PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19061486
2 Police Dept of	EDISON POLICE DEPARTI
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/06/19
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	1500
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	AMBOY AVE
Road Name	
Dir	W
11 Speed Limit	25
12 Route No.	0501
Suffix	-
13 Milepost	-
14	-
15	☐ Feet ☐ Miles
16	☒ At Intersection With ☐ N ☐ E ☐ S ☐ W of: WALTUMA AVE
17 Cross Road Name	-
18 Speed Limit	25
19 Ramp	☐ To ☐ From:
20 Route/Name	-
21 Latitude	-
22 Longitude	-
	☐ NB ☐ EB ☐ SB ☐ WB

Vehicle 1

23 Veh #	1
24 Policy No.	A02-232-046655-00 9 7
25 NJ Ins. Code	182
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	ESTHER - NEMITZ -
29 Sex	F
27 Number & Street	162B FAY ST
28 City / State / Zip	EDISON NJ 08837
30 Eyes / DL Class / Restrictions / Endorsements	02 / D / - / -
31 State	NJ
32 Driver's License Number	N2466 23900 62322
33 DOB (mm dd yyyy)	12/11/1932
34 Expires (mm yy)	12 22
35 Owner's Name	☒ Same As Driver ESTHER - NEMITZ -
36 Number & Street	162B FAY ST
37 City / State / Zip	EDISON NJ 08837
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	MERCURY / GRAND MARQ / BG / 2003 / WC402Z / NJ
44 VIN	2MEFM75W63X649343
45 Expires	04 20
46 Vehicle Removed To	AAA
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: - Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	F589945-5
55 NJ Ins. Code	426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	THOMAS D PANNACCIULLI -
59 Sex	M
57 Number & Street	77 DATER ST
58 City / State / Zip	NORTH HALEDON NJ 07508
60 Eyes / DL Class / Restrictions / Endorsements	02 / D / - / -
61 State	NJ
62 Driver's License Number	P0450 74064 07502
63 DOB (mm dd yyyy)	07/19/1950
64 Expires (mm yy)	08 21
65 Owner's Name	☐ Same As Driver PATRICIA M PANNACCIULLI -
66 Number & Street	77 DATER ST
67 City / State / Zip	NORTH HALEDON NJ 07508
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HYUNDAI / VELOSTER / BK / 2017 / ZAK76F / NJ
74 VIN	KMHTC6ADXHU323724
75 Expires	07 20
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: - Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	76	F	-	-	-	11	04	-	-	ESTHER - NEMITZ - 162B FAY ST EDISON NJ 08837 - -
B	V2	01	01	-	69	M	-	-	-	11	04	-	-	THOMAS D PANNACCIULLI - 77 DATER ST NORTH HALEDON NJ 07508 - -
C	V2	03	01	-	70	F	-	-	-	11	04	-	-	PATRICIA M PANNACCIULLI - 77 DATER ST NORTH HALEDON NJ 07508 - -
D														

95	04
97	01
98	01
99	05
100a	01
100b	04
101	02
102	01
103	05
104	2
105	07
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	02
118a	04
118b	02
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	11
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	10
130	10
131	11
132	11
133	04
134	03

New Jersey Police
Crash Investigation Report

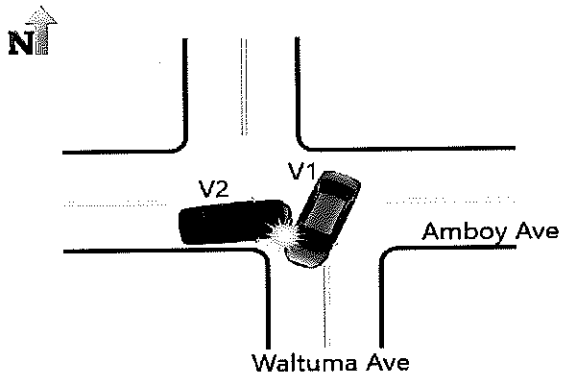
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061486

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling West on Amboy Ave. V2 was traveling East on Amboy Ave. Driver 1 stated she made the left turn onto Waltuma Ave and collided with V2. Driver 1 said she was checking to make sure Waltuma Ave was clear and did not see V2.

V1 suffered heavy damage to the front passenger side tire and had to be towed from the scene. Driver 1 made her own arrangements for a tow truck with AAA. V1 was left in the lot of 925 Amboy Ave to await AAA.

V2 suffered heavy damage to the front passenger side corner but the vehicle was still drivable. Driver 2 stated he would make his own arrangements to have his vehicle towed later.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 04

1 Case Number: 19061610

2 Police Dept of: EDISON POLICE DEPART | Code: 01

97: 01

3 Station/Precinct: -

98: 01

4 Date of Crash (mm dd yy): 10/07/19

99: 05

5 Day Of Week: MONDAY

100a: 01

6 Time (use 2400 hrs): 0715

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: MILL RD | Road Name | S | Dir

☐ At Intersection With: COLLEGE DR

☒ Feet ☐ Miles | 25 | 14 15 16

☒ N ☐ E ☐ S ☐ W of:

11 Speed Limit: 35

12 Route No.: 0667 | Suffix: - | 13 Milepost: -

18 Speed Limit: 25

19 Ramp ☐ To ☐ From:

17 Cross Road Name: -

20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: -

22 Longitude: -

118a: 05
118b: -
119a: 25
119b: -
120a: 01
120b: 06

Vehicle 1

100b: 04

23 Veh #: 1

24 Policy No.: 90022924DP

25 NJ Ins. Code: 141

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

101: 02

26 Driver's First Name: JOANNE | Initial: T | Last Name: SHURTLEFF -

29 Sex: F

102: 01

27 Number & Street: 72 SIERRA CT

103: 05

28 City: OLD BRIDGE | State: NJ | Zip: 08857

104: 2

30 Eyes: 04 | DL Class: D | Restrictions: 1 | Endorsements: - | 31 State: NJ

105: 02

32 Driver's License Number: S3710 40283 54544

33 DOB (mm dd yyyy): 04/28/1954

34 Expires (mm yy): 10 21

106: -

35 Owner's ☐ Same As Driver | First Name: ERIC | Initial: N | Last Name: SHURTLEFF -

107: -

36 Number & Street: 72 SIERRA CT

108: 01

37 City: OLD BRIDGE | State: NJ | Zip: 08857

109: 04

38 Make: SUBARU | 39 Model: FORESTER | 40 Color: GN | 41 Year: 2017 | 42 Plate No.: D47HBH | 43 State: NJ

110: 01

44 VIN: JF2SJAGC5HH437891

45 Expires: 09 20

111: 01

46 Vehicle Removed To: -

112: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

113: -

47 Authority: ☐ Owner ☒ Driver ☐ Police

114: -

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

115: -

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.:

116: 03

50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

117: 03

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: F979211-0

55 NJ Ins. Code: 426

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

120b: 06

121a: 01

56 Driver's First Name: DOMINIC | Initial: W | Last Name: STRACCI -

59 Sex: M

121b: -

57 Number & Street: 159 REDWOOD AVE

58 City: EDISON | State: NJ | Zip: 08817

122: 11

60 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

123: 01

62 Driver's License Number: S8322 17286 07012

63 DOB (mm dd yyyy): 07/14/2001

64 Expires (mm yy): 07 22

124: 04

65 Owner's ☐ Same As Driver | First Name: JULIANA | Initial: - | Last Name: STRACCI -

125: 04

66 Number & Street: 159 REDWOOD AVE

126a: 26

67 City: EDISON | State: NJ | Zip: 08817

126b: -

68 Make: MAZDA | 69 Model: MAZDA3S | 70 Color: WT | 71 Year: 2010 | 72 Plate No.: L45DGH | 73 State: NJ

126c: -

74 VIN: JM1BL1S64A1236444

75 Expires: 02 20

126d: -

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

126e: 26

77 Authority: ☐ Owner ☒ Driver ☐ Police

127a: 26

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

127b: -

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

127c: -

80 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

127d: -

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

127e: 26

82 Motor Carrier or Government Entity: -

128: 26

Number & Street: -

129: 09

City: - | State: - | Zip: -

130: 09

131: 02

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

132: 02

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
V1	39:4-88B	G027580	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

133: 02

134: 03

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	65	F	-	-	-	11	04	-	-	JOANNE T SHURTLEFF - / 72 SIERRA CT OLD BRIDGE NJ 08857 - -
B	V2	01	01	-	18	M	-	-	-	11	04	-	-	DOMINIC W STRACCI - / 159 REDWOOD AVE EDISON NJ 08817 - -
C														
D														

New Jersey Police Crash Investigation Report

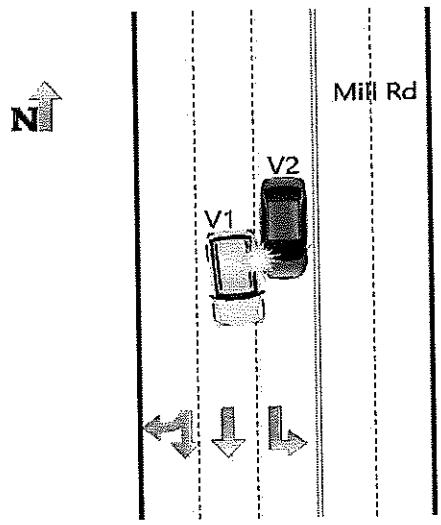
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061610

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling South on Mill Rd, in the middle lane. V2 was traveling the same direction in the left turn lane. V1 attempted to change into the left turn only lane and collided with V2.

V1 had dents and scratches along the driver's side of the vehicle. V2 had scratches along the passenger side of the vehicle. The front passenger side corner of the bumper was knocked loose on V2. V2's headlight also appeared to have been knocked loose as well.

Driver 1 was issued Summons G027580 for 39:4-88b.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19061610
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/07/19
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0715
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	MILL RD (Road Name) S (Dir)
11 Speed Limit	35
12 Route No.	0667
Suffix	-
13 Milepost	-
14	25
15	☐ Miles ☒ Feet
16	☐ S ☐ W ☒ N ☐ E
of:	COLLEGE DR
17 Cross Road Name	
18 Speed Limit	25
19 Ramp	☐ To ☐ From:
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	90022924DP
25 NJ Ins. Code	141
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JOANNE T SHURTLEFF -
29 Sex	F
27 Number & Street	72 SIERRA CT
28 City / State / Zip	OLD BRIDGE NJ 08857
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	04 / D / 1 / - / NJ
32 Driver's License Number / 33 DOB (mm dd yyyy) / 34 Expires (mm yy)	S3710 40283 54544 / 04/28/1954 / 10 21
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ERIC N SHURTLEFF -
36 Number & Street	72 SIERRA CT
37 City / State / Zip	OLD BRIDGE NJ 08857
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	SUBARU / FORESTER / GN / 2017 / D47HBH / NJ
44 VIN / 45 Expires	JF2SJAGC5HH437891 / 09 20
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class -; Placard No. -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	F979211-0
55 NJ Ins. Code	426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	DOMINIC W STRACCI -
59 Sex	M
57 Number & Street	159 REDWOOD AVE
58 City / State / Zip	EDISON NJ 08817
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 / D / - / - / NJ
62 Driver's License Number / 63 DOB (mm dd yyyy) / 64 Expires (mm yy)	S8322 17286 07012 / 07/14/2001 / 07 22
65 Owner's First Name / Initial / Last Name	☐ Same As Driver JULIANA - STRACCI -
66 Number & Street	159 REDWOOD AVE
67 City / State / Zip	EDISON NJ 08817
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	MAZDA / MAZDA3S / WT / 2010 / L45DGH / NJ
74 VIN / 75 Expires	JM1BL1S64A1236444 / 02 20
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class -; Placard No. -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No
Oper. / 136 Charge	V1 / 39:4-88B
137 Summons. No.	G027580
Oper. / 138 Charge	- / -
139 Summons. No.	-
Oper. / 140 Charge	- / -
141 Summons. No.	-
Oper. / 142 Charge	- / -
143 Summons. No.	-

	83	84	85	86	87	88	89	90	91	92	93	94	95
A	V1	01	01	-	65	F	-	-	-	11	04	-	-
B	V2	01	01	-	18	M	-	-	-	11	04	-	-
C													
D													

Names & Addresses of Occupants - If Deceased, Date & Time of Death

A: JOANNE T SHURTLEFF - ; 72 SIERRA CT OLD BRIDGE NJ 08857 - -

B: DOMINIC W STRACCI - ; 159 REDWOOD AVE EDISON NJ 08817 - -

New Jersey Police Crash Investigation Report

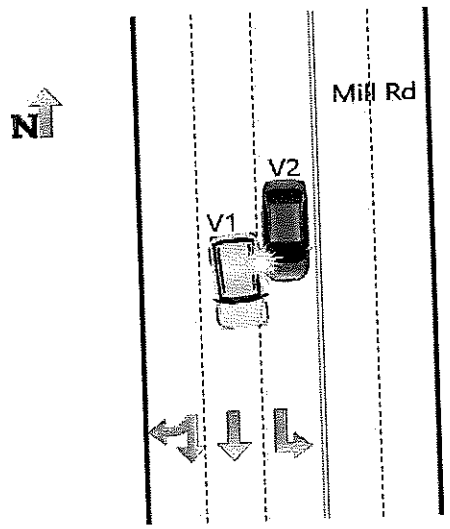
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061610

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling South on Mill Rd, in the middle lane. V2 was traveling the same direction in the left turn lane. V1 attempted to change into the left turn only lane and collided with V2.

V1 had dents and scratches along the driver's side of the vehicle. V2 had scratches along the passenger side of the vehicle. The front passenger side corner of the bumper was knocked loose on V2. V2's headlight also appeared to have been knocked loose as well.

Driver 1 was issued Summons G027580 for 39:4-88b.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

PAGE 1 OF 2 ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19061621
2 Police Dept of	EDISON POLICE DEPART (Code 01)
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/07/19
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0755
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	1
10 Crash Occurred On	US HWY 1 (Road Name)
At Intersection With	
Feet 1000 from N ☐ E ☐ S ☐ W of:	PRINCE ST
Miles	
11 Speed Limit	S 50
12 Route No. / Suffix / 13 Milepost	0001 - -
16 Dir	
17 Cross Road Name	
18 Speed Limit	25
19 Ramp ☐ To ☐ From	-
20 Route/Name	
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	F131893-0
25 NJ Ins. Code	426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	KEVIN J CHAUCA -
29 Sex	M
27 Number & Street	23 HOLLISTER PL
28 City / State / Zip	FORDS NJ 08863
30 Eyes / DL Class / Restrictions / Endorsements	2 / 02 / D / 1 / -
31 State	NJ
32 Driver's License Number	C3257 43371 10972
33 DOB (mm dd yyyy)	10/06/1997
34 Expires (mm yy)	01 20
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ERIK P WENSON -
36 Number & Street	23 HOLLISTER PL
37 City / State / Zip	FORDS NJ 08863
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYOTA / COROLLA / BK / 2010 / ZYX50E / NJ
44 VIN	2T1BU4EE0AC349854
45 Expires	06 20
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	4025-46-62-38
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	NATALIE A HARRELL -
59 Sex	F
57 Number & Street	152 GRANDVIEW AVE
58 City / State / Zip	EDISON NJ 08837
60 Eyes / DL Class / Restrictions / Endorsements	04 / D / - / -
61 State	NJ
62 Driver's License Number	H0662 58161 60974
63 DOB (mm dd yyyy)	10/03/1997
64 Expires (mm yy)	10 22
65 Owner's First Name / Initial / Last Name	☐ Same As Driver CHRISTINE M BENI -
66 Number & Street	152 GRANDVIEW AVE
67 City / State / Zip	EDISON NJ 08837
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	JEEP / PATRIOT / RD / 2014 / S74EUD / NJ
74 VIN	1C4NJPBA3ED552156
75 Expires	09 20
76 Vehicle Removed To	BILLS TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
V1	39:4-129A	G027581	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	22	M	-	-	-	11	04	-	-	KEVIN J CHAUCA - / 23 HOLLISTER PL FORDS NJ 08863 - -
B	V2	01	01	04	22	F	06	08	01	11	04	-	-	NATALIE A HARRELL - / 152 GRANDVIEW AVE EDISON NJ 08837 - -
C														
D														

New Jersey Police Crash Investigation Report

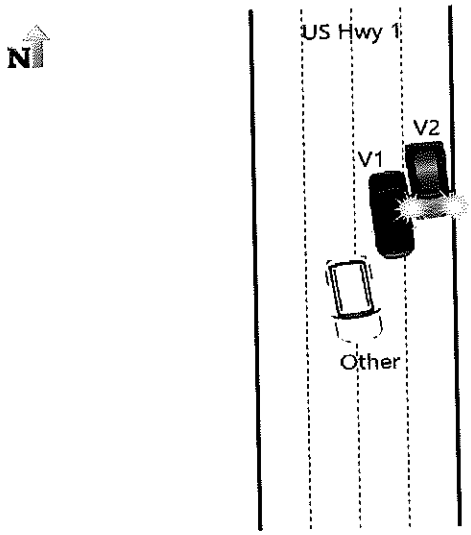
Police Dept: EDISON POLICE DEPAR Code: 01

Station: -- Case No: 19061621

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling South on US Hwy 1 in the left middle lane. V2 was traveling the same direction in the left lane. V1 swerved into the left lane and struck V2. Impact pushed V2 in the concrete median barrier. V1 left the scene and continued on down US Hwy 1, approximately 2 miles, before pulling into the parking lot of Sunoco (737 US Hwy 1 S).

V1 had large dents and scratches to the driver's side of the vehicle. V2 had dents to the front passenger sider of the car, and heavy damage to the front driver's side corner, and a blown tire. V2 had to be towed from the scene by Bill's Towing.

Driver 1 stated that a white vehicle in the middle right lane cut him off, causing him to swerve into the left lane and hit V2. Driver 1 did not stop and continued down US Hwy 1 for approximately 2 miles, passing several parking lots and side streets that he could have pulled into. Driver 1 stated that a witness (Larry Moore 908-507-2607) followed him down the road and pulled him over.

Driver 2 complained of pain in her back, but refused offers for medical attention.

Larry Moore left the scene prior to officer's arrival but left a written note confirming V1 was cutoff by a white van causing Driver 1 to to swerve into the left lane.

I spoke over the phone with Witness Martha Landy (732-208-7342), who also confirmed that a white van cut off V1 causing it to swerve into the left lane. She added that V1 did not stop after colliding with V2 and continued down US Hwy 1 South.

Driver 1 was issued Summons G027581 for 39:4-129a.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19061641
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/07/19
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0856
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	1
10 Crash Occurred On:	US HIGHWAY 1
Road Name	
N	
11 Speed Limit	50
12 Route No.	0001
Suffix	-
13 Milepost	000.00
☐ At Intersection With	
☒ Feet ☐ Miles	800
14	
15	
☐ N ☐ E ☒ S ☐ W	
of:	OLD POST ROAD
Dir	
16	
17 Cross Road Name	
18 Speed Limit	35
19 Ramp ☐ To ☐ From:	-
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	8426294
25 NJ Ins. Code	096
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	FRANK
Initial	J
Last Name	VENEZIANO -
29 Sex	M
27 Number & Street	200 HOFFMAN BLVD APT 3G
28 City	NEW BRUNSWICK
State	NJ
Zip	08901
30 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	V25302677112946
33 DOB (mm dd yyyy)	12/16/1994
34 Expires (mm yy)	11 21
35 Owner's	☒ Same As Driver
First Name	FRANK
Initial	J
Last Name	VENEZIANO -
36 Number & Street	200 HOFFMAN BLVD APT 3G
37 City	NEW BRUNSWICK
State	NJ
Zip	08901
38 Make	NISSAN
39 Model	ALTIMA
40 Color	GY
41 Year	1999
42 Plate No.	A23EBD
43 State	NJ
44 VIN	1N4DL01D1XC171039
45 Expires	4 20
46 Vehicle Removed To	MANDYS TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine	
Results: 0. - % ☐ Pending	
49 Hazardous Material	☐ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
50 Carrier No.	☐ USDOT - ☐ None
☐ MC/MX -	
51 GVWR/GCWR	☐ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs	
☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	939 465 864
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	LALIT
Initial	-
Last Name	CHALOO -
59 Sex	F
57 Number & Street	111 CARDINAL COURT
58 City	N BRUNSWICK
State	NJ
Zip	08902
60 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	C31654390056681
63 DOB (mm dd yyyy)	06/03/1968
64 Expires (mm yy)	01 22
65 Owner's	☒ Same As Driver
First Name	LALIT
Initial	-
Last Name	CHALOO -
66 Number & Street	111 CARDINAL COURT
67 City	N BRUNSWICK
State	NJ
Zip	08902
68 Make	INFINITI
69 Model	Q50
70 Color	SL
71 Year	2019
72 Plate No.	A70KUW
73 State	NJ
74 VIN	JN1EV7AR3KM553544
75 Expires	12 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine	
Results: 0. - % ☐ Pending	
79 Hazardous Material	☐ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
80 Carrier No.	☐ USDOT - ☐ None
☐ MC/MX -	
81 GVWR/GCWR	☐ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs	
☐ Weight >= 26,001 lbs	
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	25	M	-	-	-	11	04	04	-	DRIVER 1 - - - - - - - - - - - - -
B	02	01	01	04	51	F	11	08	01	11	04	-	-	DRIVER 2 - - - - - - - - - - - - -
C														
D														

New Jersey Police
Crash Investigation Report

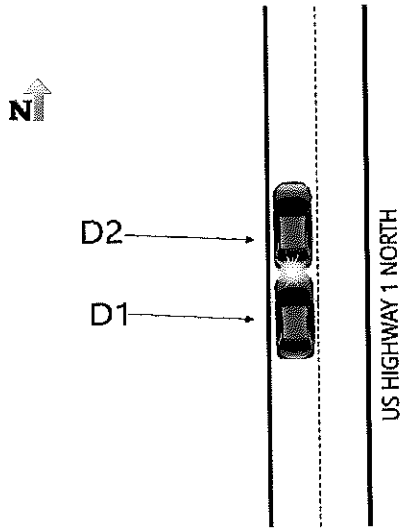
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061641

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D1 stated that he was traveling in the far left lane on US Highway 1 North. D1 stated that he observed D2 slowing down in front of his vehicle and attempted to slow down but his car began to skid on the pavement. D1 stated that his car struck D2 in the rear after it skidded for approximately 10 feet.

