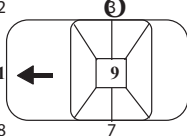
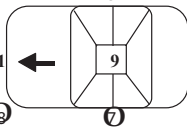


Police Use Only			Commonwealth of Massachusetts				RMV Document Number							
Date of Crash 04/20/2022		Time of Crash 14:02 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 0	Speed Limit 25 Latitude _____ Longitude _____		State Police <input type="checkbox"/> 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 275 WASHINGTON ST		Route# Direction Address # Name of Roadway/Street						2		
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with				Feet N S E W of _____ • _____ or _____ Mile Marker Exit Number		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 1 #Occupants				<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000323					4	
License # --- St MA DOB/Age ---				Reg # 1AB55A Reg Type APN Reg State MA		Sex M Lic. Class A 18 18 Lic. Restrictions 1 19 CDL T Endorsment						12		
Operator DONOVAN MICHAEL K				Veh Year 2014 Veh Make PTRB Veh Config. 8 20		Owner LATOUR AND SONS						1		
Address 100 TOBIN ROAD				Address PO BOX 1038		City CHERRY VALLEY State MA Zip 01611								
City CHERRY VALLEY State MA Zip 01611				City CHARLTON CITY State MA Zip 01508		Insurance Company COMMERCE								
Vehicle Travel Direction: N X E W Responding to Emergency? N				Vehicle Action Prior to Crash 1 21		Event Sequence 1 22 22 22 22 2								
Citation # (If Issued) N/A				Most Harmful Event 1 23		Driver Contributing Code 1 24 24								
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Underride/Override 25 Towed N		Damaged Area Code: (Circle Up to Three)								
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. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code Medical Facility												1		
Operator See Above				-----		99 4 99 0 0 10 1 N/A								
Please Select One of the Following: <input checked="" type="checkbox"/> Vehicle 2 1 #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 MA DOB/Age ---				Reg # 722XV4 Reg Type PAN Reg State MA		Sex M Lic. Class D 18 M 18 Lic. Restrictions 1 19 CDL Endorsment						20		
Operator BERGANTI CHRISTOPHER ROSS				Veh Year 2018 Veh Make KIA Veh Config. 1		Owner (Same as operator)								
Address 74 COX STREET (apt. 12)				Address		City HUDSON State MA Zip 01749								
City HUDSON State MA Zip 01749				City		Insurance Company STANDARD FIRE								
Vehicle Travel Direction: N X E W Responding to Emergency? N				Vehicle Action Prior to Crash 2 21		Event Sequence 1 22 22 22 22 2								
Citation # (If Issued) N/A				Most Harmful Event 1 23		Driver Contributing Code 9 24 24								
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Underride/Override 25 Towed Y		Damaged Area Code: (Circle Up to Three)								
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. 27 Safety System 28 Airbag Status 29 Airbag Switch 30 Eject Code 31 Trap Code 32 Injury Status 33 Transp. Code Medical Facility												1		
Operator/Non-Motorist See Above				-----		99 4 99 0 0 10 1 N/A								

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

275 Washington Street (One Newton Place)

Washington Street

Unit 1

Unit 2

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 Wednesday, April 20, 2022 while assigned to unit N491, I responded to the area of 275 Washington Street, Newton for a report of a MVA involving a tractor trailer. Washington Street is a public way maintained by the City of Newton. The weather at the time of the crash was clear and sunny. The road surface was dry. The operator of MV1, Mr. Michael Donovan (S45451533), stated he was operating his 2014 PTRB 388 Tractor Truck (MA: 1AB55A) on Washington Street (S) past One Newton Place. Mr. Donovan stated he came to a stop at the red light at this intersection and was intending on proceeding straight onto the I-90 (W) onramp. Mr. Donovan stated his vehicle was affixed to a 2009 trailer (ME: 2373708) at the time of the crash. Mr. Donovan stated as the light at the intersection turned green, he proceeded to travel forward and the passenger side of his trailer crashed into a vehicle stopped in the roadway to his

(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 # 1AB55A (From Vehicle Section)

Carrier Name _____ Carrier Issuing Authority Code 35

Address _____ City _____ St _____ Zip _____

US DOT #: _____ State Number _____ Issuing State _____ ICC #: _____ Interstate 36

Cargo Body Type Code 37 Gross Vehicle Weight 38

Trailer Reg #: 2373708 Reg Type TRL Reg State MAINE Reg Year 2009 Trailer Length 2 39

Hazmat Information:

Placard 40 Material 1 digit # 41 Material Name _____ Material 4 digit # _____ Release code 42

