



→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

15 Comm Ave

Unit 1    Unit 2

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:**

At approximately 1655HRS on Monday, January 25, 2021, I was dispatched to the 15 Comm Ave. for a report of an MVA, in which the offending vehicle left the scene.

Upon arrival, I spoke with the owner of MV1 (NH Pass: 2873301), who stated that his coworker ( Witness 1) observed MV2 hit his vehicle and leave. To this end, he showed me the resulting damage to vehicle's rear bumper, as well as a photograph Witness 1 took of MV2. Boston Police located MV2 at it's listed garaged address.

Upon speaking with the owner/operator of MV2 (MA Pass: 17MA21), he stated that he was in the area, but denied hitting MV1. I informed him of the witness statements and asked him about the damage to his vehicle, but he again stated that he did not believe he was involved, yet could not account for the damage.

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**Witnesses:**

Name (Last, First, Middle)	Address	Phone #	Statement
BOWENS, TROY,	,	----	Y

**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

CHRISTOPHER G HOWES	38804	NEWTON POLICE DEPART	01/25/2021
Police Officer Name (Please Print)	Signature	ID/Badge #	Department
			Precinct/Barracks
			Date

CDP1 11 24:00

→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

ie: → 1    → 2    →

#### Crash Diagram:



If Crash Did Not Occur  
on a Public Way:

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Indicate North by Arrow



#### Crash Narrative:

Upon speaking with Witness 1, he stated he was walking Westbound on Comm Ave. at approximately 1650HRS, when he observed M2 attempt to exit a parking spot in front of 15 Comm Ave. (MV2 was parked behind MV1). MV2 then scrapped MV1 while attempting to do so, causing MV1 to rock forward. Witness 1 then took a picture of MV2's rear license plate.

I observed scratches to the rear driver's side bumper area of MV1 and scratches to the front passenger's side bumper area of MV2, along with a slight separation of the bumper cover of MV2 and it's mounting points on the same side. Both vehicle's damage was consistent with Witness 1's account of a vehicle scraping a parked vehicle, as it attempted to exit a parking spot from the rear. It should be noted that the damage to both vehicles appeared minimal and it is plausible that the operator of MV2 may not have known about the

(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

#### 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

CHRISTOPHER G HOWES

38804

NEWTON POLICE DEPART

01/25/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

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**Crash Diagram:**

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Indicate North by Arrow



**Crash Narrative:**

collision. As a result, the operator of MV2 will not be charged with a hit and run accident at this time. I took pictures of both vehicle's damage and they, along with Witness 1's picture will be submitted to IT to be attached to this report.

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**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

CHRISTOPHER G HOWES

38804

NEWTON POLICE DEPART

01/25/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

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Date