	Police Use Only	Commonwealth of Massachusetts RMV Document							ocument Number	
	Date of Crash Time of Crash		Iotor Veh	icle Cra	sh $\frac{N}{V}$	umber Nur ehicles Inj	urad 1		State Police Local Police MBTA Police	□ ⊠ □
	06/19/2023 1152 Aubi	ırn	Police 1	Report	1	o	Latitu	itude	Campus Police Cother:	วี
	AT INTERSECT	ION:	< LOCATION >			NOT AT INTERSECTION:				٦
										2 10
	Route# Direction	Name of Roadway/Street		Route# E Direct	ion 87	9 ress #		RIDGE Vame of Road		
¹ 1		At				_				_
				Feet	N S E W	of — M	ile Marker	• — or	Exit Number	_
	Route# Direction Na	Also at Intersection with	reet	Feet	N S E W	of				1 11
				_	N S E W	Rout	e#	Intersecting	g Roadway/Street	
² 1	Route# Direction Na	ame of Intersecting Roadway/Str	reet					Landma	ark	_
	Please Select One	#Occupants Hit/Run	Moped	Cwash De	on out ID#	23-2	004_		ark	7
3	of the Following:									_
		<u>IA</u> DOB/Age 02/05/1	1970 Reg #	<u> w57499</u>		Re	g Type PC	::	Reg State MA	- la 12
	Sex M Lic. Class D 19 Lic. F	Restrictions 20 CDL_Endorse	Veh Y	Year 2021	Veh M	ake MERC	EDES-I	BENZ Ve	eh Config.	
4	Operator ROBICHAUD, RAY		Own	er ROBICH	AUD,	RAYMON	ID J		Middle	_
⁴ 1	Address 188 BOYCE ST			ess 188 BO	YCE S		1130		Mudic	_
	City AUBURN State	e MA Zip <u>01501-1</u>	.719 City	AUBURN			State M	A Zip_	1501-1719	<u>.</u>
	Insurance Company GEICO GENE	ERAL INSURANC	CE C Vehic	cle Action Prior to C	Crash	5 22	Damage	d Area Code:		
5	Vehicle Travel Direction: N S W W	Responding to Emergency?	<u>2</u> Even	t Sequence 20	23 35 23	23 23	Test Sta		1 28	
5	Citation # (If Issued)	_	Most		35 ²⁴		Type of		29	
	Viol. 1: Ch/Sec/Sub	Viol. 2: Ch/Sec/Sub	Drive	er Contributing Cod		²⁵ 9 ²⁵	-	est Result:	1	20 ¹³
	Viol. 3: Ch/Sec/Sub			er Distracted by	0 26	JL		from scene?	33	' E
⁶ 1		rator and all occupants involved			34 Seat	35 36 Safety Airbag	37 38	39 40		-
	Name (Last First Middle)	Addre	ess	DOB/Age	Sex Pos.	System Status	Code Code	Status Code		
	Operator	See Ab	oove	\sim	X^1	1 3	0 0	10 1		
	Please Select One			15	16	17		18	<u> </u>	\neg
⁷ 1	Please Select One of the Following:	#Occupants Non-Mot	torist A Type	Action	Location	on	Condition		Hit/Run Mope	:d
	License # St	Reg #	Reg # Reg Type Reg State Veh Year Veh Make Veh Config.							
	Sex Lic. Class 19 19 Lic. F	Veh Y								
8 _	Operator	First Mide	Own	er	Last	F	irst	1	Middle	_
⁸ 3	Address			ess						_
	City State	e Zip	City_				State	Zip		_ 1 14
	Insurance Company		Vehic	cle Action Prior to C	Crash	22	Damage	d Area Code:		1
	Vehicle Travel Direction: NSEW	Responding to Emergency?	? Even	t Sequence	23 23	23 23	Test Sta		28	
9 -	Citation # (If Issued)	_	Most	Harmful Event	24		Type of	Test: est Result:	30	
⁹ 2	Viol. 1: Ch/Sec/Sub	Viol. 2: Ch/Sec/Sub	Drive	er Contributing Cod	le	25 25		2	31 Susp. Drug: 32	2
	Viol. 3: Ch/Sec/Sub	Viol. 4: Ch/Sec/Sub	Driver Distracted by		26			owed from scene? 33		1
	Please fill out for operator/no		34 Seat	35 36 Safety Airbag	37 38 Eject Trap	39 40 Injury Trans		7		
	Name (Last First Middle)	Addre		DOB/Age	Sex Pos.	System Status	Code Code	Status Code		_
	Operator/Non-Motoris	t See Ab	oove		X^1					_

-	= Direction 1	= Vehicle 1 2	= Vehicle 2	Q = Pedestri	ian 🚳 =	= Bicycle		
Crash Diagram:	ie: 📥 🛚 1	2		→ ĝ	→ 5%			
		,				on a	ash <u>Did Not</u> Public Way:	
	☐ Garage ☐ Mall/Shopping Center ☐ Other Private Way							
			Pole MEC Ver 129 Title Town (sign)	237/ Title Town (business)		Ι.	· · · · · · · · · · · · · · · · · · ·	Arrow
Crash Narrative:			l		J			
Vehicle was traveling we	stbound and be	gan changin	g lanes in	to the rig	ht hand	lane.	Vehicle	
struck the curb and cont	inued off the	roadway. Ve	hicle then	struck Ti	tle Town	's bus	iness	
sign.								
Witnesses:								
Name (Last,First,Middle)	Address Phone				# Statemen			
GASKIN JENNIFER JULIEN	60 FORSBERG ST WORCESTER MA 016**							
Property Damage:								
Owner (Last,First,Middle)	Address		Phone #	41-Type	Description of	Damaged	Property	
RONNIE'S ICE CREAM	871 SOUTHBRIDGE ST	AUBURN MA 01501			TITLE	TOWN	SIGN	
Truck and Bus Information:	Registration #		(From	Vehicle Section)	<u> </u>			
Carrier Name							Bus Use	42
Address			City		4	2+	Zin	
Address							-	
US DOT #:				MC/MX	/ICC #:			
Interstate 43 Cargo Body Typ		GVWR/GCWR	45			46		
Trailer Reg #:	Reg Type	Reg State	Reg Year	Trai	ler Length	40		
Hazmat Information:								
Placard Material 1 digit #	48 Material Nam	e		Material 4 dig	git #		Release code	49
Patrolman Dominick Bosc	netto		91DB	Auburn Pol	ice Door	rtmont	06/	19/2023

Police Officer Name (Please Print)

Signature

ID/Badge #

Department Precinct/Barracks Date