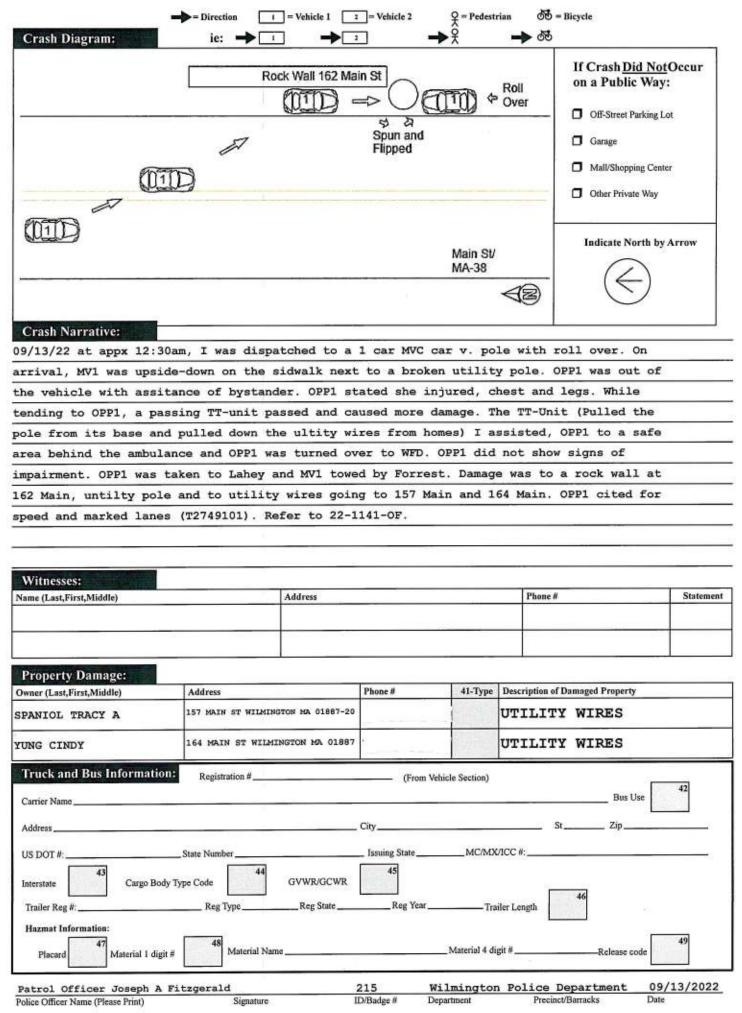
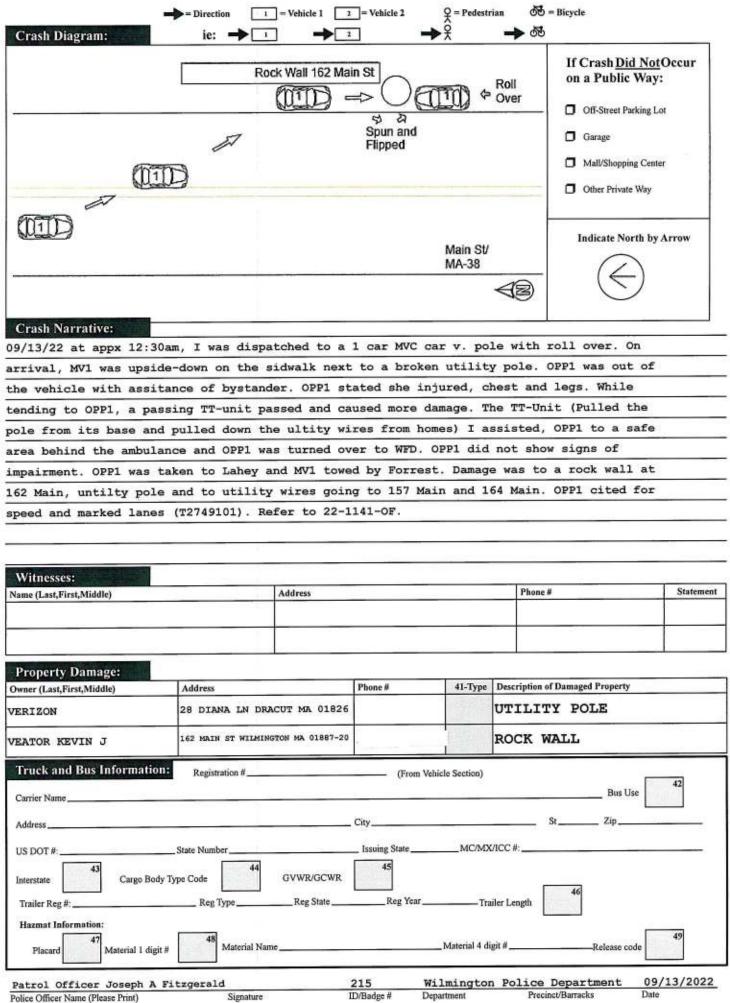
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09/13/2022 0040	h City/Town Wilmington	Motor Veh	맛뭐 크기쓰시죠? 뭐 ㅎㅎㅎㅋ	Vehicles	Injured Latitu	Limit35 de	State Police Local Police MBTA Police Campus Police
24F	IR	Police I		1 1	Confi		Other:
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	At		Feet NS	EW of _		— or	
Route# Direction	Name of Intersecting Ro	oadway/Street		7 022	Mile Marker	1,00	Exit Number
	Also at Intersection	on with	Feet N S	R	oute#	Intersecting R	Roadway/Street
Route# Direction	Name of Intersecting Ro	adway/Street	Feet N S	EW of			
Please Select One			1	00	001	Landmark	ř.
of the Following:	icle 11_#Occupants 1	Hit/Run Moped	Crash Report	ID# <b>22</b> -	78T-	AC	
License # S5776663		3	1HHK55				eg State MA
Sex F Lic Class D	Lic, Restrictions	CDL Veh Y	/ear 2009			Veh	Config. 1
Operator MURPHY,	First	Middle	er MURPHY, I		E First	Mic	idia
Address 15 CHESTE			ss 15 CHEST	ER AVE			
	State MA Zip 018		WOBURN	22		A Zip <u>01</u> d Area Code:	1, 27 27 27
	GENERAL INSU		le Action Prior to Crash	1	O	1	1 28
	**		Sequence 42 23 40		Type of	Test:	29
Citation # (If Issued) <u>T274</u>			Harmful Event 22		24	st Result:	30
	18 Viol. 2: Ch/Sec/Sub				Susp. Ale	cohol: 2 31	Susp. Drug 99 32
	Viol, 4: Ch/Sec/Sub		r Distracted by 99	34 35 3	6 37 38	rom scene?	1 33
Please full None (Last First Middle)	out for operator and all occupant:	Address	DOB/Age Sex	Seat Safety Air Pos. System Sta	tag Eject Trap	Injury Transp. Status Code	Medical Facility
Operator		See Above	$\times x$	1 1 3	0 0	7 2	Lahey Clinic
Please Select One	icle 2 #Occupants	Non-Motorist A Type	15 Action 16	Location 1	7 Condition	18	lit/Run Moped
of the Following:	icle 2 soccupans	77 [8]		Docation			
of the Pollowing:	St DOB/Age	Reg #					
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.icense #Lic. Class 19  DegratorLnt AddressLity	Lic. Restrictions 20	CDL Veh Yo Endorsement Owne  Middle Addre	CearLast	Veh Make	First State	Veh	Config. 21
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License #	State Zip  State Zip  Viol. 2: Ch/Sec/Sub operator/non-motorist and all oc	CDL Veh Yo Endorsement Owne  Middle Addre  City Vehicl  mergency? Event  Most I  Driver  ccupants involved  Address	le Action Prior to Crash Sequence 23 Harmful Event r Contributing Code r Distracted by	22 23 23 23 24 25 26 34 15 34 Sept Safety Air Pos. System Sar	State	Zip	21 Config. 21 27 27 27 28 29 30 Susp. Drug: 32 33
License #	State Zip  State Zip  Viol. 2: Ch/Sec/Sub operator/non-motorist and all oc	CDL Veh Yo Endorsement Owne  Middle Addre  City Vehicl  mergency? Event  Most I  Driver  ccupants involved  Address	le Action Prior to Crash Sequence 23 Harmful Event r Contributing Code r Distracted by	22 23 23 23 24 25 26 34 15 34 Sept Safety Air Pos. System Sar	State	Zip	21 Config. 21 27 27 27 28 29 30 Susp. Drug: 32 33



