

|    |                                                                                                                                                                                  |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                                  |  |  |                                                  |                                                |  |  |                                         |  |  |                                                                                                                                     |  |  |      |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------|--|----------------------------------------------|--|--|--|--|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------|------------------------------------------------|--|--|-----------------------------------------|--|--|-------------------------------------------------------------------------------------------------------------------------------------|--|--|------|--|--|------|--|--|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|------------------------------------|--|--|----|--|--|--|--|--|--|------------------------------|--|--|----|--|--|--|--|--|--|-------------|--|--|----|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|------|--|--|----|--|--|
| 96 | 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                                                                                              |  |  |      |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 05 | 1 Case Number<br>20NC07090                                                                                                                                                       |  |                                |  |                                              |  |  |  |  |  | 10 Crash Occurred On: 6TH AVENUE                                                                                                                                                 |  |  |                                                  |                                                |  |  |                                         |  |  | 11 Speed Limit<br>30                                                                                                                |  |  | 0002 |  |  | 118a |  |  | 25 |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 2 Police Dept of<br>NEPTUNE CITY PD                                                                                                                                              |  |                                |  |                                              |  |  |  |  |  | Code<br>01                                                                                                                                                                       |  |  | 12 Route No. 13 Milepost<br>18 Speed Limit<br>25 |                                                |  |  |                                         |  |  |                                                                                                                                     |  |  | 118b |  |  | -    |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 3 Station/Precinct                                                                                                                                                               |  |                                |  |                                              |  |  |  |  |  | 14 15 16                                                                                                                                                                         |  |  |                                                  |                                                |  |  |                                         |  |  | 17 Cross Road Name                                                                                                                  |  |  | 119a |  |  | 16   |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 05 | 4 Date of Crash<br>mm dd yy<br>09/22/20                                                                                                                                          |  |                                |  |                                              |  |  |  |  |  | 5 Day Of Week<br>TUESDAY                                                                                                                                                         |  |  |                                                  |                                                |  |  |                                         |  |  | 6 Time (use 2400 hrs)<br>1638                                                                                                       |  |  |      |  |  |      |  |  |    | 7 Municipality Code<br>1335                                                                                                                                         |  |  |  |  |  |  |  |  |  | 8 Total Killed                     |  |  |    |  |  |  |  |  |  | 9 Total Injured              |  |  |    |  |  |  |  |  |  | 21 Latitude |  |  |    |  |  |  |  |  |  | 20 Route/Name |  |  |  |  |  |  |  |  |  | 22 Longitude |  |  |  |  |  |  |  |  |  | 119b |  |  | 56 |  |  |
| 01 | 23 Veh #<br>1                                                                                                                                                                    |  |                                |  |                                              |  |  |  |  |  | 24 Policy No.<br>HPA00002699653                                                                                                                                                  |  |  |                                                  |                                                |  |  |                                         |  |  | 25 NJ Ins. Code<br>017                                                                                                              |  |  |      |  |  |      |  |  |    | 53 Veh #<br>2                                                                                                                                                       |  |  |  |  |  |  |  |  |  | 54 Policy No.<br>F-1517382         |  |  |    |  |  |  |  |  |  | 55 NJ Ins. Code<br>008       |  |  |    |  |  |  |  |  |  | 120a        |  |  | 01 |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 04 | <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                                                                                                                                |  |  | -    |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 02 | 26 Driver's First Name<br>Initial Last Name<br>TRAVIS J HINMAN                                                                                                                   |  |                                |  |                                              |  |  |  |  |  | 29 Sex<br>M                                                                                                                                                                      |  |  |                                                  |                                                |  |  |                                         |  |  | 56 Driver's First Name<br>Initial Last Name<br>JO A YAGODA                                                                          |  |  |      |  |  |      |  |  |    | 59 Sex<br>F                                                                                                                                                         |  |  |  |  |  |  |  |  |  | 121a                               |  |  | 01 |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 27 Number & Street<br>1 PINE BROOK DR                                                                                                                                            |  |                                |  |                                              |  |  |  |  |  | 57 Number & Street<br>30 ALGONQUIN AVE                                                                                                                                           |  |  |                                                  |                                                |  |  |                                         |  |  | 121b                                                                                                                                |  |  | -    |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 28 City<br>NEPTUNE TWP                                                                                                                                                           |  |                                |  |                                              |  |  |  |  |  | State Zip<br>NJ 07753                                                                                                                                                            |  |  |                                                  |                                                |  |  |                                         |  |  | 58 City<br>OCEANPORT                                                                                                                |  |  |      |  |  |      |  |  |    | State Zip<br>NJ 07757                                                                                                                                               |  |  |  |  |  |  |  |  |  | 122                                |  |  | 01 |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 2  | 30 Eyes<br>05                                                                                                                                                                    |  |                                |  |                                              |  |  |  |  |  | DL Class<br>D                                                                                                                                                                    |  |  |                                                  |                                                |  |  |                                         |  |  | Restrictions<br>-                                                                                                                   |  |  |      |  |  |      |  |  |    | Endorsements<br>-                                                                                                                                                   |  |  |  |  |  |  |  |  |  | 31 State<br>NJ                     |  |  |    |  |  |  |  |  |  | 123                          |  |  | 06 |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | 32 Driver's