

Commonwealth of Massachusetts

Police Use Only			Motor Vehicle Crash Police Report				RMV Document Number				
Date of Crash 10/25/2021	Time of Crash 08:32 24HR	City/Town NEWTON	Number Vehicles 2	Number Injured 0	Speed Limit 30 Latitude Longitude	State Police Local Police MBTA Police Other:					
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:				
Route# Direction Name of Roadway/Street At			NORTH 100 WALNUT 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				2 11				
<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 2100000866		
License # --- St MA DOB/Age ---			Reg # 945AM3 Reg Type PAN Reg State MA			Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsment			Veh Year 2015 Veh Make TOYOTA Veh Config. 1 20		
Operator ALDRIDGE WILLIAM J			Owner (Same as operator)			Address			Address		
City WATERTOWN State MA Zip 02472			City State Zip			Vehicle Action Prior to Crash 1 21			Damaged Area Code: (Circle Up to Three)		
Insurance Company COMMERCE			Event Sequence 1 22 22 22 22			Most Harmful Event 1 23			Driver Contributing Code 10 24 24		
Vehicle Travel Direction: X S E W Responding to Emergency? N			Underride/Override 25 Towed N			Citation # (If Issued)			10 Undercarriage 11 Totaled		
Violation 1: Ch Sec Violation 2: Ch Sec			Violation 3: Ch Sec Violation 4: Ch Sec			Please fill out for operator and all occupants involved			13		
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility			Operator See Above --- 1 4 99 0 0 10 1 NONE						1		
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 MA DOB/Age ---			Reg # 447AB8 Reg Type PAN Reg State MA			Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsment			Veh Year 2021 Veh Make TOYOTA Veh Config. 2 20		
Operator KHAN RIZWAN A			Owner (Same as operator)			Address			Address		
City NEWTON State MA Zip 02460			City State Zip			Vehicle Action Prior to Crash 2 21			Damaged Area Code: (Circle Up to Three)		
Insurance Company GEICO			Event Sequence 1 22 22 22 22			Most Harmful Event 1 23			Driver Contributing Code 1 24 24		
Vehicle Travel Direction: X S E W Responding to Emergency? N			Underride/Override 25 Towed N			Citation # (If Issued)			10 Undercarriage 11 Totaled		
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→ Direction 1 Vehicle 1 2 Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

100 WALNUT ST SCHOOL ADMINISTRATION BUILDING

WALNUT ST

Unit 2

Unit 1

Unit 2

Unit 1

Unit 2

Indicate North by Arrow

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

Crash Narrative:

On October 25th, 2021 at approximately 08:32 hours while working N491 I responded to a report of a MV crash in the area of Walnut St near Minot Place.

On my arrival I located both involved vehicles near #100 Walnut St, The School Administration Building.

Vehicle #1 was a blue 2015 Prius, Ma reg.945-AM3, operated by a William Aldridge.

He stated he was first stopped N/B at the intersection of Walnut St @ Watertown St in the right turn only lane. The light turned green and realized he wanted to go straight so he continued heading N/B on Walnut St . However as he went straight he cut off vehicle #2 who was in the lane to his left who then honked his horn at him. Vehicle #1 then stopped ahead of vehicle #2 a short distance down the road. Vehicle #2 then drove around vehicle #1 who was still stopped. Vehicle #2 after going around vehicle #1 had to stop almost immediately due

(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

Address _____ City _____ St _____ Zip _____


US DOT #: _____ State Number _____ Issuing State _____ ICC #: _____ Interstate


Cargo Body Type Code Gross Vehicle Weight

Trailer Reg #: _____ Reg Type _____ Reg State _____ Reg Year _____ Trailer Length

Hazmat Information:

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

→ 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:

to a pedestrian crossing the street. Vehicle #1 at the same time proceeded forward behind vehicle #2 but then rear ended vehicle #2 after it stopped for the pedestrian.

Vehicle #2 was a 2021 grey Toyota Highlander, Ma reg. 447AB8, operated by a Rizwan Khan. He stated he was stopped for the light N/B on Walnut St @ the intersection of Watertown St. He was in the lane for straight ahead traffic. As the light turned green vehicle #1 cut over into his lane ahead of him causing him to almost hit him. He then admitted beeping his horn at vehicle #1. Thats when vehicle #1 suddenly stopped in front of him. After vehicle #1 didn't move he decided to go around him. As he passed him there was a pedestrian crossing the street. He then stopped his vehicle so the person could cross. His vehicle was then rear ended by vehicle #1.

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Cargo Body Type Code Gross Vehicle Weight

Trailer Reg #: _____ Reg Type _____ Reg State _____ Reg Year _____ Trailer Length

Hazmat Information:

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

THOMAS J MCCARTHY

NEWTON POLICE DEPART

10/25/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date