CDP1 11-24-00



CDP1 II-24-00

## Wilmington Police Department

SUPPLEMENTAL NARRATIVE FOR PATROL OFFICER JOSEPH A FITZGERAL

Ref: 22-281-AC

Entered: 09/19/2022 @ 1029 Modified: 09/19/2022 @ 1029

Entry ID: 215 Modified ID: 215 Page: 1

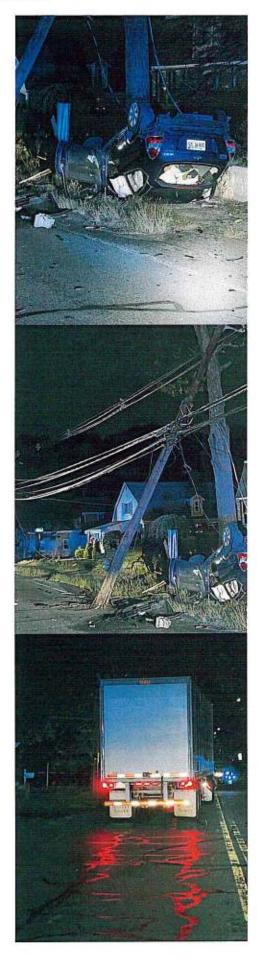
The following is a brief summary of facts.

