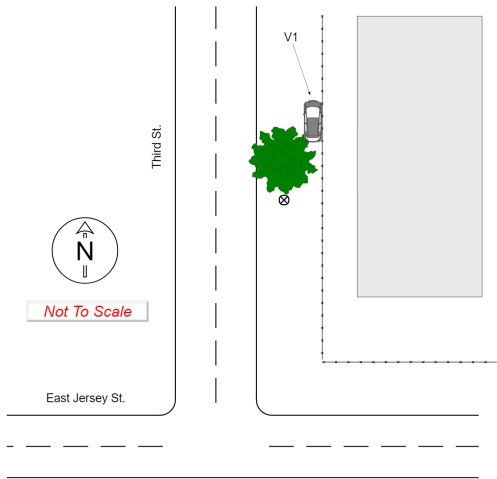


New Jersey Police Crash Investigation Report												Case Number 23-073795		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
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J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	



145. Crash Description/Narrative

D1 stated he was driving Northbound on Third St., when another motor vehicle cut him off and he lost control of his vehicle. D1 stated that when he lost control, he drove up on the sidewalk, hitting a tree, and then hitting a fence at a school (Elizabeth School No. 1).

V1 suffered disabling damage, and was towed by Highway towing.

D1 refused medical attention at this time.

Party was advised accordingly.

BWR

146. Officer's Signature Lees, Joseph: PO L580	147. Badge # L580	148. Reviewer WDEEGAN	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073795</u>

New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073795</u>
<Table Missing>		

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: Elizabeth

Code: 0 1

Station:

Case No.: 23-073795

(Refer to vehicle by number)

[illegible]

Lees, Joseph: PO L580

L580

New Jersey Police Crash Investigation Report												Case Number 23-073866		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
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145. Crash Description/Narrative

On April 27th 2023, Officer Arias and I responded to 956 Elizabeth Avenue (Small Grocery Store Ecuatoriano) for a report of a auto pedestrian. Upon our arrival, we were met by Ciro Quintero who stated he was hit by a car that fled in the intersection of Elizabeth Avenue and South Spring Street. He explained he was traveling west bound on Elizabeth Avenue when a red sedan took the red light on South Spring Street and struck him while riding his electric bike. He further stated after being struck, the suspect vehicle did not stop and continued north bound onto Spring Street.

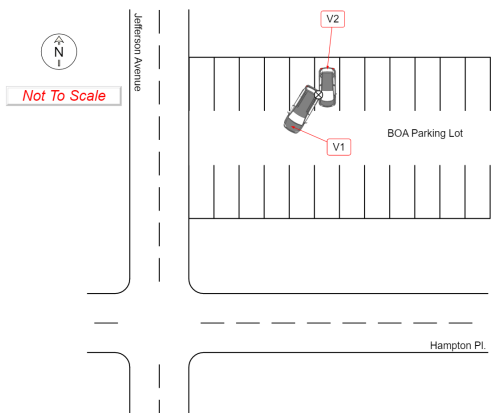
146. Officer's Signature Alvarado, Junior: PO A917	147. Badge # A917	148. Reviewer WDEEGAN	Badge #	149. Case Status <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073866</u>

[illegible]

96	04	Page 1 of 2		<input type="checkbox"/> Fatal		New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable		<input type="checkbox"/> Non-Reportable		<input type="checkbox"/> Change Report		118a	02						
97	01	1. Case Number		23-073944										10. Crash Occurred On:		135 Jefferson Avenue		11. Speed Limit		1 5		118b	----						
98	01	2. Police Dept. of		Code		Elizabeth										01						18. Speed Limit		119a	25				
99	09	3. Station/Precinct																						119b	----				
100a	01	4. Date of Crash		5. Day of Week		6. Time (use 2400 hrs.)		7. Municipality Code		8. Total Killed		9. Total Injured		12. Route No.		Suffix		13. Milepost		120a	01								
100b	04	23. Veh.#		24. Policy No.		25. NJ Ins. Code		53. Veh.#		54. Policy No.		55. NJ Ins. Code								120b	----								
101	02	26. Driver's First Name		Initial		Last Name		29. Sex		56. Driver's First Name		Initial		Last Name		59. Sex				121a	01								
102	01	Jadelin		V		Juarez		F		Wael		S		Khalil		M				121b	----								
103	01	27. Number & Street		1051 Lafayette St										57. Number & Street		44 Center Grove Rd Apt S-19													
104	02	28. City		State		Zip		58. City		State		Zip																	
		Elizabeth, NJ 07201-2556												Randolph, NJ 07869-4499															
105	08	30. Eyes		DL Class		Restrictions		Endorsements		31. State		60. Eyes		DL Class		Restrictions		Endorsements		61. State									
		2		----		----		----		NJ		2		----		----		----		NJ									
106	02	32. Driver's License Number		33. DOB		34. Expires		62. Driver's License Number		63. DOB		64. Expires																	
		J9009 38385 54012		04 26 01		04/24		K3159 77582 11662		11 24 66		11/25																	
107	02	35. Owner's First Name		Initial		Last Name		65. Owner's First Name		Initial		Last Name																	
		Same as Driver		Pastor		O Juarez-Cortez		Same as Driver		Michael		Shehata																	
108	01	36. Number & Street		1051 Lafayette St										66. Number & Street		11 Rolling Hills Dr													
109	01	37. City		State		Zip		67. City		State		Zip																	
		Elizabeth, NJ 07201-2556												Budd Lake, NJ 07828-2537															
110	01	38. Make		39. Model		40. Color		41. Year		42. Plate No.		43. State		68. Make		69. Model		70. Color		71. Year		72. Plate No.		73. State					
		Toyota		SIE		Grey		13		VGZ79M		NJ		Mazda		MAZ		Silver		05		B36NYD		NJ					
111	01	44. VIN		45. Expires				74. VIN		75. Expires																			
		5TDDK3DC6DS340510		11/23				1YVHP84C155M64064		08/23																			
112	01	46. Vehicle Removed to:		Destination										76. Vehicle Removed to:		Destination													
113	----	<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded		<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded																	
114	13	47. Authority		<input type="checkbox"/> Owner		<input checked="" type="checkbox"/> Driver		<input type="checkbox"/> Police		<input type="checkbox"/> Owner		<input checked="" type="checkbox"/> Driver		<input type="checkbox"/> Police															
115	13	48. Alcohol Drug Test		Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		49. Hazardous Material		<input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill		78. Alcohol Drug Test		Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		79. Hazardous Material		<input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill									
116	01	50. Carrier No.		<input type="checkbox"/> USDOT		<input type="checkbox"/> MC/MX		51. GVWR / GCWR (trucks & buses only)		<input type="checkbox"/> ≤ 10,000 lbs.		<input type="checkbox"/> 10,001 - 26,000 lbs.		<input type="checkbox"/> ≥ 26,001 lbs.		80. Carrier No.		<input type="checkbox"/> USDOT		<input type="checkbox"/> MC/MX		81. GVWR / GCWR (trucks & buses only)		<input type="checkbox"/> ≤ 10,000 lbs.		<input type="checkbox"/> 10,001 - 26,000 lbs.		<input type="checkbox"/> ≥ 26,001 lbs.	
117	03	52. Motor Carrier or Government Entity												82. Motor Carrier or Government Entity															
		Number & Street																											
		City		State		Zip																							
		Level of Autonomy		150 - AVAILABLE		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		Level of Autonomy		152 - AVAILABLE		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		153 - ENGAGED		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown													
		135. Damage to Other Property		<input type="checkbox"/> Yes (If Yes, describe)		<input checked="" type="checkbox"/> No																							
		Oper.		136. Charge		137. Summons No.		Oper.		138. Charge		139. Summons No.																	
		Oper.		140. Charge		141. Summons No.		Oper.		142. Charge		143. Summons No.																	
		83		84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants If Deceased, Date & Time of Death	
A		1		01		01		05		22		F		----		----		1		04		04		----		----		Juarez, Jadelin-1051 Lafayette St, Elizabeth, NJ 07201-2556	
B		P		02		01		05		48		F		----		----		1		04		04		----		----		Cruz, Maria-1051 Lafayette St, Elizabeth, NJ 07201-2556	
C		P		04		01		05		8		M		----		----		1		04		04		----		----		Juarez, Ander-1051 Lafayette St, Elizabeth, NJ 07201-2556	
D		2		01		01		05		56		M		----		----		1		04		04		----		----		Khalil, Wael-44 Center Grove Rd Apt S-19, Randolph, NJ 07869-4499	

New Jersey Police Crash Investigation Report												Case Number 23-073944		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
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145. Crash Description/Narrative

D1 stated she was backing out of her parking spot and backed up too much and struck V2 on the passenger side. D2 stated he was parked and sitting in his vehicle and observed d1 back into him. Same stated he honked, but d1 did not hear him. Both parties were advised accordingly. BWR.

