

Date of Crash 05/09/2026 Time of Crash 1454 City/Town Auburn

Motor Vehicle Crash Police Report

Number Vehicles 2 Number Injured 0

Speed Limit 40 State Police Local Police MBTA Police Campus Police Other: []

AT INTERSECTION:

LOCATION

NOT AT INTERSECTION:

Route# Direction Name of Roadway/Street At Route# Direction Name of Intersecting Roadway/Street Also at Intersection with

Route# 809 Direction WASHINGTON ST Address # Name of Roadway/Street Feet N S E W of Mile Marker Exit Number

Please Select One of the Following: [x] Vehicle 1 Occupants [] Hit/Run [] Moped

Crash Report ID# 26-187-AC

License # St. DOB/Age Sex M Lic. Class D 19 19 Lic. Restrictions 1 20 CDL Endorsement

Reg # 9AL762 Reg Type PAN Reg State MA Veh Year 2021 Veh Make FORD Veh Config. 1 21

Operator Last First Middle

Owner HOMEINEX CORP Last First Middle

Address City State Zip

Address 102 PARTRIDGE HL RD City CHARLTON State MA Zip 01507-1456

Insurance Company

Vehicle Action Prior to Crash 2 22 Damaged Area Code: 5 27 27 27

Vehicle Travel Direction: N S E [x] Responding to Emergency? 2

Event Sequence 1 23 23 23 23 Test Status: 28

Citation # (If Issued)

Most Harmful Event 1 24 Type of Test: 29

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

Driver Contributing Code 1 25 25 BAC Test Result: 30

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

Driver Distracted by 0 26 26 Susp. Alcohol: 31 Susp. Drug: 32

Table with 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. Row 1: Operator, See Above, [X], [X], 1, 1, 4, 0, 0, 10, 1.

Please Select One of the Following: [] Vehicle 2 Occupants [x] Hit/Run [] Moped [] Vulnerable User

License # St. DOB/Age Sex Lic. Class 19 19 Lic. Restrictions 20 CDL Endorsement

Reg # unknown Reg Type Reg State Veh Year Veh Make Veh Config. 21

Operator unknown Last First Middle

Owner Last First Middle

Address City State Zip

Address City State Zip

Insurance Company

Vehicle Action Prior to Crash 22 Damaged Area Code: 27 27 27

Vehicle Travel Direction: N S E [x] Responding to Emergency?

Event Sequence 23 23 23 23 Test Status: 28

Citation # (If Issued)

Most Harmful Event 24 Type of Test: 29

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

Driver Contributing Code 25 25 BAC Test Result: 30

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

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Table with 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. Row 1: Operator/Occupants, See Above, [X], [X], 1.

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

Crash Diagram:

ie: → 1 → 2 → ○ → 🚲

Herb Chambers Toyota, 809 Washington St.



If Crash Did Not Occur on a Public Way:

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

↓ Arrow

Crash Narrative:

Mv1 was traveling westbound, on Washington St. (a public way) in the the Town of Auburn.
 Mv1 slowed and stopped at the red light located at the intersection of Washington St. and
 Appleton Rd. (a public way). Mv2 was traveling westbound and rear ended MV1. Mv2 drove
 away from the scene. Mv1's center rear bumper was damaged, there were no injuries and
 vehicle was drivable.

See Incident #26-639-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 Alexander Ortiz-Torres

97AO

Auburn Police Department

05/09/2026

Police Officer Name (Please Print)

Signature

ID/Badge #

Department

Precinct/Barracks

Date