Page 1 of 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	118a	25
97	01	118b	----
98	01	119a	25
99	07	119b	----
100a	01	120a	00
100b	04	120b	----
101	02	121a	----
102	02	121b	----
103	02	122	13
104	02	123	10
105	06	124	11
106	----	125	11
107	----	126a	28
108	01	126b	----
109	01	126c	----
110	01	126d	----
111	01	126e	28
112	----	127a	26
113	----	127b	----
114	----	127c	----
115	----	127d	----
116	01	127e	26
117	----	128	26
		129	06
		130	06
		131	12
		132	12
		133	02
		134	03

1. Case Number: 20-054054
2. Police Dept. of: Elizabeth — Code: 01
3. Station/Precinct:
4. Date of Crash (mm dd yy): 04 13 20
5. Day of Week: Su (M) Tu W Th F Sa
6. Time (use 2400 hrs.): 1653
7. Municipality Code: 2004
8. Total Killed: 00
9. Total Injured: 00
10. Crash Occurred On: Fanny Street (Road Name) S (Dir) of: Jefferson Avenue
☒ At Intersection with ☐ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W (16)
11. Speed Limit: 25
12. Route No. Suffix 13. Milepost
18. Speed Limit: 25
19. Ramp ☐ To: ☐ From:
17. Cross Road Name/Route No.
☐ NB ☐ EB ☐ SB ☐ WB
21. Latitude 20 Route Name/Route No. 22. Longitude

Veh. #	Policy No.	NJ Ins. Code
1		
2	NC10152795	946

Veh. # 1	Veh. # 2
☐ Parked ☐ Ped ☐ Pedalcylist ☐ Resp. to Emergency ☐ Hit & Run	☒ Parked ☐ Ped ☐ Pedalcylist ☐ Resp. to Emergency ☐ Hit & Run
26. Driver's First Name / Initial / Last Name: Jonathan Bresil	56. Driver's First Name / Initial / Last Name: ---------- --
29. Sex: M	59. Sex: ----
27. Number & Street: 1249 Shaffer Avenue	57. Number & Street: ----------
28. City / State / Zip: Roselle, NJ 07203-2515	58. City / State / Zip: ----------
30. Eyes: 1 — DL Class: D — Restrictions: 1 — Endorsements: None	60. Eyes: ---- — DL Class: ---- — Restrictions: ---- — Endorsements: ----
31. State: NJ	61. State: ----
32. Driver's License Number: B7353 40900 01931	62. Driver's License Number: ----------
33. DOB (mm dd yy): 01 14 93	63. DOB (mm dd yy):
34. Expires (mm yy): 01/22	64. Expires (mm yy): ----
35. Owner's First Name / Initial / Last Name: ☐ Same as Driver Josline Monfort	65. Owner's First Name / Initial / Last Name: ☐ Same as Driver Paloma N Rodriguez
36. Number & Street: 1249 Shaffer Ave	66. Number & Street: 1249 Oakland Ave
37. City / State / Zip: Roselle, NJ 07203-2515	67. City / State / Zip: Union, NJ 07083-3701
38. Make: MIT — 39. Model: OUT — 40. Color: GN — 41. Year: 06 — 42. Plate No.: S91HCK — 43. State: NJ	68. Make: HYU — 69. Model: ELA — 70. Color: GY — 71. Year: 18 — 72. Plate No.: J29KHL — 73. State: NJ
44. VIN: JA4LZ31F96U025966	74. VIN: KMHD04LB0JU723732
45. Expires: 10/20	75. Expires: 08/22
46. Vehicle Removed to: Destination	76. Vehicle Removed to: Left at Scene
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left at Scene ☐ Towed Impounded	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left at Scene ☐ Towed Impounded
47. Authority: ☐ Owner ☒ Driver ☐ Police	77. Authority: ☒ Owner ☐ Driver ☐ Police
48. Alcohol Drug Test — Given: ☐ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. % ☐ Pending	78. Alcohol Drug Test — Given: ☐ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. % ☐ Pending
49. Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class — Placard No.	79. Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class — Placard No.
50. Carrier No.: ☐ USDOT ---------- ☐ None ☐ MC/MX ----------	80. Carrier No.: ☐ USDOT ---------- ☐ None ☐ MC/MX ----------
51. GVWR / GCWR (trucks & buses only): ☐ ≤ 10,000 lbs. ☐ 10,001 - 26,000 lbs. ☐ ≥ 26,001 lbs.	81. GVWR / GCWR (trucks & buses only): ☐ ≤ 10,000 lbs. ☐ 10,001 - 26,000 lbs. ☐ ≥ 26,001 lbs.
52. Motor Carrier or Government Entity: ----------	82. Motor Carrier or Government Entity: ----------
Number & Street: ----------	Number & Street: ----------
City / State / Zip: ----------	City / State / Zip: ----------

