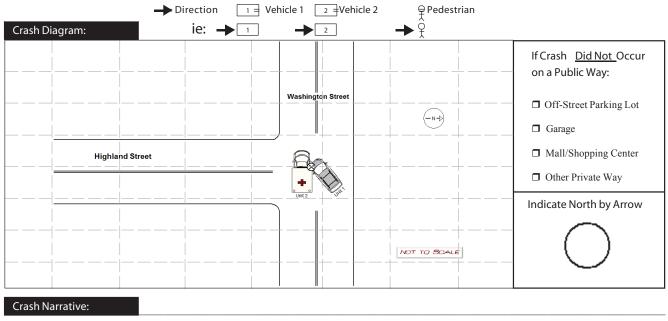
	Poli	ce Use Only		Commo	nwealt	h o	f Massa	achi	ıse	tts			RM	V Doc	umen	ıt Number	
	Date of Crash 07/14/2021	Time of Crash 14:34	City/1	Town N	Iotor V	⁷ ehi	cle Cra	sh		nber	Num		eed Lim		Si	tate Police ocal Police IBTA Police	N X
	07/14/2021	24HR					Report		2		0		ngitude_		O	ther:	
		AT INTER	RSECTION:	•	< LO	CAT	ION	>			NO	T A	INT	ERS	ECT	ION:	
	WES	Г WASHI	INGTON ST														
$1 \\ 1$	Route# Direc	tion	Name	of Roadway/Street		R	oute# Direction	on A	ldress	s #		N	lame of I	Roadw	ay/Stre	eet	1 ¹
	SOUTH HIGHLAND					Feet NSEW of • or								_			
	Route# Direc	tion N	Name of Intersec	ting Roadway/Street		ΞͰ					Mile	Marke	•		Е	xit Number	_
			Also at Int	ersection with		-	Feet [1	NSE	W 0	of	Rout	e#	Intersec	ting R	oadwa	y/Street	- 1
2 1	Pout # Direction Name of Internation Developer					Feet N S E W of									4		
3	Route# Direction Name of Intersecting Roadway/Street												La	ndmarl	K		┥
	XVehicle1	1_#Occupants	Hit/Ru	n Moped	Case Nur	nber		2	10000	0510							
	License#		St_ ¹		R	Reg# 7	65RL2				_Reg	Гуре_Р	AN	R	eg Stat		
	Sex_F Lic.	Class D 18 1	Lic. Restricti			/eh Yea	ar 2013	Ve	h Mal	ке_СН	RYSL	ER		_Veh (Config	g. 20	
4	Operator WA	ITZ	JANET First	Endors	sment C	Owner _	(Same as ope	rator)						Mic			- 1
3	Address 315 H	IIGHLAND AV	E First	Midd										Mic	idit.		. -
	City NEWTO	N		State MA Zip 0246		Address State Zip									_		
	Insurance Com	pany_ARBELLA				/ehicle	Action Prior to	Crash		4 21	.]	Damag	ged Area	Code	(Circ	le Up to Thre	ee)
5 1	Vehicle Travel	Direction: N	X E W Re	sponding to Emerger	ncy?N E	Event Sequence 1 22 22 22 22 3 4											
1	Citation # (If I	ssued)			N	Aost H	armful Event	23						$\langle $	- 1	10 Undercarri	iage
	Violation	1: ChSec	Violati	on 2: ChSec_	Г	Oriver (ا Contributing Co	ode	19 2	4	24					11 Totaled	
⁶ 1	Violation	3: ChSec	Violati	on 4: ChSec_	U	Underride/Override 25 Towed N 6											
			ator and all occ	cupants involved		26 27 28 29 30 31 32 33 Seat Safety Airbag Airbag Eject Trap Injury Transp.							1				
	Name (Last Fir Operator	st Middle)		Addr See Ab			Age/DOB	Sex	Pos. S	system !	Status S	vitch Co	de Code	\$tatus 10	Code ¹	Medical Facili	1 1
	1									-				10			
-																	
3	Please Select C of the Followi		2 <u>2</u> #Occupa	nnts Non-Moto	rist A Type	14	Action	Loc	ation	1	Co	ndition	17		Hit/Ru	un Mop	ed
	License#		St		R	Reg # 7715 Reg Type AMN Reg State M						te MA	_				
	Sex_M_ Lic.	Class D 18 1	Lic. Restricti			Veh Year 2021 Veh Make FORD Veh Config. 1						g. 20					
8 1	Operator MC	MAHON	SHANE First	Endors	C	Owner FALLON AMBULAN(_			
	Address 111 B	ROOK RD			A	Address 111 BROOK ROAD								-			
	City QUINCY State MA Zip 02169					City QUINCY State MA Zip 02169							-				
	Insurance Com	pany_ARBELLA			\	/ehicle	Action Prior to	Crash		1 21		Damag	_		(Circ	le Up to Thre	ee)
	Vehicle Travel Direction: N S E X Responding to Emergency? Y Citation # (If Issued)					Event Sequence 1 22 22 22 2 2 4											
						Most Harmful Event 1 23 10 Undercarriage 5 11 Totaled							iage				
	Violation 1: Ch Sec Violation 2: Ch Sec Violation 3: Ch Sec Violation 4: Ch Sec						Driver Contributing Code 1 24 24										
							Underride/Override										
	Please fill out for operator and all occupants involved								26 Seat	27 Safety	28 Airbag A	29 Eje	30 31 Frap	32 Injury	33 Transp.		
	Name (Last Fi Operator/	rst Middle) Non-Motorist		See Ab			Age/DOB	Sex	Pos.		Status S	witch C O	ode Code 0	Status 10	Code 1	Medical Facil	ity
	VARGUS, AL	ANNAH		11 BROOK RD				F	11	99		1 0	0	10	1		
			Ç	QUINCY, MA 02169						-							\dashv
							I	1						1	1	1	



