Page 1 of 4 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 04 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02 | 102 01 | 103 01 | 104 04 | 105 06 | 106 ---- | 107 ---- | 108 01 | 109 01 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 04 | 117 04

1 Case Number: 16-43479

2 Police Dept of: New Brunswick — Code: 01

3 Station/Precinct:

10 Crash Occurred On: 106 Louis Street — Road Name — Dir

11 Speed Limit: 2 5

☐ At Intersection with ☐ Feet ☐ Miles — 14 — 15 — ☐ N ☐ E ☐ S ☐ W — 16 — of:

12 Route No. — Suffix — 13 Milepost — 18 Speed Limit

17 Cross Road Name

19 ☐ To: Ramp ☐ From: — 20 Route/Name — ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude — 22 Longitude

4 Date of Crash (mm dd yy): 07 04 16 — 5 Day of Week: Su M Tu W Th F Sa — 6 Time (use 2400 hrs): 14 49 — 7 Municipality Code: 1 2 1 4 — 8 Total Killed: 0 0 — 9 Total Injured: 0 0

118a 25 | 118b 25 | 119a 25 | 119b 25 | 120 01 | 121 01 | 122 ---- | 123 ---- | 124 10 | 125 10 | 126 11 | 127 11 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 26 | 129b ---- | 129c ---- | 129d ---- | 130 09 | 131 09 | 132 09 | 133 09

Vehicle 1

23 Veh No: 1 — 24 Policy No.: 4438065221 — 25 Ins Code: 639

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name — Initial — Last Name — 29 Sex

27 Number and Street — 30 Eyes

28 City — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy) — 34 Expires (mm yy)

35 Owner's First Name — Initial — Last Name

☐ Same As Driver: Julia — Nand

36 Number and Street: 853 Norton Church Road

37 City: Hampton, NJ 08827-2551 — State — Zip

38 Make: TOY — 39 Model: COR — 40 Color: GY — 41 Year: 13 — 42 Plate No.: P64GAX — 43 State: NJ

44 VIN: JTDBU4EE3DJ118519 — 45 Expires: 11/16

46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — 47 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

Vehicle 2

53 Veh No: 2 — 54 Policy No.: 00 — 55 Ins Code: 00

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name — Initial — Last Name — 59 Sex

57 Number and Street — 60 Eyes

58 City — State — Zip

61 State — 62 Driver's License No — 63 DOB (mm dd yy) — 64 Expires (mm yy)

65 Owner's First Name — Initial — Last Name

☐ Same As Driver: DOROTHY — OJINNAKA

66 Number and Street: 121 Pearl Pl.

67 City: Dunellen NJ 08812 — State — Zip

68 Make: Toyota — 69 Model: cor — 70 Color: Slv — 71 Year: 201 — 72 Plate No.: L91DDD — 73 State: NJ

74 VIN: 1NXBU4EE8AZ359093 — 75 Expires: /8/16

76 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — 77 Authority: ☐ Owner ☐ Driver ☒ Police

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

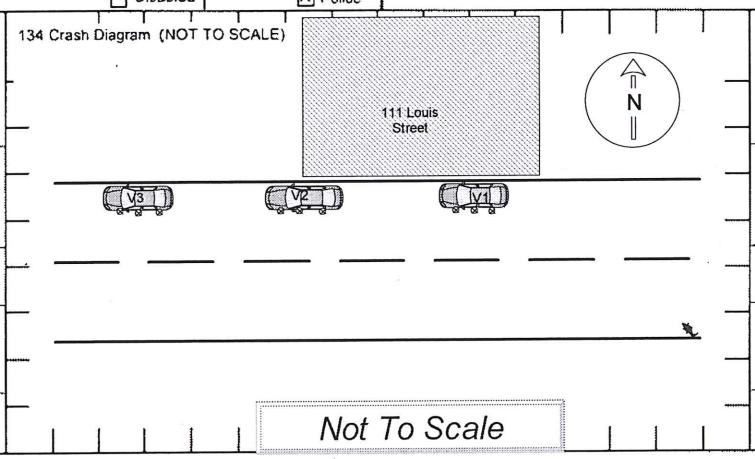
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

Vehicle 4 was traveling on Louis St. towards Central Ave. in the area of 111 Louis St. when it consecutively sideswiped Vehicles 1, 2 and 3 which were all parked and unoccupied. I observed sideswiped red paint left over from Vehicle 4 on Vehicles 1 and 2.

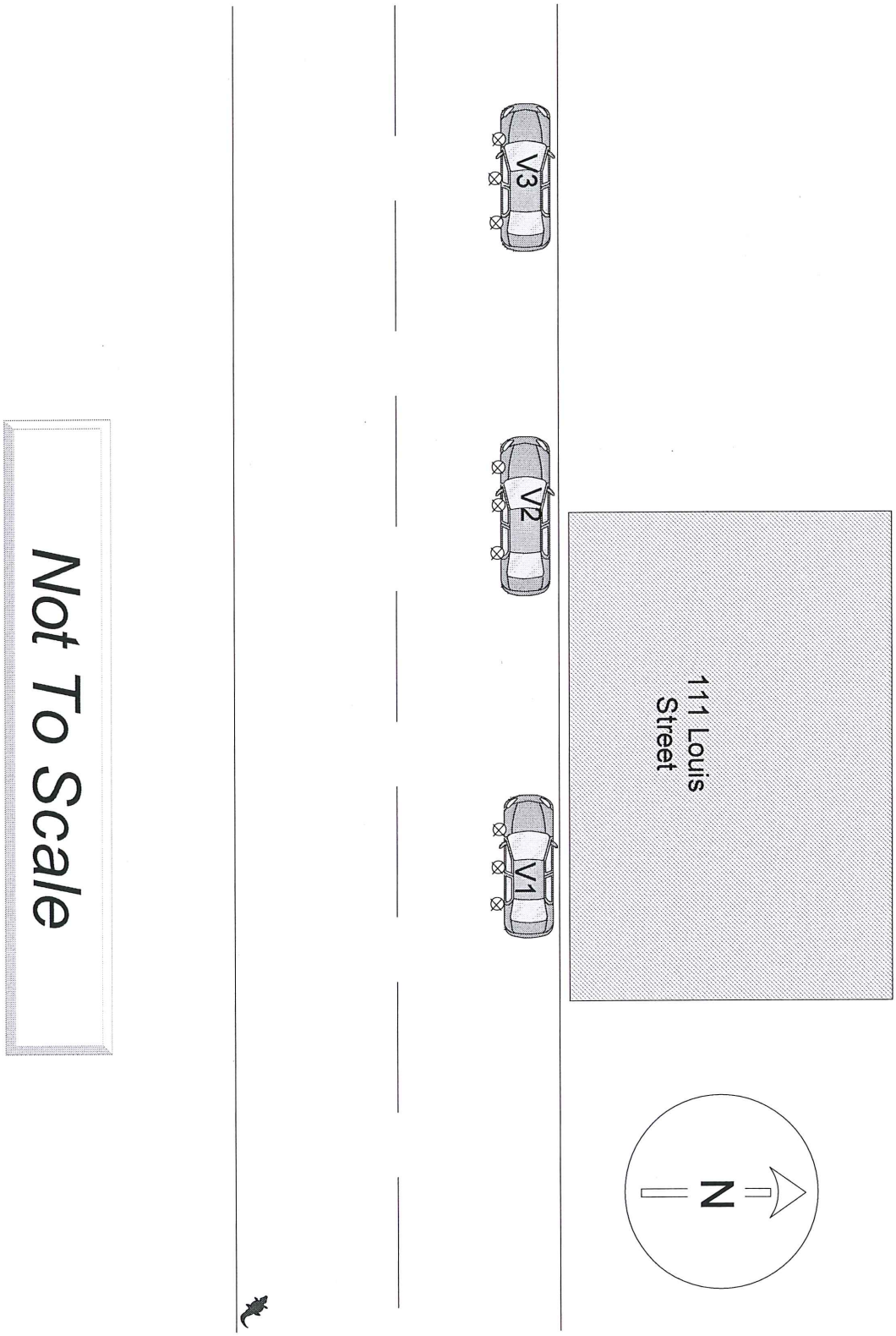
136 Damage To Other Property

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

141 Officer's Signature: PO Michael Yacuk 7283 — 142 Badge No.: 7283 — 143 Reviewed By: 5199 — 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	----	----	----	--	----	----	----	---	----	----	----	--------	
B	2	----	----	----	--	----	----	----	---	----	----	----	--------	
C	3	----	----	----	--	----	----	----	---	----	----	----	--------	
D	4	01	00	00	00	00	00	00	00	00	00	00	00	00
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43479



PO Michael Yacuk 7283
Officer's Signature

7283
Badge Number

Page 2 of 4 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 04 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02 | 102 01 | 103 01 | 104 04 | 105 02 | 106 ---- | 107 00 | 108 01 | 109 00 | 110 01 | 111 00 | 112 ---- | 113 00 | 114 ---- | 115 00 | 116 04 | 117 04

1 Case Number: 16-43479

2 Police Dept of: New Brunswick — Code: 0 1

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 04 16

5 Day of Week: Su Mo Tu W Th F Sa

6 Time (use 2400 hrs): 14 49

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: 106 Louis Street (Road Name) Dir

☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W of: (16)

11 Speed Limit: 2 5

12 Route No. Suffix 13 Milepost . 18 Speed Limit

17 Cross Road Name

19 ☐ To: ☐ Ramp ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude . 22 Longitude .

118a 25 | 118b 25 | 119a 02 | 119b 02 | 120 01 | 121 00 | 122 ---- | 123 ---- | 124 10 | 125 01 | 126 11 | 127 11 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 28 | 129b ---- | 129c ---- | 129d ---- | 130 09 | 131 09 | 132 03 | 133 03

23 Veh No: 3 — 24 Policy No.: 943 414 984 — 25 Ins Code: 743

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name — Initial — Last Name — 29 Sex

27 Number and Street — 30 Eyes

28 City — State — Zip

31 State — 32 Driver's License No — 33 DOB mm dd yy — 34 Expires mm yy

35 Owner's First Name: Lilian — Initial: L — Last Name: Liesdek

☐ Same As Driver

36 Number and Street: 2045 E 41st St.

37 City: Brooklyn NY 11234 — State — Zip

38 Make: Honda — 39 Model: acc — 40 Color: Gry — 41 Year: 201 — 42 Plate No.: HDY2869 — 43 State: NY

44 VIN: 1HGCR2F33GA092260 — 45 Expires: /1/18

46 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — 47 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

53 Veh No: 4 — 54 Policy No.: 00 — 55 Ins Code: 00

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☒ Hit & Run

56 Driver's First Name: 00 — Initial: 0 — Last Name: 00 — 59 Sex

57 Number and Street: 00 — 60 Eyes

58 City: 00 — State — Zip

61 State — 62 Driver's License No — 63 DOB mm dd yy — 64 Expires mm yy

65 Owner's First Name: 00 — Initial: 0 — Last Name

☐ Same As Driver

66 Number and Street: 00

67 City: 00 — State — Zip

68 Make: 00 — 69 Model: 00 — 70 Color: Red — 71 Year: 00 — 72 Plate No.: 00 — 73 State: 00

74 VIN: 00 — 75 Expires: /00

76 Vehicle Removed To ☐ Driven ☒ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — 77 Authority ☐ Owner ☐ Driver ☐ Police

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

134 Crash Diagram (NOT TO SCALE)

135 Crash Description

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 Michael Yacuk 7283 — 142 Badge No.: 7283 — 143 Reviewed By: 5199 — 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														

Page ____ of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 04 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02

1 Case Number: 16-43515

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 04 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 18 31

7 Municipality Code: 1214

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: 120 Huntington Street (Road Name) Dir

11 Speed Limit: 25

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

12 Route No. Suffix 13 Milepost 18 Speed Limit

14 15 16 17 Cross Road Name

19 Ramp ☐ To: ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a 02 | 118b ---- | 119a 25 | 119b ----

23 Veh No: 1 | 24 Policy No.: 9958967962061 | 25 Ins Code: 884

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☒ Hit & Run

26 Driver's First Name: Igli Initial: Last Name: Shehi 29 Sex: f

27 Number and Street: 288 Grace Avenue 30 Eyes: 2

28 City: Saddle Brook, NJ 07663 State Zip

31 State 32 Drver's License No 33 DOB (mm dd yy): 04 23 96 34 Expires (mm yy)

35 Owner's First Name: Bashkim Initial: Last Name: Shehi

☐ Same As Driver

36 Number and Street: 288 Grace Ave

37 City: Saddle Brook, NJ 07663-6130 State Zip

38 Make: MBZ 39 Model: C32 40 Color: SIL 41 Year: 02 42 Plate No.: Y67FSU 43 State: NJ

44 VIN: WDBRF65J52F229377 45 Expires: 09/16

46 Vehicle Removed To: ☐ Driven ☐ Left at Scene ☒ Towed ☒ Impound ☐ Disabled

47 Authority: ☐ Owner ☐ Driver ☐ Police

Dependable

48 Alcohol/Drug Test

Given: ☐ No ☒ Yes ☐ Refused

Type: ☒ Breath ☐ Blood ☐ Urine

Results: 0.12 % ☐ Pending

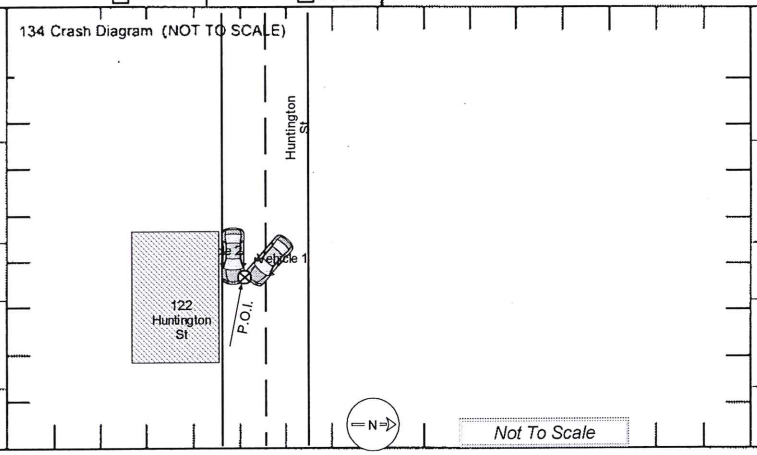
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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)



106 ---- | 107 ---- | 108 01 | 109 01 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 02 | 117 02

53 Veh No: 2 | 54 Policy No.: 977142483 | 55 Ins Code: 429

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: 00 Initial: 0 Last Name: 00 59 Sex:

57 Number and Street: 60 Eyes:

58 City: 0 State Zip

61 State 62 Driver's License No 63 DOB (mm dd yy) 64 Expires (mm yy)

65 Owner's First Name: Michael Initial: J Last Name: Bergman

☐ Same As Driver

66 Number and Street: 8129 Boss Street

67 City: Vienna, VA 22182 State Zip

68 Make: Honda 69 Model 70 Color: Slv 71 Year: 07 72 Plate No.: WMW3642 73 State: VA

74 VIN: 1HGCM66467A104044 75 Expires: 01/17

76 Vehicle Removed To: ☐ Driven ☒ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

77 Authority: ☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Unne

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

118a 02 | 118b ---- | 119a 25 | 119b ---- | 120 02 | 121 01 | 122 ---- | 123 ---- | 124 02 | 125 10 | 126 ---- | 127 ---- | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 28 | 129b | 129c | 129d

135 Crash Description: See page 2

130 01 | 131 01

136 Damage To Other Property

132 11

Oper. 1 | 137 Charge ☒ Multiple Charges: Driving while intoxicated | 138 Summons No.: Q372708

Oper. | 139 Charge ☐ Multiple Charges | 140 Summons No.

133 11

141 Officer's Signature: PO Nicole Lewis 7340

142 Badge No.: 7340 | 143 Reviewed By: 5274 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	----	20	M	----	----	1	04	04	----	--------	Shehi, Igli-288 Grace Ave, Saddle Brook, NJ 07663-6130
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43515

(Refer to vehicle by number)

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

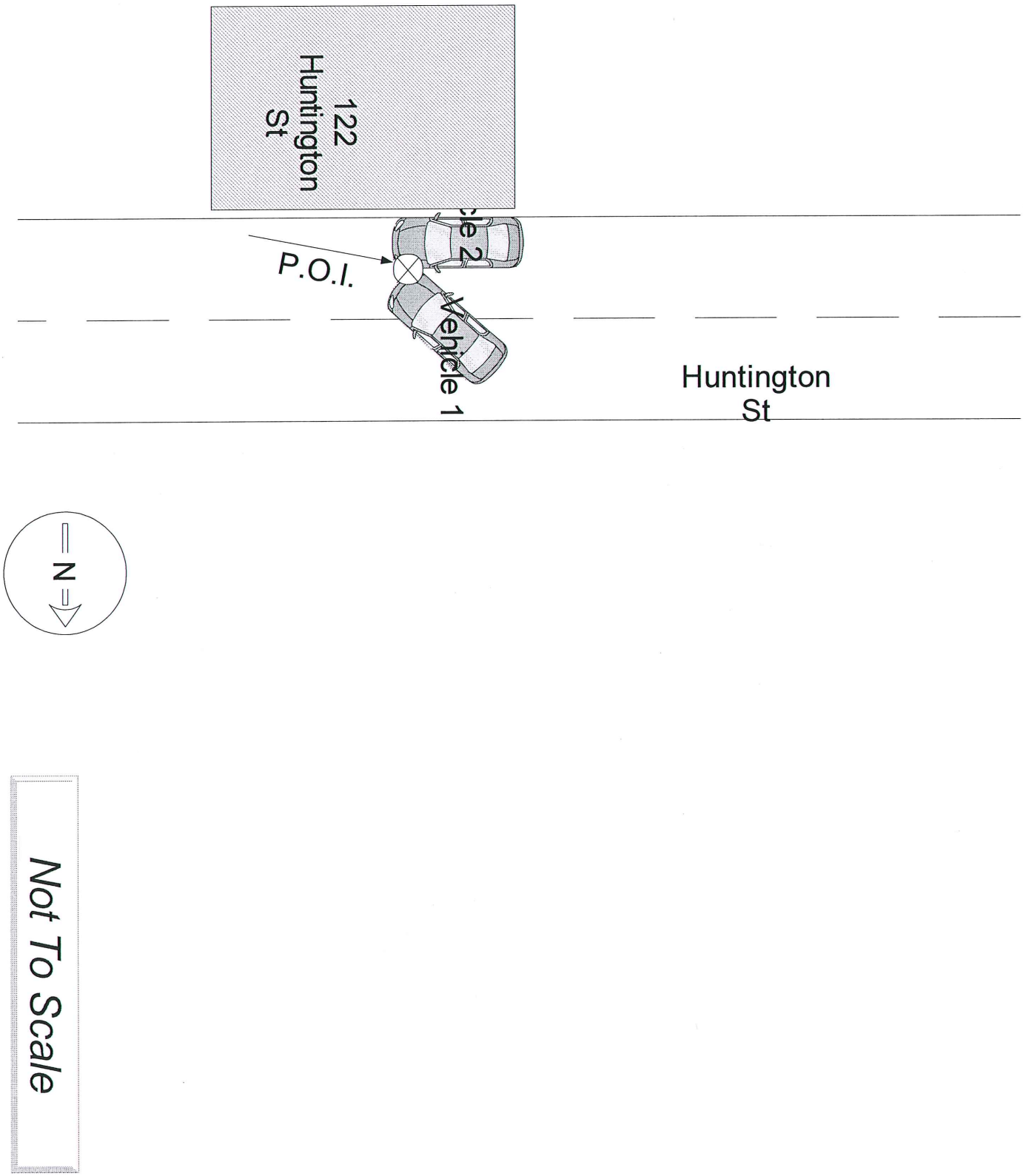
135 Crash Description

Victim (Melissa Bergman) stated that she parked her vehicle in front of 122 Huntington Street. She and multiple witnesses observed a silver Mercedes bearing a New Jersey registration (Y67FSU) driving out of the parking lot of Bank of America,she stated that vehicle 1 was driving erratically on Huntington Street and while doing so side swiped her vehicle causing moderate damage to her driver side fender. After the impact the driver of vehicle 1 stopped briefly and a passenger exited the vehicle. At which time multiple witnesses captured pictures of an unknown passenger exiting vehicle 1 and also captured the licenses plate number. Vehicle 1 proceeded east on Huntington.

PO Nicole Lewis 7340
Officer's Signature

7340
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-43515



PO Nicole Lewis 7340
Officer's Signature

7340
Badge Number

Page ____ of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 02 | 100 01 | 101 02 | 102 02 | 103 02 | 104 01 | 105 ---- | 106 02 | 107 ---- | 108 01 | 109 ---- | 110 01 | 111 ---- | 112 ---- | 113 ---- | 114 13 | 115 ---- | 116 01 | 117 ----

1 Case Number: 16-43526

2 Police Dept of: New Brunswick — Code: 0 1

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 04 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 19 46

7 Municipality Code: 1 2 1 4

8 Total Killed: 0

9 Total Injured: 0

10 Crash Occurred On: New Street (Road Name) Dir

☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) of: Route 18 NB To Albany Street NB

11 Speed Limit: 2 5

12 Route No. Suffix 13 Milepost

18 Speed Limit

17 Cross Road Name

19 Ramp ☐ To: ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a 02 | 118b ---- | 119a ---- | 119b ----

23 Veh No: 1 | 24 Policy No.: INT60100090801 | 25 Ins Code: 073

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Carol | Initial | Last Name: Fox | 29 Sex: F

27 Number and Street: 337 Manson Pl | 30 Eyes: 2

28 City: Plainfield, NJ 07063-1340 | State | Zip

31 State | 32 Driver's License No | 33 DOB (mm dd yy): 01 30 62 | 34 Expires (mm yy)

35 Owner's First Name | Initial | Last Name

☒ Same As Driver

36 Number and Street

37 City | State | Zip

38 Make: TOY | 39 Model: COR | 40 Color: GRN | 41 Year: 00 | 42 Plate No.: Y69GCT | 43 State: NJ

44 VIN: 2T1BR12E0YC300393 | 45 Expires: 02/17

46 Vehicle Removed To ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled | 47 Authority ☐ Owner ☐ Driver ☐ Police

GUARANTEED

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ __ % ☐ Pending

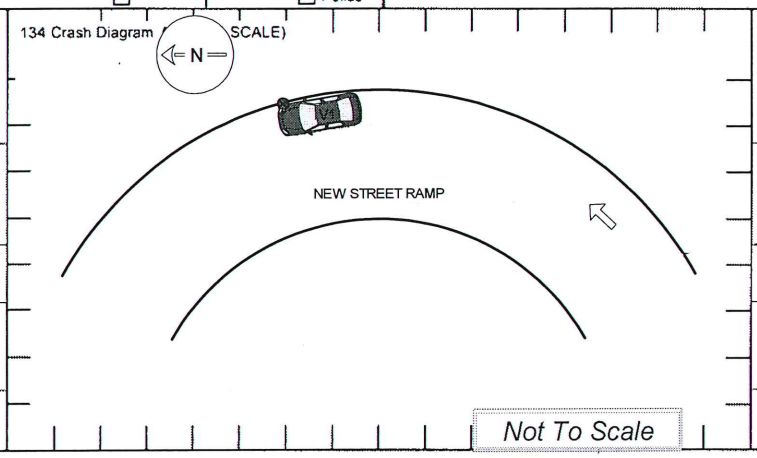
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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 (SCALE)



56 Driver's First Name | Initial | Last Name | 59 Sex

57 Number and Street | 60 Eyes

58 City | State | Zip

61 State | 62 Driver's License No | 63 DOB (mm dd yy) | 64 Expires (mm yy)

65 Owner's First Name | Initial | Last Name

☐ Same As Driver

66 Number and Street

67 City | State | Zip

68 Make | 69 Model | 70 Color | 71 Year | 72 Plate No. | 73 State

74 VIN | 75 Expires

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

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

118a 02 | 118b ---- | 119a ---- | 119b ---- | 120 01 | 121 ---- | 122 ---- | 123 ---- | 124 12 | 125 ---- | 126 11 | 127 ---- | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a ---- | 129b ---- | 129c ---- | 129d ---- | 130 01 | 131 01 | 132 | 133

135 Crash Description

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 Justin Miller 7338 | 142 Badge No. | 143 Reviewed By: 5274 | 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	F	----	----	1	09	09	----	--------	Fox, Carol-337 Manson Pl, Plainfield, NJ 07063-1340
B	1	03	01	----	59	M	----	----	1	09	09	----	--------	Fox, Franklin-337 Manson Pl, Plainfield, NJ 07063-1340
C														
D														
E														

Page _____ of _____

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43526

(Refer to vehicle by number)

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

135 Crash Description

On 07/04/2016 Officer Maroon and I were dispatched to a motor vehicle accident on the New Street ramp heading towards Route 18 Northbound.

