Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	06
99	07
100	01
101	02
102	01
103	01
104	02
105	00
106	----
107	00
108	01
109	00
110	01
111	00
112	----
113	00
114	----
115	00
116	----
117	00

1 Case Number: 16-45111

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 11 16

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

6 Time (use 2400 hrs): 23 32

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: 48 Delafield 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	----
119a	00
119b	00
120	01
121	----
122	----
123	----
124	10
125	00
126	----
127	----
128a	----
128b	----
128c	----
128d	----
129a	----
129b	----
129c	----
129d	----
130	11
131	11
132	----
133	----

23 Veh No: 1 | 24 Policy No.: 939226516 | 25 Ins Code: 054

☒ 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: Usha Initial Last Name: Akella

☐ Same As Driver

36 Number and Street: 825 Old York Rd

37 City State Zip: Branchburg, NJ 08876-3838

38 Make: TOY | 39 Model: CAM | 40 Color: GY | 41 Year: 12 | 42 Plate No.: H87FJN | 43 State: NJ

44 VIN: 4T4BF1FK8CR220975 | 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

56 Driver's First Name: unknown Initial Last Name: unknown | 59 Sex: M

57 Number and Street | 60 Eyes

58 City State Zip: NKNOWN

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

65 Owner's First Name: unknown Initial Last Name

☐ Same As Driver

66 Number and Street

67 City State Zip: NKNOWN

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

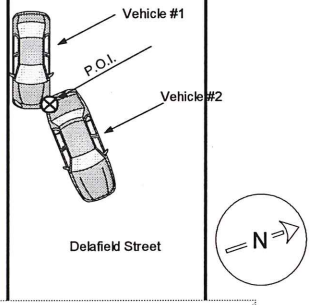
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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)



Not To Scale

135 Crash Description: (See PG. 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 Nicholas Grammar 7336 | 142 Badge No. | 143 Reviewed By Badge No. | 144 Case Status ☐ Pending ☒ Complete

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

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-45111

(Refer to vehicle by number)

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

135 Crash Description

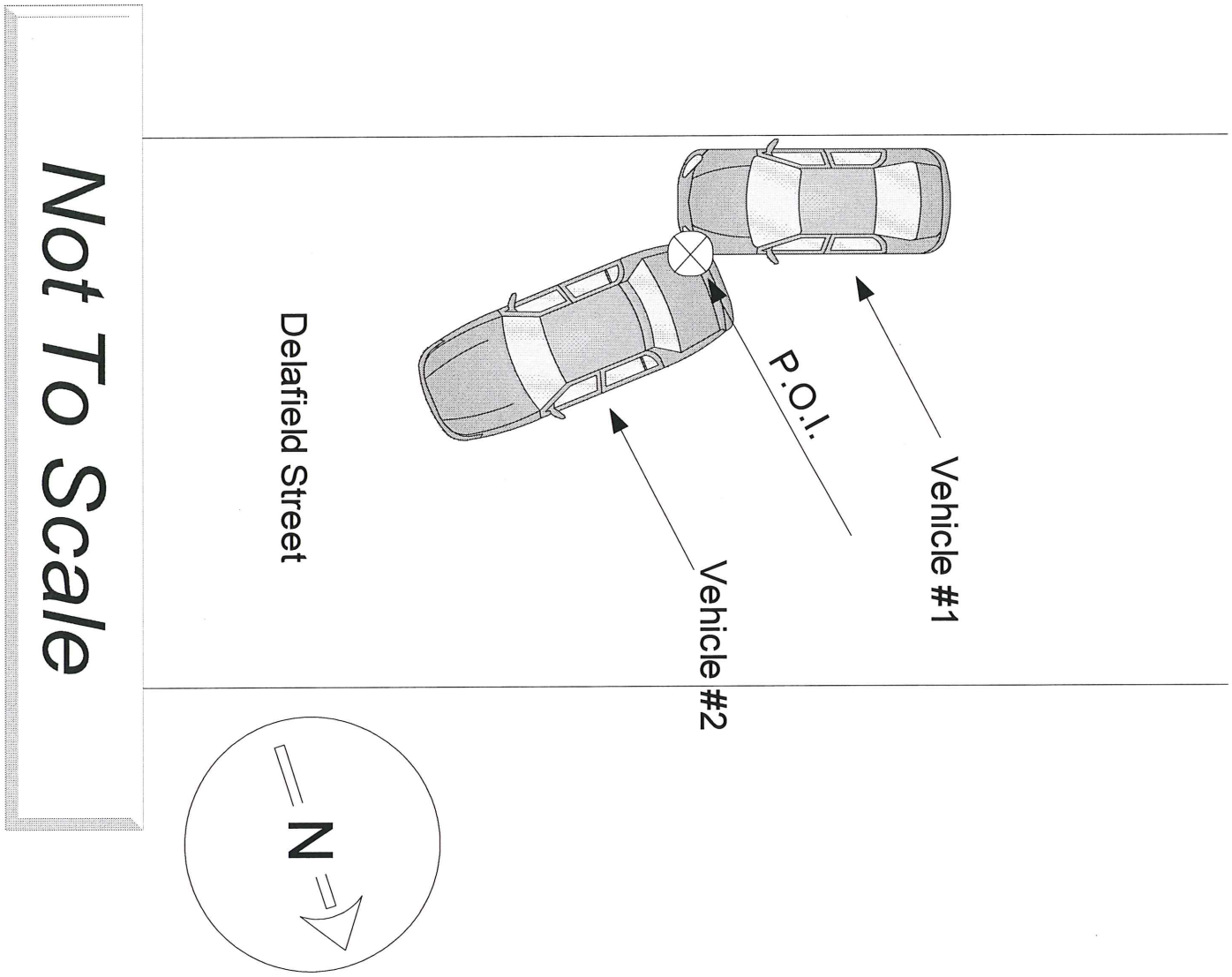
The Caller Stated: that at approximately 19:00 hours that evening he parked his father's vehicle in front of 48 Delafield Street. Then at approximately 23:00 hours he returned to the parked vehicle to discover it had sustained heavy damage to the driver side front fender and the front bumper and hood towards the driver side of the vehicle. The only other information he could provide was that a neighbor who allegedly witnessed the accident said the vehicle that fled the scene hit the car while backing up. The alleged witness also described the vehicle as white in color. No further information to report at this time.

PO Nicholas Grammar 7336

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. 16-45111



NJTR-1B (rev. 07/2005)

PO Nicholas Grammar 7336
Officer's Signature

Badge Number

Page ____ of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 09 | 100 02

1 Case Number: 16-45161

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 12 16

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

6 Time (use 2400 hrs): 07 53

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured:

10 Crash Occurred On: 70 New Street (Road Name) Dir

11 Speed Limit: 05

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 02 | 119b

101 01

23 Veh No: 1 | 24 Policy No.: F580567-6 | 25 Ins Code: 426

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

53 Veh No: 2 | 54 Policy No.: X21 5138-F13-30L | 55 Ins Code: 962

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

120 01

102 01

26 Driver's First Name: Yamilee | Initial | Last Name: Ortiz | 29 Sex: F

56 Driver's First Name: Fostyne | Initial | Last Name: Mitchell | 59 Sex: F

121 01

103 01

27 Number and Street: 2337 Edward Spec Blvd. | 30 Eyes: 2

57 Number and Street: 214 North Center St | 60 Eyes: 2

104 02

28 City: Edison, NJ, 08837 | State | Zip

58 City: Orange, NJ 07050-2857 | State | Zip

105 08

31 State | 32 Dnver's License No | 33 DOB (mm dd yy): 07 29 79 | 34 Expires (mm yy)

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 03 08 52 | 64 Expires (mm yy)

122 ----

35 Owner's First Name: ☐ Same As Driver Toyota Lease Trust | Initial | Last Name

65 Owner's First Name: ☒ Same As Driver Fostyne | Initial | Last Name: Mitchell

123 ----

36 Number and Street: P.O.Box 105386-Atlanta

66 Number and Street: 214 North Center St

124 08

106 ----

37 City: Georgia 30348 | State | Zip

67 City: Orange, NJ 07050-2857 | State | Zip

125 13

107 ----

38 Make: TOY | 39 Model: CAM | 40 Color: WT | 41 Year: 15 | 42 Plate No.: H70FPT | 43 State: NJ

68 Make: TOY | 69 Model: CAM | 70 Color: SL | 71 Year: 04 | 72 Plate No.: RMF18D | 73 State: NJ

108 01

44 VIN: 4T1BF1FK1FU060694 | 45 Expires: 07/18

74 VIN: 4T1BE32K94U927891 | 75 Expires: 03/17

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; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ __ % ☐ Pending

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

126 11 | 127 11

111 01

112 ----

113 ----

114 ----

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

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

128a 26 | 128b | 128c

115 ----

50 Carrier No. ☐ USDOT ☐ Other *

80 Carrier No. ☐ USDOT ☐ Other *

128d

116 04

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

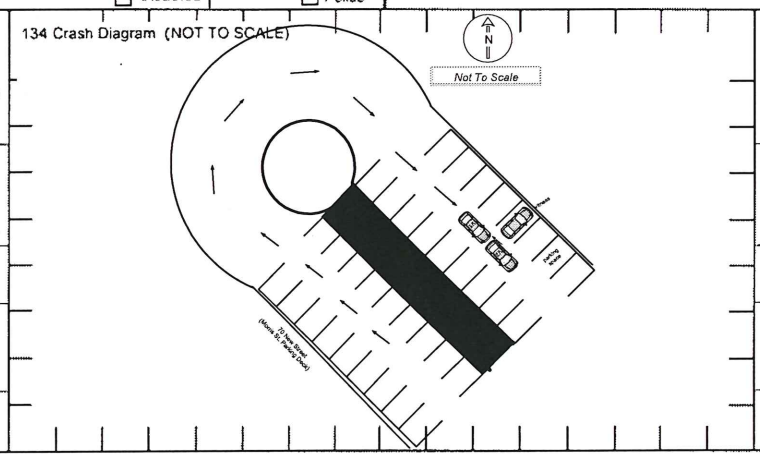
117 04

52 Carrier name

82 Carrier name

129b

134 Crash Diagram (NOT TO SCALE)



129c

135 Crash Description

129d

130 12

131 12

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 Dale Gray 6227 | 142 Badge No. | 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	----	36	F	----	----	---	09	04	----	--------	Ortiz, Yamilee-2337 Edward Spec Blvd., Edison, NJ, 08837
B	2	01	01	----	64	F	----	----	---	09	04	----	--------	Mitchell, Fostyne-214 North Center St, Orange, NJ 07050
C	O	----	----	----		F	----	----	---	----	----	----	--------	
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-45161

(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

Vehicle #1 and vehicle #2 were westbound at 70 New Street (The NBPA Morris Street Parking Deck).

The driver of vehicle #1 stated, she was behind vehicle #2. The driver of vehicle #1 explained, the driver of vehicle #2 backed her vehicle. At which point, vehicle #2 struck vehicle # 1. The driver of vehicle #1 also stated, she blew her horn attempting to get the driver of vehicle #2 attention.

The driver of vehicle #2 stated she was in the process of parking her car in a parking space. Initially, the driver of vehicle #2 denied backing her car. The driver of vehicle #2 stated, she was adjusting her car to park, when vehicle #1 hit her in the rear.

Later during the interview, The driver of vehicle #2 admitted to backing. The driver of vehicle #2 also stated, vehicle #1 suddenly appeared and she did not see vehicle #1. The driver of vehicle #2 continued to state, vehicle #1 must have been too close behind her, not allowing her to back.

The witness (other) stated, she was sitting in her car, parked in parking space. The witness stated, she heard a horn blow and then a crash. At which point, the witness saw the vehicles behind her car.

The occupants of both vehicles stated no injuries. Minor damages were observed on both vehicles.

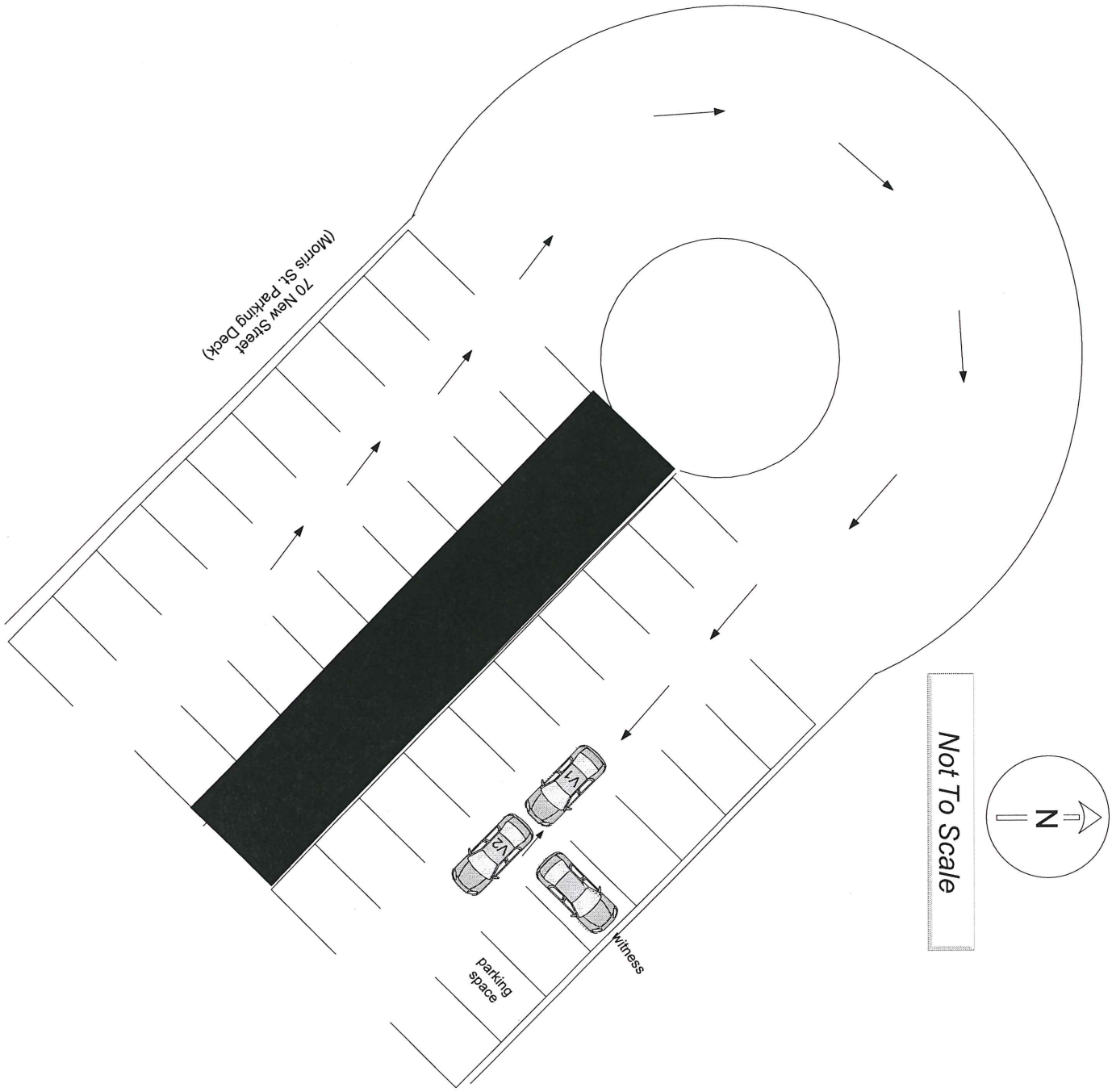
PO Dale Gray 6227

Officer's Signature

Badge Number

Page___0f___

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-45161



NJTR-1B (rev. 07/2005)

