Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32646

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: Commercial Avenue (Road Name) Dir: 11 Speed Limit: 25

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

12 Route No. 13 Milepost 18 Speed Limit: 25

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

21 Latitude 22 Longitude

4 Date of Crash mm dd yy: 05 23 16

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

6 Time (use 2400 hrs): 08 56

7 Municipality Code: 1214

8 Total Killed: X X

9 Total Injured: X X

Vehicle 1

23 Veh No: 1

24 Policy No.: 4330-14-99-41

25 Ins Code: 100

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

26 Driver's First Name: HECTOR Initial: Last Name: FUENTES

29 Sex: M

27 Number and Street: 224 Commercial Ave

30 Eyes: 2

28 City: New Brunswick , NJ 08901-2736 State Zip

31 State: 32 Dnver's License No: 33 DOB mm dd yy: 03 02 62 34 Expires mm yy:

35 Owner's First Name: ☐ Same As Driver HECTOR Initial: Last Name: FUENTES

36 Number and Street: 224 Commercial Ave

37 City: New Brunswick , NJ 08901-2736 State Zip

38 Make: DOD 39 Model: CAR 40 Color: BK 41 Year: 07 42 Plate No.: X85GET 43 State: NJ

44 VIN: 1D4GP45R47B100113 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.: 4373-77-22-60

55 Ins Code: 148

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

56 Driver's First Name: ELI Initial: Last Name: DAYAN

59 Sex: M

57 Number and Street: 68 Tall Oak Drive

60 Eyes: 2

58 City: East Brunswick, NJ 08816-3432 State Zip

61 State: 62 Driver's License No: 63 DOB mm dd yy: 11 14 50 64 Expires mm yy:

65 Owner's First Name: ☐ Same As Driver ELI Initial: Last Name: DAYAN

66 Number and Street: 68 Tall Oak Drive

67 City: East Brunswick, NJ 08816-3432 State Zip

68 Make: HON 69 Model: ACC 70 Color: SL 71 Year: 04 72 Plate No.: C48EXR 73 State: NJ

74 VIN: 1HGCM56854A091487 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 ☐ Unne

Results: 0.___ % ☐ Pending

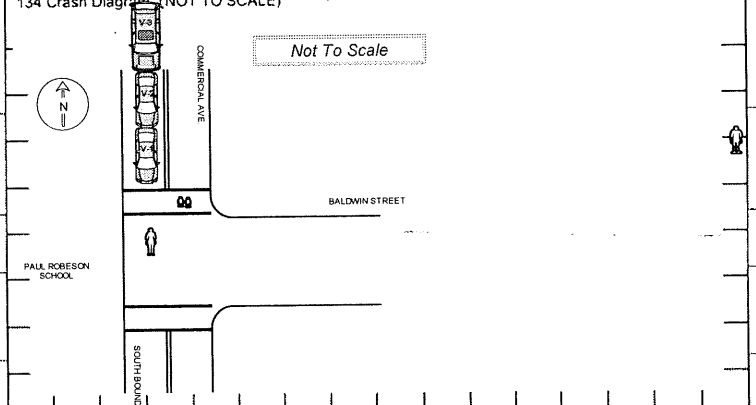
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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

DRIVERS OF VEHICLES 1 AND 2 STATED AS THEY WERE STOPPED AT THE PEDESTRIAN CROSSWALK VEHICLE 3 REAR ENDED VEHICLE 2 PUSHING VEHICLE 2 INTO THE REAR OF VEHICLE 1. DRIVER OF VEHICLE 3 CONFIRMED THE STATEMENTS OF DRIVERS 1 AND 2 ADDING THEY CAME TO AN IMMEDIATE STOP AND HE DID NOT HAVE THE TIME TO STOP DUE TO THE RATE OF SPEED HE WAS TRAVELING.

136 Damage To Other Property: NONE

Oper. 1 | 137 Charge: NONE ☐ Multiple Charges | 138 Summons No.: NONE

Oper. 2 | 139 Charge: NONE ☐ Multiple Charges | 140 Summons No.: NONE

141 Officer's Signature: PO Tracy Gayden 7228

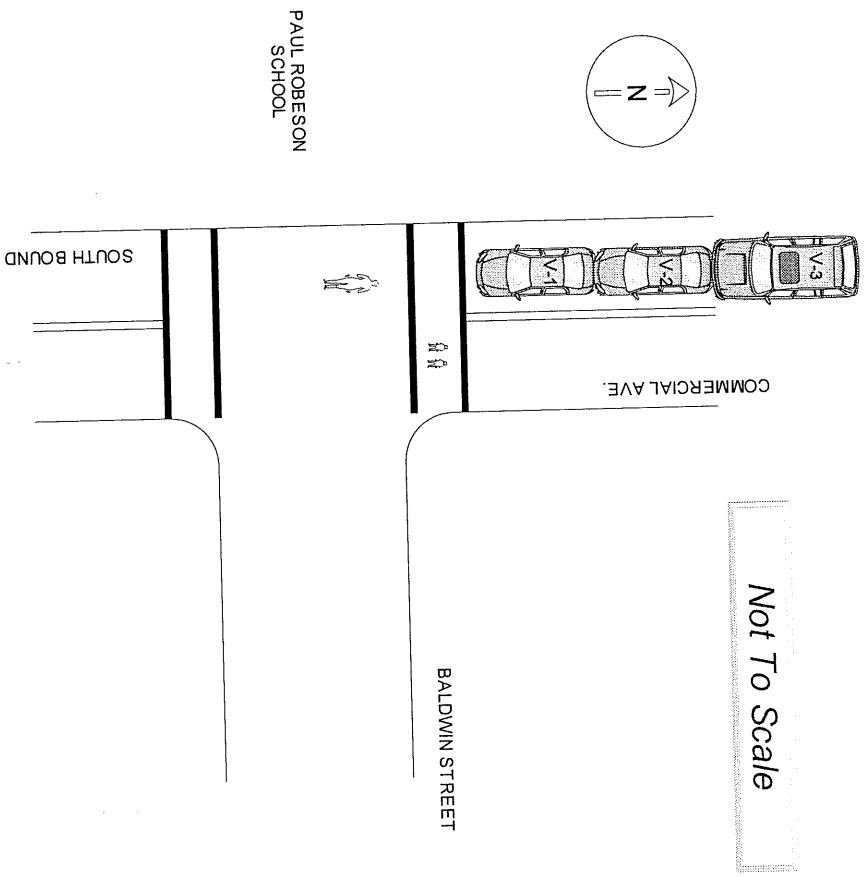
142 Badge No.: 7228

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	----	54	M	----	----	1	04	04	----	--------	FUENTES, HECTOR-224 Commercial Ave, New Brunswick ,
B	2	01	01	----	65	M	----	----	1	04	04	----	--------	DAYAN, ELI-68 Tall Oak Drive, East Brunswick, NJ 08816
C	3	01	----	----	25	M	----	----	1	04	04	----	--------	HEADLEY, REGINALD-51 SEYMOUR TERRACE,
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. New Brunswick	Code 0 1
Motor Vehicle Crash Description	Station	Case No. 16-32646



NJTR-1B (rev. 07/2005)

PO Tracy Gayden 7228
Officer's Signature

7228
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

1 Case Number: 16-32648

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: 703 Jersey Avenue (Road Name) (Dir)

11 Speed Limit: 40

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

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

17 Cross Road Name

19 ☐ To: Ramp ☐ From: ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude | 22 Longitude

118a 25 | 118b ----

119a 02 | 119b ----

4 Date of Crash (mm dd yy): 05 23 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 09 01

7 Municipality Code: 1214

8 Total Killed: - -

9 Total Injured: - -

101 02

Vehicle 1

23 Veh No: 1

24 Policy No.: 50545778

25 Ins Code: 134

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

102 01

26 Driver's First Name: VASANIA Initial: F Last Name: THOMAS

29 Sex: M

103 01

27 Number and Street: 252 PERRY DRIVE

30 Eyes: 2

104 02

28 City: NORTH BRUNSWICK, NJ 08902 State Zip

105 01

31 State | 32 Driver's License No | 33 DOB (mm dd yy): 11 06 84 | 34 Expires (mm yy)

☒ Same As Driver

35 Owner's First Name: VASANIA Initial: F Last Name: THOMAS

36 Number and Street: 252 PERRY DRIVE

106 ----

37 City: NORTH BRUNSWICK, NJ 08902 State Zip

107 ----

38 Make: HON | 39 Model: ULX | 40 Color: SIL | 41 Year: 201 | 42 Plate No.: H15EVU | 43 State: NJ

108 01

44 VIN: 1HGCP2F38AA032097

45 Expires: 12/16

109 04

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

47 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

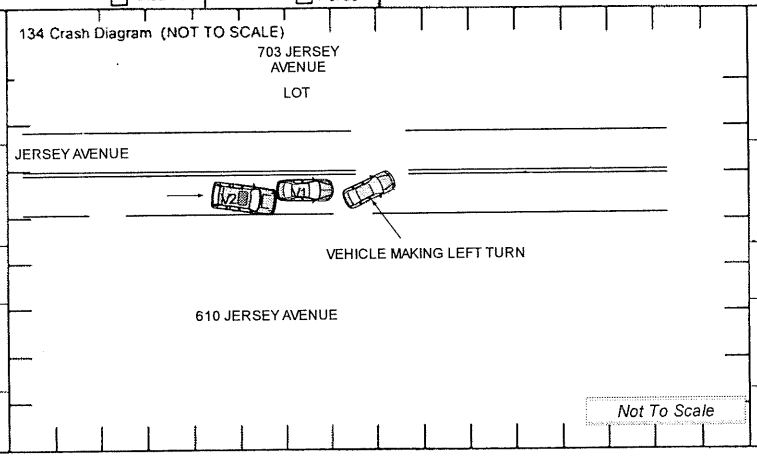
☐ ≥ 26,001 lbs

116 01

117 01

52 Carrier name

134 Crash Diagram (NOT TO SCALE)



Vehicle 2

53 Veh No: 2

54 Policy No.: F026389-7

55 Ins Code: 426

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

120 01

56 Driver's First Name: SAMUEL Initial: M Last Name: GAYLORD

59 Sex: M

121 01

57 Number and Street: 2 Windy Bush Way

60 Eyes: 2

58 City: Ewing, NJ 08628-1015 State Zip

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 11 30 69 | 64 Expires (mm yy)

122 ----

☐ Same As Driver

65 Owner's First Name: Initial: Last Name: CCAP AUTO LEASE LTD

123 ----

66 Number and Street: PO BOX 961272

124 08

67 City: FORT WORTH, TX State Zip

125 07

68 Make: JEEP | 69 Model: GRA | 70 Color: SIL | 71 Year: 201 | 72 Plate No.: X95ENV | 73 State: NJ

74 VIN: 1C4RJFBG8EC567094

75 Expires: 08/17

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

77 Authority ☐ Owner ☒ Driver ☐ Police

126 11

78 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

127 11

Type: ☐ Breath ☐ Blood ☐ Unne

Results: 0.__ __ % ☐ Pending

128a 26

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

128b ----

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 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 Ronald Rachilla 7206

142 Badge No.: 7206

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	----	31	M	----	----	1	09	04	----	--------	THOMAS, VASANIA-252 PERRY DRIVE, NORTH
B	2	01	01	----	46	M	----	----	1	09	04	----	--------	GAYLORD, SAMUEL-2 Windy Bush Way, Ewing, NJ 08628
C														
D														
E														

Page _____ of _____

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32648

(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 NORTH ON JERSEY AVENUE IN FRONT OF 610 JERSEY AVENUE. VEHICLE #2 WAS ALSO NORTH ON JERSEY AVENUE, DIRECTLY TO THE REAR OF VEHICLE #1.

IT APPEARS THAT VEHICLE #1 HAD COME TO A STOP AND WAS WAITING FOR AN UNKNOWN VEHICLE IN FRONT OF IT TO MAKE A LEFT TURN INTO THE LOT AT 703 JERSEY AVENUE. VEHICLE #2 BEGAN TO SLOW BUT DID NOT STOP IN TIME AND STRUCK THE REAR RIGHT BUMPER OF VEHICLE #1 WITH IT'S LEFT FRONT END. THE IMPACT CAUSED DAMAGE TO BOTH VEHICLES.

PO Ronald Rachilla 7206

Officer's Signature

7206

Badge Number

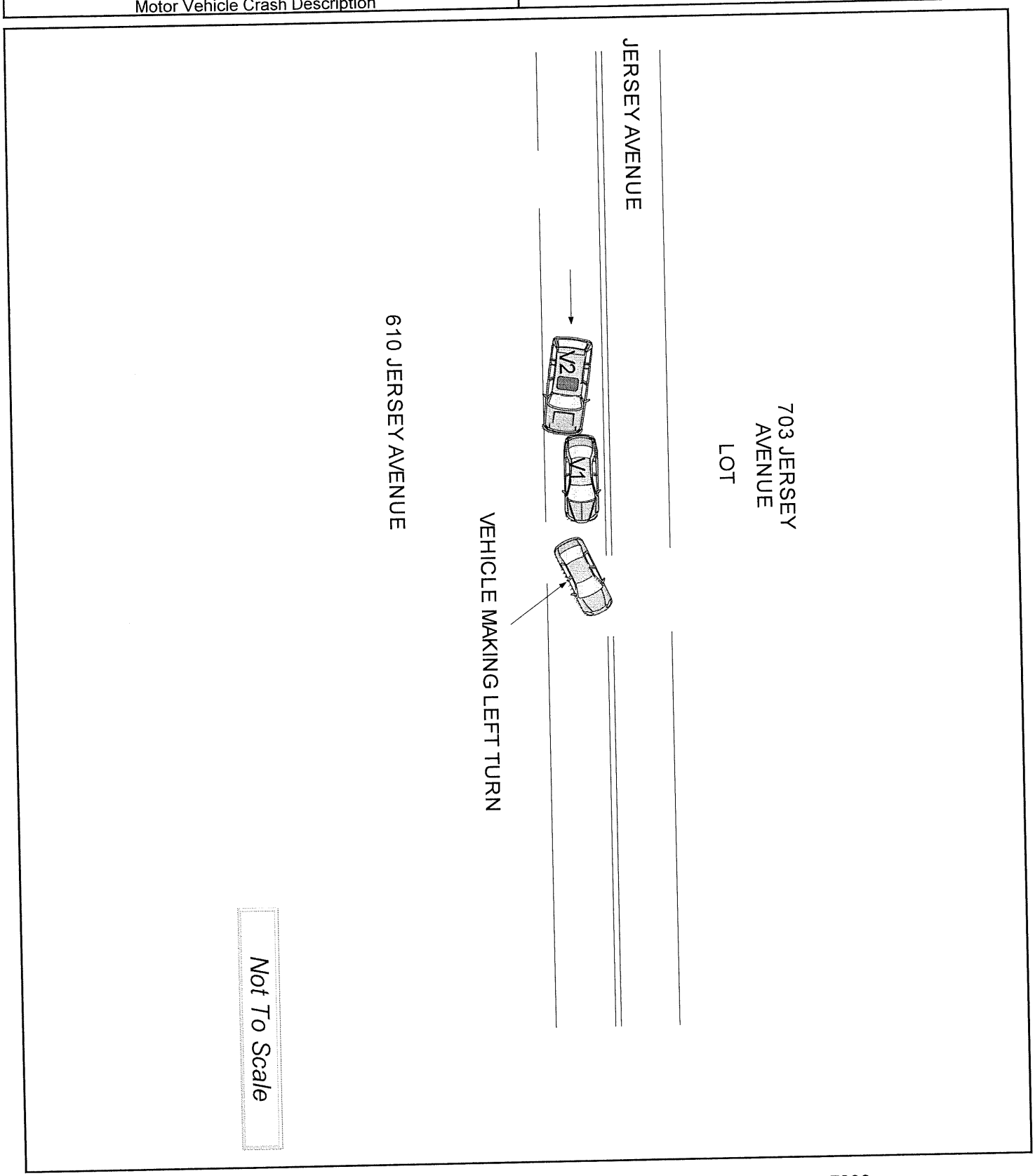
NJTR-1A (rev. 07/2005)

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept. New Brunswick Code 0 1

Station _____ Case No. 16-32648



NJTR-1B (rev. 07/2005)

PO Ronald Rachilla 7206
Officer's Signature

7206
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32643	10 Crash Occurred On: French Street (Road Name)	11 Speed Limit	118a: 00
2 Police Dept of: New Brunswick, Code: 01	☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ S ☐ E ☐ W of: Bethany Street (16)	12 Route No. / Suffix / 13 Milepost / 18 Speed Limit	118b
3 Station/Precinct	19 ☐ To: ☐ Ramp ☐ From:	17 Cross Road Name / 20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB 119a: 04
4 Date of Crash (mm dd yy): 05 23 16	5 Day of Week: Su M Tu W Th F Sa: O	6 Time (use 2400 hrs): 08 34	7 Municipality Code: 1214
8 Total Killed: 00	9 Total Injured: 01	21 Latitude / 22 Longitude	119b: 02

Vehicle 1

23 Veh No: 1	24 Policy No.: 17251433	25 Ins Code: 135	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name: Mejia Vasquez,Sergio		29 Sex: M	30 Eyes: 1
27 Number and Street: 103 Sydney Pl.			
28 City / State / Zip: Somerset NJ 08873			
31 State / 32 Driver's License No	33 DOB (mm dd yy): 11 02 86	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: CHE	39 Model: AVE	40 Color: SL	41 Year: 04
42 Plate No.: K48DYX	43 State: NJ	44 VIN: KL1TJ52654B167688	45 Expires: 02/17
46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled	47 Authority: ☐ Owner ☐ Driver ☐ Police		

Vehicle 2

53 Veh No: 2	54 Policy No.: HPA00002096078	55 Ins Code: 411	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
56 Driver's First Name / Initial / Last Name: Raynier A Ovall		59 Sex: m	60 Eyes: 2
57 Number and Street: 40b Pardun RD.			
58 City / State / Zip: No. Brunswick NJ 08902			
61 State / 62 Driver's License No	63 DOB (mm dd yy): 01 26 94	64 Expires (mm yy)	
65 Owner's First Name / Initial / Last Name: ☐ Same As Driver Rony Vargas			
66 Number and Street: 28 Hale ST. apt.			
67 City / State / Zip: New Brunswick Nj 08901			
68 Make: HON	69 Model: CRV	70 Color: BL	71 Year: 97
72 Plate No.: N46GPT	73 State: NJ	74 VIN: JHLRD185XVC065822	75 Expires: 05/17
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

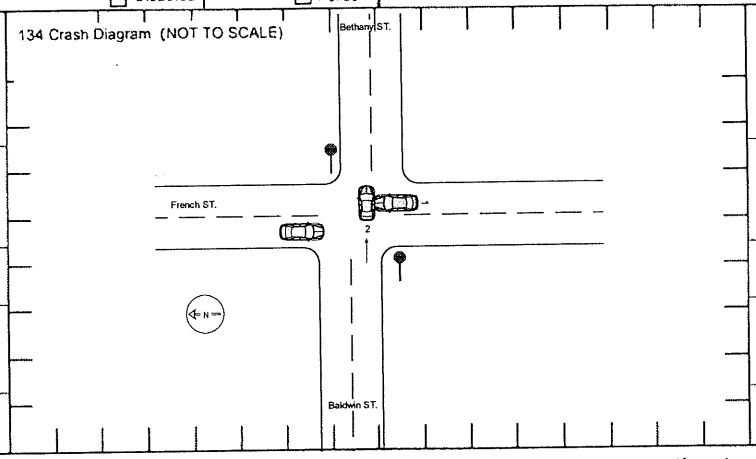
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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 ☐ 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: Vehicle # 2 was at a stop sign at Baldwin ST. The driver was attempting to go straight ahead onto Bethany ST. The driver stated that a motorist who was going north bound on French St. allowed him to cross French ST. upon going across he was struck by vehicle # 1 who was going straight ahead south bound on French ST.

136 Damage To Other Property

Oper.	137 Charge	138 Summons No.	Oper.	139 Charge	140 Summons No.
1	unlicensed taxi cab driver	Q373266	1	Unlicensed taxi Cab	Q373267

141 Officer's Signature: PO David Pagan 7169 | 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	----		M	----	----	---	03	03	----	--------	
B	1	05	01	----	15	F	06	08	2	01	04	----	6102	
C	2	01	01	----		M	----	----	---	04	04	----	--------	
D	2	03	01	04	20	M	----	----	---	04	04		--------	Rone Orlando Vargas 40B Pardun RD. , North Brunswick NJ
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32643

(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

Today Later in the day i was dispatched to ST. Peters hospital ER to talk to a juvenile a car accident victim. The juvenile 15 year old Katy Rivera was in the ER with her cousin Yoxsabel Vasquez who is a adult. The juvenile stated that this morning she called Family cab company 732) 227-0099 she needed transportation from her house at 250 Fulton St. to the New Brunswick high school located on RT. 27 .The juvenile was picked up by Vehicle # 1 and the driver # 1 ,she was going to be charged $5.00 for the ride. The juvenile stated while on French ST. and Bethany near the BP gas station vehicle # 1 was engaged in a accident with vehicle # 2 .The victim Ms. Rivera stated she was in the back seat and had no seat belt on .The victim was tossed around and did bump her head ,knee and had back pain. The driver immediately called someone and another vehicle transported the student to the school before police arrival. The driver did not report to the police that he had a passenger in the vehicle .The student while at school was dizzy and had some head and back pain .The student was sent to the school nurse who called the ambulance and the police department.The driver will be issued Summon

PO David Pagan 7169

Officer's Signature

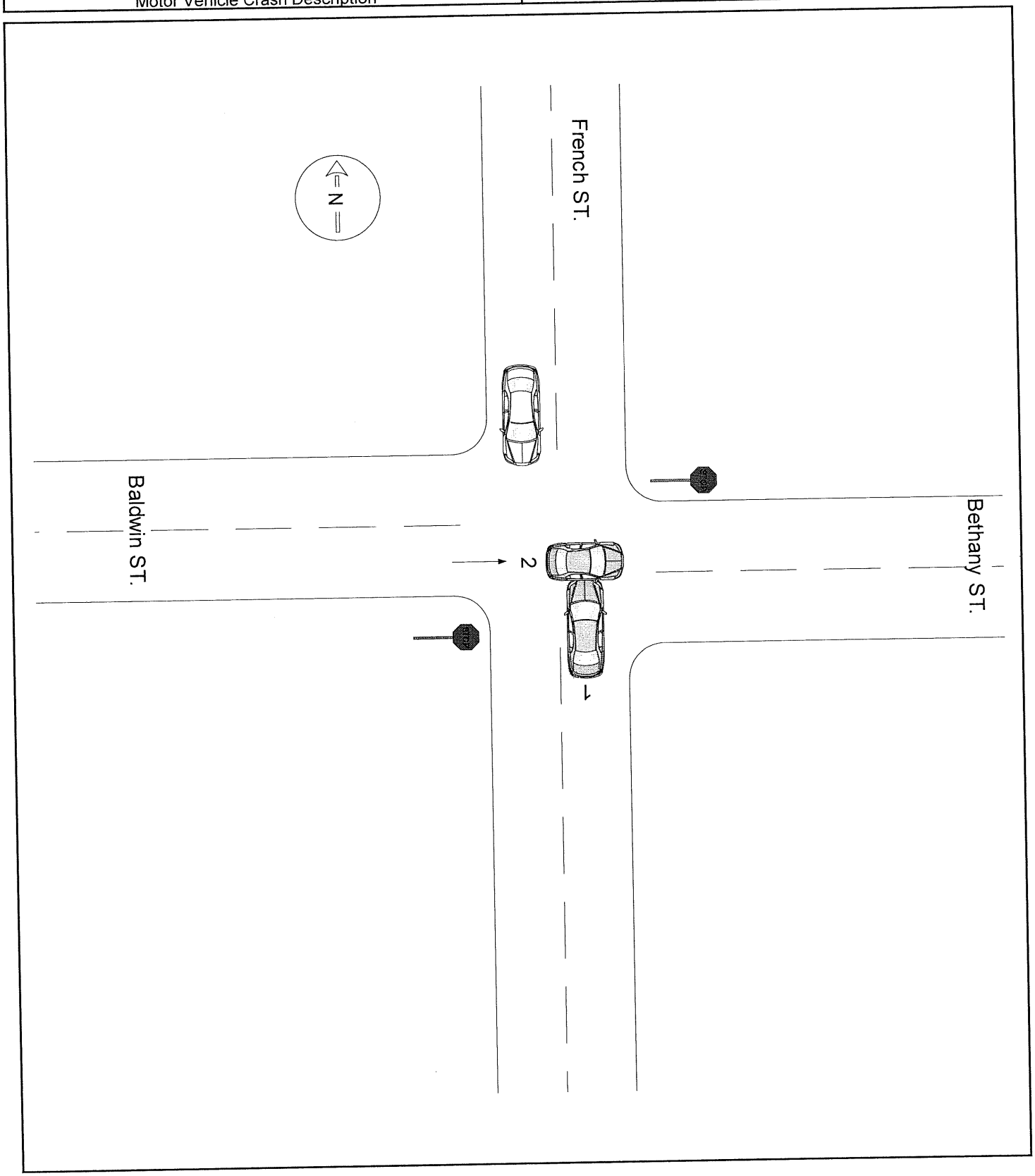
Badge Number

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept. New Brunswick Code 01

Station _____ Case No. 16-32643



NJTR-1B (rev. 07/2005)

PO David Pagan 7169
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

Page 1 of 2 | ☐ Fatal | ☐ Reportable | ☒ Non-Reportable | ☐ Change Report

1 Case Number	16-32663
2 Police Dept of	New Brunswick
Code	01
3 Station/Precinct	
10 Crash Occurred On :	Easton Avenue (Road Name)
11 Speed Limit	
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	
☒ At Intersection with	Landing Lane
☐ Feet / ☐ Miles	☐ N ☐ E ☐ S ☐ W of :
14 / 15 / 16	
17 Cross Road Name	
19 ☐ To: ☐ Ramp ☐ From:	☐ NB ☐ EB ☐ SB ☐ WB
20 Route/Name	
4 Date of Crash mm dd yy	05 23 16
5 Day of Week	O (Su M Tu W Th F Sa)
6 Time (use 2400 hrs)	09 47
7 Municipality Code	1214
8 Total Killed	
9 Total Injured	
21 Latitude	
22 Longitude	

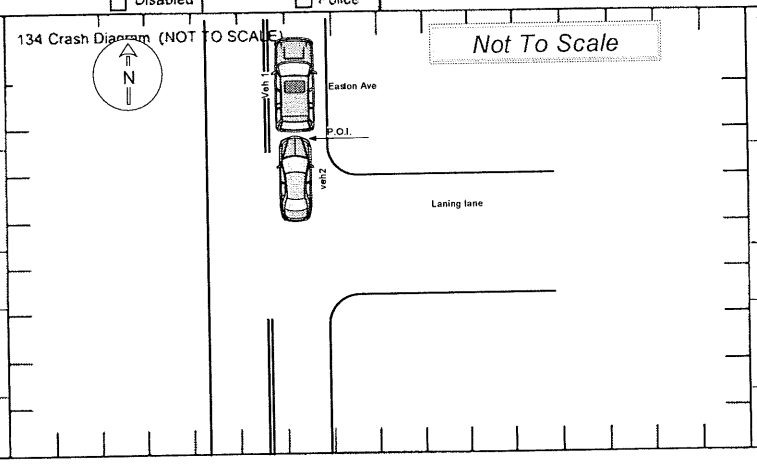
Vehicle 1

23 Veh No	1
24 Policy No.	0826950B0830A
25 Ins Code	962
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	Joseph / / Vince
29 Sex	M
27 Number and Street	31 Chelsea way
30 Eyes	9
28 City / State / Zip	Bridgewater NJ 08807
31 State / 32 Driver's License No	
33 DOB mm dd yy	01 05 85
34 Expires mm yy	
35 Owner's First Name / Initial / Last Name	☐ Same As Driver Jaime / L / Vince
36 Number and Street	31 Chelsea way
37 City / State / Zip	Bridgewater NJ 08807
38 Make	Subaru
39 Model	
40 Color	Slv
41 Year	201
42 Plate No.	D69FUA
43 State	NJ
44 VIN	V44574106601854
45 Expires	/10/19
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.	902864332
55 Ins Code	pro
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	Veronica / / Mills
59 Sex	F
57 Number and Street	
60 Eyes	
58 City / State / Zip	22 w Holly Lane Little Egg Horbor NJ 08087
61 State / 62 Driver's License No	
63 DOB mm dd yy	06 04 94
64 Expires mm yy	
65 Owner's First Name / Initial / Last Name	☐ Same As Driver Veronica / / mills
66 Number and Street	
67 City / State / Zip	22 w Holly Lane Little Egg Horbor NJ 08087
68 Make	Chrylser
69 Model	
70 Color	Brn
71 Year	200
72 Plate No.	V71EUZ
73 State	NJ
74 VIN	1C3EL66R34N218839
75 Expires	/12/16
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

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 Karl Murvay 7170 | 142 Badge No.: 7170 | 143 Reviewed By / Badge No.: 5199 | 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	----							
B	1	03	01	----	31	F	----							Vince, Jaime-131 Chelsea Way Bridgewater NJ 08807
C	2	01	01	----		F	----							
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32663

(Refer to vehicle by number)

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

135 Crash Description

Driver of Vehicle 1 Stated that he was at the traffic light and Vehicle 2 Hit Him From Behind Causing Minor Damage to His Vehicle .

