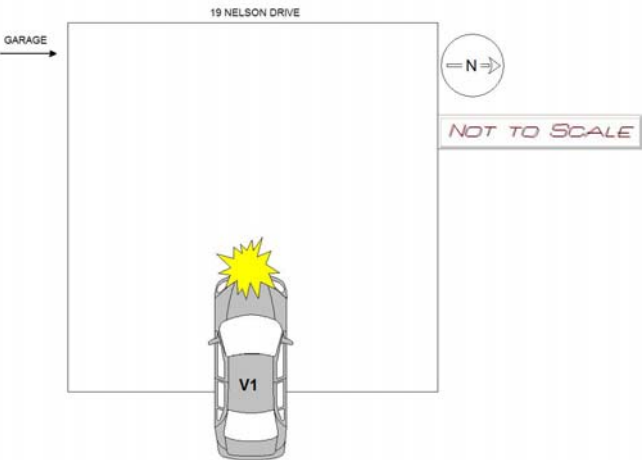


|            |                                                                                                                                      |          |                                |          |                                              |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  |                                                                                                                           |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
|------------|--------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------|----------|----------------------------------------------|---------|-------------------------------------------------------------|----------|---------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--|-----------------------------------------|--|----------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------|--|----------------|----|------------------------------|--|------------|--|---------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------|-----------|--|--|------------------------------------|--|--|--|------------------------------------------------------------------------------------------------------|--|--|-----------|----------------|--|-----------|--|------------|--|-----------------------------------------------------|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|-------------|--|--|--|--|--|--|--|--|--|------------|
| 96<br>05   | Page: 1 Of 2                                                                                                                         |          | <input type="checkbox"/> Fatal |          | New Jersey Police Crash Investigation Report |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      | <input checked="" type="checkbox"/> Reportable |  | <input type="checkbox"/> Non-Reportable |  | <input type="checkbox"/> Change Report |  |                                                                                                                           |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 97<br>01   | 1 Case Number<br>I-2020-001629                                                                                                       |          |                                |          | 10 Crash Occured On : 19 NELSON DRIVE        |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      | W                                              |  | 11 Speed Limit<br>5                     |  | --                                     |  | -                                                                                                                         |  | --             |    | --                           |  | 118a<br>02 |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 98<br>06   | 2 Police Dept. of<br>SOUTH BRUNSWICK POLICE                                                                                          |          |                                |          | Code<br>01                                   |         | <input type="checkbox"/> At Intersection with Road Name Dir |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      |                                                |  | 12 Route No                             |  | Suffix                                 |  | 13 Milepost                                                                                                               |  | 18 Speed Limit |    |                              |  | 118b<br>01 |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 99<br>09   | 3 Station/Precinct<br>SOUTH BRUNSWICK                                                                                                |          |                                |          | 14                                           |         | 15                                                          |          | 16                                    |          | 19                                                                                                                                                             |          | 20                                         |                                                                                                                                      | 21                                             |  | 22                                      |  | NB                                     |  | EB                                                                                                                        |  |                |    | 119a<br>--                   |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 100a<br>01 | 4 Date of Crash<br>01 08 20                                                                                                          |          |                                |          | 5 Day of Week<br>Wed                         |         | 6 Time<br>(use 2400 hrs)<br>17:44                           |          | 7 Municipality<br>Code<br>1221        |          | 8 Total<br>Killed<br>0                                                                                                                                         |          | 9 Total<br>Injured<br>0                    |                                                                                                                                      | 21 Latitude<br>--                              |  | 20 Route Name/ Route No.<br>--          |  | 22 Longitude<br>--                     |  |                                                                                                                           |  |                |    | 119b<br>--                   |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 100b<br>05 | 23 Veh #<br>1                                                                                                                        |          |                                |          | 24 Policy No<br>4318200260                   |         |                                                             |          | 25 NJ Ins Code<br>148                 |          |                                                                                                                                                                |          | 53 Veh #<br>--                             |                                                                                                                                      |                                                |  | 54 Policy No<br>--                      |  |                                        |  | 55 NJ Ins Code<br>--                                                                                                      |  |                |    |                              |  | 120a<br>01 |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 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 |  |  |  | 120b<br>--                                                                                           |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 102<br>01  | 26 Driver's First Name<br>SAMEERA                                                                                                    |          |                                |          |                                              |         |                                                             |          |                                       |          | Initial<br>ADHARAPURAPU                                                                                                                                        |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | 29 Sex<br>F                                                                                                               |  |                |    |                              |  |            |  |                                       |  | 56 Driver's First Name<br>--                                                                                                                                   |  |                                            |           |  |  |                                    |  |  |  | Initial<br>--                                                                                        |  |  |           |                |  |           |  |            |  | Last Name<br>--                                     |  |  |  |  |  |  |  |  |  | 59 Sex<br>-- |  |  |  |  |  |  |  |  |  | 121a<br>--  |  |  |  |  |  |  |  |  |  |            |
