

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>New Brunswick</u> Code: <u>01</u> Station: _____ Case No: <u>16-55678</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
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
F														
G														
H														
I														
J														

135 Crash Description

Investigation: V1 traveling west on Suydam St at the intersection of Railroad Ave. V1 was too tall to fit under the railroad trestle resulting in V1 impacting the trestle with it's vehicle roof. Realizing V1 could not fit under the trestle, D1 back away from the obstruction with damage to V1 and fled the area without reporting the collision.

Witness #1: Listed witness heard a loud bang outside his residence. When he exited his residence, he noticed V1 stuck underneath the aforementioned train trestle. He then witnessed V1 pull away from the trestle and flee the area quickly without reporting the incident. While doing so, W1 was able to take a picture of V1's license plate and provide it to me. W1 also advised me that he has a video surveillance system affixed to his residence that captured the incident in it's entirety. I then watched the surveillance footage that clearly shows V1 impacting the trestle with it's roof. V1 could be seen through the footage to have damaged it's roof. V1 then backs up, makes a right onto Railroad Ave and flees the area. W1 advised he will attempt to make a copy of the surveillance footage and provide it to police.

With the information provided by W1, I was able to track down the ownership of V1. I was able to get in touch with the company's manager, Tito (908) 361-0136 who provided me with the name and phone number of D1. I telephonically contacted D1 via the NBPD front desk recorded line and advised him of the situation.

D1 Stated: Today was one of his first days operating V1. While traveling on Suydam St, he misjudged the height of the trestle and impacted it with V1. He then knowingly fled the area because his dispatcher told him to leave. D1 provided me with all his appropriate pedigree information and vehicle information except for valid insurance for V1. He was issued a summons for Leaving the Scene of an Accident and Uninsured Vehicle (Q 375484).

NBPD communications telephonically contacted Transit Authority Operator #9204, advised them of the incident and to have an employee of theirs respond to the scene to ensure the structural integrity of the train trestle, even though it did not appear to be damaged. Nothing further to report at this time.

PO Nicholas DeFalco 7298

Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

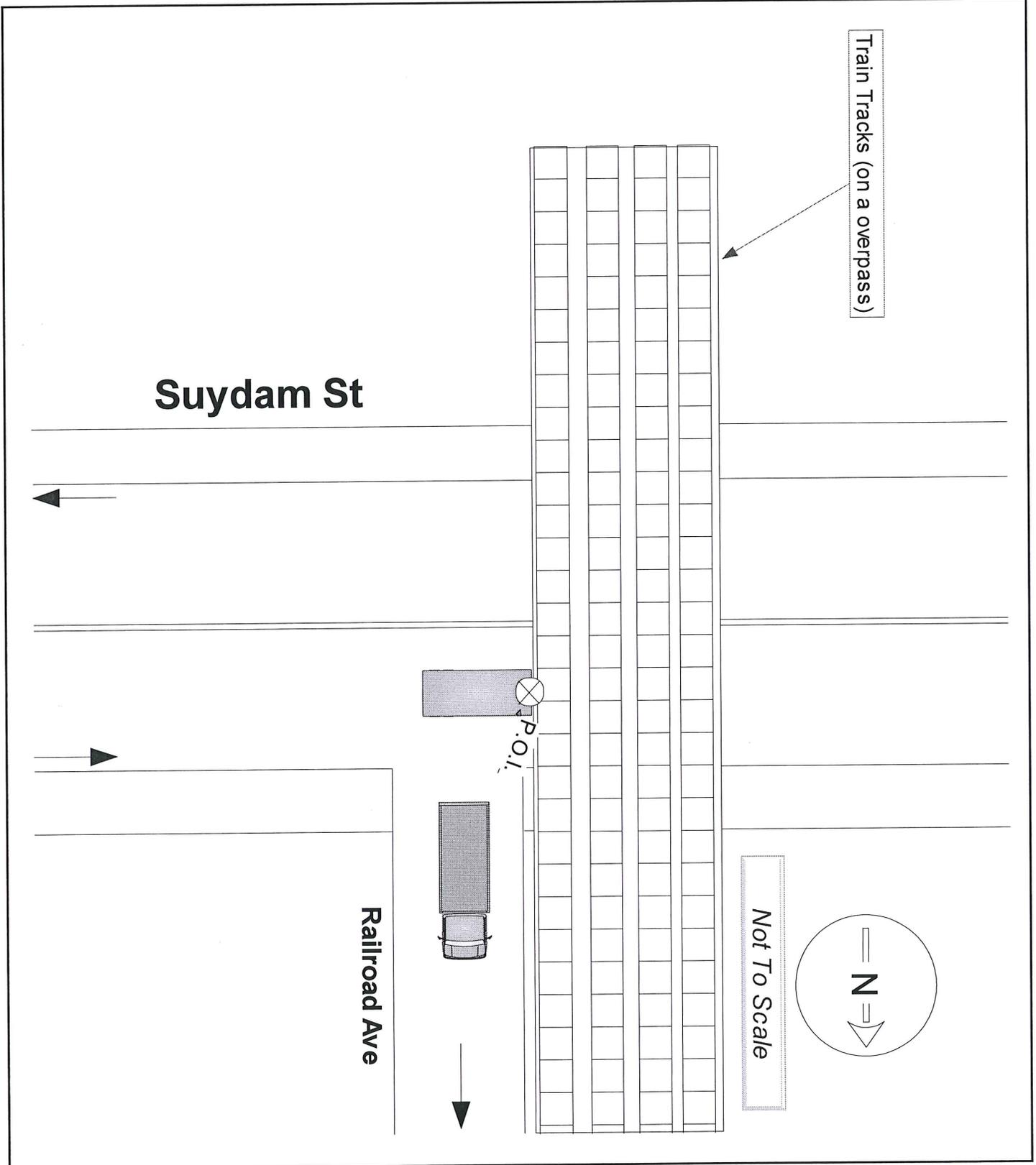
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-55678



1 Case Number **16-55685** 10 Crash Occurred On: **US Highway 1 SB** S ¹¹ Speed Limit **45** 118a **33**
 2 Police Dept of **New Brunswick** Code **01** 12 Route No. **01** 13 Milepost **45** 118b
 3 Station/Precinct **1000** Feet N E of: **Route 18 NB** S W 18 Speed Limit **45** 119a
 14 **15** 15 **39** 16 **1214** 17 Cross Road Name **Route 18 NB** NB EB 119b
 19 To: From: 20 Route/Name SB WB

4 Date of Crash **08/26/16** 5 Day of Week **Th** 6 Time (use 2400 hrs) **1539** 7 Municipality Code **1214** 8 Total Killed **-** 9 Total Injured **-**
 21 Latitude **40.71** 22 Longitude **-74.38**

23 Veh No **1** 24 Policy No. **B-12022** 25 Ins Code **12416** 53 Veh No **1** 54 Policy No. **B-12022** 55 Ins Code **12416**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name **Ruddy** Initial **M** Last Name **Collado-Moya** 28 Sex **M** 56 Driver's First Name **M** Initial **M** Last Name **Collado-Moya** 59 Sex **M**
 27 Number and Street **1038 Park Ave.** 30 Eyes **2** 57 Number and Street **1038 Park Ave.** 60 Eyes **2**

28 City **Apt. 7, Plainfield, NJ 07060** State **NJ** Zip **07060** 58 City **Plainfield** State **NJ** Zip **07060**

31 State **NJ** 32 Driver's License No **1A12345678** 33 DOB **01/21/85** 34 Expires **01/21/18** 61 State **NJ** 62 Driver's License No **1A12345678** 63 DOB **01/21/85** 64 Expires **01/21/18**

35 Owner's First Name **Fed Ex Freight Inc** Initial **F** Last Name **Freight Inc** 65 Owner's First Name **Fed Ex Freight Inc** Initial **F** Last Name **Freight Inc**
 Same As Driver Same As Driver

36 Number and Street **2200 Forward Dr.** 66 Number and Street **2200 Forward Dr.**

37 City **Harrison, AR 72601** State **AR** Zip **72601** 67 City **Harrison** State **AR** Zip **72601**

38 Make **KEN** 39 Model **-** 40 Color **Wht** 41 Year **200** 42 Plate No. **1176712** 43 State **IN** 68 Make **KEN** 69 Model **-** 70 Color **Wht** 71 Year **200** 72 Plate No. **1176712** 73 State **IN**

44 VIN **3WKDA48X37F171507** 45 Expires **07/17** 74 VIN **3WKDA48X37F171507** 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

48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.00% Pending 78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.00% Pending

49 Hazardous Material On Board Spill Name or Placard No. **Low's Theatre** 79 Hazardous Material On Board Spill Name or Placard No. **Low's Theatre**

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 **Low's Theatre** 82 Carrier name **Low's Theatre**

134 Crash Diagram (NOT TO SCALE) **See page #2**

135 Crash Description **See page #2**

136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. **7298** Oper. 139 Charge Multiple Charges 140 Summons No. **5275**

141 Officer's Signature **PO Nicholas DeFalco 7298** 142 Badge No. **7298** 143 Reviewed By **5275** Badge No. **5275** 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	00					1	04	04			
B														
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>16-55685</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

Investigation: V1 traveling South on Rt. 1, 1000 feet south of the Rt. 18 onramp. D1 lost control of V1 resulting in V1 leaving the roadway, crossing over the grass median, striking the concrete barrier of Rt. 1 north causing V1 to flip over onto it's side, finally coming to rest in the left lane of Rt. 1 Northbound traffic.

D1 Statement: While operating V1 southbound on Rt. 1, he approached the curve in the roadway 1000 feet south of the Rt. 18 onramp traveling approximately 35 mph. While negotiating the curve, he claims the vehicle's steering wheel locked up, not allowing him to maneuver the vehicle appropriately. D1 then applied the vehicle's brakes, but the vehicle did not have enough room to slow down resulting in V1 sliding through the grass median separating Rt. 1 south and Rt. 1 north. According to D1, V1 then impacted the concrete median separating the roadways causing V1 to flip onto it's side. D1 was not injured in any way as a result of the collision and V1 did not impact any other vehicles.

It should be noted, V1 was pulling a trailer with plate # TN-T723737 also owned by the same Fed Ex corporation VIN # 1GRAA56135K267844, 2005 GDAN. The trailer was also damaged along with it's contents.

As a result, N.IDOT responded to the scene along with N.JSP who both inspected the concrete barrier and ruled it to be structurally efficient after the incident. Nothing further to report at this time.

