

Police Use Only			Commonwealth of Massachusetts				RMV Document Number									
Date of Crash 06/06/2022		Time of Crash 15:12 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 0	Speed Limit 5 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 229 CABOT ST								2				
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with				Route# Direction Address # Name of Roadway/Street Feet N S E W of _____ Mile Marker _____ Exit Number _____								10				
Route# Direction Name of Intersecting Roadway/Street				Feet X S E W of BRIDGES AVE Route# Intersecting Roadway/Street Feet X S E W of REAR PARKING LOT OF CABOT SCHOOL Landmark								11				
3		<input checked="" type="checkbox"/> Vehicle 1 0 #Occupants		<input checked="" type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000494					7			
License # _____ St _____ DOB/Age _____ Sex _____ Lic. Class 18 18 Lic. Restrictions 19 CDL _____ Operator _____ Last _____ First _____ Middle _____ Address _____ City _____ State _____ Zip _____ Insurance Company PLYMOUTH ROCK ASSURANCE CORP				Reg # 2AWR85 Reg Type PAN Reg State MA Veh Year 2020 Veh Make MERCEDES Veh Config. 2 20 Owner YANG QIONG Address 480 (apt. 113) MAIN ST City MALDEN State MA Zip 02148 Vehicle Action Prior to Crash 10 21 Event Sequence 2 22 22 22 22 2 Most Harmful Event 2 23 Driver Contributing Code 19 24 24 Underride/Override 25 Towed N								12				
Vehicle Travel Direction: X S E W Responding to Emergency? N Citation # (If Issued) _____ Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				 10 Undercarriage 11 Totaled								13				
Please fill out for operator and all occupants involved				26 27 28 29 30 31 32 33 Seat Pos. Safety Airbag Airbag Eject Trap Injury Transp. System Status Switch Code Code Status Code Medical Facility								2				
Operator				See Above												
7		Please Select One of the Following:		<input checked="" type="checkbox"/> Vehicle 2 0 #Occupants		<input type="checkbox"/> Non-Motorist A Type		14 Action		15 Location		16 Condition		17		13
License # _____ St _____ DOB/Age _____ Sex _____ Lic. Class 18 18 Lic. Restrictions 19 CDL _____ Operator _____ Last _____ First _____ Middle _____ Address _____ City _____ State _____ Zip _____ Insurance Company GEICO				Reg # 598VN7 Reg Type PAN Reg State MA Veh Year 2020 Veh Make NISSAN Veh Config. 2 20 Owner MCFADYEN ELIZABETH M Address 143 FEDERAL ST City WILMINGTON State MA Zip 01887 Vehicle Action Prior to Crash 11 21 Event Sequence 2 22 22 22 22 2 Most Harmful Event 2 23 Driver Contributing Code 24 24 Underride/Override 25 Towed N								13				
Vehicle Travel Direction: N S E W Responding to Emergency? N Citation # (If Issued) _____ Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____ Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				 10 Undercarriage 11 Totaled								13				
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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

Crash Narrative:

On 06/06/22 at 15:12 hours, I was at the Cabot School on Bridges Avenue doing a school crossing guard post when I was flagged down by a witness about a hit and run motor vehicle crash that occurred a few minutes prior. The crash took place in the school driveway/parking lot that runs between Bridges Avenue and Norwood Avenue. The driveway/parking lot is a one way roadway that enters through Bridges Avenue and exits out to Norwood Avenue. It allows staff to park their vehicles there and it is used for school pickup and drop off. The witness identified as Michelle Reddick stated that she was in her vehicle in the school pickup line to the above mentioned driveway of the school. Ms. Reddick observed a black colored Mercedes GLE450 bearing MA reg.# 2AWR85 come in through the one way driveway going the wrong way. The Mercedes then attempted to back up in to a parking spot reportedly three times with two other vehicles parked on each side. While doing so,

(Continued on next page)

Witnesses:

Name (Last, First, Middle)	Address	Phone #	Statement
REDDICK, MICHELLE,	100 WALNUT ST NEWTON, MA 02460	-----	N

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

JEREMY L WILSON	25227	NEWTON POLICE DEPART	06/07/2022
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:

the operator struck the rear end of M/V # 2. The operator of M/V # 1 was described as an Asian female. Ms. Reddick stated that other parents saw the accident but nothing was said to the operator. Reddick beeped her horn at the operator to get her attention but the Mercedes pulled away and left the scene without leaving their information. Reddick took a picture of the vehicle (Mercedes GLE450) and registration (MA 2AWR85) and showed it to me.

M/V # 2 was a 2020 Nissan Rogue color gray bearing MA reg. # 598VN7. The owner, Elizabeth McFadyen, was made aware of the crash and provided the owner's information from the Mercedes. The vehicle sustained minor scratches to the left side of the rear bumper. The left side rear quarter panel/bumper area was no longer mounted flush with the rest of the body also.

(Continued on next page)

Witnesses:

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Property Damage:

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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

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JEREMY L WILSON

25227

NEWTON POLICE DEPART

06/07/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date

→ Direction 1 Vehicle 1 2 Vehicle 2 Pedestrian

Crash Diagram:

ie: → 1 → 2 →



If Crash Did Not Occur
on a Public Way:

- ☐ Off-Street Parking Lot
☐ Garage
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☐ Other Private Way

Indicate North by Arrow



Crash Narrative:

The owner of the Mercedes is an Asian female listed as Qiong Yang out of 480 Main Street Apt. # 113 Malden, MA. I was not able to locate a phone number for her and Malden Police Department had no contact info either. A department letterhead was sent to the address requesting the owner to contact me regarding the crash.

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

JEREMY L WILSON

25227

NEWTON POLICE DEPART

06/07/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date