135. Damage to Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136. Charge	137. Summons No.	Oper.	138. Charge	139. Summons No.
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Oper.	140. Charge	141. Summons No.	Oper.	142. Charge	143. Summons No.
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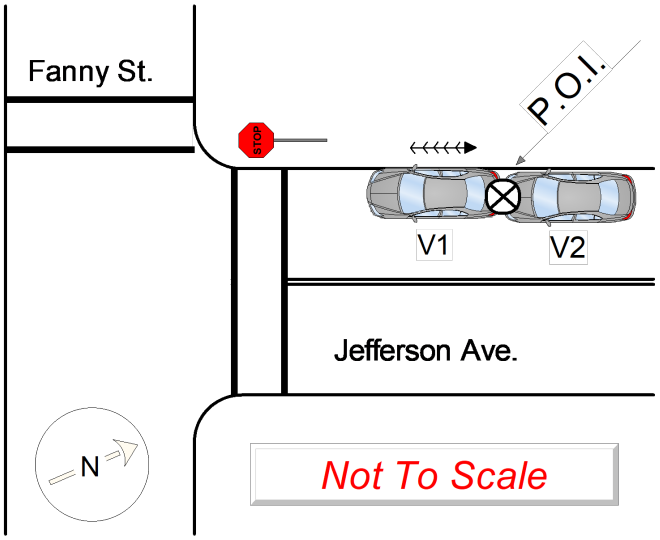
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants / If Deceased, Date & Time of Death
A	1	01	01	05	27	M	----	----	1	00	00	----	----	Bresil, Jonathan-1249 Shaffer Avenue, Roselle, NJ 07203-2515
B	----	----	----	----	----	----	----	----	----	----	----	----	----	----------
C	----	----	----	----	----	----	----	----	----	----	----	----	----	----------
D	----	----	----	----	----	----	----	----	----	----	----	----	----	----------

