

Police Use Only			Commonwealth of Massachusetts				RMV Document Number																																																																					
Date of Crash 06/16/2022		Time of Crash 10:54 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 1	Number Injured 0	Speed Limit 20 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 64 FERNCROFT RD</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>																																																																						
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<div>3</div> <input checked="" type="checkbox"/> Vehicle 1 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000534																																																																						
<div>41</div> <div>License # --- St MA DOB/Age ---</div> <div>Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____</div> <div>Operator GOETZLER NATHAN</div> <div>Address 29 ALLEN AVE</div> <div>City NEWTON State MA Zip 02468</div> <div>Insurance Company FARMERS PROPERTY &amp; CASUALTY INS</div>						<div>312</div> <div>Reg # 3210RS Reg Type PAN Reg State MA</div> <div>Veh Year 2012 Veh Make NISS Veh Config. 1 20</div> <div>Owner GOETZLER WILLIAM</div> <div>Address 29 ALLEN AVE</div> <div>City NEWTON State MA Zip 02468</div> <div>Vehicle Action Prior to Crash 1 21 Damaged Area Code: (Circle Up to Three)</div> <div>Event Sequence 41 22 21 22 22 22 2 3 4</div> <div>Most Harmful Event 21 23 10 Undercarriage</div> <div>Driver Contributing Code 20 24 9 24 5 11 Totaled</div> <div>Underride/Override 25 Towed Y 6</div>																																																																						
<div>5</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) T1448099</div> <div>Violation 1: Ch 90/13B Sec Violation 2: Ch Sec</div> <div>Violation 3: Ch Sec Violation 4: Ch Sec</div>						<div>13</div> <div>21</div>																																																																						
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→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

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**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:**

Operator of Vehicle 1 states he was travelling Northbound on Ferncroft Rd when the operator became briefly distracted by his phone. Vehicle 1 then struck the curb and a tree on the West side of the road in front of #64 Ferncroft Rd, causing extensive damage to the front of the vehicle and airbag deployment. The operator denied any injuries and declined medical treatment. Vehicle 1 was towed from the scene by Tody's Towing. Newton Fire responded to clean up engine fluids that had leaked on the roadway. The witness who initially reported the crash to 911 stated that she observed the operator of Vehicle 1 pass her location at a higher than reasonable rate of speed and was looking down at his phone. I then issued the operator Mass. Uniform Citation #T1448099 (Written Warning) in hand to the operator's mother as his agent for a violation of C90ss13B Texting While Driving

**Witnesses:**

Name (Last, First, Middle)	Address	Phone #	Statement
ORILECK, JACKIE,	,	----	N

**Property Damage:**

Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property
, CITY OF NEWTON,	1164 CENTRE ST NEWTON, MASSACHUSETTS	617-965-8122	3	TREE

**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