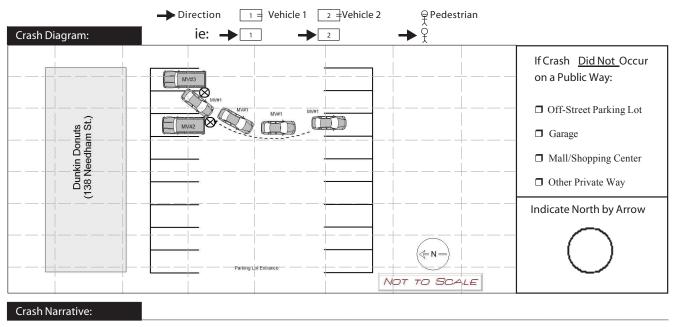
	Poli	ce Use Only		Commonv	wealth	of Massa	chus	etts			RMV	/ Docur	ment Number	
	Date of Crash 07/24/2021	Time of Crash 09:09	City/To	wn <b>Mo</b>	tor Ve	hicle Cra	$\mathbf{sh} \begin{bmatrix} \mathbf{N} \\ \mathbf{v} \end{bmatrix}$	Number Vehicles	Numb		ed Limi itude		State Police Local Police MBTA Police	<u> </u>
	07/24/2021	24HR			<b>Police</b>	Report		3	0		igitude_		Other:	e 🔲
		AT INTER	RSECTION:	<	LOCA	ATION :	>		NO	ГАТ	INTI	ERSE	CTION:	
				NORTH 138 NEEDHAM ST										
1 [	Route# Direc	tion		Roadway/Street		Route# Direction	n Addr	ess#	-	Na	ame of R	Roadway	/Street	_
_				At		Feet NSEW of or								
	Route# Direc	tion N	Name of Intersectin		Mile Marker Exit Number									
			Also at Inters	section with		Feet N	SEW	of	Route	#	Intersec	ting Roa	dway/Street	_
1				Feet NSEW of										
	Route# Direc	tion	Name of Intersec	eting Roadway/Street							Laı	ndmark		
3	XVehicle1	1_#Occupants	Hit/Run	Moped	Case Numbe	r	2100	0000543						
	License#		St MA	A DOB/Age	Reg	# 88R330			Reg T	vpe PA	N	Reg	State MA	
	Sex F Lic.	Class D 18 1		19 CDV		Year 2015	Veh M	lake HY					20	
1		PRADINE		Endorsmen	ıt.	er (Same as oper			First					_
1	Address 800 W	VEST ST (apt. 31	First <b>112)</b>	Middle								Middle		_
	City BRAINT	REE	Sta	te_MA Zip_02184	Address State State							Zip		
	Insurance Com		MUTUAL INSUR			Valida Astina Primata Const. 21 Damaged Area Code: (Circle Up to								
,	Vehicle Travel	Direction: X	S E W Resp	onding to Emergency?	N Even									
2		ssued)				: Harmful Event	23				9	/  `	10 Undercar	rriage
				2: ChSec	_ Drive	L er Contributing Co		24	24 (1)	•		<b>\</b>	11 Totaled	
1	Violation	3: ChSec	c Violation	4: ChSec	_ Unde	Underride/Override 25 Towed Y 8 7 6								
	Please fill out for operator and all occupants involved						2 Seat		28 Airbag Air Status Swi	29 30 pag Ejec	0 31 Trap e Code	32 Injury Tra	33 ansp.	
	Name (Last Fir Operator	st Middle)		Address See Above		Age/DOB	Sex Pos.		Status Swi		e Code	Status Co	ode Medical Fac	ility
	*													
7														
1	Please Select C of the Followi		e2 1_#Occupant	s Non-Motorist A	A Type	14 Action 1	5 Locatio	on	Cone	dition	17	Hi	it/Run Mo	ped
	License#		St MA	A DOB/Age	Reg	# <b>19079</b>			Reg T	<sub>me</sub> PA	R	Reg	State_MA	
	License # St DOB/Age St DOB/Age St M Lic. Class D Lic. Restrictions 1 CDL					Veh Year 2016 Veh Make VOLVO Veh Config.						20	_	
3	Operator SULLIVAN JOHN G  Endorsment					Owner (Same as operator)								
99		Last CHESTNUT ST	First (apt. 21)	Middle		Last			First			Middle		_
	City NEWTON State MA Zip 02464					Address  City State Zip								
	Insurance Company COMMERCE INSURANCE COMPANY					Damaged Area Code: (Circle Un to Three)								rree)
	Vehicle Travel Direction:   X   S   E   W   Responding to Emergency? N					t Sequence 2 2	2 22	22	<b>22</b> 2		3		<b>Q</b>	
	Citation # (If I	[24]		: Harmful Event	23					A	10 Undercar	rriage		
	Violation 1: Ch Sec Violation 2: Ch Sec					Driver Contributing Code 1 24 1 24 1								
	Violation 1: Ch Sec Violation 4: Ch Sec					Underride/Override  Towed N  8  7								
				occupants involved			20 Seat			29 30 Dag Ejec	) 31 t Trap	32 Injury Tra	33 ansp.	$\dashv$
	Name (Last Fi	rst Middle) Non-Motorist		Address See Above		Age/DOB	Sex Pos	s. System	Status Sw	ritch Co	de Code	Status C	Code Medical Fac	cility
	Орегают	14011-1410101181		See Above				99	± 95	, 0	U	10 1	•	$\blacksquare$
								-		+				$\blacksquare$

