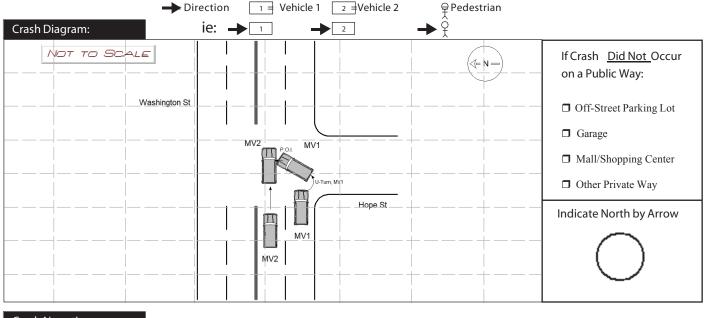
	Police Use Only	Commor	ıwealth o	of Massa	chuse	etts			RMV	/ Docu	ment Nun	nber	1
			otor Veh			ımber	Numb	er Spee					1
	07/01/2021 20:15 NEWTON				Ve	hicles	Injure		ude		MBTA	olice Dolice Nolice Dolice	
					ce Report 2 0 Longitude Other:  OCATION > NOT AT INTERSECTION:					•	<u> </u>		
	AT INTERSECTIO	IN:	LOCA	HON -			NU	I AI	11811	LKSL	CHON	•	2 9
1	Route# EAST WASHINGTON ST Nation National Washington ST	me of Roadway/Street		Route# Direction	n Address			Nor	no of D	loadway	/Ctraat		10
3	Route# Direction Nai	At			II Addres	58 #			ile of N	Coadway	Sireet		<b>2</b> 10
	NORTH HOPE ST			Feet N	SEW	of –	Mile	• Marker		or	Exit Nu	mber	
		secting Roadway/Street Intersection with		Feet N	SEW	of							
2				Feet N	SEW	of	Route	# I1	ntersec	ting Roa	idway/Stre	et	<b>3</b> 11
2	Route# Direction Name of In	ntersecting Roadway/Street	:						Laı	ndmark			
<sup>3</sup> <b>3</b>	XVehicle 1 4_#Occupants  Hit/	Run Moped	Case Number		21000	00483							
	License # S	St MA DOB/Age	Reg#	BR30KE			Reg T	pe PAN	1	Reg	State MA		1
	Sex M Lic. Class C 18 18 Lic. Restr	19		ear 2016	Veh Ma	ake MA	AZDA			Veh Co	onfig. 2	20	
4	Operator KING OLIVER	Endorsn	nent Owner	KING	N	исне	LLE			-	о <u> </u>		<b>1</b> <sup>12</sup>
1	Address 7 URECO TER	Middle		SS 7 URECO TEI			First			Middle	е		
		State MA Zip 01602		VORCESTER					State	MA	Zip 01602	!	
	Insurance Company STANDARD FIRE INS			e Action Prior to	Crash	8 21					Circle Up		
5	Vehicle Travel Direction: NSEN Responding to Emergency? N			Event Sequence 1 22 22 22 22 2 3 4									
	Citation # (If Issued)		-		23				$\bigvee$	ΑÌ		dercarriage	
	Violation 1: Ch Sec Viol	lation 2: Ch Sec		Contributing Co		24	24	<b>←</b>	9		5 11 To	taled	
<sup>6</sup> 2	Violation 3: Ch Sec Viol			ride/Override	25	Towed			C	)	6		
	Please fill out for operator and all	occupants involved					28 Airbag Air	29 30 Eject	31 Tran	32 Injury Tr	33 ansp.		13
	Name (Last First Middle)  Operator	Addres See Abo		Age/DOB	Sex Pos.	System	Status Swi	tch Code	Code	Status C	ode Medic	nal Facility  NE	$\lfloor 1 \rfloor$
		6 RIVERSIDE DR					4 4	0	0	10 1	1.70	ONE	_
	BERBERIAN, MICHAEL	WEBSTER, MA 1900 WASHINGTON S	T (ant 1)		M 3	1	4 4	0	0	10 1			1
	HOLLAND, MICHAEL	NEWTON, MA	1 (apt 1)		M 6	1	4 4	0	0	10	ı NO	NE	
	MULO, JASON	50 ROLLING LANE SUDBURY, MA			M 4	1	4 4	0	0	10 1	NO	ONE	
3	Please Select One of the Following: Wehicle 2 1 #Occ	upants Non-Motori	st A Type	Action 15	Location		Cone	lition	17	Пн	it/Run	Moped	
		St NY DOB/Age DOB	Reg#	JEZ5919			_Reg T	pe_PAN	1	Reg	State_NY		
	Sex_M Lic. Class D 18 18 Lic. Restr			ear 2019	Veh Ma	ake_JEI	ΕP			Veh Co	onfig. 2	20	
8 <b>1</b>	Operator CASTORF JAKE Endorsment Owner CASTORF JOHN												
1	Last First Middle Last First Middle  Address 187 HELEN ST  Address 187 HELEN ST												
	City HOLBROOK	City_	City HOLBROOK State NY Zip 11741										
	Insurance Company ALLSTATE	Vehicl	Vehicle Action Prior to Crash  Damaged Area Code: (Circle Up to Three)										
	Vehicle Travel Direction: NSWW	cy?N Event	Event Sequence 1 22 22 22 22 Q Q										
	Citation # (If Issued)	Most 1	Most Harmful Event 1 23 10 Undercarriage 5 11 Totaled										
	Violation 1: ChSec Violation 2: ChSec Driver Contributing Code 1 24 24						········						
	Violation 3: ChSec Vio		Underride/Override 25 Towed N 8 7 6										
	Please fill out for operator an	*			26 Seat	27 Safety	28 Airbag Air	9 30 Eject	31 Trap	32 Injury Tr	33 ansp.		1
	Name (Last First Middle)  Operator/Non-Motorist	See Abo		Age/DOB	Sex Pos.	System	Status Sv 4 4	itch Code	Code 0	Status (		ical Facility E	
	•								1				



## Crash Narrative:

MV1 operator stated he was fully stopped in the right lane of Washington St (public way) at Hope St.

MV1 operator said he then attempted to make a U-turn from the right lane onto Washington St westbound. MV1

operator stated he did not observe MV2 in the left lane of Washington St eastbound and struck MV2's passenger side with the front end and driver side of MV1. MV1 operator stated he and none of his passengers were injured at this time. MV1 sustained minor front end and driver side damage, no tow required.

MV2 operator said he was traveling on Washington St eastbound in the left lane. MV2 operator stated he saw MV1 attempt a U-turn from the right lane of Washington St eastbound to the westbound side. MV2 operator said he did not have time to stop. MV2 operator stated he was not injured at this time. MV2 sustained passenger side damage, no tow required.

withesses:		_							
Name (Last, First, Middle)	Address			Phone	#	Statement			
Property Damage:									
Owner (Last, First, Middle)	Phone # 34-Type Des			Description of Dama	scription of Damaged Property				
Truck and Bus Information: Registration # (From Vehicle Section) 35									
Carrier Name Carrier Issuing Authority Code									
Address		City		St	St Zip				
US DOT #:		Issuing State	ICC #:_		Interstate	36			
Cargo Body Type Code Gross Vehicle Weight Gross Veh									
Trailer Reg #:	Reg State	Reg Year	ailer Length						
Hazmat Information:									
Placard 40 Material 1 digit #	me		Material 4	digit #	# Release code 42				

MARK HATFIELD

NEWTON POLICE DEPARTS

07/01/2021

Delice Officer Name (Places Print)

Signature

LD/Dedge # Department President Date

Date