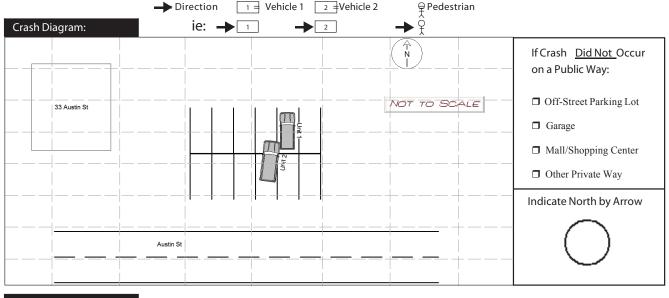
	Poli	ice Use Only		Common	wealth	of Massa	achus	etts			RMVI	Docume	nt Number	
	Date of Crash 02/22/2021	Time of Crash 08:49	City/Tow NEWTON	m Mo	otor Ve	hicle Cra	$sh$ $\begin{bmatrix} N \\ V \end{bmatrix}$	umber	Number Injured		Limit <u>5</u> ide	5	State Police Local Police MBTA Police	□ Xi
	02/22/2021	24HR			Police	Report		2	0		itude		Other:	
		AT INTER	RSECTION:	<	LOCA	ATION	>		NOT	AT I	NTE	RSECT	ΓΙΟN:	
						WEST	33		AUSTIN	ST				-
1	Route# Direc	tion	Name of I	Loadway/Street		Route# Direction	on Addre	ess#		Nam	ne of Roa	adway/St	reet	=
_	At					Feet NSEW of or								
	Route# Direction Name of Intersecting Roadway/Street					Mile Marker Exit Number								_
			Also at Interse			Feet [N	N S E W	of	Route#	——In	tersectin	ισ Roadw	/ay/Street	-
2						Feet [N	S E W	of				8	,	
	Route# Direc	tion	Name of Intersect	ing Roadway/Street		Landmark							_	
	XVehicle1	#Occupants	X Hit/Run	Moped	Case Numbe	er	2100	000142						
	License#		St	DOB/Age	Reg	# 6CS197			Reg Typ	e PAN		Reg St	ate MA	
		18 1		19		Year 2017	Veh M						20	_
			_	Endorsme	nt	er CARRILLO						ch com	15.	$\perp$
1		Last		Middle	Add	ress 24 WISWALI	L ST		First			Middle		-
				eZip		NEWTON					State M	IA Zir	02465	_
				·		cle Action Prior to	Crash	21					cle Up to Thr	ree)
				nding to Emergency			22 22		] 22 2		3	4		
		ssued)				t Harmful Event	23				\_/	1)	10 Undercarr	riage
				2: ChSec		er Contributing Co	_	24	24 1	<b>-</b>	9	$\left  \right ^{5}$	11 Totaled	
l						erride/Override	25	Towed	N 8		O	6		
	Please	fill out for opera	ator and all occup				26 Seat		28 29 irbag Airbag	30 Eject	31 Trap Inj Code Sta	32 33 ury Trans	3	$\dashv$
	Name (Last Fir	st Middle)	<u> </u>	Address See Above		Age/DOB	Sex Pos.	System S	status Switch	Code	Code \$ta	itus Code	Medical Facil	ity
	-1				-									$\dashv$
1	Please Select C of the Followi		2 <u>1</u> #Occupants	Non-Motorist	A Type	14 Action 1	5 Locatio	on 10	Condit	ion	17	X Hit/F	Run Mop	oed
	License#		St MA		Reg	# 1NTE29			Reg Typ	e PAN		_Reg St	ate_MA	_ ]
	Sex_F Lic.	Class D 18 1	Lic. Restrictions			Year 2019	Veh M	lake_TO	YT		v	eh Conf	ig. 20	
L	Operator RUS	SSO	MELINDA First	Endorsme		er (Same as oper	rator)		First			Middle		_
	Address 55 RI	EAGAN RD	- I list	Middle	Add	ress								_
	City DRACU	Γ	Stat	e_MAZip_01826_	City						State	Zip	o	_
	Insurance Com	npany COMMER	CE INS		Vehi	cle Action Prior to	Crash	1 21	Da	amaged	Area Co	ode: (Cir	cle Up to Thr	ree)
	Vehicle Travel Direction: $\boxed{\mathbf{X} \mid \mathbf{S} \mid \mathbf{E} \mid \mathbf{W}}$ Responding to Emergency? $\underline{\mathbf{N}}$					Event Sequence 2 22 22 22 22 3 4								
	Citation # (If I	ssued) T1446762			Mos	t Harmful Event	2 23		_		9		10 Undercarr 11 Totaled	riage
	Violation 1: Ch_19/75_Sec Violation 2: ChSec					Driver Contributing Code 97 24 24								
	Violatio	n 3: ChSe	ec Violation	4: ChSec	Und	erride/Override [	25	Towed_	N 8		7	6		
			operator and all	occupants involved		1 /202	26 Seat	Safety A	28 29 irbag Airbag	30 Eject	31 Trap Inj	32 33 ury Trans	p.	11:6-
	Name (Last Fi	Non-Motorist		Address See Above		Age/DOB	Sex Pos	- 99 4	Status Switch	ch Code 0	0 1	tatus Code 0 1	N/A	inty
	-							$\dagger$						
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								$\perp$						
													1	



