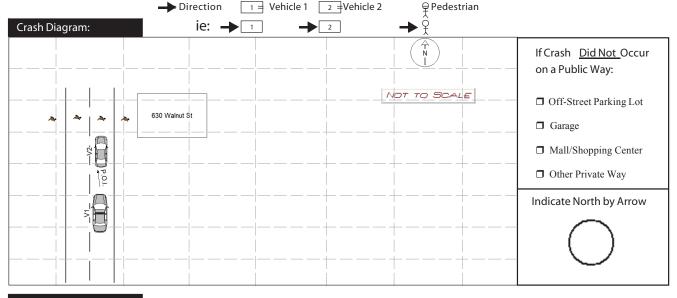
Poli	ce Use Only		Commony	wealth	of Massa	achus	etts				ument Nun	
Date of Crash 05/22/2022	Time of Crash 17:41	City/To NEWTON	Mo Mo	tor Ve	hicle Cra	sh N	lumber ehicles	Number Injured	Speed Li Latitude		State Po	olice Dice Nolice
03/22/2022	24HR				Report		2	0	Longitud		Other:	Police 🔲
	AT INTER	RSECTION:	<	LOCA	ATION	>		NOT	AT IN	ΓERSI	ECTION:	}
					NORTH	630		WALNU	T ST			
Route# Direction Name of Roadway/Street					Route# Direction Address # Name of Roadway/Street							
_			At		Feet [N S E W	of _		_ • _	- or		
Route# Direc	tion 1	Name of Intersection	ng Roadway/Street				,	Mile Ma	ırker		Exit Nur	nber
		Also at Inter	section with		Feet [N S E W	of	Route#	Inter	secting Ro	oadway/Stree	<u></u>
Route# Direct					Feet [N S E W	of					
Route# Direct	tion	Name of Interse	cting Roadway/Street							Landmark		
XVehicle1	#Occupants	Hit/Run	Moped	Case Numbe	r	2200	0435					
License#		St M	A DOB/Age	Reg	# MP504B			Reg Typ	_e MVN	Re	eg State_MA	
Sex M Lic. (Olass D 18 1		19		Year_2017	Veh M					Config. 2	20
	LY Last	_	Endorsmen	4	er CITY OF NEV					ven e	Johns.	
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City NEWTO			ate MA Zip 02465		NEWTON				Str	MA	Zip_02465	
	pany CITY OF N				cle Action Prior to	Crash	21				(Circle Up t	
			oonding to Emergency?			22 22	22	<u>22</u> 2		3	4	
	ssued)		onding to Emergency:		: Harmful Event	23				\prod	10 Uno	dercarriage
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		ator and all occu			emde/Overnde [20 Seat			30 Eject Tra	31 32 Injury	33	
Name (Last Fir			Address		Age/DOB	Sex Pos.		28 29 irbag Airbag Status Switch				al Facility
Operator			See Above				- 1 4	1 99	0 0	10	1	
Please Select C		e2 1_#Occupan	Non-Motorist A	A Type	14 Action 1	5 Locatio	on 10	6 Conditi	ion 1	7 0	Hit/Run	Moped
License#		St M	A DOB/Age	Reg	_# 73ZK69			Reg Typ	e PAN	Re	eg State_MA	
Sex_F Lic. 0	Class D 18 1	Lic. Restriction	19			Veh N					Config. 1	20
Operator KAN		SARA	Endorsmen	ıt	er (Same as ope							
Address 221 D	Last	First	Middle		Las	t		First		Mid	dle	
City NEWTO		St	ate MA Zip 02468						St	ate	Zip	
	_{pany} ARBELLA				cle Action Prior to		21] Da			(Circle Up t	to Three)
Vehicle Travel	_		sponding to Emergency?		t Sequence 1	22 22		<u>22</u> 2		3	4	
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1	,	ec Violatio	on 2: Ch Sec		er Contributing Co	1 20 ode 99	24	24	┺╽┟	9	(3) 11 Tot	aled
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			occupants involved	Ulide	Jiido Override	20 Seat		28 29 irbag Airbag	30 C Eject Tra	31 32	33	
Name (Last Fi	rst Middle)		Address		Age/DOB	Sex Pos	s. System	Status Switc	h Code Co	de Status		cal Facility
Operator/	Non-Motorist		See Above				- 99	4 99	0 0	10	1	