On Wednesday July 14th, 2021 at approximately 1434 hours I responded to the back of the police station for a report of a motor vehicle accident involving a Newton Fallon Ambulance. At the time of the accident the weather was sunny and the road surface was dry. Washington Street and Highland Street are owned and maintained by the City of Newton.

Upon arrival I spoke with detail officer A. Boudreau who stated he was directing traffic on Washington Street in the area of Highland Street and had the westbound traffic on Washington Street stopped as a Newton Fallon Ambulance was passing with its lights and sirens on. Detail officer Boudreau stated he stopped MA REG 765RL2, a 2013 Chrysler town van so the ambulance could get by and as the ambulance went to pass the vehicle on the left the Chrysler van proceeded to attempt to take a left turn onto Highland Street and struck the

(Continued on next page)											
Witnesses:											
Name (Last, First, Middle)		Address				Phone #	‡	Statement			
Property Damage:											
Owner (Last, First, Middle)	Address		Phone #	34-Type	Desci	ription of Damag	ged Property				
Truck and Bus Information:	Registration #		(From Vehic	le Section)				25			
Truck and Bus Information: Carrier Name			(From Vehic	ele Section)		Carrier Issu	uing Authority Coo	35 de			
								le			
Carrier Name			City			St	Zip	le			
Carrier Name Address US DOT #:	State Number		City			St	Zip	de			
Carrier Name Address US DOT #:	State Numbers Vehicle Weight	38	City Issuing State	ICC #:		St	Zip	de			
Carrier NameAddress	State Numbers Vehicle Weight	38	City Issuing State	ICC #:		St	Zip	de			
Carrier Name	State Numbers Vehicle WeightReg Type	Reg State	City Issuing State	ICC#: Tra	ailer L	Stength 39	Zip Interstate	de			

