

1 Case Number **16-49833** 10 Crash Occurred On: **State Route 18 NB** 11 Speed Limit **40** 118a **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 118b
 3 Station/Precinct **200** Feet N E of: **Paulus Boulevard** S W 18 Speed Limit

4 Date of Crash **08/01/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **1233** 7 Municipality Code **1214** 8 Total Killed **-** 9 Total Injured **-** 19 To: 17 Cross Road Name NB EB
 20 Route/Name SB WB 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **4914975** 25 Ins Code **673** 53 Veh No **2** 54 Policy No. **F482975-0** 55 Ins Code **426** 120
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121

26 Driver's First Name **Thomas** Initial **S** Last Name **Lyons** 28 Sex **M** 56 Driver's First Name **Lavina** Initial **G** Last Name **Ng** 59 Sex **F** 121

27 Number and Street **55 River Edge Dr.** 30 Eyes **4** 57 Number and Street **138 Classic Way** 60 Eyes **2**

28 City **Little Silver, NJ 07739** State Zip 58 City **Morganville, NJ 07751** State Zip

31 State 32 Driver's License No 33 DOB **06/30/89** 34 Expires **mm yy** 61 State 62 Driver's License No 63 DOB **11/09/93** 64 Expires **mm yy** 122

35 Owner's First Name **Landscape Maintenance** Initial Last Name 65 Owner's First Name **Sue** Initial **Y** Last Name **Ng** 123

36 Number and Street **491 Amwell Rd Bld. 1 Suite 100** 66 Number and Street **138 Classic Way** 124
 37 City **Hillsborough, NJ 08844** State Zip 67 City **Morganville, NJ 07751** State Zip 125
07

38 Make **Dodge** 39 Model **Ram** 40 Color **RD** 41 Year **2015** 42 Plate No. **XU571Z** 43 State **NJ** 68 Make **Honda** 69 Model **Ody** 70 Color **BI** 71 Year **2007** 72 Plate No. **JY574P** 73 State **NJ**

44 VIN **3D7TT2CTXBG537064** 45 Expires 74 VIN **5FNRL186X4B034046** 75 Expires

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 126

48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) **Not To Scale** 78 Alcohol/Drug Test Given: No Yes Refused 111
 Type: Breath Blood Urine 112
 Results: 0.00% Pending 127
11

49 Hazardous Material On Board Spill Name or Placard No. 79 Hazardous Material On Board Spill Name or Placard No. 128a
26

50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 128b
128c

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 128d
129a

52 Carrier name 82 Carrier name 129b
26

135 Crash Description **Vehicle 1 was stopped in the middle lane of Route 18 North approximately 200 Feet South of Paulus Blvd. Vehicle 2 struck Vehicle 1 on the rear bumper. Driver 2 stated she was distracted at the time of the crash and could not stop Vehicle 2 in time. No reported injuries.** 129c
129d

136 Damage To Other Property **None** 130
06

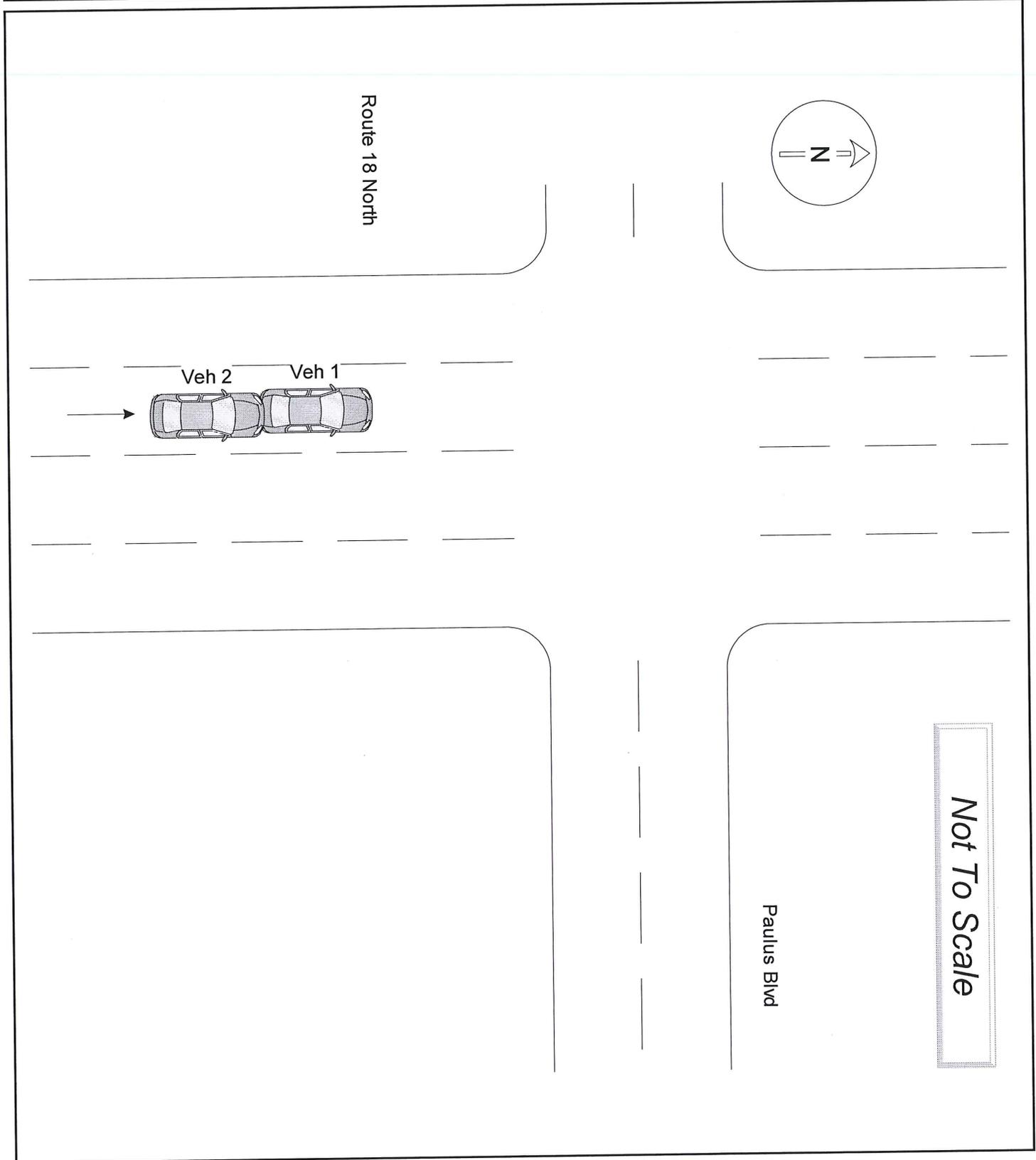
Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 131
06

141 Officer's Signature **PO Tammie Ward 7237** 142 Badge No. **5156** 143 Reviewed By **5156** Badge No. 144 Case Status Pending Complete 132
12

145 Occupant Information Table

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	27	M	----	----	1	09	04	----	----	Lyons, Thomas-55 River Edge Dr., Little Silver, NJ 07739
B	2	01	01	----	22	F	----	----	1	09	04	----	----	Ng, Lavina-138 Classic Way, Morganville, NJ 07751
C														
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-49833</u>



96 05 1 Case Number **16-49846** 10 Crash Occurred On **24** College Avenue 11 Speed Limit
 97 01 2 Police Dept of **New Brunswick** Code **01** 12 Route No. Suffix 13 Milepost 18 Speed Limit
 98 01 3 Station/Precinct

99 07 4 Date of Crash **08/01/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **1336** 7 Municipality Code **1214** 8 Total Killed **00** 9 Total Injured **00**
 100 02 19 Ramp **0** To: 17 Cross Road Name 20 Route/Name 21 Latitude 22 Longitude

101 02 23 Veh No **1** 24 Policy No. **906357776** 25 Ins Code **135** 53 Veh No **2** 54 Policy No. **906126280** 55 Ins Code **134**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

102 01 26 Driver's First Name Initial Last Name **Huiqing Chen** 29 Sex **F** 56 Driver's First Name Initial Last Name **Eddy Santiago** 59 Sex **M**
 103 05 27 Number and Street **25K Meadow Green Circle** 30 Eyes **1** 57 Number and Street **90 E 3rd St** 60 Eyes **2**

104 02 28 City **Manalapan, NJ 07726** State Zip 58 City **Clifton, NJ 07011-1613** State Zip

31 State 32 Driver's License No **12 09 70** 33 DOB **mm dd yy** 34 Expires **mm yy** 61 State 62 Driver's License No **07 13 93** 63 DOB **mm dd yy** 64 Expires **mm yy**

35 Owner's First Name Initial Last Name Same As Drive **Chun W Mak** 65 Owner's First Name Initial Last Name Same As Driver **Eddy Santiago**

36 Number and Street **25K Meadow Green Circle** 66 Number and Street **90 E 3rd St**

37 City **Manalapan, NJ 07726** State Zip 67 City **Clifton, NJ 07011-1613** State Zip

38 Make **NISSAN** 39 Model **JUKE** 40 Color **SIL** 41 Year **201** 42 Plate No. **M80DPE** 43 State **NJ** 68 Make **HON** 69 Model **ACC** 70 Color **GRE** 71 Year **03** 72 Plate No. **X61FLG** 73 State **NJ**

44 VIN **JN8AF5MVODT228580** 45 Expires **10/17** 74 VIN **1HGCM56683A137682** 75 Expires **06/16**

46 Vehicle Removed To Driven Left at Scene Towed 47 Authority Owner Driver Police **Puleio's Towing** 76 Vehicle Removed To Driven Left at Scene Towed 77 Authority Owner Driver Police **Puleio's Towing**

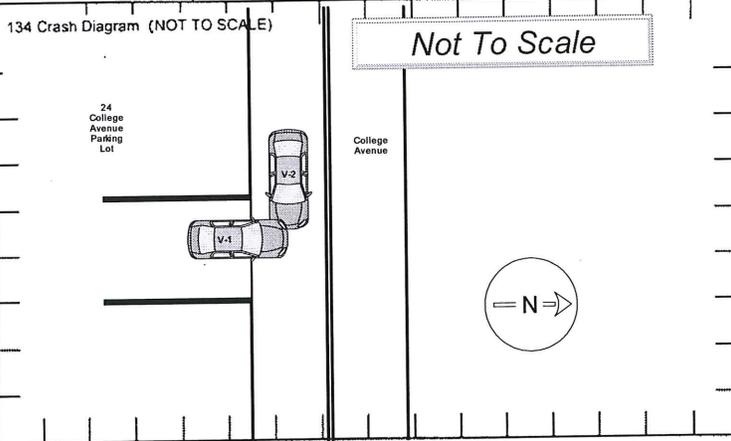
48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending

49 Hazardous Material Name or Placard No. On Board Spill

50 Carrier No USDOT Other *

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

52 Carrier name



78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending

79 Hazardous Material Name or Placard No. On Board Spill

80 Carrier No USDOT Other *

81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

82 Carrier name

135 Crash Description **Vehicle #1 was traveling north out the parking lot of 24 College Avenue. Vehicle #2 was traveling east on College Avenue. A collision occurred when the driver of vehicle #1 attempted to enter into traffic on College Avenue.**

136 Damage To Other Property
 Oper. 137 Charge Multiple Charges 138 Summons No. Oper. **2** 139 Charge **39:3-40** Multiple Charges 140 Summons No. **Q 375625**

141 Officer's Signature **PO Tony Ingram 7166** 142 Badge No. **J QUICK 5156** 143 Reviewed By **J QUICK 5156** 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	45	F	----	----	1	04	04	08	-----	Chen, Huiqing-25K Meadow Green Circle, Manalapan, NJ
B	2	01	01	----	23	M	----	----	1	04	04	01	-----	Santiago, Eddy-90 E 3rd St, Clifton, NJ 07011-1613
C														
D														
E														

New Jersey Police Crash Investigation Report

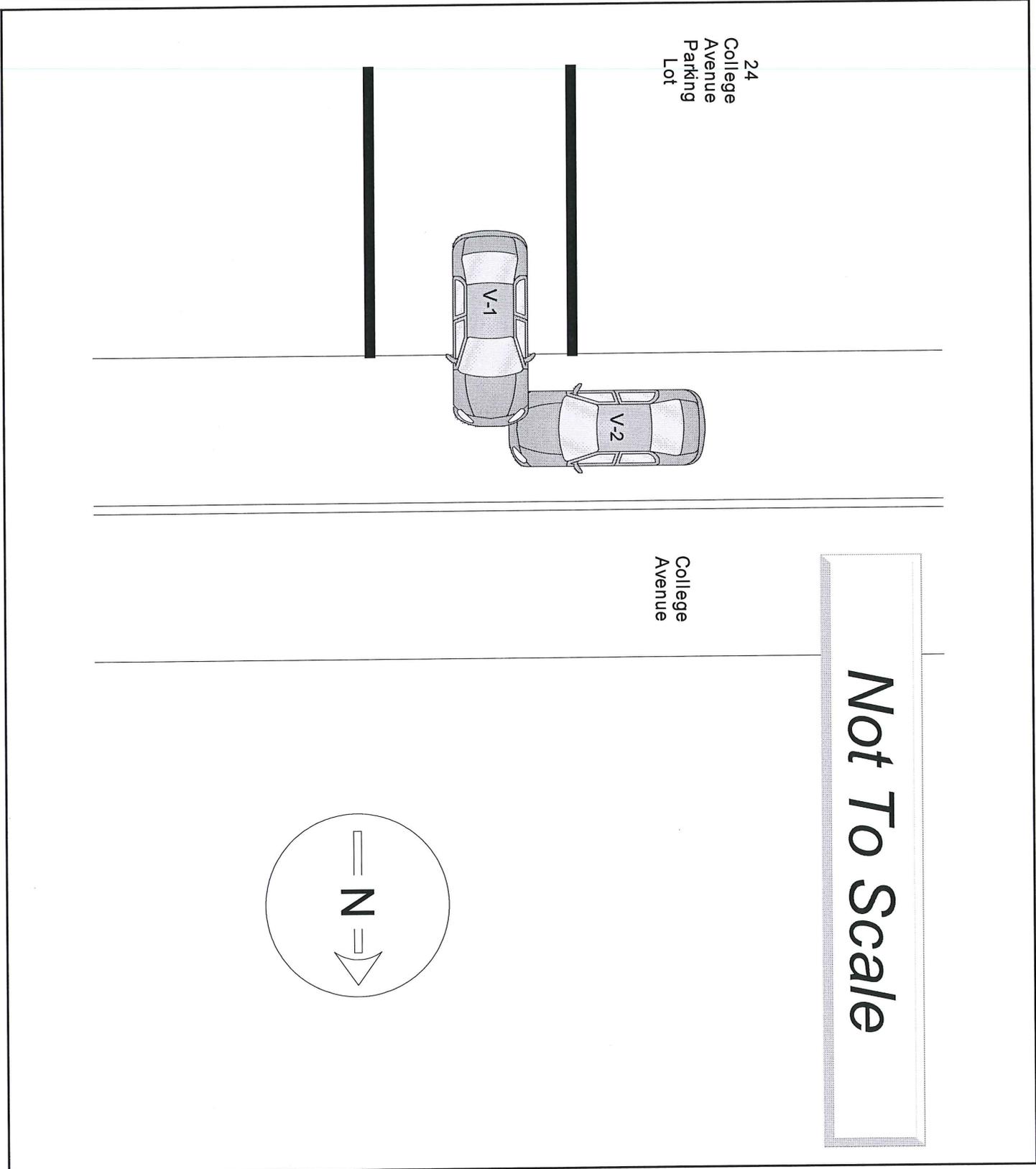
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-49846



New Jersey Police Crash Investigation Report

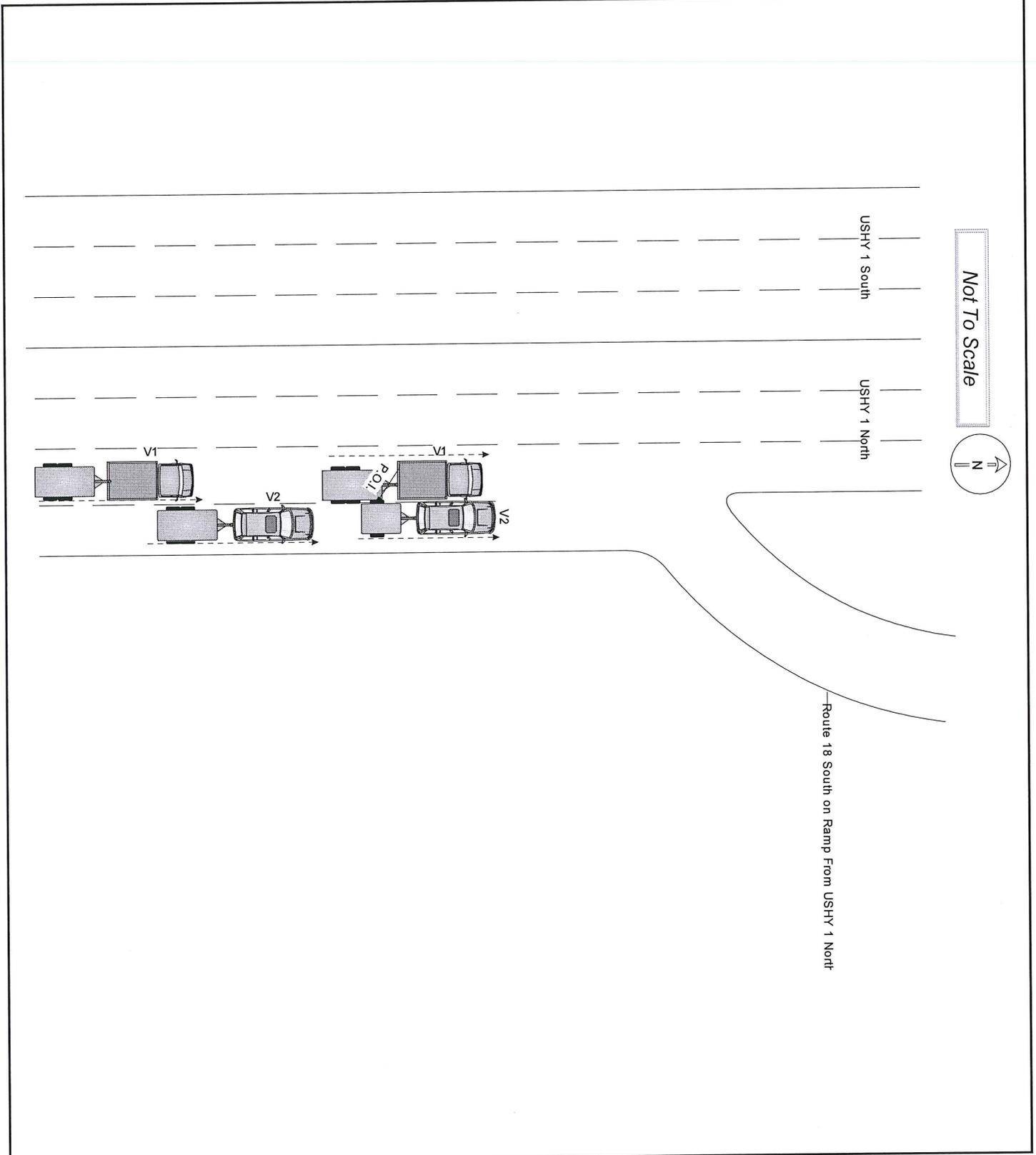
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-49837



96 05 1 Case Number **16-49855** 10 Crash Occurred On **70 Bayard Street** 11 Speed Limit **02**
 97 01 2 Police Dept of **New Brunswick** Code **01** At Intersection with Feet N E of : S W 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b

98 01 3 Station/Precinct **01** 14 Miles 15 16 17 Cross Road Name NB EB 118a
 99 09 4 Date of Crash **08 01 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **14 42** 7 Municipality Code **12114** 8 Total Killed **00** 9 Total Injured **00** 19 To: From: 20 Route/Name SB WB 119a
 100 01 21 Latitude 22 Longitude 119b

101 02 23 Veh No **01** 24 Policy No. **9933909372061** 25 Ins Code **884** 53 Veh No **02** 54 Policy No. **CIC016159410C71016** 55 Ins Code
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 120

102 01 26 Driver's First Name **Carl** Initial **C** Last Name **Smith** 28 Sex **M** 56 Driver's First Name **Kori** Initial **K** Last Name **Fleischman** 59 Sex **F** 121
 103 01 27 Number and Street **107 Kingsberry Dr.** 30 Eyes **2** 57 Number and Street **2089 Jersey Avenue** 60 Eyes **6** 121

104 02 28 City **Somerset, NJ** State **NJ** Zip **08873-4307** 58 City **Scotch Plains, NJ** State **NJ** Zip **07076-4679**
 105 08 31 State 32 Driver's License No 33 DOB **12 26 56** 34 Expires **mm yy** 61 State 62 Driver's License No 63 DOB **05 24 94** 64 Expires **mm yy** 122

35 Owner's First Name Same As Driver Initial Last Name 65 Owner's First Name Same As Driver Initial Last Name 123

36 Number and Street 66 Number and Street 124
 106 37 City State Zip 67 City State Zip 125

107 38 Make **GMC** 39 Model **ACA** 40 Color **WT** 41 Year **15** 42 Plate No. **D90FJP** 43 State **NJ** 68 Make **HYU** 69 Model **SON** 70 Color **SL** 71 Year **11** 72 Plate No. **A58AYZ** 73 State **NJ** 126

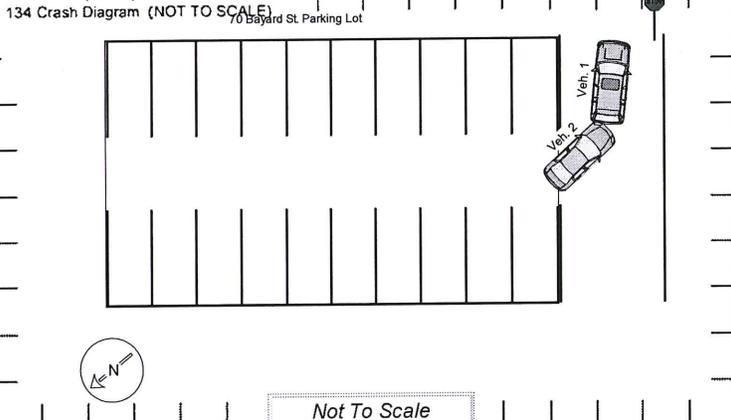
108 04 44 VIN **1GKKRNED0FJ230989** 45 Expires **05/17** 74 VIN **5NPEB4AC7BH295703** 75 Expires **06/17** 127

109 01 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 128

110 01 48 Alcohol/Drug Test Given: No Yes Refused 128
 111 01 Type: Breath Blood Urine 127
 112 Results: 0.____ % Pending 128a

113 49 Hazardous Material On Board Spill Name or Placard No. 79 Hazardous Material On Board Spill Name or Placard No. 128b
 114 50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 128c

116 51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129a
 117 52 Carrier name **USAA** 82 Carrier name **USAA** 129b



135 Crash Description **Veh. 1 and veh. 2 were in the parking lot of 70 Bayard St. Veh. 1 stopped at the stop sign just before exiting the parking lot. Driver of veh. 2 stated that he began to back up when he struck veh. 1. No one were injured in either vehicle. EMS arrived to check on infant child from veh. 2, but did not transport her.** 129d