Upon arrival we spoke with a male and a female. We asked both of these individuals if they were hurt and if they needed medical treatment. They both replied no. The female was identified as Carol Fox and the male was identified as Franklin Fox.

Carol Fox stated that while taking the turn she lost control and struck the curb. The roadway was wet due to the rain. The right passenger wheel was bent and the vehicle was immobile. Guaranteed Towing was dispatched to the scene. We spoke with Franklin Fox and he confirmed what his wife Carol had told us.

We advised Carol that we will file a police report. We asked Carol and Franklin fox if they had any questions for us, they both replied no. The vehicle (NJ Y69GCT) was released to Guaranteed Towing.

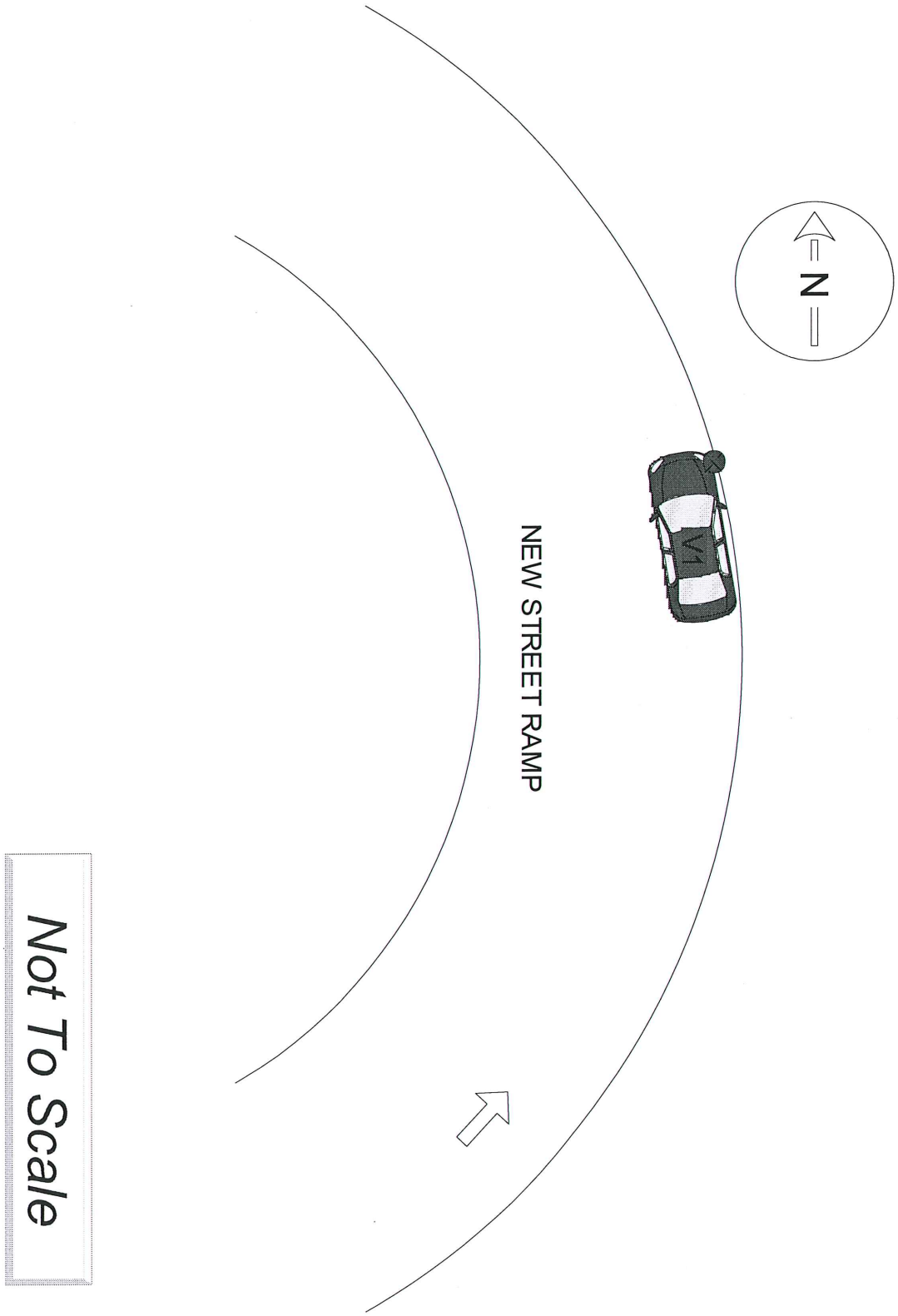
PO Justin Miller 7338

Officer's Signature

Badge Number

NJTR-1A (rev. 07/2005)

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43526



NJTR-1B (rev. 07/2005)

PO Justin Miller 7338
Officer's Signature

Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 04 | 97 01 | 98 03 | 99 07 | 100 02

1 Case Number: 16-43527

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 04 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 19 59

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 1

10 Crash Occurred On: Livingston Avenue (Road Name) Dir

11 Speed Limit: 2 5

☒ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: Reed Street

12 Route No. Suffix 13 Milepost

14 15 16

17 Cross Road Name

18 Speed Limit: 2 5

19 ☐ To: Ramp ☐ From:

20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a 02 | 118b 00 | 119a 00 | 119b 00

101 02

23 Veh No: 1

24 Policy No.: 4366-31-69-76

25 Ins Code: 100

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

53 Veh No: 2

54 Policy No.: 4363-56-00-63

55 Ins Code: 100

☐ Parked ☐ Ped ☐ Pedalcyclist ☒ Resp to Emergency ☐ Hit & Run

120 01

102 02

26 Driver's First Name: Juan Initial Last Name: Silva

29 Sex: M

56 Driver's First Name: Hector Initial Last Name: Lopez-Zacatula

59 Sex: M

121 01

103 01

27 Number and Street: 6 Hedges Street Apt B

30 Eyes: 2

57 Number and Street: 5416 Kenilworth Terrace

60 Eyes:

104 02

28 City: No Brunswick, State: NJ Zip: 08902-2323

58 City: apt 5, Riverdale, State: Maryland Zip: 20737

105 01

31 State: 32 Driver's License No: 33 DOB (mm dd yy): 02 24 79 34 Expires (mm yy):

61 State: 62 Driver's License No: 63 DOB (mm dd yy): 01 01 77 64 Expires (mm yy):

122 ----

35 Owner's First Name: ☒ Same As Driver Initial Last Name:

65 Owner's First Name: ☐ Same As Driver Leonardo Initial Last Name: Gonzalez

123 ----

36 Number and Street:

66 Number and Street: 35 Robinson Street

124 01

106 ----

37 City: State: Zip:

67 City: New Brunswick, State: NJ Zip: 08901-1823

125 08

107 ----

38 Make: JEE 39 Model: LIB 40 Color: SL 41 Year: 02 42 Plate No.: F18GES 43 State: NJ

68 Make: NIS 69 Model: ALT 70 Color: GOL 71 Year: 99 72 Plate No.: M85FWA 73 State: NJ

108 01

44 VIN: 1J4GL58K02W286550 45 Expires: 01/17

74 VIN: 1N4DL01D2XC161264 75 Expires: 09/16

109 01

46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — Destination

47 Authority: ☐ Owner ☐ Driver ☐ Police

76 Vehicle Removed To: ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled — Dependable

77 Authority: ☐ Owner ☐ Driver ☐ Police

110 01

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ __ %; ☐ Pending

111 01

112 ----

113 ----

114 ----

115 ----

116 03

117 03

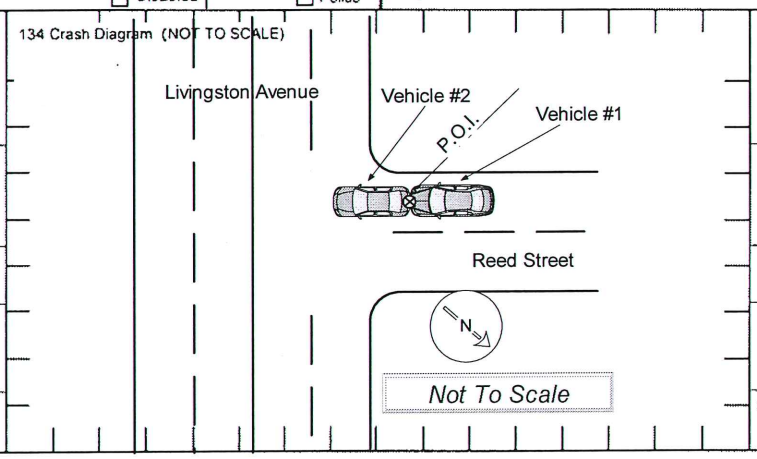
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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

126 ----

127 ----

128a 26

128b ----

128c ----

128d ----

129a 26

129b ----

129c ----

129d ----

135 Crash Description: (See PG. 2)

130 12

131 12

136 Damage To Other Property

132 06

133 06

Oper. 137 Charge ☐ Multiple Charges 138 Summons No.

Oper. 139 Charge ☐ Multiple Charges 140 Summons No.

141 Officer's Signature: PO Nicholas Grammar 7336

142 Badge No.

143 Reviewed By: 5274 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	----	37	M	----	----	1	04	04	----	--------	Silva, Juan-6 Hedges Street Apt B, No Brunswick, NJ 08902
B	2	01	01	----			04	08	2	04	04	----	6102	
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43527

(Refer to vehicle by number)

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

135 Crash Description

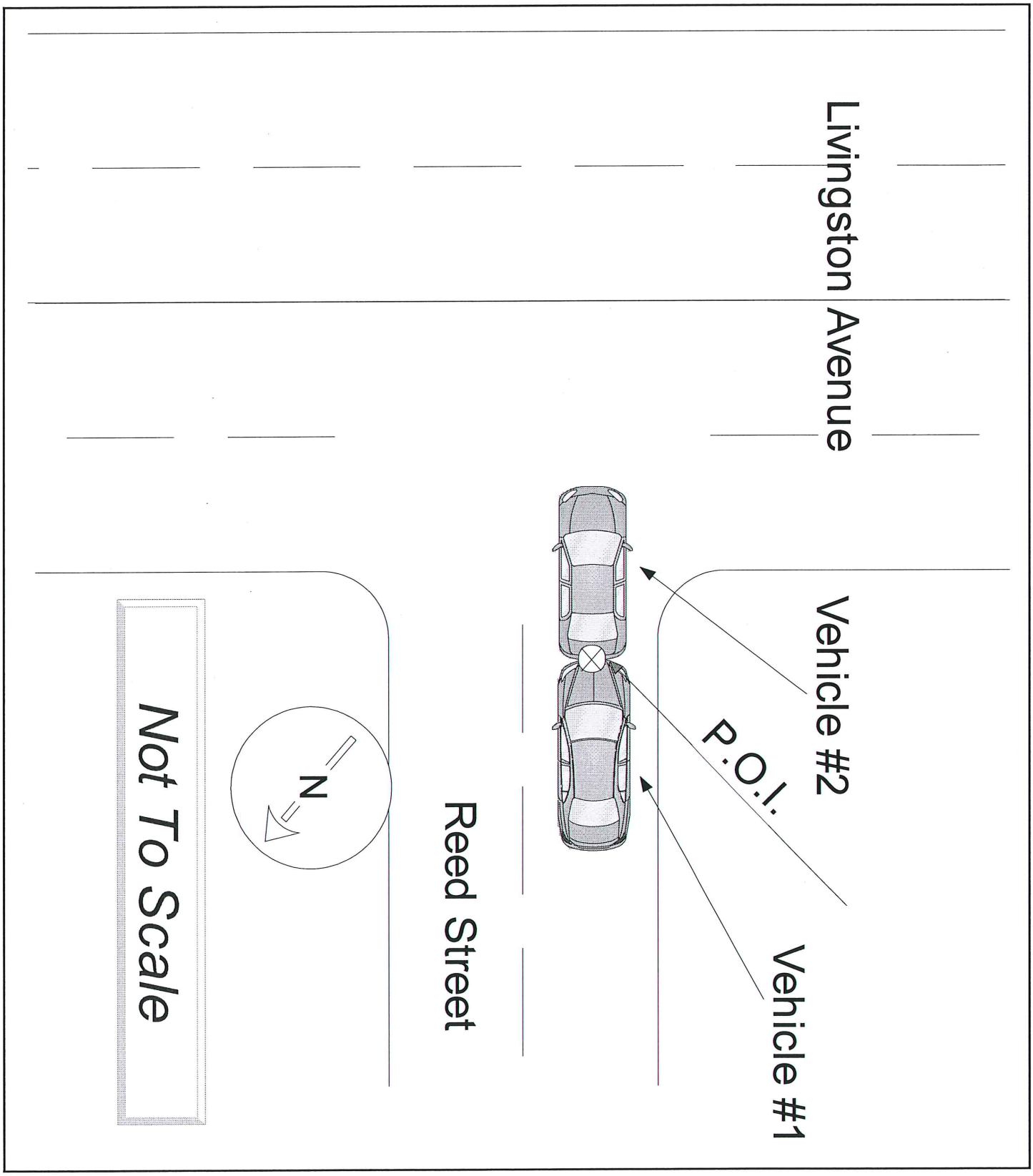
Driver # 1 Stated: That while driving southbound on Reed Street he struck Vehicle #2 from behind at a low rate of speed while it was stopped at the intersection of Livingston Avenue. His vehicle sustained minor damage to the front bumper and he was uninjured during the collision.

Driver #2 Stated that while stopped at the intersection of Reed Street and Livingston Avenue he was struck from behind by vehicle #1. His vehicle sustained heavy damage to the rear bumper and trunk. Driver #2 complained of pain in his neck and was taken to RWJ hospital by EMS personnel for treatment. His vehicle was towed form the scene by Guaranteed Motors.

PO Nicholas Grammar 7336
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43527



PO Nicholas Grammar 7336
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

Page ____ of ____ ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 06 | 99 07 | 100 01 | 101 02 | 102 02 | 103 02 | 104 03 | 105 03 | 106 ---- | 107 ---- | 108 01 | 109 01 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 03 | 117 04

1 Case Number: 16-43578

2 Police Dept of: New Brunswick — Code: 0 1

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 04 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 22 52

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: Lee Avenue (Road Name) Dir

☒ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: suydam Street

14 15 16

11 Speed Limit: 2 5

12 Route No. Suffix 13 Milepost

18 Speed Limit: 2 5

17 Cross Road Name

19 ☐ To: Ramp ☐ From: 20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a 25 | 118b ---- | 119a 02 | 119b ---- | 120 01 | 121 01 | 122 ---- | 123 ---- | 124 01 | 125 03 | 126 ---- | 127 08 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 26 | 129b ---- | 129c ---- | 129d ---- | 130 01 | 131 01 | 132 03 | 133 03

Vehicle 1

23 Veh No: 1

24 Policy No.: HPA125AA684428 — 25 Ins Code: 411

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Melvin — Initial: A — Last Name: — 29 Sex: M

27 Number and Street: 830 E Ash St. Apt 10 — 30 Eyes:

28 City: Othello WA 99344 — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 08 05 83 — 34 Expires (mm yy):

35 Owner's First Name: Eneida — Initial — Last Name: Peralta

☐ Same As Driver

36 Number and Street: 178 Raymond St 2nd Fl

37 City: New Brunswick , NJ 08901-3044 — State — Zip

38 Make: TOY — 39 Model: CAM — 40 Color: GRE — 41 Year: 94 — 42 Plate No.: RKY96M — 43 State: NJ

44 VIN: JT2SK12E1R0215071 — 45 Expires: 06/17

46 Vehicle Removed To ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled — 47 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.: N/A

50 Carrier No: N/A ☐ USDOT ☐ Other *

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

52 Carrier name: N/A

Vehicle 2

53 Veh No: 2

54 Policy No.: N/A — 55 Ins Code: N/A

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: Stephanie — Initial: D — Last Name: Turner — 59 Sex: F

57 Number and Street: 9 Liedl Ave — 60 Eyes: 4

58 City: Bound Brook, NJ 08805-1235 — State — Zip

61 State — 62 Driver's License No — 63 DOB (mm dd yy): 04 01 86 — 64 Expires (mm yy):

65 Owner's First Name: Car — Initial — Last Name:

☐ Same As Driver

66 Number and Street: 1570 So Wash Av

67 City: Piscataway, NJ 08854 — State — Zip

68 Make: NIS — 69 Model: VER — 70 Color: BL — 71 Year: 16 — 72 Plate No.: P92GAH — 73 State: NJ

74 VIN: 3N1CN7APXGL835347 — 75 Expires: 11/16

76 Vehicle Removed To ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled — 77 Authority ☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0.__ __ % ☐ Pending

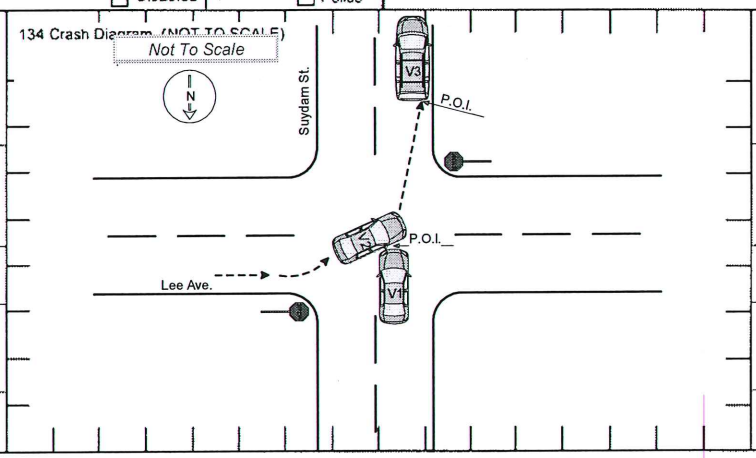
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.: N/A

80 Carrier No.: N/A ☐ USDOT ☐ Other *

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

82 Carrier name: N/A

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

Vehicle 2 stopped at the stop sign on Lee Ave, facing West, then proceeded to make a left turn on to Suydam St. Vehicle 1 was traveling South on Suydam St and struck vehicle 2 in the middle of the intersection, in the passenger side doors. Due to the momentum of the collision, vehicle 2 then struck parked vehicle 3.

Driver 2 stated that she was making a left turn on to Suydam St and did not see vehicle 1 coming. Driver 1 stated that he was coming down Suydam St and vehicle 2 pulled out into the intersection and it was impossible to avoid hitting.

136 Damage To Other Property

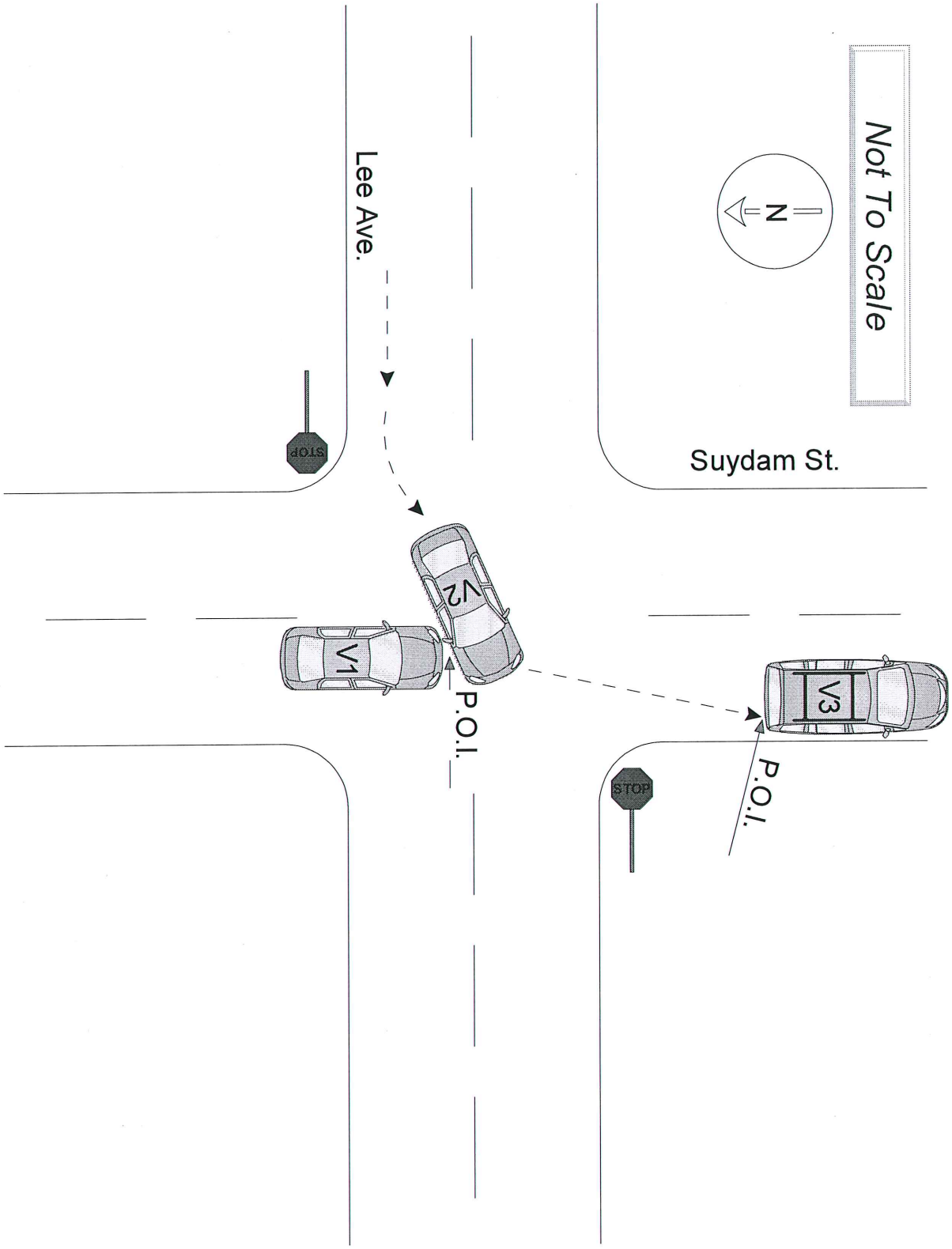
Oper. — 137 Charge ☐ Multiple Charges — 138 Summons No.

Oper. — 139 Charge ☐ Multiple Charges — 140 Summons No.