	ice Use Only		Commonweal									nent Numb	
Date of Crash 07/24/2021	Time of Crash 09:09	City/Town NEWTON	MIOTOI			sh	Number Vehicles		Latitu	ıde		State Police Local Police MBTA Police	ce ice Xi
	24HR				Report		3	0		itude_		Other:	
	AT INTER	RSECTION:	< L	OCAT	ION	>		NOT	ATI	INTE	ERSE	CTION:	
Route# Direc	ction	Name of R	oadway/Street	R	Route# Direction	on Add	ress #		Nan	ne of R	oadway/	Street	
		TV	Feet NSEW of or Exit Number										
Route# Dire	ction N	Name of Intersecting			Feet 1	N S E V	V of	WITTE IV	iaikei			EXIL NUME	ber
		Also at Interse	ction with	-	_		_	Route#	In	ntersect	ting Roa	dway/Street	
Route# Direc	etion	ng Roadway/Street	Feet N S E W of										
YVahiala 2	1_#Occupants	Landmark											
Venicies		Hit/Run	Moped Case N	lumber			0000543						
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Sex_F Lic.	Class	Lic. Restrictions	CDL Endorsment		ar_2014		Make_JE	EP 			Veh Co	nfig. 2	
Operator CA		CHRISTINE	Middle		(Same as ope			First			Middle		
1	AVILION COUR		PI opens		3								
City CRANS		N PROPERTY AN	RI Zip 02920		A atian Daian to		2					Zip Circle Up to	
1					Action Prior to	22 22 22	22	<b>22</b> 2	umgeu	3	20 <b></b> (0	4	111100)
	Issued)		nding to Emergency? N		Sequence 2 armful Event	23				$\Box$	$\overline{A}$	10 Unde	rcarriage
`	/		: ChSec		Contributing Co		24 1	24	←	9		11 Total	ed
1			: Ch Sec		de/Override	25	Towe			O	)	0	
Please fill out for operator and all occupants involved					de/ o verride	Se		28 2 Airbag Airb	9 30 Eject	31 Trap Code	32 Injury Tra	33 insp.	
Name (Last Fin			Address See Above		Age/DOB	Sex Po	s. System	Status Swite	ch Code		status Co	ode Medical	Facility
							),	2 ))			10 1		
Please Select ( of the Followi	Vehicle	e# Occupants	Non-Motorist A Type	14	Action	Locat	ion	Cond	ition	17	Hi	t/Run	Moped
License#		St	_DOB/Age	Reg#				Reg Tv	pe		Reg	State	
Sex Lic.	18 1		19 CDL		ar								20
Operator		First	Endorsment	Owner	Las			First			Middle		
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City													
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Citation # (If I	Citation # (If Issued) Mos					Most Harmful Event 23 10 Undercarriage 5 11 Totaled							
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	on 3: ChS	Underri	de/Override	25	Towed			/		6			
Pl Name (Last F		operator and all o	ccupants involved Address		Age/DOB	Sex P	26 27 at Safety os. System	28 29 Airbag Airba Status Swi	g Eject tch Code	Trap I Code		33 insp. ode Medical	Facility
Operator	/Non-Motorist		See Above										



