

|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |      |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------|
| 96   | <input type="checkbox"/> Fatal <b>New Jersey Police Crash Investigation Report</b> <input checked="" type="checkbox"/> Reportable <input type="checkbox"/> Non-Reportable <input type="checkbox"/> Change Report                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 118a |
| 05   | 1. Case Number <b>24099513</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 25   |
| 97   | 10. Crash Occurred On: <b>ROUTE 514</b> <b>E</b> 11. Speed Limit <b>25</b> <b>514</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 118b |
| 01   | 2. Police Dept. of <b>Woodbridge Police Department</b> Code <b>01</b> Road Name <b>Dir</b> 12. Route No. <b>514</b> 13. Milepost <b>25</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 119a |
| 98   | 3. Station/Precinct <b>01</b> 14. <input checked="" type="checkbox"/> At Intersection with <input type="checkbox"/> N <input type="checkbox"/> E <input checked="" type="checkbox"/> Feet <input type="checkbox"/> S <input type="checkbox"/> W of: <b>WEDGEWOOD AV</b> 18. Speed Limit <b>25</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 02   |
| 01   | 166.0 <input type="checkbox"/> Miles 16 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 119b |
| 99   | 4. Date of Crash <b>05/07/2024</b> 5. Day of Week <b>Tuesday</b> 6. Time (use 2400 hrs.) <b>1142</b> 7. Municipality Code <b>1225</b> 8. Total Killed <b>0</b> 9. Total Injured <b>0</b> 21. Latitude <b>40.564226</b> 20. Route Name/Route No. <b>-74.273236</b> 22. Longitude                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 120a |
| 07   | 23. Veh. # <b>01</b> 24. Policy No. <b>942693936</b> 25. NJ Ins. Code <b>135</b> 53. Veh. # <b>02</b> 54. Policy No. <b>967145949</b> 55. NJ Ins. Code <b>134</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 120b |
| 100a | 26. Driver's First Name <b>ASHOK</b> Initial <b>O</b> Last Name <b>BERAI</b> 29. Sex <b>M</b> 56. Driver's First Name <b>ASHOK</b> Initial <b>O</b> Last Name <b>BERAI</b> 59. Sex <b>M</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 121a |
| 01   | 27. Number & Street <b>44 ELMWOOD AVE</b> 57. Number & Street <b>44 ELMWOOD AVE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 121b |
| 04   | 28. City <b>CARTERET</b> State <b>NJ</b> Zip <b>07008</b> 58. City <b>CARTERET</b> State <b>NJ</b> Zip <b>07008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |      |
| 101  | 30. Eyes <b>02</b> DL Class <b>D</b> Restrictions <b></b> Endorsements <b></b> 31. State <b>NJ</b> 60. Eyes <b>02</b> DL Class <b>D</b> Restrictions <b></b> Endorsements <b></b> 61. State <b>NJ</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 122  |
| 02   | 32. Driver's License Number <b>O10260640005592</b> 33. DOB <b>05/21/1959</b> 34. Expires <b>05/21/2025</b> 62. Driver's License Number <b>O10260640005592</b> 63. DOB <b>05/21/1959</b> 64. Expires <b>05/21/2025</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 10   |
| 01   | 35. Owner's First Name <b>OLIVARES</b> Initial <b>D</b> Last Name <b>DULCE</b> 65. Owner's First Name <b>JYOTI</b> Initial <b>O</b> Last Name <b>BERAI</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 123  |
| 2    | 36. Number & Street <b>600 CHARLES ST</b> 66. Number & Street <b>44 ELMWOOD AVE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 11   |
|      | 37. City <b>PERTH AMBOY</b> State <b>NJ</b> Zip <b>08861</b> 67. City <b>CARTERET</b> State <b>NJ</b> Zip <b>07008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 124  |
| 105  | 38. Make <b>HONDA</b> 39. Model <b>PILOT</b> 40. Color <b>MN</b> 41. Year <b>2009</b> 42. Plate No. <b>M48PVF</b> 43. State <b>NJ</b> 68. Make <b>KIA</b> 69. Model <b>Sorento</b> 70. Color <b>SL</b> 71. Year <b>2019</b> 72. Plate No. <b>N76SSF</b> 73. State <b>NJ</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 125  |
| 06   | 44. VIN <b>5FNYP38859B026041</b> 45. Expires <b>04/30/2025</b> 74. VIN <b>5XYPHDA50KG609272</b> 75. Expires <b>09/30/2024</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 11   |
|      | 46. Vehicle Removed to: <b></b> 76. Vehicle Removed to: <b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126a |
| 106  | <input type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded <input checked="" type="checkbox"/> Left at Scene <input type="checkbox"/> Towed Impounded <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126b |
| -    | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 26   |
| 107  | 48. Alcohol Drug Test Given: <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused <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 <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                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 127a |
| 04   | Results: <b></b> % <input type="checkbox"/> Pending <b></b> Hazard Class <b></b> Placard No. <b></b> Results: <b></b> % <input type="checkbox"/> Pending <b></b> Hazard Class <b></b> Placard No. <b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 127b |
| 01   | 50. Carrier No. <input type="checkbox"/> USDOT <b></b> <input type="checkbox"/> None <input type="checkbox"/> MC/MX <b></b> 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 <b></b> <input type="checkbox"/> None <input type="checkbox"/> MC/MX <b></b> 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.                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 127c |
| 01   | 52. Motor Carrier or Government Entity <b></b> 82. Motor Carrier or Government Entity <b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 127d |
|      | Number & Street <b></b> 83. Number & Street <b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 127e |
|      | City <b></b> State <b></b> Zip <b></b> 84. City <b></b> State <b></b> Zip <b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 28   |
|      | Level of Autonomy <b>150 - AVAILABLE</b> <input checked="" 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 <b>151 - ENGAGED</b> <input checked="" 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 <b>152 - AVAILABLE</b> <input checked="" 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 <b>153 - ENGAGED</b> <input checked="" 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 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 128  |
|      | 135. Damage to Other Property <input type="checkbox"/> Yes (If Yes, describe) <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 129  |
|      | Oper. 136. Charge <b></b> 137. Summons No. <b></b> Oper. 138. Charge <b></b> 139. Summons No. <b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 06   |
|      | Oper. 140. Charge <b></b> 141. Summons No. <b></b> Oper. 142. Charge <b></b> 143. Summons No. <b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 06   |
|      | Names & Addresses of Occupants If Deceased, Date & Time of Death                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 130  |
| A    | 02 01 01 05 64 M - - - 04 04 - ASHOK OBERAI 44 ELMWOOD AVE CARTERET NJ 07008                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 131  |
| B    | 02 03 01 05 62 F - - - 04 04 06 - JYOTI OBERAI 44 ELMWOOD AVE CARTERET NJ 07008                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 12   |
| C    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 132  |
| D    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 133  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 02   |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 134  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 02   |