On Monday, September 19, 2022, I, Officer Fitzgerald, was working the 8:00am to 4:00pm shift assigned to the station officer post. At approximately 10:15am, it was brought to my attention that Kevin Veator, 162 Main St, had utility wire damage as a result of the crash. This caused a power outage to the residence.

Respectfully Submitted, Officer Joseph A. Fitzgerald #215 Wilmington Police Department

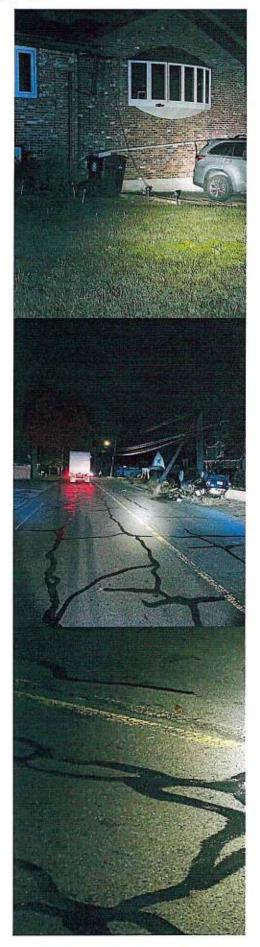
## Wilmington Police Department Images Associated with 22-281-AC





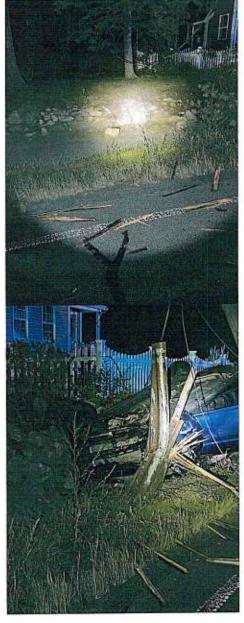
## Wilmington Police Department Images Associated with 22-281-AC

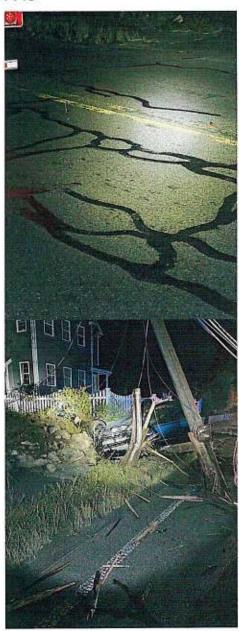




## Wilmington Police Department Images Associated with 22-281-AC







Requests for Wilmington Police Department Crash Report 22-828-AC

DATE: 9-13-22

LOCATION: 411 Salem Street

May be made via the department Public Records Request Email:

publicrecords@wpd.org

Police Use Only	Com	monwealth	of Massacl	husetts		RM	V Docum	nent Number
Date of Crash   Time of Crash   09/14/2022   0653   Wi	City/Town lmington	Motor Veh		Number Vehicles	Number Injured	Speed Limit	25	State Police Local Police MBTA Police Campus Police
24HR		Police	Report	2	0	Longitude_		Campos Police Other:
AT INTERSEC	TION:	< LOCA	TION >		NOT A	T INTER	SECT	ION:
				711 8	LAKE	THE RESERVE OF THE PERSON NAMED IN	'n 1	(C)
Route# Direction	Name of Roadway/S	Street	Route# Direction	Address #		Name of	Roadway	//Street
Route# Direction	Name of Intersecting Road	lway/Street		S E W of	Mile M	arker	or	Exit Number
Route# Direction	Also at Intersection		The state of the s	SEW of	Route#	Inters	ecting Ro	oadway/Street
Route# Direction	vame of intersecting road	Iway/oticci				L	andmark	
Please Select One of the Following:	#Occupants			rt ID# <b>22</b>	E Windows	200 March	200	VAC TO THE SPACE
License # S17956917 St	MA_DOB/Age	Reg	<b>VT23734</b>		Reg Typ	e_PC	Reg	State MA
P		Endorsement	Year 2018			DUED N		
Operator MINGHELLA, CI Address 154 LAKE ST	First Frest	Middle	er MINGHELI ess 154 LAKI		First	PREK P	Midd	le le
City WILMINGTON S	tate MA 7in 0188	7-1623 City	WILMINGTO	N	St.	ate MA	Zip <b>01</b>	887-1623
Insurance Company GREEN MC			cle Action Prior to Cra	70735		Damaged Area		
			22	23 23	23 7	est Status:		28
Vehicle Travel Direction: N S	W Responding to Eme		. Coducine 1	24		ype of Test:		29
Citation # (If Issued)	_	Mos	Harmful Event 1	100		AC Test Res	ault:	30
Viol. 1: Ch/Sec/Sub	Viol. 2: Ch/Sec/Sub	Driv	er Contributing Code	1 25	25 S	iusp. Alcohol	31	Susp. Drug 32
Viol. 3: Ch/Sec/Sub	Viol. 4: Ch/Sec/Sub	Driv	er Distracted by	26	Т	lowed from se	cene? 2	33
Please fill out for o	perator and all occupants i	involved	Donu.	34 35 Seet Safety	36 37 Airbug Eject Sunn Code	38 39 t Trop Injury r Code States		Medical Facility
Name (Last First Middle)	70	Address	DOB/Age Se	Pos. System	Sunsi Code	0 10	1	nocuest Facility
Operator		See Above		1,	1	0 10	1	
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				_لـــــــــــــــــــــــــــــــــــــ	<u></u>			
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	State MA Zip 0184		BILLERICA				Zip <b>01</b>	821-5065
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Insurance Company FEDERATE	D MUTUAL IN	ISURANC Vehi	cle Action Prior to Cra			Test Status:	7	28
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				++	++-		+	

