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Vehicle Travel Direction:							Crash	21						ee)
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Violation 1: Ch Sec Violation 2: Ch Sec Driver Contributing Code 1 24 23						· —	23							iage
Please fill out for operator and all occupants involved Agenor	1			: Ch Sec		L		24	24 1	← /	9	5 1	11 Totaled	
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Please Select One of the Following: Non-Motorist A Type			<u> </u>				Sex Pos.	System S	status Switch	Code Co	de Status	Code	Medical Facili	ity
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Crash Diagram:	ie: → 1 → 2 → Ŷ	
(=N=)	NOT TO SCALE	If Crash <u>Did Not</u> Occur on a Public Way:
		☐ Off-Street Parking Lot
	<u> </u>	Garage
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Mall/Shopping Center
Burrage f	70	☐ Other Private Way
		Indicate North by Arrow
	#8 Burrage Rd	

Crash Narrative:

(Continued on next page)

Mv#1 was parked unoccupied opposite #8 Burrage Rd (N/B). #1 was sideswiped by an unknown Mv that left white paint transfer damage on #1's driver's side front end side and also struck the driver's side mirror all causing moderate damage. I spoke to the resident at 8 Burrage Rd. The resident stated a visitor in his house, Jonathan Kaplan, witnessed the accident. The resident stated Kaplan told him he observed a white sedan bearing MA Reg CIAF31 (Mv#2) attempting to parallel park between #1 and another Mv. During the attempt, #2 was observed sideswiping #1. Kaplan further stated a male operator got out of #2, left a note on #1 and drove away. Mv#1 owner/operator Ms Joan Beer stated no note was ever found. Later from HQ, I called the witness phone number provided (617-455-2557) by the resident of 8 Burrage Rd. I called that number, received VM and left a message. A query of #2 registration comes back on a '18 white Lexus G350 to a Mr Barry

Witnesses:						
Name (Last, First, Middle)	Address	5		Phone #		Statement
CAPLAN , JONATHAN,		RAGE RD 'ON,MA 02459				N
Property Damage:						
Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damag	ged Property	
Truck and Bus Information: Carrier Name	Registration #	(From Vehic	ele Section)	Carrier Issui	ing Authority Code	35
Address		City		St	Zip	
US DOT#:	_ State Number	Issuing State	ICC #:_		Interstate	36
Cargo Body Type Code 37 Gr	oss Vehicle Weight 38			39		
Trailer Reg #:	Reg Type Reg	State Reg Year	Tr			
Hazmat Information:						
Placard 40 Material 1 digit	# 41 Material Name		Material 4	digit #	Release code	42

	Direction 1	∃ Vehicle 1 2	yehicle 2	₹ Pedestria	in	
Crash Diagram:	ie: → 1	2	-	▶ 9		
					If Crash <u>Did Not</u> on a Public Way:	<u>Occur</u>
					Off-Street Parkin	ng Lot
					☐ Mall/Shopping (Center
					Other Private W	ay
					Indicate North by	Arrow
Crash Narrative:						
Benjamin of 79 Florence St	#510S Newton.	I received i	nformation Mr	Benjamin'	s phone number was 339-22	23-0079.
This number when called wa	s not Mr Benjam	nin's. Later	from HQ, I sp	ooke to Ms	Beer and provided her wi	th the
witness plate number obser	ved as the pain	t color is a	match to the	damage s	ustained on her Mv. She	was
advised insurance company	will investigat	e further b	ased on curre	ent informa	tion received.	
Later, the witness Mr Kapl						
was in his driveway outsid						
stated the accident was v						ueeze
between Mv#1 and another v						
started to drive away. Kap	on next page)	rew the atte	ntion of anot	ther withes	s (unknown) standing on	
	n next page;					
Witnesses: 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: Carrier Name			(From Ve	chicle Section)	Carrier Issuing Authority Co	ode 35
Address			City		St Zip	
US DOT #:					Interstate	36
Cargo Body Type Code 37 Gro	ss Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Year_	Trai	ler Length 39	
Hazmat Information:	41					42
Placard Material 1 digit #	# Material Na	ame		Material 4 di	git # Release code	42

