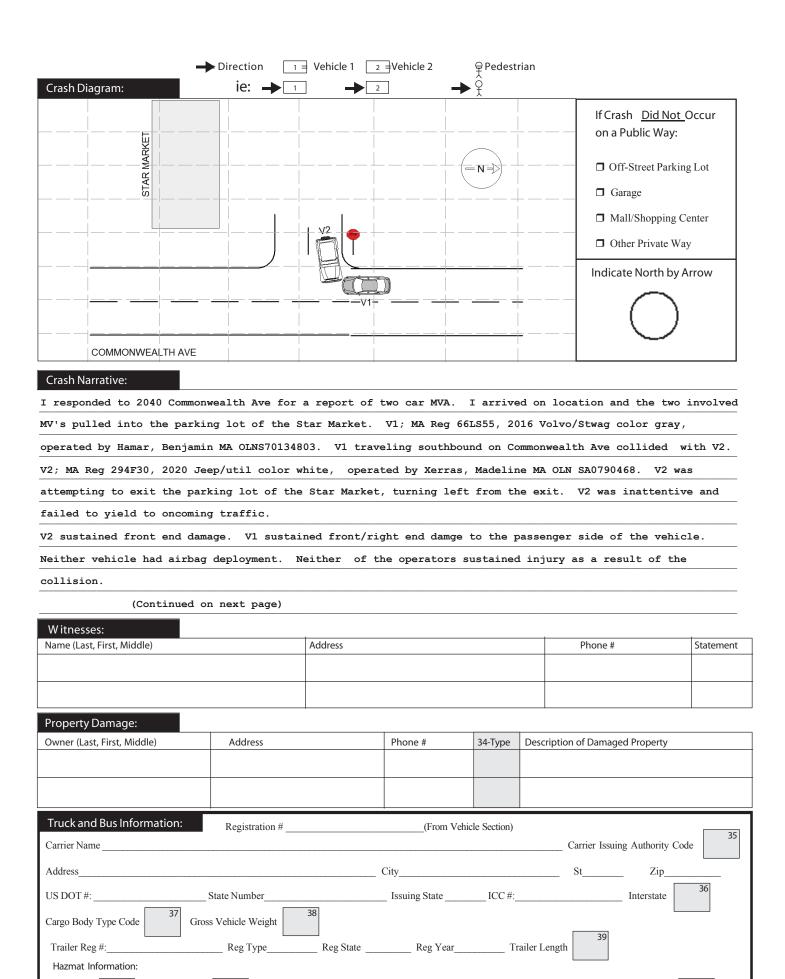
	Police Use Only		Comr				130113					t Number	
Date of Cr 06/28/2021		City/ NEWTON	Town		Vehicle C		Number Vehicles	Injure	d Latitu	l Limit <u>30</u>		ate Police ocal Police BTA Police	
	AT INTER	SECTION	Ι•		ice Repor	t >	2	NO'		itude		ther:	4
	ATINIEN	SECTION	(•		OCATION			NO	IAII	INTERS	DEC 1	ION:	\dashv
						UTH 20		COMN		ALTH AV			_[
Route# D	Direction	Name	of Roadway/Stree	et	Route# Di	rection A	ddress #		Nan	ne of Roady	vay/Stre	et	-
·					Fe	et NSE	W of	Mile	• Marker	or _	E	xit Number	Ī
Route# I	Direction N		cting Roadway/Str	eet	Fe	et N S E	W of						_
		Also at III	nersection with			et N S E		Route		itersecting I	Roadwa	y/Street	ŀ
Route# D	 Direction	Name of Inter	rsecting Roadway	/Street	Fe	et M S E	VV OI	STAR	MARKE	T Landma	ul -		_
[TV]	1.4.4.40			$\overline{}$						Landma	rk		┪
A Vehic	cle1 1_#Occupants	Hit/Ru	ın Mop	oed Case N	umber	2	100000472						┙
License #_		St_	MA DOB/Age		Reg#_66LS55			_Reg T	ype_PAN	F	Reg Stat		.
Sex_M_I	Lic. Class D 18 15	Lic. Restrict	tions 1	CDL	Veh Year 2016	Ve	h Make_V	OLVO		Veh	Config	. 20	
Operator _.	HAMAR	BENJAMII	N D E	ndorsment	Owner (Same as	operator)		First		М	iddle		
Address 2	7 WHITTIER RD	11101			Address						-		-
City_NEW	/TON		State_MA_Zip	02460	City					State	Zip_		
Insurance	Company COMMER	.CE			Vehicle Action Pr	ior to Crash	1 2	1	Damaged	Area Code	e: (Circl	le Up to Three	e)
Vehicle Tr	ravel Direction: N	X E W R	esponding to Em	ergency?_N	Event Sequence	1 22 2	2 22	22 €		3	4		
Citation #	(If Issued)				Most Harmful Ev	ent 1				9		10 Undercarria	ıge
Viola	ation 1: ChSec	Violat	ion 2: Ch	Sec	Driver Contributir	ng Code	1 24	24				11 Totaled	
Viola	ation 3: ChSec	Violat	ion 4: Ch	Sec	Underride/Override	le 2	Towe	8		7	6		
	ase fill out for opera	ator and all oc	cupants involve					28 Airbag Air	29 30 pag Eject	31 32 Frap Injury	33 Transp.		\dashv
Name (Las	st First Middle)	1	Se	Address e Above	Age/DO		Pos. \$ystem	Status Swi	tch Code	Code \$tatus	Code 1	Medical Facility	4
open.								2 9	, 0	0 10	1		\dashv
									-				\dashv
Dlassa Cal	ect One X Vehicle	2 <u>1</u> #Occup	pants Non-M	Motorist A Type	14 Action	15 Loc	ation	16 Cone	dition	17	Hit/Ru	n Mope	d
	lowing:			71									4
of the Foll			MA DOB/Ag	e				_ Reg T	ype_PAN	F	Reg Stat	e MA 20	.
of the Foll	18 1		19		Reg# 294F30				/ F			. 2	
of the Foll License#_ Sex_FI	Lic. Class D 18 19	8 Lic. Restrict	tions 1 C	CDL	Veh Year 2020		h Make_JE			Veh	Config		- 1
of the Foll License#_ Sex_FI Operator_	Lic. Class D 18 18 XERRAS Last	8	tions 1 C		Veh Year 2020 Owner XERRAS	Last	h Make_JE			В	Config		.
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of the Foll License#_ Sex_FI Operator_	Lic. Class D 18 18 XERRAS Last Last L441 CENTRE ST	Lic. Restrict MADELIN First	tions 1 C	DLndorsment	Veh Year 2020 Owner XERRAS	Last		Ξ		В	iddle	02459	
License#_ Sex_FI Operator_ Address_1 City_NEW	Lic. Class D 18 18 XERRAS Last Last L441 CENTRE ST	Lic. Restrict MADELIN First	tions 1 C	DLndorsment	Veh Year 2020 Owner XERRAS Address 1441 CE	Last NTRE ST	LYNNI 4	First		B M State MA	iddle Zip	02459 le Up to Thre	.
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License #_ Sex_FI Operator _ Address_1 City_NEW Insurance O	Lic. Class D 18 18	Lic. Restrict MADELIN First CE S E W	State MA Zip	CDLndorsment	Veh Year 2020 Owner XERRAS Address 1441 CE City NEWTON Vehicle Action Pr	ior to Crash	LYNNF 4 2 22 22	First		B State MA Area Code	Zip _		
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License #_ Sex_FI Operator_ Address_1 City_NEW Insurance C Vehicle Tr Citation #	Lic. Class XERRAS Last L441 CENTRE ST VTON Company COMMER avel Direction: X (If Issued) T2081075 clation 1: Ch 89/9 Se	Lic. Restrict MADELIN First CE S E W	State MA Zip Responding to Em	DDLndorsment Middle 02459 mergency? N	Veh Year 2020 Owner XERRAS Address 1441 CE City NEWTON Vehicle Action Pr Event Sequence Most Harmful Event	ior to Crash 1 22 2 ent 1 2.	LYNNI 4 2 4 2 6 4 24	First		B State MA Area Code	Zip _	le Up to Thre	
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Sex_FI Operator_ Address_1 City_NEW Insurance C Vehicle Tr Citation # Viol Name (La	Lic. Class D 18	Lic. Restrict MADELIN First CE S E W ec Viola cc Viola	State MA Zip Responding to Emation 2: Ch	DL	Veh Year 2020 Owner XERRAS Address 1441 CE City NEWTON Vehicle Action Pr Event Sequence Most Harmful Event Driver Contribution	NTRE ST ior to Crash 1 22 2 ent 1 2. ag Code 2.	LYNNI 4 2 2 22 4 24 Towed Seat Safety	First 22 2 2 2 2 N	Damaged 29 30 Eject ritch Code	B State MA Area Code 3	Zip_se: (Circle 4 5 6	le Up to Thre	age



