

Police Use Only			Commonwealth of Massachusetts				RMV Document Number				
Date of Crash 01/20/2022	Time of Crash 08:32 24HR	City/Town NEWTON	Motor Vehicle Crash Police Report				Number Vehicles 2	Number Injured 0	Speed Limit <u>25</u> 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:				
Route# _____ Direction _____ Name of Roadway/Street _____ At _____			EAST 1446 BEACON ST Route# _____ Direction _____ Address # _____ Name of Roadway/Street _____ Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ • _____ or _____ Mile Marker _____ Exit Number _____ Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ Route# _____ Intersecting Roadway/Street _____ Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ Landmark _____								
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____ Also at Intersection with _____											
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____											
<input checked="" type="checkbox"/> Vehicle 1 <u>3</u> #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 22000056		
License # _____ St MA DOB/Age _____			Reg # 109403 Reg Type SPN Reg State MA			Sex M Lic. Class <u>D</u> <u>18</u> <u>18</u> Lic. Restrictions <u>1</u> <u>19</u> CDL _____			Veh Year 2019 Veh Make FORD Veh Config. <u>2</u> <u>20</u>		
Operator GHERA RALPH Last First Middle			Owner JSC TRANSPORTATI Last First Middle			Address 525 NORTHWEST DR			Address 224 CALVARY STREET		
City NORWOOD State MA Zip 02062			City WALTHAM State MA Zip 02452			Insurance Company NATIONAL INTERSTATE			Vehicle Action Prior to Crash <u>11</u> <u>21</u> Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> W Responding to Emergency? <u>N</u>			Event Sequence <u>1</u> <u>22</u> <u>22</u> <u>22</u> <u>22</u>			Most Harmful Event <u>1</u> <u>23</u>			Driver Contributing Code <u>1</u> <u>24</u> <u>24</u>		
Citation # (If Issued) <u>N/A</u>			Underride/Override <u>25</u> Towed <u>N</u>			Citation # (If Issued) <u>N/A</u>			Citation # (If Issued) <u>N/A</u>		
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____			Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____			Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____			Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____		
Please fill out for operator and all occupants involved										13	
Name (Last First Middle)			Address			Age/DOB		Sex		26 Seat Pos.	
Operator			See Above			-----		---		27 Safety System	
GHERA, JEAN			525 NORWEST DR NORWOOD, MA 02062			-----		F		28 Airbag Status	
GLENNON, ELLA			1452 BEACON STREET NEWTON, MA 02468			-----		F		29 Airbag Switch	
										30 Eject Code	
										31 Trap Code	
										32 Injury Status	
										33 Transp. Code	
										Medical Facility	
Please Select One of the Following: <input checked="" type="checkbox"/> Vehicle 2 <u>2</u> #Occupants										14	
<input type="checkbox"/> Non-Motorist A Type										15	
Action										16	
Location										17	
Condition										17	
<input type="checkbox"/> Hit/Run										<input type="checkbox"/> Moped	
License # _____ St MA DOB/Age _____			Reg # 3AB494 Reg Type PAN Reg State MA			Sex M Lic. Class <u>D</u> <u>18</u> <u>18</u> Lic. Restrictions <u>B</u> <u>19</u> CDL _____			Veh Year 2020 Veh Make LINCOLN Veh Config. <u>2</u> <u>20</u>		
Operator ZHANG YIPEI Last First Middle			Owner (Same as operator) Last First Middle			Address 20 PETTEE STREET			Address _____		
City NEWTON State MA Zip 02464			City _____ State _____ Zip _____			Insurance Company PROGRESSIVE			Vehicle Action Prior to Crash <u>1</u> <u>21</u> Damaged Area Code: (Circle Up to Three)		
Vehicle Travel Direction: <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> W Responding to Emergency? <u>N</u>			Event Sequence <u>2</u> <u>22</u> <u>22</u> <u>22</u> <u>22</u>			Most Harmful Event <u>2</u> <u>23</u>			Driver Contributing Code <u>19</u> <u>24</u> <u>24</u>		
Citation # (If Issued) <u>265793AB</u>			Underride/Override <u>25</u> Towed <u>N</u>			Citation # (If Issued) <u>265793AB</u>			Citation # (If Issued) <u>265793AB</u>		
Violation 1: Ch <u>90/14/C</u> Sec _____ Violation 2: Ch _____ Sec _____			Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____			Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____			Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____		
Please fill out for operator and all occupants involved										13	
Name (Last First Middle)			Address			Age/DOB		Sex		26 Seat Pos.	
Operator/Non-Motorist			See Above			-----		---		27 Safety System	
ZHANG, BELLA			20 PETTEE STREET NEWTON, MA 02464			-----		F		28 Airbag Status	
										29 Airbag Switch	
										30 Eject Code	
										31 Trap Code	
										32 Injury Status	
										33 Transp. Code	
										Medical Facility	

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

Beacon Street

1446 Beacon Street

MV2

MV1

← N →

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:

On Thursday, January 20, 2022, while assigned to Traffic unit N525, I responded to the area of 1446 Beacon Street, Newton for a report of an MVA involving a City of Newton contracted school bus. The weather at the time of the crash was light rain. The road surface was wet. Beacon Street is a public way maintained by the City of Newton.

I spoke with the operator of MV1, Mr. Ralph Ghera (S43446773). Mr. Ghera stated he is a driver for JSC Transportation (contracted by the City of Newton) and was picking up a student to transport them to Newton South High School. Mr. Ghera stated his vehicle, a 2019 Ford Transit Van (MA SPN: 109403), was parked in front of Beacon Street (E) with it's red flashing lights activated while Ms. Ella Glennon was entering the vehicle for transport.

(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

MICHAEL R GAUDET

NEWTON POLICE DEPART

01/20/2022

Police Officer Name (Please Print)


Signature


ID/Badge #

Department

Precinct/Barracks

Date

→ 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:

At this time, MV2 (2020 Lincoln Aviator (MA: 3AB494) travelled past MV1 Eastbound on Beacon Street and disregarded the flashing lights that were activated on the van. MV2's front passenger side door mirror made contact with MV1's front driver side door mirror. I observed very minor damage to the mirrors on both vehicles. No injuries were reported.

I spoke with Ella's father, Ian Glennon, on scene and made him aware of his daughters involvement in the crash. Mr. Glennon stated his daughter was not injured. Ella was then transported to Newton South by Mr. Ghera.

The operator of MV2, Mr. Yipei Zhang (S13848781), was issued Massachusetts Uniform Citation 265793AB in hand for Chapter 90, Section 14 (Fail to stop for a school bus). Photos were taken 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

MICHAEL R GAUDET

NEWTON POLICE DEPT.

01/20/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