D2 stated that she was traveling in the far left lane on US Highway 1 North. D2 stated that she was slowing down with the flow of traffic when she was suddenly struck in the rear by D1.

I did observe skid marks from D1's vehicle approximately two car length's behind his vehicle.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
BRIAN MONICO	0452	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19061644
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/07/19
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0900
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	US HWY 1
At Intersection With	☐
Road Name	
Dir	N
11 Speed Limit	50
12 Route No.	0001
Suffix	-
13 Milepost	-
18 Speed Limit	35
Feet	☒
Miles	☐
14	150
15	
16	
of:	OLD POST RD
17 Cross Road Name	
19 Ramp To	☐
19 Ramp From:	-
20 Route/Name	
NB EB SB WB	☐ ☐ ☐ ☐
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	4557-67-81-50
25 NJ Ins. Code	100
Parked / Ped / Pedalcyclist / Resp To Emergency / Hit & Run	☐ ☐ ☐ ☐ ☐
26 Driver's First Name	MOHAMED
Initial	H
Last Name	MUHAMED-MANSO -
29 Sex	M
27 Number & Street	26 KEARNYAVE APT 4A
28 City	EDISON
State	NJ
Zip	08817
30 Eyes	01
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	M9143 56068 04891
33 DOB (mm dd yyyy)	04/15/1989
34 Expires (mm yy)	03 22
35 Owner's	☒ Same As Driver
First Name	MOHAMED
Initial	H
Last Name	MUHAMED-MANSO -
36 Number & Street	26 KEARNYAVE APT 4A
37 City	EDISON
State	NJ
Zip	08817
38 Make	HYUNDAI
39 Model	SONATA
40 Color	GY
41 Year	2003
42 Plate No.	Z83JHX
43 State	NJ
44 VIN	KMHWF35H43A756935
45 Expires	03 22
46 Vehicle Removed To	-
☒ Driven / ☐ Towed Disabled / ☐ Towed Disabled & Impounded / ☐ Left At Scene / ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	HPA00002069620
55 NJ Ins. Code	411
Parked / Ped / Pedalcyclist / Resp To Emergency / Hit & Run	☐ ☐ ☐ ☐ ☐
56 Driver's First Name	STEVEN
Initial	R
Last Name	ISAACSON -
59 Sex	M
57 Number & Street	1018 SCHMIDT LN
58 City	NORTH BRUNSWICK
State	NJ
Zip	08902
60 Eyes	02
DL Class	D
Restrictions	1
Endorsements	-
61 State	NJ
62 Driver's License Number	I8002 72379 05532
63 DOB (mm dd yyyy)	05/16/1953
64 Expires (mm yy)	05 22
65 Owner's	☐ Same As Driver
First Name	ELSIE
Initial	B
Last Name	ISAACSON -
66 Number & Street	1018 SCHMIDT LN
67 City	NORTH BRUNSWICK
State	NJ
Zip	08902
68 Make	FORD
69 Model	ESCAPE
70 Color	RD
71 Year	2014
72 Plate No.	B75ECG
73 State	NJ
74 VIN	1FMCU9BX4EUB20078
75 Expires	03 20
76 Vehicle Removed To	-
☒ Driven / ☐ Towed Disabled / ☐ Towed Disabled & Impounded / ☐ Left At Scene / ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
V1	39:4-88B	G027582	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	30	M	-	-	-	11	04	-	-	MOHAMED H MUHAMED-MANSOOR - / 26 KEARNY AVE APT4A EDISON NJ 08817 - -
B	V2	01	01	-	66	M	-	-	-	11	04	-	-	STEVEN R ISAACSON - / 1018 SCHMIDT LN NORTH BRUNSWI NJ 08902 - -
C	V2	03	01	-	64	F	-	-	-	11	04	-	-	ELSIE B ISAACSON - / 1018 SCHMIDT LN NORTH BRUNSWI NJ 08902 - -
D														

New Jersey Police
Crash Investigation Report

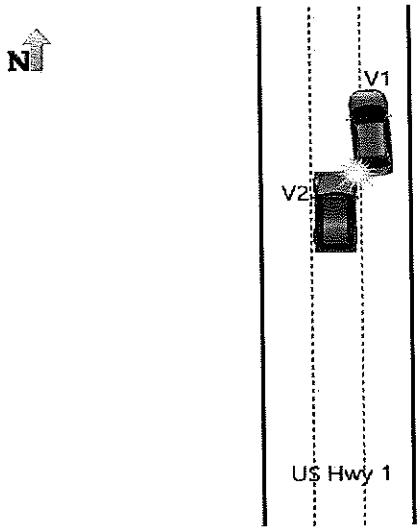
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061644

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling North in the right lane of US Hwy 1. V2 was traveling in the middle lane. V1 attempted to change into the middle lane and collided with V2.

V1 had scuffs and scratches to the rear driver side corner of the vehicle, and a broken tail light. V2 had scuffs and scratches to the front passenger side corner of the vehicle

Driver 1 was issued Summons G027582 for 39:4-88b.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05

1 Case Number: 19061643

97: 01

2 Police Dept of: EDISON POLICE DEPART | Code: 01

98: 01

3 Station/Precinct: -

99: 07

4 Date of Crash (mm dd yy): 10/07/19

100a: 01

5 Day Of Week: MONDAY

6 Time (use 2400 hrs): 0903

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: TALMADGE ROAD (Road Name) | E (Dir) | 11 Speed Limit: 40 | 12 Route No.: - | Suffix: - | 13 Milepost: -

☐ At Intersection With ETHEL ROAD | 18 Speed Limit: 25

☒ Feet ☐ Miles | 400 | ☐ N ☒ E ☐ S ☐ W of:

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

21 Latitude: - | 22 Longitude: -

118a: 06 | 118b: 02 | 119a: 25 | 119b: - | 120a: 01 | 120b: -

Vehicle 1

100b: 04 | 23 Veh #: 1 | 24 Policy No.: SELF INSURED | 25 NJ Ins. Code: 000

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

101: 02

26 Driver's First Name: JAYNE | Initial: A | Last Name: CODELLA - | 29 Sex: F

102: 01

27 Number & Street: 16 HILLWOOD AVE

103: 01

28 City: EDISON | State: NJ | Zip: 08820

104: 2

30 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ

105: 02

32 Driver's License Number: C60753916154472 | 33 DOB (mm dd yyyy): 04/22/1947 | 34 Expires (mm yy): 12 20

106: -

35 Owner's: ☐ Same As Driver | First Name: EAN - | Initial | Last Name: HOLDINGS LLC -

107: -

36 Number & Street: 14002 EAST 21ST ST STE1500

108: 01

37 City: TULSA | State: OK | Zip: 74134

109: 02

38 Make: NISSAN | 39 Model: MAXIMA | 40 Color: GY | 41 Year: 2019 | 42 Plate No.: J15LAC | 43 State: NJ

110: 01

44 VIN: 1N4AA6AV8KC371767 | 45 Expires: 03 20

111: 02

46 Vehicle Removed To: ROADWAY

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

112: -

113: 12

47 Authority: ☐ Owner ☒ Driver ☐ Police

114: -

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

115: -

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

116: 02

50 Carrier No.: ☐ USDOT - ☒ None | ☐ MC/MX -

117: 02

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2 | 54 Policy No.: SELF INSURED | 55 NJ Ins. Code: 000

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

56 Driver's First Name: PETER | Initial: H | Last Name: LORENTZ - | 59 Sex: M

57 Number & Street: 16 DUKE COURT

58 City: PARLIN | State: NJ | Zip: 08859

60 Eyes: 02 | DL Class: B | Restrictions: 1 | Endorsements: NP | 61 State: NJ

62 Driver's License Number: L65856256801532 | 63 DOB (mm dd yyyy): 01/26/1953 | 64 Expires (mm yy): 01 23

65 Owner's: ☐ Same As Driver | First Name: MIDDLESEX - | Initial | Last Name: COUNTY OF -

66 Number & Street: PO BOX 7836

67 City: NORTH BRUNSWICK | State: NJ | Zip: 08902

68 Make: FORD | 69 Model: BUS | 70 Color: WT | 71 Year: 2013 | 72 Plate No.: CG2ACW | 73 State: NJ

74 VIN: 1FDFE4FSXCDB30419 | 75 Expires: 10 21

76 Vehicle Removed To: ROADWAY

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

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

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - ☒ None | ☐ MC/MX -

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

118a: 06 | 118b: 02 | 119a: 25 | 119b: - | 120a: 01 | 120b: - | 121a: 01 | 121b: - | 122: 01 | 123: 01 | 124: 04 | 125: 04 | 126a: 26 | 126b: - | 126c: - | 126d: - | 126e: 26 | 127a: 26 | 127b: - | 127c: - | 127d: - | 127e: 26 | 128: 26 | 129: 02 | 130: 02 | 131: 07 | 132: 17 | 133: 03 | 134: 01

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

NONE

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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	F	-	-	-	11	04	-	-	SAME AS - DRIVER # 1 -
B	2	01	01	-	66	M	-	-	-	11	04	-	-	SAME AS - DRIVER # 2 -
C														
D														

New Jersey Police Crash Investigation Report

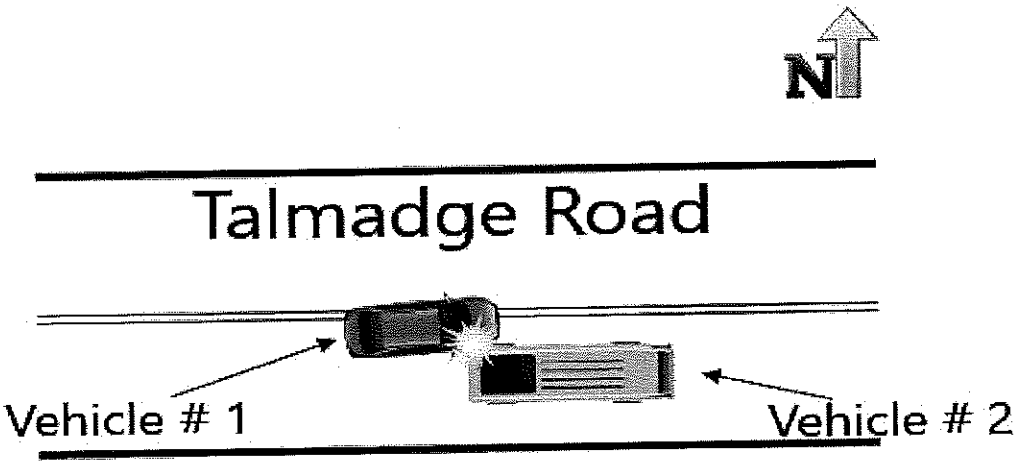
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061643

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #2 stated that after entering onto Talmadge Road eastbound from Ethel Road, vehicle #1 attempted to pass vehicle #2 on the left. This occurred at least one time prior to vehicle #1 impacting vehicle #2. Driver #2 further stated that while in "stop and go" traffic, vehicle #1 was on his driver's side (at one point at his driver's door) and when vehicle #2 proceeded forward, driver #1 eventually impacted the rear driver's side of vehicle #2.
Driver #1 stated that she was traveling eastbound on Talmadge Road when vehicle #2, which entered onto Talmadge Road from Ethel Road, attempted to pass vehicle #1 on the right and then cut her off. Once this occurred, driver #1 stated that vehicle #1 impacted vehicle #2.
It should be noted that the roadway is a single lane roadway, the crash occurred approximately 400 feet east of Ethel Road, and vehicle #2 was centered/established in the eastbound lane of travel on Talmadge Road.
no injuries were reported on scene; no cell phones were in use.

Vehicle #1 Self Insurance Information: Enterprise Rent-A-Car Company EAN Holdings 14002 East 21st St. Ste 1500 Tulsa, OK 74134

Vehicle #2 Self Insurance Information: Middlesex County Insurance Commission PO Box 871 New Brunswick NJ 08901

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MICHAEL GUROVICH	0388	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 04 | 97: 01 | 98: 01 | 99: 05 | 100a: 01 | 100b: 04 | 101: 02 | 102: 01 | 103: 05 | 104: 2

1 Case Number	19061686
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/07/19
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1320
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	2
10 Crash Occurred On	DUCLOS LN (Road Name) N (Dir)
At Intersection With	☐
Feet	☒ 50 (14)
Miles	☐ (15)
N ☐ E ☐ S ☒ W of:	LINCOLN HWY
11 Speed Limit	25
12 Route No.	0676
Suffix	-
13 Milepost	-
18 Speed Limit	35
19 Ramp	☐ To ☐ From: -
16	
17 Cross Road Name	-
20 Route/Name	-
NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

118a: 02 | 118b: - | 119a: 25 | 119b: - | 120a: 01 | 120b: - | 121a: 01 | 121b: - | 122: 07 | 123: 08 | 124: 11 | 125: 11 | 126a: 26 | 126b: - | 126c: - | 126d: - | 126e: 26 | 127a: 26 | 127b: - | 127c: - | 127d: - | 127e: 26 | 128: 26 | 129: 12 | 130: 00 | 131: 06 | 132: 06 | 133: 00 | 134: 02

Vehicle 1

23 Veh #	1
24 Policy No.	4592-06-33-35
25 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	KAY DEE
Initial	-
Last Name	BLEVINS
29 Sex	F
27 Number & Street	2080 RIVER REACH DR 53
28 City	NAPLES
State	FL
Zip	34104
30 Eyes	05
DL Class	D
Restrictions	-
Endorsements	-
31 State	FL
32 Driver's License Number	B415-504-64-503-0
33 DOB (mm dd yyyy)	01/03/1964
34 Expires (mm yy)	01 22
35 Owner's Name	☐ Same As Driver - AMANDA - TYRRELL -
36 Number & Street	34 MEADOW RD
37 City	EDISON
State	NJ
Zip	08817
38 Make	MERCURY
39 Model	MOUNTAINEE
40 Color	GY
41 Year	2002
42 Plate No.	G71KZS
43 State	NJ
44 VIN	4M2ZU86EX2UJ03090
45 Expires	03 20
46 Vehicle Removed To	FLED SCENE
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; - (Hazard Class); - (Placard No.)
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	939 226 445
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	VANESA
Initial	Y
Last Name	ROMERO
59 Sex	F
57 Number & Street	83 SILVER LAKE AVE
58 City	EDISON
State	NJ
Zip	08817
60 Eyes	05
DL Class	D
Restrictions	1T
Endorsements	-
61 State	NJ
62 Driver's License Number	R6340 76288 59995
63 DOB (mm dd yyyy)	09/03/1999
64 Expires (mm yy)	03 21
65 Owner's Name	☐ Same As Driver REMIGIO - ROMERO -
66 Number & Street	83 SILVER LAKE AVE
67 City	EDISON
State	NJ
Zip	08817
68 Make	NISSAN
69 Model	ALTIMA
70 Color	BG
71 Year	1997
72 Plate No.	A36HMN
73 State	NJ
74 VIN	1N4BU31D3VC129247
75 Expires	02 20
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; - (Hazard Class); - (Placard No.)
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
V1	39:4-129A	G027584	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	55	F	-	-	-	11	04	-	-	KAY DEE - BLEVINS - 2080 RIVER REACH DR NAPLES FL 34104 - -
B	V1	03	01	-	54	M	-	-	-	11	04	-	-	JONATHAN - BARON - 45 COLUMBUS AVE EDISON NJ 08817 - -
C	V1	00	01	-	60	F	-	-	-	00	00	-	-	KIMARIE - CAIOLA - 45 COLUMBUS AVE EDISON NJ 08817 - -
D	V2	01	01	04	20	F	06	08	01	11	04	-	-	VANESA Y ROMERO - 83 SILVERLAKE AVE EDISON NJ 08817 - -

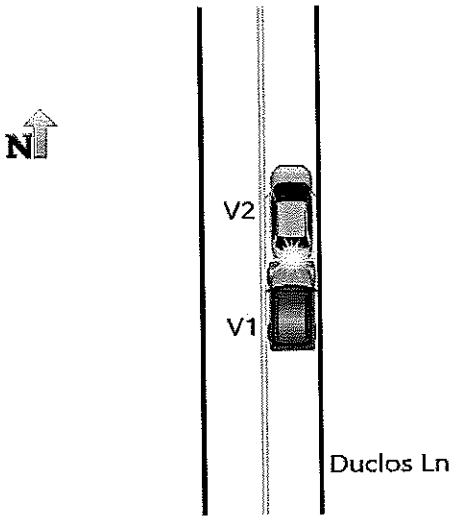
New Jersey Police
Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01
Station: - Case No: 19061686

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E	V2	03	01	04	20	F	06	08	01	11	04	-	-	MAYRA A ROMERO - 83 SILVERLAKE AVE EDISON NJ 08817 - -
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 was traveling North on Duclos Ln and stopped for traffic. V1 was traveling the same direction and rear ended V2.

Driver 1 stopped and provided her information to Driver 2 but fled the scene prior to officers arrival. Driver 2 stated that Driver 1 said they had to get to a doctor's appoint. Dispatch was able to locate a phone number and made contact with Driver 1 who stated that she was dropping her passenger off at work and refused to come back to the scene of the accident.

Driver 2 complained of pain in her back. Mayra Romero also complained of pain in her back. Both parties refused medical attention at this time. V2 suffered damage to the rear bumper resulting in it cracking by the rear license plate. V2 trunk lid also appears to have been knocked out of alignment as it was bulging outwards.

I spoke with Driver 1 over the phone (239-719-0170). Driver 1 claims to have been rear ended by a truck, which pushed her into the rear of V2. Driver 2 stated Driver 1 also told them she was rear ended however Driver 2 stated that were no vehicles behind V1 at the time of the accident.

Driver 1 was issued Summons G027584 for 39:4-129a.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05

1 Case Number: 19061693

97: 01

2 Police Dept of: EDISON POLICE DEPART | Code: 01

98: 01

3 Station/Precinct: -

99: 07

4 Date of Crash (mm dd yy): 10/07/19

100a: 01

5 Day Of Week: MONDAY

6 Time (use 2400 hrs): 1430

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: IDLEWILD RD | Road Name | S | Dir

☒ At Intersection With: MARKHAM RD

☐ Feet ☐ N ☐ E of: - ☐ Miles ☐ S ☐ W

14 - 15 - 16

11 Speed Limit: 35

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 -

118a: 04
118b: 02
119a: 25
119b: -
120a: 01
120b: -

100b: 04

23 Veh #: 1

24 Policy No.: PANJ-003087388

25 NJ Ins. Code: 071

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

101: 02

26 Driver's First Name: SARAH | Initial: L | Last Name: POLESE -

29 Sex: F

102: 01

27 Number & Street: 19 MONAGHAN RD

103: 05

28 City: EDISON | State: NJ | Zip: 08817

104: 2

30 Eyes: 05 | DL Class: D | Restrictions: - | Endorsements: -

31 State: NJ

105: 07

32 Driver's License Number: P6243 69173 53995

33 DOB (mm dd yyyy): 03/05/1999

34 Expires (mm yy): 06 20

106: -

35 Owner's: ☐ Same As Driver | First Name: PAUL | Initial: D | Last Name: POLESE -

107: -

36 Number & Street: 19 MONAGHAN RD

108: 01

37 City: EDISON | State: NJ | Zip: 08817

109: 04

38 Make: TOYOTA | 39 Model: COROLLA | 40 Color: GY | 41 Year: 2016 | 42 Plate No.: Z39LTJ | 43 State: NJ

110: 01

44 VIN: 2T1BURHE5GC672458

45 Expires: 08 20

111: 02

46 Vehicle Removed To: -

112: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

113: -

47 Authority: ☐ Owner ☒ Driver ☐ Police

114: -

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

115: -

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.:

116: 03

50 Carrier No.: ☐ USDOT - ☒ None | ☐ MC/MX -

117: 01

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No -

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

53 Veh #: 2

54 Policy No.: 4411-39-52-56

55 NJ Ins. Code: 148

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

56 Driver's First Name: PAVANI | Initial: - | Last Name: BATTULA -

59 Sex: F

57 Number & Street: 2102 FOREST HAVEN BLVD

58 City: EDISON | State: NJ | Zip: 08817

60 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: -

61 State: NJ

62 Driver's License Number: B0854 62000 57932

63 DOB (mm dd yyyy): 07/03/1993

64 Expires (mm yy): 04 20

65 Owner's: ☐ Same As Driver | First Name: NISSAN INFINITI - | Initial: LT | Last Name: -

66 Number & Street: PO BOX 254648

67 City: SACARMENTO | State: CA | Zip: 95865

68 Make: INFINITI | 69 Model: Q60 | 70 Color: WT | 71 Year: 2019 | 72 Plate No.: H98LDM | 73 State: NJ

74 VIN: 5N1DL0MM2KC556362

75 Expires: 04 23

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

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

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - ☒ None | ☐ MC/MX -

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Oper.	138 Charge	139 Summons. No.
-	-	-
Oper.	142 Charge	143 Summons. No.
-	-	-

118a: 04
118b: 02
119a: 25
119b: -
120a: 01
120b: -
121a: 01
121b: -
122: 03
123: 01
124: 11
125: 11
126a: 26
126b: -
126c: -
126d: -
126e: 26
127a: 26
127b: -
127c: -
127d: -
127e: 26
128: 26
129: 02
130: 02
131: 01
132: 01
133: 03
134: 03

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	20	F	-	-	-	11	04	-	-	SARAH L POLESE - 19 MONAGHAN RD EDISON NJ 08817 - -
B	V2	01	01	-	26	F	-	-	-	11	04	-	-	PAVANI - BATTULA - 2102 FOREST HAVEN BL EDISON NJ 08817 - -
C	V2	03	01	-	33	F	-	-	-	11	04	-	-	CHANDANA - KANDULA - 2624 EDWARD STEC BL EDISON NJ 08837 - -
D														

New Jersey Police
Crash Investigation Report

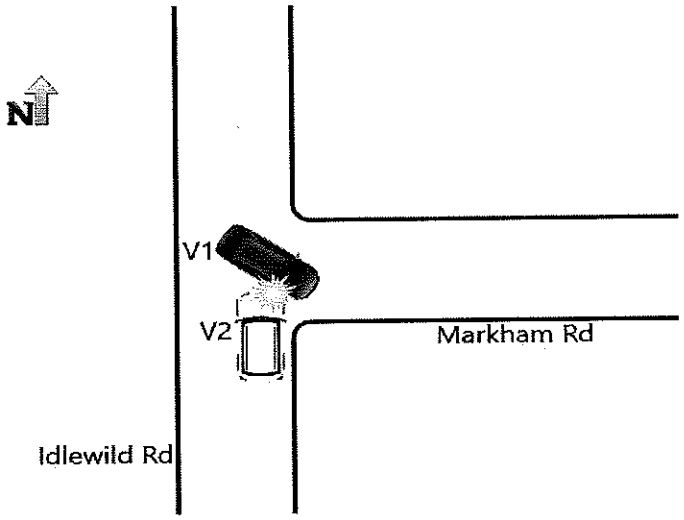
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061693

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling South on Idlewild Rd. V2 was traveling North on Idlewild Rd. V1 attempted to make the left turn onto Markham Rd and collided with V2. Driver 1 stated she did not see V2.