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	→ T1	7777				Mall/Shopping Center	9
		7917			0.00017	Other Private Way	
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	30000000	bury-Wilmington Line	e)		Is	ndicate North by A	rrow
Crash Narrative:	ı		10				
n 09/14/22 car 1 whi					and the second second		
t. crashed on the ce	nter line. 7	The mirrors on	the driver s	sides of e	ach MV coll:	ided.	
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lame (Last,First,Middle) Property Damage:	Address	Address	Phone #	41-Type L		ed Property	Statemen
Name (Last,First,Middle)  Property Damage:  Dwner (Last,First,Middle)						ed Property	Statemen
Property Damage:		Address					Statemen
ame (Last,First,Middle)  Property Damage:  Owner (Last,First,Middle)  Truck and Bus Information						ed Property  Bus Use	
Property Damage: Owner (Last, First, Middle)  Truck and Bus Informatio	Registration #		(From Veh	icle Section)		Bus Use	
Property Damage: Dwner (Last,First,Middle)  Truck and Bus Informatic Carrier Name  Address	Registration #		(From Veh	icle Section)	Description of Damage	Bus Use	
Property Damage: Dwner (Last,First,Middle)  Truck and Bus Information  Carrier Name  Address  US DOT #:  43	Registration #	44	(From Veh	icle Section)	Description of Damage	Bus Use	
ame (Last,First,Middle)  Property Damage: wner (Last,First,Middle)  Truck and Bus Information Carrier Name  Address  US DOT #:  Interstate  Cargo Bo	Registration #.  State Number  dy Type Code	44 GVWR/GCWR	(From Veh	icle Section) MC/MX/IO	Description of Damage St	Bus Use	
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Property Damage: Dwner (Last,First,Middle)  Truck and Bus Information Carrier Name Address US DOT #:  Interstate  43  Cargo Bo	Registration #.  State Number dy Type Code Reg Type	44 GVWR/GCWR	City Issuing State 45 Reg Year	MC/MX/IC	Description of Damage St CC #:	Bus Use	

