

Commonwealth of Massachusetts

Police Use Only			Motor Vehicle Crash Police Report				RMV Document Number				
Date of Crash 09/04/2021	Time of Crash 12:22 24HR	City/Town NEWTON	Number Vehicles 2	Number Injured 0	Speed Limit 5 Latitude Longitude	State Police Local Police MBTA Police Other:					
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:				
Route# Direction Name of Roadway/Street At			SOUTH 138 NEEDHAM ST Route# Direction Address # Name of Roadway/Street Feet N S E W of Mile Marker Exit Number				2 9				
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with			Feet N S E W of Route# Intersecting Roadway/Street				2 10				
Route# Direction Name of Intersecting Roadway/Street			Feet N S E W of Landmark				7 11				
<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 210000668		
License # --- St MA DOB/Age ---			Reg # 652SLD Reg Type PAN Reg State MA			Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsment			Veh Year 2010 Veh Make MERZ Veh Config. 1 20		
Operator TUZMAN VICTORIYA Last First Middle			Owner (Same as operator) Last First Middle			Address 102 ADELINE RD			Address		
City NEWTON State MA Zip 02459			City State Zip			Insurance Company SAFECO INS			Vehicle Action Prior to Crash 2 21 Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: N X E W Responding to Emergency? N			Event Sequence 1 22 22 22 22 2			Citation # (If Issued)			Most Harmful Event 1 23		
Violation 1: Ch Sec Violation 2: Ch Sec			Driver Contributing Code 1 24 24			Violation 3: Ch Sec Violation 4: Ch Sec			Underride/Override 25 Towed N		
Please fill out for operator and all occupants involved			Name (Last First Middle) Address Age/DOB Sex 26 Seat Pos. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code Medical Facility			Operator See Above			1 13		
Please Select One of the Following:			<input checked="" type="checkbox"/> Vehicle 2 1 #Occupants			<input type="checkbox"/> Non-Motorist A Type 14 Action 15 Location 16 Condition 17			<input type="checkbox"/> Hit/Run <input type="checkbox"/> Moped		
License # --- St RI DOB/Age ---			Reg # M86807 Reg Type CON Reg State MA			Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsment			Veh Year 2012 Veh Make SULI Veh Config. 6 20		
Operator GAFFNEY ADAM JAMES Last First Middle			Owner (Same as operator) Last First Middle			Address 74 HOLLIS (apt. 2F)			Address		
City WOONSOCKET State RI Zip 02895			City State Zip			Insurance Company SELF INS			Vehicle Action Prior to Crash 10 21 Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: N X E W Responding to Emergency? N			Event Sequence 1 22 22 22 22 2			Citation # (If Issued)			Most Harmful Event 1 23		
Violation 1: Ch Sec Violation 2: Ch Sec			Driver Contributing Code 19 24 24			Violation 3: Ch Sec Violation 4: Ch Sec			Underride/Override 25 Towed N		
Please fill out for operator and all occupants involved			Name (Last First Middle) Address Age/DOB Sex 26 Seat Pos. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code Medical Facility			Operator/Non-Motorist See Above			1 13		

Crash Narrative:
On Saturday 9/4/2021 at approx 1222hrs, while assigned to N498, I responded to the Dunkin Donuts parking lot at 138 Needham St in Newton, for a 2 car MVA.
Operator of MV1 stated that she was stopped at the time of the accident in the middle of the parking lot.
Operator of MV2 states he was backing up and did not see MV1 at all. I observed damage to MV1 passenger bumper. There appeared to be no damage to MV2. No injuries reported.

Property Damage:				
Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property

KEVIN DURICKAS			NEWTON POLICE DEPT#24		09/04/2021
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11:24:00					