V1 had heavy damage to the passenger side of the vehicle consisting of scratches and dents. V2 had heavy damage to the front passenger side corner of the vehicle. V2 also had scuffs and scratches to the hood which appears to have also been damage as it was jutting out and not flush with the front passenger side fender. The front passenger side fender also appeared to have been knocked out of alignment.

No injuries reported.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	97	98	99	100a	100b	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117
05	01	01	09	01	04	02	01	01	2	08	-	-	01	01	01	01	-	-	-	-	01	03

118a	118b	119a	119b	120a	120b	121a	121b	122	123	124	125	126a	126b	126c	126d	126e	127a	127b	127c	127d	127e	128	129	130	131	132	133	134
00	-	00	-	01	-	01	-	13	13	11	11	26	-	-	-	26	26	-	-	-	26	26	07	07	07	07	03	03

1 Case Number: 19061694

2 Police Dept of: EDISON POLICE DEPART | Code: 01

3 Station/Precinct: 1205

4 Date of Crash (mm dd yy): 10/07/19

5 Day Of Week: MONDAY

6 Time (use 2400 hrs): 1443

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: 1761 LINCOLN HIGHWAY (Road Name) | Dir: N | 11 Speed Limit: 10 | 12 Route No.: 0027 | Suffix: - | 13 Milepost: -

☐ At Intersection With ☐ Feet ☐ Miles (14: -, 15, 16) ☐ N ☐ E ☐ S ☐ W of: - (17 Cross Road Name) | 18 Speed Limit: -

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

21 Latitude: - | 22 Longitude: -

Field	Vehicle 1	Vehicle 2
Veh # (23 / 53)	1	2
Policy No. (24 / 54)	4586939862	4530535246
NJ Ins. Code (25 / 55)	100	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	(none checked)	(none checked)
Driver's First Name / Initial / Last Name (26 / 56)	NHI V NGUYEN -	JIALAI - LIANG -
Sex (29 / 59)	F	M
Number & Street (27 / 57)	21 ALVA COURT	133 GREEN AVE.
City / State / Zip (28 / 58)	EDISON NJ 08817	BELLE MEAD NJ 08502
Eyes (30 / 60)	02	01
DL Class	D	D
Restrictions	NONE	1
Endorsements	NO	NO
State (31 / 61)	NJ	NJ
Driver's License Number (32 / 62)	N31215908561952	L40164010003751
DOB (33 / 63) (mm dd yyyy)	11/29/1995	03/26/1975
Expires (34 / 64) (mm yy)	11 22	08 21
Owner's First Name / Initial / Last Name (35 / 65)	☐ Same As Driver DUNG T NGUYEN -	☒ Same As Driver JIALAI - LIANG -
Number & Street (36 / 66)	21A ALVA COURT	133 GREEN AVE.
City / State / Zip (37 / 67)	EDISON NJ 08817	BELLE MEAD NJ 08502
Make (38 / 68)	TOYOTA	HONDA
Model (39 / 69)	CAMRY	ACCORD
Color (40 / 70)	BK	BK
Year (41 / 71)	2007	2018
Plate No. (42 / 72)	J67GKZ	T73JNS
State (43 / 73)	NJ	NJ
VIN (44 / 74)	4T1BK46K57U549419	1HGCV3F18JA010854
Expires (45 / 75)	04 20	01 22
Vehicle Removed To (46 / 76)	DRIVEN AWAY	DRIVEN AWAY
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven	☒ Driven
Authority (47 / 77): ☐ Owner ☐ Driver ☐ Police	☒ Driver	☒ Driver
Alcohol/Drug Test (48 / 78) Given: ☐ No ☐ Yes ☐ Refused	☒ No	☒ No
Type: ☐ Breath ☐ Blood ☐ Urine	-	-
Results: 0. __ % ☐ Pending	0. - %	0. - %
Hazardous Material (49 / 79): ☐ None ☐ On Board ☐ Spill	(none checked)	☒ None
Hazard Class / Placard No.	- / -	- / -
Carrier No. (50 / 80): ☐ USDOT ☐ MC/MX ☐ None	USDOT - MC/MX - ☒ None	USDOT - MC/MX - ☒ None
GVWR/GCWR (51 / 81): ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	(none checked)	(none checked)
Motor Carrier or Government Entity (52 / 82)	-	-
Number & Street	-	-
City / State / Zip	- - -	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	-	-	2	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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	-	23	F	-	-	-	11	04	-	-	DRIVER 1 - - - / - - - - - -
B	2	01	01	-	44	M	-	-	-	11	04	-	-	DRIVER 2 - - - / - - - - - -
C	2	03	01	-	40	F	-	-	-	11	04	-	-	YIN S FAN - / 133 GREEN AVE. BELLE MEAD NJ 08502 - -
D	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - / - - - - - -

New Jersey Police
Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

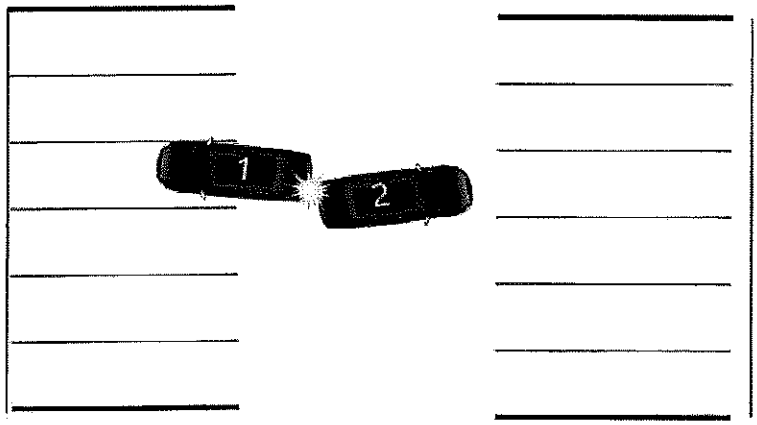
Station: 1205 Case No: 19061694

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

Not to Scale



145 Crash Description/Narrative

Vehicle 1 and Vehicle 2 were involved in an accident. Both vehicles were backing out of parking spaces at the time of the collision. Since both vehicles were backing, I, Officer Fields, was unable to determine fault. There were dents and paint damage on the rear bumpers of both vehicles as a result of the accident.

Note: Vehicle 2 was further out of the parking space than was Vehicle 1. That may indicate that Vehicle 2 started backing first.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
NICOLE FIELDS	0403	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19061844
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	WOODBRIDGE AVE
Dir	W
11 Speed Limit	35
12 Route No.	0514
Suffix	-
13 Milepost	-
18 Speed Limit	25
☐ At Intersection With	
Road Name	
☒ Feet ☐ Miles	50
☐ N ☒ E ☐ S ☐ W	of: DUCLOS LN
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	10/08/19
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	0830
7 Municipality Code	1205
8 Total Killed	-
9 Total Injured	1
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	HPA00001193936
25 NJ Ins. Code	411
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	HALA
Initial	B
Last Name	GADALLA
29 Sex	F
27 Number & Street	327 BROMLEY PL
28 City	EAST BRUNSWICK
State	NJ
Zip	08816
30 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	G0089 31162 62632
33 DOB mm dd yyyy	12/06/1963
34 Expires mm yy	03 20
35 Owner's First Name	NISSAN
Initial	-
Last Name	INFINITI LT
☐ Same As Driver	
36 Number & Street	PO BOX 254648
37 City	SACRAMENTO
State	CA
Zip	95865
38 Make	NISSAN
39 Model	ALTIMA
40 Color	BN
41 Year	2017
42 Plate No.	F49HEH
43 State	NJ
44 VIN	1N4AL3AP4HC135622
45 Expires	11 19
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
50 Carrier No.	☐ USDOT - ☒ None
	☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	OUT OF STATE
55 NJ Ins. Code	-
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	ISTVAN
Initial	-
Last Name	LIEB
59 Sex	M
57 Number & Street	11 EXETER ST
58 City	HIGHLAND PARK
State	NJ
Zip	08904
60 Eyes	02
DL Class	-
Restrictions	-
Endorsements	-
61 State	ZZ
62 Driver's License Number	CD782663
63 DOB mm dd yyyy	05/01/1977
64 Expires mm yy	02 16
65 Owner's First Name	ISTVAN
Initial	-
Last Name	LIEB
☒ Same As Driver	
66 Number & Street	11 EXETER ST
67 City	HIGHLAND PARK
State	NJ
Zip	08904
68 Make	CADILLAC
69 Model	CTS
70 Color	BK
71 Year	2007
72 Plate No.	JCCP89
73 State	FL
74 VIN	1G6DP577670120976
75 Expires	05 20
76 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☒ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
80 Carrier No.	☐ USDOT - ☒ None
	☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
V1	39:4-97	G027585	V2	39:6B-2	G027586
-	-	-	V2	39:3-10	G027587

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	04	55	F	05	08	01	11	04	-	-	HALA B GADALLA - 327 BROMLEY PL EAST BRUNSWICINJ 08816 - -
B	V2	01	01	-	42	M	-	-	-	11	04	-	-	ISTVAN - LIEB - 11 EXETER ST HIGHLAND PARK NJ 08904 - -
C														
D														

New Jersey Police Crash Investigation Report

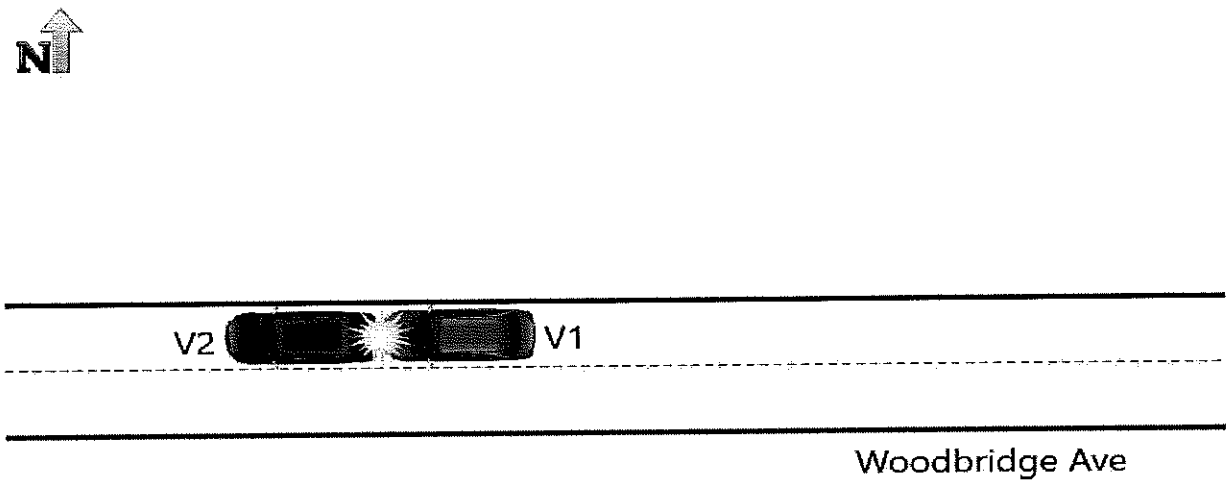
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061844

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling West on Woodbridge Ave behind V2. V2 stopped due to traffic. V1 was unable to stop in time and rear ended V2. V1 had minor damage to the front bumper. V2 had moderate damage to the rear bumper, which was knocked loose, and the rear bumper would not close.

Driver 1 complained of pain across her chest from the seat belt but refused offers for medical attention.

Driver 2 provided a European Union Driver's license (CD782663), which had expired in 2016. He was unable to provide another license. He also provided a European Union Passport (BH8391287). Driver 2 provided an insurance card (Policy# 093403835) that expired in 2017. He was unable to show me one online. I attempted to call the below listed insurance company, but voicemail message stated that their office was closed and to call back during normal business hours. V2 is insured in Florida by:

Insurance Zebra Inc
98 San Antonio Blvd Ste 2000
Austin TX 78701

Driver 1 issued Summons# G027585 for 39:4-97

Driver 2 issued Summonses#
G027586 for 39:6B-2
G027587 for 39:3-10

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	19061853
2 Police Dept of	EDISON POLICE DEPARTI
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/08/19
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	0854
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	1
10 Crash Occurred On (Road Name)	AMBOY AVENUE
Dir	S
11 Speed Limit	35
12 Route No.	0501
Suffix	-
13 Milepost	-
☒ At Intersection With / ☐ Feet / ☐ Miles (14)	-
15 / 16 ☐ N ☐ E ☐ S ☐ W	
of: 17 Cross Road Name	WALTUMA AVENUE
18 Speed Limit	25
19 Ramp ☐ To ☐ From: 20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Code	Value
96	04
97	01
98	01
99	05
100a	01
100b	04
101	02
102	01
103	05
104	2
105	01
106	-
107	-
108	04
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	03
118a	02
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	07
123	08
124	11
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	06
132	06
133	03
134	03

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	F033039-9	54 Policy No.	457361036-1
25 NJ Ins. Code	426	55 NJ Ins. Code	945
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	VIRGINIA G DENNY -	56 Driver's First Name / Initial / Last Name	SARAH L HEAP -
29 Sex	F	59 Sex	F
27 Number & Street	333 CROWS MILL RD #105	57 Number & Street	371B FLORIDA GROVE RD
28 City / State / Zip	FORDS NJ 08863	58 City / State / Zip	PERTH AMBOY NJ 08861
30 Eyes	05	60 Eyes	04
DL Class	D	DL Class	D
Restrictions	1	Restrictions	T
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	D2567 77167 55425	62 Driver's License Number	H2034 69173 62904
33 DOB (mm dd yyyy)	05/26/1942	63 DOB (mm dd yyyy)	12/01/1990
34 Expires (mm yy)	05 22	64 Expires (mm yy)	12 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver NISSAN INFINITI - LT -	65 Owner's First Name / Initial / Last Name	☒ Same As Driver SARAH L HEAP -
36 Number & Street	PO BOX 254648	66 Number & Street	371B FLORIDA GROVE RD
37 City / State / Zip	SACRAMENTO CA 95865	67 City / State / Zip	PERTH AMBOY NJ 08861
38 Make	NISSAN	68 Make	HYUNDAI
39 Model	ROGUE	69 Model	ELANTRA
40 Color	SL	70 Color	WT
41 Year	2017	71 Year	2010
42 Plate No.	P44JCH	72 Plate No.	U61KAG
43 State	NJ	73 State	NJ
44 VIN	JN8AT2MV2HW272561	74 VIN	KMHDU4AD8AU898402
45 Expires	07 20	75 Expires	04 20
46 Vehicle Removed To	DRIVEN AWAY	76 Vehicle Removed To	DRIVEN AWAY
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-	82 Motor Carrier or Government Entity	-
Number & Street	-	Number & Street	-
City / State / Zip	- / - / -	City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1	136 Charge: CARLESS DRIVING	137: G-028230	-	138 Charge: -	139: -
-	140 Charge: -	141: -	-	142 Charge: -	143: -

	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	-	77	F	-	-	-	11	04	-	-	DRIVER OF VEHICLE # 1 - - - - - - - - -
B	2	01	01	04	28	F	04	08	01	11	04	-	-	DRIVER OF VEHICLE # 2 - - - - - - - - -
C	2	03	01	-	25	F	-	-	-	11	04	-	-	DENIZA N CAMACHO - 371 FLORIDA GROVE R PERTH AMBOY NJ 08861 - -
D														

New Jersey Police Crash Investigation Report

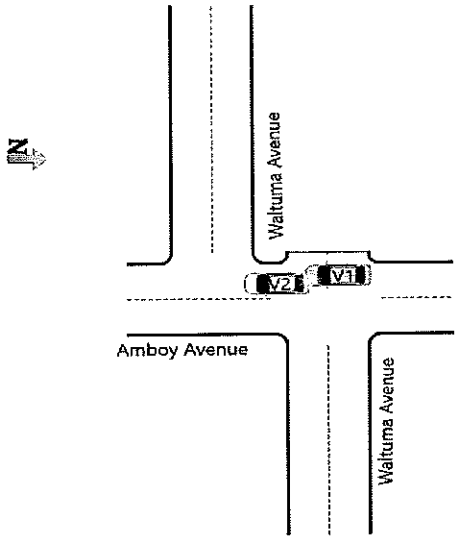
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061853

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The investigation reveals on 10/08/2019, V2 was stopped in traffic on Amboy Avenue, at which time V2 was struck from the rear by V1. D1 reports that she is unsure why she did not see V2 in front of her.

***Box 118a: D1 was inattentive to the traffic conditions in front of her on the roadway.**

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DAVID GOLDMAN	0406	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 01

1 Case Number: 19061918

97: 01

2 Police Dept of: EDISON POLICE DEPART | Code: 01

98: 01

3 Station/Precinct: -

99: 01

4 Date of Crash (mm dd yy): 10/08/19

100a: 01

5 Day Of Week: TUESDAY

6 Time (use 2400 hrs): 1400

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: US HWY 1 | Road Name | S | Dir

☐ At Intersection With

☒ Feet ☐ Miles (14 15)

☒ N ☐ E ☐ S ☐ W

of: PLAINFIELD AVE

11 Speed Limit: 50

12 Route No.: 0001 | Suffix: - | 13 Milepost: -

18 Speed Limit: 25

19 Ramp ☐ To ☐ From:

17 Cross Road Name: -

20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: -

22 Longitude: -

(16)

118a: 00

118b: -

119a: 25

119b: -

120a: 00

120b: -

121a: 01

121b: -

122: 07

123: 08

124: 04

125: 04

126a: 26

126b: -

126c: -

126d: -

126e: 26

127a: 26

127b: -

127c: -

127d: -

127e: 26

128: 26

129: 12

130: 00

131: 06

132: 06

133: 00

134: 02

Vehicle 1

100b: 04

23 Veh #: 1

24 Policy No.: 00

25 NJ Ins. Code: 00

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

101: 02

26 Driver's First Name: 00 | Initial: - | Last Name: 00 | -

29 Sex: U

102: 01

27 Number & Street: 00

103: 05

28 City: 00 | State: UN | Zip: 00

104: 2

30 Eyes: - | DL Class: 00 | Restrictions: 00 | Endorsements: 00

31 State: UN

105: 01

32 Driver's License Number: 00

33 DOB (mm dd yyyy): -

34 Expires (mm yy): - -

106: -

35 Owner's ☒ Same As Driver | First Name: 00 | Initial: - | Last Name: 00 | -

107: -

36 Number & Street: 00

108: 25

37 City: 00 | State: UN | Zip: 00

109: 01

38 Make: UNKNOWN | 39 Model: UNKNOWN | 40 Color: BL | 41 Year: - | 42 Plate No.: 00 | 43 State: UN

110: 00

44 VIN: 00

45 Expires: 00 00

111: 02

46 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

112: -

113: -

47 Authority: ☐ Owner ☒ Driver ☐ Police

114: -

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

115: -

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill

Hazard Class: - | Placard No.: -

116: 03

50 Carrier No.: ☐ USDOT - ☒ None

117: 03

☐ MC/MX -

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: 4432-66-42-19

55 NJ Ins. Code: 148

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

56 Driver's First Name: SAMUEL | Initial: B | Last Name: GARBER | -

59 Sex: M

57 Number & Street: 140 N 11TH AVE

58 City: HIGHLAND PARK | State: NJ | Zip: 08904

60 Eyes: 06 | DL Class: D | Restrictions: 1 | Endorsements: -

61 State: NJ

62 Driver's License Number: G0543 68862 03956

63 DOB (mm dd yyyy): 03/18/1995

64 Expires (mm yy): 08 20

65 Owner's ☐ Same As Driver | First Name: NISSAN INFINITI - | Initial: LT | Last Name: -

66 Number & Street: PO BOX 254648

67 City: SACRAMENTO | State: CA | Zip: 95865

68 Make: NISSAN | 69 Model: SENTRA | 70 Color: GY | 71 Year: 2018 | 72 Plate No.: D17JPY | 73 State: NJ

74 VIN: 3N1AB7APXJY212174

75 Expires: 01 21

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill

Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - ☒ None

☐ MC/MX -

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	-	U	-	-	-	00	00	-	-	UNK - UNK UNK UNK UN 00 - -
B	V2	01	01	-	24	M	-	-	-	11	04	-	-	SAMUEL B GARBER 140 N 11TH AVE HIGHLAND PARK NJ 08904 - -
C	V2	03	01	-	58	F	-	-	-	11	04	-	-	SHARON F GARBER 140 N 1TTH AVE HIGHLAND PARK NJ 08904 - -
D														

New Jersey Police Crash Investigation Report

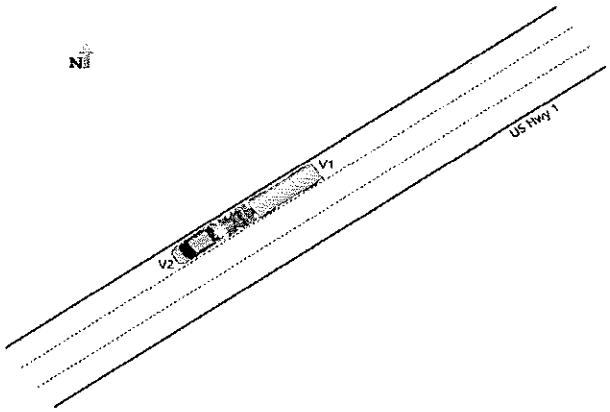
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061918

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 was stopped in traffic in the right lane of US Hwy 1 South when it was rear ended by V1. V1 then fled the scene. V2 had minor damage to the rear bumper.

