

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																			
05	1 Case Number		17-65405		10 Crash Occurred On: ROUTE 9										11 Speed Limit		50				118a																																	
97	2 Police Dept of		TOMS RIVER POLICE DEPT 01		12 Route No.										Suffix		13 Milepost		45		118b																																	
01	3 Station/Precinct		DISTRICT 1		14 200										15		16				119a																																	
07	4 Date of Crash		11/21/17		5 Day Of Week		TUESDAY		6 Time (use 2400 hrs)		0027		7 Municipality Code		1507		8 Total Killed		--		9 Total Injured		--		21 Latitude		40.006830		22 Longitude		-74.210540		119b																					
02	23 Veh #		1		24 Policy No.		AOJ-238-229483-40 7 9		25 NJ Ins. Code		370		53 Veh #		54 Policy No.		55 NJ Ins. Code																120a																					
100a	101		102		103		104		105		106		107		108		109		110		111		112		113		114		115		116		117		118b																			
04	1		Parked		Ped		Pedalcyclist		Resp To Emergency		Hit & Run		56 Driver's First Name		Initial		Last Name		57 Number & Street		58 City		State		Zip		59 Sex		121a		121b		122																					
01	THOMAS		K		KAKRABA		-		M		56 Driver's First Name		Initial		Last Name		57 Number & Street		58 City		State		Zip		59 Sex		121a		121b		122																							
02	578 ADDRESS TER												60 Eyes		DL Class		Restrictions		Endorsements		61 State												123																					
01	UNION BEACH												60 Eyes		DL Class		Restrictions		Endorsements		61 State												123																					
1	NJ												62 Driver's License Number		K02257407207781		33 DOB		07/20/1978		34 Expires		07		21		63 DOB		mm		dd		yyyy		64 Expires		mm		yy		65													
	35 Owner's First Name		Initial		Last Name		DOROTHY		KAKRABA		65 Owner's First Name		Initial		Last Name		66 Number & Street		67 City		State		Zip		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		05																	
	578 ADDRESS TER										66 Number & Street						67 City		State		Zip		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		05																			
	UNION BEACH										67 City						68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State								05																			
	NJ										68 Make		SNA		WT		2013		C85CSC		NJ		69 Model				70 Color		71 Year		72 Plate No.		73 State		05																			
	5TDZK3DC6DS363042										74 VIN						75 Expires								76 Vehicle Removed To										56																			
	11										76 Vehicle Removed To						77 Authority		Owner		Driver		Police		78 Alcohol/Drug Test		Given: No		Yes		Refused		79 Hazardous Material		None		On Board		Spill		62													
	46 Vehicle Removed To										77 Authority		Owner		Driver		Police		78 Alcohol/Drug Test		Given: No		Yes		Refused		79 Hazardous Material		None		On Board		Spill		62																			
	47 Authority										78 Alcohol/Drug Test		Given: No		Yes		Refused		79 Hazardous Material		None		On Board		Spill		80 Carrier No.		USDOT		MC/MX		81 GVWR/GCWR		Weight <= 10,000 lbs		Weight 10,001-26,000 lbs		Weight >= 26,001 lbs		62													
	48 Alcohol/Drug Test										80 Carrier No.		USDOT		MC/MX		81 GVWR/GCWR		Weight <= 10,000 lbs		Weight 10,001-26,000 lbs		Weight >= 26,001 lbs		82 Motor Carrier or Government Entity										56																			
	49 Hazardous Material										82 Motor Carrier or Government Entity														83		84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128	
	50 Carrier No.										83		84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128															
	51 GVWR/GCWR										84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																	
	52 Motor Carrier or Government Entity										85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																			
	53 GVWR/GCWR										86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																					
	54 GVWR/GCWR										87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																							
	55 GVWR/GCWR										88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																									
	56 GVWR/GCWR										89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																											
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	81 GVWR/GCWR										114		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	82 GVWR/GCWR										115		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	83 GVWR/GCWR										116		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	84 GVWR/GCWR										117		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
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	86 GVWR/GCWR										119		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
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	88 GVWR/GCWR										121		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	89 GVWR/GCWR										122		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	90 GVWR/GCWR										123		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	91 GVWR/GCWR										124		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
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	100 GVWR/GCWR										133		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	101 GVWR/GCWR										134		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	102 GVWR/GCWR										135		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	103 GVWR/GCWR										136		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	104 GVWR/GCWR										137		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
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	106 GVWR/GCWR										139		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	107 GVWR/GCWR										140		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	108 GVWR/GCWR										141		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	109 GVWR/GCWR										142		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
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	111 GVWR/GCWR										144		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	112 GVWR/GCWR										145		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	113 GVWR/GCWR										146		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	114 GVWR/GCWR										147		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	115 GVWR/GCWR										148		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	116 GVWR/GCWR										149		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
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	118 GVWR/GCWR										151		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	119 GVWR/GCWR										152		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	120 GVWR/GCWR										153		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	121 GVWR/GCWR										154		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
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	123 GVWR/GCWR										156		Names & Addresses of Occupants - If Deceased, Date & Time of Death		128																																							
	124 GVWR/GCWR										157		Names & Addresses of Occupants - If Deceased, Date & Time of Death</																																									

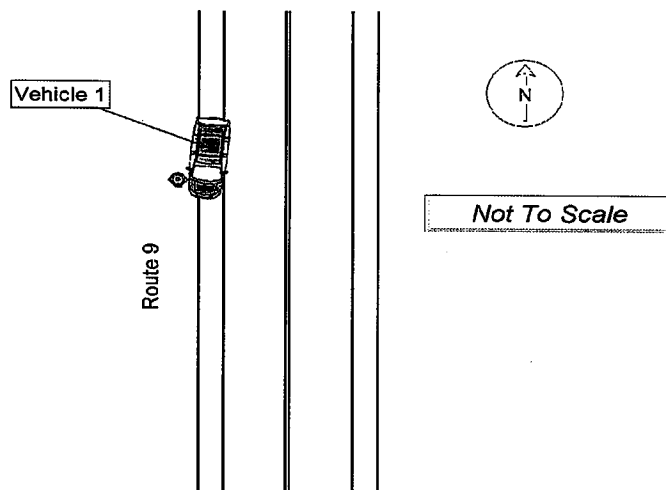
New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**Station: **DISTRICT 1** Case No: **17-65405**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that while traveling south on Route 9, an unknown vehicle also traveling south, attempted to pass him on the left. Driver 1 stated that as he attempted to move over to the right let the vehicle pass him, he ran off the side of the road. Vehicle 1 subsequently hit a curb and a side swiped a fire hydrant.

146 Officer's Signature

KIMBLE, M.

147 Badge #

0414

148 Reviewer

DJS

Badge #

260

149 Case Status

☐ Pending ☒ Complete