

[illegible]

→ = Direction 1 = Vehicle 1 2 = Vehicle 2 ○ = Pedestrian ○ = Bicycle

Crash Diagram:

ie: → 1 → 2 → ○ → ○

If Crash Did Not Occur on a Public Way:

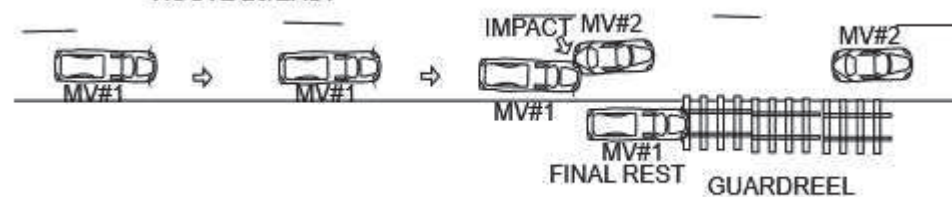
- ☐ Off-Street Parking Lot
- ☐ Garage
- ☐ Mall/Shopping Center
- ☐ Other Private Way

↑ Arrow



ROUTE 20/WEST

ROUTE 20/EAST



Crash Narrative:

MV#1 WAS TRAVELLING EASTBOUND ON RTE.20/WASHINGTON STREET IN THE LANE NEAREST TO THE RIGHT (TRAVEL LANE). MV#2 WAS TRAVELLING AHEAD OF MV#1 IN THE SAME LANE (TRAVEL LANE). AT SOME POINT MV#2 HAD SLOWED OR STOPPED IN THE TRAVEL LANE. MV#1 CONTINUED TO TRAVEL EAST AND IMPACTED THE PASSENGER'S SIDE REAR QUARTER OF MV#2. AS A RESULT OF THE IMPACT MV#1 SWERVED TOWARD THE EASTBOUND SHOULDER OF THE ROADWAY WHERE THE VEHICLE IMPACTED A GUARDREEL WITH THE FRONT OF THE VEHICLE. IMPACT RESULTED IN THE AIRBAGS OF MV#1 BEING DEPLOYED. MV#2 CAME TO FINAL REST A DISTANCE AHEAD OF MV#1 IN THE EASTBOUND LANE. MV#1 CAME TO FINAL REST ON THE EASTBOUND SHOULDER WHERE IT IMPACTED THE GUARDREEL. THERE WAS A WITNESS ON SCENE WHO OBSERVED THE CRASH AND INDICATED THAT MV#2 HAD COME TO A STOP IN THE EASTBOUND TRAVEL LANE. AT THIS POINT MY INVESTIGATION HAS CONCLUDED THAT MV#1 WAS FOLLOWING TOO CLOSELY TO MV#2.

Witnesses:

Name (Last,First,Middle)	Address	Phone #	Statement
LANGEVIN JEFFREY SCOTT	258 WALKER RD STURBRIDGE MA 01566-1387		
AGUILAR WALTER	WASHINGTON ST AUBURN MA 01501		

Property Damage:

Owner (Last,First,Middle)	Address	Phone #	41-Type	Description of Damaged Property
MASS DOT	BANCROFT ST AUBURN MA 01501		3	GUARDREEL RTE.20 HERB CHAMBERS TOYT

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 Jason Miglionico

Police Officer Name (Please Print)

Signature

52JM

ID/Badge #

Auburn Police Department

Department

Precinct/Barracks

08/16/2025

Date