141 Officer's Signature: PO Vincent Scasserra 7330 — 142 Badge No.: 7330 — 143 Reviewed By: 4231 — 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	----	32	M	----	----	1	04	04	----	--------	Romero Martinez, Melvin-830 E Ash St. Apt 10, Othello WA
B	2	01	01	----	30	F			1	04	04	----	--------	Turner, Stephanie-9 Liedl Ave, Bound Brook, NJ 08805-1235
C	3	----	----	----	41	F	----	----	---	----	----	----	--------	Gomez, Maria-50 Lee Ave Fl1, New Brunswick , NJ 08901
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43578



NJTR-1B (rev. 07/2005)

PO Vincent Scasserra 7330
Officer's Signature

7330
Badge Number

New Jersey Police Crash Investigation Report

Page ____ of ____ ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-43578
2 Police Dept of: New Brunswick Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 07 04 16
5 Day of Week: Su M Tu W Th F Sa
6 Time (use 2400 hrs): 22 52
7 Municipality Code: 1214
8 Total Killed:
9 Total Injured:
10 Crash Occurred On: Lee Avenue (Road Name) Dir
11 Speed Limit:
12 Route No. Suffix
13 Milepost
14 ☐ At Intersection with ☐ Feet ☐ Miles
15 ☐ N ☐ E ☐ S ☐ W of: suydam Street
16 Cross Road Name
17 Cross Road Name
18 Speed Limit
19 Ramp ☐ To: ☐ From:
20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude
22 Longitude

23 Veh No: 3
24 Policy No.: 0667046B1630K
25 Ins Code: 896
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: n/a Initial Last Name: n
29 Sex
27 Number and Street: n/a
30 Eyes
28 City State Zip: n/a
31 State
32 Driver's License No
33 DOB mm dd yy
34 Expires mm yy
35 Owner's First Name: Eneida Initial Last Name: Peralta
☐ Same As Driver
36 Number and Street: 178 Raymond St 2nd Fl
37 City State Zip: New Brunswick , NJ 08901-3044
38 Make: HON
39 Model: ODY
40 Color: SL
41 Year: 03
42 Plate No.: C99CWX
43 State: NJ
44 VIN: 5FNRL18003B013006
45 Expires: 03/17
46 Vehicle Removed To ☐ Driven ☒ Left at Scene ☐ Towed ☐ Impound ☐ Disabled
47 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.: b/a
50 Carrier No. ☐ USDOT ☐ Other *: n/a
51 Commercial Vehicle Weight
☒ ≤ 10,000 lbs
☐ 10,001 - 26,000 lbs
☐ ≥ 26,001 lbs
52 Carrier name: n/a

53 Veh No
54 Policy No.
55 Ins Code
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
56 Driver's First Name Initial Last Name
59 Sex
57 Number and Street
60 Eyes
58 City State Zip
61 State
62 Driver's License No
63 DOB mm dd yy
64 Expires mm yy
65 Owner's First Name Initial Last Name
☐ Same As Driver
66 Number and Street
67 City State Zip
68 Make
69 Model
70 Color
71 Year
72 Plate No.
73 State
74 VIN
75 Expires
76 Vehicle Removed To ☐ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled
77 Authority ☐ Owner ☐ Driver ☐ Police
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

134 Crash Diagram (NOT TO SCALE)

135 Crash Description: This report is for vehicle 3 information only in which vehicle 1 represents vehicle 3.

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 Vincent Scasserra 7330
142 Badge No.: 7330
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														

96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118a 118b 119a 119b 120 121 122 123 124 125 126 127 128a 128b 128c 128d 129a 129b 129c 129d 130 131 132 133

118a: 25
124: 10
130: 05
131: 05

New Jersey Police Crash Investigation Report

Page ____ of ____ ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02

1 Case Number: 16-43529
2 Police Dept of: New Brunswick Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 07 04 16
5 Day of Week: Su Mo Tu W Th F Sa
6 Time (use 2400 hrs): 2003
7 Municipality Code: 1214
8 Total Killed:
9 Total Injured:
10 Crash Occurred On: 10 Harvey Street (Road Name) Dir
☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:
11 Speed Limit: 25
12 Route No. Suffix 13 Milepost 18 Speed Limit
14 15 16
17 Cross Road Name
19 ☐ To: Ramp ☐ From:
20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude 22 Longitude

118a 02 | 118b ---- | 119a 10 | 119b ----

23 Veh No: 1 | 24 Policy No.: 17097251 | 25 Ins Code: 135
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

53 Veh No: 2 | 54 Policy No.: 10102265 | 55 Ins Code: 42889
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

120 01

102 01 | 26 Driver's First Name: Whaldo | Initial: M | Last Name: Mendez | 29 Sex: M
56 Driver's First Name: Derrick | Initial: L | Last Name: Mccaskill | 59 Sex: M

121 01

103 01 | 27 Number and Street: 10 Harvey Street | 30 Eyes: 2
57 Number and Street: 851 Hamilton Street Somerset | 60 Eyes:

104 02 | 28 City: New Brunswick, NJ 08901-1916 (State Zip)
58 City: NJ 08873 (State Zip)

105 08 | 31 State | 32 Driver's License No | 33 DOB (mm dd yy): 08 09 94 | 34 Expires (mm yy)
61 State | 62 Driver's License No | 63 DOB (mm dd yy): 10 12 65 | 64 Expires (mm yy)

122 ----

35 Owner's First Name: Jesus | Initial | Last Name: Arias | ☐ Same As Driver
65 Owner's First Name | Initial | Last Name | ☒ Same As Driver

123 ----

36 Number and Street: 10 Harvey Street
66 Number and Street:

124 01

106 ---- | 37 City: New Brunswick, NJ 08901-1916 (State Zip)
67 City (State Zip)

125 13

107 ---- | 38 Make: DOD | 39 Model: DUR | 40 Color: WT | 41 Year: 08 | 42 Plate No.: N55DMX | 43 State: NJ
68 Make: GMC | 69 Model: Sir | 70 Color: Sil | 71 Year: 199 | 72 Plate No.: 5038AR1 | 73 State: AL

108 01 | 44 VIN: 1D8HB48N08F148227 | 45 Expires: 08/17
74 VIN: 2GTEK19V8X1502399 | 75 Expires:

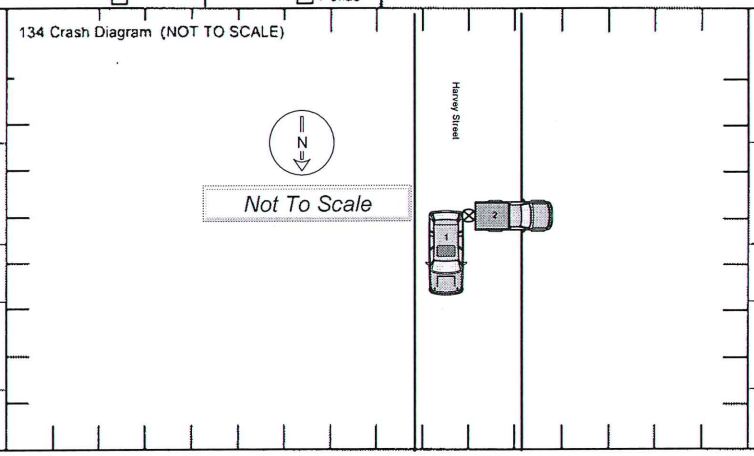
109 01 | 46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 47 Authority: ☒ Owner ☐ Driver ☐ Police
76 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 77 Authority: ☒ Owner ☐ Driver ☐ Police

110 01 | 48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ % ☐ Pending
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ % ☐ Pending

126 ----

111 01 | 112 ----

134 Crash Diagram (NOT TO SCALE)



127 ----

128a 26

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 ----

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

128d ----

116 01 | 117 02

52 Carrier name
82 Carrier name

129a 26

129b ----

135 Crash Description

The driver of vehicle 1 stated he was attempting to drive around a pick up truck that was making a k-turn. The driver of vehicle 1 stated the pickup truck backed into him as he drove behind him.

The driver of vehicle 2 stated he was turning around and he backed into vehicle 1 as he passed him in the street. There was no damage to vehicle 2. Vehicle 2 trailer hitch struck vehicle 1.

129c ----

129d ----

130 07

131 07

136 Damage To Other Property

132 06

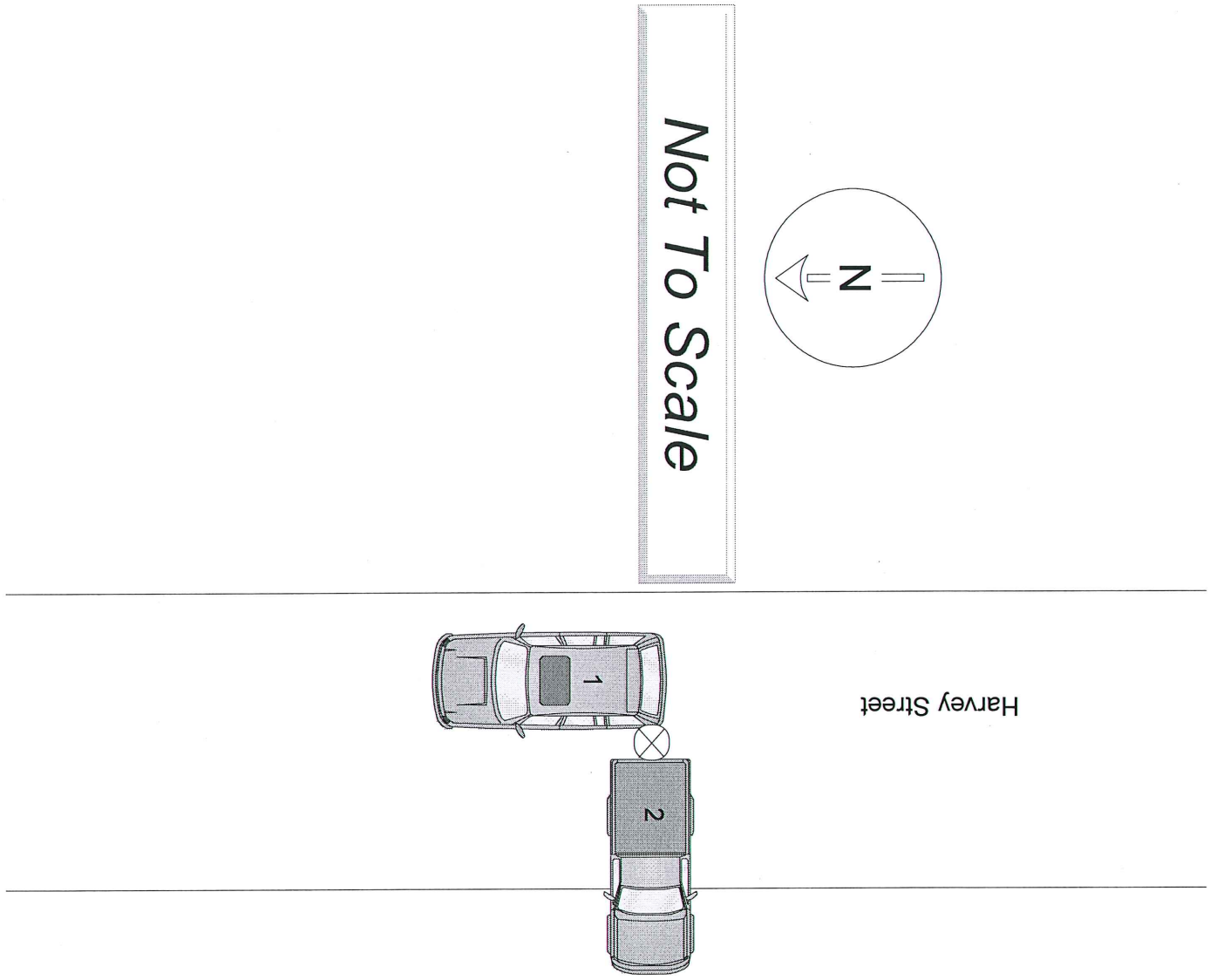
Oper. | 137 Charge ☐ Multiple Charges | 138 Summons No. | Oper. | 139 Charge ☐ Multiple Charges | 140 Summons No.

133 06

141 Officer's Signature: PO Brian Bellafronte | 142 Badge No.: 7324 | 143 Reviewed By: 5274 | 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	09	04	----	--------	Mendez, Whaldo-10 Harvey Street, New Brunswick, NJ 08901
B	1	03	01	----	20	M	----	----	1	09	04	----	--------	Anaya, Michael-300 Hamilton St Apt G1, New Brunswick, NJ
C	2	01	01	----	50	M	----	----	1	09	04	----	--------	Mccaskill, Derrick-851 Hamilton Street Somerset, NJ 08873
D	2	03	01	----	29	F	----	----	1	09	04	----	--------	Postel, Ashley-607 Luttie Rd, Myrtle Beach, SC 29588
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-43529



NJTR-1B (rev. 07/2005)

PO Brian Bellafronte
Officer's Signature

7324
Badge Number

Page ____ of ____ ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 06 | 99 07 | 100 01

1 Case Number: 16-43607

2 Police Dept of: New Brunswick — Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 05 16

5 Day of Week: Su M T W Th F Sa

6 Time (use 2400 hrs): 00 30

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: 395 Livingston Avenue (Road Name) — Dir

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

14 15 16

11 Speed Limit: 2 5

12 Route No. — Suffix — 13 Milepost — 18 Speed Limit

17 Cross Road Name

19 ☐ To: ☐ Ramp ☐ From:

20 Route/Name — ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude — 22 Longitude

118a 25 | 118b ---- | 119a ---- | 119b ----

101 01

23 Veh No: 1

24 Policy No.: 4429250121

25 Ins Code: 100

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

53 Veh No: -

54 Policy No.: -

55 Ins Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

120 ----

102 02

26 Driver's First Name: n/a — Initial — Last Name: n — 29 Sex

56 Driver's First Name: - — Initial: - — Last Name — 59 Sex

121 ----

103 02

27 Number and Street: - — 30 Eyes

57 Number and Street: - — 60 Eyes

104 02

28 City: - — State — Zip

58 City: - — State — Zip

105 00

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 ----

35 Owner's First Name: Marisol — Initial — Last Name: Guzman

☐ Same As Driver

65 Owner's First Name: - — Initial — Last Name: -

☐ Same As Driver

123 ----

36 Number and Street: 172 Suydam St

66 Number and Street: -

124 10

106 ----

37 City: New Brunswick , NJ 08901-2660 — State — Zip

67 City: - — State — Zip

125 ----

107 ----

38 Make: HYU — 39 Model: SON — 40 Color: TN — 41 Year: 09 — 42 Plate No.: N44BWA — 43 State: NJ

68 Make: - — 69 Model: - — 70 Color: - — 71 Year: - — 72 Plate No.: - — 73 State: -

108 01

44 VIN: 5NPET46F99H470124 — 45 Expires: 02/17

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

110 01

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

126 ----

111 ----

112 ----

113 ----

114 ----

49 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.: n/a

79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.: -

127 ----

128a ----

128b ----

128c ----

115 ----

50 Carrier No.: n/a — ☐ USDOT ☐ Other *

80 Carrier No.: - — ☐ USDOT ☐ Other *

128d ----

116 01

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 ----

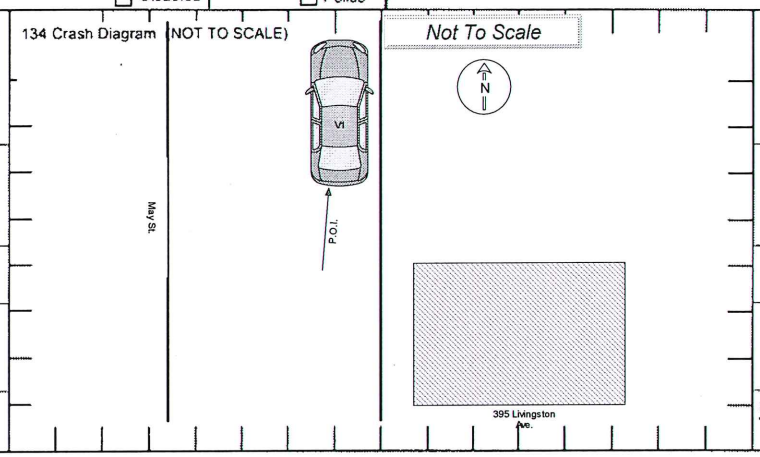
117 ----

52 Carrier name: n/a

82 Carrier name: -

129b ----

134 Crash Diagram (NOT TO SCALE)



129c ----

129d ----

135 Crash Description

The complainant stated that vehicle 1 was parked on May St. outside of 395 Livingston Ave when it was struck by another vehicle. There was visible damage to the trunk of the vehicle. There were no signs of debris left from another vehicle, nor was there any damaged vehicles in the area.

130 06

131 06

136 Damage To Other Property

132

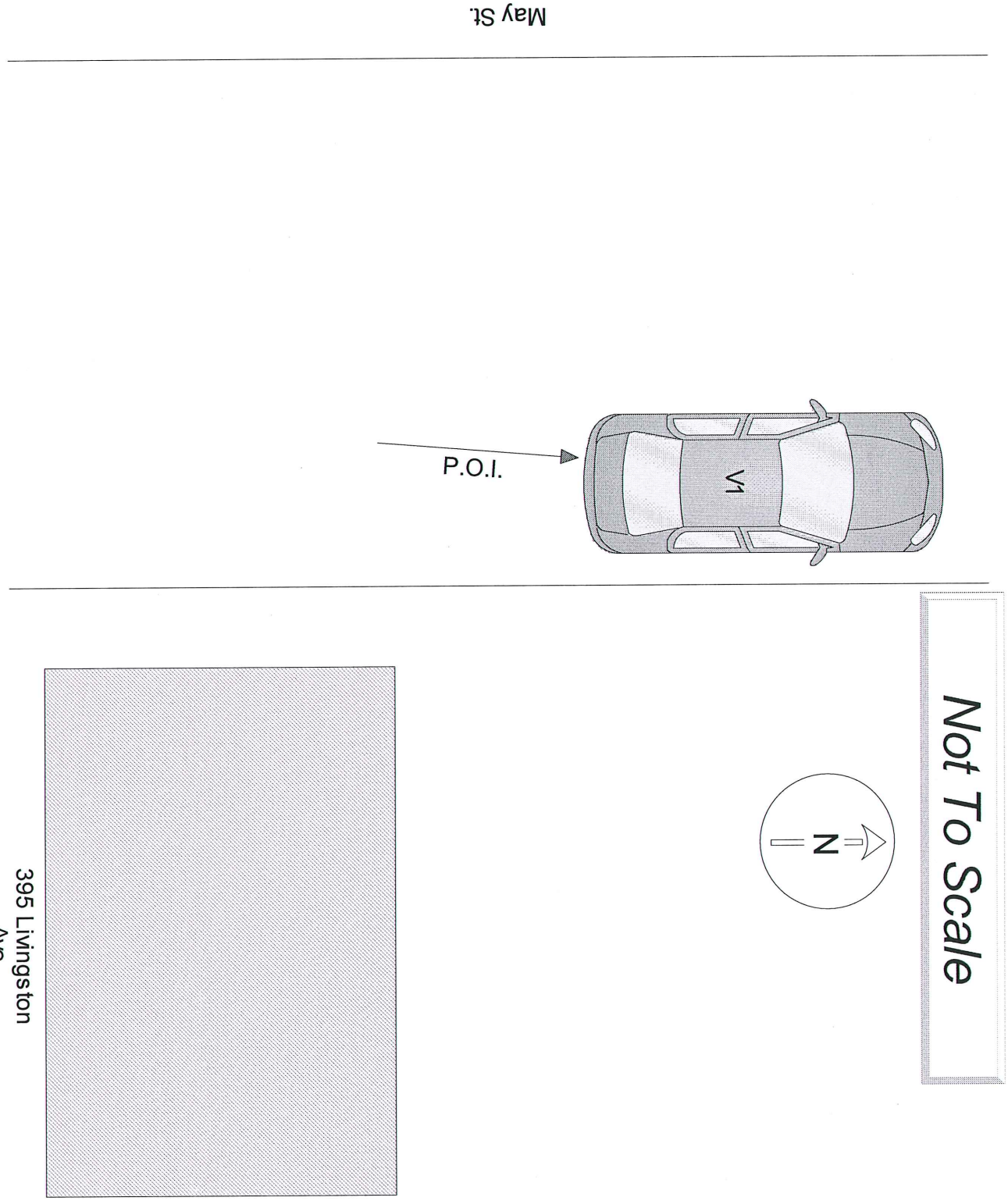
Oper. — 137 Charge ☐ Multiple Charges — 138 Summons No. — Oper. — 139 Charge ☐ Multiple Charges — 140 Summons No.

133

141 Officer's Signature: PO Vincent Scasserra 7330 — 142 Badge No.: 7330 — 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	----	----	----	53	F	----	----	---	----	----	----	--------	Guzman, Marisol-172 Suydam St, New Brunswick , NJ 08901
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43607



NJTR-1B (rev. 07/2005)

PO Vincent Scasserra 7330
Officer's Signature

7330
Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	04
97	01
98	06
99	07
100	01
101	02
102	02
103	02
104	01
105	13
106	----
107	----
108	01
109	----
110	01
111	----
112	----
113	----
114	----
115	----
116	02
117	----

1 Case Number: 16-43620

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 05 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 01 55

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured: 01

10 Crash Occurred On: 358 George Street (Road Name) Dir

☐ At Intersection with

☐ Feet ☐ N ☐ E

☐ Miles ☐ S ☐ W of:

14 15 16

11 Speed Limit: 2 5

12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

19 ☐ To: Ramp ☐ From:

20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a	02
118b	----
119a	89
119b	----
120	01
121	02
122	----
123	----
124	07
125	49
126	----
127	----
128a	26
128b	----
128c	----
128d	----
129a	22
129b	----
129c	----
129d	----
130	04
131	17
132	----
133	----

Vehicle 1

23 Veh No: 1

24 Policy No.: PANJ-006196467

25 Ins Code: 017

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Harry Initial Last Name: Mcdevitt 29 Sex: M

27 Number and Street: 6 Laurel Place 30 Eyes: 5

28 City: Montclair, NJ 07043-1502 State Zip

31 State 32 Driver's License No 33 DOB (mm dd yy): 11 06 55 34 Expires (mm yy)

35 Owner's First Name Initial Last Name ☒ Same As Driver

36 Number and Street

37 City State Zip

38 Make: Chevy 39 Model: astro 40 Color: BL 41 Year: 97 42 Plate No.: B95FMA 43 State: NJ

44 VIN: 1GNEL19W3VB173797 45 Expires: 06/17

46 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

47 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

Vehicle 2

53 Veh No

54 Policy No.

55 Ins Code

☐ Parked ☒ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: Thomas Initial Last Name: Kasper 59 Sex: M

57 Number and Street: A9 Bayshore Drive 60 Eyes: 4

58 City: South Amboy, NJ 08879-1856 State Zip

61 State 62 Driver's License No 63 DOB (mm dd yy): 04 11 75 64 Expires (mm yy)

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

66 Number and Street 00

67 City 0 State Zip

68 Make: 00 69 Model: 00 70 Color: 00 71 Year: 00 72 Plate No.: 00 73 State: 00

74 VIN: 00 75 Expires

76 Vehicle Removed To ☐ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled: 00

77 Authority ☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Unne; Results: 0.__ __ % ☐ Pending

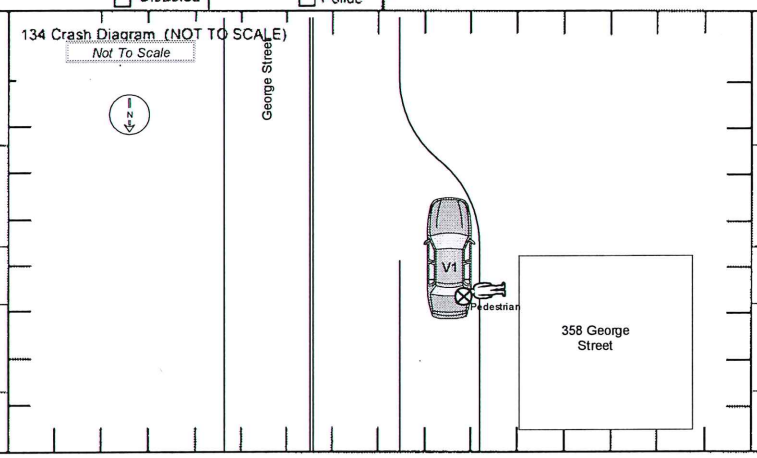
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

134 Crash Diagram (NOT TO SCALE) 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 Stewart Way 7328 142 Badge No.: 7328 143 Reviewed By: MACEVEDO Badge No.: 5240 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	----	----	60	M	----	----	1	09	04	----	--------	Mcdevitt, Harry-6 Laurel Place, Montclair, NJ 07043-1502
B	P	----	----	03	41	M	01	04	2	----	----	----	6202	Kasper, Thomas-A9 Bayshore Drive, South Amboy, NJ 08879
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43620

(Refer to vehicle by number)

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

135 Crash Description

Driver 1 stated he was traveling eastbound on George street approaching 358 George street (7-11). He was slowing to a stop at this address when he heard a noise like he had struck an object followed by screaming. When he exited the vehicle he observed Pedestrian 1 bleeding from the head. He stated he did not see the individual he hit prior to the collision. He refused medical attention and was uninjured. The vehicle sustained no visible damage

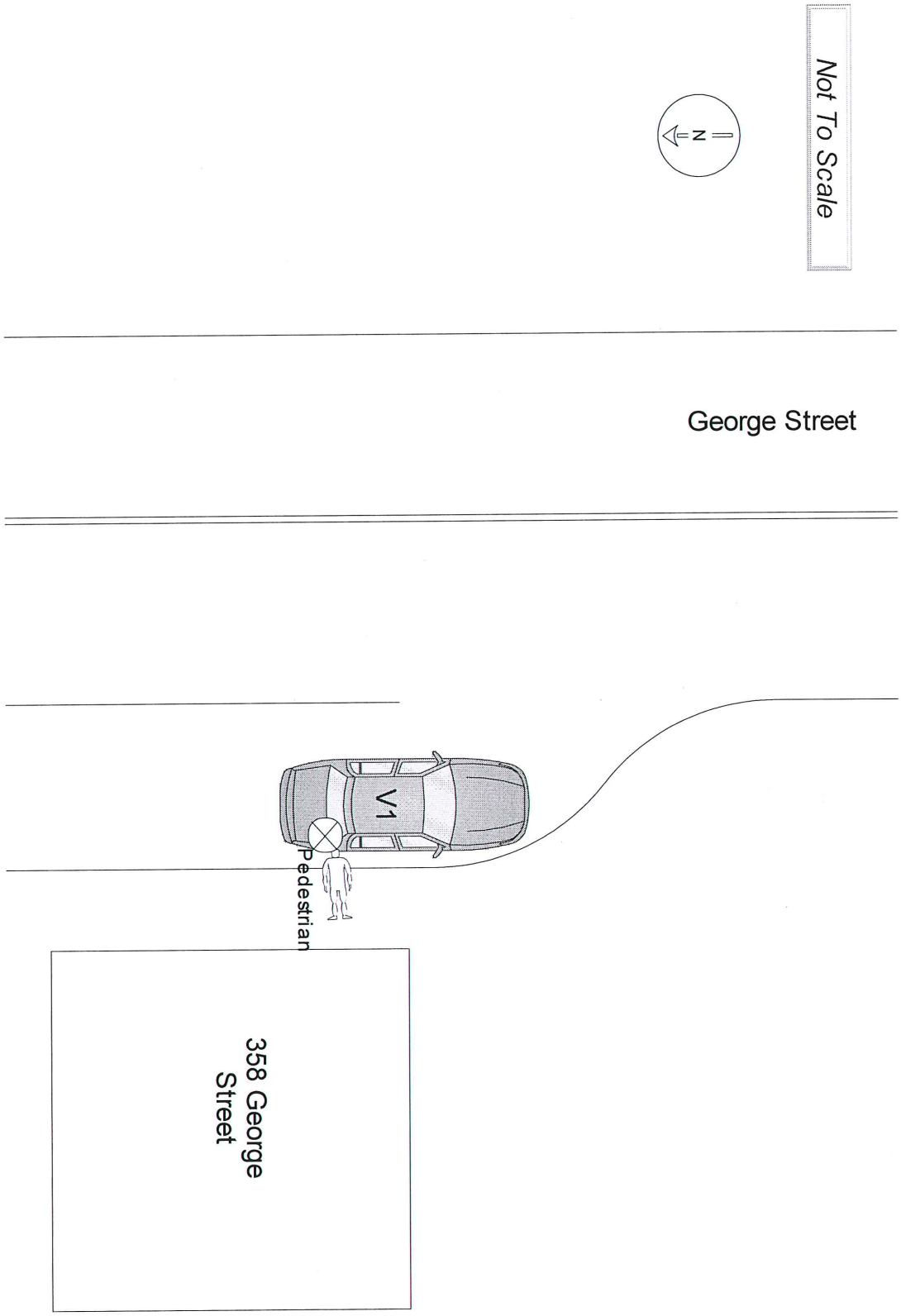
Pedestrian 1, who was highly intoxicated, stated that vehicle 1 struck him. He stated vehicle 1 came out of nowhere. He was bleeding from the back of the head and was ultimately taken to Robert Wood Johnson Hospital for treatment.

