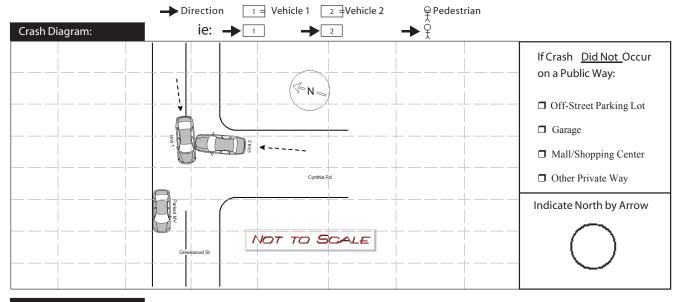
	Poli	ce Use Only		Commonwe	alth (of Mass	ach	uset	ts		RM	V Docui	ment Number		
	Date of Crash 02/06/2021	Time of Crash 12:16 24HR	NEWTON	MIOTOI		iicle Cra Report	ash	Num Vehic	- 1	ured L	peed Lim atitude _ ongitude		State Police Local Police MBTA Police Other:	XI XI	
			RSECTION:	<	LOCA		>						CTION:	\Box	
	NOR	TH CYNTH	IIA RD											2	
1	Route# Direc	Route# Direction Name of Roadway/Street					Route# Direction Address # Name of Roadway/Street								
	At WEST GREENWOOD ST					Feet NSEW of or								_ _	
	Route# Direction Name of Intersecting Roadway/Street					Mile Marker Exit Number Feet N S E W of									
	Also at Intersection with					Route# Intersecting Roadway/Street									
2 1	Route# Direction Name of Intersecting Roadway/Street					Feet N S E W of									
3	X Vehicle 1	My 114 4 40 Dyrup Dy					•								
	Venicie	#Occupants		Cast	e Number			2100000							
	License#	18 1		19		2PCN11				g Type_I			State MA 20	-	
4		Sex M Lic. Class D Lic. Restrictions 9 CDL Endorment					Veh Year 2021 Veh Make MERCEDES Veh Config. 1								
4 1	Operator 2110 Address 63 BC	Last OTSFORD RD	First	Middle	Owner LI DONGMEI Address 11 FAIRHAVEN RD										
	City NEWTO		C4.	ate MA 7 in 02467							State	MA	7in 02459	-	
		City NEWTON State MA Zip 02467 Insurance Company LM GENERAL					Value Action Prior to Creek 21 Damaged Area Code: (Circle Up to Three)								
5	1	Direction: N	Event Sequence 1 22 22 22 22 2 3 4												
	Citation # (If I			oonding to Emergency? N	Most Harmful Event 1 23 10 Undercarriag								riage		
	Violation	1: ChSec	Violation	2: ChSec	Drive	r Contributing (99 24	24			$\sqrt{}$	5 11 Totaled		
⁶ 1	Violation 3: ChSec Violation 4: ChSec					Underride/Override 25 Towed N 8 O 6									
	Please fill out for operator and all occupants involved Name (Last First Middle) Address					26 27 28 29 30 31 32 33 33 34 35 35 35 36 36 37 37 38 38 38 38 38 38								lity 1	
	Operator See Above														
⁷ 3	Please Select C of the Followi		2 <u>1</u> #Occupan	ts Non-Motorist A Ty	уре	14 Action	15 Loc	eation	16 C	ondition	17	Ні	it/Run Mor	ped	
	License# St MA DOB/Age					Reg # 19GA78 Reg Type PAN					Reg State_MA		_		
	Sex M Lic. Class D 18 18 Lic. Restrictions 9 CDL					Veh Year 2006 Veh Make TOYOTA Veh Config. 20									
8 1	Operator DU	BINSKY	BORIS First	Endorsment	Owner (Same as operator) Last First Middle									_	
_	Address 155 CYNTHIA RD					Address								_	
	City NEWTON State MA Zip 02459					CityStateZip								_	
	Insurance Company LM GENERAL					Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)								ree)	
						Event Sequence 1 22 22 22 22 2 3 4 10 Undercarriage								riage	
	Citation # (If Issued) T2080652					Most Harmful Event 1 5 11 Totaled 5 11 Totaled								ge	
	Violation 1: Ch Sec Violation 2: Ch Sec Violation 3: Ch Sec Violation 4: Ch Sec					Driver Contributing Code 4									
	Violatio:	n 3: ChSe ease fill out for	1 1 1 1 26 27 28 29 30 31 32 33						33	\blacksquare					
	Name (Last Fi	rst Middle)	- Perator and an	Address		Age/DOB	Sex	Pos. Sy	ystem Statu	Switch	Code Code	Status C	ansp. Code Medical Fac	ility	
	Operator/	Non-Motorist		See Above				9	9 99	99 (0	99 1			



Crash Narrative:

