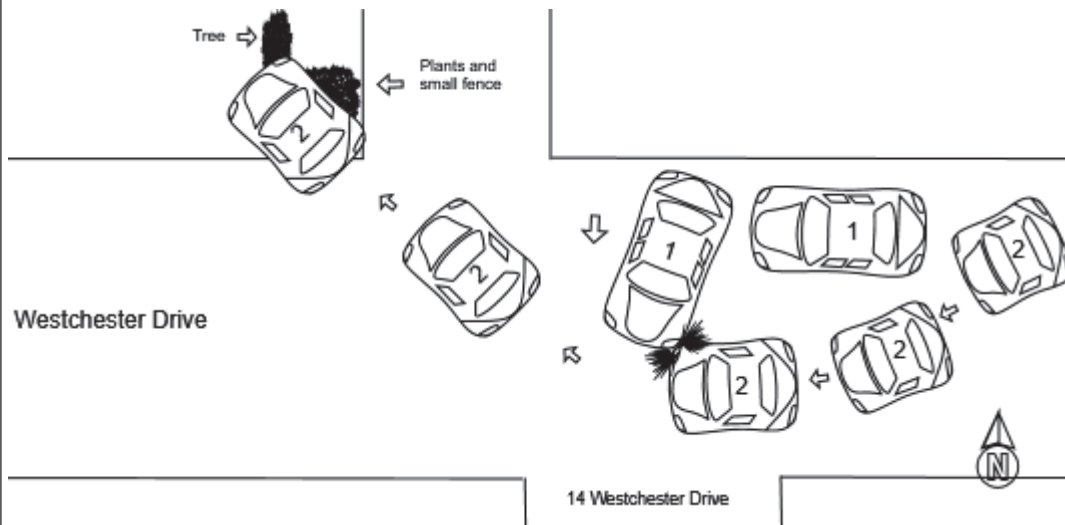


Police Use Only			Commonwealth of Massachusetts						RMV Document Number																		
Date of Crash 05/25/2025		Time of Crash 1209 24HR		City/Town Auburn		Motor Vehicle Crash Police Report			Number Vehicles 2		Number Injured 0		Speed Limit 30 Latitude Longitude		State Police Local Police MBTA Police Campus Police Other:												
AT INTERSECTION:						< LOCATION >		NOT AT INTERSECTION:																			
<div>1</div> <div>Route# Direction Name of Roadway/Street</div> <div>At</div> <div>Route# Direction Name of Intersecting Roadway/Street</div> <div>Also at Intersection with</div> <div>Route# Direction Name of Intersecting Roadway/Street</div>						<div>2</div> <div>12 WESTCHESTER DR</div> <div>Route# Direction Address # Name of Roadway/Street</div> <div>Feet N S E W of or Mile Marker Exit Number</div> <div>Feet N S E W of Route# Intersecting Roadway/Street</div> <div>Feet N S E W of Landmark</div>										<div>10</div>											
<div>2</div> <div>2</div>						<div>4</div> <div>11</div>																					
<div>3</div> <div>Please Select One of the Following:</div> <div><input checked="" type="checkbox"/> Vehicle 11 #Occupants</div> <div><input type="checkbox"/> Hit/Run</div> <div><input type="checkbox"/> Moped</div>						<div>Crash Report ID# 25-178-AC</div>																					
<div>4</div> <div>1</div> <div>License # S42029984 St MA DOB/Age 06/12/1950</div> <div>Sex M Lic. Class D 19 19 Lic. Restrictions B 20 CDL Endorsement</div> <div>Operator VERDERESE, PAUL CHRISTOPHER</div> <div>Address 14 WESTCHESTER DR</div> <div>City AUBURN State MA Zip 01501-2910</div> <div>Insurance Company THE STANDARD FIRE INSURAN</div> <div>Vehicle Travel Direction: N X E W Responding to Emergency? 2</div> <div>Citation # (If Issued)</div> <div>Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub</div> <div>Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub</div>						<div>1</div> <div>12</div> <div>Reg # CL3909 Reg Type PC Reg State MA</div> <div>Veh Year 2020 Veh Make TOYOTA Veh Config. 1 21</div> <div>Owner VERDERESE, PAUL CHRISTOPHER</div> <div>Address 14 WESTCHESTER DR</div> <div>City AUBURN State MA Zip 01501-2910</div> <div>Vehicle Action Prior to Crash 4 22</div> <div>Event Sequence 1 23 23 23 23</div> <div>Most Harmful Event 1 24</div> <div>Driver Contributing Code 1 25 25</div> <div>Driver Distracted by 0 26 26</div> <div>Damaged Area Code: 8 27 1 27 2 27</div> <div>Test Status: 1 28</div> <div>Type of Test: 29</div> <div>BAC Test Result: 30</div> <div>Susp. Alcohol: 2 31 Susp. Drug: 2 32</div> <div>Towed from scene? 1 33</div>										<div>1</div> <div>13</div>											
<div>5</div> <div>2</div> <div>Please fill out for operator and all occupants involved</div> <div>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</div> <div>Operator See Above</div>						<div>6</div> <div>1</div>																					