PO Dale Gray 6227
Officer's Signature

Badge Number

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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	03
105	01
106	02
107	02
108	01
109	01
110	01
111	01
112	----
113	----
114	08
115	08
116	03
117	03

1 Case Number: 16-45184

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 12 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 09 53

7 Municipality Code: 1214

8 Total Killed: X X

9 Total Injured: X X

10 Crash Occurred On: Joyce Kilmer Avenue (Road Name) Dir

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

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

Vehicle 1

23 Veh No: 1 — 24 Policy No.: F850300-5 — 25 Ins Code: 426

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

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

27 Number and Street: 17 Edstan Drive — 30 Eyes: 2

28 City: Moonachie, NJ 07074-1245 — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 09 28 69 — 34 Expires (mm yy)

35 Owner's First Name: Giovanni — Initial: A — Last Name: Brattoli ☐ Same As Driver

36 Number and Street: 17 Edstan Drive

37 City: Moonachie, NJ 07074-1245 — State — Zip

38 Make: 2007 — 39 Model: BMW — 40 Color: BLK — 41 Year: 07 — 42 Plate No.: P86ETD — 43 State: NJ

44 VIN: WBAVB73507VF51848 — 45 Expires: 10/16

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.: 910505877 — 55 Ins Code: 134

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

56 Driver's First Name: EDINSON — Initial: R — Last Name: REYES-ROSARIO — 59 Sex: M

57 Number and Street: 76 DAYTON AVE. — 60 Eyes: 2

58 City: SOMERSET , N.J. 08873 — State — Zip

61 State — 62 Driver's License No — 63 DOB (mm dd yy): 03 26 94 — 64 Expires (mm yy)

65 Owner's First Name: EDINSON — Initial: R — Last Name: REYES-ROSARIO ☐ Same As Driver

66 Number and Street: 76 DAYTON AVE.

67 City: SOMERSET , N.J. 08873 — State — Zip

68 Make: HONDA — 69 Model: CIVIC — 70 Color: GRY — 71 Year: 200 — 72 Plate No.: D77EUW — 73 State: NJ

74 VIN: 1HGFA16519L013983 — 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

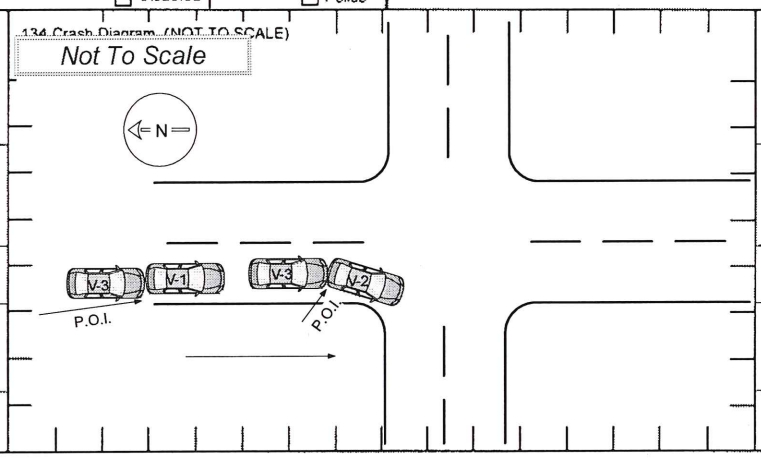
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

80 Carrier No. ☐ 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

DRIVER OF VEHICLE 1 STATES AS HE WAS STOPPED IN TRAFFIC AT THE SIGNAL. VEHICLE 3 TAPPED THE REAR OF HIS VEHICLE BEFORE GOING AROUND VEHICLE 1. VEHICLE 3 THEN TAPPED VEHICLE 2 BEFORE COMING TO A STOP. THE DRIVER OF VEHICLES 1 AND 2 THEN EXITED THEIR VEHICLES AND ORDERED THE DRIVER OF VEHICLE 3 TO PRESENT HIS INFORMATION AND RELEASED HIM BEFORE CALLING THE POLICE. VEH-3 INFORMATION WAS PROVIDED AS NJ- REG (K91DPT) DID NOT COME BACK TO ANYTHING.

136 Damage To Other Property

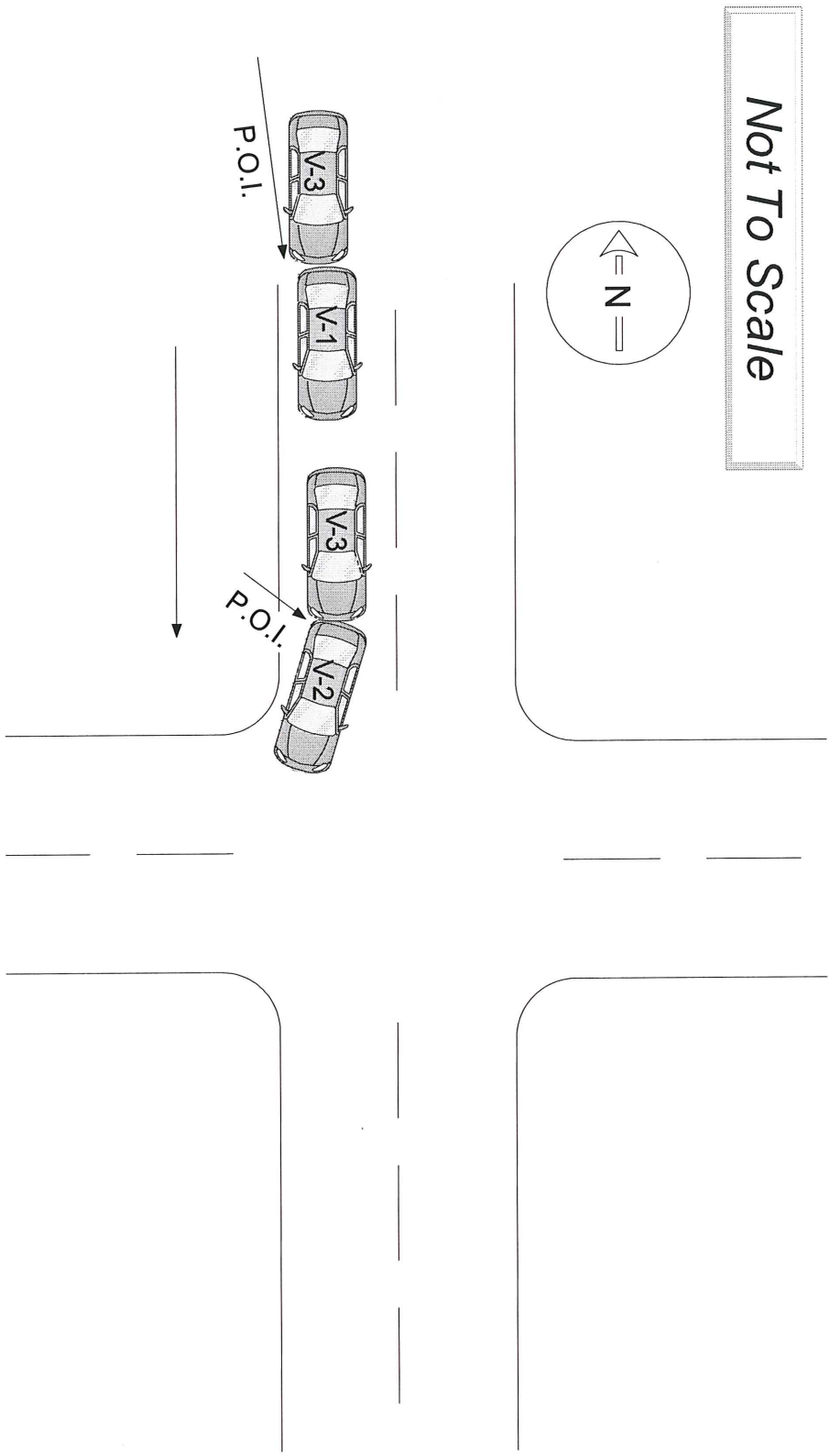
Oper. — 137 Charge: NONE ☐ Multiple Charges — 138 Summons No.: NONE

Oper. — 139 Charge: NONE ☐ Multiple Charges — 140 Summons No.: NONE

141 Officer's Signature: PO Tracy Gayden 7228 — 142 Badge No.: 7228 — 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	----	46	M	----	----	1	04	04	----	--------	Brattoli, Giovanni-17 Edstan Drive, Moonachie, NJ 07074
B	2	01	01	----		M	----	----	1	04	04	----	--------	
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-45184



NJTR-1B (rev. 07/2005)

PO Tracy Gayden 7228
Officer's Signature

7228
Badge Number

Page 1 of 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-45223

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

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

☒ At Intersection with ☐ Feet ☐ Miles

☐ N ☐ E ☐ S ☐ W of: Railroad Avenue

11 Speed Limit: 25

12 Route No. Suffix 13 Milepost

18 Speed Limit: 25

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 12 16

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

6 Time (use 2400 hrs): 12 02

7 Municipality Code: 1214

8 Total Killed: - -

9 Total Injured: 02

Vehicle 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: 00 Initial: 0 Last Name: 00 29 Sex:

27 Number and Street: 00 30 Eyes:

28 City: 00 State Zip

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

35 Owner's First Name: Lisa Initial Last Name: Donato

☐ Same As Driver

36 Number and Street: 31 Avenue J

37 City: Monroe Twp, NJ 08831-2209 State Zip

38 Make: TOY 39 Model: AVA 40 Color: BK 41 Year: 04 42 Plate No.: YBJ21B 43 State: NJ

44 VIN: 4T1BF28B64U385695 45 Expires: 07/16

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.: 939 197 950

55 Ins Code: 054

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

56 Driver's First Name: Akram Initial: M Last Name: Midani 59 Sex: M

57 Number and Street: 53 Birchwood ter. 60 Eyes: 5

58 City: Wayne NJ 07470 State Zip

61 State 62 Driver's License No 63 DOB mm dd yy: 04 17 95 64 Expires mm yy

65 Owner's First Name: Karen Initial Last Name: Smilowski

☐ Same As Driver

66 Number and Street: 8 Dartmouth Rd

67 City: Somers Point, NJ 08244-1327 State Zip

68 Make: VW 69 Model: JET 70 Color: BK 71 Year: 12 72 Plate No.: H56GFW 73 State: NJ

74 VIN: 3VWDP7AJ8CM451205 75 Expires: 10/16

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 ☐ Unne; Results: 0.__ __ % ☐ Pending

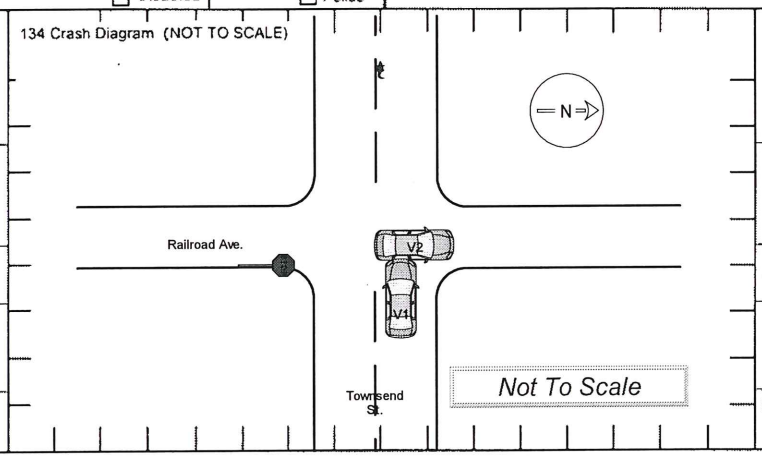
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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

Driver of vehicle 2 reports driving on Railroad Ave. crossing over Townsend St. when they were struck by Vehicle 1 which was traveling on Townsend St. towards French St. After the collision, Vehicle 1 fled the scene driving away on Railroad Ave. Driver of Vehicle 2 was able to obtain the license plate of Vehicle 1.

