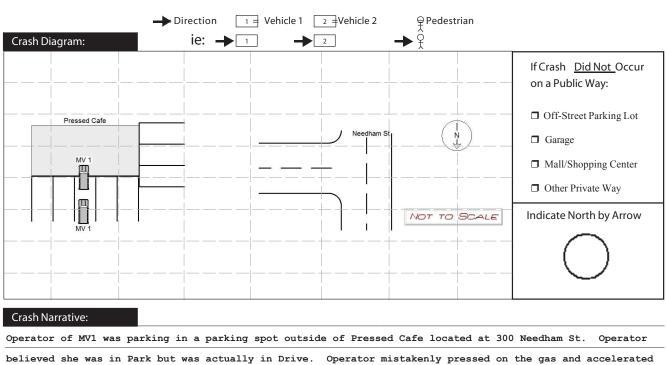
Police Use Only	Commonweal	th of Massac	husetts	5	RM	IV Doc	ument Number	
06/20/2022 15:05 NEWTO	N	Vehicle Crasl ice Report	Number Vehicles		Speed Lin Latitude _ Longitude		State Police Local Police MBTA Police Other:	E D
AT INTERSECTION		OCATION >	1				ECTION:	\neg
TH INTERSECTION	5111					LIGI	Le Hor.	\dashv
Route# Direction Na	ame of Roadway/Street	Route# Direction	Address #	NEEDH	Name of	Pondur	ov/Street	
Route# Direction 140	At						-	
B	. D. 1. (G.	Feet N	E W of	Mile Ma	arker	or	Exit Number	
	rsecting Roadway/Street at Intersection with	Feet N	E W of					
		Feet N	S E W of	Route#	Interse	ecting R	oadway/Street	
Route# Direction Name of I	Intersecting Roadway/Street				L	andmark	K	—
Wehicle 1 4_#Occupants Hit,	/Run Moped Case N	umber	22000548					
License#	St MA DOB/Age	Reg# 8AET20		Reg Tyn	_e PAN	Re	eg State MA	
Sex_F Lic. Class D 18 18 Lic. Rest	19	Veh Year 2011					20	
Operator BRYANT DAWN	Endorsment	Owner (Same as operato		First			·	'
Address 10 CAMPUS DR	st Middle	Address				Mid	Idle	
City DEDHAM	State MA Zip 02026	City					_Zip	
Insurance Company ARBELLA		Vehicle Action Prior to C	rash 11	21 Da	amaged Are	ea Code:	(Circle Up to Th	ree)
Vehicle Travel Direction: NSEW	Responding to Emergency? N	Event Sequence 20 22	35 22 22	22 0	:	3	4	
Citation # (If Issued)		Most Harmful Event 3	22		_ }	9	10 Undercar 5 11 Totaled	rriage
Violation 1: ChSec Vio	olation 2: ChSec	Driver Contributing Code	19 24	24				
Violation 3: ChSec Vio	plation 4: ChSec	Underride/Override	25 Tow	ed Y		7	6	
Please fill out for operator and all Name (Last First Middle)	occupants involved Address	Age/DOB Se	26 27 Seat Safety Pos. System	28 29 Airbag Airbag Status Switch	30 3 Eject Trap Code Code	1 32 Injury	Transp. Code Medical Facil	ility
Operator	See Above		1	4 99	0 2	8	₂ NWH	
BRYANT, BRYNN	10 CAMPUS DR DEDHAM, MA	F	3 1	4 99	0 2	8	2 NWH	
COHEN, GABE	67 CRAFTSLAND RD BROOKLINE, MA 02467	M 4 1 4 99 0 0 10 1				1		
ANDREW, MARC	715 SOUTH FOREST AVE TEMPE, AZ	N	6 1	4 99	0 0	10	1	
Please Select One of the Following:	l -	14 Action 7 15	Location 5	16 Condit	ion 17		Hit/Run Mo	ped
License#	St DOB/Age	Reg#		Reg Typ	e	Re	eg State	
Sex M Lic. Class 18 18 Lic. Rest	19	Veh Year		0 11			Config. 20	
Operator FAGGIANO JOHN	Endorsment	Owner						
Address 25 PARKINSON ST	st Middle	Address		First		Mid	ldle	_
City NEEDHAM	State MA Zip 02492M	City			Stat	te	Zip	_
Insurance Company		Vehicle Action Prior to C	rash	21 Da	maged Are	a Code:	(Circle Up to Thi	ree)
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Violation 3: ChSecV	iolation 4: ChSec	Underride/Override	Towe			7	6	
Please fill out for operator a	nd all occupants involved Address	Age/DOB S	26 27 Seat Safety ex Pos. Syste	28 29 Airbag Airbag m Status Switc	30 31 Eject Trap Code Cod	1 32 Injury le Status	Transp. Code Medical Fac	cility
Operator/Non-Motorist	See Above					10	1	
				1				