<div>7</div> <div>1</div> <div>Please Select One of the Following:</div> <div><input checked="" type="checkbox"/> Vehicle 21 #Occupants</div> <div><input type="checkbox"/> Hit/Run</div> <div><input type="checkbox"/> Moped</div> <div><input type="checkbox"/> Vulnerable User Complete the Vulnerable User section.</div>						<div>8</div> <div>1</div> <div>License # S39592652 St MA DOB/Age 10/09/1986</div> <div>Sex X Lic. Class D 19 19 Lic. Restrictions B 20 CDL Endorsement</div> <div>Operator SHEENA, STEPHANIE S</div> <div>Address 23 HAROLD ST</div> <div>City WORCESTER State MA Zip 01604-2315</div> <div>Insurance Company SAFETY INSURANCE COMPANY</div> <div>Vehicle Travel Direction: N X E W Responding to Emergency? 2</div> <div>Citation # (If Issued) 451422AD</div> <div>Viol. 1: Ch/Sec/Sub 90 16 Viol. 2: Ch/Sec/Sub 89 4A</div> <div>Viol. 3: Ch/Sec/Sub 90 14B Viol. 4: Ch/Sec/Sub</div>										<div>9</div> <div>2</div> <div>Reg # 5DYD91 Reg Type PC Reg State MA</div> <div>Veh Year 2015 Veh Make Mini Cooper Veh Config. 1 21</div> <div>Owner SHEENA, STEPHANIE S</div> <div>Address 23 HAROLD ST</div> <div>City WORCESTER State MA Zip 01604-2315</div> <div>Vehicle Action Prior to Crash 9 22</div> <div>Event Sequence 1 23 21 23 23 23</div> <div>Most Harmful Event 1 24</div> <div>Driver Contributing Code 10 25 25</div> <div>Driver Distracted by 99 26 26</div> <div>Damaged Area Code: 11 27 27 27</div> <div>Test Status: 1 28</div> <div>Type of Test: 29</div> <div>BAC Test Result: 30</div> <div>Susp. Alcohol: 2 31 Susp. Drug: 2 32</div> <div>Towed from scene? 1 33</div>										<div>1</div> <div>14</div>	
<div>9</div> <div>2</div> <div>Please fill out for operator and all occupants involved</div> <div>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</div> <div>Operator/Occupants See Above</div>																											

→ = 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

I _____ Arrow



Crash Narrative:

Vehicle 1 was travelling on Westchester Drive on the way home and Vehicle 2 was travelling behind him. Vehicle 1 slowed down and started to take a left into his driveway on Westchester Drive. As Vehicle 1 was taking the left, Vehicle 2 tried to drive around Vehicle 1 on the left side and sideswiped Vehicle 1 and damaged the entire front bumper. Vehicle 2 then continued travelling and swerved onto the grass of 13 Westchester and hit a tree on the property of 11 Westchester. Due to the circumstances of the crash, the operator of Vehicle 2 was cited for Chapter 90 Section 16 - Improper Operation of a Motor Vehicle for trying to go around Vehicle 1 on the left side.

Witnesses:

Name (Last,First,Middle)	Address	Phone #	Statement
KENNEDY MAUREEN	12 WESTCHESTER DR AUBURN MA 01501		
FALL DAWN LILLEY	16 WESTCHESTER DR AUBURN MA 01501		

Property Damage:

Owner (Last,First,Middle)	Address	Phone #	41-Type	Description of Damaged Property
WITTER WILLIAM EDWARD	11 WESTCHESTER DR AUBURN MA 01501-2		97	TREE/GRASS
PELLEGRINI JILL ANN	13 WESTCHESTER DR AUBURN MA 01501-2		97	SMALL GARDEN/CHICKEN WIRE FENCE

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 Rachel B Crowley

Police Officer Name (Please Print)

Signature

92RC

ID/Badge #

Auburn Police Department

Department

Precinct/Barracks

05/25/2025

Date