136 Damage To Other Property 130
 131

137 Charge Multiple Charges 138 Summons No. 139 Charge Multiple Charges 140 Summons No. 132
 133

141 Officer's Signature **PO Miguel Chang 7244** 142 Badge No. **7244** 143 Reviewed By **5190** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	59	M	----	----	1	04	04	----	----	Smith, Carl-107 Kingsberry Dr., Somerset, NJ 08873-4307
B	2	01	01	----	22	F	----	----	1	04	04	----	----	Fleischman, Kori-2089 Jersey Avenue, Scotch Plains, NJ
C	2	09	01	----			----	----		05	05	----	----	
D														
E														

New Jersey Police Crash Investigation Report

Police Dept. New Brunswick

Code 0 1

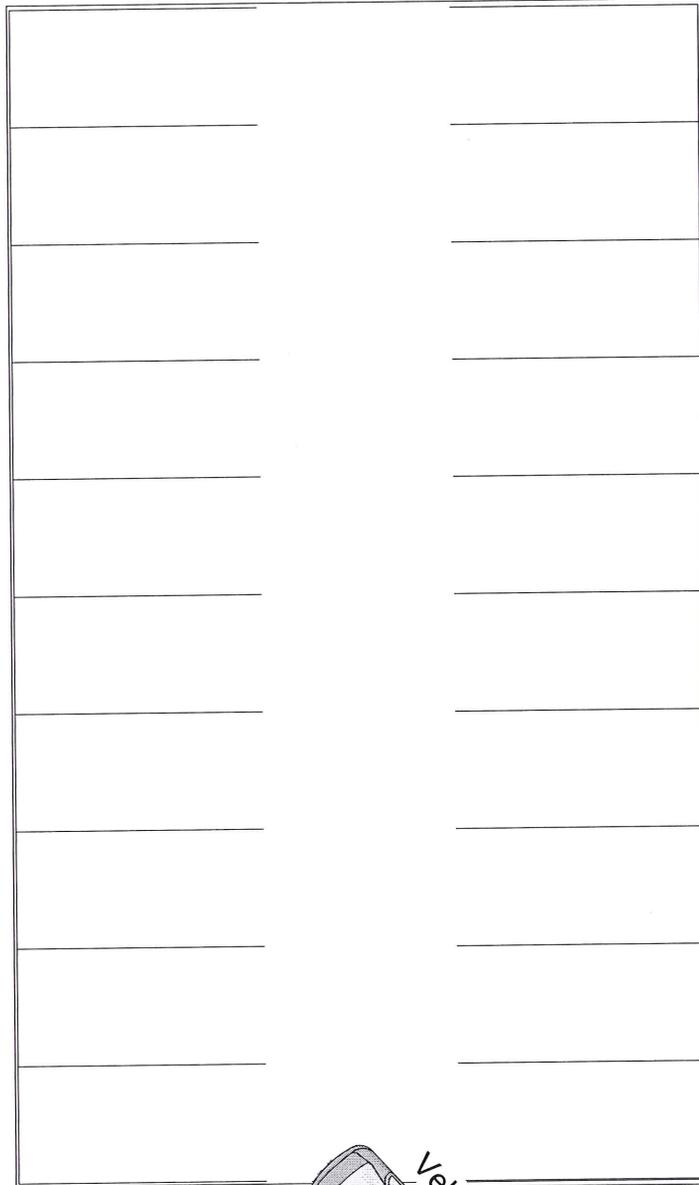
Motor Vehicle Crash Description

Station _____

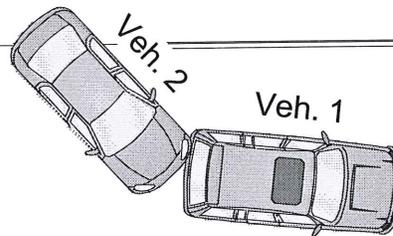
Case No. 16-49855



Not To Scale



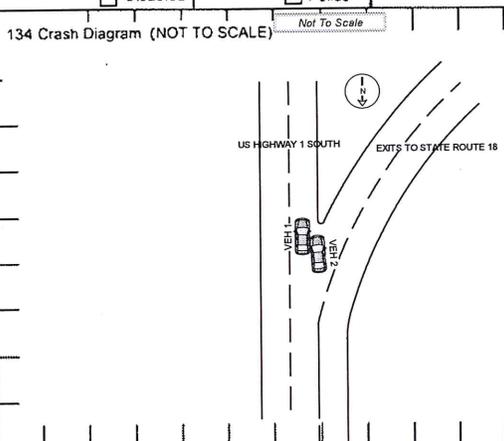
70 Bayard St. Parking Lot



New Jersey Police Crash Investigation Report

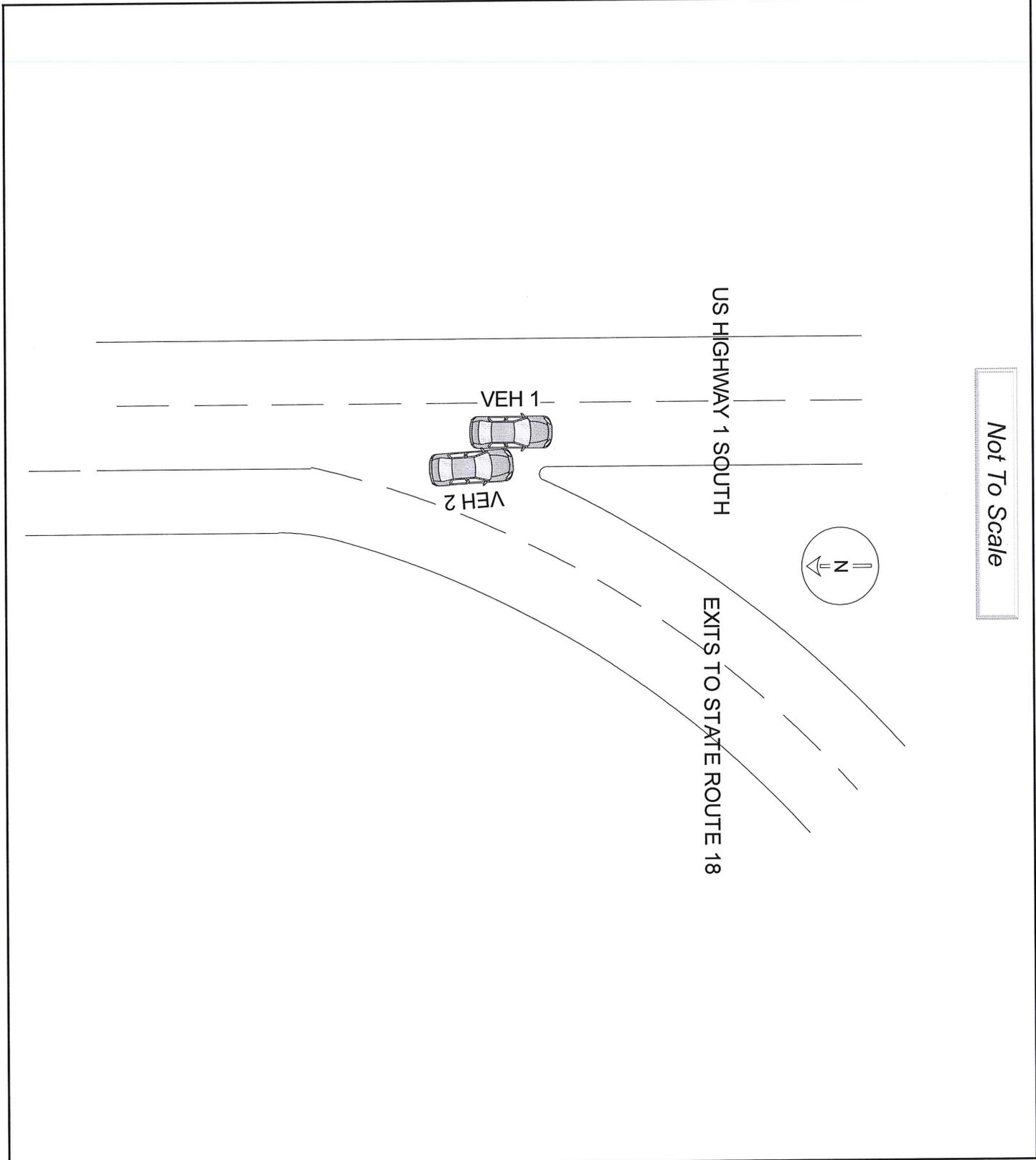
Reportable Non-Reportable Change Report

96 01	Page ____ of ____ <input type="checkbox"/> Fatal		1 Case Number 16-49862										10 Crash Occurred On: US Highway 1 SB		11 Speed Limit 5 5		12 Route No. Suffix		13 Milepost		18 Speed Limit		118a 25
97 01	2 Police Dept of New Brunswick Code 01		3 Station/Precinct										<input type="checkbox"/> At Intersection with <input type="checkbox"/> Feet <input type="checkbox"/> Miles		<input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W of:		17 Cross Road Name		<input type="checkbox"/> NB <input type="checkbox"/> EB <input type="checkbox"/> SB <input type="checkbox"/> WB		118b ----		
98 01	4 Date of Crash 08 01 16		5 Day of Week Su		6 Time (use 2400 hrs) 15 19		7 Municipality Code 12114		8 Total Killed 00		9 Total Injured 00		19 Ramp <input type="checkbox"/> To: <input type="checkbox"/> From:		20 Route/Name		22 Longitude		119a 02				
99 03	23 Veh No 1		24 Policy No. F123976-3		25 Ins Code 426		53 Veh No 2		54 Policy No. HPA00002074270		55 Ins Code 411		21 Latitude		22 Longitude		119b 05						
100 01	26 Driver's First Name Amira Initial A Last Name Smith		29 Sex F		56 Driver's First Name Jayshreeb Initial J Last Name Patel		59 Sex F		<input type="checkbox"/> Parked <input type="checkbox"/> Ped <input type="checkbox"/> Pedalcyclist <input type="checkbox"/> Resp to Emergency <input type="checkbox"/> Hit & Run		<input type="checkbox"/> Parked <input type="checkbox"/> Ped <input type="checkbox"/> Pedalcyclist <input type="checkbox"/> Resp to Emergency <input type="checkbox"/> Hit & Run		60 Eyes 1				120 01						
101 02	27 Number and Street 301 Rivendell Way		30 Eyes 2		57 Number and Street 55 Magnolia Road		60 Eyes 1		28 City Edison, NJ 08817-2008		58 City Iselin, NJ 08830-1531		63 DOB 03 19 74		64 Expires mm yy		121 01						
102 01	31 State		32 Driver's License No		33 DOB 01 07 95		34 Expires mm yy		61 State		62 Driver's License No		63 DOB 03 19 74		64 Expires mm yy		122 ----						
103 01	35 Owner's First Name Mark Initial M Last Name Smith		65 Owner's First Name Jayshreeb Initial J Last Name Patel		<input type="checkbox"/> Same As Driver		<input type="checkbox"/> Same As Driver		36 Number and Street 35 Johnson Ave		66 Number and Street 55 Magnolia Road		67 City Iselin, NJ 08830-1531		68 City Iselin, NJ 08830-1531		123 ----						
104 02	37 City Piscataway, NJ 08854-6025		67 City Iselin, NJ 08830-1531		38 Make HON		39 Model ACC		40 Color SL		41 Year 05		42 Plate No. K24FHA		43 State NJ		124 01						
105 02	44 VIN 1HGCM82475A017543		45 Expires 04/17		74 VIN 1NXXBR12E52Z645151		75 Expires 12/16		46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		125 11						
106 ----	48 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		49 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		50 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		51 Commercial Vehicle Weight <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs		52 Carrier name		53 Crash Description		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		126 04				
107 ----	49 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		50 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		51 Commercial Vehicle Weight <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs		52 Carrier name		53 Crash Description		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		127 04				
108 01	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		128a 26				
109 01	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		128b ----				
110 ----	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		128c ----				
111 ----	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		128d ----				
112 ----	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		129a 26				
113 ----	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		129b 48				
114 ----	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		129c ----				
115 ----	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		129d ----				
116 03	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		130 03				
117 03	46 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		47 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		76 Vehicle Removed To <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Left at Scene <input type="checkbox"/> Towed <input type="checkbox"/> Impound <input type="checkbox"/> Disabled		77 Authority <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		54 Crash Diagram (NOT TO SCALE)		54 Crash Diagram (NOT TO SCALE)		78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material On Board <input type="checkbox"/> Spill <input type="checkbox"/>		80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *		131 03				
35 Crash Description										Driver 1 stated she was traveling in the right lane of US Highway 1 southbound. Driver 1 stated vehicle 2 moved towards her vehicle, suddenly, and without warning, striking her vehicle. Driver 2 stated she was traveling southbound on US Highway 1 southbound, and did not want to exit towards State Route 18. Driver 2 stated she moved left to reenter Highway 1, and collided with vehicle 1. No injuries reported by either driver. Both vehicles driven from scene with minor apparent damage. P.O. M. SMITH 7258 136 Damage To Other Property										132 09			
Oper.		137 Charge <input type="checkbox"/> Multiple Charges		138 Summons No.		Oper.		139 Charge <input type="checkbox"/> Multiple Charges		140 Summons No.		141 Officer's Signature PO Mark Smith 7258		142 Badge No. 5216		143 Reviewed By		144 Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete		133 01			



	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	21	F	----	----	1	04	04	----	----	Smith, Amira-301 Rivendell Way, Edison, NJ 08817-2008
B	2	01	01	----	42	F	----	----	1	04	04	----	----	Patel, Jayshreeb-55 Magnolia Road, Iselin, NJ 08830-1531
C														
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-49862</u>



96 05 1 Case Number **16-49890** 10 Crash Occurred On: **State Route 18 SB** 11 Speed Limit **5 0** 118a **25**
 97 01 2 Police Dept of **New Brunswick** Code **01** 12 Route No. Suffix 13 Milepost **5 0** 118b **----**
 98 01 3 Station/Precinct **10** At Intersection with Road Name Dir N E of: **US Highway 1 SB** 18 Speed Limit **5 0**
 99 02 4 Date of Crash **08 01 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **18 34** 7 Municipality Code **12114** 8 Total Killed **-** 9 Total Injured **-** 19 To: 17 Cross Road Name NB EB
 100 01 20 Route/Name **State Route 18 SB** SB WB 119a **02**
 101 02 21 Latitude **40 33 16 N** 22 Longitude **74 30 16 W** 119b **----**

101 02 23 Veh No **1** 24 Policy No. **HPA00002018543** 25 Ins Code **411** 53 Veh No **2** 54 Policy No. **4118-10-05-12** 55 Ins Code **148** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

102 01 26 Driver's First Name Initial Last Name **Shouhwa Liu** 29 Sex **M** 56 Driver's First Name Initial Last Name **Alexia Marrache** 59 Sex **F** 121 **01**

103 01 27 Number and Street **5 Banner Court** 30 Eyes **1** 57 Number and Street **35 River Drive South** 60 Eyes **5**

104 02 28 City **East Brunswick, NJ 08816-1119** 58 City **Jersey City, NJ 07310-3798**

105 01 31 State 32 Driver's License No 33 DOB **03 30 60** 34 Expires **mm yy** 61 State 62 Driver's License No 63 DOB **08 04 95** 64 Expires **mm yy** 122 **----**

35 Owner's First Name Initial Last Name Same As Driver **Michael Marrache** 123 **----**

36 Number and Street **35 River Drive South** 66 Number and Street **35 River Drive South** 124 **07**

37 City **Jersey City, NJ 07310-1701** 67 City **Jersey City, NJ 07310-1701** 125 **01**

38 Make **TOY** 39 Model **COR** 40 Color **NO-** 41 Year **06** 42 Plate No. **JRL35H** 43 State **NJ** 68 Make **ACU** 69 Model **MDX** 70 Color **WT** 71 Year **05** 72 Plate No. **WYM57U** 73 State **NJ**

44 VIN **2T1BR32E06C647120** 45 Expires **02/17** 74 VIN **2HNYD18255H559270** 75 Expires **07/17**

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 126 **04**

48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) entrance line from US Highway 1 North 78 Alcohol/Drug Test Given: No Yes Refused 127 **04**
 Type: Breath Blood Urine
 Results: 0.____ % Pending

49 Hazardous Material On Board Spill Name or Placard No. 79 Hazardous Material On Board Spill Name or Placard No. 128a **26**
 128b **----**

50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 128c **----**
 128d **----**

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129a **26**
 52 Carrier name 82 Carrier name 129b **----**



135 Crash Description **Vehicles 1 and 2 were traveling in the middle lane of State Route 18 Southbound. Traffic was heavy and slow moving at this time. Driver of vehicle 1 stated he was driving slow in traffic when vehicle 2 suddenly rear ended him. Driver of vehicle 2 stated she accidentally struck vehicle 1.** 129c **----**
 129d **----**

136 Damage To Other Property **06**
06

137 Charge Multiple Charges 138 Summons No. 139 Charge Multiple Charges 140 Summons No. 132 **12**
 133 **12**

141 Officer's Signature **PO Eric Brown 7222** 142 Badge No. **7264** 143 Reviewed By **5216** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	56	M	----	----	----	04	04	----	----	Liu, Shouhwa-5 Banner Court, East Brunswick, NJ 08816
B	2	01	01	----	20	F	----	----	----	04	04	----	----	Marrache, Alexia-35 River Drive South, Jersey City, NJ 07310
C														
D														
E														

New Jersey Police Crash Investigation Report

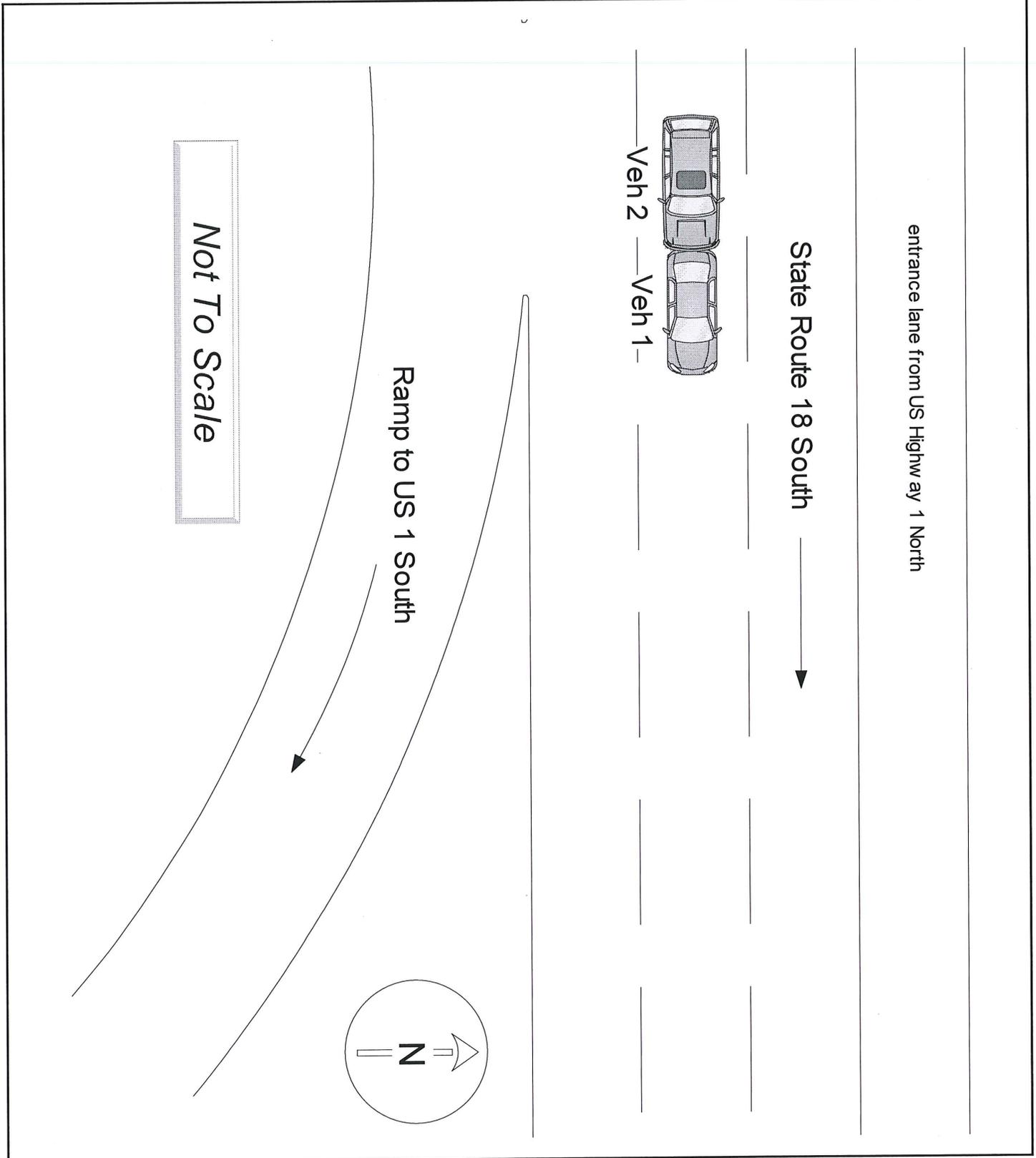
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-49890

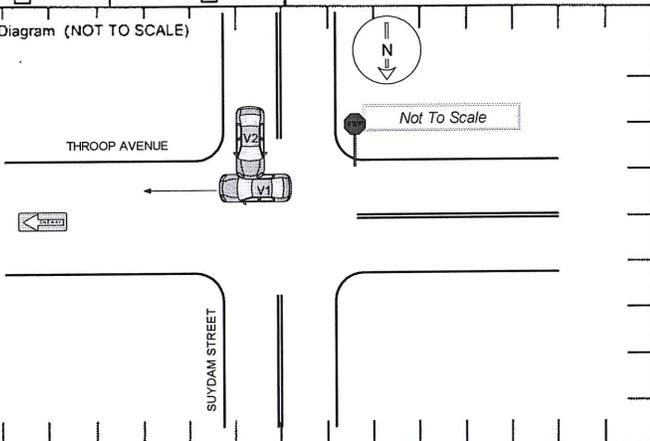


04 1 Case Number **16-49901** 10 Crash Occurred On: **Suydam Street** 11 Speed Limit **25** 118a
 01 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 18 Speed Limit **25** 118b
 03 3 Station/Precinct **01** Feet N E of: **Throop Avenue** S W 17 Cross Road Name NB EB 119a
 07 4 Date of Crash **08/01/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **1957** 7 Municipality Code **12114** 8 Total Killed **0** 9 Total Injured **02** 19 To: 17 Ramp From: 20 Route/Name 21 Latitude 22 Longitude NB EB SB WB 119b
 01 100 23 Veh No **1** 24 Policy No. **PAA00002447328** 25 Ins Code **963** 53 Veh No **2** 54 Policy No. **4410064414** 55 Ins Code **100** 119c

01 101 26 Driver's First Name **Theodore** Initial **D** Last Name **Darko** 29 Sex **M** 56 Driver's First Name **Brenda** Initial **B** Last Name **Gayden** 59 Sex **F** 120
 01 102 27 Number and Street **9 Henry Street** 30 Eyes **2** 57 Number and Street **401 Sandford St** 60 Eyes **2** 121
 02 103 28 City **South River, NJ 08882-1025** State **NJ** Zip **08882** 58 City **New Brunswick, NJ 08901-2345** State **NJ** Zip **08901** 122
 03 104 31 State **08** 32 Driver's License No **2279** 33 DOB **08/22/79** 34 Expires **mm dd yy** 61 State **06** 62 Driver's License No **1362** 63 DOB **06/13/62** 64 Expires **mm dd yy** 123

