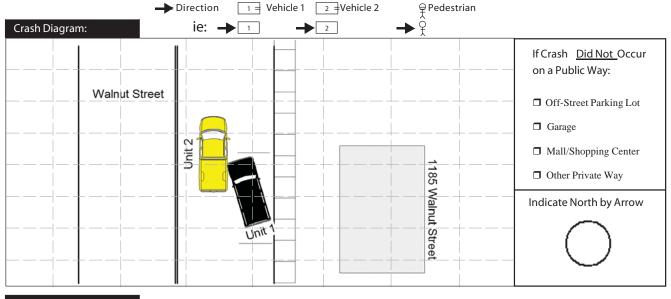
	Poli	ice Use Only		Commonwea	alth o	of Massa	achu	isetts	8		RM	V Docu	ment Number	
	Date of Crash 12/10/2020	Time of Crash 08:16 24HR	NEWTON	MIOTOI		icle Cra Report	sh	Number Vehicles		ired La	eed Lim titude _ ngitude		State Police Local Police MBTA Police Other:	XI
			RSECTION:		LOCAT		>						CTION:	┪
						SOUTH	118	5	WA	LNUT ST	Γ			2
1 1	Route# Direc	tion	Name of	Roadway/Street		Route# Direction	on Ad	dress #		N	lame of I	Roadway	/Street	
	At				Feet N S E W of • or								_	
	Route# Direction Name of Intersecting Roadway/Street Also at Intersection with Route# Direction Name of Intersecting Roadway/Street					Mile Marker Exit Number								_
						Feet N S E W of Route# Intersecting Roadway/Street								
² 1						Feet NSEW of								4
3						Landmark								\dashv
	Vehicle1	#Occupants		- 1 Case	Number		20	000000722	2					_
	License#	License # St TX DOB/Age				7HK496							State MA	-
	Sex_F Lic. Class C 18 18 Lic. Restrictions 19 CDL Endorsment				Veh Year 2018 Veh Make KIA Veh Config. 2									
4 1	Operator KH		PAULA First	Middle		Owner JOUBI AMMAR Last First Middle						e	- 1	
			K LANE (apt. 1011			47 MORRILI	. 51					МΔ	02465	- [
	City HOUSTO			ate_TX Zip_77056		City W NEWTON State MA Zip 02465 Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)								
5		pany PROGRE		r . F . o N		e Action Prior to	Crash 22 22	6	22	2	3	Couc. (4	
	Citation # (If I	Direction: N/A	Kesj	oonding to Emergency? N		Sequence 1	23					\overline{A}	10 Undercar	riage
			Violation	2: ChSec		Farmful Event	1	24	24	1 -	9		5 11 Totaled	
⁶ 1				Driver Contributing Code 4 27 7 6 Underride/Override 25 Towed N 6										
	Violation 3: ChSec Violation 4: ChSec Please fill out for operator and all occupants involved				Cilderi	26 27 28 29 30 31 32 33 Seat Safety Airbag Airbag Eject Trap Injury Transp.								
	Name (Last First Middle) Address Operator See Above				Age/DOB Sex Pos. System Status Switch Code Code Status Code Medical Facility							lity 1		
	1								1	33 0			7	
7									<u> </u>					
1	Please Select C of the Followi		e2 1_#Occupan	ts Non-Motorist A Ty	/pe 1	4 Action 1	5 Loca	ntion	16 C	ondition	17	Пн	it/Run Mor	ped
	License# St MA DOB/Age			Reg#	Reg # M1653A Reg Type MVN Reg						State_MA	-		
	Sex M Lic. Class D 18 18 Lic. Restrictions 1 CDL					Veh Year 2008 Veh Make FORD Veh Config. 20							_	
⁸ 2	Operator NAPOLITANO BRIAN J Endorsment				_ Owner	Owner CITY OF NEWTON DPW								
2	Address 110 CRAFTS STREET First Middle				Address 110 CRAFTS ST								_	
	City NEWTON State MA Zip 02458				City NEWTON State MA Zip 02458								_	
	Insurance Company SELF INSURED					Vehicle Action Prior to Crash 1 Damaged Area Code: (Circle Up to Three)								ree)
	Vehicle Travel Direction: $[N]$ $[K]$ $[W]$ Responding to Emergency? $[N]$				Event Sequence 1 22 22 22 2 4									
	Citation # (If Issued) N/A				Most Harmful Event 1 23 10 Undercarriage 5 11 Totaled							riage		
	Violation 1: ChSec Violation 2: ChSec					Driver Contributing Code 1 24 24								
	Violation 3: ChSec Violation 4: ChSec					Underride/Override Z5 Towed N 8 7 6								
	Pl Name (Last Fi		r operator and all	occupants involved		Age/DOB	Sex S	26 27 Seat Safety Pos. Syste	28 Airbag m Status	29 3 Airbag Eje Switch Co	30 31 Frap ode Code		33 ansp. Code Medical Fac	eility
		Non-Motorist		See Above				1	4	99 0	0	10 1		
									+					-