Date of Crash Time of Crash		monwealth	0. 1. 2.11001101		<u></u>		RMV Docun	
09/15/2022 <b>1417</b> V	City/Town Vilmington		iicle Crash Report	Vehicle	Injured	Speed L Latitude		State Police Local Police MBTA Police Campus Police
AT INTERS	ECTION.		TION >	2	O NOT A	Longitu	deERSECT	Other:
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			Feet N S	10-11-1	Route#	In	tersecting Ro	oadway/Street
Route# Direction	Name of Intersecting Roa	adway/Street			_		Landmark	
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of the Following: Vehicle	11_#Occupants  H	lit/Run Moped	Crash Repor	t ID# <b>Z Z</b>	-28	4-1	AC.	
License # NHL14341396	St.NH_DOB/Ag	Reg	# <u>5053041</u>		Reg Typ	e PC	Reg	State NH
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Viol. 1: Ch/Sec/Sub	Viol. 2: Ch/Sec/Sub -	Driv	er Contributing Code	1 25	25	usp. Alco	hol: 2 31	Susp. Drug 2 32
Viol. 3: Ch/Sec/Sub	Viol. 4: Ch/Sec/Sub -	Drive	er Distracted by	26	- Tal	owed from		33
	r operator and all occupants			34 35 Sent Safety	36 37 Airbag Ejec	38 Trap 1	39 40 njuy Transp	
Name (Last First Middle)		Address	DOB/Agy Sex	Pox. System		Code 5	Ratus Code	Medical Facility
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of the Following:		*	Action	Location	Cond		н	7000
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of the Following: Venture License # S64099062  Sex F Lic. Class D 19 19	St MA_DOB/Agt Lic. Restrictions 1 20	Reg : CDL Veh Endorsement	# 2MGT48 Year 2018	Veh Make _	Reg Typ	e PC	Reg	State MA
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City BILLERICA  Insurance Company THE CON  Vehicle Travel Direction: N S  City Script (If Issued)  Viol. 1: Ch/Sec/Sub	St MA DOB/Agt Lic. Restrictions 1 20  DANIELLE M  First  E  State MA Zip 0182  MERCE INSURA  W Responding to En  Viol. 2; Ch/Sec/Sub  Viol. 4; Ch/Sec/Sub	Reg :  CDL	# 2MGT48 Year 2018 THE PROPERTY CONTROL OF THE PROPERTY OF THE	Veh Make ( , , DAN ; AVE   18 23 23 23 24 26 26 26 26	Cond Reg Typ  First  St  22  1  23  1  36  37  36  37	me PC  Mate MA  Damaged A  dest Status  ype of Te  AC Test  AC Test  owed from	Reg   Veh C   Midd     Zip   O1     Area Code: 3     st:   Result: 1     hol: 2   31     n scene? 1	State MA config. 1 21 config. 27 27 27 27 28 29 30 Susp. Drug 2 32
City BILLERICA  Insurance Company THE CON  Vehicle Travel Direction: N S  City Script (If Issued)  Viol. 1: Ch/Sec/Sub	St MA DOB/Agt Lic. Restrictions 1 20  CANIELLE M  First  E  State MA Zip 0182  MERCE INSURA  W Responding to En	Reg :  CDL	# 2MGT48 Year 2018 Per DONAGHEY Lan Tess 16 IRENE BILLERICA Cle Action Prior to Cras at Sequence 1 23 t Harmful Event 1 er Contributing Code	Veh Make (C., DAN); AVE  1 AVE  1 AVE  1 AVE  1 AVE	Cond Reg Typ  First  Si  22  I  23  T  Alfbag lijec	ate MA Damaged A	Reg Veh C  Midd  Zip O1:  Area Code: 3  St:  Result: 1  hol: 2 31	State MA config. 1 21 config. 27 27 27 27 28 29 30 Susp. Drug 2 32
City BILLERICA  Insurance Company THE CON  Vehicle Travel Direction: N S  City City City Control of the Control	St MA DOB/Agt Lic, Restrictions 1 20  DANIELLE M  First  E State MA Zip 0182  MERCE INSURA  W Responding to En  Viol. 2; Ch/Sec/Sub  viol. 4; Ch/Sec/Sub  stor/non-motorist and all occur	Reg :  CDL Veh Endorsement  Middle  Addr  21-5015  City  ANCE CO  Most  Drive  aupants involved	# 2MGT48 Year 2018 The Property Control of the Propert	Veh Make ( , DAN ; AVE   18 23 23 23 24 24 26 26 26 26 26 26 26 26 26 26 26 26 26	Cond Reg Typ  First  Si  22  I  23  T  Alfbag lijec	mate MA Damaged A Cest Status Test AC Test Trap 1 Code 5	Reg Veh C  Midd  Zip O1:  Area Code: 3  t thol: 2 31  m scene? 1	State MA config. 1 21  821-5015 27 27 27 28 29 30 Susp. Drug. 2 32 33
City BILLERICA  Insurance Company THE CON  Vehicle Travel Direction: N S  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub  Please fill out for opers  Name (Last First Middle)	St MA DOB/Agt Lic, Restrictions 1 20  DANIELLE M  First  E State MA Zip 0182  MERCE INSURA  W Responding to En  Viol. 2; Ch/Sec/Sub  viol. 4; Ch/Sec/Sub  stor/non-motorist and all occur	Reg :  CDL Veh Endorsement  Middle  Addr  21-5015  City.  ANCE CO  Most  Drive  cupants involved  Address	# 2MGT48 Year 2018 The Property Control of the Propert	Veh Make C , DAN: AVE  1 4 23 23 24 18 25 26 34 35 Seri Safety Post. Spoter	Cond Reg Typ  First  St  22  1  23  1  25  Smalls God  Cod	mate MA Damaged A Cest Status Test AC Test Trap 1 Code 5	Reg Veh C  Middl  Zip O1:  Area Code: 3  t st:  Result: 1  hol: 2 31  m scene? 1  39 40  Line Code	State MA config. 1 21  821-5015 27 27 27 28 29 30 Susp. Drug. 2 32 33
Of the Following:  License # S64099062  Sex F Lic. Class D9 19 Operator DONAGHEY , I Last Address 16 IRENE AV  City BILLERICA  Insurance Company THE CON  Vehicle Travel Direction: NSD  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub  Please fill out for opera	St MA DOB/Agt Lic, Restrictions 1 20  DANIELLE M  First  E State MA Zip 0182  MERCE INSURA  W Responding to En  Viol. 2; Ch/Sec/Sub  viol. 4; Ch/Sec/Sub  stor/non-motorist and all occur	Reg :  CDL Veh Endorsement  Middle  Addr  21-5015  City.  ANCE CO  Most  Drive  cupants involved  Address	# 2MGT48 Year 2018 The Property Control of the Propert	Veh Make C , DAN: AVE  1 4 23 23 24 18 25 26 34 35 Seri Safety Post. Spoter	Cond Reg Typ  First  St  22  1  23  1  25  Salute Cod	mate MA Damaged A Cest Status Test AC Test Trap 1 Code 5	Reg Veh C  Middl  Zip O1:  Area Code: 3  t st:  Result: 1  hol: 2 31  m scene? 1  39 40  Line Code	State MA config. 1 21  821-5015 27 27 27 28 29 30 Susp. Drug. 2 32 33