Witness stated that she observed Pedestrian 1 fall on the ground on the sidewalk near the roadway while Vehicle 1 was slowing to a stop. The pedestrian fell into vehicle 1 subsequently striking the rear passenger side of the vehicle.

PO Stewart Way 7328
Officer's Signature

7328
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43620



PO Stewart Way 7328
Officer's Signature

7328
Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96 03 | 97 01 | 98 01 | 99 02 | 100 01

1 Case Number 16-43636

2 Police Dept of New Brunswick Code 0 1

3 Station/Precinct

10 Crash Occurred On: Albany Street (Road Name) (Dir)

☒ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) of: George Street

11 Speed Limit 12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

19 ☐ To: Ramp ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

4 Date of Crash mm dd yy: 07 05 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 05 59

7 Municipality Code: 1 2 1 4

8 Total Killed 9 Total Injured

118a 25 | 118b | 119a 02 | 119b

101 02 — 23 Veh No 1 — 24 Policy No. F161236-5 — 25 Ins Code 426 — ☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

53 Veh No 2 — 54 Policy No. HPA00002097256 — 55 Ins Code 017 — ☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

120 01

102 02 — 26 Driver's First Name Initial Last Name: Iqbal, Junaid Iqbal — 29 Sex m

56 Driver's First Name Initial Last Name: Gary Repack — 59 Sex M

121 01

103 02 — 27 Number and Street: 109 Grace Street — 30 Eyes 2

57 Number and Street: 30 Chilton La — 60 Eyes 4

104 02 — 28 City State Zip: Jersey City nj 07307

58 City State Zip: Aberdeen, NJ 07747-2209

105 03 — 31 State — 32 Driver's License No — 33 DOB mm dd yy: 03 22 92 — 34 Expires mm yy

61 State — 62 Driver's License No — 63 DOB mm dd yy: 04 25 45 — 64 Expires mm yy

122 ----

35 Owner's First Name Initial Last Name: ☐ Same As Driver Usma Iqbal

65 Owner's First Name Initial Last Name: ☐ Same As Driver Repack, Carmela Repack

123 ----

36 Number and Street: 109 Grace St

66 Number and Street: 30 Chilton La

124 01

106 ---- — 37 City State Zip: Jersey City, NJ 07307-3201

67 City State Zip: Aberdeen, NJ 07747-2209

125 01

107 ---- — 38 Make: TOY — 39 Model: COR — 40 Color: BK — 41 Year: 16 — 42 Plate No.: X80GTE — 43 State: NJ

68 Make: HON — 69 Model: ACC — 70 Color: BLA — 71 Year: 12 — 72 Plate No.: V21GES — 73 State: NJ

108 01 — 44 VIN: 2T1BURHE8GC668985 — 45 Expires: 05/20

74 VIN: 1HGCP2F65CA153523 — 75 Expires: 01/17

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

111 01 — Type: ☐ Breath ☐ Blood ☐ Urine

112 ---- — Results: 0.__ __ % ☐ Pending

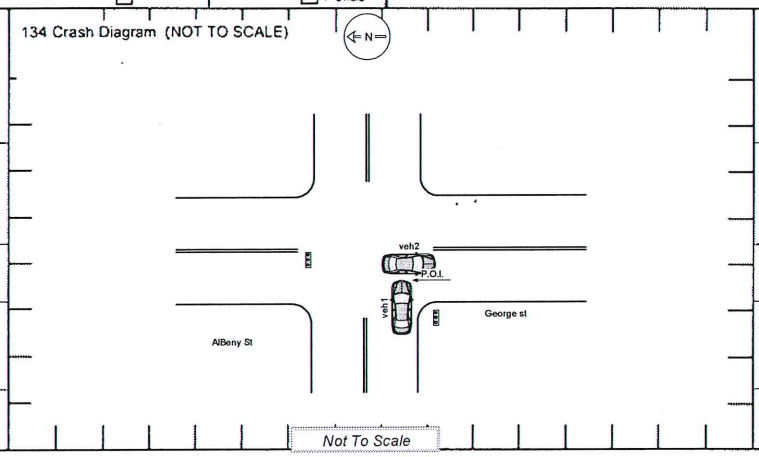
113 ---- — 49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

114 ---- — 50 Carrier No. ☐ USDOT ☐ Other *

115 ---- — 51 Commercial Vehicle Weight: ☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs

116 01 — 117 03 — 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

126 03 | 127 03 | 128a 27 | 128b | 128c | 128d | 129a 27 | 129b | 129c | 129d

135 Crash Description

130 12 | 131 12

136 Damage To Other Property

132 04

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

133 05

141 Officer's Signature: PO Karl Murvay 7170

142 Badge No. 7170

143 Reviewed By: MACEVEDO Badge No. 5240

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	----		M	----	----		04	04			
B	1	01	01	----		M	----	----		04	04			
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43636

(Refer to vehicle by number)

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

135 Crash Description

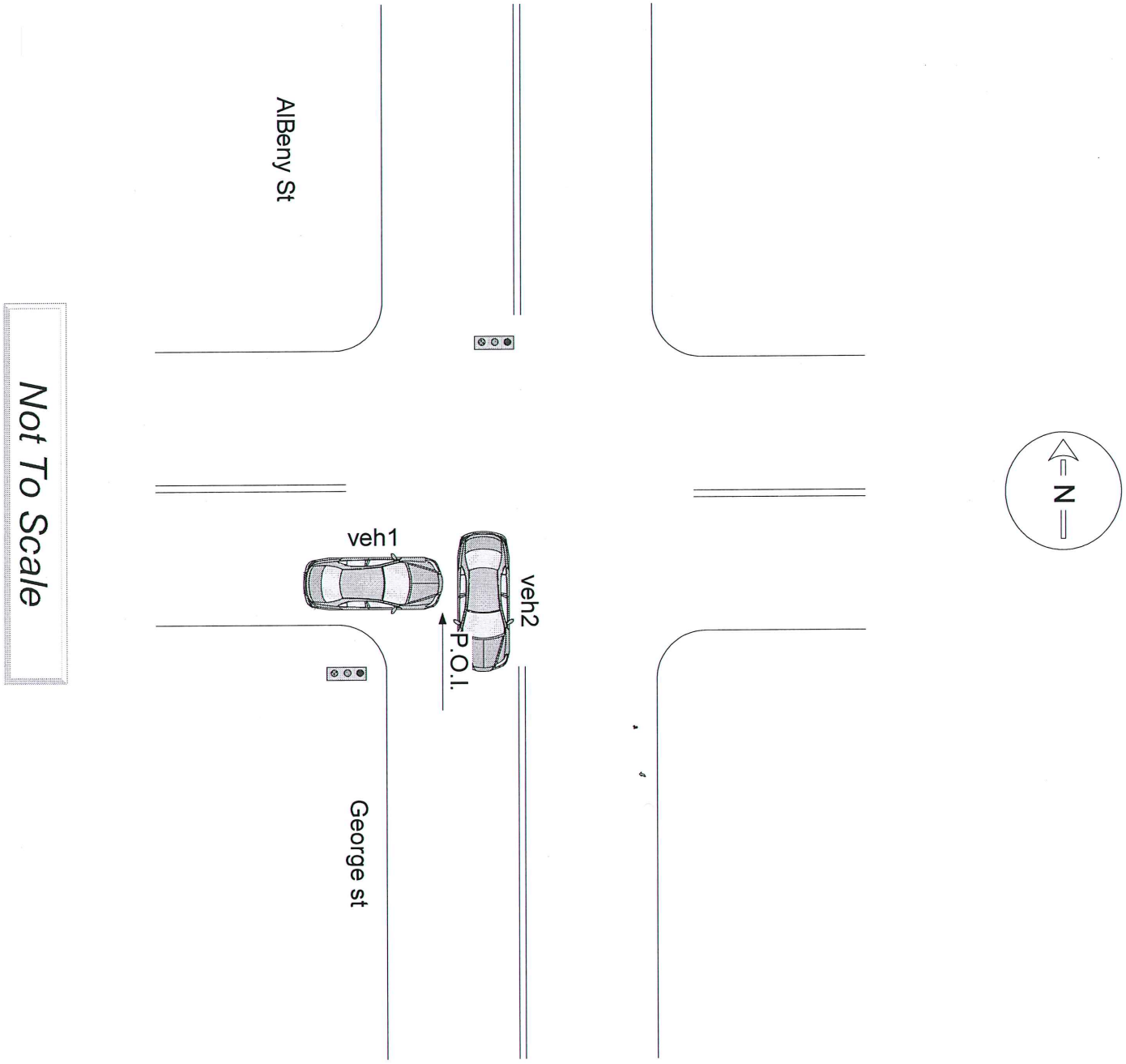
Driver Of Vehicle 1 Stated that he Was Coming Up Albany Street From Nelson And the Light Turned Green And he processed to go Straight and Vehicle 2 Came Though Light and he Could Not Stop In time And Hit Vehicle On Right Side .

Driver of Vehicle 2 Stated that he Had Green Light and was Going Though Light and was Hit By Vehicle 1 he was in Intersection in the Fourth Lane of Albany Street He Stated that he was Not Sure if light Changed while he was In Intersection .

PO Karl Murvay 7170
Officer's Signature

7170
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43636



PO Karl Murvay 7170
Officer's Signature

7170
Badge Number

Page 1 of 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 01 | 97 01 | 98 06 | 99 02 | 100 02 | 101 02 | 102 02 | 103 02 | 104 01 | 105 11 | 106 00 | 107 ---- | 108 01 | 109 ---- | 110 03 | 111 ---- | 112 00 | 113 ---- | 114 ---- | 115 ---- | 116 03 | 117 ----

1 Case Number 16-43633

2 Police Dept of New Brunswick Code 0 1

3 Station/Precinct

4 Date of Crash mm dd yy: 07 05 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 04 58

7 Municipality Code: 1 2 1 4

8 Total Killed: - -

9 Total Injured: - -

10 Crash Occurred On: State Route 18 SB (Road Name) S (Dir) 11 Speed Limit 2 5

☐ At Intersection with ☐ Feet ☒ Miles .25 (14) (15) ☐ N ☐ E ☒ S ☐ W (16) of: George Street

12 Route No. Suffix 13 Milepost . 18 Speed Limit 2 5

19 ☒ Ramp To: ☐ From: 17 Cross Road Name State Route 18 SB 20 Route/Name ☐ NB ☐ EB ☒ SB ☐ WB

21 Latitude . 22 Longitude .

118a 52 | 118b 51 | 119a ---- | 119b ---- | 120 01 | 121 ---- | 122 ---- | 123 ---- | 124 01 | 125 ---- | 126 ---- | 127 ---- | 128a 69 | 128b ---- | 128c ---- | 128d ---- | 129a ---- | 129b ---- | 129c ---- | 129d ---- | 130 12 | 131 01 | 132 | 133

23 Veh No 1 | 24 Policy No. 049800112388435069 | 25 Ins Code -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name Billy | Initial J | Last Name Spatcher | 29 Sex M

27 Number and Street 1520 Irene St Apt 218 | 30 Eyes -

28 City Bethlehem, PA 18017 | State | Zip

31 State | 32 Driver's License No | 33 DOB mm dd yy 08 26 66 | 34 Expires mm yy

35 Owner's First Name Govt | Initial | Last Name US | ☐ Same As Driver

36 Number and Street -

37 City - | State | Zip

38 Make Chrylser | 39 Model - | 40 Color Wht | 41 Year - | 42 Plate No. G410071M | 43 State -

44 VIN - | 45 Expires / /

46 Vehicle Removed To ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled: Guaranteed for Lens

47 Authority ☐ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ __ % ☐ Pending

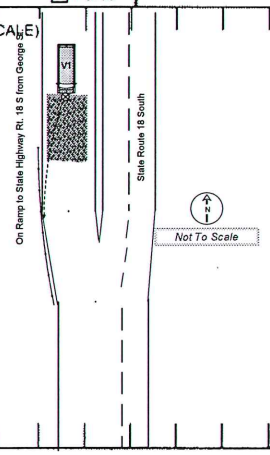
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No. n/a

50 Carrier No. n/a ☐ USDOT ☐ Other *

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

52 Carrier name n/a

134 Crash Diagram (NOT TO SCALE)



53 Veh No | 54 Policy No. | 55 Ins Code

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name | Initial | Last Name | 59 Sex

57 Number and Street | 60 Eyes

58 City | State | Zip

61 State | 62 Driver's License No | 63 DOB mm dd yy | 64 Expires mm yy

65 Owner's First Name | Initial | Last Name | ☐ Same As Driver

66 Number and Street

67 City | State | Zip

68 Make | 69 Model | 70 Color | 71 Year | 72 Plate No. | 73 State

74 VIN | 75 Expires / /

76 Vehicle Removed To ☐ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

77 Authority ☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Unne; Results: 0.__ __ % ☐ Pending

79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

80 Carrier No. n/a ☐ USDOT ☐ Other *

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

82 Carrier name

135 Crash Description

Driver 1 was approaching Route 18 South from the on ramp at George St. when he lost control of the vehicle due to a flooded roadway. Vehicle 1 struck the guard rail causing damage to the front passenger tire.

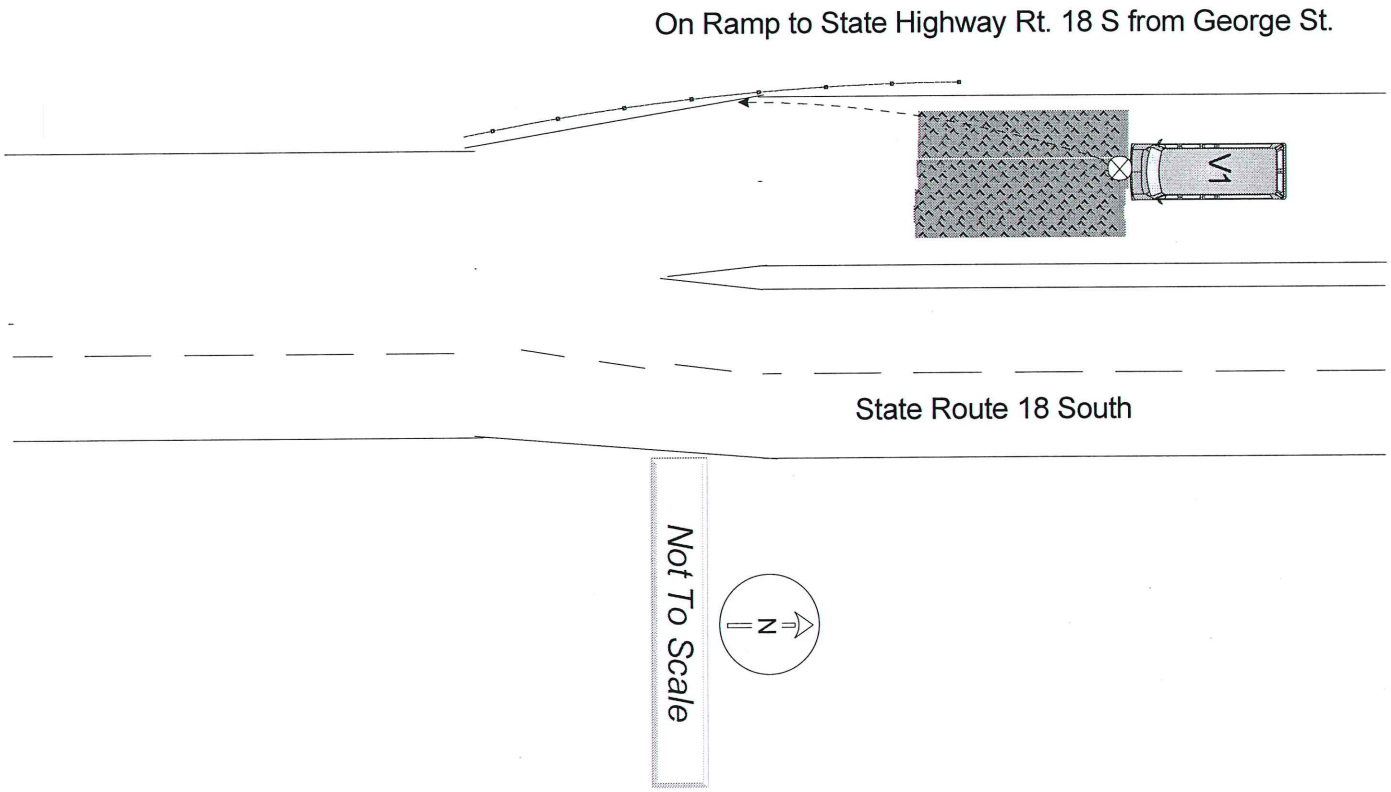
136 Damage To Other Property

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

141 Officer's Signature PO Vincent Scasserra | 142 Badge No. 7330 | 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	----	49	M	----	----	1	09	04	----	--------	Spatcher, Billy-1520 Irene St Apt 218, Bethlehem, PA 18017
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station	Code 0 1 Case No. 16-43633



PO Vincent Scasserra
Officer's Signature

7330
Badge Number

New Jersey Police Crash Investigation Report

Page ____ of ____ ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 09 | 100 01

1 Case Number: 16-43663
2 Police Dept of: New Brunswick Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 07 05 16
5 Day of Week: Su M T W Th F Sa
6 Time (use 2400 hrs): 08 53
7 Municipality Code: 1 2 1 4
8 Total Killed: 0 0
9 Total Injured: 0 0

10 Crash Occurred On: 10 Commercial Avenue (Road Name) Dir
☐ At Intersection with
☐ Feet ☐ N ☐ E
☐ Miles ☐ S ☐ W of: ----
11 Speed Limit: 0 0
12 Route No. Suffix 13 Milepost 18 Speed Limit
14 15 16
17 Cross Road Name: -----
19 ☐ To: ☐ Ramp ☐ From:
20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude 22 Longitude

118a 25 | 118b ---- | 119a 02 | 119b ----

101 02 | 102 01 | 103 05 | 104 02 | 105 06

23 Veh No: 1
24 Policy No.: 9893365500 105 1
25 Ins Code: 129
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name Initial Last Name 29 Sex
27 Number and Street 30 Eyes
28 City State Zip
31 State 32 Driver's License No 33 DOB mm dd yy 34 Expires mm yy
35 Owner's First Name Initial Last Name
☐ Same As Driver Walter Rhea
36 Number and Street: 10 Commercial Ave Apt 4k
37 City State Zip: New Brunswick , NJ 08901-1424
38 Make: TOY 39 Model: AVA 40 Color: TN 41 Year: 11 42 Plate No.: ZUD19N 43 State: NJ
44 VIN: 4T1BK3DB5BU372487 45 Expires: 04/17
46 Vehicle Removed To ☐ Driven ☒ Left at Scene ☐ Towed ☐ Impound ☐ Disabled
47 Authority ☒ Owner ☐ Driver ☐ Police

53 Veh No 54 Policy No. 55 Ins Code
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
56 Driver's First Name Initial Last Name 59 Sex
57 Number and Street 60 Eyes
58 City State Zip
61 State 62 Driver's License No 63 DOB mm dd yy 64 Expires mm yy
65 Owner's First Name Initial Last Name
☐ Same As Driver
66 Number and Street
67 City State Zip
68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State
74 VIN 75 Expires
76 Vehicle Removed To ☐ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled
77 Authority ☐ Owner ☐ Driver ☐ Police

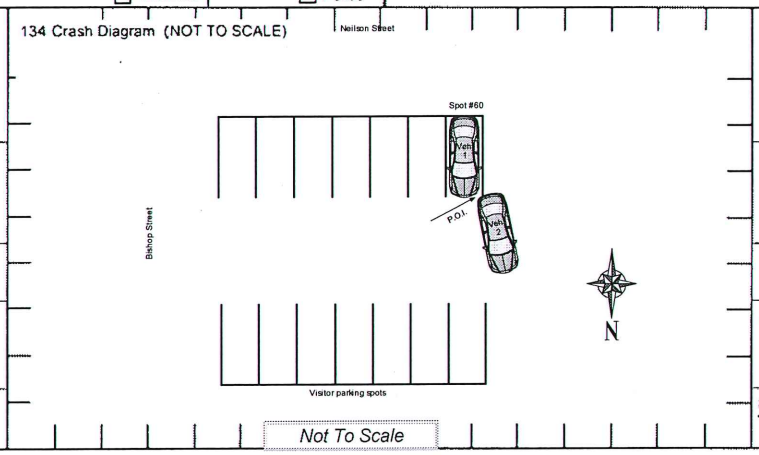
120 ---- | 121 00 | 122 ---- | 123 ---- | 124 10 | 125 00

106 ---- | 107 ----

108 01 | 109 00

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
---

110 01 | 111 00 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 01 | 117 00

126 11 | 127 11 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 28 | 129b ---- | 129c ---- | 129d ----

135 Crash Description

Unoccupied parked vehicle 1, which was parked in spot #60, was struck by unknown vehicle 2. The collision occurred sometime between 7/4/16 at 2130 hours and 7/5/16 at 0853 hours. Damage was observed to the front driver side bumper. It should be noted there was a camera on the building facing the parked vehicle.

