

Police Use Only				Commonwealth of Massachusetts										RMV Document Number							
Date of Crash 04/12/2023		Time of Crash 0806 24HR		City/Town Auburn		Motor Vehicle Crash Police Report				Number Vehicles 1		Number Injured 0		Speed Limit 5		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>Route# Direction Address # Name of Roadway/Street</div> <div>56 AUBURN ST</div> <div>Feet N S E W of . or</div> <div>Mile Marker Exit Number</div> <div>Feet N S E W of</div> <div>Route# Intersecting Roadway/Street</div> <div>Feet N S E W of</div> <div>Landmark</div>															
Please Select One of the Following:						<input checked="" type="checkbox"/> Vehicle 1 Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Crash Report ID# 23-122-AC									
License # S76130651 St MA DOB/Age 01/23/1948						Reg # 2CV135 Reg Type PC Reg State MA															
Sex F Lic. Class D 19 19 Lic. Restrictions 99 20 CDL Endorsement						Veh Year 2015 Veh Make ACURA Veh Config. 1 21															
Operator LUKS, LINDA A Last First Middle						Owner LUKS, RICHARD W Last First Middle															
Address 38 LAUREL ST						Address 38 LAUREL ST															
City AUBURN State MA Zip 01501-1500						City AUBURN State MA Zip 01501-1500															
Insurance Company THE COMMERCE INSURANCE CO						Vehicle Action Prior to Crash 1 22 Damaged Area Code: 2 27 27 27															
Vehicle Travel Direction: N S X W Responding to Emergency? 2						Event Sequence 35 23 23 23 23 Test Status: 28															
Citation # (If Issued)						Most Harmful Event 35 24 Type of Test: 29															
Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub						Driver Contributing Code 97 25 25 BAC Test Result: 30															
Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub						Driver Distracted by 0 26 Susp. Alcohol: 31 Susp. Drug: 32															
Please fill out for operator and all occupants involved						Towed from scene? 1 33															
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 See Above						1 99 4 0 0 10 1															
Please Select One of the Following:						<input type="checkbox"/> Vehicle 2 Occupants		<input type="checkbox"/> Non-Motorist A		Type 15		Action 16		Location 17		Condition 18		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped	
License # St DOB/Age						Reg # Reg Type Reg State															
Sex Lic. Class D 19 19 Lic. Restrictions 20 CDL Endorsement						Veh Year Veh Make Veh Config. 21															
Operator Last First Middle						Owner Last First Middle															
Address						Address															
City State Zip						City State Zip															
Insurance Company						Vehicle Action Prior to Crash 22 Damaged Area Code: 27 27 27															
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Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub						Driver Distracted by 26 Susp. Alcohol: 31 Susp. Drug: 32															
Please fill out for operator/non-motorist and all occupants involved						Towed from scene? 33															
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/Non-Motorist See Above						1															

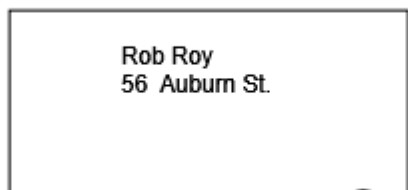
→ = Direction    1 = Vehicle 1    2 = Vehicle 2    ○ = Pedestrian    ○ = Bicycle

### Crash Diagram:

ie: → 1 → 2 → ○ → ○



PARKING SPOTS →



MV

← AUBURN STREET

### If Crash Did Not Occur on a Public Way:

- ☐ Off-Street Parking Lot
- ☐ Garage
- ☐ Mall/Shopping Center
- ☐ Other Private Way

↓ Arrow



### Crash Narrative:

A single motor vehicle struck the support column of the Rob Roy Hair Salon located at 56 Auburn Street. The vehicle operator stated that while she was attempting to park her vehicle, her foot became stuck in the accelerator and brake pedals. She was unable to stop and therefore struck the business. There were no injuries reported. The town building inspector was notified and responded to the access the damage. Photos were taken and attached to this report. The vehicle was towed from the business at the request of the registered owner by AAA towing.

### Witnesses:

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

### Property Damage:

Owner (Last,First,Middle)	Address	Phone #	41-Type	Description of Damaged Property
ROB-ROY HAIR SALON	56 AUBURN ST AUBURN MA 01501			BUILDING SUPPORT COLUMN

### 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 John P MacLean

Police Officer Name (Please Print)

Signature

65JM

ID/Badge #

Auburn Police Department

Department

Precinct/Barracks

04/12/2023

Date