01 105 35 Owner's First Name **Theodore** Initial **D** Last Name **Darko** 65 Owner's First Name **Brenda** Initial **B** Last Name **Gayden** 124
 01 106 36 Number and Street **9 Henry Street** 66 Number and Street **401 Sandford St** 125
 01 107 37 City **South River, NJ 08882-1025** State **NJ** Zip **08882** 67 City **New Brunswick, NJ 08901-2345** State **NJ** Zip **08901** 126
 01 108 38 Make **NIS** 39 Model **ROG** 40 Color **BLA** 41 Year **12** 42 Plate No. **E53FSS** 43 State **NJ** 68 Make **TOY** 69 Model **SIE** 70 Color **GY** 71 Year **04** 72 Plate No. **P48DJH** 73 State **NJ** 127
 01 109 44 VIN **JN8AS5MT5CW602723** 45 Expires **08/16** 74 VIN **5TDBA22C54S017856** 75 Expires **07/16** 128
 01 110 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 129

01 111 48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 128
 01 112 Type: Breath Blood Urine 135 Crash Description **See Page 2.** 79 Hazardous Material Name or Placard No. 129
 113 Results: 0% Pending 136 Damage To Other Property 80 Carrier No. USDOT Other 130
 114 49 Hazardous Material On Board Spill 81 Commercial Vehicle Weight ≤ 10,000 lbs 131
 115 50 Carrier No. USDOT Other 82 Carrier name 132
 116 51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 133
 117 52 Carrier name 134



118 83 84 85 86 87 88 89 90 91 92 93 94 95 Names & Addresses of Occupants - If Deceased, Date & Time of Death
 A 1 01 01 36 M 1 09 09 08 Darko, Theodore-9 Henry Street, South River, NJ 08882-1025
 B 2 01 01 04 54 F 07 08 2 09 04 6202 Gayden, Brenda-401 Sandford St, New Brunswick, NJ 08901
 C 2 03 01 04 62 F 11 08 2 09 04 6202 Gayden, Elizabeth-210 Hollwood Dr, Hamilton, NJ 08609-1804
 D
 E

135 Crash Description **See Page 2.**
 136 Damage To Other Property
 Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.
 141 Officer's Signature **PO Anthony Jones 7337** 142 Badge No. **7337** 143 Reviewed By **5190** Badge No. 144 Case Status Pending Complete

New Jersey Police Crash Investigation Report

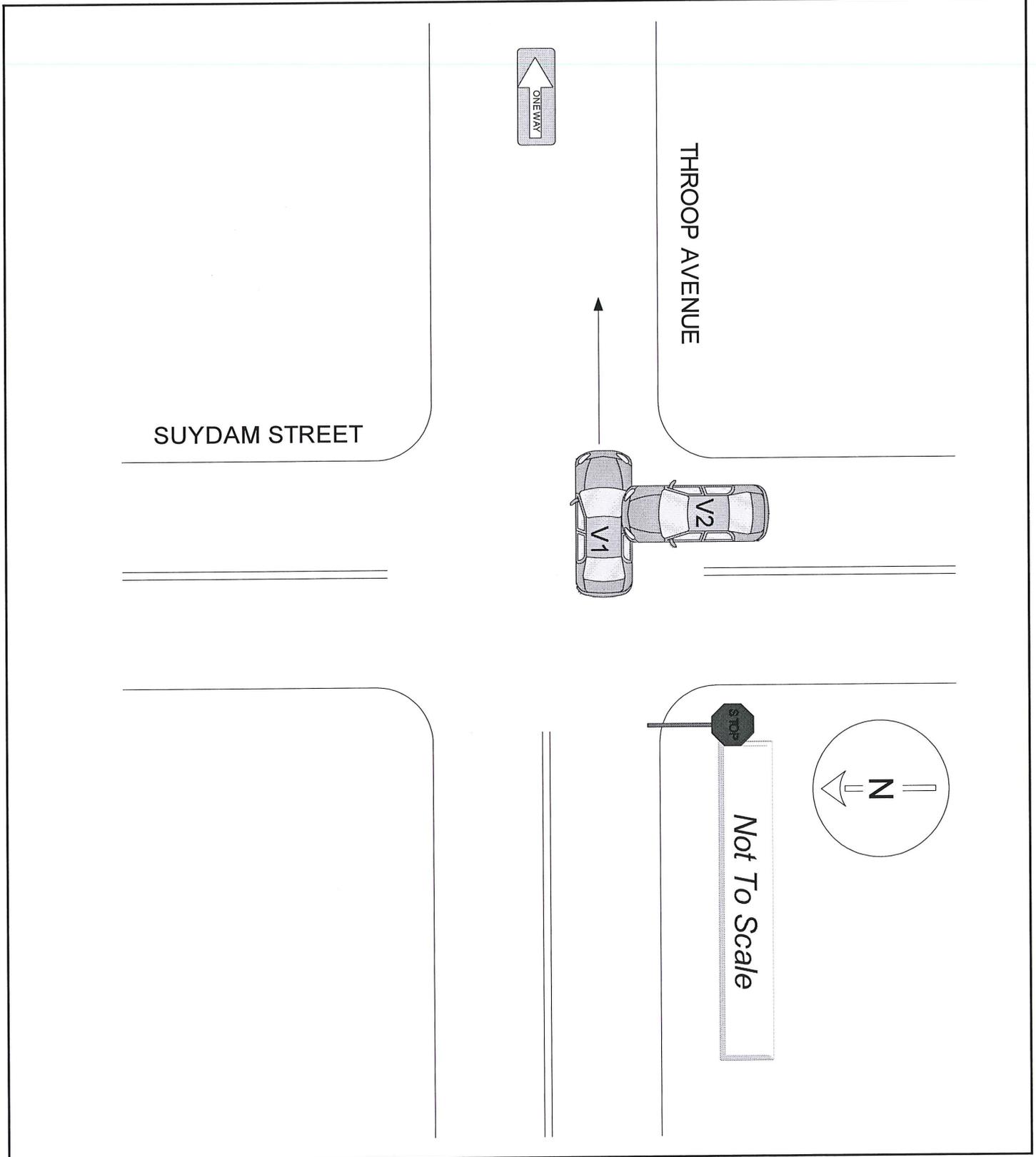
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-49901



96 **04** 1 Case Number **16-49903** 10 Crash Occurred On **39** **Simplex Avenue** 11 Speed Limit **2 5** 118a **25**
 97 **01** 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b **25**
 98 **06** 3 Station/Precinct

99 **07** 4 Date of Crash **08 01 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **20 41** 7 Municipality Code **12 14** 8 Total Killed **0 0** 9 Total Injured **0 0** 19 To: 17 Cross Road Name NB EB SB WB 119a **02**
 100 **01** 20 Route/Name 22 Longitude 119b **02**

101 **02** 23 Veh No **1** 24 Policy No. **96082921NP** 25 Ins Code **019** 53 Veh No **2** 54 Policy No. **UNKNOWN** 55 Ins Code
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

102 **01** 26 Driver's First Name **Kevin** Initial **M** Last Name **Mitchell** 29 Sex **M** 56 Driver's First Name **UNKNOWN** Initial **UNKNOWN** Last Name **UNKNOWN** 59 Sex **UNKNOWN** 120
 103 **01** 27 Number and Street **39 Simplex Ave** 30 Eyes **1** 57 Number and Street 60 Eyes **00** 121

104 **02** 28 City **New Brunswick, NJ** State **NJ** Zip **08901-3222** 58 City **UNKNOWN** State **UNKNOWN** Zip **UNKNOWN** 122

105 **02** 31 State 32 Driver's License No 33 DOB **07 06 65** 34 Expires **02 17** 61 State 62 Driver's License No 63 DOB 64 Expires 123

35 Owner's First Name **Kevin** Initial **M** Last Name **Mitchell** 65 Owner's First Name **UNKNOWN** Initial **UNKNOWN** Last Name **UNKNOWN** 124
 Same As Driver Same As Driver

36 Number and Street **39 Simplex Ave** 66 Number and Street **UNKNOWN** 125
 106 **00** 37 City **New Brunswick, NJ** State **NJ** Zip **08901-3222** 67 City **UNKNOWN** State **UNKNOWN** Zip **UNKNOWN** 126

107 **00** 38 Make **CAD** 39 Model **CTS** 40 Color **SL** 41 Year **06** 42 Plate No. **C79GGK** 43 State **NJ** 68 Make **UNKNOWN** 69 Model **UNKNOWN** 70 Color **UNKNOWN** 71 Year **UNKNOWN** 72 Plate No. **UNKNOWN** 73 State **UNKNOWN** 127

108 **01** 44 VIN **1G6DP577860161740** 45 Expires **02/17** 74 VIN **UNKNOWN** 75 Expires 128a **26**

109 **00** 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 128b **28**

110 **01** 48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 127
 111 **00** Type: Breath Blood Urine 79 Hazardous Material Name or Placard No. 128a **26**
 112 Results: 0.____ % Pending 80 Carrier No. USDOT Other * 128b **28**

113 **00** 49 Hazardous Material Name or Placard No. 81 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs 129a **28**
 114 On Board Spill 82 Carrier name 129b
 115 50 Carrier No. USDOT Other * 129c

116 **00** 51 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs 129a **28**
 117 **00** 52 Carrier name 129b

135 Crash Description **See Page 2.** 129c
 129d

136 Damage To Other Property 130 **09**
 131 **10**

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 132
 133

141 Officer's Signature **PO Anthony Jones 7337** 142 Badge No. **7337** 143 Reviewed By **5190** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A					51	M								Mitchell, Kevin-39 Simplex Ave, New Brunswick, NJ 08901
B														
C														
D														
E														

New Jersey Police Crash Investigation Report

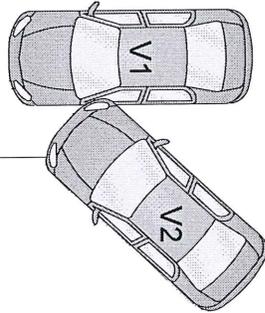
Police Dept. New Brunswick

Code 01

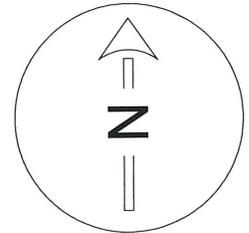
Motor Vehicle Crash Description

Station _____

Case No. 16-49903



Not To Scale



96 05
97 01
98 01
99 07
100 01
101 02
102 01
103 05
104 02
105 06

1 Case Number **16-49963** 10 Crash Occurred On: **Sandford Street** 11 Speed Limit

2 Police Dept of **New Brunswick** Code **01** 12 Route No. Suffix 13 Milepost 18 Speed Limit

3 Station/Precinct **0020** Feet N E of: **Jersey Avenue** S W

4 Date of Crash mm dd yy 5 Day of Week Su M Tu W Th F Sa 6 Time (use 2400 hrs) **06 45** 7 Municipality Code **12114** 8 Total Killed **00** 9 Total Injured **00**

19 To: 17 Cross Road Name NB EB SB WB

20 Route/Name 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **0505057820** 25 Ins Code **945** 53 Veh No **2** 54 Policy No. **00** 55 Ins Code **00**

Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name Initial Last Name 29 Sex **00** 56 Driver's First Name Initial Last Name **00** 59 Sex **00**

27 Number and Street 30 Eyes 57 Number and Street **00** 60 Eyes **00**

28 City State Zip 58 City **00** State Zip

31 State 32 Dvr's License No 33 DOB mm dd yy 34 Expires mm yy 61 State 62 Driver's License No 63 DOB mm dd yy 64 Expires mm yy

35 Owner's First Name Initial Last Name Same As Driver **Berta A Cortes** 65 Owner's First Name Initial Last Name Same As Driver **00 0**

36 Number and Street **P.O. Box 5420 New Brunswick** 66 Number and Street **00**

37 City **NJ 08903** State Zip 67 City **00** State Zip

38 Make **NISSAN** 39 Model **SENTR** 40 Color **RED** 41 Year **200** 42 Plate No. **Y61GMA** 43 State **NJ** 68 Make **00** 69 Model **00** 70 Color **00** 71 Year **00** 72 Plate No. **00** 73 State

44 VIN **3N1AB61E18L652915** 45 Expires **00** 74 VIN **00** 75 Expires

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending

49 Hazardous Material On Board Spill Name or Placard No.

50 Carrier No. USDOT Other *

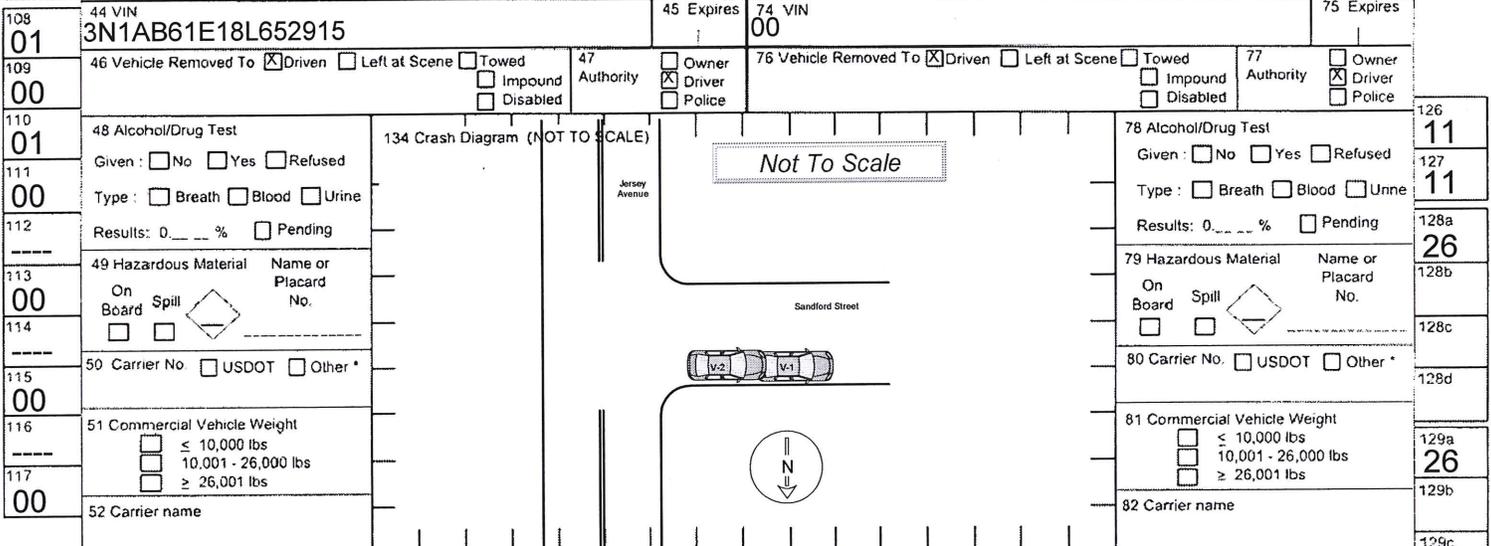
51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 52 Carrier name

78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending

79 Hazardous Material On Board Spill Name or Placard No.

80 Carrier No. USDOT Other *

81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 82 Carrier name



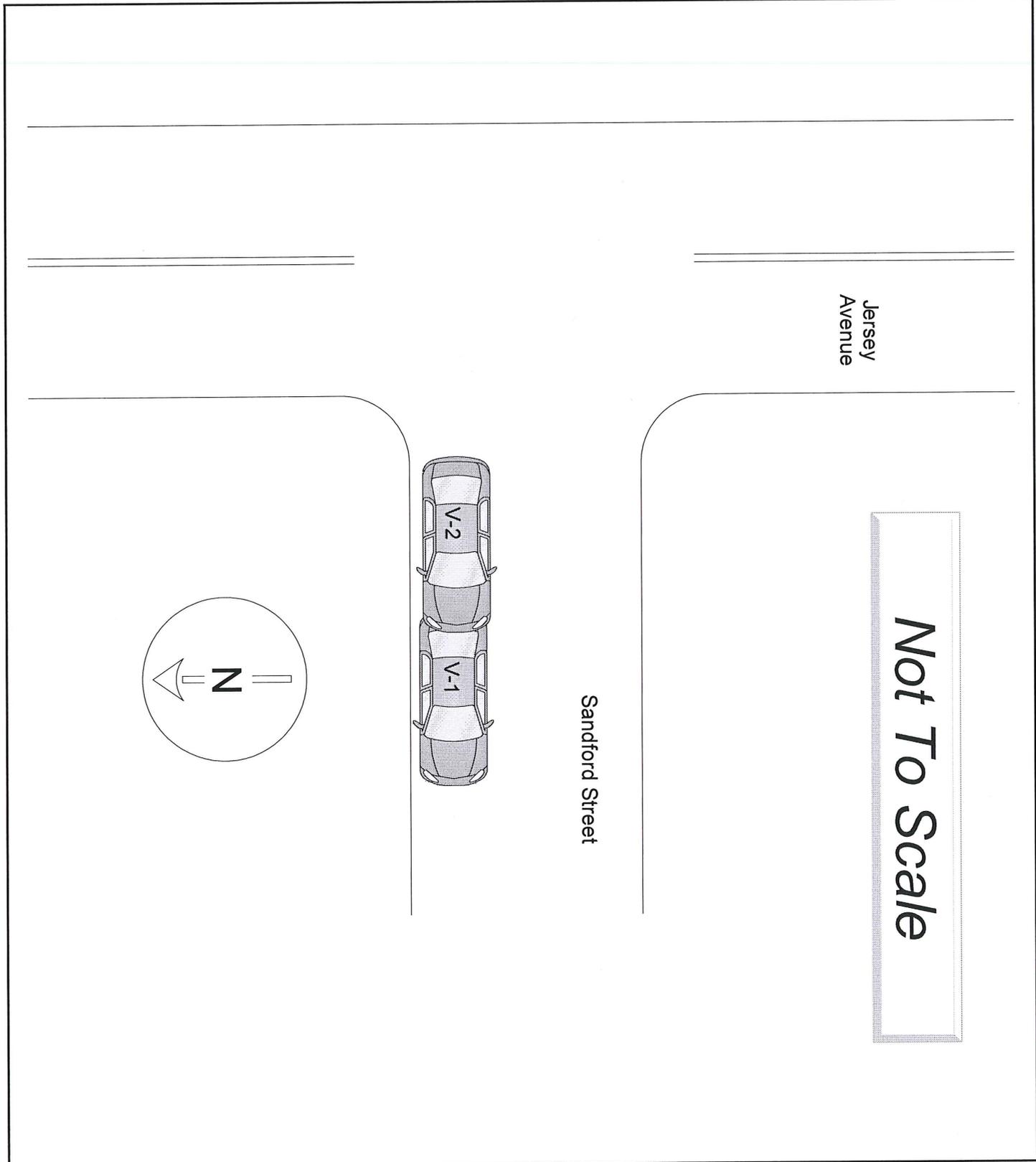
136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Tony Ingram 7166** 142 Badge No. **J QUICK 5156** 143 Reviewed By **J QUICK 5156** 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. <u>New Brunswick</u> Station _____	Code <u>01</u> Case No. <u>16-49963</u>
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05 1 Case Number **16-49975** 10 Crash Occurred On: **Handy Street** 11 Speed Limit 118a **03**

01 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name **Livingston Avenue** Dir N E S W 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b **02**

01 3 Station/Precinct **01** 14 Feet Miles 15 16 17 Cross Road Name 19 To: 20 Route/Name 21 Latitude 22 Longitude 119a **25**

05 4 Date of Crash **08/02/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **08 11** 7 Municipality Code **1214** 8 Total Killed 9 Total Injured 10 NB EB SB WB 119b **25**

01 23 Veh No **1** 24 Policy No. **F855004-8** 25 Ins Code **426** 53 Veh No **2** 54 Policy No. **F044132-9** 55 Ins Code **426** 120 **01**

01 Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121 **01**

01 26 Driver's First Name **Nancy** Initial **U** Last Name **chrin** 29 Sex **F** 56 Driver's First Name **Irene** Initial **R** Last Name **Plaska** 59 Sex **F** 121 **01**

01 27 Number and Street **20 Burchard Street So. #1** 30 Eyes **2** 57 Number and Street **14 Wooleytown Road** 60 Eyes **4**

02 28 City **Edison, NJ** State **NJ** Zip **08837-3245** 58 City **Morganville NJ** State **NJ** Zip **07751**

03 31 State **03** 32 Dvr's License No **11 18 52** 33 DOB **mm dd yy** 34 Expires **mm yy** 61 State **03** 62 Driver's License No **08 06 65** 63 DOB **mm dd yy** 64 Expires **mm yy** 122 **----**

03 35 Owner's First Name **Nancy** Initial **U** Last Name **chrin** 65 Owner's First Name **Irene** Initial **R** Last Name **Plaska** 123 **----**

Same As Driver 124 **01**

06 36 Number and Street **20 Burchard Street So. #1** 66 Number and Street **14 Wooleytown Road** 125 **08**

106 37 City **Edison, NJ** State **NJ** Zip **08837-3245** 67 City **Morganville NJ** State **NJ** Zip **07751**

07 38 Make **CHE** 39 Model **IMP** 40 Color **BL** 41 Year **07** 42 Plate No. **E24CHR** 43 State **NJ** 68 Make **KIA** 69 Model **OPT** 70 Color **gry** 71 Year **12** 72 Plate No. **N13CNJ** 73 State **NJ**

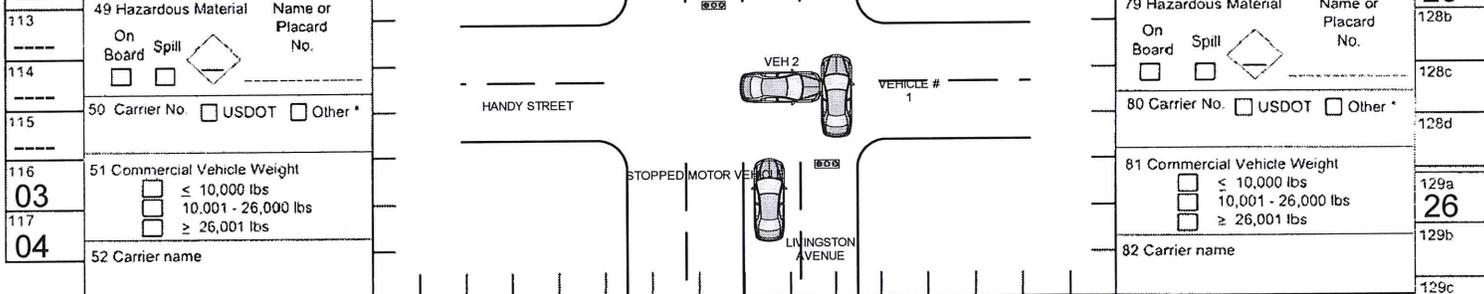
01 44 VIN **2G1WT58K679337186** 45 Expires **08/17** 74 VIN **5XXGN4A76CG068650** 75 Expires **9/16** 126 **03**

01 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 127 **03**

01 48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 128a **26**

01 49 Hazardous Material Name or Placard No. 128b **26**

01 50 Carrier No USDOT Other * 128c **26**



03 51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129a **26**

04 52 Carrier name 129b **26**

137 Charge Multiple Charges 138 Summons No. **5190** 139 Charge Multiple Charges 140 Summons No. **5190** 133 **12**

141 Officer's Signature **PO Dean Dakin 7236** 142 Badge No. **5190** 143 Reviewed By **5190** Badge No. **5190** 144 Case Status Pending Complete 134 **12**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	63	F	----	----	1	09	04	----		Uchrin, Nancy-20 Burchard Street So. #1, Edison, NJ 08837
B	2	01	01	----	50	F	----	----	1	09	04	----		Plaska, Irene-14 Wooleytown Road, Morganville NJ 07751
C														
D														
E														

<p>New Jersey Police Crash Investigation Report</p> <p>Motor Vehicle Crash Description</p>	<p>Police Dept: <u>New Brunswick</u> Code: <u>01</u></p> <p>Station: _____ Case No: <u>16-49975</u></p>
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(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
I														
N														
V														
O														
L														
V														
E														
J														

135 Crash Description

On 08/02/2016 at 0811hrs. I was on routine patrol in the area of livingston Avenue and Handy Street, when I observed a traffic accident at the intersection of Livingston Avenue and Handy Street that occurred prior to my arrival. As I exit my police vehicle several motorist had stop to assist the drivers that were involved in this accident. These individuals informed this officer that that vehicle number one failed to stop at the traffic light. Vehicle number one then traveled into the intersection was struck by vehicle number two that was traveling on Handy Street and was crossing over Livingston Avenue.

