

Date of Crash 07/25/2024	Time of Crash 1647 24HR	City/Town Auburn	Motor Vehicle Crash Police Report	Number Vehicles 2	Number Injured 0	Speed Limit <u>40</u>	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# <u>850</u> Direction _____ Address # <u>SOUTHBRIDGE ST</u> Name of Roadway/Street _____	
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____ Also at Intersection with _____		Feet <u>N S E W</u> of _____ of _____ or _____ Mile Marker _____ Exit Number _____	
Route# _____ Direction _____ Name of Intersecting Roadway/Street _____		Feet <u>N S E W</u> of _____ of _____ Route# _____ Intersecting Roadway/Street _____	
		Landmark _____	

Please Select One of the Following: Vehicle 1 #Occupants Hit/Run Moped Vulnerable User

Crash Report ID# **24-249-AC**

License # <u>S87938677</u> St <u>MA</u> DOB/Age <u>04/12/2000</u>	Reg # <u>3JPN25</u> Reg Type <u>PC</u> Reg State <u>MA</u>
Sex <u>M</u> Lic. Class <u>D 19 19</u> Lic. Restrictions <u>1 20</u> CDL _____	Veh Year <u>2018</u> Veh Make <u>AUDI</u> Veh Config. <u>1 21</u>
Operator <u>KOCHINSKAS, RYAN COTE</u>	Owner <u>KOCHINSKAS, RYAN COTE</u>
Address <u>43 BUFFUM RD</u>	Address <u>43 BUFFUM RD</u>
City <u>CHARLTON</u> State <u>MA</u> Zip <u>01507-1406</u>	City <u>CHARLTON</u> State <u>MA</u> Zip <u>01507-1406</u>
Insurance Company <u>PROGRESSIVE CASUALTY INSU</u>	Vehicle Action Prior to Crash <u>1 22</u> Damaged Area Code: <u>4 27 27 27</u>
Vehicle Travel Direction: <u>N S E X</u> Responding to Emergency? <u>2</u>	Event Sequence <u>1 23 23 23 23</u> Test Status: <u>1 28</u>
Citation # (If Issued) _____	Most Harmful Event <u>1 24</u> Type of Test: <u>1 29</u>
Viol. 1: Ch/Sec/Sub _____ Viol. 2: Ch/Sec/Sub _____	Driver Contributing Code <u>99 25 25</u> BAC Test Result: <u>1 30</u>
Viol. 3: Ch/Sec/Sub _____ Viol. 4: Ch/Sec/Sub _____	Driver Distracted by <u>0 26 26</u> Susp. Alcohol: <u>2 31</u> Susp. Drug: <u>2 32</u>
	Towed from scene? <u>2 33</u>

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	4	0	0	10	1	

Please Select One of the Following: Vehicle 2 #Occupants Hit/Run Moped Vulnerable User Complete the Vulnerable User section.

License # <u>S12063784</u> St <u>MA</u> DOB/Age <u>07/16/1979</u>	Reg # <u>2NL364</u> Reg Type <u>PC</u> Reg State <u>MA</u>
Sex <u>F</u> Lic. Class <u>D 19 19</u> Lic. Restrictions <u>1 20</u> CDL _____	Veh Year <u>2018</u> Veh Make <u>TOYOTA</u> Veh Config. <u>1 21</u>
Operator <u>LACONTO, LISA LYNN</u>	Owner <u>LACONTO, LISA LYNN</u>
Address <u>146 RICHARDSON CORNER RD</u>	Address <u>146 RICHARDSON CORNER RD</u>
City <u>CHARLTON</u> State <u>MA</u> Zip <u>01507-1441</u>	City <u>CHARLTON</u> State <u>MA</u> Zip <u>01507-1441</u>
Insurance Company <u>THE COMMERCE INSURANCE CO</u>	Vehicle Action Prior to Crash <u>5 22</u> Damaged Area Code: <u>7 27 27 27</u>
Vehicle Travel Direction: <u>N S E X</u> Responding to Emergency? <u>2</u>	Event Sequence <u>1 23 23 23 23</u> Test Status: <u>1 28</u>
Citation # (If Issued) _____	Most Harmful Event <u>1 24</u> Type of Test: <u>1 29</u>
Viol. 1: Ch/Sec/Sub _____ Viol. 2: Ch/Sec/Sub _____	Driver Contributing Code <u>99 25 25</u> BAC Test Result: <u>1 30</u>
Viol. 3: Ch/Sec/Sub _____ Viol. 4: Ch/Sec/Sub _____	Driver Distracted by <u>99 26 26</u> Susp. Alcohol: <u>2 31</u> Susp. Drug: <u>2 32</u>
	Towed from scene? <u>2 33</u>

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/Occupants	See Above	XXXXXX	F	1	1	4	0	0	10	1	
KATIE SLINGO-SARETTE	146 RICHARDSON CORNER RD CHARLTON, MA 01507-1441	08/09/1982	F	3	1	4	0	0	10	1	

