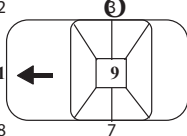
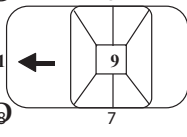


Police Use Only			Commonwealth of Massachusetts				RMV Document Number												
Date of Crash 06/15/2022		Time of Crash 14:30 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 0	Speed Limit 25 Latitude _____ Longitude _____		State Police <input type="checkbox"/> Local Police <input checked="" type="checkbox"/> MBTA Police <input type="checkbox"/> Other: <input type="checkbox"/>							
AT INTERSECTION:				< LOCATION >		NOT AT INTERSECTION:													
1 1	SOUTH CRAGMORE RD												9 10 11 3						
	Route# Direction Name of Roadway/Street					Route# Direction Address # Name of Roadway/Street													
	At					Feet N S E W of _____ or _____													
	9 WEST BOYLSTON ST OFF RAMP					Mile Marker Exit Number													
2 2	Route# Direction Name of Intersecting Roadway/Street					Route# Intersecting Roadway/Street							12 1						
	Also at Intersection with					Feet N S E W of _____													
	Route# Direction Name of Intersecting Roadway/Street					Landmark													
3	<input checked="" type="checkbox"/> Vehicle 1 1 #Occupants		<input checked="" type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000529												
4 2	License # --- St MA DOB/Age ---					Reg # BU43104 Reg Type BUN Reg State MA					13 2								
	Sex M Lic. Class D 18 18 Lic. Restrictions B 19 CDL _____					Veh Year 2019 Veh Make THOMAS Veh Config. 4 20													
	Operator MILLS URBAN J					Owner EASTERN BUS COMI													
	Address 85 MORTON VILLAGE DRIVE (apt. 207)					Address PO BOX 514													
5 1	City MATTAPAN State MA Zip 02126					City SOMERVILLE State MA Zip 02143													
	Insurance Company NATIONAL UNION FIRE INSURANCE					Vehicle Action Prior to Crash 3 21 Damaged Area Code: (Circle Up to Three)													
	Vehicle Travel Direction: N X E W Responding to Emergency? N					Event Sequence 2 22 22 22 22 2													
6 1	Citation # (If Issued) 477181AB					Most Harmful Event 2 23													
	Violation 1: Ch 90/24 Sec Violation 2: Ch 89/9 Sec					Driver Contributing Code 19 24 7 24													
	Violation 3: Ch 19/75 Sec Violation 4: Ch _____ Sec					Underride/Override 25 Towed N													
7 1	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		See Above		-----		---	---	99	4	99	0		0	10	1	N/A		
8 1	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 DOB/Age ---					Reg # W23962 Reg Type COMM Reg State MA													
	Sex _____ Lic. Class 18 18 Lic. Restrictions 19 CDL _____					Veh Year 2022 Veh Make FREIGHTLINER Veh Config. 7 20													
	Operator _____					Owner TREE TECHNOLOGY LANDSCAPE COMP													
	Address _____					Address BOX 302													
	City _____ State _____ Zip _____					City FOXBOROUGH State MA Zip 02035													
	Insurance Company HARTFORD CASUALTY INS COMP					Vehicle Action Prior to Crash 11 21 Damaged Area Code: (Circle Up to Three)													
	Vehicle Travel Direction: N X E W Responding to Emergency? N					Event Sequence 2 22 22 22 22 2													
	Citation # (If Issued) _____					Most Harmful Event 2 23													
	Violation 1: Ch _____ Sec Violation 2: Ch _____ Sec					Driver Contributing Code 1 24 24													
	Violation 3: Ch _____ Sec Violation 4: Ch _____ Sec					Underride/Override 25 Towed N													
	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		-----		---	---												
HAYDEN, ALAN		1046 SOUTH MAIN ST PASCOAG, RI 02859		-----		M	97	0	4	99	0	0	10	1					

JEREMY L WILSON		25227	NEWTON POLICE DEPT#1		06/15/2022
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:

size yellow school bus attempted to go around his truck while turning right on to the Boylston Street off ramp from Cragmore Road. The school bus did not make a wide enough right turn and struck the driver's side black metal cage which supports the bucket to the truck. The bucket then started shaking back and forth while Mr. Hayden was in it. The metal cage goes overhead in front of the truck and sticks out on both sides of it. He says that the school bus scraped along the side of the cage and there should be long sized scrape marks along the top right side of the bus. I observed the scrape marks to the cage and noticed that the cage was also bent outward slightly on the passenger side. No injuries were reported by Mr. Hayden. I took several photos of the Freightliner truck and cage area and submitted them to the I.T. Bureau.