PO Nicholas DeFalco 7298

7298

New Jersey Police Crash Investigation Report

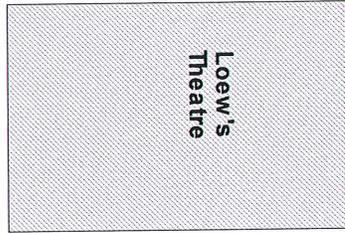
Police Dept. New Brunswick

Code 01

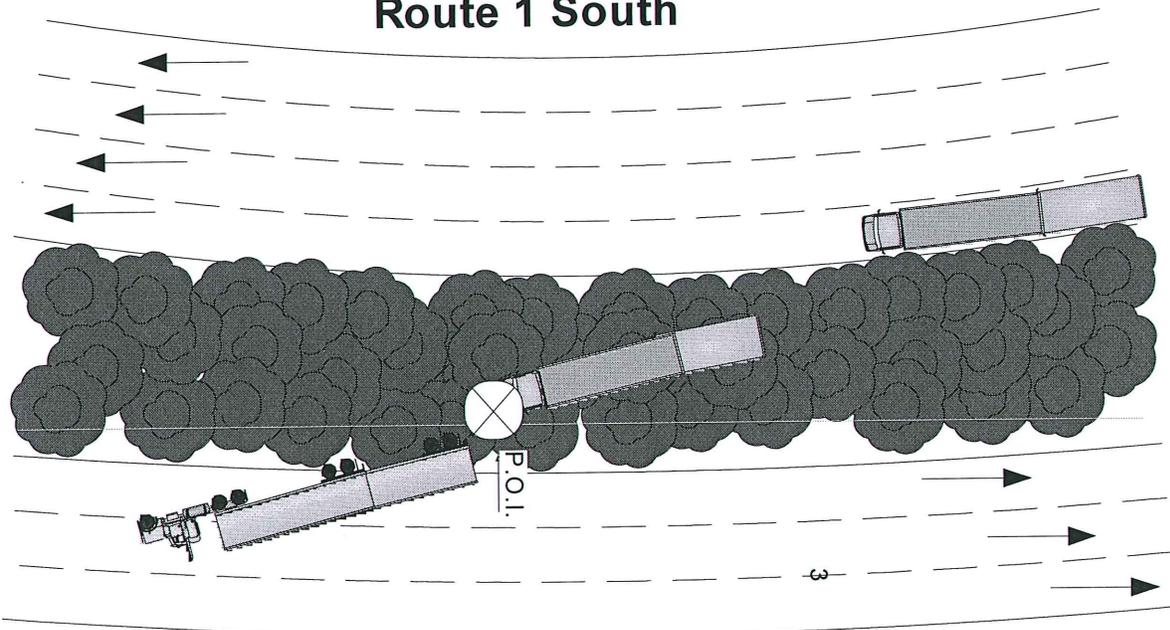
Motor Vehicle Crash Description

Station _____

Case No. 16-55685

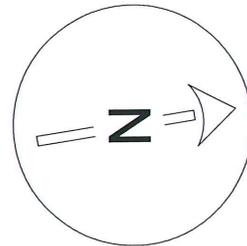


Route 1 South



Route 1 North

Not To Scale



1 Case Number **16-55685** 10 Crash Occurred On: **US Highway 1 SB** S **4** **5** 11 Speed Limit **0** **1** 118a **33**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Dir 12 Route No. Suffix 13 Milepost 18 Speed Limit **4** **5** 118b **----**
 3 Station/Precinct **1000** Feet N E of: **Route 18 NB** S W 19 To: 17 Cross Road Name NB EB 119a **----**
 14 15 16 20 Route/Name SB WB 119b **----**

4 Date of Crash mm dd yy 5 Day of Week Su M Tu W Th F Sa 6 Time (use 2400 hrs) **15** **39** 7 Municipality Code **12** **14** 8 Total Killed **-** 9 Total Injured **-** 21 Latitude 22 Longitude
 100 **08** **26** **16** 118c **----**
 101 **02** 118d **----**

23 Veh No **1** 24 Policy No. **B-12022** 25 Ins Code **12416** 53 Veh No 54 Policy No. 55 Ins Code
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run
 120 **01**

26 Driver's First Name Initial Last Name **Ruddy M Collado-Moya** 28 Sex **M** 56 Driver's First Name Initial Last Name 59 Sex
 102 **01** 121 **----**

27 Number and Street **1038 Park Ave.** 30 Eyes **2** 57 Number and Street 60 Eyes
 103 **01** 122 **----**

28 City **Apt. 7, Plainfield, NJ 07060** State Zip 58 City State Zip
 104 **01** 123 **----**

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
 105 **10** 124 **----**

35 Owner's First Name Initial Last Name **Fed Ex Freight Inc** 65 Owner's First Name Initial Last Name
 Same As Driver Same As Driver
 125 **----**

36 Number and Street **2200 Forward Dr.** 66 Number and Street
 106 **01** 126 **16**

37 City **Harrison, AR 72601** State Zip 67 City State Zip
 107 **----** 127 **----**

38 Make **KEN** 39 Model **-** 40 Color **Wht** 41 Year **200** 42 Plate No. **1176712** 43 State **IN** 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State
 108 **23** 128 **----**

44 VIN **3WKDA48X37F171507** 45 Expires **07/17** 74 VIN 75 Expires
 109 **----** 129 **----**

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 **02** 130 **04**

48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending
 111 **----** 131 **----**

49 Hazardous Material On Board Spill Name or Placard No. 78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.____ % Pending
 112 **01** 132 **26**

50 Carrier No. USDOT Other * 79 Hazardous Material On Board Spill Name or Placard No. 80 Carrier No. USDOT Other *
 113 **----** 133 **06**

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
 114 **11** 134 **41**

52 Carrier name 82 Carrier name
 115 **----** 135 **----**

134 Crash Diagram (NOT TO SCALE) 135 Crash Description **See page #2**
 116 **03** 136 **----**

136 Damage To Other Property
 117 **----** 137 **----**

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.
 118 **----** 138 **----**

141 Officer's Signature **PO Nicholas DeFalco 7298** 142 Badge No. **7298** 143 Reviewed By **5275** Badge No. 144 Case Status Pending Complete
 119 **----** 139 **11**

	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	00					1	04	04			
B														
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>16-55685</u>
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(Refer to vehicle by number)

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A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
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V														
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D														

135 Crash Description

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PO Nicholas DeFalco 7298

7298

New Jersey Police Crash Investigation Report

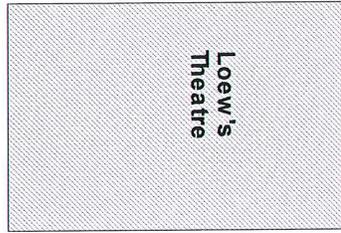
Police Dept. New Brunswick

Code 01

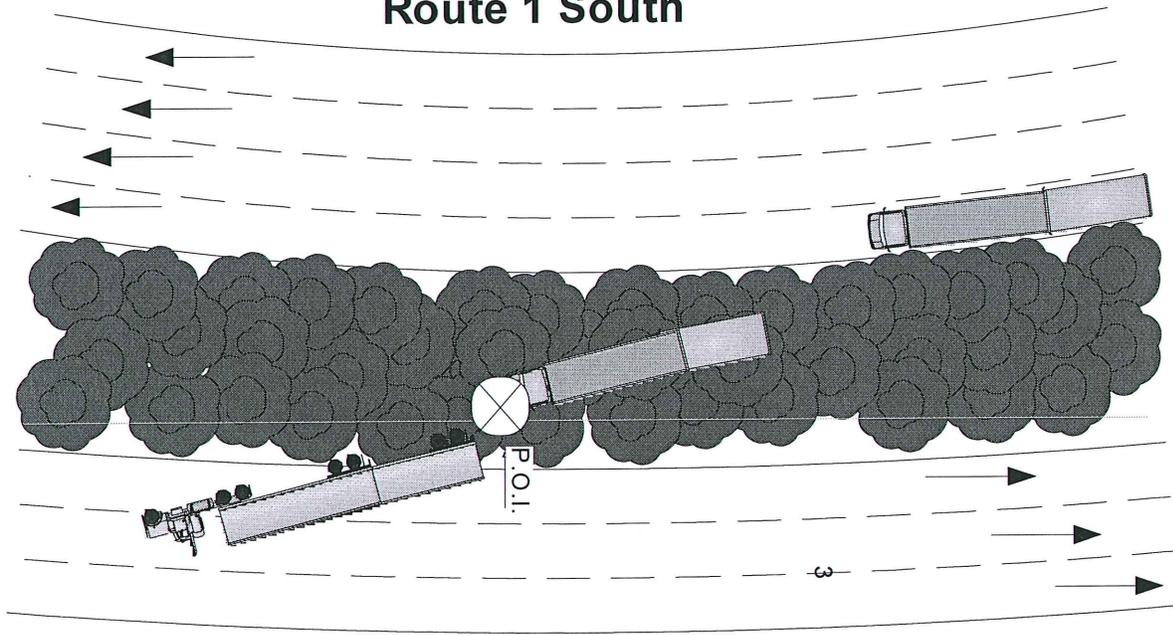
Motor Vehicle Crash Description

Station _____

Case No. 16-55685

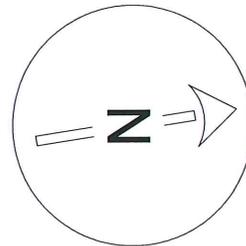


Route 1 South



Route 1 North

Not To Scale



1 Case Number **16-55706** 10 Crash Occurred On **208** Hale Street 11 Speed Limit **25** 118a
 2 Police Dept of **New Brunswick** Code **01** 12 Route No. Suffix 13 Milepost 18 Speed Limit 118b
 3 Station/Precinct **01** 14 At Intersection with Road Name Dir 15 Feet Miles N S E W of : 16 NB EB SB WB 119a

4 Date of Crash **08/26/16** 5 Day of Week **Th** 6 Time (use 2400 hrs) **1721** 7 Municipality Code **1214** 8 Total Killed 9 Total Injured 19 Ramp To: 17 Cross Road Name 20 Route/Name 21 Latitude 22 Longitude 119b

23 Veh No **1** 24 Policy No. **14205487** 25 Ins Code **135** 53 Veh No 54 Policy No. 55 Ins Code 120
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run

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

28 City State Zip 58 City State Zip 122

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 124
 Same As Drive **Nelson** Same As Driver **Torres**

36 Number and Street **212 Hale St Fl 2** 66 Number and Street **10** 125

37 City State Zip **New Brunswick, NJ 08901-2908** 67 City State Zip

38 Make **KIA** 39 Model **SOR** 40 Color **BK** 41 Year **15** 42 Plate No. **S25GNH** 43 State **NJ** 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State

44 VIN **5XYKT4A65FG620193** 45 Expires **05/17** 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 126

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

Results: 0.000 % Pending 79 Hazardous Material Name or Placard No. 128a
 On Board Spill On Board Spill 128b
 128c
 80 Carrier No. USDOT Other * 128d

49 Hazardous Material Name or Placard No. 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 129a
 50 Carrier No. USDOT Other * 82 Carrier name 129b
 129c

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

135 Crash Description **Per R1: V1 was in park with listed occupants, daughter reached from the back seat and accidentally hit the gear box causing the vehicle to lurch forward. V1 then struck the curb and overturned. No injuries were reported and there was no entrapment. V1 was severely damaged and was towed by Guranteed Motors.** 129d
 130 **15** 131 **15**

136 Damage To Other Property 132

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

141 Officer's Signature **PO Branden Salter 7300** 142 Badge No. 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	02	01	----	37	F	----	----	----	00	00	08		Torres, Sarah 06/22/1979	
B	1	03	01	----	12	F	----	----	----	00	00	08			
C	1	03	01	----			----	----	----	00	00	08			
D															
E															

1 Case Number **16-55713** 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 18 Speed Limit **25** 118b **---**
 3 Station/Precinct **50** Feet N E of: **New Street** S W 16 **2** 15 118c **---**

