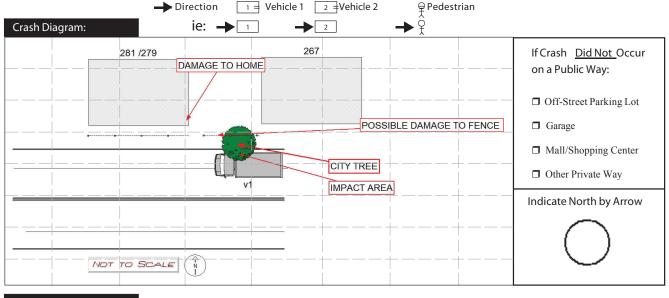
	Poli	ice Use Only		Commonweal	lth o	f Massa	achı	isetts	3		RMV	/ Docun	ient Number	
	Date of Crash 08/16/2021	Time of Crasl 09:16	NEWTON	MIOTOI		icle Cra Report	sh	Number Vehicles 1		ed Lat	ed Limi itude igitude_		State Police Local Police MBTA Police Other:	XI D
			RSECTION:		OCAT		>	Į	NO				CTION:	⇉
						WEST	26	7	WAT	ERTOW	N ST			\dashv
	Route# Direc	tion	Name of Ro	padway/Street	R	Route# Direction	on Ac	ldress #	-	Na	ame of R	Roadway/	Street	_
			At			Feet 1	N S E	W of		•	·	or		_
	Route# Direc	ction	Name of Intersecting I	Roadway/Street	<u> </u>				Mile	Marker			Exit Number	-
			Also at Intersec	tion with		Feet []	N S E	of of	Rout	e#	Intersec	ting Road	lway/Street	- -
	Route# Direc	tion	Name of Intersection	ng Roadway/Street		Feet 1	N S E	W of						_
			T	<u> </u>							Lar	ndmark		\dashv
	XVehicle1	_1_#Occupant	Hit/Run	Moped Case N	lumber		2	100000609)					
	License#		St CT	DOB/Age	Reg#_	3A86902			Reg T	ype_CC	N	Reg S	State CT	_
	Sex_M Lic.	Class D 18	Lic. Restrictions	1 CDLEndorsment	Veh Ye	ar_2022	Ve	h Make_F	REIGHT			Veh Cor	nfig. 6 20	
L		IPHARACKSA Last		Middle		RYDER TRU	ŧ		First			Middle		-
•		RADLEY AVEN				S 99 MURPHY	RD							-
	City HAMDE		State	*	City H	ARTFORD							Zip <u>06114</u>	-
	Insurance Com	npany PROGRE	ESSIVE NORTHERN	INSURANCE CO		Action Prior to		1		_	_		Circle Up to Thr	ee)
	Vehicle Travel	Direction: N	Respon	ding to Emergency?_N	Event S	Sequence 21			22				4	
	Citation # (If I	,			Most H	Iarmful Event	21 23	24	24	—	9	$(\mid \mid \mid$	10 Undercarr 5 11 Totaled	lage
	1			ChSec		Contributing Co	ode 25			3	7		6	
		fill out for ope	Underri	ide/Override		Towe		29 30	0 31	32	33	_		
	Name (Last Fir	rst Middle)		Address		Age/DOB	Sex	26 27 Seat Safety Pos. System	1 Status Sv	vitch Cod	0 31 Trap e Code	32 Injury Tra Status Co	33 nsp. de Medical Facil	lity
	Operator			See Above				99	4 9	9 0	0	10 1		
l	Please Select (of the Followi	I Vehic	le# Occupants	Non-Motorist A Type	14	Action 1	Loc	ation	16 Cor	ndition	17	Hit	/Run Mop	oed
	License#StDOB/Age					Reg #							_	
	Sex Lic.		Lic. Restrictions	CDLEndorsment	Veh Ye	ar	Ve	h Make				Veh Cor		
	Operator	Last	First	Middle	Owner	Las	t		First			Middle		-
	Address				Address	S								-
	City		State	Zip	City								Zip	-
	Insurance Com										ee)			
	Vehicle Travel	Direction: N	Event Sequence 22 22 22 22 2 3 4 10 Undercarriage							riage				
	Citation # (If I	7			Most Harmful Eve			Event 23 1 24 24 1				5 11 Totaled		
				2: ChSec		Contributing Co	ode 25]		3	7		6	
			Sec Violation 4 or operator and all or	F: ChSec	Underri	ide/Override		Towe		29 30) 31	32	33	_
	Name (Last Fi	irst Middle)	1	Address		Age/DOB	Sex	Pos. Syste	28 Airbag Ai m Status S	rbag Ejec witch Co	O 31 Trap de Code	Injury Tra	nsp. ode Medical Faci	ility
	Operator/	Non-Motorist		See Above						\perp				\dashv
														_



Crash Narrative:

On Wednesday August 16, 2021 at approx. 0916 hours I responded to the area of 267 Watertown Street for a report of a motor vehicle crash with a City tree and property damage.

Upon arrival I met with the operator of the truck, Lucky Thipharacksa d.o.b. 10-8-84 of 25 Bradley Avenue

Hamdon CT., who works for MKN UNITED INC. 1039 STATE STREET SUITE 203 BETTENDORF, I.A. 52722. He stated he

was traveling west on Watertown Street when the top right portion of the truck had impact with a City tree.

As a result of the impact, the tree took down Verizon cable wires, causing damage to the right side of the

house number 279/281 Watertown Street (gutters, masonry-brick, landscape, and possible other house

damage.

