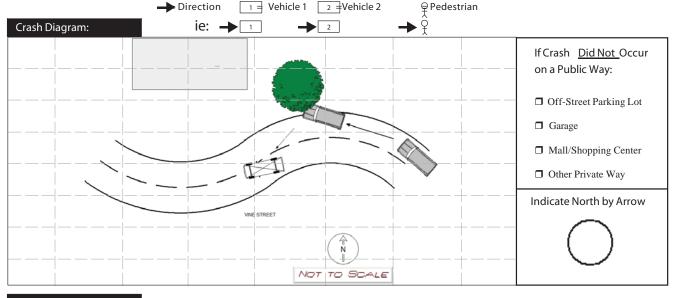
	Poli	ce Use Only		Commonwea	lth o	f Massa	chus	etts		R	MV Do	cumen	t Number	
	Date of Crash 10/29/2020	Time of Crash 05:41 24HR	NEWTON	MIOTOI		icle Cra Report	l v	ehicles	Number Injured 1	Speed I Latitude Longitu	·	St Lo M O	tate Police cocal Police IBTA Police ther:]]
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4	Route# Direc	tion	Name of I	Roadway/Street t	R	Route# Directio	n Addre	ess#		Name	of Roadw	/ay/Stre	eet	2
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² 6	Route# Direct	<u> </u>	N Cl. t		-	Feet N	SEW	1	Route	Titte	rsecting r	coauwa _.	y/Birect	1
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	City WELLES		Stat	e_MA _ Zip _02481		EEDHAM				S	tate_MA	Zip_	02492	
	Insurance Com	pany_VERMON	T MUTUAL		Vehicle	Action Prior to	Crash	1 21	Da	maged A	rea Code	e: (Circl	le Up to Three)	
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	Violation 3: ChSec Violation 4: ChSec Please fill out for operator and all occupants involved					ide/Override	20 Seat		28 29 bag Airbag	30 Eject Tr	31 32 ap Injury	33 Transp.		
	Name (Last Fire Operator	st Middle)		Address See Above		Age/DOB	Sex Pos.	System Sta	tus Switch	Code Co	de status	Code 2	Medical Facility	21
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					Event Sequence 22 22 22 22 3 4									
	Citation # (If Issued)				Most Harmful Event 23 10 Undercarriage 5 11 Totaled						е			
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	Name (Last Fi	rst Middle)	r operator and all	Address		Age/DOB	Sex Pos	System S	tatus Switcl	h Code C	ap Injury ode Status	Transp. Code	Medical Facility	-
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Crash Narrative:

On Thursday 10/29/20 at approximately 0541 hours while assigned to marked unit n499 I was dispatched to the area of 130 Vine Street for a report of a single vehicle roll-over crash.

Upon arrival myself and n496(Ofc. Howes) observed a white SUV on its roof facing westbound in the eastbound lane of Vine Street (a public way owned, operated and maintained by the City of Newton).

Upon our arrival Newton Firefighters had extracated the operator, (FOSTER Isabelle), who was sitting on

a large rock in the front yard of 130 Vine Street. FOSTER was visibly upset, but didnt appear to have any major injuries. I asked FOSTER what happened and she stated she was travelling from Westgate Rd in Boston on her way home to Wellesley. She took a right turn onto Vine Street from LaGrange Street and began travelling westbound. FOSTER stated that she was travelling too fast and didnt realize how the road curved causing her

(Continued o	n next page)						
Witnesses:							
Name (Last, First, Middle)		Address			F	Phone #	Statement
Property Damage:	_	•					
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of	f Damaged Property	
			•				
Truck and Bus Information:	Registration #		(From Vehic	cle Section)			
Truck and Bus Information: Carrier Name				cle Section)	Car	rier Issuing Authority (ode 35
						,	
Carrier Name			City		St	z Zip	lode
Carrier NameAddressUS DOT #:37	State Number		City		St	zZipInterstate	'ode
Carrier NameAddressUS DOT #:37	State Numberss Vehicle Weight	38	City Issuing State	ICC#:_	St	z Zip	'ode
Carrier Name Address US DOT #: Cargo Body Type Code37 Gros	State Numberss Vehicle Weight	38	City Issuing State	ICC#:_	St	zZipInterstate	'ode
Carrier Name	State Numberss Vehicle Weight Reg Type	38 Reg State	City Issuing State Reg Year	ICC #:_ Tr	St.	zZipInterstate	36 36

