

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 02/15/2022		Time of Crash 04:04 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 1	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 _____				SOUTH 619 CHESTNUT ST Route# _____ Direction _____ Address # _____ Name of Roadway/Street _____ Feet [N][S][E][W] of _____ • _____ or _____ Mile Marker _____ Exit Number _____								2	
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____ Also at Intersection with _____				Feet [N][S][E][W] of _____ Route# _____ Intersecting Roadway/Street _____								10	
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____				Feet [N][S][E][W] of _____ Landmark _____								11	
<input checked="" type="checkbox"/> Vehicle 1 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000152						3	
License # _____ St MA DOB/Age _____ Sex F Lic. Class [D][18][18] Lic. Restrictions [1][19] CDL _____ Operator CHEN EMILY Address 1101 CHESTNUT ST. (apt. B) City NEWTON State MA Zip 02464 Insurance Company PROGRESSIVE				Reg # 561VB6 Reg Type PAN Reg State MA Veh Year 2013 Veh Make HONDA Veh Config. [1][20] Owner CHEN JAY L Address 1101 (apt. B) CHESTNUT ST City NEWTON State MA Zip 02464 Vehicle Action Prior to Crash [1][21] Damaged Area Code: (Circle Up to Three) Event Sequence [22][22][22][22] ② Most Harmful Event [22][23] Driver Contributing Code [21][24][24] Underride/Override [25] Towed Y								12	
Vehicle Travel Direction: [N][X][E][W] Responding to Emergency? N Citation # (If Issued) _____ Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				 10 Undercarriage 11 Totaled								5	
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				22									
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 _____ Sex _____ Lic. Class [18][18] Lic. Restrictions [19] CDL _____ Operator _____ Address _____ City _____ State _____ Zip _____ Insurance Company _____ Vehicle Travel Direction: [N][S][E][W] Responding to Emergency? _____ Citation # (If Issued) _____ Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Reg # _____ Reg Type _____ Reg State _____ Veh Year _____ Veh Make _____ Veh Config. [20] Owner _____ Address _____ City _____ State _____ Zip _____ Vehicle Action Prior to Crash [21] Damaged Area Code: (Circle Up to Three) Event Sequence [22][22][22][22] 2 Most Harmful Event [23] Driver Contributing Code [24][24] Underride/Override [25] Towed _____  10 Undercarriage 11 Totaled								8	
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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				22									
Operator/Non-Motorist See Above													

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    → Pedestrian

**Crash Diagram:**

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 February 15, 2022 at approximately 0404hrs, Mv1 was traveling Southbound on Chestnut St., when the operator of the vehicle fell asleep at the wheel, causing her vehicle to hop the curb and strike a telephone pole and Federal Mailbox in front of 619 Chestnut St.

Operator stated she was returning home late from a friends house and did not realize how tired she was and fell asleep, while driving.

Newton Fire Department and Fallon Ambulance Service responded to evaluate the operator. Operator stated she way okay and signed a patient refusal.

The telephone pole did not appear to have sustained any damage, but National Grid was made aware in order to later inspect the pole. The U.S. Postal Service was also made aware of the damaged postal box in order to

(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
''	,		4	NATIONAL GRID UTILITY POLE
''	,		97	UNITED STATES GREEN POSTAL MAIL BOX

**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

Crash Narrative:	
replace it.	
The vehicle sustained heavy front end damage, consisting also of deployed air bags. Todays Towing Service was notified and arrived on scene to tow the vehicle.	
Pictures were taken of the scene and have been sent to the IT Bureau to be attached to this report.	

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

JEREMY FAY			NEWTON POLICE DEPT.		02/15/2022
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11:24:00					