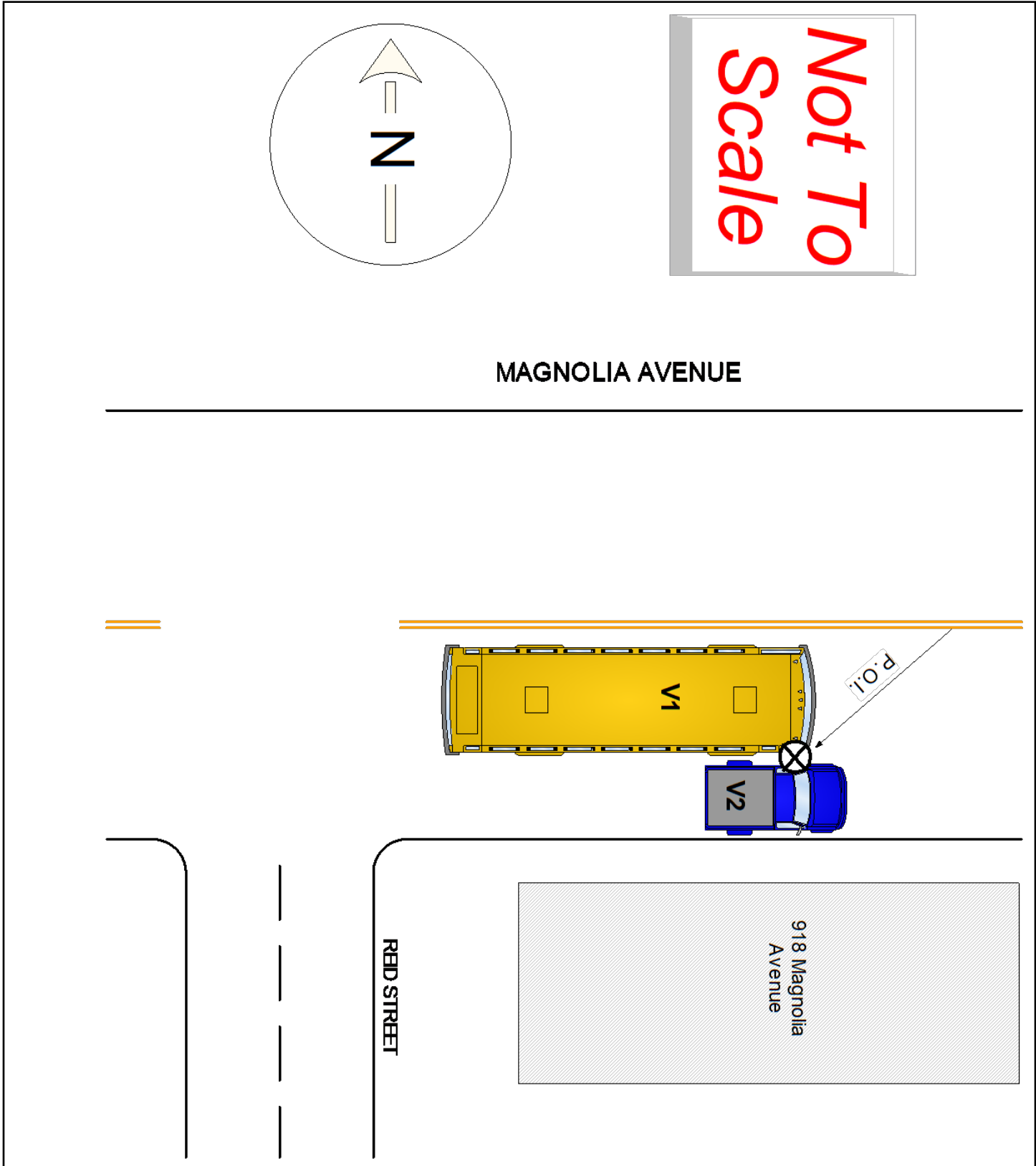


96	04	Page 1 of 2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report	118a												
97	01	1. Case Number		19-175319										10. Crash Occurred On:		918 Magnolia Avenue		11. Speed Limit		25		12. Route No.		13. Milepost		18. Speed Limit		118b	
98	01	2. Police Dept. of		Elizabeth		Code		01		☐ At Intersection with		☐ N ☐ E		of:		19. To: 17. Cross Road Name/Route No.		☐ NB ☐ EB		☐ SB ☐ WB		21. Latitude		22. Longitude		119a			
99	07	3. Station/Precinct								☐ Feet		☐ S ☐ W				19. From:										119b			
100a	01	4. Date of Crash		mm dd yy		11 25 19		5. Day of Week		Su (M) Tu W Th F Sa		6. Time (use 2400 hrs.)		14 56		7. Municipality Code		2004		8. Total Killed		00		9. Total Injured		00		120a	
100b	05	23. Veh. #		1		24. Policy No.		SELF INSURED ID: PK1035319		25. NJ Ins. Code		53. Veh. #		2		54. Policy No.				55. NJ Ins. Code								120b	
101	02	26. Driver's First Name		Initial		Last Name		Joseph		Jean		29. Sex		M		56. Driver's First Name		Initial		Last Name				59. Sex				121a	
102	01	27. Number & Street		47 Elm Street Apt. 309								57. Number & Street																121b	
103	01	28. City		Elizabeth NJ		State		Zip				58. City				State		Zip										122	
104	02	30. Eyes		DL Class		Restrictions		Endorsements		31. State		60. Eyes		DL Class		Restrictions		Endorsements		61. State								01	
105	02	32. Driver's License Number		J2030		41071		12541		33. DOB		mm dd yy		12 06 54		34. Expires		mm dd yy		12 22								10	
106	01	35. Owner's First Name		Initial		Last Name		Elizabeth B O E *		*		65. Owner's First Name		Initial		Last Name		Mina		Y		Mosaad						11	
107	---	36. Number & Street		500 N Broad St								66. Number & Street		1077 North Ave Apt 173														11	
108	31	37. City		Elizabeth, NJ 07207		State		Zip				67. City		Elizabeth, NJ 07201-4619		State		Zip										28	
109	01	38. Make		THO		39. Model		121		40. Color		YEL		41. Year		07		42. Plate No.		S1S389		43. State		NJ				---	
110	03	44. VIN		1T88P4E1871290031		45. Expires		08/20		74. VIN		1C6RR7KT1FS615979		75. Expires		11/20												---	
111	01	46. Vehicle Removed to:		Original destination		76. Vehicle Removed to:		Left at scene																				---	
