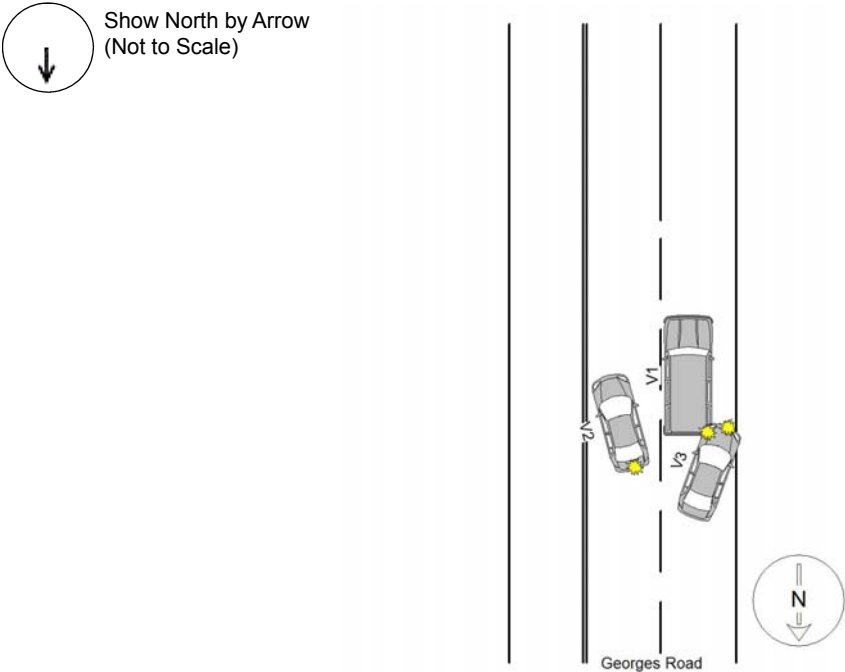


|                                                                                                                     |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------|--|------------------------------------------------------------------------------------------------------|--|----------------------------------------|------------------------------------------------------------------|-----------------------------------------------------|--|------------|-----------------------------------------------------|------------------------------|--|--|-----------------------------|---------------------------------------|--|--|-----------|--------------------------------------------|--|--|--|------------------------------------|--|--|--|-------------------------|--|--|--|----------------|--|--|--|
| 96<br>05                                                                                                            | Page: 1 Of 4                                                                                                                         |  | <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 |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 97<br>01                                                                                                            | 1 Case Number<br>I-2020-000291                                                                                                       |  |                                |  | 10 Crash Occured On : GEORGES ROAD                                                                                                                             |  |                                               |  | S                                                                                                                                    |  | 11 Speed Limit<br>35                                                |  | 679                                                                                                                                                            |  | -                                              |  | 02                                                                                                   |  | 35                                     |                                                                  | 118a<br>25                                          |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 98<br>01                                                                                                            | 2 Police Dept. of<br>SOUTH BRUNSWICK POLICE                                                                                          |  |                                |  | Code<br>01                                                                                                                                                     |  | <input type="checkbox"/> At Intersection with |  |                                                                                                                                      |  | Road Name<br>KINGSTON LANE                                          |  | Dir<br>12 Route No                                                                                                                                             |  | Suffix                                         |  | 13 Milepost<br>35                                                                                    |  | 18 Speed Limit<br>35                   |                                                                  | 118b<br>--                                          |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 99<br>05                                                                                                            | 3 Station/Precinct<br>--                                                                                                             |  |                                |  | 14                                                                                                                                                             |  | 15                                            |  | <input type="checkbox"/> Feet                                                                                                        |  | <input checked="" type="checkbox"/> N<br><input type="checkbox"/> S |  | <input type="checkbox"/> E<br><input type="checkbox"/> W                                                                                                       |  | of :                                           |  | 19                                                                                                   |  | 20 Route Name/ Route No.               |                                                                  | 22 Longitude                                        |  | 119a<br>25 |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 100a<br>01                                                                                                          | 4 Date of Crash<br>01 02 20                                                                                                          |  |                                |  | 5 Day of Week<br>Thu                                                                                                                                           |  | 6 Time<br>(use 2400 hrs)<br>08:04             |  | 7 Municipality<br>Code<br>1221                                                                                                       |  | 8 Total Killed<br>--                                                |  | 9 Total Injured<br>--                                                                                                                                          |  | 21 Latitude<br>--                              |  | 20 Route Name/ Route No.                                                                             |  | 22 Longitude<br>--                     |                                                                  | 119b<br>--                                          |  | 120a<br>01 |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 100b<br>04                                                                                                          | 23 Veh #<br>1                                                                                                                        |  |                                |  | 24 Policy No<br>939531612                                                                                                                                      |  |                                               |  | 25 NJ Ins Code<br>054                                                                                                                |  |                                                                     |  | 53 Veh #<br>2                                                                                                                                                  |  |                                                |  | 54 Policy No<br>405 8898-D22-38                                                                      |  |                                        |                                                                  | 55 NJ Ins Code<br>25178                             |  |            |                                                     | 120b<br>--                   |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 101<br>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<br>01              |  |  |  |                |  |  |  |
