

Date of Crash 10/17/2023	Time of Crash 1621 24HR	City/Town Auburn	Motor Vehicle Crash Police Report	Number Vehicles 2	Number Injured 1	Speed Limit 40	State Police <input type="checkbox"/>	
				Latitude _____	Longitude _____	Local Police <input checked="" type="checkbox"/>	MBTA Police <input type="checkbox"/>	Campus Police <input type="checkbox"/>

AT INTERSECTION: < LOCATION > NOT AT INTERSECTION:

Route# _____ Direction _____ Name of Roadway/Street _____ At _____		Route# 680 Direction _____ Address # SOUTHBRIDGE ST Name of Roadway/Street _____	
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____ Also at Intersection with _____		Feet <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input type="checkbox"/> W of _____ Mile Marker _____ or _____ Exit Number _____	
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____		Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ Route# _____ Intersecting Roadway/Street _____	
		Feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ Landmark _____	

Please Select One of the Following: Vehicle **1** #Occupants Hit/Run Moped **Crash Report ID# 23-345-AC**

License # S45140301 St MA DOB/Age 08/14/1953	Reg # 16RX52 Reg Type PC Reg State MA
Sex M Lic. Class D 19 19 Lic. Restrictions 99 20 CDL _____ Endorsement _____	Veh Year 2018 Veh Make LINCOLN Veh Config. 1 21
Operator MORIN, RICHARD PAUL Last First Middle	Owner MORIN, RICHARD PAUL Last First Middle
Address 6 PINEHURST AVE	Address 6 PINEHURST AVE
City AUBURN State MA Zip 01501-1228	City AUBURN State MA Zip 01501-1228
Insurance Company THE STANDARD FIRE INSURAN	Vehicle Action Prior to Crash 1 22 Damaged Area Code: 1 27 27 27
Vehicle Travel Direction: <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> E <input type="checkbox"/> W Responding to Emergency? 2	Event Sequence 1 23 23 23 23 Test Status: 1 28
Citation # (If Issued) _____	Most Harmful Event 1 24 Type of Test: 97 29
Viol. 1: Ch/Sec/Sub _____ Viol. 2: Ch/Sec/Sub _____	BAC Test Result: 1 30
Viol. 3: Ch/Sec/Sub _____ Viol. 4: Ch/Sec/Sub _____	Driver Contributing Code 1 25 18 25 Susp. Alcohol: 2 31 Susp. Drug: 2 32
	Driver Distracted by 0 26 Towed from scene? 1 33

Please fill out for operator and all occupants involved		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	See Above	XXXXXX	M	1	1	1	0	0	0	0	XXXXXXXXXX

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

License # SA7720091 St MA DOB/Age 06/30/2004	Reg # 3XWN23 Reg Type PC Reg State MA
Sex M Lic. Class D 19 19 Lic. Restrictions 99 20 CDL _____ Endorsement _____	Veh Year 2006 Veh Make BMW Veh Config. 1 21
Operator GONZALEZ, SEBASTIAN IV Last First Middle	Owner GONZALEZ, SEBASTIAN IV Last First Middle
Address 193 TACOMA ST	Address 193 TACOMA ST
City WORCESTER State MA Zip 01605-3535	City WORCESTER State MA Zip 01605-3535
Insurance Company PILGRIM INSURANCE COMPANY	Vehicle Action Prior to Crash 6 22 Damaged Area Code: 7 27 0 27 27
Vehicle Travel Direction: <input type="checkbox"/> N <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> W Responding to Emergency? 2	Event Sequence 1 23 23 23 23 Test Status: 1 28
Citation # (If Issued) _____	Most Harmful Event 1 24 Type of Test: 97 29
Viol. 1: Ch/Sec/Sub _____ Viol. 2: Ch/Sec/Sub _____	BAC Test Result: 30
Viol. 3: Ch/Sec/Sub _____ Viol. 4: Ch/Sec/Sub _____	Driver Contributing Code 4 25 18 25 Susp. Alcohol: 2 31 Susp. Drug: 2 32
	Driver Distracted by 0 26 Towed from scene? 1 33

Please fill out for operator/non-motorist and all occupants involved		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/Non-Motorist	See Above	XXXXXX	F	1	1	3	0	0	10	1	
ERIN BROUILLETTE	64 WHIPPLE ST WORCESTER, MA 016**	11/20/2001	F	3	1	3	0	0	10	1	