Driver Of Vehicle 2 Stated that she Heard A Beep From A Car and looked for A Second and Did not see Vehicle 1 Stop In front of Her and she Hit Vehicle 1 in the Rear.

PO Karl Murvay 7170

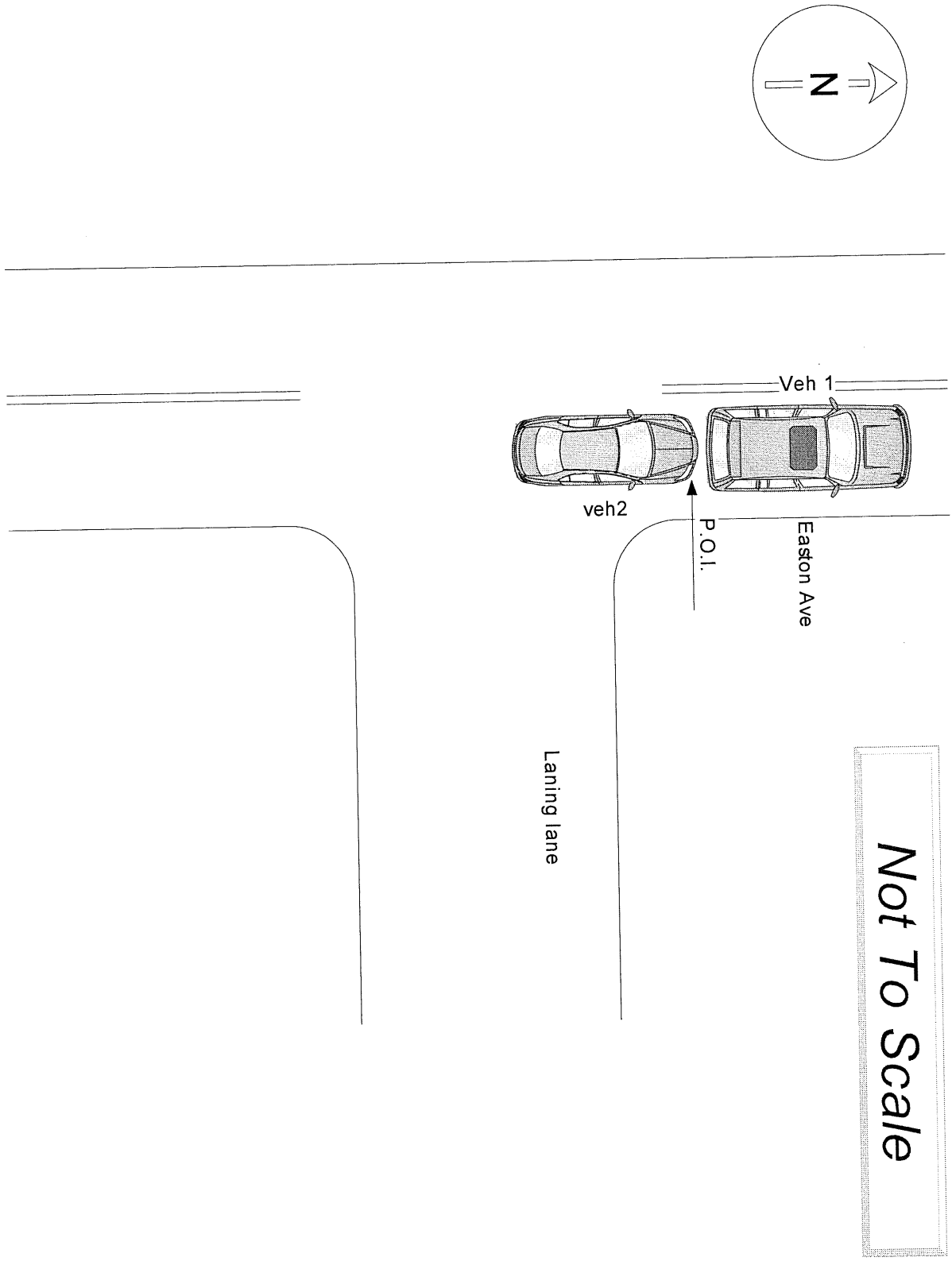
Officer's Signature

7170

Badge Number

NJTR-1A (rev. 07/2005)

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 01 Station _____ Case No. 16-32663



PO Karl Murvay 7170
Officer's Signature

7170
Badge Number

New Jersey Police Crash Investigation Report

Page 1 of 1 | ☐ Fatal | ☒ Reportable | ☐ Non-Reportable | ☐ Change Report

1 Case Number: 16-32669

2 Police Dept of: New Brunswick | Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 05 23 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 10 21

7 Municipality Code: 1214

8 Total Killed: X X

9 Total Injured: X X

10 Crash Occurred On: George Street (Road Name) | Dir | 11 Speed Limit: 25

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

12 Route No. | Suffix | 13 Milepost | 18 Speed Limit: 25

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

21 Latitude | 22 Longitude

Vehicle 1

23 Veh No: 1 | 24 Policy No.: USX188121-15 | 25 Ins Code: 00

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

26 Driver's First Name: HAROLD | Initial: J | Last Name: NOONAN | 29 Sex: M | 30 Eyes:

27 Number and Street: 4112 COTTON ROAD

28 City: PACE , FL 32571 | State | Zip

31 State | 32 Driver's License No | 33 DOB (mm dd yy): 06 20 66 | 34 Expires (mm yy)

35 Owner's First Name | Initial | Last Name: Daimler

☐ Same As Driver: Trust

36 Number and Street: 13650 HERITAGE PKWY FL 1

37 City: FORT WORTH, TX 761775323 | State | Zip

38 Make: FRHT | 39 Model: 125 | 40 Color: Red | 41 Year: 201 | 42 Plate No.: 2VN336 | 43 State: OK

44 VIN: 3AKJGLD51FSGJ6868 | 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

Vehicle 2

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

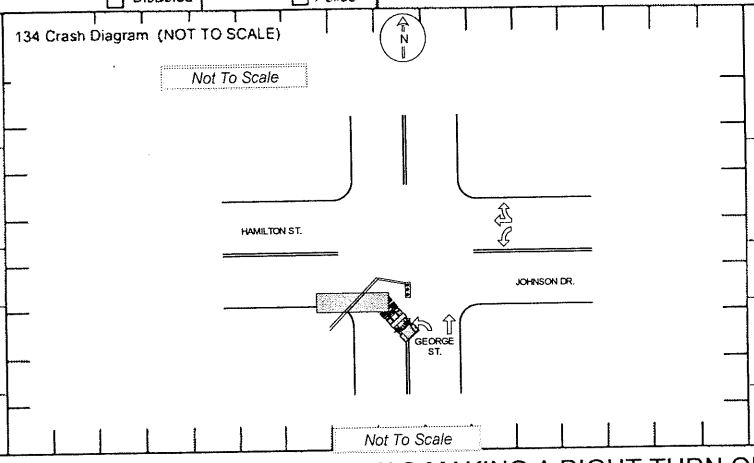
79 Hazardous Material: On Board ☐ Spill ☐ | Name or Placard No.

80 Carrier No. ☐ 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 STATED AS HE WAS MAKING A RIGHT TURN ONTO GEORGE STREET FROM HAMILTON STREET ANOTHER VEHICLE ATTEMPTED TO MAKE A LEFT TURN FROM GEORGE STREET ONTO HAMILTON STREET. DRIVER STATED HE MADE A HARD RIGHT TURN TO AVOID A HEAD ON COLLISION AND THE TRAILER CAUGHT THE LIGHT POLE. THE OTHER DRIVER DID NOT STOP OR WAIT AT THE SCENE. VEHICLE INSURANCE INFORMATION IS MOUNTAIN LAKE RISK RETENTION GROUP PH# 18006015500 NAIC # 13812

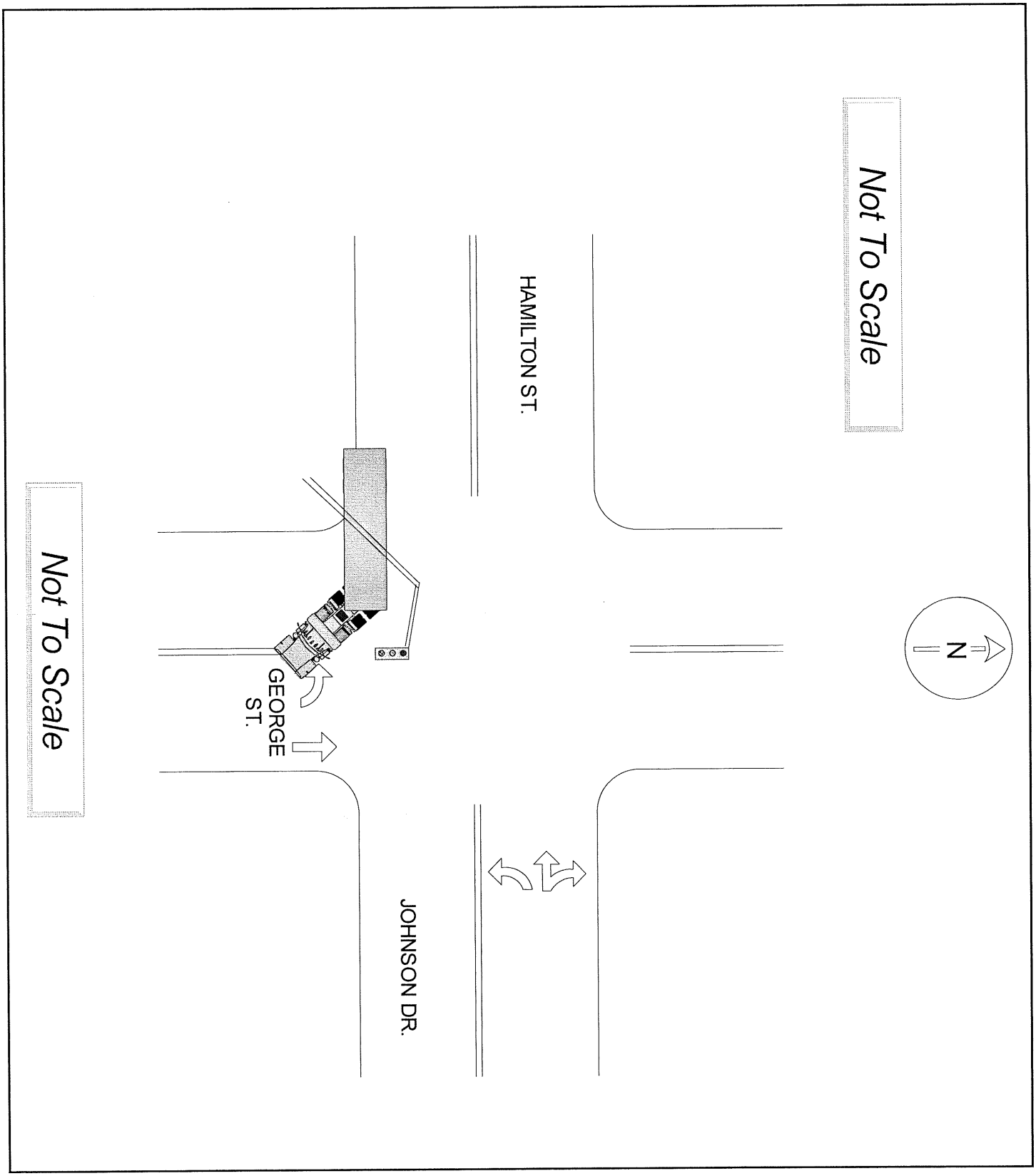
136 Damage To Other Property: TRAFFIC LIGHT POLE KNOCKED DOWN BY THE TRUCK.

Oper.	137 Charge	☐ Multiple Charges	138 Summons No.	Oper.	139 Charge	☐ Multiple Charges	140 Summons No.
1	NONE		NONE				

141 Officer's Signature: PO Tracy Gayden 7228 | 142 Badge No.: 7228 | 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	----	49	M	----	----	1	04	04	----	--------	NOONAN, HAROLD-4112 COTTON ROAD, PACE , FL 32571
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station _____ Case No. 16-32669



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: 16-32686

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: State Route 18 SB (Road Name) 11 Speed Limit: 40

☒ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ S ☐ E ☐ W of: Route 18 SB To US 1 SB Ramp (16)

12 Route No. 13 Milepost 18 Speed Limit: 25

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

4 Date of Crash mm dd yy: 05 23 16

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

6 Time (use 2400 hrs): 12 22

7 Municipality Code: 1214

8 Total Killed: 00

9 Total Injured: 01

21 Latitude 22 Longitude

Vehicle 1

23 Veh No: 01

24 Policy No.: F-5581038

25 Ins Code: 426

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

26 Driver's First Name: Eva Initial: Last Name: Jakabfi

29 Sex: F

27 Number and Street: 83 Walnut St

30 Eyes: 3

28 City: Spotswood, NJ 08884-2159 State: Zip:

31 State: 32 Driver's License No: 33 DOB mm dd yy: 09 19 32 34 Expires mm yy:

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

36 Number and Street: 83 Walnut St

37 City: Spotswood, NJ 08884-2159 State: Zip:

38 Make: CHR 39 Model: SEB 40 Color: BL 41 Year: 09 42 Plate No.: ZCX76X 43 State: NJ

44 VIN: 1C3LC56B49N517803 45 Expires: 01/17

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

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.: N/A 55 Ins Code:

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

56 Driver's First Name: N/A Initial: Last Name: N 59 Sex:

57 Number and Street: N/A 60 Eyes:

58 City: N/A State: Zip:

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

65 Owner's First Name: ☐ Same As Driver N/A Initial: Last Name:

66 Number and Street: N/A

67 City: N/A 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

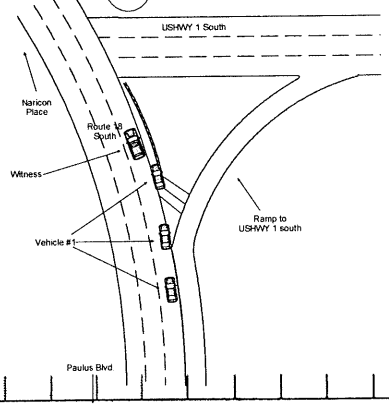
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

80 Carrier No. ☐ 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) N= 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 Edward Bobadilla 7248 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	83	F	05	08	2	04	04	----	6202	Jakabfi, Eva-83 Walnut St, Spotswood, NJ 08884-2159
B														
C														
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32686

(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 Monday, May 23, 2016, I was dispatched to the area of Route 18 South and Naricon Pl. for a single vehicle accident with injuries. Dispatch advised me that an Officer is already out with the accident and the driver is complaining of chest pain and heart pain.

Upon my arrival, I located the vehicle and the officer. The driver (Eva Jakabfi) of the vehicle (NJ-ZCX76X) was already in the ambulance and heading to Robertwood Johnson Hospital for treatment of her injuries. Her vehicle had heavy damage to the front passenger side. I spoke to the State Trooper, who was at the scene. He stated that he saw the accident. Her vehicle was traveling eastbound on Route 18 South in the bottom lane. She was just passing the exit ramp for USHWY 1 South. He saw her vehicle crash into the medium on the right side. The passenger side of her vehicle struck the medium. Her vehicle went up and down and she continued to drive eastbound on Route 18 South. He tried to get her to stop her vehicle but she continued to drive. He had his emergency lights and sirens on but she continued to drive. He was finally able to get her to stop at the next street, which was Naricon Place. He advised me that when he told her that she struck something she told him that she didn't hit anything. That she was on her way to the Doctors office. She was not aware that she struck the divider.

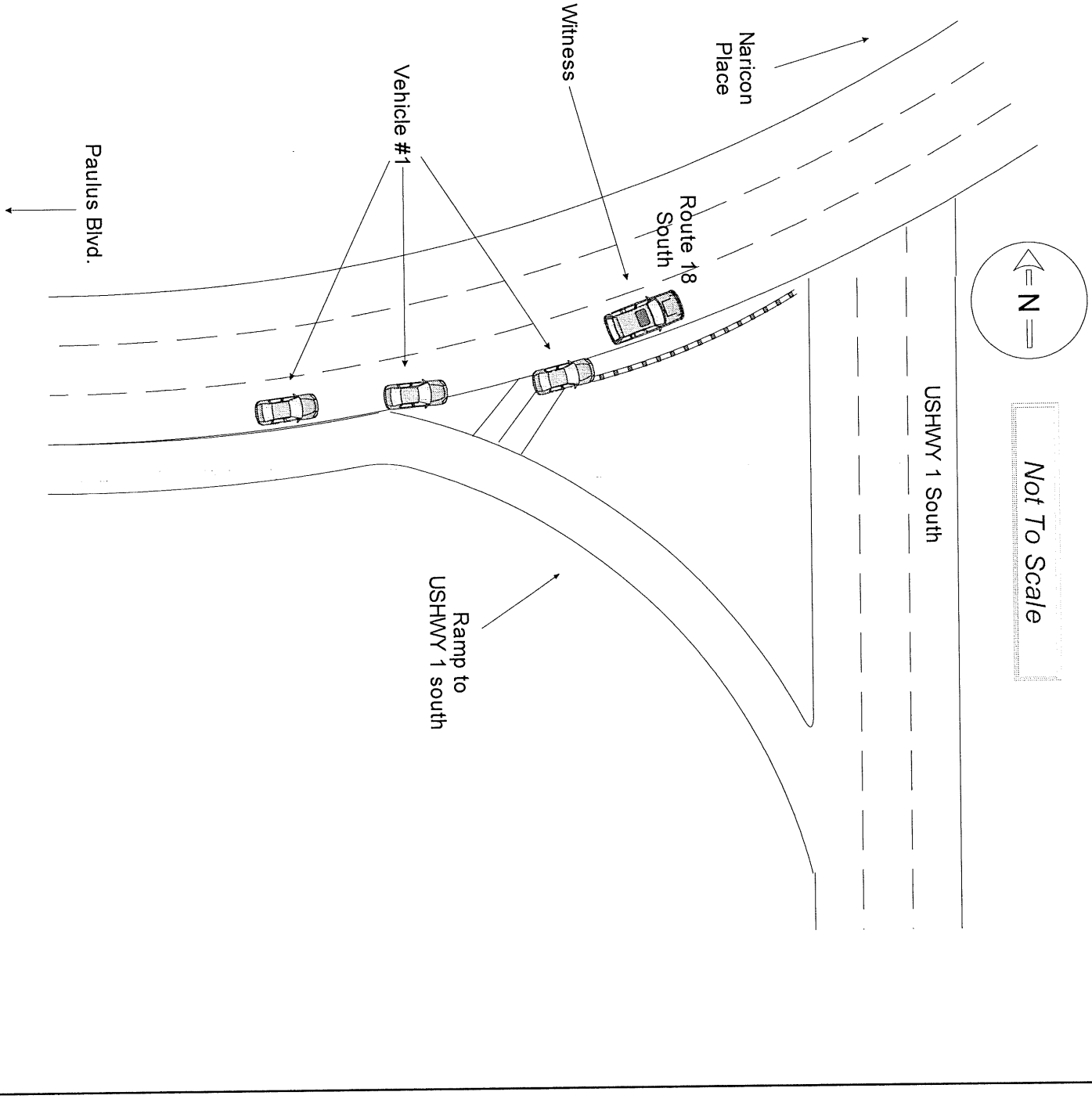
When I arrived at the Hospital, I spoke to the nurse. The nurse told me that Ms. Jakabfi doesn't remember being in an accident or what happened. I was unable to speak to Ms. Jakabfi due to the fact that she was being treated for her injuries. The nurse told me that she didn't suffer any major injuries but that her heart rate was very high.

PO Edward Bobadilla 7248

Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 01 Station _____ Case No. 16-32686



NJTR-1B (rev. 07/2005)

PO Edward Bobadilla 7248
Officer's Signature

Badge Number

Page 1 of 3 ☐ 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 01 | 106 ---- | 107 ---- | 108 04 | 109 01 | 110 01 | 111 01 | 112 ---- | 113 ---- | 114 ---- | 115 ---- | 116 01 | 117 01

1 Case Number: 16-32709

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash mm dd yy: 05 23 16

5 Day of Week: Su M Tu W Th F Sa — Th

6 Time (use 2400 hrs): 13 25

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured:

10 Crash Occurred On: Baldwin Street (Road Name) (Dir) — 11 Speed Limit

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

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 ----

Vehicle 1

23 Veh No: 1

24 Policy No.: F985971-1

25 Ins Code: 426

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

26 Driver's First Name: Jeffrey Initial: Last Name: Martin

29 Sex: M

27 Number and Street: 1270 WHITEHOUSE- MERCERVILLE RD.

30 Eyes: 5

28 City: Hamilton, NJ 08619-1927 State: Zip:

31 State: 32 Driver's License No: 33 DOB mm dd yy: 03 07 71 34 Expires mm yy:

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

36 Number and Street:

37 City: State: Zip:

38 Make: HUM 39 Model: H3 40 Color: RD 41 Year: 10 42 Plate No.: ZTM35G 43 State: NJ

44 VIN: 5GTMNGEE7A8119000 45 Expires: 05/16

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.: F243930-5

55 Ins Code: 426

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

56 Driver's First Name: Shanice Initial: Last Name: Williams

59 Sex:

57 Number and Street: 79 Glen Dr

60 Eyes: 2

58 City: Keasbey, NJ 08832-1128 State: Zip:

61 State: 62 Driver's License No: 63 DOB mm dd yy: 05 16 88 64 Expires mm yy:

65 Owner's First Name: ☐ Same As Driver Lillian Initial: Last Name: Naves

66 Number and Street: 79 Glenn Dr

67 City: Keasbey, NJ 08832-1128 State: Zip:

68 Make: HYU 69 Model: SON 70 Color: RD 71 Year: 10 72 Plate No.: M61CFE 73 State: NJ

74 VIN: 5NPEU4AF3AH618986 75 Expires: 06/16

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.

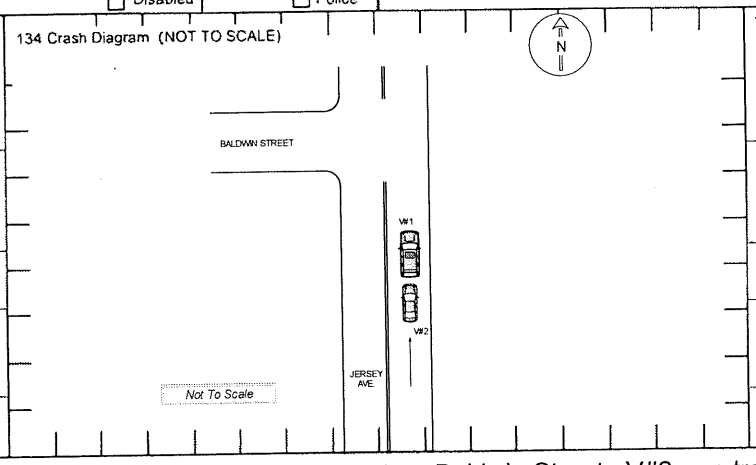
80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

120 01 | 121 01 | 122 ---- | 123 ---- | 124 08 | 125 01 | 126 11 | 127 11 | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a 26 | 129b ---- | 129c ---- | 129d ----

134 Crash Diagram (NOT TO SCALE)



135 Crash Description: V#1 was stopped in traffic on Jersey Ave. Near Baldwin Street. V#2 was traveling behind V#1 and collided into the rear of V#1. There wasn't any visible damage to V#1. V#2 sustained damage to the front of the vehicle. There weren't any injuries reported at the scene.