Speaking with driver number 2, she stated she was traveling north on Handy Street as she was crossing over Livingston Avenue, vehicle number 1 failed to stop at the the traffic light. Vehicle number 2 was then unable to stop and struck vehicle number 1.

Speaking with driver number 1, she stated she was traveling south in the right lane of Livingston Avenue, when vehicle number 2 came out of no where and struck her vehicle.

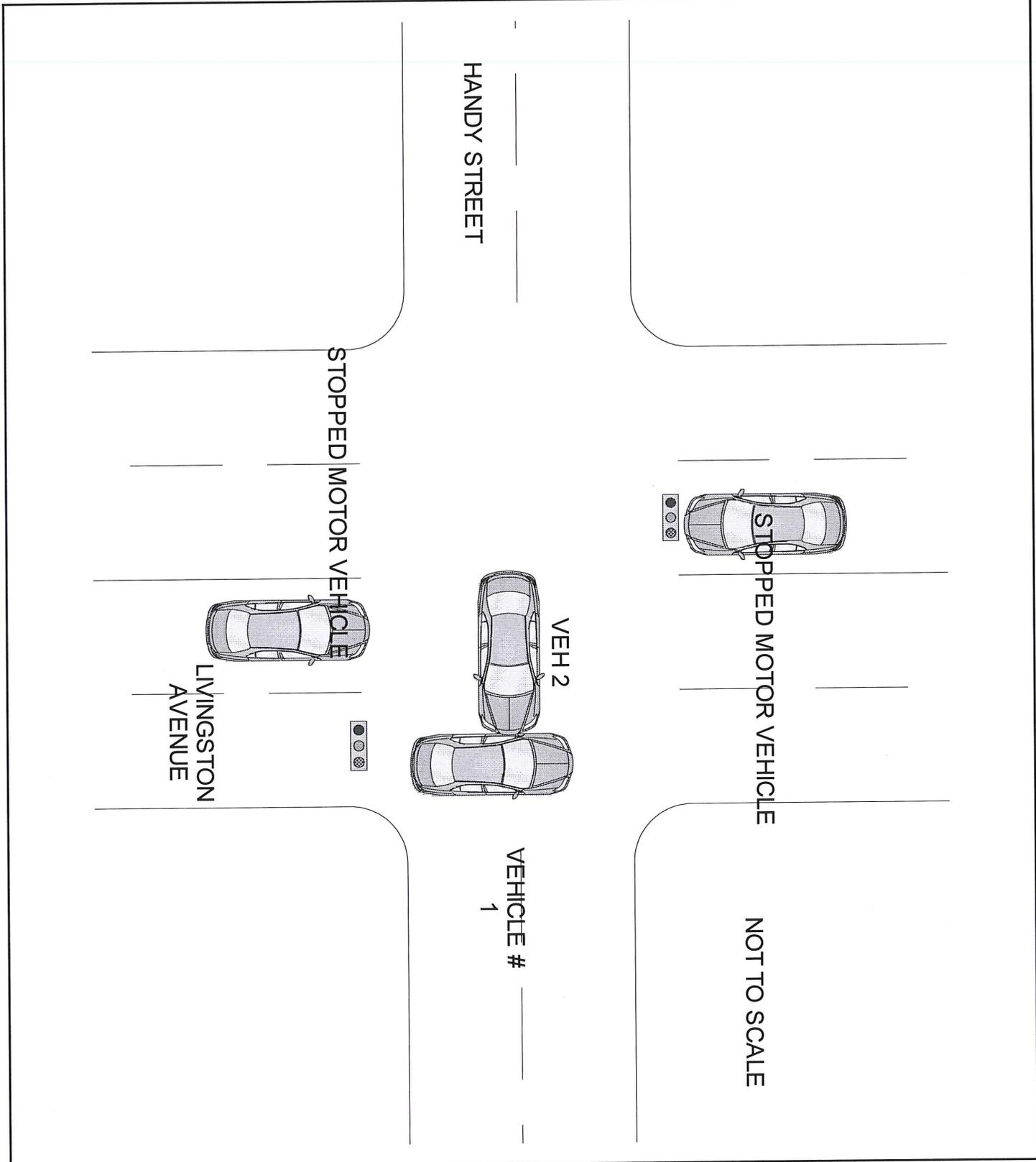
Upon arriving at the intersection there was one vehicle that was stopped in the left lane at the stop bar of the south bound side of Livingston Avenue. There was second vehicle was stopped in the left lane at the stop bar of the north bound side of Livingston Avenue. It the opinion of this officer the position of crashed vehicles, stopped vehicles on Livingston Avenue and witnesses information that vehicle number 1 failed to stopped at the intersection

PO Dean Dakin 7236

Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-49975</u>



1 Case Number **16-49986** 10 Crash Occurred On: **George Street** 11 Speed Limit **25** 118a **00**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 118b
 3 Station/Precinct **01** Feet N E of: **Hamilton Street** 18 Speed Limit
 14 Miles S W 16 19 To: 17 Cross Road Name NB EB 119a **00**
 20 SB WB 119b

4 Date of Crash **08/02/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **0931** 7 Municipality Code **1214** 8 Total Killed 9 Total Injured 119c
 21 Latitude 22 Longitude 119d

23 Veh No **1** 24 Policy No. **193339014** 25 Ins Code **003** 53 Veh No **2** 54 Policy No. **OUT OF STATE** 55 Ins Code
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run 120 **01**

26 Driver's First Name Initial Last Name **Kimberly S Pinererio** 28 Sex **M** 56 Driver's First Name Initial Last Name **Charles M Harris** 59 Sex **M** 121 **01**
 27 Number and Street **14 Lenox Avenue** 30 Eyes **57 Number and Street 5 Cream Ridge Road** 60 Eyes

28 City **Green Brook, NJ 08812** State Zip **58 City Salem NJ 08079** State Zip
 31 State 32 Driver's License No 33 DOB **11 22 87** 34 Expires **mm dd yy** 61 State 62 Driver's License No 63 DOB **07 14 58** 64 Expires **mm yy** 122 **----**

35 Owner's First Name Initial Last Name **Bays Jason** 65 Owner's First Name Initial Last Name **Penske Truck Leasing** 123 **----**
 Same As Drive Same As Drive

36 Number and Street **14 Lenox Avenue** 66 Number and Street **2675 Morgantown Road** 124 **01**

37 City **Greenbrook** State Zip **67 City Reading PA 19607** State Zip 125 **02**

38 Make **GMC** 39 Model **ACA** 40 Color **GYI** 41 Year **42 Plate No. B61GLW** 43 State **NJ** 68 Make **FTL** 69 Model **TRK** 70 Color **YEL** 71 Year **15** 72 Plate No. **2225698** 73 State **IN** 126 **04**

44 VIN **1GKKVTKDXGJ145583** 45 Expires **74 VIN 3AKJGEDV6FSGB5805** 75 Expires
 46 Vehicle Removed To Driven Left at Scene Towed 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed 77 Authority Owner Driver Police 127 **04**

48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 128a **04**
 Type: Breath Blood Urine 79 Hazardous Material Name or Placard No. 128b **04**
 Results: 0. % Pending 80 Carrier No. USDOT Other * 128c **04**

49 Hazardous Material Name or Placard No. 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 128d **04**
 On Board Spill 82 Carrier name 129a **04**

50 Carrier No. USDOT Other * 129b **04**
 51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129c **04**

52 Carrier name 129d **04**
 53 Crash Description **See Accident report and pictures were placed into evidence**

135 Witness One **LAUREN JENNINGS 296 CENTRAL AVENUE EDISON NEW JERSEY** 130 **08**
 136 Witness Two **GREGORY DAVID 2900 WASHINGTON STREET BETHLEHEM PA** 131 **12**

137 Damage To Other Property **132 02**

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 133 **02**

141 Officer's Signature **PO Dean Dakin 7236** 142 Badge No. **5156** 143 Reviewed By **JOHN QUICK** Badge No. **144 Case Status** Pending Complete 134 **02**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	28	F	----	----	2	09	09	08	6102	Pinererio, Kimberly-14 Lenox Avenue, Green Brook, NJ 08812
B	2	01	01	----	58	M	----	----	1	09	04	----		Harris, Charles-5 Cream Ridge Road, Salem NJ 08079
C														
D														
E														

135 Crash Description **See Accident report and pictures were placed into evidence** 129d **04**

136 Witness One **LAUREN JENNINGS 296 CENTRAL AVENUE EDISON NEW JERSEY** 130 **08**
 136 Witness Two **GREGORY DAVID 2900 WASHINGTON STREET BETHLEHEM PA** 131 **12**

137 Damage To Other Property **132 02**

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 133 **02**

141 Officer's Signature **PO Dean Dakin 7236** 142 Badge No. **5156** 143 Reviewed By **JOHN QUICK** Badge No. **144 Case Status** Pending Complete 134 **02**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	28	F	----	----	2	09	09	08	6102	Pinererio, Kimberly-14 Lenox Avenue, Green Brook, NJ 08812
B	2	01	01	----	58	M	----	----	1	09	04	----		Harris, Charles-5 Cream Ridge Road, Salem NJ 08079
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>New Brunswick</u> Code: <u>01</u> Station: _____ Case No: <u>16-49986</u>
---	--

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
I														
N														
V														
O														
L														
V														
E														
J														

135 Crash Description

On 8/2/2016 at 0931hrs. I was dispatched to George Street and Johnson Drive on report that a vehicle struck a tractor trailer then went off the road and struck the traffic light and a street light. Upon arriving and ensuring the scene was safe and all drivers were okay and being seen by medical staff. I began attempting to locate anyone who witness this accident. Two witnesses were located and gave the following statements

Witness one stated that she observed the vehicle number one in the intersection when the tractor trailer made a right turn and then made contact with vehicle number 1. After making contact with the tractor trailer, vehicle number one then traveled off the roadway and struck the traffic light.

Witness two stated that he believed that vehicle number one attempted to beat the traffic light and began to accelerate at high rate speed, vehicle number one then made contact with tractor trailer, that was attempting to make right turn on Hamilton Street. After Vehicle number 1 made contact with the tractor trailer it then left the roadway and struck the traffic light on the corner of Hamilton and George.

Driver number 2 stated he was attempting to make a right turn onto Hamilton Street from George Street. To make this right turn he began driving very slow, he placed his flashers on. Then swung wide left to make the hard right turn to properly clear the intersection. Driver number two he never saw vehicle number one until it flew up next to him at a high rate of speed. The left rear of the vehicle one made contact with his right front. Then vehicle left the roadway and struck the poles.

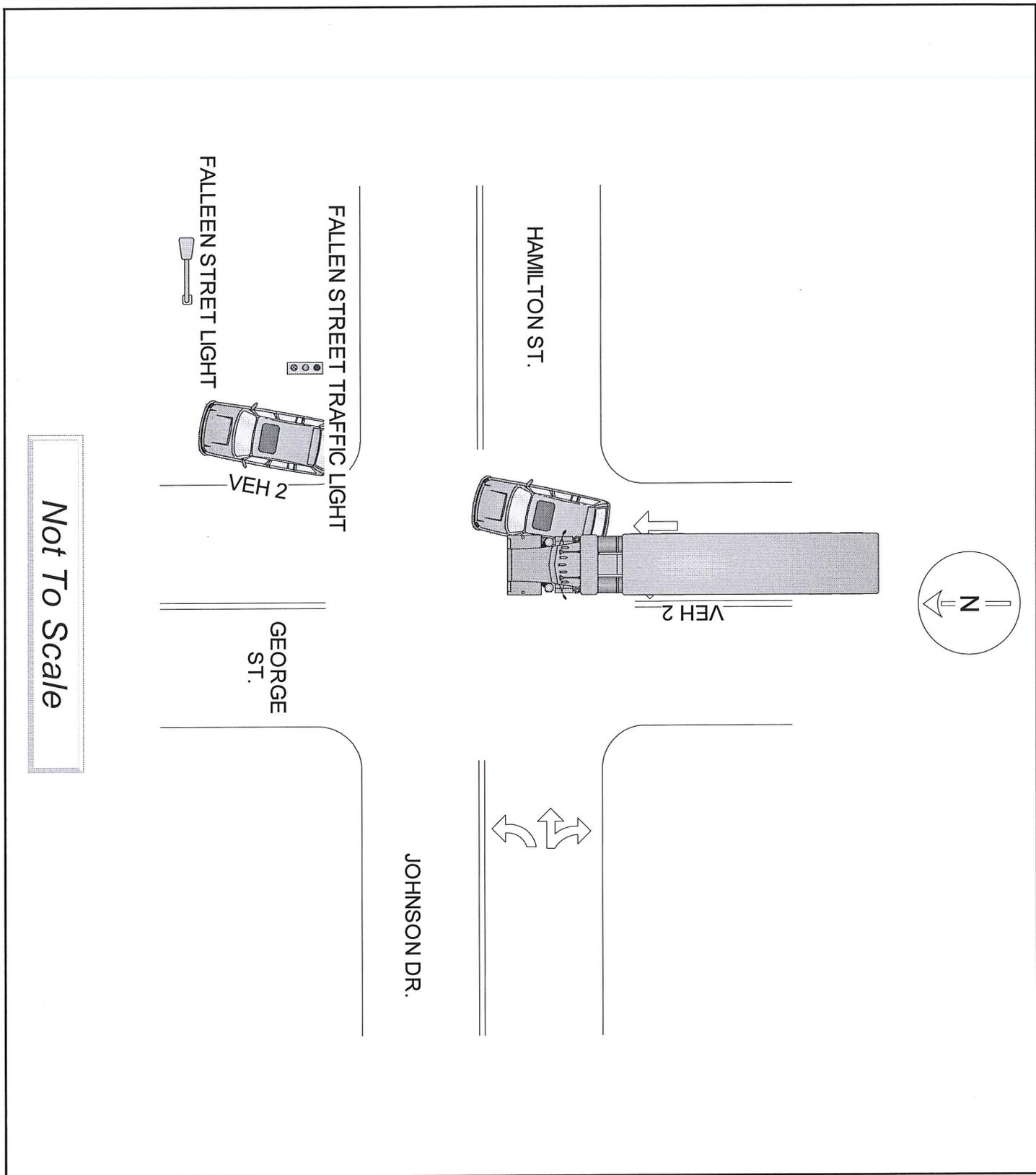
Driver number one is currently eight months pregnant and was not spoken to at the scene, she transported to the hospital because of her medical condition. At approximately 1pm Brunswick dispatched informed me that Pineiro was admitted to the hospital and was in room 1 in labor and delivery. Believing Pineiro was about to give birth, this officer decided to wait and not question her about the accident.

Currently this officer is unable to determine who is at fault. Pictures of the accident were taken and placed into property.

At 450pm Pineiro called police headquarters and she stated would rather provide a statement in person then over the phone. Pineiro in schedule to come in on Monday to give statement.

PO Dean Dakin 7236

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-49986</u>



Not To Scale

97 1 Case Number **16-49986** 10 Crash Occurred On: **George Street** 11 Speed Limit **25** 118a
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 118b
 3 Station/Precinct **01** Feet N E of: **Hamilton Street** S W 18 Speed Limit

98 4 Date of Crash **08/02/16** 5 Day of Week **Th** 6 Time (use 2400 hrs) **0931** 7 Municipality Code **12114** 8 Total Killed 9 Total Injured 19 Ramp To: 17 Cross Road Name NB EB SB WB 119a
 20 Route/Name 22 Longitude 119b

100 23 Veh No 24 Policy No. 25 Ins Code 53 Veh No 54 Policy No. 55 Ins Code
 101 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 120

102 26 Driver's First Name Initial Last Name 29 Sex 56 Driver's First Name Initial Last Name 59 Sex 121
 103 27 Number and Street 30 Eyes 57 Number and Street 60 Eyes

104 28 City State Zip 58 City State Zip 122

105 31 State 32 Driver's License No 33 DOB mm dd yy 34 Expires mm yy 61 State 62 Driver's License No 63 DOB mm dd yy 64 Expires mm yy 123

35 Owner's First Name Initial Last Name 65 Owner's First Name Initial Last Name
 Same As Driver Same As Driver 124

36 Number and Street 66 Number and Street 125

37 City State Zip 67 City State Zip

106 38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State 126

44 VIN 45 Expires 74 VIN 75 Expires
 107 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 127

108 48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 127
 109 Type: Breath Blood Urine 79 Hazardous Material Name or Placard No. Type: Breath Blood Urine 128a
 110 Results: 0.00% Pending 80 Carrier No. USDOT Other * 128b
 111 49 Hazardous Material On Board Spill Name or Placard No. 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 128c
 112 50 Carrier No. USDOT Other * 82 Carrier name 128d
 113 51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129a
 114 52 Carrier name 129b
 115 135 Crash Description **See Accident report** 129c
 116 136 Damage To Other Property **Traffic Light and Street Light Pole.** 129d
 117 137 Charge Multiple Charges **39:4-97** 138 Summons No. **Q 374865** 139 Charge Multiple Charges 140 Summons No. 130
 141 Officer's Signature **PO Dean Dakin 7236** 142 Badge No. **5156 JOHN QUICK** 143 Reviewed By **5156 JOHN QUICK** 144 Case Status Pending Complete 131
 132
 133

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

97 1 Case Number **16-49986** 10 Crash Occurred On: **George Street** 11 Speed Limit 118a
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b
 3 Station/Precinct Feet N E of: **Hamilton Street** S W

98 4 Date of Crash mm dd yy 5 Day of Week Su M Tu W Th F Sa 6 Time (use 2400 hrs) 7 Municipality Code 8 Total Killed 9 Total Injured 19 Ramp To: From: 17 Cross Road Name 20 Route/Name 22 Longitude 119a
 100 **08 02 16** Su M Tu W Th F Sa **09 31** **12114** NB EB SB WB 119b

101 23 Veh No 24 Policy No. 25 Ins Code 53 Veh No 54 Policy No. 55 Ins Code
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run 120

102 26 Driver's First Name Initial Last Name 29 Sex 56 Driver's First Name Initial Last Name 59 Sex 121

103 27 Number and Street 30 Eyes 57 Number and Street 60 Eyes

104 28 City State Zip 58 City State Zip

105 31 State 32 Dnvr's License No 33 DOB mm dd yy 34 Expires mm yy 61 State 62 Driver's License No 63 DOB mm dd yy 64 Expires mm yy 122

35 Owner's First Name Initial Last Name 65 Owner's First Name Initial Last Name
 Same As Driver 123

36 Number and Street 66 Number and Street 124

106 37 City State Zip 67 City State Zip 125

107 38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State

108 44 VIN 45 Expires 74 VIN 75 Expires

109 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 126

110 48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 127

111 Type: Breath Blood Urine 128a

112 Results: 0.____ % Pending 79 Hazardous Material Name or Placard No. 128b

113 49 Hazardous Material Name or Placard No. On Board Spill 80 Carrier No. USDOT Other * 128c

114 50 Carrier No. USDOT Other * 128d

115 51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129a

116 52 Carrier name 82 Carrier name 129b

117 135 Crash Description **See Accident report** 129c

129d **On 8/9/2016 at approximately 1120hrs. this officer spoke with Kimberly Pinererio on the phone. she was informed that a summons for careless driving was mailed to her residence. Pinererio informed this officer that she was obtaining an attorney to contest this matter. Pinererio was informed that I was no longer allowed to speak to her and ended the conversation. There was no official statement taken from Pinererio.** 130

131 **136 Damage To Other Property** 132

133 Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 141 Officer's Signature **PO Dean Dakin 7236** 142 Badge No. 143 Reviewed By Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

1 Case Number **16-50005** 10 Crash Occurred On: **Albany Street** 11 Speed Limit **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Feet Miles N S E W of: **Easton Avenue** 12 Route No. Suffix 13 Milepost 18 Speed Limit

3 Station/Precinct **75** 14 15 16 17 Cross Road Name NB EB SB WB
 4 Date of Crash **08/02/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **1129** 7 Municipality Code **1214** 8 Total Killed **-** 9 Total Injured **2** 19 Ramp To: From: 20 Route/Name 22 Longitude

23 Veh No **1** 24 Policy No. **SELF-INSURED** 25 Ins Code **2** 53 Veh No **2** 54 Policy No. **908668547** 55 Ins Code **09412**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name **Cornell** Initial **L** Last Name **Ross** 28 Sex **M** 56 Driver's First Name **Yennifer** Initial **G** Last Name **Gonzalez-Sayago** 59 Sex **F**
 27 Number and Street **PO Box 541** 30 Eyes **2** 57 Number and Street **342 George St. 2nd Fl.** 60 Eyes **2**

28 City **New Brunswick, NJ 08901** State **NJ** Zip **08901** 58 City **New Brunswick, NJ 08901** State **NJ** Zip **08901**

31 State **NJ** 32 Dvr's License No **09 27 64** 33 DOB **mm dd yy** 34 Expires **mm yy** 61 State **FL** 62 Driver's License No **11 24 82** 63 DOB **mm dd yy** 64 Expires **mm yy**

35 Owner's First Name **EAN Holdings LLC** Initial **E** Last Name **N** 65 Owner's First Name **Romulo** Initial **R** Last Name **Sante-Pietrangeli**
 Same As Drive Same As Driver

36 Number and Street **14002 East 21ST STE 1500** 66 Number and Street **900 9th Ave E Lot 81**

37 City **Tulsa, OK 74134** State **OK** Zip **74134** 67 City **Palmetto, FL 34221** State **FL** Zip **34221**

38 Make **Chrysler** 39 Model **200** 40 Color **BLK** 41 Year **201** 42 Plate No. **B86FHE** 43 State **NJ** 68 Make **Pontiac** 69 Model **BI** 70 Color **BI** 71 Year **Y36EJB** 72 Plate No. **FL** 73 State **FL**

44 VIN **1C3CCCAB5FN714809** 45 Expires **05/17** 74 VIN **1G2JB1247Y7382247** 75 Expires **04/17**

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused
 Type: Breath Blood Urine 79 Type: Breath Blood Urine