Driver 1 and his passenger, Sharon Garber, had photographs of the vehicle that rear ended them. They showed me a picture of a blue tractor trailer, with a white trailer behind it. I was unable to make a license plate out from the pictures. The trailer was marked Douglas & Sons Inc. with the number 959 beneath it.

I spoke with the property owner of 485 Us Hwy 1. He had two cameras facing in the direction where the accident occurred. He is not familiar with the camera system and advised he would have an employee search through the footage and advise me at a later date if they located anything.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	19061920
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/08/19
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1418
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	PARSONAGE RD (Road Name)
Dir	E
11 Speed Limit	35
12 Route No.	0630
Suffix	-
13 Milepost	-
☒ At Intersection With / ☐ Feet / ☐ Miles	-
14 / 15 / 16	☐ N ☐ E ☐ S ☐ W
of: 17 Cross Road Name	RT 1
18 Speed Limit	50
19 Ramp ☐ To ☐ From: 20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	908995973	54 Policy No.	4501486809
25 NJ Ins. Code	134	55 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	DANIELL R DEOCAMPO -	56 Driver's First Name / Initial / Last Name	JAMES H BROWN -
29 Sex	F	59 Sex	M
27 Number & Street	119 WEST 15TH ST	57 Number & Street	16 LOWELL ST
28 City / State / Zip	KINDEN NJ 07036	58 City / State / Zip	CARTERET NJ 07008
30 Eyes	02	60 Eyes	05
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	D26051537953882	62 Driver's License Number	B76103836811735
33 DOB (mm dd yyyy)	03/21/1988	63 DOB (mm dd yyyy)	11/04/1973
34 Expires (mm yy)	09 21	64 Expires (mm yy)	06 21
35 Owner's First Name / Initial / Last Name	☒ Same As Driver DANIELL R DEOCAMPO -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver EVELYN - SANTANA -
36 Number & Street	119 WEST 15TH ST	66 Number & Street	16 LOWELL ST
37 City / State / Zip	KINDEN NJ 07036	67 City / State / Zip	CARTERET NJ 07008
38 Make	CHRYSLER	68 Make	HONDA
39 Model	TOWN & COU	69 Model	CR-V
40 Color	SL	70 Color	BK
41 Year	2011	71 Year	2000
42 Plate No.	G34GED	72 Plate No.	A39JJN
43 State	NJ	73 State	NJ
44 VIN	2A4RR8DG6BR759708	74 VIN	JHLRD1849TC001931
45 Expires	02 20	75 Expires	06 20
46 Vehicle Removed To	-	76 Vehicle Removed To	-
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☐ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☐ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-	82 Motor Carrier or Government Entity	-
Number & Street	-	Number & Street	-
City / State / Zip	- - -	City / State / Zip	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	Charge	Summons No.
-	136 Charge: -	137 Summons. No.: -
-	140 Charge: -	141 Summons. No.: -
-	138 Charge: -	139 Summons. No.: -
-	142 Charge: -	143 Summons. No.: -

	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	F	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - - -
B	2	01	01	-	45	M	-	-	-	11	04	-	-	DRIVER 2 - - - - - - - - - -
C	2	03	01	-	17	M	-	-	-	11	04	-	-	ANGEL- L SANTANA - 16 LOWELL ST CARTERET NJ 07008 - -
D														

Left margin codes:

Code	Value
96	05
97	-
98	01
99	05
100a	01
100b	04
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	02

Right margin codes:

Code	Value
118a	02
118b	-
119a	25
119b	25
120a	01
120b	-
121a	01
121b	-
122	01
123	07
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	02
134	02

New Jersey Police Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061920

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - - - - - -
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Officers investigation revealed that V1 was behind V2 on Parsonage Rd East ramp to Rt 1 North. As vehicles crossed Rt1, V2 stopped short in traffic and was struck from behind by V1.

Driver 1 stated that V2 was attempting an improper left turn onto Rt 1 North when MVA occurred.

Driver 2 stated that an unknown vehicle in front of him made the improper left turn onto Rt 1 North which caused him to stop short.

No injuries at time of report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MICHAEL PERROTTI	0347	DECHIRICO	0199	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

PAGE 1 OF 2 ☐ Fatal — ☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	19061941
2 Police Dept of	EDISON POLICE DEPARTI
Code	01
3 Station/Precinct	1205
4 Date of Crash (mm dd yy)	10/08/19
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1647
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On (Road Name)	205 VINEYARD RD.
Dir	W
11 Speed Limit	10
12 Route No.	-
Suffix	-
13 Milepost	-
☐ At Intersection With / ☐ Feet ☐ Miles (14)	-
16 ☐ N ☐ E ☐ S ☐ W of: 17 Cross Road Name	-
18 Speed Limit	-
19 Ramp ☐ To ☐ From: 20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Code	Value
96	05
97	01
98	01
99	09
100a	01
100b	04
101	02
102	01
103	01
104	2
105	08
106	-
107	-
108	01
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	02
118a	02
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	13
123	08
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	12
132	12
133	03
134	02

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	NJAP0000037675	54 Policy No.	4524845593
25 NJ Ins. Code	810	55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	PRATIK M PATEL -	56 Driver's First Name / Initial / Last Name	GARDA H AGUGLIARO -
29 Sex	M	59 Sex	F
27 Number & Street	16 ASHLEY RD.	57 Number & Street	31 PACIFIC ST.
28 City / State / Zip	EDISON NJ 08817	58 City / State / Zip	EDISON NJ 08817
30 Eyes	01	60 Eyes	02
DL Class	D	DL Class	D
Restrictions	1	Restrictions	NONE
Endorsements	NO	Endorsements	NO
31 State	NJ	61 State	NJ
32 Driver's License Number	P07956337408791	62 Driver's License Number	A31172726855712
33 DOB (mm dd yyyy)	08/26/1979	63 DOB (mm dd yyyy)	05/12/1971
34 Expires (mm yy)	08 22	64 Expires (mm yy)	03 22
35 Owner's First Name / Initial / Last Name	☒ Same As Driver PRATIK M PATEL -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver MICHAEL P AGUGLIARIO -
36 Number & Street	16 ASHLEY RD.	66 Number & Street	31 PACIFIC ST.
37 City / State / Zip	EDISON NJ 08817	67 City / State / Zip	EDISON NJ 08817
38 Make	HONDA	68 Make	NISSAN
39 Model	ACCORD	69 Model	PATHFINDER
40 Color	GY	70 Color	BN
41 Year	2012	71 Year	2011
42 Plate No.	Y11KJT	72 Plate No.	S42GFF
43 State	NJ	73 State	NJ
44 VIN	1HGCP2F64CA182429	74 VIN	5N1AR1NB7BC621517
45 Expires	08 20	75 Expires	12 19
46 Vehicle Removed To	DRIVEN AWAY	76 Vehicle Removed To	DRIVEN AWAY
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-	82 Motor Carrier or Government Entity	-
Number & Street	-	Number & Street	-
City / State / Zip	- / - / -	City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	Charge	Summons No.
1	136 Charge: -	137 Summons. No.: -
-	140 Charge: -	141 Summons. No.: -
2	138 Charge: -	139 Summons. No.: -
-	142 Charge: -	143 Summons. No.: -

	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	-	40	M	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - -
B	1	03	01	-	35	F	-	-	-	11	04	-	-	NIKITA - PATEL - 16 ASHLEY RD. EDISON NJ 08817 - -
C	1	06	01	-	3	M	-	-	-	05	05	-	-	SHIV - PATEL - 16 ASHLEY RD. EDISON NJ 08817 - -
D	2	01	01	-	48	F	-	-	-	11	04	-	-	DRIVER 2 - - - - - - - - -

New Jersey Police Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

Station: 1205 Case No: 19061941

(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 Dept	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	
E	2	03	01	-	11	M	-	-	-	11	04	-	-	JAKE AGUGLIARIO - 31 PACIFIC ST. EDISON NJ 08817 -
F	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - - - - -
G	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - - - - -
H	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - - - - -
I	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - - - - -
J	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - - - - -

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Vehicle 1 and Vehicle 2 were involved in an accident. Both vehicles were in line for gas at Costco, when Vehicle 1 backed up in order to change lines. When Vehicle 1 backed up, it hit Vehicle 2, which was waiting in line behind Vehicle 1. The accident occurred in gas pump line # 10.

The rear bumper of Vehicle 1 was punctured by a screw as a result of hitting vehicle 2. The front license plate of Vehicle 2 fell off of the front bumper of Vehicle 2 as a result of the collision.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
NICOLE FIELDS	0403	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Left margin		Right margin	
96	02	118a	09
97	01	118b	-
98	01	119a	25
99	05	119b	-
100a	01	120a	01
100b	06	120b	-
101	02	121a	01
102	01	121b	-
103	01	122	07
104	2	123	07
105	01	124	03
106	-	125	03
107	-	126a	26
108	05	126b	-
109	01	126c	-
110	01	126d	-
111	01	126e	26
112	-	127a	26
113	-	127b	-
114	-	127c	-
115	-	127d	-
116	04	127e	26
117	04	128	26
		129	12
		130	12
		131	06
		132	06
		133	02
		134	03

1 Case Number: 19061948

2 Police Dept of: EDISON POLICE DEPART | Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 10/08/19

5 Day Of Week: TUESDAY

6 Time (use 2400 hrs): 1712

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: WOODBRIDGE AVENUE (Road Name) | Dir: W | 11 Speed Limit: 35 | 12 Route No.: 0514 | Suffix: - | 13 Milepost: -

☒ At Intersection With

14 - ☐ Feet ☐ Miles 15 | 16 ☐ N ☐ E ☐ S ☐ W of:

17 Cross Road Name: NY TIMES ACCESS ROAD | 18 Speed Limit: 15

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

21 Latitude: - | 22 Longitude: -

Vehicle 1

23 Veh #: 1

24 Policy No.: 925873383 | 25 NJ Ins. Code: 11770

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

26 Driver's First Name: SCOTT | Initial: A | Last Name: WOLFSON | - | 29 Sex: M

27 Number & Street: 361 CURTIS HILL ROAD

28 City: BRYANT POND | State: ME | Zip: 04219

30 Eyes: 02 | DL Class: C | Restrictions: B | Endorsements: 0 | 31 State: ME

32 Driver's License Number: 2770366 | 33 DOB (mm dd yyyy): 02/21/1969 | 34 Expires (mm yy): 02 24

35 Owner's: ☒ Same As Driver | First Name: SCOTT | Initial: A | Last Name: WOLFSON | -

36 Number & Street: 361 CURTIS HILL ROAD

37 City: BRYANT POND | State: ME | Zip: 04219

38 Make: FORD | 39 Model: F150 | 40 Color: BL | 41 Year: 2015 | 42 Plate No.: 4956WN | 43 State: ME

44 VIN: 1FTEW1EG2FFB53744 | 45 Expires: 05 20

46 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

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

49 Hazardous Material: ☐ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

50 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: 2869997C1352 | 55 NJ Ins. Code: 328

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

56 Driver's First Name: STEVEN | Initial: A | Last Name: PALESTRO | - | 59 Sex: M

57 Number & Street: 131 GROTKE ROAD

58 City: CHESTNUT RIDGE | State: NY | Zip: 10977

60 Eyes: 02 | DL Class: D | Restrictions: B | Endorsements: 0 | 61 State: NY

62 Driver's License Number: 349679580 | 63 DOB (mm dd yyyy): 09/03/1989 | 64 Expires (mm yy): 09 26

65 Owner's: ☒ Same As Driver | First Name: STEVEN | Initial: A | Last Name: PALESTRO | -

66 Number & Street: 131 GROTKE ROAD

67 City: CHESTNUT RIDGE | State: NY | Zip: 10977

68 Make: NISSAN | 69 Model: ALTIMA | 70 Color: GY | 71 Year: 2019 | 72 Plate No.: JGT1704 | 73 State: NY

74 VIN: 3N1AB7AP5KY285843 | 75 Expires: 03 21

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

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

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Other

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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	-	50	M	-	-	-	11	04	-		DR#1 - - - - - -
B	2	01	01	-	30	M	-	-	-	11	04	-		DR#2 - - - - - -
C														
D														

New Jersey Police
Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061948

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

It appears that both vehicles were traveling westbound on Woodbridge Avenue in stop and go traffic when vehicle #1 struck the rear of vehicle #2 while traveling through the intersection of the NY Times Access Road. There were no apparent or complaint of any injury by anyone involved.

vehicle #2 ins: United Financial Casualty Company, PO Box 31260 Tampa, FL 33631

vehicle #1 ins: State Farm, PO Box 8000 Ballston Spa, NY 12020

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MATTHEW HARAS	0348	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	19061957
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/08/19
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1808
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On: Road Name	WOODBRIDGE AVE
Dir	E
11 Speed Limit	40
12 Route No.	0514
Suffix	-
13 Milepost	-
☒ At Intersection With ☐ Feet ☐ Miles (14)	-
15 / 16 ☐ N ☐ E ☐ S ☐ W of: 17 Cross Road Name	MAIN STREET
18 Speed Limit	25
19 Ramp ☐ To ☐ From: 20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Vehicles

Field	Vehicle 1	Vehicle 2
Veh # (23 / 53)	1	2
Policy No. (24 / 54)	PAA00002023607	NC10038460
NJ Ins. Code (25 / 55)	963	946
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		
Driver's First Name (26 / 56)	JU	JACOB
Initial	F	W
Last Name	HUANG	HENDRICKS
Suffix	-	-
Sex (29 / 59)	F	M
Number & Street (27 / 57)	33 FANNING ST	208 GEORGE STREET
City (28 / 58)	FORDS	SOUTH AMBOY
State	NJ	NJ
Zip	08863	08879
Eyes (30 / 60)	02	04
DL Class	D	D
Restrictions	-	-
Endorsements	-	-
State (31 / 61)	NJ	NJ
Driver's License Number (32 / 62)	H90064156652582	H25173818605994
DOB (33 / 63) mm/dd/yyyy	02/01/1958	05/21/1999
Expires (34 / 64) mm yy	10 21	12 20
Owner's (35 / 65) ☒ Same As Driver — First Name	JU	JACOB
Initial	F	W
Last Name	HUANG	HENDRICKS
Suffix	-	-
Number & Street (36 / 66)	33 FANNING ST	208 GEORGE STREET
City (37 / 67)	FORDS	SOUTH AMBOY
State	NJ	NJ
Zip	08863	08879
Make (38 / 68)	HONDA	SUBARU
Model (39 / 69)	INSIGHT	IMPREZA
Color (40 / 70)	BK	GD
Year (41 / 71)	2010	1998
Plate No. (42 / 72)	ZWV28N	X42KEM
State (43 / 73)	NJ	NJ
VIN (44 / 74)	JHMZE2H55AS027929	JF1GM4359WH403217
Expires (45 / 75)	06 19	06 19
Vehicle Removed To (46 / 76)	-	-
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority (47 / 77)	☐ Owner ☒ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test (48 / 78) Given	☒ No ☐ Yes ☐ Refused	☒ No ☐ Yes ☐ Refused
Type	☐ Breath ☐ Blood ☐ Urine	☐ Breath ☐ Blood ☐ Urine
Results	0. - % ☐ Pending	0. - % ☐ Pending
Hazardous Material (49 / 79)	☒ None ☐ On Board ☐ Spill	☒ None ☐ On Board ☐ Spill
Hazard Class	-	-
Placard No.	-	-
Carrier No. (50 / 80)	☐ USDOT - ☐ MC/MX - ☒ None	☐ USDOT - ☐ MC/MX - ☒ None
GVWR/GCWR (51 / 81)	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity (52 / 82)	-	-
Number & Street	-	-
City	-	-
State	-	-
Zip	-	-

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:4-97 CARELESS	1205-G-024584	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

Occupants

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	61	F	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - -
B	02	01	01	-	20	M	-	-	-	11	04	-	-	DRIVER 2 - - - - - - - - -
C	03	01	01	-	23	M	-	-	-	11	04	-	-	DRIVER 3 - - - - - - - - -
D	04	01	01	-	40	F	-	-	-	11	04	-	-	DRIVER 4 - - - - - - - - -

Coded Boxes

Box	Value
96	03
97	01
98	03
99	05
100a	01
100b	04
101	02
102	01
103	01
104	4
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	02
118a	02
118b	10
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	08
124	03
125	03
126a	26
126b	26
126c	26
126d	-
126e	26
127a	26
127b	26
127c	26
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	02
134	02

PAGE 2 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	03		
97	01		
98	03		
99	05		
100a	01		
100b	04		
101	02		
102	01		
103	01		
104	4		
105	01		
106	-		
107	-		
108	01		
109	01		
110	01		
111	01		
112	-		
113	-		
114	-		
115	-		
116	02		
117	02		

1 Case Number: 19061957

2 Police Dept of: EDISON POLICE DEPART | Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 10/08/19

5 Day Of Week: TUESDAY

6 Time (use 2400 hrs): 1808

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: WOODBRIDGE AVE (Road Name) E (Dir) | 11 Speed Limit: 40 | 12 Route No.: 0514 | Suffix: - | 13 Milepost: -

☒ At Intersection With MAIN STREET (17 Cross Road Name) | 18 Speed Limit: 25

☐ Feet ☐ N ☐ E of: ☐ Miles ☐ S ☐ W

14 - 15 16

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

21 Latitude: - | 22 Longitude: -

Vehicle 3

23 Veh #: 3 | 24 Policy No.: F100003352-1 | 25 NJ Ins. Code: 426

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

26 Driver's First Name: DANIEL | Initial: J | Last Name: GABRIEL - | 29 Sex: M

27 Number & Street: 71 WEST RIVER ROAD

28 City: RUMSON | State: NJ | Zip: 07760

30 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ

32 Driver's License Number: G00201537109922 | 33 DOB (mm dd yyyy): 09/24/1992 | 34 Expires (mm yy): 09 21

35 Owner's First Name: ☐ Same As Driver CCAP AUTO LEASE - - -

36 Number & Street: PO BOX 961272

37 City: FT WORTH | State: TX | Zip: 76161

38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State
DODGE	CHALLENGER	BK	2017	H59JHH	NJ

44 VIN: 2C3CDXCT2HH535410 | 45 Expires: 10 20

46 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

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

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 4

53 Veh #: 4 | 54 Policy No.: 31606569 | 55 NJ Ins. Code: 134

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

56 Driver's First Name: MICHELE | Initial: S | Last Name: LANE - | 59 Sex: F

57 Number & Street: 24 INDIAN CREEK ROAD

58 City: OLD BRIDGE | State: NJ | Zip: 07747

60 Eyes: 05 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

62 Driver's License Number: L04095448251785 | 63 DOB (mm dd yyyy): 01/27/1978 | 64 Expires (mm yy): 01 20

65 Owner's First Name: ☒ Same As Driver MICHELE | Initial: S | Last Name: LANE -

66 Number & Street: 24 INDIAN CREEK ROAD

67 City: OLD BRIDGE | State: NJ | Zip: 07747

68 Make	69 Model	70 Color	71 Year	72 Plate No.	73 State
MAZDA	MAZDA2	BK	2016	Y11FTA	NJ

74 VIN: JM1GJ1U58G1440530 | 75 Expires: 08 19

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

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

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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														

118a	25
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	08
123	08
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	02
134	02

New Jersey Police
Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19061957

(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 Dept	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	E														
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)

vehicles moved prior

145 Crash Description/Narrative

D1 stated the following: She was stopped waiting for the green light at the intersection of Woodbridge Ave and Main Street. She stated a vehicle came from behind and struck her pushing her into the vehicle in front of her.

D2 stated they were waiting at the red light in traffic stopped when V1 struck them from behind.

D3 stated V1 after striking V2 then went into reverse striking his vehicle from the front. He stated she then went forward again striking V2. V2 then struck V4 from behind.