Mv#1 operator Feng Zhu stated he was travelling on Greenwood St W/B. Zhu stated as he approached Cynthia Rd, he slightly veered left to avoid a parked MV on Greenwood St. Zhu stated at that time Mv#2 suddenly emerged from Cynthia Rd without stopping turning right onto Greenwood into the path of #1. Zhu stated his driver's side door was struck by the front of #2. Zhu was not injured. #1 sustained significant driver's side door damage. Zhu stated #2 operator stopped after the crash and provided his name Boris Dubinsky, phone number 617-470-4874 and discussed the crash. Zhu took a photo of #2's plate (MA reg 19GA78) before #2 drove away prior to my arrival. Zhu was able to identify #2 as the same operator from an RMV photo query on scene of the plate provided. I responded to Dubinsky's address at 155 Cynthia Rd. I met a woman there who said he was not home. She called the number and said nobody was answering. I had the woman verify the number and she (Continued on next page)

Witnesses:							
Name (Last, First, Middle)	Address		Phone #	#	Statement		
Property Damage:							
Owner (Last, First, Middle)	Address		Phone #	34-Туре	Description of Dama	ged Property	
Truck and Bus Information:	Registration #		(From Vehic	ele Section)			
Carrier Name			(From Venic		Carrier Issu	uing Authority Cod	e 35
Address			City		St	Zip	
US DOT #:S			Issuing State	ICC #:_		Interstate	36
Cargo Body Type Code Gross	Vehicle Weight	38			39		
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tı			
Hazmat Information:							
Placard 40 Material 1 digit #	41 Material Nar	me		Material 4	digit #	Release code	42

	→ Direction [1 = Vehicle 1	2 =Vehicle 2	₽Pedestria	an	
Crash Diagram:	ie: →[1 -	2	₽Ŷ		
					If Crash <u>Did I</u> on a Public W	
		_			—	arking Lot
į į			i i		☐ Mall/Shoppi	ing Center
		 			Other Private	
		_	- 	<u>+</u>	Indicate North	by Arrow
Crash Narrative:	(one digit di	fferent than	n above). I told	the woman	to have Dubinsky call	me at
HQ. He never did. I call	ed him later f	rom HQ myse	lf.			
Dubinsky stated he came	to a stop at tl	he end of C	ynthia Rd. He st	ated as he	turned right, #1 struc	ck him on
his left front driver's	side because #:	1 went to th	he other side of	the road d	ue to a truck parked o	on Greenwood
St. I advised him Green	wood St has the	e right of w	way and he was re	equired to	yield from Cynthia Rd.	. Dubinsky
stated after he gave his	name and number	er, Zhu was	on his phone for	r a period	of time so he left. I	Oubinsky was
advised to provide his 1	icense and reg	istration to	o complete the p	roper excha	nge after an accident.	. When asked
about the different phon	e number, he s	tated Zhu m	ust have typed i	n the wrong	number. I advised Duk	oinsky I
would be citing him for	Failure to Yie	ld (Ch89/Sed	c9) to be sent i	n the mail.	He was lastly advised	d his
(Continued	on next page)					
Witnesses:		Address			Discuss #	Ctatamant
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:						
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Damaged Property	У
Truck and Bus Information: Carrier Name				ehicle Section)	Carrier Issuing Authorit	y Code 35
Address			City			
US DOT#:						36
37	Gross Vehicle Weight	38				
Trailer Reg #:	L Reg Type	Reg Stat	e Reg Year_	Trai	ler Length 39	
Hazmat Information: Placard 40 Material 1 dig	git # 41 Materia	l Name		Material 4 di	git# Release co	de 42
ADAM D GABRIEL			25117 NEV	VTON POLICE DEPARTM	02	2/06/2021

ID/Badge #

Department

Precinct/Barracks

Date

Signature

Police Officer Name (Please Print)

	Direction	1 = \	/ehicle 1	2 #Vehicle 2		Pedestr	ian		
Crash Diagram:	ie: →[1	→	2	→	Ŷ			
Crash Diagram: Crash Narrative: option to appeal if he s						Ĭ - - - - - -		If Crash Did Not Con a Public Way: Off-Street Parking Garage Mall/Shopping Co	Lot enter
option to appeal if he s	o wisnes.								
Witnesses:									1 -
Name (Last, First, Middle)		A	ddress					Phone #	Statement
Property Damage:									
Owner (Last, First, Middle)	Address			Phone #		34-Type	Desc	ription of Damaged Property	
Truck and Bus Information:	Registration #			(Fro	m Vehic	le Section)			
Carrier Name								Carrier Issuing Authority Cod	e 35
Address				City				St Zip	
US DOT#:	State Number			Issuing Stat	e	ICC #:_		Interstate	36
37	Г	38							
Cargo Body Type Code	Fross Vehicle Weight							39	
Trailer Reg #:	Reg Type		Reg State	Reg Y	ear	Tra	ailer L	ength	
Hazmat Information:									
40	41	137				36	10 10 11		42
Placard Material 1 dig	ıt # Materia	ıı Name				Material 4	aigit#	Release code	
									<u> </u>
ADAM D GABRIEL			25	117	NEWTON	POLICE DEPARTM		02/06/20)21

ID/Badge #

Department

Signature

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)