130 06 | 131 06 | 132 12 | 133 12

136 Damage To Other Property

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

141 Officer's Signature: PO James Hayes 7200

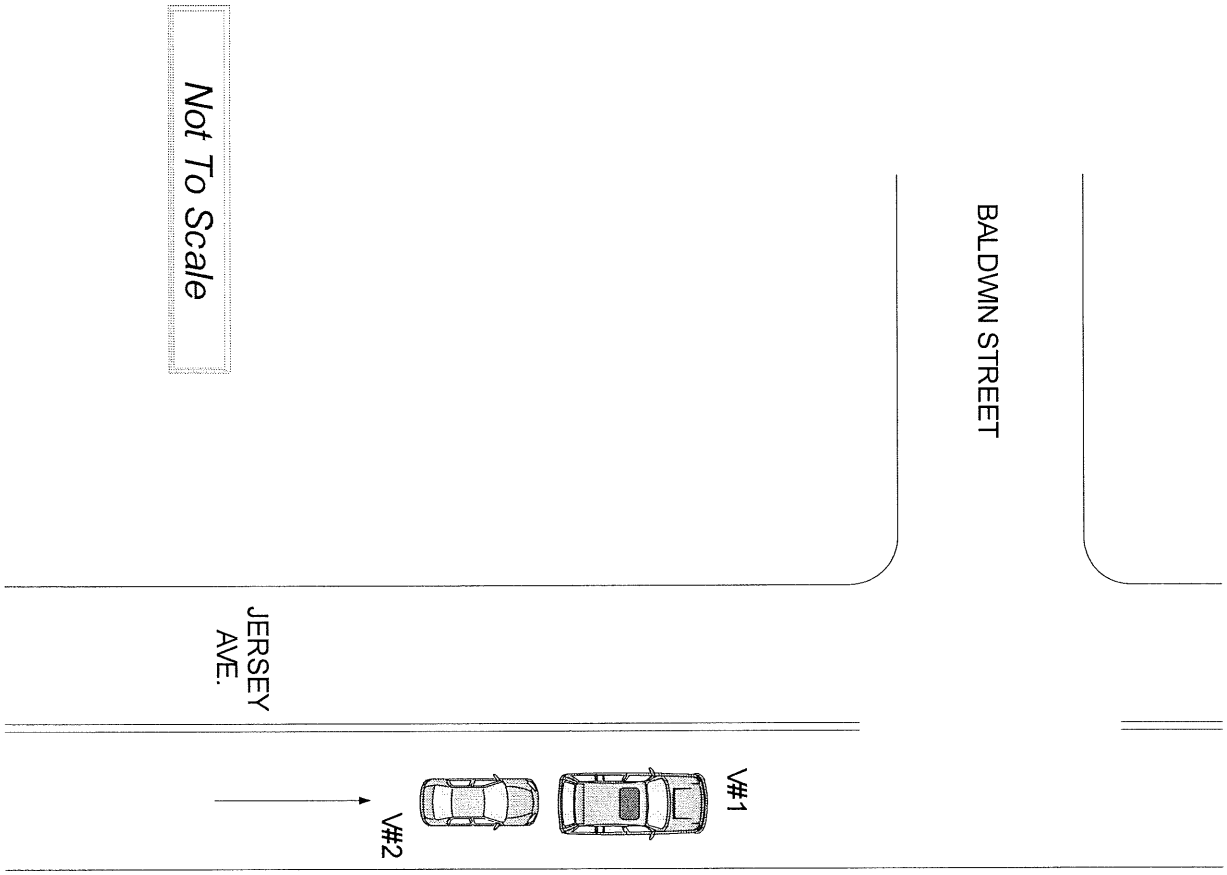
142 Badge No.:

143 Reviewed By Badge No.: 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	----	----	45	M	----	----	---	09	04	----	--------	Martin, Jeffrey-1270 WHITEHORSE-MERCERVILLE RD.
B	1	03	----	----	39	F	----	----	---	09	04	----	--------	Martin, Kristin-1270 WHITEHOUSE-MERCEREVILLE RD.
C	1	06	----	----	0	M	----	----	---	05	05	----	--------	
D	1	04	----	----	0	F	----	----	---	05	05	----	--------	Martin, Nina-1270 WHITEHOUSE-MERCERVILLE RD.
E	2	01	----	----	28	F	----	----	---	09	04	----	--------	Williams, Shanice-79 Glen Dr, Keasbey, NJ 08832-1128

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station _____ Case No. 16-32709



PO James Hayes 7200
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

Page 1 of 2 | ☐ Fatal | ☒ Reportable | ☐ Non-Reportable | ☐ Change Report

1 Case Number: 16-32729
2 Police Dept of: New Brunswick Code: 01
3 Station/Precinct:
10 Crash Occurred On: 120 Jersey Avenue (Road Name) S (Dir) 11 Speed Limit: 40
12 Route No. | Suffix | 13 Milepost | 18 Speed Limit
☐ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W of: (16)
17 Cross Road Name
19 ☐ To: ☐ From: Ramp
20 Route/Name
21 Latitude
22 Longitude
☐ NB ☐ EB ☐ SB ☐ WB
4 Date of Crash mm dd yy: 05 23 16
5 Day of Week: Su M Tu W Th F Sa — Q
6 Time (use 2400 hrs): 15 33
7 Municipality Code: 1214
8 Total Killed:
9 Total Injured:

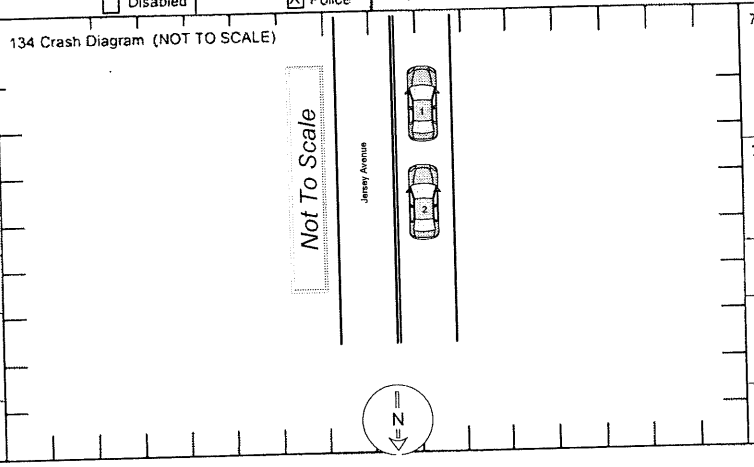
Vehicle 1

23 Veh No: 1
24 Policy No.: 0742882-E15-30A
25 Ins Code: 962
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
26 Driver's First Name: Marie Initial: A Last Name: Maxelix
29 Sex: F
30 Eyes: 2
27 Number and Street: 214 Bishop Blvd
28 City: North Brunswick, NJ 08902 State: Zip:
31 State: 32 Driver's License No:
33 DOB mm dd yy: 10 25 69
34 Expires mm yy:
35 Owner's First Name: ☒ Same As Driver Initial: Last Name:
36 Number and Street:
37 City: State: Zip:
38 Make: Toyota
39 Model: Corolla
40 Color: Gray
41 Year: 200
42 Plate No.: RSC82R
43 State: NJ
44 VIN: 2T1BR32E13C014069
45 Expires: 09/16
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.: 015351697U71026
55 Ins Code: 355
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
56 Driver's First Name: Christina Initial: M Last Name: Rodriguez
59 Sex: F
60 Eyes: 2
57 Number and Street: 523 Edpas Road
58 City: New Brunswick, NJ 08901 State: Zip:
61 State: 62 Driver's License No:
63 DOB mm dd yy: 05 19 88
64 Expires mm yy:
65 Owner's First Name: ☐ Same As Driver Wilfredo Initial: Last Name: Rodriguez
66 Number and Street: 523 Edpas Rd
67 City: New Brunswick , NJ 08901-3808 State: Zip:
68 Make: VW
69 Model: Jetta
70 Color: BK
71 Year: 201
72 Plate No.: N15AWB
73 State: NJ
74 VIN: 3VW2K7AJ1BM083924
75 Expires: 05/16
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

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 Jeffrey Monticello
142 Badge No.: 7269
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	46	F	01	08	2	09	04	----	6205	Maxelix, Marie-214 Bishop Blvd, North Brunswick, NJ 08902
B	2	01	01	----	28	F	----	----	1	09	04	----	--------	Rodriguez, Christina-523 Edpas Road, New Brunswick, NJ
C	2	06	01	----	4	F	----	----	1	05	05	----	--------	Collado, Sophia-523 Edpas Road, New Brunswick, NJ 08901
D														
E														

NJTR-1 (rev. 07/2005)

Record Bureau Copy

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32729

(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 she was traveling South on Jersey Avenue when a group of individuals unexpectedly darted across the roadway causing her to stop short and she was struck from behind by vehicle 2. Driver 1 complained of head and neck pain and was transported to St. Peter's Hospital for further evaluation.

Driver 2 stated she was traveling South on Jersey Avenue when vehicle 1 to her front stopped abruptly. Driver 2 stated she was unable to stop in time subsequently colliding with vehicle 1.

PO Jeffrey Monticello

Officer's Signature

7269

Badge Number

New Jersey Police Crash Investigation Report

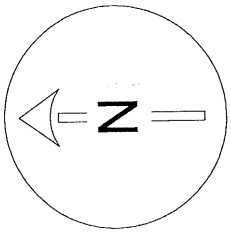
Motor Vehicle Crash Description

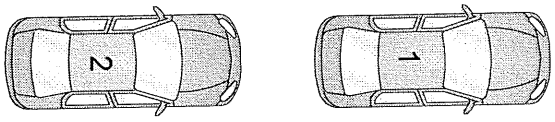
Police Dept. New Brunswick Code 0 1

Station _____ Case No. 16-32729

Not To Scale

Jersey Avenue





NJTR-1B (rev. 07/2005)

PO Jeffrey Monticello
Officer's Signature

7269
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32759

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: Paterson Street (Road Name) 11 Speed Limit: 25 (Dir)

12 Route No. 13 Milepost

☒ At Intersection with ☐ Feet ☐ Miles ☐ N ☐ S ☐ E ☐ W of: Joyce Kilmer Avenue

18 Speed Limit: 25

19 ☐ Ramp To: ☐ From: 17 Cross Road Name ☐ NB ☐ SB ☐ EB ☐ WB

20 Route/Name

4 Date of Crash mm dd yy: 05 23 16

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

6 Time (use 2400 hrs): 17 19

7 Municipality Code: 1214

8 Total Killed: -

9 Total Injured: 01

21 Latitude . 22 Longitude .

Vehicle 1

23 Veh No: 1

24 Policy No.: 905351584

25 Ins Code: 134

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

26 Driver's First Name: Joanitta Initial: Last Name: Moses

29 Sex: F

27 Number and Street: 24 Wedgewood Drive

30 Eyes: 7

28 City: North Brunswick, NJ 08902 State: Zip:

31 State: 32 Driver's License No: 33 DOB mm dd yy: 05 29 88 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: VW 39 Model: Jetta 40 Color: Blk 41 Year: 200 42 Plate No.: R87FED 43 State: NJ

44 VIN: 3VWSK69M64M072588 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.: 925253793

55 Ins Code: 033

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

56 Driver's First Name: Nathan Initial: A Last Name: Walker

59 Sex: M

57 Number and Street: 220 Harrison Avenue

60 Eyes: 2

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

61 State: 62 Driver's License No: 63 DOB mm dd yy: 08 05 78 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: Gray 71 Year: 200 72 Plate No.: CS3597 73 State: MA

74 VIN: 1HGES15591L066381 75 Expires: /08/15

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

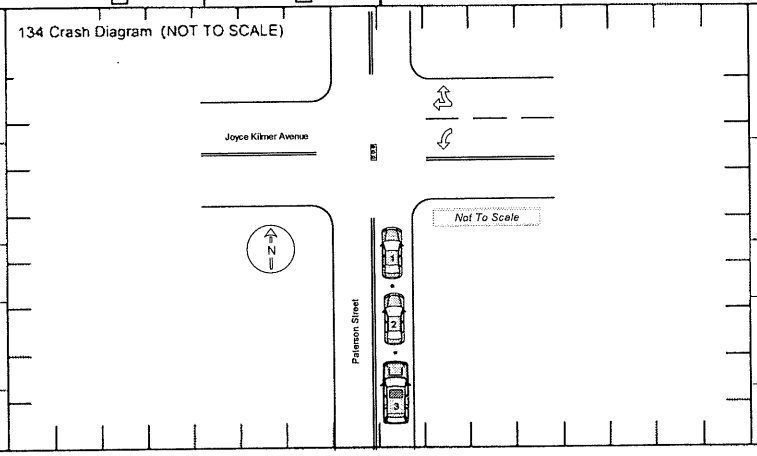
☐ ≤ 10,000 lbs

☐ 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 Jeffrey Monticello

142 Badge No.: 7269 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	----	27	F	----	----	1	09	04	----	--------	Moses, Joanitta-24 Wedgewood Drive, North Brunswick, NJ
B	1	03	01	----	25	M	----	----	1	09	04	----	--------	Macauley, Akiwande-172 Middlesex Avenue, Piscataway, NJ
C	2	01	01	----	37	M	----	----	1	09	04	----	--------	Walker, Nathan-220 Harrison Avenue, Highland Park, NJ
D	3	01	01	04	61	F	01	08	1	09	04	----	--------	Patel, Sudha-20 Churchill Road, Edison, NJ 08820
E														

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: 16-32759
2 Police Dept of: New Brunswick — Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 05 23 16
5 Day of Week: Su M Tu W Th F Sa — Q
6 Time (use 2400 hrs): 17 19
7 Municipality Code: 1214
8 Total Killed: - -
9 Total Injured: 01

10 Crash Occurred On: Paterson Street (Road Name) — Dir — 11 Speed Limit: 25
12 Route No. — Suffix — 13 Milepost — 18 Speed Limit
☒ At Intersection with ☐ Feet ☐ Miles (14 15) — ☐ N ☐ E ☐ S ☐ W (16) of: Joyce Kilmer Avenue
17 Cross Road Name — ☐ NB ☐ EB ☐ SB ☐ WB
19 ☐ To: ☐ Ramp ☐ From: — 20 Route/Name
21 Latitude — 22 Longitude

118a 02 | 118b 09 | 119a ---- | 119b ----

Vehicle 1

23 Veh No: 3 — 24 Policy No.: A07-238-039703-4050 — 25 Ins Code: 914
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run

26 Driver's First Name: Sudha — Initial — Last Name: Patel — 29 Sex: F
27 Number and Street: 20 Churchill Road — 30 Eyes: 2
28 City: Edison, NJ 08820 — State — Zip
31 State — 32 Driver's License No — 33 DOB (mm dd yy): 01 26 55 — 34 Expires (mm yy)
35 Owner's First Name — Initial — Last Name: Patel
☐ Same As Driver: Dilipkuma
36 Number and Street: 20 Churchill Road
37 City: Edison, NJ 08820 — State — Zip
38 Make: MB — 39 Model: ML4 — 40 Color: SL — 41 Year: 199 — 42 Plate No.: YU233W — 43 State: NJ
44 VIN: 4JGAB72E8XA075898 — 45 Expires: 12/16
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 — 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. ☐ USDOT ☐ Other *
81 Commercial Vehicle Weight: ☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs
82 Carrier name

120 01 | 121 ---- | 122 ---- | 123 ---- | 124 01 | 125 ---- | 126 04 | 127 ---- | 128a 26 | 128b ---- | 128c ---- | 128d ---- | 129a ---- | 129b ---- | 129c ---- | 129d ----

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

134 Crash Diagram (NOT TO SCALE)

135 Crash Description

130 12 | 131 12 | 132 ---- | 133 ----

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 Jeffrey Monticello — 142 Badge No.: 7269 — 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: 16-32759

(Refer to vehicle by number)

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

135 Crash Description

Driver 1 stated she was on Paterson Street stopped for the red light at the intersection of Joyce Kilmer Avenue when she was struck from behind by vehicle 2.

Driver 2 stated he was stopped behind vehicle 1 when he was struck from behind by vehicle 3 subsequently pushing him into vehicle 1. Vehicle 2 was rendered inoperable due to the accident and was towed by Guaranteed Motors.

Driver 3 stated she was traveling on Paterson Street when all of a sudden traffic to her front stopped abruptly and she was unable to stop in time subsequently colliding with vehicle 2. Driver 3 complained of head pain and was evaluated by EMS but refused medical attention.

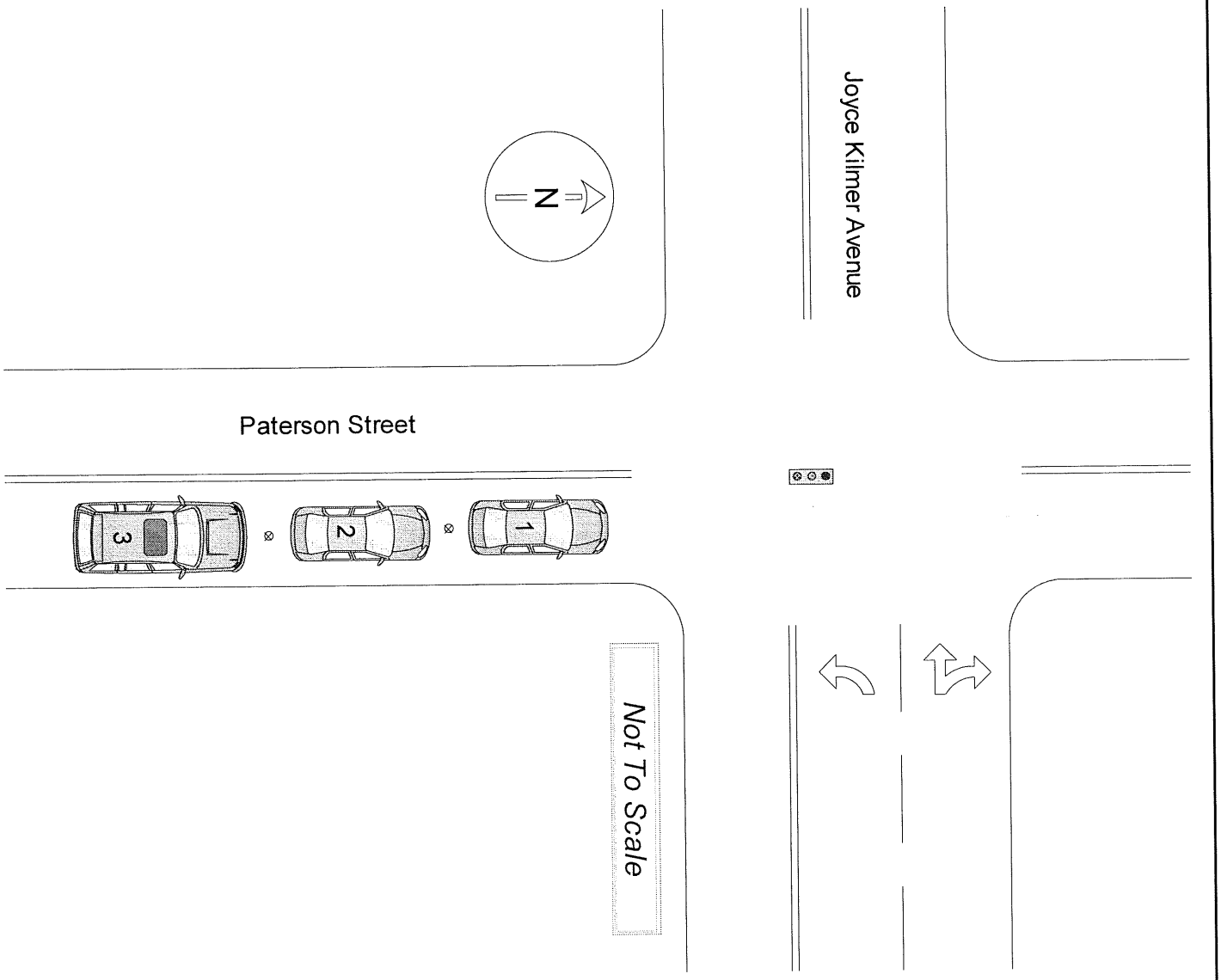
PO Jeffrey Monticello

Officer's Signature

7269

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-32759



NJTR-1B (rev. 07/2005)

PO Jeffrey Monticello
Officer's Signature

7269
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32772

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: Livingston Avenue (Road Name) (Dir) 11 Speed Limit: 35

12 Route No. 13 Milepost 18 Speed Limit: 25

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

14 15 16

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

21 Latitude 22 Longitude

4 Date of Crash: mm 05 dd 23 yy 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 18 20

7 Municipality Code: 1214

8 Total Killed: 00

9 Total Injured: 00

Vehicle 1

23 Veh No: 1

24 Policy No.: SNJ00053520335

25 Ins Code: 038

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

26 Driver's First Name: Earnestine Initial: Last Name: Mosley

29 Sex: F

27 Number and Street: 270 Eagle Way

30 Eyes:

28 City: Stockbridge State: GA Zip: 30281

31 State: 32 Dnver's License No:

33 DOB: mm 11 dd 03 yy 58

34 Expires: mm yy

35 Owner's First Name: ☐ Same As Driver Crystal Initial: M Last Name: Montgomery

36 Number and Street: 34 B Erin Ave

37 City: Hope Lawn, NJ 08861-2219 State: Zip:

38 Make: HON 39 Model: UDY 40 Color: GRN 41 Year: 01 42 Plate No.: X38DVD 43 State: NJ

44 VIN: 2HKRL18661H549672 45 Expires: 01/17

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

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: 3

54 Policy No.: 0801P2C1230E

55 Ins Code: 896

☒ 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: ☐ Same As Driver Janiece Initial: A Last Name: Hendersen

66 Number and Street: 425 Livingston Ave Apt 1

67 City: New Brunswick , NJ 08901-3463 State: Zip:

68 Make: Honda 69 Model: civic 70 Color: Blk 71 Year: 02 72 Plate No.: X18GBW 73 State: NJ

74 VIN: 1HGEM22972L056022 75 Expires: /

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

77 Authority: ☐ Owner ☐ Driver ☐ Police

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

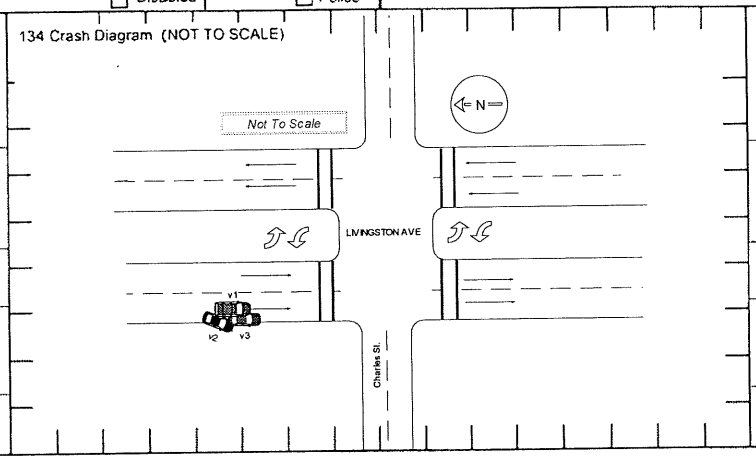
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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

Oper.	137 Charge	☒ Multiple Charges	138 Summons No.	Oper.	139 Charge	☒ Multiple Charges	140 Summons No.
1	39:3-10		Q369375	1	39:4-97		Q369377

141 Officer's Signature: PO Robert Runof 7309 — 142 Badge No.: 7309 — 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	----	57	F	----	----	1	09	09	01		Mosley, Earnestine-270 Eagle Way, Stockbridge GA 30281
B	1	04	01	----	8	F	----	----	1	04	04	----		Morris, Kayla 7/08/2008
C	1	05	01	----	4	F	----	----	1	05	05	----		Saunders, Nisa 11/6/2012
D	1	06	01	----			----	----	---	05	05	----		Saunders, Rhyil 1/04/2016
E														

New Jersey Police Crash Investigation Report

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

Field	Value
1 Case Number	16-32772
2 Police Dept of	New Brunswick
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	05 23 16
5 Day of Week	Su Tu W Th F Sa
6 Time (use 2400 hrs)	18 20
7 Municipality Code	1214
8 Total Killed	00
9 Total Injured	00
10 Crash Occurred On:	Livingston Avenue
11 Speed Limit	35
12 Route No. / Suffix / 13 Milepost	
14 / 15 / 16	
17 Cross Road Name	Charles Street
18 Speed Limit	25
19 Ramp To: / From:	
20 Route/Name	
21 Latitude	
22 Longitude	
23 Veh No	2
24 Policy No.	A022311163754063
25 Ins Code	182
26 Driver's First Name	Crystal
Initial	M
Last Name	Montgomery
29 Sex	F
27 Number and Street	34 B Erin Ave
30 Eyes	2
28 City	Hope Lawn, NJ 08861-2219
31 State	
32 Driver's License No	
33 DOB (mm dd yy)	10 10 87
34 Expires (mm yy)	
35 Owner's First Name	Luis
Initial	R
Last Name	Bonilla
36 Number and Street	427 Livingston Ave
37 City	New Brunswick N.J. 08901
38 Make	Honda
39 Model	accord
40 Color	Grn
41 Year	96
42 Plate No.	H55BWZ
43 State	NJ
44 VIN	1HGCD5659TA072901
45 Expires	03/17
46 Vehicle Removed To	Puilios
47 Authority	
48 Alcohol/Drug Test	
49 Hazardous Material	
50 Carrier No	
51 Commercial Vehicle Weight	
52 Carrier name	
53 Veh No	
54 Policy No.	
55 Ins Code	
56 Driver's First Name	
57 Number and Street	
58 City	
59 Sex	
60 Eyes	
61 State	
62 Driver's License No	
63 DOB	
64 Expires	
65 Owner's First Name	
66 Number and Street	
67 City	
68 Make	
69 Model	
70 Color	
71 Year	
72 Plate No.	
73 State	
74 VIN	
75 Expires	/
76 Vehicle Removed To	
77 Authority	
78 Alcohol/Drug Test	
79 Hazardous Material	
80 Carrier No.	
81 Commercial Vehicle Weight	
82 Carrier name	
134 Crash Diagram (NOT TO SCALE)	
135 Crash Description	See Accident Report #1
136 Damage To Other Property	
137 Charge	
138 Summons No.	
139 Charge	
140 Summons No.	
141 Officer's Signature	PO Robert Runof 7309
142 Badge No.	7309
143 Reviewed By / Badge No.	
144 Case Status	☐ Pending ☒ Complete
96	04
97	01
98	01
99	07
100	01
101	02
102	01
103	01
104	03
105	01
106	02
107	----
108	01
109	----
110	01
111	----
112	----
113	----
114	13
115	----
116	----
117	----
118a	25
118b	25
119a	----
119b	----
120	----
121	----
122	----
123	----
124	10
125	----
126	11
127	----
128a	28
128b	28
128c	19
128d	19
129a	----
129b	----
129c	----
129d	----
130	07
131	07
132	
133	

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

NJTR-1 (rev. 07/2005)

Record Bureau Copy

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32772

(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 05/23/2016 at approximately 1820 hours, the undersigned and P.O. Riepenhoff responded to the intersection of Livingston Ave/Charles St. on a report of motor vehicle accident. Upon arrival the undersigned observed three vehicles with heavy damage off to the side near the curb area. None of the vehicle's were occupied at the time of our arrival.

The undersigned was able to locate the operator of vehicle #1, who stated that she was driving and attempted to help one of the passengers (baby) in the rear seating area. She then stated that she suddenly struck the parked vehicle's with the right front of her vehicle. The operator refused medical treatment for herself and all passengers inside the vehicle. Do to the age of the passengers and the damage done to all three vehicle's the undersigned advised dispatch to send E.M.S. for an evaluation. E.M.S. and New Brunswick Fire Department arrived on scene a short time later, all occupants of vehicle refused medical services on scene. The operator of vehicle #1 was unable to provide the undersigned with her license or any documents to the vehicle. Upon further investigation the operator of vehicle #1 (E. Mosley) was found to have an I.D. only out of Georgia as per dispatch. Mosley was issued several summonses for this incident.

Upon investigating the accident, it appeared that vehicle #1 was traveling on Livingston Ave when it struck vehicle #3 in the rear with such force that it intern struck vehicle #2 in the rear causing major damage to the rear trunk area. Vehicle #3 also had heavy damage on the drivers side rear near the wheel area. Vehicle #1 appeared to have heavy damage on the passenger side and on the front of the vehicle.

Vehicle #2 and Vehicle #3 were both unoccupied and parked at the time of the incident.

