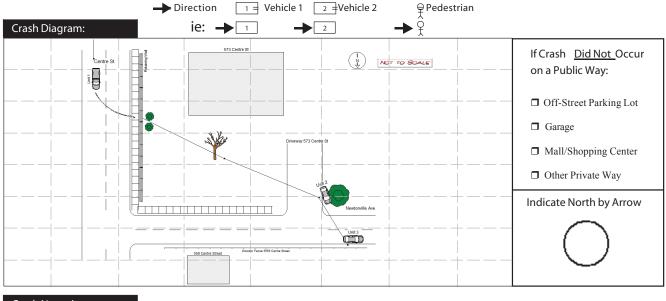
	Poli	ice Use Only		Commonwea	lth o	f Massa	ach	uset	tts		RM	V Doc	umen	t Number	
	Date of Crash 11/21/2021	Time of Crash 07:56 24HR	NEWTON	MIOTOI		icle Cra Report	sh	Num Vehi		jured [Speed Lin Latitude _ Longitude		St Lo M O	ate Police ocal Police IBTA Police ther:	XI C
		AT INTER	RSECTION:		LOCAT	_	>		ľ	NOT A	T INT	ERSI	ECT	ION:	$\frac{1}{2}$
1			N. CF	1 (0)		NORTH				NTRE S		D 1	/0.		
1	Route# Direc	tion	Name of F	t t	F	Route# Direction		ddress			Name of			eet	2
	Route# Direc	etion N	Name of Intersecting	Roadway/Street		Feet	N S E	W of		ліle Mark	er —	or	E	xit Number	_
	- Router Biret	, tion 1	Also at Interse		-	Feet [N S E	W of		oute#	Interse	ecting R	oadwa	y/Street	L
² 2	Route# Direc		Name of Intercept	ing Roadway/Street	[-	Feet [N S E	W of				8		,	3
3											La	andmark	C		\dashv
	X Vehicle 1	2_#Occupants	_		Number		2	100000	965						_
	License#	18 1	St MA	DOB/Age	Reg#_9						PAN		eg Stat	e MA 20	
	Sex_M_ Lic.		Lic. Restrictions	CDL Endorsment		ear_1998		eh Mak	e_FORD	F150		_Veh (Config	2	\vdash
⁴	Operator JAR Address 108 N	A-CASTRO Last IORFOLK ST	PETER	Middle		(Same as oper				irst		Mid	ldle		1
	City DORCH		Stat	e MA Zip 02145		s						е	7in		
		ipany GOVT EM		Z.ip		Action Prior to			21					le Up to Three	e)
5	1	Direction: X		nding to Emergency? N			$\frac{22}{20}$		2 22 22	2	3	3	4		
		ssued) T1444076				Iarmful Event	2				_ \	9		10 Undercarria	ıge
-	Violation	1: Ch90/18/Sec	c Violation 2	2: ChSec	Driver	Contributing Co	ode [10 24	2					() Totaled	
⁶ 1	Violation	3: ChSec	C Violation 4	: ChSec	Underri	ide/Override	2	T	owed Y	8	7	<u> </u>	6		
	Please : Name (Last Fir		ator and all occup	ants involved Address		Age/DOB	Sex	26 Seat Sa Pos. Sy	27 28 afety Airba stem Statu	S 29 g Airbag I s Switch	30 31 Eject Trap Code Code	Injury Status	33 Transp. Code	Medical Facility	_ 2
	Operator			See Above				9	9 1	99	0 0	8	1		
	HERNANDEZ	ZJUAN					M	3 9	9 1	99	0 0	8	1		
7	DI C.I.				14	4 1	5		16		17	1			_
1	Please Select C of the Followi	IX Vehicle	2 <u>0</u> #Occupants	Non-Motorist A Type	e 12	Action		cation	16	Condition	1 7		Hit/Ru	ın Mope	d
	License#	18 1	St	DOB/Age	Reg#_6	5BH268			R	eg Type_	PAN	Re	eg Stat	e MA 20	
	Sex Lic.		Lic. Restrictions	CDL Endorsment		ear_2007	Ve	h Mak	e_NISSA	AN		_Veh (Config		
⁸ 1	Operator	Last	First	Middle		BLECKERT	t	AD	PAM F	irst		Mid	ldle		
	Address					S 573 CENTRE	SII					ΜΔ		02459	
	City	_{ipany} GOVT. EN		eZip	<i>,</i>	EWTON	G . 1		21	Dam		e MA a Code		le Up to Three	e)
	Vehicle Travel			onding to Emergency? N		Sequence 1			2 22		(agea 7 ii e		4	op to Times	"
	Citation # (If I		S E W Resp	onding to Emergency.		Iarmful Event	1 2.	3						10 Undercarria	ıge
	`	/	ec Violation	2: ChSec		Contributing Co	Г	1 24	2	4 1	<u>- </u>	9	5	11 Totaled	
				4: ChSec		ide/Override	2.	-	wed Y	- 8	7	, ,	6		
	Pl Name (Last Fi		operator and all o	occupants involved		Age/DOB	Sex	26 Seat Sa	27 28 afety Airba	3 29 g Airbag 1	30 31 Eject Trap Code Code	32 Injury Status	33 Transp. Code	Medical Facilit	T,
		Non-Motorist		See Above					ystem Stal	JWHEN ED	Coue Cod	Status	code	wicaicai Facilii	
															\dashv