136 Damage To Other Property

Oper.	137 Charge (☒ Multiple Charges)	138 Summons No.	Oper.	139 Charge (☐ Multiple Charges)	140 Summons No.
1	leaving scene of accident	q 375369	1	failure to report accident	q 375370

141 Officer's Signature: PO Michael Yacuk 7283

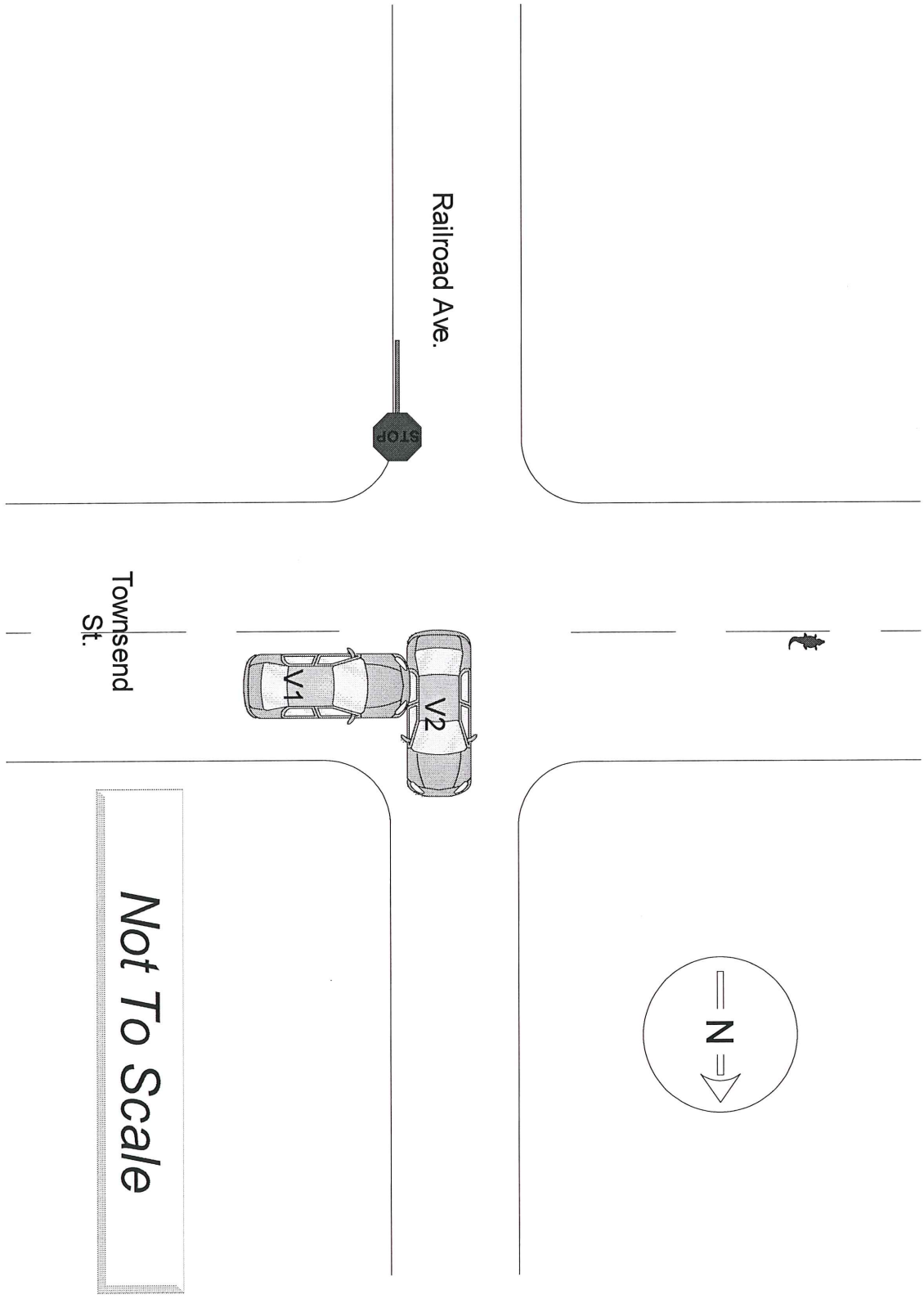
142 Badge No.: 7283

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	1	01	01	00	00	----	00	00	---	00	00	00	--------	
B	2	01	01	04	21	M	06	08	2	09	09	08	6102	Midani, Akram-53 Birchwood ter., Wayne NJ 07470
C	2	01	01	04	22	F	06	08	2	09	09	08	6102	Varra, Kristen-8 Dartmouth Road, Somers Point, NJ 08244
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-45223



NJTR-1B (rev. 07/2005)

PO Michael Yacuk 7283
Officer's Signature

7283
Badge Number

Page ____ of ____ ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	09
100	01
101	02
102	01
103	01
104	02
105	06
106	02
107	02
108	01
109	25
110	01
111	02
112	----
113	----
114	----
115	03
116	02
117	01

1 Case Number: 16-45229

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 12 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 12 51

7 Municipality Code: 1 2 1 4

8 Total Killed: - -

9 Total Injured: - -

10 Crash Occurred On: 10 Industrial Drive (Road Name) Dir

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

11 Speed Limit: 0 0

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	02
119b	----
120	----
121	00
122	----
123	----
124	10
125	02
126	11
127	11
128a	26
128b	----
128c	----
128d	----
129a	28
129b	----
129c	----
129d	----
130	05
131	05
132	05
133	05

Vehicle 1

23 Veh No: 1 — 24 Policy No.: 4054-28-80-99 — 25 Ins Code: 148

☒ 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: Stephen Condrack

36 Number and Street: 1744 Rosewood Drive

37 City: Piscataway, NJ 08854-2080 — State — Zip

38 Make: BUI — 39 Model: LES — 40 Color: GRE — 41 Year: 98 — 42 Plate No.: YSY16A — 43 State: NJ

44 VIN: 1G4HP52K6WH505587 — 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. --

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.: SELF INSURED — 55 Ins Code: 00

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

56 Driver's First Name: Brian — Initial — Last Name: McCord — 59 Sex: m

57 Number and Street: 111 Whiteside Street — 60 Eyes: 4

58 City: Shelbyville TN 37160-4438 — State — Zip

61 State — 62 Driver's License No — 63 DOB (mm dd yy): 12 28 90 — 64 Expires (mm yy)

65 Owner's First Name — Initial — Last Name

☐ Same As Driver: AVERITT EXPRESS INC

66 Number and Street: 1415 Neal St

67 City: Cookeville TN, 38502 — State — Zip

68 Make: Volvo — 69 Model: VNL — 70 Color: RED — 71 Year: 15 — 72 Plate No.: D8926HY — 73 State: TN

74 VIN: 4V4NC9EG8FN191058 — 75 Expires: 02/16

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 ☐ Unne — Results: 0.__ __ % ☐ Pending

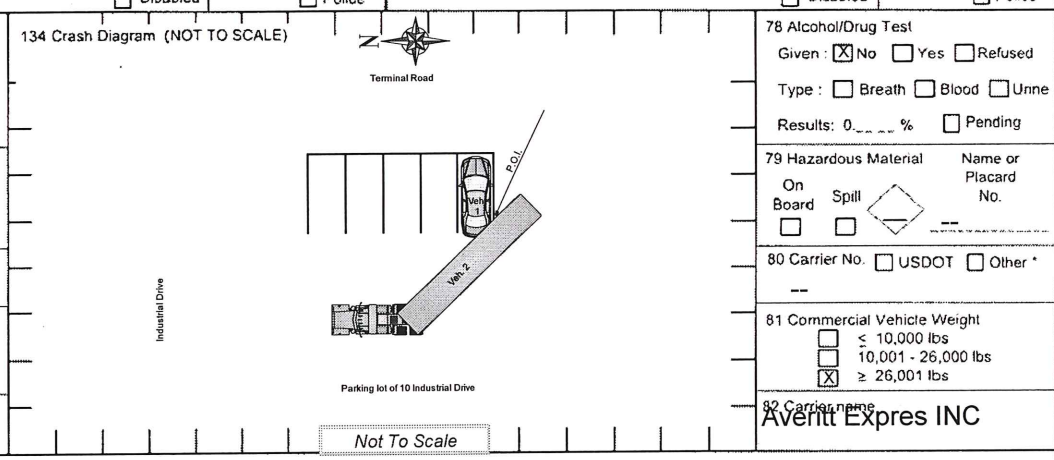
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No. --

80 Carrier No.: -- ☐ USDOT ☐ Other *

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

82 Carrier name: Averitt Expres INC

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

Vehicle 2 struck unoccupied parked vehicle 1 in the parking lot of 10 Industrial Drive. Vehicle 2 was attempting to make a right turn when the collision occurred with vehicle 1. Vehicle 2 left the scene without reporting the incident to police.

2 photographs of the incident are digitally attached to this report. Also digitally attached is insurance information for vehicle 2.

On 7/13/16 at approximately 1445 hours, contact was made via phone with the driver of vehicle 2, who reported he was unaware he struck parked vehicle 1.

136 Damage To Other Property: NA

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

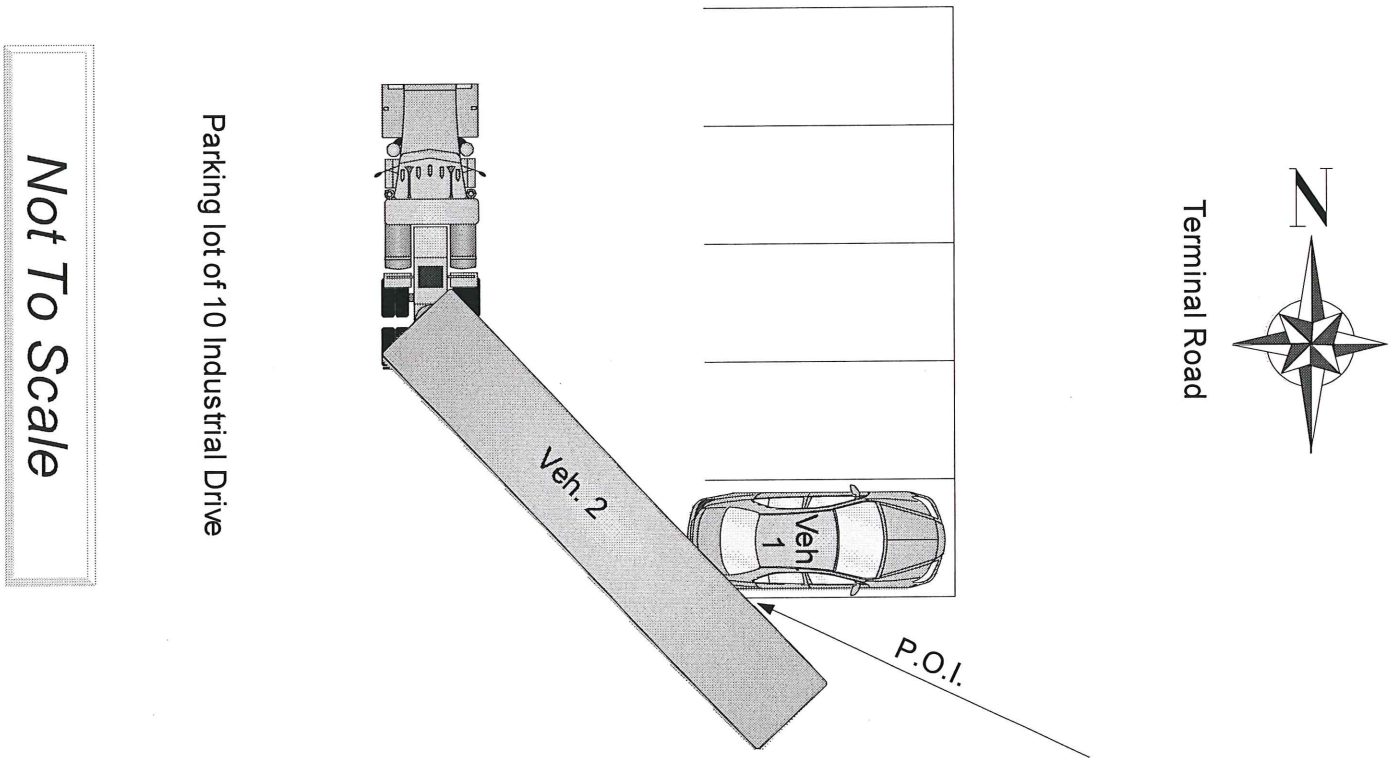
Oper. — 139 Charge: NA ☐ Multiple Charges — 140 Summons No.: NA

141 Officer's Signature: PO Jason Lyons 7339 — 142 Badge No.: 7339 — 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	2	01	01	00	25	M	----	----	---	00	00	00	--------	McCord, Brian-111 Whiteside St., Shelbyville TN, 37160-4438
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-45229

Industrial Drive



PO Jason Lyons 7339
Officer's Signature

7339
Badge Number

New Jersey Police Crash Investigation Report

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

96 04 | 97 01 | 98 01 | 99 07 | 100 01 | 101 02 | 102 01 | 103 01 | 104 01 | 105 06 | 106 ---- | 107 00 | 108 01 | 109 00 | 110 01 | 111 00 | 112 ---- | 113 00 | 114 ---- | 115 00 | 116 02 | 117 ----

1 Case Number: 16-45284

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

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 12 16

5 Day of Week: Su M T W Th F Sa — O

6 Time (use 2400 hrs): 17 56

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: New 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

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 00 | 119b ----

23 Veh No: 1 — 24 Policy No.: 4397777824 — 25 Ins Code: 100

☒ 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: Rachel Esterella-Gutierre

36 Number and Street: 28 Hale Street Apt 2 L

37 City: New Brunswick, NJ 08901 State Zip

38 Make: Toyota — 39 Model: COR — 40 Color: Gry — 41 Year: 201 — 42 Plate No.: B58FNJ — 43 State: NJ

44 VIN: 12T1BU4EE5D112443 — 45 Expires: 6/17

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

Destination

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: Hit and Run — Initial — Last Name — 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 Last Name: 0

☐ Same As Driver

66 Number and Street: 00

67 City: 00 State Zip

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

74 VIN: 00 — 75 Expires

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

Fled the Scene

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

120 01 | 121 00 | 122 ---- | 123 ---- | 124 10 | 125 13 | 126 03 | 127 03 | 128a 26 | 128b | 128c | 128d | 129a 28 | 129b | 129c | 129d | 130 12 | 131 12 | 132 ---- | 133 ----

135 Crash Description

Operator of vehicle 1 stated that her vehicle was struck sometime today by an unknown vehicle at the intersection of New Street and Livingston Avenue. There was minor damage to her front bumper.

