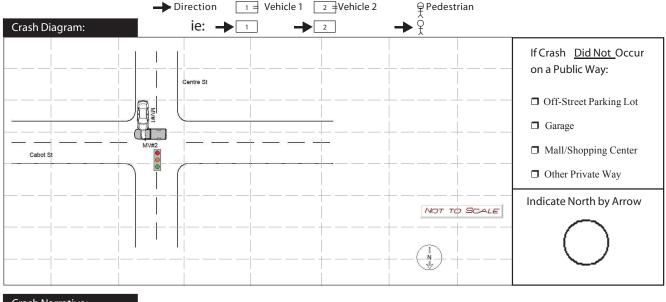
	Poli	ce Use Only		Commonwea	lth o	of Mass	ach	iuse	etts			RM	V Doc	cumen	ıt Number	
	Date of Crash	Time of Crash	City/To NEWTON	Motor	Veh	icle Cra	ısh		mber	Nun Inju		need Lim		SL	tate Police ocal Police IBTA Police	□ Xi
	11/23/2021	14:36 24HR		Pol	ice I	Report		2		0		ongitude _			IBTA Police other:	
		AT INTER	RSECTION:	< I	LOCAT	ΓΙΟΝ	>			N	OT A	T INT	ERS	ECT	ION:	2
	NOR	TH CENTR	RE ST													2
1 1	Route# Direct	tion		Roadway/Street	I	Route# Directi	on .	Addres	s #		1	Name of	Roadw	/ay/Stre	eet	$ 2^{10}$
	EAST	SARGE		At	-	Feet	N S	E W	of –			•	or			
	Route# Direc	tion N		ng Roadway/Street		Feet	NI C	E W	- C	Mi	le Marke	er		Е	xit Number	_
			Also at Inter	rsection with	- -					Rou	ite#	Interse	cting R	Roadwa	y/Street	. 1
2 1	Route# Direct	tion	Name of Interse	cting Roadway/Street	[-	Feet	N S	E W	of							3
3	_			 								La	ndmar	·k		┪
1	XVehicle1	4_#Occupants	Hit/Run	Moped Case N	Number			21000	00979							
	License#	10 1	St M		Reg#	7VK497				_Reg	Type_P	AN	R	eg Stat		-
	Sex_M_ Lic. 0	Class D 18 1	Tin Donamintina	1 CDL	Veh Ye	ear_2004	\	/eh Ma	ke_TC	YOT	Α		_Veh	Config	g. 20	
⁴ ₃	Operator DIA	Z Last	HECTOR MA	Endorsment ANUEL ROMERO Middle	Owner	(Same as ope	rator)			First			Mi	ddle		- 1
3	Address 237 W	VATERTOWN S	T (apt. B)			ss										.
	City NEWTO	N	St	ate MA Zip 02458	City							State	e	Zip		
	Insurance Com	pany ARBELLA	MUTUAL INS		Vehicle	e Action Prior t	o Cras	sh	1 21			ged Area	Code		le Up to Three	e)
5 1	Vehicle Travel	Direction:	S E W Res	oonding to Emergency? N	Event S	Sequence 1		22	22	22	2	3		4		
	Citation # (If Is	ssued)			Most H	Harmful Event	1	23			1	. 9	1	5	10 Undercarria 11 Totaled	age
6	Violation	1: ChSec	e Violation	2: ChSec	Driver	Contributing C		99	24	24			<u>\</u>	ر		
⁶ 1				1 4: ChSec	Underr	ide/Override			Towed		0			6		
	Please 1 Name (Last Fire		ator and all occu	pants involved Address		Age/DOB	Sex	26 Seat Pos.	27 Safety System	28 Airbag Status	29 Airbag Ej Switch C	30 31 lect Trap ode Code	32 Injury Status	33 Transp. Code	Medical Facility	y 13
	Operator			See Above					1	4	99 0	0	10	1		
	YOUNG-FULI	ER, KATHLEE	NII	7 WATERTOWN STREET (apt EWTON, MA 02458	В)		F	3	1	4	99 0	0	10	1		
	YOUNG, MIC	HAEL		7 WATERTOWN ST (apt B) EWTON, MA 02458			M	4	1	4	99 0	0	10	1		
	YOUNG, TRA	CY	23	7 WATERTOWN ST (apt B) EWTON, MA 02458			F	6	1	4	99 0	0	10	1		
⁷ 2	Please Select C of the Followin		22 <u>1</u> #Occupan	T	e 1	4 Action	15 Lo	ocation		16 Co	ondition	17		Hit/Ru	un Mope	ed
	License#		St N	Y DOB/Age	Reg#	V82126				Reg	Type C	ON	R	eg Stat	te_MA	7
	Sex_M Lic. 0	Class D 18 1		19	Veh Year 2019 Veh Make CHEVY Veh Conf							20				
⁸ 2		MES DA SILVA	ADEVALDO	Endorsment	Owner	M P MURPH	Y BU									
2 Last First Middle Last First Middle Address 29 LEXINGTON ST Address 23 EMMONSDALE RD																
		City WATERTOWN State MA Zip 02472					City WEST ROXBURY State MA Zip 02132								02132	
	Insurance Com	pany UNITED F	FINANCIAL CAS	GUALTY	Vehicle	e Action Prior t	o Cras	sh	1 21	Π	Dama	ged Area	Code	e: (Circ	le Up to Three	e)
	Vehicle Travel Direction: NSWW Responding to Emergency? N Citation # (If Issued) Violation 1: ChSec Violation 2: ChSec Violation 3: ChSec Violation 4: ChSec					Sequence 1	22	22	22	22	2	<u>(</u>)	4		
						Most Harmful Event 1 23 10 Undercarriag Driver Contributing Code 3 24 24 1 5 11 Totaled								age		
						Underride/Override 25 Towed N 8 7 6										
	Plo Name (Last Fi		operator and al	occupants involved		4/POP		26 Seat Pos.	27 Safety	28 Airbag Status	29 Airbag Ej	30 31 Frap	32 Injury	Transp.	Modinal E	
		Non-Motorist		See Above		Age/DOB	Sex	POS.		Status 4	Switch 0	Code Code 0	Status 10	1	Medical Facili	rà.
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Crash Narrative:

