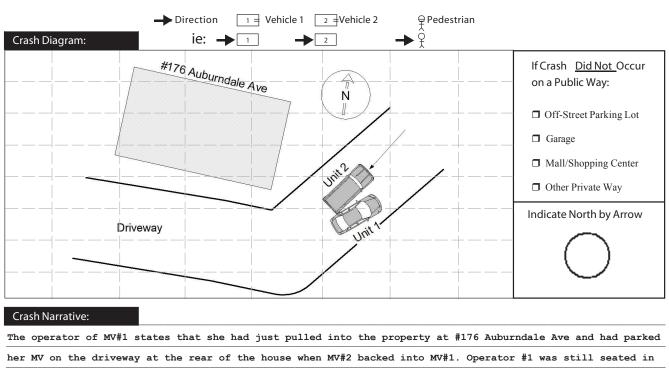
	Poli	ice Use Only		Common	wealth	of Ma	ssac	huse	etts			RM	V Docu	ıment N	umber	
	Date of Crash 10/08/2021	Time of Cra 14:08	NEWTON	Town Mo	otor Vel Police			1 Nu Ve	ımber hicles	Numb Injure 0	d Lati	ed Lim itude _ igitude_		State Loca MBT Othe	Police l Police A Police	III
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						Fee	et N S	S E W	of	Ttout	***		ing rea	aa may is		
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	XVehicle1	#Occupar	nts Hit/Ru	n Moped	Case Numbe	er		21000	00798							ı
	License#		St	DOB/Age	Reg	# W55NPV				Reg T	ype PA	N	Reg	g State_N	IJ	
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	Operator EKV		JANE	Endorsm	ent Own	er_VEHICLI	ES LLC	F	IERTZ	First						
	Address 1003	WESTMINIS	TER AVE	Middle		ress 900 DOR			JE	rırst			Middl	ic		H
	City MURPH	Y		State TX Zip 07114	City	City PT NEWARK State NJ Zip 07114										
	Insurance Com	pany SELF IN	ISURED		Vehi	cle Action Pri	ior to Cr	rash	11 21		Damage	ed Area	Code: ((Circle U	Jp to Three	;)
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	Citation # (If I	ssued)			Most	t Harmful Eve	ent 1	23	•	— 1	4		$\left\{ \right\}$		Undercarria Totaled	ge
	Violation	1: Ch	Sec Violation	on 2: ChSec	Drive	er Contributin	g Code	1	24	24			<u>\</u>		Toured	
	Violation 3: ChSecViolation 4: ChSec					Underride/Override 25 Towed Y 8 O										
	Please t		perator and all occ	upants involved Address	s	Age/DO	B Se	26 Seat Pos.	27 Safety A System	28 Airbag Air Status Sw	29 30 bag Ejec itch Cod	0 31 Trap e Code	32 Injury Tr	33 ransp. Code M	edical Facility	, [2
	Operator			See Abov	ve				1	4 4	0	0	10	1		
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9	Please Select C	IX Vehi	icle2 1_#Occupa	nts Non-Motoris	st A Type	14 Action	15	Location	1	6 Con	dition	17	Пн	lit/Run	Море	d
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	Violation 1: ChSecViolation 2: ChSec					Driver Contributing Code 99 24 24										
	Violation 3: ChSecViolation 4: ChSec				Und	erride/Overrid	le	_	Towed_			7		6		
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her MV on the driveway at the rear of the house when MV#2 backed into MV#1. Operator #1 was still seated in MV#1 when crash occurred.

The operator of MV#2 states that MV#2 was parked on the driveway at the rear of her house (#176

Auburndale Ave) and her driveway was clear of any other MV's when she enter MV#2 to leave the residence.

According to operator #2, after she entered MV#2 and started the MV, MV#1 must have entered the rear driveway and when MV#2 began backing it struck MV#1.

No injuries and no tows.

With										
W itnesses: Name (Last, First, Middle)	Address		Phone #	Statement						
Property Damage:										
Owner (Last, First, Middle)		Phone #	34-Type	Description of Damaged Pro	scription of Damaged Property					
Truck and Bus Information:	Registration #		(From Vehic	cle Section)		35				
Carrier Name					Carrier Issuing Aut					
Address			City		St	Zip				
US DOT #:	State Number		Issuing State	ICC#:	Inte	rstate 36				
37		38								
5 7 71	ss Vehicle Weight				39					
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr	ailer Length					
Hazmat Information:										
Placard 40 Material 1 digit #	41 Material Na	me		Material 4	digit # Releas	se code 42				

GEORGE M CLAFLIN		NEWTON POLICE DEPARTM	10/08/2021		
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date