4 Date of Crash **08/26/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **1751** 7 Municipality Code **1214** 8 Total Killed **-** 9 Total Injured **-** 19 Ramp To: 17 Cross Road Name NB EB SB WB 119a **05**
 20 Route/Name 21 Latitude 22 Longitude 119b **02**

23 Veh No **1** 24 Policy No. **PICTX0003730** 25 Ins Code **---** 53 Veh No **2** 54 Policy No. **4035-79-36-96** 55 Ins Code **148** 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 **Otis N Brown** 29 Sex **M** 56 Driver's First Name Initial Last Name **Danielle Yucht** 59 Sex **F** 121 **01**
 27 Number and Street **195 FM 1545 #103** 30 Eyes **---** 57 Number and Street **1 Richmond St Apt 4028** 60 Eyes **2** 122 **---**

28 City State Zip **Three Rivers, Live Oak, TS 78071** 58 City State Zip **New Brunswick, NJ 08901-4109** 123 **---**

31 State 32 Driver's License No mm dd yy **12 27 68** 61 State 62 Driver's License No mm dd yy **02 09 95** 63 DOB mm dd yy 64 Expires mm yy 124 **01**

35 Owner's First Name Initial Last Name Same As Driver **Inc US** 65 Owner's First Name Initial Last Name Same As Driver **Jay Yucht** 125 **11**

36 Number and Street **107 N MCKINNEY ST STE A** 66 Number and Street **21 Dexter Ln** 126 **04**

37 City State Zip **RICHARDSON, TX 75081** 67 City State Zip **Jackson, NJ 08527-3964** 127 **04**

38 Make **PTRB** 39 Model **---** 40 Color **Blu** 41 Year **15** 42 Plate No. **R218499** 43 State **TS** 68 Make **HYU** 69 Model **ELA** 70 Color **GY** 71 Year **02** 72 Plate No. **V34EGJ** 73 State **NJ** 128a **26**

44 VIN **1XPBD49X2FD259335** 45 Expires **/** 74 VIN **KMHDN45D52U354934** 75 Expires **07/17** 128b **---**
 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 **---**

110 **02** 48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 126 **04**
 111 **01** Type: Breath Blood Urine 79 Hazardous Material Name or Placard No. 127 **04**
 112 Results: 0 ___ % Pending 80 Carrier No. USDOT Other * 128a **26**
 113 49 Hazardous Material Name or Placard No. 81 Commercial Vehicle Weight ≤ 10,000 lbs 128b **---**
 114 **03** On Board Spill 82 Carrier name 128c **---**
 115 50 Carrier No. USDOT Other * **2354597** 82 Carrier name 128d **---**
 116 **01** 51 Commercial Vehicle Weight ≤ 10,000 lbs 129a **26**
 10,001 - 26,000 lbs 129b **---**
 ≥ 26,001 lbs 129c **---**
 117 **01** 52 Carrier name **US Rave Inc** 129d **---**

134 Crash Diagram (NOT TO SCALE) **Not To Scale**
 State Route 18 North (local) Veh 1 Veh 2 New Street
 (N →)

35 Crash Description **Vehicle 1 was traveling in the right lane of State Route 18 Northbound (local side), when it was sideswiped by vehicle 2. Vehicle 2 was changing lanes from the left to the right and struck vehicle 1. Vehicle 1 was insured by Praetorian Insurance Company.** 129e **---**

Driver of vehicle 2 stated she was traveling on the left lane of State Route 18 Northbound (local side). She was trying to take the New Street exit and attempted to change to the right lane at which time vehicle 2 sideswiped vehicle 1. 130 **10**

136 Damage To Other Property 131 **10**

Oper. 137 Charge Multiple Charges 138 Summons No. **2** 139 Charge Multiple Charges **Careless driving** 140 Summons No. **Q376981** 132 **02**

141 Officer's Signature **PO Rodney Chiang 7264** 142 Badge No. **7264** 143 Reviewed By **JOHN QUICK** Badge No. **5156** 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	---	47	M	---	---	---	04	04	---	---	Brown, Otis-195 FM 1545 #103, Three Rivers, Live Oak, TS
B	2	01	01	---	21	F	---	---	---	04	04	---	---	Yucht, Danielle-1 Richmond St Apt 4028, New Brunswick, NJ
C														
D														
E														

New Jersey Police Crash Investigation Report

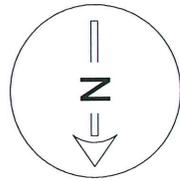
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-55713



State Route 18 North (local)

Veh 1



Veh 2

New Street

Not To Scale

1 Case Number **16-55814** 10 Crash Occurred On: **Seaman Street** 11 Speed Limit **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name **Throop Avenue** Dir **S** 12 Route No. Suffix 13 Milepost **2** 18 Speed Limit **5**

4 Date of Crash **08/26/16** 5 Day of Week **Th** 6 Time (use 2400 hrs) **2359** 7 Municipality Code **1214** 8 Total Killed **0** 9 Total Injured **01**
 14 15 16 19 Ramp To: 17 Cross Road Name NB EB SB WB
 21 Latitude 22 Longitude

23 Veh No 24 Policy No. **8009867** 25 Ins Code **096** 53 Veh No **2** 54 Policy No. **2** 55 Ins Code **2**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name **York** Initial **P** Last Name **Ponce-Deleonhuill** 29 Sex **M** 56 Driver's First Name **Alvarez** Initial **A** Last Name **Alvarez** 59 Sex **M**
 27 Number and Street **342 Suydam St. New Brunswick** 30 Eyes **2** 57 Number and Street **6035 Edmund St. Philadelphia** 60 Eyes **2**

28 City **N.J. 08901** State **N.J.** Zip **08901** 58 City **P.A. 19135** State **P.A.** Zip **19135**

31 State **N.J.** 32 Driver's License No **072682** 33 DOB **07/26/82** 34 Expires **01/17** 61 State **N.J.** 62 Driver's License No **2** 63 DOB **09/16** 64 Expires **09/16**

35 Owner's First Name **Javier** Initial **A** Last Name **Barahona-Ordonez** 65 Owner's First Name **Ferdinand** Initial **A** Last Name **Alvarez**
 Same As Driver Same As Driver

36 Number and Street **145 Farrell St.** 66 Number and Street **6035 Edmund St. Philadelphia**

37 City **Somerset, N.J. 08873** State **N.J.** Zip **08873** 67 City **P.A. 19135** State **P.A.** Zip **19135**

38 Make **Mit** 39 Model **Gal** 40 Color **Slvr** 41 Year **200** 42 Plate No. **B68GES** 43 State **N.J.** 68 Make **Honda** 69 Model **200** 70 Color **JWX5951** 71 Year **PA** 72 Plate No. **PA** 73 State **PA**

44 VIN **44A3AA46G13E184298** 45 Expires **01/17** 74 VIN **5FBRL384X7B018721** 75 Expires **09/16**

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

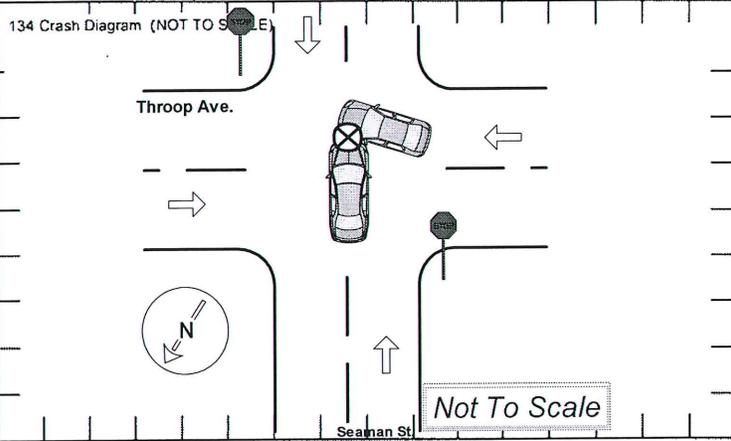
48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.000 % Pending

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: 0.000 % 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

135 Crash Description **See page 2.**

136 Damage To Other Property

Oper. 137 Charge Multiple Charges **Careless Driving** 138 Summons No. **39:4-97** Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Samuel Gomez 7316** 142 Badge No. **7316** 143 Reviewed By **CRADIC/5157** 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	34	M	10	08	2	----	00	----	6102	Ponce-Deleonhuill, York-342 Suydam St. New Brunswick, N.J.
B														
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>16-55814</u>
---	---

(Refer to vehicle by number)

ALL INVOLVED	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
	83	84	85	86	87	88	89	90	91	92	93	94	95	
F														
G														
H														
I														
J														

135 Crash Description

Driver one stated he was driving down Throop Ave. when he was struck on his front driver side by vehicle two. It should be noted that vehicle two had left the scene prior to our arrival. Wallace Brown witnessed the accident and explained that vehicle two didn't make a complete stop at the intersection of Seaman/Throop. Wallace also stated he saw the license plate of vehicle two (PA Registration JWX5951).

It should be noted that Driver one complained of pain on his upper right leg. E.M.S. was called and responded. Driver one was transported to R.W.J.U.H. for treatment. Vehicle one had damages to its front driver side tire, wheel, bumper, and fender. It should also be noted that Ferdinan Alvarez-Guzman was mailed multiple citations which are listed below.

- Failure to report a accident (F16 002439)
- Careless driving (F16 002437)
- Leaving the scene of a accident involving personal injury (F16 002438)
- No liability insurance coverage on motor vehicle (F16 002440)

