

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 05/24/2022		Time of Crash 08:39 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				EAST 455 NAHANTON ST Route# Direction Address # Name of Roadway/Street Feet N S E W of _____ Mile Marker _____ Exit Number _____ Feet N S E W of _____ Feet N S E W of _____ Route# Intersecting Roadway/Street _____ Landmark _____								2 10	
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with												11	
Route# Direction Name of Intersecting Roadway/Street												1	
<input checked="" type="checkbox"/> Vehicle 1 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000442						3	
License # --- St MA DOB/Age --- Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____ Operator PAUL GELNY Address 23 ROAD A (apt. A) City EVERETT State MA Zip 02149 Insurance Company LIBERTY MUTUAL				Reg # 1YJV68 Reg Type PAN Reg State MA Veh Year 2014 Veh Make TOYOTA Veh Config. 2 20 Owner (Same as operator) Address _____ City _____ State _____ Zip _____ Vehicle Action Prior to Crash 1 21 Damaged Area Code: (Circle Up to Three) Event Sequence 5 22 22 22 22 2 3 4 Most Harmful Event 5 23 10 Undercarriage Driver Contributing Code 1 24 24 5 11 Totaled Underride/Override 25 Towed N 6								12	
Vehicle Travel Direction: N S X W Responding to Emergency? N Citation # (If Issued) _____ Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____												5	
Please fill out for operator and all occupants involved												13	
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility				Operator See Above ----- 1 4 4 0 0 10 1								5	
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												7	
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 3 4 Most Harmful Event 23 10 Undercarriage Driver Contributing Code 24 24 5 11 Totaled Underride/Override 25 Towed _____								8	
Please fill out for operator and all occupants involved													
Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility				Operator/Non-Motorist See Above -----									

→ 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

NOT TO SCALE

Crash Narrative:

On Tuesday 5/24/22 at approximately 0839 hours while assigned to marked unit n498 I was dispatched to the area of 455 Nahanton Street for a car that struck a deer.

Upon arrival I spoke with the operator, PAUL GELNY, of motor vehicle #1 (1YJV68), who states he was travelling eastbound on Nahanton Street. PAUL further states while travelling eastbound a deer ran in front of his vehicle from the woods on the westbound side of Nahanton Street near the entrance to 455 causing him to strike the deer. Deer was deceased and laying in the shoulder of the road. Newton Dispatch notified the city to pick up the deceased deer. Deer strike cause damage to the front of PAUL's vehicle.

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

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

ALAN JR RICHARD SOLOMAN. NEWTON POLICE DEPT 05/24/2022

Police Officer Name (Please Print) Signature ID/Badge # Department Precinct/Barracks Date

CDP1 11 24:00