

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 05/26/2022		Time of Crash 08:18 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 _____				WEST 474 WOODWARD ST Route# _____ Direction _____ Address # _____ Name of Roadway/Street _____ Feet [N][S][E][W] of _____ • _____ or _____ Mile Marker _____ Exit Number _____ Feet [N][S][E][W] of _____ Route# _____ Intersecting Roadway/Street _____ Feet [N][S][E][W] of _____ Landmark _____								2	10
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____ Also at Intersection with _____												11	4
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____													
<input checked="" type="checkbox"/> Vehicle 1 2 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000453							
License # --- St MA DOB/Age --- Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____ Operator MARINI ALESSANDRO Address 51 POND ST (apt. #12) City WALTHAM State MA Zip 02451 Insurance Company SELF INSURED				Reg # M98136 Reg Type MVN Reg State MA Veh Year 2016 Veh Make FORD Veh Config. 2 20 Owner CITY OF NEWTON Address 60 ELLIOT ST City NEWTON State MA Zip _____ Vehicle Action Prior to Crash 1 21 Event Sequence 2 22 22 22 22 2 Most Harmful Event 2 23 Driver Contributing Code 9 24 24 Underride/Override 25 Towed N Damaged Area Code: (Circle Up to Three) 10 Undercarriage 5 11 Totaled								12	
Vehicle Travel Direction: [N][S][E][X] Responding to Emergency? N Citation # (If Issued) N/A Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____													
Please fill out for operator and all occupants involved												13	2
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													
Operator See Above													
YERARDI, STEPHEN 52 GREENLEAF CIR FRAMINGHAM, MA 01701													
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 --- Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____ Operator HOLLINS KADIA Address 19 CHERRY STREET City BROCKTON State MA Zip 02301 Insurance Company GEICO				Reg # 81N570 Reg Type PAN Reg State MA Veh Year 2006 Veh Make TOYOTA Veh Config. 2 20 Owner (Same as operator) Address _____ City _____ State _____ Zip _____ Vehicle Action Prior to Crash 11 21 Event Sequence 1 22 22 22 22 2 Most Harmful Event 1 23 Driver Contributing Code 1 24 24 Underride/Override 25 Towed N Damaged Area Code: (Circle Up to Three) 10 Undercarriage 5 11 Totaled								13	
Vehicle Travel Direction: [N][S][E][X] Responding to Emergency? N Citation # (If Issued) N/A Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____													
Please fill out for operator and all occupants involved													
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													
Operator/Non-Motorist See Above													

→ Direction 1 Vehicle 1 2 Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

NOT TO SCALE

Unit 2

Unit 1

Woodward Street

466 Woodward Street

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 Thursday, May 26, 2022, while assigned to Traffic unit N525, I responded to 466 Woodward Street, Newton for a report of a motor vehicle crash involving a City of Newton owned vehicle. The weather at the time of the crash was clear and sunny. The road surface was dry. Woodward Street is a public way maintained by the City of Newton.

I spoke with the operator of MV1, Mr. Alessandro Marini (S65112681). Mr. Marini was operating a City of Newton owned 2016 Ford F350 (MA MVN: M98136) in the area of the Bank of America on Woodward Street. Mr. Marini stated as he was traveling the passenger side door mirror of his vehicle made very minor contact with the driver door mirror of a vehicle parked to the right side of the roadway. No injuries were reported by Mr. Marini or his passenger. I observed minor damage to the driver side door mirror of MV1. Mr.

(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

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

MICHAEL R GAUDET NEWTON POLICE DEPT 05/26/2022

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

CDP1 11 24:00

→ 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:

Marini is an employee of the City of Newton DPW.

I then spoke with the operator of MV2, Ms. Kasia Hollins (S78643620). Ms. Hollins stated he was parked in 2006 Toyota Highlander (MA: 81N570) across from the Bank of America on Woodward Street (W) when MV1 traveled by her driver side and made contact with the front driver side door of her vehicle. Ms. Hollins reported no injuries. I observed minor damage to the front driver side door mirror of MV2.

Photos of both vehicles were submitted to the IT Bureau.

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 DEPT

05/26/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date