→	Direction 1	Vehicle 1 2	≠Vehicle 2	Pedestr	ian		
Crash Diagram:	ie: → 🛚 1	2	□ →	Ŷ			
						Crash <u>Did Not</u> C n a Public Way:	Occur
				- — 🗐		Off-Street Parking	g Lot
						1 Garage	
	i i	į	İ	į		Mall/Shopping Ce	enter
				- — — 🕂		Other Private Way	
					In	dicate North by A	rrow
	- — — — - — — — —		 -	+		\bigcup	
Crash Narrative:							
ambulance on its passenger patient to NWH. Detail off:							ng a
(\$76373427) to pull into the	he parking lot	of the police	e station and	wait for	an officer t	o file a	
report. The ambulance was	advised to res	spond to the p	police station	after t	ransport. No	injuries were	
reported.							
I spoke with Janet who sta	ted she was att	empting to to	ake a left tur	n onto H	ighland Stree	et and was stor	oped by
an officer. She stated she	thought the of	ficer waved	her through so	she pro	ceeded to tak	e the left tu	rn and
struck the ambulance as i	t passed her. H	Her vehicle h	ad minor front	end dam	age and she r	eported no in	juries.
The operator of the ambular	nce arrived sho	ortly after a	nd was identif	ied as S	hane McMahon	(S249990773)	
(Continued or	n next page)						
Witnesses:							
Name (Last, First, Middle)		Address			Phon	e #	Statement
Property Damage:							
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Dar	maged Property	
				,,	•		
Truck and Bus Information:	Registration #		(From Vehi				35
Carrier Name					Carrier I	ssuing Authority Cod	e
Address			City		St	Zip	26
US DOT #:	State Number		Issuing State	ICC #:_		Interstate	36
Cargo Body Type Code Gros	s Vehicle Weight	38			2	0	
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tra	ailer Length	9	
Hazmat Information:	41						42
Placard Material 1 digit #	Material Na	ame		Material 4 o	ligit #	Release code	
ANDREA M FERGUSON			NEWTO	N POLICE DEPARTA		07/15/20	121

ID/Badge #

Signature

Department

Precinct/Barracks

Date

Police Officer Name (Please Print)

-	→ Direction	1 = Vehicle 1	2_≢Vehicle 2	Pedestria	n	
Crash Diagram:	ie: →□	1 -	2	→ Ŷ		
					If Crash <u>Did Not</u> on a Public Way:	Occur
					— ☐ Off-Street Parkin	ıg Lot
					Garage	
			į		☐ Mall/Shopping C	Center
			+		— — — ☐ Other Private Wa	
		 -	+		Indicate North by A	
					marcate Notaris,	
		<u> </u>	-	+-		
Crash Narrative: He stated he was transport	ting a pationt	to the hearit	al and was +	ravoling was	thound on Washington Str	root An
officer had the traffic st					_	
take a left and struck the						
the officer who advised h	im to continue	to transport	the patient	and respond	back to the police stati	on after
to file a report. No injur	ries were repor	rted. Pictures	of both veh	icles were t	taken and submitted to the	ne IT
Bureau.						
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage: Owner (Last, First, Middle)	Address		Phone #	34-Type D	Description of Damaged Property	
owner (East, First, Middle)	/ datess		THORE #	311ypc D	escription of burnagea (Toperty	
Truck and Bus Information:	Registration #			ehicle Section)		35
Carrier Name					Carrier Issuing Authority Co	de
Address			City		St Zip	26
US DOT #:	_ State Number	38	Issuing State	ICC #:	Interstate	36
Cargo Body Type Code 37 Gro	oss Vehicle Weight	38			20	
Trailer Reg #:	Reg Type	Reg State	Reg Year_	Traile	er Length 39	
Hazmat Information:	A1					42
Placard 40 Material 1 digit	# Material 1	Name		Material 4 dig	git # Release code	42
ANDREA M FERGUSON			NE	WTON POLICE DEPARTM	07/15/2	2021

CDP1 11 ·24·00

Police Officer Name (Please Print)