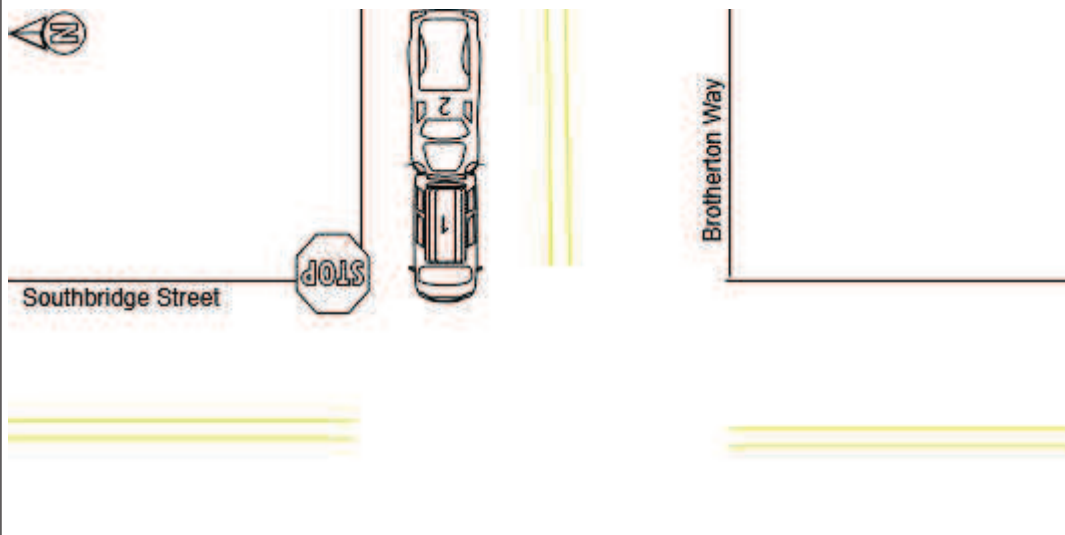


Police Use Only			Commonwealth of Massachusetts					RMV Document Number							
Date of Crash 08/09/2024		Time of Crash 2032 24HR		City/Town Auburn		Motor Vehicle Crash Police Report			Number Vehicles 2	Number Injured 0	Speed Limit 30 Latitude Longitude		State Police Local Police MBTA Police Campus Police Other:		
AT INTERSECTION:				< LOCATION >		NOT AT INTERSECTION:									
<div>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>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>0 Feet N S E W of AT SOUTHBRIDGE STREET</div> <div>Landmark</div>								2 10	
														2 11	
														2 12	
														1 13	
Please Select One of the Following:		<input checked="" type="checkbox"/> Vehicle 12 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Crash Report ID# 24-273-AC							
License # S19391214 St MA DOB/Age 10/06/1998						Reg # 3NJF27 Reg Type PAN Reg State MA								1 12	
Sex F Lic. Class D 19 19 Lic. Restrictions 20 CDL Endorsement						Veh Year 2022 Veh Make TOYOTA Veh Config. 1 21								1 12	
Operator ALVAREZ, JAQUELINE ALEXANDRIA						Owner ALVAREZ, JOSE A								1 12	
Address 1 KINGSBURY ST APT 2						Address 1 KINGSBURY ST APT 2								1 12	
City WORCESTER State MA Zip 01610-1420						City WORCESTER State MA Zip 01610-1420								1 12	
Insurance Company PROGRESSIVE CASUALTY INSU						Vehicle Action Prior to Crash 11 22								1 12	
Vehicle Travel Direction: N S E X Responding to Emergency? 2						Event Sequence 1 23 23 23 23								1 12	
Citation # (If Issued)						Most Harmful Event 1 24								1 12	
Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub						Driver Contributing Code 1 25 25								1 13	
Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub						Driver Distracted by 0 26 26								1 13	
Please fill out for operator and all occupants involved														1 13	
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		X		X		1	1	4	0	0	10	1	
ELBA BLANCO ALVAREZ		1 KINGSBURY ST WORCESTER, MA 01610-1420		11/20/1967		F		3	1	4	0	0	10	1	
Please Select One of the Following:		<input checked="" type="checkbox"/> Vehicle 21 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		<input type="checkbox"/> Vulnerable User Complete the Vulnerable User section.							
License # unknown St DOB/Age						Reg # RRT6882 Reg Type PAN Reg State TX								1 14	
Sex Lic. Class D 19 19 Lic. Restrictions 20 CDL Endorsement						Veh Year 2017 Veh Make FORD Veh Config. 2 21								1 14	
Operator unknown						Owner MCCRARY, GRANT LEE								1 14	
Address						Address 5480 LORI VALLEY LN								1 14	
City State Zip						City KELLER State TX Zip 76244								1 14	
Insurance Company						Vehicle Action Prior to Crash 1 22								1 14	
Vehicle Travel Direction: N S E X Responding to Emergency? 2						Event Sequence 1 23 23 23 23								1 14	
Citation # (If Issued)						Most Harmful Event 1 24								1 14	
Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub						Driver Contributing Code 3 25 25								1 14	
Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub						Driver Distracted by 99 26 26								1 14	
Please fill out for operator and all occupants involved														1 14	
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/Occupants		See Above		X		X		1	99	99	99	0	99	1	

→ = 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

Indicate Arrow



### Crash Narrative:

On August 9, 2024, I, Officer Dominic Walker was dispatched to a motor vehicle hit and run at the intersection of Brotherton Way and Southbridge Street. Upon my arrival I spoke with the operator of vehicle one, Jaqueline Alvarez, who advised me that she was stopped at the intersection and a grey truck bearing Texas License Plate RRT6882 rear ended her. When she got out to exchange information, the operator got back into the vehicle and took off towards Worcester. A be on the lookout was issued and I will attempt to identify the other operator. Jaqueline provided me with still images as well as dash camera footage of the incident that I will attach to the subsequent incident report (24-1018-OF).

### 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 Dominic J Walker

Police Officer Name (Please Print)

Signature

87DW

ID/Badge #

Auburn Police Department

Department

Precinct/Barracks

08/09/2024

Date