

Date of Crash 08/28/2023 Time of Crash 0949 City/Town Auburn

Motor Vehicle Crash Police Report

Number Vehicles 2 Number Injured 0

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

AT INTERSECTION:

LOCATION

NOT AT INTERSECTION:

Route# Direction Name of Roadway/Street At Route# Direction Name of Intersecting Roadway/Street Also at Intersection with

Route# Direction Address # Name of Roadway/Street Feet N S E W of Mile Marker Exit Number

Please Select One of the Following: [X] Vehicle 10 #Occupants [] Hit/Run [] Moped Crash Report ID# 23-288-AC

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

Reg # 2PPP82 Reg Type PAN Reg State MA Veh Year 2019 Veh Make NISSAN Veh Config. 1 21 Owner POSHKUS, JEREMY DAVID Address 599 OXFORD STREET SO City AUBURN State MA Zip 01501-1809 Vehicle Action Prior to Crash 11 22 Damaged Area Code: 7 27 27 27 Event Sequence 2 23 23 23 23 Test Status: 1 28 Type of Test: 99 29 Most Harmful Event 2 24 BAC Test Result: 1 30 Driver Contributing Code 1 25 25 Susp. Alcohol: 2 31 Susp. Drug: 2 32 Driver Distracted by 0 26 Towed from scene? 2 33

Table with 10 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, [], [], [], [], [], [], []

Please Select One of the Following: [] Vehicle 21 #Occupants [] Non-Motorist A Type 15 Action 16 Location 17 Condition 18 [X] Hit/Run [] Moped

License # St DOB/Age Sex Lic. Class 19 19 Lic. Restrictions 20 CDL Endorsement Operator unknown 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

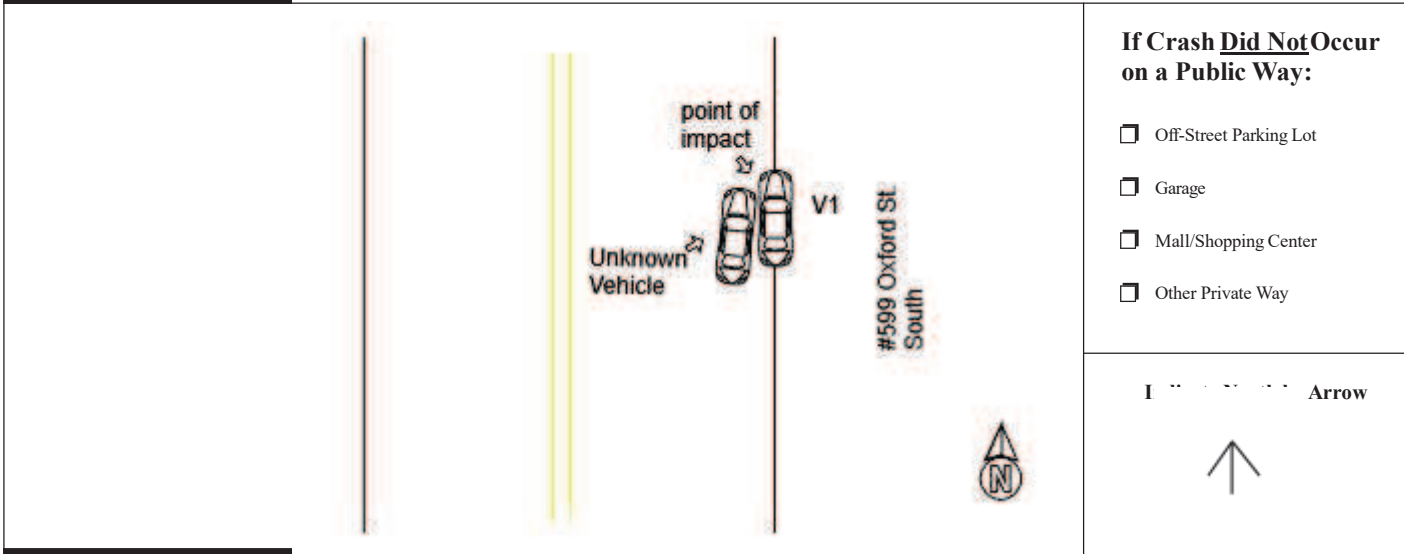
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→ = Direction 1 = Vehicle 1 2 = Vehicle 2
 = Pedestrian = Bicycle

ie: → 1 → 2 → →

Crash Diagram:



Crash Narrative:

Vehicle 1 was parked outside of #599 Oxford St. South (Public way in Auburn). Vehicle 1 was unoccupied. An unknown vehicle struck Vehicle 1 on its front driver's side.

Witnesses:

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

Property Damage:

Owner (Last,First,Middle)	Address	Phone #	41-Type	Description of Damaged Property

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 Derek P Courchaine **75DC** **Auburn Police Department** **08/28/2023**
 Police Officer Name (Please Print) Signature ID/Badge # Department Precinct/Barracks Date