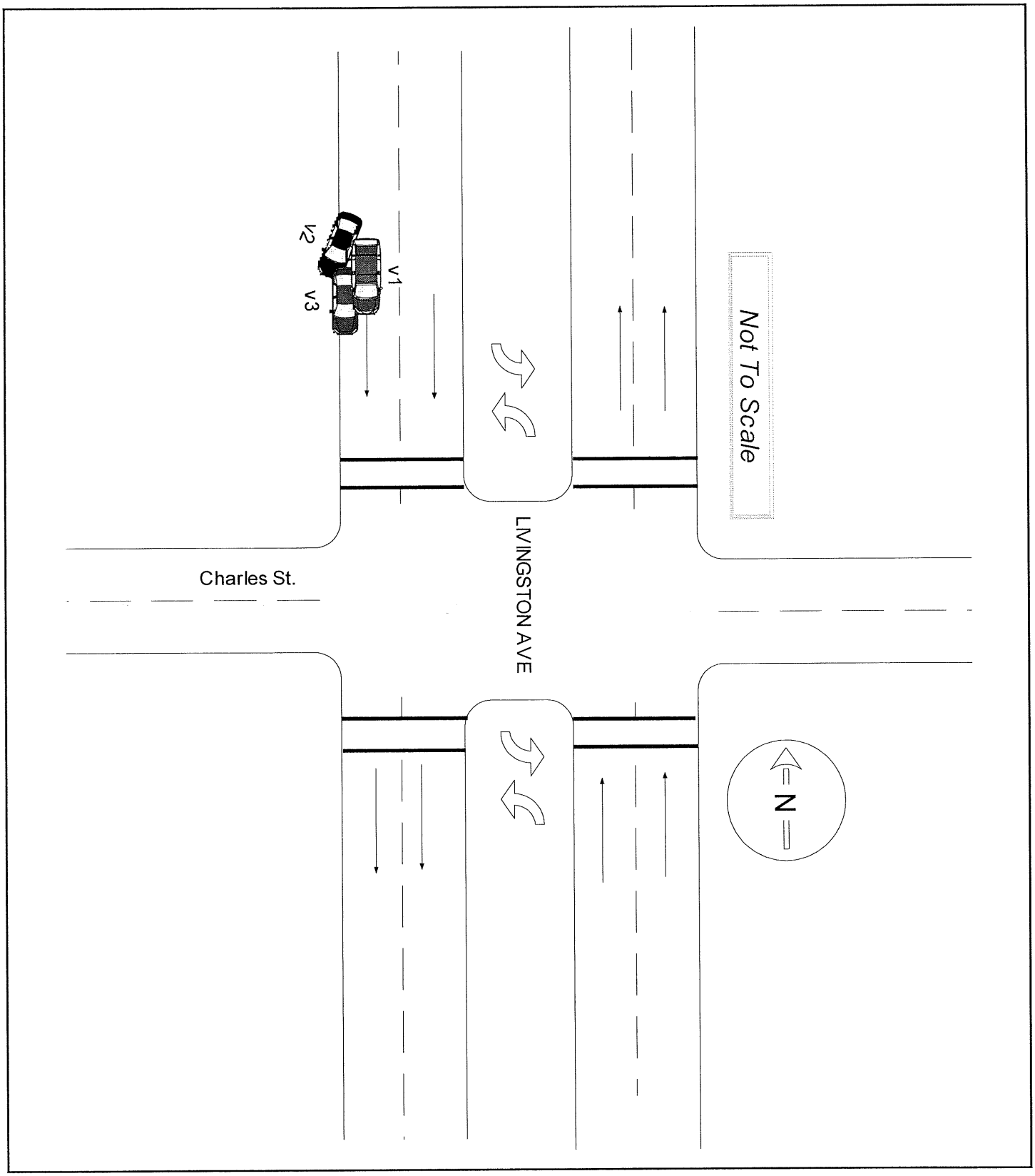
Vehicle #3 was left on scene and driven into a driveway. Vehicle #1 was towed by Rich's Towing. Vehicle #2 was towed by Pulieos Towing.

Nothing else to report in regards to this incident. P.O. Runof #7309

PO Robert Runof 7309
Officer's Signature

7309
Badge Number

New Jersey Police Crash Investigation Report	Police Dept. New Brunswick	Code 0 1
Motor Vehicle Crash Description	Station	Case No. 16-32772



NJTR-1B (rev. 07/2005)

PO Robert Runof 7309
Officer's Signature

7309
Badge Number

New Jersey Police Crash Investigation Report

Page 1 of 3 | ☐ Fatal | ☒ Reportable | ☐ Non-Reportable | ☐ Change Report

1 Case Number: 16-32856

2 Police Dept of: New Brunswick | Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 05 24 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 07 35

7 Municipality Code: 1214

8 Total Killed: - -

9 Total Injured: - -

10 Crash Occurred On: 7 Wall Street (Road Name) (Dir)

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

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: 02

21 Latitude | 22 Longitude: 02

Vehicle 1

23 Veh No: 1 | 24 Policy No.: JIF 10-86 | 25 Ins Code: 01

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

26 Driver's First Name | Initial | Last Name | 29 Sex: 02

27 Number and Street: 02 | 30 Eyes

28 City | State | Zip: 02

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

35 Owner's First Name | Initial | Last Name

☐ Same As Driver: New Brunswick Parking

36 Number and Street: 106 Somerset St. 6 fl

37 City: New Brunswick, NJ 08901 | State | Zip: ----

38 Make: Ford | 39 Model: x2b | 40 Color: Wht | 41 Year: 201 | 42 Plate No.: XAGP51 | 43 State: NJ: 01

44 VIN: 1FT7X2B61DEB20261 | 45 Expires: /5/17: 05

46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 47 Authority: ☐ Owner ☐ Driver ☒ Police: 20

48 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0.__ __ % ☐ Pending: 02 | 01

49 Hazardous Material: On Board ☐ Spill ☐ | Name or Placard No.: 01 | ---- | 115

50 Carrier No. ☐ USDOT ☐ Other *: ----

51 Commercial Vehicle Weight: ☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs: 04 | 02

52 Carrier name

Vehicle 2

53 Veh No: 2 | 54 Policy No.: 20516 | 55 Ins Code

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run: 01

56 Driver's First Name: Eric | Initial: T | Last Name: Purcell | 59 Sex: M: 01

57 Number and Street: 13 Harrison Pl. | 60 Eyes: 2

58 City: Manchester NJ 08759 | State | Zip

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 01 10 95 | 64 Expires (mm yy)

65 Owner's First Name | Initial | Last Name

☐ Same As Driver: Bonland Industries

66 Number and Street: 50 Newark Pompton Tpke: 10

67 City: Wayne NJ 07470 | State | Zip: 05

68 Make: Chevy | 69 Model: t6 | 70 Color: Wht | 71 Year: 200 | 72 Plate No.: XF910Z | 73 State: NJ

74 VIN: 1GBJ6F1335F529353 | 75 Expires: /5/17

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: ---- | 127 | 26

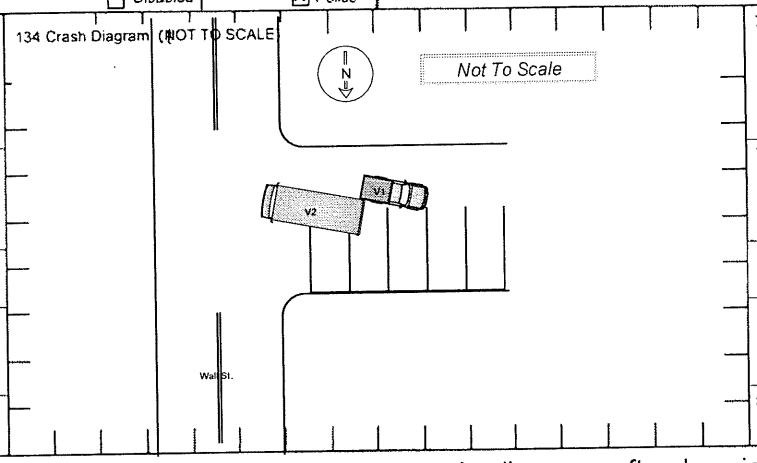
79 Hazardous Material: On Board ☐ Spill ☐ | Name or Placard No. | ---- | ----

80 Carrier No. ☐ USDOT ☐ Other *: ----

81 Commercial Vehicle Weight: ☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs: 28

82 Carrier name

134 Crash Diagram (NOT TO SCALE)



135 Crash Description

Driver of Vehicle 2 reports exiting parking garage loading zone after dropping off work equipment and while beginning to make a right turn onto Wall St., sideswiping Vehicle 1 which was parked and unoccupied. No injuries.

136 Damage To Other Property

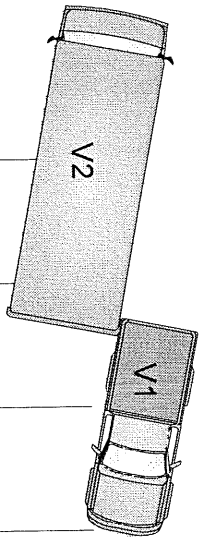
Oper.	137 Charge	☐ Multiple Charges	138 Summons No.	Oper.	139 Charge	☐ Multiple Charges	140 Summons No.

141 Officer's Signature: PO Michael Yacuk 7283 | 142 Badge No.: 7283 | 143 Reviewed By / 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	----	----	----	--	----	----	----	---	----	----	----	--------	
B	2	01	01	----	21	M	----	----	---	09	04	----	--------	Purcell, Eric-13 Harrison Pl., Manchester NJ 08759
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-32856

Wall St.



N

Not To Scale

PO Michael Yacuk 7283
Officer's Signature

7283
Badge Number

New Jersey Police Crash Investigation Report

Page 2 of 2 | ☐ Fatal | ☒ Reportable | ☐ Non-Reportable | ☐ Change Report

1 Case Number: 16-32871

2 Police Dept of: New Brunswick | Code: 01

3 Station/Precinct:

10 Crash Occurred On: French Street | Road Name | S | Dir

11 Speed Limit: 25

12 Route No. | Suffix | 13 Milepost

☒ At Intersection with | ☐ Feet | ☐ Miles (14 15)

☐ N ☐ E ☐ S ☐ W (16) of: Plum Street

18 Speed Limit: 25

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

4 Date of Crash mm dd yy: 05 24 16

5 Day of Week: Su M T W Th F Sa — O

6 Time (use 2400 hrs): 08 32

7 Municipality Code: 1214

8 Total Killed: 0 0

9 Total Injured: 0 0

21 Latitude | 22 Longitude

Vehicle 1

23 Veh No: 1 | 24 Policy No.: C87040-8 | 25 Ins Code: 426

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

26 Driver's First Name: Clyde | Initial: V | Last Name: Rockoff | 29 Sex: F

27 Number and Street: 1500 S Ocean BLVD APT 1106 | 30 Eyes:

28 City: Boca Raton, Florida 33432 | State | Zip

31 State | 32 Driver's License No | 33 DOB mm dd yy: 07 08 36 | 34 Expires mm yy

35 Owner's First Name | Initial | Last Name

☐ Same As Driver: Universal Supplements Corp

36 Number and Street: 3 Terminal Road

37 City: New Brunswick, New Jersey 089901 | State | Zip

38 Make: LEX | 39 Model: RX | 40 Color: BK | 41 Year: 05 | 42 Plate No.: SJN84J | 43 State: NJ

44 VIN: 2T2HA31U35C064321 | 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.: 909534600 | 55 Ins Code: 134

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

56 Driver's First Name: Juana | Initial | Last Name: Nieto | 59 Sex: F

57 Number and Street: 4 Railroad Ave Apt 3b | 60 Eyes: 2

58 City: New Brunswick , NJ 08901-2501 | State | Zip

61 State | 62 Driver's License No | 63 DOB mm dd yy: 03 14 95 | 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: DOD | 69 Model: NEO | 70 Color: OR | 71 Year: 05 | 72 Plate No.: N89GKY | 73 State: NJ

74 VIN: 1B3ES56C85D257746 | 75 Expires: 03/17

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

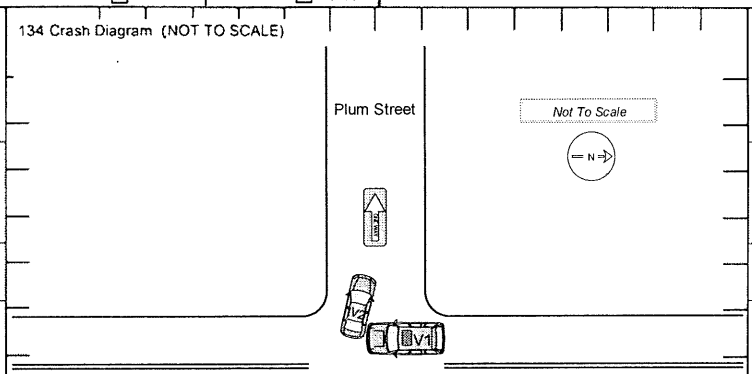
79 Hazardous Material: On Board ☐ | Spill ☐ | Name or Placard No.

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: None

Oper.	137 Charge	☐ Multiple Charges	138 Summons No.	Oper.	139 Charge	☐ Multiple Charges	140 Summons No.
2	39:4-97		Q-372911	2	39:4-90		Q-372915

141 Officer's Signature: PO Vincent Monaghan 7284 | 142 Badge No.: 7284 | 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	----	79	M	----	----	1	09	04	----	--------	Rockoff, Clyde-1500 S Ocean BLVD APT 1106, Boca Raton,
B	2	01	01	04	21	F	01	08	2	09	04	----	6202	Nieto, Juana-4 Railroad Ave Apt 3b, 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: 16-32871

(Refer to vehicle by number)

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

135 Crash Description

Driver of V1 stated that he was traveling southbound on French Street. While approaching Plum Street V2 turned left right in front of him causing him to collide with V2.

Driver of V2 stated that she was making a left onto Plum Street from French Street. While attempting to complete the turn she was struck in the rear by V1.

P/O Monaghan 7284 5/24/16

PO Vincent Monaghan 7284

Officer's Signature

7284

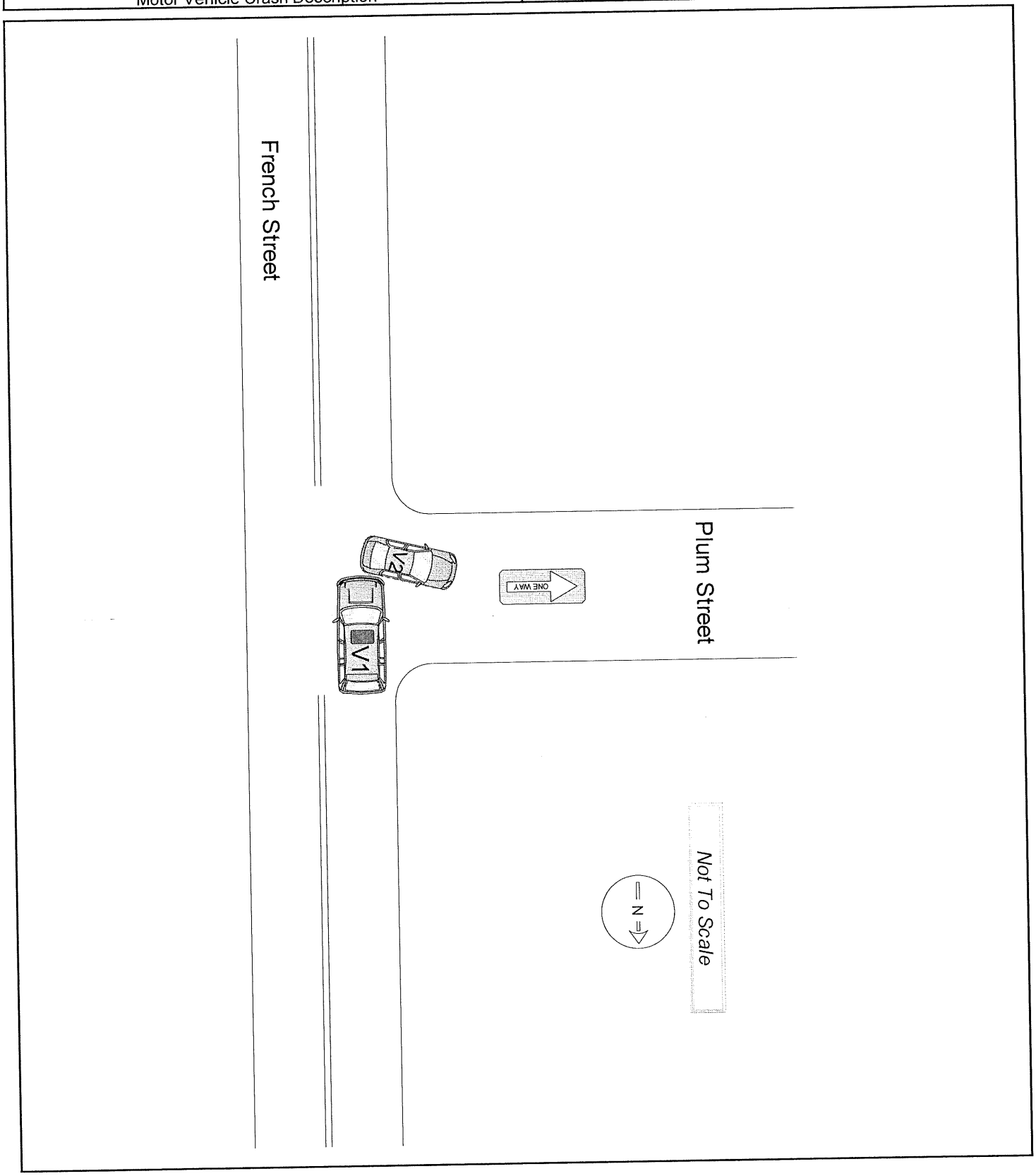
Badge Number

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept. New Brunswick Code 0 1

Station _____ Case No. 16-32871



NJTR-1B (rev. 07/2005)

PO Vincent Monaghan 7284
Officer's Signature

7284
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32886

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 05 24 16

5 Day of Week: Su M T W Th F Sa — O

6 Time (use 2400 hrs): 09 07

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured:

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

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

Vehicle 1

23 Veh No: 1

24 Policy No.: 060 6663-F15-30C

25 Ins Code: 896

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

26 Driver's First Name: Maria Initial: C Last Name: Mejia

29 Sex: F

27 Number and Street: 182 Remsen Avneue Floor 1

30 Eyes: 1

28 City: New Brunswick , NJ 08901-2622 State Zip

31 State 32 Driver's License No 33 DOB (mm dd yy): 06 27 58 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: CHE 39 Model: TRA 40 Color: GRE 41 Year: 04 42 Plate No.: A35EDG 43 State: NJ

44 VIN: 1GNET16S646134291 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.: SELF INSURED

55 Ins Code:

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

56 Driver's First Name: Tyree Initial: Last Name: Aeriel

59 Sex: M

57 Number and Street: 11 Class Place Apt 3

60 Eyes: 2

58 City: New Brunswick , NJ 08901-3564 State Zip

61 State 62 Driver's License No 63 DOB (mm dd yy): 09 02 84 64 Expires (mm yy)

65 Owner's First Name Initial Last Name

☐ Same As Driver Ean

66 Number and Street: 14002 East 21st St Ste 1500

67 City: Tulsa, OK 74134 State Zip

68 Make: CHE 69 Model: CAM 70 Color: BK 71 Year: 16 72 Plate No.: M34GNG 73 State: NJ

74 VIN: 1G1FB1RS9G0169306 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

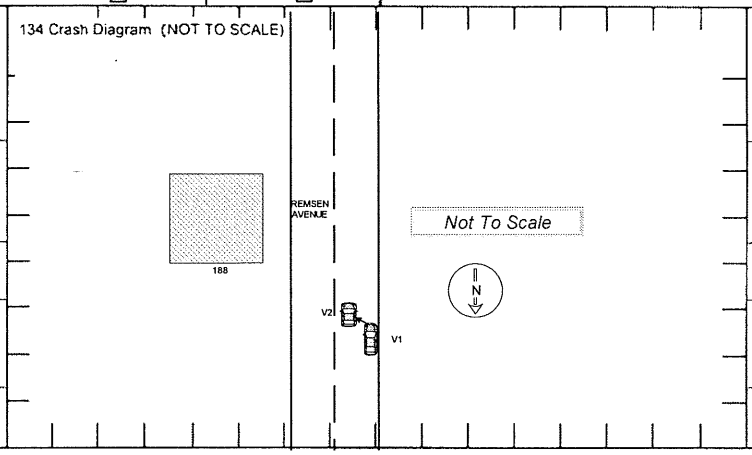
☐ ≤ 10,000 lbs

☐ 10,001 - 26,000 lbs

☐ ≥ 26,001 lbs

82 Carrier name

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 Anthony Abode 7249

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	----	----	57	F	----	----	---	----	----	----	--------	Mejia, Maria-182 Remsen Avneue Floor 1, New Brunswick ,
B	2	00	----	----	31	M	----	----	---	----	----	----	--------	Aeriel, Tyree-11 Class Place Apt 3, New Brunswick , NJ 08901
C														
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32886

(Refer to vehicle by number)

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

135 Crash Description

V1 WAS PARKED ACROSS THE STREET FROM 188 REMSEN AVENUE. V1 ATTEMPTED TO MERGE INTO THE LANE OF TRAFFIC. AT THIS TIME V1 STRUCK V2 ON THE REAR PASSENGER WHEEL WELL.

V2 WAS TRAVELING STRAIGHT AT THE TIME OF THE COLLISION. D2 STATED HE WAS DRIVING ON REMSEN AVE. AS HE APPROACHED SANDFORD STREET; A VEHICLE WHICH WAS PARKED PULLED OUT AND STRUCK HIS VEHICLE.

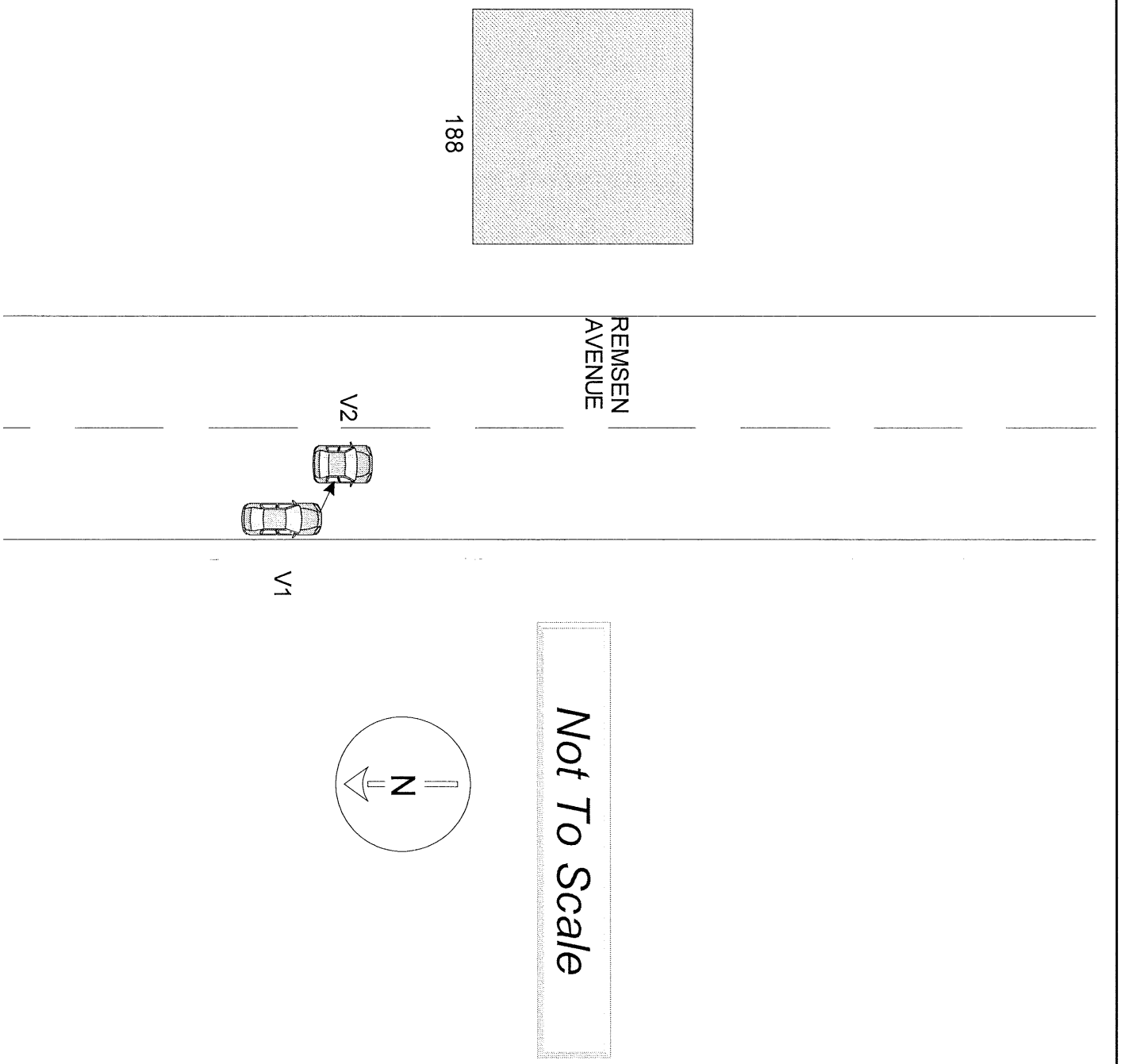
V1 HAD DAMAGE TO THE DRIVER SIDE FRONT BUMPER. V2 HAD DAMAGE TO THE PASSENGER SIDE REAR WHEEL WELL. NO INJURIES WERE REPORTED AT THIS TIME.

PO Anthony Abode 7249

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. 16-32886



PO Anthony Abode 7249
Officer's Signature

Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32887

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 05 24 16

5 Day of Week: Su M T W Th F Sa — 6

6 Time (use 2400 hrs): 09 09

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured:

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

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

11 Speed Limit: 25

12 Route No. / Suffix / 13 Milepost / 18 Speed Limit: 25

17 Cross Road Name

19 ☐ Ramp To: / ☐ From:

20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude

22 Longitude

Vehicle 1

23 Veh No: 1

24 Policy No.: 45367888

25 Ins Code: 135

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

26 Driver's First Name: Jagathese Initial: Last Name: Harikrishnan

29 Sex: M

27 Number and Street: 27 Lark Drive

30 Eyes: 1

28 City: South River, NJ, 08882 State: Zip:

31 State: 32 Driver's License No: 33 DOB (mm dd yy): 05 08 69 34 Expires (mm yy):

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

36 Number and Street: 27 Lark Drive

37 City: South River, NJ, 08882 State: Zip:

38 Make: AUD 39 Model: Q5 40 Color: BG 41 Year: 12 42 Plate No.: Z84CBR 43 State: NJ

44 VIN: WA1LFAFP2CA108490 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.: 4397-91-89-98

55 Ins Code: 148

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

56 Driver's First Name: Shannon Initial: A Last Name: Concitis

59 Sex: F

57 Number and Street: 2 Estok Road

60 Eyes: 4

58 City: Edison, NJ, 08817 State: Zip:

61 State: 62 Driver's License No: 63 DOB (mm dd yy): 08 03 93 64 Expires (mm yy):

65 Owner's First Name: ☐ Same As Driver Keith Initial: V Last Name: Concitis

66 Number and Street: 2 Estok Road

67 City: Edison, NJ, 08817 State: Zip:

68 Make: JEE 69 Model: GRA 70 Color: BK 71 Year: 13 72 Plate No.: S99CWC 73 State: NJ

74 VIN: 1C4RJFAG5DC640681 75 Expires: 02/17

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

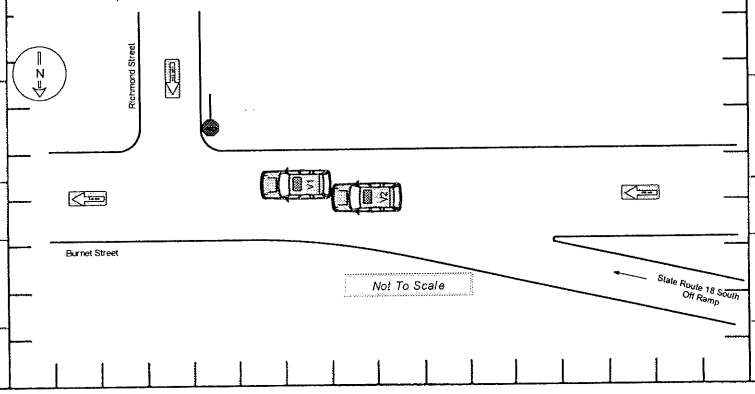
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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

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 Dale Gray 6227 | 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	----	47	M	----	----	---	09	04	----	--------	Harikrishnan, Jagathese-27 Lark Drive, South River, NJ, 08882
B	2	01	01	----	22	F	----	----	---	09	04	----	--------	Concitis, Shannon-2 Estok Road, Edison, NJ, 08817
C														
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32887

(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

Vehicle #1 and vehicle #2 were traveling eastbound on Burnet Street approximately 50 feet from Richmond Street.