112	09	☒ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded		☐ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded																28	
113	---	47. Authority		☐ Owner		☒ Driver		☐ Police		77. Authority		☐ Owner		☐ Driver		☐ Police												26	
114	02	48. Alcohol Drug Test		Given: ☒ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0. % ☐ Pending		49. Hazardous Material		☐ None ☐ On Board ☐ Spill		78. Alcohol Drug Test		Given: ☒ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0. % ☐ Pending		79. Hazardous Material		☐ None ☐ On Board ☐ Spill				---	
115	---	50. Carrier No.		☐ USDOT		☐ MC/MX		☐ None		51. GVWR / GCWR (trucks & buses only)		☐ ≤ 10,000 lbs.		☐ 10,001 - 26,000 lbs.		☐ ≥ 26,001 lbs.		80. Carrier No.		☐ USDOT		☐ MC/MX		☐ None				26	
116	02	52. Motor Carrier or Government Entity				82. Motor Carrier or Government Entity																						28	
117	---	Number & Street				Number & Street																						01	
		City				City																						01	
		State				State																						09	
		Zip				Zip																						09	
		135. Damage to Other Property		☐ Yes (If Yes, describe)		☒ No																						02	
		Oper.		136. Charge		137. Summons No.		Oper.		138. Charge		139. Summons No.		Oper.		140. Charge		141. Summons No.		Oper.		142. Charge		143. Summons No.				02	
		Oper.		140. Charge		141. Summons No.		Oper.		142. Charge		143. Summons No.		Oper.		140. Charge		141. Summons No.		Oper.		142. Charge		143. Summons No.				02	
		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		64		M		---		1		11		11		---		---		Jean, Joseph-47 Elm Street Apt. 309, Elizabeth NJ	
		B		---		---		---		---		---		---		---		---		---		---		---		---		---	
		C		---		---		---		---		---		---		---		---		---		---		---		---		---	
		D		---		---		---		---		---		---		---		---		---		---		---		---		---	

New Jersey Police Crash Investigation Report	Police Dept. <u>Elizabeth</u>	Code <u>01</u>
	Station _____	Case No. <u>19-175319</u>

Motor Vehicle Crash Description



[illegible]

New Jersey Police Crash Investigation Report	Police Dept: <u>Elizabeth</u>	Code: <u>01</u>
Motor Vehicle Crash Description	Station: _____	Case No.: <u>19-175319</u>

[illegible]