License Number<br>H45077507109825                                                                                                                                    |  |                                |  |                                              |  |  |  |  |  | 33 DOB<br>mm dd yyyy<br>09/17/1982                                                                                                                                               |  |  |                                                  |                                                |  |  |                                         |  |  | 34 Expires<br>mm yy<br>09 24                                                                                                        |  |  |      |  |  |      |  |  |    | 62 Driver's License Number<br>Y01534026155435                                                                                                                       |  |  |  |  |  |  |  |  |  | 63 DOB<br>mm dd yyyy<br>05/18/1943 |  |  |    |  |  |  |  |  |  | 64 Expires<br>mm yy<br>04 21 |  |  |    |  |  |  |  |  |  | 124         |  |  | 11 |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 06 | 35 Owner's First Name<br>Initial Last Name<br>SARAH C BING                                                                                                                       |  |                                |  |                                              |  |  |  |  |  | 65 Owner's First Name<br>Initial Last Name<br>JO A YAGODA                                                                                                                        |  |  |                                                  |                                                |  |  |                                         |  |  | 125                                                                                                                                 |  |  | 08   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 36 Number & Street<br>1 PINE BROOK DR                                                                                                                                            |  |                                |  |                                              |  |  |  |  |  | 66 Number & Street<br>30 ALGONQUIN AVE                                                                                                                                           |  |  |                                                  |                                                |  |  |                                         |  |  | 126a                                                                                                                                |  |  | 26   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 37 City<br>NEPTUNE TWP                                                                                                                                                           |  |                                |  |                                              |  |  |  |  |  | State Zip<br>NJ 07753                                                                                                                                                            |  |  |                                                  |                                                |  |  |                                         |  |  | 67 City<br>OCEANPORT                                                                                                                |  |  |      |  |  |      |  |  |    | State Zip<br>NJ 07757                                                                                                                                               |  |  |  |  |  |  |  |  |  | 126b                               |  |  | -  |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 04 | 38 Make<br>TOYT                                                                                                                                                                  |  |                                |  |                                              |  |  |  |  |  | 39 Model<br>COR                                                                                                                                                                  |  |  |                                                  |                                                |  |  |                                         |  |  | 40 Color<br>BL                                                                                                                      |  |  |      |  |  |      |  |  |    | 41 Year<br>2008                                                                                                                                                     |  |  |  |  |  |  |  |  |  | 42 Plate No.<br>S16HBT             |  |  |    |  |  |  |  |  |  | 43 State<br>NJ               |  |  |    |  |  |  |  |  |  | 126c        |  |  | -  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 44 VIN<br>1NXBR32E48Z964240                                                                                                                                                      |  |                                |  |                                              |  |  |  |  |  | 45 Expires<br>09 21                                                                                                                                                              |  |  |                                                  |                                                |  |  |                                         |  |  | 74 VIN<br>1GYKNCRS5KZ264033                                                                                                         |  |  |      |  |  |      |  |  |    | 75 Expires<br>03 24                                                                                                                                                 |  |  |  |  |  |  |  |  |  | 126d                               |  |  | -  |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | 46 Vehicle Removed To                                                                                                                                                            |  |                                |  |                                              |  |  |  |  |  | 76 Vehicle Removed To                                                                                                                                                            |  |  |                                                  |                                                |  |  |                                         |  |  | 126e                                                                                                                                |  |  | 26   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded                                           |  |                                |  |                                              |  |  |  |  |  | <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded                                           |  |  |                                                  |                                                |  |  |                                         |  |  | 127a                                                                                                                                |  |  | 26   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 04 | <input type="checkbox"/> Left At Scene <input type="checkbox"/> Towed Impounded                                                                                                  |  |                                |  |                                              |  |  |  |  |  | <input type="checkbox"/> Left At Scene <input type="checkbox"/> Towed Impounded                                                                                                  |  |  |                                                  |                                                |  |  |                                         |  |  | 127b                                                                                                                                |  |  | -    |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | 47 Authority<br><input type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police                                                        |  |                                |  |                                              |  |  |  |  |  | 77 Authority<br><input checked="" type="checkbox"/> Owner <input type="checkbox"/> Driver <input type="checkbox"/> Police                                                        |  |  |                                                  |                                                |  |  |                                         |  |  | 127c                                                                                                                                |  |  | 26   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 04 | 48 Alcohol/Drug Test<br>Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused                                              |  |                                |  |                                              |  |  |  |  |  | 49 Hazardous Material<br><input checked="" 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 checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill                                  |  |  |  |  |  |  |  |  |  | 127d                               |  |  | 26 |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 01 | Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine                                                                              |  |                                |  |                                              |  |  |  |  |  | Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine                                                                              |  |  |                                                  |                                                |  |  |                                         |  |  | Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine                                 |  |  |      |  |  |      |  |  |    | Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine                                                                 |  |  |  |  |  |  |  |  |  | 127e                               |  |  | -  |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 04 | Results: 0. - % <input type="checkbox"/> Pending                                                                                                                                 |  |                                |  |                                              |  |  |  |  |  | Hazard Class Placard No.                                                                                                                                                         |  |  |                                                  |                                                |  |  |                                         |  |  | Results: 0. - % <input type="checkbox"/> Pending                                                                                    |  |  |      |  |  |      |  |  |    | Hazard Class Placard No.                                                                                                                                            |  |  |  |  |  |  |  |  |  | 127f                               |  |  | 26 |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | 50 Carrier No.<br><input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None                                                                                        |  |                                |  |                                              |  |  |  |  |  | 51 GVWR/GCWR<br><input type="checkbox"/> Weight <= 10,000 lbs<br><input type="checkbox"/> Weight 10,001-26,000 lbs<br><input type="checkbox"/> Weight >= 26,001 lbs              |  |  |                                                  |                                                |  |  |                                         |  |  | 80 Carrier No.<br><input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None                                           |  |  |      |  |  |      |  |  |    | 81 GVWR/GCWR<br><input type="checkbox"/> Weight <= 10,000 lbs<br><input type="checkbox"/> Weight 10,001-26,000 lbs<br><input type="checkbox"/> Weight >= 26,001 lbs |  |  |  |  |  |  |  |  |  | 127g                               |  |  | 26 |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | 52 Motor Carrier or Government Entity                                                                                                                                            |  |                                |  |                                              |  |  |  |  |  | 82 Motor Carrier or Government Entity                                                                                                                                            |  |  |                                                  |                                                |  |  |                                         |  |  | 127h                                                                                                                                |  |  | 26   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | Number & Street                                                                                                                                                                  |  |                                |  |                                              |  |  |  |  |  | Number & Street                                                                                                                                                                  |  |  |                                                  |                                                |  |  |                                         |  |  | 127i                                                                                                                                |  |  | 12   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | City                                                                                                                                                                             |  |                                |  |                                              |  |  |  |  |  | State Zip                                                                                                                                                                        |  |  |                                                  |                                                |  |  |                                         |  |  | City                                                                                                                                |  |  |      |  |  |      |  |  |    | State Zip                                                                                                                                                           |  |  |  |  |  |  |  |  |  | 127j                               |  |  | 12 |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | 135 Damage To Other Property <input type="checkbox"/> Yes (If Yes, describe) <input checked="" type="checkbox"/> No                                                              |  |                                |  |                                              |  |  |  |  |  | 136 Charge<br>2 39:4-144                                                                                                                                                         |  |  |                                                  |                                                |  |  |                                         |  |  | 137 Summons. No.<br>1335E20001016                                                                                                   |  |  |      |  |  |      |  |  |    | 138 Charge                                                                                                                                                          |  |  |  |  |  |  |  |  |  | 139 Summons. No.                   |  |  |    |  |  |  |  |  |  | 127k                         |  |  | 10 |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | N/A                                                                                                                                                                              |  |                                |  |                                              |  |  |  |  |  | 140 Charge                                                                                                                                                                       |  |  |                                                  |                                                |  |  |                                         |  |  | 141 Summons. No.                                                                                                                    |  |  |      |  |  |      |  |  |    | 142 Charge                                                                                                                                                          |  |  |  |  |  |  |  |  |  | 143 Summons. No.                   |  |  |    |  |  |  |  |  |  | 127l                         |  |  | 10 |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| 03 | 83 84 85 86 87 88 89 90 91 92 93 94 95                                                                                                                                           |  |                                |  |                                              |  |  |  |  |  | Names & Addresses of Occupants - If Deceased, Date & Time of Death                                                                                                               |  |  |                                                  |                                                |  |  |                                         |  |  | 127m                                                                                                                                |  |  | 10   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| A  | 1 01 01 - 38 M - - - 11 04 - -                                                                                                                                                   |  |                                |  |                                              |  |  |  |  |  | TRAVIS J HINMAN<br>1 PINE BROOK DR NEPTUNE TWP NJ 07753 - -                                                                                                                      |  |  |                                                  |                                                |  |  |                                         |  |  | 127n                                                                                                                                |  |  | 10   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| B  | 2 01 01 04 77 F 07 08 01 11 04 - -                                                                                                                                               |  |                                |  |                                              |  |  |  |  |  | JO A YAGODA<br>30 ALGONQUIN AVE OCEANPORT NJ 07757 - -                                                                                                                           |  |  |                                                  |                                                |  |  |                                         |  |  | 127o                                                                                                                                |  |  | 03   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| C  |                                                                                                                                                                                  |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                                  |  |  |                                                  |                                                |  |  |                                         |  |  | 127p                                                                                                                                |  |  | 03   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |
| D  |                                                                                                                                                                                  |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                                  |  |  |                                                  |                                                |  |  |                                         |  |  | 127q                                                                                                                                |  |  | 03   |  |  |      |  |  |    |                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                    |  |  |    |  |  |  |  |  |  |                              |  |  |    |  |  |  |  |  |  |             |  |  |    |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |      |  |  |    |  |  |