No injuries reported on location.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DANIEL BRADLEY	0414	DECHIRICO	0199	☐ Pending ☒ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	19061974
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	NJ0120500
4 Date of Crash (mm dd yy)	10/08/19
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1915
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On (Road Name)	PLAINFIELD AVENUE
Dir	S
11 Speed Limit	40
12 Route No.	0529
Suffix	-
13 Milepost	-
18 Speed Limit	-
At Intersection With / Feet / Miles / N E S W of	-
17 Cross Road Name	-
19 Ramp	☒ To ☐ From:
20 Route/Name	KILMER ROAD
Direction	☐ NB ☐ EB ☐ SB ☒ WB
21 Latitude	-
22 Longitude	-

Left margin	Code
96	01
97	02
98	07
99	05
100a	03
100b	04
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	04
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	04

Right margin	Code
118a	02
118b	02
119a	25
119b	25
120a	01
120b	01
121a	01
121b	01
122	02
123	08
124	09
125	09
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	01
130	01
131	07
132	07
133	03
134	03

Vehicles

Field	Vehicle 1	Vehicle 2
Veh #	1	2
Policy No.	F 10205031-7	NJSS 209768763
NJ Ins. Code	426	217
Parked / Ped / Pedalcyclist / Resp To Emergency / Hit & Run	☐ ☐ ☐ ☐ ☐	☐ ☐ ☐ ☐ ☐
Driver's First Name / Initial / Last Name	CHRISTIAN G VOLUNTAD -	VIMLA - KALRA -
Sex	M	F
Number & Street	17 BYRON PL APT 1	12 DEBORAH DRIVE
City / State / Zip	SOMERSET NJ 08873	SOMERSET NJ 08873
Eyes	02	01
DL Class	D	D
Restrictions	NONE	NONE
Endorsements	NO	NO
State	NJ	NJ
Driver's License Number	V6313 12467 04802	K0316 76900 58471
DOB	04/07/1980	08/18/1947
Expires (mm yy)	04 23	12 19
Owner's Name	☒ Same As Driver CHRISTIAN G VOLUNTAD -	☒ Same As Driver VIMLA - KALRA -
Owner Number & Street	17 BYRON PL APT 1	12 DEBORAH DRIVE
Owner City / State / Zip	SOMERSET NJ 08873	SOMERSET NJ 08873
Make	TOYOTA	NISSAN
Model	RAV4	ALTIMA
Color	BK	GY
Year	2009	2008
Plate No.	A50LLH	WFH30R
State	NJ	NJ
Plate Expires	07 20	09 20
VIN	JTMBF33V995015533	1N4AL21E78C121058
Vehicle Removed To	DRIVEN AWAY	DRIVEN AWAY
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority	☒ Owner ☐ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test Given	☒ No ☐ Yes ☐ Refused	☒ No ☐ Yes ☐ Refused
Type	☐ Breath ☐ Blood ☐ Urine	☐ Breath ☐ Blood ☐ Urine
Results	0. - % ☐ Pending	0. - % ☐ Pending
Hazardous Material	☒ None ☐ On Board ☐ Spill	☒ None ☐ On Board ☐ Spill
Hazard Class / Placard No.	- / -	- / -
Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	☐ USDOT - ☐ MC/MX - ☒ None
GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity	-	-
Number & Street	-	-
City / State / Zip	- / - / -	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

NONE

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1	136 CARELESS DRIVING 39:4-97	137 G-022311	-	138 -	139 -
1	140 FAIL TO EXHIBIT 39:3-29	141 G-022312	-	142 -	143 -

	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	M	-	-	-	11	04	-	-	DRIVER 1
B	2	01	01	05	72	F	06	08	01	11	04	-	-	DRIVER 2
C														
D														

New Jersey Police
Crash Investigation Report

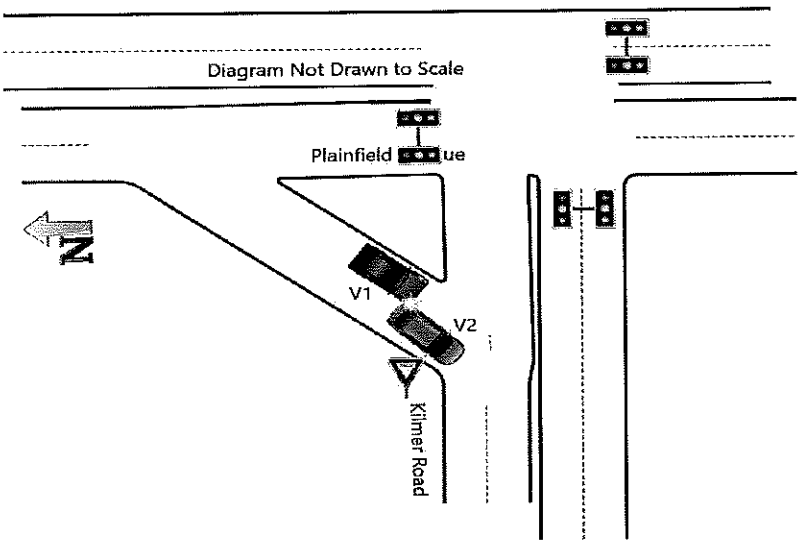
Police Dept: EDISON POLICE DEPAR Code: 01

Station: NJ0120500 Case No: 19061974

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Crash Investigation revealed that Vehicle 2 was stopped on the ramp from Plainfield Ave (Rte 529 S) to Kilmer Road and was yielding to traffic coming from the left off of Plainfield Vehicle 1 was behind Vehicle 2 and Driver 1 thought that Vehicle 2 had started into traffic and he looked to his left for traffic and did not know that Driver 2 had stopped to allow traffic to pass and then Vehicle 1's right front bumper impacted Vehicle 2's left rear bumper causing moderate damage to both vehicles but both were drivable. Driver 2 complained of back pain from the rear impact but did not want an ambulance to respond to the scene. Both Driver's statements recorded on BWC. No cell phones were claimed in use at the time of impact.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
TIMOTHY FARRELL	0332	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Value
96	01
97	01
98	06
99	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	04
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	01

1 Case Number: 19062004

2 Police Dept of: EDISON POLICE DEPART | Code: 01

3 Station/Precinct: -

10 Crash Occurred On: US HIGHWAY 1 | Dir: N | 11 Speed Limit: 50 | 12 Route No.: 0001 | Suffix: - | 13 Milepost: -

☐ At Intersection With | Road Name

14: 20 | 15: ☒ Feet ☐ Miles | 16: ☒ N ☐ E ☐ S ☐ W | of: TRAVERS AVE (17 Cross Road Name) | 18 Speed Limit: 25

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

4 Date of Crash (mm dd yy): 10/08/19 | 5 Day Of Week: TUESDAY | 6 Time (use 2400 hrs): 2239 | 7 Municipality Code: 1205 | 8 Total Killed: -- | 9 Total Injured: -- | 21 Latitude: - | 22 Longitude: -

Field	Vehicle 1	Vehicle 2
Veh # (23/53)	1	2
Policy No. (24/54)	AOJ2382403437097	1119284A0330
NJ Ins. Code (25/55)	370	962
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name (26/56)	CHRISTINE T LEW -	VENKATESA - PERUMAL -
Sex (29/59)	F	M
Number & Street (27/57)	125 LEXINGTON AVE 1ST FL	111 LOCK ST
City / State / Zip (28/58)	EDISON NJ 08817	NEWARK NJ 07103
Eyes (30/60)	02	02
DL Class	D	D
Restrictions	1	0
Endorsements	0	0
State (31/61)	NJ	NJ
Driver's License Number (32/62)	L29431248354802	P27827630005802
DOB (33/63) mm dd yyyy	04/16/1980	05/12/1980
Expires (34/64) mm yy	04 22	09 21
Owner's First Name / Initial / Last Name (35/65)	☒ Same As Driver CHRISTINE T LEW -	☒ Same As Driver VENKATESA - PERUMAL -
Number & Street (36/66)	125 LEXINGTON AVE 1ST FL	111 LOCK ST
City / State / Zip (37/67)	EDISON NJ 08817	NEWARK NJ 07103
Make (38/68)	ACURA	TOYOTA
Model (39/69)	MDX	CAMRY
Color (40/70)	WT	SL
Year (41/71)	2017	2005
Plate No. (42/72)	C94JFW	N83KTH
State (43/73)	NJ	NJ
VIN (44/74)	5J8YD4H55HL005236	4T1BE32K35U090881
Expires (45/75)	10 21	01 20
Vehicle Removed To (46/76)	-	MANDYS
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority (47/77)	☒ Owner ☐ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test (48/78)	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
Hazardous Material (49/79)	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
Carrier No. (50/80)	☐ USDOT - ☐ MC/MX - ☐ None	☐ USDOT - ☐ MC/MX - ☐ None
GVWR/GCWR (51/81)	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity (52/82)	-	-
Number & Street	-	-
City / State / Zip	- - -	- - -

Code	Value
118a	02
118b	09
119a	25
119b	-
120a	01
120b	01
121a	01
121b	01
122	01
123	01
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	02
134	04

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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	-	-	-	11	11	01	-	DRIVER 1 - - - - - - - - -
B	1	04	01	-	8	F	-	-	-	07	07	-	-	MIKALYN - HSU - 125 LEXINGTON AVE 1S EDISON NJ 08817 - -
C	2	01	01	-	39	M	-	-	-	11	04	-	-	DRIVER 2 - - - - - - - - -
D	2	03	01	-	28	F	-	-	-	11	04	-	-	SASIDEVI - MANI - 111 LOCK ST NEWARK NJ 07103 - -

New Jersey Police Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

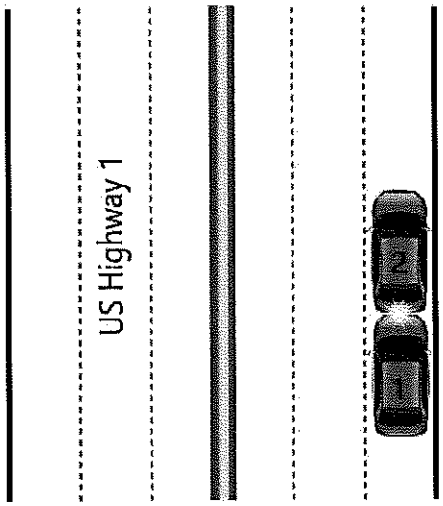
Station: - Case No: 19062004

(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 Dept	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	
E	2	04	01	-	54	F	-	-	-	04	04	-	-	VASANTHA - MANI - 111 LOCK ST NEWARK NJ 07103 - -
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Veh 1 struck the rear bumper of Veh 2 in the right lane of US Highway 1 northbound just past Travers Ave.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MICHAEL GOLDFARB	0437	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05

1 Case Number: 19062057

2 Police Dept of: EDISON POLICE DEPART | Code: 01

3 Station/Precinct: -

97: 01 | 98: 02 | 99: 07 | 100a: 01

4 Date of Crash (mm dd yy): 10/09/19

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 0610

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: SCHOOLHOUSE LN (Road Name) | N (Dir) | 11 Speed Limit: 25

☐ At Intersection With

☒ Feet ☐ Miles | ☒ N ☐ E ☐ S ☐ W of: GERMANTOWN RD

100 (14 15 16)

12 Route No. - | Suffix - | 13 Milepost -

18 Speed Limit: 25

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

20 Route/Name -

21 Latitude - | 22 Longitude -

118a: 29 | 118b: - | 119a: - | 119b: - | 120a: 99 | 120b: -

100b: 04

23 Veh # 1 | 24 Policy No. 5176514 | 25 NJ Ins. Code 673

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

53 Veh # - | 54 Policy No. - | 55 NJ Ins. Code -

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

101: 02

26 Driver's First Name: ROY | Initial: J | Last Name: RANDAZZA | JR | 29 Sex: M

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

102: 01

27 Number & Street: 1998 MANOR DR

57 Number & Street -

103: 01

28 City: WALL | State: NJ | Zip: 07719

58 City - | State - | Zip -

104: 1

30 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ

60 Eyes - | DL Class - | Restrictions - | Endorsements - | 61 State -

122: 01

105: 11

32 Driver's License Number: R0394 67571 08602 | 33 DOB (mm dd yyyy): 08/13/1960 | 34 Expires (mm yy): 08 22

62 Driver's License Number - | 63 DOB (mm dd yyyy) - | 64 Expires (mm yy) -

123: -

35 Owner's First Name: CMU | Initial - | Last Name: CONSTRUCTION

☐ Same As Driver

65 Owner's First Name - | Initial - | Last Name -

☐ Same As Driver

106: -

124: 11

107: -

36 Number & Street: 3 SHIRLEY AVE

66 Number & Street -

125: -

108: 05

37 City: SOMERSET | State: NJ | Zip: 08873

67 City - | State - | Zip -

126a: 06

109: -

38 Make: CHEVROLET | 39 Model: SILVERADO | 40 Color: WT | 41 Year: 2015 | 42 Plate No.: XCZP66 | 43 State: NJ

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

126b: 56

110: 02

44 VIN: 1GB0CUEGXFZ511731 | 45 Expires: 12 19

74 VIN - | 75 Expires - -

126c: 52

111: -

46 Vehicle Removed To: BILLS TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

76 Vehicle Removed To -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

126d: -

112: -

126e: 52

113: -

47 Authority: ☐ Owner ☐ Driver ☒ Police

77 Authority: ☐ Owner ☐ Driver ☐ Police

127a: -

114: -

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

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class - | Placard No. -

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

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill | Hazard Class - | Placard No. -

127b: -

115: -

127c: -

116: 01

50 Carrier No. ☐ USDOT - ☒ None ☐ MC/MX -

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

80 Carrier No. ☐ USDOT - ☐ None ☐ MC/MX -

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

127d: -

117: -

127e: -

52 Motor Carrier or Government Entity -

Number & Street -

City - | State - | Zip -

82 Motor Carrier or Government Entity -

Number & Street -

City - | State - | Zip -

128: 52

129: 12

130: 12

131: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

STRUCK UTILITY POLE# 60221ED

132: -

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

133: 04

134: -

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	59	M	-	-	01	11	04	-	-	ROY J RANDAZZA JR 1998 MANOR DR WALL NJ 07719 - -
B														
C														
D														

New Jersey Police
Crash Investigation Report

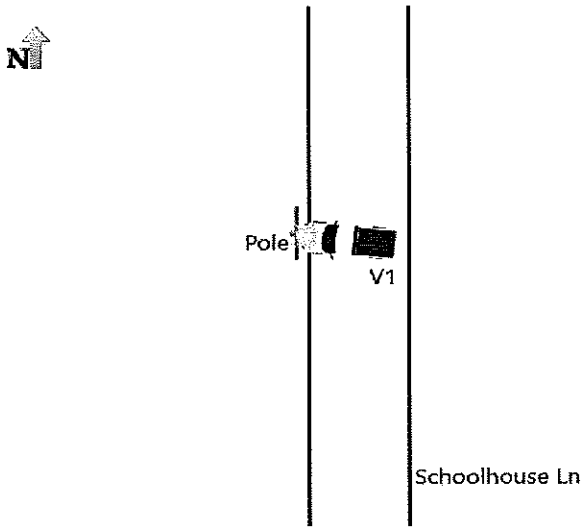
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062057

(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 Dept	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	E														
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling north on Schoolhouse Ln. Driver 1 is diabetic and suffered a diabetic emergency. He stated he had no blood sugar and was attempting to take some glucose when he veered into the oncoming traffic lane, jumped the curb on the south bound side of the road way, and struck a utility pole (#60221ED).

V1 suffered heavy front end damage and was towed from the scene by Bill's Towing.

EMS on scene. Paramedic Filippini confirmed that Driver 1 had low blood sugar and provided treatment. Driver 1 refused medical attention at this time. Driver 1 was taken home by his coworker Benjamin Shank (732-855-0445).

PSE&G was notified about the damaged utility pole (#60221ED). The utility pole was pushed off its based, and was leaning, but the pole remained intact.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ERWIN ENRIQUEZ	0399	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Value
96	05
97	01
98	01
99	09
100a	01
100b	04
101	02
102	02
103	02
104	2
105	03
106	-
107	-
108	01
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	03

1 Case Number: 19062104
2 Police Dept of: EDISON POLICE DEPARTI | Code: 01
3 Station/Precinct: -

10 Crash Occurred On: 2720 WOODBRIDGE AVENUE (Road Name) | Dir: W | 11 Speed Limit: 15 | 12 Route No.: 0514 | Suffix: - | 13 Milepost: - | 18 Speed Limit: -
☐ At Intersection With
14: - ☐ Feet ☐ Miles (15) ☐ N ☐ E ☐ S ☐ W (16) of: - (17 Cross Road Name)
19 Ramp ☐ To ☐ From: - (20 Route/Name) ☐ NB ☐ EB ☐ SB ☐ WB

4 Date of Crash (mm dd yy): 10/09/19 | 5 Day Of Week: WEDNESDAY | 6 Time (use 2400 hrs): 1152 | 7 Municipality Code: 1205 | 8 Total Killed: -- | 9 Total Injured: -- | 21 Latitude: - | 22 Longitude: -

Vehicle 1

23 Veh #: 1 | 24 Policy No.: 100 4314-C21-30E | 25 NJ Ins. Code: 962
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: ANTHONY | Initial: V | Last Name: PADILLA | - | 29 Sex: M
27 Number & Street: 13 MAY STREET
28 City: HOPELAWN | State: NJ | Zip: 08861
30 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ
32 Driver's License Number: P0102 05385 03992 | 33 DOB (mm dd yyyy): 03/26/1999 | 34 Expires (mm yy): 03 20
35 Owner's ☐ Same As Driver | First Name: VINCI | Initial: S | Last Name: PADILLA | -
36 Number & Street: 380 ARNOLD AVENUE
37 City: PERTH AMBOY | State: NJ | Zip: 08861
38 Make: CHEVROLET | 39 Model: CAMARO | 40 Color: RD | 41 Year: 2015 | 42 Plate No.: K26HLK | 43 State: NJ
44 VIN: 2G1FD1E3XF9204576 | 45 Expires: 03 20
46 Vehicle Removed To: DRIVEN AWAY
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -
50 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: -
Number & Street: -
City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2 | 54 Policy No.: 922668884 | 55 NJ Ins. Code: 135
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: THUY | Initial: T | Last Name: VU | - | 59 Sex: F
57 Number & Street: 270 SEAVIEW AVENUE #2
58 City: JERSEY CITY | State: NJ | Zip: 07305
60 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ
62 Driver's License Number: V9001 74183 58642 | 63 DOB (mm dd yyyy): 08/03/1964 | 64 Expires (mm yy): 02 20
65 Owner's ☐ Same As Driver | First Name: JENNIFER | Initial: T | Last Name: PHAM | -
66 Number & Street: 555 OLD POST RD APT D3
67 City: EDISON | State: NJ | Zip: 08817
68 Make: MERCEDES-B | 69 Model: GLA-CLASS | 70 Color: RD | 71 Year: 2018 | 72 Plate No.: F20KFX | 73 State: NJ
74 VIN: WDCTG4GB3JJ409848 | 75 Expires: 06 19
76 Vehicle Removed To: DRIVEN AWAY
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -
80 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity: -
Number & Street: -
City: - | State: - | Zip: -

Code	Value
118a	02
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	01
124	08
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	09
132	09
133	02
134	02

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No
-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	-	20	M	-	-	-	11	04	-	-	DRIVER OF VEHICLE # 1 - - - - - - - - - -
B	2	01	01	-	55	F	-	-	-	11	04	-	-	DRIVER OF VEHICLE # 2 - - - - - - - - - -
C														
D														

New Jersey Police
Crash Investigation Report

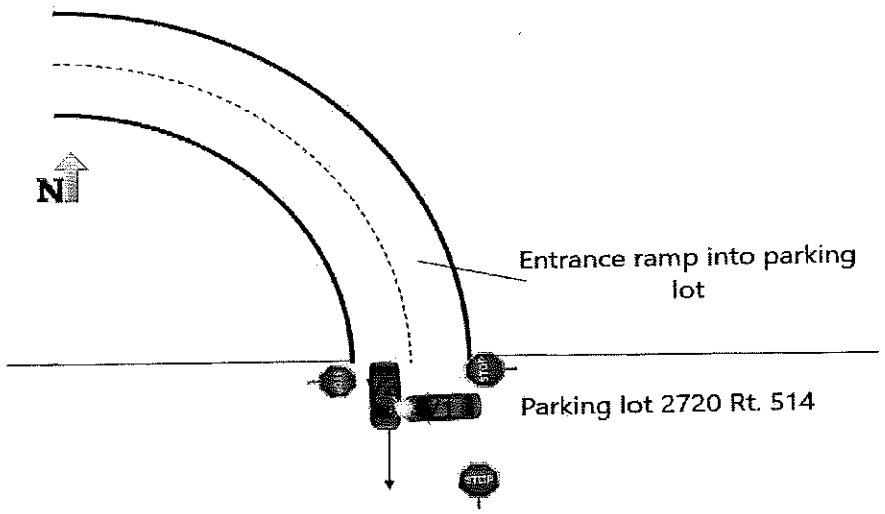
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062104

(Refer to vehicle by number)

	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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The investigation reveals on 10/09/2019, V1 was traveling across the parking lot of 2720 Rt. 514, at which time V2 was entering the parking lot via the ramp and had the right of way to proceed into the parking lot without stopping. At the time when V2 entered into the parking lot, V1 was crossing over the isle of the parking lot near the entry way and struck the driver side of V2. D1 reports that he initially stopped V1 before proceeding to move V1 forward past the parking lot entry way, but during the time when he was crossing over the isle of the parking lot, V2 proceeded into the lot and it was at this time that V1 struck V2.

