

## Commonwealth of Massachusetts

Police Use Only			Motor Vehicle Crash Police Report				RMV Document Number				
Date of Crash 07/06/2022	Time of Crash 19:18 24HR	City/Town NEWTON	Number Vehicles 1	Number Injured 1	Speed Limit 25 Latitude Longitude	State Police Local Police MBTA Police Other:					
AT INTERSECTION:			< LOCATION >				NOT AT INTERSECTION:				
Route# Direction Name of Roadway/Street At			NORTH 1243 WALNUT ST Route# Direction Address # Name of Roadway/Street Feet N S E W of Mile Marker Exit Number				9				
Route# Direction Name of Intersecting Roadway/Street Also at Intersection with			Feet N S E W of Route# Intersecting Roadway/Street				10				
Route# Direction Name of Intersecting Roadway/Street			Feet N S E W of Landmark				11				
<input checked="" type="checkbox"/> Vehicle 1 #Occupants			<input type="checkbox"/> Hit/Run			<input type="checkbox"/> Moped			Case Number 22000602		
License # --- St MA DOB/Age ---			Reg # 137ZM3 Reg Type PAN Reg State MA			12					
Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsment			Veh Year 2009 Veh Make HONDA Veh Config. 1 20			1					
Operator BUFFORD SARAH L Last First Middle			Owner (Same as operator) Last First Middle			1					
Address 43 HAMLET STREET			Address			12					
City NEWTON State MA Zip 02459			City State Zip			12					
Insurance Company ARBELLA			Vehicle Action Prior to Crash 1 21			Damaged Area Code: (Circle Up to Three)					
Vehicle Travel Direction: X S E W Responding to Emergency? N			Event Sequence 20 22 40 22 35 22 22 23 35 24 24 25			10 Undercarriage 5 11 Totaled					
Citation # (If Issued)			Driver Contributing Code 12 24 24			Underride/Override 25 Towed Y					
Violation 1: Ch Sec Violation 2: Ch Sec			Violation 3: Ch Sec Violation 4: Ch Sec			13					
Please fill out for operator and all occupants involved			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			20					
Operator			See Above			BI BOSTO					
Please Select One of the Following:			<input type="checkbox"/> Vehicle #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 # Reg Type Reg State			20					
Sex Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsment			Veh Year Veh Make Veh Config.			20					
Operator Last First Middle			Owner Last First Middle			20					
Address			Address			20					
City State Zip			City State Zip			20					
Insurance Company			Vehicle Action Prior to Crash 21			Damaged Area Code: (Circle Up to Three)					
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Please fill out for operator and all occupants involved			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			20					
Operator/Non-Motorist			See Above			20					

→ Direction    1 = Vehicle 1    2 = Vehicle 2    Pedestrian

ie: → 1    → 2    →

**Crash Diagram:**

*NOT TO SCALE*

Boylston St w/b

Walnut St

Centre St Exit

P.O.I.

1243/1241

Indicate North by Arrow

If Crash Did Not Occur on a Public Way:

☐ Off-Street Parking Lot

☐ Garage

☐ Mall/Shopping Center

☐ Other Private Way

**Crash Narrative:**

OP1 of MV1 was traveling westbound on Rt. 9. MV1 was headed toward the Centre Street exit of RT. 9. The Centre Street exit on Rt. 9 has been closed due to ongoing construction. MV1 did not realize the exit was closed. In an attempt to avoid driving through the detour signs, MV1 made an abrupt turn off of Rt. 9 onto Walnut Street. As MV1 abruptly turned onto Walnut Street (Northbound), OP1 had no control over MV1. MV1 continued onto the curb, through the grass, and through the drive away. MV1 then crashed into the front porch of 1243 Walnut Street.

MV1 sustained heavy front end damage. MV1 was towed by Todys. A towed inventory sheet was completed. OP1 was transported to BI Boston by Fallon Ambulance.

Dispatch notified Building Inspector. Photos of Crash were taken and turned into IT.

(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
PATZ, SCOTT,	1243 WALNUT STREET NEWTON, MASSACHUSETTS 0	6173324118	97	1243/1241 FRONT PORCH

**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

CHRISTOPHER J MATTHEWS      NEWTON POLICE DEPART      07/06/2022

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

CDP1 11 -24:00

♀ Pedestrian



CDP1 11 -24:00