PO Samuel Gomez 7316

7316

New Jersey Police Crash Investigation Report

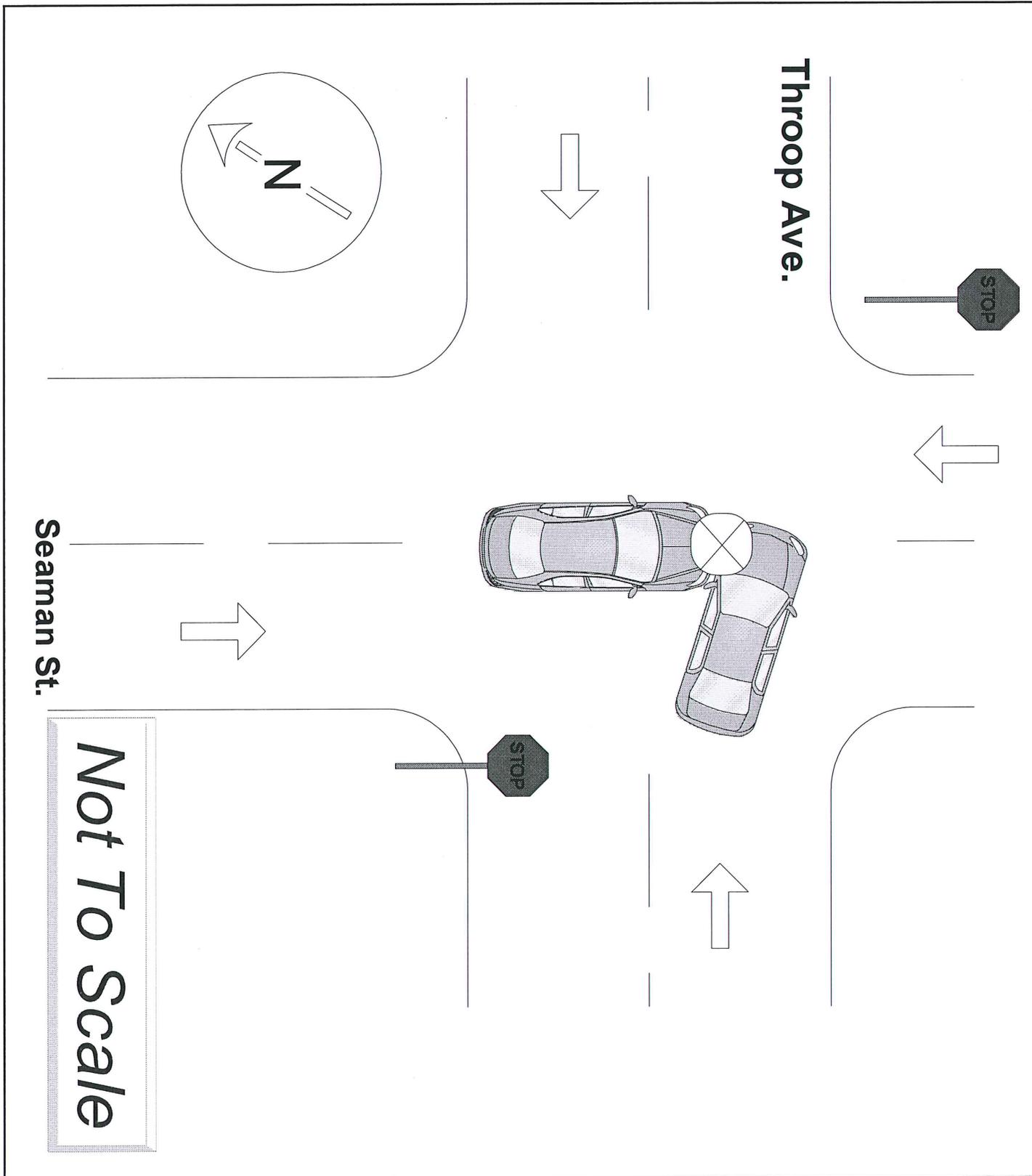
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-55814



96 **04** 1 Case Number **16-55872** 10 Crash Occurred On: **Lee Avenue** 11 Speed Limit **25**
 97 **01** 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name **Lee Avenue** Dir **W** 12 Route No. **01** Suffix **01** 13 Milepost **01** 18 Speed Limit **25**
 98 **00** 3 Station/Precinct **01** Feet N E of: **Juliet Street** S W

99 **07** 4 Date of Crash **08/27/16** 5 Day of Week **Su** 6 Time **07:49** 7 Municipality Code **12114** 8 Total Killed **0** 9 Total Injured **0** 19 To: **07** 17 Cross Road Name **Juliet Street** NB EB
 100 **01** 20 Route/Name **01** SB WB
 21 Latitude **00** 22 Longitude **00**

101 **02** 23 Veh No **1** 24 Policy No. **909656568** 25 Ins Code **054** 53 Veh No **na** 54 Policy No. **na** 55 Ins Code **na**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run

102 **01** 26 Driver's First Name Initial Last Name **Kourtney C Campbell** 29 Sex **F** 56 Driver's First Name Initial Last Name **na na** 59 Sex **na**
 103 **01** 27 Number and Street **319 Lee Ave** 30 Eyes **na** 57 Number and Street **na** 60 Eyes **na**

104 **02** 28 City **New Brunswick, NJ** State **NJ** Zip **08901-3416** 58 City **na** State **na** Zip **na**

105 **02** 31 State **na** 32 Driver's License No **na** 33 DOB **04/28/92** 34 Expires **na** 61 State **na** 62 Driver's License No **na** 63 DOB **na** 64 Expires **na**

35 Owner's First Name Initial Last Name **Glenn Campbell** 65 Owner's First Name Initial Last Name **na N**
 Same As Driver Same As Driver

36 Number and Street **319 Lee Ave** 66 Number and Street **na**

37 City **New Brunswick, NJ** State **NJ** Zip **08901-3416** 67 City **na** State **na** Zip **na**

107 **00** 38 Make **HON** 39 Model **ACC** 40 Color **BK** 41 Year **08** 42 Plate No. **WMZ79F** 43 State **NJ** 68 Make **na** 69 Model **na** 70 Color **na** 71 Year **na** 72 Plate No. **NA** 73 State **na**

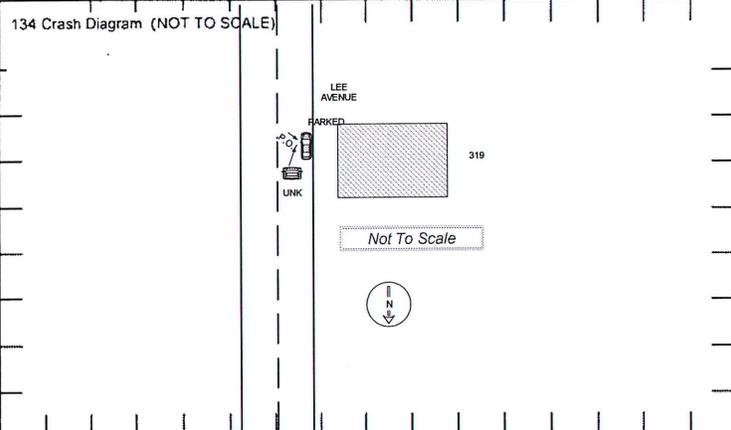
108 **01** 44 VIN **1HGCS12728A008535** 45 Expires **01/17** 74 VIN **na** 75 Expires **na**

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

110 **01** 48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused
 111 **00** Type: Breath Blood Urine 79 Type: Breath Blood Urine
 112 **00** Results: **0** % Pending 79 Results: **0** % Pending

113 **00** 49 Hazardous Material On Board Spill Name or Placard No. **na** 79 Hazardous Material On Board Spill Name or Placard No. **na**
 114 **00** 50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other *

116 **00** 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 **na** 82 Carrier name **na**



135 Crash Description **Disregard DV Report under this case number, generated in error. Please delete DV report only.**

136 Damage To Other Property **na**

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

141 Officer's Signature **PO Anthony Abode 7249** 142 Badge No. **na** 143 Reviewed By **CRADIC/5157** Badge No. **na** 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

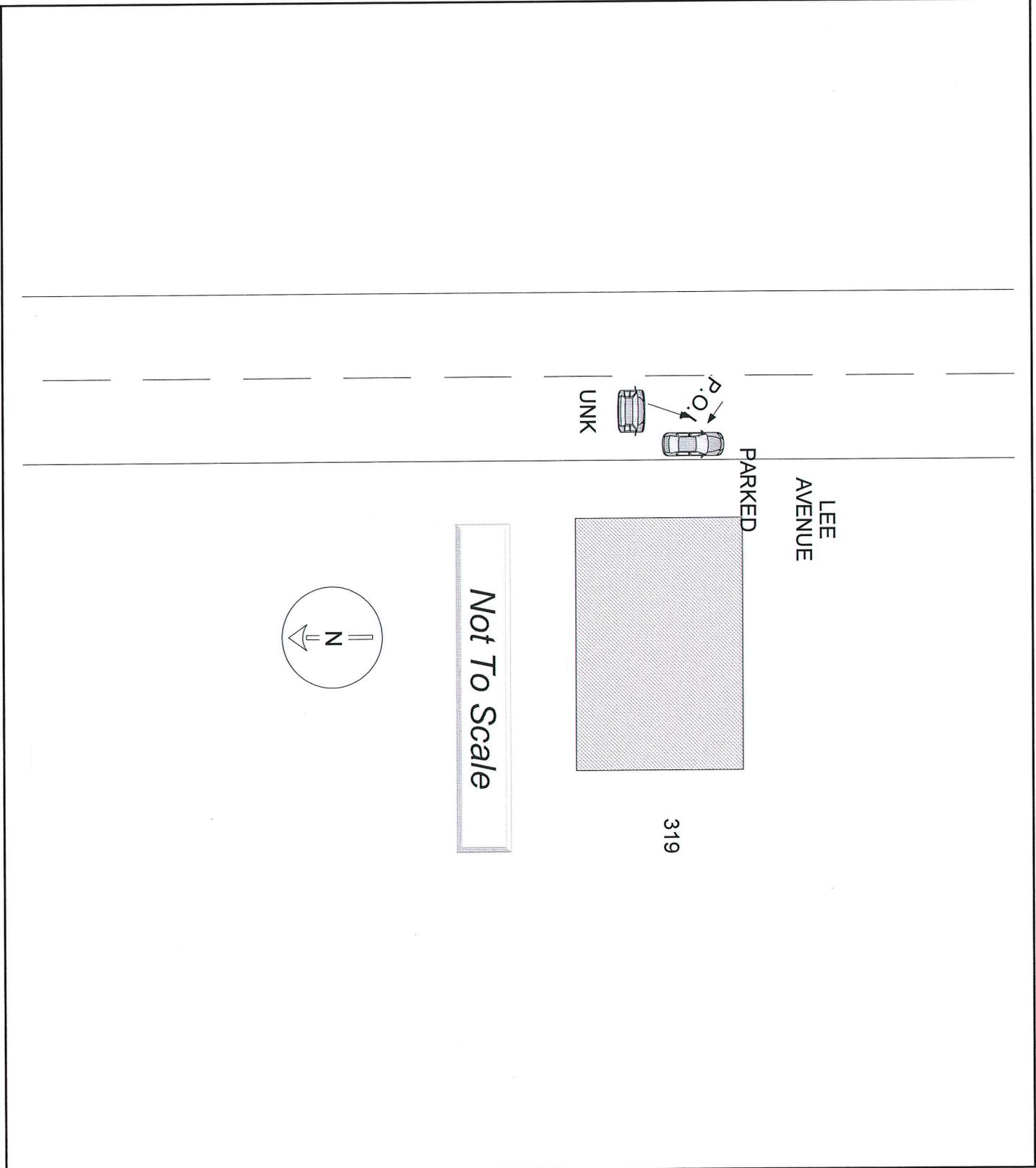
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-55872



96 **04**
 97 **01**
 98 **00**
 99 **07**
 100 **01**
 101 **02**
 102 **01**
 103 **01**
 104 **02**
 105 **02**

1 Case Number **16-55872** 10 Crash Occurred On: **Lee Avenue** 11 Speed Limit **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name **Juliet Street** Dir **E** 12 Route No. Suffix 13 Milepost 18 Speed Limit
 3 Station/Precinct **01** Feet N E S W of: **Juliet Street** 14 15 16 17 Cross Road Name NB EB SB WB

4 Date of Crash **08/27/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **0749** 7 Municipality Code **12114** 8 Total Killed **0** 9 Total Injured **0** 19 Ramp To: From: 20 Route/Name 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **909656568** 25 Ins Code **054** 53 Veh No 54 Policy No. 55 Ins Code
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name **Kourtney** Initial **C** Last Name **Campbell** 29 Sex **F** 56 Driver's First Name **na** Initial Last Name **na** 59 Sex
 27 Number and Street **319 Lee Ave** 30 Eyes **na** 57 Number and Street **na** 60 Eyes

