	Poli	ice Use Only		Commonwea	lth o	f Massa	achus	setts			RM	V Docui	ment Num	ber		
	Date of Crash 07/18/2022	Time of Crash 12:32 24HR	NEWTON	MIOTOI		icle Cra Renort	sh [Number Vehicles 2	Numl Injur	ed Lat	ed Limitude _		State Pol Local Po MBTA F Other:	lice Dice Nolice		
		AT INTEL								TERSECTION:						
							WEST 777 WASHINGTON ST								2	
1 1	Route# Direction Name of Roadway/Street At					Route# Direction Address# Name of Roadway/Street								2		
						Feet NSEW of • or Mile Marker Exit Number										
	Route# Direction Name of Intersecting Roadway/Street Also at Intersection with					Feet N S E W of										
2 1						Route# Intersecting Roadway/Street Feet N S E W of										
	Route# Direction Name of Intersecting Roadway/Street					Landmark										
3	XVehicle1	#Occupants	Number 22000644													
	License # St CA DOB/Age					Reg # 6GF855 Reg Type PAN Reg State MA										
	Sex F Lic. Class D 18 18 Lic. Restrictions 1 19 CDL					Veh Year 2019 Veh Make CHEV Veh Config. 2										
1	Operator TO	WNER	ALICIA	Endorsment		MACDONAL	LD	ROBER	TA			Middle	e		1	
1	Address 403 MAIN ST (apt. 306)					Address 18 INA RD										
	City SAN FRANCISCO State CA Zip 94105					EEDHAM							Zip <u>02492</u>			
5	Insurance Com				Vehicle	Action Prior to		1 22		Damage 2	ed Area		Circle Up to	o Three)		
,		Direction: N	S E X Respo	onding to Emergency? N		sequence 1	23	22)	ercarriage		
	Citation # (If I	·	c Violation	2: ChSec		Contributing Co	1	24	24	—	9		1 1 Tota	~		
1	1	3: Ch Se	Driver Contributing Code 1 25 Towed N 8 7 6													
	Please fill out for operator and all occupants involved						Sei	26 27 at Safety	28 Airbag Ai	29 3 irbag Ejec	0 31	32 Injury Tr	33 ansp.		1	
	Name (Last First Middle) Operator			Address See Above		Age/DOB	Sex Pos	s. \$ystem	Status Sv 4 4	vitch Cod	e Code 0	\$tatus C 10 1	ode Medica	1 Facility	_	
7 1	Please Select (of the Followi	I A Venicia	e2 1_#Occupants	Non-Motorist A Type	e 14	4 Action 1	5 Locati	ion	16 Cor	ndition	17	Пн	it/Run	Moped		
	License#St MA DOB/Age					Reg # 384WT6 Reg Type PAN Reg State MA										
	Sex_F_ Lic. Class D 18 18 Lic. Restrictions B 19 CDL					Veh Year 2016 Veh Make CHRY Veh Config. 2								20		
1	Operator JIANG BING Endorsment Last First Middle					Owner ZHAO ZHAO Last First Middle										
	Address 48 ANTHONY CIR					Address 48 ANTHONY CIR										
	City NEWTON State MA Zip 02460					City NEWTON State MA Zip 02460										
	Insurance Company LM GENERAL					Vehicle Action Prior to Crash 1 Damaged Area Code: (Circle Up to Three) 22 22 22 22 23 3 4										
	Vehicle Travel Direction: NXEW Responding to Emergency? N Citation # (If Issued)					Event Sequence 1 10 Undercarriage										
	Violation 1: Ch Sec Violation 2: Ch Sec					Most Harmful Event 1 9 5 11 Totaled Driver Contributing Code 18 24 24										
	Violation 3: ChSec Violation 4: ChSec					Underride/Override 25 Towed N 8 7										
			operator and all	occupants involved		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ser P	26 27 at Safety	28 Airbag Ai	29 30 Ejec	31 Trap		33 ansp.	-1 F- 77		
	Name (Last Fi	rst Middle) Non-Motorist		See Above		Age/DOB	Sex Po	os. System	Status S	witch Co	de Code 0	Status 0		al Facility		