***Box 118a: D1 was inattentive to the traffic conditions during the time when he was crossing V1 over the parking lot isle near the entrance.**

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DAVID GOLDMAN	0406	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code Box	Value
96	05
97	01
98	01
99	07
100a	01
100b	04
101	02
102	02
103	02
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	02

1 Case Number: 19062115

2 Police Dept of: EDISON POLICE DEPART | Code: 01

3 Station/Precinct: EDISON

4 Date of Crash (mm dd yy): 10/09/19

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1346

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: OLD POST RD (Road Name) | Dir: E | 11 Speed Limit: 25

12 Route No.: - | Suffix: - | 13 Milepost: -

☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: BLVD OF THE EAGLES (17 Cross Road Name) | 18 Speed Limit: 25

14: - 15 16

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

21 Latitude: - | 22 Longitude: -

Vehicle 1

23 Veh #: 1

24 Policy No.: 040932472 | 25 NJ Ins. Code: 11770

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

26 Driver's First Name: YIN | Initial: - | Last Name: LO | - | 29 Sex: M

27 Number & Street: 25 BIDDLE WAY

28 City: MOUNT LAUREL | State: NJ | Zip: 08054

30 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: M | 31 State: NJ

32 Driver's License Number: L60017900004762 | 33 DOB (mm dd yyyy): 04/16/1976 | 34 Expires (mm yy): 04 22

35 Owner's ☐ Same As Driver | First Name: YR SUPPLY INC | Initial: - | Last Name: - | -

36 Number & Street: 1551 WASHINGTON AVE

37 City: PHILADELPHIA | State: PA | Zip: 19146

38 Make: DODGE | 39 Model: GRAND CARA | 40 Color: BK | 41 Year: 2014 | 42 Plate No.: JWH8236 | 43 State: PA

44 VIN: 2C4RDGEG6ER430977 | 45 Expires: 04 19

46 Vehicle Removed To: -

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☐ Driver ☒ Police

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

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

50 Carrier No.: ☐ USDOT - | ☐ MC/MX - | ☐ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: G00925420703 | 55 NJ Ins. Code: 392

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

56 Driver's First Name: MARK | Initial: J | Last Name: BUSS | - | 59 Sex: M

57 Number & Street: 37 MARKHAM RD

58 City: EDISON | State: NJ | Zip: 08817

60 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

62 Driver's License Number: B94545217104642 | 63 DOB (mm dd yyyy): 04/29/1964 | 64 Expires (mm yy): 08 21

65 Owner's ☒ Same As Driver | First Name: MARK | Initial: J | Last Name: BUSS | -

66 Number & Street: 37 MARKHAM RD

67 City: EDISON | State: NJ | Zip: 08817

68 Make: FORD | 69 Model: F SERIES | 70 Color: BK | 71 Year: 2004 | 72 Plate No.: Z93JBG | 73 State: NJ

74 VIN: 1FTNX21LX4EA68501 | 75 Expires: 07 20

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

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

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - | ☐ MC/MX - | ☐ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Code Box	Value
118a	16
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	08
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	09
130	09
131	12
132	12
133	04
134	03

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:4-144	1205G027597	01	39:3-4	1205G027598

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	43	M	-	-	-	11	11	02	-	DRIVER 1 - - - / - - - - - -
B	02	01	01	-	55	M	-	-	-	11	04	-	-	DRIVER 2 - - - / - - - - - -
C	02	03	01	-	52	F	-	-	-	11	04	-	-	CAROL - GUNPHY - / SAME AS RO - - - - -
D														

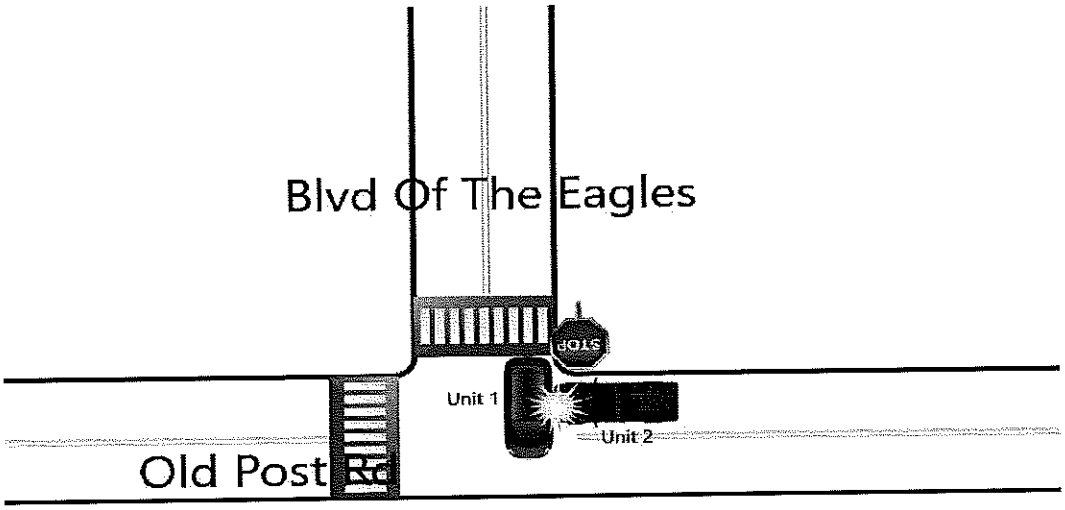
New Jersey Police
Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01
Station: EDISON Case No: 19062115

(Refer to vehicle by number)

	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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 reports he stopped at the stop sign on Blvd of The Eagles attempting to make a left turn, onto Old Post Rd. D1 reports he stopped and proceeded forward and it was at this time V2 impacted V1. V2 was traveling on Old Post Rd approaching the intersection of Old Post Rd and Blvd of The Eagles. D2 reports as V2 approached the intersection V1 pulled out in front of him, and as a result V2 impacted V1. It should be noted that V2 had the right of way nd V1 had a stop sign.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
KASHIF SALAHUDDIN	0434	DECHIRICO	0199	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

PAGE 1 OF 2 ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	19062149
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/09/19
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1652
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On (Road Name)	WOODBRIDGE AVE
Dir	E
11 Speed Limit	35
12 Route No.	0514
Suffix	-
13 Milepost	-
14 / 15 / 16	5 ☒ Feet ☐ Miles ☐ N ☒ E ☐ S ☐ W of:
☐ At Intersection With	
17 Cross Road Name	OLD POST ROAD
18 Speed Limit	35
19 Ramp	☐ To ☐ From:
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Code	Value
96	05
97	01
98	01
99	05
100a	01
100b	04
101	02
102	02
103	05
104	2
105	02
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	02
117	02
118a	02
118b	-
119a	25
119b	-
120a	01
120b	01
121a	01
121b	01
122	03
123	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	03
130	03
131	08
132	08
133	02
134	02

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	4500-50-00-22	54 Policy No.	F280550-5
25 NJ Ins. Code	148	55 NJ Ins. Code	426
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	NICOLETTE - BARRY -	56 Driver's First Name / Initial / Last Name	OCTAVIO - RODRIGUEZ -
29 Sex	F	59 Sex	M
27 Number & Street	21 GAGE ROAD	57 Number & Street	715 RARITAN AVE
28 City / State / Zip	EAST BRUNSWICK NJ 08816	58 City / State / Zip	PERTH AMBOY NJ 08861
30 Eyes	05	60 Eyes	02
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	B06765910054015	62 Driver's License Number	R60946010001802
33 DOB (mm dd yyyy)	04/10/2001	63 DOB (mm dd yyyy)	01/12/1980
34 Expires (mm yy)	04 22	64 Expires (mm yy)	12 21
35 Owner's First Name / Initial / Last Name	☒ Same As Driver NICOLETTE - BARRY -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver HONDA LEASE TRS - - -
36 Number & Street	21 GAGE ROAD	66 Number & Street	201 LITTLE FALLS DRIVE
37 City / State / Zip	EAST BRUNSWICK NJ 08816	67 City / State / Zip	WILMINGTON DE 19808
38 Make	JEEP	68 Make	HONDA
39 Model	WRANGLER	69 Model	PILOT
40 Color	RD	70 Color	WT
41 Year	2013	71 Year	2019
42 Plate No.	P76LEP	72 Plate No.	D16KXN
43 State	NJ	73 State	NJ
44 VIN	1C4GJWAG2DL661401	74 VIN	5FNYF6H31KB027828
45 Expires	04 20	75 Expires	01 22
46 Vehicle Removed To	-	76 Vehicle Removed To	-
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☐ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-	82 Motor Carrier or Government Entity	-
Number & Street	-	Number & Street	-
City / State / Zip	- - -	City / State / Zip	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	-	18	F	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - - -
B	2	01	01	-	39	M	-	-	-	11	04	-	-	DRIVER 2 - - - - - - - - - -
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062149

(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 Dept	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	E														
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Officers Investigation reveals Vehicles 1 and 2 were stopped in traffic Eastbound on Woodbridge Ave when vehicle 1 attempted to make a left hand turn and struck vehicle 2.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MATTHEW MIECZKOWSKI	0433	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 [ ] Fatal

New Jersey Police Crash Investigation Report

[X] Reportable [ ] Non-Reportable [ ] Change Report

96	97	98	99	100a	100b	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117
05	02	01	02	01	04	02	01	01	2	01	-	-	04	01	01	01	-	-	-	-	03	03

1 Case Number: 19062150

2 Police Dept of: EDISON POLICE DEPART — Code: 01

3 Station/Precinct: NJ0120500

4 Date of Crash (mm dd yy): 10/09/19 — 5 Day Of Week: WEDNESDAY — 6 Time (use 2400 hrs): 1654 — 7 Municipality Code: 1205 — 8 Total Killed: -- — 9 Total Injured: --

10 Crash Occurred On: LINCOLN HIGHWAY (Road Name) — Dir: S — 11 Speed Limit: 45 — 12 Route No.: 0027 — Suffix: - — 13 Milepost: -

[ ] At Intersection With

14: 20 — 15: [X] Feet [ ] Miles — 16: [X] N [ ] E [ ] S [ ] W of: 17 Cross Road Name: CASEY AVENUE — 18 Speed Limit: 25

19 Ramp: [ ] To [ ] From: — 20 Route/Name: - — [ ] NB [ ] EB [ ] SB [ ] WB

21 Latitude: - — 22 Longitude: -

118a	118b	119a	119b	120a	120b	121a	121b	122	123	124	125	126a	126b	126c	126d	126e	127a	127b	127c	127d	127e	128	129	130	131	132	133	134
02	02	25	25	01	01	01	01	07	07	04	04	26	-	-	-	26	26	-	-	-	26	26	12	12	06	06	03	03

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 4311 22 92 09 — 25 NJ Ins. Code: 100

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

26 Driver's First Name: EDITE MARIA — Initial: - — Last Name: DA CRUZ BRANCO - — 29 Sex: F

27 Number & Street: 14408 CHESTERFIELD ROAD

28 City: ROCKVILLE — State: MD — Zip: 20853

30 Eyes: 02 — DL Class: C — Restrictions: AU — Endorsements: NO — 31 State: MD

32 Driver's License Number: D 262 174 585 386 — 33 DOB (mm dd yyyy): 05/22/1969 — 34 Expires (mm yy): 05 20

35 Owner's [ ] Same As Driver — First Name: FERNANDO — Initial: C — Last Name: PROTASIO -

36 Number & Street: 14 STURGIS RD

37 City: EDISON — State: NJ — Zip: 08817

38 Make: KIA — 39 Model: SORENTO — 40 Color: WT — 41 Year: 2016 — 42 Plate No.: T32FYB — 43 State: NJ

44 VIN: 5XYPHDA15GG012459 — 45 Expires: 09 19

46 Vehicle Removed To: PARKED ON PRIVATE PROPERTY

[ ] Driven [ ] Towed Disabled [ ] Towed Disabled & Impounded [X] Left At Scene [ ] Towed Impounded

47 Authority: [ ] Owner [ ] Driver [X] Police

48 Alcohol/Drug Test — Given: [X] No [ ] Yes [ ] Refused — Type: [ ] Breath [ ] Blood [ ] Urine — Results: 0. - % [ ] Pending

49 Hazardous Material: [X] None [ ] On Board [ ] Spill — Hazard Class: - — Placard No.: -

50 Carrier No.: [ ] USDOT - [ ] MC/MX - [X] None

51 GVWR/GCWR: [ ] Weight <= 10,000 lbs [ ] Weight 10,001-26,000 lbs [ ] Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2 — 54 Policy No.: 17129007 — 55 NJ Ins. Code: 134

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

56 Driver's First Name: RODOLFO — Initial: D — Last Name: CARDONA 2N — 59 Sex: M

57 Number & Street: 509 SOUTH 3RD AVENUE

58 City: HIGHLAND PARK — State: NJ — Zip: 08904

60 Eyes: 02 — DL Class: D — Restrictions: 1 — Endorsements: NO — 61 State: NJ

62 Driver's License Number: C0570 66364 10902 — 63 DOB (mm dd yyyy): 10/04/1990 — 64 Expires (mm yy): 02 20

65 Owner's [X] Same As Driver — First Name: RODOLFO — Initial: D — Last Name: CARDONA 2N

66 Number & Street: 509 SOUTH 3RD AVENUE

67 City: HIGHLAND PARK — State: NJ — Zip: 08904

68 Make: ACURA — 69 Model: TSX — 70 Color: BK — 71 Year: 2006 — 72 Plate No.: L51DJM — 73 State: NJ

74 VIN: JH4CL96936C021784 — 75 Expires: 08 20

76 Vehicle Removed To: DRIVEN AWAY

[X] Driven [ ] Towed Disabled [ ] Towed Disabled & Impounded [ ] Left At Scene [ ] Towed Impounded

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: [X] None [ ] On Board [ ] Spill — Hazard Class: - — Placard No.: -

80 Carrier No.: [ ] USDOT - [ ] MC/MX - [X] None

81 GVWR/GCWR: [ ] Weight <= 10,000 lbs [ ] Weight 10,001-26,000 lbs [ ] Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property: [ ] Yes (If Yes, describe) [X] No

NONE

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	CARELESS DRIVING 39:4-97	G-022313	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
1	UNREGISTERED VEH 39:3-4	G-022314	-	-	-

	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	-	50	F	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - -
B	2	01	01	-	29	M	-	-	-	11	04	-	-	DRIVER 2 - - - - - - - - -
C														
D														

New Jersey Police Crash Investigation Report

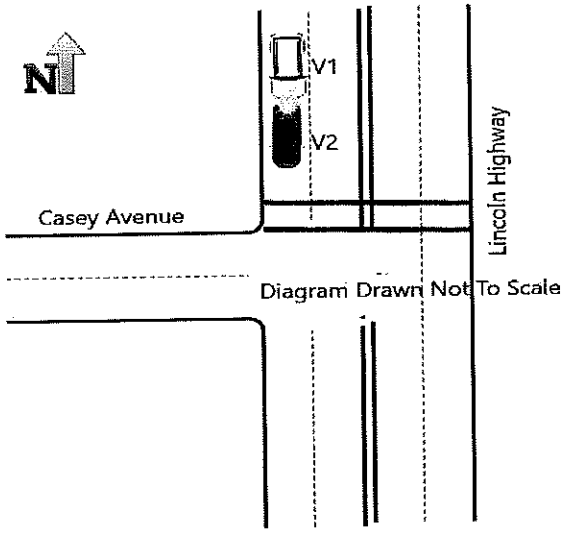
Police Dept: EDISON POLICE DEPAR Code: 01

Station: NJ0120500 Case No: 19062150

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Crash Investigation revealed that Vehicle 2 was traveling Lincoln Hwy (Rte 27) south in the right lane of travel when traffic came to an abrupt stop. Driver 2 stated that he had to brake suddenly and was able to stop but then was struck in the rear by Vehicle 1. Vehicle 1 was traveling Lincoln Hwy southbound directly behind Vehicle 2 and did not realize that the traffic in front of Vehicle 2 came to a sudden abrupt stop. Driver 1 stated that she attempted to stop but was unable to stop in time and Vehicle 1 impacted Vehicle 2 in the rear. No injuries were reported. No cell phones were claimed to be in use at the time of the impact.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
TIMOTHY FARRELL	0332	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 01

1 Case Number: 19062174

97: 01

2 Police Dept of: EDISON POLICE DEPART | Code: 01

98: 06

3 Station/Precinct: -

99: 02

4 Date of Crash mm dd yy: 10/09/19

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1925

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: US ROUTE 1 | Road Name | S | Dir

☐ At Intersection With

☐ Feet ☐ N ☐ E of: -

☐ Miles ☐ S ☐ W

14 15 16

11 Speed Limit: 50

12 Route No.: 0001 | Suffix: - | 13 Milepost: -

18 Speed Limit: -

19 Ramp ☐ To ☒ From: PIERSON AVE | 17 Cross Road Name | 20 Route/Name

☐ NB ☒ EB ☐ SB ☐ WB

21 Latitude: -

22 Longitude: -

118a: 09
118b: -
119a: 25
119b: 01
120a: 01
120b: -

100a: 01

23 Veh #: 1

24 Policy No.: 939461538

25 NJ Ins. Code: 054

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

100b: 04

101: 02

26 Driver's First Name: ANTONI | Initial: M | Last Name: FRANCZAK | - | 29 Sex: M

102: 01

27 Number & Street: 121 KOSCIUSKO AVE

103: 01

28 City: SOUTH PLAINFIELD | State: NJ | Zip: 07080

104: 2

30 Eyes: 05 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ

105: 01

32 Driver's License Number: F71750547401945

33 DOB mm dd yyyy: 01/17/1994

34 Expires mm yy: 01 | 23

106: -

35 Owner's Name: ☐ Same As Driver | RYSZARD | Initial: - | Last Name: KLOSKOWSKI | -

107: -

36 Number & Street: 147 SOUTH 6TH AVE

108: 01

37 City: MANVILLE | State: NJ | Zip: 08835

109: 01

38 Make: KIA | 39 Model: SEDONA | 40 Color: SL | 41 Year: 2015 | 42 Plate No.: H36LCJ | 43 State: NJ

110: 01

44 VIN: KNDPBCAC9F7723719

45 Expires: 03 | 20

111: 01

46 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

112: -

113: -

47 Authority: ☐ Owner ☒ Driver ☐ Police

114: -

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

115: -

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill

Hazard Class: - | Placard No.: -

116: 03

50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

117: 03

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

54 Policy No.: 4407-58-04-57

53 Veh #: 2

55 NJ Ins. Code: 148

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

121a: 01

56 Driver's First Name: LETIAN | Initial: - | Last Name: LIU | - | 59 Sex: F

121b: -

57 Number & Street: 10 BARCLEY CT

58 City: PLAINSBORO | State: NJ | Zip: 08536

60 Eyes: 01 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

122: 06

62 Driver's License Number: L47414640054631

63 DOB mm dd yyyy: 04/08/1963

64 Expires mm yy: 04 | 22

123: 08

65 Owner's Name: ☒ Same As Driver | LETIAN | Initial: - | Last Name: LIU | -

124: 09

66 Number & Street: 10 BARCLEY CT

125: 09

67 City: PLAINSBORO | State: NJ | Zip: 08536

126a: 26

68 Make: MERCEDES-B | 69 Model: GLK-CLASS | 70 Color: WT | 71 Year: 2014 | 72 Plate No.: G62HPP | 73 State: NJ

126b: -

74 VIN: WDCGG8JB2EG314413

75 Expires: 05 | 20

126c: -

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

126d: -

126e: 26

77 Authority: ☒ Owner ☐ Driver ☐ Police

127a: 26

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

127b: -

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill

Hazard Class: - | Placard No.: -

127c: -

80 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

127d: -

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

127e: 26

82 Motor Carrier or Government Entity: -

128: 26

Number & Street: -

129: 12

City: - | State: - | Zip: -

130: 12

131: 06

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

-

132: 06

Oper.: - | 136 Charge: - | 137 Summons. No.: -

Oper.: - | 138 Charge: - | 139 Summons. No.: -

133: 02

Oper.: - | 140 Charge: - | 141 Summons. No.: -

Oper.: - | 142 Charge: - | 143 Summons. No.: -

134: 03

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	25	M	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - -
B														
C														
D														

New Jersey Police
Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

Station: -- Case No: 19062174

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

vehicles moved prior

145 Crash Description/Narrative

D2 stated that she was stopped waiting to merge onto US Route 1 South from Pierson Avenue when V1 struck her from behind.

D1 stated that D2 started to merge onto Route 1 but then stopped for a incoming vehicle. D1 stated he thought V2 left prior to striking D2 from behind.

No injuries reported on location.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DANIEL BRADLEY	0414	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 19062179
2 Police Dept of: EDISON POLICE DEPART | Code: 01
3 Station/Precinct: NJ0120500
4 Date of Crash (mm dd yy): 10/09/19
5 Day Of Week: WEDNESDAY
6 Time (use 2400 hrs): 2002
7 Municipality Code: 1205
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: TALMADGE ROAD (Road Name) | Dir: S | 11 Speed Limit: 35 | 12 Route No.: - | Suffix: - | 13 Milepost: -
☐ At Intersection With
14: 400 | 15: ☒ Feet ☐ Miles | 16: ☒ N ☐ E ☐ S ☐ W of: OROSZ BLVD (17 Cross Road Name) | 18 Speed Limit: 25
19 Ramp: ☐ To ☐ From: - (20 Route/Name) | ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude: - | 22 Longitude: -

Vehicle 1

23 Veh #: 1
24 Policy No.: 0110749-0
25 NJ Ins. Code: 135
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: PHILIP | Initial: C | Last Name: FERREIRA | - | 29 Sex: M
27 Number & Street: 21 DEAD RIVER RD
28 City: WARREN | State: NJ | Zip: 07059
30 Eyes: 04 | DL Class: B | Restrictions: NONE | Endorsements: M | 31 State: NJ
32 Driver's License Number: F2741 62663 02764
33 DOB (mm dd yyyy): 02/18/1976
34 Expires (mm yy): 02 21
35 Owner's ☐ Same As Driver | First Name: ANTHONY PHILIP | Initial: - | Last Name: ENTRPRS INC | -
36 Number & Street: 21 DEAD RIVER ROAD
37 City: WARREN | State: NJ | Zip: 07059
38 Make: VOLVO | 39 Model: UNKNOWN | 40 Color: RD | 41 Year: 2006 | 42 Plate No.: XGMB70 | 43 State: NJ
44 VIN: 4V5KC9GH86N406958 | 45 Expires: 07 20
46 Vehicle Removed To: DRIVEN AWAY
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test — Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -
50 Carrier No.: ☒ USDOT 3151184 ☐ None | ☐ MC/MX -
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☒ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: ANTHONY PHILIP ENTERPRISES INC.,
Number & Street: 21 DEAD RIVER RD
City: WARREN | State: NJ | Zip: 07059

Vehicle 2

53 Veh #: 2
54 Policy No.: AOJ 238 125785 70 9 9
55 NJ Ins. Code: 370
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: KIM | Initial: D | Last Name: FAIGAO | - | 59 Sex: M
57 Number & Street: 9 HERRON RD
58 City: EDISON | State: NJ | Zip: 08820
60 Eyes: 02 | DL Class: D | Restrictions: NONE | Endorsements: NO | 61 State: NJ
62 Driver's License Number: F0180 43464 02762
63 DOB (mm dd yyyy): 02/02/1976
64 Expires (mm yy): 04 20
65 Owner's ☒ Same As Driver | First Name: KIM | Initial: D | Last Name: FAIGAO | -
66 Number & Street: 9 HERRON RD
67 City: EDISON | State: NJ | Zip: 08820
68 Make: HONDA | 69 Model: CIVIC | 70 Color: WT | 71 Year: 2017 | 72 Plate No.: S84HDN | 73 State: NJ
74 VIN: SHHFK7H54HU404203 | 75 Expires: 11 20
76 Vehicle Removed To: EXPRESS TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test — Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -
80 Carrier No.: ☐ USDOT - ☒ None | ☐ MC/MX -
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity: -
Number & Street: -
City: - | State: - | Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No
NONE

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

Occupants

	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	02	-	43	M	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - -
B	2	01	01	-	43	M	-	-	-	11	04	-	-	DRIVER 2 - - - - - - - - -
C	2	03	01	-	40	F	-	-	-	11	04	-	-	GRACE C FAIGAO - 9 HERRON RD EDISON NJ 08820 06/22/1979 -
D	2	04	01	-	4	M	-	-	-	07	07	-	-	KINDRED G FAIGAO - 9 HERRON RD EDISON NJ 08820 10/02/2013 -

Code boxes

Box	Value
96	05
97	02
98	07
99	07
100a	02
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	21
109	01
110	02
111	01
112	19
113	-
114	06
115	-
116	02
117	03
118a	02
118b	02
119a	25
119b	25
120a	01
120b	01
121a	01
121b	01
122	03
123	08
124	01
125	01
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	01
130	01
131	05
132	05
133	02
134	04

