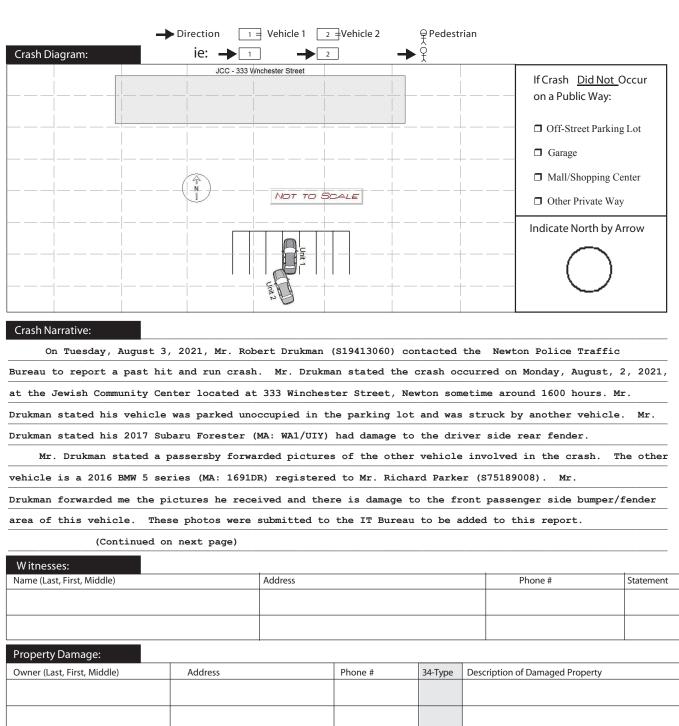
| Poli | ice Use Only | | Common | wealth | of Mass | achu | setts | 5 | | | | ment Number | |
|-----------------------------------|-----------------------------|----------------------|----------------------|-----------------|---|---------------|----------------------|-------------------------------|-------------------|--------------------------|-----------------------|---|----------|
| Date of Crash 08/02/2021 | Time of Crash 16:00 | City/Tow NEWTON | m Mo | tor Ve | hicle Cra | ısh | Number Vehicles | | | ed Limi tude | | State Police Local Police MBTA Police | X |
| 00/02/2021 | 24HR | NEWTON | | | Report | | 2 | 0 | | gitude_ | | Other: | e 🔟 |
| | AT INTER | SECTION: | < | LOCA | ATION | > | | NO | Г АТ | INTI | ERSE | CTION: | |
| | | | | | NORTI | н 333 | | NAHA | NTON | ST | | | |
| Route# Direc | tion | Name of I | Loadway/Street | | Route# Directi | on Ad | dress # | | Na | me of R | Roadway | /Street | _ |
| - | | Α | t | | Feet | N S E | w of | | • | | or | | |
| Route# Direc | etion N | Jame of Intersecting | Roadway/Street | | | | | Mile | Marker | | | Exit Number | |
| | | Also at Interse | ection with | | Feet | N S E | W of | Route | _# — | Intersec | ting Roa | idway/Street | _ |
| 7 | | | | | Feet [| N S E | W of | | | | 8 | | |
| Route# Direc | tion | Name of Intersect | ing Roadway/Street | | | | | | | Lar | ndmark | | |
| XVehicle1 | #Occupants | Hit/Run | Moped | Case Numbe | er | 21 | .00000574 | Į | | | | | |
| License# | | St | DOB/Age | Reg | # WA1/UIY | | | Reg T | vpe PA | s | Reg | State MA | |
| Sex Lic. | 18 18 | | 19 CDL | Veh | Year 2017 | | Make S | | | | | 20 |) |
| | Last | | Endorsmer | nt | er DRUKMAN | | | RT | | | | | - |
| | | | Middle | | ress 23 LOCKSL | | | First | | | Middle | e | _ |
| | | | eZip | | NEWTON | | | | | State | MA | Zip_02459 | _ |
| | pany COMMER | | | | cle Action Prior t | o Crash | 2 | | | | | Circle Up to T | hree) |
| \dashv | | | nding to Emergency? | | | 22 22 | 22 | 22 2 | | 3 | | 4 | |
| | ssued) | | | | t Harmful Event | 23 | | | | M | Λ` | 10 Underca | |
| | | | 2: ChSec | | er Contributing C | | 24 | 24 | — | 9 | | 5 11 Totaled | |
