

Date of Crash 08/15/2023 Time of Crash 0643 City/Town Auburn

Motor Vehicle Crash Police Report

Number Vehicles 1 Number Injured 0

Speed Limit 30 State Police Local Police MBTA Police Campus Police Other: [ ]

AT INTERSECTION:

LOCATION

NOT AT INTERSECTION:

PLEASANT ST SCHOOL ST

Route# Direction Name of Roadway/Street

Please Select One of the Following: [X] Vehicle 1 #Occupants [ ] Hit/Run [ ] Moped Crash Report ID# 23-273-AC

License # S77067581 St MA DOB/Age 04/30/1997 Sex F Lic. Class D 19 19 Lic. Restrictions 20 CDL Endorsement Operator KEMIGISA, RUTH K Address 39 BARBARA AVE City AUBURN State MA Zip 01501-2921 Insurance Company THE COMMERCE INSURANCE CO Vehicle Travel Direction: [N][S][E][X] Responding to Emergency? 2 Citation # (If Issued) T3069253 Viol. 1: Ch/Sec/Sub 90 24 Viol. 2: Ch/Sec/Sub Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub

Reg # 2BCC62 Reg Type PAN Reg State MA Veh Year 2015 Veh Make TOYOTA Veh Config. 1 Owner CAVANAUGH, LYDIA MARIE Address 195 GRAFTON ST APT 1 City SHREWSBURY State MA Zip 01545-5423 Vehicle Action Prior to Crash 4 22 Damaged Area Code: 1 27 27 27 Event Sequence 27 23 23 23 23 Test Status: 28 Type of Test: 29 Most Harmful Event 22 24 BAC Test Result: 30 Driver Contributing Code 10 25 7 25 Susp. Alcohol: 31 Susp. Drug: 32 Driver Distracted by 99 26 Towed from scene? 1 33

Table with columns: Name (Last First Middle), Address, DOB/Age, Sex, 34 Seat Pos., 35 Safety System, 36 Airbag Status, 37 Eject Code, 38 Trap Code, 39 Injury Status, 40 Transp. Code, Medical Facility. Operator row: Operator, See Above, [X], [X], 1, 99, 4, 0, 0, 10, 1, [ ]

Please Select One of the Following: [ ] Vehicle 2 #Occupants [ ] Non-Motorist A Type 15 Action 16 Location 17 Condition 18 [ ] Hit/Run [ ] Moped

License # St DOB/Age Sex Lic. Class 19 19 Lic. Restrictions 20 CDL Endorsement Operator Address City State Zip Insurance Company Vehicle Travel Direction: [N][S][E][W] Responding to Emergency? Citation # (If Issued) Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub

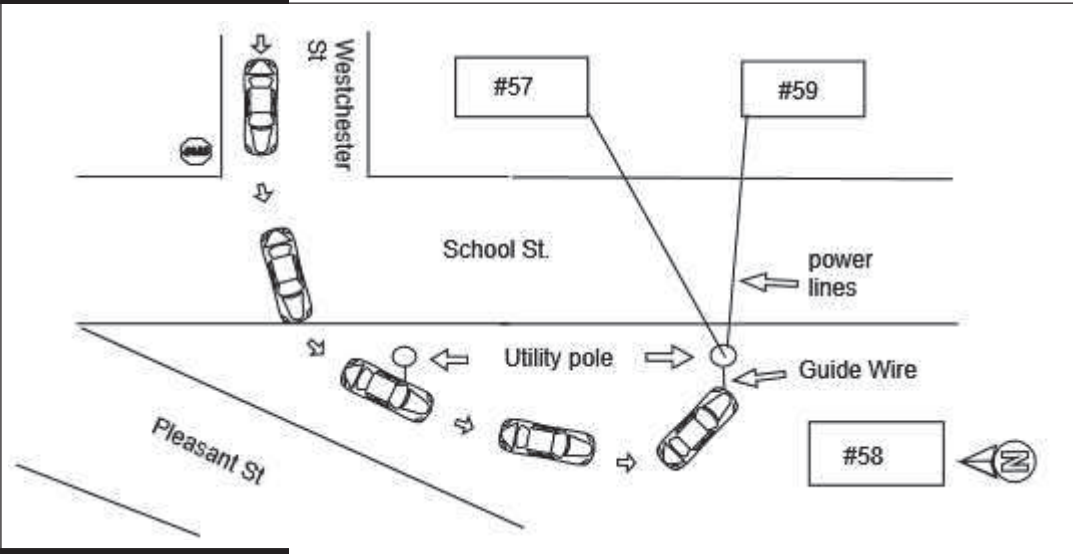
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→ = Direction    1 = Vehicle 1    2 = Vehicle 2    ○ = Pedestrian    ○ = Bicycle

**Crash Diagram:**

ie: → 1 → 2 → ○ → ○



**If Crash Did Not Occur on a Public Way:**

- Off-Street Parking Lot
- Garage
- Mall/Shopping Center
- Other Private Way

Arrow



**Crash Narrative:**

Vehicle was traveling west on Westchester Dr., vehicle drove through stop sign and across School St. without stopping. Vehicle jumped curb and traveled over lawn of 58 School St. Vehicle drove between the first utility pole and guide wire and continued across lawn of 58 School St. before it struck the guide wire of the second utility pole. The crash into the guide wire caused two power lines to be torn off the two houses across the street. When the power lines were torn off the houses, it caused damage to the houses.

