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New York State Department of Motor Vehicles

POLICE ACCIDENT REPORT (NYC)

MV-104AN (7/11)

AMENDED REPORT

1	Accident Date Month Day Year 3 31 2022			Day of Week THURSDAY		Military Time 15:06	No. of Vehicles 2	No. Injured 0	No. Killed 0	Not Investigated at Scene <input checked="" type="checkbox"/> Reconstructed <input type="checkbox"/>		Left Scene <input type="checkbox"/>	Police Photos <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	20																													
VEHICLE 1							VEHICLE 2 <input type="checkbox"/> BICYCLIST <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> 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		21																										
Driver Name - exactly as printed on license VINCENT, MARDOCHEE							Driver Name - exactly as printed on license TRENT, RONALD, J										29																										
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																											
3	Date of Birth Month Day Year 7 25 1984		Sex F	Unlicensed <input type="checkbox"/>	No. of Occupants 7	Public Property Damaged <input type="checkbox"/>		Date of Birth Month Day Year 12 11 1969		Sex M	Unlicensed <input type="checkbox"/>	No. of Occupants 1	Public Property Damaged <input type="checkbox"/>		27																												
Name - exactly as printed on registration Y&M TRANSIT CORP							Sex	Date of Birth Month Day Year	Name - exactly as printed on registration FEDERAL EXPRESS CORP						Sex	Date of Birth Month Day Year																											
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"/>		23																						
City or Town BROOKLYN				State NY		Zip Code 11231		City or Town MOUNT LAUREL				State NJ		Zip Code 08054		24																											
Plate Number 20065SH		State of Reg. NY		Vehicle Year & Make 2015 THOMAS BUILT		Vehicle Type BUS		Ins. Code 263		Plate Number 61171MK		State of Reg. NY		Vehicle Year & Make 2017 CHEVROLET		Vehicle Type SW/SUV		Ins. Code 263		25																							
Ticket/Arrest Number(s)							Ticket/Arrest Number(s)												26																								
Violation Section(s)							Violation Section(s)												27																								
6	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.														28
VEHICLE 1 DAMAGE CODES Box 1 - Point of Impact Box 2 - Most Damage Enter up to three more Damage Codes Vehicle By Towed:														VEHICLE 2 DAMAGE CODES Box 1 - Point of Impact Box 2 - Most Damage Enter up to three more Damage Codes Vehicle By Towed:														ACCIDENT DIAGRAM Rear End Left Turn Right Angle Right Turn Head On Slidewipe (same direction) Left Turn Slidewipe (opposite) DIAGRAM ATTACHED ON SUBSEQUENT PAGE 2 SIDE SWIPE (SAME DIR) 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														29	
Reference Marker		Coordinates (if available) Latitude/Northing: 40.666435 Longitude/Easting: -73.95341		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 Road on which accident occurred 211 CROWN STREET (Route Number or Street Name) at 1) intersecting street _____ (Route Number or Street Name) or 2) 15 Feet Miles <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> W of ROGERS AVENUE (Milepost, Nearest Intersecting Route Number or Street Name)																		30																					
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																																		31									
ALL INVOLVED																																		32									
OFFICER'S SIGNATURE POM Tax ID No. 971561 NCIC No. 03030 Precinct 071 Post/Section Reviewing Officer SGT HASAD BAKSH Date/Time Reviewed 04/04/2022 18:46																																		33									
Print Name In Full PEDRO MENDEZ																																		34									