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 Nicole Lewis 7340

142 Badge No.

143 Reviewed By: 5229 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	2	01	----	00			00	00	---	00	00	00	--------	
B														
C														
D														
E														

Page ____ of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

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

1 Case Number: 16-45499

2 Police Dept of: New Brunswick Code: 0 1

3 Station/Precinct:

10 Crash Occurred On: 51 US Hwy 1 (Road Name) Dir

☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) 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 13 16

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

6 Time (use 2400 hrs): 14 31

7 Municipality Code: 1 2 1 4

8 Total Killed

9 Total Injured

118a	25
118b	
119a	25
119b	

Vehicle 1

23 Veh No: 1

24 Policy No.: F077181-6

25 Ins Code: 426

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

26 Driver's First Name: Alfred Initial: L Last Name: Crute

29 Sex: M

27 Number and Street: 19 Ruby Court

30 Eyes: 2

28 City: Piscataway, New Jersey 08854 State Zip

31 State 32 Driver's License No

33 DOB mm dd yy: 11 03 40

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 40 Color: Slv 41 Year: 05 42 Plate No.: N30ENV 43 State: NJ

44 VIN: JTEEP21A350110662 45 Expires: 7/17

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.: 993283565 206 1

55 Ins Code: 884

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

56 Driver's First Name: Sharmine Initial: A Last Name: Houle

59 Sex: F

57 Number and Street: 13 Brookview Circle

60 Eyes: 2

58 City: Jamesburg, New Jersey 08831 State Zip

61 State 62 Driver's License No

63 DOB mm dd yy: 08 28 95

64 Expires mm yy

65 Owner's First Name Initial Last Name: ☐ Same As Driver Jeffrey Houle

66 Number and Street: 13 Brookview Circle

67 City: Jamesburg, NJ 08831-2514 State Zip

68 Make: TOY 69 Model: YAR 70 Color: GN 71 Year: 07 72 Plate No.: WGA51N 73 State: NJ

74 VIN: JTDBT923674001040 75 Expires: 09/16

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

77 Authority: ☐ Owner ☐ Driver ☒ Police

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

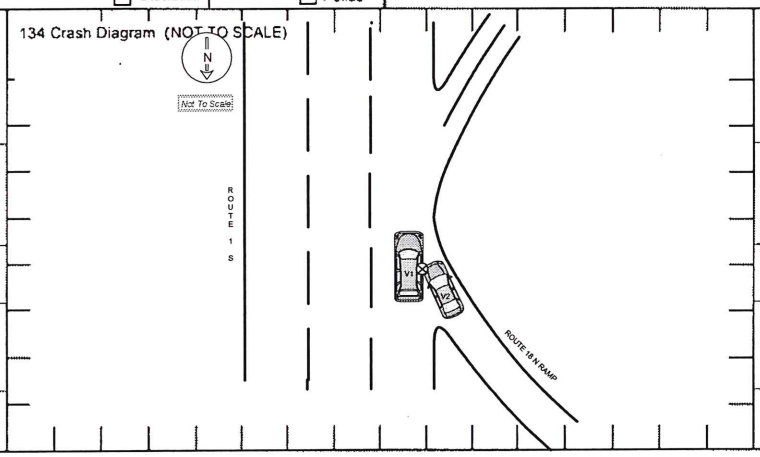
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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)



126	04
127	04
128a	26
128b	
128c	
128d	
129a	26
129b	
129c	
129d	

135 Crash Description

130	03
131	03
132	11
133	11

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 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	1	01	01	----	75	M	----	----	1	04	04	----	--------	Crute, Alfred-19 Ruby Court, Piscataway, New Jersey 08854
B	2	01	01	----	20	F	----	----	1	04	04	----	--------	Houle, Sharmine-13 Brookview Circle, Jamesburg, New Jersey
C	1	03	01	----		F	----	----	1	04	04	----	--------	
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-45499

(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

Vehicle #1 was driving southbound, in the right lane, of Route 1. Driver #1 stated that as he was approaching Sears, he maneuvered to the merge lane coming from Route 18 North. As he was doing so, Vehicle #2 was merging onto Route 1 Southbound coming from the Route 18 North Ramp. As a result, Vehicles #1 and #2 collided.

Vehicle #1 sustained damage to its right middle side. Vehicle #2 sustained heavy front left end damage, and was inoperable. All parties involved refused medical attention, and had no complaints of injury.

It should be noted that this section of the highway has a short entry lane to Sears parking lot, along with a short entry lane merging onto Route 1 South. This attributes to many accidents in this stretch of highway.

P.O. D. Mazan 7294

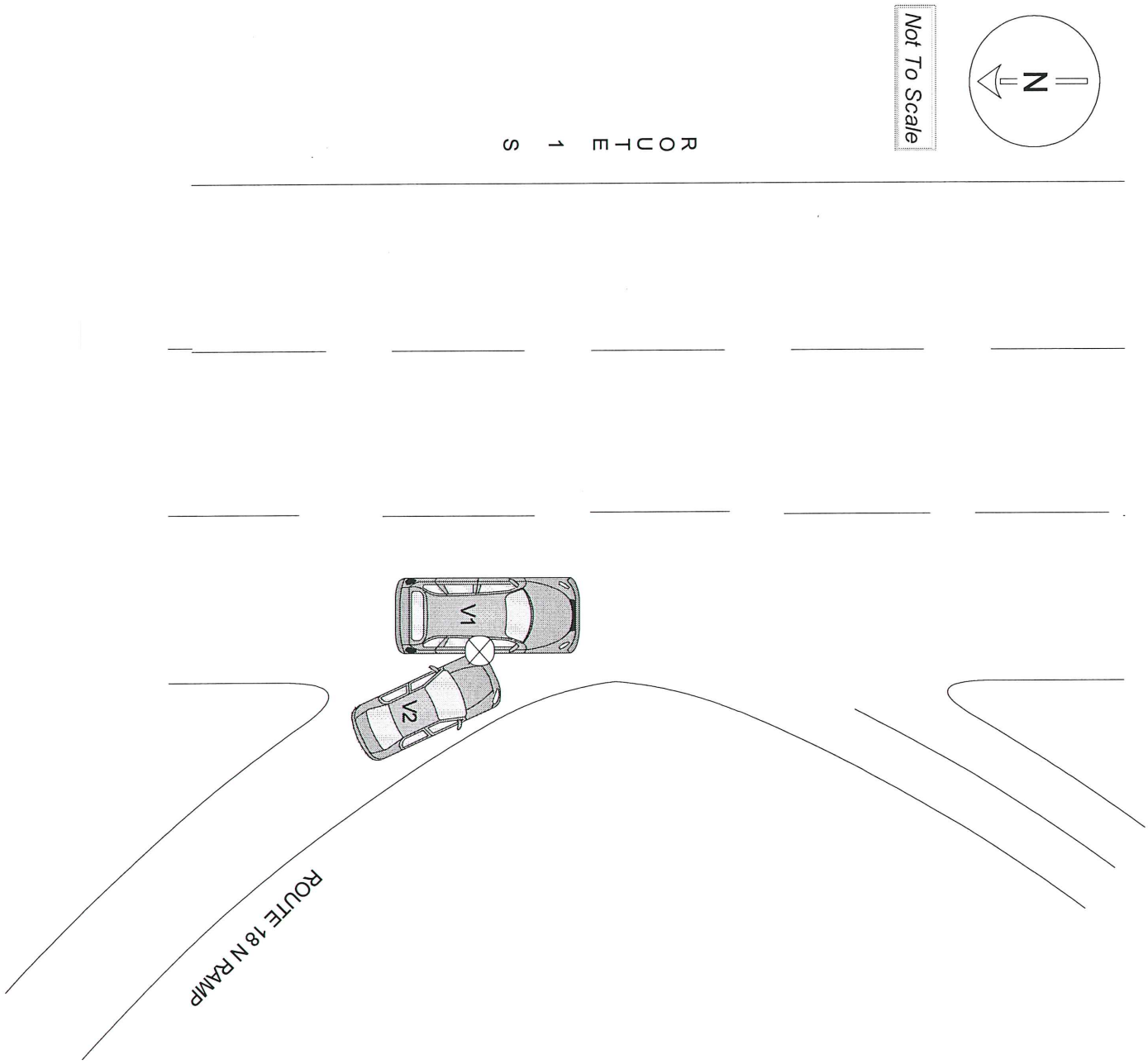
PO Daniel Mazan 7294

Officer's Signature

Badge Number

Page___0f___

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-45499



NJTR-1B (rev. 07/2005)

PO Daniel Mazan 7294
Officer's Signature

Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

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

1 Case Number: 16-45509

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 13 16

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

6 Time (use 2400 hrs): 16 04

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: State Route 18 NB (Road Name) (Dir) ☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) of: New Street

11 Speed Limit: 4 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 51 | 118b ---- | 119a ---- | 119b ----

101 02 | 102 02 | 103 02 | 104 01 | 105 11

23 Veh No: 1

24 Policy No.: 9396318174

25 Ins Code: 100

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

26 Driver's First Name: Tracy Initial: Last Name: Bogy

29 Sex: F

27 Number and Street: 1132 Throckmorton Ln

30 Eyes:

28 City: Old Bridge, NJ 08857 State Zip

31 State: 32 Driver's License No: B61587500060962

33 DOB (mm dd yy): 10 05 96

34 Expires (mm yy): 11/18

35 Owner's First Name: Chrisnor Initial: Last Name: Bogy

☐ Same As Driver

36 Number and Street: 132 Throckmorton Ln

37 City: Old Bridge, NJ 08857-2231 State Zip

38 Make: HON 39 Model: ACC 40 Color: WT 41 Year: 05 42 Plate No.: Y11FNL 43 State: NJ

44 VIN: 1HGCM56435A016768

45 Expires: 07/17

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

Rich's

47 Authority: ☐ Owner ☐ Driver ☐ Police

53 Veh No: 54 Policy No.: 00

55 Ins Code:

☐ 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: 00

63 DOB (mm dd yy):

64 Expires (mm yy):

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

☐ Same As Driver

66 Number and Street:

67 City: 0 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 01 | 121 ---- | 122 ---- | 123 ---- | 124 16 | 125 ----

106 02 | 107 ---- | 108 01 | 109 ----

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

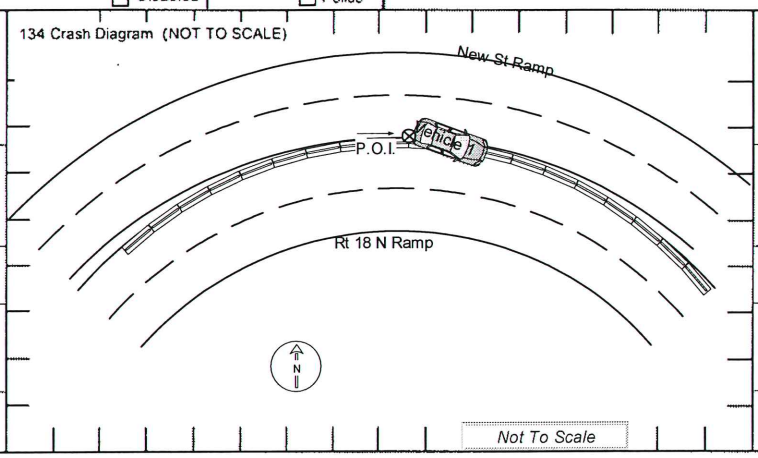
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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 ☐ 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

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

126 ---- | 127 ---- | 128a 07 | 128b ---- | 128c ---- | 128d ---- | 129a ---- | 129b ---- | 129c ---- | 129d ----

135 Crash Description

Driver 1 stated that she was driving West bound on the New Street ramp towards Route 18 when her car skid out of control causing her to strike the median. Vehicle 1's passenger side axle snapped during the crash.

136 Damage To Other Property

Oper. 137 Charge ☐ Multiple Charges 138 Summons No.

Oper. 139 Charge ☐ Multiple Charges 140 Summons No.

130 05 | 131 05 | 132 ---- | 133 ----

141 Officer's Signature: PO Nicole Lewis 7340

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	----	19	F	----	----	1	04	04	----	--------	Bogy, Tracy-1132 Throckmorton Ln, Old Bridge, NJ 08857
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-45509

(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

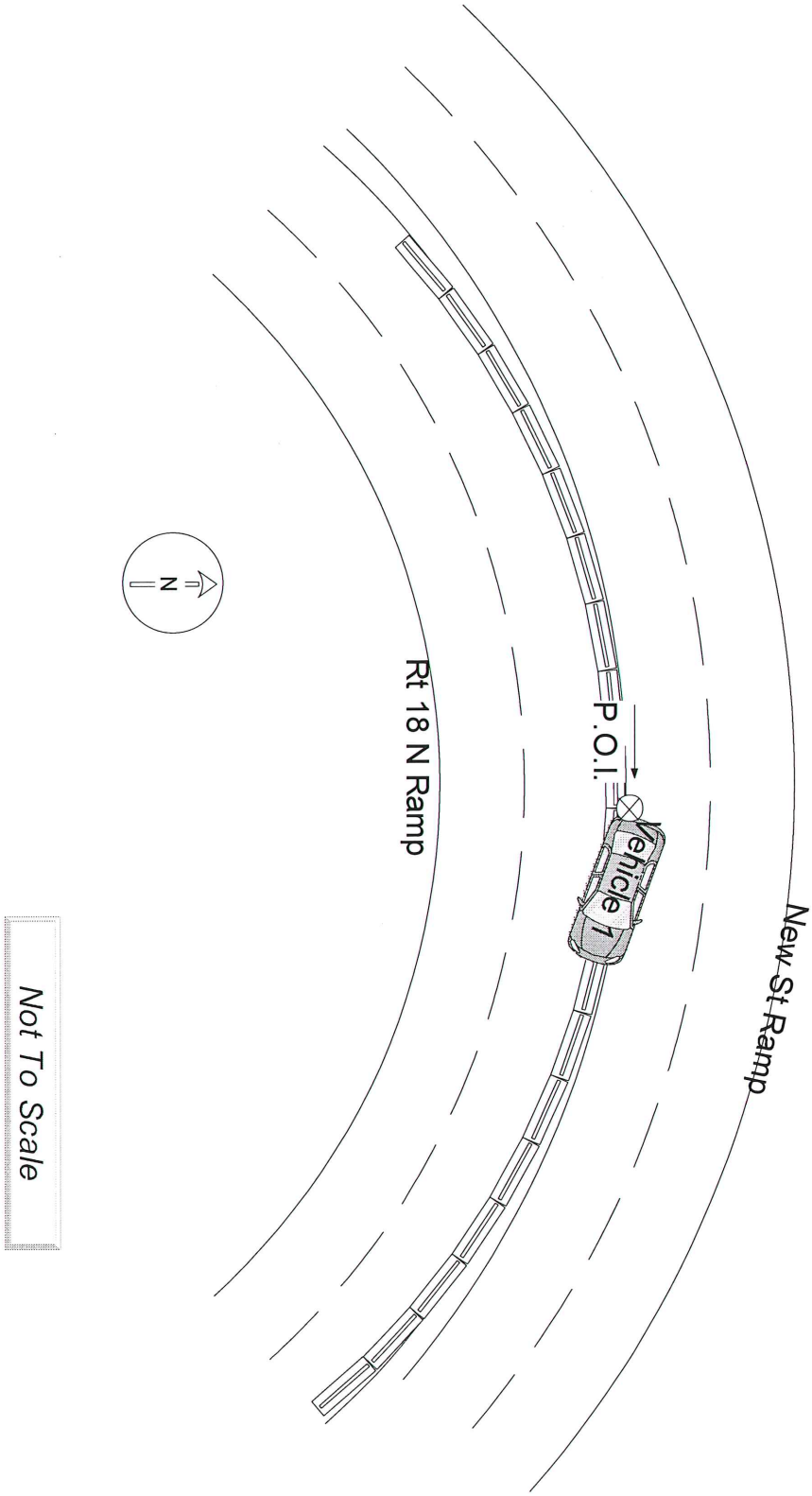
Driver 1 stated that she was driving West on the New Street ramp towards Route 18 when her car skid out of control. Causing her to strike the median. Causing he passenger side axle to snap.