On a follow up investigation with the management office, Officer Ramirez and I were able to view the security camera footage. We observed a light colored Toyota Camry with a fin on the truck back out of a visitor spot into unoccupied parked vehicle 1 at 0156 hours on 7/5/16. Officer Ramirez and I were not able to get

130 11 | 131 11

136 Damage To Other Property
--

132 ----

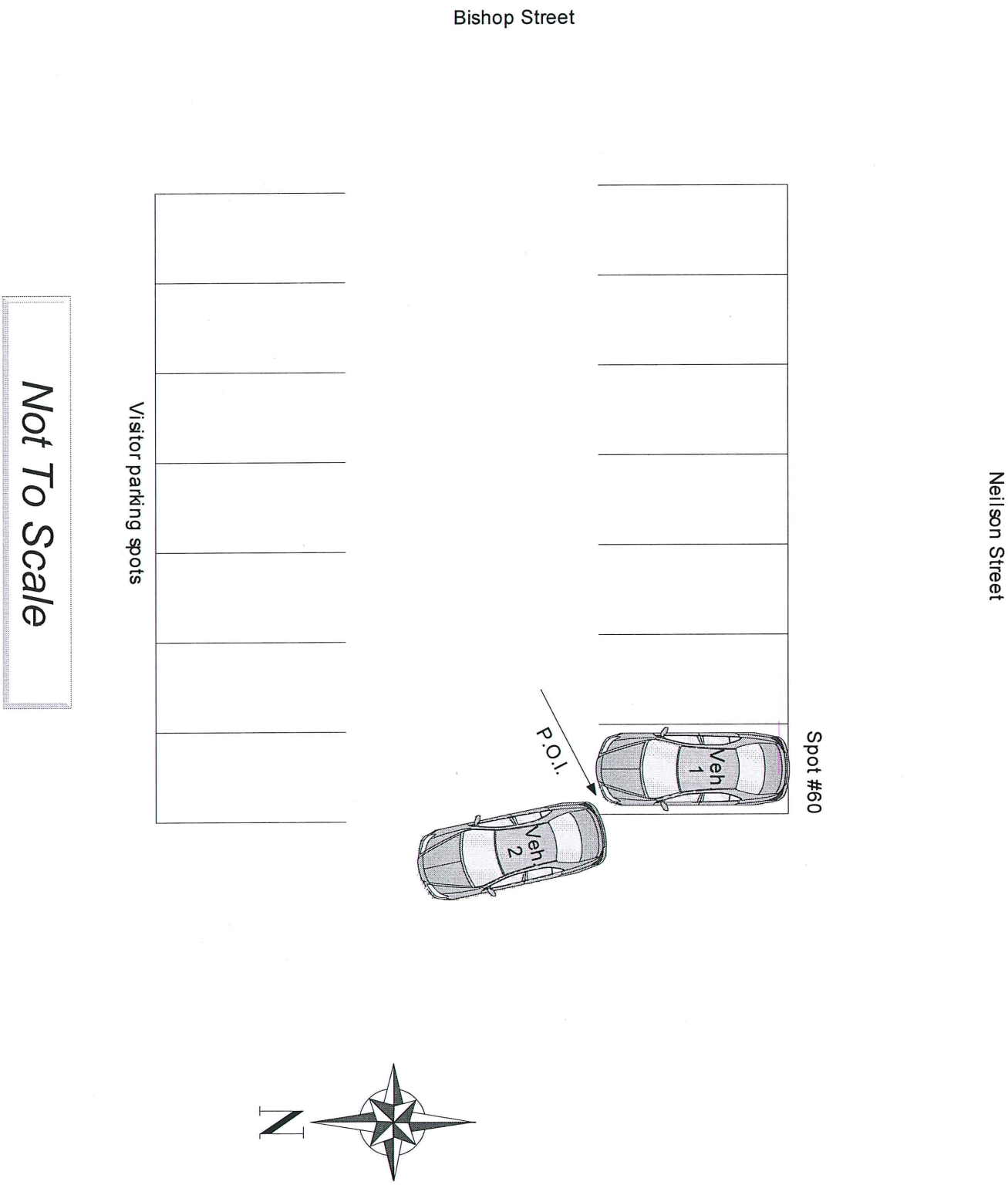
Oper. 137 Charge ☐ Multiple Charges 138 Summons No.
-- --
Oper. 139 Charge ☐ Multiple Charges 140 Summons No.
-- --

133 ----

141 Officer's Signature: PO Jason Lyons 7339
142 Badge No.: 7339
143 Reviewed By Badge No.: 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 Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43663



PO Jason Lyons 7339
Officer's Signature

7339
Badge Number

Page ____ of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	03
97	01
98	01
99	05
100	01
101	02
102	01
103	01
104	02
105	02
106	----
107	----
108	19
109	04
110	02
111	01
112	05
113	----
114	03
115	13
116	01
117	01

1 Case Number: 16-43707

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 05 16

5 Day of Week: Su M T W Th F Sa

6 Time (use 2400 hrs): 12 36

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured:

10 Crash Occurred On: Albany Street (Road Name) Dir

11 Speed Limit:

☒ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: Neilson Street

14 15 16

12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

19 Ramp ☐ To: ☐ From:

20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a	25
118b	
119a	29
119b	
120	01
121	01
122	----
123	----
124	02
125	02
126	11
127	11
128a	26
128b	
128c	
128d	
129a	26
129b	
129c	
129d	
130	04
131	04
132	11
133	11

23 Veh No: 1 | 24 Policy No.: AS2631510084016 | 25 Ins Code: 182

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Samantha | Initial: E | Last Name: Berezanski | 29 Sex: F

27 Number and Street: 269 Essex Street | 30 Eyes: 2

28 City, State, Zip: Stirling, New Jersey 07980

31 State | 32 Driver's License No | 33 DOB (mm dd yy): 12 08 95 | 34 Expires (mm yy)

35 Owner's First Name | Initial | Last Name

☐ Same As Driver: Atlantic Ambulance Corp

36 Number and Street: 120 Dorsa Avenue

37 City, State, Zip: Livingston, New Jersey 07039

38 Make: Ford | 39 Model | 40 Color: Wht | 41 Year: 201 | 42 Plate No.: L530487 | 43 State: NJ

44 VIN: 1FDYR2CM4GKA69027 | 45 Expires: 7/16

46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

47 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

56 Driver's First Name: Marissa | Initial: J | Last Name: Stabile | 59 Sex: F

57 Number and Street: 2 Doe Drive | 60 Eyes: 2

58 City, State, Zip: Hamilton, New Jersey 08620

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 10 09 83 | 64 Expires (mm yy)

65 Owner's First Name | Initial | Last Name

☒ Same As Driver

66 Number and Street

67 City, State, Zip

68 Make: Audi | 69 Model | 70 Color: Wht | 71 Year: 201 | 72 Plate No.: B52ECK | 73 State: NJ

74 VIN: WA1LFAFP7FA014464 | 75 Expires: 3/17

76 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ __ %; ☐ Pending

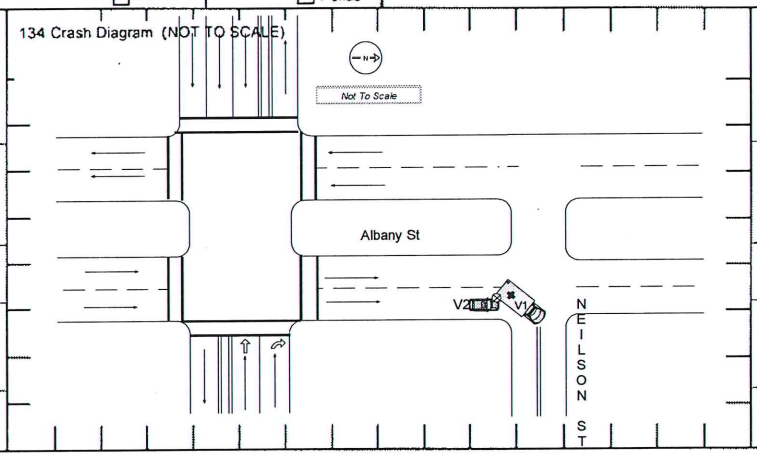
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

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 Mazan 7294 | 142 Badge No. | 143 Reviewed By: 5199 | 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	----	20	F	----	----	1	04	04	----	--------	Berezanski, Samantha-269 Essex Street, Stirling, New Jersey
B	1	03	01	----	20	M	----	----	1	04	04	----	--------	Jose Torrealba-Munoz. 7-23-1995
C	2	01	01	----	32	F	----	----	1	04	04	----	--------	Stabile, Marissa-2 Doe Drive, Hamilton, New Jersey 08620
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43707

(Refer to vehicle by number)

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

135 Crash Description

Both drivers stated the following:

They were driving northbound on Albany Street in the right lane. As they were at the red light, Vehicle #2 manuvered into the bike lane of Albany Street. As Vehicle #1 was attempting to make a right turn onto Neilson Street, so was Vehicle #2. As a result, Vehicle #2 struck Vehicle #1.

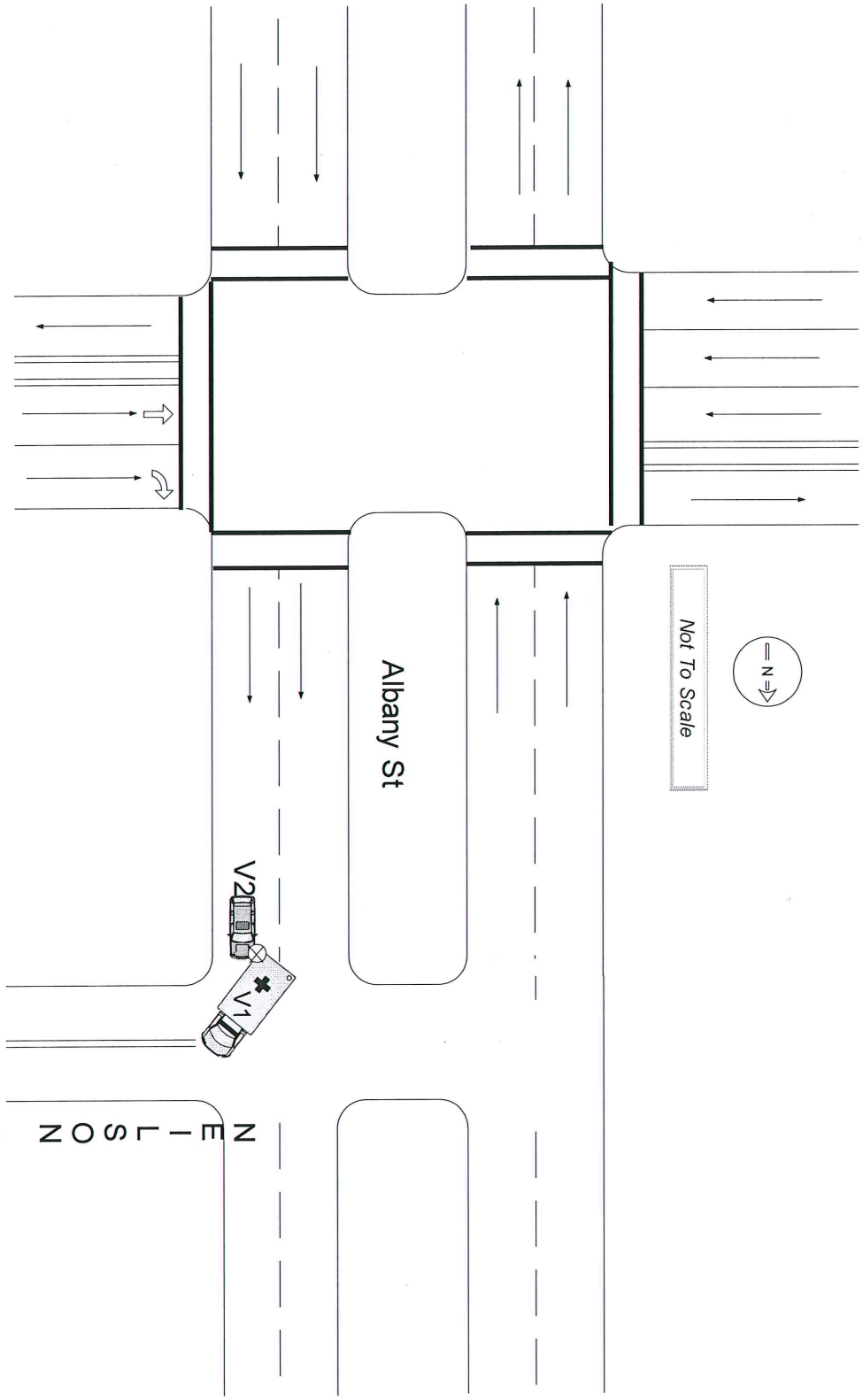
Vehicle #1 sustained minor damage to its rear right side. Vehicle #2 sustained minor damage to its front left bumper. Both parties refused medical attention, and had no complaints of injury.

P.O. D. Mazan 7294

PO Daniel Mazan 7294
Officer's Signature

_____
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-43707



NJTR-1B (rev. 07/2005)

PO Daniel Mazan 7294
Officer's Signature

Badge Number

Page 1 of 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 04 | 97 01 | 98 01 | 99 09 | 100 05

1 Case Number 16-43724

2 Police Dept of New Brunswick Code 01

3 Station/Precinct

4 Date of Crash mm 07 dd 05 yy 16

5 Day of Week Su M Tu W Th F Sa

6 Time (use 2400 hrs) 14 29

7 Municipality Code 1 2 1 4

8 Total Killed - -

9 Total Injured - -

10 Crash Occurred On 17 US Highway 1 SB (Road Name) (Dir)

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

11 Speed Limit 1 5

12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

19 Ramp ☐ To: ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a 25 | 118b 25 | 119a 02 | 119b 02

101 02

23 Veh No 1 | 24 Policy No. 4349-71-17-23 | 25 Ins Code 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

53 Veh No 2 | 54 Policy No. AOU-238-647763-7065 | 55 Ins Code 090

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

120 01

102 01

26 Driver's First Name Sukanya Initial Last Name Kumar | 29 Sex F

56 Driver's First Name Rudolph Initial Last Name Sutton | 59 Sex M

121 01

103 01

27 Number and Street 67 Patton St. | 30 Eyes 1

57 Number and Street 406 Holly Dr | 60 Eyes 2

104 02

28 City Iselin NJ 08830 State Zip

58 City Perth Amboy, NJ 08861-3378 State Zip

105 01

31 State | 32 Driver's License No | 33 DOB mm 12 dd 03 yy 96 | 34 Expires mm yy

61 State | 62 Driver's License No | 63 DOB mm 01 dd 07 yy 60 | 64 Expires mm yy

122 ----

35 Owner's First Name ☐ Same As Driver Guru Initial S Last Name Kumar

65 Owner's First Name ☒ Same As Driver Initial Last Name

123 ----

36 Number and Street 67 Patton St.

66 Number and Street

124 02

106 ----

37 City Iselin, NJ 08830 State Zip

67 City State Zip

125 01

107 ----

38 Make Hyundai | 39 Model ela | 40 Color Blu | 41 Year 200 | 42 Plate No. SUREV | 43 State NJ

68 Make VOL | 69 Model 944 | 70 Color BK | 71 Year 91 | 72 Plate No. EZ199Z | 73 State NJ

108 01

44 VIN KMHDN45D13U592782 | 45 Expires /7/16

74 VIN YV1KA8744M0007305 | 75 Expires 07/16

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

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0.__ __ % ☐ Pending

78 Alcohol/Drug Test

Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0.__ __ % ☐ Pending

126 08 | 127 09

111 01

112 ----

113 ----

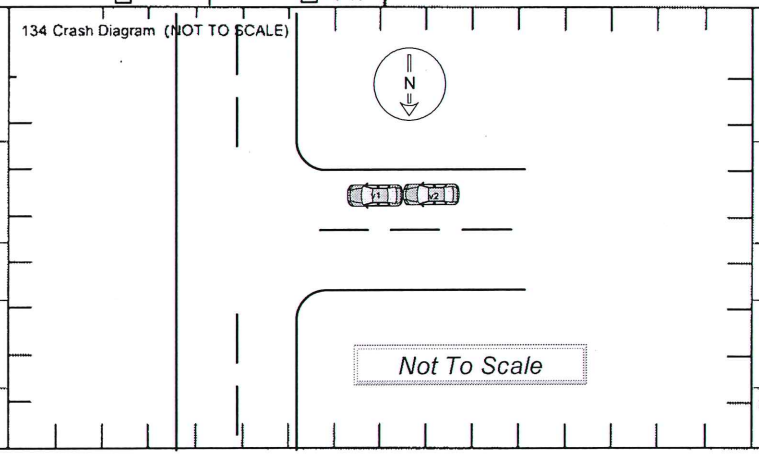
114 ----

115 ----

116 02

117 02

134 Crash Diagram (NOT TO SCALE)



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

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

128a 26 | 128b ---- | 128c ---- | 128d ----

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

129a 26 | 129b ---- | 129c ---- | 129d ----

52 Carrier name

82 Carrier name

135 Crash Description

Driver of vehicle 1 reports being rear ended by vehicle 2 at the end of the Lowes ramp that leads onto Rt. 1. Driver of vehicle 2 reports striking the rear of vehicle 1 at the end of the ramp. I observed a few scratches on the bumper of vehicle 1.

130 06 | 131 06

136 Damage To Other Property

132 12

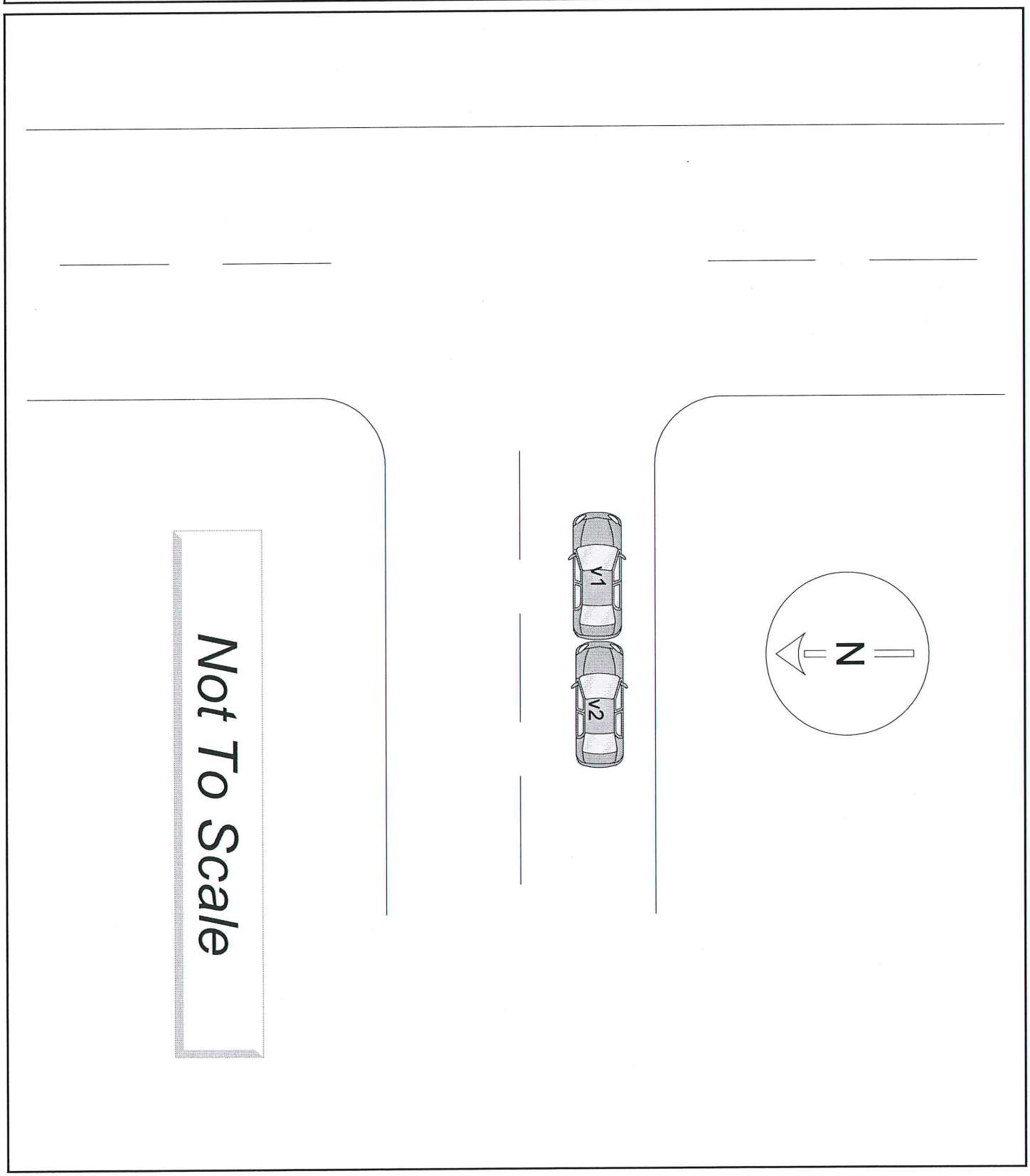
Oper. | 137 Charge ☐ Multiple Charges | 138 Summons No. | Oper. | 139 Charge ☐ Multiple Charges | 140 Summons No.

133 12

141 Officer's Signature PO Michael Yacuk 7283 | 142 Badge No. 7283 | 143 Reviewed By CRADIC/5157 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	----	19	F	----	----	---	09	04	----	--------	Kumar, Sukanya-67 Patton St., Iselin NJ 08830
B	2	01	01	----	56	M	----	----	---	09	04	----	--------	Sutton, Rudolph-406 Holly Dr, Perth Amboy, NJ 08861-3378
C	2	03	01	----	11	M	----	----	---	09	04	----	--------	
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43724



NJTR-1B (rev. 07/2005)

PO Michael Yacuk 7283
Officer's Signature

7283
Badge Number

Page 1 of 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 04 | 97 01 | 98 01 | 99 07 | 100 02 | 101 02 | 102 01 | 103 01 | 104 02 | 105 01 | 106 ---- | 107 ---- | 108 04 | 109 01 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 03 | 117 03

1 Case Number: 16-43728

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 05 16

5 Day of Week: Su M T W Th F Sa — O

6 Time (use 2400 hrs): 14 52

7 Municipality Code: 1 2 1 4

8 Total Killed: - -

9 Total Injured: 0 1

10 Crash Occurred On: Burnet Street (Road Name) Dir

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: State Route 18 NB

11 Speed Limit: 2 5

12 Route No. Suffix 13 Milepost 18 Speed Limit

14 15 16

17 Cross Road Name

19 Ramp ☐ To: ☐ From:

20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude . 22 Longitude .

118a 25 | 118b 25 | 119a 02 | 119b 02 | 120 01 | 121 01 | 122 ---- | 123 ---- | 124 12 | 125 12 | 126 09 | 127 09 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 26 | 129b ---- | 129c ---- | 129d ---- | 130 06 | 131 06 | 132 12 | 133 12

23 Veh No: 1 | 24 Policy No.: 910086477 | 25 Ins Code: 134

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Calver | Initial: G | Last Name: Palmer | 29 Sex: M

27 Number and Street: 10a amboy st. | 30 Eyes: 2

28 City: vauxhall nj 07088 State Zip

31 State | 32 Driver's License No | 33 DOB (mm dd yy): 11 06 59 | 34 Expires (mm yy)

35 Owner's First Name Initial Last Name ☒ Same As Driver

36 Number and Street

37 City State Zip

38 Make: Nissan | 39 Model: rogue | 40 Color: Wht | 41 Year: 201 | 42 Plate No.: L536565 | 43 State: NJ

44 VIN: JN8AS5MT1EW618775 | 45 Expires: /7/16

46 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 47 Authority ☐ Owner ☐ Driver ☒ Police

53 Veh No: 2 | 54 Policy No.: 910189092 | 55 Ins Code: 135

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: freddie | Initial: L | Last Name: Epps | 59 Sex: M

57 Number and Street: 1200 south wood ave. | 60 Eyes: 2

58 City: linden nj 07036 State Zip

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 08 17 89 | 64 Expires (mm yy)

65 Owner's First Name Initial Last Name ☒ Same As Driver

66 Number and Street

67 City State Zip

68 Make: Buick | 69 Model: rm | 70 Color: Blu | 71 Year: 199 | 72 Plate No.: W36GRM | 73 State: NJ

74 VIN: 1G4BNS2P35R414899 | 75 Expires: /5/17

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

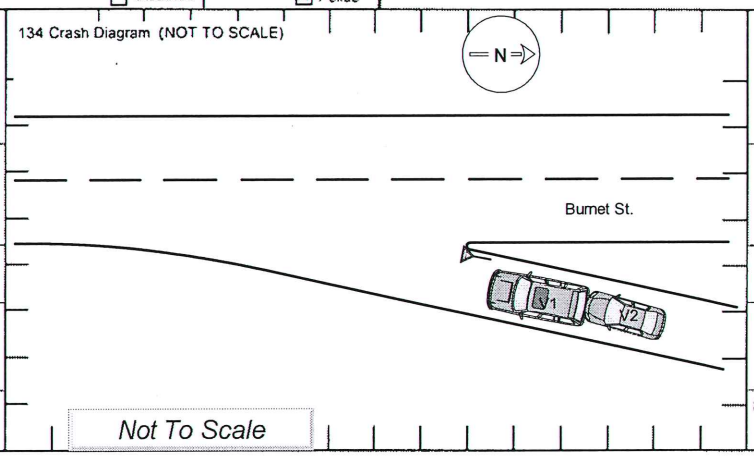
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

50 Carrier No. ☐ USDOT ☐ Other *

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

52 Carrier name

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

Driver of vehicle 1 reports that he was attempting to yield into traffic when he was struck in the rear by vehicle 2. Driver of vehicle 2 reports that vehicle 1 braked hard and and stopped short instead of yielding, causing vehicle 2 to strike vehicle 1.