| 102<br>02                                                                                                           | 26 Driver's First Name<br>JAMES C SHEARER                                                                                            |  |                                |  | Initial<br>Last Name                                                                                                                                           |  |                                               |  | 29 Sex<br>M                                                                                                                          |  |                                                                     |  | 56 Driver's First Name<br>LAUREN BLAIR DEVRIES                                                                                                                 |  |                                                |  | Initial<br>Last Name                                                                                 |  |                                        |                                                                  | 59 Sex<br>F                                         |  |            |                                                     | 121b<br>--                   |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 103<br>01                                                                                                           | 27 Number & Street<br>675 RIDGE RD                                                                                                   |  |                                |  | 28 City<br>MONMOUTH JCT                                                                                                                                        |  |                                               |  | State<br>NJ                                                                                                                          |  |                                                                     |  | Zip<br>08852-2723                                                                                                                                              |  |                                                |  | 57 Number & Street<br>9 MICHELLE COURT                                                               |  |                                        |                                                                  | 58 City<br>LEVITTOWN                                |  |            |                                                     | State<br>PA                  |  |  |                             | Zip<br>19057                          |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 104<br>03                                                                                                           | 30 Eyes<br>04                                                                                                                        |  |                                |  | DL Class<br>D                                                                                                                                                  |  |                                               |  | Restrictions<br>--                                                                                                                   |  |                                                                     |  | Endorsements<br>--                                                                                                                                             |  |                                                |  | 31 State<br>NJ                                                                                       |  |                                        |                                                                  | 60 Eyes<br>02                                       |  |            |                                                     | DL Class<br>C                |  |  |                             | Restrictions<br>--                    |  |  |           | Endorsements<br>--                         |  |  |  | 61 State<br>PA                     |  |  |  |                         |  |  |  |                |  |  |  |
| 105<br>01                                                                                                           | 32 Drivers License No<br>S32823836307534                                                                                             |  |                                |  | 33 DOB<br>mm dd yy<br>07 16 53                                                                                                                                 |  |                                               |  | 34 Expires<br>mm yy<br>08 21                                                                                                         |  |                                                                     |  | 62 Drivers License No<br>27124854                                                                                                                              |  |                                                |  | 63 DOB<br>mm dd yy<br>01 16 84                                                                       |  |                                        |                                                                  | 64 Expires<br>mm yy<br>01 21                        |  |            |                                                     | 122<br>08                    |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 106<br>--                                                                                                           | 35 Owner's First Name<br>NANCY E SHEARER                                                                                             |  |                                |  | Initial<br>Last Name                                                                                                                                           |  |                                               |  | 65 Owner's First Name<br>JONI M MESSIMER                                                                                             |  |                                                                     |  | Initial<br>Last Name                                                                                                                                           |  |                                                |  | 124<br>04                                                                                            |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 107<br>--                                                                                                           | 36 Number & Street<br>675 RIDGE RD                                                                                                   |  |                                |  | 37 City<br>MONMOUTH JCT                                                                                                                                        |  |                                               |  | State<br>NJ                                                                                                                          |  |                                                                     |  | Zip<br>08852-2723                                                                                                                                              |  |                                                |  | 66 Number & Street<br>9 MICHELLE COURT                                                               |  |                                        |                                                                  | 67 City<br>LEVITTOWN                                |  |            |                                                     | State<br>PA                  |  |  |                             | Zip<br>19057                          |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 108<br>04                                                                                                           | 38 Make<br>FOR                                                                                                                       |  |                                |  | 39 Model<br>ESC                                                                                                                                                |  |                                               |  | 40 Color<br>WT                                                                                                                       |  |                                                                     |  | 41 Year<br>2012                                                                                                                                                |  |                                                |  | 42 Plate No.