New Jersey Police Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

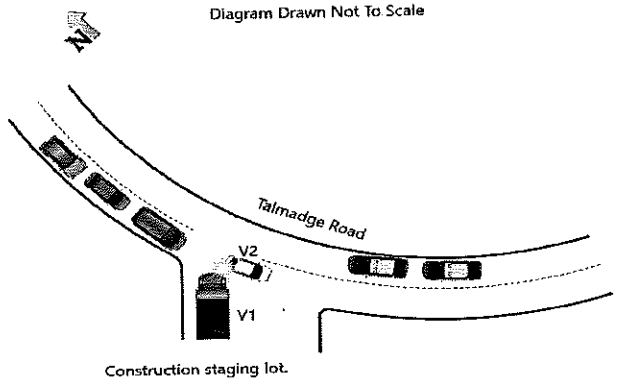
Station: NJ0120500 Case No: 19062179

(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 Dept	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 E	2	06	01	-	6	F	-	-	-	04	04	-	-	PEYTON Y FAIGAO - 9 HERRON RD EDISON NJ 08820 12/08/2008 -
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

Diagram Drawn Not To Scale



145 Crash Description/Narrative

Crash investigation revealed that Vehicle 2 was stopped in traffic due to a police officer's directions, while heading south on Talmadge Road which was under temporary construction for milling and repaving. The officer's on the scene had stopped traffic to allow construction trucks to exit a staging area just off of Talmadge Road. The trucks began entering the roadway and were making a left turn onto Talmadge Road northbound. Vehicle 1 was not directly in the line of trucks entering the road but was slightly off to the left. Vehicle 1 then entered the roadway but cut to the left instead of straight out and did not see Vehicle 2 stopped in the roadway due to it being in blind spot below Driver 1's sightline. Driver 1 stated that due to the bright strobe lights from the police and construction vehicles, it was very difficult to see and he was unable to see Vehicle 2 where it was stopped in the roadway. Vehicle 1 then impacted Vehicle 2 in the right rear quarter panel with it's right front bumper. No injuries were reported.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
TIMOTHY FARRELL	0332	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05		
97	01	1 Case Number	19062267
98	01	2 Police Dept of	EDISON POLICE DEPART
		Code	01
99	05	3 Station/Precinct	-
100a	01	4 Date of Crash mm dd yy	10/10/19
		5 Day Of Week	THURSDAY
		6 Time (use 2400 hrs)	0710
		7 Municipality Code	1205
		8 Total Killed	--
		9 Total Injured	--
		10 Crash Occurred On:	PARSONAGE RD.
		Road Name	
		☐ At Intersection With	
		☒ Feet ☐ Miles	50
		14 15 16	
		☐ N ☒ E ☐ S ☐ W of:	OAKWOOD AVE.
		17 Cross Road Name	
		19 Ramp ☐ To ☐ From:	-
		20 Route/Name	
		☐ NB ☐ EB ☐ SB ☐ WB	
		21 Latitude	-
		22 Longitude	-
		W Dir	
		11 Speed Limit	35
		12 Route No.	0630
		Suffix	-
		13 Milepost	-
118a	05	18 Speed Limit	25
118b	02		
119a	25		
119b	-		
120a	00		
120b	-		

Vehicle 1

100b	05	23 Veh #	1
101	02	24 Policy No.	UNK
		25 NJ Ins. Code	--------
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run	
102	01	26 Driver's First Name Initial Last Name	- - -
		29 Sex	-
103	01	27 Number & Street	-
104	2	28 City State Zip	- -
		30 Eyes DL Class Restrictions Endorsements	- - - -
		31 State	-
105	02	32 Driver's License Number	-
		33 DOB mm dd yyyy	-
		34 Expires mm yy	-
106	-	35 Owner's First Name Initial Last Name ☐ Same As Driver	RODRIMAR CORP - -
107	-	36 Number & Street	514 GREAT BEDS COURT
108	05	37 City State Zip	PERTH AMBOY NJ 08861
109	01	38 Make	NISSAN
		39 Model	FRONTIER
		40 Color	RD
		41 Year	2013
		42 Plate No.	D18GXT
		43 State	NJ
110	01	44 VIN	1N6AD0EV7DN738770
		45 Expires	06 20
111	00	46 Vehicle Removed To	DRIVER
112	-	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113	-	47 Authority ☐ Owner ☒ Driver ☐ Police	
114	-	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending	
115	-	49 Hazardous Material ☐ None ☐ On Board ☐ Spill Hazard Class - Placard No. -	
116	04	50 Carrier No. ☐ USDOT - ☐ None ☐ MC/MX -	
117	04	51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
		52 Motor Carrier or Government Entity	-
		Number & Street	-
		City State Zip	- -

Vehicle 2

		53 Veh #	2
		54 Policy No.	A022312593270085
		55 NJ Ins. Code	182
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
121a	01	56 Driver's First Name Initial Last Name	LESLIE C WILLETT-BROWN -
		59 Sex	F
121b	-	57 Number & Street	18 HARDING AVE.
		58 City State Zip	EDISON NJ 08820
122	11	60 Eyes DL Class Restrictions Endorsements	02 D - -
		61 State	NJ
123	01	62 Driver's License Number	W43604626357962
		63 DOB mm dd yyyy	07/05/1996
		64 Expires mm yy	07 22
124	04	65 Owner's First Name Initial Last Name ☐ Same As Driver	RICHARD L WILLETT -
125	04	66 Number & Street	18 HARDING AVE.
126a	26	67 City State Zip	EDISON NJ 08820
126b	26	68 Make	HONDA
		69 Model	CIVIC
		70 Color	SL
		71 Year	2015
		72 Plate No.	B50GNC
		73 State	NJ
126c	-	74 VIN	19XFB2F51FE252858
		75 Expires	04 20
126d	-	76 Vehicle Removed To	DRIVER
126e	26	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
127a	26	77 Authority ☐ Owner ☒ Driver ☐ Police	
127b	-	78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending	
127c	-	79 Hazardous Material ☐ None ☐ On Board ☐ Spill Hazard Class - Placard No. -	
127d	-	80 Carrier No. ☐ USDOT - ☐ None ☐ MC/MX -	
127e	26	81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
128	26	82 Motor Carrier or Government Entity	-
129	00	Number & Street	-
130	00	City State Zip	- -

131	08	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No	-
132	08	Oper. 136 Charge	01 39:4-97
		137 Summons. No.	G028469
133	00	Oper. 140 Charge	01 39:4-130
		141 Summons. No.	G028471
134	02	Oper. 138 Charge	01 39:3-29B
		139 Summons. No.	G028470
		Oper. 142 Charge	-
		143 Summons. No.	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	-	-	-	-	-	00	00	-	-	D1 -
B	02	01	01	-	23	F	-	-	-	11	04	-	-	D2 -
C														
D														

New Jersey Police Crash Investigation Report

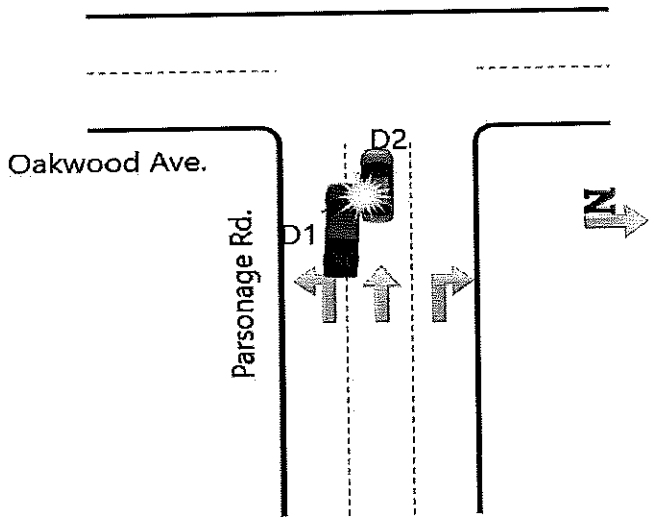
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062267

(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 Dept	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	E														
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D2 stated that she was driving straight in the middle (straight) lane of Parsonage Rd. W. when D1 moved into her lane from the left (left turn) lane of Parsonage Rd. W. and sideswiped the drivers side rear door area of her vehicle. D1 got behind D2 in traffic and continued to drive. D2 also continued to drive. At the next intersection (Parsonage Rd./Rte 27) D1 turned left onto Rte 27S and continued to drive. D2 attempted to get the attention of D1 once stopped. D1 never acknowledged D2 . D2 has a picture of D1 vehicle and plate # listed above. An unknown witness spoke to D2 at that intersection but did not leave his information. D2 reported the incident once she arrived at work. Perth Amboy PD was notified and requested to make notification to the registered owner/driver of D1.

Unable to make contact with D1 as of 10/11/2019.
Summonses issued

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
JONATHAN KOLE	0317	DECHIRICO	0199	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Value
96	03
97	01
98	01
99	-
100	05
100a	01
100b	04
101	02
102	01
103	01
104	5
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	04

Code	Value
118a	18
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	08
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	26
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	03
134	03

1 Case Number: 19062265
2 Police Dept of: EDISON POLICE DEPART Code: 01
3 Station/Precinct: -

10 Crash Occurred On: WOODBRIDGE AVE (Road Name) Dir: W 11 Speed Limit: 45 12 Route No.: 0514 Suffix: - 13 Milepost: -
☐ At Intersection With
14: 100 15: ☒ Feet ☐ Miles 16: ☐ N ☒ E ☐ S ☐ W of: MANNING ST (17 Cross Road Name) 18 Speed Limit: 25
19 Ramp: ☐ To ☐ From: - 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude: - 22 Longitude: -

4 Date of Crash (mm dd yy): 10/10/19
5 Day Of Week: THURSDAY
6 Time (use 2400 hrs): 0752
7 Municipality Code: 1205
8 Total Killed: --
9 Total Injured: 4

Vehicle 1

23 Veh #: 1
24 Policy No.: 4272-85-01-18
25 NJ Ins. Code: 148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: NIHAALAHM Initial: R Last Name: PAWASKAR -
29 Sex: M
27 Number & Street: 1809 WOODBRIDGE COMMONS WAY
28 City: ISELIN State: NJ Zip: 08830
30 Eyes: 01 DL Class: D Restrictions: T Endorsements: -
31 State: NJ
32 Driver's License Number: P09285927910001
33 DOB (mm dd yyyy): 10/28/2000
34 Expires (mm yy): 10 22
35 Owner's ☐ Same As Driver First Name: RAYEESAHM Initial: F Last Name: PAWASKAR -
36 Number & Street: 98 COLONIA RD
37 City: COLONIA State: NJ Zip: 07067
38 Make: HONDA 39 Model: ACCORD 40 Color: BG 41 Year: 2003 42 Plate No.: L10CCY 43 State: NJ
44 VIN: 1HGCM56313A024453
45 Expires: 07 20
46 Vehicle Removed To: MANDYS
☐ Driven ☐ Towed Disabled ☒ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine
Results: 0. - % ☐ Pending
49 Hazardous Material: ☐ None ☐ On Board ☐ Spill
Hazard Class: - Placard No.: -
50 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: -
Number & Street: -
City: - State: - Zip: -

Vehicle 2

53 Veh #: 2
54 Policy No.: 932249912
55 NJ Ins. Code: 134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: MICHELLE Initial: - Last Name: MIRANDA -
59 Sex: F
57 Number & Street: 446 HORIZON DR
58 City: EDISON State: NJ Zip: 08817
60 Eyes: 02 DL Class: D Restrictions: 1 Endorsements: -
61 State: NJ
62 Driver's License Number: M45895440060942
63 DOB (mm dd yyyy): 10/05/1994
64 Expires (mm yy): 08 20
65 Owner's ☒ Same As Driver First Name: MICHELLE Initial: - Last Name: MIRANDA -
66 Number & Street: 446 HORIZON DR
67 City: EDISON State: NJ Zip: 08817
68 Make: TOYOTA 69 Model: CAMRY 70 Color: BK 71 Year: 2019 72 Plate No.: J84LSK 73 State: NJ
74 VIN: 4T1B11HK2KU827362
75 Expires: 08 22
76 Vehicle Removed To: MANDYS
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine
Results: 0. - % ☐ Pending
79 Hazardous Material: ☐ None ☐ On Board ☐ Spill
Hazard Class: - Placard No.: -
80 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity: -
Number & Street: -
City: - State: - Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No
-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:4-97	G028547	2	NONE	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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	18	M	08	08	01	11	11	01	-	DRIVER 1 - - - - - - - - -
B	2	01	01	04	25	F	04	08	01	11	04	-	-	DRIVER 2 - - - - - - - - -
C	3	01	01	04	37	M	01	08	02	11	04	-	6201	DRIVER 3 - - - - - - - - -
D	3	06	01	04	18	F	06	08	02	04	04	-	6201	KHAIRAH - BEAMAN - 49 WALL ST METUCHEN NJ 08840 - -

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
96	03
97	01
98	01
99	05
100a	01
100b	04
101	02
102	01
103	01
104	5
105	01
106	-
107	-
108	01
109	01
110	02
111	01
112	-
113	-
114	-
115	-
116	04
117	04

1 Case Number: 19062265

2 Police Dept of: EDISON POLICE DEPARTI — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 10/10/19 — 5 Day Of Week: THURSDAY — 6 Time (use 2400 hrs): 0752 — 7 Municipality Code: 1205 — 8 Total Killed: -- — 9 Total Injured: 4

10 Crash Occurred On: WOODBRIDGE AVE (Road Name) — Dir: W — 11 Speed Limit: 45 — 12 Route No.: 0514 — Suffix: - — 13 Milepost: -

☐ At Intersection With

14: 100 — 15: ☒ Feet ☐ Miles — 16: ☐ N ☒ E ☐ S ☐ W of: MANNING ST (17 Cross Road Name) — 18 Speed Limit: 25

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

21 Latitude: - — 22 Longitude: -

Field	Value
118a	25
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	08
123	08
124	03
125	03
126a	26
126b	26
126c	-
126d	-
126e	26
127a	26
127b	26
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	06
132	06
133	03
134	03

Vehicle 3

23 Veh #: 3 — 24 Policy No.: 076 5998-D13-30K — 25 NJ Ins. Code: 962

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

26 Driver's First Name: ALBERTO — Initial: D — Last Name: GONZALES - — 29 Sex: M

27 Number & Street: 19 STONY RD

28 City: EDISON — State: NJ — Zip: 08817

30 Eyes: 02 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: G64590176405812 — 33 DOB (mm dd yyyy): 05/10/1981 — 34 Expires (mm yy): 09 20

35 Owner's: ☒ Same As Driver — First Name: ALBERTO — Initial: D — Last Name: GONZALES -

36 Number & Street: 19 STONY RD

37 City: EDISON — State: NJ — Zip: 08817

38 Make: TOYOTA — 39 Model: MATRIX — 40 Color: GY — 41 Year: 2008 — 42 Plate No.: Y78LMX — 43 State: NJ

44 VIN: 2T1KR32E28C718093 — 45 Expires: 08 20

46 Vehicle Removed To: -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

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

49 Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

50 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 4

53 Veh #: 4 — 54 Policy No.: 910453049 — 55 NJ Ins. Code: 134

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

56 Driver's First Name: SUMMER — Initial: A — Last Name: WUCHTER - — 59 Sex: F

57 Number & Street: 144 EAST 6TH AVE

58 City: ROSELLE — State: NJ — Zip: 07203

60 Eyes: 04 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: W90577266152994 — 63 DOB (mm dd yyyy): 02/24/1999 — 64 Expires (mm yy): 02 24

65 Owner's: ☒ Same As Driver — First Name: SUMMER — Initial: A — Last Name: WUCHTER -

66 Number & Street: 144 EAST 6TH AVE

67 City: ROSELLE — State: NJ — Zip: 07203

68 Make: HONDA — 69 Model: CIVIC — 70 Color: BL — 71 Year: 2017 — 72 Plate No.: M64JKL — 73 State: NJ

74 VIN: 2HGFC2F59HH549401 — 75 Expires: 10 20

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☐ Driver ☒ Police

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

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

80 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
3	NONE	-	4	NONE	-
Oper.	**140 Charge**	**141 Summons. No.**	**Oper.**	**142 Charge**	**143 Summons. No.**
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	4	01	01	-	20	F	-	-	-	11	04	-	-	DRIVER 4 - - - - - - - - -
B	5	01	01	-	59	M	-	-	-	11	04	-	-	DRIVER 5 - - - - - - - - -
C														
D														

PAGE 3 OF 4 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	03
97	01
98	01
99	05
100a	01
100b	04
101	02
102	01
103	01
104	5
105	01
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	04
117	-

1 Case Number: 19062265

2 Police Dept of: EDISON POLICE DEPART | Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 10/10/19

5 Day Of Week: THURSDAY

10 Crash Occurred On: WOODBRIDGE AVE (Road Name) | W (Dir) | 11 Speed Limit: 45

☐ At Intersection With

☒ Feet ☐ Miles | 100 | ☐ N ☒ E ☐ S ☐ W of: MANNING ST

12 Route No.: 0514 | Suffix: - | 13 Milepost: -

18 Speed Limit: 25

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

20 Route/Name: -

21 Latitude: - | 22 Longitude: -

6 Time (use 2400 hrs): 0752 | 7 Municipality Code: 1205 | 8 Total Killed: -- | 9 Total Injured: 4

118a	25
118b	-
119a	-
119b	-
120a	01
120b	-
121a	-
121b	-
122	08
123	-
124	03
125	-
126a	26
126b	-
126c	-
126d	-
126e	26
127a	-
127b	-
127c	-
127d	-
127e	-
128	26
129	06
130	06
131	-
132	-
133	03
134	-

Vehicle 1

23 Veh #: 5 | 24 Policy No.: 00481 31 47U 7104 8 | 25 NJ Ins. Code: 355

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

26 Driver's First Name: ARTHUR | Initial: J | Last Name: CRISS | 29 Sex: M

27 Number & Street: 102 OAK HILL DR

28 City: TOMS RIVER | State: NJ | Zip: 08753

30 Eyes: 04 | DL Class: D | Restrictions: - | Endorsements: -

31 State: NJ

32 Driver's License Number: C74510617111604

33 DOB (mm dd yyyy): 11/21/1960

34 Expires (mm yy): 08 21

35 Owner's First Name: ☒ Same As Driver ARTHUR | Initial: J | Last Name: CRISS

36 Number & Street: 102 OAK HILL DR

37 City: TOMS RIVER | State: NJ | Zip: 08753

38 Make: HONDA | 39 Model: CR-V | 40 Color: BK | 41 Year: 2011 | 42 Plate No.: X18FRB | 43 State: NJ

44 VIN: 5J6RE4H30BL016645

45 Expires: 07 20

46 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

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

49 Hazardous Material: ☐ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.:

50 Carrier No.: ☐ USDOT - ☐ None | ☐ MC/MX -

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 2

53 Veh #: - | 54 Policy No.: - | 55 NJ Ins. Code: -

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

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

57 Number & Street: -

58 City: - | State: - | Zip: -

60 Eyes: - | DL Class: - | Restrictions: - | Endorsements: -

61 State: -

62 Driver's License Number: -

63 DOB (mm dd yyyy): -

64 Expires (mm yy): - -

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

66 Number & 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 ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☐ Driver ☐ Police

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

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.:

80 Carrier No.: ☐ USDOT - ☐ None | ☐ MC/MX -

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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														

New Jersey Police Crash Investigation Report

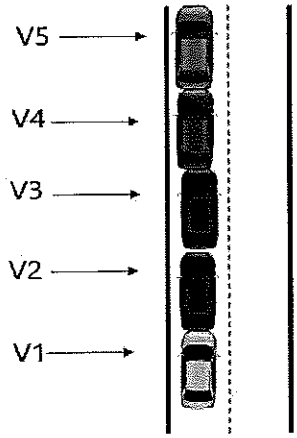
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062265

(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 Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



Not to Scale

Woodbridge Ave

145 Crash Description/Narrative

Based on the statements of the drivers, the position of the vehicles and the location of the damage my investigation revealed the following events: Vehicles #2, #3, #4, #5 were stopped in the left lane of Woodbridge Ave west bound in the area of Manning St when Vehicle #1 crashed into the rear of Vehicle #2. The crash set in motion a chain reaction causing Vehicle #2 to strike Vehicle #3, Vehicle #3 to strike Vehicle #4, Vehicle #4 to strike Vehicle #5. Driver #1 who possesses a Provisional Drivers License stated that he was looking down at "Maps" on his phone prior to the crash.

Driver #1 and #2 will seek medical attention on their own.

Driver #3 is a ride share driver that had a passenger in the rear seat. He and his passenger were transported to JFK Medical Center by JFK Emergency Services with complaints of pain.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WILLIAM COLLETTO	0269	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96: 05

1 Case Number: 19062280

97: 01

2 Police Dept of: EDISON POLICE DEPART | Code: 01

98: 01

3 Station/Precinct: -

99: 05

4 Date of Crash (mm dd yy): 10/10/19

100a: 01

5 Day Of Week: THURSDAY

6 Time (use 2400 hrs): 0835

7 Municipality Code: 1205

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: INMAN AVE. | W | Road Name | Dir

☐ At Intersection With

☒ Feet ☐ Miles (14 / 15)

☐ N ☒ E ☐ S ☐ W of: OLD RARITAN RD.

