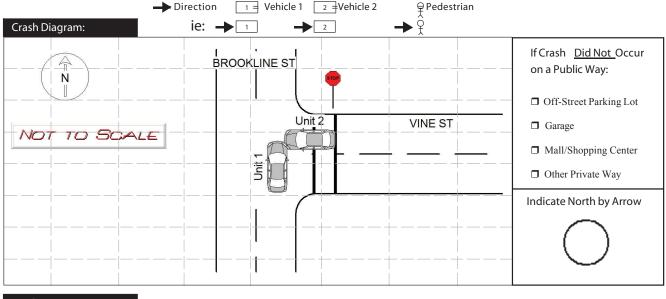
	Poli	ce Use Only		Comm	nonweal	lth o	f Mass	sach	iuse	etts			RI	MV Do	cume	nt Number				
	Date of Crash 05/12/2021	09:46	NEWTON	Town	Motor			ash	Ve	ımber hicles	Inju	ed L	peed Li atitude			State Police Local Police MBTA Police	XI O			
l		AT INTER		. 1		OCAT	Report	>	2		1 N(ongitud			Other:	<u> </u>			
		ATIMIEN	SECTION	•	` 1	I					111	ЛА	1 111	ILK	SEC I	1011.	 2			
1	NOR		KLINE ST	OD 1 (G)		[CD 1	10.		_ _			
1	Route# Direction Name of Roadway/Street At				Route# Direction Address # Name of Roadway/Street							reet	_ ₂							
	WES	WEST VINE ST				Feet NSEW of or Mile Marker Exit Num						Exit Number	-							
	Route# Direc	tion N		ting Roadway/Stre	et	— [Feet	N S	E W	of										
2							Feet	N S	EW	of	Rou	e#	Inters	secting	Roadw	ay/Street	5			
1	Route# Direction Name of Intersecting Roadway/Street				Feet N S E W of									$-\mid$						
3	XVehicle1 2_#Occupants				•									ヿ						
		*		1	Case I	lumber			21000								_			
	License#	18 1	St	19			EV233K									20	-			
		Class D 10 1	_	ions B CI	OL dorsment		ear_2019								n Confi	g. 1				
⁴ 2	Operator FOX	Operator FOX GABRIEL HARVEY Last First Middle Address 11 BLUESTONE TRL				Owner (Same as operator) Last First Middle										- 1				
						Address										-				
	City BRIDGEWATER State MA Zip 02324																			
5	Insurance Company GEICO Vehicle Travel Direction: X S E W Responding to Emergency? N				Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three) 21 Damaged Area Code: (Circle Up to Three)										(C)					
1				esponding to Emer	rgency?_N		Sequence 1	_	22					Ĭ	了.	10 Undercarri	iage			
	`	ssued)					Iarmful Event	1		24	24	1 🗲	•]	9	5	11 Totaled	luge			
1	1			on 2: ChSe			Contributing (Code	25			8		7	\mathcal{L}_{6}					
1	Violation 3: ChSecViolation 4: ChSec Please fill out for operator and all occupants involved					Underride/Override Towed Y								_						
	Name (Last Fire		ator and an oc		Address		Age/DOB	Sex		27 Safety System	Airbag A Status S	irbag E witch C	ject Traj	31 32 Injury le \$tatus	Transp Code	Medical Facili	1 1			
	Operator			See 11 BLUESTONE TI	Above			-	-	99	4	99 (0	10	1	N/A	_			
	FOX, SANDRA	A		BRIDGEWATER, 1				F	3	99	4	99 (0	9	1	N/A				
⁷ 3	Please Select C of the Followin		22 <u>2</u> #Occup	ants Non-Me	otorist A Type	14	4 Action	15 L	ocation	1	16 Co	ndition	1	7	Hit/R	un Mop	ed			
	License# St MA DOB/Age DOB/Age					Reg # 5FRL10 Reg Type PAN Reg State MA							nte_MA							
	Sex M Lic. Class D 18 Lic. Restrictions B 19 CDL				Veh Year 00 Veh Make MERZ Veh Config. 1															
1	Operator SHEHAJ PELLUMB Last First Middle				Owner (Same as operator) Last First Middle										_					
_	Address 50 SEYMOUR ST (apt. 14)					Address								-						
	City ROSLINDALE State MA Zip 02131				CityStateZip								-							
	Insurance Company GEICO Vehicle Travel Direction: NSEX Responding to Emergency? N					Vehicle Action Prior to Crash 4 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 22 4 Event Sequence 2 3 4									ee)					
	Citation # (If Issued) T2015012						Most Harmful Event 1 23 10 Undercarriage 5 11 Totaled									iage				
	Violation 1: Ch_89/8 Sec Violation 2: Ch Sec Driver Contributing Code 4 24 24 24																			
	Violation 3: ChSec Violation 4: ChSec Underride/Override									7 6										
	Please fill out for operator and all occupants involved Name (Last First Middle) Address						Age/DOB	Sex	26 Seat Pos.	27 Safety System	28 Airbag A Status	29 irbag Switch	30 Traj	31 32 Injury de Statu	Transp	o.	al Facility			
		Non-Motorist			Above					99		99 (10	1	N/A				
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Crash Narrative:

On Wednesday 5/12/21 at approx 0946hrs, while assigned to N499, I responded the intersection on Brookline St and Vine St(both public ways) in Newton for a 2 car MVA.

Operator of MV1 states that he was traveling northbound straight on Brookline St. He said that MV2 came out of Vine St, didn't stop and struck his vehicle.

Operator of MV2 states that he was on Vine St and stopped at the stop sign at the Brookline St intersection.

He then stopped again past the crosswalk while waiting for all traffic on Brookline St to pass. He said that

MV1 came "out of nowhere" at a high rate of speed NB on Brookline St before striking his vehicle.

Both vehicles were towed by Tody's towing service. Operator of MV2 was given citation T2015012 for failing to stop, yield at an intersection.

W/W										
W itnesses: Name (Last, First, Middle)		Address			Phone	#	Statement			
Name (Last, First, Middle)	Address		Priorie	#	Statement					
Property Damage:	,									
Owner (Last, First, Middle)	Phone # 34-Type De			Description of Dama	scription of Damaged Property					
Truck and Bus Information:	D :		/F 1/11:	1.0.0						
35										
Carrier Name					Carrier Iss	suing Authority Co	de			
Address			City		St	St Zip				
US DOT #: State Number Issuing State ICC #: Interstate 36										
US DOT #: Issuing State ICC #: Interstate										
Cargo Body Type Code Gros	ss Vehicle Weight	30								
Trailer Reg #: Reg Type Reg State Reg Year Trailer Length 39										
Hazmat Information:										
40 41										
Placard Material 1 digit #	Material Na	me		_ Release code	42					