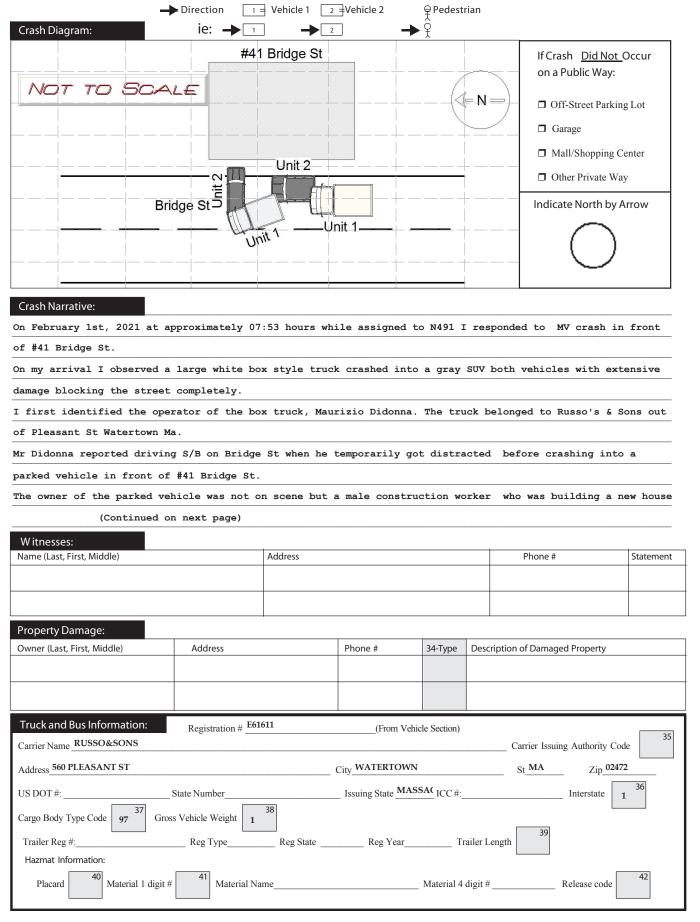
	Poli	ce Use Only		Commonwo	ealth	of Massa	ichi	ısett	S		RM	V Docu	ıment	Number	
	Date of Crash 02/01/2021	Time of Crash 07:53	City/Tow NEWTON	n Moto	r Vel	nicle Cra	sh	Numbe			oeed Lim		Sta Lo	ate Police cal Police BTA Police	<u> </u>
	02/01/2021	07:55 24HR	NEWTON	P	olice	Report		2	1		ongitude_		Otl	her:	
		AT INTER	RSECTION:	<	LOCA	TION :	>		N	OT A	T INT	ERSE	CTI	ON:	
						SOUTH	41		BRII	GE ST	,				\vdash
1 [Route# Direction Name of Roadway/Street					Route# Direction Address # Name of Roadway/Street									
_	At					Feet N S E W of or								\vdash	
	Route# Direction Name of Intersecting Roadway/Street					Mile Marker Exit Number								_	
	Also at Intersection with					Feet NSEW of Route# Intersecting Roadway/Street								-	
2	Postelli Dination No. 1 (2)					Feet NSEW of									
	Route# Direction Name of Intersecting Roadway/Street					Landmark									
	XVehicle1	1_#Occupants	Hit/Run	☐ Moped Ca	se Number	:	2	10000007	74						
	License#		St MA	DOB/Age	Reg#	E61611			Reg	Type C	ON	Re	g State	MA	
	Sex M Lic. Class D 18 18 Lic. Restrictions 9 CDL					Reg # E61611 Reg Type CON Reg State MA Veh Year 2011 Veh Make ISU Veh Config. 6									
			MAURIZIO	Endorsment		RUSSO AND	SONS								_
1						560 PLEASAI			First			Midd	lle		_
	City WOBURN State MA Zip 01801					City WATERTOWN State MA Zip 02472									
	Insurance Com	pany LIBERTY I				le Action Prior to	Crash	1	21					Up to Thr	ee)
	Vehicle Travel	Direction: N	X E W Respo	nding to Emergency? N	— Event	Sequence 2 2	2 22		22	0	3		4		
	Citation # (If I					Harmful Event	23				. 9	$\langle $		0 Undercarr	riage
				: ChSec		L r Contributing Co		20 24	24		· / ˈ) 3 1	1 Totaled	
1 Violation 3: Ch Sec Violation 4: Ch Sec Underride/Override 25								Tov	ved Y	8	7		6		
	Please fill out for operator and all occupants involved							26 2' Seat Safet		29 Airbag Ei	30 31 ject Trap ode Code	32 Injury	ransp.		