Two other employees for Tree Technology were outside of the truck observing the work being done at the

(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 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

06/15/2022

Police Officer Name (Please Print)


Signature


ID/Badge #

Department

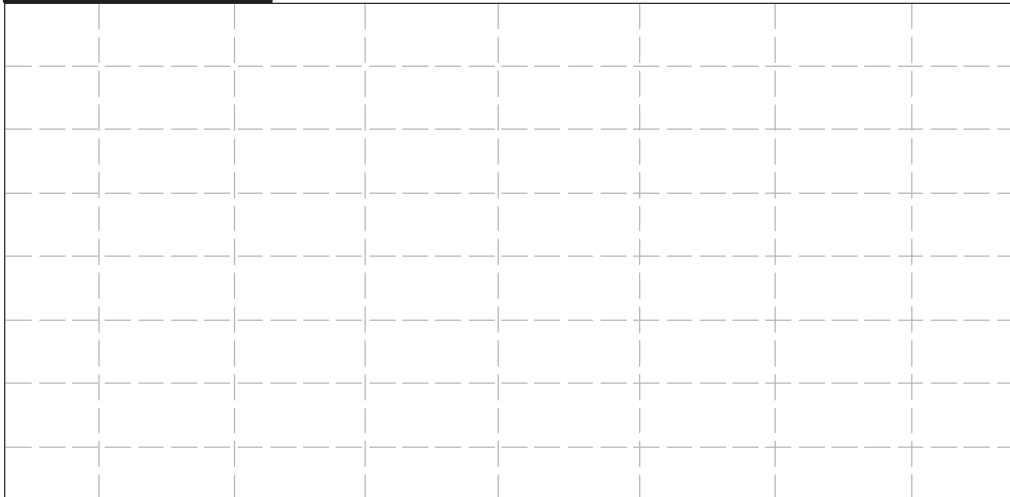
Precinct/Barracks

Date

→ 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:

Traffic Bureau update (Officer Gaudet):

On Thursday, June 16, 2022, I was asked to conduct a follow up investigation for this crash. I spoke with Ms. Regina Moody from the City of Newton Transportation Department. Ms. Moody identified the operator of the school bus as Mr. Urban Mills (S49560217) and stated he was operating bus #351, a 2019 Thomas School Bus (MA BUN: BU43104). Ms. Moody was able to provide me with a copy of the audio/video surveillance from the bus involved in the crash. I viewed this footage in Ms. Moody's office.

The footage shows Mr. Mills operating the school bus on Cragmore Road (S) towards Boylston Street. As the bus approached Boylston Street, a tree trimming crew can be seen working ahead at the corner of Cragmore Road and Boylston Street. There is also a stop sign at this intersection that can be clearly

(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

JEREMY L WILSON

25227

NEWTON POLICE DEPART

06/15/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

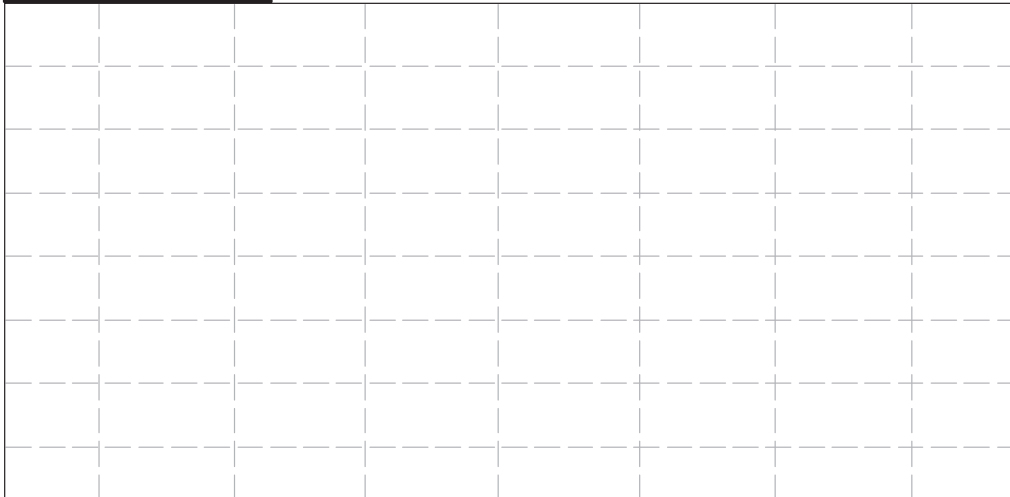
Precinct/Barracks

Date

→ 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:

viewed from the footage. As the school bus approaches the intersection it does not come to a stop at the stop sign posted on the right side of the roadway. This was confirmed by Ms. Moody using the GPS system that gives the speed of every bus traveling during it's route, including when it comes to a complete stop. The school bus takes a right turn and a loud "crunching/scraping" sound can be heard. The attention of the children on the bus is turned to the passenger side of the bus.

Through my training and experience, the sound heard on the footage is consistent with a vehicle hitting a large object. Children on the bus can be heard yelling, "What the fuck!" and discussing what has just happened with one another. The bus completes it's turn and travels on it's way with out stopping. All of the students on the bus were dropped off at their usual destination.