On 7/24/21, Newton Police were dispatched to the Dunkin Donuts parking lot (138 Needham St.) for a motor vehicle accident.

Upon arrival, MV#1 was observed wedged, facing southbound inside the parking space between MV#2 and MV#3 with heavy front end damage. MV#2 was observed with damage to its rear end, while MV#3 had apparent damage to its driver side passenger door and side panel. Both MV#2 and MV#3 were parked, unoccupied prior to the collision. The operator of MV#1 stated she was reversing out of her parking space across the parking lot, when her brakes malfunctioned causing her to strike MV#2 before striking MV#3. The operator of MV#1 reported no injuries.

Damage to all vehicles were consistent with MV#1 reversing into MV#2's rear end before striking MV#3's driver

(Continued on next page)

Witnesses:							
Name (Last, First, Middle)		Address				Phone #	Statement
Property Damage:							
Owner (Last, First, Middle)	Address		Phone #	34-Type	Desc	cription of Damaged Property	
Truck and Bus Information:	Registration #		(From Vehic	ele Section)			25
Carrier Name						Carrier Issuing Authority Co	de 35
Address			City			St Zip	
US DOT #:	State Number		Issuing State	ICC #:_		Interstate	36
Cargo Body Type Code 37 Gross	s Vehicle Weight	38				39	
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr	ailer I		
Hazmat Information:							
Placard 40 Material 1 digit #	41 Material Na	me		Material 4	digit #	‡ Release code	42

DANIEL SOHN		:	NEWTON POLICE DEPARTM		07/24/2021
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date

•	Direction 1 =	Vehicle 1	2 #Vehicle 2	Pedestrian		
Crash Diagram:	ie: 🕕 🛚	→[	2	<b>→</b> ♀		
					If Crash Did Not (on a Public Way:	
					☐ Garage	g Lot
			į	j	☐ Mall/Shopping Co	enter
					☐ Other Private Way	у
					Indicate North by A	irrow
Crash Narrative:						
side.						
MV#1 was towed away by To	ody's Towing, whil	Le MV#2 and	MV#3 were ab	ole to be driv	en from the scene.	
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
rame (2034) i isq imaale)		71441.655			1 11011C #	Statement
David and a David and						
Property Damage:			DI #	24.7		
Owner (Last, First, Middle)	Address		Phone #	34-Type Des	cription of Damaged Property	
Truck and Bus Information:	Registration #		(From V	Pehicle Section)		25
Carrier Name					Carrier Issuing Authority Cod	35 le
Address			City		St Zip	
US DOT #:	State Number		Issuing State	ICC#:	Interstate	36
Cargo Body Type Code 37 Gr	ross Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Year	Trailer	Length 39	
Hazmat Information:						
Placard 40 Material 1 digi	t # 41 Material Nar	me		Material 4 digit	# Release code	42
DANIEL SOHN			NIT.	EWTON POLICE DEPARTM	07/24/2	021
Police Officer Name (Please Print)	Signature				Precinct/Barracks Date	

CDP1 11 ·24·00