| | Police Use Only | Commonwealth of Massachusetts RMV Document Number | | | | | | | | | | | |
|-----------------------|--|---|--|-------------------------|--------------|-------------------|------------------------|---------------------|-----------------------------|------------------|---|----------------------|-------------------------|
| | Date of Crash Time of Crash | Motor Vel | Vehicle Crash Nu Vehicle Crash | | | | Number Injured | Speed | Limit_ | 40 | State Police Local Police MBTA Police Campus Police | 7 | |
| | 09/14/2025 1024 Aub | urn | Police | Report | | 2 | C | | Latitu | | | Campus Police Other: | |
| | AT INTERSECT | ION: | < LOC | ATION : | > | | N | OT A | - U | | SEC' | TION: | 7 |
| | | | | | | | | | | | | 2 10 | |
| | B | N CD 1 (G) | | | | 300 | | WAS | HIN | | | | |
| ¹ 1 | Route# Direction | Name of Roadway/Stree | et | Route# Direct | 10n | Addre | SS# | | N | ame of | Roadw | /ay/Street | - |
| | | 110 | | Feet [| N S I | E W | of — | - — | _ • | · — | or _ | | |
| | Route# Direction N | ame of Intersecting Roadwa | y/Street | - | | $\overline{}$ | | Mile N | Aarker | | | Exit Number | 4 11 |
| | | 'n | 1 | | E W ofRoute# | | | | Intersecting Roadway/Street | | | - | |
| ² 1 | Route# Direction N | y/Street | Feet N S E W of | | | | | | • | | | | |
| 1 | | | | Ц | | | _ | | | La | ndmark | ζ | _ |
| 3 | Please Select One of the Following: | #Occupants | tun Moped | Crash R | eport II | D# 2 | 25- | 30 | 2- | AC |) | | |
| | | <u>IA</u> DOB/Age 02/11 | 1/1986 p | 1 32CW93 | | | | р т | DC. | | D | g., M A | ┨ |
| | 19 19 | 20 | • | | | | | | | | | 21 | 1 12 |
| | | End | dorsement | Year 2017 | | | | | | | _ Veh | Config. | |
| 4 . | Operator MCKENZIE, SEAN ANTHONY Last First Middle Owner MCKENZIE, SEAN ANTHONY Last First Middle | | | | | | | | | | iddle | - | |
| ⁴ 1 | Address 23 CONWAY ST Address 23 CONWAY ST | | | | | | | | | | | | |
| | City WORCESTER Stat | -1701 City | City WORCESTER State MA Zip 01607-1701 | | | | | | | | | | |
| | Insurance Company THE STAND | ARD FIRE IN | SURAN Veh | nicle Action Prior to C | Crash | (| 6 22 | | Damageo | d Area (| Code: | | |
| - | Vehicle Travel Direction: N S W | Responding to Emerge | ncy? 2 Eve | ent Sequence 1 | 23 2 | 23 | 23 2 | 9 | Test Stat | | | 1 28 | |
| 5 | Citation # (If Issued) | | Mo | st Harmful Event | 1 | 24 | | | Type of | | | 30 | |
| | Viol. 1: Ch/Sec/Sub | Viol 2: Ch/Soc/Sub | Dri | ver Contributing Cod | | 99 ² | 25 | 25 | BAC Tes | | | | 1 13 |
| | | | | ver Distracted by | | 26 | 26 | | Susp. Ale Towed fi | | _ | 22 | |
| ⁶ 1 | Viol. 3: Ch/Sec/Sub | rator and all occupants invol | | Ver Distracted by | 99 | 34 | 35 | 36 3 | 7 38 | 39 | 40 | 2 33 | _ |
| | Name (Last First Middle) | • | Address | DOB/Age | Sex | | | rbag Eje atus Co | de Code | Injury Status | Transp. Code | Medical Facility | |
| | Operator | Se | e Above | \rightarrow | X | 1 | 1 4 | 0 | o | 10 | 1 | | |
| | | | | | | | | | | | | | 1 |
| | | | | | | | | | | | | | - |
| | | | | | | | | | | | | | 4 |
| | | | | | | | | | | | | | |
| ⁷ 1 | Please Select One of the Following: | | | | | | | | | | | | |
| 1 | | 1A DOB/Age 08/10 | 0/2000 - | 41 53 70 | | | | | DC | | | . 147 | ┥ |
| | 10 10 | · | Reg # 4LFA72 Reg Type PC Reg State PA 21 | | | | | | | | | | |
| | Sex M Lic. Class D Lic. | | Veh Make NISSAN Veh Config. 1 | | | | | | | | | | |
| ⁸ 2 | Operator RIVERA, XAVIE | Middle | Owner NIEVES, YANIRA Last First Middle | | | | | | | | | | |
| 2 | Address 1 BOTTOMLEY AV | E APT 1R | Ado | dress 21 STA | TE | ST | AP | T J | • | | | | 14 |
| | City CHERRY VALLEY Stat | e MA Zip 01611 | -3156 City | LEOMINS | <u>rer</u> | | | - | | | - | 1453-1514 | 97 ¹⁴ |
| | Insurance Company PROGRESSI | VE CASUALTY | INSU Veh | nicle Action Prior to C | Crash | • | 6 22 | | Damage | d Area (| Code: | | |
| | Vehicle Travel Direction: N S W W | Responding to Emerge | ncy? <u>2</u> Eve | ent Sequence 1 | 23 2 | 23 | 23 2 | ٥ | Test Stat | | | 1 28 | |
| 9 | Citation # (If Issued) | | Mo | st Harmful Event | 1 | 24 | | | Type of | | 14. | 30 | |
| ⁹ 2 | Viol. 1: Ch/Sec/Sub | -Viol. 2: Ch/Sec/Sub | Dri | ver Contributing Cod | e | 99 ² | 25 | 25 | BAC Tes | | | | |
| | Viol. 3: Ch/Sec/Sub | - | Driver Distracted by 99 | | | 26 26 Susp. Alcol | | | | | 22 | | |
| | | rator and all occupants invol | | | | 34 | 35 | 36 3 | 7 38 | 39 | 40 | | _ |
| | Name (Last First Middle) | • | Address | DOB/Age | Sex | Seat Pos. | Safety Ai System St | rbag Eje atus Co | de Code | Injury Status | Transp. Code | Medical Facility | _ |
| | Operator/Occupants | Se | e Above | \rightarrow | X | 1 | 1 4 | 0 | 0 | 10 | 1 | | |
| | | | | | м | 3 | 1 4 | 0 | 0 | 10 | 1 | | 7 |
| | | | | | м | 6 | 1 4 | 0 | 0 | 10 | 1 | | - |
| | | | | | | - | _ = | | + | | _ | | - |
| | | | | | 1 | | | | | | | | 1 |



Patrolman Rachel B Crowley

92RC

Auburn Police Department

09/14/2025

Police Officer Name (Please Print)

Signature

ID/Badge #

Precinct/Barracks Department

Date