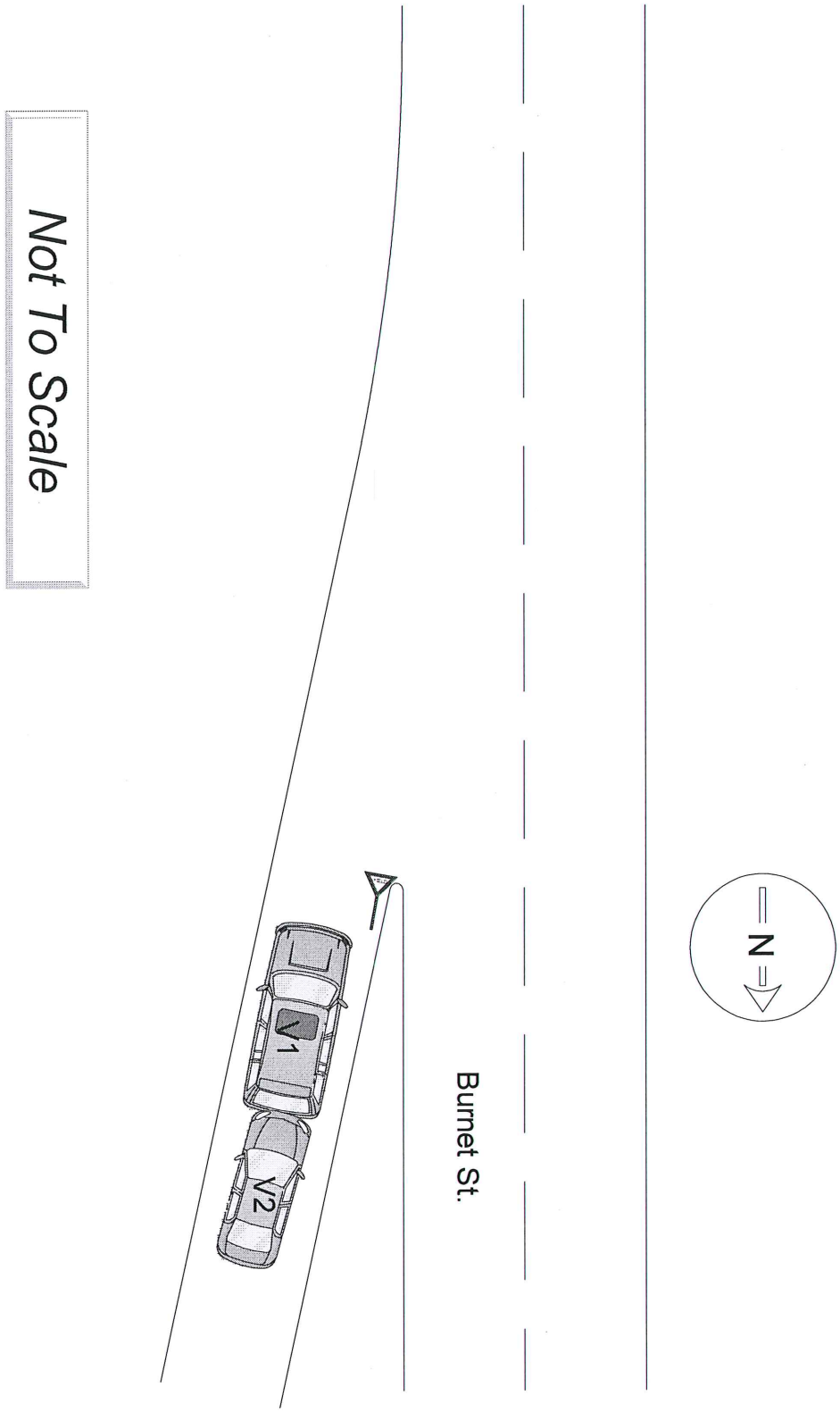
136 Damage To Other Property

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

141 Officer's Signature: PO Michael Yacuk 7283 | 142 Badge No.: 7283 | 143 Reviewed By: 5199 | 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	56	M	06	08	1	09	04	----	--------	Palmer, Calver-10a amboy st., vauxhall nj 07088
B	2	01	01	----	26	M	----	----	---	09	04	----	--------	Epps, freddie-1200 south wood ave., linden nj 07036
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-43728



PO Michael Yacuk 7283
Officer's Signature

7283
Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	07
100	01
101	02
102	01
103	01
104	02
105	08
106	02
107	02
108	01
109	01
110	01
111	01
112	----
113	----
114	12
115	12
116	01
117	04

1 Case Number 16-43754

2 Police Dept of New Brunswick Code 0 1

3 Station/Precinct

4 Date of Crash mm dd yy: 07 05 16

5 Day of Week: Su M Tu W Th F Sa — 0

6 Time (use 2400 hrs): 17 17

7 Municipality Code: 1 2 1 4

8 Total Killed: 0

9 Total Injured: 0

10 Crash Occurred On 175 Livingston Avenue (Road Name) Dir

11 Speed Limit 2 5

12 Route No. Suffix 13 Milepost 18 Speed Limit

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

14 15 16

17 Cross Road Name

19 ☐ To: Ramp ☐ From:

20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude . 22 Longitude .

118a	25
118b	----
119a	10
119b	----
120	01
121	00
122	----
123	----
124	08
125	13
126	11
127	10
128a	26
128b	----
128c	----
128d	----
129a	26
129b	----
129c	----
129d	----
130	03
131	03
132	06
133	06

Vehicle 1

23 Veh No 1

24 Policy No. 02956 46 70R 7101 7

25 Ins Code 201

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name Alexis Initial T Last Name Gillie

29 Sex F

27 Number and Street 109 Somerset Street Apt 3B

30 Eyes 2

28 City New Brunswick, NJ 08901 State Zip

31 State 32 Driver's License No

33 DOB mm dd yy 12 18 93

34 Expires mm yy

35 Owner's First Name Initial Last Name ☒ Same As Driver

36 Number and Street

37 City State Zip

38 Make TOYOTA 39 Model COR 40 Color RED 41 Year 200 42 Plate No. T66GUA 43 State NJ

44 VIN JTDBR32E470113503

45 Expires 6/17

46 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

47 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

Vehicle 2

53 Veh No 2

54 Policy No. 910586593

55 Ins Code 134

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name Kevindra Initial Last Name Kampta

59 Sex M

57 Number and Street 175 Livingston Ave. Apt 3

60 Eyes 1

58 City New Brunswick, NJ 08901 State Zip

61 State 62 Driver's License No

63 DOB mm dd yy 08 27 96

64 Expires mm yy

65 Owner's First Name Initial Last Name ☒ Same As Driver

66 Number and Street

67 City State Zip

68 Make HONDA 69 Model CIVIC 70 Color GY 71 Year 201 72 Plate No. Y91GSR 73 State NJ

74 VIN 2HGFA1F8XAH523521

75 Expires 6/17

76 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

77 Authority ☐ Owner ☐ Driver ☒ Police

78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Unne Results: 0.__ __ % ☐ Pending

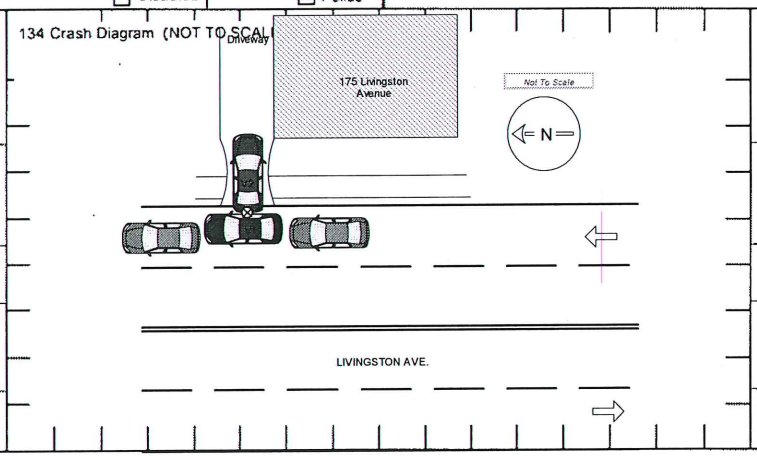
79 Hazardous Material On Board ☐ Spill ☐ Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

134 Crash Diagram (NOT TO SCALE)



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. 7335

143 Reviewed By 5274 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	F	----	----	1	04	04	----	--------	Gillie, Alexis-109 Somerset Street Apt 3B, New Brunswick, NJ
B	1	02	01	----	21	F	----	----	1	04	04	----	--------	Oliva, Nanishi-
C	1	06	01	----	22	F	----	----	1	04	04	----	--------	Uzzell, Taylor-180 Goodwin Ave, Newark, NJ 07112-1858
D	2	01	01	----	19	M	----	----	1	04	04	----	--------	Kampta, Kevindra-175 Livingston Ave. Apt 3, New Brunswick,
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43754

(Refer to vehicle by number)

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

135 Crash Description

On 7/5/16 at 17:17 the undersigned officer responded to the intersection of Livingston Avenue and Baldwin Street for a reported motor vehicle accident.

Upon my arrival I spoke with the occupants of both vehicles. The occupants involved had no complaints of pain and stated that they did not need any medical attention at the time.

V1 was stopped in traffic and was traveling north on Livingston Avenue. V2 was backing out of 175 Livingston when it collided with the passenger side door of V1. V1 sustained minor damage to the passenger side door and V2 sustained minor damage to the rear bumper. V1 and V2 were both able to be driven from the scene.

Both the drivers of V1 and V2 given a case number for the incident and were explained how to obtain a copy of the report.

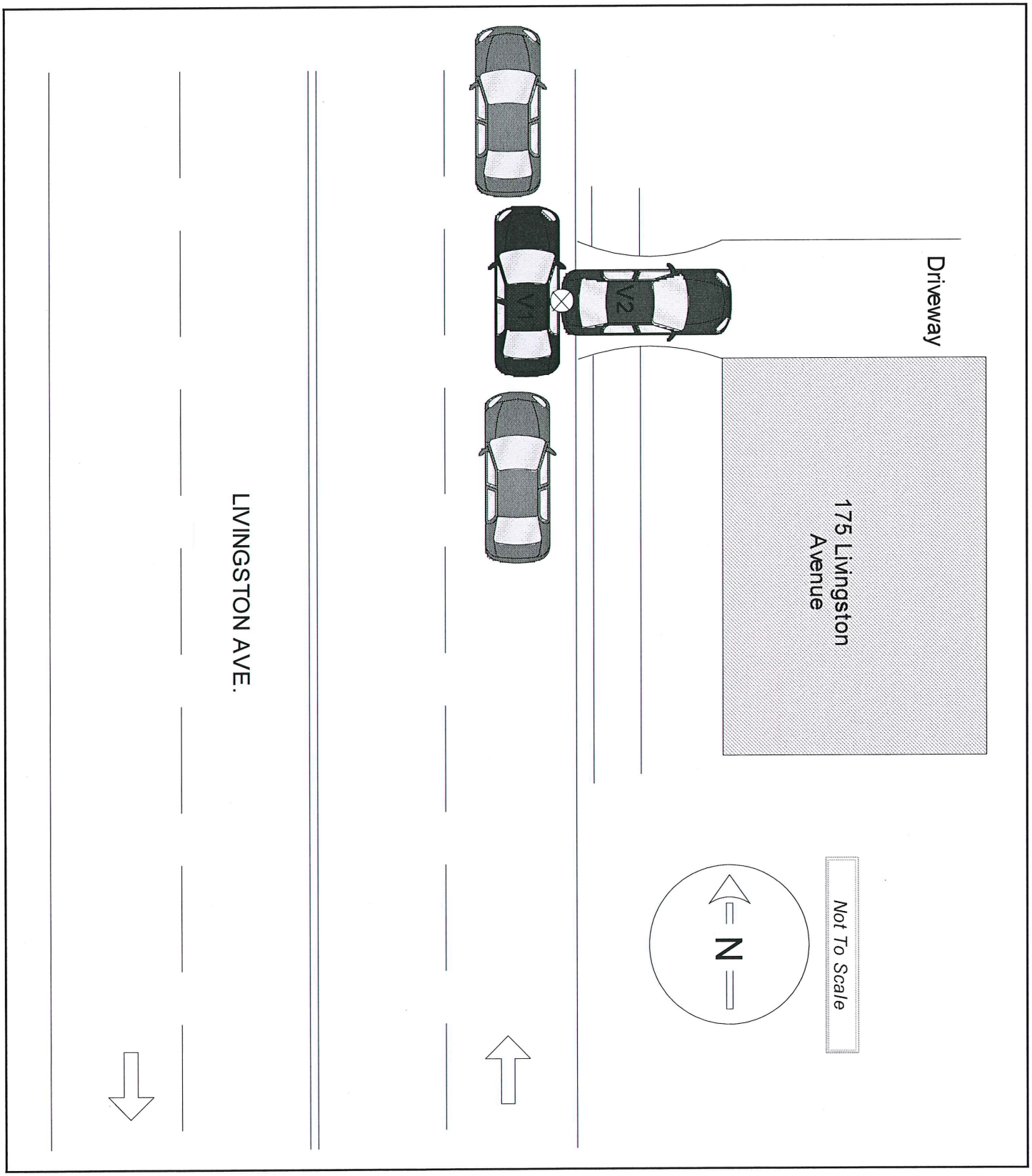
PO Richard Reed 7335

PO Richard Reed 7335
Officer's Signature

7335
Badge Number

Page___0f___

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43754



NJTR-1B (rev. 07/2005)

PO Richard Reed 7335
Officer's Signature

7335
Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02 | 102 01 | 103 01 | 104 02 | 105 08 | 106 02 | 107 02 | 108 01 | 109 01 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 12 | 115 12 | 116 01 | 117 04

1 Case Number: 16-43754

2 Police Dept of: New Brunswick — Code: 0 1

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 05 16

5 Day of Week: Su M T W Th F Sa — O

6 Time (use 2400 hrs): 17 17

7 Municipality Code: 1 2 1 4

8 Total Killed: 0

9 Total Injured: 0

10 Crash Occurred On: 175 Livingston Avenue (Road Name) — Dir

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

11 Speed Limit: 2 5

12 Route No. — Suffix — 13 Milepost — 18 Speed Limit

17 Cross Road Name

19 Ramp ☐ To: ☐ From: — 20 Route/Name — ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude — 22 Longitude

118a 25 | 118b ---- | 119a 10 | 119b ---- | 120 01 | 121 00 | 122 ---- | 123 ---- | 124 08 | 125 13 | 126 11 | 127 10 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 26 | 129b ---- | 129c ---- | 129d ---- | 130 03 | 131 03 | 132 06 | 133 06

Vehicle 1

23 Veh No: 1 — 24 Policy No.: 02956 46 70R 7101 7 — 25 Ins Code: 201

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Alexis — Initial: T — Last Name: Gillie — 29 Sex: F

27 Number and Street: 109 Somerset Street Apt 3B — 30 Eyes: 2

28 City: New Brunswick, NJ 08901 — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 12 18 93 — 34 Expires (mm yy)

35 Owner's First Name — Initial — Last Name: ☒ Same As Driver

36 Number and Street

37 City — State — Zip

38 Make: TOYOTA — 39 Model: COR — 40 Color: RED — 41 Year: 200 — 42 Plate No.: T66GUA — 43 State: NJ

44 VIN: JTDBR32E470113503 — 45 Expires: 6/17

46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — 47 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

Vehicle 2

53 Veh No: 2 — 54 Policy No.: 910586593 — 55 Ins Code: 134

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: Kevindra — Initial — Last Name: Kampta — 59 Sex: M

57 Number and Street: 175 Livingston Ave. Apt 3 — 60 Eyes: 1

58 City: New Brunswick, NJ 08901 — State — Zip

61 State — 62 Driver's License No — 63 DOB (mm dd yy): 08 27 96 — 64 Expires (mm yy)

65 Owner's First Name — Initial — Last Name: ☒ Same As Driver

66 Number and Street

67 City — State — Zip

68 Make: HONDA — 69 Model: CIVIC — 70 Color: GY — 71 Year: 201 — 72 Plate No.: Y91GSR — 73 State: NJ

74 VIN: 2HGFA1F8XAH523521 — 75 Expires: 6/17

76 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — 77 Authority: ☐ Owner ☐ Driver ☒ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0.__ __ % ☐ Pending

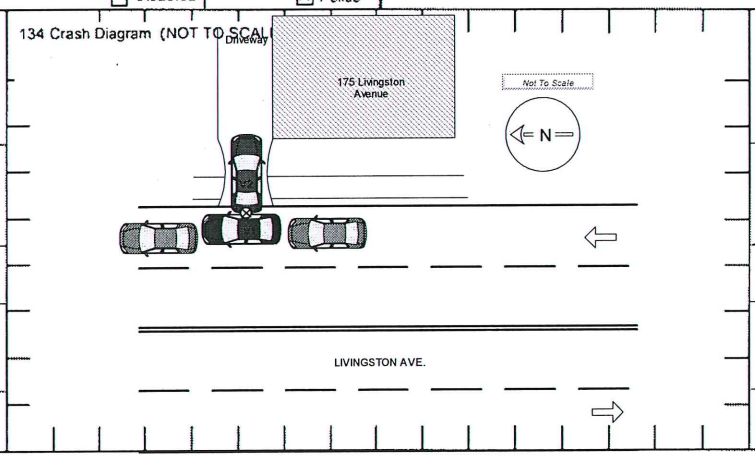
79 Hazardous Material: On Board ☐ — Spill ☐ — Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

134 Crash Diagram (NOT TO SCALE)



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.: 7335 — 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	F	----	----	1	04	04	----	--------	Gillie, Alexis-109 Somerset Street Apt 3B, New Brunswick, NJ
B	1	02	01	----	21	F	----	----	1	04	04	----	--------	Oliva, Nanishi-
C	1	06	01	----	22	F	----	----	1	04	04	----	--------	Uzzell, Taylor-180 Goodwin Ave, Newark, NJ 07112-1858
D	2	01	01	----	19	M	----	----	1	04	04	----	--------	Kampta, Kevindra-175 Livingston Ave. Apt 3, New Brunswick,
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43754

(Refer to vehicle by number)

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

135 Crash Description

On 7/5/16 at 17:17 the undersigned officer responded to the intersection of Livingston Avenue and Baldwin Street for a reported motor vehicle accident.

Upon my arrival I spoke with the occupants of both vehicles. The occupants involved had no complaints of pain and stated that they did not need any medical attention at the time.

V1 was stopped in traffic and was traveling north on Livingston Avenue. V2 was backing out of 175 Livingston when it collided with the passenger side door of V1. V1 sustained minor damage to the passenger side door and V2 sustained minor damage to the rear bumper. V1 and V2 were both able to be driven from the scene.

Both the drivers of V1 and V2 given a case number for the incident and were explained how to obtain a copy of the report.

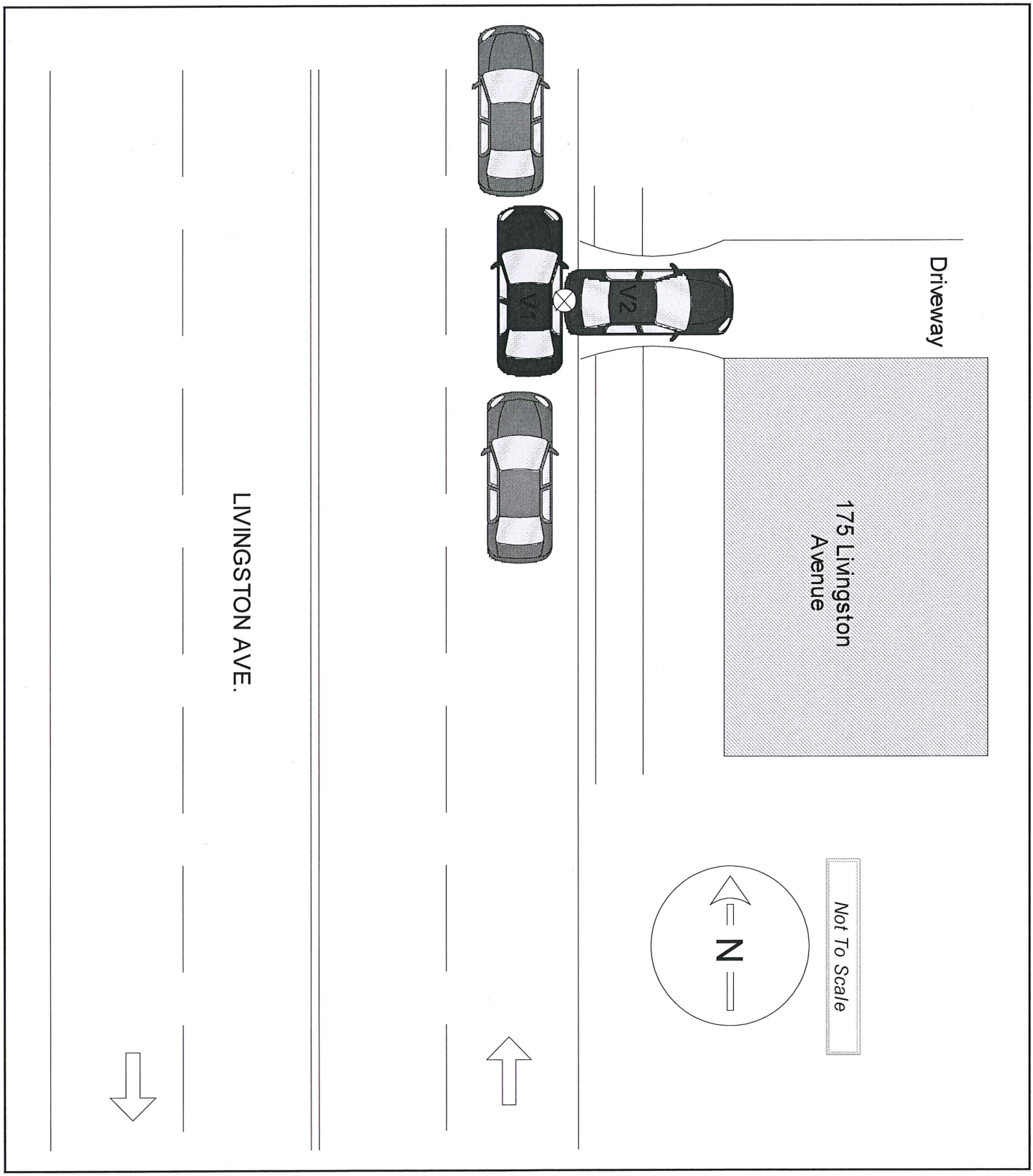
PO Richard Reed 7335

PO Richard Reed 7335
Officer's Signature

7335
Badge Number

Page___0f___

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43754



NJTR-1B (rev. 07/2005)

