

## Commonwealth of Massachusetts

Police Use Only			Motor Vehicle Crash Police Report				RMV Document Number				
Date of Crash 01/02/2022	Time of Crash 10:54 24HR	City/Town NEWTON	Number Vehicles 1	Number Injured 0	Speed Limit 10 Latitude Longitude	State Police Local Police MBTA Police Other:					
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:				
Route# Direction Name of Roadway/Street At			WEST 1210 CHESTNUT ST Route# Direction Address # Name of Roadway/Street								
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with			Feet N S E W of Mile Marker Exit Number								
Route# Direction Name of Intersecting Roadway/Street			Feet N S E W of Route# Intersecting Roadway/Street				Landmark				
<input checked="" type="checkbox"/> Vehicle 1 0 #Occupants			<input checked="" type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 22000002		
License # St DOB/Age			Reg # 5PB226 Reg Type PAN Reg State MA								
Sex Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsment			Veh Year 2013 Veh Make TOYOTA Veh Config. 1 20								
Operator Last First Middle			Owner ODVARKA JOSEPH DAVID								
Address			Address 1210 CHESTNUT STREET								
City State Zip			City NEWTON State MA Zip 02464								
Insurance Company SAFECO INSURANCE			Vehicle Action Prior to Crash 11 21			Damaged Area Code: (Circle Up to Three)					
Vehicle Travel Direction: N S E W Responding to Emergency? N			Event Sequence 10 22 22 22 22			10 Undercarriage					
Citation # (If Issued)			Most Harmful Event 10 23			5 11 Totaled					
Violation 1: Ch Sec Violation 2: Ch Sec			Driver Contributing Code 99 24 24								
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 See Above			-----								
Please Select One of the Following:			<input type="checkbox"/> Vehicle #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			Reg # Reg Type Reg State								
Sex Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsment			Veh Year Veh Make Veh Config. 20								
Operator Last First Middle			Owner Last First Middle								
Address			Address								
City State Zip			City State Zip								
Insurance Company			Vehicle Action Prior to Crash 21			Damaged Area Code: (Circle Up to Three)					
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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:**

Brickfire Pizza Co. 1214 Chestnut Street    All Star Liquor 1220 Chestnut Street

1210 Chestnut Street

Chestnut Street

1201 - 1219 Chestnut Street

Oak Street

Indicate North by Arrow

NOT TO SCALE

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

**Crash Narrative:**

On Sunday 1/2/22 at approximately 1054 hours while assigned to marked unit n498 I was dispatched to the area of 1210 Chestnut Street for a report of a past Hit and Run.

Upon arrival I spoke with the damaged vehicle's owner, ODVARKA Joseph, who states last night he parked his vehicle around 4:30pm in his parking spot that runs along a fence bordering the parking lot of Brickfire Pizza and Allstar Liquors (1214 - 1220 Chestnut Street). ODVARKA states between the hours of 4:30pm and 8:30pm last night someone struck the fence on the other side causing it to buckle and do damage to the passenger side of ODVARKA's vehicle.

After speaking with ODVARKA I canvassed the area and noticed surveillance cameras at Brickfire Pizza and All Star Liquors. The owner of Brickfire states to the camera only captures footage from the front door and

(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

ALAN JR RICHARD SOLOMAN.    NEWTON POLICE DEPT.    01/02/2022

Police Officer Name (Please Print)    Signature    ID/Badge #    Department    Precinct/Barracks    Date

CDP1 11 -24:00

→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

Crash Diagram:

ie: → 1 → 2 →



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:

inside the establishment. The owner of All Star Liquor states his cameras only capture footage from the front of the store and the inside and the cameras are real time only and do not record. Businesses across the street were not open and I did not observe any external cameras.

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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 35

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ ICC #: \_\_\_\_\_ Interstate 36

Cargo Body Type Code 37 Gross Vehicle Weight 38

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length 39

Hazmat Information:

Placard 40 Material 1 digit # 41 Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code 42

ALAN JR RICHARD SOLOMAN.

NEWTON POLICE DEPART

01/02/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date