Poli Date of Crash	ce Use Only Time of Crash	City/Town	Commonwe				umber	Number		RMV Doo Limit <u>30</u>		t Number ate Police
11/21/2021	07:56	NEWTON	MIOTOI		icle Cra Penort	l V	ehicles	Injured	Latitud	e		ate Police Cocal Police META Police
	24HR	RSECTION:		LOCAT	Report	> 3	3	NOT	Longitu AT IN	TERS		ther:
	7X1 11/11EF	ADECTION,						1101	4 X I II'	, I 121 1 /3		
Route# Direct		Name of D	oadway/Street		Route# Direction	n Addra			Nama	of Roadw	yav/Stra	et
Koute# Blices	ion	At										Ci
	. 		D 1 (G)		Feet N	SEW	of —	Mile Ma	arker	or	E	xit Number
Route# Direc	ion f	Name of Intersecting ! Also at Intersec	*	——[-	Feet N	SEW	of					
					Feet N	SEW	of	Route#	Inte	rsecting R	Coadwa	y/Street
Route# Direct	ion	Name of Intersecti	ng Roadway/Street				-			Landmar	k	
XVehicle 3	#Occupants	Hit/Run	Moped Case	e Number		2100	000965					
License#_		St	DOB/Age	Peg# 1	INFC27			Reg Typ	o PAN	R	on State	_a MA
Sex Lic. (18 1	18	19 CDL		ear 2019							20
			Endorsment		CIGNA		LISA					
		First	Middle		Last S 549 CENTRE			First		Mi	ddle	
1			Zip		EWTON				S	state_MA	Zip	02458
1	pany LM GENE				Action Prior to	Crash	21					e Up to Three)
Vehicle Travel	Direction: N	S E X Respor	nding to Emergency? N	Event S	Sequence 1 2	2 22		22 2	Λ	3	(4)	
Citation # (If Is	ssued)			Most F	Iarmful Event	1 23			_ `	9		10 Undercarriag
Violation	1: ChSec	c Violation 2	: ChSec	Driver	Contributing Co	de 1	24	24				11 TOTAL
Violation	3: ChSec	c Violation 4	: ChSec	Underr	ide/Override	25	Towed			7	6	
Please f		rator and all occupa	nts involved Address		Age/DOB	Sex Pos.	Safety A System S	28 29 irbag Airbag status Switch	30 Eject Tr	31 32 rap Injury ode Status	Transp. Code	Medical Facility
Operator			See Above				-					
Please Select C	ne Vehicle	e#Occupants	Non-Motorist A Ty	14		5 Locatio	10	6 Condit	ion	17	Hit/Ru	n Moped
of the Followir	ig: Verificie	=# Occupants	Non-Motorist A Ty	/pe	Action	Locatio	011	Condit	1011		nii/nu	Мореа
License#	18 1	St	DOB/Age					Reg Typ	e	R	eg Stat	e
Sex Lic. (Class	Lic. Restrictions	CDL Endorsment		ear		lake			Veh	Config	
Operator	Last	First	Middle		Last			First		Mi	ddle	
Address				-	s							
			eZip				21] D:		state		
Insurance Com					Action Prior to	Crash 2 22		22 2	ппадец А	area Code	: (Circi	e Up to Three)
	Direction: N	S E W Respo	onding to Emergency?	-	sequence	23						10 Undercarriag
Citation # (If Is			2: Ch Saa		Contributing Co		24	24 1	← ,	9	5	11 Totaled
			2: ChSec 4: Ch Sec		Contributing Co	25	Towed	8		7	ر 6	
		r operator and all o		Underr	ide/Override [26 Seat		28 29 irbag Airbag	30 Figure F	31 32 rap Injury	33 Transp	
Name (Last Fir	st Middle)	<u> </u>	Address See Above		Age/DOB	Sex Pos	. System	Status Swite	h Code (rap Injury Code Status	Transp. Code	Medical Facility
Operator/	Non-Motorist		See Above				-	1			1	



Crash Narrative:

On November 21st, 2021 at approximately 07:56 hours while working N491 I along with Officer Mike Boudreau responded with NFD and Medic One to a report of a MV crash with injuries in the area of Centre St @ Franklin St.