PO Richard Reed 7335
Officer's Signature

7335
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02 | 102 01 | 103 01 | 104 04 | 105 06 | 106 02 | 107 02 | 108 01 | 109 02 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 13 | 115 13 | 116 01 | 117 ----

1 Case Number: 16-43793

2 Police Dept of: New Brunswick — Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 05 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 2024

7 Municipality Code: 1214

8 Total Killed: 0

9 Total Injured: 0

10 Crash Occurred On: 260 Handy Street (Road Name) Dir

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

11 Speed Limit: 25

12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

19 ☐ To: ☐ Ramp ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a 02 | 118b ---- | 119a 25 | 119b ---- | 120 02 | 121 ---- | 122 ---- | 123 ---- | 124 01 | 125 10 | 126 11 | 127 11 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 28 | 129b ---- | 129c ---- | 129d ---- | 130 01 | 131 02 | 132 09 | 133 09

Driver 1

23 Veh No: 1 — 24 Policy No.: 00 — 25 Ins Code: 00

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: DENNIS — Initial: U — Last Name: RIVERA — 29 Sex: M

27 Number and Street: 88 ELIZABETH AVENUE — 30 Eyes: 0

28 City: SOMERSET — State: NJ — Zip: 08873

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 11 04 95 — 34 Expires (mm yy)

35 Owner's First Name: Jose — Initial — Last Name: Portillo — ☐ Same As Driver

36 Number and Street: 904 West 4th Street

37 City: Plainfield, NJ 07063-1322 — State — Zip

38 Make: HON — 39 Model: CIV — 40 Color: WT — 41 Year: 92 — 42 Plate No.: S56FFX — 43 State: NJ

44 VIN: 2HGEH2346NH548274 — 45 Expires: 07/16

46 Vehicle Removed To: ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled — GUARANTEED

47 Authority: ☐ Owner ☐ Driver ☒ Police

48 Alcohol/Drug Test: Given: ☐ No ☒ Yes ☐ Refused — Type: ☒ Breath ☐ Blood ☐ Urine — Results: 0.17 % ☐ 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

Driver 2

53 Veh No: 2 — 54 Policy No.: 00 — 55 Ins Code: 00

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name — Initial — Last Name — 59 Sex

57 Number and Street — 60 Eyes

58 City — State — Zip

61 State — 62 Driver's License No — 63 DOB (mm dd yy) — 64 Expires (mm yy)

65 Owner's First Name: ELIZABETH — Initial — Last Name: IRIZARRY — ☐ Same As Driver

66 Number and Street: 722 OLDHAM RD

67 City: FREDERICKSBURG — State: VA — Zip: 224088757

68 Make: TOY — 69 Model: VAN — 70 Color: WH — 71 Year: 200 — 72 Plate No.: XVE2453 — 73 State: VA

74 VIN: 2T1FF28P72C597324 — 75 Expires: 08/14

76 Vehicle Removed To: ☐ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

77 Authority: ☐ Owner ☐ Driver ☐ Police

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

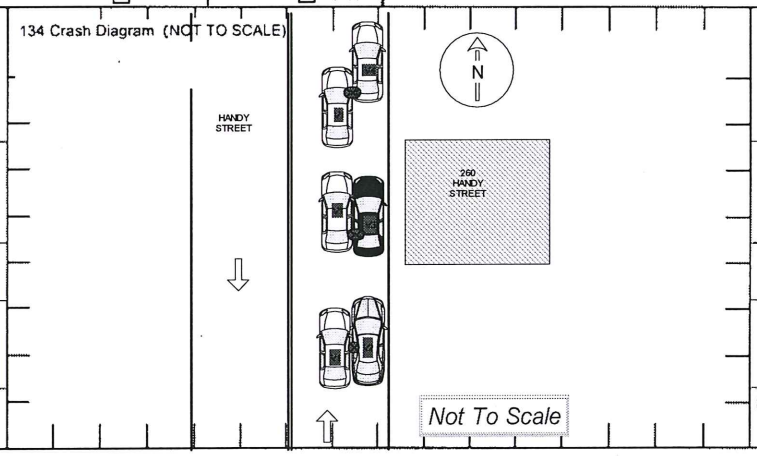
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

136 Damage To Other Property: N/A

Oper.	137 Charge	138 Summons No.	Oper.	139 Charge	140 Summons No.
1	☒ Multiple Charges: UNLICENSED DRIVER, DL	Q375984		☐ Multiple Charges	

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	----	20	M	----	----	1	09	09	----	--------	RIVERA, DENNIS-488 ELIZABETH AVENUE SOMERSET NJ
B	1	03	01	----			----	----	1	09	09	----	--------	
C	2	----	----	----	-	----	----	----	---	----	----	----	--------	
D	3	----	----	----	-	----	----	----	---	----	----	----	--------	
E	4	01	01	----	51	F	----	----	1	09	09	----	--------	Hernandez, Roxana-125 Burns Street, Somerset, NJ 08873

Page _____ of _____

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43793

(Refer to vehicle by number)

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

135 Crash Description

On 07/05/2016 at 20:24 hours officer Puccio and I were dispatched to 260 Handy Street for a motor vehicle crash.

Upon arrival we checked for injuries of all the parties that were involved. All parties stated they were not injured and refused medical treatment. We met with a female driver of vehicle 4 (NJ ZNL61C). The female driver was identified as Roxana Hernandez. Hernandez stated that she was parking her vehicle on the roadway of handy Street. Hernadez told us that as she was parking, her vehicle was struck by vehicle 1 on the rear passenger side. Hernandez advised us that the driver of vehicle 1 attempted to leave the scene on foot but changed his mind and returned.

The driver of vehicle 1 (NJ S56FFX) was identified as Dennis Rivera. Rivera stated that he was not driving the vehicle. Riviera informed us he was in the vehicle fixing the steering wheel. The passenger in vehicle 1 was identified as Nadializ Ruiz. Rivera drivers license is currently suspended.

The registered owner of vehicle 3 (NJ KNZ59F) was identified as Edwin Reyes. Reyes advised us that his vehicle was parked on Handy Street. Reyes stated that vehicle 1 struck vehicle 2 (VA XVF2453) then struck his vehicle. After vehicle one struck Reyes vehicle it struck vehicle 4. We attempted to locate the owner of vehicle 2 but we were unsucessful.

Based on our investigation we find that vehicle one, driven by Dennis Rivera was at fault. Rivera was driving the vehicle while intoxicated. Rivera struck vehicle 2 which was parked. Rivera then struck vehicle 3 which was also parked. Rivera then struck vehicle 4 as vehicle 4 was parking on the side of the road. Rivera then attempted to flee the scene but changed his mind after being confronted by the other parties involved.

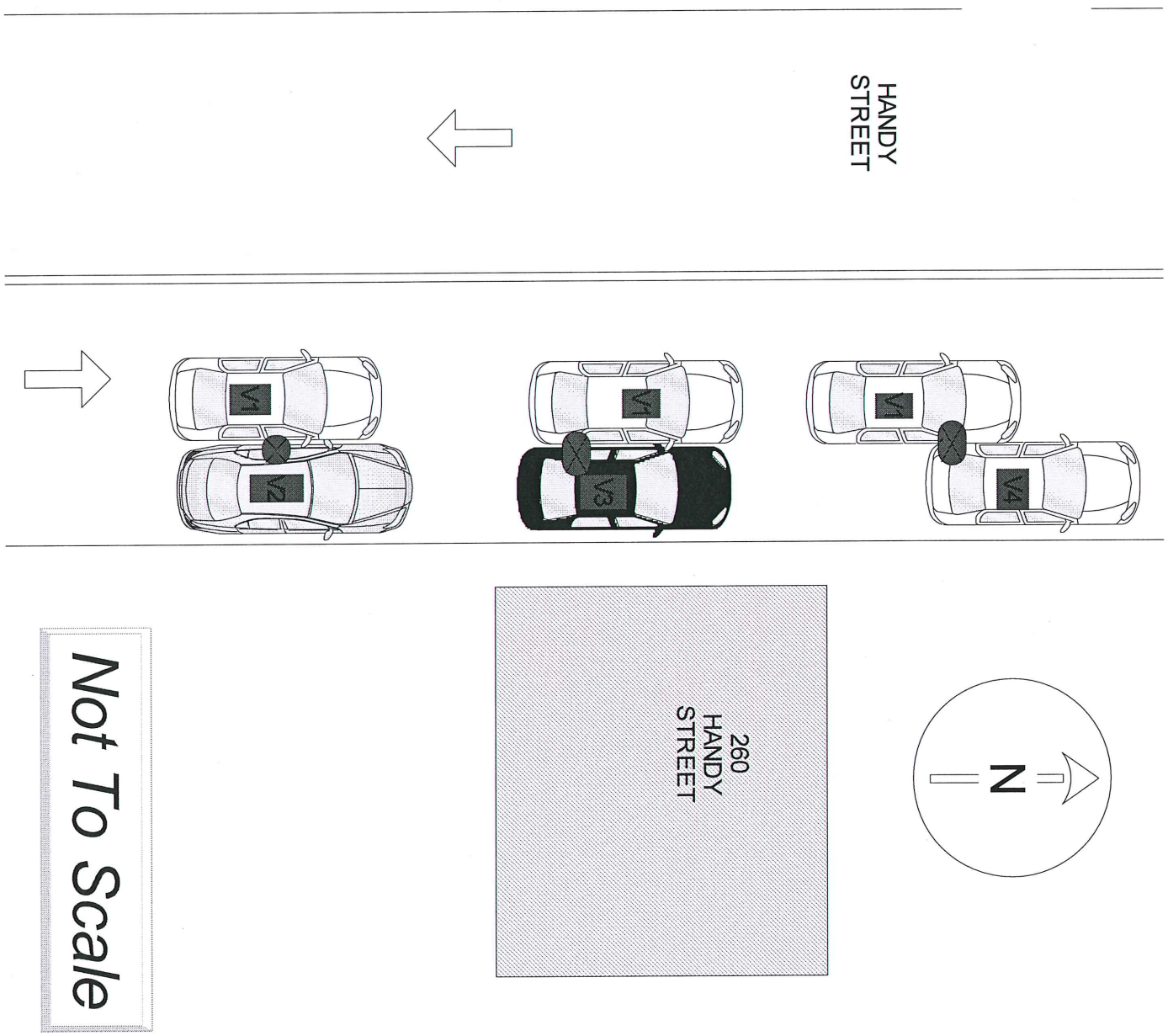
P.O. Miller 7338

PO Justin Miller 7338
Officer's Signature

Badge Number

NJTR-1A (rev. 07/2005)

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43793



NJTR-1B (rev. 07/2005)

PO Justin Miller 7338
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

Page ____ of ____ ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-43793
2 Police Dept of: New Brunswick Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 07 05 16
5 Day of Week: Su M Tu W Th F Sa
6 Time (use 2400 hrs): 2024
7 Municipality Code: 1214
8 Total Killed:
9 Total Injured:
10 Crash Occurred On: 260 Handy Street (Road Name) Dir
11 Speed Limit:
12 Route No. Suffix 13 Milepost
14 ☐ At Intersection with ☐ Feet ☐ Miles 15 ☐ N ☐ E ☐ S ☐ W of: 16
17 Cross Road Name
18 Speed Limit
19 ☐ To: ☐ Ramp ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude 22 Longitude

Veh No	Policy No.	Ins Code	Veh No	Policy No.	Ins Code
23: 3	24: 903417336	25: 134	53: 4	54: 191625420	55: 003
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run			☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run		

Driver	Sex	Eyes	Number and Street	City, State, Zip
26 Driver's First Name / Initial / Last Name	29 Sex	30 Eyes	27 Number and Street	28 City / State / Zip
56 Roxana / Hernandez	59 F	60 1	57 125 Burns Street	58 Somerset, NJ 08873-2149

Driver's License	State	DOB (mm dd yy)	Expires (mm yy)
31 State / 32 Driver's License No		33	34
61 State / 62 Driver's License No		63: 08 18 64	64

Owner	Number and Street	City, State, Zip
35 Owner's First Name / Initial / Last Name (☐ Same As Driver): Edwin J Reyes	36 260 Handy St. Apt#1	37 New Brunswick, NJ 08901-2944
65 Owner's First Name / Initial / Last Name (☐ Same As Driver): HERNANDEZ,ADALBERTO HERNANDEZ	66 125 Burns CT. Somerset	67 NJ 08873

Vehicle	Make	Model	Color	Year	Plate No.	State	VIN	Expires
38 / 68	CHE / TOY	39 CAV / 69 COR	40 BL / 70 WT	41 200 / 71 201	42 KNZ59E / 72 ZNL61C	43 NJ / 73 NJ	44 1G1JC12F237214348	45 09/16
							74 2T1BU4EE1AC347823	75 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: 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

136 Damage To Other Property

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

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														
B														
C														
D														
E														

Field	Value
96	05
97	01
98	01
99	07
100	01
101	02
102	01
103	01
104	04
105	06
106	02
107	02
108	01
109	01
110	01
111	01
112	----
113	----
114	13
115	13
116	----
117	01
118a	25
118b	----
119a	25
119b	----
120	----
121	01
122	----
123	----
124	10
125	09
126	11
127	11
128a	28
128b	----
128c	----
128d	----
129a	26
129b	----
129c	----
129d	01
130	08
131	09
132	07
133	08

Page ____ of ____ ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02 | 102 01 | 103 01 | 104 02 | 105 07 | 106 ---- | 107 ---- | 108 01 | 109 01 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 01 | 117 02

1 Case Number 16-43925

2 Police Dept of New Brunswick Code 0 1

3 Station/Precinct

4 Date of Crash mm dd yy: 07 06 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 10 17

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: Livingston Avenue (Road Name) Dir

☒ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) of: Comstock Street

11 Speed Limit

12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

19 ☐ To: Ramp ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

118a 02 | 118b | 119a 25 | 119b | 120 01 | 121 01 | 122 ---- | 123 ---- | 124 05 | 125 03

23 Veh No 1 | 24 Policy No. TCA00001015470 | 25 Ins Code 632

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Howard | Initial: S | Last Name: Gaber | 29 Sex: M

27 Number and Street: 17 Exeter Street | 30 Eyes: 4

28 City: Old Bridge, NJ 08857-2237 State Zip

31 State | 32 Driver's License No | 33 DOB mm dd yy: 10 12 64 | 34 Expires mm yy

35 Owner's First Name: ☒ Same As Driver Howard | Initial: S | Last Name: Gaber

36 Number and Street: 17 Exeter Street

37 City: Old Bridge, NJ 08857-2237 State Zip

38 Make: TOYOTA | 39 Model: CORA | 40 Color: ORA | 41 Year: 201 | 42 Plate No.: YHY24T | 43 State: NJ

44 VIN: 2T1BU4EE0DC089296 | 45 Expires: 10/16

46 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 47 Authority ☒ Owner ☐ Driver ☐ Police

53 Veh No 2 | 54 Policy No. 4345 31 61 62 | 55 Ins Code 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: Anthony | Initial: J | Last Name: Capece | 59 Sex: M

57 Number and Street: 139 Hill Street apt. 2 | 60 Eyes: 2

58 City: Highland Park, NJ 08904-2155 State Zip

61 State | 62 Driver's License No | 63 DOB mm dd yy: 06 30 87 | 64 Expires mm yy

65 Owner's First Name: ☐ Same As Driver Anthony | Initial: J | Last Name: Capece

66 Number and Street: 139 Hill Street apt. 2

67 City: Highland Park, NJ 08904-2155 State Zip

68 Make: HONDA | 69 Model: CIVIC | 70 Color: GRY | 71 Year: 201 | 72 Plate No.: J36EDZ | 73 State: NJ

74 VIN: 2HGFB2F57EH506044 | 75 Expires: 03/17

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

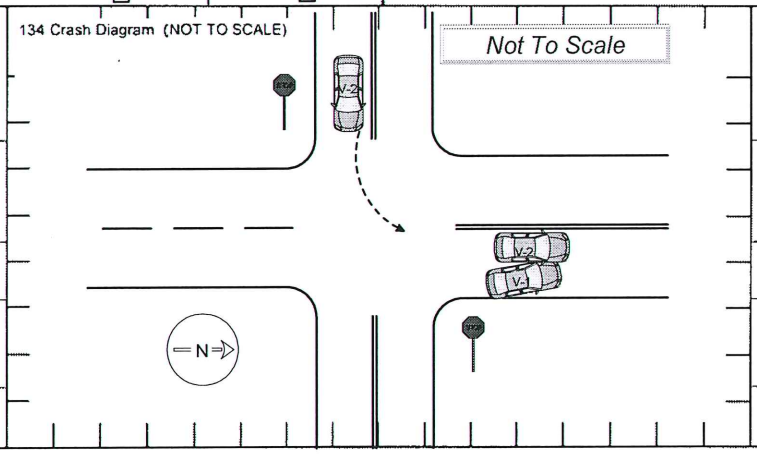
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

50 Carrier No. ☐ USDOT ☐ Other *

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

52 Carrier name

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

126 11 | 127 11 | 128a 26 | 128b | 128c | 128d | 129a 26 | 129b | 129c | 129d

135 Crash Description

Vehicle #1 was facing north on Livingston Avenue attempting to enter traffic from his parking space. Vehicle #2 was traveling east on Comstock Street. A collision occurred when the driver of vehicle #2 made a left turn onto Livingston as the driver of vehicle #1 entered into traffic traveling north on Livingston Avenue.

130 10 | 131 10 | 132 03 | 133 03

136 Damage To Other Property

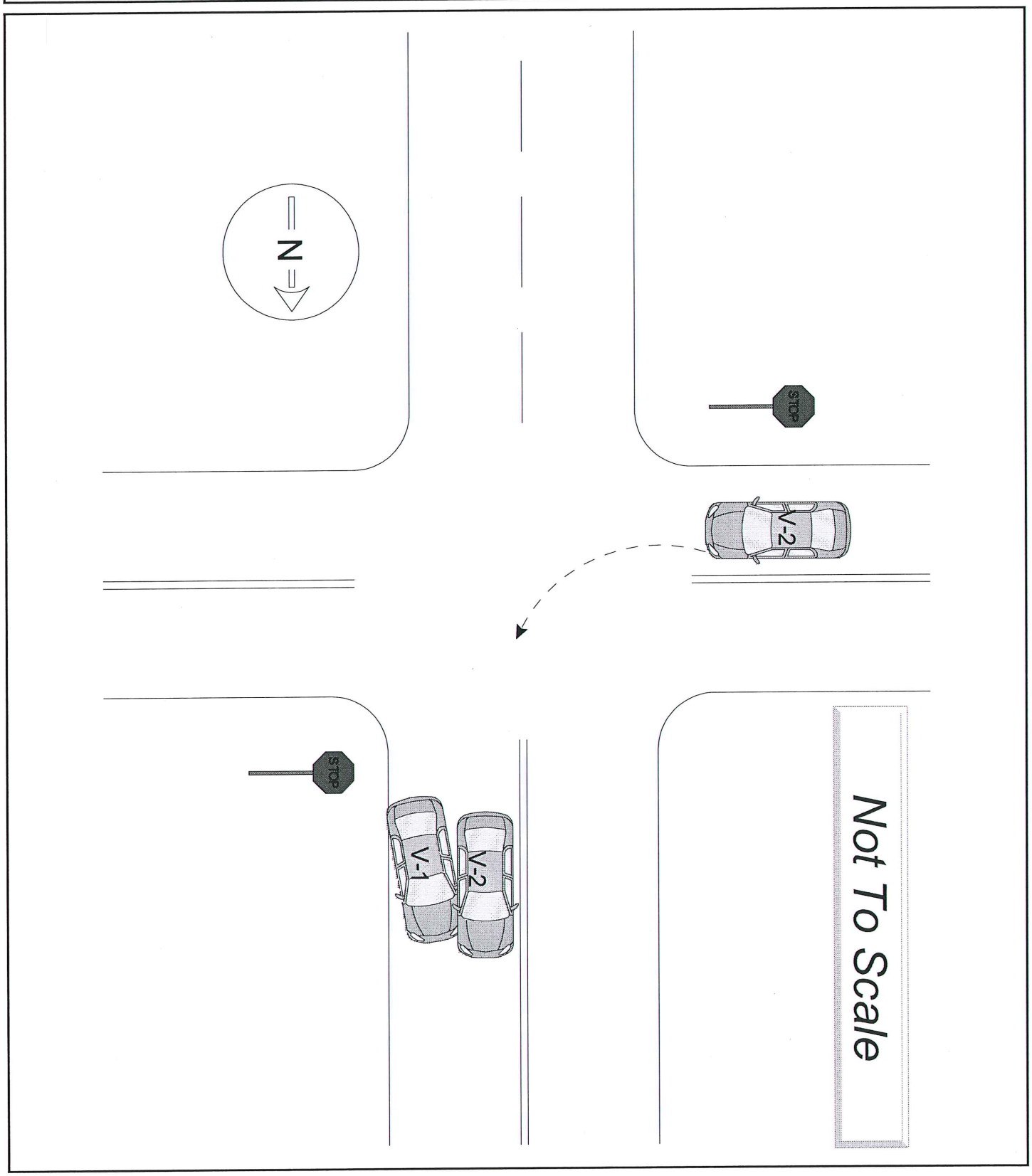
Oper. | 137 Charge ☐ Multiple Charges | 138 Summons No. | Oper. | 139 Charge ☐ Multiple Charges | 140 Summons No.

141 Officer's Signature: PO Tony Ingram 7166 | 142 Badge No. | 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	----	51	M	----	----	1	04	04	----	--------	Gaber, Howard-17 Exeter Street, Old Bridge, NJ 08857-2237
B	1	03	01	----	47	F	----	----	1	04	04	----	--------	Gaber, Kathleen-17 Exeter Street, Old Bridgde, NJ 08857-2237
C	2	01	01	----	29	M	----	----	1	04	04	----	--------	Capece, Anthony-139 Hill Street apt. 2, Highland Park, NJ
D														
E														

Page___0f___

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-43925



NJTR-1B (rev. 07/2005)

PO Tony Ingram 7166
Officer's Signature

Badge Number

Page ____ of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number 16-43939

2 Police Dept of New Brunswick Code 01

3 Station/Precinct

10 Crash Occurred On 550 Jersey Avenue Road Name Dir

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

11 Speed Limit 12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

19 ☐ To: Ramp ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude 22 Longitude

4 Date of Crash mm dd yy: 07 06 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 11 09

7 Municipality Code: 1214

8 Total Killed: - -

9 Total Injured: - -

23 Veh No 1 | 24 Policy No. A072381539454057 | 25 Ins Code 914

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name Initial Last Name | 29 Sex

27 Number and Street | 30 Eyes

28 City State Zip

31 State | 32 Driver's License No | 33 DOB mm dd yy | 34 Expires mm yy

35 Owner's First Name Initial Last Name

☐ Same As Driver Nicole Mcglown

36 Number and Street 150 Maple Ave. No. 270

37 City South Plainfie, State NJ Zip 07080-3407

38 Make NIS | 39 Model MAX | 40 Color NO- | 41 Year 98 | 42 Plate No. J20GSD | 43 State NJ

44 VIN JN1CA21D1WM915158 | 45 Expires 06/17

46 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

47 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

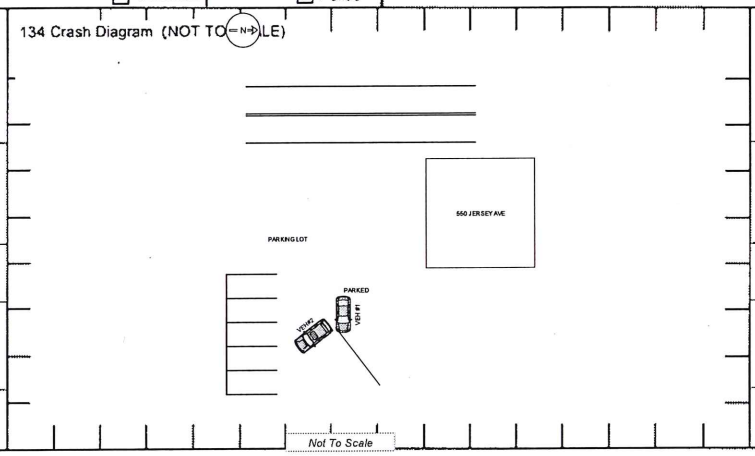
☐ ≤ 10,000 lbs

☐ 10,001 - 26,000 lbs

☐ ≥ 26,001 lbs

52 Carrier name

134 Crash Diagram (NOT TO SCALE)



56 Driver's First Name Elido Initial Last Name Rodriguez | 59 Sex M

57 Number and Street 20 Henry Ave | 60 Eyes 1

58 City New Brunswick, State NJ Zip 08901-3515

61 State | 62 Driver's License No | 63 DOB mm dd yy 06 03 44 | 64 Expires mm yy

65 Owner's First Name Initial Last Name

☒ Same As Driver

66 Number and Street

67 City State Zip

68 Make TOY | 69 Model HIG | 70 Color GY | 71 Year 13 | 72 Plate No. A26GLS | 73 State NJ

74 VIN 5TDZA3EH6DS032541 | 75 Expires 04/17

76 Vehicle Removed To ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled

77 Authority ☐ Owner ☐ Driver ☒ Police

78 Alcohol/Drug Test

Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Unne

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

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 Stephen Schatzman 7179

142 Badge No.

143 Reviewed By J QUICK Badge No. 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	2	01	----	----	72	M	----	----	---	09	04	----	--------	Rodriguez, Elido-20 Henry Ave, New Brunswick, NJ 08901
B														
C														
D														
E														

96 05 | 97 01 | 98 01 | 99 09 | 100 01 | 101 02 | 102 01 | 103 01 | 104 02 | 105 06 | 106 ---- | 107 ---- | 108 01 | 109 04 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 ---- | 117 01

118a 25 | 118b ---- | 119a 29 | 119b ---- | 120 ---- | 121 01 | 122 ---- | 123 ---- | 124 10 | 125 13 | 126 11 | 127 11 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 28 | 129b ---- | 129c ---- | 129d ---- | 130 02 | 131 ---- | 132 06 | 133 17

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-43939

(Refer to vehicle by number)

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

135 Crash Description

On 6-6-2016 the undersigned officer was dispatched to 550 Jersey Ave for a motor vehicle accident in the parking lot.