11 Speed Limit: 35

12 Route No.: 0602 | Suffix: - | 13 Milepost: -

18 Speed Limit: 25

19 Ramp ☐ To ☐ From:

17 Cross Road Name: -

20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: -

22 Longitude: -

118a: 02
118b: -
119a: 25
119b: -
120a: 01

100b: 04

23 Veh #: 1

24 Policy No.: SELF INSURED

25 NJ Ins. Code: --------

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

120b: -

101: 02

26 Driver's First Name: MADISON | Initial: A | Last Name: HINDMARSH -

29 Sex: F

102: 01

27 Number & Street: 635 SUSQUEHANNA AVE.

103: 01

28 City: WYOMING | State: PA | Zip: 18644

104: 2

30 Eyes: 04 | DL Class: C | Restrictions: - | Endorsements: -

31 State: PA

105: 01

32 Driver's License Number: 31286041

33 DOB (mm dd yyyy): 10/12/1996

34 Expires (mm yy): 10 20

106: -

35 Owner's ☐ Same As Driver: EAN HOLDINGS - - -

107: -

36 Number & Street: STE 1500 14002 E 21ST ST

108: 01

37 City: TULSA | State: OK | Zip: 74134

109: 04

38 Make: HYUNDAI | 39 Model: ELANTRA | 40 Color: RD | 41 Year: 2020 | 42 Plate No.: LDL7826 | 43 State: PA

110: 01

44 VIN: 5NPD84LF6LH537531

45 Expires: 10 19

111: 01

46 Vehicle Removed To: DRIVER

112: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

113: -

47 Authority: ☐ Owner ☒ Driver ☐ Police

114: -

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

115: -

49 Hazardous Material: ☐ None ☐ On Board ☐ Spill

Hazard Class: - | Placard No.: -

116: 04

50 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -

117: 04

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

118a: 02
118b: -
119a: 25
119b: -
120a: 01
120b: -

121a: 01

53 Veh #: 2

54 Policy No.: 9002293067

55 NJ Ins. Code: 141

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

121b: -

122: 06

56 Driver's First Name: ERICA | Initial: K | Last Name: CRACOLICI -

59 Sex: F

123: 06

57 Number & Street: 5 SOFTWOOD WAY

58 City: WARREN | State: NJ | Zip: 07059

60 Eyes: 04 | DL Class: D | Restrictions: - | Endorsements: -

61 State: NJ

62 Driver's License Number: C71302327251924

63 DOB (mm dd yyyy): 01/01/1992

64 Expires (mm yy): 11 21

124: 11

65 Owner's ☐ Same As Driver: MANUEL F MONTERO -

125: 11

66 Number & Street: 38 MADISON AVE.

67 City: AVENEL | State: NJ | Zip: 07001

126a: 26

68 Make: BMW | 69 Model: X5 | 70 Color: SL | 71 Year: 2013 | 72 Plate No.: DSEL | 73 State: NJ

126b: -

74 VIN: 5UXZW0C53D0B90218

75 Expires: 03 20

126c: -

76 Vehicle Removed To: DRIVER

126d: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

126e: 26

77 Authority: ☐ Owner ☒ Driver ☐ Police

127a: 26

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

127b: -

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill

Hazard Class: - | Placard No.: -

127c: -

80 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -

127d: -

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

127e: 26

82 Motor Carrier or Government Entity: -

128: 26

Number & Street: -

129: 12

City: - | State: - | Zip: -

130: 12

131: 06

132: 06

133: 02

134: 02

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	22	F	-	-	-	11	04	-	-	D1 -
B	02	01	01	-	27	F	-	-	-	11	04	-	-	D2 -
C														
D														

New Jersey Police Crash Investigation Report

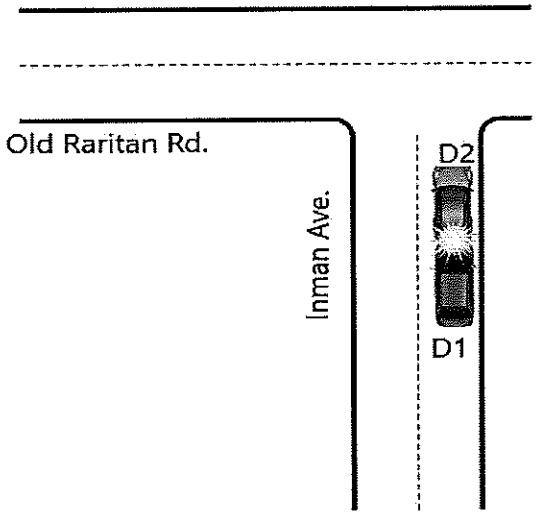
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062280

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D2 was starting in traffic on Inman Ave. W.. D1 was immediately behind D2 on Inman Ave. W.. D1 stated that her car accidentally slipped into neutral and rolled into the rear bumper of D2 causing minor damage.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
JONATHAN KOLE	0317	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 19062290

2 Police Dept of: EDISON POLICE DEPARTI | Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 10/10/19 | 5 Day Of Week: THURSDAY | 6 Time (use 2400 hrs): 0920 | 7 Municipality Code: 1205 | 8 Total Killed: -- | 9 Total Injured: 1

10 Crash Occurred On: LINCOLN HIGHWAY 27 (Road Name) | Dir: N | 11 Speed Limit: 35 | 12 Route No.: 0027 | Suffix: - | 13 Milepost: -

☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: TALMADGE ROAD (17 Cross Road Name) | 18 Speed Limit: 25

14: - | 15 | 16

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

21 Latitude: - | 22 Longitude: -

Field	Vehicle 1	Vehicle 2
Veh # (23/53)	1	2
Policy No. (24/54)	ATP3095494	F432552-8
NJ Ins. Code (25/55)	023	426
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name (26/56)	NELSON - VASQUEZ -	NATALE A FRESCO -
Sex (29/59)	M	M
Number & Street (27/57)	263 OCEAN AVE	38 KEARNY AVE
City / State / Zip (28/58)	BRENTWOOD NY 11717	EDISON NJ 08817
Eyes (30/60)	02	02
DL Class	A	D
Restrictions	A1	NONE
Endorsements	NA	NA
State (31/61)	NY	NJ
Driver's License Number (32/62)	250063419	F73515816105552
DOB mm/dd/yyyy (33/63)	09/22/1981	05/01/1955
Expires mm yy (34/64)	08 20	05 20
Owner's First Name / Initial / Last Name (35/65)	☐ Same As Driver RS EXPRESS INC - - -	☒ Same As Driver NATALE A FRESCO -
Number & Street (36/66)	263 OCEAN AVE	38 KEARNY AVE
City / State / Zip (37/67)	BRENTWOOD NY 11717	EDISON NJ 08817
Make (38/68)	INTERNATIOI	FORD
Model (39/69)	UNKNOWN	F150
Color (40/70)	WT	RD
Year (41/71)	05	07
Plate No. (42/72)	79600PC	YXV11J
State (43/73)	NY	NJ
VIN (44/74)	2HSCNSBR75C025166	1FTPX12V87FB90145
Expires (45/75)	08 20	05 20
Vehicle Removed To (46/76)	-	-
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority (47/77)	☐ Owner ☒ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test (48/78)	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
Hazardous Material (49/79)	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
Carrier No. (50/80)	☒ USDOT 2492356 ☐ None; ☐ MC/MX -	☐ USDOT - ☒ None; ☐ MC/MX -
GVWR/GCWR (51/81)	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☒ Weight >= 26,001 lbs	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity (52/82)	AKG TRANSPORT LLC	-
Number & Street	263 OCEAN AVE	-
City / State / Zip	BRENTWOOD NY 11717	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

NONE

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	29:4-97	1205-G-027062	2	-	-
Oper.	**140 Charge**	**141 Summons. No.**	**Oper.**	**142 Charge**	**143 Summons. No.**
-	-	-	-	-	-

	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	M	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - - -
B	2	01	01	04	64	M	07	08	01	11	04	-	-	DRIVER 2 - - - - - - - - - -
C														
D														

Code	Value
96	05
97	01
98	01
99	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	07
106	-
107	-
108	25
109	05
110	02
111	01
112	-
113	-
114	-
115	-
116	02
117	04

Code	Value
118a	08
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	11
132	11
133	02
134	02

New Jersey Police Crash Investigation Report

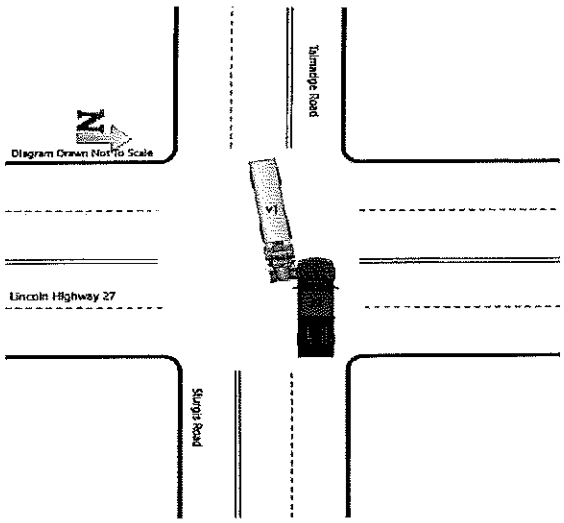
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062290

(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 Deployed	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling in the left turn only lane on Talmadge Road. Vehicle 1 attempted to make the left turn from Talmadge Road onto Lincoln Highway 27 and struck the front driver side of vehicle 2 in the center of the intersection.

Vehicle 2 was traveling straight across Lincoln Highway 27 from Sturgis Road towards Talmadge Road and was struck by vehicle 1 who was attempting to make a left turn.

No cell phones were in use at the time of the MVA. Driver 2 had complaint of shoulder pain. JFK EMS responded to the scene and driver 2 refused further medical attention at this time.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MATTHEW HALEY	0463	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19062320
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/10/19
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1110
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	LINCOLN HWY (Road Name) S (Dir)
At Intersection With	CHRISTIE ST.
☒ Feet ☐ Miles	15
☒ N ☐ E ☐ S ☐ W of:	
11 Speed Limit	35
12 Route No. / Suffix / 13 Milepost	0027 - -
18 Speed Limit	25
19 ☐ To Ramp ☐ From:	-
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	SNJ00050712629
25 NJ Ins. Code	038
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MANSOOR - QAZI -
29 Sex	M
27 Number & Street	492 COLLEGE DR.
28 City / State / Zip	EDISON NJ 08817
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / 01 / - / NJ
32 Driver's License Number	Q09795160009622
33 DOB (mm dd yyyy)	09/07/1962
34 Expires (mm yy)	09 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver AAMRA S ZEESHAN -
36 Number & Street	1609 COLONIAL GARDENS DR.
37 City / State / Zip	AVENEL NJ 07001
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYOTA / SIENNA / TN / 2000 / M74JTN / NJ
44 VIN	4T3ZF19C3YU242149
45 Expires	02 20
46 Vehicle Removed To	DEFALCOS
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill Hazard Class - Placard No. -
50 Carrier No.	☐ USDOT - ☐ None ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	909914626
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	MERY M HAROUN -
59 Sex	F
57 Number & Street	62 HARRISON AVE.
58 City / State / Zip	EDISON NJ 08837
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	01 / D / - / - / NJ
62 Driver's License Number	H06525427458841
63 DOB (mm dd yyyy)	08/20/1984
64 Expires (mm yy)	05 20
65 Owner's First Name / Initial / Last Name	☒ Same As Driver MERY M HAROUN -
66 Number & Street	62 HARRISON AVE.
67 City / State / Zip	EDISON NJ 08837
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	INFINITI / QX80 / BL / 2018 / F37KPV / NJ
74 VIN	JN8AZ2NE3J9192347
75 Expires	10 19
76 Vehicle Removed To	DEFALCOS
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☐ None ☐ On Board ☐ Spill Hazard Class - Placard No. -
80 Carrier No.	☐ USDOT - ☐ None ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:4-97	G028466	-	-	-
-	-	-	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	57	M	-	-	-	11	04	-	-	D1 - - - - - - -
B	01	03	01	-	55	M	-	-	-	11	04	-	-	JAMSHED S QAZI - 1605 COLONIAL GARD . AVENEL NJ 07001 06/30/1964 -
C	02	01	01	-	35	F	-	-	-	11	04	-	-	D2 - - - - - - -
D														

New Jersey Police Crash Investigation Report

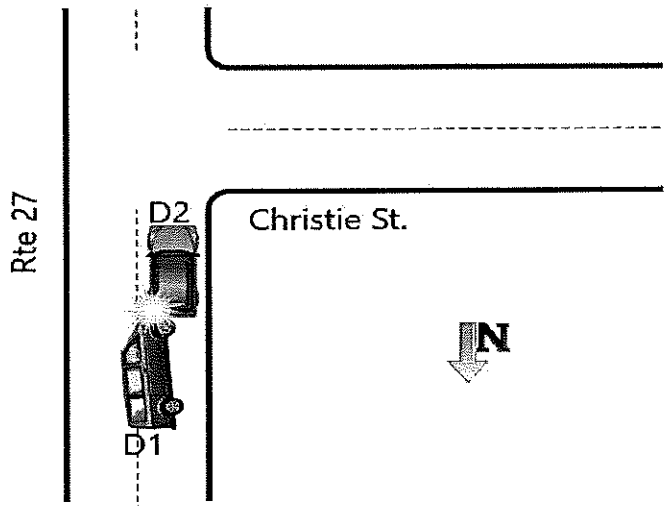
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062320

(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 Dept	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	E														
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D2 was slowing down for traffic ahead of her on Rte 27S just prior to Christie St.. D1 was driving immediately behind D2 on Rte 27S.. D1 did not slow/stop in time for traffic ahead of him and struck D2 from behind causing damage to both vehicles.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
JONATHAN KOLE	0317	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	19062385
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	10/10/19
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1542
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	WELLINGTON PL (Road Name)
At Intersection With	☐
Feet / Miles	☒ Feet / ☐ Miles
125 (14 15)	125
N ☐ E ☐ S ☐ W of:	S ☒ W of: SILVER LAKE AVE
11 Speed Limit	E / 25
Dir	E
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	25
19 Ramp ☐ To ☐ From	☐ To ☐ From: -
17 Cross Road Name	-
20 Route/Name	-
NB ☐ SB ☐ EB ☐ WB	☐ ☐ ☐ ☐
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	939 118 726
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ ☐ ☐ ☐ ☐
26 Driver's First Name / Initial / Last Name	ANN / B / DICKINSON -
29 Sex	F
27 Number & Street	240 WELLINGTON PL
28 City / State / Zip	EDISON / NJ / 08817
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	04 / D / - / - / NJ
32 Driver's License Number	D41040466256394
33 DOB (mm dd yyyy)	06/12/1939
34 Expires (mm yy)	06 / 23
35 Owner's First Name / Initial / Last Name	☒ Same As Driver / ANN / B / DICKINSON -
36 Number & Street	240 WELLINGTON PL
37 City / State / Zip	EDISON / NJ / 08817
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYOTA / CAMRY / SL / 2007 / C20LLH / NJ
44 VIN	JTNBK46K173021916
45 Expires	07 / 20
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ ☐ ☐ ☐ ☐
47 Authority ☐ Owner ☒ Driver ☐ Police	☐ ☒ ☐
48 Alcohol/Drug Test: Given ☒ No ☐ Yes ☐ Refused; Type ☐ Breath ☐ Blood ☐ Urine; Results 0. - % ☐ Pending	☒ ☐ ☐ ☐ ☐ ☐
49 Hazardous Material: ☐ None ☐ On Board ☐ Spill; Hazard Class -; Placard No. -	☐ ☐ ☐
50 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -	☐ ☐ ☐
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☐ ☐ ☐
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle P1

53 Veh #	P1
54 Policy No.	-
55 NJ Ins. Code	-
☐ Parked ☒ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ ☒ ☐ ☐ ☐
56 Driver's First Name / Initial / Last Name	HASMUKH / N / PATEL -
59 Sex	M
57 Number & Street	228 WELLINGTON PL
58 City / State / Zip	EDISON / NJ / 08817
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	01 / - / - / - / -
62 Driver's License Number	-
63 DOB (mm dd yyyy)	05/14/1951
64 Expires (mm yy)	- / -
65 Owner's First Name / Initial / Last Name	☐ Same As Driver / - / - / -
66 Number & 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 ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☐ ☐ ☐ ☐ ☐
77 Authority ☐ Owner ☐ Driver ☐ Police	☐ ☐ ☐
78 Alcohol/Drug Test: Given ☒ No ☐ Yes ☐ Refused; Type ☐ Breath ☐ Blood ☐ Urine; Results 0. - % ☐ Pending	☒ ☐ ☐ ☐ ☐ ☐
79 Hazardous Material: ☐ None ☐ On Board ☐ Spill; Hazard Class -; Placard No. -	☐ ☐ ☐
80 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -	☐ ☐ ☐
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☐ ☐ ☐
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1	NONE	-	-	-	-
-	-	-	-	-	-

	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	-	80	F	-	-	-	11	04	-	-	DRIVER 1 - - - - - - - - - - - -
B	P1	-	-	05	68	M	-	08	01	-	-	-	-	PEDESTRIAN 1 - - - - - - - - - - - -
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062385

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Based on the statement of the driver and the pedestrian my investigation revealed the following events: The pedestrian was walking in the road (no sidewalks) when Driver #1 backed out of her driveway and bumped into the pedestrian knocking him to the ground. The pedestrian refused Emergency Medical attention.

Vehicle was moved prior to arrival.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WILLIAM COLLETTO	0269	DECHIRICO	0199	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	19062432
2 Police Dept of	EDISON POLICE DEPART
Code	01
3 Station/Precinct	-
10 Crash Occurred On	ROXY AVENUE
Dir	N
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
☐ At Intersection With / 14 Distance	50
15	☒ Feet ☐ Miles
16	☐ N ☐ E ☐ S ☒ W
of: Road Name	NEW DOVER ROAD
18 Speed Limit	25
17 Cross Road Name	
19 Ramp ☐ To ☐ From: / 20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash (mm dd yy)	10/10/19
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1904
7 Municipality Code	1205
8 Total Killed	--
9 Total Injured	1
21 Latitude	-
22 Longitude	-

Field	Vehicle 1	Field	Vehicle P
23 Veh #	1	53 Veh #	P
24 Policy No.	2000-00-48-91	54 Policy No.	-
25 NJ Ins. Code	148	55 NJ Ins. Code	-
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☒ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	FARHAN - ALLIDINA -	56 Driver's First Name / Initial / Last Name	PRASADARAO - VEDANTAM -
29 Sex	M	59 Sex	-
27 Number & Street	7 PURDUE ROAD	57 Number & Street	9 PARKER ROAD
28 City / State / Zip	EDISON NJ 08820	58 City / State / Zip	EDISON NJ 08820
30 Eyes / DL Class / Restrictions / Endorsements	02 / D / - / -	60 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
31 State	NJ	61 State	-
32 Driver's License Number	A54552590001772	62 Driver's License Number	-
33 DOB (mm dd yyyy)	01/12/1977	63 DOB (mm dd yyyy)	07/15/1942
34 Expires (mm yy)	02 20	64 Expires (mm yy)	- -
35 Owner's First Name / Initial / Last Name	☒ Same As Driver FARHAN - ALLIDINA -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver - - - -
36 Number & Street	7 PURDUE ROAD	66 Number & Street	-
37 City / State / Zip	EDISON NJ 08820	67 City / State / Zip	- - -
38 Make	TOYOTA	68 Make	-
39 Model	COROLLA	69 Model	-
40 Color	WT	70 Color	-
41 Year	2008	71 Year	-
42 Plate No.	T65JZR	72 Plate No.	-
43 State	NJ	73 State	-
44 VIN	1NXBR32E08Z037395	74 VIN	-
45 Expires	04 20	75 Expires	- -
46 Vehicle Removed To	DRIVEN AWAY	76 Vehicle Removed To	-
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	Removal	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☐ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☐ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☐ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-	82 Motor Carrier or Government Entity	-
Number & Street	-	Number & Street	-
City / State / Zip	- - -	City / State / Zip	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

NONE

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	-	-	-	-	-

	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	-	42	M	-	-	-	11	04	-	-	DRIVER #1 - - - / - - - - - -
B	P	-	-	02	77	M	11	07	02	01	01	-	6202	PEDESTRIAN - - - / - - - - - -
C	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - / - - - - - -
D	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - / - - - - - -

Code	Value	Code	Value
96	05	118a	25
97	01	118b	-
98	05	119a	72
99	07	119b	73
100a	01	120a	01
100b	04	120b	-
101	02	121a	01
102	01	121b	-
103	01	122	01
104	1	123	42
105	13	124	11
106	-	125	11
107	-	126a	22
108	01	126b	-
109	-	126c	-
110	01	126d	-
111	-	126e	22
112	-	127a	26
113	-	127b	-
114	-	127c	-
115	-	127d	-
116	01	127e	26
117	02	128	22
		129	09
		130	09
		131	-
		132	-
		133	03
		134	-

New Jersey Police Crash Investigation Report

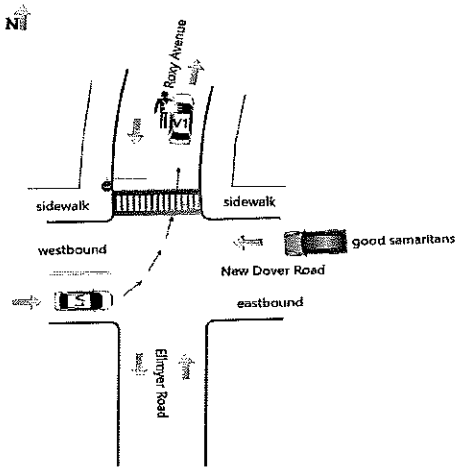
Police Dept: EDISON POLICE DEPAR Code: 01

Station: - Case No: 19062432

(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 Dept	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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



vehicle #1 moved prior to arrival
the pedestrian did not move prior to arrival

145 Crash Description/Narrative

Officer's investigation revealed that vehicle #1 was making a left turn from eastbound on New Dover Road to northbound on Roxy Avenue. Shortly after completing the left turn, driver #1 felt the impact between vehicle 1 and the pedestrian. Driver #1 immediately stopped and rendered assistance to the pedestrian.

Two (02) good Samaritans (Mr., and Mrs., Srinivasa Arji) were making a right turn from New Dover Road onto Roxy Avenue. During that time, they noticed a pedestrian was lying on the ground and they immediately came to the pedestrian's aid. Mr., and Mrs., Arji stated that the injured pedestrian was not in the crosswalk, and there were no other visible pedestrian traffic in the crosswalk at the time when they were making the right turn. Mr., and Mrs., Arji can be reached at 732-429-5282.

While on scene, the injured pedestrian's blood stain was located approximately 50 feet from the marked crosswalk at the intersection of New Dover Road and Roxy Avenue. This indicates that the pedestrian was not utilizing the marked crosswalk when walking over Roxy Avenue from New Dover Road.

The pedestrian was at fault in the crash.

John F. Kennedy Hospital EMS/Edison Fire Department were on to provide medical assistance in stablizing the pedestrian's fractured left foot. EMS transported the pedestrian to Robert Wood Johnson University Hospital in New Brunswick, New Jersey for further medical treatment.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DANNY LAU	0377	DECHIRICO	0199	☐ Pending ☒ Complete