New Jersey Police Crash Investigation Report	Case Number 20-054054	Page 2 of 2

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

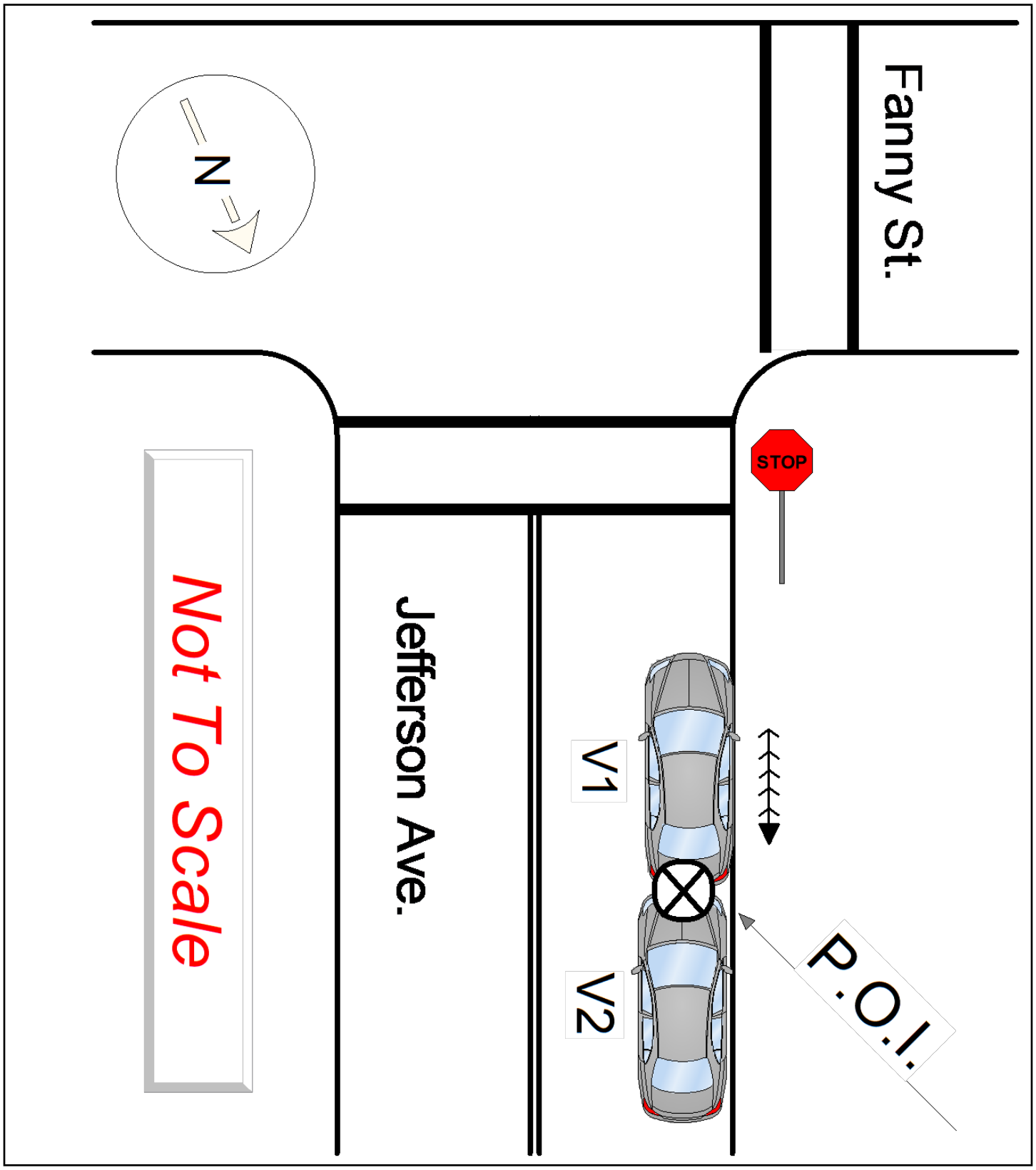


145. Crash Description/Narrative

Owner of Vehicle 2 states that the Driver of Vehicle 1 reversed into her vehicle as it was parking. Due to the Driver of Vehicle 1 being in a hurry to get to an appointment both parties exchanged information except for insurance. BWR

146. Officer's Signature	147. Badge #	148. Reviewer	Badge #	149. Case Status
Chrysler, David: PO C796	189	MNIEWINSKI		☒ Pending ☐ Complete

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. Elizabeth Station_____	Code 0 1 Case No. 20-054054



NJTR-1B (rev. 01/17)

Chrysler, David: PO C796
Officer's Signature

189
Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. Elizabeth Station_____	Code 0 1 Case No. 20-054054

Chrysler, David: PO C796
Officer's Signature

189
Badge Number

New Jersey Police Crash Investigation Report	Police Dept: Elizabeth	Code: 0 1
Motor Vehicle Crash Description	Station:	Case No.: 20-054054

(Refer to vehicle by number)

Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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Chrysler, David: PO C796 — Officer's Signature

189 — Badge Number