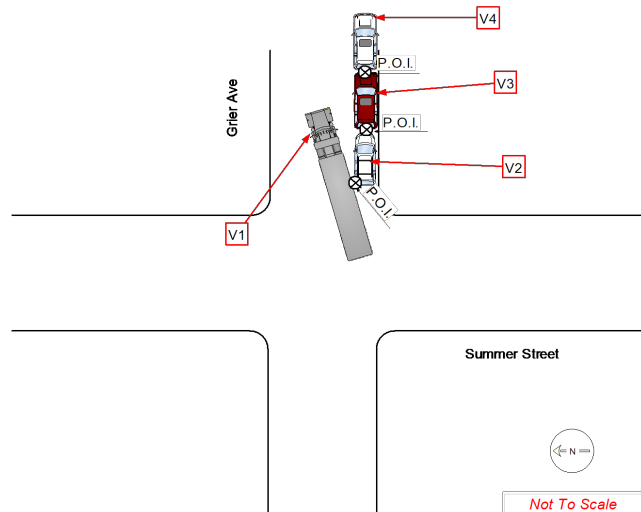


96	05	Page 1 of 2		☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report	118a	49						
97	01	1. Case Number		19-172217										10. Crash Occurred On:		Grier Avenue		11. Speed Limit		20		118b	----		
98	06	2. Police Dept. of		Code		Elizabeth										01		12. Route No.		Suffix		13. Milepost		119a	13
99	07	3. Station/Precinct		10										14		15		16		18. Speed Limit		20		119b	----
100a	01	4. Date of Crash		5. Day of Week		6. Time (use 2400 hrs.)		7. Municipality Code		8. Total Killed		9. Total Injured		19. To: 17. Cross Road Name/Route No.		20. Route Name/Route No.		22. Longitude		120a	01				
100b	04	23. Veh. #		24. Policy No.		25. NJ Ins. Code		53. Veh. #		54. Policy No.		55. NJ Ins. Code		21. Latitude		22. Longitude				120b					
101	02	26. Driver's First Name		Initial		Last Name		29. Sex		56. Driver's First Name		Initial		Last Name		59. Sex				121a	00				
102	01	Shlomo				Polishuk		M		57. Number & Street										121b					
103	01	5585 Park RD								58. City										122	02				
104	04	FT Lauderdale, FL 33312								59. City										123	10				
105	06	32. Driver's License Number		33. DOB		34. Expires		62. Driver's License Number		63. DOB		64. Expires		30. Eyes		DL Class		Restrictions		Endorsements		31. State			
106	01	P422-780-63-288-0		08/08/63		08/27								---		A		NONE		NON		FL			
107	---	35. Owner's First Name		Initial		Last Name		65. Owner's First Name		Initial		Last Name		36. Number & Street											
108	25	Wilfredo				Jimenez		66. Number & Street						609 Green St											
109	02	VOLVO		NO-DATA		NO-15		AG68021		PA		68. Make		69. Model		70. Color		71. Year		72. Plate No.		73. State			
110	02	4V4NC9EH2FN185409		05/20		57. VIN		58. VIN		59. VIN		60. VIN		61. VIN		62. VIN		63. VIN		64. VIN		65. VIN			
111	01	Destination		Towed by highway towing.		66. Vehicle Removed to:		67. Vehicle Removed to:		68. Vehicle Removed to:		69. Vehicle Removed to:		70. Vehicle Removed to:		71. Vehicle Removed to:		72. Vehicle Removed to:		73. Vehicle Removed to:		74. Vehicle Removed to:			
112	---	☒ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded		☐ Driven		☒ Towed Disabled		☐ Towed Disabled & Impounded		75. Authority		76. Authority		77. Authority		78. Authority		79. Authority			
113	---	47. Authority		48. Authority		49. Authority		50. Authority		51. Authority		52. Authority		53. Authority		54. Authority		55. Authority		56. Authority		57. Authority			
114	---	48. Alcohol Drug Test		49. Alcohol Drug Test		50. Alcohol Drug Test		51. Alcohol Drug Test		52. Alcohol Drug Test		53. Alcohol Drug Test		54. Alcohol Drug Test		55. Alcohol Drug Test		56. Alcohol Drug Test		57. Alcohol Drug Test		58. Alcohol Drug Test			
115	---	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine			
116	02	Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %		Results: 0.00 %			
117	02	50. Carrier No.		51. GVWR / GCWR (trucks & buses only)		52. Carrier No.		53. GVWR / GCWR (trucks & buses only)		54. Carrier No.		55. GVWR / GCWR (trucks & buses only)		56. Carrier No.		57. GVWR / GCWR (trucks & buses only)		58. Carrier No.		59. GVWR / GCWR (trucks & buses only)		60. Carrier No.			
118	---	United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company		United Financial casualty company			
119	---	P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739		P. O. Box 94739			
120	---	Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101		Cleveland, OH 44101			
121	---	135. Damage to Other Property		136. Damage to Other Property		137. Damage to Other Property		138. Damage to Other Property		139. Damage to Other Property		140. Damage to Other Property		141. Damage to Other Property		142. Damage to Other Property		143. Damage to Other Property		144. Damage to Other Property		145. Damage to Other Property			
122	---	Oper.		136. Charge		137. Summons No.		Oper.		138. Charge		139. Summons No.		Oper.		140. Charge		141. Summons No.		Oper.		142. Charge			
123	---	Oper.		140. Charge		141. Summons No.		Oper.		142. Charge		143. Summons No.		Oper.		144. Charge		145. Summons No.		Oper.		146. Charge			
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New Jersey Police Crash Investigation Report												Case Number 19-172217			Page <u>2</u> of <u>2</u>	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death		
E	---	---	---	---	---	---	---	---	---	---	---	---	---	-----		
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145. Crash Description/Narrative

Driver of V1 states that he was driving northbound on Summer Street when at this point he made a right turn eastbound on Grier Ave when the attached trailer on his tractor trailer truck struck the rear driver side of V2 (Parked in front of 601 Grier ave), NJ Reg. M57HZN. The rear of V2 has disabling damage to the wheel and body of vehicle. Right passenger side of trailer for V1 contains no visible damage from impact.