PO Nicole Lewis 7340

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. 16-45509



NJTR-1B (rev. 07/2005)

PO Nicole Lewis 7340
Officer's Signature

Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	01
97	01
98	01
99	02
100	05
101	02
102	02
103	02
104	01
105	11
106	02
107	----
108	01
109	----
110	01
111	----
112	----
113	----
114	----
115	----
116	01
117	----

1 Case Number: 16-45509

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 13 16

5 Day of Week: Su M Tu W Th F Sa — W

6 Time (use 2400 hrs): 16 04

7 Municipality Code: 1 2 1 4

8 Total Killed: 0 0

9 Total Injured: 0 0

10 Crash Occurred On: State Route 18 NB (Road Name) (Dir) ☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) of: New Street

11 Speed Limit: 4 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	51
118b	----
119a	----
119b	----
120	01
121	----
122	----
123	----
124	16
125	----
126	----
127	----
128a	07
128b	----
128c	----
128d	----
129a	----
129b	----
129c	----
129d	----
130	05
131	05
132	----
133	----

Vehicle 1

23 Veh No: 1 — 24 Policy No.: 9396318174 — 25 Ins Code: 100

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

26 Driver's First Name: Tracy — Initial — Last Name: Bogy — 29 Sex: F

27 Number and Street: 1132 Throckmorton Ln — 30 Eyes

28 City: Old Bridge, NJ 08857 — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 10 05 96 — 34 Expires (mm yy)

35 Owner's First Name: Chrisnor — Initial — Last Name: Bogy — ☐ Same As Driver

36 Number and Street: 132 Throckmorton Ln

37 City: Old Bridge, NJ 08857-2231 — State — Zip

38 Make: HON — 39 Model: ACC — 40 Color: WT — 41 Year: 05 — 42 Plate No.: Y11FNL — 43 State: NJ

44 VIN: 1HGCM56435A016768 — 45 Expires: 07/17

46 Vehicle Removed To: ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled — Rich's

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.: 00 — 55 Ins Code

☐ 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: 00 — Initial — Last Name: 0 — ☐ Same As Driver

66 Number and Street

67 City: 0 — 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

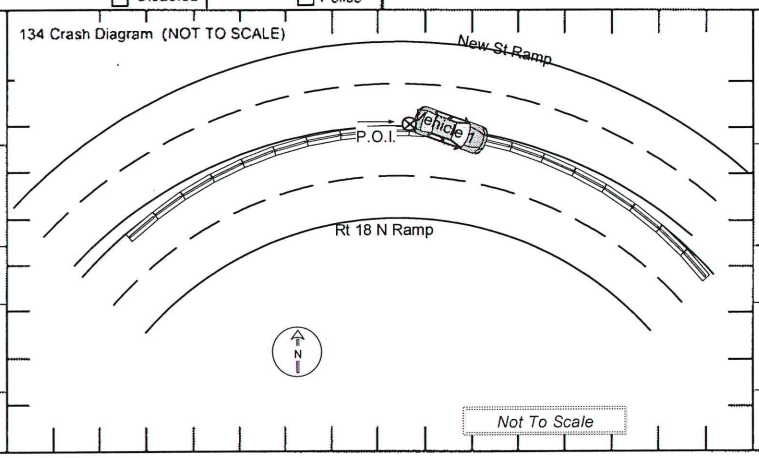
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

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

Driver 1 stated that she was driving West bound on the New Street ramp towards Route 18 when her car skid out of control causing her to strike the median. Vehicle 1's passenger side axle snapped during the crash.

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 Nicole Lewis 7340 — 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	----	19	F	----	----	1	04	04	----	--------	Bogy, Tracy-1132 Throckmorton Ln, Old Bridge, NJ 08857
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-45509

(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

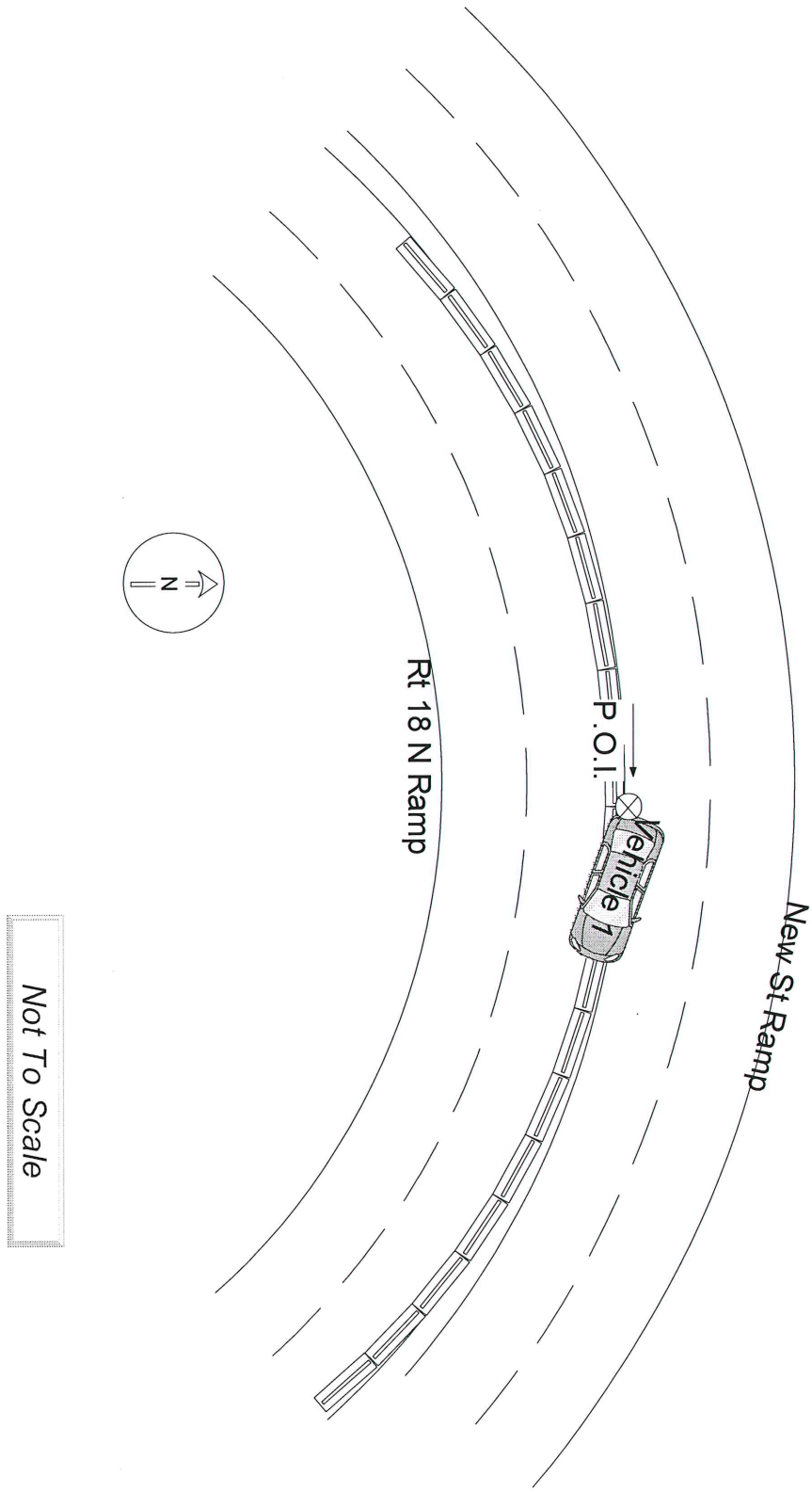
Driver 1 stated that she was driving West on the New Street ramp towards Route 18 when her car skid out of control. Causing her to strike the median. Causing he passenger side axle to snap.

PO Nicole Lewis 7340

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. 16-45509



NJTR-1B (rev. 07/2005)

PO Nicole Lewis 7340
Officer's Signature

Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	04
97	01
98	01
99	07
100	04
101	02
102	02
103	02
104	01
105	11
106	----
107	----
108	01
109	----
110	01
111	----
112	----
113	----
114	----
115	----
116	02
117	----

1 Case Number: 16-45520

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 13 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 17 12

7 Municipality Code: 1 2 1 4

8 Total Killed:

9 Total Injured:

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

☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16) 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	01
118b	51
119a	----
119b	----
120	01
121	----
122	----
123	----
124	16
125	----
126	----
127	----
128a	26
128b	52
128c	----
128d	----
129a	----
129b	----
129c	----
129d	----
130	12
131	12
132	
133	

23 Veh No: 1 — 24 Policy No.: 26487590 — 25 Ins Code: 134

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

26 Driver's First Name: Imejustyn — Initial — Last Name: Hernandez — 29 Sex: F

27 Number and Street: 111 Cranbury Circle — 30 Eyes: 2

28 City: East Brunswick, NJ 08816 — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 10 13 98 — 34 Expires (mm yy)

35 Owner's First Name: Kriss — Initial — Last Name: Fierro — ☐ Same As Driver

36 Number and Street: 111 Cranbury Cir

37 City: East Brunswick, NJ 08816-5132 — State — Zip

38 Make: HON — 39 Model: ACC — 40 Color: GY — 41 Year: 02 — 42 Plate No.: G97GPA — 43 State: NJ

44 VIN: 1HGCG32752A000451 — 45 Expires: 05/17

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

DEPENDABLE TOWING

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

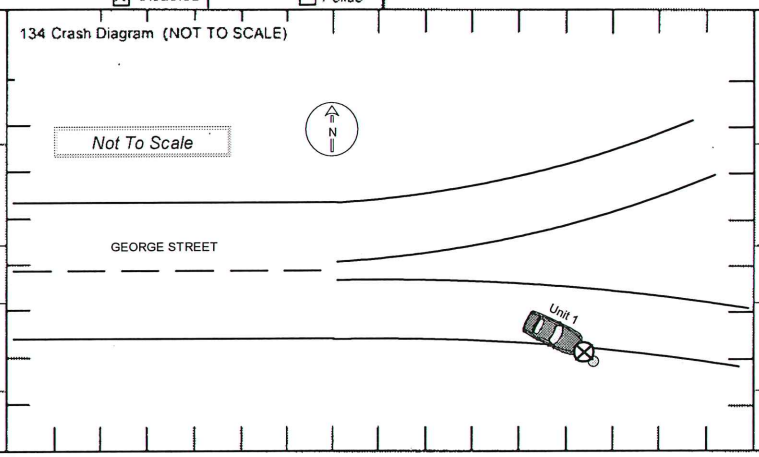
49 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

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)



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

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

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)

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

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

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: 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 Elfi Martinez 7303 — 142 Badge No. — 143 Reviewed By — Badge No. — 144 Case Status: ☐ Pending ☒ Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	04	17	F	08	05	1	09	09	01	--------	
B	1	02	01	----			----	----	1	09	09	01	--------	
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-45520

(Refer to vehicle by number)

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

135 Crash Description

Driver stated she was driving east bound on George St toward Ryders Lane when she suddenly lost control of her vehicle and struck a utility pole. Driver stated she lost control due to the environmental conditions (rain).

Vehicle was observed to have major damage to the front of the vehicle.

Dependable Towing arrived on scene and towed the vehicle to their secure lot.

Occupants of the vehicle refused medical attention at this time.

The driver was observed to have a bruise on her right forearm.

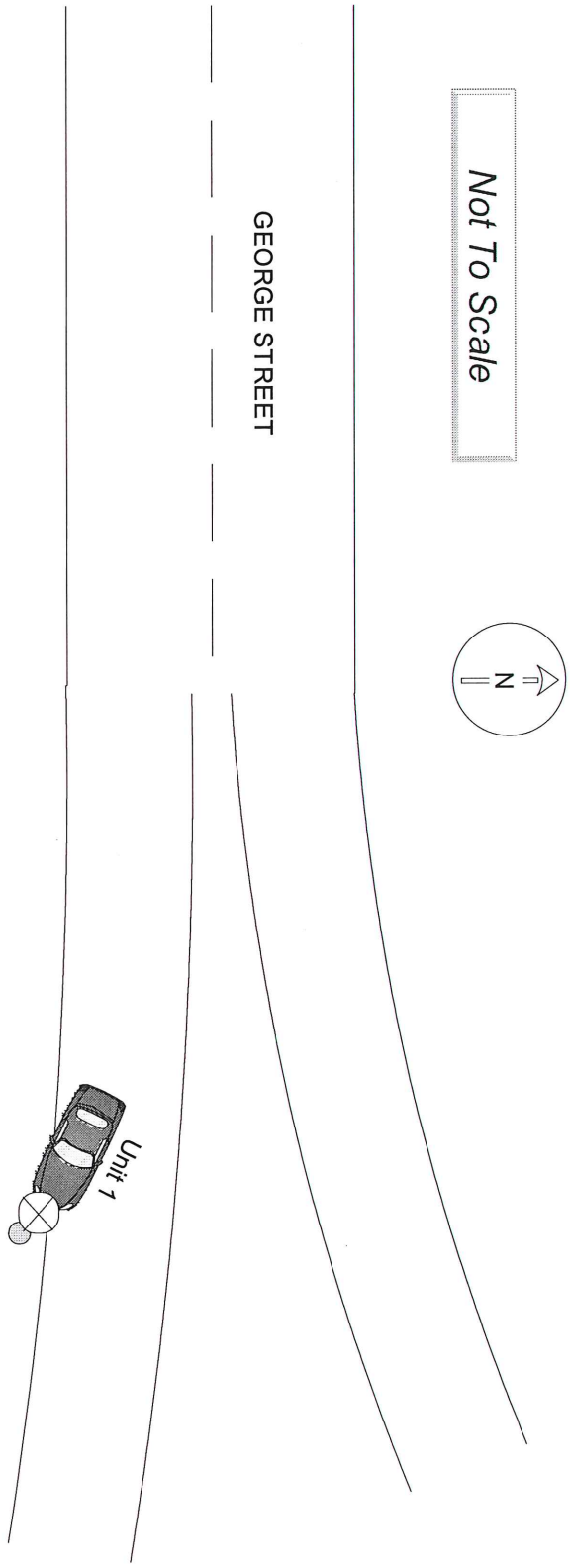
I have nothing further to report at this time.