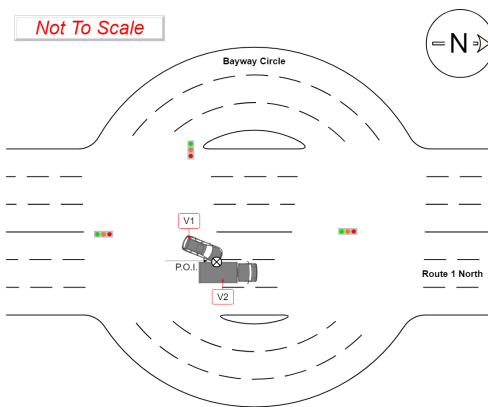
146. Officer's Signature Diaz, Ferney: PO D973	147. Badge # D973	148. Reviewer JFARINAS	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073944</u>

New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073944</u>
<Table Missing>		

96	04	Page 1 of 2		<input type="checkbox"/> Fatal		New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable		<input type="checkbox"/> Non-Reportable		<input type="checkbox"/> Change Report		118a	02								
97	01	1. Case Number		23-073946		10. Crash Occurred On:		Route 1 Northbound		N		11. Speed Limit		40		12. Route No.		Suffix		13. Milepost		18. Speed Limit		118b	---						
98	01	2. Police Dept. of		Elizabeth		Code		01		<input checked="" type="checkbox"/> At Intersection with		<input type="checkbox"/> Feet		<input type="checkbox"/> Miles		<input type="checkbox"/> N		<input type="checkbox"/> E		<input type="checkbox"/> S		<input type="checkbox"/> W		119a	25						
99	02	3. Station/Precinct				14		15		16		19. Ramp		To: 17. Cross Road Name/Route No.		<input type="checkbox"/> NB		<input type="checkbox"/> EB		<input type="checkbox"/> SB		<input type="checkbox"/> WB		119b	---						
100a	01	4. Date of Crash		05 27 23		5. Day of Week		Sun M Tu W Th F Sa		6. Time (use 2400 hrs.)		11 24		7. Municipality Code		2004		8. Total Killed		00		9. Total Injured		00		120a	01				
100b	04	23. Veh.#		1		24. Policy No.		911058184		25. NJ Ins. Code		134		53. Veh.#		2		54. Policy No.		2008358310		55. NJ Ins. Code		073		120b	---				
101	02	<input type="checkbox"/> Parked		<input type="checkbox"/> Ped		<input type="checkbox"/> Pedalcyclist		<input type="checkbox"/> Resp. to Emergency		<input type="checkbox"/> Hit & Run		<input type="checkbox"/> Parked		<input type="checkbox"/> Ped		<input type="checkbox"/> Pedalcyclist		<input type="checkbox"/> Resp. to Emergency		<input type="checkbox"/> Hit & Run				121a	01						
102	01	26. Driver's First Name		Nola		Initial		P		Last Name		Salas		29. Sex		F		56. Driver's First Name		Saul		Initial		E		59. Sex	m				
103	01	27. Number & Street		148 Walton Ave		State		Zip		28. City		Union, NJ 07083-8918		57. Number & Street		1302 Rosedale Av 4ff		58. City		Bronx, NY 10472		State		Zip		121b	---				
104	02	30. Eyes		2		DL Class		D		Restrictions		NONE		Endorsements		NON		31. State		NJ		60. Eyes		---		61. State	NY				
105	02	32. Driver's License Number		S0236		59677		53432		33. DOB		mm dd yy		03 02 43		34. Expires		mm yy		03/26		62. Driver's License Number		326179899		63. DOB		mm dd yy			
106	---	35. Owner's First Name		Same as Driver		Initial		Last Name		36. Number & Street		37. City		State		Zip		65. Owner's First Name		Elite		Initial		M		Last Name		Carrier			
107	---	38. Make		Hyundai		39. Model		VEN		40. Color		Grey		41. Year		23		42. Plate No.		K21SAB		43. State		NJ		68. Make		Freightliner			
108	01	44. VIN		KMHRC8A30PU237950		45. Expires		04/27		74. VIN		1FVACWDJ09HAD5365		75. Expires		02/24		69. Model		M21		70. Color		WHI		71. Year		09			
109	23	46. Vehicle Removed to:		Destination.		<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded		<input type="checkbox"/> Left at Scene		<input type="checkbox"/> Towed Impounded		76. Vehicle Removed to:		Destination.		<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded		<input type="checkbox"/> Left at Scene		<input type="checkbox"/> Towed Impounded			
110	01	47. Authority		<input checked="" type="checkbox"/> Owner		<input type="checkbox"/> Driver		<input type="checkbox"/> Police		77. Authority		<input type="checkbox"/> Owner		<input checked="" type="checkbox"/> Driver		<input type="checkbox"/> Police		48. Alcohol Drug Test		Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		Results: 0. % <input type="checkbox"/> Pending		49. Hazardous Material		<input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill			
111	02	50. Carrier No.		<input type="checkbox"/> USDOT		<input type="checkbox"/> MC/MX		<input type="checkbox"/> None		51. GVWR / GCWR (trucks & buses only)		<input type="checkbox"/> ≤ 10,000 lbs.		<input type="checkbox"/> 10,001 - 26,000 lbs.		<input type="checkbox"/> ≥ 26,001 lbs.		78. Alcohol Drug Test		Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		Results: 0. % <input type="checkbox"/> Pending		79. Hazardous Material		<input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill			
112	---	52. Motor Carrier or Government Entity				53. Motor Carrier or Government Entity				80. Carrier No.		<input checked="" type="checkbox"/> USDOT		<input type="checkbox"/> MC/MX		<input type="checkbox"/> None		81. GVWR / GCWR (trucks & buses only)		<input type="checkbox"/> ≤ 10,000 lbs.		<input type="checkbox"/> 10,001 - 26,000 lbs.		<input type="checkbox"/> ≥ 26,001 lbs.		82. Motor Carrier or Government Entity					
113	---	54. Level of Autonomy		150 - AVAILABLE		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		151 - ENGAGED		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		83. Level of Autonomy		152 - AVAILABLE		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		153 - ENGAGED		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		84. Level of Autonomy		154 - AVAILABLE		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		155 - ENGAGED		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown	
114	---	135. Damage to Other Property		<input type="checkbox"/> Yes (If Yes, describe)		<input checked="" type="checkbox"/> No		136. Charge		137. Summons No.		138. Charge		139. Summons No.		140. Charge		141. Summons No.		142. Charge		143. Summons No.		144. Charge		145. Summons No.		146. Charge		147. Summons No.	
115	---	83		84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants If Deceased, Date & Time of Death			
116	01	A		1		01		01		05		80		F		---		---		04		04		06		---		Salas, Nola-148 Walton Ave, Union, NJ 07083-8918			
117	01	B		1		03		01		05		82		M		---		---		04		04		06		---		Salas, Hector-35 West Sumner Avenue #240, Union, NJ 07083-9497			
118	---	C		2		01		01		05		28		M		---		---		04		04		06		---		Hernandezramirez, Saul-1302 Rosedale Av 4ff, Bronx, NY 10472			
119	---	D		2		03		01		05		22		M		---		---		04		04		06		---		Castro-Diaz, Rafael-700 8th Street Apt 1, Union City, NJ 07087-3425			

New Jersey Police Crash Investigation Report												Case Number 23-073946		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
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145. Crash Description/Narrative

Driver of Vehicle 1 (D1) stated she was turning left onto Route 1 Northbound from Bayway Circle. D1 stated as she was turning onto the middle lane, V2 did not make a wide enough turn causing her to crash into V2. I observed damage to the right front fender of V1. No injuries reported at this time.

Driver of Vehicle 2 (D2) stated he was in the middle lane at the traffic light of Bayway when making a left turn onto Route 1 Northbound. D2 stated as he was turning onto the middle lane of Route 1 North he was struck by V2 in the Rear driver side wheel. I observed minimal damage to V2's vehicle. No injuries reported at this time.

BWR.

146. Officer's Signature Aparicio, William: PO A572	147. Badge # A572	148. Reviewer JFARINAS	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073946</u>
<Table Missing>		