The driver of vehicle #1 stated, vehicles in front of him were slowing. The driver of vehicle #1 stated, he stopped behind the vehicle in front of him. At which point, vehicle #2 hit him in the rear.

The driver of vehicle #2 stated, she was flowing with traffic. The driver of vehicle #2 explained, vehicle #2 suddenly came to a stop. The collision occurred.

The occupants of both vehicles stated no injuries.

PO Dale Gray 6227

Officer's Signature

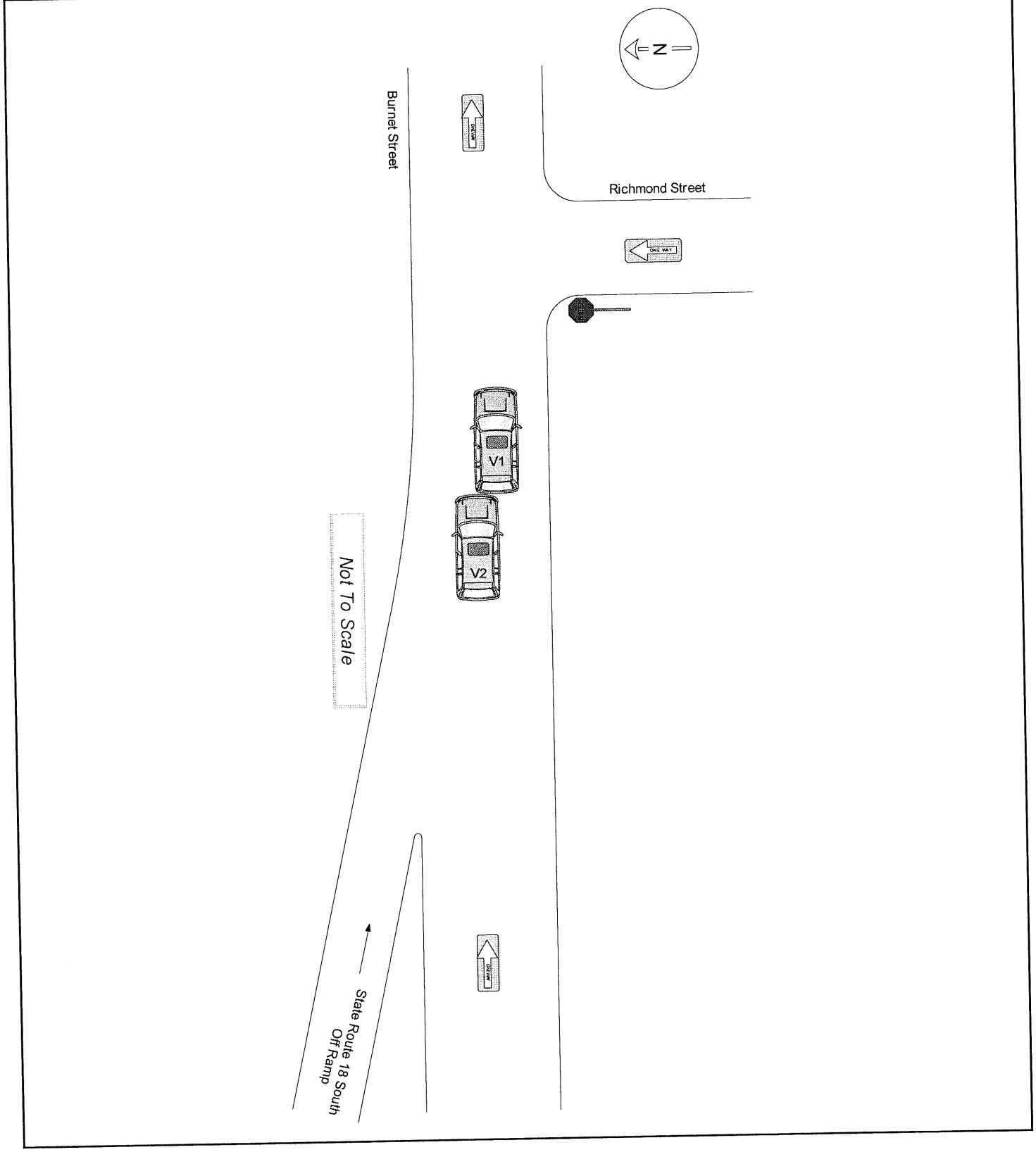
Badge Number

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept. New Brunswick Code 0 1

Station _____ Case No. 16-32887



PO Dale Gray 6227

Officer's Signature

Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32907

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: 47 Jersey Avenue (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: 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): 05 24 16

5 Day of Week: Su M T W Th F Sa — O

6 Time (use 2400 hrs): 10 48

7 Municipality Code: 1214

8 Total Killed: - -

9 Total Injured: - -

Vehicle 1

23 Veh No: 1

24 Policy No.: 903710603

25 Ins Code: 135

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

26 Driver's First Name: Trudygaye Initial: A Last Name: King

29 Sex: F

27 Number and Street: 514 Dillon Ct.

30 Eyes: 2

28 City: North Brunswick State: NJ Zip: 08902

31 State: 32 Driver's License No: 33 DOB (mm dd yy): 08 29 76 34 Expires (mm yy):

35 Owner's First Name: Clyde Initial: B Last Name: King

☐ Same As Driver

36 Number and Street: 514 Dillon Ct.

37 City: North Brunswick State: NJ Zip: 08902

38 Make: Honda 39 Model: crv 40 Color: Blu 41 Year: 201 42 Plate No.: A54ERN 43 State: NJ

44 VIN: 5J6RE4H56AL014219 45 Expires: /9/16

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

47 Authority: ☐ Owner ☐ Driver ☒ Police

Puleio's

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.: 4416-72-68-02

55 Ins Code: 100

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

56 Driver's First Name: Fady Initial: F Last Name: Gohbrial

59 Sex: M

57 Number and Street: 2266 Hooper Ave.

60 Eyes:

58 City: Brick State: NJ Zip: 08723

61 State: 62 Driver's License No: 63 DOB (mm dd yy): 05 04 84 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: Dodge 69 Model: charger 70 Color: Blu 71 Year: 201 72 Plate No.: S16GAK 73 State: NJ

74 VIN: 2C3CDXDTXDH613036 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 ☐ Unne Results: 0.__ __ % ☐ Pending

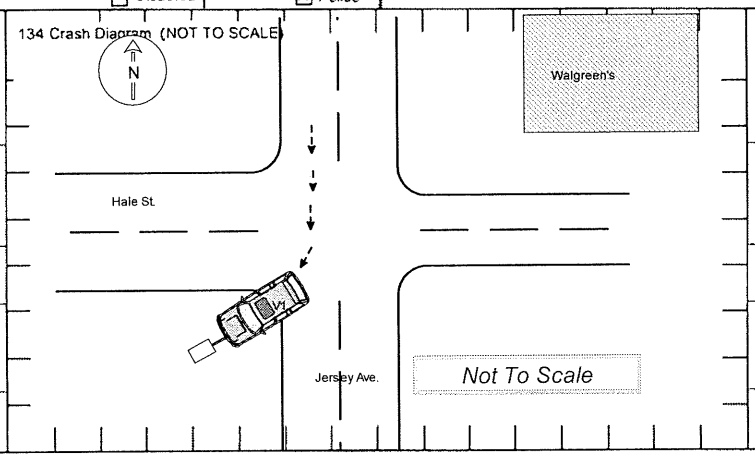
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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 reports driving south on Jersey Ave. when she was struck by Vehicle 2. Vehicle 1 then swerved after being hit, drove up on the sidewalk and then drove over the Jersey Ave./Hale St. street sign before coming to a stop. Driver of Vehicle 2 then pulled over, produced an insurance ID card, told Driver 1 that he was late for a job interview and then drove away. Driver 1 reports that while Driver 2 was still on scene he called his insurance company and began requesting to upgrade his vehicle to full coverage. Driver 1 reports that Vehicle 2 pulled

136 Damage To Other Property

Oper. 2 | 137 Charge: careless driving ☒ Multiple Charges | 138 Summons No.: q373314

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

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	----	39	F	----	----	---	09	04	----	--------	King, Trudygaye-514 Dillon Ct., North Brunswick NJ 08902
B	1	04	01	----	4	F	----	----	---	09	04	----	--------	King, Olivia-514 Dillon Ct., North Brunswick NJ 08902
C	1	05	01	----	6	F	----	----	---	09	04	----	--------	King, Cymantha-514 Dillon Ct., North Brunswick NJ 08902
D	1	06	01	----	4	F	----	----	---	09	04	----	--------	King, Diana-514 Dillon Ct., North Brunswick NJ 08902
E	2	01	01	----	32	M	00	00	---	09	04	----	--------	Gohbrial, Fady-2266 Hooper Ave., Brick NJ 08723

New Jersey Police Crash Investigation Report	Police Dept: New Brunswick Code: 01
Motor Vehicle Crash Description	Station: _____ Case No: 16-32907

(Refer to vehicle by number)

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

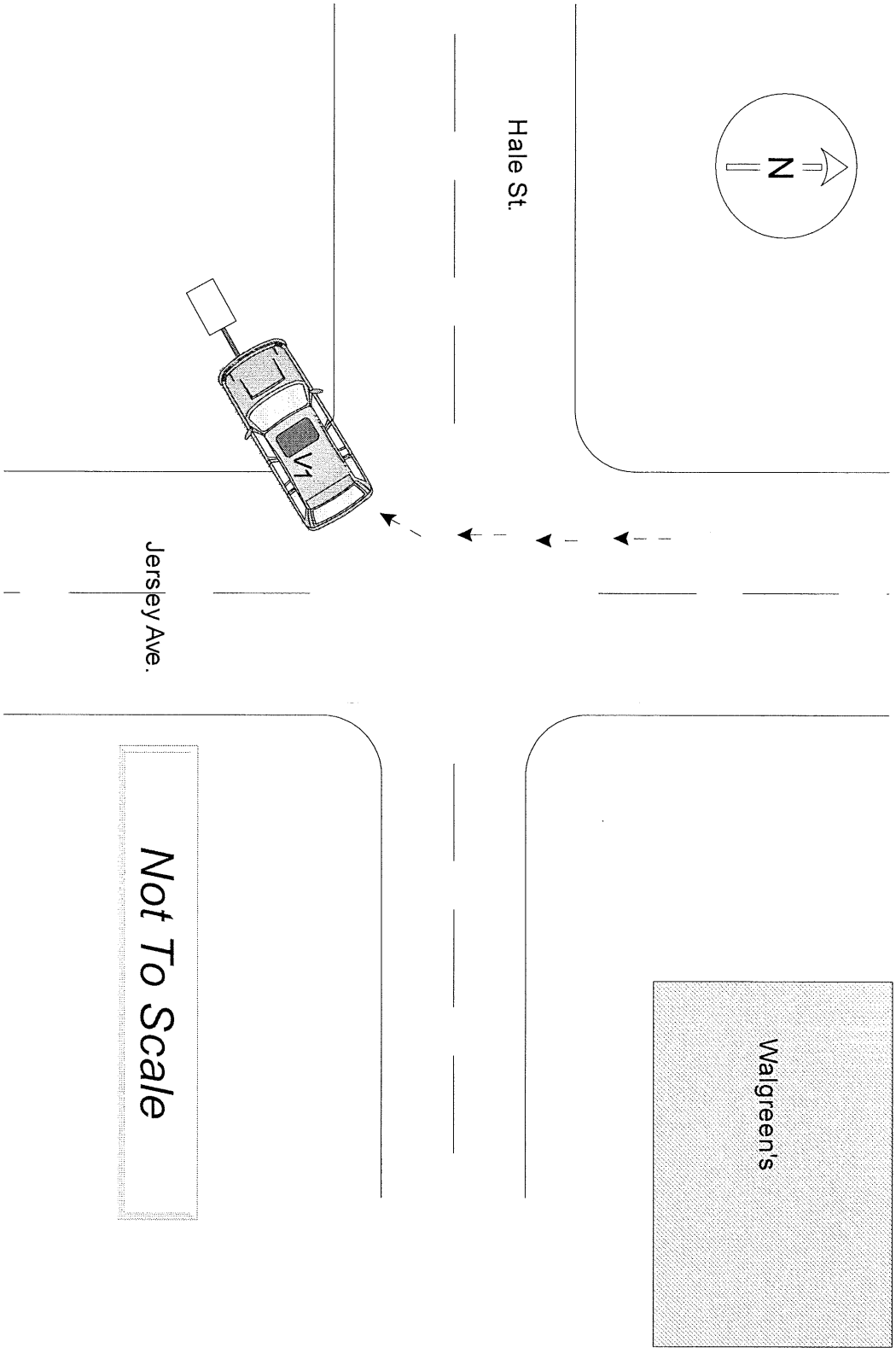
135 Crash Description

out of the Walgreen's parking lot driving west without looking for other vehicles, began to cross over Jersey Ave. trying to drive onto Hale St. and struck Vehicle 1. Vehicle 2 left prior to police arrival.

PO Michael Yacuk 7283
Officer's Signature

7283
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-32907



NJTR-1B (rev. 07/2005)

PO Michael Yacuk 7283
Officer's Signature

7283
Badge Number

New Jersey Police Crash Investigation Report

Page 1 of 2 | Fatal | [X] Reportable | [ ] Non-Reportable | [ ] Change Report

1 Case Number: 16-32920

2 Police Dept of: New Brunswick | Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 05 24 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 11 50

7 Municipality Code: 1214

8 Total Killed: - -

9 Total Injured: - -

10 Crash Occurred On: 55 Easton Avenue (Road Name) (Dir)

[ ] At Intersection with [ ] Feet [ ] Miles (14 15) [ ] N [ ] E [ ] S [ ] W (16) of: Condict Street

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

118a: 25 | 118b: ---- | 119a: 02 | 119b: ---- | 120: ---- | 121: 01 | 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: 02 | 133: 02

Vehicle 1

23 Veh No: 1

24 Policy No.: 4361-96-96-47

25 Ins Code:

[X] 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 — Michael | Sutton

36 Number and Street: 241 New York Avenue

37 City: New Brunswick, NJ 08901-1733

38 Make: DOD | 39 Model: MAG | 40 Color: BL | 41 Year: 07 | 42 Plate No.: WUR96N | 43 State: NJ

44 VIN: 2D4FV47V57H900065 | 45 Expires: 04/17

46 Vehicle Removed To [ ] Driven [X] Left at Scene [ ] Towed [ ] Impound [ ] Disabled | 47 Authority [ ] Owner [ ] Driver [ ] Police

48 Alcohol/Drug Test: Given: [X] 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.: 909268726

55 Ins Code: 134

[ ] Parked [ ] Ped [ ] Pedalcyclist [ ] Resp to Emergency [ ] Hit & Run

56 Driver's First Name: JESSICA | Initial: L | Last Name: OKUN | 59 Sex: F

57 Number and Street: 143 Serpentine Dr. | 60 Eyes: 2

58 City: Morganville, NJ 07751-1400 | State | Zip

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 04 05 94 | 64 Expires (mm yy)

65 Owner's First Name | Initial | Last Name

[X] Same As Driver — JESSICA | L | OKUN

66 Number and Street: 143 Serpentine Dr.

67 City: Morganville, NJ 07751-1400 | State | Zip

68 Make: TOY | 69 Model: CAM | 70 Color: SL | 71 Year: 08 | 72 Plate No.: A40GJR | 73 State: NJ

74 VIN: 4T1BE46K18U255525 | 75 Expires: 03/17

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

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

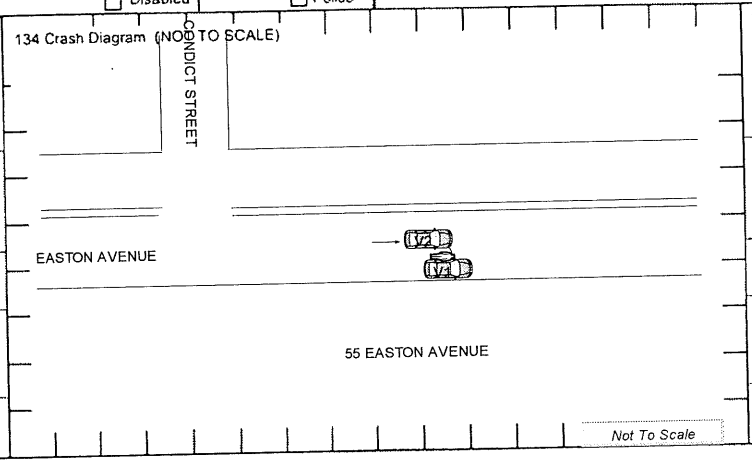
79 Hazardous Material: On Board [ ] Spill [ ] | Name or Placard No.

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 Ronald Rachilla 7206 | 142 Badge No.: 7206 | 143 Reviewed By Badge No.: CRADIC/5157 | 144 Case Status: [ ] Pending [X] 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	01	----	18	M	----	----	1	09	00	----	--------	SUTTON, TANNER-241 NEW YORK AVENUE, NEW
B	2	01	01	----	22	F	----	----	1	09	04	----	--------	OKUN, JESSICA-143 Serpentine Dr., Morganville, NJ 07751
C	----													
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32920

(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 LEGALLY PARKED CURBSIDE IN FRONT OF 55 EASTON AVENUE. VEHICLE #2 WAS DRIVING WEST ON EASTON AVENUE JUST PAST THE CONDICT STREET INTERSECTION.

IT APPEARS THAT VEHICLE #1's LEFT FRONT DOOR WAS SLIGHTLY AJAR WHEN VEHICLE #2 SIDESWIPED IT WITH IT'S FRONT RIGHT CORNER. THE IMPACT CAUSED DAMAGE TO BOTH VEHICLES.

A PREVIOUS OCCUPANT OF VEHICLE #1, WANDA SUTTON, STATES THAT THE VEHICLE WAS PARKED AND SHE WAS STANDING OUTSIDE THE VEHICLE BETWEEN THE DOOR AND THE VEHICLE. VEHICLE #2 THEN SIDESWIPED THE LEFT DOOR OF VEHICLE #1 WHILE IT WAS OPEN.

THE DRIVER OF VEHICLE #2 STATES THAT SHE WAS DRIVING STRAIGHT ON EASTON AVENUE AND DIDN'T SEE THE DOOR AND HIT THE LEFT SIDE DOOR OF VEHICLE #1.

THERE WERE NO INJURIES REPORTED AS A RESULT OF THE ACCIDENT.

NOTE: (P)TANNER SUTTON WAS SEATED IN THE FRONT RIGHT PASSENGER SEAT WHEN IMPACT OCCURRED. NO INJURIES.

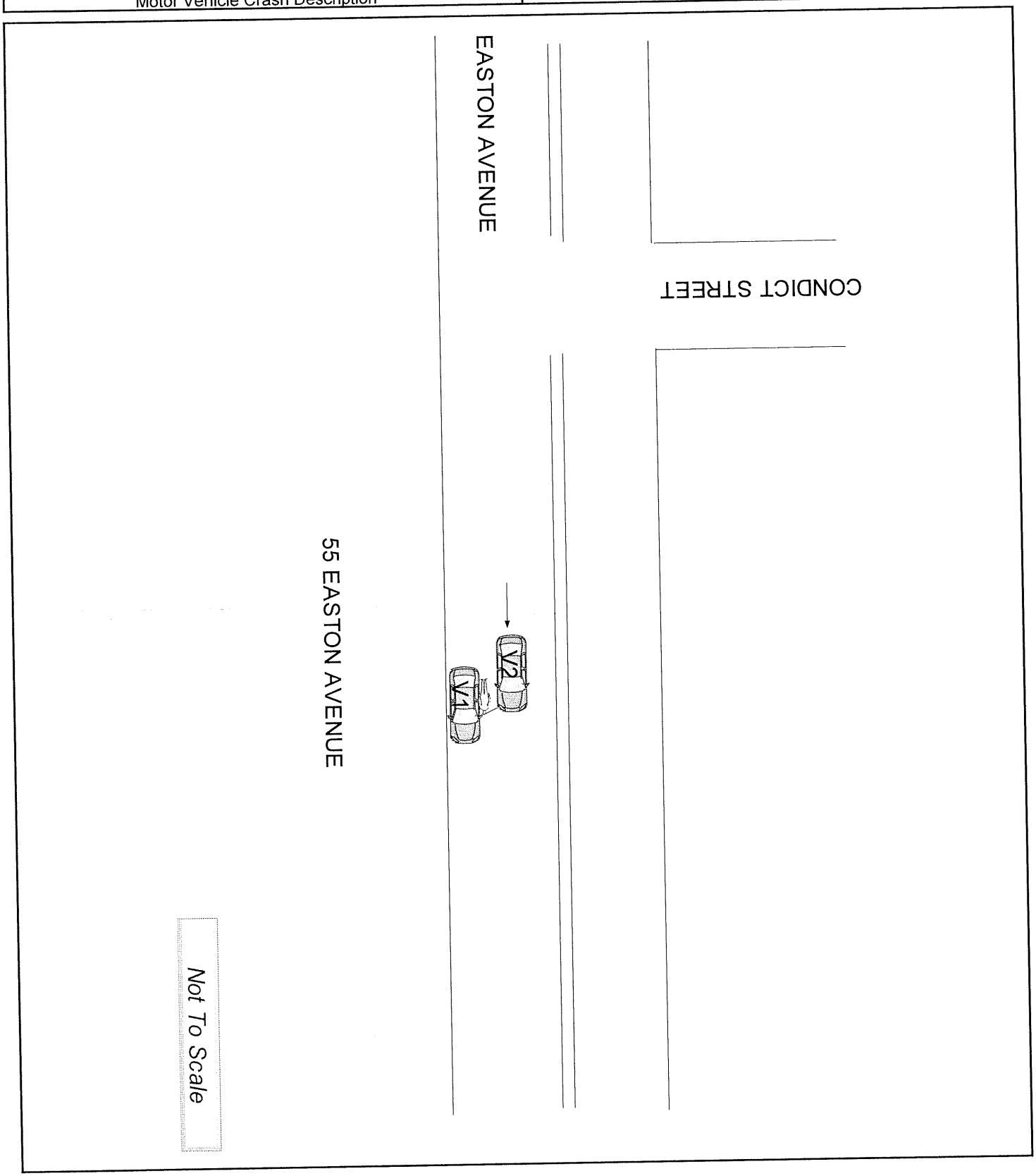
PO Ronald Rachilla 7206

Officer's Signature

7206

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-32920



NJTR-1B (rev. 07/2005)

PO Ronald Rachilla 7206
Officer's Signature

7206
Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-32958	10 Crash Occurred On: 1000 Somerset Street	11 Speed Limit	118a: 25
2 Police Dept of: New Brunswick Code: 01	☐ At Intersection with Road Name ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:	Dir / 12 Route No. / Suffix / 13 Milepost / 18 Speed Limit	118b: ----
3 Station/Precinct	14 15 16	17 Cross Road Name	119a: 10
4 Date of Crash mm dd yy: 05 24 16	5 Day of Week: Su M T W Th F Sa: O	6 Time (use 2400 hrs): 14 36	7 Municipality Code: 1214
8 Total Killed: - -	9 Total Injured: - -	19 ☐ To: Ramp ☐ From: / 20 Route/Name / ☐ NB ☐ EB ☐ SB ☐ WB	119b: 02
21 Latitude	22 Longitude		

Vehicle 1

23 Veh No: 1	24 Policy No.: 129 0255791	25 Ins Code: 360	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
26 Driver's First Name: Alejandra	Initial	Last Name: Lopez	29 Sex: F
27 Number and Street: 69 May Street			30 Eyes: 2
28 City: New Brunswick , NJ 08901-3438	State	Zip	
31 State	32 Driver's License No	33 DOB mm dd yy: 08 05 98	34 Expires mm yy
35 Owner's First Name: ☐ Same As Driver WALESKA	Initial	Last Name: MARCOS	
36 Number and Street: 69 May Street			
37 City: New Brunswick , NJ 08901-3438	State	Zip	
38 Make: MAZ	39 Model: 3	40 Color: GY	41 Year: 05
42 Plate No.: T68GJG	43 State: NJ	44 VIN: JM1BK143651219544	45 Expires: 03/17
46 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled	47 Authority: ☐ Owner ☒ Driver ☐ Police		

Vehicle 2

53 Veh No: 2	54 Policy No.: 089 6132-C19-30C	55 Ins Code: 896	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
56 Driver's First Name: ANDERZON	Initial	Last Name: MARTINEZ-TURCIOS	59 Sex: M
57 Number and Street: 102 N. TALMADGE STREET			60 Eyes: 2
58 City: NEW BRUNSWICK, NJ 08901	State	Zip	
61 State	62 Driver's License No	63 DOB mm dd yy: 12 15 98	64 Expires mm yy
65 Owner's First Name: ☐ Same As Driver MIGUEL	Initial: A	Last Name: MARTINEZ	
66 Number and Street: 322 OLD CROTON ROAD			
67 City: FLEMINGTON, NJ 08822	State	Zip	
68 Make: Toyota	69 Model: TAC	70 Color: Grn	71 Year: 10
72 Plate No.: L37GHW	73 State: NJ	74 VIN: 3TMMU4FN0AM018707	75 Expires: /
76 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled	77 Authority: ☐ Owner ☒ Driver ☐ Police		

Vehicle 1 Details

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

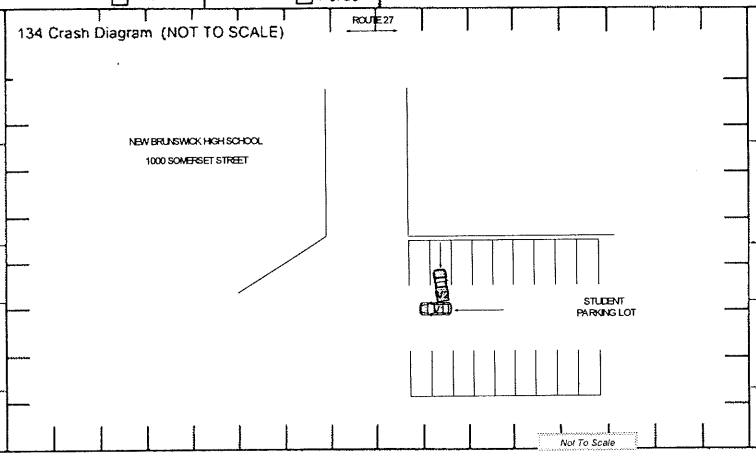
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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)



Vehicle 2 Details

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	142 Badge No.	143 Reviewed By Badge No.	144 Case Status
PO Ronald Rachilla 7206	7206	CRADIC/5157	☐ 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	----	17	F	----	----	1	09	04	----	--------	
B	1	02	01	----	16	F	----	----	1	09	04	----	--------	
C	2	01	01	----	17	M	----	----	1	09	04	----	--------	
D														
E														

Page _____ of _____

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-32958

(Refer to vehicle by number)

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

135 Crash Description

VEHICLE #1 WAS IN THE PARKING LOT AT NEW BRUNSWICK HIGH SCHOOL. WAITING TO MAKE A RIGHT TURN OUT OF THE STUDENT PARKING LOT. VEHICLE #2 WAS PARKED IN A LINED SPACE FACING FRONT END INWARD IN THE STUDENT PARKING LOT.

