

Commonwealth of Massachusetts

Police Use Only

RMV Document Number

Date of Crash 02/03/2022 Time of Crash 15:45 City/Town NEWTON

Motor Vehicle Crash Police Report

Number Vehicles 2 Number Injured 0 Speed Limit 25 State Police Local Police MBTA Police Other: X

AT INTERSECTION:

< LOCATION >

NOT AT INTERSECTION:

NORTH CHESTNUT ST Route# Direction Name of Roadway/Street At EAST MOFFAT RD Route# Direction Name of Intersecting Roadway/Street Also at Intersection with

Route# Direction Address # Name of Roadway/Street Feet N S E W of Mile Marker Exit Number Feet N S E W of Route# Intersecting Roadway/Street Feet N S E W of Landmark

Vehicle 1 Occupants Hit/Run Moped Case Number 22000102

License # --- St MA DOB/Age --- Reg # 12230 Reg Type PAN Reg State MA Sex F Lic. Class D 18 18 Lic. Restrictions B 19 CDL Endorsment Veh Year 2016 Veh Make SUBARU Veh Config. 2 20 Operator BURROUGHS ALLISON Owner (Same as operator) Address 70 MOFFAT RD City NEWTON State MA Zip 02468

Insurance Company AMICA Vehicle Action Prior to Crash 4 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 4 24 24 Underride/Override 25 Towed N

Table with 13 columns: Name, Address, Age/DOB, Sex, Seat Pos., Safety System, Airbag Status, Airbag Switch, Eject Code, Trap Code, Injury Status, Transp. Code, Medical Facility. Row 1: Operator, See Above, ---, ---, ---, 1, 4, 4, 0, 0, 10, 1, ---

Please Select One of the Following: X Vehicle 2 Occupants Non-Motorist A Type 14 Action 15 Location 16 Condition 17 Hit/Run Moped

License # --- St MA DOB/Age --- Reg # 9DC379 Reg Type PAN Reg State MA Sex M Lic. Class D 18 18 Lic. Restrictions B 19 CDL Endorsment Veh Year 2019 Veh Make MERCEDES Veh Config. 1 20 Operator KESSEL OMRI Owner (Same as operator) Address 69 MOFFAT ROAD City NEWTON State MA Zip 02468

Insurance Company SAFETY Vehicle Action Prior to Crash 4 21 Damaged Area Code: (Circle Up to Three) Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 1 24 24 Underride/Override 25 Towed N

Table with 13 columns: Name, Address, Age/DOB, Sex, Seat Pos., Safety System, Airbag Status, Airbag Switch, Eject Code, Trap Code, Injury Status, Transp. Code, Medical Facility. Row 1: Operator/Non-Motorist, See Above, ---, ---, ---, 1, 4, 4, 0, 0, 10, 1, ---

→ Direction 1 = Vehicle 1 2 = Vehicle 2 ⊕ Pedestrian
 ie: → 1 → 2 →

Crash Diagram:

Crash Narrative:

On 02/03/2022, while assigned to N497, I, Officer Conary, and Officer Durickas, responded to a minor MVA. Upon arrival, I spoke with Operator of MV1 who stated that she was stopped at the stop sign on Moffat Road about to make a left turn. Operator of MV1 entered traffic and hit MV2. MV2 was traveling Northbound on Chestnut Street and was taking a left turn on Moffat Road when MV1 hit him on the front left side. Operator of MV1 stated that MV2 did not see him, she was looking at the traffic coming from the left.

There was minor damage to the right front of MV1. There was damage to the left front side of MV2. MV2 had to be towed. Both operators were offered and declined medical treatment.

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

KRISTINA CONARY

NEWTON POLICE DEPART

02/03/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date