MV stopped to				X	<b>→</b> Ø		
	allow Main	Street 2	(2) (2)	020	•	If Crash Did Non a Public W Off-Street Parkin Garage Mall/Shopping C Other Private Wa	ay:  Denter
	McDonalds	Parking Lot		(	3>	$(\Rightarrow)$	
Crash Narrative:							
/ 1 was driving stra	ight on Main S	treet in the	right lane.	MV 2 was	driving	south on Mai	ın
reet attempting to	turn left into	McDonalds.	A third vehi	cle not i	nvolved s	topped in th	10
eft lane to allow MV	2 to turn left	t. MV 2 stat	ed she did n	ot see MV	1 until	it was too	
te. No injuries. MV	1 and MV 2 cor	ntacted AAA	for their ve	hicles to	be towed	•	
Witnesses:							
THE RESERVE AND ADDRESS OF THE PARTY OF THE		Address			Phone #		Statemen
THE RESIDENCE OF THE PARTY OF T		Address			Phone #		Statemen
THE RESIDENCE OF THE PARTY OF T		Address			Phone #		Statemen
THE RESERVE OF THE PARTY OF THE		Address			Phone #		Statemen
ame (Last,First,Middle) Property Damage:		Address					Statemen
roperty Damage:	Address	Address	Phone #	41-Type		maged Property	Statemen
roperty Damage:	Address	Address	Phone #	41-Type		maged Property	Statemen
eme (Last,First,Middle) Property Damage:	Address	Address	Phone #	41-Type		maged Property	Statemen
Witnesses: ame (Last,First,Middle)  Property Damage: waer (Last,First,Middle)		Address	Phone #	41-Type		maged Property	Statemen
Property Damage:			Phone #			maged Property	
nme (Last,First,Middle)  Property Damage: wner (Last,First,Middle)  Fruck and Bus Information						maged Property  Bus Use	Statemen 42
Property Damage: wner (Last,First,Middle)  Fruck and Bus Information					Description of Da		
Property Damage: wner (Last,First,Middle)  Fruck and Bus Information Carrier Name	Registration #		(From Vel	hicle Section)	Description of Da	Bus Use	
Property Damage: wner (Last,First,Middle)  Fruck and Bus Information Carrier Name	Registration #		(From Vel	hicle Section)	Description of Da	Bus Use	
Property Damage: wner (Last,First,Middle)  Fruck and Bus Information Carrier Name  JS DOT #:  43	Registration #		(From Vel	hicle Section)	Description of Da	Bus Use	
Property Damage: water (Last, First, Middle)  Fruck and Bus Information Carrier Name  Address  JS DOT #:  atterstate  Cargo Body	Registration #		City Issuing State	hicle Section)  MC/MX/I	Description of Da	Bus Use	
Property Damage: wner (Last,First,Middle)  Truck and Bus Information Carrier Name  Address  US DOT #: interstate  43  Cargo Body	Registration # State Number y Type Code 44	GVWR/GCWR	City Issuing State	hicle Section)	Description of Da	Bus Use	
Property Damage: wner (Last,First,Middle)  Fruck and Bus Information Carrier Name  Address  JS DOT #:  Interstate  Address  Cargo Body	Registration #	GVWR/GCWRReg State	City Issuing State	hicle Section) MC/MX/I	Description of Da	Bus Use Zip	

