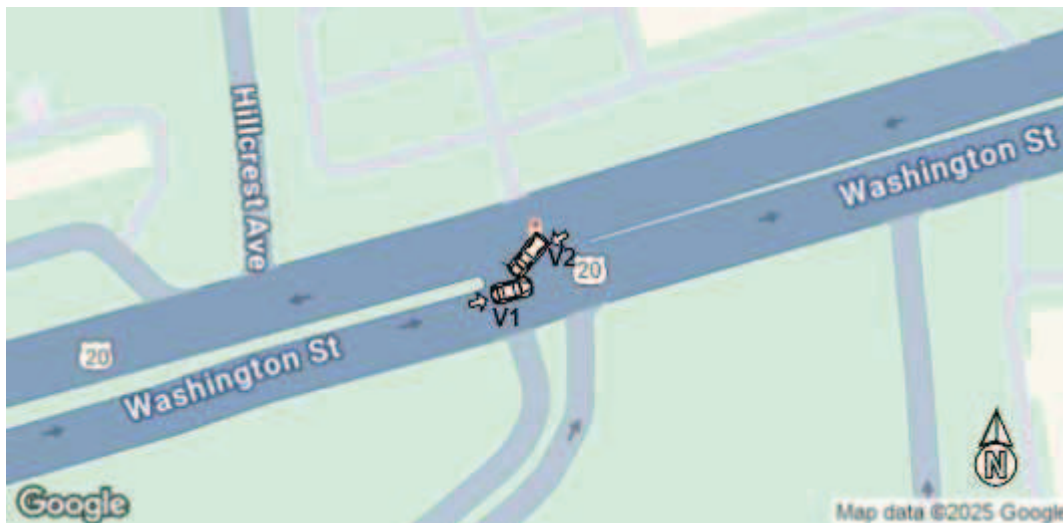


Police Use Only			Commonwealth of Massachusetts					RMV Document Number			
Date of Crash 09/09/2025	Time of Crash 0834 24HR	City/Town Auburn	Motor Vehicle Crash Police Report			Number Vehicles 2	Number Injured 1	Speed Limit 45	Latitude +042.1827	Longitude -071.853	State Police Local Police MBTA Police Campus Police Other:
AT INTERSECTION:			< LOCATION >		NOT AT INTERSECTION:						
<div>11</div> <div>Route# Direction Name of Roadway/Street</div> <div>At</div> <div>Route# Direction Name of Intersecting Roadway/Street</div> <div>Also at Intersection with</div> <div>Route# Direction Name of Intersecting Roadway/Street</div>					<div>210</div> <div>20 E WASHINGTON ST</div> <div>Route# Direction Address # Name of Roadway/Street</div> <div>Feet N S E W of or Mile Marker Exit Number</div> <div>311</div> <div>200 S W HILLCREST AVE</div> <div>Feet N S E W of Route# Intersecting Roadway/Street</div> <div>Landmark</div>						
Please Select One of the Following:			<input checked="" type="checkbox"/> Vehicle 12 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Crash Report ID# 25-295-AC		
License # SA1760614 St MA DOB/Age 08/25/2002					Reg # LVC5029 Reg Type LVN Reg State MA						
Sex F Lic. Class D 19 19 Lic. Restrictions 1 20 CDL Endorsement					Veh Year 2014 Veh Make HONDA Veh Config. 1 21						
Operator FEBUS-ROMERO, CARLA NAIOMI					Owner JANNY TRANSPORTATION SERVICES INC						
Address 19 DANA DR					Address 19 DANA DR						
City OXFORD State MA Zip 01540-1701					City OXFORD State MA Zip 01540-1701						
Insurance Company PILGRIM INSURANCE COMPANY					Vehicle Action Prior to Crash 1 22						
Vehicle Travel Direction: N S X W Responding to Emergency? 1					Event Sequence 1 23 23 23 23						
Citation # (If Issued)					Most Harmful Event 1 24						
Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub					Driver Contributing Code 4 25 25						
Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub					Driver Distracted by 99 26 26						
Please fill out for operator and all occupants involved					Please fill out for operator and all occupants involved						
Operator					See Above						
LISA MURRAY					46 MAIN ST CHARLTON, MA 01507-1675						
					07/25/1977 F 4 1 4 0 0 9 2						
Please Select One of the Following:			<input checked="" type="checkbox"/> Vehicle 21 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		<input type="checkbox"/> Vulnerable User Complete the Vulnerable User section.		
License # 149906190 St CT DOB/Age 02/11/1964					Reg # G28887 Reg Type CON Reg State MA						
Sex M Lic. Class D 19 19 Lic. Restrictions 1 20 CDL Endorsement					Veh Year 2022 Veh Make RAM Veh Config. 1 21						
Operator CLARK, MICHAEL EDEO					Owner GRANGER LYNCH CORP						
Address 628 POMFRET ST					Address 18 MCCracken RD						
City PUTNAM State CT Zip 06260					City MILLBURY State MA Zip 01527-1514						
Insurance Company FEDERAL INSURANCE COMPANY					Vehicle Action Prior to Crash 4 22						
Vehicle Travel Direction: N S E X Responding to Emergency? 2					Event Sequence 1 23 23 23 23						
Citation # (If Issued)					Most Harmful Event 1 24						
Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub					Driver Contributing Code 1 25 25						
Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub					Driver Distracted by 0 26 26						
Please fill out for operator and all occupants involved					Please fill out for operator and all occupants involved						
Operator/Occupants					See Above						

→ = 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

Intersection Arrow



### Crash Narrative:

V1 was travelling east approaching the traffic light/intersection with the driveway for 779 Washington St. V2 was travelling west in the dedicated left turn lane. Operator of V1 stated that she had a green light and V2 collided with her left side when she proceeded through the intersection. V2 was equiped with a dash camera; the operator accessed the video for my review. I observed that V2 only proceeded to turn left after the green turn arrow activated. Only the eastbound dedicated left turn lane would display a green arrow at that time. The video showed V1 proceed east when other eastbound traffic came to a stop. Operator of V1 was given a verbal warning for failure to yield.

### 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 DANIEL J HEMINGWAY

Police Officer Name (Please Print)

Signature

100DH

ID/Badge #

Auburn Police Department

Department

Precinct/Barracks

09/09/2025

Date