28 City **New Brunswick, NJ** State **NJ** Zip **08901-3416** 58 City **na** State Zip
 31 State 32 Driver's License No 33 DOB **04/28/92** 34 Expires **01/17** 61 State 62 Driver's License No 63 DOB 64 Expires

35 Owner's First Name **Glenn** Initial Last Name **Campbell** 65 Owner's First Name **N** Initial Last Name **N**
 Same As Drive Same As Driver

36 Number and Street **319 Lee Ave** 66 Number and Street **na**
 37 City **New Brunswick, NJ** State **NJ** Zip **08901-3416** 67 City **na** State Zip

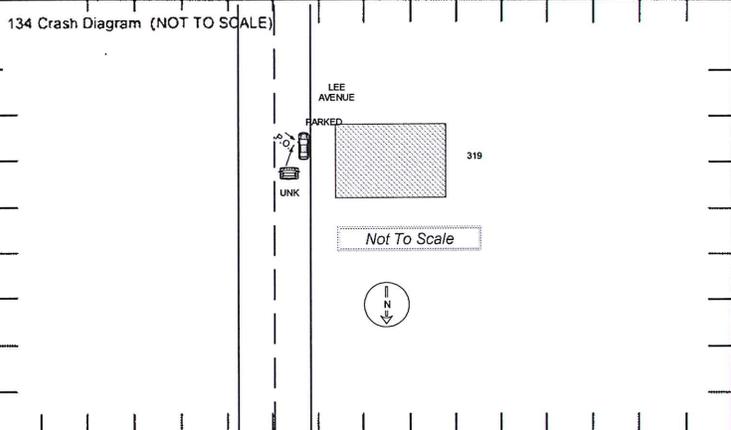
38 Make **HON** 39 Model **ACC** 40 Color **BK** 41 Year **08** 42 Plate No. **WMZ79F** 43 State **NJ** 68 Make 69 Model 70 Color 71 Year 72 Plate No. **NA** 73 State

44 VIN **1HGCS12728A008535** 45 Expires **01/17** 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 Type: Breath Blood Urine
 Results: 0.____ % Pending Results: 0.____ % Pending

49 Hazardous Material On Board Spill Name or Placard No. 79 Hazardous Material On Board Spill Name or Placard No.
 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 **Disregard DV Report under this case number, generated in error. Please delete DV report only.**

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 Abode 7249** 142 Badge No. **CRADIC/5157** 143 Reviewed By **CRADIC/5157** 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

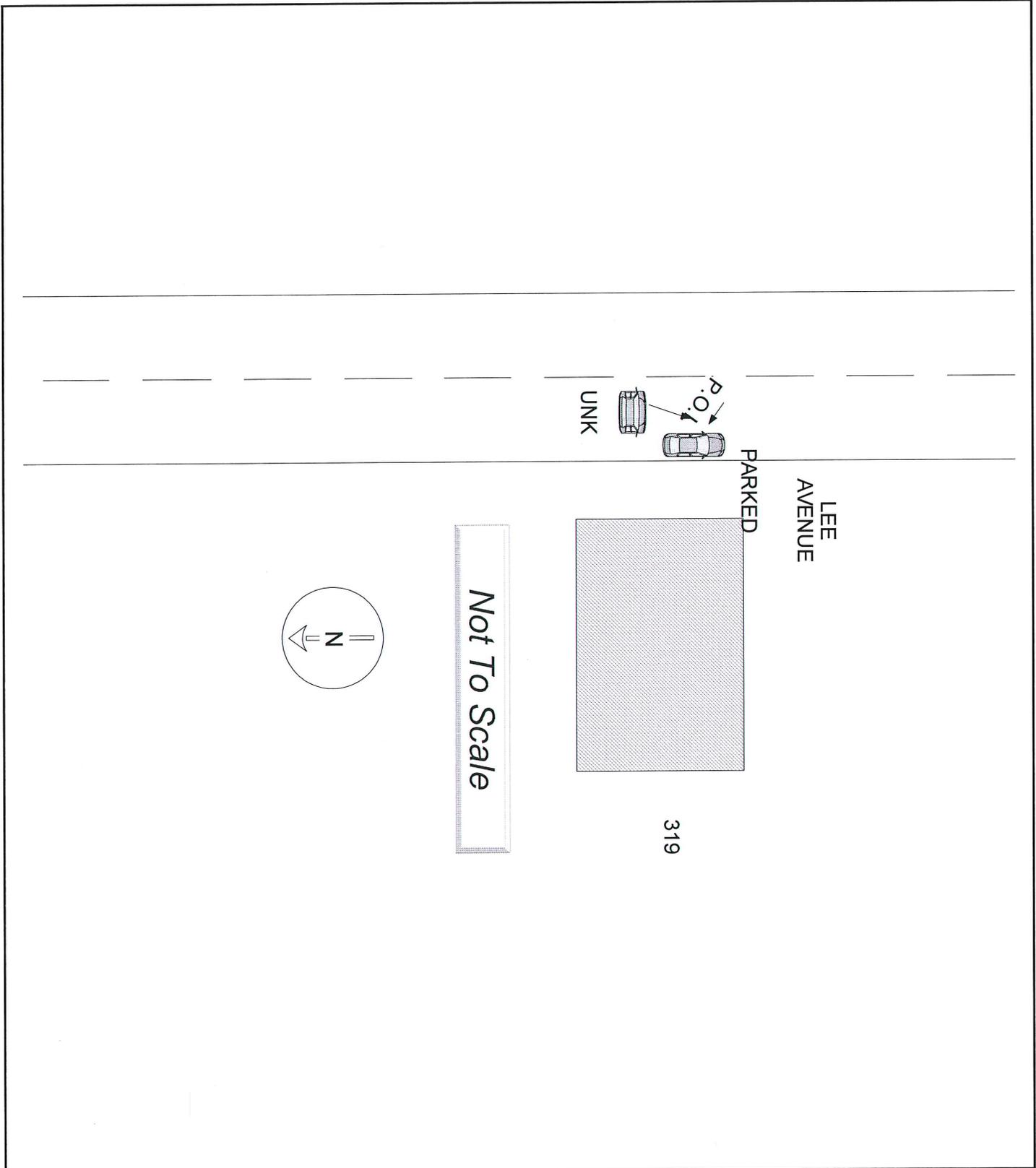
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-55872



1 Case Number **16-55910** 10 Crash Occurred On: **Sandford Street** 11 Speed Limit **2 5** 118a
 2 Police Dept of **New Brunswick** Code **01** At Intersection with **Livingston Avenue** Dir **2 5** 118b
 3 Station/Precinct **01** Feet Miles N E S W of: **Livingston Avenue** 12 Route No. Suffix 13 Milepost **2 5** 118c

4 Date of Crash **08 27 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **12 37** 7 Municipality Code **12 14** 8 Total Killed **0** 9 Total Injured **0** 119a
 19 Ramp To: From: NB EB SB WB 119b
 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **8286663** 25 Ins Code **096** 53 Veh No **2** 54 Policy No. **26344233** 55 Ins Code **134** 120
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121

26 Driver's First Name Initial Last Name **Kasan Caldwell** 29 Sex **M** 56 Driver's First Name Initial Last Name **Johanna Ruiz** 59 Sex **F** 121
 27 Number and Street **316 Smith Street** 30 Eyes **5** 57 Number and Street **42 N Dover Ave** 60 Eyes **1** 122

28 City **Perth Amboy, NJ 08861-4044** State Zip **08861-4044** 58 City **Somerset, NJ 08873-2537** State Zip **08873-2537** 123
 31 State 32 Driver's License No **05 05 86** 33 DOB mm dd yy **05 05 86** 34 Expires mm yy **05 05 86** 61 State 62 Driver's License No **06 08 90** 63 DOB mm dd yy **06 08 90** 64 Expires mm yy **06 08 90** 124

35 Owner's First Name Initial Last Name Same As Driver **Kasan Caldwell** 65 Owner's First Name Initial Last Name Same As Driver **Johanna Ruiz** 125
 36 Number and Street **316 Smith Street** 66 Number and Street **42 N Dover Ave** 126
 37 City **Perth Amboy** State **NJ** Zip **08861** 67 City **Somerset** State **NJ** Zip **08873** 127

38 Make **TOY** 39 Model **4DR** 40 Color **TL** 41 Year **94** 42 Plate No. **V71GET** 43 State **NJ** 68 Make **TOY** 69 Model **4DR** 70 Color **RD** 71 Year **10** 72 Plate No. **B40AMT** 73 State **NJ** 128a
 44 VIN **32T1AE09B5RC075385** 45 Expires **2/17** 74 VIN **1JTDBU4EE8AJ060922** 75 Expires **1/17** 128b
 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

48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 128d
 Type: Breath Blood Urine Type: Breath Blood Urine 129a
 Results: 0.000 % Pending Results: 0.000 % Pending 129b

49 Hazardous Material Name or Placard No. **---** 79 Hazardous Material Name or Placard No. **---** 129c
 On Board Spill On Board Spill 129d
 50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 130
 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 131
 52 Carrier name 82 Carrier name 132

134 Crash Diagram (NOT TO SCALE) 135 Crash Description **N/A** 133
 136 Damage To Other Property **N/A** 134
 137 Charge Multiple Charges **39:3-40** 138 Summons No. **Q 373194** 139 Charge Multiple Charges **---** 140 Summons No. **---** 135
 141 Officer's Signature **PO John Yurkovic Jr. 7252** 142 Badge No. **---** 143 Reviewed By **---** Badge No. **---** 144 Case Status Pending Complete 136

	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	---	30	M	---	---	1	04	04	---	---	Caldwell, Kasan-316 Smith Street, Perth Amboy, NJ 08861
B	2	01	01	---	26	F	---	---	1	04	04	---	---	Ruiz, Johanna-42 N Dover Ave, Somerset, NJ 08873-2537
C	2	04	01	04	8	F	01	08	1	04	04	---	---	GISELLE SUASTEGUI-RUIZ 12/24/07
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>16-55910</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														
L														
I														
N														
V														
O														
L														
V														
E														
D														

135 Crash Description

On the noted date and time, I was dispatched to a motor vehicle accident at Livingston Avenue and Sandford Street.

Upon arrival, I spoke with the driver of vehicle 1. Driver 1 stated he was traveling on Livingston Avenue towards downtown. As he was proceeding through the intersection at Sandford Street, his vehicle was impacted by vehicle 2. Driver 1 advised that vehicle 2 failed to obey the traffic control device. Driver 1 added that Vehicle 2 was following several other vehicles who were driving through the intersection.

I then spoke with Driver 2. Driver 2 advised she was traveling on Sandford Street towards Commercial Avenue. As she was proceeding through the intersection at Sandford Street, her vehicle was impacted by Vehicle 1. Driver 2 stated she had the green light and vehicle 1 failed to obey the traffic control device.

Based on where the accident occurred in the intersection, Driver 1 is at fault for the crash. Vehicle 2 crossed over 2 lanes of southbound Livingston Avenue traffic prior to impact occurring with vehicle 1. There are cameras in the area but they were not able to be reviewed at this time.