On my arrival the Medics were evaluating two adult males who standing outside one of the involved vehicle from this crash.

There appeared to be several involved vehicles to this crash however two of them had been parked prior to the crash.

The vehicle which the two unidentified males were standing by was MA reg. 9HY939, a 1988 Black Ford F150 PU, listed registered owner was a Peter J. Jara-Castro, #28 Ridge Ave, Lynn Ma. Mr Castro was one of the two

(Continued on next page)

Witnesses:			
Name (Last, First, Middle)	Address	Phone #	Statement
WALSH, MICHAEL,	,		N

Property Damage: Owner (Last, First, Middle) Address Phone # 34-Type Description of Damaged Property 573 CENTRE ST BLECKERT, ADAM, A NEWTON,MASSACHUSETTS 0: 97 WALL,SHRUBS, TREES VEHICLE 559 CENTRE ST KRISHNAMACHARI, SRI, NEWTON,MASSACHUSETTS 0: 617-303-6149 97 WOODEN FENCE

RRISHNAWIACHARI, SRI,	NEWTON, MASSACHUSETTS	0, 01, 000 0113	37 WOODE	NTENCE	
Truck and Bus Information:	Registration #	(From Vehi	cle Section)		35
Carrier Name				Carrier Issui	ing Authority Code
Address		City		St	Zip
	State Number	Issuing State	ICC #:		_ Interstate 36
Cargo Body Type Code Gros	s Vehicle Weight 38			39	
Trailer Reg #:	Reg Type Reg State	Reg Year	Trailer Lengt		
Hazmat Information:					
Placard 40 Material 1 digit #	41 Material Name		Material 4 digit #		Release code 42

THOMAS J MCCARTHY		1	NEWTON POLICE DEPARTM		11/21/2021
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date

→	► Direction 1	Vehicle 1	yehicle 2	₽Pedestrian		
Crash Diagram:	ie: 🕕 🛚 1	→ [2	□ →	Ŷ		
					If Crash <u>Did Not</u> on a Public Way:	_Occur
					☐ Off-Street Parkin	ng Lot
					☐ Garage	
					☐ Mall/Shopping (Center
	·			+-	Other Private Wa	
					Indicate North by	Arrow
			+-	+-	$\overline{}$	
	· — — — — —					
Crash Narrative:						
males standing by that true	ck.					
The above vehicle appeared	to have been i	travelling N/	B on Centre St	when it sk	sidded off the road, jur	mping the
curb striking a 1 foot sla	te retaining wa	all to the pr	operty to #573	Centre St.	. It continued onto that	t
property driving over shr	ubs, small tree	es, then onto	the driveway(same addres	ss) which is actually or	n
Newtonville Ave, hitting th	ne homeowners 2	2007 Nissan V	ersa, Ma reg.	6BH269, for	cing it into more shruk	obery.
The Truck continued across	Newtonville Av	ve where it s	truck another	parked vehi	icle, a Grey 2019 Volks	wagon, Ma
reg. 1NFC27 on the rear pas	ssenger side pu	shing it for	ward. The truc	k finally o	came to a stop after d	riving
into a wooden fence to the	property of #5	559 Centre St	(Fence is on	Newtonville	e Ave.)	
I spoke with the owner of	the truck after	r he was eval	uated by the M	Medics, who	spoke limited English.	The
(Continued or	n next page)					
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:		•				
Owner (Last, First, Middle)	Address		Phone #	34-Type De	scription of Damaged Property	
Truck and Bus Information:						
Carrier Name	Registration #			cle Section)	Carrier Issuing Authority Co	35
						ode
Address						36
US DOT #:	State Number	38	Issuing State	ICC #:	Interstate	
Cargo Body Type Code Gros	ss Vehicle Weight	30			39	
Trailer Reg #:	Reg Type	Reg State	Reg Year	Trailer	Length	
Hazmat Information:	41					42]
Placard 40 Material 1 digit #	Material N	ame		Material 4 digit	t# Release code	42

NEWTON POLICE DEPARTM

Department

ID/Badge #

Signature

11/21/2021

Date

Precinct/Barracks

CDP1 11 ·24·00

THOMAS J MCCARTHY

Police Officer Name (Please Print)