| E | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | Names & Addresses of Occupants<br>If Deceased, Date & Time of Death |  |
|---|----|----|----|----|----|----|----|----|----|----|----|----|----|---------------------------------------------------------------------|--|
|   |    |    |    |    |    |    |    |    |    |    |    |    |    |                                                                     |  |

144. Crash Diagram



145. Crash Description/Narrative

RO of V1 states that a female vendor informed her of a vehicle that struck her car and left the scene. She supplied us with a NJ REG and I went to the RO home for their statement.

D2 states that when he was pulling out of the parking spot he struck V1. He pulled over by the intersection of Wedgewood Ave and waited for the owner to return for several minutes. Due to D1 having diabetes and several other medical conditions he began to feel faint. He needed to eat soon to fix his sugar levels so he asked a vendor, Victor, if he could leave his contact information for him to pass along to the RO of V1. It should be noted that D2 had food on his face as I was speaking to him. D2 gave me Victor's information to confirm his story.

I contacted Victor who confirmed that they exchanged information but did not know that it was due to a medical emergency. Victor states he did not believe he left the scene in a malicious intent. I advised D2 that due to the totality of the circumstances it will be left as an MVA but advised him to contact police to give dispatchers his information if he were to come across an incident like this again. He was also advised to carry a pen and paper and leave a note with the vehicle as another option as well. He stated he would do so.

Investigation reveals D2 at fault for the accident due to driver inattention.

\*\*\*Other Descriptions\*\*\*

02 - WHEN LEAVING PARKIN SPOT DID NOT NOTICE DISTANCE STRIKING V1 - Field 119a

|                          |              |                 |         |                                                                               |
|--------------------------|--------------|-----------------|---------|-------------------------------------------------------------------------------|
| 146. Officer's Signature | 147. Badge # | 148. Reviewer   | Badge # | 149. Case Status                                                              |
| Lopez, Dalleyri          | 684          | Maldonado, Jose |         | <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |

**New Jersey Police Crash Investigation Report  
Motor Vehicle Crash Diagram**

Police Dept: Woodbridge Police Department Code: 01

Station: \_\_\_\_\_ Case No: 24099513

144. Crash Diagram (NOT TO SCALE)

