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New York State Department of Motor Vehicles

POLICE ACCIDENT REPORT (NYC)

MV-104AN (7/11)

Precinct 071	Complaint Number
Accident No. MV-2022-071-000314	

 AMENDED REPORT19
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1 -	Accident Date			Day of Week	Military Time	No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene <input checked="" type="checkbox"/>	Left Scene <input type="checkbox"/>	Police Photos <input type="checkbox"/>	20 -
	Month 3	Day 31	Year 2022	THURSDAY	15:06	2	0	0	Reconstructed <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

VEHICLE 1

 VEHICLE 2 BICYCLIST PEDESTRIAN OTHER PEDESTRIAN

2 -	VEHICLE 1 - Driver License ID Number 744020735				State of Lic. NY	VEHICLE 2 - Driver License ID Number 705349313	State of Lic. NY
	Driver Name - exactly as printed on license VINCENT, MARDOCHEE				Driver Name - exactly as printed on license TRENT, RONALD, J		

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3 11	Address (Include Number & Street) 19 PICKETT CT				Apt. No.	Address (Include Number & Street) 16701 HIGHLAND AVENUE				Apt. No.
	City or Town MALVERNE State NY Zip Code 11565				City or Town QUEENS State NY Zip Code 11432					

22
17

4 1	Date of Birth Month 7 Day 25 Year 1984	Sex F	Unlicensed <input type="checkbox"/>	No. of Occupants 7	Public Property Damaged <input type="checkbox"/>	Date of Birth Month 12 Day 11 Year 1969	Sex M	Unlicensed <input type="checkbox"/>	No. of Occupants 1	Public Property Damaged <input type="checkbox"/>
	Name - exactly as printed on registration Y&M TRANSIT CORP				Name - exactly as printed on registration FEDERAL EXPRESS CORP					

23
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5 1	Address (Include Number & Street) 1 COFFEY STREET				Apt. No.	Haz. Mat. Code	Released <input type="checkbox"/>	Address (Include Number & Street) 4001 LEADENHALL RD				Apt. No.	Haz. Mat. Code	Released <input type="checkbox"/>
	City or Town BROOKLYN State NY Zip Code 11231				City or Town MOUNT LAUREL State NJ Zip Code 08054									

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Plate Number 20065SH	State of Reg. NY	Vehicle Year & Make 2015 THOMAS BUILT BUS	Vehicle Type 263	Ins. Code	Plate Number 61171MK	State of Reg. NY	Vehicle Year & Make 2017 CHEVROLET SW/SUV	Vehicle Type 263	Ins. Code
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Ticket/Accident Number(s)	Ticket/Accident Number(s)
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Violation Section(s)	Violation Section(s)
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Check if involved vehicle is: <input type="checkbox"/> more than 95 inches wide; <input type="checkbox"/> more than 34 feet long; <input type="checkbox"/> operated with an overweight permit; <input type="checkbox"/> operated with an overdimension permit.	Check if involved vehicle is: <input type="checkbox"/> more than 95 inches wide; <input type="checkbox"/> more than 34 feet long; <input type="checkbox"/> operated with an overweight permit; <input type="checkbox"/> operated with an overdimension permit.	Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.
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VEHICLE 1 DAMAGE CODES	VEHICLE 2 DAMAGE CODES
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Box 1 - Point of Impact Box 2 - Most Damage	1 2	5 2
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28
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Enter up to three more Damage Codes	3 4 5	18 18 18
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Vehicle By Towed: To	Vehicle By Towed: To	ACCIDENT DIAGRAM
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29
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Vehicle Damage Coding:	4 5 6 7	9
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1-13. SEE DIAGRAM ON RIGHT.	14. UNDERCARRIAGE	17. DEMOLISHED
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31
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15. TRAILER	18. NO DAMAGE
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32
1

16. OVERTURNED	19. OTHER
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33
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Cost of repairs to any one vehicle will be more than \$1000. <input type="checkbox"/> Unknown/Unable to Determine	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Reference Marker	Coordinates (if available)	Place Where Accident Occurred: <input type="checkbox"/> BRONX <input checked="" type="checkbox"/> KINGS <input type="checkbox"/> NEW YORK <input type="checkbox"/> QUEENS <input type="checkbox"/> RICHMOND
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Latitude/Northing: 40.666435	Road on which accident occurred 211 CROWN STREET	(Route Number or Street Name)
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35
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Longitude/Easting: -73.95341	at 1) intersecting street _____	(Route Number or Street Name)
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36
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or 2) 15 <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input checked="" type="checkbox"/> W of ROGERS AVENUE	(Milepost, Nearest Intersecting Route Number or Street Name)
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Accident Description/Officer's Notes AT T/P/O DRIVER OF VEHICLE #1 BEARING NY LICENSE PLATE 20065SH STATES SHE WAS DOUBLE PARKED IN FRONT OF ABOVE LOCATION WITH HER RED LIGHTS FLASHING, LETTING A CHILD OFF THE SCHOOL BUS. DRIVER OF VEHICLE #1 FURTHER STATES DRIVER OF VEHICLE #2 BEARING NY LICENSE PLATE 61171MK THEN ATTEMPTED TO DRIVE AROUND THE DRIVERS SIDE OF VEHICLE #1 AND PROCEEDED TO COLLIDE WITH THE DRIVERS SIDE REAR CORNER OF VEHICLE #1. NO

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ALL INVOLVED	8	9	10	11	12	13	14	15	16	17	BY	TO	18	Names of all involved		Date of Death Only
	A	B	C	D	E	F								VINCENT, MARDOCHEE		
A	1	1	X	1	37	F	-	-	-	-	-	-	-	CRAWFORD, DARRELL, W		
B	1	7	X	1	28	M	-	-	-	-	-	-	-	MAYA IGLESIAS, CHRISTOPHER		
C	1	7	X	1	13	M	-	-	-	-	-	-	-	GORDON, JAYCEE		
D	1	7	X	1	5	M	-	-	-	-	-	-	-	TULLOCH, JAMEL		
E	1	7	X	1	8	M	-	-	-	-	-	-	-	FOSTER, JAYCEON		
F	1	7	X	1	8	M	-	-	-	-	-	-	-			

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Officer's Rank and Signature POM	Tax ID No. 971561	NCIC No. 03030	Precinct 071	Post/Sector	Reviewing Officer SGT HASAD BAKSH	Date/Time Reviewed 04/04/2022 18:46
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Print Name in Full PEDRO MENDEZ						
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