→	Direction	1 :	∃ Vehicl	e 1 📋	2 =Vehicle 2		Pedestr	ian		
Crash Diagram:	ie: 🗕	1		→ □	2	→	Ŷ			
									If Crash <u>Did No</u> on a Public Way	
									☐ Off-Street Park	ring Lot
				‡		<u> </u>			☐ Garage	
									☐ Mall/Shopping	Center
		-		+		+	+		Other Private V	Vay
	· — — — —					+-			Indicate North b	y Arrow
									(`)
	· — — — —					+-			\dashv \smile	' l
Crash Narrative:										
owner of the truck Peter Ja	ara-Castro	fina	lly sa	id he	was driv	ing t	ne truck	prior	to the crash. His	statement
was he was travelling N/B	down Centre	St	when a	nothe	r vehicle	came o	out from	Newto	nville Ave causing	him to
slam on his brakes. Mr Cas	tro doesn't	rem	ember 1	much a	after that	, pos	sibly f	rom hi	tting his head.	
At this time I couldn't de	termine who	the	actua	l driv	ver was. B	oth M	r Castro	and	the passenger, sus	tained
injuries but both declined	to go to t	he h	ospita	1. Bot	th were la	ter p	icked up	by an	UBER driver.	
A Firefighter heading to we	ork reporte	d se	eing t	he tru	ıck pass h	im on	Centre	St N/B	at high rate of s	peed but
never saw the driver or the	actual cr	ash.								
Both property owners that	sustained d	amag	e were	giver	n Trucks i	nsura	nce info	. Pict	ures were taken by	both
property owners.										
(Continued or	n next page)								
Witnesses:										
Name (Last, First, Middle)			Address	;					Phone #	Statement
Property Damage: Owner (Last, First, Middle)	Address				Phone #		34-Type	Doscript	ion of Damaged Property	
Owner (Last, 111st, Miladie)	Address				1 Hone #		эттурс	Descript	ion of Damaged Froperty	
Truck and Bus Information:	Registration	#			(Fr	om Vehic	ele Section)			
Carrier Name									Carrier Issuing Authority	Code 35
Address					City				StZip	
US DOT #:									1	36
37	s Vehicle Weight		38							
	_			a	_		_		39	
Trailer Reg #: Hazmat Information:	Reg Type		Reg S	State	Reg	Y ear	Tr	uler Leng	th	
40	41									42
Placard Material 1 digit #	Mater	rıal Na	ime				Material 4	digit#	Release code	
THOMAS J MCCARTHY						NEWTON	POLICE DEPART		11/2	1/2021

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)

→	Direction 1	Vehicle 1	2 ≢Vehicle 2	Pedestri	ian		
Crash Diagram:	ie: → 1	→ [2	2	Ŷ			
					l l	Crash <u>Did Not</u> (n a Public Way:	Occur
		 				Off-Street Parking	g Lot
						Garage	
						Mall/Shopping Co	enter
						Other Private Way	
	· — — — —	 				dicate North by A	
						alcate North by A	liow
Crash Narrative:							
Vehicle #1 and vehicle #2	were towed from	m scene. Both	sustained hea	vy damage	e. Vehicle #3	sustained min	nor
damage I was unable to make	e contact with	that owner a	at this time.				
However later in the day I	was able to ma	ake contact w	with owner of v	ehicle #3	3. She was gi	ven all vehic	le #1
information along with his	insurance.						
A citation for speeding was	s later issued	after invest	igation was co	mpleted a	and witness s	tatement.	
Citation#t1444076 was late:	r sent VIA mai	1.					
-							
Witnesses							
W itnesses: Name (Last, First, Middle)		Address			Phone	2 #	Statement
Property Damage:	T		1				
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Dam	naged Property	
			1				
Truck and Bus Information:	Registration #		(From Vehi	cle Section)			
Carrier Name	Registration #		(From Veni		Carrier Is	suing Authority Cod	e 35
Address			City_				
US DOT #:							36
37	s Vehicle Weight	38	15541115 54410	100 #			
Trailer Reg #:		Reg State	Reg Vear	Tra	ailer Length		
Hazmat Information:	Neg 1 ype	Neg State	Rog rear	110	moi Longui		
Placard 40 Material 1 digit #	41 Material N	ame		Material 4 d	ligit #	Release codo	42
1 lacard 1 lylaterial 1 digit #	Iviaterial Iv	um(141atCHai 4 C	ндн т	IXCICASE COUE	
THOMAS I MCCARTHY				N POLICE DEPARTA		11/21/20	221

ID/Badge #

Signature

Department

Precinct/Barracks

Date

CDP1 11 ·24·00

Police Officer Name (Please Print)