Date of Crash   Time of Crash   09/17/2022   0715   W						1,1720		
	City/Town ilmington		iicle Crash	Vehicles	Number Injured	Speed Lim Latitude_	it 25	State Police Local Police MBTA Police Campus Police
24HR	CONTON	The second second second	Report	1	1	Longitude,	a on on	Other:
AT INTERSE	CTION:	< LOCA	TION >		NOT A	Γ INTE	RSECT	ION:
Route# Direction	Name of Roadway	//Street	Route# Direction	152 Address #	BURI	INGTO	ON AV	
	At							
			Feet N S	E W of	Mile M	erker	- or _	Exit Number
Route# Direction	Name of Intersecting Ros Also at Intersection		Feet N S	EW .c				
	Also at Intersection	a with	5 P		Route#	Inter	secting Ro	adway/Street
Route# Direction	Name of Intersecting Roa	adway/Street	Feet N S	E W of				4-11-
	T	- L					andmark	
Please Select One of the Following:	1 #Occupants H	Hit/Run Moped	Crash Repor	t ID# 22	-28	5-A	C	
License # S01951141	St MA DOB/Ag	Rep	#BV170A		Reg Typ	PC	Reg	State MA
10 10	Lic. Restrictions 99 20		Year 2015					2:
P		Endorsement					ven c	Johns.
Operator PARKS , JOHN	First	Middle	er PARKS, J		First		Midd	le
Address 17 UPLAND RI			ess 17 UPLAN			124	194U	
City BURLINGTON			BURLINGTO				-	803-143
Insurance Company THE COM	MERCE INSUR	ANCE CO Vehic	cle Action Prior to Crasi	1		amaged Are	a Code: 1	27 2 27 2
Vehicle Travel Direction: N S E	Responding to Em	nergency? 2 Even	st Sequence 22	23 23	-	est Status:	1	28
Citation # (If Issued)		Most	Harmful Event 22	24	303	ype of Test:		30
Viol. 1: Ch/Sec/Sub	Viol 2: Ch/Sec/Sub	Drive	er Contributing Code	13 25 18	25	AC Test Re 1sp. Alcoho	-	372.
			er Distracted by	26		usp. Aicono owed from s		Susp. Drug 2 3
	Viol. 4: Ch/Sec/Sub -	55 430 km2	di Distracted by	34 35	36 37	38 39	40	
Please IIII out for Name (Last Piest Middle)	operator and all occupants	Address	DOB/Age Sex	Sext Safety	Aichag Eject Status Coda	Temp Injur Code State	y Transp. code	Medical Facility
Operator		See Above	$\searrow$	1 1	1 0	0 8	2 1	abey Clinic
							1	
			+	++	+	$\vdash$	+	
				$\vdash$	_		-	
					17	18	31	
Please Select One Vehicle 2	#Occupants N	Non-Motorist A Type	15 Action 16	Location	Condi	tion	Пн	t/Run Mop
of the Following:		- Vi. U	Action	1/2	Condi	tion	Hi	The Si
of the Following:	St DOB/Age	Reg /	Action		Condi	tion	Reg	State21
of the Following: Venicie 2		Reg /	Action		Condi	tion	Reg	State21
of the Following:  License #  Sex Lic, Class 19 19	St DOB/Age	CDL Veh	Action		Condi	tion	Reg	State 21
of the Following:  License #  Sex Lic. Class 19 19  Operator Law	St DOB/Age	CDL Veh ' Endorsement Own	Action Year		Condi	tion	Reg Veh C	State 21
of the Following:  License #  Sex Lic. Class 19 19  Operator Law  Address	StDOB/Age	CDL Veh '\ Endorsement Own  Mildle Addr	Action  Year  Las		_ Reg Type	tion	Reg Veh C	State 21
of the Following:  License #  Sex Lic, Class	StDOB/Age	CDL Veh \\ Endorsement \\ Middle \\ Addr City.	Action  Year  er  List	Veh Make	Reg Type	e	Reg Veh C	State 21
of the Following:  License #	StDOB/AgeLic. Restrictions 20  First , State Zip	CDL Veh ' Endorsement Own  Middle Addr  City.	Year	Veh Make	First Sta	e	Reg Veh C	State 21 config. 21 27 27 27 2
of the Following:  License #	St DOB/Age Lic. Restrictions 20  First State Zip  W Responding to Em	Reg / CDL	Year	Veh Make	Condii  Reg Typi  Fint  Sta  22  D  23	e	Reg Veh C	State
of the Following:  License #	St DOB/Age Lic. Restrictions	Reg / CDL Veh ' Endorsement Own  Middle Addr City Vehice mergency? Even Most	Year	Veh Make	Condii Reg Typi Fint State 22 D To Ty B.	ateamaged Are	Reg Veh C Missil	State 21 Config. 21 27 27 27 2 28 29 30
of the Following:  License #	St DOB/Age Lic. Restrictions	CDL Veh ' Endorsement Own  Middle Addr  City.  Vehice  mergency? Even  Most  Drive	Year	Veh Make	Condii  Reg Type  Fint  Sta  22  D  23  Te  Ty  B  25  Se	amaged Are est Status; ppe of Test; AC Test Re	Reg Veh C Middle Zip a Code:	27 27 27 2 28 29 30 Susp. Drug 3
of the Following:  License #	St DOB/Age Lic. Restrictions 20  First State Zip  W Responding to Em  Viol. 2: Ch/Sec/Sub -	CDL Veh ' Endorsement Own  Middle Addr  City.  Vehice  mergency? Even  Most  Drive	Year	Veh Make	Condii  Reg Typi  First  Sta  22  D  73  To  To	amaged Are est Status; vpe of Test; AC Test Resusp. Alcohological	Reg Veh C  Middle  Zip a Code: sult: :: 31 :: cene?	State 21 Config. 21 27 27 27 2 28 29 30
of the Following:  License #	St DOB/Age Lic. Restrictions 20  First State Zip  W Responding to Em  Viol. 2: Ch/Sec/Sub -	Reg / CDL Veh ' Endorsement Own  Middle Addr City. Vehic mergency? Even Most Drive cupants involved	Year	Veh Make	Condition Condit	amaged Are est Status; vpe of Test; AC Test Resusp. Alcoholowed from s	Reg Veh C  Middle  Zipa Code:    10	27 27 2 28 29 30 Susp. Drug 3
of the Following:  License #	St DOB/Age Lic. Restrictions 20  Fint 20  W Responding to En  Viol. 2: Ch/Sec/Sub  Viol. 4: Ch/Sec/Sub  tor/non-motorist and all occ	Reg / CDL Veh ' Endorsement Own  Mildle Addr  City.  Vehic mergency? Even  Most  Drive  cupants involved  Address	Year	Veh Make	Condii	amaged Are est Status; vpe of Test; AC Test Resusp. Alcohologued from s	Reg Veh C  Middle  Zipa Code:    10	27 27 27 2 28 29 30 Susp. Drug 3
of the Following:  License #	St DOB/Age Lic. Restrictions 20  Fint 20  W Responding to En  Viol. 2: Ch/Sec/Sub  Viol. 4: Ch/Sec/Sub  tor/non-motorist and all occ	Reg / CDL Veh ' Endorsement Own  Middle Addr City. Vehic mergency? Even Most Drive cupants involved	Year	Veh Make	Condition Condit	amaged Are est Status; vpe of Test; AC Test Resusp. Alcoholowed from s	Reg Veh C  Middle  Zipa Code:    10	27 27 2 28 29 30 Susp. Drug 3
Of the Following:  License #	St DOB/Age Lic. Restrictions 20  Fint 20  W Responding to En  Viol. 2: Ch/Sec/Sub  Viol. 4: Ch/Sec/Sub  tor/non-motorist and all occ	Reg / CDL Veh ' Endorsement Own  Mildle Addr  City.  Vehic mergency? Even  Most  Drive  cupants involved  Address	Year	Veh Make	Condition Condit	amaged Are est Status; vpe of Test; AC Test Resusp. Alcoholowed from s	Reg Veh C  Middle  Zipa Code:    10	27 27 2 28 29 30 Susp. Drug 3
of the Following:  License #  License #  Sex Lic. Class 19 19  Operator  Law  Address  City  Vehicle Travel Direction: N S E  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub  Please fill out for operat  Name (Last First Middle)	St DOB/Age Lic. Restrictions 20  Fint 20  W Responding to En  Viol. 2: Ch/Sec/Sub  Viol. 4: Ch/Sec/Sub  tor/non-motorist and all occ	Reg / CDL Veh ' Endorsement Own  Mildle Addr  City.  Vehic mergency? Even  Most  Drive  cupants involved  Address	Year	Veh Make	Condition Condit	amaged Are est Status; vpe of Test; AC Test Resusp. Alcoholowed from s	Reg Veh C  Middle  Zipa Code:    10	27 27 2 28 29 30 Susp. Drug 3