| 103<br>01  | 27 Number & Street<br>19 NELSON DRIVE                                                                                                |          |                                |          |                                              |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | 57 Number & Street<br>--                                                                                                  |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  | 121b<br>--   |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 104<br>01  | 28 City<br>CRANBURY                                                                                                                  |          |                                |          |                                              |         |                                                             |          |                                       |          | State<br>NJ                                                                                                                                                    |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | Zip<br>08512-3410                                                                                                         |  |                |    |                              |  |            |  |                                       |  | 58 City<br>--                                                                                                                                                  |  |                                            |           |  |  |                                    |  |  |  | State<br>--                                                                                          |  |  |           |                |  |           |  |            |  | Zip<br>--                                           |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  | 122<br>09   |  |  |  |  |  |  |  |  |  |            |
|            | 30 Eyes<br>02                                                                                                                        |          |                                |          | DL Class<br>D                                |         |                                                             |          | Restrictions<br>--                    |          |                                                                                                                                                                |          | Endorsements<br>--                         |                                                                                                                                      |                                                |  | 31 State<br>NJ                          |  |                                        |  | 60 Eyes<br>--                                                                                                             |  |                |    | DL Class<br>--               |  |            |  | Restrictions<br>--                    |  |                                                                                                                                                                |  | Endorsements<br>--                         |           |  |  | 61 State<br>--                     |  |  |  | 123<br>--                                                                                            |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 105<br>11  | 32 Drivers License No<br>A18306870060792                                                                                             |          |                                |          |                                              |         |                                                             |          |                                       |          | 33 DOB<br>mm dd yy<br>10 29 79                                                                                                                                 |          |                                            |                                                                                                                                      | 34 Expires<br>mm yy<br>03 21                   |  |                                         |  | 62 Drivers License No<br>--            |  |                                                                                                                           |  |                |    |                              |  |            |  | 63 DOB<br>mm dd yy<br>-- -- --        |  |                                                                                                                                                                |  | 64 Expires<br>mm yy<br>-- -- --            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  | 124<br>11 |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 106<br>--  | 35 Owner's First Name<br>RAVI S ARADHI                                                                                               |          |                                |          |                                              |         |                                                             |          |                                       |          | Initial<br>--                                                                                                                                                  |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | Last Name<br>--                                                                                                           |  |                |    |                              |  |            |  |                                       |  | 65 Owner's First Name<br>--                                                                                                                                    |  |                                            |           |  |  |                                    |  |  |  | Initial<br>--                                                                                        |  |  |           |                |  |           |  |            |  | Last Name<br>--                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  | 125<br>--   |  |  |  |  |  |  |  |  |  |            |
| 107<br>--  | 36 Number & Street<br>19 NELSON DR                                                                                                   |          |                                |          |                                              |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | 66 Number & Street<br>--                                                                                                  |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  | 126a<br>26   |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 108<br>01  | 38 Make<br>ACU                                                                                                                       |          |                                |          | 39 Model<br>RDX                              |         |                                                             |          | 40 Color<br>BN                        |          |                                                                                                                                                                |          | 41 Year<br>2017                            |                                                                                                                                      |                                                |  | 42 Plate No.<br>Y60HZF                  |  |                                        |  | 43 State<br>NJ                                                                                                            |  |                |    | 68 Make<br>--                |  |            |  | 69 Model<br>--                        |  |                                                                                                                                                                |  | 70 Color<br>--                             |           |  |  | 71 Year<br>--                      |  |  |  | 72 Plate No.