**Witnesses:**

| Name (Last,First,Middle) | Address | Phone # | Statement |
|--------------------------|---------|---------|-----------|
|                          |         |         |           |
|                          |         |         |           |

**Property Damage:**

| Owner (Last,First,Middle) | Address                           | Phone # | 41-Type | Description of Damaged Property |
|---------------------------|-----------------------------------|---------|---------|---------------------------------|
| NAULT RICHARD H           | 59 SCHOOL ST AUBURN MA 01501-2929 |         |         | DAMAGE TO HOME                  |
| NEDOROSCIK MICHAEL J      | 58 SCHOOL ST AUBURN MA 01501-2930 |         |         | DAMAGE TO HOME                  |

**Truck and Bus Information:**

Registration # \_\_\_\_\_ (From Vehicle Section)

Carrier Name \_\_\_\_\_ Bus Use  42

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

US DOT #: \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_ MC/MX/ICC #: \_\_\_\_\_

Interstate  43 Cargo Body Type Code  44 GVWR/GCWR  45

Trailer Reg #: \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_ Trailer Length  46

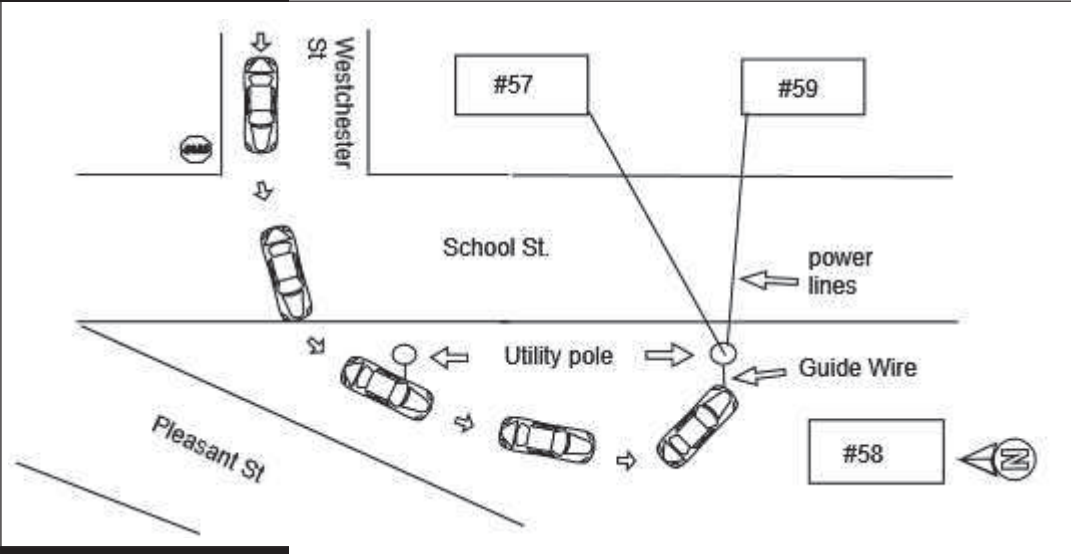
**Hazmat Information:**

Placard  47 Material 1 digit #  48 Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code  49

Patrolman Tod J Kuchnicki      49TK      Auburn Police Department      08/15/2023  
 Police Officer Name (Please Print)      Signature      ID/Badge #      Department      Precinct/Barracks      Date

**Crash Diagram:**

ie: ➔ [ 1 ]    ➔ [ 2 ]    ➔ ○    ➔ 🚲



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|                          |         |         |           |

**Property Damage:**

| Owner (Last,First,Middle) | Address                      | Phone # | 41-Type | Description of Damaged Property |
|---------------------------|------------------------------|---------|---------|---------------------------------|
| CHAVES JOHN               | 57 SCHOOL ST AUBURN MA 01501 |         |         | DAMAGE TO HOME                  |
|                           |                              |         |         |                                 |

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Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

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**Patrolman Tod J Kuchnicki**

Police Officer Name (Please Print)

Signature

**49TK**

ID/Badge #

**Auburn Police Department**

Department

Precinct/Barracks

**08/15/2023**

Date