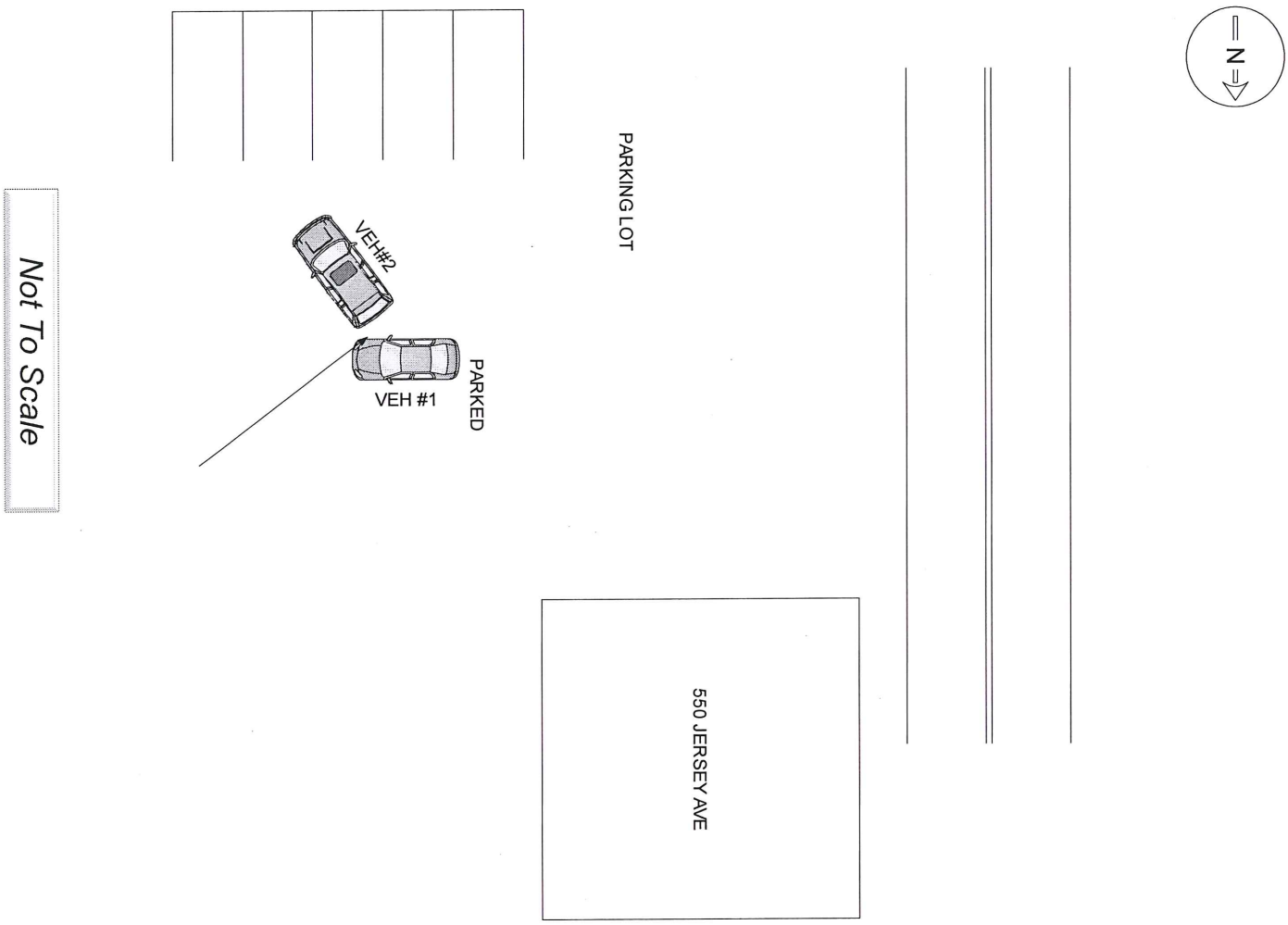
Vehicle #1 states while sitting in her parked vehicle she believed Vehicle #2 backed into her. Vehicle #2 states he did not strike Vehicle #1 while backing out of his parking space. The undersigned observed no signs of damage to Vehicle #2. Vehicle #1 had old minor damage to the front right fender area and some small dents, which the undersign could not determine if they were caused by Vehicle #2.

Po. Schatzman #7179

PO Stephen Schatzman 7179
Officer's Signature

_____
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-43939



NJTR-1B (rev. 07/2005)

PO Stephen Schatzman 7179
Officer's Signature

Badge Number

Page ____ of ____ ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 02 | 99 02 | 100 01 | 101 02 | 102 01 | 103 01 | 104 02 | 105 02 | 106 ---- | 107 ---- | 108 05 | 109 01 | 110 02 | 111 01 | 112 01 | 113 ---- | 114 ---- | 115 ---- | 116 03 | 117 03

1 Case Number: 16-43944

2 Police Dept of: New Brunswick Code: 0 1

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 06 16

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 11 49

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: State Route 18 SB (Road Name) Dir

☐ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: US 1 NB To Route 18 SB Ramp

11 Speed Limit

12 Route No. Suffix 13 Milepost

14 15 16

17 Cross Road Name

18 Speed Limit

19 Ramp ☐ To: ☐ From:

20 Route/Name

21 Latitude

22 Longitude

☐ NB ☐ EB ☐ SB ☐ WB

118a 25 | 118b ---- | 119a 02 | 119b ---- | 120 01 | 121 01 | 122 ---- | 123 ---- | 124 08 | 125 07 | 126 11 | 127 11 | 128a ---- | 128b ---- | 128c ---- | 128d ---- | 129a ---- | 129b ---- | 129c ---- | 129d ---- | 130 07 | 131 07 | 132 01 | 133 01

23 Veh No: V1 | 24 Policy No.: SELF-INSURED | 25 Ins Code:

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Thomas | Initial: J | Last Name: Dipierro | 29 Sex:

27 Number and Street: 331 Michael Rd. | 30 Eyes:

28 City: Yardley, PA 19067 | State | Zip

31 State | 32 Driver's License No | 33 DOB (mm dd yy): 02 11 62 | 34 Expires (mm yy):

35 Owner's First Name | Initial | Last Name

☐ Same As Driver: TREASURY DEPT OF NJ

36 Number and Street: FLEET MGMT

37 City: PO. BOX 233, TRENTON, NJ 08625 | State | Zip

38 Make: GMC | 39 Model: SIE | 40 Color: NO- | 41 Year: 12 | 42 Plate No.: TD16217 | 43 State: NJ

44 VIN: 1GT02ZCG6CF229047 | 45 Expires: 06/18

46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 47 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

53 Veh No: V2 | 54 Policy No.: F054866-9 | 55 Ins Code: 426

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: Gerardo | Initial: R | Last Name: Peaney | 59 Sex: M

57 Number and Street: 18 Wood Acres Dr | 60 Eyes: 5

58 City: Edison, NJ 08820-2347 | State | Zip

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 10 01 65 | 64 Expires (mm yy):

65 Owner's First Name | Initial | Last Name

☒ Same As Driver

66 Number and Street:

67 City | State | Zip

68 Make: CHE | 69 Model: TAH | 70 Color: GRY | 71 Year: 04 | 72 Plate No.: PB5844 | 73 State: NJ

74 VIN: 1GNEK13Z74R102548 | 75 Expires: 08/17

76 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 77 Authority: ☒ Owner ☐ Driver ☐ Police

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

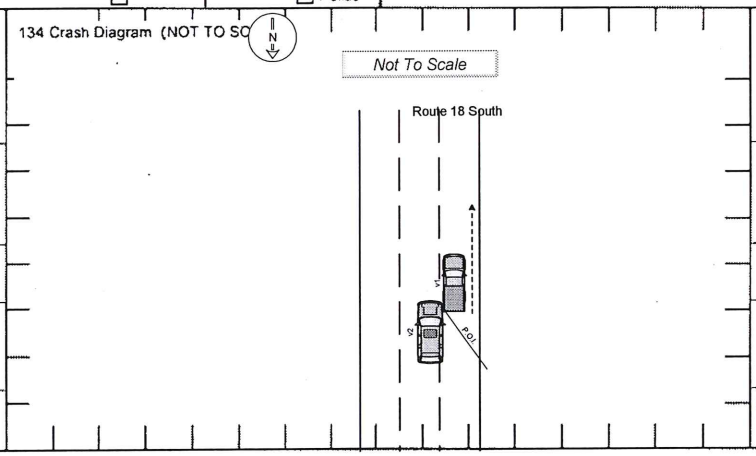
☐ ≤ 10,000 lbs

☐ 10,001 - 26,000 lbs

☐ ≥ 26,001 lbs

82 Carrier name

134 Crash Diagram (NOT TO SC



135 Crash Description

Vehicle #1 and vehicle #2 were traveling South on Route 18. Vehicle #1 relayed that his vehicle was stopped in the right lane due to road work ahead of his vehicle. Vehicle #1 relayed that as he attempted to move forward, his rear bumper snagged the front bumper of number #2 that was traveling in the center lane. Vehicle #2 relayed that he was traveling in the center lane. Vehicle #2 relayed that he moved over a little to let a truck that was in the left lane to pass. When vehicle #1 pulled forward he snagged his front passenger side corner bumper area with the driver side rear corner bumper area of vehicle #1. Note: I was informed that, the traffic was aultered due to men working in the road way.

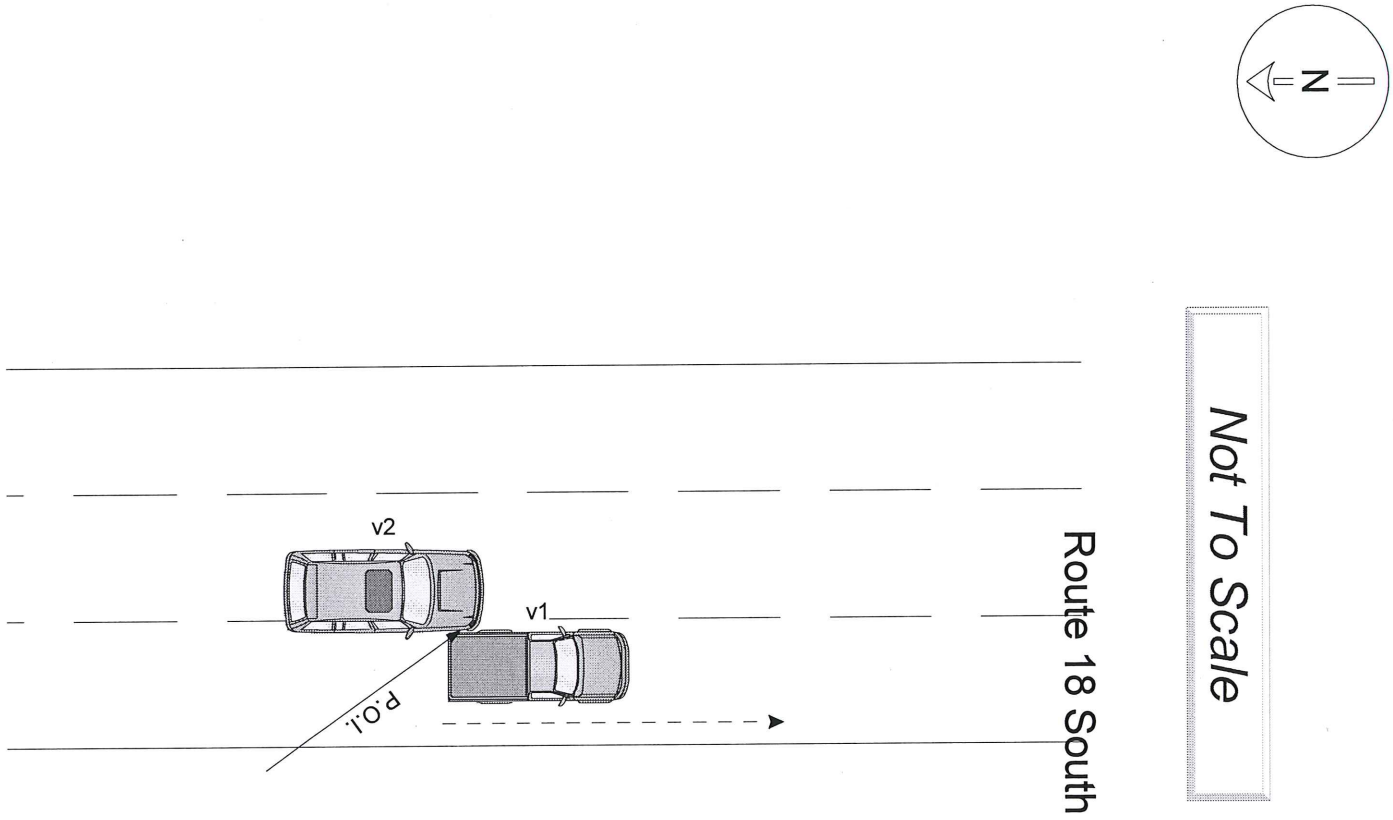
136 Damage To Other Property: None

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

141 Officer's Signature: PO Eric Brown 7222 | 142 Badge No.: 7222 | 143 Reviewed By: J QUICK | Badge No.: 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	03	----	----	38	M	----	----	1	04	04	----		Morris, Nathen-25 Decou Ave., Ewing, NJ 08628
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43944



PO Eric Brown 7222
Officer's Signature

7222
Badge Number

Page 1 of 1 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	04
97	01
98	01
99	07
100	01
101	02
102	01
103	01
104	02
105	03
106	----
107	----
108	01
109	01
110	01
111	01
112	----
113	----
114	----
115	----
116	01
117	04

1 Case Number: 16-43962

2 Police Dept of: New Brunswick — Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 06 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 13 57

7 Municipality Code: 1 2 1 4

8 Total Killed: - -

9 Total Injured: - -

10 Crash Occurred On: Baldwin Street (Road Name) Dir

☒ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) of: Livingston Avenue

11 Speed Limit: 2 5

12 Route No. Suffix 13 Milepost

17 Cross Road Name

18 Speed Limit: 2 5

19 Ramp ☐ To: ☐ From:

20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude . 22 Longitude .

118a	25
118b	----
119a	02
119b	04
120	01
121	01
122	----
123	----
124	01
125	01
126	04
127	08
128a	26
128b	----
128c	----
128d	----
129a	26
129b	----
129c	----
129d	----
130	12
131	12
132	11
133	11

Vehicle 1

23 Veh No: 1 — 24 Policy No.: 0909240-E21-30 — 25 Ins Code: 896

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Jesenia — Initial — Last Name: Lopez — 29 Sex: F

27 Number and Street: 138 Seaman St — 30 Eyes: 2

28 City: New Brunswick, NJ 08901-2643 — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 03 30 98 — 34 Expires (mm yy)

35 Owner's First Name: Jesus — Initial: R — Last Name: Lopez — ☐ Same As Driver

36 Number and Street: 129 Joyce Kilmer Ave 2fl

37 City: New Brunswick, NJ 08901-2948 — State — Zip

38 Make: VW — 39 Model: JET — 40 Color: GY — 41 Year: 05 — 42 Plate No.: S77GPT — 43 State: NJ

44 VIN: 3VWDG71K65M610525 — 45 Expires: 05/17

46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled — 47 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

Vehicle 2

53 Veh No: 2 — 54 Policy No.: 66106533 — 55 Ins Code: 135

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

56 Driver's First Name: Carlos — Initial — Last Name: Romero — 59 Sex: M

57 Number and Street: 14 Joyce Kilmer Avenue — 60 Eyes

58 City: New Brunswick, NJ 08901 — State — Zip

61 State — 62 Driver's License No — 63 DOB (mm dd yy): 03 05 75 — 64 Expires (mm yy)

65 Owner's First Name: Jose — Initial: A — Last Name: Vasquez — ☐ Same As Driver

66 Number and Street: 32 Mitchell Ave

67 City: New Brunswick, NJ 08901-3244 — State — Zip

68 Make: PON — 69 Model: SUN — 70 Color: GOL — 71 Year: 02 — 72 Plate No.: P28GLD — 73 State: NJ

74 VIN: 1G2JB524227404444 — 75 Expires: 03/17

76 Vehicle Removed To: ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled — 77 Authority: ☐ Owner ☐ Driver ☒ Police

Puleio's

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0.__ __ % ☐ Pending

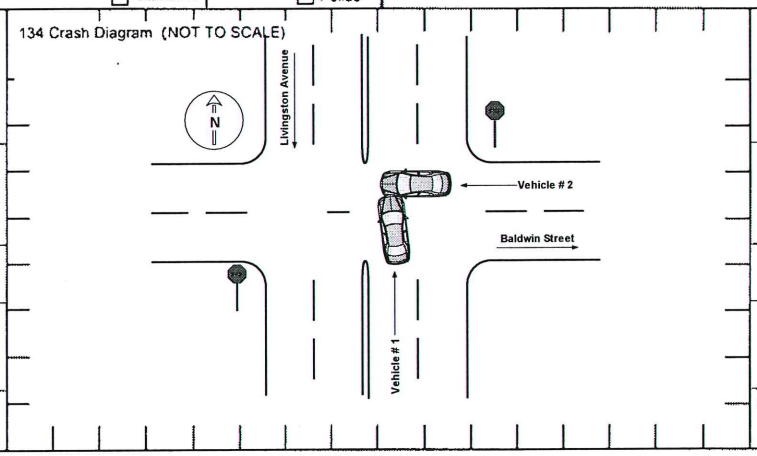
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

Vehicle #1 was traveling northbound on Livingston Avenue when it was struck by vehicle #2. Vehicle #2 was attempting to cross over Livingston Avenue at intersection with Baldwin Street when it struck vehicle #1. Driver of vehicle #1 stated that she was traveling in the left lane when vehicle #2 hit her vehicle. Driver of vehicle #2 stated that a truck in the right lane on Livingston Avenue allowed him to start crossing Livingston Avenue, but did not see vehicle #1. All parties refused EMS. Driver of vehicle #2 was issued summonses for careless driving and being an unlicensed driver. Registered owner of vehicle #2 was also issued a summons for allowing an unlicensed driver to operate a motor vehicle.

136 Damage To Other Property

Oper. — 137 Charge ☐ Multiple Charges — 138 Summons No.

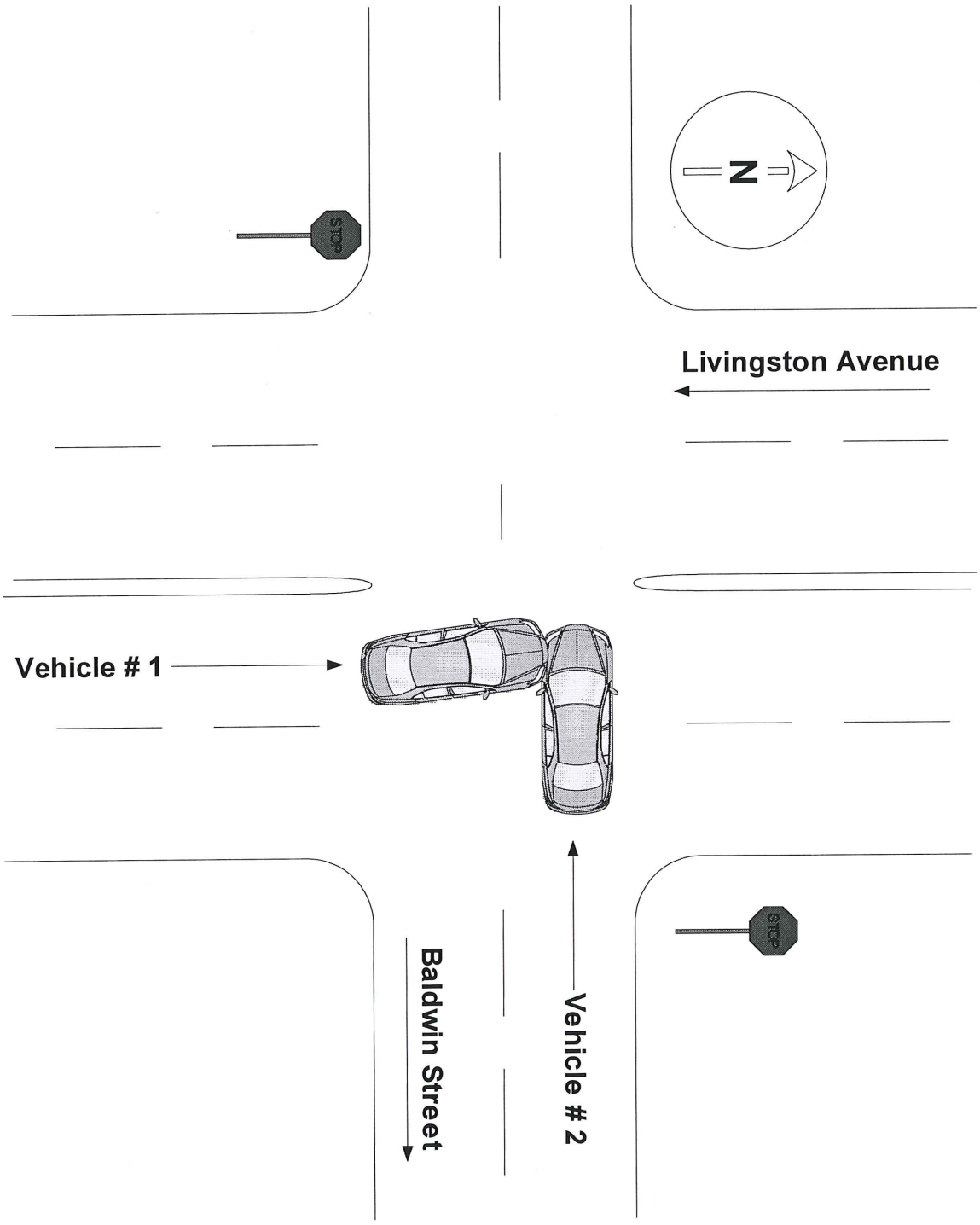
Oper. 2 — 139 Charge ☒ Multiple Charges — 140 Summons No. Q367777,78

141 Officer's Signature: PO M. Phommathep 7266 — 142 Badge No.: 7266 — 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	----	18	F	----	----	1	09	04	----	--------	Lopez, Jesenia-138 Seaman St, New Brunswick, NJ 08901
B	2	01	01	----	41	M	----	----	2	09	09	01	--------	Romero, Carlos-114 Joyce Kilmer Avenue
C														
D														
E														

Page___0f___

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-43962



NJTR-1B (rev. 07/2005)

PO M. Phommathep 7266
Officer's Signature

7266
Badge Number