

Police Use Only			Commonwealth of Massachusetts				RMV Document Number			
Date of Crash 09/23/2021	Time of Crash 08:41 24HR	City/Town NEWTON	Motor Vehicle Crash Police Report				Number Vehicles 1	Number Injured 1	Speed Limit 25 Latitude _____ Longitude _____	State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other: <input type="checkbox"/>
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:			
Route# Direction Name of Roadway/Street At			WEST 358 BEACON ST Route# Direction Address # Name of Roadway/Street Feet N S E W of _____ Mile Marker _____ Exit Number							
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with			Feet N S E W of _____ Route# Intersecting Roadway/Street							
Route# Direction Name of Intersecting Roadway/Street			Landmark							
<input checked="" type="checkbox"/> Vehicle 1 #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 210000744	
License # --- St MA DOB/Age --- Sex M Lic. Class D 18 18 Lic. Restrictions B 19 CDL _____ Operator MOGAN THOMAS A Address 358 BEACON STREET City NEWTON State MA Zip 02467 Insurance Company USAA			Reg # 6EBH20 Reg Type PAN Reg State MA Veh Year 2015 Veh Make JEEP Veh Config. 2 20 Owner MOGAN THOMAS Address 358 BEACON ST City NEWTON State MA Zip 02458 Vehicle Action Prior to Crash 4 21 Damaged Area Code: (Circle Up to Three) Event Sequence 4 22 22 22 22 2 3 4 Most Harmful Event 4 23 Driver Contributing Code 19 24 24 Underride/Override 25 Towed N							
Vehicle Travel Direction: N S E W Responding to Emergency? N Citation # (If Issued) 143809AB Violation 1: Ch 90/148 Sec Violation 2: Ch Sec Violation 3: Ch Sec Violation 4: Ch Sec			10 Undercarriage 5 11 Totaled							
Please fill out for operator and all occupants involved			13							
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			4							
Operator See Above			1 4 99 0 0 10 1 N/A							
Please Select One of the Following: <input type="checkbox"/> Vehicle #Occupants <input checked="" type="checkbox"/> Non-Motorist A Type 2 14 Action 2 15 Location 4 16 Condition 1 17 <input type="checkbox"/> Hit/Run <input type="checkbox"/> Moped										
License # --- St DOB/Age --- Sex F Lic. Class 18 18 Lic. Restrictions 19 CDL _____ Operator PALMER LOUISA JAYNE Address 201 UPLAND AVENUE City NEWTON State MA Zip 02461 Insurance Company			Reg # Reg Type Reg State 20 Veh Year Veh Make Veh Config. 20 Owner Address City State Zip Vehicle Action Prior to Crash 21 Damaged Area Code: (Circle Up to Three) Event Sequence 22 22 22 22 2 3 4 Most Harmful Event 23 Driver Contributing Code 24 24 Underride/Override 25 Towed							
Vehicle Travel Direction: N S E W Responding to Emergency? Citation # (If Issued) N/A Violation 1: Ch Sec Violation 2: Ch Sec Violation 3: Ch Sec Violation 4: Ch Sec			10 Undercarriage 5 11 Totaled							
Please fill out for operator and all occupants involved			13							
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			8 2 BRIGHAM AND WOMEN							
Operator/Non-Motorist See Above										

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

Crash Diagram:

358 Beacon Street

Beacon Street

Unit 1

Witness

NOT TO SCALE

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

Indicate North by Arrow

Crash Narrative:

On Thursday, September 23, 2021, while assigned to Traffic unit N525, I responded to the area of 358 Beacon Street, Newton for a report of a motor vehicle/bicycle crash with injury. The weather at the time of the crash was clear and sunny. The road surface was dry. Beacon Street is a public way maintained by the City of Newton.

I spoke with the operator of the vehicle involved, Mr. Thomas Mogan (S29907615). Mr. Mogan stated he was operating his 2015 Jeep Wrangler (MA: 6EBH20) on Beacon Street (W) towards his residence of 358 Beacon Street. Mr. Mogan stated he observed a break in the traffic traveling on Beacon Street (E) towards Hammond Street in front of his driveway. Mr. Mogan took a left turn from the Westbound lane of Beacon Street to enter his driveway. While making his turn, his vehicle crashed into a

(Continued on next page)

Witnesses:

Name (Last, First, Middle)	Address	Phone #	Statement
MCCUSKER, KELLI	42 FAIRHAVEN RD NEWTON, MA 02459	-----	N

Property Damage:

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

Truck and Bus Information:

Registration # \_\_\_\_\_ (From Vehicle Section)

Carrier Name \_\_\_\_\_ Carrier Issuing Authority Code 35

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate 36

Cargo Body Type Code 37 Gross Vehicle Weight 38

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length 39

Hazmat Information:

Placard 40 Material 1 digit # 41 Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code 42

MICHAEL R GAUDET

NEWTON POLICE DEPART

09/23/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

ie: → 1    → 2    →

#### Crash Diagram:



If Crash Did Not Occur  
on a Public Way:

- ☐ Off-Street Parking Lot
- ☐ Garage
- ☐ Mall/Shopping Center
- ☐ Other Private Way

Indicate North by Arrow



#### Crash Narrative:

bicyclist traveling on Beacon Street (E) in the marked bicycle lane in front of 358 Beacon Street.

Mr. Mogan stated he did not see the bicyclist until the front passenger side fender/door area of his vehicle made contact with her. I observed minor damage to this area on his vehicle. Mr. Mogan reported no injuries.

The injured bicyclist was identified as Ms. Louisa Palmer (S67185637). Ms. Palmer was treated on scene by Fallon Medics for injuries to her left wrist and ankle and transported to Brigham and Women's Hospital for further evaluation. Ms. Palmer was wearing a helmet at the time of the crash and I observed her blue Bianchi Pista bicycle resting on the sidewalk in front of 358 Beacon Street. The bicycle had minor damage in to it's front wheel area and fresh scrapes near the handlebars. I transported the bicycle to Ms.

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Registration # \_\_\_\_\_ (From Vehicle Section)

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US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate 36

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→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

ie: → 1    → 2    →

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- ☐ Other Private Way

Indicate North by Arrow



#### Crash Narrative:

Palmer's residence.

I responded to Brigham and Women's Hospital in Boston and spoke with Ms. Palmer in the Emergency Department. Ms. Palmer stated she was riding her bicycle on Beacon Street (E) towards Boston College. Ms. Palmer stated she was riding in the marked bicycle lane with the motor vehicle traffic to her left. Ms. Palmer stated she observed a break in the traffic on Beacon Street ahead of her, and then a Jeep entered her travel lane after it took a left turn from the Westbound travel lane on Beacon Street right in front of her. Ms. Palmer stated her left side crashed into the front passenger side wheel/hood area. Ms. Palmer stated she then fell to the roadway. Ms. Palmer stated she has injuries to her left wrist/arm area, her left ankle, and her hips.

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#### Witnesses:

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MICHAEL R GAUDET

NEWTON POLICE DEPART

09/23/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date



[illegible]

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

MICHAEL R GAUDET			NEWTON POLICE DEPARTM		09/23/2021
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11 :24:00					