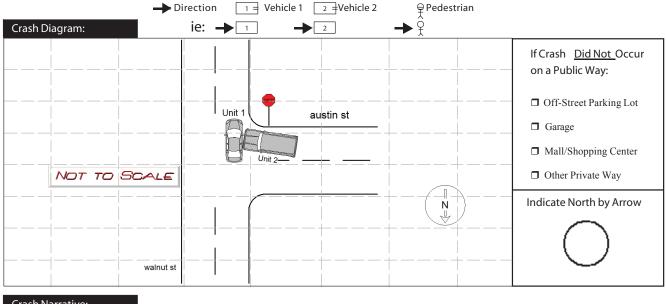
	Poli	ice Use Only		Common	wealth	of M	assa	ich	use	tts			RM	V Doc	umen	t Number	
	Date of Crash 08/01/2021	Time of Crash 14:36 24HR	NEWTON	M(otor Ve Police			sh		nber icles	Numb Injure 0	d Lat	ed Lim itude _ ngitude_		St La M O	tate Police ocal Police IBTA Police ther:	Xi
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1	Route# Direc	tion	Name o	f Roadway/Street		Route#	Direction	n A	ddress	#		N	ame of I	Roadw	ay/Stre	eet	$ 2^1$
	SOUTH WALNUT ST Route# Direction Name of Intersecting Roadway/Street Also at Intersection with					Feet NSEW of or Exit Number								_ _			
														xit Number	_		
									Intersec	ntersecting Roadway/Street			- 1				
1	Route# Direc		Feet N S E W of									3					
3	[[V]		Landmark									┥ .					
	Vehicle1	2_#Occupants		– .	Case Numb	er		2	10000	0573							_
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⁴ 2	Operator LIU	Last	YU	Middle		ner (Same								Mic	idle		- 1
		AIR OAKS AVI		MA seaso		lress											
	City NEWTO		S	ate_MA _ Zip _02460	-					21						le Up to Thre	
5	Insurance Company GEICO Vehicle Travel Direction: NXEW Responding to Emergency? N					icle Action	2			22	22 2		cu Aica		4	ic op to Tille	
		ssued)		ponding to Emergency		nt Sequence st Harmful F	1	2:						\overline{A}		10 Undercarri	age
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	Please	fill out for opera		ipants involved							28 Lirbag Air	29 3 bag Ejec itch Coc	0 31	32 Injury	33 Transp.		1
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	7,7		N	EWTON, MA 02460													
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3	Please Select C of the Followi		2 <u>1</u> #Occupar	nts Non-Motorist	t A Type	Action	15	Loc	ation	1	Con	dition	17		Hit/Ru	ın Mop	ed
	License#		St M	A DOB/Age	- Reg	Reg # 911XR5					Reg Type PAN Reg State			_e MA			
	Sex_M Lic. Class D 18 18 Lic. Restrictions 19 CDL				Veh	WOMP !						20					
⁸ 2	Operator PARLAKGUL GUNES Endorsment Last First Middle					Owner ARRUDA ANAPAULA Last First Middle									_		
	Address 103 ATWOOD AVE				Add	Address 103 ATWOOD AVE											
	City NEWTON State MA Zip 02460					City NEWTON State MA Zip 02460							02460	-			
	Insurance Company GEICO					Vehicle Action Prior to Crash 2 Damaged Area Code: (Circle Up to Three)								e)			
	Vehicle Travel	Direction: N	S W Re	Responding to Emergency? N			Event Sequence 22 22 22 22 3 4							10 Undaragre	inga		
	Citation # (If Issued)					Most Harmful Event 1 23 10 Undercarriage 5 11 Totaled									age		
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	Name (Last Fi	rst Middle)	operator and al	l occupants involved	S	Age/	DOB	Sex		27 Safety A System	irbag Air Status S	bag Ejer	0 31 Trap de Code	Injury Status	Transp. Code	Medical Facil	ity
	Operator/	Non-Motorist		See Abov	e					1	4 4	0	0	10	1		
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Crash Narrative:

ON 8-1-21 AT APPROX. 1436HRS. WHILE WORKING N492 I TOOK A REPORT FOR MOTOR VEHICLE ACCIDENT. UPON ARRIVAL AT THE INTERSECTION OF AUSTIN AND WALNUT ST. I SPOKE TO THE OPERATOR OF VEHICLE #1. DRIVER STATES HE WAS TRAVELING S-BOUND ON WALNUT. WHILE DRIVING HE WAS HIT IN THE RIGHT SIDE BY VEHICLE #2 AS HE EXITED AUSTIN ST. DRIVER OF VEHICLE #2 STATES HE WAS STOPPED AT THE STOP SIGN ON AUSTIN ST WAITING TO MERGE ONTO WALNUT. HE STATES HE WAITED FOR A PEDESTRIAN WHO DECIDED TO NOT CROSS THE STREET. AS HE ENTERED ONTO WALNUT HE HIT VEHICLE #1. VEHICLE #1 HAD RIGHT SIDE DAMAGE. VEHICLE #2 HAD FRONT LEFT SIDE DAMAGE. ALL PARTIES REPORTED NO INJURIES. ALL PARTIES ADVISED TO CONTACT THEIR INSURANCE COMPANIES. CLEARED WITHOUT FURTHER INCIDENT. NEITHER VEHICLE WAS TOWED.

Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:						
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Damag	ged Property
Truck and Bus Information:	Registration #		(From Vehic	cle Section)		25
Truck and Bus Information: Carrier Name				cle Section)	Carrier Issu	ing Authority Code 35
					Carrier Issu	ing Authority Code
Carrier Name			_ City		St	zip
Carrier Name Address US DOT #:	State Number		_ City		St	zip
Carrier Name Address US DOT #:	State Numberss Vehicle Weight	38	_ City Issuing State	ICC#:_	St	zip
Carrier Name Address US DOT #: Cargo Body Type Code 37 Gross	State Numberss Vehicle Weight	38	_ City Issuing State	ICC#:_	St	zip

THOMAS P WALSH		NEWTON POLICE DEPARTM	08/01/2021		
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date