PO Elfi Martinez 7303

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. 16-45520



NJTR-1B (rev. 07/2005)

PO Elfi Martinez 7303
Officer's Signature

Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-45517

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 13 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 1645

7 Municipality Code: 1214

8 Total Killed: - -

9 Total Injured: - -

10 Crash Occurred On: 287 Handy Street (Road Name) Dir

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

11 Speed Limit: 0 5

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

Veh No	Policy No.	Ins Code	Parked	Ped	Pedalcyclist	Resp to Emergency	Hit & Run
23 Veh No 1	24 Policy No. 4063-45-26-52	25 Ins Code 100	☐	☐	☐	☐	☐
53 Veh No 2	54 Policy No. 909049895	55 Ins Code 135	☐	☐	☐	☐	☐

Driver's First Name	Initial	Last Name	Sex	Number and Street	Eyes	City	State	Zip
26 Diomedes		Thomas	29 M	27 66 Ellen Street	30 2	28 New Brunswick, NJ 08901		
56 N/A		N	59	57	60	58		

Driver's License No	State	DOB (mm dd yy)	Expires (mm yy)
32	31	33 09 20 78	34
62	61	63	64

Owner's First Name	Initial	Last Name	Number and Street	City	State	Zip
35 ☒ Same As Driver Diomedes		Thomas	36 66 Ellen Street	37 New Brunswick, NJ 08901		
65 ☐ Same As Driver Nayeli		Escamilla-Reyes	66 153 Suydam Street	67 New Brunswick, NJ 08901		

Make	Model	Color	Year	Plate No.	State	VIN	Expires
38 ACU	39 TL	40 BGE	41 03	42 WZJ67U	43 NJ	44 19UUA56653A006447	45 06/17
68 FOR	69 EXP	70 BLU	71 04	72 K80ESX	73 NJ	74 1FMZU77K94UA47307	75 09/16

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

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

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

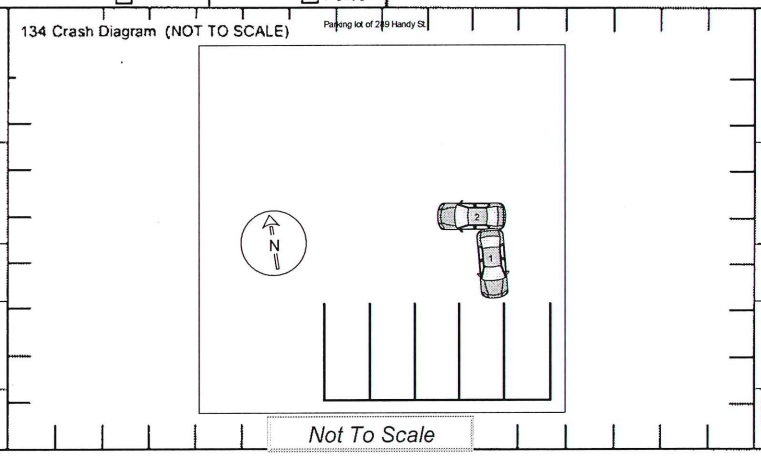
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

50 Carrier No. ☐ USDOT ☐ Other *

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

52 Carrier name: N/A

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: N/A

135 Crash Description

136 Damage To Other Property: N/A

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

141 Officer's Signature: PO Gregory Liszczak 7267

142 Badge No.: 7267

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	----	37	M	----	----	1	09	04	----	--------	Thomas, Diomedes-66 Ellen Street, New Brunswick, NJ 08901
B														
C														
D														
E														

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

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: Case No: 16-45517

(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 he was backing out of the parking spot when he struck parked vehicle 2.

Owner of parked veh 2 stated that veh 1 struck her vehicle.

It should be noted that veh 2 was parked along side the building outside of a legal parking space.

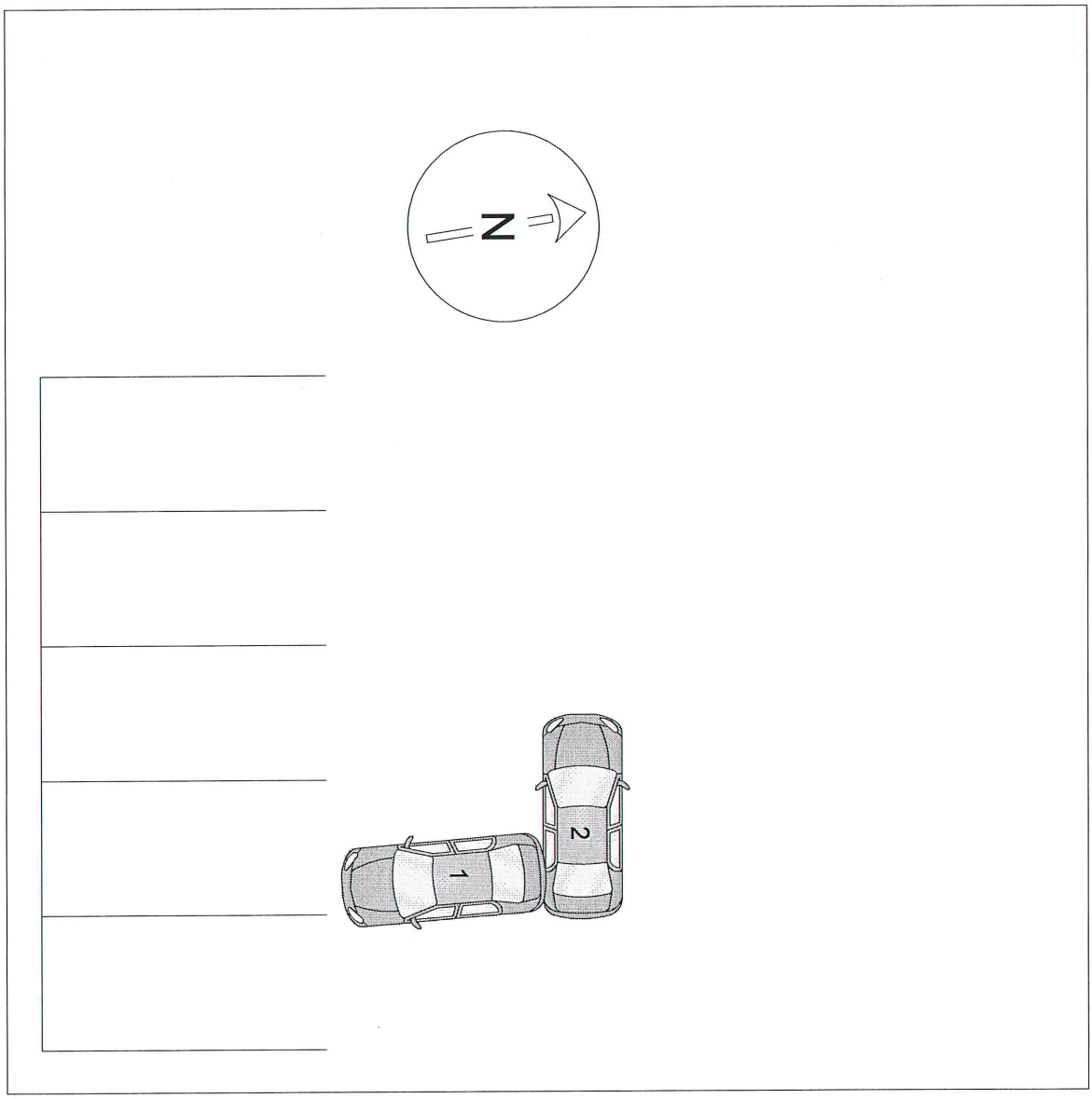
PO Gregory Liszczak 7267

Officer's Signature

7267

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station	Code 0 1 Case No. 16-45517



Parking lot of 289 Handy St.

Not To Scale

PO Gregory Liszczak 7267
Officer's Signature

7267
Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

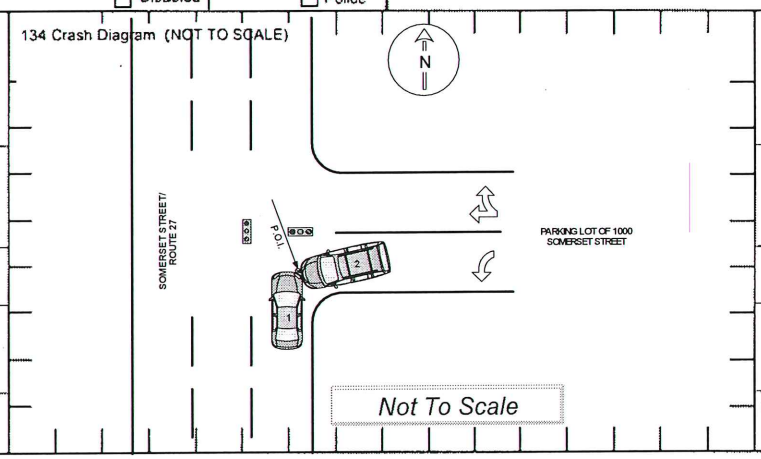
96	05	1 Case Number	16-45581
97	01	2 Police Dept of	New Brunswick
98	06	Code	0 1
99	09	3 Station/Precinct	
100	01	4 Date of Crash (mm dd yy)	07 13 16
		5 Day of Week	Su M Tu W Th F Sa: O
		6 Time (use 2400 hrs)	21 53
		7 Municipality Code	1 2 1 4
		8 Total Killed	- -
		9 Total Injured	- -
		10 Crash Occurred On	1000 Somerset 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	02		
118b	03		
119a	25		
119b	----		

101	02	23 Veh No	1	24 Policy No.	4413-61-66-59	25 Ins Code	100
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run					
102	01	26 Driver's First Name	Frangelly	Initial		Last Name	Mercedes-Martinez
		29 Sex	M				
103	01	27 Number and Street	231 Powers Street				
		30 Eyes	1				
104	02	28 City	New Brunswick, NJ 08901-3039	State		Zip	
105	03	31 State		32 Driver's License No		33 DOB (mm dd yy)	09 10 94
		34 Expires (mm yy)					
		35 Owner's First Name	Ileana	Initial	M	Last Name	Perez
		☐ Same As Driver					
		36 Number and Street	1420 Plymouth Road				
106	----	37 City	No Brunswick, NJ 08902-4595	State		Zip	
107	----	38 Make	HON	39 Model	ACC	40 Color	SILV
		41 Year	05	42 Plate No.	E33GMP	43 State	NJ
108	01	44 VIN	JHMCN364X5C002563	45 Expires	04/17		
109	01	46 Vehicle Removed To	☐ Driven ☒ Left at Scene ☐ Towed ☐ Impound ☐ Disabled	47 Authority	☐ Owner ☒ Driver ☐ Police		

53 Veh No	2	54 Policy No.	10939146	55 Ins Code	134		
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run							
56 Driver's First Name	Karina	Initial		Last Name	Gomez		
59 Sex	F						
57 Number and Street	102 Redmond St 2nd Fl						
60 Eyes	2						
58 City	New Brunswick, NJ 08901-2729	State		Zip			
61 State		62 Driver's License No		63 DOB (mm dd yy)	03 24 87		
64 Expires (mm yy)							
65 Owner's First Name	Karina	Initial		Last Name	Gomez		
☒ Same As Driver							
66 Number and Street	102 Redmond St 2nd Fl						
67 City	New Brunswick, NJ 08901-2729	State		Zip			
68 Make	TOY	69 Model	SIE	70 Color	RD	71 Year	05
72 Plate No.	J30EHY	73 State	NJ				
74 VIN	5TDZA23C25S350613	75 Expires	06/17				
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	00		Results: 0.__ __ % ☐ Pending
113	00	49 Hazardous Material	On Board ☐ Spill ☐ Name or Placard No.
114	----		
115	----	50 Carrier No.	☐ USDOT ☐ Other *
116	01	51 Commercial Vehicle Weight	☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs
117	04	52 Carrier name	

134 Crash Diagram (NOT TO SCALE)



126	03	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
127	03		Type: ☐ Breath ☐ Blood ☐ Unne
128a	26		Results: 0.__ __ % ☐ Pending
128b	----	79 Hazardous Material	On Board ☐ Spill ☐ Name or Placard No.
128c	----	80 Carrier No.	☐ USDOT ☐ Other *
128d	----	81 Commercial Vehicle Weight	☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs
129a	26		
129b	----	82 Carrier name	
129c	----		
129d	----		

135 Crash Description

130	12
131	12
132	12
133	12

136 Damage To Other Property: N/A

Oper.	137 Charge	138 Summons No.	Oper.	139 Charge	140 Summons No.
1	CARELESS DRIVING (☒ Multiple Charges)	1214-Q		☐ Multiple Charges	

141 Officer's Signature: PO Kevin Sturmfels | 142 Badge No.: 7327 | 143 Reviewed By | Badge No. | 144 Case Status: ☐ Pending ☒ Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	21	M	----	----	1	09	04	----	--------	Mercedes-Martinez, Frangelly-231 Powers Street, New
B	2	01	01	----	29	F	----	----	1	09	04	----	--------	Gomez, Karina-102 Redmond St 2nd Fl, New Brunswick, NJ
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: New Brunswick Code: 01 Station: _____ Case No: 16-45581

(Refer to vehicle by number)

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

135 Crash Description

Driver 1 stated that he was driving North down Somerset Street/ Route 27 in Vehicle 1 (N. J. Reg E33GMP) as he approached and went through the yellow traffic signal at the intersection of Somerset Street/ Route 27 and 1000 Somerset Street when he struck the front end of Vehicle 2 (N. J. Reg J30EHY), coming from the parking lot of 1000 Somerset Street.

Driver 2 stated that she was making a left turn onto Somerset Street/ Route 27 from the parking lot of 1000 Somerset Street as the traffic light turned green when the front end of her vehicle was struck by Vehicle 1. Driver 2 also stated that Driver 1's traffic light was red at the time of impact.

Vehicle 1 sustained visible damage to the right side of the front bumper, under the headlight. Vehicle 2 sustained visible damage to the entire front bumper.

