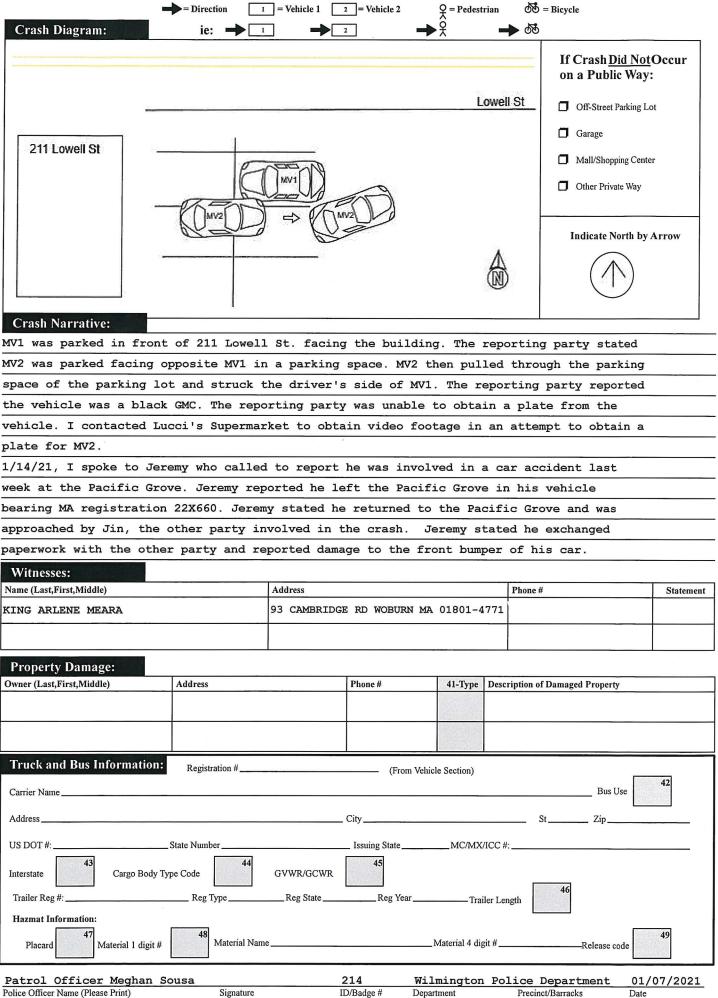
							h of Massachusetts								RMV Document Number				
	Date of Crash 01/07/2021	Time of Crash	1	City/Town	Moto	r Veh	icle Cra	sh		lumber ehicles					1.	Loca	e Police al Police TA Police upus Police	2	
	24HR		Po	Police Report			2		0		Latitude Longitude				pus Police	i			
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r:	Route# Direction Name of Roadway/Street					Route# Direc	LOWE				Name of Roadway/Street								
¹ 1				At				[w]	1										
L	Route# Direc	etion	Name	of Intersecting Ro	adway/Street		Feet NSEW of — or • or Exit Number											- 11	
	- Indian Indian			Feet	NS	EW	of	·							5 ''				
<u> </u>		<u> </u>		Route# Intersecting Roadway/Street Feet N S E W of															
² 1	Route# Direc	ction	Name	of Intersecting Ro	adway/Street									La	ındmar	k			
3	Please Select (of the Followi		e 1 <u>1</u>	Occupants I	lit/Run	Moped	Crash F	Report	ID#	21	-2	2 – 7	AC]					
J	·		G,	DOD/4													1/7	-	
	License #		i o	DOB/Age			996YN2										21	7 12	
	Sex Lic. Class 19 19 Lic. Restrictions 20 CDL Endorsement Operator_Driverless M.V. Owner ZOU, CHANG QU Last First Middle Last First Middle Last First Middle													L					
⁴ 1			5 M.V				ZOU, C	Last		ŲŪ	F	irst			М	iddle		-	
	Address		_				ss 8 SAVI									1000	2010	-	
				ZipZip			BURLING			14,45,459	22				-	803 8 27	3-2210 27 27	-	
]	·		CE INSUR			le Action Prior to		23	23			ımage st Stai		(Code	28	- 1		
5		pirection: NS	Y	Responding to En	nergency? 2		<u>I</u>		145 FF	23			pe of			29			
	Citation # (If Iss	ued)		•		Most 1	Harmful Event	1	24	25	20	1		st Resi		1 ³⁰		13	
	Viol. 1: Ch/Sec/S	Sub	Vic	ol. 2: Ch/Sec/Sub			Contributing Co	1 300 100	1	25	25	,					Drug: 2 32	1 "	
⁶ 1	Viol. 3: Ch/Sec/S			ol. 4: Ch/Sec/Sub		_ Driver	Distracted by	0	26			,		rom sc	,	2 33			
	Name (Last First Mi		for operato	r and all occupants	involved Address		DOB/Age	Sex	34 Seat Pos.	35 Safety System		37 Eject Code	38 Trap Code	39 Injury Status	40 Transp. Code	М	edical Facility		
	Operato	or			See Above		><	X	1	o	4	0	0	10	1				
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		B. 3. 3. (1)						<u> </u>	-	ļ								_	
				1		Dec. 7				<u> </u>					<u> </u>		ī	4	
⁷ 1	Please Select O of the Followin		2 1 _#	Occupants N	lon-Motorist A	Туре	15 Action	16 L	Locatio	on	17	Conditi	on	18	X	Hit/Run	Moped		
	License # S57794622 St MA DOB/Age Reg # 22X660 Reg Type PC Reg State MA													MA					
	Sex.M Lic. C	19 1	Lic. Res	trictions 20	CDL		ear 2015 Veh Make NISSAN Veh Config. 1												
	Operator JEN	- 0.0000 - 0.000 - 0.000	⊐ JEREM	Y CHRIST	Endorsement OPHER	Owne	JENKINS, JEREMY CHRISTOPHER												
899 Address 18 VICTOR ST FL APT					Middle	Addres	Last First Middle ess 18 VICTOR ST FL APT 2												
	City HAVER	HILL	State 1	<u>(A</u> Zip 0183	32-3871	City_	HAVERHILL State MA Zip 01832-3871												
	Insurance Compa	Vehicle	ele Action Prior to Crash 1 22 Damaged Area Code: 1 27 27 27																
	Vehicle Travel Di	Event	Sequence 23 23 23 23 Test Status: 1 28																
0	Citation # (If Issu	red) T2445	629			Most I	Harmful Event	2	24		لنند		pe of			29			
⁹ 2	Viol. 1: Ch/Sec/S		Contributing Code 19 25 Susp. Alcohol: 99 31 Susp. Drug: 99 32																
	Viol. 3: Ch/Sec/S		r Distracted by 99 26 Towed from scene? 2 33																
	Viol. 3: Ch/Sec/Sub — Viol. 4: Ch/Sec/Sub — Driv Please fill out for operator/non-motorist and all occupants involved								34	35 Safatu	36	37	38	39	40		,	-	
	Name (Last First Middle) Address						DOB/Age	Sex	Seat Pos.	Safety System		Eject Code	Trap Code	Injury Status	Transp. Code	Ме	dical Facility	-	
	Operato	r/Non-Mo	torist		See Above			X	1	99	4	0	0	99	1			4	
																		7	



Signature

ID/Badge#

Department

Wilmington Police Department Images Associated with 21-2-AC



