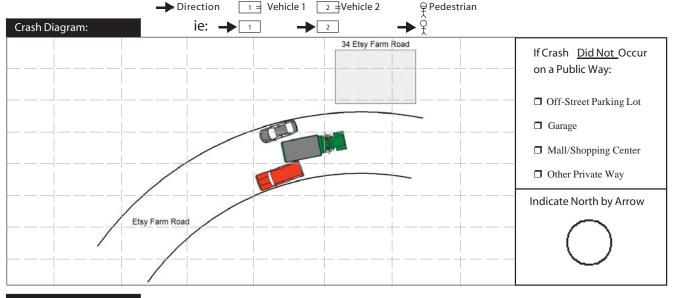
	Poli	ice Use Only		Comn	nonweal	lth o	f Mas	sach	iuse	etts			RM	V Doc	cumen	ıt Number	
	Date of Crash 12/04/2020	Time of Crash 09:06 24HR	NEWTON	own	Motor Pol		icle Cı Report			mber hicles	Number Injured	d Lat	ed Limi itude _ ngitude_			tate Police ocal Police MBTA Police other:] 3 1
			RSECTION:			OCAT		>					INT		ECT	ION:	2
							sou	гн :	34		ETSY I	ARM	ROAD				
1 1	Route# Direct	tion	Name o	of Roadway/Stree	t	F	Route# Dire	ction	Addres	s #		Na	ame of I	Roadw	ay/Stre	eet	_ 2
	Don't District					Feet NSEW of orExit Number											
	Route# Direction Name of Intersecting Roadway/Street Also at Intersection with						Feet NSEW of Route# Intersecting Roadway/Street								/544		
2 1						-	Feet	N S	E W	of	Koute	FF.	Intersec	ting K	Coadwa	ly/Street	5
3	Route# Direct	tion	Name of Inters	ecting Roadway/S	Street					•			La	ndmar	k		┨
	XVehicle1	2_#Occupants	Hit/Ru	Моро	ed Case N	lumber			200000	00702							
	License#	18 1	St N	DOB/Age		Reg#_	R46465				Reg T	ype_CC	ON	R	eg Stat	te MA	
	Sex_M Lic. 0	Class D	Lic. Restriction	ons B CI	DL		ear_2014			ke_MA	CK			_Veh	Config	g. 7	L
4 1	Operator JAC	Last CRANE STREET	CAMERON		Middle		WASTE M	Last	EMF		First			Mie	ddle		1
	City NORTON			tate MA Zip	02766		ORTON						State	MA	Zin	02766	
		pany AMERICA					Action Prio	r to Cras	sh	1 21					_ ^	le Up to Three)	,
5	Vehicle Travel	Direction: N	X E W Res	sponding to Eme	ergency?_N	Event S	Sequence 2	22	22	22	22 2		6)	(4)		
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5	Violation	1: ChSec	Violatio	on 2: ChS	ec	Driver	Contributing	Code	25	24	24		VŢ				
⁵ 1		3: ChSec				Underride/Override Towed N							I	+			
	Name (Last Firs				Address		Age/DOB	Sex	Seat Pos.	System S	28 irbag Airl Status Swi	tch Cod	e Code	Juitus	Transp. Code	Medical Facility	2
	Operator LUX DE LEON	J IOSE P	3	See 1 OPEHLIA STRI	EET (apt 1)			М	14	0 4	1 99		0	10	1	N/A N/A	-
	EOX DE LEON		P	ROVIDENCE, RI	I 02909			141		0	x 95	, 0		10	1	1411	1
7																	
1	Please Select O of the Followin	IX Vehicle	2 <u>0</u> #Occupa	nts Non-M	lotorist A Type		Action	15 L	ocation	10	Cond	lition	17		Hit/Ru	un Mopeo	i
	License # St DOB/Age Sex Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsment				2		Reg # <u>88551</u> Reg Type					ype_PA	PAR Reg State MA 20				
						Veh Year 2010 Veh Make LEXUS Veh Config. 2 Owner PINE CONE CONSTR								g. 2			
1	Operator Last First Middle Address						Owner FINE CONSTR Last First Middle Address 240 WISWALL RD City NEWTON State MA Zip										
	Insurance Com	pany_COMMER	CE			Vehicle	Action Prio	r to Cras	sh	11 21] 1	Damage	ed Area	Code	: (Circ	le Up to Three)	,
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	D1	ance fill out for	operator and -	II occurrente				1	Sent	Kafaty A	:	na lEige	- h	4			
	Name (Last Fi		operator and a		Address		Age/DOE		Pos.	System	Status Sw	ritch Co	de Code	Injury Status	Transp.	Medical Facility	-
	Name (Last Fi		operator and a				Age/DOE			System	Status Sw	ritch Co	de Code	Status	Transp.	Medical Facility	
	Name (Last Fi	rst Middle)	operator and a		Address				Pos.	System	Status Sw	ritch Co	t Irap de Code	Status	Transp.	Medical Facility	, _ _



Crash Narrative:

On Friday, December 4, 2020 while assigned to Traffic unit N525, I responded to the area of 34 Etsy Farm Road, Newton for a report of a crash involving a City of Newton contracted Waste Management truck. Etsy Farm Road is a public way maintained by the City of Newton. The weather at the time of the crash was clear and sunny. The road surface was dry.

I met with the operator of MV1, Cameron Jacques (S82958796). Jacques stated he was operating a 2014 Mack 600 (MA CON: R46465) southbound on Etsy Farm Road. Jacques stated there were two vehicles parked on opposite sides of the road as he was attempting to continue straight past both vehicles. The rear passenger side tire area of his vehicle made contact with the rear bumper area of the vehicle to his left (MV2). MV2 is a 2010 Lexus RX450 that was parked unoccupied facing northbound in the southbound lane

(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 Code 37 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 12/04/2020 NEWTON POLICE DEPARTM Police Officer Name (Please Print) Signature ID/Badge# Department Precinct/Barracks Date

	→ Direction	1 = Vehicle 1	2 = Vehicle 2	₽ Pedestria	an	
Crash Diagram:	ie: →□	1	2	₽Ŷ		
					If Crash <u>Did No</u> on a Public Way	
			<u> </u>		Off-Street Park	ing Lot
					☐ Garage	
					□ Mall/Shopping	Center
		_	 		Other Private V	
		_	 	+	Indicate North by	/ Arrow
		 _				
)
			 			
Crash Narrative:					L	
across from 34 Etsy Farm	Road. The rea	r bumper of M	IV2 was damage	d and remov	red from the vehicle as a	a result
	tered owner of 1					
Jacques and his pa	ssenger Jose Lu	x de Leon rep	orted no inju	ries. Phot	os were taken of the da	mage to
both vehicles and submit	ted to the IT B	ureau.				
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 V	ehicle Section)		35
Carrier Name					Carrier Issuing Authority C	Code
Address			_ City		St Zip	
US DOT #:	State Number	38	Issuing State	ICC #:	Interstate	36
Cargo Body Type Code	Gross Vehicle Weight	36			39	
Trailer Reg #:	Reg Type	Reg State _	Reg Year_	Trai	ler Length	
Hazmat Information:	41				5. II	42
Placard Material 1 dig	nt # Material	Name		Materíal 4 di	git # Release code	
MICHAEL R GAUDET			NE	WTON POLICE DEPARTS	12/0	4/2020

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)