(Continued on next page)

Witnesses:			
Name (Last, First, Middle)	Address	Phone #	Statement
		<u> </u>	

Property Damage: Owner (Last, First, Middle) Address Phone # 34-Type Description of Damaged Property 1000 COMM AVE , CITY OF NEWTON, NEWTON,MASSACHUSETTS 0; 617-796-1000 281 WATERTOWN STREET NEWTON MASSACHUSETTS 0; 617-699-7009 PT DAMAGE GUTTERS, BRICK, LANDSCAPE

ZIGAREELI, I AOEA,	NEW TON, WASSACITUSET 15	0,	<i>,, , , , , , , , , ,</i>	z ou i zno,	, Bluert, Ern (Boein E	
Truck and Bus Information:	Registration # BA86902	(From Vehicle	e Section)		35	
Carrier Name MKN UNITED INC				_ Carrier Issuing Authority Code		
Address 1039 STATE STREET		City_BETTENDORF		St_IA	Zip_52722	
US DOT #: 3046102	State Number	Issuing State IOWA	ICC #:		_ Interstate 1 36	
Cargo Body Type Code 97 Gros	s Vehicle Weight 2 38			39		
Trailer Reg #:	Reg Type Reg State	Reg Year	Trailer Lengt			
Hazmat Information:						
Placard 40 Material 1 digit #	Material Name	I	Material 4 digit #		Release code 42	

ROCCO D MARINI 13963 NEWTON POLICE DEPARTM 08/16/2021

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

	Direction	1 =	Vehicle	1 2	Vehicle 2		Pedesti	rian		
Crash Diagram:	ie: →[1	-	2	!	→	7			
									If Crash <u>Did Not</u> O	Occur
		_ _							☐ Off-Street Parking	Lot
									☐ Garage	
	- — — — — -	-								
	- — — — -	_ _		_					☐ Mall/Shopping Ce	enter
									☐ Other Private Way	7
		-		-+					Indicate North by A	rrow
	- — — — -	_ -		-+						
		İ							()	
Crash Narrative:										
The resident at 267 Watert										
fence. I advised her if th	ere is damage	e to	contac	ct me	after tree	rei	moval an	d I w	ill add information to	the
report.										
Forestry was notified to r		ee,	the own	ner o	£ 279/281 V	late:	rtown St	reet	was notified of proces	ss and
report. Verizon was notifi	ed of wires.									
I conducted a post crash 1	evel one insp	pect	ion on	the	truck which	ıI	placed	Out	Of Service due to the	damage.
The driver was arrangement	s for the to	w. B	Below is	ins	pection fir	ndin	gs.			
VIOLATIONS										
(Continued o	n next page)									
Witnesses:										
Name (Last, First, Middle)			Address						Phone #	Statement
Property Damage:										
Owner (Last, First, Middle)	Address				Phone #		34-Type	Descrip	otion of Damaged Property	
, VERIZON,	,				1-800-837-4966		4	WIRES		
Truck and Bus Information:	Registration #				,		ele Section)			35
Carrier Name									Carrier Issuing Authority Code	e
Address					City				St Zip	
US DOT #:	State Number				Issuing State		ICC #:_		Interstate	36
Cargo Body Type Code 37 Gros	ss Vehicle Weight		38							
Trailer Reg #:	Reg Type		Reg St	ate	Reg Ye	ar	Tr	ailer Len	agth 39	
Hazmat Information:			_ 5							
Placard 40 Material 1 digit #	41 Materia	al Nan	ne				Material 4	digit#	Release code	42
ROCCO D MARINI				13963		NEWTON	N POLICE DEPART		08/16/20	121

ID/Badge #

Signature

Department

Precinct/Barracks

Date

Police Officer Name (Please Print)

	Direction [1 = Vehic	le 1 2	≠Vehicle 2	Pedestr	ian		
Crash Diagram:	ie: →[1	2	_	→ ♀			
							If Crash <u>Did Not</u> C on a Public Way:	Occur
							☐ Off-Street Parking	Lot
							☐ Garage	,
		_						
							☐ Mall/Shopping Ce	
							☐ Other Private Way	
							Indicate North by A	rrow
				+				
Crash Narrative:					1			
393.201A POST CRASH (4)	IPPER FRAME RA	II.S DAMAG	FD - SE	PARATED (OO	S)			
393.201A POST CRASH (3)								
393.201A POST CRASH (5)					-	OS)		
All parties advised of the								
						-		
W itnesses: Name (Last, First, Middle)		Addres	· c				Phone #	Statement
Nume (East, First, Wildele)		ridares					THORE #	Statement
Property Damage:								
Owner (Last, First, Middle)	Address			Phone #	34-Type	Description	of Damaged Property	
Truck and Bus Information:	Danistanti sa #			(France V	ahiala Cantinu)			
Carrier Name	Registration #				ehicle Section)	C	arrier Issuing Authority Code	35
							,	
Address								36
US DOT #: Cargo Body Type Code 37 G		38		_ Issuing State	ICC #:_		Interstate	
Cargo Body Type Code	ross Vehicle Weight						39	
Trailer Reg #:	Reg Type	Reg	State	Reg Year	Tra	ailer Length		
Hazmat Information:	41					'		421
Placard 40 Material 1 dig	it # Materia	l Name			Material 4 o	digit #	Release code	42
ROCCO D MARINI			13963	NE	WTON POLICE DEPARTS	N	08/16/20	021

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)