

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 06/23/2022		Time of Crash 12:06 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><div><div>SOUTH</div><div>LOWELL AVENUE</div><div>Route# Direction Name of Roadway/Street</div><div>At</div><div>EAST</div><div>OTIS STREET</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></div> <div><div>Route# Direction Address # Name of Roadway/Street</div><div>Feet N S E W of or 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>				29									
<div><div><input checked="" type="checkbox"/> Vehicle 1 1 #Occupants</div><div><input checked="" type="checkbox"/> Hit/Run</div><div><input type="checkbox"/> Moped</div><div>Case Number 22000558</div></div>				110									
<div><div>License # --- St MA DOB/Age ---</div><div>Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsment</div><div>Operator GELMAN LUDMILA</div><div>Address 88 CHESTNUT ST (apt. 107)</div><div>City NEWTON State MA Zip 02465</div><div>Insurance Company LIBERTY MUTUAL</div><div>Vehicle Travel Direction: N X E W Responding to Emergency? N</div><div>Citation # (If Issued) 487210AB</div><div>Violation 1: Ch 90/24 Sec Violation 2: Ch 89/9 Sec</div><div>Violation 3: Ch 19/75 Sec Violation 4: Ch Sec</div></div> <div><div>Reg # 7MR818 Reg Type PAN Reg State MA</div><div>Veh Year 2020 Veh Make HONDA Veh Config. 1 20</div><div>Owner (Same as operator)</div><div>Address</div><div>City State Zip</div><div>Vehicle Action Prior to Crash 3 21 Damaged Area Code: (Circle Up to Three)</div><div>Event Sequence 2 22 22 22 22 2 23 1 9 4 5 11</div><div>Most Harmful Event 2 23</div><div>Driver Contributing Code 19 24 9 24</div><div>Underride/Override 25 Towed N</div></div>				112									
<div><div>Please fill out for operator and all occupants involved</div><div><div>Name (Last First Middle) Address Age/DOB Sex Seat Pos. Safety System Airbag Status Airbag Switch Eject Code Trap Code Injury Status Transp. Code Medical Facility</div><div>Operator See Above --- --- 99 4 99 0 0 10 1 N/A</div></div></div>				131									
<div><div>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 <input type="checkbox"/> Hit/Run <input type="checkbox"/> Moped</div></div>				132									
<div><div>License # --- St DOB/Age ---</div><div>Sex Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsment</div><div>Operator</div><div>Address</div><div>City State Zip</div><div>Insurance Company FARMERS</div><div>Vehicle Travel Direction: N X E 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> <div><div>Reg # 5CFR30 Reg Type PAN Reg State MA</div><div>Veh Year 2021 Veh Make DODGE Veh Config. 2 20</div><div>Owner MACLAUGHLIN ZACHARY</div><div>Address 34 FRANKLIN STREET</div><div>City MILTON State MA Zip 02186</div><div>Vehicle Action Prior to Crash 11 21 Damaged Area Code: (Circle Up to Three)</div><div>Event Sequence 1 22 22 22 22 1 23 1 9 4 5 11</div><div>Most Harmful Event 1 23</div><div>Driver Contributing Code 1 24 24</div><div>Underride/Override 25 Towed N</div></div>				133									
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→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

Lowell Avenue

Unit 1

Unit 2

297 Lowell Avenue

Otis Street

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 Thursday, June 23, 2022, while assigned to unit N492, I responded to the area of Homer Street and Lowell Avenue in Newton for a report of a Hit and Run Crash. The weather at the time of the crash was clear and sunny. The road surface was dry.

Detective Sgt. Claflin was working a paid detail for Feeney Brothers at the intersection of Lowell Avenue and Otis Street. While monitoring the traffic in the area, Detective Sgt. Claflin heard what he believed to be a vehicle crash in his vicinity. Detective Sgt. Claflin looked across the intersection and observed a 2020 Honda Civic (MA: 7MR818) leaving the scene down Lowell Avenue (S) towards Commonwealth Avenue. This vehicle had damage to it's passenger side door area. Detective Sgt. Claflin also observed fresh damage to the rear driver side bumper area of a 2021 Dodge Ram (MA: 5CFR30) that was

(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

**MICHAEL R GAUDET**      NEWTON POLICE DEPARTMENT      06/23/2022

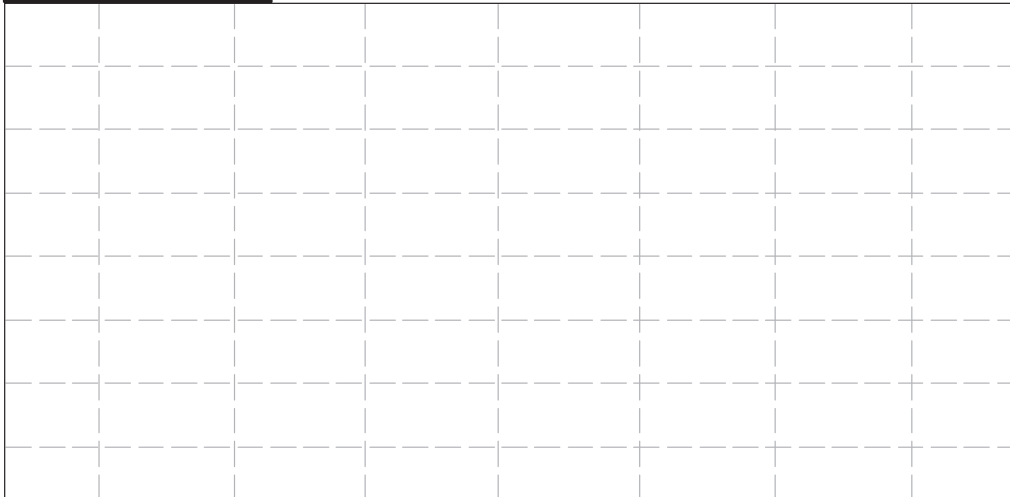
Police Officer Name (Please Print)      Signature      ID/Badge #      Department      Precinct/Barracks      Date

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:

parked in front of 296 Lowell Avenue (S).