→	▶ Direction	1 = Vehicle 1	≥ ≠Vehicle 2	Pedestr	ian		
Crash Diagram:	ie: →□	1 -	□ →	▶ ♀			
						If Crash <u>Did Not</u> On a Public Way:	Occur
		<u> </u>				☐ Off-Street Parking	g Lot
						☐ Garage	
	_					☐ Mall/Shopping Ce	enter
						11 0	
						☐ Other Private Way	
						Indicate North by A	rrow
			+-	+			
	_ _	 -	_ — — —	+			
						_	
Crash Narrative:							
to veer off the road and st	rike a large	tree in the f	front of 130 V	ine Stree	t. FOSTE	IR was travelling a	at a
speed fast enough to cause	the vehicle	to flip onto	its roof in t	he opposi	te lane o	of traffic.	
FOSTER admitted to me she w	as travelling	g too fast on	the road. Vi	ne street	is a wir	nding road that is	not
very well lit. Speed limit	on the road	is 20mph and	its estimated	FOSTER W	as travel	ling at least 30-	45mph.
The speed coupled with FOST	ER's lack of	familiarity w	with the area	and her i	nexperier	nce driving were a	11
contributing factors to the	crash. FOS	TER was issued	l Massachusett	s Uniform	Citation	1 T2012909 with the	-
following civil motor vehic	le infraction	ns;					
C90 s18 SPEEDING (Posted)							
C89 s4a Marked Lanes Violat	ion.						
(Continued on	next page)						
Witnesses:							
Name (Last, First, Middle)		Address				Phone #	Statement
Property Damage:		,			·		
Owner (Last, First, Middle)	Address		Phone #	34-Туре	Description	of Damaged Property	
Truck and Bus Information:	Di-tti#		(Form Vol	nicle Section)			
Carrier Name	Registration # _		(From ver	,	С	arrier Issuing Authority Cod	e 35
Address			City			StZip	
US DOT#:S			•				36
27		38	13301115 31410	1CC #		Interstate	
	Vehicle Weight				[39	
Trailer Reg #: Hazmat Information:	Reg Type	Reg State	Reg Year	Tra	ailer Length		
40	41	Nama		Metal 14	liait #	D-1 1	42
Placard Material 1 digit #	iviaterial	indilie		iviateriai 4 (лgп #	Release code	

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)

Crash Disgram: Crash Did Not Occur on a Public Way:		→ Direction	1 = Vehicle 1	2 ≢Vehicle 2	Pedestr	ian		
Crash Narrative: Constitute Constitute	Crash Diagram:	ie: →□	1 -	2	₽			
Cash Narrative: Clarage							· · · · · · · · · · · · · · · · · · ·	Occur
Crash Narrative:			<u> </u>				☐ Off-Street Parking	g Lot
Crash Narrative: Content Conten			 				☐ Garage	
Indicate North by Arrow Crash Narrative: Cras					į		☐ Mall/Shopping Co	enter
Crash Narrative: FOSTER was transported to Beth Israel hospital by the medics and I was unable to issue the citation in hand at the time of the crash. Due to FOSTER's age (17) I also wanted to notify her parents and meet with them and FOSTER upon her release from the hospital. At approximately 1700 Hours I met with Scott Foster(Father) in person, Jodi Foster (Mother) and Isebelle foster via cell phone (speaker phone). I discussed the charges with all parties and explained the citation to Isebelle. Citation was given in hand to her father, Scott Foster and brough the citation to Isabelle. Witnesses: Name (Last, First, Middle) Address Phone # 34-Type Description of Damaged Property Truck and Bus Information: Carrier Name Carrier Issuing Authority Code Statement Carrier Issuing Authority Code Address City State Number: Internate Keg # Compo Body Type Code Floore # State Number: Issuing State Reg Your Truiler Keg # Code Address Reg Type Reg State Reg Your Trailer Keg # Code Address Material I digit # 41 Material Name Material 4 digit # Reclease code 42			- 				☐ Other Private Way	y
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ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)