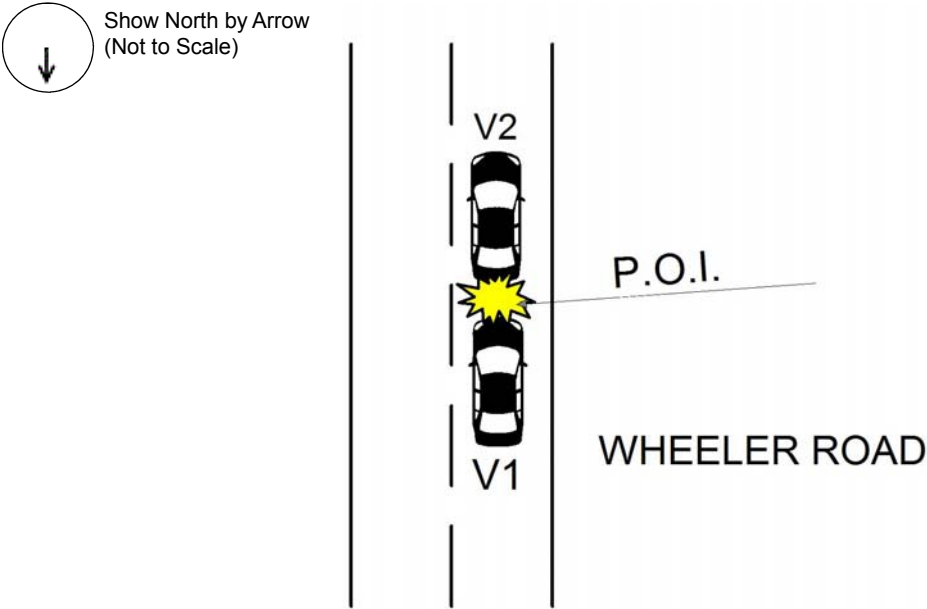


96 05	Page: 1 Of 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																									
97 01	1 Case Number I-2020-004047				10 Crash Occured On : WHEELER ROAD				S		11 Speed Limit 25		--		-		--		--		118a 02																																							
98 01	2 Police Dept. of SOUTH BRUNSWICK POLICE				Code 01		☐ At Intersection with				Road Name Dir		12 Route No		Suffix		13 Milepost		18 Speed Limit		118b --																																							
				10		☒ Feet				☒ N ☒ S		☐ E ☐ W		of : BRANDT ROAD				25		119a 25																																								
99 07	3 Station/Precinct				--		☐ Miles				14		15		16		19 Ramp		20 Route Name/ Route No.		119b --																																							
100a 01	4 Date of Crash mm dd yy 01 18 20		5 Day of Week Sat		6 Time (use 2400 hrs) 12:42		7 Municipality Code 1221		8 Total Killed --		9 Total Injured --		21 Latitude --		22 Longitude --		17 Cross Road Name/Route No. --		NB SB		120a 01																																							
100b 04	23 Veh # 1		24 Policy No 4557-79-53-92				25 NJ Ins Code 100				53 Veh # 2		54 Policy No 4550-65-27-64				55 NJ Ins Code 148				120b --																																							
101 02	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp to Emergency				☐ Hit & Run				121a 01																																							
102 03	26 Driver's First Name DAVID J MORALES JR				Initial Last Name				29 Sex M		56 Driver's First Name CANDICE A COUTINHO				Initial Last Name				59 Sex F		121b --																																							
103 03	27 Number & Street 25 STANFORD DR				State NJ				Zip 08824-1917				57 Number & Street 70 MILL RUN W				State NJ				Zip 08520-3023																																							
104 02	28 City KENDALL PARK				State NJ				Zip 08824-1917				58 City HIGHTSTOWN				State NJ				Zip 08520-3023																																							
30 Eyes 02				DL Class D				Restrictions N				Endorsements N				31 State NJ				60 Eyes 02				DL Class D				Restrictions N				Endorsements N				61 State NJ				122 01																				
105 01	32 Drivers License No M65541567108972				33 DOB mm dd yy 08 08 97				34 Expires mm yy 08 23				62 Drivers License No C68371106152912				63 DOB mm dd yy 02 20 91				64 Expires mm yy 02 22				123 08																																			
106 --	35 Owner's First Name DAVID J MORALES JR				Initial Last Name				65 Owner's First Name CANDICE A COUTINHO				Initial Last Name												124 11																																			
107 --	36 Number & Street 25 STANFORD DR				State NJ				Zip 08824-1917				66 Number & Street 70 MILL RUN W				State NJ				Zip 08520-3023				125 11																																			
108 --	38 Make HON		39 Model CIV		40 Color BK		41 Year 2018		42 Plate No. X11KGF		43 State NJ		68 Make KIA		69 Model FOR		70 Color BK		71 Year 2019		72 Plate No. S31LDP		73 State NJ		126a 26																																			
109 01	44 VIN 2HGFC2F54JH582490				45 Expires mm yy 08 21				74 VIN 3KPF34AD8KE043604				75 Expires mm yy 02 23								126b --																																							
110 --	46 Vehicle Removed To --				REILLYS COLLISION CENTER - 3901 RT 1 SOUTH Suite 1, MON																126c --																																							
111 01	☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☐ Driven				☐ Towed Disabled				☒ Towed Disabled & Impounded				126d --																																			