Both driver's refused medical attention when asked. Driver 1 also received the following traffic summons':

1. Careless Driving (1214- Q- 374739)
2. Failure to Observe Signal (1214- Q- 374740)

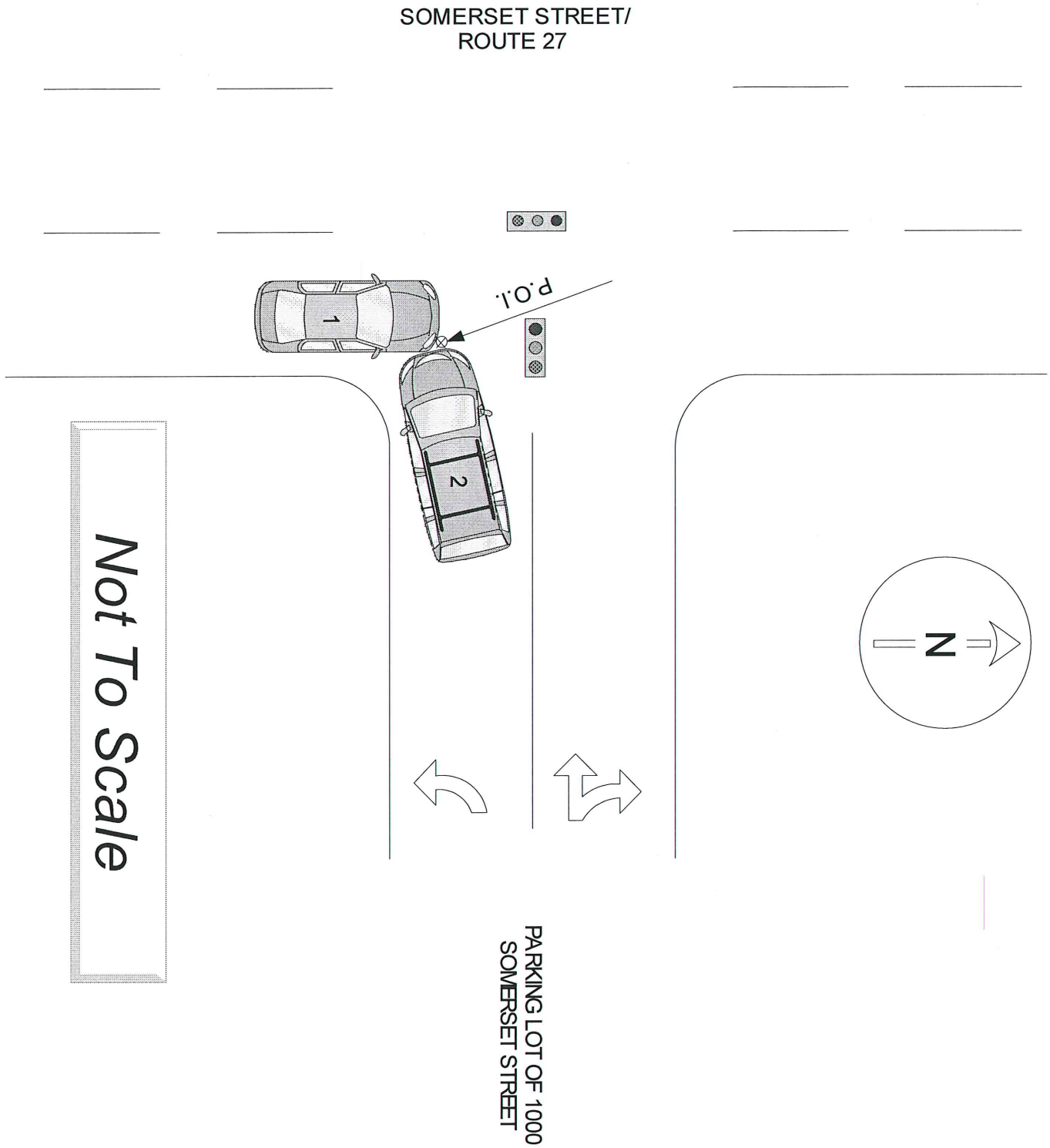
Driver 2 drove her vehicle from the scene without incident. See CIR/ AR for further details.

P/O KEVIN STURMFELS 7327

PO Kevin Sturmfels
Officer's Signature

7327
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station	Code 0 1 Case No. 16-45581



NJTR-1B (rev. 07/2005)

PO Kevin Sturmfels
Officer's Signature

7327
Badge Number

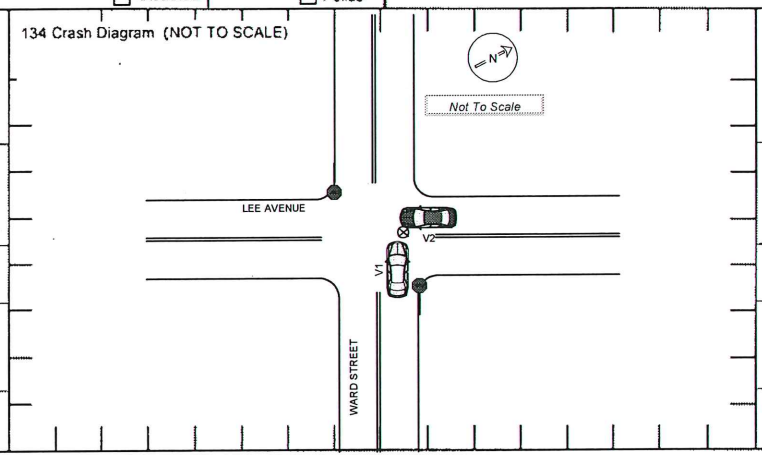
New Jersey Police Crash Investigation Report

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

1 Case Number: 16-45585
2 Police Dept of: New Brunswick Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 07 13 16
5 Day of Week: Su M Tu W Th F Sa — O
6 Time (use 2400 hrs): 22 11
7 Municipality Code: 1 2 1 4
8 Total Killed:
9 Total Injured:
10 Crash Occurred On: Lee Avenue (Road Name) Dir
11 Speed Limit: 2 5
12 Route No. Suffix 13 Milepost
☒ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W of: Ward Street (16)
18 Speed Limit: 2 5
19 Ramp ☐ To: ☐ From: 17 Cross Road Name 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude 22 Longitude

	Vehicle 1	Vehicle 2
23 Veh No	1	2
24 Policy No. / 53 Veh No	4428-23-41-42	HPA00002037370
25 Ins Code / 55 Ins Code	100	411
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run		
26 Driver's First Name / Initial / Last Name	Javier / / Cortes-Ortiz	Nuria / S / Orellana-Fiallos
29 Sex / 59 Sex	M	F
27 Number and Street / 57 Number and Street	308 Woodnor Ct Apt 307	9 McWhorter St Brentwood
30 Eyes / 60 Eyes	2	
28 City / State / Zip / 58 City / State / Zip	New Brunswick, NJ 08901-3406	NY 11717
31 State / 32 Driver's License No		
33 DOB (mm dd yy)	05 27 94	10 22 81
34 Expires (mm yy) / 61 State / 62 Driver's License No / 63 DOB / 64 Expires		
35 Owner's First Name / Initial / Last Name	☒ Same As Driver	☐ Same As Driver: Estefania / A / Cabraldelacruz
36 Number and Street / 66 Number and Street		305 Howart Street
37 City / State / Zip / 67 City / State / Zip		New Brunswick, NJ 08901
38 Make	HON	TOY
39 Model	CIV	CAM
40 Color	WT	RED
41 Year	07	200
42 Plate No.	G15GGK	R76ESX
43 State	NJ	NJ
44 VIN	2HGFG12657H571178	4T1BE46K67U114349
45 Expires	02/17	10/16
46 Vehicle Removed To	☐ Driven ☒ Left at Scene ☐ Towed ☐ Impound ☐ Disabled	☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled
47 Authority	☒ Owner ☐ Driver ☐ Police	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ __ %; ☐ Pending	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.__ __ %; ☐ Pending
49 Hazardous Material	On Board ☐ Spill ☐ Name or Placard No.	On Board ☐ Spill ☐ Name or Placard No.
50 Carrier No.	☐ USDOT ☐ Other *	☐ USDOT ☐ Other *
51 Commercial Vehicle Weight	☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs	☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs
52 Carrier name		

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

Driver #1 was traveling westbound on Ward Street towards Lee Avenue. Driver #2 was traveling southbound on Lee Avenue towards Ward Street. As Driver #2 crossed the intersection of Lee Avenue and Ward Street driver #1 proceeded across Lee Avenue after making a stop on Ward Street and struck driver #2. Vehicle #1 sustained damage to the front passenger side bumper and vehicle #2 sustained damage to the driver side, side bumper and a flat front driver side tire. There were no injuries to report and all occupants refused medical attention.

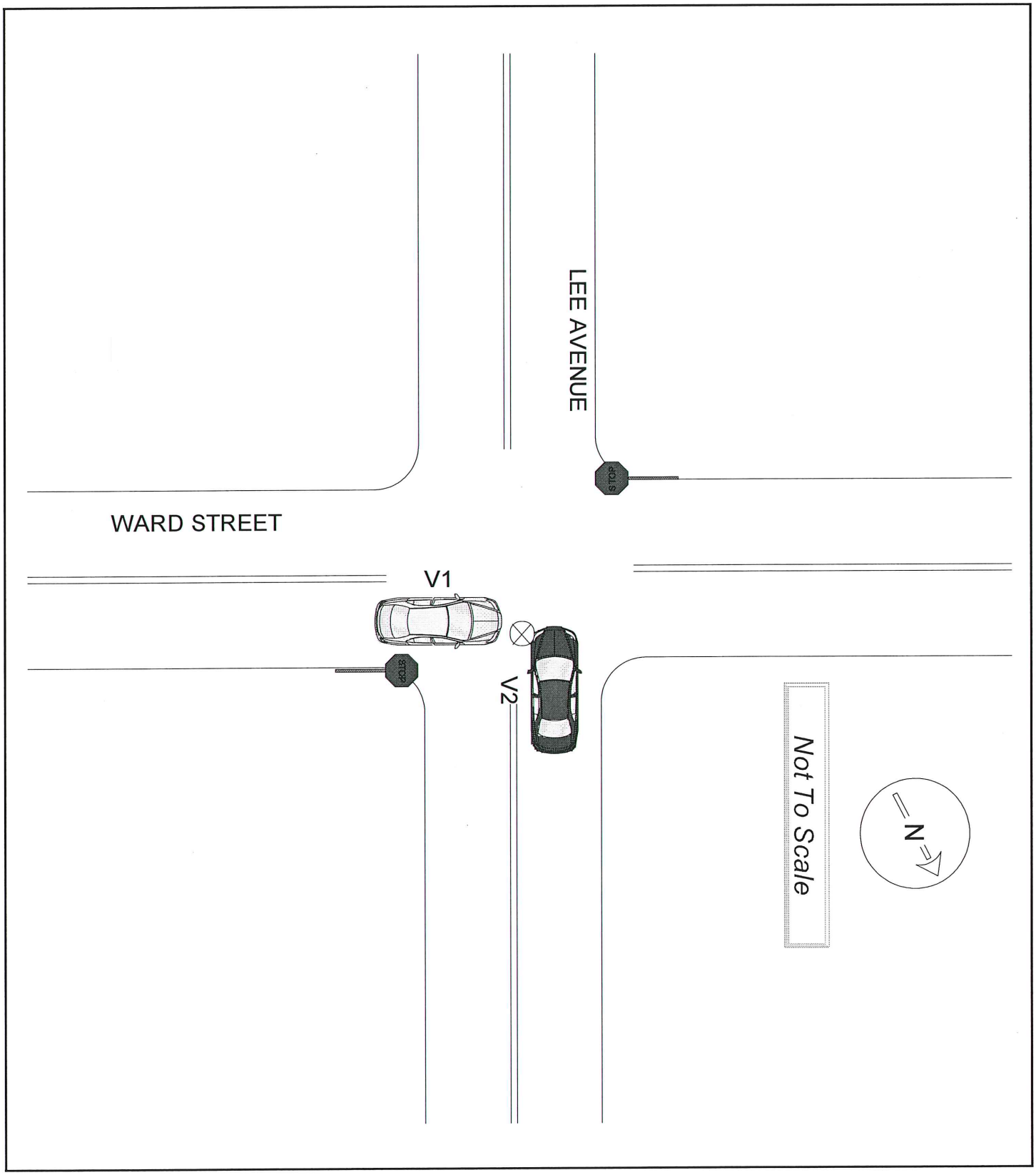
136 Damage To Other Property

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

141 Officer's Signature: PO Ervin Gomez 7333 | 142 Badge No.: 7333 | 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	----	22	M	----	----	1	04	04	----	--------	Cortes-Ortiz, Javier-308 Woodnor Ct Apt 307, New Brunswick ,
B	1	02	01	----	21	F	----	----	1	04	04	----	--------	Reyes, Diyanira-346 Perry Dr, No Brunswick, NJ 08902-5595
C	2	01	01	----	34		----	----	1	04	04	----	--------	Orellana-Fiallos, Nuria-9 McWhorter St Brentwood, NY 11717
D	2	02	01	----	34	M	----	----	1	04	04	----	--------	Amaya Amaya, Jose-9 McWhorter St Brentwood, NY 11717
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-45585



NJTR-1B (rev. 07/2005)

PO Ervin Gomez 7333
Officer's Signature

7333
Badge Number

New Jersey Police Crash Investigation Report

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

96 05 | 97 01 | 98 06 | 99 05 | 100 01 | 101 02 | 102 01 | 103 01 | 104 01 | 105 11 | 106 ---- | 107 ---- | 108 01 | 109 ---- | 110 01 | 111 ---- | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 03 | 117 ----

1 Case Number: 16-45617

2 Police Dept of: New Brunswick — Code: 01

3 Station/Precinct:

10 Crash Occurred On: Ryders Lane (Road Name) Dir — 11 Speed Limit: 25

☒ At Intersection with ☐ Feet ☐ Miles (14, 15) ☐ N ☐ E ☐ S ☐ W (16) of: Labor Center Way — 18 Speed Limit: 25

12 Route No. Suffix 13 Milepost

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 14 16 — 5 Day of Week: Su M Tu W Th F Sa — 6 Time (use 2400 hrs): 00 22 — 7 Municipality Code: 1214 — 8 Total Killed: 00 — 9 Total Injured: 00

118a 02 | 118b ---- | 119a ---- | 119b ---- | 120 01 | 121 ---- | 122 ---- | 123 ---- | 124 01 | 125 ---- | 126 ---- | 127 ---- | 128a 26 | 128b 56 | 128c ---- | 128d ---- | 129a ---- | 129b ---- | 129c ---- | 129d ---- | 130 01 | 131 12 | 132 | 133

Vehicle 1

23 Veh No: 1 — 24 Policy No.: 908583881 — 25 Ins Code: 135

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

26 Driver's First Name: Emanuel — Initial — Last Name: Ferreira — 29 Sex: M

27 Number and Street: 101 George St — 30 Eyes: 2

28 City: South River, NJ 08882-1463 — State — Zip

31 State — 32 Driver's License No — 33 DOB (mm dd yy): 07 01 96 — 34 Expires (mm yy)

35 Owner's First Name: Marcia — Initial — Last Name: Ferreira — ☐ Same As Driver

36 Number and Street: 101 George Street

37 City: South River, NJ 08882-1463 — State — Zip

38 Make: HYD — 39 Model: VTO — 40 Color: BK — 41 Year: 13 — 42 Plate No.: N68DGZ — 43 State: NJ

44 VIN: KMHTC6AE0DU143431 — 45 Expires: 07/17

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.: NA

50 Carrier No.: NA ☐ USDOT ☐ Other *

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

52 Carrier name: NA

Vehicle 2

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

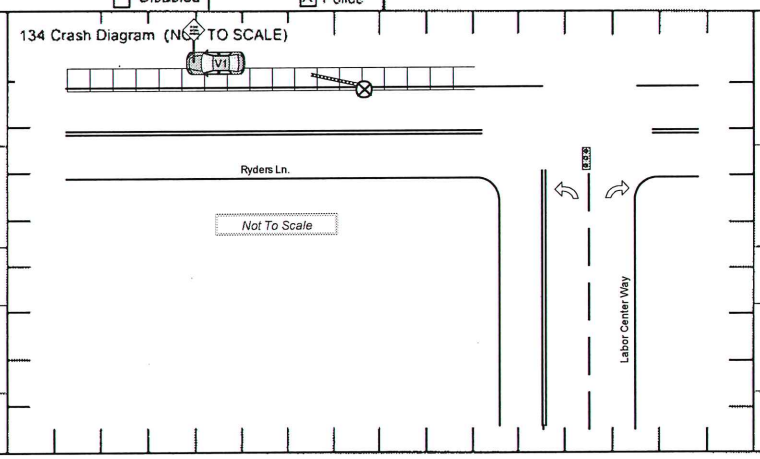
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.:

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

Driver 1 made a left turn from Labor Center Way onto Ryders Lane. Driver 1 claims a white vehicle almost hit him and he lost control of his vehicle, going up onto the curb and hit a traffic sign causing damage to the passenger side front tire and the front of vehicle 1.

