

# Commonwealth of Massachusetts

## Motor Vehicle Crash Police Report

Date of Crash **01/31/2026** Time of Crash **0900** 24HR

City/Town **Auburn**

Number Vehicles **2**

Number Injured **0**

Speed Limit \_\_\_\_\_  
Latitude \_\_\_\_\_  
Longitude \_\_\_\_\_

State Police   
Local Police   
MBTA Police   
Campus Police   
Other: \_\_\_\_\_

AT INTERSECTION:

< LOCATION >

NOT AT INTERSECTION:

1 1 Route# Direction Name of Roadway/Street

At \_\_\_\_\_

2 1 Route# Direction Name of Intersecting Roadway/Street

Also at Intersection with \_\_\_\_\_

2 1 Route# Direction Name of Intersecting Roadway/Street

Landmark \_\_\_\_\_

3 Please Select One of the Following:

Vehicle **11** #Occupants  Hit/Run  Moped

Crash Report ID# **26-48-AC**

4 1 License # \_\_\_\_\_ St \_\_\_\_\_ DOB/Age \_\_\_\_\_

Reg # **6GEP58** Reg Type **PC** Reg State **MA**

Sex **1** Lic. Class **19 19** Lic. Restrictions **1 20** CDL \_\_\_\_\_ Endorsement \_\_\_\_\_

Veh Year **2010** Veh Make **MERCEDES-BENZ** Veh Config. **1 21**

4 1 Operator \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Owner **KARIUKI, RICHARD I** Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_

Address **1603 FOREST PARK DR**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City **AUBURN** State **MA** Zip **01501-5513**

5 Insurance Company **LM GENERAL INSURANCE COMP**

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**

Test Status: **1 28**

Citation # (If Issued) \_\_\_\_\_

Type of Test: **0 29**

Viol. 1: Ch/Sec/Sub \_\_\_\_\_ Viol. 2: Ch/Sec/Sub \_\_\_\_\_

BAC Test Result: **1 30**

Viol. 3: Ch/Sec/Sub \_\_\_\_\_ Viol. 4: Ch/Sec/Sub \_\_\_\_\_

Susp. Alcohol: **2 31** Susp. Drug: **2 32**

6 1 Please fill out for operator and all occupants involved

Towed from scene? **2 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

<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>10</b>	<b>1</b>
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7 3 Please Select One of the Following:  Vehicle **20** #Occupants  Hit/Run  Moped  Vulnerable User Complete the Vulnerable User section.

Reg # **1JRN79** Reg Type **PC** Reg State **MA**

License # \_\_\_\_\_ St \_\_\_\_\_ DOB/Age \_\_\_\_\_

Veh Year **2013** Veh Make **SUBARU** Veh Config. **1 21**

Sex **1** Lic. Class **19 19** Lic. Restrictions **20** CDL \_\_\_\_\_ Endorsement \_\_\_\_\_

Owner **ZAPARASKAS, JENNIFER LEIGH** Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

8 1 Operator **Driverless M.V.** Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address **701 FOREST PARK DR**

Address \_\_\_\_\_

City **AUBURN** State **MA** Zip **01501-5505**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Vehicle Action Prior to Crash **11 22** Damaged Area Code: **6 27 27 27**

Insurance Company **THE HANOVER INSURANCE COM**

Test Status: **1 28**

Vehicle Travel Direction: **N S E W** Responding to Emergency? \_\_\_\_\_

Type of Test: **0 29**

Citation # (If Issued) \_\_\_\_\_

BAC Test Result: **1 30**

Viol. 1: Ch/Sec/Sub \_\_\_\_\_ Viol. 2: Ch/Sec/Sub \_\_\_\_\_

Susp. Alcohol: **2 31** Susp. Drug: **2 32**

Viol. 3: Ch/Sec/Sub \_\_\_\_\_ Viol. 4: Ch/Sec/Sub \_\_\_\_\_

Towed from scene? **2 33**

9 2 Please fill out for operator and all occupants involved

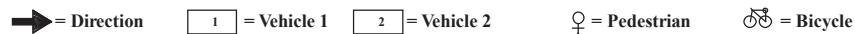
Name (Last First Middle) \_\_\_\_\_ Address \_\_\_\_\_

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**

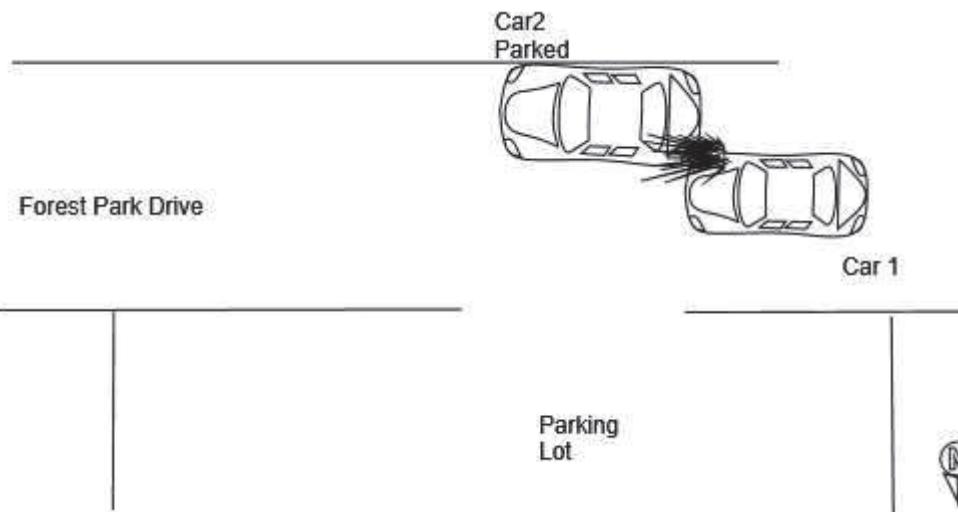
See Above

<b>1</b>	<b>0</b>	<b>4</b>	<b>3</b>	<b>0</b>	<b>10</b>	<b>1</b>
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## Crash Diagram:

ie:



## Crash Narrative:

Car 1 was travelling east in front of 501 forest park drive. There were parked cars parked on the side of the road due to snow removal. Car 1 stated a car was sticking out of the parking lot. Car 1 had the sun directly in his eyes and gave the car coming out of the parking lot room, but ended up clipping the rear of car2. Car 1 had damage to the front right and car2 had rear end damage. Both were drivable and a tow was not needed.

## **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 \_\_\_\_\_

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:** 47 48 49  
Placard Material 1 digit # Material Name \_\_\_\_\_ Material 4 digit # \_\_\_\_\_ Release code

Patrolman Grace Griffin

Police Officer Name (Please Print)

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Signature

98GG

Auburn Police Department

01/31/2026

Date \_\_\_\_\_