

# Commonwealth of Massachusetts

Police Use Only			Commonwealth of Massachusetts										RMV Document Number				
Date of Crash 11/19/2021		Time of Crash 16:22 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report				Number Vehicles 2	Number Injured 0	Speed Limit 10 Latitude Longitude		State Police Local Police MBTA Police Other:		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
AT INTERSECTION:						< LOCATION >		NOT AT INTERSECTION:									
Route# Direction Name of Roadway/Street At Route# Direction Name of Intersecting Roadway/Street Also at Intersection with Route# Direction Name of Intersecting Roadway/Street						NORTH 978 BOYLSTON ST											
						Route# Direction Address # Name of Roadway/Street											
						Feet N S E W of Mile Marker or Exit Number											
						Feet N S E W of Route# Intersecting Roadway/Street											
						Landmark											
<input checked="" type="checkbox"/> Vehicle 1 2 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 2100000957											
License # --- St NY DOB/Age --- Sex F Lic. Class D 18 18 Lic. Restrictions 9 19 CDL Operator LUPO DELORES Address 378 WHITE RD City MINEOLA State NY Zip 11501 Insurance Company GEICO Vehicle Travel Direction: N S E W Responding to Emergency? N Citation # (If Issued) Violation 1: Ch Sec Violation 2: Ch Sec Violation 3: Ch Sec Violation 4: Ch Sec						Reg # KLV7364 Reg Type PASS Reg State NY Veh Year 2021 Veh Make CHEVY Veh Config. 2 20 Owner LUPO JOSEPH Address 378 WHITE RD City MINEOLA State NY Zip 11501 Vehicle Action Prior to Crash 1 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 1 24 24 Underride/Override 25 Towed N											
Please fill out for operator and all occupants involved						10 Undercarriage 11 Totaled											
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																	
Operator See Above						NONE											
LUPO, JOSEPH 378 WHITE RD MINEOLA, NY 11501						NONE											
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 --- DOB/Age --- Sex M Lic. Class 99 18 18 Lic. Restrictions 9 19 CDL Operator PINHEIRO LUCIANO Address 67 NICHOLAS RD (apt. H) City FRAMINGHAM State MA Zip 01701 Insurance Company UFCC Vehicle Travel Direction: N S E W Responding to Emergency? N Citation # (If Issued) T1272466 Violation 1: Ch 90/10/A Sec Violation 2: Ch Sec Violation 3: Ch Sec Violation 4: Ch Sec						Reg # W25925 Reg Type CON Reg State MA Veh Year 2013 Veh Make CHEVY Veh Config. 2 20 Owner SMARTWORKS FINI Address 17 (apt. 3) POPLAR ST City MILFORD State MA Zip 01757 Vehicle Action Prior to Crash 10 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 99 24 24 Underride/Override 25 Towed N											
Please fill out for operator and all occupants involved						10 Undercarriage 11 Totaled											
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																	
Operator/Non-Motorist See Above						NONE											

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

RT9 BOYLSTON ST

ELLIOT ST

W BLUMFELDS RD

W PARKS WAY

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:**

MV1 operator states she was pulling out of the Sunoco gas station when MV2 began backing up and struck the front driver side door of MV1. I observed damage to MV1 driver side door. MV2 operator states he was going to pull onto Rt.9 but due to size of vehicle, needed to back up to create more space. While backing vehicle, MV2 struck MV1. No injuries reported on scene. No tows needed. Operator of MV2, Luciano Pinheiro was cited for Unlicensed Operation c90s10. See incident report 21048567. A complaint app was filed and submitted. The parking lot is a location in which the public has access as invitees.

**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