96	05	Page 1 of 2	<input type="checkbox"/> Fatal	New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable	<input type="checkbox"/> Non-Reportable	<input type="checkbox"/> Change Report	118a									
97	01	1. Case Number		23-073939										11. Speed Limit		25		99								
98	01	2. Police Dept. of		Code		Elizabeth 01										12. Route No.		Suffix		13. Milepost	118b					
99	07	3. Station/Precinct		25		<input type="checkbox"/> At Intersection with		<input checked="" type="checkbox"/> Feet		<input type="checkbox"/> Miles		<input checked="" type="checkbox"/> S		<input type="checkbox"/> E		<input type="checkbox"/> W		of: Acme Street		18. Speed Limit		99				
100a	01	4. Date of Crash		5. Day of Week		6. Time (use 2400 hrs.)		7. Municipality Code		8. Total Killed		9. Total Injured		21. Latitude		20. Route Name/Route No.		22. Longitude				119b				
100b	04	23. Veh.#		24. Policy No.		25. NJ Ins. Code		53. Veh.#		54. Policy No.		55. NJ Ins. Code										120a				
101	02	<input type="checkbox"/> Parked		<input type="checkbox"/> Ped		<input type="checkbox"/> Pedalcyclist		<input type="checkbox"/> Resp. to Emergency		<input type="checkbox"/> Hit & Run		<input type="checkbox"/> Parked		<input type="checkbox"/> Ped		<input type="checkbox"/> Pedalcyclist		<input type="checkbox"/> Resp. to Emergency		<input type="checkbox"/> Hit & Run		120b				
102	01	26. Driver's First Name		Initial		Last Name		29. Sex		56. Driver's First Name		Initial		Last Name		59. Sex						121a				
103	01	Micaela		M		Perez-Pampillon		F		Heyer		M		Garridopaucar		M						121b				
104	02	27. Number & Street								57. Number & Street																
		102 Claremont Terr								1364 North Ave Apt C4																
		28. City				State		Zip		58. City				State		Zip										
		Elizabeth, NJ 07202-1706								Elizabeth, NJ 07208-2609																
		30. Eyes		DL Class		Restrictions		Endorsements		31. State		60. Eyes		DL Class		Restrictions		Endorsements		61. State		122				
		2								NJ		6								NJ		01				
105	01	32. Driver's License Number		33. DOB		34. Expires		62. Driver's License Number		63. DOB		64. Expires										123				
		P2678 54374 61962		11 26 96		11/24		G0666 33074 02706		02 11 70		02/26										01				
106	02	35. Owner's First Name		Initial		Last Name		65. Owner's First Name		Initial		Last Name										124				
		<input checked="" type="checkbox"/> Same as Driver						<input type="checkbox"/> Same as Driver		Leonor		L Cardenas										11				
107	02	36. Number & Street						66. Number & Street														125				
								1364 North Ave Apt C4														11				
108	01	37. City				State		Zip		67. City				State		Zip						126a				
										Elizabeth, NJ 07208-2609												26				
109	01	38. Make		39. Model		40. Color		41. Year		42. Plate No.		43. State		68. Make		69. Model		70. Color		71. Year		72. Plate No.		73. State		126b
		Honda		CIV		Blac		17		Z55MKK		NJ		Chevrolet		EQU		Silve		13		U11RUY		NJ		----
110	01	44. VIN		45. Expires				74. VIN		75. Expires																126c
		SHHFK7H5XHU403881		05/24				2GNALBEK8D6315487		02/24																----
111	01	46. Vehicle Removed to:						76. Vehicle Removed to:																		126d
		Destination						Destination																		----
112	----	<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded		<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded														126e
		<input type="checkbox"/> Left at Scene		<input type="checkbox"/> Towed Impounded				<input type="checkbox"/> Left at Scene		<input type="checkbox"/> Towed Impounded																26
113	----	47. Authority						77. Authority																		127a
		<input checked="" type="checkbox"/> Owner		<input type="checkbox"/> Driver		<input checked="" type="checkbox"/> Police		<input checked="" type="checkbox"/> Owner		<input type="checkbox"/> Driver		<input checked="" type="checkbox"/> Police														26
114	13	48. Alcohol Drug Test						78. Alcohol Drug Test																		127b
		Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused						Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused																		----
115	13	Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine						Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine																		127c
		Results: 0. % <input type="checkbox"/> Pending						Results: 0. % <input type="checkbox"/> Pending																		----
116	03	50. Carrier No.						80. Carrier No.																		127d
		<input type="checkbox"/> USDOT				<input type="checkbox"/> None		<input type="checkbox"/> USDOT				<input type="checkbox"/> None														----
117	03	<input type="checkbox"/> MC/MX						<input type="checkbox"/> MC/MX																		127e
																										26
		52. Motor Carrier or Government Entity						82. Motor Carrier or Government Entity																		128
		Travelers Insurance Co.						Geico																		26
		Number & Street																								129
																										12
		City				State		Zip																		130
																										12
		Level of Autonomy		150 - AVAILABLE		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		Level of Autonomy		152 - AVAILABLE		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown														131
				151 - ENGAGED		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown						153 - ENGAGED		<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown												06
		135. Damage to Other Property		<input type="checkbox"/> Yes (If Yes, describe)		<input checked="" type="checkbox"/> No																				132
																										06
		Oper.		136. Charge		137. Summons No.		Oper.		138. Charge		139. Summons No.														133
		None at this time						None at this time.																		03
		Oper.		140. Charge		141. Summons No.		Oper.		142. Charge		143. Summons No.														134
																										02

New Jersey Police Crash Investigation Report												Case Number 23-073939			Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death		
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====		
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====		
G	---	---	---	---	---	---	---	---	---	---	---	---	---	=====		
H	---	---	---	---	---	---	---	---	---	---	---	---	---	=====		
I	---	---	---	---	---	---	---	---	---	---	---	---	---	=====		
J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====		

Not To Scale

V2

V1

Elmora Ave.

145. Crash Description/Narrative

Driver of vehicle # 1 states that she was driving straight on Elmora Ave. when vehicle # 2 stopped very fast in front of her making it impossible to avoid hitting vehicle # 2 on the rear bumper.

Driver of vehicle # 2 states that he was traveling straight on Elmora Ave. when a vehicle stopped very fast in front of him causing him to also stop quickly. When he stopped fast to avoid striking the vehicle in front of him vehicle # 1 struck his car on the rear bumper.

146. Officer's Signature	147. Badge #	148. Reviewer	Badge #	149. Case Status
Arena, Victor: PO A413	A413	JFARINAS		<input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete

New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073939</u>
<Table Missing>		

New Jersey Police Crash Investigation Report	Police Dept: <u>Elizabeth</u> Code: <u>01</u>
Motor Vehicle Crash Description	Station: _____ Case No.: <u>23-073939</u>

[illegible]

96	04	Page 1 of 2	<input type="checkbox"/> Fatal	New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable	<input type="checkbox"/> Non-Reportable	<input type="checkbox"/> Change Report	118a													
97	01	1. Case Number		23-073988										10. Crash Occurred On:		North Avenue		11. Speed Limit		25		04								
98	01	2. Police Dept. of		Code		Elizabeth										01		12. Route No.		Suffix		13. Milepost		118b						
99	07	3. Station/Precinct		75		<input type="checkbox"/> At Intersection with		<input checked="" type="checkbox"/> Feet		<input type="checkbox"/> Miles		<input type="checkbox"/> N		<input type="checkbox"/> E		<input type="checkbox"/> S		<input checked="" type="checkbox"/> W		of: North Broad Street		119a								
100a	01	4. Date of Crash		5. Day of Week		6. Time (use 2400 hrs.)		7. Municipality Code		8. Total Killed		9. Total Injured		19. Ramp		17. Cross Road Name/Route No.		<input type="checkbox"/> NB		<input type="checkbox"/> EB		119b								
100b	04	23. Veh.#		24. Policy No.		25. NJ Ins. Code		53. Veh.#		54. Policy No.		55. NJ Ins. Code		21. Latitude		20. Route Name/Route No.		22. Longitude				120a								
101	02	26. Driver's First Name		Initial		Last Name		29. Sex		56. Driver's First Name		Initial		Last Name		59. Sex						120b								
102	01	Erlina		M		Felipes		F		Nadia		S		Cruz		F						121a								
103	01	27. Number & Street		14 North Ave Apt A1		28. City		State		Zip		57. Number & Street		1181 Main St Apt 6l		58. City		State		Zip		121b								
104	02	Elizabeth, NJ 07208-2467		30. Eyes		DL Class		Restrictions		Endorsements		31. State		60. Eyes		DL Class		Restrictions		Endorsements		122								
105	02	2		---		---		---		NJ		61. State		2		---		---		---		123								
106	---	32. Driver's License Number		33. DOB		34. Expires		62. Driver's License Number		63. DOB		64. Expires		35. Owner's First Name		Initial		Last Name				124								
107	---	F2384 23374 57652		07 21 65		07/23		C7690 57682 56962		06 27 96		06/25		Maria		A		Villegas				125								
108	01	36. Number & Street		1181 Main Street Apt 6l		37. City		State		Zip		66. Number & Street		1181 Main Street Apt 6l		67. City		State		Zip		126a								
109	01	38. Make		39. Model		40. Color		41. Year		42. Plate No.		43. State		68. Make		69. Model		70. Color		71. Year		72. Plate No.		126b						
110	01	Toyota		4RN		Whit		21		T36RYF		NJ		VLV		XC4		Whit		22		M64PHB		---						
111	01	44. VIN		JTEMU5JR9M5925980		45. Expires		02/24		74. VIN		YV4AC2HK4N2720911		75. Expires		02/26								126c						
112	---	46. Vehicle Removed to:		Destination		<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded		<input type="checkbox"/> Left at Scene		<input type="checkbox"/> Towed Impounded		76. Vehicle Removed to:		Destination		<input checked="" type="checkbox"/> Driven		<input type="checkbox"/> Towed Disabled		<input type="checkbox"/> Towed Disabled & Impounded		126d				
113	---	47. Authority		<input checked="" type="checkbox"/> Owner		<input type="checkbox"/> Driver		<input type="checkbox"/> Police		77. Authority		<input type="checkbox"/> Owner		<input checked="" type="checkbox"/> Driver		<input type="checkbox"/> Police										126e				
114	---	48. Alcohol Drug Test		Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		Results: 0. <input type="checkbox"/> % <input type="checkbox"/> Pending		49. Hazardous Material		<input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill		Hazard Class		Placard No.		78. Alcohol Drug Test		Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		Results: 0. <input type="checkbox"/> % <input type="checkbox"/> Pending		127a				
115	---	50. Carrier No.		<input type="checkbox"/> USDOT		<input type="checkbox"/> MC/MX		51. GVWR / GCWR (trucks & buses only)		<input type="checkbox"/> ≤ 10,000 lbs.		<input type="checkbox"/> 10,001 - 26,000 lbs.		<input type="checkbox"/> ≥ 26,001 lbs.		80. Carrier No.		<input type="checkbox"/> USDOT		<input type="checkbox"/> MC/MX		81. GVWR / GCWR (trucks & buses only)		<input type="checkbox"/> ≤ 10,000 lbs.		<input type="checkbox"/> 10,001 - 26,000 lbs.		<input type="checkbox"/> ≥ 26,001 lbs.		127b
116	02	52. Motor Carrier or Government Entity				53. Motor Carrier or Government Entity				54. Motor Carrier or Government Entity				55. Motor Carrier or Government Entity				56. Motor Carrier or Government Entity				57. Motor Carrier or Government Entity				58. Motor Carrier or Government Entity				127c
117	02	59. Motor Carrier or Government Entity				60. Motor Carrier or Government Entity				61. Motor Carrier or Government Entity				62. Motor Carrier or Government Entity				63. Motor Carrier or Government Entity				64. Motor Carrier or Government Entity				65. Motor Carrier or Government Entity				127d
118	---	66. Motor Carrier or Government Entity				67. Motor Carrier or Government Entity				68. Motor Carrier or Government Entity				69. Motor Carrier or Government Entity				70. Motor Carrier or Government Entity				71. Motor Carrier or Government Entity				72. Motor Carrier or Government Entity				127e
119	---	73. Motor Carrier or Government Entity				74. Motor Carrier or Government Entity				75. Motor Carrier or Government Entity				76. Motor Carrier or Government Entity				77. Motor Carrier or Government Entity				78. Motor Carrier or Government Entity				79. Motor Carrier or Government Entity				128
120	---	80. Motor Carrier or Government Entity				81. Motor Carrier or Government Entity				82. Motor Carrier or Government Entity				83. Motor Carrier or Government Entity				84. Motor Carrier or Government Entity				85. Motor Carrier or Government Entity				86. Motor Carrier or Government Entity				129
121	---	87. Motor Carrier or Government Entity				88. Motor Carrier or Government Entity				89. Motor Carrier or Government Entity				90. Motor Carrier or Government Entity				91. Motor Carrier or Government Entity				92. Motor Carrier or Government Entity				93. Motor Carrier or Government Entity				130
122	---	94. Motor Carrier or Government Entity				95. Motor Carrier or Government Entity				96. Motor Carrier or Government Entity				97. Motor Carrier or Government Entity				98. Motor Carrier or Government Entity				99. Motor Carrier or Government Entity				100. Motor Carrier or Government Entity				131
123	---	101. Motor Carrier or Government Entity				102. Motor Carrier or Government Entity				103. Motor Carrier or Government Entity				104. Motor Carrier or Government Entity				105. Motor Carrier or Government Entity				106. Motor Carrier or Government Entity				107. Motor Carrier or Government Entity				132
124	---	108. Motor Carrier or Government Entity				109. Motor Carrier or Government Entity				110. Motor Carrier or Government Entity				111. Motor Carrier or Government Entity				112. Motor Carrier or Government Entity				113. Motor Carrier or Government Entity				114. Motor Carrier or Government Entity				133
125	---	115. Motor Carrier or Government Entity				116. Motor Carrier or Government Entity				117. Motor Carrier or Government Entity				118. Motor Carrier or Government Entity				119. Motor Carrier or Government Entity				120. Motor Carrier or Government Entity				121. Motor Carrier or Government Entity				134
126	---	122. Motor Carrier or Government Entity				123. Motor Carrier or Government Entity				124. Motor Carrier or Government Entity				125. Motor Carrier or Government Entity				126. Motor Carrier or Government Entity				127. Motor Carrier or Government Entity				128. Motor Carrier or Government Entity				02
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158	---	346. Motor Carrier or Government Entity				347. Motor Carrier or Government Entity				348. Motor Carrier or Government Entity				349. Motor Carrier or Government Entity				350. Motor Carrier or Government Entity				351. Motor Carrier or Government Entity				352. Motor Carrier or Government Entity				02
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162	---	374. Motor Carrier or Government Entity				375. Motor Carrier or Government Entity				376. Motor Carrier or Government Entity				377. Motor Carrier or Government Entity				378. Motor Carrier or Government Entity				379. Motor Carrier or Government								

