

Police Use Only			Commonwealth of Massachusetts				RMV Document Number																																																																					
Date of Crash 06/06/2022		Time of Crash 19:45 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:																																																																						
<div>11</div> <div>Route# Direction Name of Roadway/Street</div> <div>At</div> <div>Route# Direction Name of Intersecting Roadway/Street</div> <div>Also at Intersection with</div> <div>Route# Direction Name of Intersecting Roadway/Street</div>						<div>29</div> <div>NORTH 60 HIGHLAND ST</div> <div>Route# Direction Address # Name of Roadway/Street</div> <div>Feet N S E W of _____ • _____ or _____</div> <div>Mile Marker Exit Number</div> <div>Feet N S E W of _____</div> <div>Route# Intersecting Roadway/Street</div> <div>Feet N S E W of _____</div> <div>Landmark</div>																																																																						
						<div>210</div> <div></div>																																																																						
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<div>3</div> <div><input checked="" type="checkbox"/> Vehicle 1 1 #Occupants</div>		<div><input type="checkbox"/> Hit/Run</div>		<div><input type="checkbox"/> Moped</div>		Case Number 22000493																																																																						
<div>41</div> <div>License # --- St TX DOB/Age ---</div> <div>Sex M Lic. Class D 18 18 Lic. Restrictions 9 19 CDL Endorsment</div> <div>Operator FIELDS LOUIS</div> <div>Address 7946 NEW WORLD</div> <div>City BEXAR State TX Zip 78239</div> <div>Insurance Company EAN HOLDINGS</div>						<div>12</div> <div>Reg # K69PPV Reg Type PAN Reg State NJ</div> <div>Veh Year 2022 Veh Make KIA Veh Config. 1 20</div> <div>Owner EAN HOLDINGS</div> <div>Address 6929 N LAKEWOOD AVE</div> <div>City TULSA State OK Zip 74117</div> <div>Vehicle Action Prior to Crash 1 21</div> <div>Event Sequence 2 22 22 22 22 2 23 3 4</div> <div>Most Harmful Event 2 23</div> <div>Driver Contributing Code 19 24 24</div> <div>Underride/Override 25 Towed Y</div> <div>Damaged Area Code: (Circle Up to Three)</div> <div>10 Undercarriage</div> <div>5 11 Totaled</div>																																																																						
<div>52</div> <div>Vehicle Travel Direction: <input checked="" type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W Responding to Emergency? N</div> <div>Citation # (If Issued)</div> <div>Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____</div> <div>Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____</div>						<div>13</div> <div></div>																																																																						
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