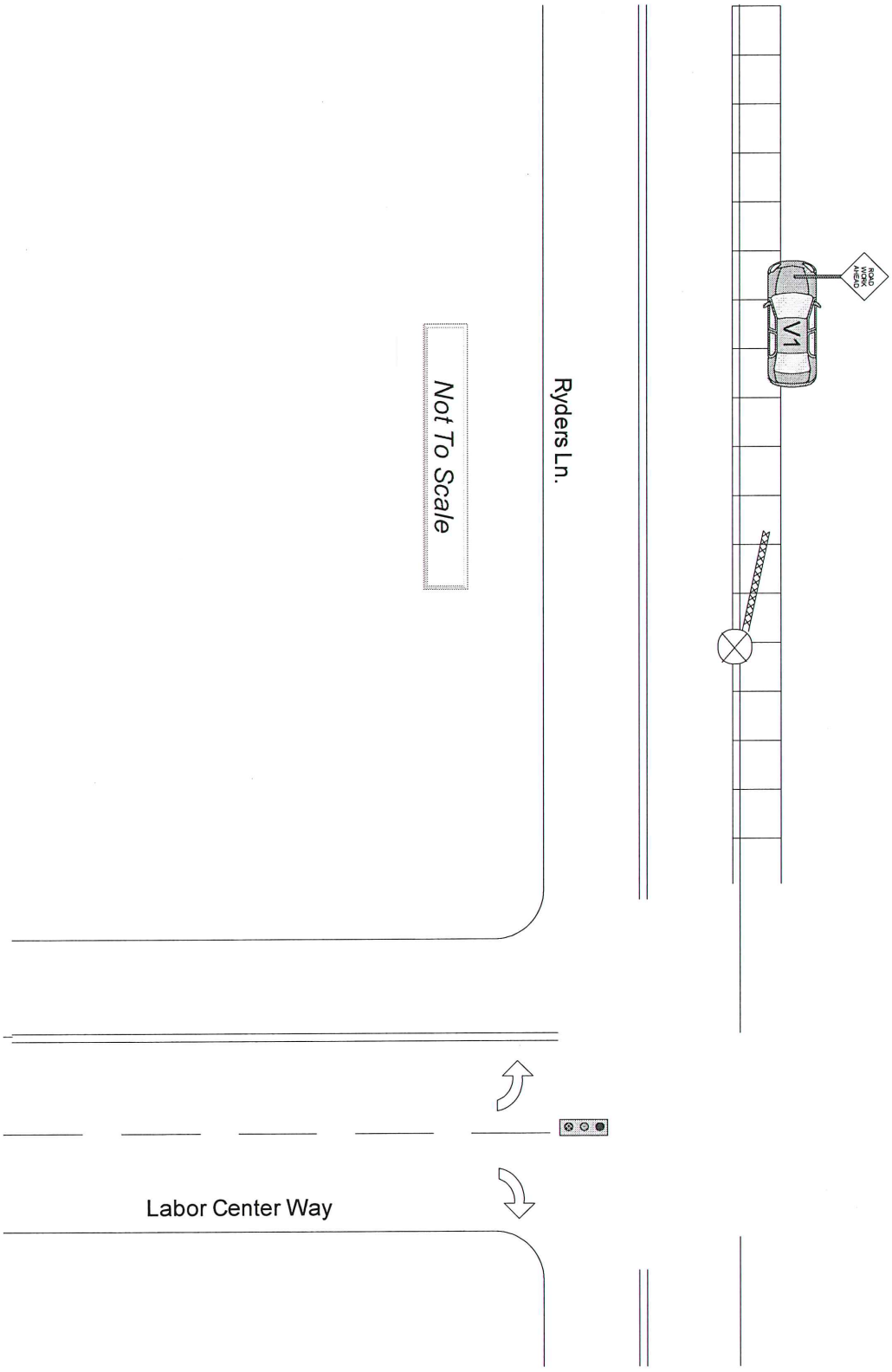
136 Damage To Other Property

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

141 Officer's Signature: PO Phillip Swindell 7322 — 142 Badge No.: 7322 — 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	----	----	---	04	04	----	--------	Ferreira, Emanuel-101 George St, South River, NJ 08882
B	1	03	----	----	20	M	----	----	---	04	04	----	--------	Huq, Naveed-306 Bromley Street., East Brunswick, NJ
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station_____	Code 0 1 Case No. 16-45617



PO Phillip Swindell 7322
Officer's Signature

7322
Badge Number

Page 1 of 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

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

1 Case Number: 16-45659

2 Police Dept of: New Brunswick Code: 0 1

3 Station/Precinct:

4 Date of Crash (mm dd yy): 07 14 16

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

6 Time (use 2400 hrs): 08 32

7 Municipality Code: 1 2 1 4

8 Total Killed: - -

9 Total Injured: - -

10 Crash Occurred On: Johnson Drive (Road Name) Dir

☐ At Intersection with ☒ Feet ☐ Miles — 75 (14 15) — ☐ N ☐ E ☐ S ☒ W (16) of: Albany Street

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 02 | 119b 09

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

23 Veh No: 1 24 Policy No.: F544273-6 25 Ins Code: 426

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

26 Driver's First Name: Gail Initial: M Last Name: Alterman 29 Sex: F

27 Number and Street: 335 Felton Ave. 30 Eyes: 5

28 City: Highland Park, NJ 08904 State Zip

31 State 32 Driver's License No 33 DOB (mm dd yy): 08 09 55 34 Expires (mm yy)

35 Owner's First Name: ira Initial Last Name: Gang

☐ Same As Driver

36 Number and Street: 335 Felton Ave

37 City: Highland Park, NJ 08904 State Zip

38 Make: Acura 39 Model: TSX 40 Color: Blk 41 Year: 200 42 Plate No.: E25GES 43 State: NJ

44 VIN: JH4CL96834C045006 45 Expires: 01/17

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

106 ---- | 107 ---- | 108 01 | 109 04 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 02 | 117 02

53 Veh No: 2 54 Policy No.: 4304-15-57-83 55 Ins Code: 100

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

56 Driver's First Name: Danielle Initial: A Last Name: Wessels 59 Sex: F

57 Number and Street: 49 South 9TH Ave. Apt 2M 60 Eyes: 4

58 City: Highland Park, NJ 08904 State Zip

61 State 62 Driver's License No 63 DOB (mm dd yy): 02 06 82 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: Ford 69 Model: Exp 70 Color: Blu 71 Year: 200 72 Plate No.: A55GES 73 State: NJ

74 VIN: 1FMYU60E61UA95238 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.

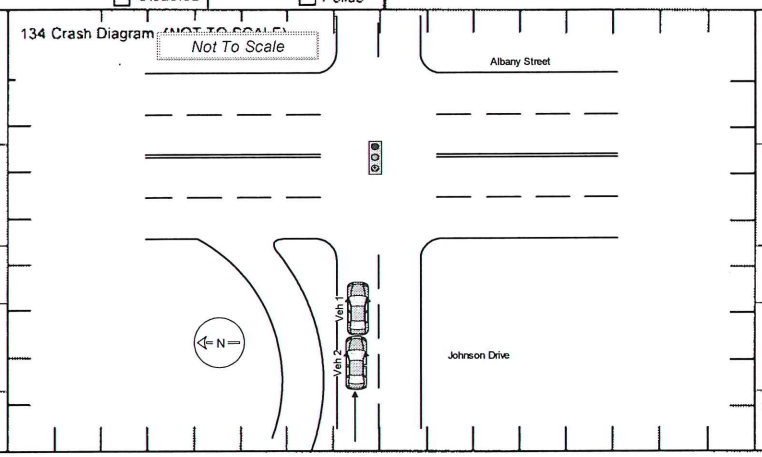
80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

118 01 | 119 01 | 120 01 | 121 01 | 122 ---- | 123 ---- | 124 08 | 125 07 | 126 03 | 127 03 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 26 | 129b ---- | 129c ---- | 129d ----

134 Crash Diagram (NOT TO SCALE) — Not To Scale



135 Crash Description

Vehicle 1 was stopped on Johnson Drive approximately 75 Feet West of Albany Street, when Vehicle 2 struck Vehicle 1 on the rear bumper. Driver 2 stated she thought Vehicle 1 was going to begin to move forward. No reported injuries.

130 06 | 131 06

136 Damage To Other Property: None

132 12

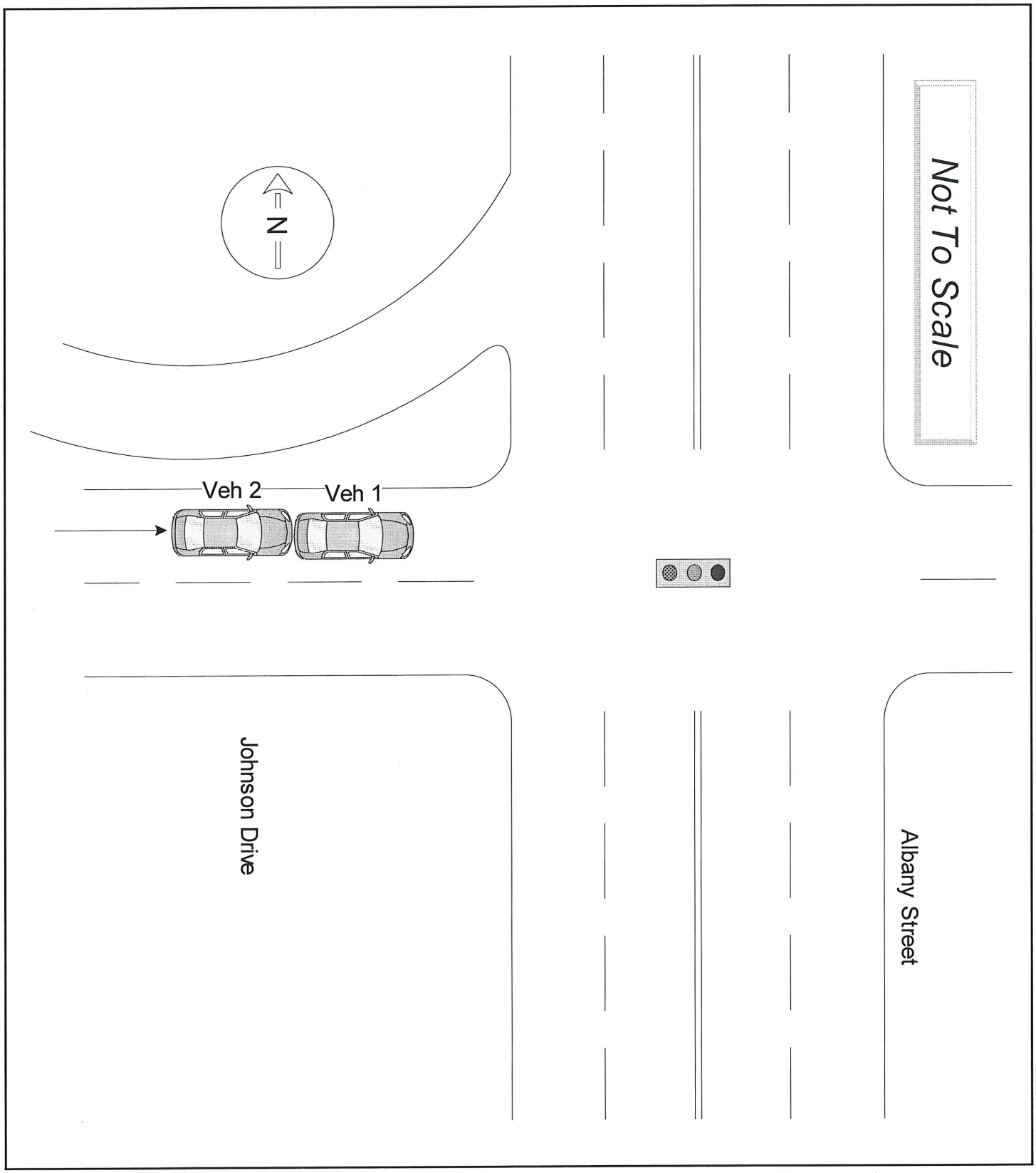
Oper. | 137 Charge ☐ Multiple Charges | 138 Summons No. | Oper. | 139 Charge ☐ Multiple Charges | 140 Summons No.

133 12

141 Officer's Signature: PO Tammie Ward 7237 | 142 Badge No. | 143 Reviewed By: JOHN 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	01	01	----	60	F	----	----	1	09	04	----	--------	Alterman, Gail-335 Felton Ave., Highland Park, NJ 08904
B	2	01	01	----	34	F	----	----	1	09	04	----	--------	Wessels, Danielle-49 South 9TH Ave. Apt 2M, Highland Park,
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Station	Code 0 1 Case No. 16-45659



NJTR-1B (rev. 07/2005)

PO Tammie Ward 7237
Officer's Signature

Badge Number