-	→ Direction 1	Vehicle 1	Vehicle 2	₽ Pedestrian		
Crash Diagram:	ie: → 1	→ [2	□ →	> ĝ		
					If Crash <u>Did Not</u> Con a Public Way:	Occur
					☐ Off-Street Parking	Lot
					☐ Garage	
	i i	ĺ		j	☐ Mall/Shopping Ce	nter
					☐ Other Private Way	
					Indicate North by A	row
Crash Narrative:						
street when both walked u	p to Mr Benjamin	ı's vehicle a	and asked him	if he was going	to leave a note for	the
damaged vehicles. Benjami	n refused. Kapla	n described	Benjamin's ove	erall demeanor	as "rude." Kaplan sta	ited he
told Benjamin he has came	ras capturing th	e incident.	Not until the	en, Benjamin go	t out of his car and	left a
note on only the other ve	hicle reported t	o be minor 1	icense plate	damage. Kaplan	stated Benjamin never	left a
note on Mv#1, the vehicle	with obvious mo	derate damag	re. Kaplan sta	ted he actually	viewed the note left	on the
other vehicle and said it	was illegible.	Kaplan told	Benjamin this	s and Benjamin	yelled to him "mind y	our
own business" and drove a	way. Kaplan stat	ed his ring	doorbell came:	ra was not posi	tioned to capture any	of the
incident.						
(Continued	on next page)					
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:	Address		Phone #	34-Type Descript	tion of Damaged Property	
Owner (Last, First, Middle)	Address		Priorie #	34-Type Descript	tion of Damaged Property	
Truck and Bus Information:	Registration #		(From Vel	nicle Section)		
Carrier Name				<i>'</i>	_ Carrier Issuing Authority Code	35
Address						
US DOT #:						36
37	ross Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Year	Trailer Leno	2th	
Hazmat Information:			105 100	Trunci Delig	·	
Placard 40 Material 1 digi	# 41 Material Na	ame		_ Material 4 digit #	Release code	42

25117

Signature

ID/Badge #

NEWTON POLICE DEPARTM

Department

09/07/2021

Date

Precinct/Barracks

ADAM D GABRIEL

Police Officer Name (Please Print)

	→ Direction [1 = '	Vehicle 1	2 =\	Vehicle 2	Pedestr	rian		
Crash Diagram:	ie: →[1	→	2		→ ĝ			
								If Crash <u>Did Not</u> on a Public Way:	Occur
		_ _	- — — –	_				☐ Off-Street Parkin	ng Lot
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	· — — — — -	_ _						☐ Mall/Shopping C	Contar
		_	- — — –		+		- — —		
							\vdash	☐ Other Private Wa	iy
								Indicate North by A	Arrow
	· — — — - - — — — — ·		·	- - - -	 +			\bigcirc	
Crash Narrative:								 -	
Traffic Bureau upo									
operator of MV2, Mr. Bar	ery Benjamin (S	42076	881).	Mr. Be	enjamin st	ated he wa	s operating	his 2018 Lexus	3
G350 (MA: CIAF31) at the	time of the c	rash.	Mr. B	enjami	ın stated	he was bac	king his ve	hicle into a	
parking spot and the spa									
into the front bumper ar									
vehicle and put the plat		. Mr	Benja	min st	cated he 1	eft a note	in the veh	icle with his o	contact
information and left the	area.								
I asked Mr. Benjam									
stated he did not make o		y oth	er vehi	cle.	Mr. Benja	min stated	there was	no damage to hi	is ————
	d on next page)								
W itnesses: Name (Last, First, Middle)			Address				Ph	none #	Statement
Ndille (Last, Filst, Midule)		- 11	uuiess					One #	Statement
		+							
Property Damage:									
Owner (Last, First, Middle)	Address			P	Phone #	34-Type	Description of D	Damaged Property	
				\perp					
Truck and Bus Information:	Registration #				(From V	Vehicle Section)			
Carrier Name					,	The state of the s	Carrie	er Issuing Authority Co	ode 35
Address				Cit	у		St	Zip	
US DOT #:	State Number			I	ssuing State	ICC #:_		Interstate	36
Cargo Body Type Code 37	Gross Vehicle Weight	38	3				_		
Trailer Reg #:	Reg Type		Reg State	·	Reg Year	Tr	ailer Length	39	
Hazmat Information:	41								42
Placard Material 1 dia	git # Materia	l Name	3			Material 4	digit #	Release code	42

→	Direction 1	Vehicle 1 2	≢Vehicle 2	Pedestr	ian	
Crash Diagram:	ie: → 🛚	2	□ →	Ŷ.		
					If Crash <u>Did Not</u> on a Public Way:	Occur
					Off-Street Parkin	g Lot
			į	į	☐ Mall/Shopping C	enter
				+	☐ Other Private Wa	y
	-				Indicate North by A	Arrow
Crash Narrative: vehicle and stated he would Those pictures were forward					of MV1 that he took on sce	ne.
·					homeowner who contacted t	
police called my wifes atte						
that had been side swiped						
that that situation did no			t has hothing	co do wi	th us and the nomeowner a	greed
			Mr. Bonismin f		ng the scene of property d	
		IICA AGAINSO A			ing one beene of property a	
W itnesses: Name (Last, First, Middle)		Address			Phone #	Statement
Warre (East, 111st, Middle)		Mudicis			THORE #	Statement
Property Damage:						
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Damaged Property	
Truck and Bus Information:	Registration #		(From Vehic	,	Carrier Issuing Authority Coo	35
Address					St Zip	36
US DOT #:		38	Issuing State	ICC #:	Interstate	
	s Vehicle Weight				39	
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tra	niler Length	
Hazmat Information: Placard 40 Material 1 digit #	41 Material N	ame		Material 4 d	ligit # Release code	42
riacita i digit#	Waterial N	umo		iviaiciiai + C	ngu " Reicase code	
ADAM D GABRIEL		25117	, NEWTO!	N POLICE DEPARTN	09/07/2	2021

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)