Driver of V1 refused medical attention at this time.

V1 further information:

BRA USA Transport, LLC

USDOT 3136613

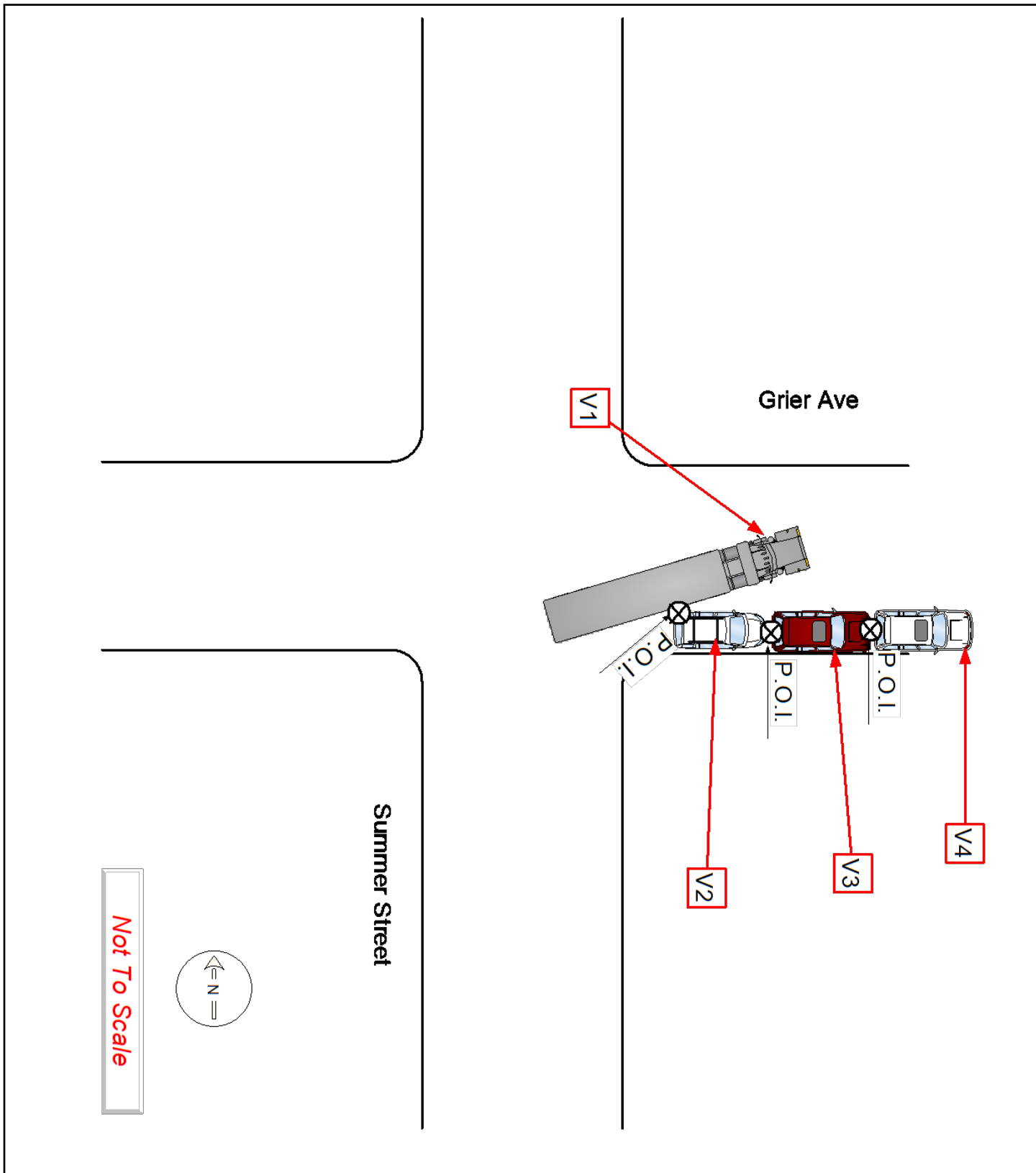
MC 96367

KYU 621990

Trailer attached contained a Oklahoma Registration 2940JM

146. Officer's Signature Castro, Michael: PO C926	147. Badge # 287	148. Reviewer	Badge #	149. Case Status ☐ Pending ☒ Complete
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New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept. <u>Elizabeth</u>	Code <u>0 1</u>
	Station _____	Case No. <u>19-172217</u>



[illegible]

New Jersey Police Crash Investigation Report	Police Dept: <u>Elizabeth</u>	Code: <u>01</u>
Motor Vehicle Crash Description	Station: _____	Case No.: <u>19-172217</u>

[illegible]