<br>--                                                                                   |  |  |           | 73 State<br>-- |  |           |  | 126b<br>-- |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 109<br>--  | 44 VIN<br>5J8TB4H54HL021377                                                                                                          |          |                                |          |                                              |         |                                                             |          |                                       |          | 45 Expires<br>07 21                                                                                                                                            |          |                                            |                                                                                                                                      | 74 VIN<br>--                                   |  |                                         |  |                                        |  |                                                                                                                           |  |                |    | 75 Expires<br>-- -- --       |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  | 126c<br>-- |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 110<br>01  | 46 Vehicle Removed To<br>--                                                                                                          |          |                                |          |                                              |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | 76 Vehicle Removed To<br>--                                                                                               |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  | 126d<br>--   |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 111<br>--  | <input type="checkbox"/> Driven                                                                                                      |          |                                |          |                                              |         |                                                             |          |                                       |          | <input type="checkbox"/> Towed Disabled                                                                                                                        |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | <input type="checkbox"/> Towed Disabled & Impounded                                                                       |  |                |    |                              |  |            |  |                                       |  | <input type="checkbox"/> Driven                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  | <input type="checkbox"/> Towed Disabled                                                              |  |  |           |                |  |           |  |            |  | <input type="checkbox"/> Towed Disabled & Impounded |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  | 126e<br>26  |  |  |  |  |  |  |  |  |  |            |
| 112<br>--  | <input checked="" type="checkbox"/> Left at Scene                                                                                    |          |                                |          |                                              |         |                                                             |          |                                       |          | <input type="checkbox"/> Towed Impounded                                                                                                                       |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | <input type="checkbox"/> Left at Scene                                                                                    |  |                |    |                              |  |            |  |                                       |  | <input type="checkbox"/> Towed Impounded                                                                                                                       |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  | 127a<br>--   |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 113<br>--  | 47 Authority<br><input type="checkbox"/> Owner                                                                                       |          |                                |          |                                              |         |                                                             |          |                                       |          | <input checked="" type="checkbox"/> Driver                                                                                                                     |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | <input type="checkbox"/> Police                                                                                           |  |                |    |                              |  |            |  |                                       |  | 77 Authority<br><input type="checkbox"/> Owner                                                                                                                 |  |                                            |           |  |  |                                    |  |  |  | <input type="checkbox"/> Driver                                                                      |  |  |           |                |  |           |  |            |  | <input type="checkbox"/> Police                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  | 127b<br>--  |  |  |  |  |  |  |  |  |  |            |
| 114<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 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                                        |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  | 127c<br>--   |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 115<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. |  |  |  |  |  |  |  |  |  | 127d<br>-- |
| 116<br>04  | 50 Carrier No.<br><input type="checkbox"/> USDOT -- <input type="checkbox"/> None                                                    |          |                                |          |                                              |         |                                                             |          |                                       |          | 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"/> None                                         |  |                |    |                              |  |            |  |                                       |  | 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 |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  | 127e<br>--   |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| 117<br>--  | 52 Carrier name<br>--                                                                                                                |          |                                |          |                                              |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | 82 Carrier name<br>--                                                                                                     |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  | 128<br>26   |  |  |  |  |  |  |  |  |  |            |
|            | Number & Street<br>--                                                                                                                |          |                                |          |                                              |         |                                                             |          |                                       |          |                                                                                                                                                                |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | Number & Street<br>--                                                                                                     |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  | 129<br>12   |  |  |  |  |  |  |  |  |  |            |
|            | City<br>--                                                                                                                           |          |                                |          |                                              |         |                                                             |          |                                       |          | State<br>--                                                                                                                                                    |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | Zip<br>--                                                                                                                 |  |                |    |                              |  |            |  |                                       |  | City<br>--                                                                                                                                                     |  |                                            |           |  |  |                                    |  |  |  | State<br>--                                                                                          |  |  |           |                |  |           |  |            |  | Zip<br>--                                           |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  | 130<br>12   |  |  |  |  |  |  |  |  |  |            |
|            | 135 Damage To Other Property                                                                                                         |          |                                |          |                                              |         |                                                             |          |                                       |          | <input checked="" type="checkbox"/> Yes (If yes, describe)                                                                                                     |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | <input type="checkbox"/> No                                                                                               |  |                |    |                              |  |            |  |                                       |  | D1 DROVE THROUGH HER GARAGE DOOR DAMAGING THE DOOR AND A STORAGE RACK INSIDE THE GARAGE.                                                                       |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  | 131<br>--    |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
