

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

Cypress St

15 Cypress office building

Unit 1

Pole

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:

Mv#1, observed by a witness, had just backed up and knocked over a City flashing beacon crosswalk sign pole in front of 15 Cypress St. The witness observed #1, a Ryder truck, drive forward, bearing NH reg 497 0874 and turn around. The witness stated she saw the operator stop across the street and stare at the downed pole for a few moments. The operator was then observed drive away onto Centre St. #1 operator was soon after identified as a delivery driver who had just made a delivery at 15 Cypress at a neighboring office. I made contact with the driver from on scene and he returned to the scene. Photos of damage taken by Traffic Ofc Gaudet. #1 operator issued citation for 90/24 Leaving the Scene of Property Damage and CO 19/75 Failure to Use Care Backing. See incident report #22012337 for more details.

Witnesses:

Name (Last, First, Middle)	Address	Phone #	Statement
POWELL, KASSANDRA,	15 CYPRESS ST NEWTON, MA 02459	-----	N

Property Damage:

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property
CITY OF, NEWTON,	1000 COMMONWEALTH AVE NEWTON, MASSACHUSETTS 0	617-796-1000	3	FLASHING BEACON CROSSWALK POLE

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

ADAM D GABRIEL	25117	NEWTON POLICE DEPART	04/07/2022
Police Officer Name (Please Print)	Signature	ID/Badge #	Department
			Precinct/Barracks
			Date