



→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

**Crash Diagram:**

*NOT TO SCALE*

Washington St

Hope St

MV2

P.O.I.

MV1

U-Turn, MV1

MV1

MV2

Indicate North by Arrow

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

**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.

**Witnesses:**

Name (Last, First, Middle)	Address	Phone #	Statement

**Property Damage:**

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property

**Truck and Bus Information:**

Registration # \_\_\_\_\_ (From Vehicle Section)

Carrier Name \_\_\_\_\_ Carrier Issuing Authority Code

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate

Cargo Body Type Code  Gross Vehicle Weight

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length

**Hazmat Information:**

Placard  Material 1 digit #  Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code

MARK HATFIELD

NEWTON POLICE DEPART

07/01/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

precinct/Parade

Date