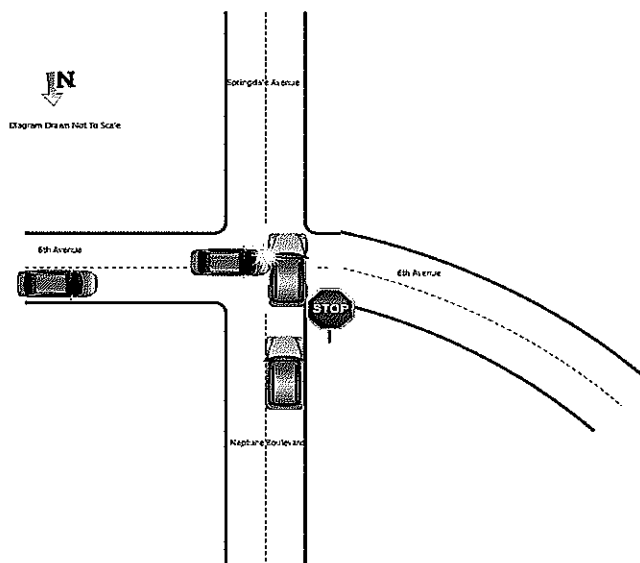
# New Jersey Police Crash Investigation Report

Police Dept: NEPTUNE CITY PD Code: 01  
 Station: - Case No: 20NC07090

(Refer to vehicle by number)

|                 | Veh<br>Occ | Pos<br>In/On | Eject | Phys<br>Cond | Age | Sex | Loc<br>Inj | Type<br>Inj | Ref<br>Med | Equip<br>Avail | Equip<br>Used | Bag<br>Dept | Hosp<br>Code | Names & Addresses of Occupants - If Deceased, Date & Time of Death |
|-----------------|------------|--------------|-------|--------------|-----|-----|------------|-------------|------------|----------------|---------------|-------------|--------------|--------------------------------------------------------------------|
| ALL<br>INVOLVED | 83         | 84           | 85    | 86           | 87  | 88  | 89         | 90          | 91         | 92             | 93            | 94          | 95           |                                                                    |
|                 |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |
|                 |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |
|                 |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |
|                 |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |
|                 |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

**Box 119B:** Driver 2 advised she did not see Vehicle 1 coming westbound as there were parked vehicles obstructing her view while she was looking east prior to entering the intersection. It should be noted that the vehicles were legally parked on the north side of 6th Avenue.

Vehicle 1 was traveling westbound on 6th Avenue. Vehicle 2 was traveling southbound on Neptune Boulevard approaching the intersection of 6th Avenue. Vehicle 2 failed to properly yield to Vehicle 1 and entered the intersection of 6th Avenue and Springdale Avenue. Due to Vehicle 2's failure to yield, Vehicle 1 could not stop to avoid a collision. As a result, Vehicle 1 struck Vehicle 2 on its front drivers side door, causing moderate damage. Vehicle 1 sustained moderate damage to its front bumper. Both vehicles were able to be driven from the scene. The driver of Vehicle 2 complained of shoulder pain but declined to be evaluated by EMS.

146 Officer's Signature  
**HUBENY, AD**

147 Badge #  
**35128**

148 Reviewer  
**NPI**

Badge #  
**124**

149 Case Status  
☐ Pending ☒ Complete