MICHAEL R GAUDET

NEWTON POLICE DEPART

04/20/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

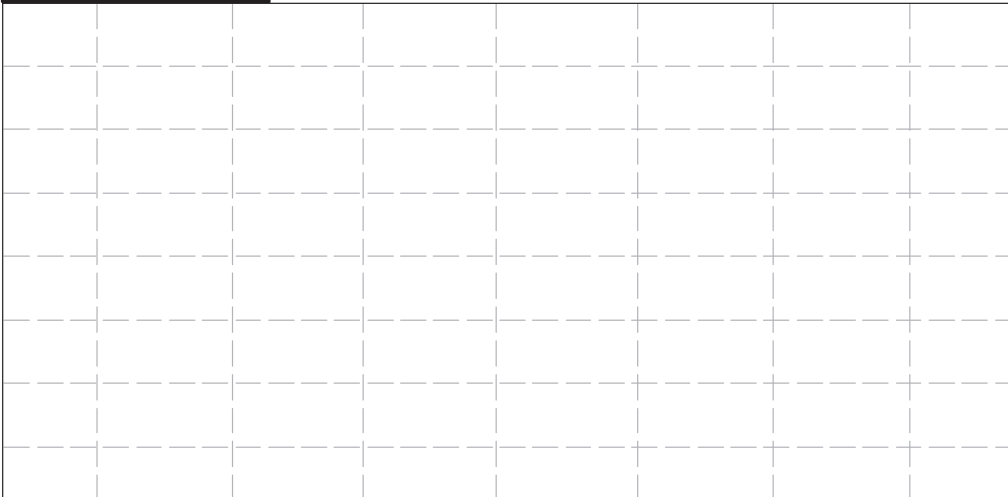
Precinct/Barracks

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:

right. The two vehicle became stuck due to the impact. Mr. Donovan reported no injuries. I observed minor damage to the middle passenger side area of the trailer Mr. Donovan was towing.

The operator of MV2, Mr. Christopher Berganti (S43175732), stated he was operating his 2018 Kia Stinger (MA: 722XV4) on Washington Street (S) past One Newton Place. Mr. Berganti stated he merged into the left lane at the intersection to continue straight onto the I-90 (W) onramp. Mr. Berganti believe the travel lane at the intersection near the light was for two lanes of travel. As the light turned green, the vehicle to his left (MV1), began to travel straight through the intersection. Due to the length of the tractor trailer, as it was navigating it's way through the travel lane it's passenger side crashed into entire length of MV2's driver side. Mr. Berganti stated he attempted to pull to the right prior to impact

(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 35

Address _____ City _____ St _____ Zip _____

US DOT #: _____ State Number _____ Issuing State _____ ICC #: _____ Interstate 36

Cargo Body Type Code 37 Gross Vehicle Weight 38

Trailer Reg #: _____ Reg Type _____ Reg State _____ Reg Year _____ Trailer Length 39

Hazmat Information:

Placard 40 Material 1 digit # 41 Material Name _____ Material 4 digit # _____ Release code 42

MICHAEL R GAUDET

NEWTON POLICE DEPART

04/20/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

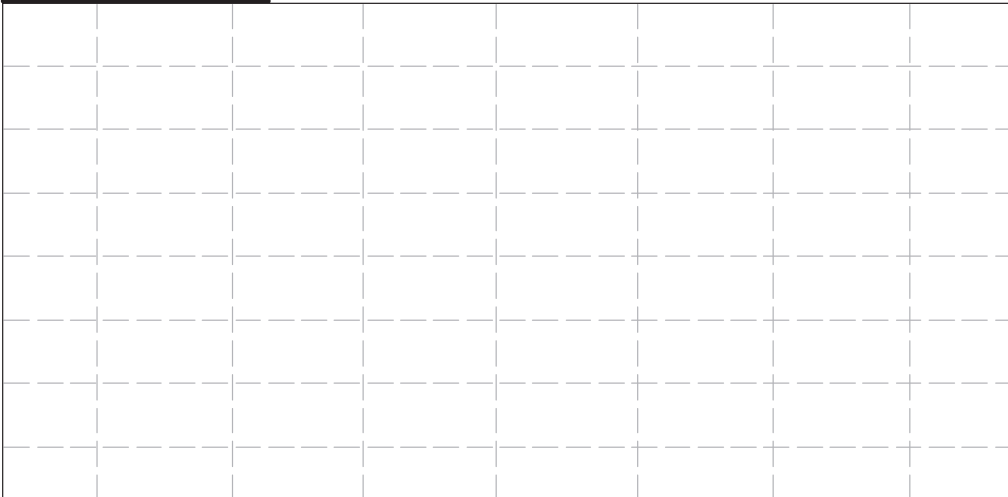
Precinct/Barracks

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:

but was unsuccessful. Mr. Berganti reported no injuries. I observed significant damage to the entire driver side of MV2. MV2 was removed from the roadway by Tody's towing.

It should be noted in the area where the crash occurred, it is wide enough to support two lanes of travel but it is not lined. Traffic was observed occupying two lanes in this area but it is unclear due to a lack of markings whether or not it is intended to support 1 or 2 lanes of travel.

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 35

Address _____ City _____ St _____ Zip _____

US DOT #: _____ State Number _____ Issuing State _____ ICC #: _____ Interstate 36

Cargo Body Type Code 37 Gross Vehicle Weight 38

Trailer Reg #: _____ Reg Type _____ Reg State _____ Reg Year _____ Trailer Length 39

Hazmat Information:

Placard 40 Material 1 digit # 41 Material Name _____ Material 4 digit # _____ Release code 42

MICHAEL R GAUDET

NEWTON POLICE DEPART

04/20/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date