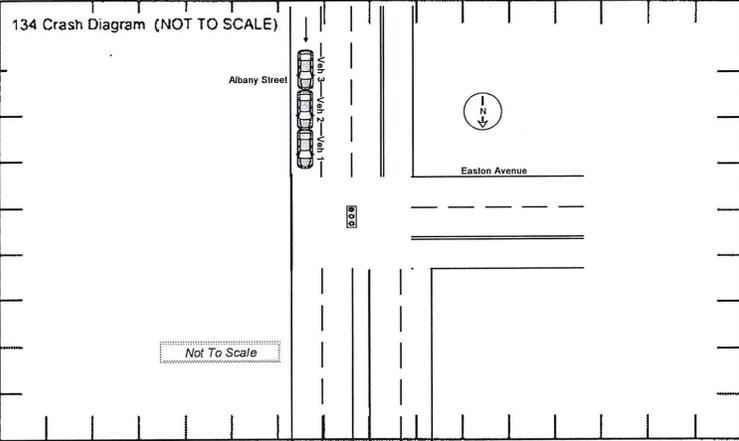
Results: 0.00 % Pending 79 Results: 0.00 % Pending

49 Hazardous Material Name or Placard No. 79 Hazardous Material Name or Placard No.
 On Board Spill

50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other *

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

52 Carrier name 82 Carrier name



135 Crash Description

136 Damage To Other Property **None**

Oper. **3** 137 Charge **39.4-97** Multiple Charges 138 Summons No. **375826** Oper. **3** 139 Charge **39.4-97** Multiple Charges 140 Summons No. **375826**

141 Officer's Signature **PO Tammie Ward 7237** 142 Badge No. **5216** 143 Reviewed By **5216** Badge No. **5216** 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	04	51	M								Ross, Cornell-PO Box 541, New Brunswick, NJ 08901
B	2	01	01	04	33									Gonzalez-Sayago, Yennifer-342 George St. 2nd Fl., New Brunswick, NJ 08901
C	3	01	01	---	22	M								Colasante, Francis-400 Harrison St., Paramus, NJ 07652
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. <u>New Brunswick</u> Station _____	Code <u>01</u> Case No. <u>16-50005</u>
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Not To Scale



96 05 1 Case Number **16-50005** 10 Crash Occurred On: **Albany Street** 11 Speed Limit **2 5** 118a 02

97 01 2 Police Dept of **New Brunswick** Code **01** 12 Route No. Suffix 13 Milepost 118b 09

98 01 3 Station/Precinct **75** At Intersection with Road Name Dir **Easton Avenue** 18 Speed Limit

99 07 4 Date of Crash **08 02 16** 5 Day of Week **Th** 6 Time (use 2400 hrs) **11 29** 7 Municipality Code **1214** 8 Total Killed **-** 9 Total Injured **02** 19 Ramp To: 17 Cross Road Name NB EB SB WB

100 01 20 Route/Name 22 Longitude

101 02 23 Veh No **3** 24 Policy No. **F044907-4** 25 Ins Code **426** 53 Veh No **---** 54 Policy No. **---** 55 Ins Code **---**

Parked Ped Pedalcyclist Resp to Emergency Hit & Run

102 01 26 Driver's First Name Initial Last Name **Francis A Colasante** 29 Sex **M** 56 Driver's First Name Initial Last Name 59 Sex

103 01 27 Number and Street **400 Harrison St.** 30 Eyes **2** 57 Number and Street 60 Eyes

104 03 28 City **Paramus, NJ** State **NJ** Zip **07652** 58 City State Zip

105 01 31 State 32 Driver's License No 33 DOB **12 23 93** 34 Expires **mm yy** 61 State 62 Driver's License No 63 DOB 64 Expires

35 Owner's First Name Initial Last Name **Antonio Colassante** 65 Owner's First Name Initial Last Name **---**

Same As Driver Same As Driver

36 Number and Street **400 Harrison St.** 66 Number and Street

37 City **Paramus, NJ** State **NJ** Zip **07652** 67 City State Zip

38 Make **Honda** 39 Model **Accord** 40 Color **BK** 41 Year **199** 42 Plate No. **H83DFB** 43 State **NJ** 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State

44 VIN **1HGCG1652XA055749** 45 Expires 74 VIN 75 Expires

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused

Type: Breath Blood Urine 79 Hazardous Material Name or Placard No. On Board Spill

Results: 0.____ % Pending 80 Carrier No. USDOT Other *

49 Hazardous Material Name or Placard No. 50 Carrier No. USDOT Other *

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

52 Carrier name 82 Carrier name

134 Crash Diagram (NOT TO SCALE)

135 Crash Description **see Crash Report 1**

136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Tammie Ward 7237** 142 Badge No. **5216** 143 Reviewed By **5216** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

1 Case Number **16-50031** 10 Crash Occurred On **02 New Street** 11 Speed Limit **2 5** 118a **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 118b
 3 Station/Precinct **01** Feet N E of: S W 18 Speed Limit 119a
 14 Miles 15 16 17 Cross Road Name NB EB 119b
 19 To: 20 Route/Name SB WB 119a
 Ramp From: 21 Latitude 22 Longitude 119b

4 Date of Crash **08 02 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **14 49** 7 Municipality Code **12114** 8 Total Killed 9 Total Injured 119a **02**
 23 Veh No **1** 24 Policy No. **4406-07-15-08** 25 Ins Code **148** 53 Veh No **2** 54 Policy No. **909807825** 55 Ins Code **054** 119b **04**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 120

26 Driver's First Name Initial Last Name **Mario Bermeo** 29 Sex **M** 56 Driver's First Name Initial Last Name **Alex Gillan** 59 Sex **M** 120 **01**
 27 Number and Street **674b Village Dr.south** 30 Eyes **2** 57 Number and Street **91 Freemont Ct** 60 Eyes **6** 121 **01**

28 City **No. Brunswick, NJ** State **NJ** Zip **08902-2823** 58 City **Somerset, NJ** State **NJ** Zip **08873-4710** 122
 31 State **32 Dnr's License No** 33 DOB **02 28 62** 34 Expires **mm dd yy** 61 State **62 Driver's License No** 63 DOB **10 01 86** 64 Expires **mm yy** 123

35 Owner's First Name Initial Last Name Same As Driver **Mario Bermeo** 65 Owner's First Name Initial Last Name Same As Driver **Gail Burack** 124
 36 Number and Street **674b Village Dr.south** 66 Number and Street **91 Freemont Court** 125 **01**

37 City **No. Brunswick, NJ** State **NJ** Zip **08902-2823** 67 City **Somerset, NJ** State **NJ** Zip **08873-4710** 125 **03**

38 Make **NIS** 39 Model **ALT** 40 Color **GY** 41 Year **10** 42 Plate No. **L52AGB** 43 State **NJ** 68 Make **NIS** 69 Model **XTE** 70 Color **BLA** 71 Year **10** 72 Plate No. **SLR26E** 73 State **NJ** 126
 44 VIN **1N4AL2AP8AN551256** 45 Expires **10/16** 74 VIN **5N1AN0NW0AC507544** 75 Expires **05/17** 127

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 128

48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 126 **11**
 Type: Breath Blood Urine 127 **11**
 Results: 0.____ % Pending 128a **26**
 49 Hazardous Material Name or Placard No. 79 Hazardous Material Name or Placard No. 128b
 On Board Spill 80 Carrier No. USDOT Other * 128c
 50 Carrier No. USDOT Other * 128d
 51 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs >= 26,001 lbs 81 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs >= 26,001 lbs 129a **26**
 52 Carrier name 82 Carrier name 129b **26**
 135 Crash Description 129c
 129d
 130 **11**
 131 **11**
 132 **12**
 133 **12**

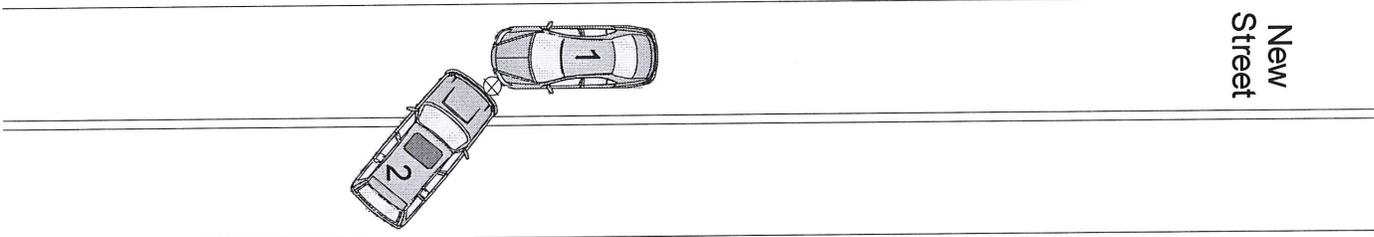
136 Damage To Other Property 137 Charge Multiple Charges 138 Summons No. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Thomas Hetzler Jr. 7281** 142 Badge No. **7281** 143 Reviewed By **J QUICK 5156** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	54	M	----	----	1	09	04	----	----	Bermeo, Mario-674b Village Dr.south, No. Brunswick, NJ
B	2	01	01	----	29	M	----	----	1	09	04	----	----	Gillan, Alex-91 Freemont Ct, Somerset, NJ 08873-4710
C														
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-50031</u>

Not To Scale



1 Case Number **16-50064** 10 Crash Occurred On: **State Route 18 NB** 11 Speed Limit **4 5** 12 Route No. Suffix 13 Milepost **2 5** 18 Speed Limit **2 5**

2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir N E S W of: **George Street**

3 Station/Precinct _____ 14 _____ 15 _____ 16 _____ 19 To: 17 Cross Road Name NB EB SB WB

4 Date of Crash **08 02 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **17 58** 7 Municipality Code **12114** 8 Total Killed **00** 9 Total Injured **00**

20 Route/Name _____ 21 Latitude _____ 22 Longitude _____

23 Veh No **01** 24 Policy No. **00** 25 Ins Code **00** 53 Veh No **02** 54 Policy No. **14010923** 55 Ins Code **134**

Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name Initial Last Name **Richard Roxbury** 28 Sex **M** 56 Driver's First Name Initial Last Name **Hector Marrero** 59 Sex **M**

27 Number and Street **Po Box 92. 58 Woodschurchr** 30 Eyes **4** 57 Number and Street **463 Larchmont St** 60 Eyes **6**

28 City State Zip **Stanton, NJ 08885-0092** 58 City State Zip **Toms River, NJ 08757-2653**

31 State 32 Driver's License No _____ 33 DOB **08 11 64** 34 Expires **mm yy** 61 State 62 Driver's License No _____ 63 DOB **05 19 53** 64 Expires **mm yy**

35 Owner's First Name Initial Last Name Same As Driver **Hertz Vehicles LLC.** 65 Owner's First Name Initial Last Name Same As Driver **Hector Marrero**

36 Number and Street **5400 Butler National Drive** 66 Number and Street **463 Larchmont St**

37 City State Zip **Orlando, FL 32812** 67 City State Zip **Toms River, NJ 08757-2653**

38 Make **Chevy** 39 Model **SUB** 40 Color **Siv** 41 Year **15** 42 Plate No. **GIH152** 43 State **FL** 68 Make **CHE** 69 Model **SIL** 70 Color **WT** 71 Year **04** 72 Plate No. **IF2352** 73 State **NJ**

44 VIN **1GNSKBKC5FR664215** 45 Expires **06/17** 74 VIN **1GCEK14Z64Z267692** 75 Expires **01/17**

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test Given: No Yes Refused

Type: Breath Blood Urine

Results: 0.____ % Pending

49 Hazardous Material Name or Placard No. _____

50 Carrier No USDOT Other *

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

52 Carrier name _____

134 Crash Diagram (NOT TO SCALE)

78 Alcohol/Drug Test Given: No Yes Refused

Type: Breath Blood Urine

Results: 0.____ % Pending

79 Hazardous Material Name or Placard No. _____

80 Carrier No USDOT Other *

81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

82 Carrier name _____

135 Crash Description **Vehicle 01 was traveling north on Route 18 NB. Vehicle 02 was traveling NB also. Vehicle 01 was attempting to merge into the lane that Vehicle 02 was in and struck Vehicle 02. There were no injuries at this time.**

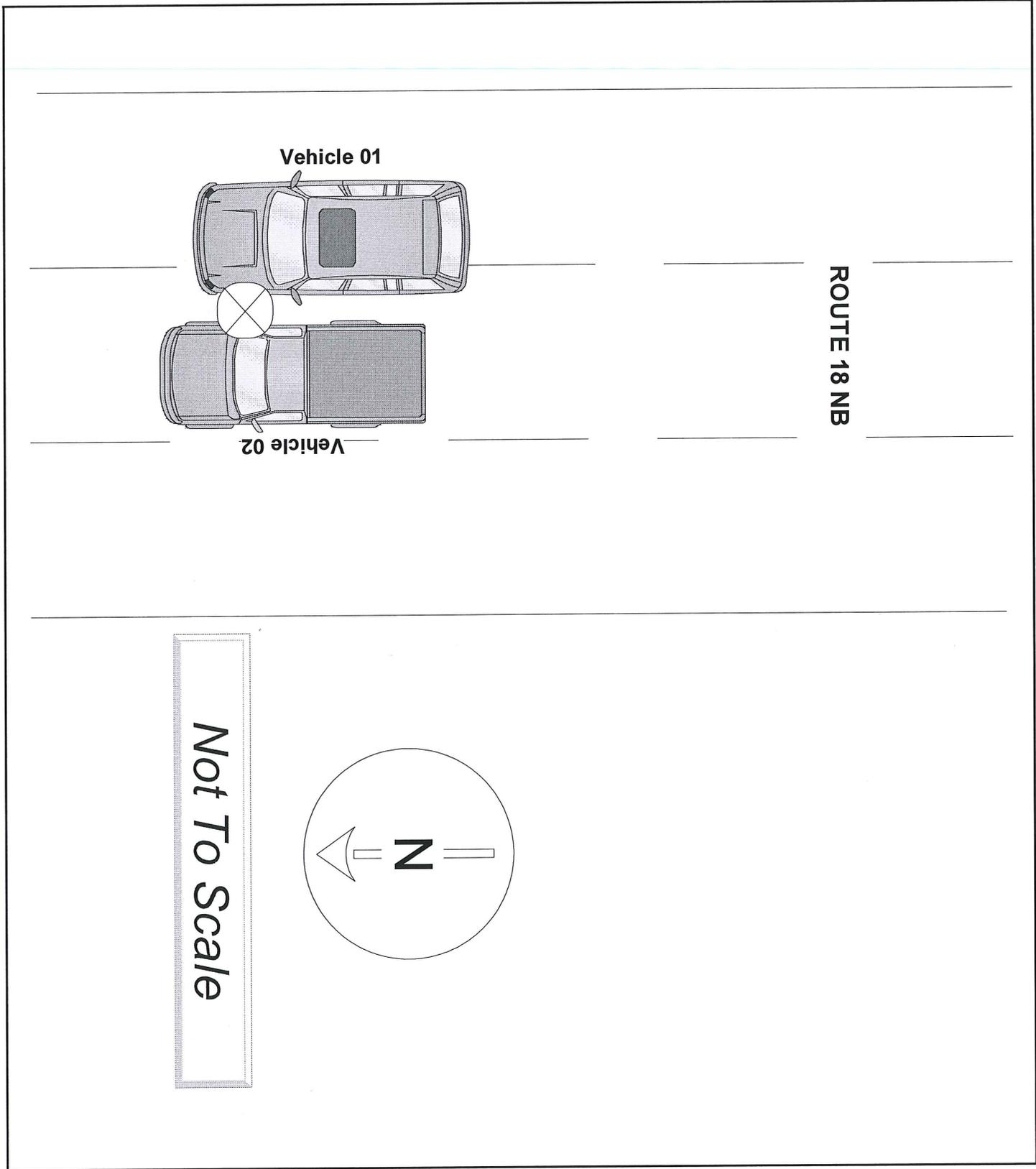
136 Damage To Other Property _____

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Richard Regan 7313** 142 Badge No. **7313** 143 Reviewed By **5190** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	51	M	----	----	09	01	----	----	----	Roxbury, Richard-Po Box 92. 58 Woodschurchr, Stanton, NJ
B	2	01	01	----	63	M	----	----	09	01	----	----	----	Marrero, Hector-463 Larchmont St, Toms River, NJ 08757
C														
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-50064</u>



1 Case Number **16-50109** 10 Crash Occurred On: **State Route 18 SB** 11 Speed Limit **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir Feet Miles N E S W of: **Paulus Boulevard** 12 Route No. Suffix 13 Milepost 18 Speed Limit

3 Station/Precinct **01** 14 15 16 19 To: 17 Cross Road Name NB EB SB WB
 4 Date of Crash **08/02/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **2250** 7 Municipality Code **12114** 8 Total Killed **-** 9 Total Injured **01**
 20 Route/Name 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **073 0393-D13-30** 25 Ins Code **962** 53 Veh No **00** 54 Policy No. **00** 55 Ins Code
 Parked Ped Pedalcyclist Respo to Emergency Hit & Run

26 Driver's First Name Initial Last Name **Peralta-Perez Miguel** **Peralta-Perez** 28 Sex **M** 56 Driver's First Name Initial Last Name **00** **00** 59 Sex
 27 Number and Street **200 HOFFMAN BLVD** 30 Eyes **2** 57 Number and Street 60 Eyes

28 City **NEW BRUNSWICK NJ** State **NJ** Zip **08901** 58 City **0** State Zip

31 State 32 Dvr's License No 33 DOB **01 22 65** 34 Expires **mm yy** 61 State 62 Driver's License No 63 DOB **mm dd yy** 64 Expires **mm yy**

35 Owner's First Name Initial Last Name Same As Driver 65 Owner's First Name Initial Last Name Same As Driver **00** **0**

36 Number and Street **00** 66 Number and Street **00**

37 City **0** State Zip 67 City **0** State Zip

38 Make **TOYOTA** 39 Model **CAM** 40 Color **GOL** 41 Year **199** 42 Plate No. **HW2863** 43 State **NJ** 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State

44 VIN **4T1BG22K4VU818860** 45 Expires 74 VIN 75 Expires

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

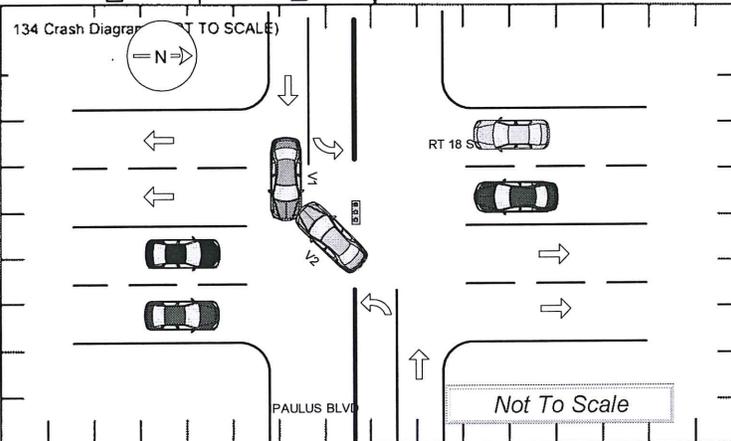
48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending 78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending

49 Hazardous Material Name or Placard No. On Board Spill 79 Hazardous Material Name or Placard No. On Board Spill

50 Carrier No USDOT Other * 80 Carrier No. USDOT Other *

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

52 Carrier name 82 Carrier name



135 Crash Description **Driver #1 states while crossing over RT 18 vehicle #2 turned into his lane. Vehicle #2 left the scene prior to police arrival. Both the driver and passenger were transported to St. Peters Hospital with complaints of pain.**

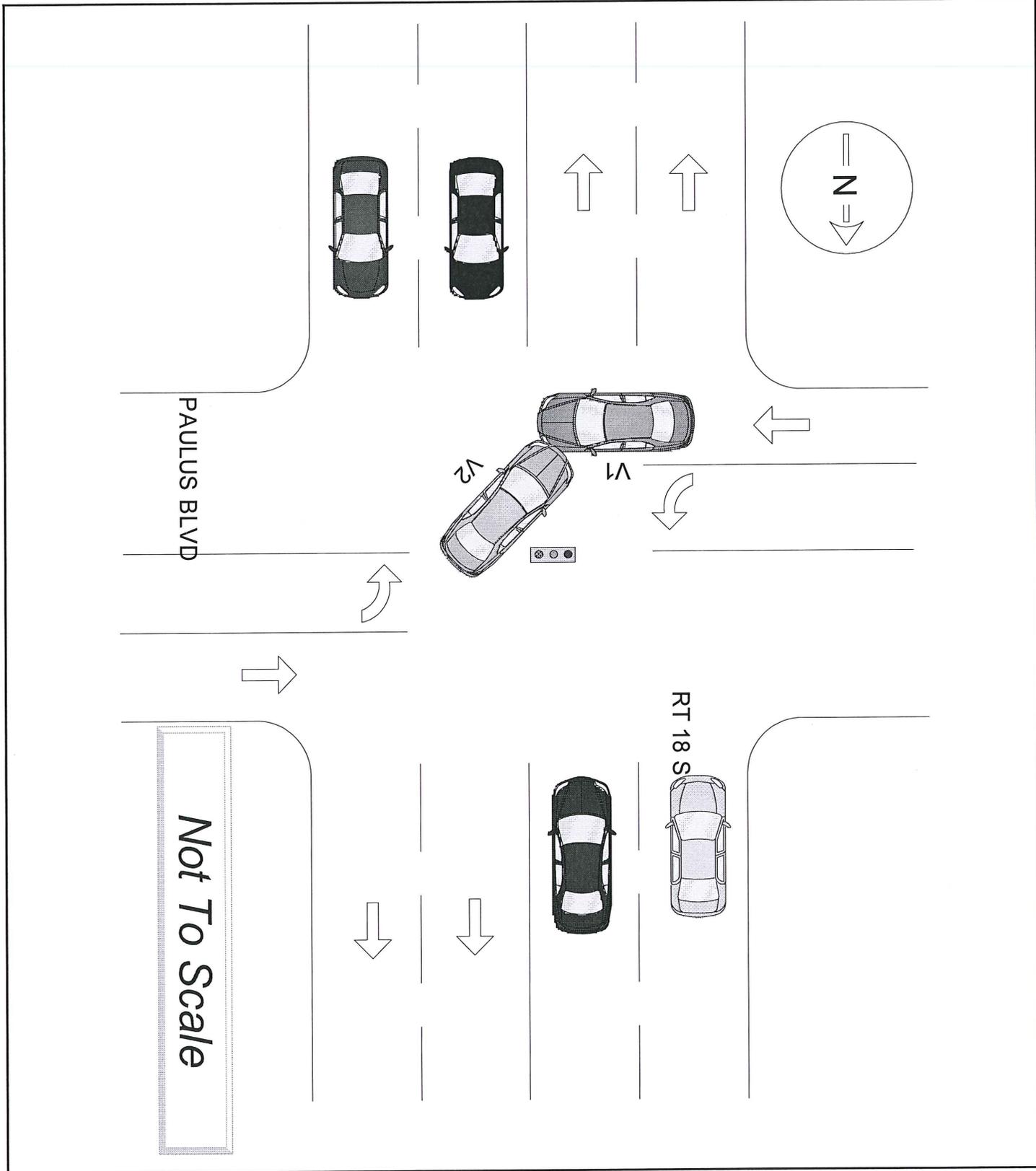
136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Daniel Williams 7268** 142 Badge No. **5190** 143 Reviewed By **5190** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	04	51	M	11	08	2	09	09	----	6205	
B	1	03	01	04	25	F	04	08	2	09	09	----	6205	
C	1	06	01	----	6	M	----	----	1	09	09	----	6205	
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-50109</u>