PO John Yurkovic Jr. 7252

1 Case Number **16-55930** 10 Crash Occurred On: Suydam Street 11 Speed Limit 25
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name Throop Avenue Dir 12 Route No. Suffix 13 Milepost 18 Speed Limit
 3 Station/Precinct 14 15 19 To: 17 Cross Road Name NB EB SB WB

4 Date of Crash mm 08 dd 27 yy 16 5 Day of Week 6 Time (use 2400 hrs) 15 56 7 Municipality Code 1214 8 Total Killed 9 Total Injured 20 Route/Name 21 Latitude 22 Longitude

23 Veh No 1 24 Policy No. 4042633830 25 Ins Code 945 53 Veh No 2 54 Policy No. 17407072 55 Ins Code 135
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name Initial Last Name Sheka Bangura 28 Sex M 56 Driver's First Name Initial Last Name Manuel Gonzalez 59 Sex M
 27 Number and Street 4a Henery St. 30 Eyes 2 57 Number and Street 433 Lawrie St 60 Eyes

28 City Somerset, NJ 08873-2608 State Zip 58 City Perth Amboy, NJ 08861-3129 State Zip

31 State 32 Driver's License No 33 DOB mm dd yy 03 14 53 34 Expires mm yy 61 State 62 Driver's License No 63 DOB mm dd yy 04 23 63 64 Expires mm yy

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

36 Number and Street 4a Henry St 66 Number and Street
 37 City Somerset, NJ 08873-2608 State Zip 67 City State Zip

38 Make INF 39 Model 135 40 Color BG 41 Year 02 42 Plate No. B81FNK 43 State NJ 68 Make BMW 69 Model 325 70 Color RED 71 Year 05 72 Plate No. U52GVE 73 State NJ

44 VIN JNKDA31AX2T006539 45 Expires 06/17 74 VIN WBAEV33405KX12430 75 Expires 08/17

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 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

134 Crash Diagram (NOT TO SCALE)

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

135 Crash Description D#1 was traveling west o Suydam Street. V#2 was making a left turn onto Throop Ave. from Suydam St. D#2 was apologetic at the scene after D#1 stated that V#2 just cut in front of V#1. P#1 stated that her chest and right thumb was sore. P#1 refused medical attention. Dependable Motors arrived and towed V#1.

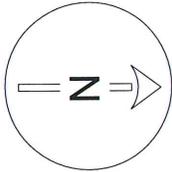
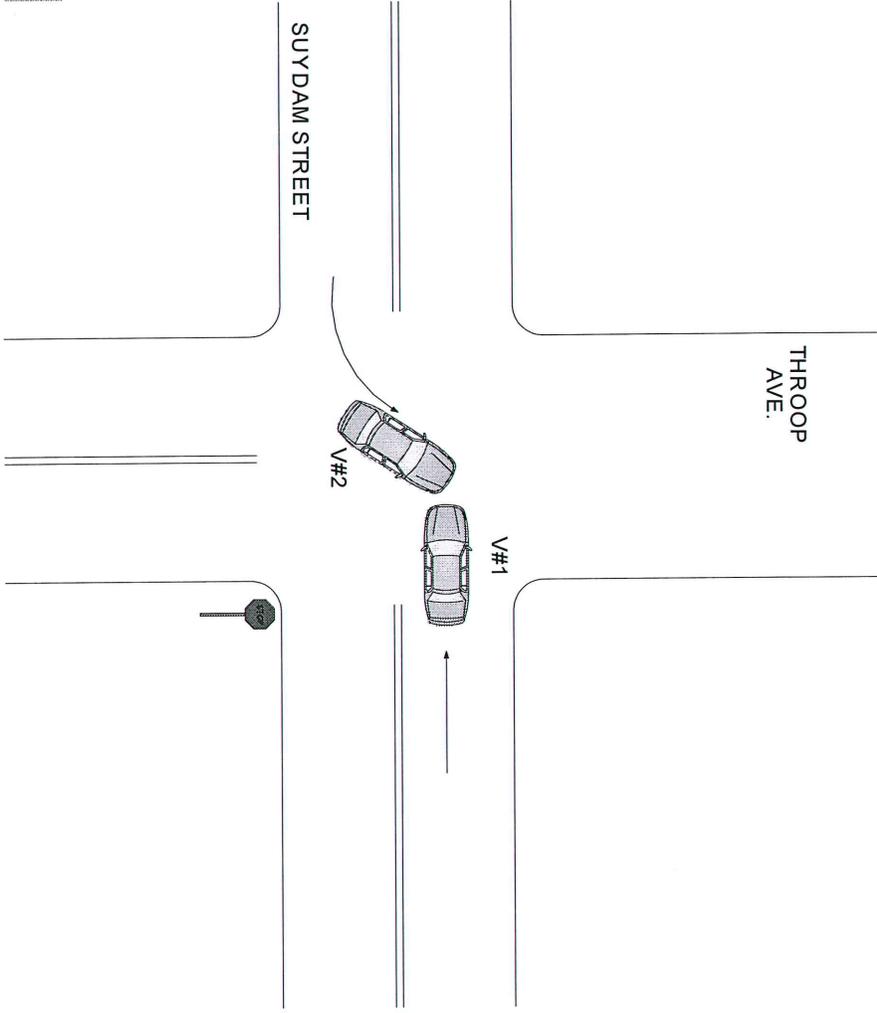
136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.
 141 Officer's Signature PO James Hayes 7200 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	----	----	63	M	----	----	----	09	04	----	----	Bangura, Sheka-4a Henery St., Somerset, NJ 08873-2608
B	1	03	----	04	58	F	05	08	1	09	04	----	----	Christie, Sidon-4a Henry St, Somerset, NJ 08873-2608
C	2	01	----	----	53	M	----	----	----	09	04	----	----	Gonzalez, Manuel-433 Lawrie St, Perth Amboy, NJ 08861
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>16-55930</u>

Not To Scale



PO James Hayes 7200
Officer's Signature

Badge Number

1 Case Number **16-55931** 10 Crash Occurred On 2 **Albany Street** 11 Speed Limit 2 5 118a **02**
 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 Miles N E S W of: 17 Cross Road Name 18 Speed Limit

4 Date of Crash **08/27/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **15 59** 7 Municipality Code **1214** 8 Total Killed **0** 9 Total Injured **0** 19 Ramp To: From: NB EB SB WB 119a **25**
 20 Route/Name 21 Latitude 22 Longitude 119b

23 Veh No **1** 24 Policy No. **4303675500** 25 Ins Code **148** 53 Veh No **2** 54 Policy No. **CA7742138** 55 Ins Code **228** 120 **01**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name Initial Last Name **Kevin Bijas** 29 Sex **M** 56 Driver's First Name Initial Last Name **James Banaciski** 59 Sex **M** 121 **01**
 27 Number and Street **33 LAMBIANCE ST** 30 Eyes **4** 57 Number and Street **168 Johnson PI** 60 Eyes **4**

28 City **HIGHLAND PARK, NJ 08904** State Zip 58 City **South River, NJ 08882-2326** State Zip 122
 31 State 32 Driver's License No 33 DOB **07 05 85** 34 Expires **mm yy** 61 State 62 Driver's License No 63 DOB **05 11 67** 64 Expires **mm yy** 123

35 Owner's First Name Initial Last Name **VW CREDIT LEASING LTD** 65 Owner's First Name Initial Last Name **VERIZON** 124 **01**
 Same As Driver Same As Driver

36 Number and Street **1401 FRANKLIN BLVD** 66 Number and Street **Po Box 612744** 125 **08**
 37 City **LIBERTYVILLE, IL 60048** State Zip 67 City **Dallas, TX 75261** State Zip

38 Make **AUD** 39 Model **A4** 40 Color **GY** 41 Year **16** 42 Plate No. **E43FYK** 43 State **NJ** 68 Make **CHE** 69 Model **P-UP** 70 Color **WH** 71 Year **10** 72 Plate No. **XV106X** 73 State **NJ**

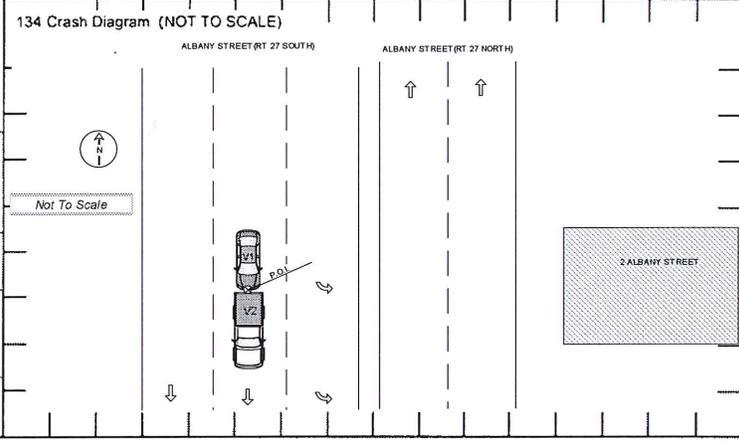
44 VIN **WAUFFAFL6GN008453** 45 Expires **10/19** 74 VIN **3GCXCUEJ2AG263103** 75 Expires **9/16** 126 **03**

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**

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

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

50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 129a **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
 134 Crash Diagram (NOT TO SCALE) 

135 Crash Description **Both vehicles were traveling in the middle lane on Albany Street. While in the area of 2 Albany Street, Vehicle 2 stopped for a red traffic signal at Albany/Neilson. While stopped in traffic, his vehicle was impacted from the rear by Vehicle 1. Driver 1 stated he was slowing down for the red traffic signal when he dropped his can of soda. He took his eyes off the road in order to retrieve the can. As he was slowing down, his vehicle struck vehicle 2 from the rear. No injuries and both vehicles sustained minor damage.** 129d
 130 **12**
 131 **12**

136 Damage To Other Property **N/A** 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 John Yurkovic Jr. 7252** 142 Badge No. 143 Reviewed By Pending Complete 144 Case Status

	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	----	31	M	----	----	1	04	04	----	----	Bijas, Kevin-33 LAMBIANCE CT HIGHLAND PARK, NJ 08904
B	2	01	01	----	49	M	----	----	1	04	04	----	----	Banaciski, James-168 Johnson PI, South River, NJ 08882
C														
D														
E														

