

Date of Crash 01/19/2024 Time of Crash 0721 City/Town Auburn

Motor Vehicle Crash Police Report

Number Vehicles 1 Number Injured 1 Speed Limit 30 State Police Local Police MBTA Police Campus Police Other: [ ]

AT INTERSECTION: < LOCATION > NOT AT INTERSECTION:

SWANSON RD VINE ST
Route# Direction Name of Roadway/Street
At
Name of Intersecting Roadway/Street
Also at Intersection with
Name of Intersecting Roadway/Street

Please Select One of the Following: [X] Vehicle 1 #Occupants [ ] Hit/Run [ ] Moped Crash Report ID# 24-24-AC

License # [redacted] St [redacted] DOB/Age [redacted] Reg # 4ZLV28 Reg Type PAN Reg State MA
Sex [redacted] Lic. Class D 19 19 Lic. Restrictions 20 CDL [redacted] Endorsement
Operator [redacted] Last First Middle
Address [redacted]
City [redacted] State [redacted] Zip [redacted]
Insurance Company THE COMMERCE INSURANCE CO
Vehicle Action Prior to Crash 4 22 Damaged Area Code: 2 27 1 27 8 27
Event Sequence 22 23 23 23 23 Test Status: 28
Type of Test: 29
BAC Test Result: 30
Driver Contributing Code 9 25 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. Row 1: Operator, See Above, [redacted], [redacted], 1, 1, 1, 0, 0, [redacted], [redacted], [redacted]

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

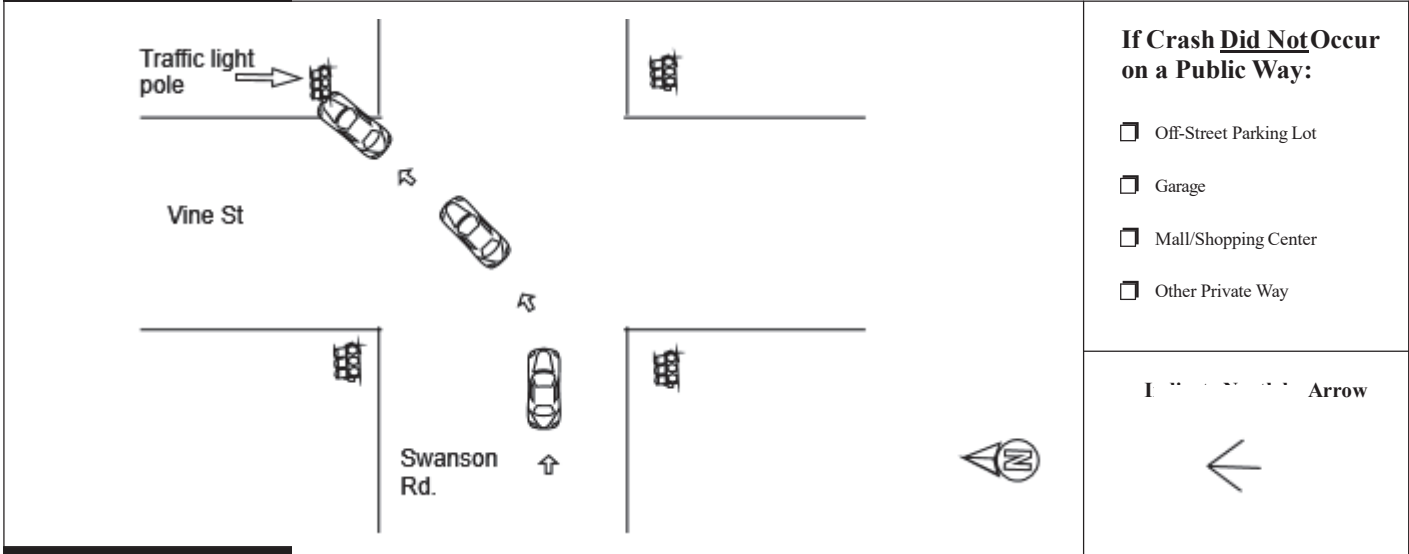
License # [redacted] St [redacted] DOB/Age [redacted] Reg # [redacted] Reg Type [redacted] Reg State [redacted]
Sex [redacted] Lic. Class D 19 19 Lic. Restrictions 20 CDL [redacted] Endorsement
Operator [redacted] Last First Middle
Address [redacted]
City [redacted] State [redacted] Zip [redacted]
Insurance Company [redacted]
Vehicle Action Prior to Crash [redacted] 22 Damaged Area Code: 27 27 27
Event Sequence 23 23 23 23 Test Status: 28
Type of Test: 29
BAC Test Result: 30
Driver Contributing Code [redacted] 25 25 Susp. Alcohol: 31 Susp. Drug: 32
Driver Distracted by [redacted] 26 Towed from scene? [redacted] 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. Row 1: Operator/Non-Motorist, See Above, [redacted], [redacted], 1, [redacted], [redacted], [redacted], [redacted], [redacted], [redacted], [redacted]

➔ = Direction    1 = Vehicle 1    2 = Vehicle 2    ♂ = Pedestrian    ♀ = Bicycle

**Crash Diagram:**

ie: ➔ 1 ➔ 2 ➔ ♂ ➔ ♀



**Crash Narrative:**

Operator stated she sped up to beat red traffic light and was not able to make the left turn and crashed into pole.

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**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 Tod J Kuchnicki 49TK Auburn Police Department 01/19/2024  
 Police Officer Name (Please Print) Signature ID/Badge # Department Precinct/Barracks Date