Material 1 digit #

Placard

Material Name______ Material 4 digit # ______ Release code

	Direction 1	Vehicle 1	2 =Vehicle 2	Pedestria	an			
Crash Diagram:	ie: → 1	→ □	2	₽Ŷ				
					If Crash Did on a Public W Off-Street P	ay:		
					□ Mall/Shopp	ing Center		
					Other Privat	e Way		
		 			Indicate North	by Arrow		
						/		
Crash Narrative:					L			
V2 operator was issued	MA Uniform citation	on T2081075;	89/9 Fail to	Yield.				
Witnesses:								
Name (Last, First, Middle)	Name (Last, First, Middle)				Phone #	Statement		
Property Damage: Owner (Last, First, Middle)	roperty Damage: wner (Last, First, Middle) Address		Phone #	34-Type	Description of Damaged Propert	cription of Damaged Property		
					. 3 .	,		
Truck and Bus Information:	Registration #		(From Ve	ehicle Section)				
Carrier Name					Carrier Issuing Authorit	y Code 35		
Address						36		
US DOT #:		38	Issuing State	ICC #:	Interstate	e		
Cargo Body Type Code	Gross Vehicle Weight		Da- V-	m. ·	ilar Lanath			
Trailer Reg #:Hazmat Information:	Keg Type	Keg State	Keg Year_	Trai	lier Length			
Placard 40 Material 1 d	ligit # 41 Material N	ame		Material 4 di	igit# Release co	ode 42		

NEWTON POLICE DEPARTM

06/29/2021

DANIEL S SULLIVAN