Operator #1 stated he was travelling northbound on Centre St crossing Sargent St when MV#2 ran the red light and they collided. His passengers stated their light was green. MV#1 suffered moderate damage to the front left side of the vehicle. Operator #2 stated he was travelling eastbound on Sargent St across Centre St where he had a green light when MV#1 ran through a red light at a high rate of speed. MV#2 suffered minor damage to the front right and was able to be driven from the scene. The owner of MV#2 (Matt Murphy - MP Murphy Builders) arrived on scene and was advised. No injuries reported.

On 11/23, an independent witness contacted the Newton Police Traffic Bureau. She indicated that Operator MV#2 ran the red light and was at fault for this accident. See narrative.

Witnesses:			
Name (Last, First, Middle)	Address	Phone #	Statement
CANTEN CANT NAMED (115 (apt 4) SEWALL AVE BROOKLINE,MA 02446		Υ

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

Truck and Bus Information:	Registration #	(From Vehic	ele Section)			
Carrier Name			_ Carrier Issuing Authority Code 35			
Address		City		St	Zip	
	State Number	Issuing State	ICC #:		Interstate 36	
Cargo Body Type Code Gross	s Vehicle Weight 38			39		
Trailer Reg #:	Reg Type Reg State	Reg Year	Trailer Leng			
Hazmat Information:						
Placard 40 Material 1 digit #	Material Name		Material 4 digit #		Release code 42	

MEGHAN E MCLEAN		38801	NEWTON POLICE DEPARTM		11/23/2021
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date