|            | Oper 1                                                                                                                               |          |                                |          |                                              |         |                                                             |          |                                       |          | 136 Charge<br>--                                                                                                                                               |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | 137 Summons No<br>--                                                                                                      |  |                |    |                              |  |            |  |                                       |  | Oper --                                                                                                                                                        |  |                                            |           |  |  |                                    |  |  |  | 138 Charge<br>--                                                                                     |  |  |           |                |  |           |  |            |  | 139 Summons No<br>--                                |  |  |  |  |  |  |  |  |  | 132<br>--    |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
|            | Oper --                                                                                                                              |          |                                |          |                                              |         |                                                             |          |                                       |          | 140 Charge<br>--                                                                                                                                               |          |                                            |                                                                                                                                      |                                                |  |                                         |  |                                        |  | 141 Summons No<br>--                                                                                                      |  |                |    |                              |  |            |  |                                       |  | Oper --                                                                                                                                                        |  |                                            |           |  |  |                                    |  |  |  | 142 Charge<br>--                                                                                     |  |  |           |                |  |           |  |            |  | 143 Summons No<br>--                                |  |  |  |  |  |  |  |  |  | 133<br>04    |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| A          | 83<br>01                                                                                                                             | 84<br>01 | 85<br>01                       | 86<br>05 | 87<br>40                                     | 88<br>F | 89<br>--                                                    | 90<br>-- | 91<br>--                              | 92<br>11 | 93<br>04                                                                                                                                                       | 94<br>-- | 95<br>--                                   | Names & Address of Occupants - If Deceased, Date & Time of Death<br>ADHARAPURAPU, SAMEERA<br>19 NELSON DRIVE, CRANBURY NJ 08512-3410 |                                                |  |                                         |  |                                        |  |                                                                                                                           |  |                |    |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            | 134<br>-- |  |  |                                    |  |  |  |                                                                                                      |  |  |           |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| B          | --                                                                                                                                   | --       | --                             | --       | --                                           | --      | --                                                          | --       | --                                    | --       | --                                                                                                                                                             | --       | --                                         | --                                                                                                                                   |                                                |  |                                         |  |                                        |  |                                                                                                                           |  |                | -- |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  | 135<br>-- |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| C          | --                                                                                                                                   | --       | --                             | --       | --                                           | --      | --                                                          | --       | --                                    | --       | --                                                                                                                                                             | --       | --                                         | --                                                                                                                                   |                                                |  |                                         |  |                                        |  |                                                                                                                           |  |                | -- |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  | 136<br>-- |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |
| D          | --                                                                                                                                   | --       | --                             | --       | --                                           | --      | --                                                          | --       | --                                    | --       | --                                                                                                                                                             | --       | --                                         | --                                                                                                                                   |                                                |  |                                         |  |                                        |  |                                                                                                                           |  |                | -- |                              |  |            |  |                                       |  |                                                                                                                                                                |  |                                            |           |  |  |                                    |  |  |  |                                                                                                      |  |  | 137<br>-- |                |  |           |  |            |  |                                                     |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |            |

|   | 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

**D1 STATED IN EFFECT WHILE PARKING HER VEHICLE IN THE DRIVEWAY, SHE HIT THE GAS INSTEAD OF THE BREAK CAUSING HER TO DRIVE THROUGH HER GARAGE DOOR. THE GARAGE DOOR WAS DAMAGED AS WELL AS A STORAGE RACK INSIDE THE GARAGE.**

**NO REPORTED INJURIES AT THIS TIME.**