| | | | l: Ch Sec | | erride/Override | 25 | | | | 7 | | 6 | |
| | | ntor and all occup | | | | | | 28 Airbag Air Status Sw | 29 30 bag Ejec |) 31 t Trap e Code | 32 Injury Tra | 33 ansp. | |
| Name (Last Fir | st Middle) | | Address See Above | <u> </u> | Age/DOB | Sex P | os. System | Status Sw | tch Code | e Code | Status Co | ode Medical Fa | cility |
| Орегию | | | 500 1100 10 | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Please Select (of the Followi | IX Vahida | 2 1_#Occupants | Non-Motorist | A Type | 14 Action | Loca | ition | 16 Con | dition | 17 | X Hi | it/Run Mo | oped |
| License# | | St MA | | Reg | # 1691DR | | | Reg T | ype_PA | N | Reg | State MA | _] |
| Sex_M_ Lic. | Class D 18 18 | Lic. Restrictions | | | Veh Year 2016 Veh Make BMW Veh Config. 20 | | | | | | | | |
| Operator PAI | RKER | RICHARD First | Endorsmer | | er (Same as ope | rator) | | First | | | Middle | | _ |
| Address 164 I | AGRANGE STR | REET | Wilde | Add | ress | | | | | | | | _ |
| City CHESTN | IUT HILL | Stat | e_MA Zip_02467_ | City | | | | | | State | : | Zip | _ |
| Insurance Com | pany ARBELLA | | | Vehi | cle Action Prior t | o Crash | 99 2 | 21 | Damage | ed Area | Code: (| Circle Up to T | hree) |
| Vehicle Travel | Direction: N | S E W Resp | onding to Emergency | ? <u>N</u> Ever | nt Sequence 2 | 22 22 | 22 | <u></u> 6 | | 3 | | 4 | |
| Citation # (If I | ssued) 089044AB | <u> </u> | | Mos | t Harmful Event | 2 23 | | | _ | 9 | $\langle \rangle$ | 10 Underca 5 11 Totaled | ٠ ١ |
| Violatio | n 1: Ch <u>90/24/C</u> Se | ec Violation | 2: ChSec | Driv | er Contributing C | ode 1 | 9 24 | 24 | • | ľΤ | \ | | |
| Violatio | n 3: ChSe | ec Violation | 4: ChSec | Und | erride/Override | 25 | Tower | 8 1 N | | 7 | | 6 | |
| | | operator and all | occupants involved | | | | 26 27 Seat Safety | 28 Airbag Air | 29 30 bag Ejec | 31 Trap | | 33 ansp. | .,. |
| Name (Last Fi | rst Middle) Non-Motorist | | Address See Above | | Age/DOB | Sex | Pos. System | n Status Sv | O 0 | de Code 0 | 10 1 | N/A | acılıty |
| 1 | | | | | | | - | | + | + | | | |
| | | | | | | ++ | | ++ | + | | | | |
| | | | | | | $\perp \perp$ | | | \perp | | | | |
| | | | | | | | | | | | | | |