				☐ Left at Scene				☐ Towed Impounded				☐ Left at Scene				☐ Towed Impounded								126e 26																																				
112 --	47 Authority ☒ Owner				☐ Driver				☐ Police				77 Authority ☒ Owner				☐ Driver				☐ Police				127a 26																																			
113 --	48 Alcohol/Drug Test Given : ☒ No ☐ Yes ☐ Refused				49 Hazardous Material ☒ None ☐ On Board ☐ Spill				78 Alcohol/Drug Test Given : ☒ No ☐ Yes ☐ Refused				79 Hazardous Material ☒ None ☐ On Board ☐ Spill												127b --																																			
114 --	Type : ☐ Breath ☐ Blood ☐ Urine				Results : 0. % ☐ Pending				Hazard Class				Placard No.				Type : ☐ Breath ☐ Blood ☐ Urine				Results : 0. % ☐ Pending				Hazard Class				Placard No.				127c --																											
115 --	50 Carrier No. ☐ USDOT				☒ None				51 Commercial Vehicle Weight ☐ < 10,000 lbs				80 Carrier No. ☐ USDOT				☒ None				81 Commercial Vehicle Weight ☐ < 10,000 lbs								127d --																															
116 --	☐ MC/MX								☐ 10,001 - 26,000 lbs				☐ MC/MX								☐ 10,001 - 26,000 lbs								127e 26																															
117 03	☐ > 26,001 lbs								☐ > 26,001 lbs				☐ MC/MX								☐ > 26,001 lbs								128 26																															
52 Carrier name				--				82 Carrier name				--												129 12																																				
Number & Street				--				Number & Street				--												130 12																																				
City				--				City				--												131 06																																				
State				--				State				--												132 06																																				
Zip				--				Zip				--												133 02																																				
135 Damage To Other Property				☐ Yes (If yes, describe)				☒ No																134 01																																				
Oper 1				136 Charge 39:3-33 IMPROPER DISPLAY OF PLATES				137 Summons No --				Oper --				138 Charge --				139 Summons No --																																								
Oper --				140 Charge --				141 Summons No --				Oper --				142 Charge --				143 Summons No --																																								
83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Address of Occupants - If Deceased, Date & Time of Death								
A	01				01				01				05				22				M				--				--				01				11				04				--				--				MORALES JR, DAVID J				--			
B	02				01				01				05				28				F				--				--				01				11				04				--				--				COUTINHO, CANDICE A				--			
C	--				--				--				--				--				--				--				--				--				--				--				--				--				--				--			
D	--				--				--				--				--				--				--				--				--				--				--				--				--				--				--			

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

144 Crash Diagram



145 Crash Description

D1 STATED WHILE TRAVELING ON WHEELER ROAD NEAR BRANDT ROAD, HE SAW V2 IN THE ROADWAY, THEN CRASHED THE FRONT BUMPER OF V1 INTO THE REAR BUMPER OF V2.

D2 STATED THAT V2 WAS DISABLED IN THE ROADWAY ON WHEELER ROAD NEAR BRANDT ROAD WHEN D1 CRASHED THE FRONT BUMPER OF V1 INTO THE REAR BUMPER OF V2.

WHILE ON SCENE, NO ONE COMPLAINED OF PAIN OR REQUESTED MEDICAL ATTENTION. WHILE ON SCENE, I OBSERVED DAMAGE TO THE FRONT BUMPER OF V1 AND NO DAMAGE TO THE REAR BUMPER OF V2.

D1 IS AT FAULT FOR THE CRASH.