## Crash Narrative:

On Monday 2/22/2021 at approx 0849hrs, while assigned to N491, I responded to 33 Austin St in Newton for a MVA hit and run. There I was met by the owner of MV1 who states that his car was parked in the Austin St lot while getting coffee at Starbucks. He states that a witness to the accident gave him their information.

Witness statement: Schreiner states that she had just left Starbucks and heard a crash. When she looked into the Austin St parking lot she could see MV2 make contact with MV1. She said that MV2 then scrapped the side of MV1 with the front passenger side of the vehicle. When MV2 left the parking lot she said that she was able to read the MA plate of 1NTE29. Schreiner said that MV2 was white and looked like a Toyota Highlander operated by a white female w/ blonde hair in her 40's.

(Continued on next page)

Address					
Address		Phone :	Phone #		
Address	Phone #	34-Type	Description of Dama	aged Property	
	`	cle Section)	Carrier Issu	uing Authority Coc	35 le
	City		St	Zip	
	Issuing State	ICC #:_		Interstate	36
			39		
Reg Type Reg State	e Reg Year	Tr			
Material Name		Material 4	digit #	_ Release code	42
	Address  Registration #  te Number  /ehicle Weight 38  Reg Type Reg State	Address Phone #  Registration # (From Vehic City Issuing State Reg Type Reg State Reg Year Reg Year At 1	Address Phone # 34-Type  Registration # (From Vehicle Section)  City  Ite Number Issuing State ICC #:  Yehicle Weight Reg State Reg Year Tr  Tr	Address Phone # 34-Type Description of Dama  Registration # (From Vehicle Section)  Carrier Iss City St  te Number Issuing State ICC #:  /ehicle Weight Reg State Reg Year Trailer Length 39	Address Phone # 34-Type Description of Damaged Property  Registration #(From Vehicle Section) Carrier Issuing Authority CodeCityStStInterstate  // Chicle Weight 38

