

Commonwealth of Massachusetts

Police Use Only			Commonwealth of Massachusetts				RMV Document Number			
Date of Crash 10/04/2021	Time of Crash 11:58 24HR	City/Town NEWTON	Motor Vehicle Crash Police Report				Number Vehicles 2	Number Injured 0	Speed Limit <u>30</u> Latitude _____ Longitude _____	State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other: _____
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:			
Route# _____ Direction _____ Name of Roadway/Street _____ At _____			EAST 350 WATERTOWN ST Route# _____ Direction _____ Address # _____ Name of Roadway/Street _____ Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ • _____ or _____ Mile Marker _____ Exit Number _____				2 9			
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____ Also at Intersection with _____			Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ Route# _____ Intersecting Roadway/Street _____				2 10			
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____			Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ Landmark _____				11 4			
<input checked="" type="checkbox"/> Vehicle 1 <u>1</u> #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 210000784	
License # _____ St MA DOB/Age _____			Reg # RUBRIC Reg Type PAN Reg State MA			2 20				
Sex F Lic. Class <u>D</u> <u>18</u> <u>18</u> Lic. Restrictions <u>9</u> <u>19</u> CDL _____			Veh Year 2009 Veh Make TOYOTA Veh Config. <u>2</u> <u>20</u>			1 12				
Operator MCGOWAN SUZANNE Last First Middle			Owner (Same as operator) Last First Middle			1 12				
Address 52 MAYFLOWER RD			Address _____			1 12				
City NEWTON State MA Zip 02467			City _____ State _____ Zip _____			1 12				
Insurance Company AMICA MUTUAL			Vehicle Action Prior to Crash <u>11</u> <u>21</u> Damaged Area Code: (Circle Up to Three)			1 12				
Vehicle Travel Direction: <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> W Responding to Emergency? N			Event Sequence <u>1</u> <u>22</u> <u>22</u> <u>22</u> <u>22</u> <u>2</u> <u>3</u> <u>4</u>			1 12				
Citation # (If Issued) N/A			Most Harmful Event <u>1</u> <u>23</u>			1 12				
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____			Driver Contributing Code <u>1</u> <u>24</u> <u>24</u>			1 12				
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____			Underride/Override <u>25</u> Towed N			1 12				
Please fill out for operator and all occupants involved			26 Seat Pos. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code			1 12				
Name (Last First Middle) Address Age/DOB Sex			Operator See Above -----			1 12				
						1 12				
						1 12				
						1 12				
Please Select One of the Following: <input checked="" type="checkbox"/> Vehicle 2 <u>1</u> #Occupants			<input type="checkbox"/> Non-Motorist A Type <u>14</u> Action <u>15</u> Location <u>16</u> Condition <u>17</u>			<input checked="" type="checkbox"/> Hit/Run <input type="checkbox"/> Moped				
License # _____ St MA DOB/Age _____			Reg # 8880YD Reg Type PAN Reg State MA			2 20				
Sex F Lic. Class <u>D</u> <u>18</u> <u>18</u> Lic. Restrictions <u>1</u> <u>19</u> CDL _____			Veh Year 2016 Veh Make JEEP Veh Config. <u>2</u> <u>20</u>			2 20				
Operator MCGLAME JOHANNA M Last First Middle			Owner (Same as operator) Last First Middle			2 20				
Address 33 WEST ST			Address _____			2 20				
City NEWTON State MA Zip 02458			City _____ State _____ Zip _____			2 20				
Insurance Company LIBERTY MUTUAL			Vehicle Action Prior to Crash <u>1</u> <u>21</u> Damaged Area Code: (Circle Up to Three)			2 20				
Vehicle Travel Direction: <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> W Responding to Emergency? N			Event Sequence <u>2</u> <u>22</u> <u>22</u> <u>22</u> <u>22</u> <u>2</u> <u>3</u> <u>4</u>			2 20				
Citation # (If Issued) _____			Most Harmful Event <u>2</u> <u>23</u>			2 20				
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____			Driver Contributing Code <u>10</u> <u>24</u> <u>24</u>			2 20				
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____			Underride/Override <u>25</u> Towed N			2 20				
Please fill out for operator and all occupants involved			26 Seat Pos. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code			2 20				
Name (Last First Middle) Address Age/DOB Sex			Operator/Non-Motorist See Above -----			2 20				
						2 20				
						2 20				
						2 20				

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

Crash Diagram: ie: → 1 → 2 → Pedestrian

#350 WATERTOWN ST COLONIAL DRUG

Unit 1

Unit 2

WATERTOWN ST

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 October 4th, 2021 at approximately 11:58 hours while working N491 I responded to a report of a past Hit & Run involving a parked MV in front #350 Watertown St, Colonial drug.

On my arrival I located one of the involved vehicles a 2009 blue Toyota Venza MA plate RUBRIC with the owner, Suzanne McGowan inside it.

She reported parking her car in front of #350 Watertown St while out doing errands. She came back a short time later and found her vehicle had been struck. She found a note attached to her vehicle that said, " I'm sorry I hit your car, with a telephone # 617-448-1039," call me".

I spoke with the R/P, witness JP Botindari, address Colonial drug, #350 Watertown St. He reported hearing a crash from inside his business which brought him outside to investigate. He then observed a blond haired

(Continued on 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:

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

THOMAS J MCCARTHY

NEWTON POLICE DEPT

10/04/2021

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:

white female, 40's ruddy complexion wearing ripped blue jeans put a note on the parked vehicle she just hit. He asked her if she was ok? Women said nothing before getting into a grey colored SUV Ma reg.888-oyd.with heavy passenger side damage. The vehicle fled E/B on Watertown St. The registration was later queried but didn't come back to any vehicle. The phone # left on the note was traced back to a women out of Arlington Ma. but after dispatch had spoke with her realized this was not the women involved. The only vehicle attached to her name was a Nissan Pathfinder. Her drivers license picture didn't match the witnessed description either. An attempt will be made to identify the other vehicle through similar license plates.

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Registration # _____ (From Vehicle Section)

Carrier Name _____ Carrier Issuing Authority Code

Address _____ City _____ St _____ Zip _____

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Cargo Body Type Code Gross Vehicle Weight

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Hazmat Information:

Placard Material 1 digit # Material Name _____ Material 4 digit # _____ Release code

THOMAS J MCCARTHY

NEWTON POLICE DEPART

10/04/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

Crash Narrative:

Traffic Bureau update (Officer Gaudet): A query of MV2 (MA: 8880YD) showed it comes back to a 2016 gray Jeep Cherokee registered to Ms. Johanna McGlame out of Newton. I spoke with Ms. McGlame via telephone. Ms. McGlame stated he was involved in the crash and did leave a note on the vehicle she hit with her phone number. Ms. McGlame stated she was traveling on Watertown Street and the passenger side of her vehicle made contact with a parked car. Ms. McGlame stated her vehicle had damage as a result of the crash and it is currently being fixed. Ms. McGlame's vehicle information and contact information was updated in this report. Ms. McGlame will not be cited for leaving the scene of property damage.

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

THOMAS J MCCARTHY			NEWTON POLICE DEPT.		10/04/2021
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11:24:00					