New Jersey Police Crash Investigation Report												Case Number 23-073988		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants <i>If Deceased, Date & Time of Death</i>	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
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J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	

145. Crash Description/Narrative

Driver of V1 stated she had offloaded a passenger and while reentering the roadway she was struck by V2.

Driver of V2 stated she was traveling on North Ave when V1 entered the roadway without signaling and the impact occurred.

BWR

-End of report-

146. Officer's Signature De Menezes, Dan: PO D858		147. Badge # D858	148. Reviewer PPEREIRA	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-073988</u>
<Table Missing>		

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Police Dept: Elizabeth

Code: 0 1

Station:

Case No.: 23-073988

[illegible]

De Menezes, Dan: PO D858

D858

96	04	Page 1 of 2		<input type="checkbox"/> Fatal		New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable		<input type="checkbox"/> Non-Reportable		<input type="checkbox"/> Change Report		118a	25																																												
97	01	1. Case Number				10. Crash Occurred On: 828 Newark Avenue										11. Speed Limit		12. Route No.		13. Milepost		118b	----																																												
98	01	2. Police Dept. of Elizabeth				Code 01		14. At Intersection with										15. Feet		16. S		17. E		119a	25																																										
99	07	3. Station/Precinct				500		18. Speed Limit										19. To: 17. Cross Road Name/Route No.		20. NB		21. SB		119b	----																																										
100a	01	4. Date of Crash		5. Day of Week		6. Time (use 2400 hrs.)		7. Municipality Code		8. Total Killed		9. Total Injured		21. Latitude		22. Longitude		23. Veh.#		24. Policy No.		25. NJ Ins. Code		120a	01																																										
100b	04	05 27 23		Sa		15 08		2004		00		00						1		6108-02-83-14		148		120b	----																																										
101	02	26. Driver's First Name				Initial		Last Name		29. Sex		56. Driver's First Name				Initial		Last Name		59. Sex		54. Policy No.		55. NJ Ins. Code		121a	----																																								
102	01	Mykhalo						Petrovskyy		M												INT80120163492		073		121b	----																																								
103	01	3 Vermella Way Apt 3092																										122	01																																						
104	02	Union, NJ 07083-2634																										123	10																																						
105	06	30. Eyes		DL Class		Restrictions		Endorsements		31. State		60. Eyes		DL Class		Restrictions		Endorsements		61. State		62. Driver's License Number		63. DOB		64. Expires		124	11																																						
106	00	2		D		1		NON		NJ																		125	11																																						
107	00	32. Driver's License Number				33. DOB		34. Expires		65. Owner's First Name				Initial		Last Name		66. Number & Street				67. City		State		Zip		126a	28																																						
108	01	P2872 57100 10972				10 22 97		10/23		Wayne				A		Tidwell		Mackenzie Rd Apt 16a				Hampton, NJ 08827						126b	----																																						
109	01	38. Make		39. Model		40. Color		41. Year		42. Plate No.		43. State		68. Make		69. Model		70. Color		71. Year		72. Plate No.		73. State				126c	----																																						
110	00	Toyota		RAV		Silve		22		B97RDS		NJ		Mercedes-		SL5		Blac		05		E50NWD		NJ				126d	----																																						
111	00	44. VIN				45. Expires		74. VIN				75. Expires		46. Vehicle Removed to:				76. Vehicle Removed to:												126e	28																																				
112	00	2T3RWRFV8NW142189				05/26		WDBSK75F85F093717				06/23		Destination				Destination												127a	26																																				
113	00	<input checked="" type="checkbox"/> Driven				<input type="checkbox"/> Towed Disabled				<input type="checkbox"/> Towed Disabled & Impounded				<input checked="" type="checkbox"/> Driven				<input type="checkbox"/> Towed Disabled				<input type="checkbox"/> Towed Disabled & Impounded												127b	----																																
114	13	<input type="checkbox"/> Left at Scene				<input type="checkbox"/> Towed Impounded				<input type="checkbox"/> Left at Scene				<input type="checkbox"/> Towed Impounded				<input checked="" type="checkbox"/> Owner				<input type="checkbox"/> Driver				<input type="checkbox"/> Police												127c	----																												
115	13	48. Alcohol Drug Test				49. Hazardous Material				78. Alcohol Drug Test				79. Hazardous Material				Given: <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes				<input type="checkbox"/> Refused												127d	----																												
116	03	Type: <input type="checkbox"/> Breath				<input type="checkbox"/> Blood				<input type="checkbox"/> Urine				Type: <input type="checkbox"/> Breath				<input type="checkbox"/> Blood				<input type="checkbox"/> Urine																127e	26																												
117	----	Results: 0. %				Hazard Class				Placard No.				Results: 0. %				Hazard Class				Placard No.																128	28																												
		50. Carrier No.				51. GVWR / GCWR (trucks & buses only)				80. Carrier No.				81. GVWR / GCWR (trucks & buses only)				<input type="checkbox"/> USDOT				<input type="checkbox"/> None				<input type="checkbox"/> ≤ 10,000 lbs.				<input type="checkbox"/> 10,001 - 26,000 lbs.				<input type="checkbox"/> ≥ 26,001 lbs.				129	04																												
		<input type="checkbox"/> MC/MX				<input type="checkbox"/> None				<input type="checkbox"/> USDOT				<input type="checkbox"/> None				<input type="checkbox"/> ≤ 10,000 lbs.				<input type="checkbox"/> 10,001 - 26,000 lbs.				<input type="checkbox"/> ≥ 26,001 lbs.												130	04																												
		52. Motor Carrier or Government Entity				53. Motor Carrier or Government Entity				54. Motor Carrier or Government Entity				55. Motor Carrier or Government Entity																								131	09																												
		Number & Street				Number & Street				Number & Street				Number & Street																								132	09																												
		City				City				City				City																								133	02																												
		State				State				State				State																								134	02																												
		Zip				Zip				Zip				Zip																												135	09																								
		Level of Autonomy				Level of Autonomy				Level of Autonomy				Level of Autonomy																												136	02																								
		150 - AVAILABLE				151 - ENGAGED				152 - AVAILABLE				153 - ENGAGED																												137	02																								
		<input type="checkbox"/> 0				<input type="checkbox"/> 1				<input type="checkbox"/> 2				<input type="checkbox"/> 3				<input type="checkbox"/> 4				<input type="checkbox"/> 5				<input type="checkbox"/> Unknown																138	02																								
		135. Damage to Other Property				136. Charge				137. Summons No.				138. Charge				139. Summons No.																								139	02																								
		<input type="checkbox"/> Yes (If Yes, describe)				<input checked="" type="checkbox"/> No																																				140	02																								
		Oper.				Oper.				Oper.				Oper.																												141	02																								
		140. Charge				141. Summons No.				142. Charge				143. Summons No.																												142	02																								
																																														143	02																				
		83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants				If Deceased, Date & Time of Death				144	02				
		1				01				01				05				25				M				----				----				1				04				04				06				----				Petrovskyy, Mykhalo-3 Vermella Way Apt 3092,				Union, NJ 07083-2634				145	02				
		2				01				01				05				47				M				----				----				1				04				04				06				----				Tidwell, Wayne-Mackenzie Rd Apt 16a,				Hampton, NJ 08827				146	02				
		----				----				----				----				----				----				----				----				----				----				----				----				----				----				----				147	02				
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New Jersey Police Crash Investigation Report												Case Number 23-074034		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
G	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
H	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
I	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	

145. Crash Description/Narrative

D1 stated he was traveling northbound on Newark Avenue (passing 828 Newark Ave) when Z2 opened the driver's side door of his vehicle as D1 was driving past, striking D1's passenger side with the door. D1 had dashcam footage of the incident and showed me same footage. D1 was advised to save the footage for future reference. D1 refused medical attention at this time.