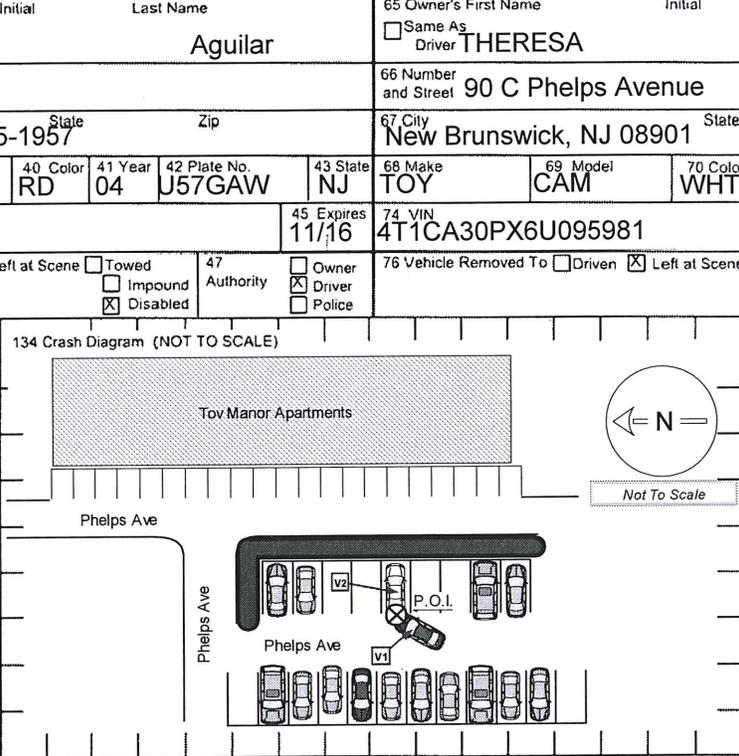


1 Case Number **16-50132** 10 Crash Occurred On **78** **Phelps Avenue** N **0** **5** 11 Speed Limit **0** **5** 118a **02**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b **08**
 3 Station/Precinct _____ Feet N E of: _____ S W _____ 17 Cross Road Name NB EB 119a **25**
 4 Date of Crash **08** **03** **16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **01** **06** 7 Municipality Code **12** **14** 8 Total Killed **-** 9 Total Injured **-** 19 To: _____ NB EB 119b **08**
 20 Route/Name **01** **06** 21 Latitude _____ 22 Longitude _____ SB WB 119c **01**

23 Veh No **1** 24 Policy No. **909107236** 25 Ins Code **134** 53 Veh No **2** 54 Policy No. **00** 55 Ins Code **00** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121 **01**
 26 Driver's First Name Initial Last Name **CLAUDIA** **GARCIA** 29 Sex **F** 56 Driver's First Name Initial Last Name _____ 59 Sex _____ 122 **01**
 27 Number and Street **106 SEAMAN ST.** 30 Eyes _____ 57 Number and Street _____ 60 Eyes _____ 123 **01**
 28 City **NEW BRUNSWICK, NJ, 08901** State _____ Zip _____ 58 City _____ State _____ Zip _____ 124 **01**
 31 State _____ 32 Driver's License No _____ 33 DOB **05** **28** **91** 34 Expires **mm** **dd** **yy** _____ 61 State _____ 62 Driver's License No _____ 63 DOB **mm** **dd** **yy** _____ 64 Expires **mm** **dd** **yy** _____ 125 **10**

35 Owner's First Name Initial Last Name Same As Driver **Sergio** **Aguilar** 65 Owner's First Name Initial Last Name Same As Driver **THERESA** **JENNINGS** 126 **11**
 36 Number and Street **154 W High St** 66 Number and Street **90 C Phelps Avenue** 127 **11**
 37 City **Bound Brook, NJ 08805-1957** State _____ Zip _____ 67 City **New Brunswick, NJ 08901** State _____ Zip _____ 128a **28**
 38 Make **VW** 39 Model **JET** 40 Color **RD** 41 Year **04** 42 Plate No. **J57GAW** 43 State **NJ** 68 Make **TOY** 69 Model **CAM** 70 Color **WHT** 71 Year **06** 72 Plate No. **C67CDU** 73 State **NJ** 128b **01**
 44 VIN **3VWRA69M44M101040** 45 Expires **11/16** 74 VIN **4T1CA30PX6U095981** 75 Expires _____ 128c **10**
 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 128d **11**

48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 129a **26**
 Type: Breath Blood Urine 79 Hazardous Material Name or Placard No. _____ 129b **06**
 Results: 0.____ % Pending 80 Carrier No. USDOT Other * _____ 129c **06**
 49 Hazardous Material Name or Placard No. _____ 81 Commercial Vehicle Weight ≤ 10,000 lbs 129d **06**
 On Board Spill _____ 10,001 - 26,000 lbs _____ 130 **12**
 _____ ≥ 26,001 lbs _____ 82 Carrier name _____ 131 **12**
 50 Carrier No. USDOT Other * _____ 132 **06**
 51 Commercial Vehicle Weight ≤ 10,000 lbs _____ 133 **06**
 10,001 - 26,000 lbs _____
 ≥ 26,001 lbs _____
 52 Carrier name _____



134 Crash Diagram (NOT TO SCALE)
 135 Crash Description **See page 2.**
 136 Damage To Other Property _____
 Oper. 137 Charge Multiple Charges 138 Summons No. _____ Oper. 139 Charge Multiple Charges 140 Summons No. _____

141 Officer's Signature **PO Alexander Uzunis 7326** 142 Badge No. **7326** 143 Reviewed By **5275** Badge No. _____ 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	25	F	----	----	1	04	04	01	-----	GARCIA, CLAUDIA-106 SEAMAN ST., NEW BRUNSWICK,
B	1	03	01	----	20	M	----	----	1	04	04	01	-----	Hidalgo, Lauro-154 W High Street, Bound Brook, NJ 08805
C	2	----	----	----	----	----	----	----	----	----	----	----	-----	
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>New Brunswick</u> Code: <u>01</u> Station: _____ Case No: <u>16-50132</u>
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(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
I														
N														
V														
O														
L														
V														
E														
J														

135 Crash Description

On 8/3/2016 at 01:06 hours, P/O Dakin and I were dispatched to 78 Phelps Avenue for a motor vehicle accident. Communications advised that the parties involved were having a verbal argument.

Upon arrival, we observed Vehicle 1 (NJ Reg U57GAW), operated by Claudia Garcia, sustained damage to the front end. The front end was pushed in and the hood was bent inward. The front airbags were deployed in Vehicle 1. Vehicle 1 was carrying 1 passenger, Lauro Hidalgo. Vehicle 2 (NJ Reg C67CDU), was unoccupied. Garcia and Hidalgo did not complain of pain and declined medical attention. Vehicle 2 sustained several scrapes and scratches to the rear bumper. Also present on scene was Anna Pliego.

Pliego stated she suspected her boyfriend, Hidalgo, was having an affair with another woman. Pliego located Hidalgo in the parking lot of 78 Phelps Avenue inside Vehicle 1 with Garcia. Pliego observed Hidalgo and Garcia having sex. It was at this time Pliego tried opening the driver door. Garcia immediately locked the door, put the car in drive, and proceeded out of her parking spot. While proceeding through the lot, Hidalgo was still trying to open the driver door. Garcia then veered right and struck the rear of Vehicle 2 (NJ Reg C67CDU). Garcia then exited her vehicle and started arguing with Pliego. It was at this time a passerby notified police.

The registered owner of Vehicle 2 was on vacation as per their neighbor. All parties involved in this incident were separated and left the area.

P/O Uzunis 7326

PO Alexander Uzunis 7326

7326

New Jersey Police Crash Investigation Report

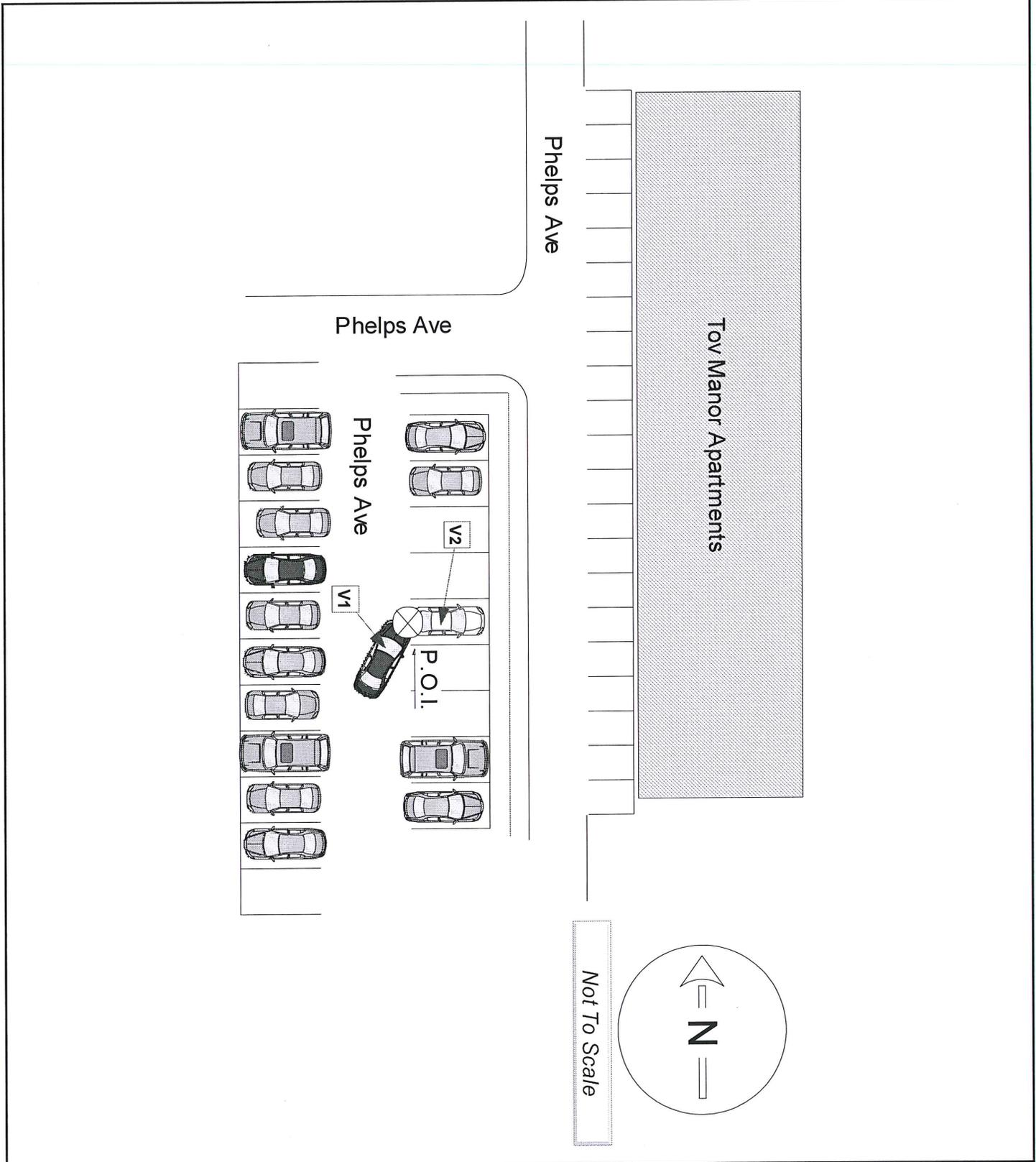
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-50132



1 Case Number **16-50171** 10 Crash Occurred On: **State Route 18 NB** 11 Speed Limit **5 5** 118a **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir Feet Miles N E S W of: 12 Route No. Suffix 13 Milepost 118b **25**
 3 Station/Precinct _____ 14 _____ 15 _____ 16 _____ 17 Cross Road Name NB EB SB WB 119a **01**

4 Date of Crash **08 03 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **07 55** 7 Municipality Code **12114** 8 Total Killed **X** 9 Total Injured **01** 19 To: _____ 20 Route/Name _____ 21 Latitude _____ 22 Longitude _____ 119b **02**

23 Veh No **1** 24 Policy No. **17113185** 25 Ins Code **134** 53 Veh No **2** 54 Policy No. **909808711** 55 Ins Code **054** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name Initial Last Name **ROBERT KENTOS M** 28 Sex **M** 56 Driver's First Name Initial Last Name **NATALIE D FAYFMAN** 59 Sex **F** 121 **01**

27 Number and Street **61 Meadow Road** 30 Eyes **2** 57 Number and Street **25 RYAN ROAD** 60 Eyes **2**

28 City State Zip **Edison, NJ 08817-5522** 58 City State Zip **MARLBORO, NJ 07746**

31 State 32 Driver's License No _____ 33 DOB **02 20 75** 34 Expires **mm yy** 61 State 62 Driver's License No _____ 63 DOB **07 13 95** 64 Expires **mm yy** 122 **----**

35 Owner's First Name Initial Last Name Same As Driver **ROBERT KENTOS** 65 Owner's First Name Initial Last Name Same As Driver **Diana Fayfman** 123 **----**

36 Number and Street **61 Meadow Road** 66 Number and Street **25 Ryan Rd** 124 **01**

37 City State Zip **Edison, NJ 08817-5522** 67 City State Zip **Marlboro, NJ 07746-1803** 125 **01**

38 Make **FOR** 39 Model **EXC** 40 Color **RD** 41 Year **01** 42 Plate No. **Z42EBT** 43 State **NJ** 68 Make **TOY** 69 Model **RAV** 70 Color **SL** 71 Year **06** 72 Plate No. **N97EXM** 73 State **NJ**

44 VIN **1FMSU43F61EA64080** 45 Expires **05/17** 74 VIN **JTMZD33V266000866** 75 Expires **12/16**

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police **RICH'S TOWING** 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test Given: No Yes Refused 134 **Not To Scale** (TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused 126 **11**

Type: Breath Blood Urine 127 **11**

Results: 0.____ % Pending 128a **26**

49 Hazardous Material Name or Placard No. 79 Hazardous Material Name or Placard No. 128b **----**

50 Carrier No USDOT Other * 80 Carrier No. USDOT Other * 128c **----**

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 128d **----**

52 Carrier name 82 Carrier name 129a **26**

135 Crash Description **DRIVER OF VEH-1 STATES AS HE WAS DRIVING NORTH ON RT 18. VEHICLE 2 STRUCK HIS VEHICLE IN THE REAR AFTER HE CAME TO A STOP. DRIVER OF VEHICLE 2 CONFIRMED THE STATEMENT OF DRIVER 1 AND ADDED AS SHE HAD JUST FINISHED CONSUMING A SIP OF WATER FROM HER CONTAINER AND REPLACED IT INTO THE HOLDER. SHE LOOKED UP AT THE TRAFFIC AND STRUCK VEHICLE 1. SHE STATES SHE DID NOT HAVE ENOUGH TIME TO REACT BEFORE HITTING THE VEHICLE.** 129b **----**

136 Damage To Other Property 129c **----**

Oper. 1 **137 Charge** Multiple Charges **NONE** 138 Summons No. **NONE** Oper. 2 **139 Charge** Multiple Charges **CARELESS DRIVING** 140 Summons No. **1214-Q-** 130 **06**

141 Officer's Signature **PO Tracy Gayden 7228** 142 Badge No. **7228** 143 Reviewed By _____ Badge No. _____ 144 Case Status Pending Complete 131 **12**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	41	M	----	----	1	04	04	----	----	KENTOS, ROBERT-61 Meadow Road, Edison, NJ 08817
B	2	01	01	04	21	F	05	08	1	04	04	01	6202	FAYFMAN, NATALIE-25 RYAN ROAD, MARLBORO, NJ
C														
D														
E														

New Jersey Police Crash Investigation Report

Police Dept. New Brunswick

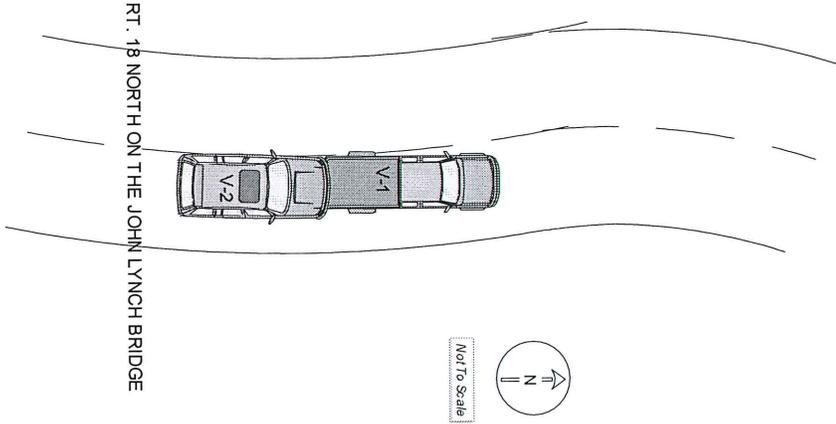
Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-50171

Not To Scale



1 Case Number **16-50231** 10 Crash Occurred On: **Easton Avenue** 11 Speed Limit **2 5** 118a **13**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost **2 5** 118b **----**
 3 Station/Precinct **01** Feet N E of: **Condict Street** S W 18 Speed Limit **2 5**

4 Date of Crash **08 03 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **13 16** 7 Municipality Code **12114** 8 Total Killed **-** 9 Total Injured **-** 19 To: 17 Cross Road Name NB EB 119a **02**
 20 Route/Name SB WB 119b **----**
 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **4039083409** 25 Ins Code **148** 53 Veh No **2** 54 Policy No. **TC2JCAP266T3603TIL15** 55 Ins Code **341** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name **Mihir** Initial Last Name **Brahmbhatt** 29 Sex **M** 56 Driver's First Name **Kenneth** Initial Last Name **Dye** 59 Sex **M** 121 **01**

27 Number and Street **4 McCain Ct** 30 Eyes **1** 57 Number and Street **151 Washington Ave Apt 1r** 60 Eyes **2**

28 City **Flanders, NJ** State Zip **07836-4021** 58 City **Kearny, NJ** State Zip **07032-2900**

31 State **03** 32 Dvr's License No **01 02 75** 33 DOB **01 02 75** 34 Expires **mm yy** 61 State **03** 62 Driver's License No **07 19 88** 63 DOB **07 19 88** 64 Expires **mm yy** 122 **----**

35 Owner's First Name **Inc** Initial Last Name **Quest** 65 Owner's First Name **Inc** Initial Last Name **Quest** 123 **----**

36 Number and Street **One Malcolm Ave** 66 Number and Street **One Malcolm Ave** 124 **10**

37 City **Teterboro, NJ** State Zip **07608** 67 City **Teterboro, NJ** State Zip **07608** 125 **02**

38 Make **SUB** 39 Model **FOR** 40 Color **GY** 41 Year **14** 42 Plate No. **Y43EJG** 43 State **NJ** 68 Make **DOD** 69 Model **G C** 70 Color **WHI** 71 Year **10** 72 Plate No. **D39ECS** 73 State **NJ**

44 VIN **JF2SJAEC2EH495813** 45 Expires **07/17** 74 VIN **2D4RN1AE4AR228408** 75 Expires **03/17**

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test
Given: No Yes Refused
Type: Breath Blood Urine
Results: 0.____ % Pending

49 Hazardous Material Name or Placard No.
On Board Spill

50 Carrier No USDOT Other *

51 Commercial Vehicle Weight
 ≤ 10,000 lbs
 10,001 - 26,000 lbs
 ≥ 26,001 lbs

52 Carrier name

134 Crash Diagram (NOT TO SCALE)

EASTON AVE

78 Alcohol/Drug Test
Given: No Yes Refused
Type: Breath Blood Urine
Results: 0.____ % Pending

79 Hazardous Material Name or Placard No.
On Board Spill

80 Carrier No USDOT Other *

81 Commercial Vehicle Weight
 ≤ 10,000 lbs
 10,001 - 26,000 lbs
 ≥ 26,001 lbs

82 Carrier name

135 Crash Description **V#1 was parked and occupied in a yellow curbed area on Easton Ave. V#2 was making a right turn from Easton Ave. onto Condict Street when a collision occurred between both vehicles. D#1 stated that his vehicle was parked near the garbage can on the corner. D#2 stated that as he was turning V#1 was slowly moving to the corner of Condict Street to throw out his garbage V#2 stated that D#1 caused the accident. D#1 was informed that he was in a no parking area and was shown the painted yellow curb. D#1 stated that the accident was caused by V#2 striking V#1 during the turn.**

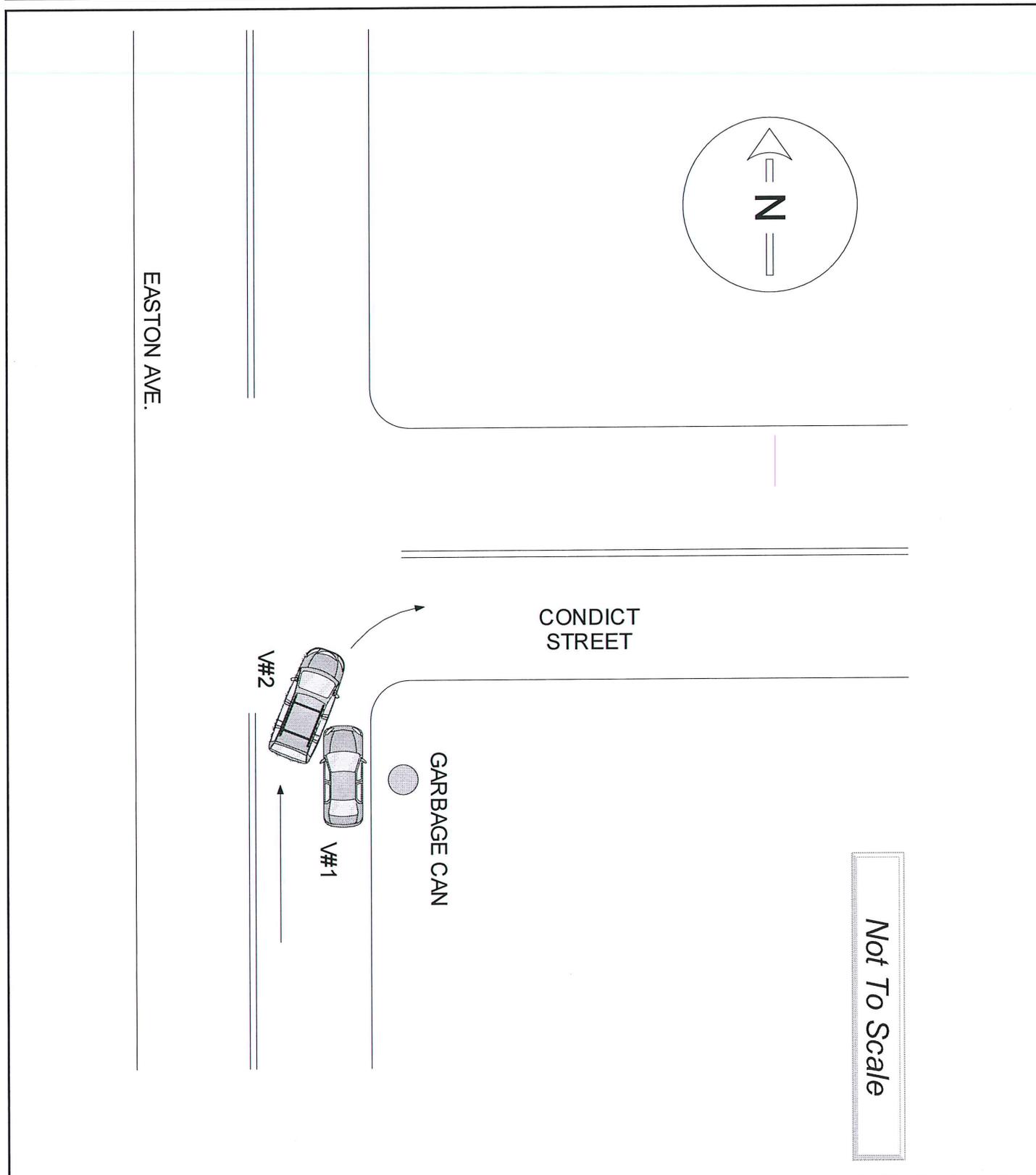
136 Damage To Other Property

Oper. **1** 137 Charge Multiple Charges **improper parking (25 ft) 10.16** 138 Summons No. **Q376341** Oper. **1** 139 Charge Multiple Charges **improper parking (25 ft) 10.16** 140 Summons No. **Q376341** 133 **03**

