

Police Use Only			Commonwealth of Massachusetts				RMV Document Number						
Date of Crash 07/11/2022		Time of Crash 08:00 24HR		City/Town NEWTON		Motor Vehicle Crash Police Report		Number Vehicles 2	Number Injured 2	Speed Limit 30 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:						9	
WEST COMMONWEALTH AVE										2			
Route# Direction Name of Roadway/Street				Route# Direction Address # Name of Roadway/Street						10			
At				Feet N S E W of _____ or _____									
NORTH TEMPLE ST				Mile Marker Exit Number									
Route# Direction Name of Intersecting Roadway/Street				Feet N S E W of _____						11			
Also at Intersection with				Route# Intersecting Roadway/Street						4			
Route# Direction Name of Intersecting Roadway/Street				Landmark									
<input checked="" type="checkbox"/> Vehicle 1 2 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Case Number 22000618							
License # --- St MA DOB/Age ---				Reg # 1WRP35 Reg Type PAN Reg State MA									
Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year 2016 Veh Make SUBARU Veh Config. 2 20									
Operator ZHANG RUI				Owner (Same as operator)								12	
Address 22 WALSH ROAD				Address _____									
City NEWTON State MA Zip 02459				City _____ State _____ Zip _____									
Insurance Company GOVERNMENT EMPLOYEES				Vehicle Action Prior to Crash 3 21				Damaged Area Code: (Circle Up to Three)					
Vehicle Travel Direction: X S E W Responding to Emergency? N				Event Sequence 1 22 22 22 22				10 Undercarriage					
Citation # (If Issued) N/A				Most Harmful Event 1 23				5 11 Totaled					
Violation 1: Ch _____ Sec _____ Violation 2: Ch _____ Sec _____				Driver Contributing Code 1 24 24									
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed Y									
Please fill out for operator and all occupants involved												13	
Name (Last First Middle)				Address		Age/DOB		Sex		Medical Facility		1	
Operator				See Above		-----		---		N/A			
ZHANG, KENNETH				22 WALSH ROAD NEWTON, MA 02459		---		M 3		N/A			
Please Select One of the Following: <input checked="" type="checkbox"/> Vehicle 2 2 #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 MA DOB/Age ---				Reg # 58252 Reg Type PAR Reg State MA									
Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL _____				Veh Year 2019 Veh Make HONDA Veh Config. 2 20									
Operator CONNEELY THOMAS B				Owner CONNEELY SUSAN									
Address 542 CALIFORNIA STREET (apt. 1)				Address 542 (apt. 1) CALIFORNIA STREET									
City NEWTON State MA Zip 02460				City NEWTON State MA Zip 02460									
Insurance Company STANDARD FIRE				Vehicle Action Prior to Crash 9 21				Damaged Area Code: (Circle Up to Three)					
Vehicle Travel Direction: N S E X Responding to Emergency? N				Event Sequence 1 22 22 22 22				10 Undercarriage					
Citation # (If Issued) 510670AB				Most Harmful Event 1 23				5 11 Totaled					
Violation 1: Ch 89/4A Sec _____ Violation 2: Ch 19/75 Sec _____				Driver Contributing Code 9 24 24									
Violation 3: Ch _____ Sec _____ Violation 4: Ch _____ Sec _____				Underride/Override 25 Towed Y									
Please fill out for operator and all occupants involved													
Name (Last First Middle)				Address		Age/DOB		Sex		Medical Facility			
Operator/Non-Motorist				See Above		-----		---		NEWTON WELLESLEY H			
CONNEELY, SUSAN				542 CALIFORNIA STREET (apt 1) NEWTON, MA 02460		---		F 3		NEWTON WELLESLEY			

→ Direction 1 = Vehicle 1 2 = Vehicle 2 Pedestrian

ie: → 1 → 2 →

Crash Diagram:

Commonwealth Avenue

Witness

Unit 1

Unit 2

Unit 1

Unit 2

Commonwealth Avenue Carriage Road

Temple Street

1633 Commonwealth Avenue

NOT TO SCALE

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:

On Monday, July 11, 2022, while assigned to unit N492, I responded to the area of Commonwealth Avenue and Temple Street, Newton for a report of a crash with minor injuries. The weather at the time of the crash was clear and sunny. The road surface was dry. Commonwealth Avenue and Temple Street are both public ways maintained by the City of Newton.

I spoke with the operator of MV1, Ms. Rui Zhang (SA4940828). Ms. Zhang stated she was operating her 2016 Subaru Outback (1WRP35) on Commonwealth Avenue (W) towards Temple Street. Ms. Zhang stated she activated her right turn directional and was slowing down to take a right turn onto Temple Street. Ms. Zhang stated she began to take her right turn, a vehicle appeared on her right side and crashed into the front passenger side of her vehicle. Ms. Zhang her and her son Kenneth reported no injuries as a result of

(Continued on next page)

Witnesses:			
Name (Last, First, Middle)	Address	Phone #	Statement
GHABI, NANCY,		-----	Y
CAREY, JOHN,	44 ARAPAHOE RD NEWTON, MA 02465	-----	Y

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 07/11/2022

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:

the crash. I observed damage to the front passenger side bumper/tire/fender area of MV1. Tody's responded and removed the vehicle from the roadway.