Z2 stated he was parked facing northbound on Newark Avenue (outside of 828 Newark Ave) when he opened the door to his vehicle at which time D1 struck the door of his vehicle. Z2 refused medical attention at this time.

BWR utilized and tagged as evidence.

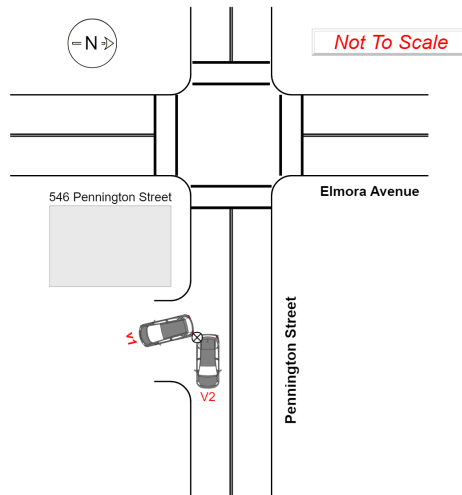
146. Officer's Signature Scholis-Fernandez, Gabriel: PO S960	147. Badge # S960	148. Reviewer JCORREIA	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074034</u>

[illegible]

96	04	Page 1 of 2		<input type="checkbox"/> Fatal		New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable		<input type="checkbox"/> Non-Reportable		<input type="checkbox"/> Change Report		118a																																												
97	01	1. Case Number		23-074045										10. Crash Occurred On:		Pennington Street		E		11. Speed Limit		25		118b																																										
98	01	2. Police Dept. of		Elizabeth										Code		01		12. Route No.		13. Milepost		25		119a																																										
99	07	3. Station/Precinct		120										14. At Intersection with		15. Feet		16. S		17. Cross Road Name/Route No.		18. Speed Limit		119b																																										
100a	01	4. Date of Crash		mm		dd		yy		5. Day of Week		Sun M Tu W Th F Sa		6. Time (use 2400 hrs.)		15 33		7. Municipality Code		2004		8. Total Killed		00		9. Total Injured		00		21. Latitude		40.66291N		22. Longitude		74.23310W		119c																												
100b	04	23. Veh.#		24. Policy No.		25. NJ Ins. Code		26. Driver's First Name		Initial		Last Name		29. Sex		53. Veh.#		54. Policy No.		55. NJ Ins. Code		56. Driver's First Name		Initial		Last Name		59. Sex		60. Eyes		DL Class		Restrictions		Endorsements		61. State		120a																										
101	02	1		**		**		Unknown		U		Unknown		M		2		HPA00002776674		017		Nancy		J		F		2		D		T		NON		NJ		120b																												
102	01	26. Driver's First Name		Initial		Last Name		27. Number & Street		1114 Applegate Ave		28. City		State		Zip		57. Number & Street		1114 Applegate Ave		58. City		State		Zip		59. Sex		60. Eyes		DL Class		Restrictions		Endorsements		61. State		121a																										
103	01	Unknown		U		Unknown		M		1114 Applegate Ave		Elizabeth, NJ		NJ		NJ		1114 Applegate Ave		Elizabeth, NJ		NJ		NJ		NJ		NJ		NJ		NJ		NJ		NJ		121b																												
104	02	30. Eyes		DL Class		Restrictions		Endorsements		31. State		32. Driver's License Number		33. DOB		mm		dd		yy		34. Expires		mm		yy		62. Driver's License Number		63. DOB		mm		dd		yy		64. Expires		mm		yy		122																						
105	08	UNKNO		WN		KNOWN		35. Owner's First Name		Initial		Last Name		36. Number & Street		46 Elmora Ave 2nd Floor		37. City		Elizabeth, NJ		07202-2248		38. Make		39. Model		40. Color		41. Year		42. Plate No.		43. State		44. VIN		45. Expires		46. Vehicle Removed to:		47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		123		
106	----	Dionisio		Nieves		46 Elmora Ave 2nd Floor		Elizabeth, NJ		07202-2248		Ford		FOC		Blac		09		6330HH		NJ		Toyota		RAV		Silve		21		G97PGP		NJ		1FAHP34N89W163954		07/23		Parked		47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		124		
107	----	William		Vargas		352 Grier Ave		Elizabeth, NJ		07202-3311		Toyota		RAV		Silve		21		G97PGP		NJ		Toyota		RAV		Silve		21		G97PGP		NJ		4T3D6RFV8MU060293		11/25		Destination		47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		125		
108	01	Elizabeth, NJ		07202-2248		Elizabeth, NJ		07202-3311		Elizabeth, NJ		07202-3311		Ford		FOC		Blac		09		6330HH		NJ		Toyota		RAV		Silve		21		G97PGP		NJ		4T3D6RFV8MU060293		11/25		Destination		47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		126a
109	01	Ford		FOC		Blac		09		6330HH		NJ		Toyota		RAV		Silve		21		G97PGP		NJ		Toyota		RAV		Silve		21		G97PGP		NJ		4T3D6RFV8MU060293		11/25		Destination		47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		126b
110	00	1FAHP34N89W163954		07/23		4T3D6RFV8MU060293		11/25		Destination		47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		126c																				
111	01	Parked		47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		126d																				
112	----	47. Authority		48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		126e																						
113	----	48. Alcohol Drug Test		49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		127a																								
114	----	49. Hazardous Material		50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		127b																										
115	----	50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		127c																												
116	----	51. GVWR / GCWR (trucks & buses only)		52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		127d																														
117	02	52. Motor Carrier or Government Entity		53. Summons No.		54. Charge		55. Summons No.		56. Charge		57. Summons No.		58. Charge		59. Summons No.		60. Charge		61. Summons No.		62. Charge		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		68. Charge		69. Summons No.		70. Charge		71. Summons No.		127e																								
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		63. Summons No.		64. Charge		65. Summons No.		66. Charge		67. Summons No.		68. Charge		69. Summons No.		70. Charge		71. Summons No.		72. Charge		73. Summons No.		74. Charge		75. Summons No.		76. Charge		77. Summons No.		78. Charge		79. Summons No.		80. Charge		81. Summons No.		138																										
		64. Charge		65. Summons No.		66. Charge		67. Summons No.		68. Charge		69. Summons No.		70. Charge		71. Summons No.		72. Charge		73. Summons No.		74. Charge		75. Summons No.		76. Charge		77. Summons No.		78. Charge		79. Summons No.		80. Charge		81. Summons No.		139																												
		65. Summons No.		66. Charge		67. Summons No.		68. Charge		69. Summons No.		70. Charge		71. Summons No.		72. Charge		73. Summons No.		74. Charge		75. Summons No.		76. Charge		77. Summons No.		78. Charge		79. Summons No.		80. Charge		81. Summons No.		82. Charge		83. Summons No.		140																										
		66. Charge		67. Summons No.		68. Charge		69. Summons No.		70. Charge		71. Summons No.		72. Charge		73. Summons No.		74. Charge		75. Summons No.		76. Charge		77. Summons No.		78. Charge		79. Summons No.		80. Charge		81. Summons No.		82. Charge		83. Summons No.		141																												
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		72. Charge		73. Summons No.		74. Charge		75. Summons No.		76. Charge		77. Summons No.		78. Charge		79. Summons No.		80. Charge		81. Summons No.		82. Charge		83. Summons No.		84. Charge		85. Summons No.		86. Charge		87. Summons No.		88. Charge		89. Summons No.		147																												
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New Jersey Police Crash Investigation Report												Case Number 23-074045		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
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J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	



145. Crash Description/Narrative

Driver two (D2) asked her son (the front passenger) to explain what happened. He stated his mother had double-parked in front of the driveway for 546 Pennington Avenue while she went to get food. Once she got back and she tried handing him the food, she observed vehicle one (V1) trying to back out. He stated she told driver one (D1) to wait and that she was about to move, but D1 continued backing and struck her vehicle.

D2 and her passengers refused medical attention at this time.

Vehicle two, a 2021 Toyota Rav4 bearing NJ registration G97PGP, sustained minor damage to the rear bumper on the passenger's side of the vehicle.