(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 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

06/15/2022

Police Officer Name (Please Print)


Signature


ID/Badge #

Department

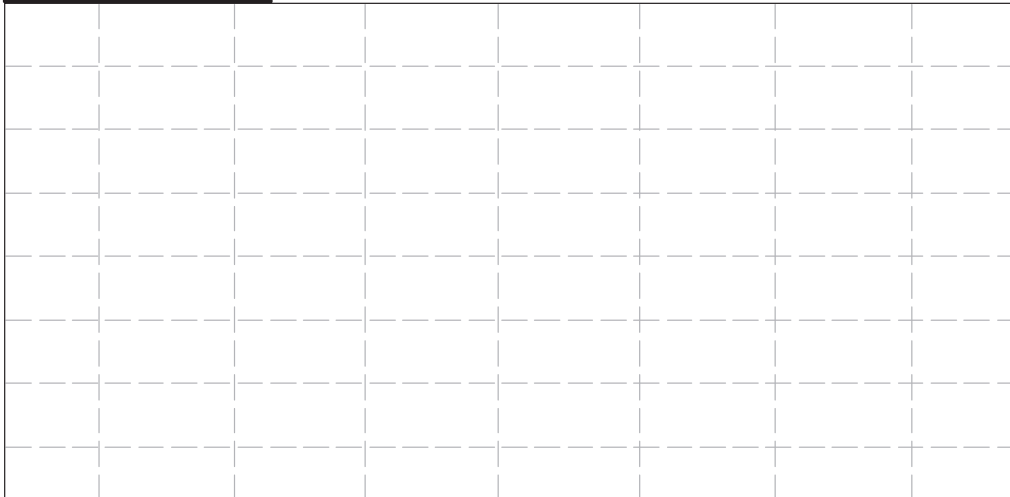
Precinct/Barracks

Date

→ 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:

There have been no injuries reported by any of the parties on the bus at the time of the crash. All of the students on the bus at the time of the crash were from Brown Middle School. Ms. Moody stated she would contact the Brown Middle School to try and get a list of the students that were on the bus at the time of the crash. A copy of the footage from the school bus and pictures of the damage to bus #351 was submitted to the IT Bureau.

Mr. Mills provided a statement to Ms. Moody sometime after the crash occurred. From Mr. Mills's written statement, he states, "On approaching the intersection, I noticed a couple of tree cutting vehicles parked on the right side of the roadway (Cragmore Road) at the very corner. Nevertheless, I negotiated the turn and proceeded. This will require me to maneuver my bus onto the sidewalk. While executing this

(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

JEREMY L WILSON

25227

NEWTON POLICE DEPART

06/15/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

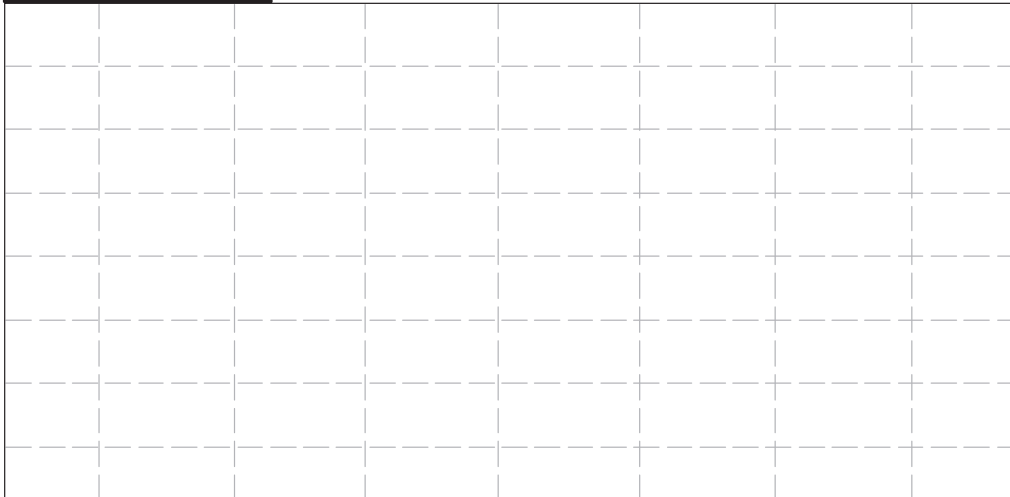
Department

Precinct/Barracks

Date

→ 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:

maneuver, I heard some noises which at the time I thought it was as a result of the bus getting onto the sidewalk because while executing the maneuver my eyes were fixed on the right side mirrors and was a great distance away from the vehicles to my right."

After viewing the footage from the crash, Mr. Mills will be mailed Massachusetts Uniform Citation 477181AB for Chapter 90, Section 24 (Leaving the Scene of Property Damage), Chapter 89, Section 9, (Fail To Yield, Stop Sign), and Newton City Ordinance Chapter 19, Section 75 (Failure to Use Care). A copy of the criminal application and associated paperwork was submitted to the Police Prosecutor. Ms. Moody was apprised of the findings of my investigation.

Cragmore Road and Boylston Street are both public ways in the City of Newton.

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

JEREMY L WILSON

25227

NEWTON POLICE DEPART

06/15/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date