	Poli	ice Use Only		Common	wealth	of Ma	ssacl	huse	etts			RMV	/ Docu	ıment	Number		
	Date of Crash 04/12/2022	Time of Crash	1	Mo	otor V	ehicle C	crash	Nu Vel	mber hicles	Numbe		ed Limi tude		Sta Lo	te Police cal Police 3TA Police	□ X ì	
	04/12/2022	16:14 24HR	NEWTON		Police	Repor	t	2		1		gitude_		Otl	BTA Police her:		
		AT INTER	LOC	CATION		NOT AT IN				NTERSECTION:							
	SOU	TH ADAM	S ST														
1 1	Route# Direct									Name of Roadway/Street							
	EAST WATERTOWN ST					Feet NSEW of or Exit Number										2	
	Route# Direction Name of Intersecting Roadway/Street Also at Intersection with					Feet NSEW of											
2			Route# Intersecting Roadway/Street Feet N S E W of														
² 1	Route# Direct		Route# Intersecting Roadway/Street Feet N S E W of Landmark														
3	XVehicle1 1 #Occupants																
	Vehicle1	#Occupants	Hit/Run	Moped	Case Num	ber		220003	304							_	
	License#	Re	Reg # 3LJ467 Reg Type PAN Reg State MA														
	Sex_F Lic. 0	Ve	Veh Year 2016 Veh Make TOYOTA Veh Config. 1 20														
4	Operator RUI	ent Ov	ner (Same as	operator)		First			Midd	IIe .		_				
3	Operator RUFO DOLORES Last First Middle Address 34 MELBOURNE AVE					dress							Midd			_	
	City NEWTO	Ci															
	Insurance Com		Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)														
5	Vehicle Travel	? N Ev	Event Sequence 1 22 22 22 22 2 3 4														
1		ssued)				ost Harmful Ev		23		\Box		M			0 Undercarr	riage	
		-		2: ChSec		iver Contributir	_	99 2	24	24 0	←	9		5 1	1 Totaled		
⁶ 1	1			4: Ch Sec		derride/Overrid		25	Towed	8` Y		7		6			
_			ator and all occu			demac/overne					9 30 ag Eject	31	32 Injury T	33		\dashv	
	Name (Last First Middle) Address					Age/DO			1 1	28 2 irbag Airb status Swit		Code	Status (Medical Facili	ity 1	
	Operator			See Abov	/e				1 4	1	0	0	10	1			
⁷ 2	Please Select C of the Followin		2 <u>1</u> #Occupan	ts Non-Motoris	t A Type	14 Action	15 I	ocation	10	6 Cond	ition	17	□⊦	Hit/Rur	Мор	ed	
	MA					g # 2FVN85			Reg Type PAN				Reg State MA			_	
	License# St MA DOB/Age St MA DOB/Age Lic. Restrictions 1 CDL					h Year 2020					20	-					
8	Operator HER		LINDA	Endorsme	ent	ner HERMA		Veh Ma	HILIP				_ ven C	onng.	1		
1				Last			First			Midd	lle		-				
	Address 301 BERKELEY ST (apt. 2A)					Address 301 (apt. 2A) BERKELEY ST City BOSTON State MA Zip 024116										-	
	City BOSTON State MA Zip 02116					y BOSTON			21	1 -	lanes -				Up to Thr	-	
	Insurance Company ARBELLA					hicle Action Pr	ior to Cra		1		amage	d Area	Code:	(Circle	∵∪p to Thr	ee)	
	Vehicle Travel Direction: NSWW Responding to Emergency?N					ent Sequence	1 22	22	22	22 2		<u> </u>) 1	0 Undercarr	riage	
	Citation # (If Is	Mo	Most Harmful Event 1 5 11 Totaled														
	Violation	Dr	Driver Contributing Code 99 24 24														
	Violatio		Underride/Override Towed Y 8 6														
	Plo Name (Last Fi		operator and al	occupants involved		Age/D0	OB Sex	26 Seat Pos.	27 Safety A System	28 2 irbag Airb Status Swi	9 30 Eject tch Cod	31 Trap		ransp. Code	Medical Faci	lity	
		Non-Motorist		See Abov					1 3		0	0			NEWTON WELLES		
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