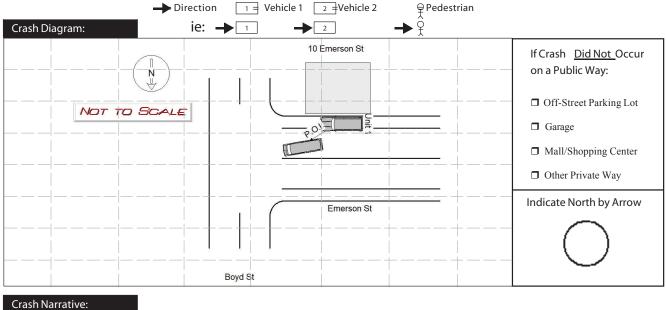
Pol	ice Use Only		Commo	nwealth	of Mass	achu	setts					ment Nu		
Date of Crash 07/07/2022	Time of Crash	n City/Tov	wn M		hicle Cra	ash	Number Vehicles		ber Spe ed Lati	ed Limi		State P Local	Police Police Police Police	<u> </u>
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Route# Direc	etion	Name of Intersectin	g Roadway/Street					Mile	e Marker			Exit N	ımber	-
		Also at Inters	section with		Feet	N S E V	W of	Rou	ie#	Intersec	ting Ro	adway/Stre	eet	
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Route# Direc	tion	Name of Intersec	eting Roadway/Street	t						La	ndmark			4
XVehicle1	_0_#Occupants	s Hit/Run	Moped	Case Numbe	er	220	000607							
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Please Select (of the Followi		le2 1_#Occupant	s Non-Motori	ist A Type	14 Action	15 Locat	tion	16 Co	ndition	17	Пн	lit/Run	Морес	d
License#		St	DOB/Age	Reg	# UNK			Reg	Гуре		Reg	s State_XX		٦
Sex_M Lic.	Class 99 18	Lic. Restriction	s 9 19 CDL	Veh	Year UNK	Veh	Make_U				Veh C		20	
Operator UN	KNOWN	UNKNOWN	Endorsn	Owr	er (Same as op	erator)								
Address UNK	Last	First	Middle		ress	ast		First			Middl	le		
City		Sta	teZip	City						State		Zip		
Insurance Com	npany_UNKNOV	WN		Veh	icle Action Prior	to Crash	99 2	21	Damage	ed Area	Code: ((Circle Up	to Three)
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The witness to the hit and run stated she was inside and heard a bang. She looked out the window and heard MV1 back into the parked MV2. The witness then ran outside and observed the driver, a white male drive away and turn right onto Boyd Street. There was significant damage to the bumper of MV2. MV2's bumper was completely off. The vehicle involved was a white van with a green stripe. The witness got a phone number off the van, 401-827-8800. The phone number belongs to Liberty Mobility of West Warwick Rhode Island. A male party answered and stated he sold the vehicle years ago and has received multiple calls regarding the vehicle. A plate was not provided. The witness is not the owner of the vehicle, she is a neighbor.

Witnesses:					
Name (Last, First, Middle)	Address		Phone # Statement		
Property Damage:					
Owner (Last, First, Middle)		Phone #	34-Type	Description of Damaged Property	
Truck and Bus Information:	Registration #		(From Vehic	ele 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 Gross	s Vehicle Weight	38			39
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr	
Hazmat Information:					
Placard 40 Material 1 digit #	Material Na	me		Material 4	digit # Release code 42

SEAN STAKE		NEWTON POLICE DEPARTM	07/07/2022		
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date