141 Officer's Signature **PO James Hayes 7200** 142 Badge No. **7200** 143 Reviewed By **James Hayes** Badge No. **7200** 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	----	----	41	M	----	----	09	04	----	----	----	Brahmbhatt, Mihir-4 McCain Ct, Flanders, NJ 07836-4021
B	2	01	----	----	28	M	----	----	09	04	----	----	----	Dye, Kenneth-151 Washington Ave Apt 1r, Kearny, NJ 07032
C														
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-50231</u>

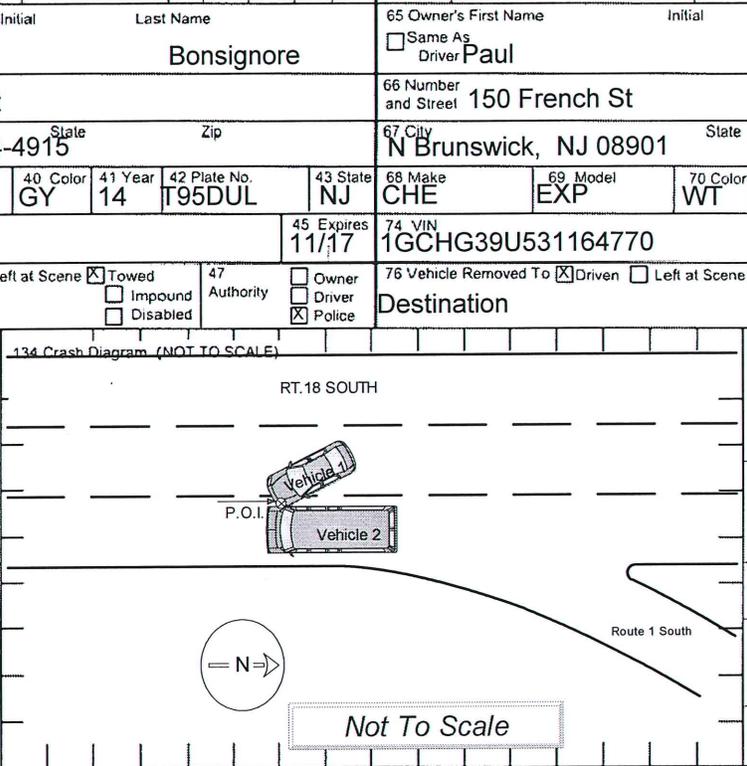


1 Case Number **16-50264** 10 Crash Occurred On: **State Route 18 SB** S **4** **5** 11 Speed Limit **45** 118a **05**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost **4** **5** 118b **02**
 3 Station/Precinct **100** Feet N E of: **US Highway 1 NB** 18 Speed Limit **45** 119a **25**
 4 Date of Crash **08** **03** **16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **16** **11** 7 Municipality Code **12** **14** 8 Total Killed **-** 9 Total Injured **-** 19 To: 17 Cross Road Name NB EB 119b **02**
 20 Route/Name **100** 21 Latitude **41** **16** **16** 22 Longitude **74** **05** **16** 119c **---**

23 Veh No **1** 24 Policy No. **F0826552426** 25 Ins Code **426** 53 Veh No **2** 54 Policy No. **BA000000113646** 55 Ins Code **925** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121 **01**
 26 Driver's First Name Initial Last Name **Kylene** **Bonsignore** **F** 29 Sex **F** 56 Driver's First Name Initial Last Name **Manuel** **Figueiredo** **m** 59 Sex **m** 122 **---**
 27 Number and Street **51 Dorchester Ct** 30 Eyes **4** 57 Number and Street **1110 Debra Drive.** 60 Eyes **2** 123 **---**
 28 City **Hillsborough, NJ 08844-4915** State Zip **Hillsborough, NJ 07036-6104** State Zip 124 **11**
 31 State 32 Driver's License No 33 DOB **12** **14** **79** 34 Expires **mm** **dd** **yy** 61 State 62 Driver's License No 63 DOB **08** **06** **52** 64 Expires **mm** **dd** **yy** 125 **01**

35 Owner's First Name Initial Last Name Same As Driver **Kylene** **Bonsignore** 65 Owner's First Name Initial Last Name Same As Driver **Paul** 126 **04**
 36 Number and Street **51 Dorchester Ct** 66 Number and Street **150 French St** 127 **04**
 37 City **Hillsborough, NJ 08844-4915** State Zip **N Brunswick, NJ 08901** State Zip 128a **26**
 38 Make **GMC** 39 Model **ACA** 40 Color **GY** 41 Year **14** 42 Plate No. **T95DUL** 43 State **NJ** 68 Make **CHE** 69 Model **EXP** 70 Color **WT** 71 Year **03** 72 Plate No. **XS427F** 73 State **NJ** 128b **---**
 44 VIN **1GKKRNED0EJ227962** 45 Expires **11** **17** 74 VIN **1GCHG39U531164770** 75 Expires **06** **17** 128c **---**

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 128d **---**
 48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 129a **26**
 Type: Breath Blood Urine 79 Hazardous Material Name or Placard No. 129b **---**
 Results: 0.--- % Pending 80 Carrier No. USDOT Other * 129c **---**
 49 Hazardous Material Name or Placard No. 81 Commercial Vehicle Weight ≤ 10,000 lbs 129d **---**
 On Board Spill 82 Carrier name 129e **---**
 50 Carrier No. USDOT Other * 130 **11**
 51 Commercial Vehicle Weight ≤ 10,000 lbs 131 **11**
 10,001 - 26,000 lbs 132 **03**
 ≥ 26,001 lbs 133 **03**
 52 Carrier name 134 **---**



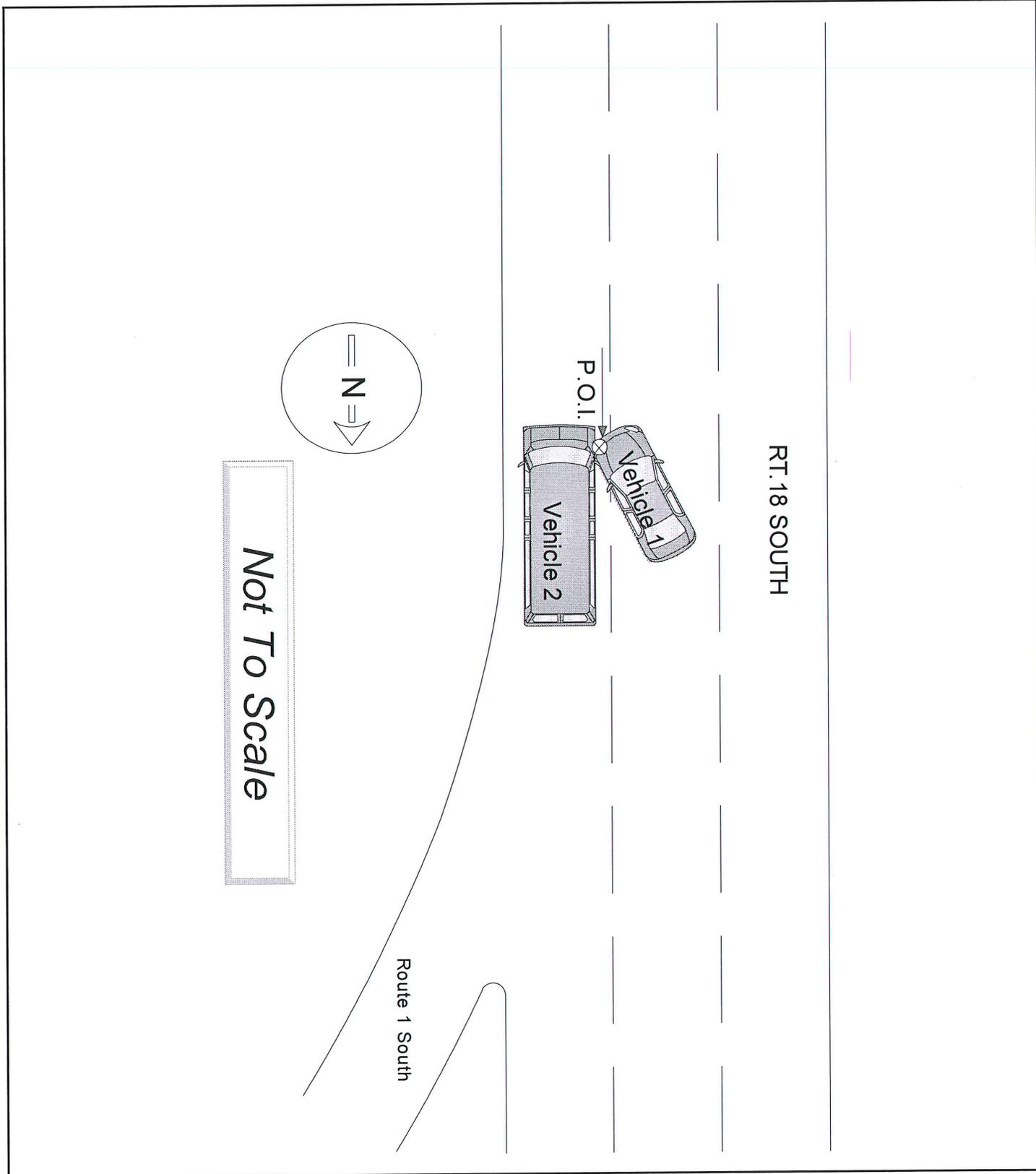
53 Owner's First Name Initial Last Name **Kylene** **Bonsignore** 135 Crash Description **See page 2** 129f **---**
 54 Number and Street **51 Dorchester Ct** 136 Damage To Other Property **---** 129g **---**
 55 City **Hillsborough, NJ 08844-4915** State Zip **Hillsborough, NJ 07036-6104** State Zip 130 **11**
 56 Make **GMC** 57 Model **ACA** 58 Color **GY** 59 Year **14** 60 Plate No. **T95DUL** 61 State **NJ** 131 **11**
 62 VIN **1GKKRNED0EJ227962** 63 Expires **11** **17** 132 **03**
 64 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 65 Authority Owner Driver Police 133 **03**
 66 Alcohol/Drug Test Given: No Yes Refused 67 Type: Breath Blood Urine 68 Results: 0.--- % Pending 69 Hazardous Material Name or Placard No. On Board Spill 70 Carrier No. USDOT Other * 71 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 72 Carrier name

135 Crash Description **See page 2** 129f **---**
 136 Damage To Other Property **---** 129g **---**
 130 **11**
 131 **11**
 132 **03**
 133 **03**

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 134 **---**
 141 Officer's Signature **PO Nicole Lewis 7340** 142 Badge No. **7340** 143 Reviewed By **---** Badge No. 144 Case Status Pending Complete 135 **---**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	---	36	F	---	---	1	09	04	---	---	Bonsignore, Kylene-51 Dorchester Ct, Hillsborough, NJ 08844
B	1	03	01	---	44	M	---	---	1	09	04	---	---	Bonsignore, Joseph-51 Dorchester Ct, Hillsborough, NJ 08844
C	1	06	01	---	14	M	---	---	1	04	04	---	---	
D	1	04	01	---	1	M	---	---	1	05	05	---	---	Bonsignore, Cameron-51 Dorchester Ct, Hillsborough, NJ
E	1	09	01	---	11	M	---	---	1	04	04	---	---	

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-50264</u>



PO Nicole Lewis 7340
Officer's Signature

7340
Badge Number

97 01 1 Case Number **16-50260** 10 Crash Occurred On: **Joyce Kilmer Avenue** 11 Speed Limit **25**
 98 01 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name **Paterson Street** Dir **N** 12 Route No. Suffix 13 Milepost
 3 Station/Precinct

99 07 4 Date of Crash **08/03/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **1602** 7 Municipality Code **1214** 8 Total Killed **0** 9 Total Injured **0**
 100 01 19 Ramp **0** To: **0** From: **0** 17 Cross Road Name 20 Route/Name 21 Latitude 22 Longitude

101 02 23 Veh No **1** 24 Policy No. **4068-44-07-44** 25 Ins Code **100** 53 Veh No **2** 54 Policy No. **UNKNOWN** 55 Ins Code
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

102 01 26 Driver's First Name **Criselda** Initial **A** Last Name **Adelantar** 29 Sex **F** 56 Driver's First Name **UNKNOWN** Initial **UNKNOWN** Last Name **UNKNOWN** 59 Sex **UNKNOWN**

103 01 27 Number and Street **540 Ellis Parkway** 30 Eyes **1** 57 Number and Street **UNKNOWN** 60 Eyes **UNKNOWN**
 28 City **Piscataway, NJ** State **NJ** Zip **08854-4515** 58 City **UNKNOWN** State **UNKNOWN** Zip **UNKNOWN**

104 02 31 State **NJ** 32 Dnr's License No **053056** 33 DOB **05/30/56** 34 Expires **04/18** 61 State **UNKNOWN** 62 Driver's License No **UNKNOWN** 63 DOB **UNKNOWN** 64 Expires **UNKNOWN**

105 02 35 Owner's First Name **Lareina** Initial **K** Last Name **Adelantar** 65 Owner's First Name **UNKNOWN** Initial **UNKNOWN** Last Name **UNKNOWN**
 Same As Drive Same As Driver

36 Number and Street **540 Ellis Parkway** 66 Number and Street **UNKNOWN**
 37 City **Piscataway, NJ** State **NJ** Zip **08854** 67 City **UNKNOWN** State **UNKNOWN** Zip **UNKNOWN**

107 01 38 Make **DOD** 39 Model **GRA** 40 Color **RD** 41 Year **14** 42 Plate No. **R78ECF** 43 State **NJ** 68 Make **UNKNOWN** 69 Model **UNKNOWN** 70 Color **UNKNOWN** 71 Year **UNKNOWN** 72 Plate No. **VGFX39** 73 State **UNKNOWN**

108 01 44 VIN **2C4RDGBG9ER106653** 45 Expires **04/18** 74 VIN **UNKNOWN** 75 Expires **UNKNOWN**

109 00 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

110 01 48 Alcohol/Drug Test Given: No Yes Refused 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test Given: No Yes Refused
 111 00 Type: Breath Blood Urine 135 Crash Description **SEE ACCIDENT REPORT** 79 Hazardous Material Name or Placard No. **Not To Scale**
 112 Results: 0.____ % Pending

113 00 49 Hazardous Material Name or Placard No. **Not To Scale** 79 Hazardous Material Name or Placard No. **Not To Scale**
 114 On Board Spill 80 Carrier No. USDOT Other *

115 50 Carrier No. USDOT Other * 81 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs >= 26,001 lbs
 116 01 51 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs >= 26,001 lbs 82 Carrier name

117 01 52 Carrier name **SEE ACCIDENT REPORT**

135 Crash Description **SEE ACCIDENT REPORT**

136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Elfi Martinez 7303** 142 Badge No. 143 Reviewed By **_____** Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	---	34	F	---	---	1	04	04	---	---	Adelantar, Lareina-540 Ellis Parkway, Piscataway, NJ 08854
B	1	03	01	---	6	F	---	---	1	05	05	---	---	David, Liana-540 Ellis Parkway, Piscataway, NJ 08854
C	1	04	01	---	4	F	---	---	1	05	05	---	---	Davis, Savonna-540 Ellis Parkway, Piscataway, NJ 08854
D	1	05	01	---	1	M	---	---	1	05	05	---	---	Davis, Josiah-540 Ellis Parkway, Piscataway, NJ 08854
E														

<p>New Jersey Police Crash Investigation Report</p> <p>Motor Vehicle Crash Description</p>	<p>Police Dept: <u>New Brunswick</u> Code: <u>01</u></p> <p>Station: _____ Case No: <u>16-50260</u></p>
--	---

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
I														
N														
V														
O														
L														
V														
E														
J														
D														

135 Crash Description

Driver #1 stated she was driving northbound on Joyce Kilmer Ave when she reached the intersection with Paterson St. She signaled and waited in traffic as she attempted to make a left turn onto Paterson St when she was suddenly struck on the rear right side by vehicle #2.

Both vehicles parked initially, however, driver #1 stated that vehicle #2 left the scene shortly after. Vehicle #2 was described as an older four door Toyota (red in color) bearing New Jersey registration "VGFX39".

It should be noted that the aforementioned registration was found to be not on file.

Vehicle #1 was observed to have moderate damage to the rear right side of the vehicle.

FMS arrived and attended to the driver and passengers prior to our arrival.

A case number was given to driver #1 for her personal records.

I have nothing further to report at this time.

Ofc. Martinez, F #7303

PO Elfi Martinez 7303

New Jersey Police Crash Investigation Report

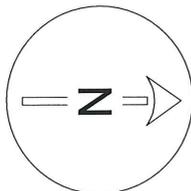
Police Dept. New Brunswick

Code 01

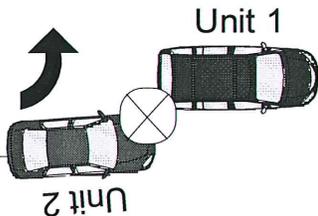
Motor Vehicle Crash Description

Station _____

Case No. 16-50260



Paterson St



Joyce Kilmer Ave

Not To Scale

05 1 Case Number **16-50342** 10 Crash Occurred On **181 Somerset Street** 11 Speed Limit **2 5** 118a **04**
 97 2 Police Dept of **New Brunswick** Code **01** 12 Route No. **181** Suffix **S** 13 Milepost **01** 118b **02**
 98 3 Station/Precinct **01** 14 At Intersection with Feet Miles N S E W of: 16 17 Cross Road Name 18 Speed Limit 119a **25**
 99 4 Date of Crash **08/03/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **22 43** 7 Municipality Code **12 14** 8 Total Killed **-** 9 Total Injured **-** 19 To: 17 NB EB SB WB 119b **----**
 100 21 Latitude **40 38 12** 22 Longitude **74 38 12**

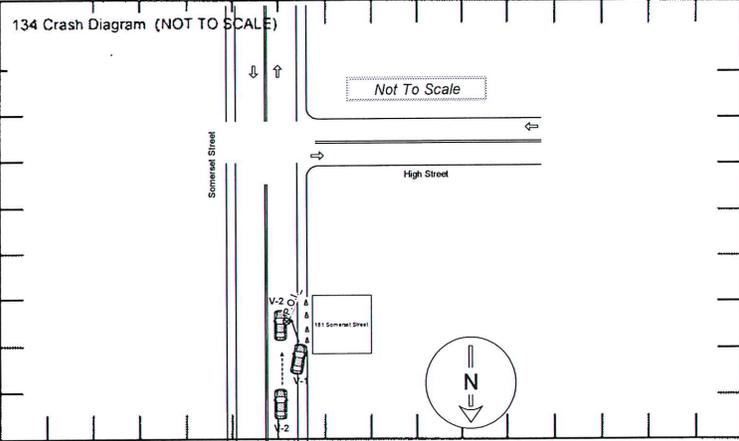
101 23 Veh No **1** 24 Policy No. **HPA00002094751** 25 Ins Code **411** 53 Veh No **2** 54 Policy No. **939253365** 55 Ins Code **054** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121 **01**

102 26 Driver's First Name Initial Last Name **Samantha Fields** 29 Sex **F** 56 Driver's First Name Initial Last Name **Ruth Wojciechowski** 59 Sex **F** 122 **----**
 103 27 Number and Street **1353 Division Ave** 30 Eyes **5** 57 Number and Street **7 Jason Dr** 60 Eyes **2** 123 **----**
 104 28 City **Piscataway, NJ 08854-1812** State **NJ** Zip **08854** 58 City **No Brunswick, NJ 08902-2518** State **NJ** Zip **08902** 124 **06**

105 31 State **NJ** 32 Driver's License No **02 03 95** 33 DOB **02 03 95** 34 Expires **02 03 95** 61 State **NJ** 62 Driver's License No **05 07 61** 63 DOB **05 07 61** 64 Expires **05 07 61** 125 **01**

35 Owner's First Name Initial Last Name Same As Driver **Kodie Wilson** 65 Owner's First Name Initial Last Name Same As Driver **Joseph Wojciechowski** 126 **11**
 36 Number and Street **86 College Dr** 66 Number and Street **7 Jason Drive** 127 **11**
 106 37 City **Edison, NJ 08817-5985** State **NJ** Zip **08817** 67 City **No Brunswick, NJ 08902-2518** State **NJ** Zip **08902** 128a **26**
 107 38 Make **HYU** 39 Model **ELA** 40 Color **RD** 41 Year **14** 42 Plate No. **C67FJW** 43 State **NJ** 68 Make **CHE** 69 Model **IMP** 70 Color **BL** 71 Year **08** 72 Plate No. **WOJOE** 73 State **NJ** 128b **----**
 44 VIN **KMHD35LH1EU217902** 45 Expires **05/19** 74 VIN **2G1WB58N989238652** 75 Expires **01/17** 128c **----**
 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 128d **----**

110 48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 129a **----**
 111 49 Type: Breath Blood Urine 79 Type: Breath Blood Urine 129b **26**
 112 49 Results: 0.____ % Pending 79 Results: 0.____ % Pending 129c **----**
 113 49 Hazardous Material Name or Placard No. 79 Hazardous Material Name or Placard No. 129d **----**
 114 On Board Spill 80 On Board Spill 129e **----**
 115 50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 129f **----**
 116 51 Commercial Vehicle Weight < 10,000 lbs 81 Commercial Vehicle Weight < 10,000 lbs 129g **----**
 117 10,001 - 26,000 lbs > 26,001 lbs 81 Commercial Vehicle Weight 10,001 - 26,000 lbs > 26,001 lbs 129h **26**
 52 Carrier name 82 Carrier name 129i **----**



135 Crash Description **See NJ TR-1 Report for details...** 130 **11**
 136 Damage To Other Property 131 **11**
 Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 132 **02**
 141 Officer's Signature **PO Ryan Daughton 7288** 142 Badge No. **7288** 143 Reviewed By **5229** Badge No. 144 Case Status Pending Complete 133 **02**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	21	F	----	----	1	09	04	----	----	Fields, Samantha-1353 Division Ave, Piscataway, NJ 08854
B	2	01	01	----	55	F	----	----	1	09	04	----	----	Wojciechowski, Ruth-7 Jason Dr, No Brunswick, NJ 08902
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>New Brunswick</u> Code: <u>01</u> Station: _____ Case No: <u>16-50342</u>
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(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
L														
I														
N														
V														
O														
L														
V														
E														
J														

135 Crash Description

On Wednesday August 3rd, 2016 at approximately 10:43 p.m. the undersigned officer detailed in marked patrol unit 934, while attired in the uniform of the day responded to the area of 181 Somerset Street for a reported Motor Vehicle Collision.

