

Police Use Only			Commonwealth of Massachusetts				RMV Document Number							
Date of Crash 12/16/2021		Time of Crash 10:19 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 0	Speed Limit 25 Latitude _____ Longitude _____		State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other: <input type="checkbox"/>		
AT INTERSECTION:				< LOCATION >		NOT AT INTERSECTION:						9		
Route# Direction Name of Roadway/Street At				NORTH 888 WALNUT STREET								2		
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with				Route# Direction Address # Name of Roadway/Street Feet N S E W of _____ • _____ or _____ Mile Marker Exit Number								10		
Route# Direction Name of Intersecting Roadway/Street				Route# Intersecting Roadway/Street Feet N S E W of _____ Landmark								11		
3 1				<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 2100001054			2	
License # --- St MA DOB/Age ---				Reg # 2VG176 Reg Type PAN Reg State MA									12	
Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year 2017 Veh Make SUBARU Veh Config. 2 20									1	
Operator BROWN RISHEEN M				Owner BROWN TYLER J										
Address 24 PROSPECT PARK				Address 24 PROSPECT PARK										
City NEWTONVILLE State MA Zip 02460				City NEWTON State MA Zip 02460										
Insurance Company BANKERS STANDARD INSURANCE				Vehicle Action Prior to Crash 2 21				Damaged Area Code: (Circle Up to Three)						
Vehicle Travel Direction: X S E W Responding to Emergency? N				Event Sequence 1 22 22 22 22				2 3 4						
Citation # (If Issued) N/A				Most Harmful Event 1 23				1 9 10 Undercarriage						
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 1 24 24				8 7 6						
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed N										
Please fill out for operator and all occupants involved													13	
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													1	
Operator See Above				-----										
7 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 # M99235 Reg Type MVN Reg State MA										
Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year 2017 Veh Make FORD Veh Config. 2 20										
Operator WHOOTEN MARK				Owner CITY OF NEWTON										
Address 60 ELLIOT ST				Address 60 ELLIOT ST										
City NEWTON State MA Zip 02460				City NEWTON State MA Zip _____										
Insurance Company CITY OF NEWTON				Vehicle Action Prior to Crash 1 21				Damaged Area Code: (Circle Up to Three)						
Vehicle Travel Direction: X S E W Responding to Emergency? N				Event Sequence 1 22 22 22 22				2 3 4						
Citation # (If Issued) N/A				Most Harmful Event 1 23				1 9 10 Undercarriage						
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 5 24 24				5 11 Totaled						
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed N										
Please fill out for operator and all occupants involved														
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				-----										

→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

Walnut Street

Unit 1

Unit 2

1087 Beacon street

Beacon Street

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:**

Thursday, December 16, 2021, while assigned to Traffic unit N525, I responded to the area of Beacon Street and Walnut Street in Newton for a report of a crash involving a City of Newton owned vehicle. Beacon Street and Walnut Street are both public ways maintained by the City of Newton.

The operator of MV1, Ms. Risheen Brown (S34655505), stated she was operating her 2017 Subaru Forester (MA: 2VG176) on Walnut Street (N) past the Beacon Street intersection. Ms. Brown stated she slowed down in traffic to allow a vehicle in front of her make a turn. Ms. Brown stated MV 2 then crashed into the rear of her vehicle. I observed significant damage to the rear bumper/trunk area of MV1. Due to the damage to her vehicle, Ms. Brown was also advised to replace the two car seats in her vehicle. Ms. Brown reported no injuries on scene.

(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

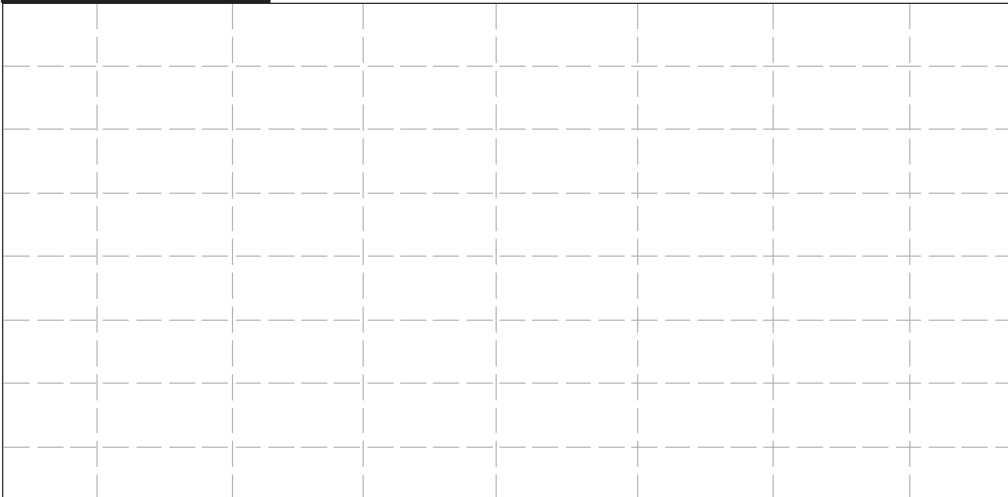
**Hazmat Information:**

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:

The operator of MV2, Mark Whooten (S39870664), stated he was operating a City of Newton owned Ford F-350 (MA MVN: M99235) on Walnut Street (N) past the Beacon Street intersection. Mr. Whooten stated the vehicle in front of him abruptly stopped in their travel lane to allow a vehicle to turn. The front of MV2 crashed into the rear of MV1. I observed minor damage to the front area of MV2. Mr. Whooten reported no injuries on scene. Mr. Whooten is an employee of the City of Newton DPW. Photos were taken and submitted to the IT Bureau.

#### 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

MICHAEL R GAUDET

NEWTON POLICE DEPART

12/16/2021

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date