<br>A75CSZ                                                                               |  |                                        |                                                                  | 43 State<br>NJ                                      |  |            |                                                     | 68 Make<br>FORD              |  |  |                             | 69 Model<br>SDN                       |  |  |           | 70 Color<br>WHITE                          |  |  |  | 71 Year<br>2001                    |  |  |  | 72 Plate No.<br>KZG5328 |  |  |  | 73 State<br>NJ |  |  |  |
| 109<br>01                                                                                                           | 44 VIN<br>1FMCU9E74CKC47487                                                                                                          |  |                                |  | 45 Expires<br>mm yy<br>11 20                                                                                                                                   |  |                                               |  | 74 VIN<br>1FAPF38381W137293                                                                                                          |  |                                                                     |  | 75 Expires<br>mm yy<br>03 20                                                                                                                                   |  |                                                |  | 126b<br>--                                                                                           |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 110<br>01                                                                                                           | 46 Vehicle Removed To<br>--                                                                                                          |  |                                |  | 76 Vehicle Removed To<br>DEANS GARAGE - 862 GEORGES ROAD, MONMOUTH JCT NJ 08852                                                                                |  |                                               |  | 126d<br>--                                                                                                                           |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 111<br>01                                                                                                           | <input checked="" type="checkbox"/> Driven                                                                                           |  |                                |  | <input type="checkbox"/> Towed Disabled                                                                                                                        |  |                                               |  | <input type="checkbox"/> Towed Disabled & Impounded                                                                                  |  |                                                                     |  | <input type="checkbox"/> Driven                                                                                                                                |  |                                                |  | <input checked="" type="checkbox"/> Towed Disabled                                                   |  |                                        |                                                                  | <input type="checkbox"/> Towed Disabled & Impounded |  |            |                                                     | 126e<br>26                   |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 112<br>--                                                                                                           | 47 Authority<br>Owner                                                                                                                |  |                                |  | <input checked="" type="checkbox"/> Driver                                                                                                                     |  |                                               |  | <input type="checkbox"/> Police                                                                                                      |  |                                                                     |  | 77 Authority<br>Owner                                                                                                                                          |  |                                                |  | <input type="checkbox"/> Driver                                                                      |  |                                        |                                                                  | <input checked="" type="checkbox"/> Police          |  |            |                                                     | 127a<br>26                   |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 113<br>--                                                                                                           | 48 Alcohol/Drug Test<br>Given : <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused |  |                                |  | 49 Hazardous Material<br><input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill                                        |  |                                               |  | 78 Alcohol/Drug Test<br>Given : <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused |  |                                                                     |  | 79 Hazardous Material<br><input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill                                        |  |                                                |  | 127b<br>--                                                                                           |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 114<br>--                                                                                                           | Type : <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine                                 |  |                                |  | Results : 0. % <input type="checkbox"/> Pending                                                                                                                |  |                                               |  | Hazard Class                                                                                                                         |  |                                                                     |  | Placard No.                                                                                                                                                    |  |                                                |  | Type : <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine |  |                                        |                                                                  | Results : 0. % <input type="checkbox"/> Pending     |  |            |                                                     | Hazard Class                 |  |  |                             | Placard No.                           |  |  |           | 127c<br>--                                 |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 115<br>--                                                                                                           | 50 Carrier No.<br><input type="checkbox"/> USDOT <input type="checkbox"/> MC/MX                                                      |  |                                |  | 51 Commercial Vehicle Weight<br><input type="checkbox"/> < 10,000 lbs<br><input type="checkbox"/> 10,001 - 26,000 lbs<br><input type="checkbox"/> > 26,001 lbs |  |                                               |  | 80 Carrier No.<br><input type="checkbox"/> USDOT <input type="checkbox"/> MC/MX                                                      |  |                                                                     |  | 81 Commercial Vehicle Weight<br><input type="checkbox"/> < 10,000 lbs<br><input type="checkbox"/> 10,001 - 26,000 lbs<br><input type="checkbox"/> > 26,001 lbs |  |                                                |  | 127d<br>--                                                                                           |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 116<br>03                                                                                                           | 52 Carrier name<br>--                                                                                                                |  |                                |  | 82 Carrier name<br>--                                                                                                                                          |  |                                               |  | 127e<br>26                                                                                                                           |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 117<br>03                                                                                                           | Number & Street<br>--                                                                                                                |  |                                |  | City<br>--                                                                                                                                                     |  |                                               |  | State<br>--                                                                                                                          |  |                                                                     |  | Zip<br>--                                                                                                                                                      |  |                                                |  | 128<br>26                                                                                            |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 135 Damage To Other Property <input type="checkbox"/> Yes (If yes, describe) <input checked="" type="checkbox"/> No |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        | 129<br>06                                                        |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 136 Charge<br>3 39:4-97 CARELESS DRIVING                                                                            |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        | 137 Summons No<br>E20000049                                      |                                                     |  |            | 138 Charge<br>3 39:3-29 FAILURE TO EXHIBIT DOCUMENT |                              |  |  | 139 Summons No<br>E20000051 |                                       |  |  | 130<br>06 |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 140 Charge<br>2 39:3-40 DRIVING WHILE REVOKED / SUSP                                                                |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        | 141 Summons No<br>E20000078                                      |                                                     |  |            | 142 Charge<br>2 39:3-29 FAILURE TO EXHIBIT DOCUMENT |                              |  |  | 143 Summons No<br>E20000052 |                                       |  |  | 131<br>06 |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| 83 84 85 86 87 88 89 90 91 92 93 94 95                                                                              |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        | Names & Address of Occupants - If Deceased, Date & Time of Death |                                                     |  |            | 132<br>06                                           |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| A 01 01 01 05 66 M -- -- -- 11 04 -- --                                                                             |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        | SHEARER, JAMES C<br>675 RIDGE RD. MONMOUTH JCT NJ 08852-2723     |                                                     |  |            | 133<br>02                                           |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| B 02 01 01 05 35 F -- -- -- 11 04 -- --                                                                             |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        | DEVRIES, LAUREN BLAIR<br>9 MICHELLE COURT, LEVITTOWN PA 19057    |                                                     |  |            | 134<br>04                                           |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| C 03 01 01 05 32 F -- -- -- 11 04 -- --                                                                             |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        | LIGHT, JENNIFER J<br>17305 E 4TH AVE, SPOKANE VALLEY WA 99016    |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |
| D -- -- -- -- -- -- -- -- -- -- -- -- -- --                                                                         |                                                                                                                                      |  |                                |  |                                                                                                                                                                |  |                                               |  |                                                                                                                                      |  |                                                                     |  |                                                                                                                                                                |  |                                                |  |                                                                                                      |  |                                        |                                                                  |                                                     |  |            |                                                     |                              |  |  |                             |                                       |  |  |           |                                            |  |  |  |                                    |  |  |  |                         |  |  |  |                |  |  |  |