				Address See Above					Code 1	Medical Facili	ity				
1	Please Select C of the Followi	IX Vobiclo	2 0_#Occupants	Non-Motorist A	Туре	14 Action 1	5 Loc	ation	16 Co	ondition	17	Ů	Hit/Rur	п Мор	ed
				DOD/4	D /	Reg # 1DEL19 Reg Typ			, P	PAN D G MA			-		
	License # St DOB/Age 19 19 19 19 19 19 19 19 19 19 19 19 19				_						20	-			
	Sex Lic. Class Lic. Restrictions CDL Endorsment					eh Year 2007 Veh Make FORD Veh Config. 2 Where RAMIREZ JOSE									
1	Operator Last First Middle					Owner RAMIREZ JOSE Last First Middle Address 86 WOOD ST								-	
						City HOPKINGTON State MA Zip 01748							-		
	COVER DAME OF THE COVER OF THE					Damaged Area Code: (Circle IIn to Three)							ee)		
						vehicle Action Phot to Clash 11 11 22 23 23 4									
						Event Sequence 1 10 Undercarriage							riage		
	· · · · · · · · · · · · · · · · · · ·					Most Harmful Event 1 9 5 ① Totaled									
			Driver Contributing Code 1 Towed Y 8 7 6 Underride/Override Towed Y 8 7 6												
	Violatio:		operator and all o	4: ChSec	Unde	inde/Override		26 2' Seat Safet		29 Airbag Ej	30 31 Ject Trap	32	33		\dashv
	Name (Last Fi	rst Middle)	- Perator and all C	Address		Age/DOB	Sex	Seat Safet Pos. Syst	y Airbag em Status	Airbag Ej Switch C	ject Trap Code Code	Injury I	ransp. Code	Medical Faci	lity
	Operator/	Non-Motorist		See Above											\dashv
															_



	→ Direction	1 = Vehicle 1	2 = Vehicle 2	₽ Pedestrian		
Crash Diagram:	ie: →□	1	2	→ 🤶		
					If Crash <u>Did Not</u> on a Public Way:	Occur
					Off-Street Parkin	ng Lot
					☐ Garage	
					☐ Mall/Shopping (Center
	- — — — — —			- — — — -	Other Private W	
			<u> </u>	- — — — —	Indicate North by	
					()	
			 	+		
Crash Narrative:					L	
at #41 Bridge St identif	fied the vehicles	s owner as 3	Tose Ramirez.	He was able to	make contact with him	m and
informed him about the a						
Both vehicles were towed	d from the scene	. One by Tody	rs. Russo's &	Sons truck was	towed by Pro Tech or	ıt of
Watertown.						
Mr Didonna had a minor :	injury but refuse	ed any medica	l treatment.			
Note: The parked SUV had	a lot of constru	uction equipm	ment in the re	ear but was rem	oved by the construct:	ion
workers from the job sit	te at #41 Bridge	St. The park	ed car was a	ffiliated with	the construction site	•
The vehicles owner was n	notified to where	e his vehicle	was being to	owed to.		
·						
W itnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:				,		
Owner (Last, First, Middle)	Address		Phone #	34-Type Desc	ription of Damaged Property	
Truck and Bus Information:	Registration #_		(From	Vehicle Section)		
Carrier Name					Carrier Issuing Authority Co	ode 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 Yea	r Trailer L	ength 39	
Hazmat Information:	A1					42
Placard Material 1 di	git # Material	Name		Material 4 digit #	Release code	72
THOMAS J MCCARTHY			N	EWTON POLICE DEPARTA	02/01/	2021

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)