Upon arrival, I spoke with both parties. Vehicle 1 was traveling south on Somerset Street towards 181 Somerset Street. The driver of V-1 utilized her right hand turn signal to turn into this establishment, but she noticed it was blocked off with cones. While positioned in the right shoulder of Somerset Street, she attempted to turn back into the southbound lane of travel of Somerset Street. During this time, Vehicle 2 was going southbound on Somerset Street towards High Street and as V-1 turned back into the lane, it struck V-2 on it's passenger side.

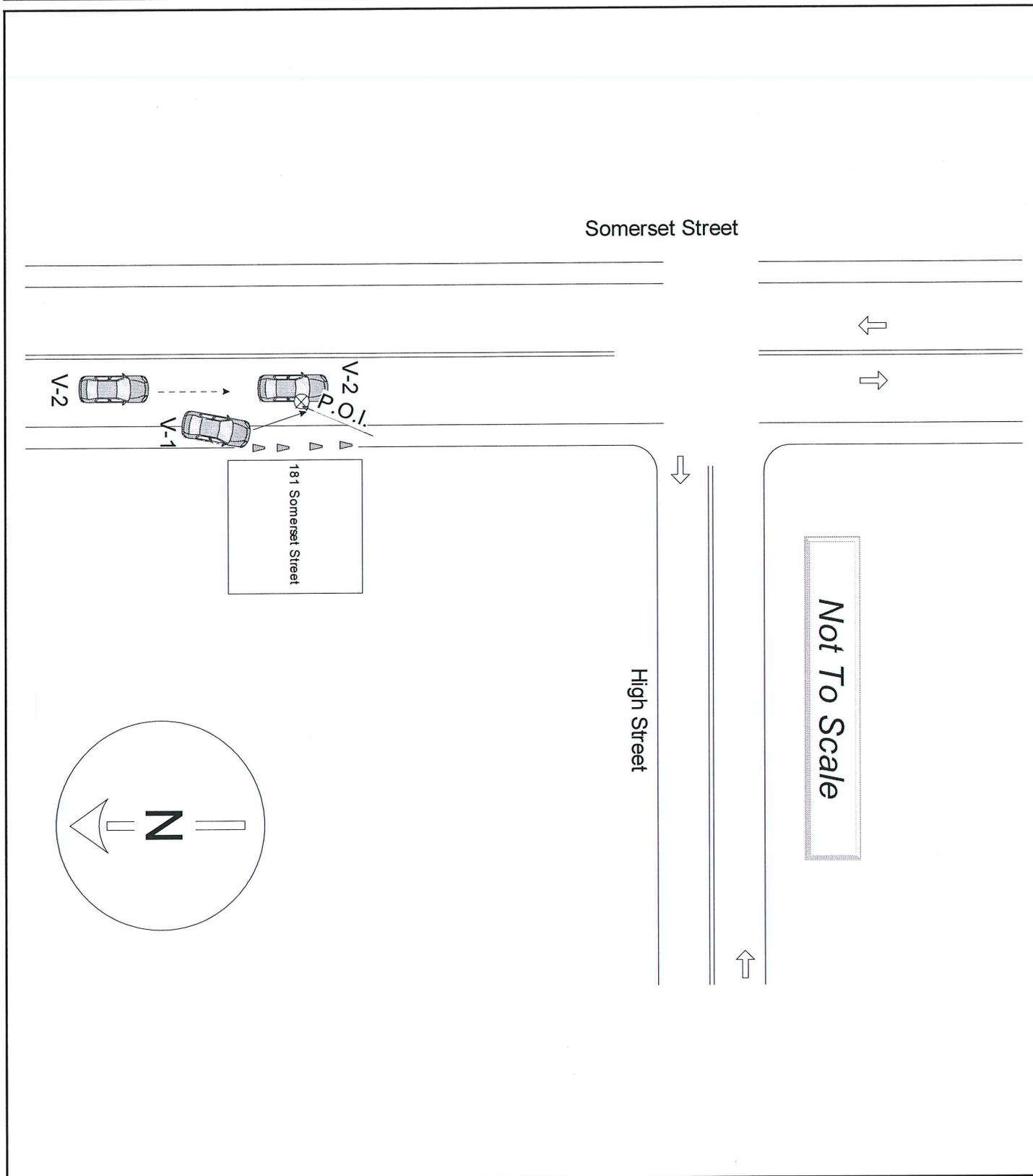
V-1 sustained moderate driver side front end damage and was able to be driven from the scene. V-2 sustained moderate mid passenger side damage and was able to be driven from the scene. All parties refused medical attention. I have nothing further to report at this time.

P O Ryan J Daughton
#7288

PO Ryan Daughton 7288

7288

New Jersey Police Crash Investigation Report	Police Dept. <u>New Brunswick</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>16-50342</u>



1 Case Number **16-50399** 10 Crash Occurred On **56** **Throop Avenue** 11 Speed Limit **2 5** 118a **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with N E S W of: **Suydam Street** 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b

3 Station/Precinct **01** 14 **15** 16 **17** Cross Road Name **Suydam Street** 19 To: NB EB From: SB WB 119a **03**
 4 Date of Crash **08 04 16** 5 Day of Week **Su M Tu W Th F Sa** 6 Time (use 2400 hrs) **06 40** 7 Municipality Code **1214** 8 Total Killed **00** 9 Total Injured **01** 21 Latitude 22 Longitude 119b

23 Veh No **1** 24 Policy No. **4205-32-28-47** 25 Ins Code **100** 53 Veh No **2** 54 Policy No. **4376-83-34-73** 55 Ins Code **100** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121 **01**

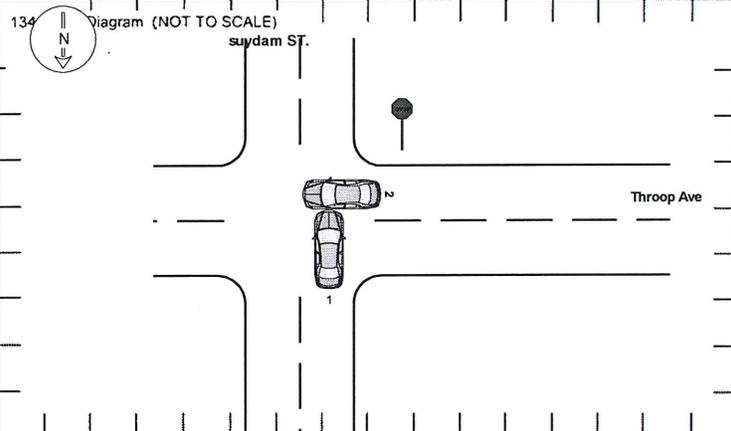
26 Driver's First Name Initial Last Name **Nalini Singh** 29 Sex **F** 56 Driver's First Name Initial Last Name **Sanchez-Santiago, Sanchez-Santiago** 59 Sex **F** 121 **01**
 27 Number and Street **39 Edmund St** 30 Eyes **2** 57 Number and Street **135 Seaman ST. apt 1** 60 Eyes **2** 122 **---**

28 City **Edison, NJ 08817-5043** State Zip 58 City **ew Brunswick NJ 08901** State Zip 123 **---**
 31 State 32 Driver's License No **07 18 86** 33 DOB mm dd yy 34 Expires mm yy 61 State 62 Driver's License No **06 18 79** 63 DOB mm dd yy 64 Expires mm yy 124 **---**

35 Owner's First Name Initial Last Name Same As Driver 65 Owner's First Name Initial Last Name Same As Driver 125 **01**
 36 Number and Street 66 Number and Street 126 **11**

37 City State Zip 67 City State Zip 127 **08**
 38 Make **HYU** 39 Model **SON** 40 Color **RD** 41 Year **12** 42 Plate No. **V61AMG** 43 State **NJ** 68 Make **Toyota** 69 Model **Siv** 70 Color **199** 72 Plate No. **H59EYB** 73 State **NJ** 128a **26**

44 VIN **5NPEC4ACXCH417016** 45 Expires **01/17** 74 VIN **2T1BR18E5XC166793** 75 Expires **/** 128b **26**
 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 128c **26**

48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending 134  78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending 128d **11**

49 Hazardous Material Name or Placard No. On Board Spill 79 Hazardous Material Name or Placard No. On Board Spill 129a **26**
 50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 128e **26**

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129b **26**
 52 Carrier name 82 Carrier name 129c **26**

135 Crash Description **Vehicle # 1 was going straight ahead on Suydam ST. when vehicle # 2 who was on Throop ave at a stop sign went straight ahead causing the collision.** 129d **09**

136 Damage To Other Property 130 **12**
 131 **12** 132 **09**

Oper. **2** 137 Charge Multiple Charges **failure to stop/yield** 138 Summons No. **Q376148** Oper. Multiple Charges 139 Charge Multiple Charges 140 Summons No. **09** 133 **09**

141 Officer's Signature **PO David Pagan 7169** 142 Badge No. 143 Reviewed By Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	04	30	F	04	08	1	04	04	01	-----	Singh, Nalini-39 Edmund St, Edison, NJ 08817-5043
B	2	01	01	----		F	----	----	2	04	04	----	-----	
C														
D														
E														

04 1 Case Number **16-50457** 10 Crash Occurred On **181 Somerset Street** 11 Speed Limit **2 5** 118a
 01 2 Police Dept of **New Brunswick** Code **01** 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b
 01 3 Station/Precinct

05 4 Date of Crash **08 04 16** 5 Day of Week **Sa** 6 Time (use 2400 hrs) **12 52** 7 Municipality Code **12114** 8 Total Killed **00** 9 Total Injured **00** 119a
 01 19 To: 17 Cross Road Name NB EB 119b
 20 Route/Name SB WB 02
 21 Latitude 22 Longitude 119c

101 23 Veh No **1** 24 Policy No. **007-2529-B13-30J** 25 Ins Code **962** 53 Veh No **2** 54 Policy No. **139285685** 55 Ins Code **012** 120
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

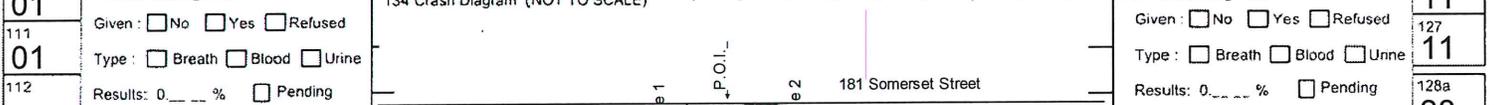
102 26 Driver's First Name Initial Last Name 29 Sex 56 Driver's First Name Initial Last Name 59 Sex 120
 01 27 Number and Street 30 Eyes 57 Number and Street 60 Eyes 121
 103 28 City State Zip 58 City State Zip

104 31 State 32 Driver's License No 33 DOB mm dd yy 34 Expires mm yy 61 State 62 Driver's License No 63 DOB mm dd yy 64 Expires mm yy 122
 02 35 Owner's First Name Initial Last Name 65 Owner's First Name Initial Last Name 123
 Same As Drive **Barbara Carr** Same As Drive **Geraldine Popkin**

36 Number and Street **7 Arron Burr Ct** 66 Number and Street **116 Pearl St.** 124
 105 37 City State Zip **Monroe Twp, NJ 08831-4634** 67 City State Zip **Red Bank, NJ 07701-1525** 125
 01 109

38 Make **TOY** 39 Model **CAM** 40 Color **SL** 41 Year **16** 42 Plate No. **J28GNL** 43 State **NJ** 68 Make **LEX** 69 Model **ES3** 70 Color **WT** 71 Year **10** 72 Plate No. **WJD76L** 73 State **NJ** 126
 108 44 VIN **4T1BF1FK0GU222140** 45 Expires **05/19** 74 VIN **JTHBK1EG0A2353079** 75 Expires **11/16** 127
 01 46 Vehicle Removed To Driven Left at Scene Towed 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed 77 Authority Owner Driver Police 128

110 48 Alcohol/Drug Test 134 Crash Diagram (NOT TO SCALE) 78 Alcohol/Drug Test 126
 01 Given: No Yes Refused 78 Given: No Yes Refused 127
 111 Type: Breath Blood Urine 79 Type: Breath Blood Urine 128
 112 Results: 0.____ % Pending 79 Results: 0.____ % Pending 128a
 113 49 Hazardous Material Name or Placard No. 79 Hazardous Material Name or Placard No. 128b
 On Board Spill 80 On Board Spill 128c
 114 50 Carrier No USDOT Other * 80 Carrier No. USDOT Other * 128d
 115 51 Commercial Vehicle Weight 81 Commercial Vehicle Weight 129a
 ≤ 10,000 lbs ≤ 10,000 lbs 129b
 10,001 - 26,000 lbs 10,001 - 26,000 lbs
 ≥ 26,001 lbs ≥ 26,001 lbs
 117 52 Carrier name 82 Carrier name 129c



135 Crash Description 129d
 I was advised by witnesses that vehicle two rolled in to vehicle one (1) while both vehicles were parked. They further stated that vehicle two was not parked in gear which caused the vehicle to roll and crash. Vehicle 1 rear bumper sustained minor damage. Vehicle 2 front bumper sustained minor damage. 130
 131

136 Damage To Other Property 132
 01

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 133
 01

141 Officer's Signature **PO Marvin Shaw 7305** 142 Badge No. 143 Reviewed By Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

New Jersey Police Crash Investigation Report

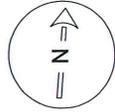
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-50457



Vehicle 1



P.O.I.

Vehicle 2

181 Somerset Street

Not To Scale

1 Case Number **16-50504** 10 Crash Occurred On: **Baldwin Street** 11 Speed Limit **25** 118a **02**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost **25** 118b **---**
 3 Station/Precinct **01** Feet Miles N E of: **Joyce Kilmer Avenue** S W 18 Speed Limit **25** 119 **---**

4 Date of Crash **08/04/16** 5 Day of Week **0** 6 Time (use 2400 hrs) **1734** 7 Municipality Code **1214** 8 Total Killed **0** 9 Total Injured **0** 19 To: 17 Cross Road Name NB EB SB WB
 20 Route/Name 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **4347702427** 25 Ins Code **100** 53 Veh No **2** 54 Policy No. **F5075015** 55 Ins Code **426** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name Initial Last Name **Ariel Hernandez** 29 Sex **M** 56 Driver's First Name Initial Last Name **Anthony Dixon** 59 Sex **M** 121 **01**
 27 Number and Street **258 Powers St** 30 Eyes **2** 57 Number and Street **303 Plainfield Ave Apt B4** 60 Eyes **2**

28 City **New Brunswick, NJ 08901-3044** State Zip 58 City **Edison, NJ 08817-3158** State Zip
 31 State 32 Driver's License No 33 DOB **08/31/94** 34 Expires **mm yy** 61 State 62 Driver's License No 63 DOB **02/21/88** 64 Expires **mm yy** 122 **---**

35 Owner's First Name Initial Last Name Same As Driver **PERSIO HERNANDEZ** 65 Owner's First Name Initial Last Name Same As Driver
 36 Number and Street **258 POWERS STREET** 66 Number and Street 123 **---**
 37 City **NEW BRUNSWICK NJ 08901** State Zip 67 City State Zip 124 **01**

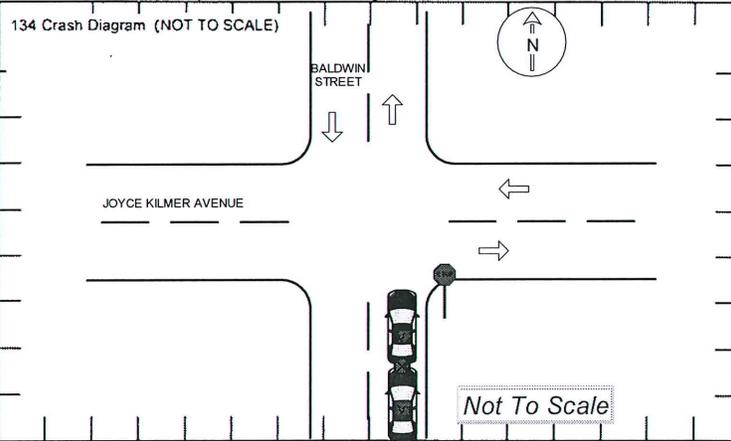
38 Make **TOY** 39 Model **CAM** 40 Color **BL** 41 Year **201** 42 Plate No. **U32CYM** 43 State **NJ** 68 Make **ACURA** 69 Model **35R** 70 Color **BLK** 71 Year **200** 72 Plate No. **B87FKT** 73 State **NJ** 125 **08**

44 VIN **4T1BF3EK3BU637507** 45 Expires **03/17** 74 VIN **JH4KA96664C00639** 75 Expires
 46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 126 **08**
 Type: Breath Blood Urine 79 Type: Breath Blood Urine 127 **08**
 Results: 0.____ % Pending 79 Results: 0.____ % Pending 128a **26**

49 Hazardous Material Name or Placard No. 79 Hazardous Material Name or Placard No. 128b **---**
 On Board Spill 80 On Board Spill 128c **---**
 50 Carrier No. USDOT Other * 81 Carrier No. USDOT Other * 128d **---**

51 Commercial Vehicle Weight ≤ 10,000 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 129a **26**
 10,001 - 26,000 lbs 10,001 - 26,000 lbs 129b **---**
 ≥ 26,001 lbs ≥ 26,001 lbs 129c **---**

52 Carrier name 82 Carrier name 129d **---**
 134 Crash Diagram (NOT TO SCALE) 

135 Crash Description 129e **---**
 129f **---**
 129g **---**
 129h **---**
 129i **---**
 129j **---**
 129k **---**
 129l **---**
 129m **---**
 129n **---**
 129o **---**
 129p **---**
 129q **---**
 129r **---**
 129s **---**
 129t **---**
 129u **---**
 129v **---**
 129w **---**
 129x **---**
 129y **---**
 129z **---**

136 Damage To Other Property **N/A** 130 **12**
 131 **12** 132 **06**
 Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 133 **06**

141 Officer's Signature **PO Justin Miller 7338** 142 Badge No. 143 Reviewed By Badge No. 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	---	22	M	---	---	1	09	09	---	---	Hernandez, Ariel-258 Powers St, New Brunswick, NJ 08901
B	2	01	01	---	28	M	---	---	1	09	09	---	---	Dixon, Anthony-303 Plainfield Ave Apt B4, Edison, NJ 08817
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>New Brunswick</u> Code: <u>01</u> Station: _____ Case No: <u>16-50504</u>
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(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
F														
L														
I														
N														
V														
O														
L														
V														
E														
J														

135 Crash Description

On 8/4/2016 Officer Riepenhoff and I were dispatched to the intersection of Baldwin Street and Joyce Kilmer Avenue for a motor vehicle accident.

Upon arrival we met with the driver of vehicle one(NJ U32CYM), Ariel Hernandez. Hernandez stated he rear ended vehicle two tapping the bumper slightly. Hernandez has no damage to his vehicle. The driver of vehicle two(B87FKT) Anthony Dixon informed us he was stopped at the stop sign on Baldwin Street when he was rear ended by vehicle one.

It should be noted that vehicle one had existing damage to the rear bumper from a previous accident. When we asked Dixon about the damage, he stated the scratches are from a previous accident but the bumper is now loose due to this accident.

Dixon and Hernandez were both uninjured and refused medical treatment. We advised both parties a police report will be filed.

P O Miller 7338

PO Justin Miller 7338

New Jersey Police Crash Investigation Report

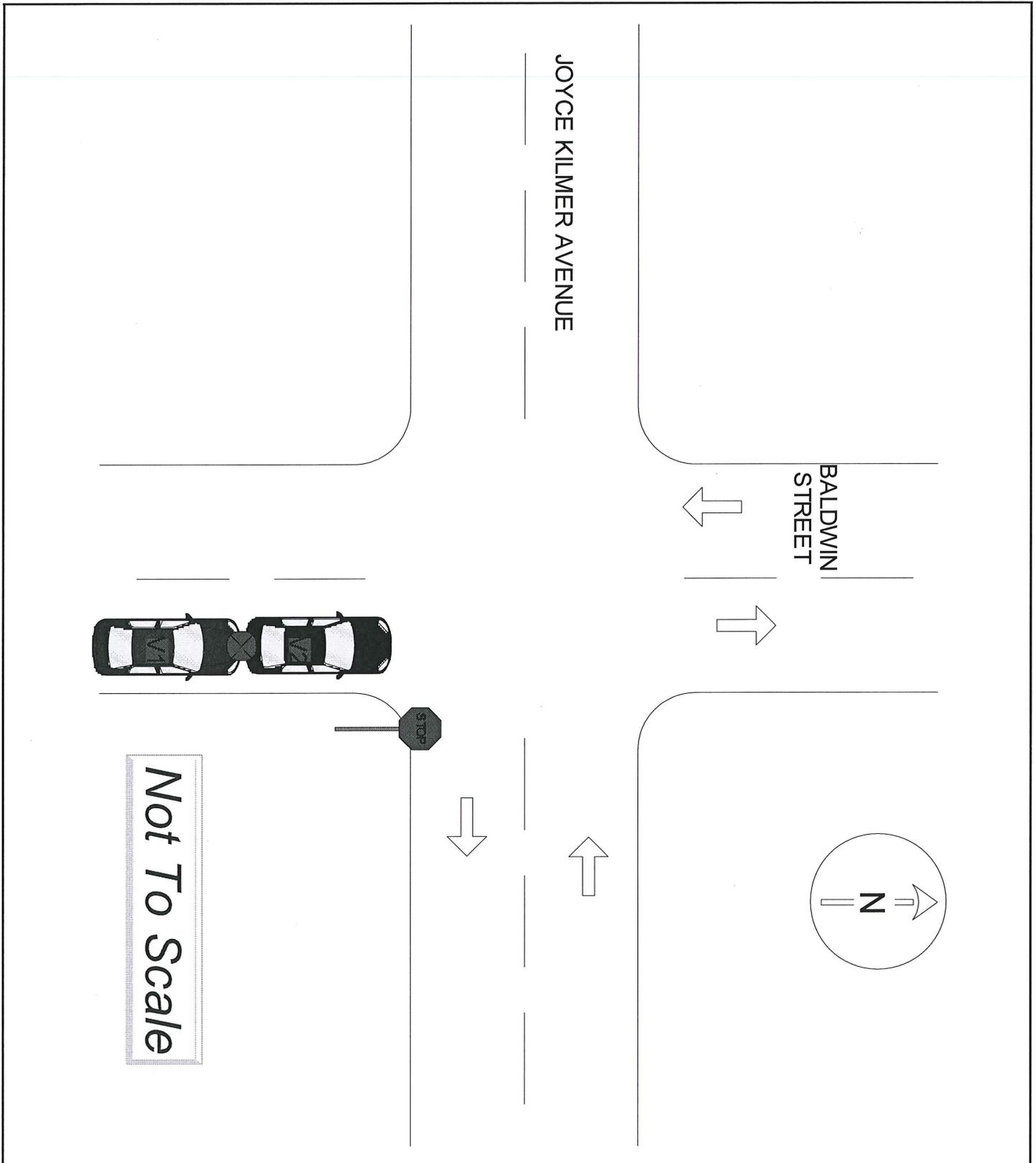
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-50504



PO Justin Miller 7338

Officer's Signature

Badge Number