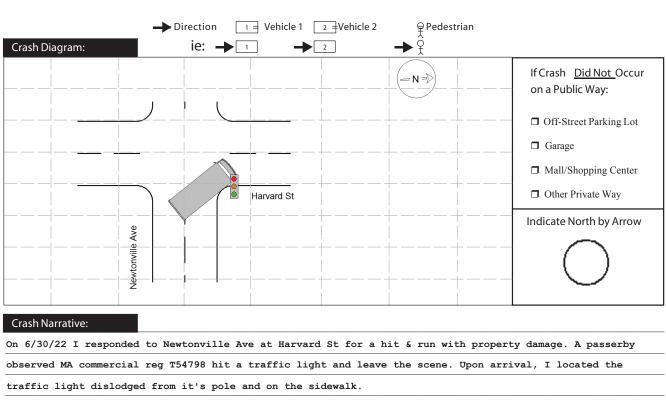
	Poli	ce Use Only		Commonv	wealth	of Mass	sachi	usetts	\$		RMV	Docume	ent Number	
	Date of Crash 06/30/2022	Time of Crash	City/Tow NEWTON	m Mo	tor Vel	nicle Cr	ash	Number Vehicles				25	State Police Local Police MBTA Police	NA NA
	00/30/2022	24HR	NEWTON			Report		1	0		itude		Other:	
		AT INTER	RSECTION:	<	LOCA	TION	>		NOT	AT	INTE	RSEC'	TION:	
	NOR	TH HARV	ARD ST											2
1 1	Route# Direc	tion		oadway/Street		Route# Direc	tion A	idress #		Nan	ne of Ro	oadway/S	treet	$ \frac{1}{2}$
	At WEST NEWTONVILLE AVE					Feet NSEW of or						_ _		
	Route# Direc	tion N	Name of Intersecting			Fort	NEE		Mile N	Iarker			Exit Number	_
			Also at Interse	ction with			N S E	_	Route#	Ir	ntersecti	ng Roadv	vay/Street	- 1
2 1	Route# Direc	tion	Name of Intersect	ing Roadway/Street		Feet N S E W of								_ 1
3											Lanc	lmark		\dashv
99	X Vehicle1	#Occupants	X Hit/Run	Moped	Case Number	r	2	2000589						
	License#	18 1	St MA	DOB/Age	Reg #	T54798			Reg Ty	pe_CON	N	Reg St	tate MA	_
	Sex_M Lic.	Class D 16 1	Lic. Restrictions		st.	Year_2017			INO			Veh Conf		
⁴ 3	Operator ROI		JEAN First	Middle	Owne	PIECE BY P			First			Middle		- 3 ¹
		DFORD VILLAC				ess 90 BLUEBE	RRY HII	LL RD						-
	City BEDFOR			e MA Zip 01730	City	City WOBURN State MB Zip 01801								-
[1	pany HARTFOR				Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)								ee)
5 1	Vehicle Travel	Direction:	S E W Respon	nding to Emergency?	N Even	t Sequence 23			22 2		3	7	•	
	Citation # (If I	·				Harmful Event	23	24	24	←	9	´	10 Undercarr 11 Totaled	iage
⁶ 1	1			: ChSec		er Contributing	Code 25		2 8		<u> </u>	\bigcup_{ϵ}	5	
1				: ChSec	Unde	rride/Override		Towe	ed N	0 30	21	32 3	3	1
	Please fill out for operator and all occupants involved Name (Last First Middle) Address						Age/DOB Sex Safety Airbag Airbag Eject Trap Ihjury Transp. Age/DOB Sex Pos. System Status Switch Code Code Status Code Medical Facility						1 00	
	Operator			See Above			-	99	4 99	0	0 1	10 1	NONE	
⁷ 3	Please Select C of the Followi	Vehicle	e# Occupants	Non-Motorist A	A Type	14 Action	15 Loc	ation	16 Cond	ition	17	Hit/l	Run Mop	ed
	License#		St	DOB/Age	Reg#	Reg #							_	
	Sex Lic.	Class 18 1	Lic. Restrictions	19 CDL		/eh YearVeh Config.						řg. 20		
8 1	Operator				nt Owne	OwnerLast First Middle						_		
_	Address					ess								-
	CityStateZip					City State Zip							_	
	Insurance Com	Vehic	Vehicle Action Prior to Crash Damaged Area Code: (Circle Up to Three)								ee)			
	Vehicle Travel	? Even	Event Sequence 22 22 22 22 3 4											
Citation # (If Issued) Most Harmful Event 23						←	10 Undercarriage 5 11 Totaled							
	Violation 1: ChSec Violation 2: ChSec Driver Contributing Code 24 24 24 8 7 6													
	Violation 3: ChSec Violation 4: ChSec Underride/Override Towed													
	Pl Name (Last Fi		operator and all o	ccupants involved		Age/DOB	Sex	26 27 Seat Safety Pos. Syster	28 29 Airbag Airba n Status Swi	ag Eject tch Code	llrap lr	32 njury Trans Status Cod	sp.	lity
		Non-Motorist		See Above			-							



