

Date of Crash 01/05/2026 Time of Crash 1222 City/Town Auburn

Motor Vehicle Crash Police Report

Number Vehicles 2 Number Injured 0 Speed Limit 15 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 11 #Occupants [] Hit/Run [] Moped Crash Report ID# 26-3-AC

Operator and Owner information including License #, Reg #, Veh Year, Veh Make, Veh Config, Address, City, State, Zip, Insurance Company, and Vehicle Action Prior to Crash.

Table with columns: 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.

Please Select One of the Following: [] Vehicle 21 #Occupants [X] Hit/Run [] Moped [] Vulnerable User Complete the Vulnerable User section.

Operator and Owner information for a second vehicle, including License #, Reg #, Veh Year, Veh Make, Veh Config, Address, City, State, Zip, Insurance Company, and Vehicle Action Prior to Crash.

Table with columns: 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.