IT APPEARS THAT VEHICLE #2 BEGAN TO BACK OUT OF THE SPACE AND STRUCK VEHICLE #1'S RIGHT SIDE WITH IT'S REAR END. THE IMPACT CAUSED DAMAGE TO BOTH VEHICLES.

THERE WERE NO INJURIES REPORTED AS A RESULT OF THE INCIDENT.

PO Ronald Rachilla 7206

Officer's Signature

7206

Badge Number

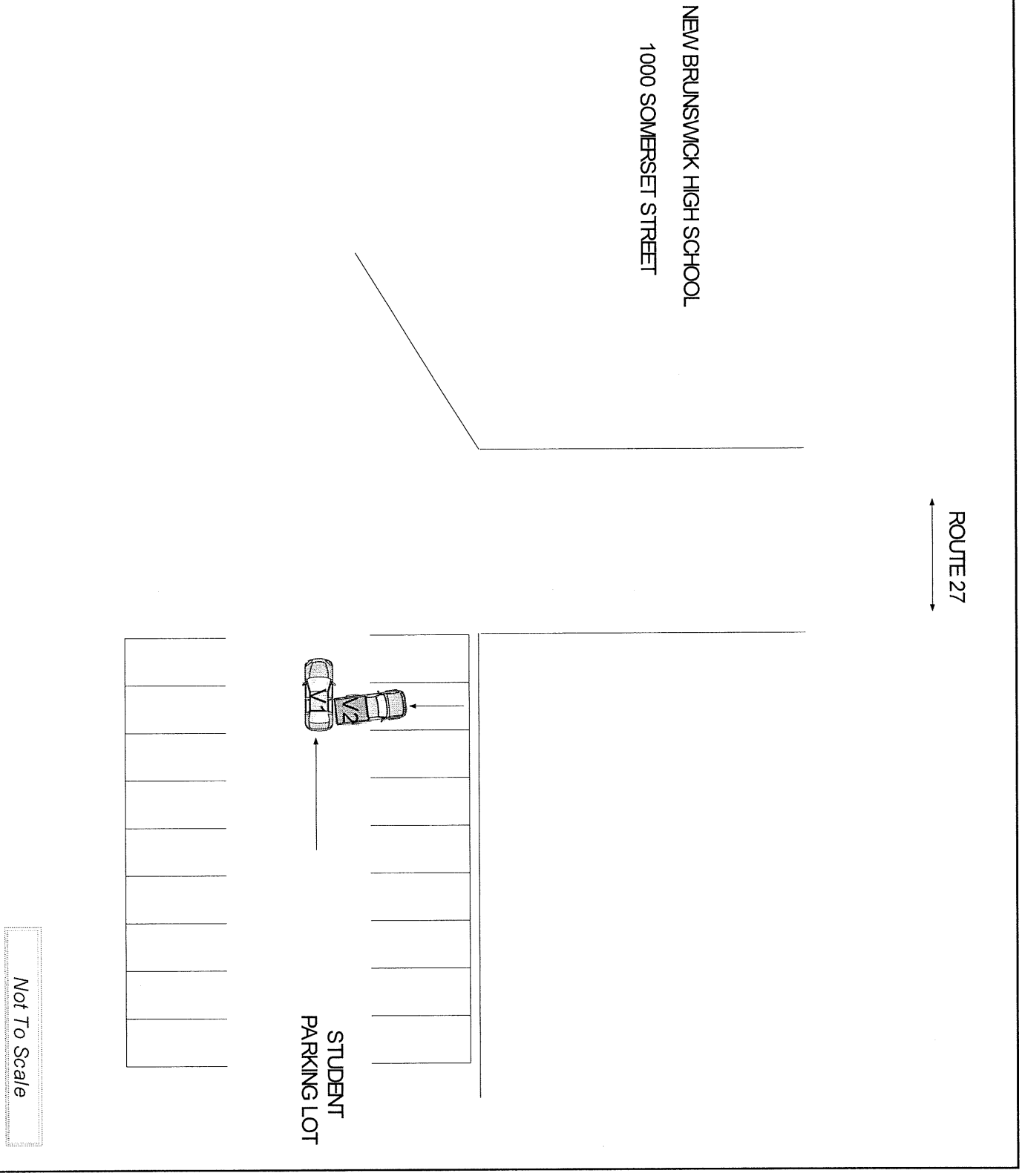
NJTR-1A (rev. 07/2005)

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept. New Brunswick Code 0 1

Station _____ Case No. 16-32958



NJTR-1B (rev. 07/2005)

PO Ronald Rachilla 7206
Officer's Signature

7206
Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☒ Change Report

1 Case Number: 16-33015

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: 1 Spring 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

4 Date of Crash mm dd yy: 05 24 16

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

6 Time (use 2400 hrs): 18 32

7 Municipality Code: 1214

8 Total Killed: 0

9 Total Injured: 0

23 Veh No	24 Policy No.	25 Ins Code
1	32878575	134

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

53 Veh No	54 Policy No.	55 Ins Code
2	F267103-0	426

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

26 Driver's First Name	Initial	Last Name	29 Sex
Janice		Liou	F

27 Number and Street: 1 Spring Street Apt. 1903

30 Eyes: 2

28 City: New Brunswick , NJ 08901-2968 State Zip

31 State	32 Driver's License No	33 DOB mm dd yy	34 Expires mm yy
		06 27 89	

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

36 Number and Street

37 City State Zip

56 Driver's First Name	Initial	Last Name	59 Sex
Nicole		Derosa	F

57 Number and Street: 3 Amherst Ct

60 Eyes: 2

58 City: Annadale, NJ 08801 State Zip

61 State	62 Driver's License No	63 DOB mm dd yy	64 Expires mm yy
		05 27 85	

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

66 Number and Street

67 City State Zip

38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State
Lexus	RX	Blk	201	W77FXD	NJ

44 VIN: 2T2BK1BA6DC155187 45 Expires: 9/16

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

68 Make	69 Model	70 Color	71 Year	72 Plate No.	73 State
Honda	Civic	Silve	201	ZRB51Y	NJ

74 VIN: 2HGFG1B97AH526745 75 Expires: 4/17

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

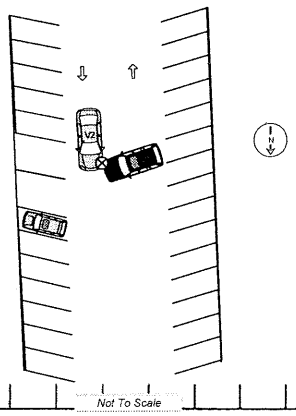
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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. 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	----	26	F	----	----	1	04	04	----	--------	Liou, Janice-1 Spring Street Apt. 1903, New Brunswick , NJ
B	2	01	01	----	30	F	----	----	1	04	04	----	--------	Derosa, Nicole-3 Amherst Ct, Annadale, NJ 08801
C														
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-33015

(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 5/24/16 at 18:32 hours, I was dispatched to 1 Spring Street parking deck for a reported motor vehicle accident.

Upon my arrival I was approached by the driver of V1 and V2. They both had no complaints of pain and refused medical attention.

The driver of V2 stated she was exiting the parking deck when V1, who was exiting the parking spot which is was located, drove into the driver side front pumper of her vehicle. V2 sustained damage to the driver side front bumper and front fender. V2 could be driven from the scene down to the exit of the parking deck but due to the damage could not be driven on the street. V1 sustained damage to the passenger side bumper and was also able to driven from the scene.

Parties involved were explained that report would be filed on the incident and how to obtain a copy of said report.

It should be noted that this report was revised on 5/25/16 due to incorrect information.

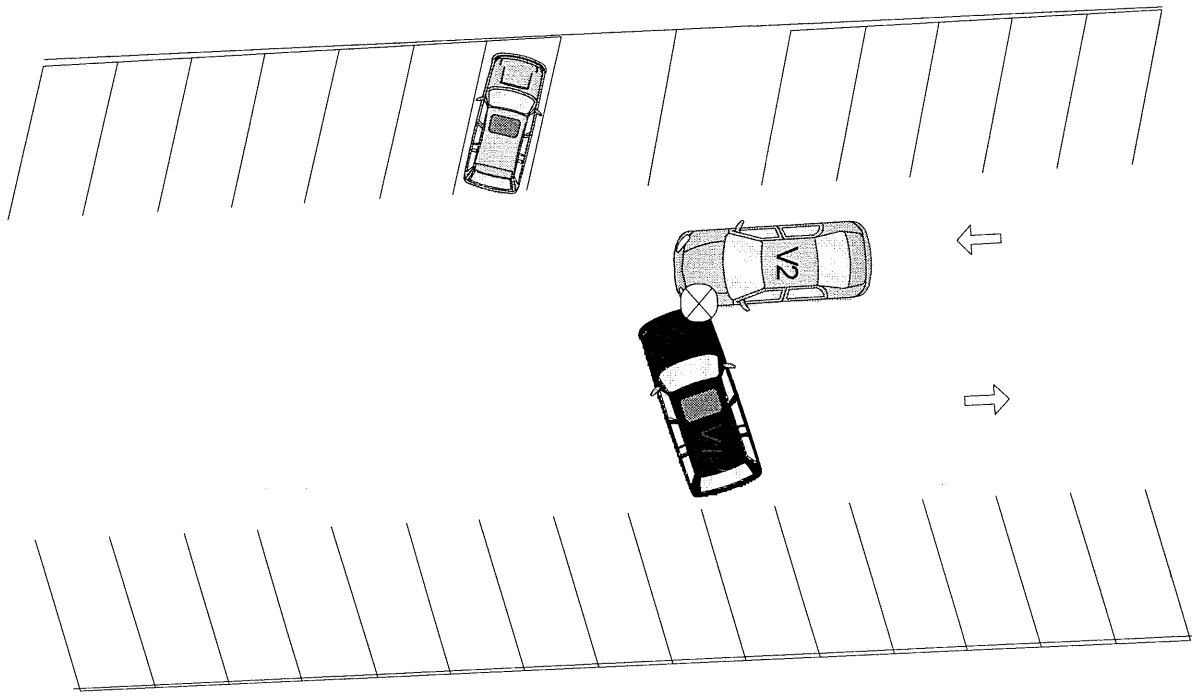
PO Richard Reed 7335

PO Richard Reed 7335

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. 16-33015



Not To Scale

1 New Street Parking Deck (Level 3)

N

PO Richard Reed 7335
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

Page 1 of 2 | ☐ Fatal | ☒ Reportable | ☐ Non-Reportable | ☐ Change Report

96: 05

1 Case Number: 16-33026

2 Police Dept of: New Brunswick | Code: 01

3 Station/Precinct:

97: 01 | 98: 01 | 99: 07 | 100: 01

10 Crash Occurred On: Commercial Avenue (Road Name) | Dir | 11 Speed Limit: 25 | 12 Route No. | Suffix | 13 Milepost | 118a: 25 | 118b: ----

☒ At Intersection with | ☐ Feet | ☐ Miles (14) | ☐ N ☐ E ☐ S ☐ W (16) of: Sandford Street | 18 Speed Limit: 25

17 Cross Road Name | 19 ☐ To: Ramp ☐ From: | ☐ NB ☐ EB ☐ SB ☐ WB | 119a: 04

20 Route/Name | 21 Latitude | 22 Longitude | 119b: 02

4 Date of Crash mm dd yy: 05 24 16 | 5 Day of Week: Su M T W Th F Sa: O | 6 Time (use 2400 hrs): 19 07 | 7 Municipality Code: 1214 | 8 Total Killed: 0 | 9 Total Injured: 0

101: 02

Vehicle 1

23 Veh No | 24 Policy No. | 25 Ins Code

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

102: 01

26 Driver's First Name: KARLA | Initial | Last Name: BERRIO | 29 Sex: F

103: 01

27 Number and Street: 51 SOUTH TALMADGE ST. NEW | 30 Eyes: 2

104: 01

28 City: NJ 08901 | State | Zip

105: 14

31 State | 32 Driver's License No | 33 DOB mm dd yy: 12 20 01 | 34 Expires mm yy

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

36 Number and Street

106: ----

37 City | State | Zip

107: 02

38 Make | 39 Model | 40 Color | 41 Year | 42 Plate No. | 43 State

44 VIN | 45 Expires

108: ----

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

109: 01

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

110: ----

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

111: 00

50 Carrier No. ☐ USDOT ☐ Other *

112: ----

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

113: 00

52 Carrier name

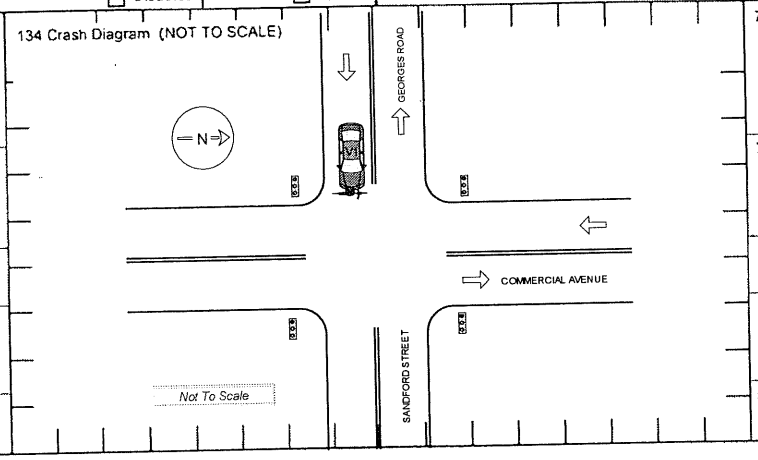
114: ----

115: ----

116: 01

117: 02

134 Crash Diagram (NOT TO SCALE)



Vehicle 2

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

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

120: 01

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

121: 00

57 Number and Street: 00 | 60 Eyes

58 City: 0 | State | Zip

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

122: ----

123: ----

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

124: 43

66 Number and Street: 00

125: 01

67 City: 00 | State | Zip

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

74 VIN: 00 | 75 Expires

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

126: 03

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

127: 03

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

128a: 21

128b: ----

80 Carrier No. ☐ USDOT ☐ Other *

128c: ----

128d: ----

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

129a: 26

82 Carrier name

129b: ----

129c: ----

129d: ----

130: ----

131: ----

135 Crash Description

132: 12

136 Damage To Other Property: N/A

133: 12

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

141 Officer's Signature: PO John Yurkovic Jr. 7252 | 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	----	03	03	14	F	10	07	2	----	----	----	6202	
B														
C														
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-33026

(Refer to vehicle by number)

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

135 Crash Description

On the noted date and time, I was dispatched to 33 Georges Road for a reported motor vehicle accident with injuries.

Upon arrival, I located the victim Karla Berrio in front of 33 Georges Road. Berrio was seated at a picnic table and in obvious pain. Upon the arrival of EMS, Berrio relayed the following information. It should be noted that Berrio spoke limited English and EMS personnel provided translation.

Berrio advised that she was riding her bicycle on Commercial Avenue traveling on the sidewalk. A she neared the traffic signal located at the intersection, the directional indicated that it was clear for her to cross the street. As she was in the roadway, a vehicle impacted her and fled the scene. Berrio could not provide a vehicle description about the hit and run vehicle. Berrio then walked to 33 Georges Road where she was met by friends. It should be noted that I examined the victims bicycle that she was riding when the accident occurred. The bicycle was operable and did not sustain any damage.

I then spoke with a witness identified as Annetty Torivio. Torivio stated that she was told by a few people that a small gray or silver Acura hit Berrio and fled the scene. Witnesses went on to state the the vehicle may have been an older model Acura TL. The hit and run vehicle was traveling on Georges Road from North Brunswick. After impact, the hit and run vehicle fled the scene on Sanford Street towards Livingston Avenue. The driver was described as an older small Hispanic female.

Prior to the victim being transported to RWJUH, I spoke with the paramedics on scene. They advised that the victim possibly suffered a broken femur, broken hip, abdominal injuries, and a fractured left wrist. Despite her injuries, she is expected to recover. P/O Buckalew of the TSEU was notified that the accident occurred and the victims condition. There are cameras in the area, but they were unable to be reviewed at the time this report was completed.

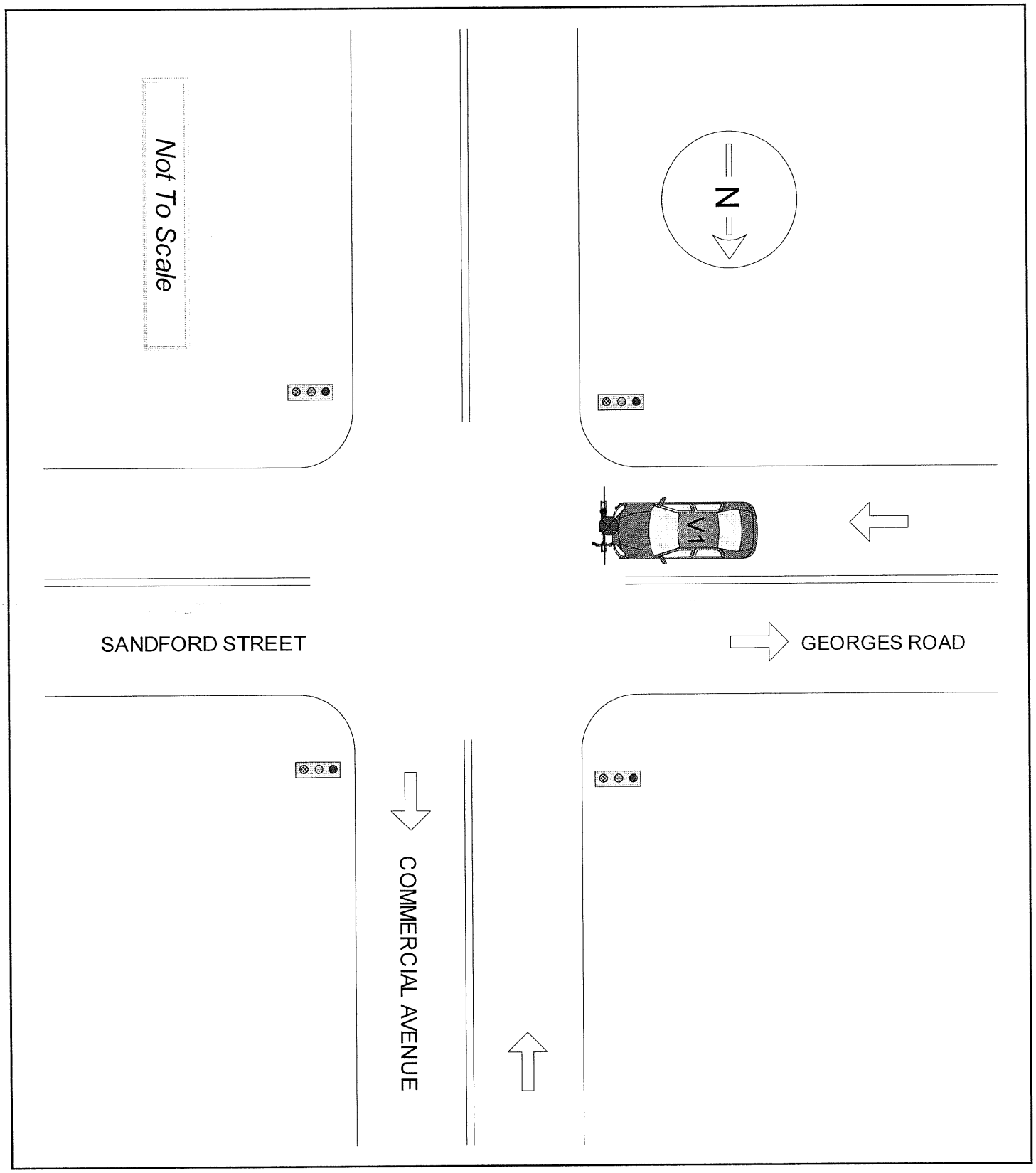
PO John Yurkovic Jr. 7252

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. 16-33026



NJTR-1B (rev. 07/2005)

PO John Yurkovic Jr. 7252
Officer's Signature

Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-33165

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: 333 Handy Street (Road Name) (Dir) — 11 Speed Limit — 12 Route No. — Suffix — 13 Milepost — 18 Speed Limit

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

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

4 Date of Crash mm dd yy: 05 25 16

5 Day of Week: Su M Tu W Th F Sa: 6

6 Time (use 2400 hrs): 10 14

7 Municipality Code: 1214

8 Total Killed: 00

9 Total Injured: 00

21 Latitude — 22 Longitude

Vehicle 1

23 Veh No: 1

24 Policy No.: F817494-8

25 Ins Code: 426

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

26 Driver's First Name: Brettny — Initial — Last Name: Bautista — 29 Sex: F

27 Number and Street: 18 Laurel Pl 1st Fl — 30 Eyes: 2

28 City: No.brunswick, NJ 08902-2841 — State — Zip

31 State — 32 Driver's License No — 33 DOB mm dd yy: 03 04 98 — 34 Expires mm yy

35 Owner's First Name: ☐ Same As Driver Olvin — Initial — Last Name: Bautista

36 Number and Street: 18 Laurel Pl 1fl.

37 City: No. Brunswick, NJ 08902-2841 — State — Zip

38 Make: BUI — 39 Model: ENC — 40 Color: BR — 41 Year: 11 — 42 Plate No.: Y84FET — 43 State: NJ

44 VIN: 5GAKRBED3BJ367964 — 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.: F658427-0

55 Ins Code: 426

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

56 Driver's First Name: Gertrude — Initial — Last Name: Kelley — 59 Sex: F

57 Number and Street: 168 Redmond St — 60 Eyes: 2

58 City: New Brunswick , NJ 08901-2669 — State — Zip

61 State — 62 Driver's License No — 63 DOB mm dd yy: 11 13 33 — 64 Expires mm yy

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

66 Number and Street:

67 City — State — Zip

68 Make: TOY — 69 Model: COR — 70 Color: NO- — 71 Year: 01 — 72 Plate No.: UMV299 — 73 State: NJ

74 VIN: 1NXBR12E21Z490654 — 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

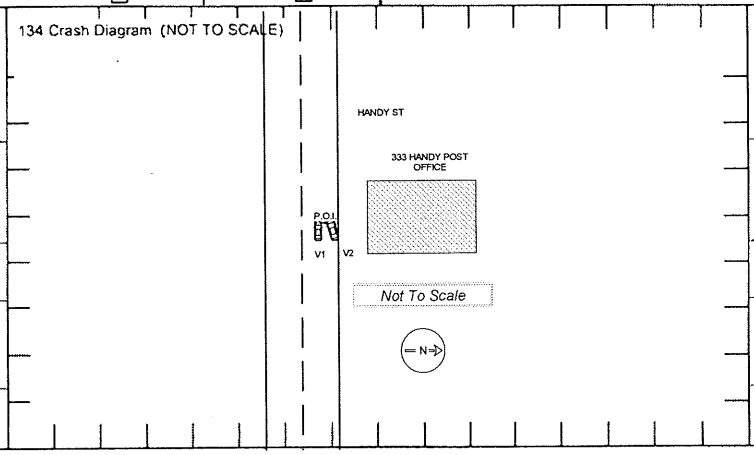
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

80 Carrier No. ☐ USDOT ☐ Other *

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

82 Carrier name

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 Anthony Abode 7249 — 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	1	01	----	----	18	F	----	----	---	00	00	----	--------	Bautista, Brettny-18 Laurel Pl 1st Fl, No.brunswick, NJ 08902
B	2	01	----	----	82	F	----	----	---	00	00	----	--------	Kelley, Gertrude-168 Redmond St, New Brunswick , NJ 08901
C	1	06	----	----	2	F	----	----	---	00	00	----	--------	Emmanuel Bautista 18 Laurel pl 1st floor
D														
E														

New Jersey Police Crash Investigation Report	Police Dept: New Brunswick Code: 01
Motor Vehicle Crash Description	Station: _____ Case No: 16-33165

(Refer to vehicle by number)

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

135 Crash Description

V1 AND V2 WERE INVOLVED IN AN ACCIDENT IN FRONT OF 333 HANDY STREET. V1 WAS TRAVELING STRAIGHT ON HANDY TOWARDS FRENCH ST. V2 WAS PARKED IN FRONT OF 333 HANDY ST AND BEGAN MERGING INTO TRAFFIC.

D1 STATED SHE WAS UNSURE IF V2 WAS MERGING INTO HER LANE. SHE WAITED SEVERAL SECONDS AND WITH NO MOVEMENT FROM V2. D1 THEN PROCEEDED FORWARD . AT THIS TIME V2 PULLED INTO TRAFFIC CAUSING THE COLLISION.

D2 STATED SHE WAS MERGING INTO TRAFFIC AND OBSERVED V1. IT APPEARED THAT V1 HAD STOPPED TO ALLOW HER TO ENTER. V2 THEN PROCEEDED TO PULL OUT INTO THE LANE OF TRAFFIC. D2 STATED AT THIS TIME V1 DROVE INTO HER VEHICLE CAUSING THE COLLISION.

NO INJURIES WERE REPORTED AT THIS TIME.

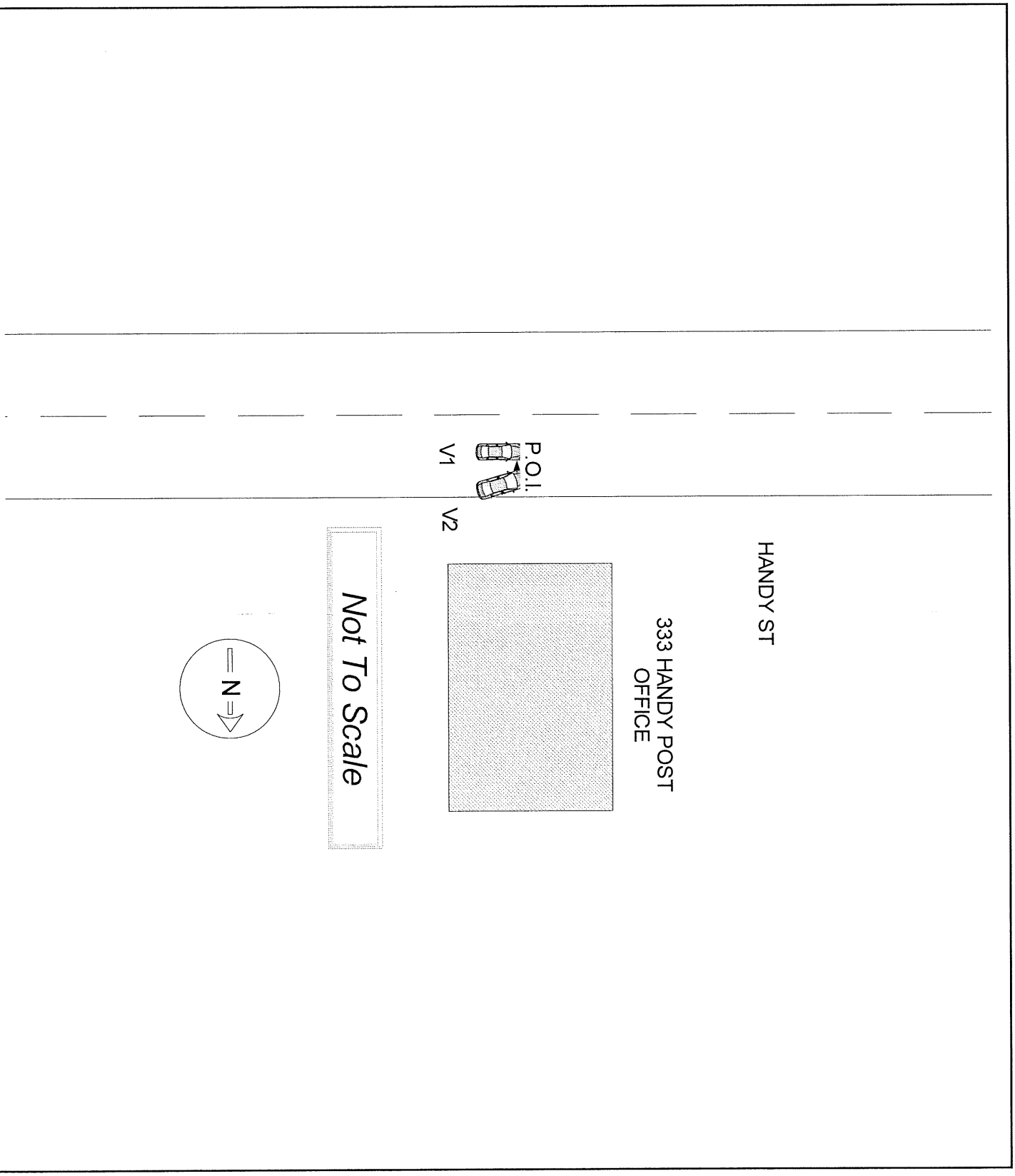
DUE TO THE LOCATION OF THE DAMAGE AND THE STATEMENTS GIVEN, I COULD NOT DETERMINE WHO WAS AT FAULT FOR THE COLLISION.