Crash Narrative:

On Thursday, December 10, 2020 while assigned to Traffic unit N525, I responded to the area 1185 Walnut Street, Newton for a report of a motor vehicle crash involving a City of Newton vehicle. The weather at the time of the crash was clear and sunny. The road surface was dry. Walnut Street is a public way maintained by the City of Newton.

The Operator of MV1, Paula Khoury, stated she was parked in front of 1185 Walnut Street, Newton. Ms.

Khoury stated while operating a 2018 Kia Sorento (MA: 7HK496), she attempted to leave her parking spot.

Ms. Khoury stated she looked back into traffic and did not observe any vehicles. Ms. Khoury stated she attempted to merge into the southbound travel lane of Walnut Street when the front driver side of her vehicle crashed into the middle passenger side of a passing pick up truck. Ms. Khoury reported no injuries. I

(Continued	on next page)						
Witnesses:							
Name (Last, First, Middle)		Address			Phone	e #	Statement
Property Damage:		+					
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Dam	naged Property	
Truck and Bus Information:	Registration #		(From Vehi	icle Section)			35
Truck and Bus Information: Carrier Name				, i	Carrier Is	ssuing Authority Code	
	_					· ·	
Carrier Name			_ City		St	Zip	
Carrier NameAddressUS DOT #:			_ City		St	Zip Interstate	
Carrier NameAddressUS DOT #:	State Number	38	_ City Issuing State	ICC#:_	St	Zip Interstate	
Carrier Name Address US DOT #: Cargo Body Type Code37	State Number	38	_ City Issuing State	ICC#:_	St	Zip Interstate	
Carrier Name	State Number	38 Reg State _	_ City Issuing State	ICC#:Tr	St	Zip Interstate	

-	Direction	1 = Vehicle 1	2 = Vehicle 2	Pedestri	ian		
Crash Diagram:	ie: →[1 -	2	→ Ŷ			
			 			f Crash <u>Did Not</u> Con a Public Way:	Occur
		_				Off-Street Parking	g Lot
						☐ Garage	
	- — — — — - 					☐ Mall/Shopping Ce	enter
						Other Private Way	
					l Ir	ndicate North by A	rrow
			+		. — — —	\bigcirc	
Crash Narrative:							
observed damage to the fro	ont driver sid	de of MV1.					
The operator of MV2,	Brian Napoli	itano, stated h	ne was operat	ing a City	of Newton o	wned 2008 Ford	pick up
truck (MA MVN: M1653A) sou	thbound on Wa	alnut Street.	Mr. Napolita	no stated a	as he was pa	ssing the area	
of 1185 Walnut Street, a h	lack SUV park	ked to his righ	nt attempted	to leave i	t's parking	spot and merge	into
traffic. Mr. Napolitano st	ated MV1 cras	shed into the p	passenger sid	e of his ve	ehicle. I o	bserved minor o	damage
to the middle passenger si	de of MV2. M	Mr. Napolitano	reported no	injuries.	Mr. Napolit	ano worked for	the
City of Newton DPW.							
Photos were taken of	the damage t	to both vehicle	and submitte	ed to the	IT Bureau.		
Witnesses:							
Name (Last, First, Middle)		Address			Pho	ne #	Statement
D							
Property Damage: Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Da	maged Property	
Owner (East, First, Middle)	/tdd/css		THORE #	эттурс	Description of Da	magearroperty	
Truck and Bus Information:	Registration #		(From V	ehicle Section)			35
Carrier Name					Carrier	Issuing Authority Code	
Address			City		St	Zip	
US DOT#:	State Number		Issuing State	ICC #:		Interstate	36
Cargo Body Type Code 37 Gro	ss Vehicle Weight	38					
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tra	iler Length	39	
Hazmat Information:				110	- G		
Placard 40 Material 1 digit :	41						
	# 41 Material	l Name		Material 4 d	ligit#	Release code	42
Takona Tuga	# 41 Material	l Name		Material 4 d	ligit #	Release code	42

ID/Badge #

Department

Signature

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)