KEVIN DURICKAS		1	NEWTON POLICE DEPARTM		02/22/2021
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	<b>→</b> □	2	₽Ŷ		
	 	    			I	sh <u>Did Not</u> Occur Public Way:
					——— <b>□</b> Off	F-Street Parking Lot
		 			<b>G</b> a	rage
į į			į	į	☐ Ma	all/Shopping Center
					Otl	ner Private Way
					Indica	te North by Arrow
						$( ) \mid$
			+	+		
Curale Namurations						
Crash Narrative:	hie time who was	operating M	72 (MA# 1NTF29	`		
Dracut PD was contacted					hone number. Ho	wever, the number
was to a business she has	<del>_</del>			oo goo a p		
			-			
Traffic Bureau upd	ate (Officer Gau	det): On Mo	nday, Februar	y 22, 2021	I was able to m	ake contact
with the registered owner	r of MV2, Ms. Me	linda Russo	(S29162725).	Ms. Russo	stated that she	was
operating her white 2019	Toyota Highlande	er (MA: 1NTE	29) in the Au	stin Street	municipal park	ing lot this
morning. Ms. Russo state	ed she was backi	ng out of a	parking spot	when she ob	served her pass	enger side mirror
collapse in. Ms. Russo	stated after she	exited the	parking spot	she pulled	her vehicle ove	r and observed no
(Continued	on next page)					
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:						
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Damage	d Property
Truck and Bus Information:	Registration #		(From V	ehicle Section)		
Carrier Name			`	enicie Section)	Carrier Issuin	g Authority Code
Address			City		St	Zip
US DOT #:	State Number		Issuing State	ICC #:		Interstate 36
Cargo Body Type Code 37	bross Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Year_	Trai	ler Length 39	
Hazmat Information:						
Placard 40 Material 1 dig	it # 41 Material N	ame		Material 4 di	git# I	Release code 42
VEVIN DUDICKAC						09/00/0094
REVIN DURICKAS Police Officer Name (Please Print)	Signature			vton police departs Department	Precinct/Barrack	02/22/2021 as Date

	Direction	1 <b>=</b> V€	hicle 1	2 = Vehicle 2	₽ Pede:	strian		
Crash Diagram:	ie: →[	1	→[	2	→ ♀			
				   		<u> </u>	If Crash <u>Did Not</u> on a Public Way:	Occur
		_				<u> </u>	— ☐ Off-Street Parkin	g Lot
							☐ Garage	
						<u> </u>	☐ Mall/Shopping C	lantar
	- – – – –	_		<u> </u>	<u> </u>	+-		
							☐ Other Private Wa	ıy
		_			<del>                                     </del>	+-	Indicate North by A	Arrow
					     	+- +- 1		
Crash Narrative:								
damage to the passenger do	or mirror are	a. M	s. Russo	stated she	fixed her	mirro	or and then left the a	ırea.
Ms. Russo stated she did n	ot think ther	e wou	ld be da	mage to any	other veh	icle b	pecause she did not have	re damage
on her vehicle.								
Ms. Russo was advise	d that if she	beli	eves she	was involv	ed in a cra	ash, s	she should make every e	effort to
contact the owner of the c	ther vehicle.	Ms.	Russo w	as also adv	rised she ca	an cor	ntact the police depart	ment for
assistance. Ms. Russo will	be mailled M	assac	husetts	Uniform Cit	ation T144	6762 1	for Newton City Ordinan	ice
Chapter 19, Section 75 (Fa	il to Use Car	e).	Austin S	treet is a	public way	maint	tained by the City of	
Newton.								
Witnesses:								
Name (Last, First, Middle)		Add	dress				Phone #	Statement
Property Damage: Owner (Last, First, Middle)	Address			Phone #	34-Type	Dose	cription of Damaged Property	
Owner (Last, First, Middle)	Address			Filotie #	34-1 ype	Desc	cription of Damaged Froperty	
Truck and Bus Information:	Registration #_			(Fror	n Vehicle Section	i)		25
Carrier Name							Carrier Issuing Authority Co	35 de
Address				_ City			St Zip	
US DOT#:	State Number			Issuing State	ICC#	<b>#</b> :	Interstate	36
37	ss Vehicle Weight	38		0				
Trailer Reg #:			Reg State	<b>R</b> ρσ <b>V</b>	ear	Trailer I	ength 39	
Hazmat Information:		·	-0 5	105 1			- 0	
Placard 40 Material 1 digit #	41 Material	Name			Material	4 digit ±	# Release code	42
radicial Fulgit	iviaterial	. 101110			widefilat	, digit n	release code	
KEVIN DURICKAS						ARTN	02/22/2	

ID/Badge #

Signature

Department

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)