Truck and Bus Information: Registration #_____(From Vehicle Section) 35 Carrier Name _ _____ Carrier Issuing Authority Code Address___ US DOT #: _____ State Number _____ Issuing State _____ ICC #:____ Cargo Body Type Code Gross Vehicle Weight Reg Type_____ Reg State ____ Reg Year___ Trailer Length Trailer Reg #: Hazmat Information: Material Name_____ Material 4 digit # _____ Release code Placard Material 1 digit #

| MICHAEL R GAUDET | | | NEWTON POLICE DEPARTM | | 08/03/2021 |
|------------------------------------|-----------|------------|-----------------------|-------------------|------------|
| Police Officer Name (Please Print) | Signature | ID/Badge # | Department | Precinct/Barracks | Date |
| CDD1 11 2400 | | | | | |

| Crash Diagram: | ie: → 1 | <u></u> →[| 2 | →Ŷ | | |
|-----------------------------|----------------------|---------------------------------------|--------------------|------------------|---|-------------|
| | | | | | If Crash <u>Did No</u> on a Public Way | |
| | | | <u> </u> | | Off-Street Pari | rking Lot |
| | | | | | ☐ Garage | |
| | | | \vdash $ +$ $+$ | | ☐ Mall/Shoppin | -~ Conter |
| | | | <u> </u> | | Other Private | |
| | | | <u> </u> | | | |
| | | 1 | | į | Indicate North b | y Arrow |
| | | | | | | ۱ |
| | · — — — — - | | ++ | + | \ | ノート |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| Crash Narrative: | | | | | | |
| I spoke with Mr. P | arker via telepho | ne. Mr. Pa | rker stated h | e was opera | ating his vehicle in the | e parking |
| lot of the JCC at the ti | me and date of the | e crash. | Mr. Parker a | cknowledged | d his vehicle made conta | act with |
| another vehicle while h | e was attempting | to park. M | ir Parker stat | ed after ma | king contact with the | other |
| vehicle, he exited that | parking spot beca | use it was | too tight and | parked in | another parking spot. | Mr. Parker |
| stated there is no new d | lamage to his vehi | cle and the | damage I des | cribed in t | he pictures Mr. Drukmar | n forwarded |
| to me was old. I advis | ed Mr. Parker tha | t I was cit | ing him for l | eaving the | scene of property damage | ge. |
| Mr. Parker admitted | to crashing into | MV1 as he | was attempting | g to park i | in the JCC parking lot. | Mr. |
| Parker knowingly made co | ntact with another | r vehicle a | nd made no ef | fort to exc | hange information with | the owner |
| of the vehicle he crashe | d into. The pict | ures submit | ted by Mr. Dr | ukman of hi | s vehicle show obvious | fresh |
| (Continued | d on next page) | | | | | |
| Witnesses: | | <u> </u> | | | | |
| Name (Last, First, Middle) | | Address | | | Phone # | Statement |
| | | | | | | |
| | | | | | | |
| Property Damage: | | | | | | |
| Owner (Last, First, Middle) | Address | | Phone # | 34-Type D | Description of Damaged Property | |
| | | | | | | |
| | | | + | | | |
| | | | | | | |
| Truck and Bus Information: | Registration # | | (From V | Vehicle Section) | | 35 |
| Carrier Name | | | | | Carrier Issuing Authority | |
| Address | | | _ City | | St Zip | |
| US DOT #: | | | Issuing State | ICC #: | Interstate | 36 |
| Cargo Body Type Code 37 | Gross Vehicle Weight | 38 | | | | |
| Trailer Reg #: | Reg Type | Reg State _ | Reg Year | Trai | iler Length | |
| Hazmat Information: | | | | | | |
| Placard 40 Material 1 dig | git # 41 Material Na | ame | | Material 4 dig | igit# Release code | de 42 |

1 = Vehicle 1 2 = Vehicle 2

 $\underset{T}{\rightleftharpoons} Pedestrian$

Direction

| - | → Direction | 1 Vehicle 1 | 2 =Vehicle 2 | Pedestri | an | |
|---------------------------------------|---------------------|---------------|-----------------|---------------------|--|-----------|
| Crash Diagram: | ie: →□ | 1 | 2 | ▶ ♀ | | |
| | | | | | If Crash <u>Did Not</u> on a Public Way: | Occur |
| | | | <u> </u> | <u></u> | Off-Street Parkin | g Lot |
| | | | | | ☐ Garage | |
| | | _ | | | ☐ Mall/Shopping C | enter |
| | | | | | | |
| | | _ | | | Other Private Wa | |
| | | | | | Indicate North by A | Arrow |
| | | _ | ++ | | | |
| | _ | _ _ | | | | |
| | | | | | | |
| Crash Narrative: | | | | | | |
| damage as a result of a c | rash. After c | completing my | investigation | , Mr. Parke | er will be mailed Massachu | setts |
| Uniform Citation 089044AB | for Chapter 9 | 0, Section 24 | (Leaving the | Scene of B | Property Damage). | |
| The public does hav | e a right of a | ccess to the | parking lot for | or the Jewi | ish Community Center locat | ed at |
| 333 Winchester Street, Ne | wton. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Witnesses: | | 1 | | | | 1- |
| 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: | D | | | 1:1 0 :) | | |
| Carrier Name | _ = | | | ehicle Section) | Carrier Issuing Authority Coo | 35 de |
| | | | | | St Zip | |
| | | | | | | 36 |
| US DOT #: Cargo Body Type Code 37 Gr | | 38 | Issuing State | ICC#: | Interstate | |
| | ross Vehicle Weight | | | | 39 | |
| Trailer Reg #: | Reg Type | Reg State _ | Reg Year_ | Tra | iler Length | |
| Hazmat Information: | 41 | | | | | 42 |
| Placard Material 1 digit | # Material | Name | | Material 4 d | igit # Release code | |
| | | | | | | |
| MICHAEL R GAUDET | | | NEV | VTON POLICE DEPARTM | 08/03/2 | 2021 |

ID/Badge #

Department

Signature

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)