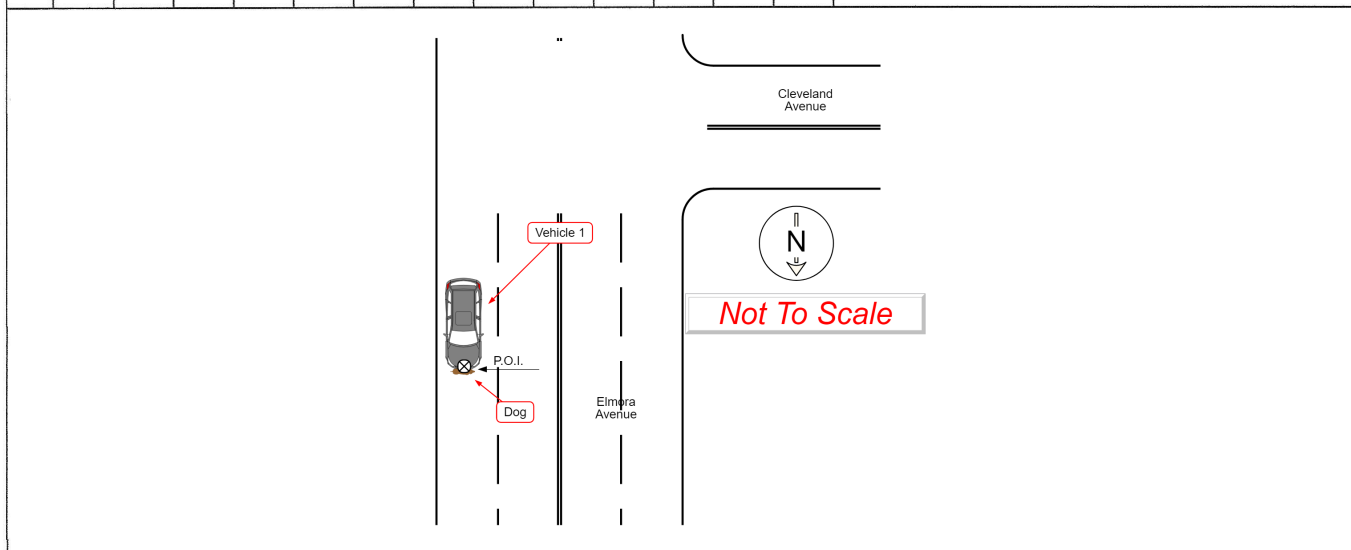
He also stated that D1 went inside the door to the business located at 546 Pennington Street (Suds & Buds Laundry).

146. Officer's Signature Franco, Walter: PO F577	147. Badge # F577	148. Reviewer JFARINAS	Badge #	149. Case Status <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u> Code <u>0 1</u> Station _____ Case No. <u>23-074045</u>
Motor Vehicle Crash Description	
<p>Vehicle one, a 2009 Ford Focus bearing NJ registration 6330HH, was shut off and left parked in the driveway of Suds & Buds Laundry. Unknown what the damage to the vehicle was since it had signs of previous damage. I attempted to locate D1 inside the establishments at the address but was unsuccessful.</p> <p>I was not able to obtain insurance information for vehicle one.</p> <p>BWR.</p>	

[illegible]

New Jersey Police Crash Investigation Report												Case Number 23-074071		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
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145. Crash Description/Narrative

Driver of vehicle 1 stated he was traveling north on Elmora Avenue when a white dog abruptly ran across the street in front of his vehicle, which resulted in him colliding with said dog. V1 sustained damage to the emblem on the front grille.

146. Officer's Signature Fullman, Jahid: PO F521	147. Badge # F521	148. Reviewer WDIOLLO	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. Elizabeth	Code 01
Motor Vehicle Crash Description	Station	Case No. 23-074071
<Table Missing>		

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Description

Code: 0 1

Case No.: 23-074071

(Refer to vehicle by number)

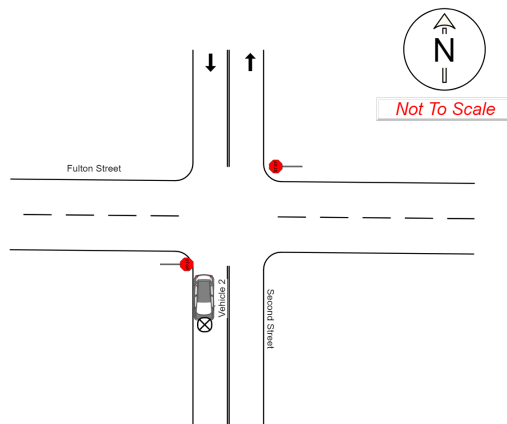
Veh	Pos	Phys		Loc	Type	Ref	Equip	Equip	Bag	Hosp		
Occ	In/On	Eject	Cond	Age	Sex	inj	Inj	Med	Avail	Used	Dept	Code

Names & Addresses of Occupants - If Deceased, Date & Time of Death

F521

96	04	Page 1 of 2		<input type="checkbox"/> Fatal		New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable		<input type="checkbox"/> Non-Reportable		<input type="checkbox"/> Change Report		118a	00																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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100b	04	23. Veh.# 1		24. Policy No.		25. NJ Ins. Code		53. Veh.# 2		54. Policy No. 4349-66-65-70		55. NJ Ins. Code 148		<input type="checkbox"/> Parked		<input type="checkbox"/> Ped		<input type="checkbox"/> Pedalcyclist		120b		---																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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104	02	32. Driver's License Number B7151				33. DOB mm dd yy 71964		34. Expires mm yy 60502		62. Driver's License Number B7151		63. DOB mm dd yy 71964		64. Expires mm yy 60502		65. Owner's First Name Elizabeth		66. Number & Street 59 South 2nd Street 1st Flr		67. City Elizabeth, NJ 07206-1541		123	01																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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New Jersey Police Crash Investigation Report												Case Number 23-074051		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
G	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
H	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
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J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	



145. Crash Description/Narrative

Driver of vehicle 2 stated she was traveling South on Second Street, when her vehicle was struck by vehicle 1. D2 stated her vehicle received front damage, that disabled her vehicle. D2 did not known the intersection where the accident occurred, however she said the accident happened near by on Second Street & Fulton Street. D2 stated vehicle 1 was gray. D2 explained she did not see where vehicle 1 was traveling from, nor its flight of direction after the accident. D2 did not observe vehicle's 1 registration. D2 refused medical attention. Vehicle 2 was privately towed.

No further information on vehicle 1 at this time.

146. Officer's Signature Velez, Brian: PO V990	147. Badge # V990	148. Reviewer WDEEGAN	Badge #	149. Case Status <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074051</u>

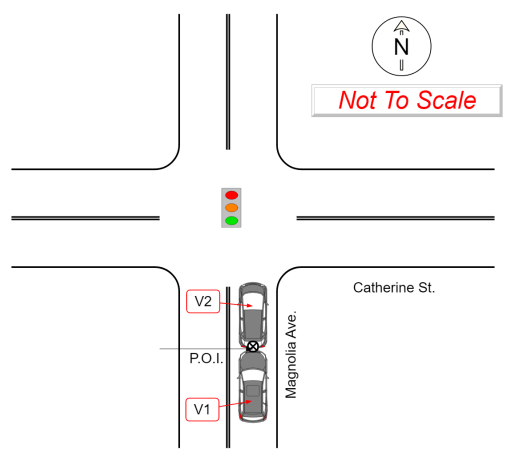
New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074051</u>

<Table Missing>

Velez, Brian: PO V990
Officer's Signature

V990
Badge Number

New Jersey Police Crash Investigation Report												Case Number 23-074059		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
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145. Crash Description/Narrative

Driver 1 stated that she was stopped in traffic on Catherine Street. Driver 1 further stated that she accidentally removed her foot from the break and collided with vehicle 2.

Driver 2 stated that he was stopped in traffic at a red traffic signal at the intersection of Catherine Street and Magnolia Ave. Driver 2 stated that Driver 1 rear ended his vehicle.

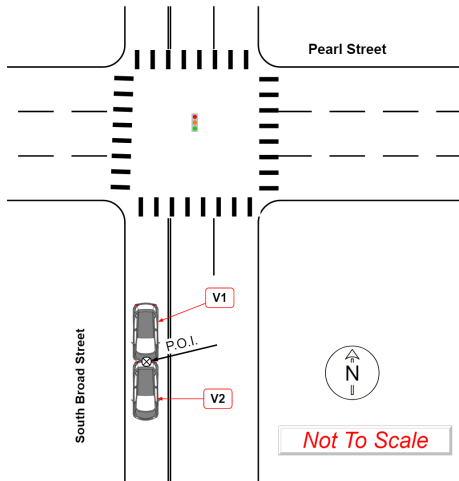
Minor damages were observed on Vehicle 2. Both parties refused medical attention. BWR

146. Officer's Signature Ugalde, Daniel: PO U538	147. Badge # U538	148. Reviewer WDEEGAN	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074059</u>

New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074059</u>
<Table Missing>		

New Jersey Police Crash Investigation Report												Case Number 23-074239		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
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145. Crash Description/Narrative

D1 stated he was traveling south bound on South Broad Street when suddenly traffic came to a complete stop. Same stated he attempted to stop but did not have enough time to do so causing a collision with V2. No injuries reported at this time. V1 sustained minor damage to the front bumper.

D2 stated she was traveling south bound on South Broad Street when she was suddenly struck from behind by V1. No injuries reported at this time. V2 sustained moderate damage to the rear bumper.