Crash Narrative:

On Sunday, May 22nd 2022, at approximately 17:41, I, Sgt. Roche, was dispatched to a two car MVA, involving Newton cruiser 504. Upon arrival, I spoke with the operator of vehicle 1, who stated that he was driving northbound on Walnut St, when vehicle 2 suddenly slammed on the brakes. He tried to slam on the brakes, and turn out of the way. He ended up striking the back of vehicle 2. He exited the vehicle apologized for bumping her, and asked if she was injured. The operator of vehicle 2 stated that a group of geese were crossing the street, and she had to suddenly stop to avoid hitting them. She stated that we needed to understand that the geese cross the street in this area, and that turkeys cross the street in a certain area of Beacon St. She wanted us to be more careful in these particular areas, and that we should know that these are the specific areas that these animals cross. I advised her that the Officers in the City of Newton are

(Continued on next page) Witnesses: Address Name (Last, First, Middle) Phone # Statement **Property Damage:** Owner (Last, First, Middle) Address Phone # 34-Type Description of Damaged Property Truck and Bus Information: Registration #_____(From Vehicle Section) 35 Carrier Name _ ___ Carrier Issuing Authority Code Address__ US DOT #: ____ State Number ____ Issuing State ____ ICC #:___ Cargo Body Type Code Gross Vehicle Weight Reg Type_____ Reg State _____ Reg Year____ Trailer Length Trailer Reg #: Hazmat Information: Material Name______ Material 4 digit #______ Release code Placard Material 1 digit #

TIMOTHY ROCHE		NEWTON POLICE DEPARTA				
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date	

-	Direction	1 = Vehicle 1	₂ ≠Vehicle 2	Pedestria	an	
Crash Diagram:	ie: → 🗌	1 -	2	▶ ♀		
					If Crash <u>Did Not</u> on a Public Way:	_Occur
					Off-Street Parki	ng Lot
			į		☐ Mall/Shopping (Center
		_	_ — — — —		Other Private W	ay
					Indicate North by	Arrow
		 - +				
					()	
Crash Narrative:			!			
always very careful while	driving, and	that today was	an accident	that occu	rred. I asked her to su	pply her
license, and registration.	She said she	e was not comí	fortable doing	that, and	that she did not trust	police,
and that "it was not going	to go in her	favor." I ac	dvised her tha	t I am on	scene to take statements	and
facts from both parties, a	nd that all	of it would be	included in	the report	. At this point she han	ded me
the license and registrati	on. Vehicle	2 had a small	dent to the co	enter rear	bumper. Vehicle 1 had	minor
damage to the front push b	ar. Both veh	icles were abl	le to drive awa	ay from th	e scene. No injuries oc	curred
due to the accident. Pictu	res were take	n, and submitt	ted to the IT	Bureau.		
Witnesses:						
Name (Last, First, Middle)		Address			Phone #	Statement
Property Damage:						
Owner (Last, First, Middle)		Phone #	34-Type	Description of Damaged Property		
Truck and Bus Information:	Registration #		(From Vel	nicle Section)		
Carrier Name	_			,	Carrier Issuing Authority Co	ode 35
Address			City		St Zip	
US DOT #:	State Number		Issuing State	ICC #:	Interstate	36
Cargo Body Type Code Grow	ss Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Year_	Trai	ler Length 39	
Hazmat Information:	44					(2)
Placard 40 Material 1 digit #	# Material	Name		_ Material 4 di	git # Release code	42
					L	

ID/Badge #

Signature

Department

Precinct/Barracks

Date

Police Officer Name (Please Print)