

Police Use Only			Commonwealth of Massachusetts				RMV Document Number												
Date of Crash 07/06/2021		Time of Crash 07:28 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 1	Number Injured 0	Speed Limit 25 Latitude _____ Longitude _____		State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other: <input type="checkbox"/>							
AT INTERSECTION:				< LOCATION >		NOT AT INTERSECTION:						9							
Route# Direction Name of Roadway/Street At				WEST 289 CHERRY ST		Route# Direction Address # Name of Roadway/Street						2							
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with				Feet N S E W of _____ • _____ or _____ Mile Marker Exit Number		Feet N S E W of _____ Route# Intersecting Roadway/Street						10							
Route# Direction Name of Intersecting Roadway/Street				Feet N S E W of _____		Landmark						11							
1 1		2 2		3		Vehicle 1 1 #Occupants		Hit/Run		Moped		Case Number 210000492							
License # --- St MA DOB/Age ---				Reg # 85232 Reg Type CON Reg State MA		Sex M Lic. Class 99 18 18 Lic. Restrictions 9 19 CDL _____ Veh Year 2017 Veh Make MACK Veh Config. 7 20						12							
Operator THORNE FRANK A Last First Middle				Owner NORTHEAST RECYCLING LLC Last First Middle		Address 305 TURNPIKE ST (apt. TRL21) City SEASTON State MA Zip 02375						1							
Address 305 TURNPIKE ST (apt. TRL21)				Address PO BOX 929		City STOUGHTON State MA Zip 02072													
Insurance Company COMMERCE				Vehicle Action Prior to Crash 10 21		Damaged Area Code: (Circle Up to Three)													
Vehicle Travel Direction: N S E W Responding to Emergency? N				Event Sequence 10 22 10 22 10 22 21 22		10 Undercarriage													
Citation # (If Issued) _____				Most Harmful Event 10 23		5 11 Totaled													
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 6 24 24															
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed Y															
Please fill out for operator and all occupants involved				26 27 28 29 30 31 32 33		13													
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility				Operator See Above --- --- 99 4 4 0 0 10 1		10													
Operator																			
7 1				Please Select One of the Following:		Vehicle #Occupants		Non-Motorist A Type 14		Action 15		Location 16		Condition 17		Hit/Run		Moped	
License # _____ St _____ DOB/Age _____				Reg # _____ Reg Type _____ Reg State _____		Sex _____ Lic. Class 18 18 Lic. Restrictions 19 CDL _____ Veh Year _____ Veh Make _____ Veh Config. 20													
Operator _____ Last First Middle				Owner _____ Last First Middle		Address _____ City _____ State _____ Zip _____													
Address _____				Address _____		City _____ State _____ Zip _____													
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Please fill out for operator and all occupants involved				26 27 28 29 30 31 32 33		13													
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility				Operator/Non-Motorist See Above --- --- ---		10													
Operator/Non-Motorist																			

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    → Pedestrian

**Crash Diagram:**

Cherry Street

Upham Street

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

Indicate North by Arrow

**Crash Narrative:**

Homeowners at #289 Cherry St., identified as Midge Connolly and Walter Devine called NPD to report that a delivery truck had driven on their property causing damage.

On arrival I observed significant damage to the property at #289 Cherry St along the Upham St side of the property. Damage included the lawn, bushes between the driveway and Upham St, a tree and barrels.

I then spoke with the operator of MV#1 who stated that while trying to back his truck into the driveway at #297 Cherry St, which is actually located on Upham St, he backed over the property at #289 Cherry St causing the damage listed above.

No injuries, no tows and I took a few photographs of the damage to the property at #289 Cherry St.

**Witnesses:**

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

**Property Damage:**

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property
CONNOLLY, MIDGE,	289 CHERRY ST NEWTON, MASSACHUSETTS 0		97	LAWN SHROB & TREE DAMAGE

**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

GEORGE M CLAFLIN      NEWTON POLICE DEPT      07/06/2021

Police Officer Name (Please Print)      Signature      ID/Badge #      Department      Precinct/Barracks      Date

CDP1 11 -24:00