D2 provided New York out of state insurance:

- Geico General Insurance Company (1800-841-3000)
- Policy Number: 4481-83-03-80
- Company Code: 639

Parties advised accordingly. BWR

146. Officer's Signature Davila-Saa, Paul: PO D571	147. Badge # D571	148. Reviewer WDILOLLO	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074239</u>
<Table Missing>		

96	04	Page 1 of 2	<input type="checkbox"/> Fatal	New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable	<input type="checkbox"/> Non-Reportable	<input type="checkbox"/> Change Report	118a					
97	01	1. Case Number 23-074261		10. Crash Occurred On: Westfield Avenue										11. Speed Limit 25		12. Route No. Suffix 13. Milepost		118b				
98	06	2. Police Dept. of Elizabeth		Code 01		<input checked="" type="checkbox"/> At Intersection with <input type="checkbox"/> Feet <input type="checkbox"/> Miles										14. 15. 16.		18. Speed Limit 25		119a		
99	07	3. Station/Precinct		19. <input type="checkbox"/> To: 17. Cross Road Name/Route No.										<input type="checkbox"/> NB <input type="checkbox"/> EB <input type="checkbox"/> SB <input type="checkbox"/> WB		20. Route Name/Route No. 22. Longitude		119b				
100a	01	4. Date of Crash mm dd yy 05 27 23		5. Day of Week Sun M Tu W Th F Sa Th F Sa		6. Time (use 2400 hrs.) 23 51		7. Municipality Code 2004		8. Total Killed 00		9. Total Injured 01		21. Latitude		22. Longitude		120a				
100b	04	23. Veh.# 1		24. Policy No. 989052699		25. NJ Ins. Code 054		53. Veh.# 2		54. Policy No.		55. NJ Ins. Code		56. Driver's First Name Manuel		59. Sex M		120b				
101	02	<input type="checkbox"/> Parked <input type="checkbox"/> Ped <input type="checkbox"/> Pedalcyclist <input type="checkbox"/> Resp. to Emergency <input type="checkbox"/> Hit & Run		26. Driver's First Name Hector		Initial J		Last Name Ortiz		29. Sex M		56. Driver's First Name Manuel		Initial C		Last Name Chapman		121a				
102	01	27. Number & Street 238 Murray St		28. City Elizabeth, NJ 07202-1905		State NJ		Zip 07202		57. Number & Street 656 Magnolia Ave 2fl		58. City Elizabeth, NJ 07206-1417		State NJ		Zip 07206		121b				
103	01	30. Eyes 2		DL Class D		Restrictions NONE		Endorsements NON		31. State NJ		60. Eyes 2		DL Class D		Restrictions T		Endorsements NON		122		
104	02	32. Driver's License Number O7633 32071 03662		33. DOB mm dd yy 03 02 66		34. Expires mm yy 08/23		62. Driver's License Number C3211 51663 08012		63. DOB mm dd yy 08 27 01		64. Expires mm yy 08/23		61. State NJ		123		03				
105	04	35. Owner's First Name Rosa		Initial E		Last Name Ortiz		65. Owner's First Name Levar		Initial A		Last Name Tulloch		124		03		03				
106	02	<input type="checkbox"/> Same as Driver		36. Number & Street 53 Dewitt Ave. Third Floor		37. City Belleville, NJ 07109-5244		State NJ		Zip 07109		66. Number & Street 213 Astoria Pl		67. City Union, NJ 07083-4207		State NJ		Zip 07083				
107	02	38. Make Toyota		39. Model MAT		40. Color Silve		41. Year 08		42. Plate No. L15CJV		43. State NJ		68. Make KAW		69. Model ZXR		70. Color Grey		125		
108	01	44. VIN 2T1KR32EX8C701641		45. Expires 07/23		76. Vehicle Removed to: Highway Towing		77. Authority <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		78. Alcohol Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine Results: 0. % <input type="checkbox"/> Pending		79. Hazardous Material Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine Results: 0. % <input type="checkbox"/> Pending		80. Carrier No. USDOT		81. GVWR / GCWR (trucks & buses only) ≤ 10,000 lbs. 10,001 - 26,000 lbs. ≥ 26,001 lbs.		82. Motor Carrier or Government Entity		126a		
109	08	46. Vehicle Removed to: Highway Towing		47. Authority <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police		48. Alcohol Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine Results: 0. % <input type="checkbox"/> Pending		49. Hazardous Material Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine Results: 0. % <input type="checkbox"/> Pending		50. Carrier No. USDOT		51. GVWR / GCWR (trucks & buses only) ≤ 10,000 lbs. 10,001 - 26,000 lbs. ≥ 26,001 lbs.		52. Motor Carrier or Government Entity		53. Damage to Other Property <input type="checkbox"/> Yes (If Yes, describe) <input type="checkbox"/> No		54. Level of Autonomy 150 - AVAILABLE <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown 151 - ENGAGED <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown		126b		
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New Jersey Police Crash Investigation Report												Case Number 23-074261		Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
G	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
H	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
I	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	

145. Crash Description/Narrative

Driver 1 stated that he was traveling West on Westfield Ave. Driver 1 further stated that he was attempting to make a left turn onto Chilton St. but struck vehicle 2. Driver 1 stated that Driver 2 was traveling East on Westfield Ave and was driving "fast".

Driver 2 stated that he was traveling South on Chilton St. . Driver 2 further stated that he made a left turn onto Westfield Ave but was struck by vehicle 1. Driver 2 stated that Driver 1 "ran the red light". Driver 2 had a complaint of pain to his left arm and left ankle. Driver 2 was transported by EMS 3 to Trinitas Hospital .

Driver 2 was issued the following summonses;

2004 E23 024259: 39:3-4 --- DRIVING OR PARKING UNREGISTERED MOTOR VEHICLE

2004 E23 024260: 39:6B-2 --- NO LIABILITY INSURANCE COVERAGE ON MOTOR VEHICLE

Vehicle 2 was towed to highway garage.

Parties were advised. BWR

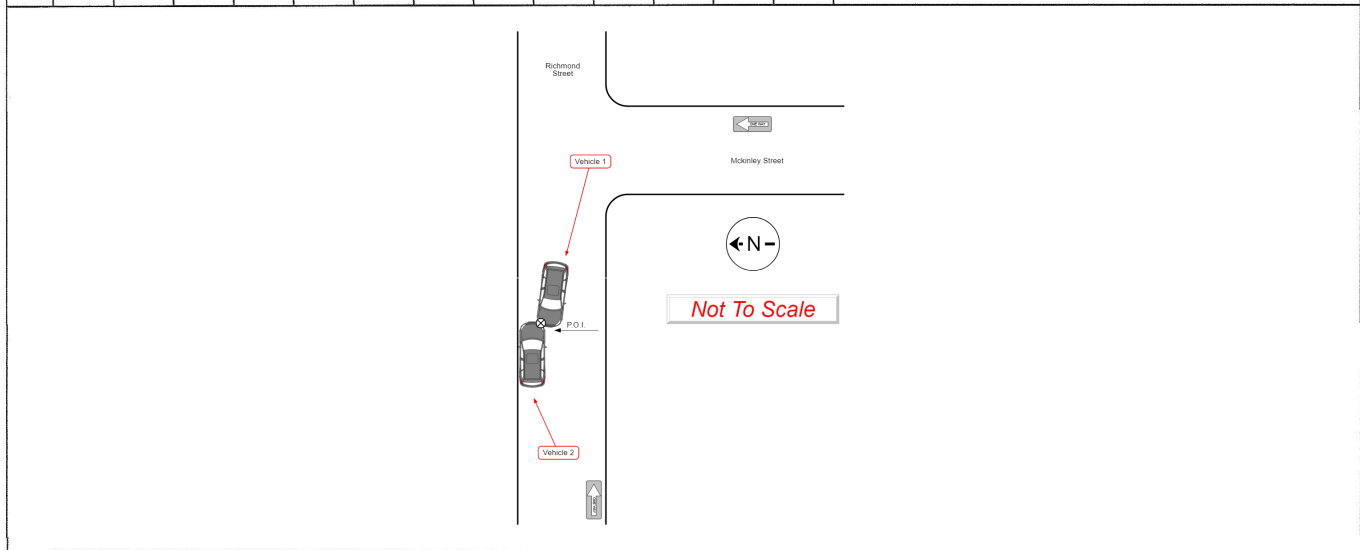
146. Officer's Signature Ugalde, Daniel: PO U538	147. Badge # U538	148. Reviewer WDIOLLO	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>01</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074261</u>