over the curb and through a large window and ended up inside of Pressed Cafe.

Operator and her daughter, Brynn Bryant, were trapped in the vehicle and freed by NFD. Operator and Brynn were transported to Newton Wellesley Hospital. The other 2 passengers, Gabe Cohen and Marc Andrew, were not trapped and declined any medical attention and left the scene after speaking with the medics. MV1 was towed by Todys.

Nobody inside Pressed Cafe was injured. John Faggiano was standing next to where the car went through the building but declined any medical attention.

(Continued on next page)

(Continued o	n next page;							
Witnesses:								
Name (Last, First, Middle)		ddress		Phone i	#	Statement		
Property Damage:								
Owner (Last, First, Middle)	Address		Phone #	34-Туре	Description of Dama	escription of Damaged Property		
HIDRI, ENIS,	300 NEEDHAM ST NEWTON,MASSACHUSETTS		978 328 4385	97	GLASS WINDOW ON SIDE OF PRESSED CAF			
Truck and Bus Information:	Registration #		(From Vehic	cle Section)			35	
Carrier Name					Carrier Issu	uing Authority Co		
Address			City		St	Zip		
US DOT #:	State Number		Issuing State	ICC #:_		Interstate	36	
Cargo Body Type Code 37 Gros	ss Vehicle Weight 38	3			39			
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr				
Hazmat Information:								
Placard 40 Material 1 digit #	41 Material Name			Material 4	digit#	_ Release code	42	

-	Direction 1	∃ Vehicle 1	2 #Vehicle 2	Pedestrian		
Crash Diagram:	ie: → 🛚 1] →[2	→ ♀		
Crash Diagram:	ie: → 1				If Crash Did Not on a Public Way: Off-Street Parkin Garage Mall/Shopping Company of the Private Way Indicate North by A	g Lot 'enter
Pictures and a video of t	he accident from	n the securit	ty system was	sent to IT to	o attach to the report	·
W itnesses: Name (Last, First, Middle)		Address			Phone #	Statement
Name (Last, First, Milaule)		Address			FIIOTIE #	Statement
Property Damage:					1	
Owner (Last, First, Middle)	Address		Phone #	34-Type Des	cription of Damaged Property	
				7,1	- F	
Truck and Bus Information:	Registration #		(From V	ehicle Section)		
Carrier Name			(110111)	chicle Section)	Carrier Issuing Authority Cod	35 de
			G':			
Address			City		St Zip	36
US DOT #:	_ State Number		Issuing State	ICC #:	Interstate	30
Cargo Body Type Code 37 Gr	oss Vehicle Weight	38				
Trailer Reg #:	Reg Type	Reg State	Reg Year	Trailer l	Length 39	
Hazmat Information:	10g 1ypc	105 51410	Rog real_	11ancl		
40	41			1		42
Placard Material 1 digit	# Material Na	ame		Material 4 digit	# Release code	
RICHARD NEWTON			NE	WTON POLICE DEPARTM	06/20/2	2022
Police Officer Name (Please Print)	Signature	:	ID/Badge #	Department	Precinct/Barracks Dat	e

CDP1 11 ·24·00