PO Anthony Abode 7249

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. 16-33165



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PO Anthony Abode 7249
Officer's Signature

Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number: 16-33194

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

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

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

11 Speed Limit: 25

12 Route No. 13 Milepost 18 Speed Limit

17 Cross Road Name

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

4 Date of Crash mm dd yy: 05 25 16

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

6 Time (use 2400 hrs): 13 02

7 Municipality Code: 1214

8 Total Killed: 00

9 Total Injured: 00

21 Latitude 22 Longitude

Vehicle 1

23 Veh No: 1

24 Policy No.: 17385876

25 Ins Code: 135

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

26 Driver's First Name: Mal Initial: H Last Name: Yoo

29 Sex: F

27 Number and Street: 423 Grove Avenue

30 Eyes: 2

28 City: Metuchen, NJ 08840-1103 State Zip

31 State 32 Driver's License No

33 DOB mm dd yy: 11 12 61

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: INF 39 Model: QX7 40 Color: WT 41 Year: 14 42 Plate No.: A80DXP 43 State: NJ

44 VIN: JN8CS1MW1EM410404

45 Expires: 01/18

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

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.: 4142367236

55 Ins Code: 148

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

56 Driver's First Name: Ryan Initial: R Last Name: Mickendrow

59 Sex: M

57 Number and Street: 169 Brennan Concourse

60 Eyes

58 City: Bayville, NJ 08721 State Zip

61 State 62 Driver's License No

63 DOB mm dd yy: 01 28 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: Acura 69 Model 70 Color: Gry 71 Year: 201 72 Plate No.: RGX17K 73 State: NJ

74 VIN: 19UUA8F25CA011887

75 Expires: /

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

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

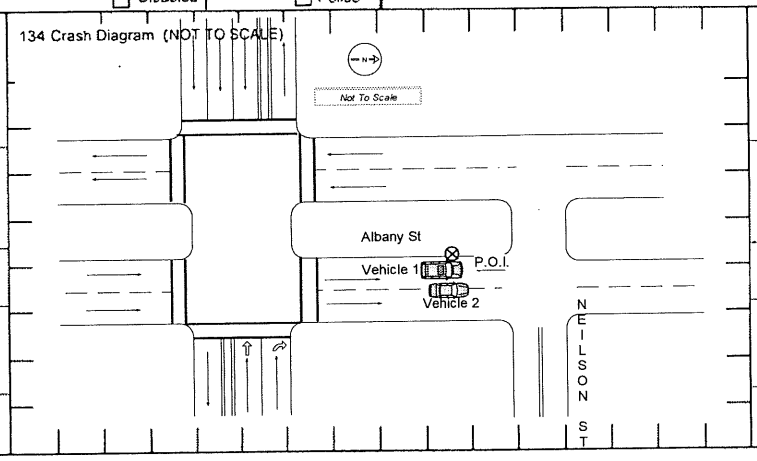
☐ ≤ 10,000 lbs

☐ 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

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

141 Officer's Signature: PO Marvin Shaw 7305

142 Badge No. 143 Reviewed By Badge No. 144 Case Status ☐ Pending ☒ Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	54	F	----	----	1	04	04	----	--------	Yoo, Mal-423 Grove Avenue, Metuchen, NJ 08840-1103
B	2	01	01	----	34	M	----	----	1	04	04	----	--------	Mickendrow, Ryan-169 Brennan Concourse, Bayville, NJ
C														
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-33194

(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 one (1) stated while driving north bound on Albany Street towards Neilson Street, vehicle two (2) merged into her lane causing her to swerve and strike the curb. Vehicle one (1) front driver side tire was deflated during the incident.

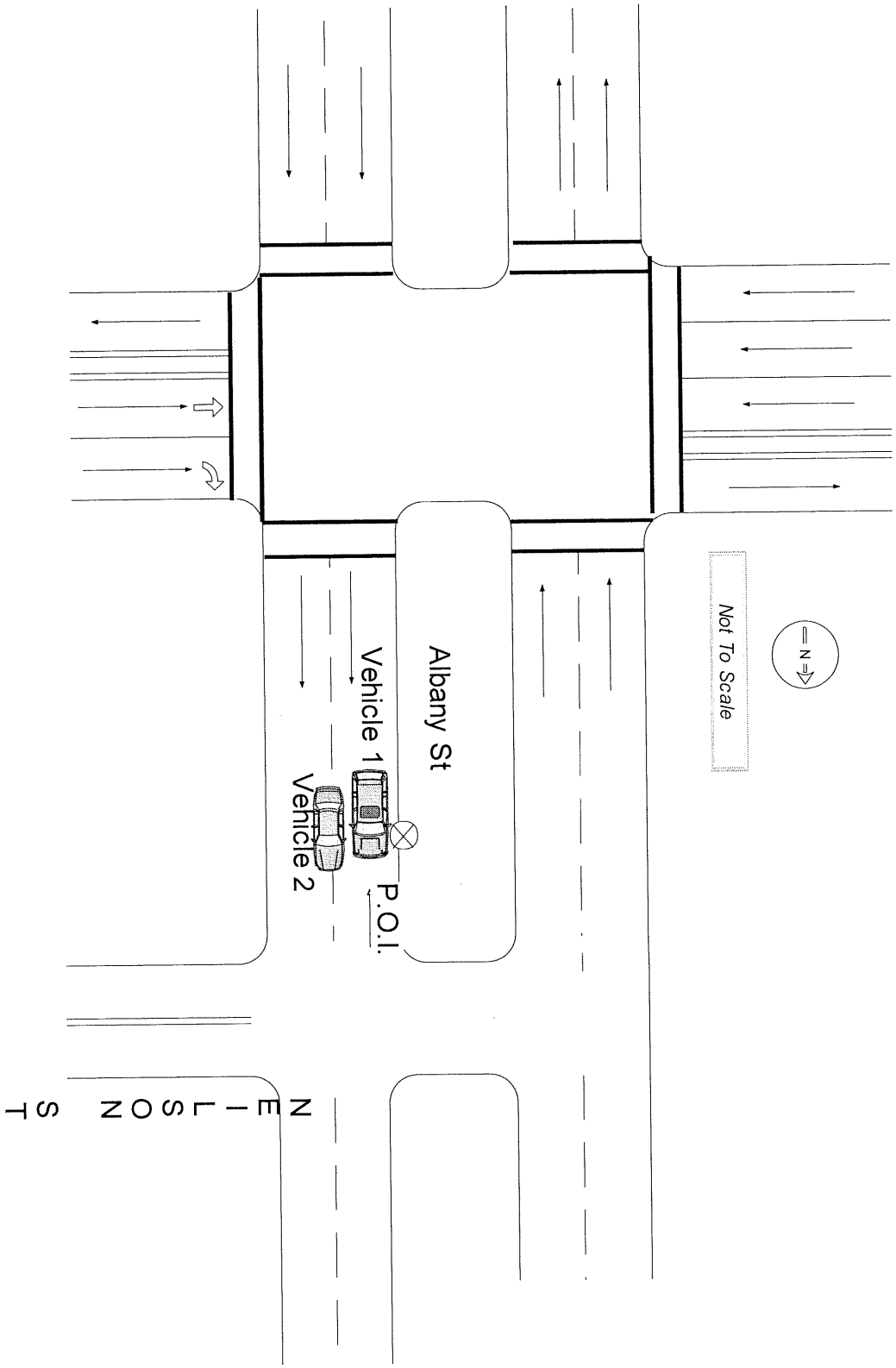
Driver two (2) stated while driving north bound on Albany Street towards Neilson Street, he attempted to merge lanes when he heard vehicle ones (1) horn beep at which time he merged back into the right lane and continued straight ahead on Albany Street. Vehicle 2 did not strike vehicle one during the incident, nor did vehicle 2 sustain any damage during the incident.

PO Marvin Shaw 7305

Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 01 Station_____ Case No. 16-33194



NJTR-1B (rev. 07/2005)

PO Marvin Shaw 7305
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

Page ____ of ____ | Fatal | [X] Reportable | [ ] Non-Reportable | [ ] Change Report

1 Case Number: 16-33238

2 Police Dept of: New Brunswick | Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 05 25 16

5 Day of Week: Su M Tu W Th F Sa: 0

6 Time (use 2400 hrs): 16 23

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured:

10 Crash Occurred On: 186 Redmond Street (Road Name) | Dir | 11 Speed Limit: 25 | 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

Vehicle 1

23 Veh No: 1 | 24 Policy No.: 16800650 | 25 Ins Code: 135

[ ] Parked [ ] Ped [ ] Pedalcyclist [ ] Resp to Emergency [ ] Hit & Run

26 Driver's First Name: Ana | Initial: M | Last Name: Castaneda | 29 Sex: F

27 Number and Street: 186 Redmond St | 30 Eyes: 2

28 City: New Brunswick , NJ 08901-2669 | State | Zip

31 State | 32 Driver's License No | 33 DOB (mm dd yy): 04 01 78 | 34 Expires (mm yy)

35 Owner's First Name | Initial | Last Name: [X] Same As Driver

36 Number and Street

37 City | State | Zip

38 Make: TOY | 39 Model: RAV | 40 Color: BK | 41 Year: 14 | 42 Plate No.: P84ENU | 43 State: NJ

44 VIN: 2T3BFREV5EW198898 | 45 Expires: 07/18

46 Vehicle Removed To: [X] Driven [ ] Left at Scene [ ] Towed [ ] Impound [ ] Disabled | 47 Authority: [X] Owner [ ] Driver [ ] Police

48 Alcohol/Drug Test: Given: [X] 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.: 905650837 | 55 Ins Code: 134

[ ] Parked [ ] Ped [ ] Pedalcyclist [ ] Resp to Emergency [ ] Hit & Run

56 Driver's First Name: Bianca | Initial: B | Last Name: Day | 59 Sex: F

57 Number and Street: 207 Bishop Blvd | 60 Eyes: 2

58 City: No Brunswick, NJ 08902-2003 | State | Zip

61 State | 62 Driver's License No | 63 DOB (mm dd yy): 05 05 92 | 64 Expires (mm yy)

65 Owner's First Name | Initial | Last Name: [X] Same As Driver

66 Number and Street

67 City | State | Zip

68 Make: SUZ | 69 Model: REN | 70 Color: ORA | 71 Year: 07 | 72 Plate No.: Z47FJH | 73 State: NJ

74 VIN: KL5JD66Z97K509154 | 75 Expires: 05/17

76 Vehicle Removed To: [X] Driven [ ] Left at Scene [ ] Towed [ ] Impound [ ] Disabled | 77 Authority: [X] Owner [ ] Driver [ ] Police

78 Alcohol/Drug Test: Given: [X] No [ ] Yes [ ] Refused | Type: [ ] Breath [ ] Blood [ ] Unne | Results: 0.__ __ % [ ] Pending

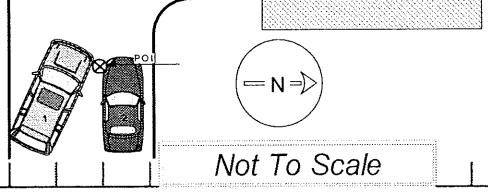
79 Hazardous Material: On Board [ ] | Spill [ ] | Name or Placard No.

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

The driver of vehicle 1 stated she was making a right into her driveway when the driver of vehicle 2 struck her.

The driver of vehicle 2 stated the driver of vehicle one passed her on the left. The driver of vehicle 2 then tried to enter her driveway making a right in front of vehicle 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 Brian Bellafronte | 142 Badge No.: 7324 | 143 Reviewed By | Badge No. | 144 Case Status: [ ] Pending [X] 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	----	38	F	----	----	1	09	04	----	--------	Castaneda, Ana-186 Redmond St, New Brunswick , NJ 08901
B	2	01	01	----	24	F	----	----	1	09	04	----	--------	Day, Bianca-207 Bishop Blvd, No Brunswick, NJ 08902-2003
C														
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-33238

(Refer to vehicle by number)

ALL INVOLVED

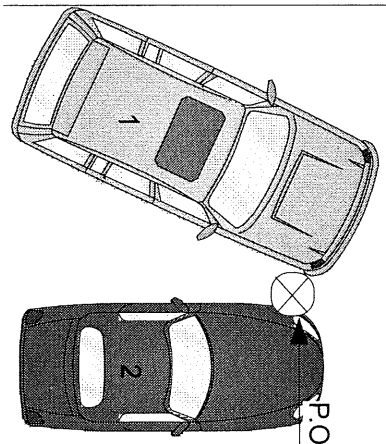
	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Depl 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
F														
G														
H														
I														
J														

135 Crash Description

PO Brian Bellafronte
Officer's Signature

7324
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-33238



Redmond Street

P.O.I.

Not To Scale

N

186 Redmond Street

NJTR-1B (rev. 07/2005)

PO Brian Bellafronte
Officer's Signature

7324
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number: 16-33242

2 Police Dept of: New Brunswick — Code: 01

3 Station/Precinct:

10 Crash Occurred On: Albany Street — Road Name — Dir

11 Speed Limit:

12 Route No. — Suffix — 13 Milepost

18 Speed Limit: 25

☒ At Intersection with ☐ Feet ☐ Miles — 14 — 15

☐ N ☐ E ☐ S ☐ W of: George Street — 16

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: 05 25 16

5 Day of Week: Su M Tu W Th F Sa — O

6 Time (use 2400 hrs): 16 37

7 Municipality Code: 1214

8 Total Killed: 0 0

9 Total Injured: 0 0

Vehicle 1

23 Veh No: 1

24 Policy No.: 09451950

25 Ins Code: 961

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

26 Driver's First Name: Daffney — Initial — Last Name: Belnavis — 29 Sex: F

27 Number and Street: 205 So 9th Ave — 30 Eyes: 2

28 City: Highland Park , NJ 08904-3114 — State — Zip

31 State — 32 Driver's License No — 33 DOB mm dd yy: 11 04 63 — 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: LEX — 39 Model: GX4 — 40 Color: WHT — 41 Year: 05 — 42 Plate No.: X69GCB — 43 State: NJ

44 VIN: JTJBT20X250073187 — 45 Expires: 12/16

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

55 Ins Code

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

56 Driver's First Name: Rosa — Initial: A — Last Name: Flores — 59 Sex: F

57 Number and Street: 177 Lawrence St Apt 4 — 60 Eyes: 2

58 City: New Brunswick , NJ 08901-3485 — State — Zip

61 State — 62 Driver's License No — 63 DOB mm dd yy: 03 18 50 — 64 Expires mm yy

65 Owner's First Name: Victor — Initial — Last Name: Flores

☐ Same As Driver

66 Number and Street: 177 Lawrence St Apt 4

67 City: N Brunswick, NJ 08901-3485 — State — Zip

68 Make: HON — 69 Model: ACC — 70 Color: SL — 71 Year: 01 — 72 Plate No.: A80CKF — 73 State: NJ

74 VIN: 1HGCG66871A077308 — 75 Expires: 09/16

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

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

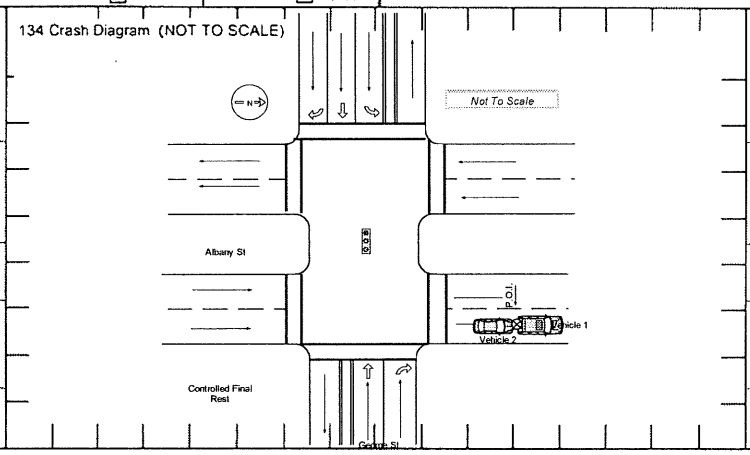
79 Hazardous Material: On Board ☐ Spill ☐ — Name or Placard No.

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

Oper.	137 Charge	☐ Multiple Charges	138 Summons No.	Oper.	139 Charge	☐ Multiple Charges	140 Summons No.
				2	Failure to exhibit documents		Q372706

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	52	F	----	----	1	04	04	----	--------	Belnavis, Daffney-205 So 9th Ave, Highland Park , NJ 08904
B	2	01	01	----	66	F	----	----	1	04	04	----	--------	Flores, Rosa-177 Lawrence St Apt 4, 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: 16-33242

(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 one (1) stated that she was stopped in traffic north bound on Albany Street just past George Street, when she was struck in the rear by vehicle two (2). Vehicle one rear bumper sustained minor scratches.

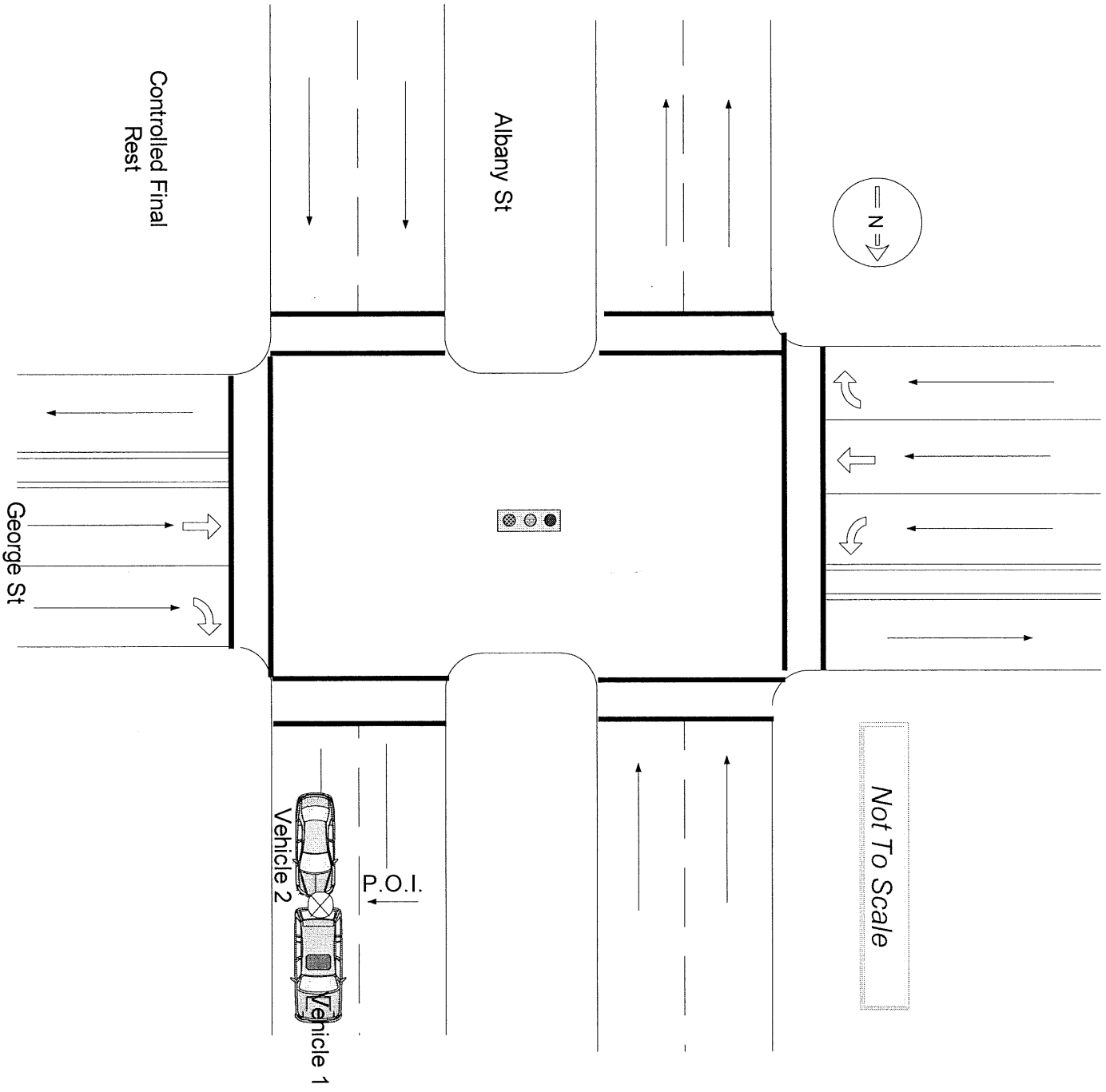
Driver two (2) stated that she was driving North bound on Albany Street at which time she struck vehicle one (1) in the rear who suddenly stopped due to heavy traffic. Vehicle two (2) front bumper sustained minor scratches.

PO Marvin Shaw 7305

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. 16-33242



NJTR-1B (rev. 07/2005)

PO Marvin Shaw 7305
Officer's Signature

Badge Number

New Jersey Police Crash Investigation Report

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

1 Case Number	16-33283
2 Police Dept of	New Brunswick
Code	01
3 Station/Precinct	
10 Crash Occurred On	1100 Somerset Street
Road Name	
Dir	
11 Speed Limit	40
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 Ramp ☐ To: ☐ From:	
20 Route/Name	
NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	05 25 16
5 Day of Week Su M Tu W Th F Sa	6
6 Time (use 2400 hrs)	18 31
7 Municipality Code	1214
8 Total Killed	00
9 Total Injured	01
21 Latitude	
22 Longitude	

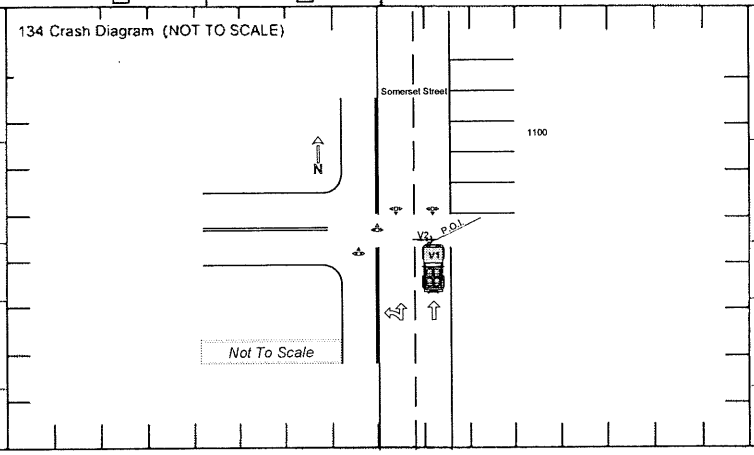
Vehicle 1

23 Veh No	01
24 Policy No.	TCA00001018914
25 Ins Code	632
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run	
26 Driver's First Name	Efrain
Initial	
Last Name	Ayala
29 Sex	M
27 Number and Street	40 Vernon Ave
30 Eyes	1
28 City	Somerset, NJ 08873-2429
State	
Zip	
31 State	
32 Driver's License No	
33 DOB mm dd yy	07 11 43
34 Expires mm yy	
35 Owner's First Name	☒ Same As Driver
Initial	
Last Name	
36 Number and Street	
37 City	
State	
Zip	
38 Make	JEE
39 Model	WRA
40 Color	GN
41 Year	02
42 Plate No.	D58FWC
43 State	NJ
44 VIN	1J4FA29P02P719109
45 Expires	09/16
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	02
54 Policy No.	-
55 Ins Code	-
☐ Parked ☐ Ped ☒ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run	
56 Driver's First Name	Minjae
Initial	
Last Name	Kim
59 Sex	M
57 Number and Street	37 Main Street
60 Eyes	
58 City	Somerset NJ, 08873
State	
Zip	
61 State	
62 Driver's License No	
63 DOB mm dd yy	11 01 91
64 Expires mm yy	
65 Owner's First Name	☒ Same As Driver
Initial	
Last Name	
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.	☐ 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

D1 was operating V1 and traveling northbound on Somerset Street (Rt. 27). D1 stated that he had a green light and V2 attempted to ride across Rt. 27 in front of V1. D1 applied his brakes and could not stop before V1 struck V2. D2 stated that he was operating V2 and attempting to cross Rt. 27 at a crosswalk on his pedalcycle. D2 observed that the traffic signal going southbound was red and traffic was stopped. D2 then failed to look at the northbound signal and began crossing Rt. 27 when he was struck by V1.