Detective Sgt. Claflin then entered his personal vehicle and attempted to catch up to the Honda Civic that left the scene to check on their well-being. Detective Sgt. Claflin stated as the vehicle approached the intersection of Lowell Avenue (S) and Commonwealth Avenue, it proceeded through the intersection on to Homer Street with out stopping at the red light activated at this intersection. Detective Sgt. Claflin was finally able to stop the vehicle on Homer Street just after Commonwealth Avenue.

I arrived on scene and spoke with the operator, Ms. Ludmila Gelman (S30392030). I asked Ms. Gelman about the events that took place prior to Detective Sgt. Claflin stopping her. Ms. Gelman stated she did not know what happened. I observed moderate damage to the front passenger side door area of her vehicle.

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#### 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

MICHAEL R GAUDET

NEWTON POLICE DEPART

06/23/2022

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:**

The front passenger door mirror was damaged and folded in. The glass window from the front passenger door was shattered and missing. There was glass from the middle covering the entire front passenger seat/floor area inside the vehicle. I showed Ms. Gelman the glass inside her vehicle and the damage to her door and asked her if she knew what caused it. Ms. Gelman stated she did not know and that something must have hit her.

I explained to Ms. Gelman the events that has just transpired as conveyed to me by Detective Sgt. Claflin. Ms. Gelman seemed to be confused and did not understand what happened. Ms. Gelman called her son Steven and asked me to speak with him. I explained to Steven the events leading up to me speaking with him. I explained to Steven I did not feel comfortable allowing Ms. Gelman to drive away from the scene. At

(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

**Crash Narrative:**

Steven's request, I moved Ms. Gelman's car away from the intersection and parked it in front of 1103 Commonwealth Avenue for him to pick it up.

Ms. Gelman reported no injuries and was transported to her residence by myself in unit N492. Ms. Gelman was given Massachusetts Uniform Citation 487210AB in hand for Chapter 90, Section 24 (Leaving The Scene Of Property Damage), Chapter 89, Section 9 (Fail To Yield, Red Light), and Newton City Ordinance Chapter 19, Section 75 (Fail To Use Care). Ms. Gelman was also advised I would be filing an Immediate Threat with the Registry of Motor Vehicles.

A Request for Immediate Threat License Suspension/Revocation was completed and submitted tot he Registry of Motor Vehicles with supporting documentation via e-mail, DCUImmediateThreat@massmail.state.ma.us

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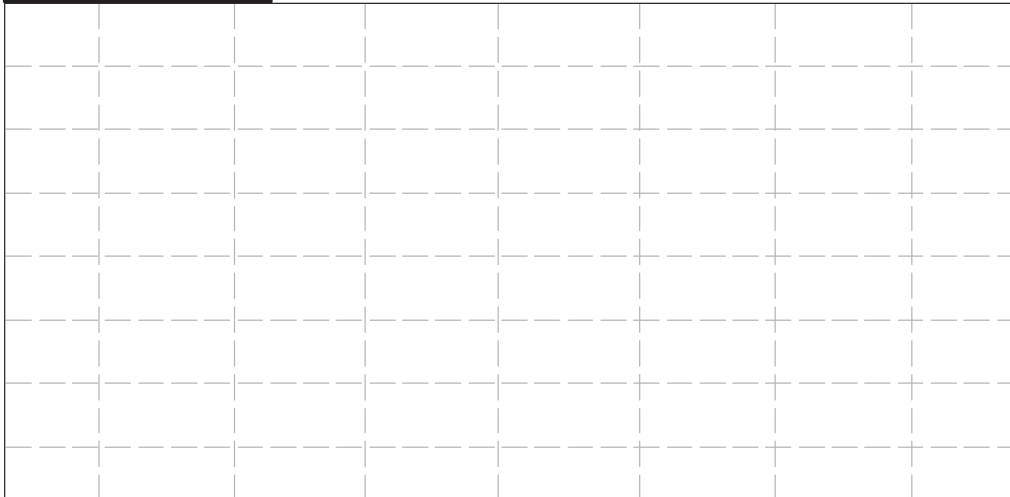
Property Damage:				
Owner (Last, First, Middle)	Address	Phone #	34-Type	Description of Damaged Property

MICHAEL R GAUDET			NEWTON POLICE DEPT		06/23/2022
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date
CDP1 11 :24:00					

→ Direction    1 Vehicle 1    2 Vehicle 2    Pedestrian

**Crash Diagram:**

ie: → 1 → 2 →



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:**

I returned to the area of the crash and observed damage to the rear driver side bumper area of the involved Dodge Ram. The vehicle was unoccupied at the time of the crash. The registered owner, Mr. Zachary MacLaughlin, was advised.

A copy of the issued Criminal Application was submitted to the Court Prosecutor with supporting documentation.

Otis Street, Lowell Avenue, Commonwealth Avenue, and Homer Street are all public ways maintained by 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 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

MICHAEL R GAUDET

NEWTON POLICE DEPART

06/23/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date