I spoke with the operator of MV2, Mr. Thomas Conneely (S30459555) as he was being treated by Newton Medics. Mr. Conneely stated he was operating his 2019 Honda CRV (MA: 58252) on Commonwealth Avenue (W) towards Temple Street. Mr. Conneely stated he was traveling behind MV1 for some time and the vehicle was slowing down and speeding up down the length of Commonwealth Avenue. Mr. Conneely stated as they approached the Temple Street intersection, MV1 had stopped in the middle of the road and he believed it was taking a left turn on to Temple Street. Mr. Conneely stated he went to around the right side of the vehicle when it suddenly took a right turn into his vehicle as it was passing. Mr. Conneely said his vehicle then

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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

Address _____ City _____ St _____ Zip _____

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MICHAEL R GAUDET

NEWTON POLICE DEPART

07/11/2022

Police Officer Name (Please Print)

Signature

ID/Badge #


Department

Precinct/Barracks

Date

→ Direction 1 Vehicle 1 2 Vehicle 2 Pedestrian

Crash Diagram: ie: → 1 → 2 →

	If Crash <u>Did Not</u> Occur on a Public Way:	
	<input type="checkbox"/> Off-Street Parking Lot	
	<input type="checkbox"/> Garage	
	<input type="checkbox"/> Mall/Shopping Center	
	<input type="checkbox"/> Other Private Way	
	Indicate North by Arrow	
		

Crash Narrative:

went airborne twice and he ended up in the yard of 1633 Commonwealth Avenue. Mr. Conneely and his passenger, Ms. Susan Conneely were transported to Newton Wellesley Hospital by Newton Medics for evaluation. Tody's towing repoded and removed MV2 from the property of 1633 Commonwealth Avenue.

Ms. Nancy Ghabi stated she was operating her vehicle on Commonwealth Avenue (W) behind MV1 and MV2 at the time of the crash. Ms. Ghabi stated she observed MV2 to be traveling at a high rate of speed and observed it travel to the right of MV1 and try to go around it. Ms. Ghabi stated she two vehicles then crashed and MV2 ended up in the lawn of 1633 Commonwealth Avenue. Ms. Ghabi described the actions of MV2 to be "erratic".

Mr. John Carey stated he witness the crashed as he was standing on the sidewalk in the area of 1633

(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

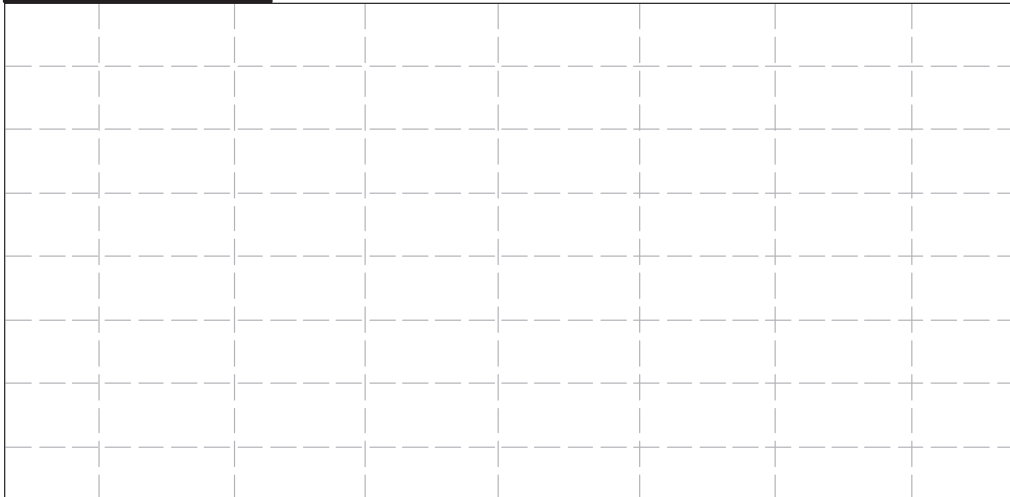
Hazmat Information:

Placard Material 1 digit # Material Name _____ Material 4 digit # _____ Release code

→ 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:

Commonwealth Avenue. Mr. Carey stated MV1 was slowed down in the intersection and MV2 tried to go around MV1's passenger side. The vehicles then crashed and Mr. Carey believes MV2 did not attempt to brake post collision and MV2 ended up on the lawn of 1633 Commonwealth Avenue.

Mr. Conneely will be cited with Massachusetts Uniform Citation 510670AB for Chapter 89, Section 4A (Unsafe Lane Change) and Newton City Ordinance Chapter 19, Section 75 (Fail To Use Care).

Pictures of the property damage to 1633 Commonwealth Avenue were taken and submitted to the IT Bureau.

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

07/11/2022

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date