

Date of Crash 05/08/2026 Time of Crash 0250 City/Town Auburn

Motor Vehicle Crash Police Report

Number Vehicles 1 Number Injured 0

Speed Limit 30 State Police Local Police MBTA Police Campus Police Other: [ ]

AT INTERSECTION: < LOCATION > NOT AT INTERSECTION:

Location details including Route#, Direction, Name of Roadway/Street, At, and Intersecting Roadway/Street.

Please Select One of the Following: [X] Vehicle 1 #Occupants [ ] Hit/Run [ ] Moped Crash Report ID# 26-184-AC

Operator and Owner information: License #, Reg #, Veh Year, Veh Make, Address, City, State, Zip, Insurance Company, Vehicle Action Prior to Crash, Event Sequence, Most Harmful Event, Driver Contributing Code, Driver Distracted by, Dated Area Code, Test Status, Type of Test, BAC Test Result, Susp. Alcohol, Susp. Drug, Towed from scene?

Table for Operator and all occupants involved. Columns: Name, 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.

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

Operator and Owner information for a second vehicle. License #, Reg #, Veh Year, Veh Make, Address, City, State, Zip, Insurance Company, Vehicle Action Prior to Crash, Event Sequence, Most Harmful Event, Driver Contributing Code, Driver Distracted by, Dated Area Code, Test Status, Type of Test, BAC Test Result, Susp. Alcohol, Susp. Drug, Towed from scene?

Table for Operator/Occupants involved. Columns: Name, 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.