<Table Missing>

96	Page 1 of 2	<input type="checkbox"/> Fatal	New Jersey Police Crash Investigation Report										<input checked="" type="checkbox"/> Reportable	<input type="checkbox"/> Non-Reportable	<input type="checkbox"/> Change Report	118a																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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07	4. Date of Crash	05/27/23		5. Day of Week	Sa		6. Time (use 2400 hrs.)	2208		7. Municipality Code	2004		8. Total Killed	00		9. Total Injured	00		10. Crash Occurred On:	685 Richmond Street		11. Speed Limit	25		12. Route No.	13. Milepost		14. At Intersection with	15. Feet		16. S	17. Cross Road Name/Route No.		Mckinley Street		18. Speed Limit	25		19. To: 17. Cross Road Name/Route No.	20. Route Name/Route No.		21. Latitude		22. Longitude		23. Veh.#	24. Policy No.		25. NJ Ins. Code		53. Veh.#	54. Policy No.		55. NJ Ins. Code		56. Driver's First Name	Initial		Last Name		59. Sex	60. Eyes	DL Class		Restrictions		Endorsements		61. State	62. Driver's License Number	63. DOB		64. Expires		65. Owner's First Name	Initial		Last Name		66. Number & Street	67. City		State		Zip		68. Make	69. Model		70. Color		71. Year		72. Plate No.		73. State	74. VIN	75. Expires		76. Vehicle Removed to:	77. Authority		78. Alcohol Drug Test		79. Hazardous Material		80. Carrier No.		81. GVWR / GCWR (trucks & buses only)		82. Motor Carrier or Government Entity		83. Level of Autonomy		84. 150 - AVAILABLE		85. 151 - ENGAGED		86. 152 - AVAILABLE		87. 153 - ENGAGED		88. 135. Damage to Other Property		89. 136. Charge		90. 137. Summons No.		91. 138. Charge		92. 139. Summons No.		93. 140. Charge		94. 141. Summons No.		95. 142. Charge		96. 143. Summons No.		97. 144. Charge		98. 145. Summons No.		99. 146. Charge		100. 147. Summons No.		101. 148. Charge		102. 149. Summons No.		103. 150. Charge		104. 151. Summons No.		105. 152. Charge		106. 153. Summons No.		107. 154. Charge		108. 155. Summons No.		109. 156. Charge		110. 157. Summons No.		111. 158. Charge		112. 159. Summons No.		113. 160. Charge		114. 161. Summons No.		115. 162. Charge		116. 163. Summons No.		117. 164. Charge		118. 165. Summons No.		119. 166. Charge		120. 167. Summons No.		121. 168. Charge		122. 169. Summons No.		123. 170. Charge		124. 171. Summons No.		125. 172. Charge		126. 173. Summons No.		127. 174. Charge		128. 175. Summons No.		129. 176. Charge		130. 177. Summons No.		131. 178. Charge		132. 179. Summons No.		133. 180. Charge		134. 181. Summons No.		135. 182. Charge		136. 183. Summons No.		137. 184. Charge		138. 185. Summons No.		139. 186. Charge		140. 187. Summons No.		141. 188. Charge		142. 189. Summons No.		143. 190. Charge		144. 191. Summons No.		145. 192. Charge		146. 193. Summons No.		147. 194. Charge		148. 195. Summons No.		149. 196. Charge		150. 197. Summons No.		151. 198. Charge		152. 199. Summons No.		153. 200. Charge		154. 201. Summons No.		155. 202. Charge		156. 203. Summons No.		157. 204. Charge		158. 205. Summons No.		159. 206. Charge		160. 207. Summons No.		161. 208. Charge		162. 209. Summons No.		163. 210. Charge		164. 211. Summons No.		165. 212. Charge		166. 213. Summons No.		167. 214. Charge		168. 215. Summons No.		169. 216. Charge		170. 217. Summons No.		171. 218. Charge		172. 219. Summons No.		173. 220. Charge		174. 221. Summons No.		175. 222. Charge		176. 223. Summons No.		177. 224. Charge		178. 225. Summons No.		179. 226. Charge		180. 227. Summons No.		181. 228. Charge		182. 229. Summons No.		183. 230. Charge		184. 231. Summons No.		185. 232. Charge		186. 233. Summons No.		187. 234. Charge		188. 235. Summons No.		189. 236. Charge		190. 237. Summons No.		191. 238. Charge		192. 239. Summons No.		193. 240. Charge		194. 241. Summons No.		195. 242. Charge		196. 243. Summons No.		197. 244. Charge		198. 245. Summons No.		199. 246. Charge		200. 247. Summons No.		201. 248. Charge		202. 249. Summons No.		203. 250. Charge		204. 251. Summons No.		205. 252. Charge		206. 253. Summons No.		207. 254. Charge		208. 255. Summons No.		209. 256. Charge		210. 257. Summons No.		211. 258. Charge		212. 259. Summons No.		213. 260. Charge		214. 261. Summons No.		215. 262. Charge		216. 263. Summons No.		217. 264. Charge		218. 265. Summons No.		219. 266. Charge		220. 267. Summons No.		221. 268. Charge		222. 269. Summons No.		223. 270. 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Charge		416. 463. Summons No.		417. 464. Charge		418. 465. Summons No.		419. 466. Charge		420. 467. Summons No.		421. 468. Charge		422. 469. Summons No.		423. 470. Charge		424. 471. Summons No.		425. 472. Charge		426. 473. Summons No.		427. 474. Charge		428. 475. Summons No.		429. 476. Charge		430. 477. Summons No.		431. 478. Charge		432. 479. Summons No.		433. 480. Charge		434. 481. Summons No.		435. 482. Charge		436. 483. Summons No.		437. 484. Charge		438. 485. Summons No.		439. 486. Charge		440. 487. Summons No.		441. 488. Charge		442. 489. Summons No.		443. 490. Charge		444. 491. Summons No.		445. 492. Charge		446. 493. Summons No.		447. 494. Charge		448. 495. Summons No.		449. 496. Charge		450. 497. Summons No.		451. 498. Charge		452. 499. Summons No.		453. 500. Charge		454. 501. Summons No.		455. 502. Charge		456. 503. Summons No.		457. 504. Charge		458. 505. Summons No.		459. 506. Charge		460. 507. Summons No.		461. 508. Charge		462. 509. Summons No.		463. 510. Charge		464. 511. Summons No.		465. 512. Charge		466. 513. Summons No.		467. 514. Charge		468. 515. Summons No.		469. 516. Charge		470. 517. Summons No.		471. 518. Charge		472. 519. Summons No.		473. 520. Charge		474. 521. Summons No.		475. 522. Charge		476. 523. Summons No.		477. 524. Charge		478. 525. Summons No.		479. 526. Charge		480. 527. Summons No.		481. 528. Charge		482. 529. Summons No.		483. 530. Charge		484. 531. Summons No.		485. 532. Charge		486. 533. Summons No.		487. 534. Charge		488. 535. Summons No.		489. 536. Charge		490. 537. Summons No.		491. 538. Charge		492. 539. Summons No.		493. 540. Charge		494. 541. Summons No.		495. 542. Charge		496. 543. Summons No.		497. 544. Charge		498. 545. Summons No.		499. 546. Charge		500. 547. Summons No.		501. 548. Charge		502. 549. Summons No.		503. 550. Charge		504. 551. Summons No.		505. 552. Charge		506. 553. Summons No.		507. 554. Charge		508. 555. Summons No.		509. 556. Charge		510. 557. Summons No.		511. 558. Charge		512. 559. Summons No.		513. 560. Charge		514. 561. Summons No.		515. 562. Charge		516. 563. Summons No.		517. 564. Charge		518. 565. Summons No.		519. 566. Charge		520. 567. Summons No.		521. 568. Charge		522. 569. Summons No.		523. 570. Charge		524. 571. Summons No.		525. 572. Charge		526. 573. Summons No.		527. 574. Charge		528. 575. Summons No.		529. 576. Charge		530. 577. Summons No.		531. 578. Charge		532. 579. Summons No.		533. 580. Charge		534. 581. Summons No.		535. 582. Charge		536. 583. Summons No.		537. 584. Charge		538. 585. Summons No.		539. 586. Charge		540. 587. Summons No.		541. 588. Charge		542. 589. Summons No.		543. 590. Charge		544. 591. Summons No.		545. 592. Charge		546. 593. Summons No.		547. 594. Charge		548. 595. Summons No.		549. 596. Charge		550. 597. Summons No.		551. 598. Charge		552. 599. Summons No.		553. 600. Charge		554. 601. Summons No.		555. 602. Charge		556. 603. Summons No.		557. 604. Charge		558. 605. Summons No.		559. 606. Charge		560. 607. Summons No.		561. 608. Charge		562. 609. Summons No.		563. 610. Charge		564. 611. Summons No.		565. 612. Charge		566. 613. Summons No.		567. 614. Charge		568. 615. Summons No.		569. 616. Charge		570. 617. Summons No.		571. 618. Charge		572. 619. Summons No.		573. 620. Charge		574. 621. Summons No.		575. 622. Charge		576. 623. Summons No.		577. 624. Charge		578. 625. Summons No.		579. 626. Charge		580. 627. Summons No.		581. 628. Charge		582. 629. Summons No.		583. 630. Charge		584. 631. Summons No.		585. 632. Charge		586. 633. Summons No.		587. 634. Charge		588. 635. Summons No.		589. 636. Charge		590. 637. Summons No.		591. 638. Charge		592. 639. Summons No.		593. 640. Charge		594. 641. Summons No.		595. 642. Charge		596. 643. Summons No.		597. 644. Charge		598. 645. Summons No.		599. 646. Charge		600. 647. Summons No.		601. 648. Charge		602. 649. Summons No.		603. 650. Charge		604. 651. Summons No.		605. 652. Charge		606. 653. Summons No.		607. 654. Charge		608. 655. Summons No.		609. 656. Charge		610. 657. Summons No.		611. 658. Charge		612. 659. Summons No.		613. 660. Charge		614. 661. Summons No.		615. 662. Charge		616. 663. Summons No.		617. 664. Charge		618. 665. Summons No.		619. 666. Charge		620. 667. Summons No.		621. 668. Charge		622. 669. Summons No.		623. 670. Charge		624. 671. Summons No.		625. 672. Charge		626. 673. Summons No.		627. 674. Charge		628. 675. Summons No.		629. 676. Charge		630. 677. Summons No.		631. 678. Charge		632. 679. Summons No.		633. 680. Charge		634. 681. Summons No.		635. 682. Charge		636. 683. Summons No.		637. 684. Charge		638. 685. Summons No.		639. 686. Charge		640. 687. Summons No.		641. 688. Charge		642. 689. Summons No.		643. 690. Charge		644. 691. Summons No.		645. 692. Charge		646. 693. Summons No.		647. 694. Charge		648. 695. Summons No.		649. 696. Charge		650. 697. Summons No.		651. 698. Charge		652. 699. Summons No.		653. 700. Charge		654. 701. Summons No.		655. 702. Charge		656. 703. Summons No.		657. 704. Charge		658. 705. Summons No.		659. 706. Charge		660. 707. Summons No.		661. 708. Charge		662. 709. Summons No.		663. 710. Charge		664. 711. Summons No.		665. 712. Charge		666. 713. Summons No.		667. 714. Charge		668. 715. Summons No.		669. 716. Charge		670. 717. Summons No.		671. 718. Charge		672. 719. Summons No.		673. 720. Charge		674. 721. Summons No.		675. 722. Charge	

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	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
F	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
G	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
H	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
I	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	
J	---	---	---	---	---	---	---	---	---	---	---	---	---	=====	



145. Crash Description/Narrative

Vehicle 1 had been recently stolen. We (Officers Fullman and Zorrilla) observed a black male (NFI) inside of vehicle 1. As we approached vehicle 1, the male then exited the vehicle leaving vehicle 1 in gear. Vehicle 1 then collided into vehicle 2.

Vehicle 2 was legally parked and unoccupied.

146. Officer's Signature Fullman, Jahid: PO F521	147. Badge # F521	148. Reviewer WDIOLLO	Badge #	149. Case Status <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete
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Motor Vehicle Crash Description	Station _____	Case No. <u>23-074200</u>

New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
Motor Vehicle Crash Description	Station _____	Case No. <u>23-074200</u>
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