

Commonwealth of Massachusetts

Police Use Only			Motor Vehicle Crash Police Report				RMV Document Number				
Date of Crash 11/04/2020	Time of Crash 18:00 24HR	City/Town NEWTON	Number Vehicles 2	Number Injured 0	Speed Limit 25 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:				
Route# Direction Name of Roadway/Street At			NORTH 256 PARKER ST Route# Direction Address # Name of Roadway/Street Feet N S E W of _____ Mile Marker _____ Exit Number _____ Feet N S E W of _____ Route# Intersecting Roadway/Street _____ Feet N S E W of _____ Landmark _____								
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with											
Route# Direction Name of Intersecting Roadway/Street											
<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 200000638		
License # --- St MA DOB/Age ---			Reg # 5050G Reg Type RPN Reg State MA			Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____ Endorsement _____			Veh Year 2019 Veh Make KW Veh Config. 6 20		
Operator DONAHUE DAVID Last First Middle			Owner TODYS SERVICE Last First Middle			Address 40 RUSSELL RD.			Address 1354 WASHINGTON ST		
City NEWTON State MA Zip 02465			City NEWTON State MA Zip 02465			Insurance Company ARBELLA			Vehicle Action Prior to Crash 11 21 Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: <input checked="" type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W Responding to Emergency? N			Event Sequence 2 22 22 22 22 2			Most Harmful Event 2 23			Driver Contributing Code 1 24 24		
Citation # (If Issued) _____			Underride/Override 25 Towed N			Citation # (If Issued) _____			10 Undercarriage 5 11 Totaled		
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____						Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____					
Please fill out for operator and all occupants involved										13	
Name (Last First Middle)			Address			Age/DOB			Sex		
Operator			See Above			99			4 99		
Please Select One of the Following: <input checked="" type="checkbox"/> Vehicle 2 1 #Occupants										14	
<input type="checkbox"/> Non-Motorist A Type										15	
Action										16	
Location										17	
Condition										17	
<input type="checkbox"/> Hit/Run										<input type="checkbox"/> Moped	
License # --- St MA DOB/Age ---										Reg # 615DH9 Reg Type PAN Reg State MA	
Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____ Endorsement _____										Veh Year 2008 Veh Make HONDA Veh Config. 1 20	
Operator THOMSEN RYAN Last First Middle										Owner THOMSEN JOHN H Last First Middle	
Address 44 HITCHING POST DR										Address 44 HITCHING POST DR	
City WALPOLE State MA Zip 02081										City WALPOLE State MA Zip 02081	
Insurance Company PLYMOUTH ROCK										Vehicle Action Prior to Crash 1 21 Damaged Area Code: (Circle Up to Three)	
Vehicle Travel Direction: <input checked="" type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W Responding to Emergency? N										Event Sequence 2 22 22 22 22 2	
Citation # (If Issued) _____										Most Harmful Event 2 23	
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____										Driver Contributing Code 12 24 24	
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____										Underride/Override 25 Towed N	
Please fill out for operator and all occupants involved										13	
Name (Last First Middle)			Address			Age/DOB			Sex		
Operator/Non-Motorist			See Above			1			4 4		

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

256 Parker St

RT 9 On Ramp

RT 9 Off Ramp

NOT TO SCALE

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 MV1, David Donahue of Tody's Towing, was dispatched to 256 Parker Street at the request by me to tow a pick up truck that was obstructing traffic. While he was on scene and loading up the pick up truck on the rear of the flat bed of MV1, operator of MV2 was attempting to drive around the tow truck. MV2 struck the driver side wheel area of the flat bed tow truck. Operator of MV2 stated he was unaware his steering wheel was turned all the way to the right when he stepped on the gas. This caused him to turn into the tow truck. MV1 had damage to the drivers side and wheel and MV2 had sustained damage to his passenger side. It should be noted that it appears that MV2 already had previous damage to the same area as duct tape was observed in the area that struck MV1. Neither party was injured and neither required a tow from the scene.

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

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

LAUREN MARIE KEEFE NEWTON POLICE DEPT 11/04/2020

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

CDP1 11 -24:00