|   | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | Names & Address of Occupants<br>If Deceased, Date & Time of |
|---|----|----|----|----|----|----|----|----|----|----|----|----|----|-------------------------------------------------------------|
| E | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- --                                                       |
| F | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- --                                                       |
| G | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- --                                                       |
| H | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- --                                                       |
| I | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- --                                                       |
| J | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- --                                                       |

144 Crash Diagram



145 Crash Description

V1, V2, AND V3 WERE TRAVELING SOUTH ON GEORGES ROAD IN THE AREA OF KINGSTON LANE. V1 WAS STOPPED IN TRAFFIC WHEN IT WAS STRUCK BY V3. V2 WAS REAR-ENDED BY V3 AND WAS ABLE TO AVOID A COLLISION WITH V1. V3 FIRST STRUCK V2, AND THEN STRUCK V1 BEFORE COMING TO REST. DRIVER 1 STATED HE WAS STOPPED IN TRAFFIC WHEN HIS VEHICLE WAS REAR-ENDED. DRIVER 1 REPORTED THAT V2 WAS FOLLOWING HIS VEHICLE TOO CLOSE AND ALMOST STRUCK HIS VEHICLE PRIOR TO THIS CRASH. DRIVER 2 REPORTED SHE WAS STOPPING IN TRAFFIC WHEN SHE HEARD V3 ATTEMPTING TO STOP. DRIVER 2 REPORTED SHE TURNED THE WHEEL AND ATTEMPTED TO AVOID A COLLISION BUT V3 STRUCK THE REAR OF HER VEHICLE. DRIVER 3 REPORTED THAT SHE LOOKED DOWN FOR A SECOND AND WHEN SHE LOOKED UP TRAFFIC WAS STOPPED. ON SCENE INVESTIGATION REVEALED THAT V3 FIRST STRUCK V2 AND THEN STRUCK V1 BEFORE COMING TO REST. DRIVER 2 PROVIDED AND EXPIRED INSURANCE CARD AND REGISTRATION TO ANOTHER VEHICLE. DRIVER 2 WAS ISSUED A SUMMONS FOR FAILURE TO PRODUCE THE REGISTRATION AND IT WAS LATER DETERMINED THAT DRIVER 2 LICENSE WAS SUSPENDED. SUMMONS E20000078 WAS ISSUED VIA MAIL. DRIVER 3 PROVIDED AN EXPIRED INSURANCE CARD AND DID NOT PROVIDE HER DRIVERS LICENSE. DRIVER 3 WAS ISSUED A SUMMONS FOR CARELESS DRIVING AND FAILURE TO PRODUCE HER DRIVERS LICENSE. \*\*\*V2 INSURANCE: STATE FARM 215-757-6900 V3 INSURANCE: RISK MANAGEMENT- 509-926-1777, S 502 SULLIVAN #102 VERADALE, WA 99037

NJTR - 1 (Rev. 01/17)

|                                                               |    |    |    |    |    |    |    |    |    |    |    |    |                                                |                                                             |    |                                         |  |  |
|---------------------------------------------------------------|----|----|----|----|----|----|----|----|----|----|----|----|------------------------------------------------|-------------------------------------------------------------|----|-----------------------------------------|--|--|
| <b>New Jersey Police</b><br><b>Crash Investigation Report</b> |    |    |    |    |    |    |    |    |    |    |    |    | <b>Case Number</b><br><b>I - 2020 - 000291</b> |                                                             |    | <b>PAGE</b> <u>2</u> <b>OF</b> <u>4</u> |  |  |
|                                                               | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95                                             | Names & Address of Occupants<br>If Deceased, Date & Time of |    |                                         |  |  |
| E<br><br>F<br><br>G<br><br>H<br><br>I<br><br>J                | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | --                                             | --                                                          | -- | --                                      |  |  |
|                                                               | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | --                                             | --                                                          | -- | --                                      |  |  |
|                                                               | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | --                                             | --                                                          | -- | --                                      |  |  |
|                                                               | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | --                                             | --                                                          | -- | --                                      |  |  |
|                                                               | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | --                                             | --                                                          | -- | --                                      |  |  |
|                                                               | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | --                                             | --                                                          | -- | --                                      |  |  |

144 Crash Diagram



Show North by Arrow  
(Not to Scale)

145 Crash Description

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|                                                                 |                             |                                              |                         |                                                                                                  |
|-----------------------------------------------------------------|-----------------------------|----------------------------------------------|-------------------------|--------------------------------------------------------------------------------------------------|
| 146 Officer's Signature<br><b>PATROLMAN BLAKE, JESSE      R</b> | 147 Badge No.<br><b>421</b> | 148 Reviewed By<br><b>SERGEANT HOLSTEN J</b> | Badge No.<br><b>351</b> | 149 Case Status<br><input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |
|-----------------------------------------------------------------|-----------------------------|----------------------------------------------|-------------------------|--------------------------------------------------------------------------------------------------|