	= Direction	1 = Vehicle 1	= Vehicle 2	웃 = Pede	strian 🕳 =	Bicycle	
Crash Diagram:	ie: →□	· →□		₽Ĥ	<b>→</b> %		
Sournell St @	0	Car	fr mer	1	<u> </u>	If Crash <u>Did No</u> on a Public Way	<b>:</b>
Way .		Castle Dr				Off-Street Parking I	.01
St (62)				ò		☐ Garage	
	S S SBU	on Ave		alle		☐ Mall/Shopping Cent	er
	Roberts Rd	A		3		Other Private Way	
	Jogo			62)	100		
	Q.				6	Indicate North by	Arrow
	Rd			Rd	1		
	erts		- 25	Andrens Rd		(1)	
@oogle	Roberts Rd			Map	data ©2 10		
Crash Narrative:						***	
ingle car MV crash	at about 0715 h	ours. Operato	or stated h	e was tr	aveling eas	st on	
urlington Ave (rt 6	2) when he round	ded the corne	er in the a	rea of R	oberts Road	the sun was	
irectly in his eyes	With the control of t	Anna de la constante de la con					
ront of 152 Burling	COLUMN CONTRACTOR CONTRACTOR	CHOOSE MISSESSIES CHESTS		K. January J. Louis	CALLES CONTRACTOR		
ot appear to have s				The second	CAN DESCRIPTION OF THE PARTY OF	delication of the second second section of	
y Wilmington ambula	nce for medical	treatment. C	Cains arriv	ed a sho	rt time lat	er and towed	
the MV.							
Witnesses:							7/======
Name (Last,First,Middle)		Address			Phone #		Stateme
Property Damage:							
Owner (Last,First,Middle)	Address		Phone #	41-Typ	e Description of I	Damaged Property	
ERIZON	28 DIANA LN D	RACUT MA 01826		4	UTILITY	POLE #37	
				Later			
Truck and Bus Informat	200						
THE REAL PROPERTY AND ADDRESS OF THE PARTY.			(From V	/ehicle Section)		E	42
Carrier Name						Bus Use	
Address			City		St	Zip	<del></del>
US DOT #:	State Number		Issuing State	MC/N	EX/ICC #:		
Interstate Cargo B	ody Type Code	GVWR/GCWR	45				
Trailer Reg #:		Reg State	Reg Year	т	enilar I anoth	46	
Hazmat Information:	reg type				raner Length		
47	48	Jame		Material 4	digit#	Release and	49
Placard Material 1 d	ign #				(1981) -	Actease code	
Patrol Officer Scott	Dunnett	1	202 1	Wilmingto	on Police D		/17/2022
Outing Officer Manne (Diagna Brint)	Signature			enartment		Barracks Date	The second second