The plate given is registered to Piece by Piece Movers in Woburn. I spoke to manager Jacob Hart (
978-855-3976) who informed me that the truck is sub contracted to a company called Speedy King Laborers,
and that Hart is unaware of who the driver may be. Hart stated that the truck does have a GPS on it which was
showing the vehicle stationary on Turner Terrace at the time of our conversation.

I responded to Turner Ter and located the truck in question. The driver, Jean Rodriguez DOB 11/8/99, told me that he was aware that he hit the light but had notified his boss already. He stated the crash occurred as he

(Continued on next page)

Witnesses:							
Name (Last, First, Middle)		Address			Phone	#	Statement
Property Damage:							
Owner (Last, First, Middle)	Address		Phone #	34-Type	Description of Dama	aged Property	
Truck and Bus Information:	Registration #		(From Vehic	cle Section)			35
Carrier Name					Carrier Iss	suing Authority Coc	le
Address			City		St	Zip	
US DOT #:	State Number		Issuing State	ICC #:_		Interstate	36
Cargo Body Type Code Gros	s Vehicle Weight	38			39		
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr			
Hazmat Information:							
Placard 40 Material 1 digit #	41 Material Na	me		Material 4	digit #	Release code	42

KELEIGH N DONAHUE			NEWTON POLICE DEPARTM		06/30/2022
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date

-	Direction 1	Vehicle 1	2 =Vehicle 2	₽Pedestr	ian	
Crash Diagram:	ie: → 🗆	→ □	2	₽ Ĝ		
					If Crash <u>Did No</u> on a Public Way:	_
					Off-Street Park	ing Lot
					☐ Garage	
						Conton
		İ			☐ Mall/Shopping	
					☐ Other Private W	⁷ ay
					Indicate North by	Arrow
				 		
Crash Narrative:	anneand St. From 1	Novetonville 7	Arro on the way	to 2 mag	idential moving ich Dodw	
informed that merely notif			_ _			
could be charged with hit						
Pictures were taken of the						
Harvard/Newtonville were						however
Jacob Hart was advised to						
reference.	inopect one pr	operty mimber		ne was p		
This incident appears to b	oe a misunderst	anding at thi	is time.			
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 Veh	icle Section)		25
Carrier Name					Carrier Issuing Authority C	ode 35
Address			City		St Zip	
US DOT #:	State Number		Issuing State	ICC #:_	Interstate	36
Cargo Body Type Code 37 Gro	oss Vehicle Weight	38			L	
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tra	ailer Length 39	
Hazmat Information:	A1					42
Placard Material 1 digit	# Material N	Vame		Material 4 d	digit # Release code	42
KELEIGH N DONAHUE				ON POLICE DEPARTA	06/30	(0.000

ID/Badge #

Signature

Department

Precinct/Barracks

Date

Police Officer Name (Please Print)