New Jersey Police Crash Investigation Report

Police Dept. New Brunswick

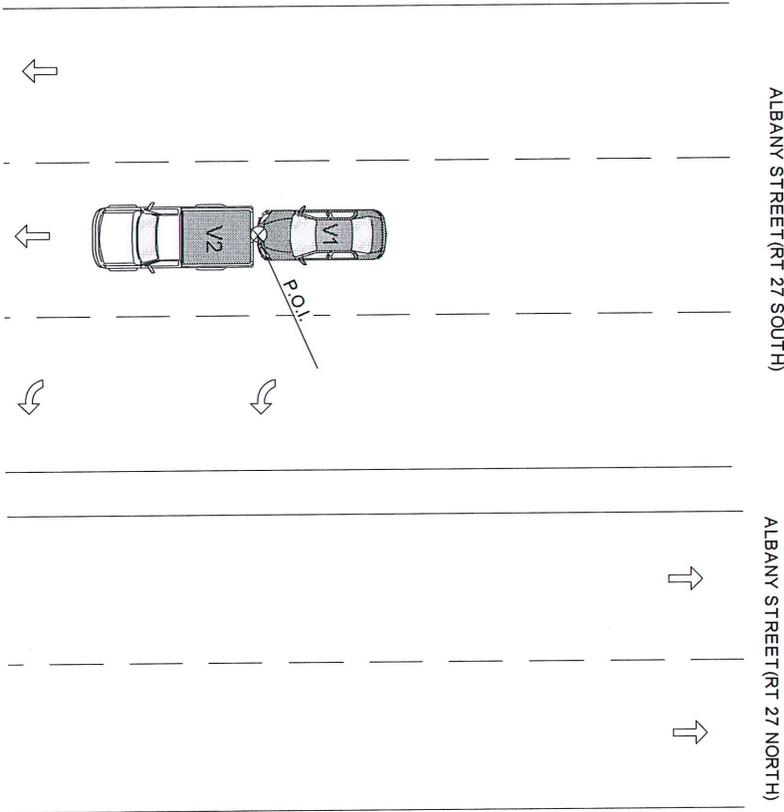
Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-55931

Not To Scale



2 ALBANY STREET

1 Case Number **16-55935** 10 Crash Occurred On: **Ninth Street** 11 Speed Limit **25**
 2 Police Dept of **New Brunswick** Code **01** At Intersection with Road Name **Livingston Avenue** Dir **W** 12 Route No. Suffix 13 Milepost **25**
 3 Station/Precinct **01** Feet N E of: S W

4 Date of Crash **08/27/16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **1624** 7 Municipality Code **1214** 8 Total Killed **0** 9 Total Injured **0**
 14 **15** 16 **16** 19 Ramp To: From: 17 Cross Road Name 20 Route/Name 21 Latitude 22 Longitude

23 Veh No **1** 24 Policy No. **906291880** 25 Ins Code **135** 53 Veh No **2** 54 Policy No. **4448-76-16-94** 55 Ins Code **100**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name **Angel** Initial **A** Last Name **Carrasco** 28 Sex **M** 56 Driver's First Name **Albert** Initial **A** Last Name **Chavez** 59 Sex **M**
 27 Number and Street **14 8th Street** 30 Eyes **2** 57 Number and Street **1024 Newton St** 60 Eyes **2**

28 City **New Brunswick, NJ** State **NJ** Zip **08901-3302** 58 City **No. Brunswick, NJ** State **NJ** Zip **08902-2216**
 31 State 32 Driver's License No 33 DOB **03/13/95** 34 Expires **03/13/95** 61 State 62 Driver's License No 63 DOB **05/31/96** 64 Expires **05/31/96**

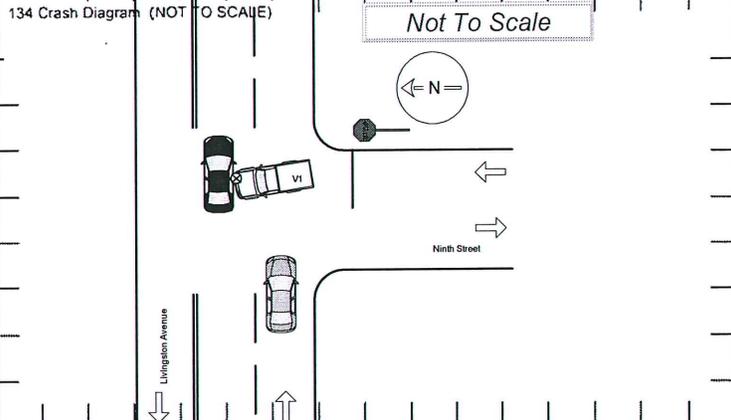
35 Owner's First Name **Same As Driver** Initial Last Name 65 Owner's First Name **Same As Driver** Initial Last Name
 36 Number and Street 66 Number and Street

37 City State Zip 67 City State Zip

38 Make **TOY** 39 Model **TAC** 40 Color **WT** 41 Year **16** 42 Plate No. **Z12GWF** 43 State **NJ** 68 Make **HON** 69 Model **CIV** 70 Color **BLK** 71 Year **02** 72 Plate No. **M39GWE** 73 State **NJ**

44 VIN **5TFRX5GNXGX070527** 45 Expires **07/20** 74 VIN **2HGES16512H506283** 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

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

49 Hazardous Material On Board Spill Name or Placard No. 78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0.00% Pending
 79 Hazardous Material On Board Spill Name or Placard No.

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 **See page 2.**

136 Damage To Other Property **N/A**
 Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **PO Richard Reed 7335** 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	----	21	M	----	----	1	04	04	----	----	Carrasco, Angel-14 8th Street, New Brunswick, NJ 08901
B	2	01	01	----	20	M	----	----	1	04	04	----	----	Chavez, Albert-1024 Newton St, No. Brunswick, NJ 08902
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>16-55935</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														
L														
I														
N														
V														
O														
L														
V														
E														
J														

135 Crash Description

On 8/27/16 at 16:24, PO Puccio and I (PO Reed) responded to Livingston Avenue and Ninth Street for reported motor vehicle accident.

Upon talking with the driver of V1 and the driver of V2, both had no complaints of pain and refused medical attention. V1 was traveling north on Ninth Street and was attempting to make a left turn onto Livingston Avenue when colliding with V2. V1 had damage to the front bumper and and V2 had damage to the passenger side door.

Both parties involved were given a case number for the incident and explained how to obtain a copy of the report.

PO Richard Reed 7335

PO Richard Reed 7335

New Jersey Police Crash Investigation Report

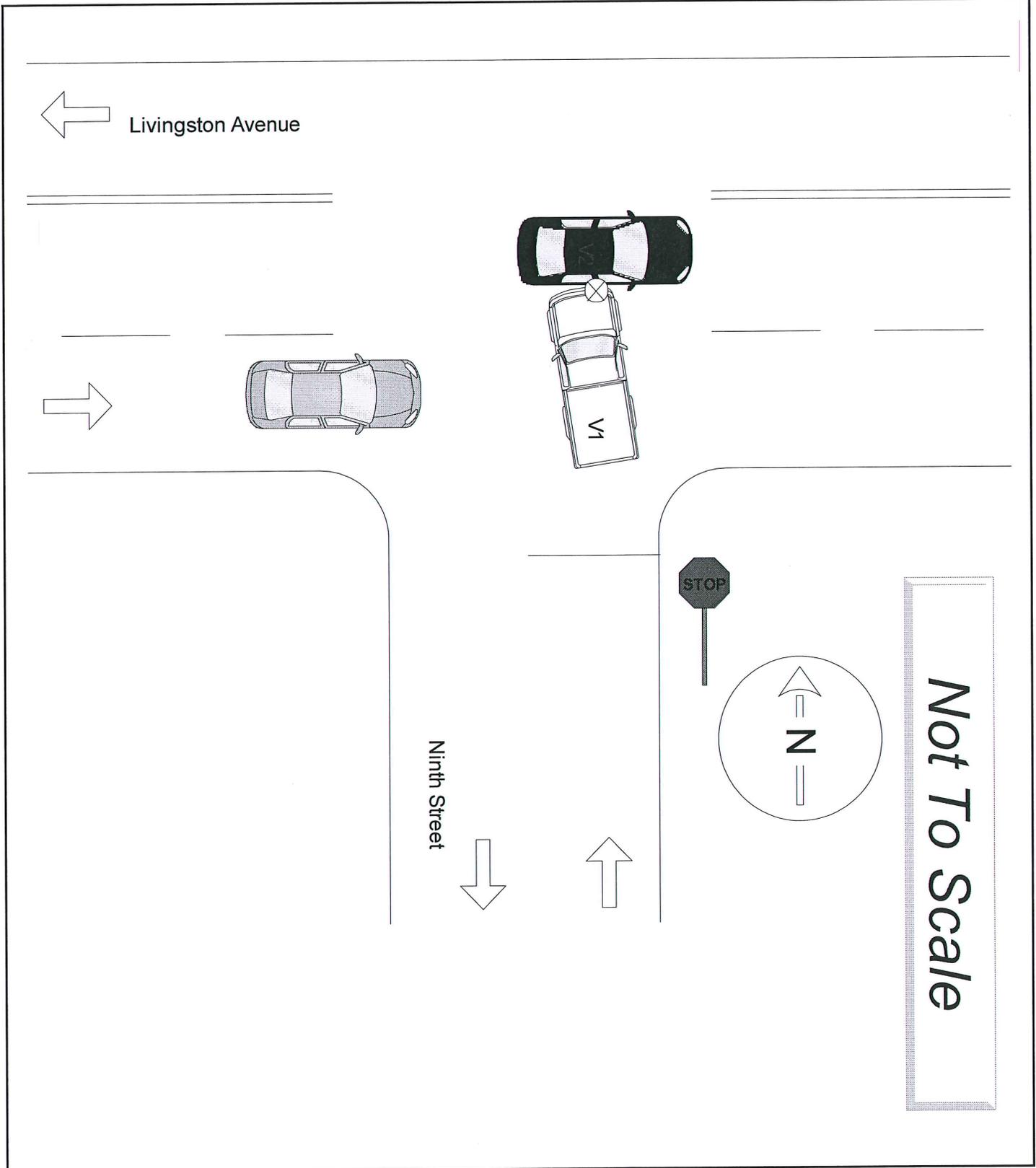
Police Dept. New Brunswick

Code 0 1

Motor Vehicle Crash Description

Station _____

Case No. 16-55935



1 Case Number **16-56022** 10 Crash Occurred On **34 US Highway 1 NB** 11 Speed Limit **5 0** 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
 3 Station/Precinct **01** Feet N E of : S W

4 Date of Crash **08 27 16** 5 Day of Week **Su** 6 Time (use 2400 hrs) **23 11** 7 Municipality Code **12 14** 8 Total Killed **0** 9 Total Injured **0** 19 To: 17 Cross Road Name NB EB SB WB 25
 20 Route/Name 21 Latitude 22 Longitude 119b

23 Veh No **1** 24 Policy No. **191201064** 25 Ins Code **003** 53 Veh No **2** 54 Policy No. **4114790761** 55 Ins Code **148** 120
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 01

26 Driver's First Name **Martin** Initial **C** Last Name **CASTRILLON** 29 Sex **M** 56 Driver's First Name **Radhika** Initial **C** Last Name **Chanda** 59 Sex **F** 121
 27 Number and Street **33 Rankin St** 30 Eyes **2** 57 Number and Street **1621 Village Dr** 60 Eyes **1** 01

28 City **Elizabeth, NJ** State **NJ** Zip **07206-1118** 58 City **Avenel, NJ** State **NJ** Zip **07001-1045**

31 State **02** 32 Driver's License No **05 28 91** 33 DOB **05 28 91** 34 Expires **mm yy** 61 State **02** 62 Driver's License No **01 22 82** 63 DOB **01 22 82** 64 Expires **mm yy** 122

35 Owner's First Name **CASTRILLION-SANCHE** Initial **C** Last Name **CASTRILLION-** 65 Owner's First Name **Srikanth** Initial **S** Last Name **Arra** 123
 Same As Driver Same As Driver