136 Damage To Other Property

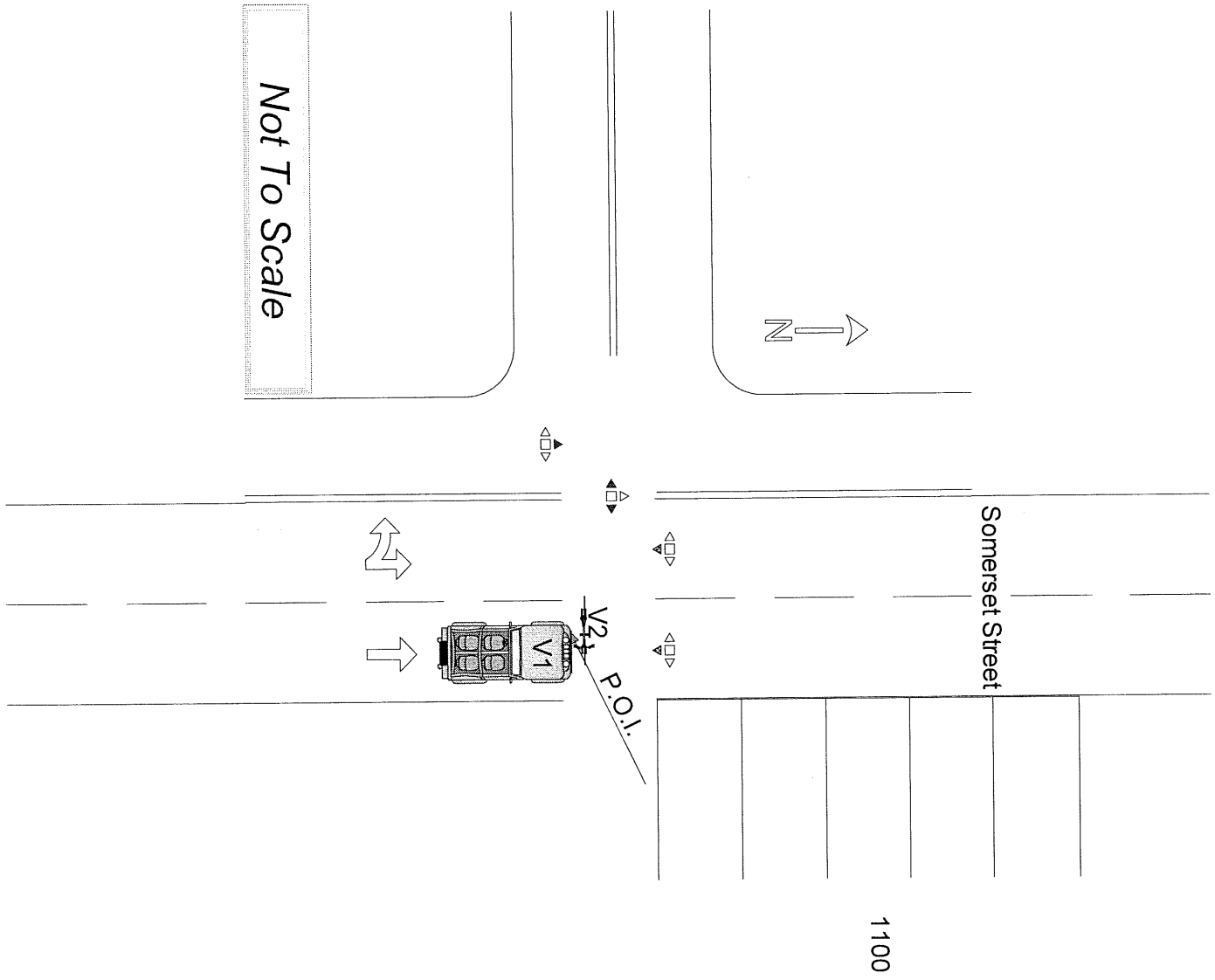
None

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

141 Officer's Signature	142 Badge No.	143 Reviewed By	Badge No.	144 Case Status
PO Matthew Riepenhoff 7299	7299			☐ 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	----	72	M	----	----	---	09	04	----	--------	Ayala, Efrain-40 Vernon Ave, Somerset, NJ 08873-2429
B	1	03	----	----	71	F	05	08	1	09	04	----	--------	Ayala, Carmen-40 Vernon Ave, Somerset, NJ 08873-2429
C	2	01	03	03	24	M	11	05	2	----	----	----	6202	Kim, Minjae-37 Main Street, Somerset NJ, 08873
D														
E														

New Jersey Police Crash Investigation Report	Police Dept. New Brunswick	Code 0 1
Motor Vehicle Crash Description	Station	Case No. 16-33283



PO Matthew Riepenhoff 7299
Officer's Signature

7299
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-33264

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: 1211 Edpas Road (Road Name) (Dir) 11 Speed Limit: 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 .

4 Date of Crash mm dd yy: 05 25 16

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

6 Time (use 2400 hrs): 17 19

7 Municipality Code: 1214

8 Total Killed:

9 Total Injured:

Vehicle 1

23 Veh No: 1

24 Policy No.: ISAH08866260

25 Ins Code: 0487

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

26 Driver's First Name: Melvin Initial: J Last Name: Reyes

29 Sex: M

27 Number and Street: 168 Carteret Avenue

30 Eyes: 2

28 City: Carteret, NJ 07008-2565 State Zip

31 State: 32 Driver's License No: 33 DOB mm dd yy: 07 31 93 34 Expires mm yy:

35 Owner's First Name: Nestle Waters Initial: Last Name:

☐ Same As Driver

36 Number and Street: 375 Paramount

37 City: Raynham, MA 02767 State Zip

38 Make: ISU 39 Model: NRR 40 Color: WT 41 Year: 15 42 Plate No.: XCHR11 43 State: NJ

44 VIN: JALE5W164F7301852 45 Expires: 02/17

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: 297080

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.: AOU-238-190421-4064

55 Ins Code: 14486

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

56 Driver's First Name: Kiara Initial: Last Name: Reyes

59 Sex: F

57 Number and Street: 19 Sassafras Court

60 Eyes: 2

58 City: No Brunswick, NJ 08902-5001 State Zip

61 State: 62 Driver's License No: 63 DOB mm dd yy: 09 18 96 64 Expires mm yy:

65 Owner's First Name: Keiann Initial: Last Name: Thompson

☐ Same As Driver

66 Number and Street: 931 Edpas Rd

67 City: New Brunswick, NJ 08901 State Zip

68 Make: CHE 69 Model: IMP 70 Color: WT 71 Year: 09 72 Plate No.: Y72AHS 73 State: NJ

74 VIN: 2G1WT57K991150074 75 Expires: 12/16

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

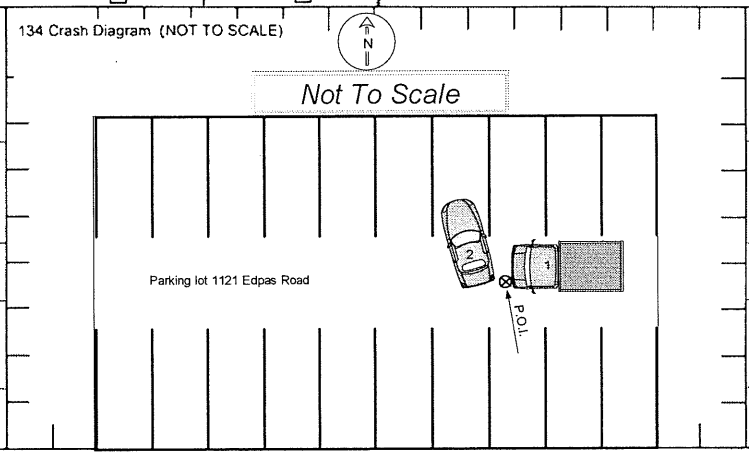
79 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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

The driver of vehicle 1 stated he was driving through the parking lot. He stooped to let vehicle 2 back out of a parking spot. The driver of vehicle 2 backed into the delivery truck.

The driver of vehicle 2 stated she was backing out of a parking spot and backed into the delivery truck.

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 Brian Bellafronte

142 Badge No.: 7324

143 Reviewed By Badge No.:

144 Case Status: ☐ Pending ☒ Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	----	22	M	----	----	1	09	04	----	--------	Reyes, Melvin-168 Carteret Avenue, Carteret, NJ 07008-2565
B	2	01	01	----	19	F	----	----	1	09	04	----	--------	Reyes, Kiara-19 Sassafras Court, No Brunswick, NJ 08902
C	2	03	01	----	47	M	----	----	1	09	04	----	--------	Thompson, Easton-931 Edpas Rd, New Brunswick , NJ 08901
D														
E														

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: New Brunswick Code: 01

Station: _____ Case No: 16-33264

(Refer to vehicle by number)

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

135 Crash Description

It should be noted there is very minimal damage. Specifically 2 scuff marks approximately 8 inches in length.

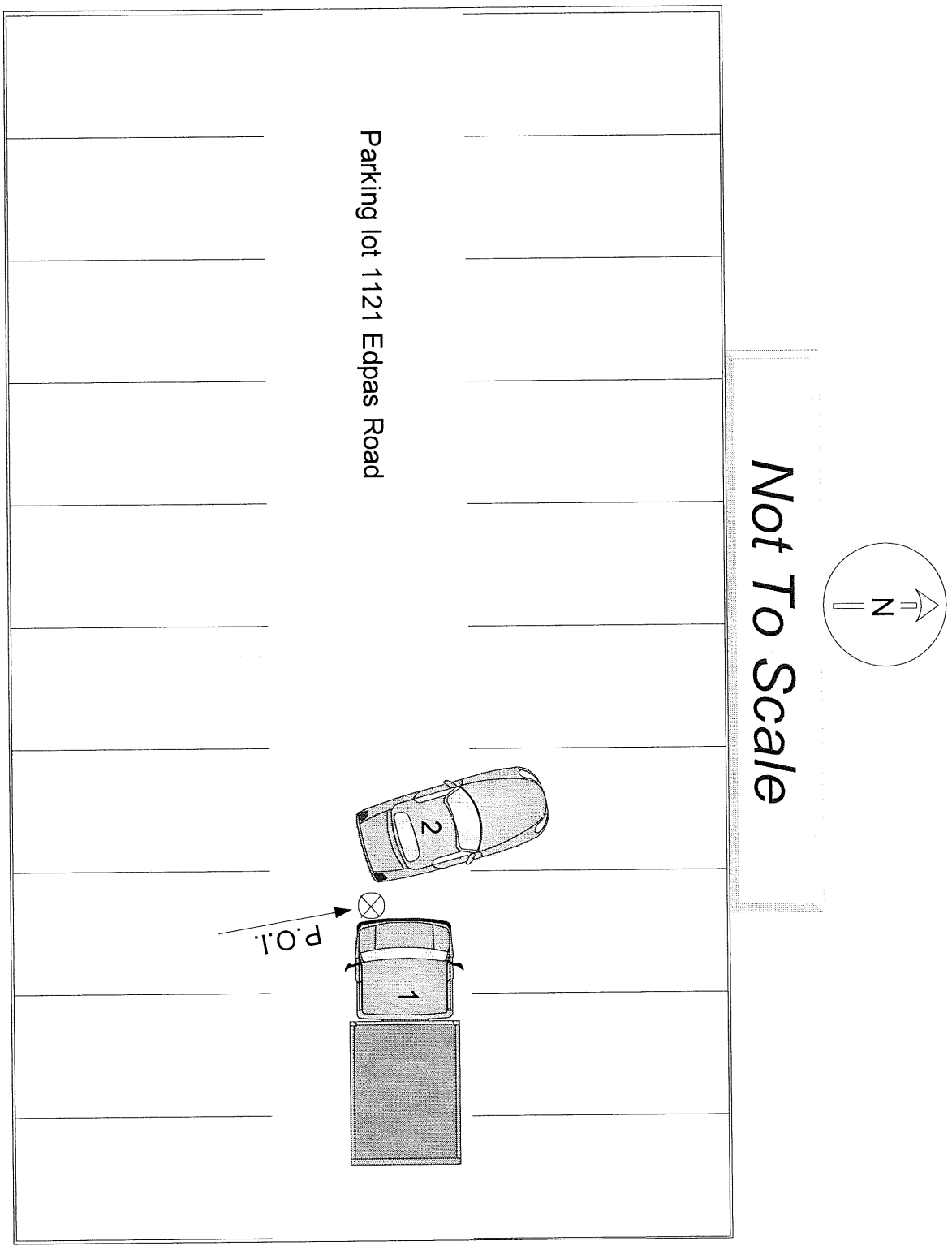
PO Brian Bellafronte

Officer's Signature

7324

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station Case No. 16-33264



NJTR-1B (rev. 07/2005)

PO Brian Bellafronte
Officer's Signature

7324
Badge Number

Page 2 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-33300

2 Police Dept of: New Brunswick Code: 01

3 Station/Precinct:

10 Crash Occurred On: James Street (Road Name) (Dir) 11 Speed Limit

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

12 Route No. Suffix 13 Milepost 18 Speed Limit

17 Cross Road Name

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

21 Latitude 22 Longitude

4 Date of Crash mm dd yy: 05 25 16

5 Day of Week: Su M Tu W Th F Sa: 0

6 Time (use 2400 hrs): 19 34

7 Municipality Code: 1214

8 Total Killed: 00

9 Total Injured: 00

23 Veh No	24 Policy No.	25 Ins Code
1	4279382958	148

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

53 Veh No	54 Policy No.	55 Ins Code
2	HPA00002074569	411

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

26 Driver's First Name	Initial	Last Name	29 Sex
Jacquelin		Minieri	F

27 Number and Street	30 Eyes
266 Colfax Road	2

28 City: No Brunswick, NJ 08902-3110 State Zip

31 State	32 Driver's License No	33 DOB mm dd yy	34 Expires mm yy
		08 23 87	

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

36 Number and Street:

37 City: State: Zip:

38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State
CHE	SON	GY	13	Z82CLD	NJ

44 VIN	45 Expires
1G1JC5SH6D4177753	09/16

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

Destination

47 Authority: ☐ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0.__ __ % ☐ Pending

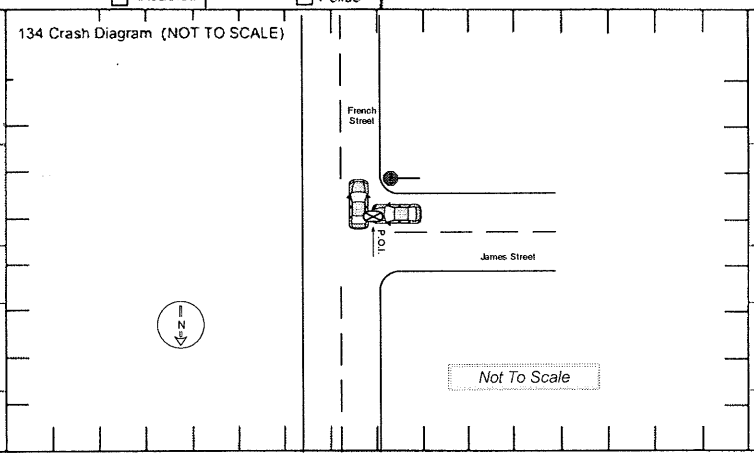
49 Hazardous Material: On Board ☐ Spill ☐ Name or Placard No.

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)



68 Make	69 Model	70 Color	71 Year	72 Plate No.	73 State
BMW	325	BL	02	B24CPE	NJ

74 VIN	75 Expires
WBAET374X2NG77120	12/16

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

Destination

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: 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	142 Badge No.	143 Reviewed By	Badge No.	144 Case Status
PO Marvin Shaw 7305				☐ 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	----	28	F	----	----	1	04	04	----	--------	Minieri, Jacquelin-266 Colfax Road, No Brunswick, NJ 08902
B	2	01	01	----	41	M	----	----	1	04	04	----	--------	Ortiz, Osman-211 Haverford St., No. Brunswick , NJ 08902
C														
D														
E														

New Jersey Police Crash Investigation Report	Police Dept: New Brunswick Code: 01
Motor Vehicle Crash Description	Station: _____ Case No: 16-33300

(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 one (1) stated that she was driving South bond on French Street towards James Street when she was struck by vehicle two (2) who disregarded the stop sign at the intersection of French and James Streets. Vehicle one (1) rear passenger door sustained moderate damage.

Driver two (2) stated that he was stopped at the stop sign on James Street at the intersection of French and James Street. He further stated that he struck vehicle one (1) as he attempted to turn onto French Street. According to the caller he could not see vehicle 1 due to heavy traffic. Vehicle two front bumper sustained minor damage.

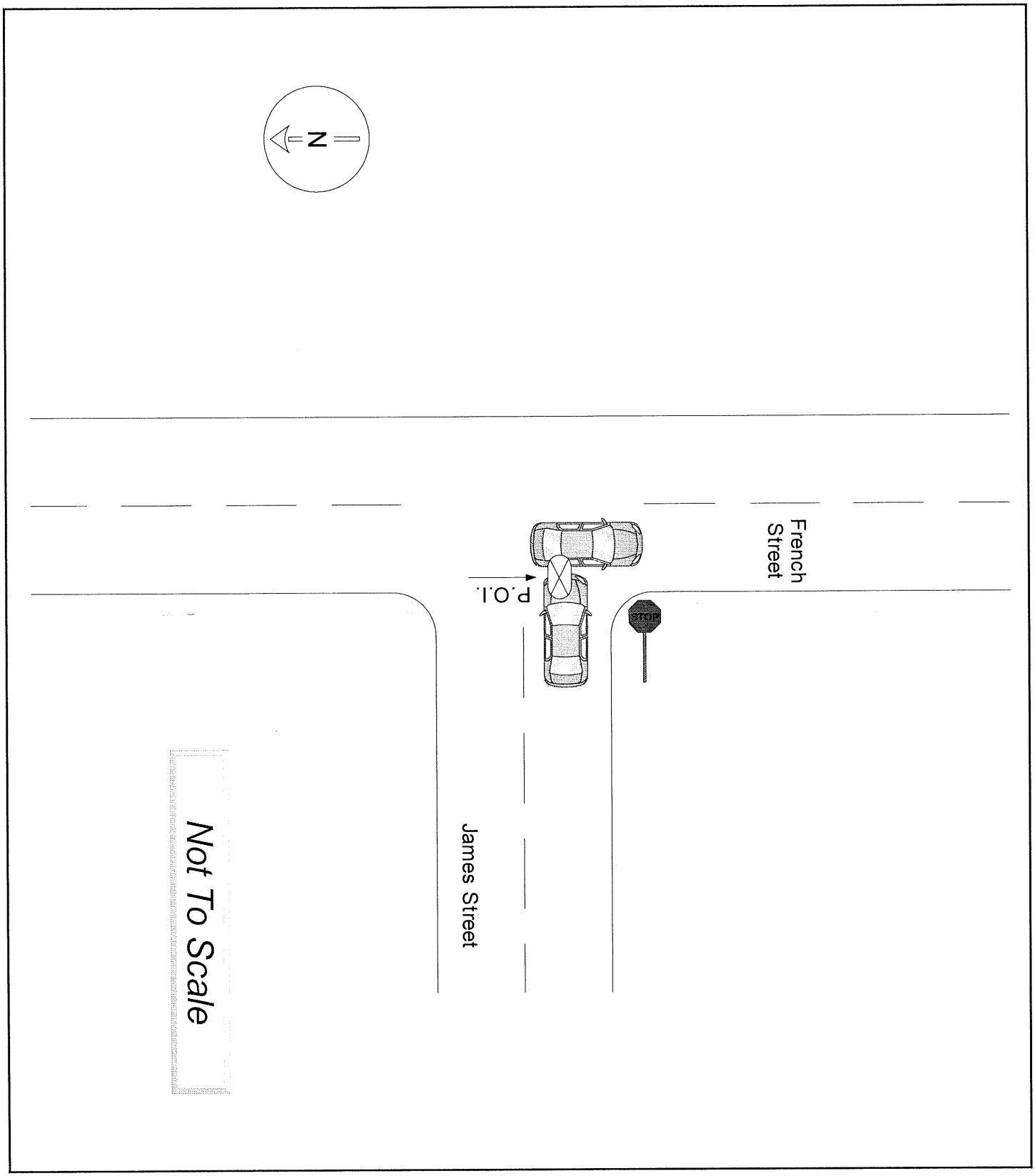
PO Marvin Shaw 7305

Officer's Signature

Badge Number

Page___0f___

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station _____ Case No. 16-33300



NJTR-1B (rev. 07/2005)

PO Marvin Shaw 7305
Officer's Signature

Badge Number

Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 16-33322

2 Police Dept of: New Brunswick — Code: 01

3 Station/Precinct:

10 Crash Occurred On: Somerset Street — Road Name — 11 Speed Limit — Dir — 12 Route No. — Suffix — 13 Milepost — 18 Speed Limit

☒ At Intersection with: Camner Avenue

☐ Feet ☐ Miles — ☐ N ☐ S ☐ E ☐ W of:

14 — 15 — 16

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

21 Latitude — 22 Longitude

4 Date of Crash: mm 05 dd 25 yy 16

5 Day of Week: Su M Tu W Th F Sa — 6

6 Time (use 2400 hrs): 2047

7 Municipality Code: 1214

8 Total Killed: 00

9 Total Injured: 00

Vehicle 1

23 Veh No: 1 — 24 Policy No.: 909507128 — 25 Ins Code: 135

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

26 Driver's First Name: Bianca — Initial — Last Name: Gomez — 29 Sex: F

27 Number and Street: 4 6th St — 30 Eyes: 1

28 City: New Brunswick , NJ 08901-3316 — State — Zip

31 State — 32 Driver's License No — 33 DOB: mm dd yy 02 12 94 — 34 Expires: mm yy

35 Owner's First Name — Initial — Last Name

☐ Same As Driver — Salustia — Lopeza

36 Number and Street: 4 6th Street

37 City: New Brunswick , NJ 08901-3316 — State — Zip

38 Make: SUB — 39 Model: IMP — 40 Color: BK — 41 Year: 16 — 42 Plate No.: C22GJB — 43 State: NJ

44 VIN: JF1GJAF69GH007141 — 45 Expires: 02/20

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.: CHIC-0056-01 — 55 Ins Code: 245

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

56 Driver's First Name: Richard — Initial — Last Name: Asante — 59 Sex: M

57 Number and Street: 1612 Birchwood Ct — 60 Eyes: 2

58 City: No.brunswick, NJ 08902-1934 — State — Zip

61 State — 62 Driver's License No — 63 DOB: mm dd yy 12 20 65 — 64 Expires: mm yy

65 Owner's First Name — Initial — Last Name

☐ Same As Driver — Nehman — Azzi

66 Number and Street: 90 Loretta Street

67 City: New Brunswick , NJ 08901-3336 — State — Zip

68 Make: FOR — 69 Model: CVC — 70 Color: YW — 71 Year: 11 — 72 Plate No.: OT8300 — 73 State: NJ

74 VIN: 2FABP7AV7BX112733 — 75 Expires: 05/17

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

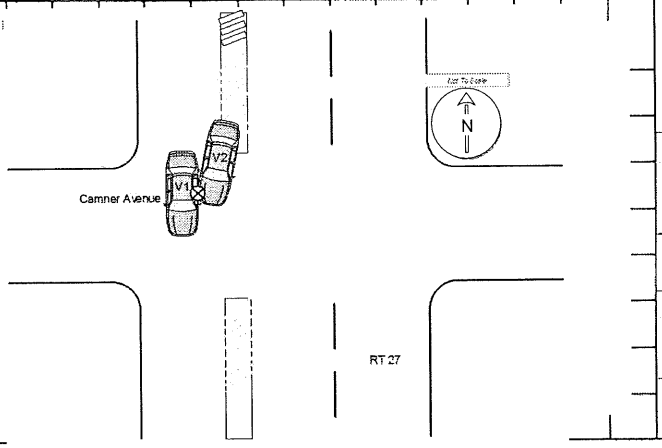
79 Hazardous Material: On Board ☐ — Spill ☐ — Name or Placard No.

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



135 Crash Description: See MVA

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 / Badge No.: MACEVEDO / 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	F	----	----	1	09	04	----	--------	Gomez, Bianca-4 6th St, New Brunswick , NJ 08901-3316
B	2	01	01	----	50	M	----	----	1	09	04	----	--------	Asante, Richard-1612 Birchwood Ct, No.brunswick, NJ 08902
C	2	05	01	00			00	00	---	04	00	----	--------	
D														
E														

New Jersey Police Crash Investigation Report	Police Dept: New Brunswick Code: 01
Motor Vehicle Crash Description	Station: _____ Case No: 16-33322

(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

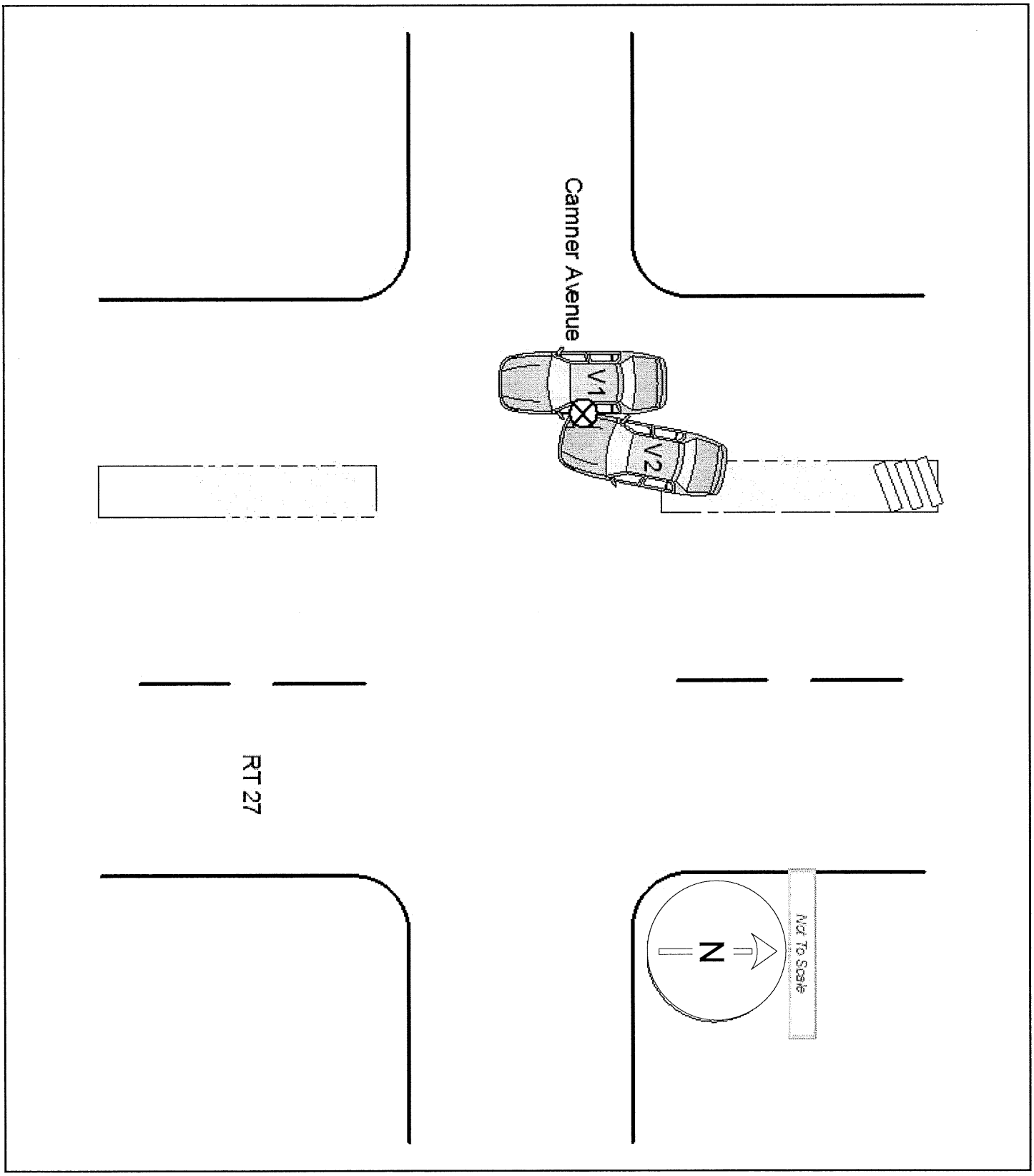
Driver 1 stated that she was traveling southbound on RT 27 approaching Camner Avenue. She stated that as she was approaching Vehicle 2, which was about to turn left onto Camner Avenue, she attempted to pass it on the right. Vehicle 2 then attempted to re enter the roadway and make a right turn onto Camner Avenue striking Vehicle 1 on its drivers side causing significant damage. Driver 1 was uninjured, had no complaints of pain, and denied medical attention. The vehicle was ultimately driven away on her own accord.

Driver 2 stated that he was transporting a customer who requested to be dropped off on Camner Avenue. The passenger requested he make a left turn onto Camner Avenue then changed his mind and requested he make a right hand turn. At this point Driver 2 attempted to make a right hand turn and struck Vehicle 1 on its passenger side with its front end. Driver 2 was uninjured, had no complaints of pain, and denied medical attention. The passenger left the scene prior to my arrival. Driver 2 stated that the passenger appeared uninjured. The vehicle was ultimately driven away on by the vehicle owners request.

PO Stewart Way 7328
Officer's Signature

7328
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. New Brunswick Code 0 1 Station_____ Case No. 16-33322



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PO Stewart Way 7328
Officer's Signature

7328
Badge Number