36 Number and Street **33 RANKIN STREET** 66 Number and Street **1621 Village Dr** 124
 37 City **ELIZABETH NJ** State **NJ** Zip **07206** 67 City **Avenel, NJ** State **NJ** Zip **07001-1045** 125
 02 01

38 Make **HON** 39 Model **CIV** 40 Color **RD** 41 Year **201** 42 Plate No **V20GKE** 43 State **NJ** 68 Make **TOY** 69 Model **CAM** 70 Color **BL** 71 Year **201** 72 Plate No **S48BZH** 73 State **NJ**

44 VIN **2HGFC2F51GH538262** 45 Expires **03/19** 74 VIN **4T1BF3EK2AU541821** 75 Expires

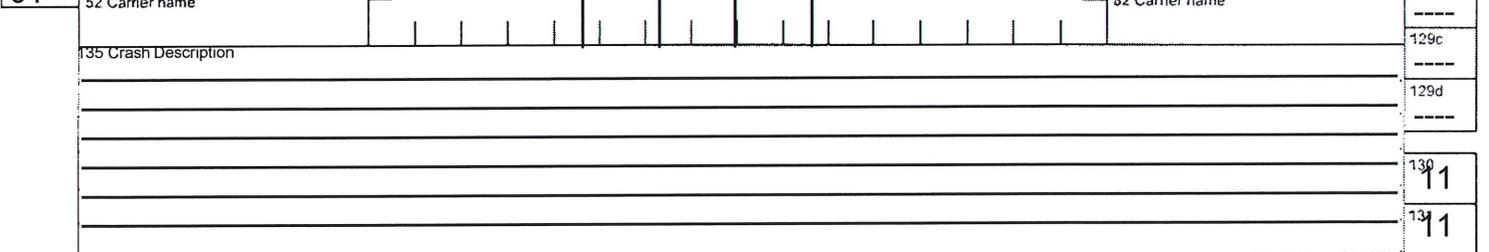
46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 126

48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 127
 Type: Breath Blood Urine Type: Breath Blood Urine 04
 Results: 0.000 % Pending Results: 0.000 % Pending 128a

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

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 129a
 52 Carrier name 82 Carrier name 129b



136 Damage To Other Property **N/A** 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No. 130
 03

141 Officer's Signature **PO Justin Miller 7338** 142 Badge No. 143 Reviewed By **Justin Miller** Badge No. 144 Case Status Pending Complete 132
 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	----	25	M	----	----	1	09	09	----	----	Castrillon, Martin-33 Rankin St, Elizabeth, NJ 07206-1118
B	2	01	01	----	34	F	----	----	1	09	09	----	----	Chanda, Radhika-1621 Village Dr, Avenel, NJ 07001-1045
C	2	03	01	----	38	M	----	----	1	09	09	----	----	Arra, Srikanth-1621 Village Dr, Avenel, NJ 07001-1045
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>16-56022</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 L L I N V O L V E D	83	84	85	86	87	88	89	90	91	92	93	94	95	
F														
G														
H														
I														
J														

135 Crash Description

On 8/27/2016 Officer Riepenhoff and I were dispatched to Route 1 northbound in front of the Exxon gas station for a motor vehicle accident.

Upon arrival we met with driver one Martin Castrillion and driver two Chanda, Radhika. Castrillion stated he was switching lanes and did not see vehicle two. Castrillion advised us vehicle two was in his blind spot and he side swiped the vehicle. Radhika stated she was driving in the middle lane when vehicle one struck her vehicle.

Vehicle one has damage on the front driver side fender and bumper. Vehicle two has damage to the passenger side of the vehicle. All parties involved in the crash stated they were uninjured and they refused medical treatment. We informed Radhika and Castillion a police report will be filed. They had no further questions for us.

P O Miller 7338

PO Justin Miller 7338

Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

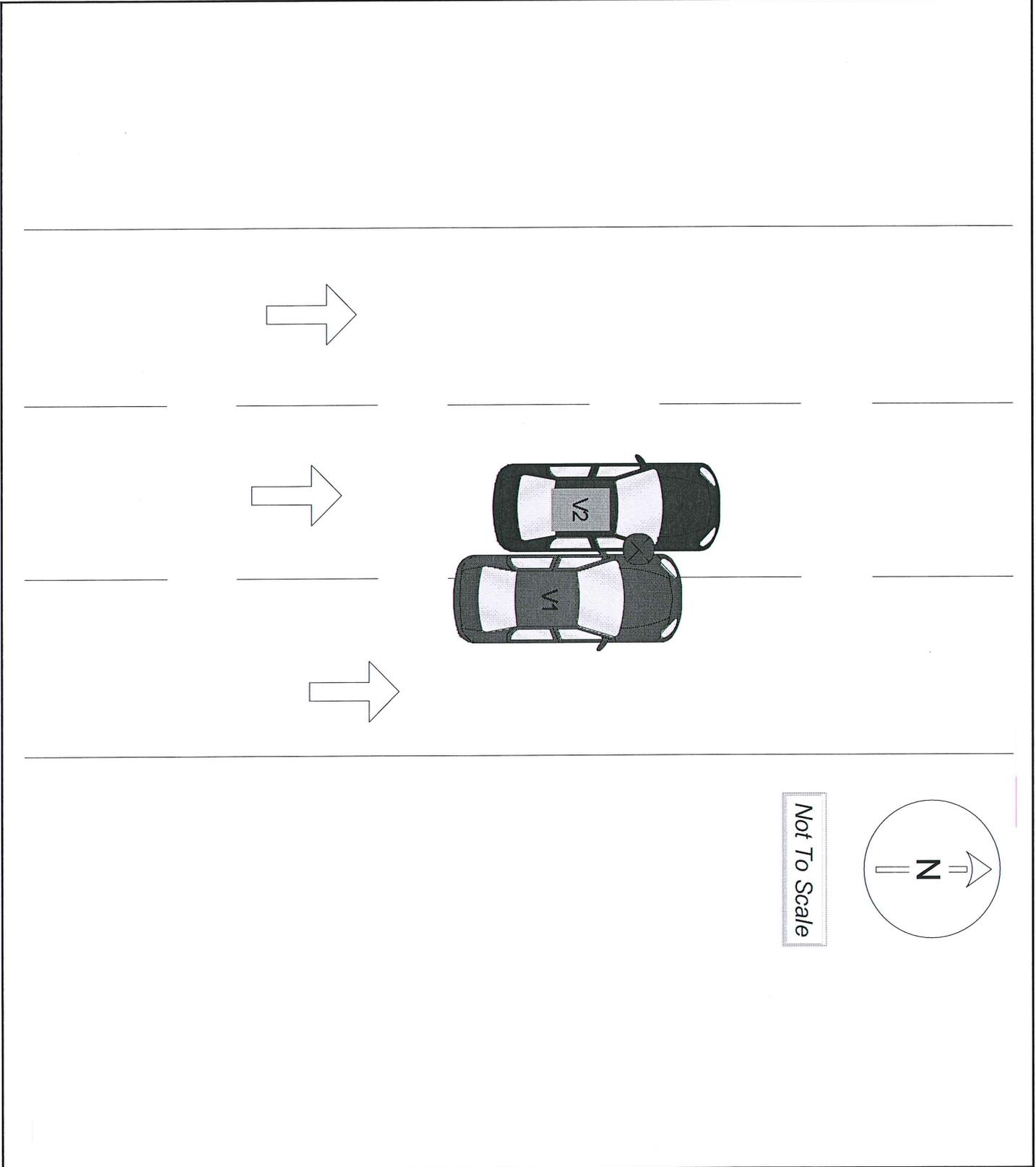
Police Dept. New Brunswick

Code 01

Motor Vehicle Crash Description

Station _____

Case No. 16-56022



1 Case Number **16-56173** 10 Crash Occurred On **45** **Morrell Street** 11 Speed Limit **5** 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 : S W 18 Speed Limit **----**

4 Date of Crash **08/28/16** 5 Day of Week **Q** 6 Time (use 2400 hrs) **13 40** 7 Municipality Code **1214** 8 Total Killed **0** 9 Total Injured **0** 19 To: 17 Cross Road Name NB EB SB WB 25
 20 Route/Name 21 Latitude 22 Longitude 119a
 119b

23 Veh No **1** 24 Policy No. **4321660013** 25 Ins Code **148** 53 Veh No **2** 54 Policy No. **9702250150** 55 Ins Code **945** 120
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run Parked Ped Pedalcyclist Resp to Emergency Hit & Run 121
 26 Driver's First Name Initial Last Name 29 Sex **F** 56 Driver's First Name Initial Last Name 59 Sex **----**

27 Number and Street **26 PITTENGER RD THREE BRIDGES** 30 Eyes **5** 57 Number and Street 60 Eyes **----**
 28 City State Zip 58 City State Zip

31 State 32 Driver's License No 33 DOB **03 07 96** 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 **TOKE** 65 Owner's First Name Initial Last Name **FENG** 123
 Same As Driver Same As Driver

36 Number and Street **26 PITTENGER RD THREE BRIDGES, NJ** 66 Number and Street **30 HOLECOMB DR** 124
 37 City State Zip **08887** 67 City State Zip **HILLSBOROUGH, NJ 08844** 125

38 Make **TOY** 39 Model **4DR** 40 Color **SL** 41 Year **09** 42 Plate No. **E18CUJ** 43 State **NJ** 68 Make **HON** 69 Model **ACC** 70 Color **BLK** 71 Year **15** 72 Plate No. **A75FHZ** 73 State **NJ** 107
 44 VIN **1JTMBK31V09D002948** 45 Expires **12/16** 74 VIN **1HGCR3F86FA028245** 75 Expires **5/19** 108
 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 109

48 Alcohol/Drug Test Given: No Yes Refused 78 Alcohol/Drug Test Given: No Yes Refused 111
 Type: Breath Blood Urine 112
 Results: 0.____ % Pending 113
 49 Hazardous Material Name or Placard No. 79 Hazardous Material Name or Placard No. 126
 On Board Spill On Board Spill 127
 50 Carrier No. USDOT Other * 80 Carrier No. USDOT Other * 128a
 51 Commercial Vehicle Weight ≤ 10,000 lbs 81 Commercial Vehicle Weight ≤ 10,000 lbs 128b
 10,001 - 26,000 lbs 10,001 - 26,000 lbs 128c
 ≥ 26,001 lbs ≥ 26,001 lbs 128d
 52 Carrier name 82 Carrier name 129a
 129b
 129c
 129d

135 Crash Description **Driver 1 advised that she accidentally struck a parked vehicle while backing her vehicle up in the rear of 45 Morrell Street. Damage to both vehicles was minor and driver 1 did not complain of any injuries. Vehicle 2 was parked and unoccupied at the time of the crash.**

136 Damage To Other Property **N/A** 130
 137 Charge Multiple Charges 138 Summons No. 139 Charge Multiple Charges 140 Summons No. 131
 141 Officer's Signature **PO John Yurkovic Jr. 7252** 142 Badge No. 143 Reviewed By Badge No. 144 Case Status Pending Complete 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	1	01	01	----	20	F	----	----	1	04	04	----	----	TOKE, NATALIE H-26 PITTENGER RD THREE BRIDGES, NJ
B														
C														
D														
E														

