

|    |                                                                                                     |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  |                                                                                                     |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|----|-----------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------|--|----------------------------------------|--|------------------------------------------|--|--------------------------------------------|--|-----------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------|--|------------------------------------------|--|------------------------------------------|--|-----------------|---|------------------------|------|-----------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------|--|--------------------------------------------|--|---------------------------------|--|-----|--|------------------|--|-----------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------|--|-----|--|--|--|-----|--|----------|--|------|--|--|--|--|--|--|--|---|--|------|
| 96 | Page 1 of 4                                                                                         |  | <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   |  | 118a            |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 05 | 1. Case Number                                                                                      |  | 2018-00018400                                                                                               |  |                                                     |  |                                        |  |                                          |  |                                            |  | 10. Crash Occurred On: RT 88                                                                        |  | 11. Speed Limit                                                                                           |  | 40                                       |  | 12. Route No. Suffix                     |  | 13. Milepost    |   | 02                     |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 01 | 2. Police Dept. of                                                                                  |  | Brick Police                                                                                                |  |                                                     |  |                                        |  |                                          |  |                                            |  | Code                                                                                                |  | 01                                                                                                        |  | Road Name                                |  | Dir                                      |  | 18. Speed Limit |   | 04                     |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 01 | 3. Station/Precinct                                                                                 |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | 100                                                                                                 |  | At Intersection with                                                                                      |  | <input checked="" type="checkbox"/> Feet |  | <input type="checkbox"/> Miles           |  | of: FORT STREET |   | 25                     |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 02 | 4. Date of Crash                                                                                    |  | mm                                                                                                          |  | dd                                                  |  | yy                                     |  | 5. Day of Week                           |  | Su                                         |  | Mo                                                                                                  |  | Tu                                                                                                        |  | W                                        |  | 16. Total Killed                         |  | 2               | 5 | 119b                   |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 01 | 03                                                                                                  |  | 26                                                                                                          |  | 18                                                  |  |                                        |  | Th                                       |  | F                                          |  | Sa                                                                                                  |  | 09                                                                                                        |  | 49                                       |  | 15                                       |  | 21. Latitude    |   | 22. Longitude          | 120a |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 01 | 23. Veh. #                                                                                          |  | 24. Policy No.                                                                                              |  |                                                     |  |                                        |  |                                          |  |                                            |  | 25. NJ Ins. Code                                                                                    |  | 53. Veh. #                                                                                                |  | 54. Policy No.                           |  |                                          |  |                 |   |                        |      |                                                                                                     |  | 55. NJ Ins. Code                                                                                            |  | 01                                         |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 04 | 01                                                                                                  |  | 4298832702                                                                                                  |  |                                                     |  |                                        |  |                                          |  |                                            |  | 148                                                                                                 |  | 02                                                                                                        |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  | 120b                                       |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 02 | 26. Driver's First Name                                                                             |  | Initial                                                                                                     |  |                                                     |  |                                        |  |                                          |  |                                            |  | Last Name                                                                                           |  |                                                                                                           |  |                                          |  |                                          |  |                 |   | 29. Sex                |      | 56. Driver's First Name                                                                             |  | Initial                                                                                                     |  |                                            |  |                                 |  |     |  |                  |  | Last Name                                                                                           |  |                                                                                                           |  |     |  |  |  |     |  | 59. Sex  |  | 121a |  |  |  |  |  |  |  |   |  |      |
| 01 | DOLORES                                                                                             |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | MONICA                                                                                              |  |                                                                                                           |  |                                          |  |                                          |  |                 |   | F                      |      | DAVID                                                                                               |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | L                                                                                                   |  |                                                                                                           |  |     |  |  |  |     |  | HALLIDAY |  |      |  |  |  |  |  |  |  | M |  | 121b |
| 01 | 27. Number & Street                                                                                 |  | 28 COOLIDGE DR                                                                                              |  |                                                     |  |                                        |  |                                          |  |                                            |  | State                                                                                               |  | Zip                                                                                                       |  | 57. Number & Street                      |  | 201 MCGUIRE BLVD                         |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  | State                                      |  | Zip                             |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 01 | BRICK TOWNSHIP                                                                                      |  | NJ                                                                                                          |  |                                                     |  |                                        |  |                                          |  |                                            |  | 08724                                                                                               |  | 58. City                                                                                                  |  | BRICK TOWNSHIP                           |  |                                          |  |                 |   |                        |      |                                                                                                     |  | NJ                                                                                                          |  | 08724                                      |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 02 | 30. Eyes                                                                                            |  | DL Class                                                                                                    |  | Restrictions                                        |  | Endorsements                           |  | 31. State                                |  | 60. Eyes                                   |  | DL Class                                                                                            |  | Restrictions                                                                                              |  | Endorsements                             |  | 61. State                                |  | 122             |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | 05                                                                                                  |  | D                                                                                                           |  | 0                                                   |  |                                        |  | NJ                                       |  | 04                                         |  | D                                                                                                   |  |                                                                                                           |  |                                          |  | NJ                                       |  | 03              |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 03 | 32. Driver's License Number                                                                         |  | 33. DOB                                                                                                     |  |                                                     |  |                                        |  |                                          |  |                                            |  | 34. Expires                                                                                         |  | 62. Driver's License Number                                                                               |  | 63. DOB                                  |  |                                          |  |                 |   |                        |      |                                                                                                     |  | 64. Expires                                                                                                 |  | 01                                         |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | M6407                                                                                               |  | 17100                                                                                                       |  | 59495                                               |  | 090449                                 |  | 0719                                     |  | H0297                                      |  | 15673                                                                                               |  | 01614                                                                                                     |  | 012161                                   |  | 0222                                     |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | 35. Owner's First Name                                                                              |  | Initial                                                                                                     |  |                                                     |  |                                        |  |                                          |  |                                            |  | Last Name                                                                                           |  |                                                                                                           |  |                                          |  |                                          |  |                 |   | 65. Owner's First Name |      | Initial                                                                                             |  |                                                                                                             |  |                                            |  |                                 |  |     |  | Last Name        |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  | 124 |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | <input checked="" type="checkbox"/> Same as Driver                                                  |  | DOLORES MONICA                                                                                              |  |                                                     |  |                                        |  |                                          |  |                                            |  | <input type="checkbox"/> Same as Driver                                                             |  | PINNACLE BANK                                                                                             |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | 11                                                                                                  |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | 36. Number & Street                                                                                 |  | 28 COOLIDGE DR                                                                                              |  |                                                     |  |                                        |  |                                          |  |                                            |  | State                                                                                               |  | Zip                                                                                                       |  | 66. Number & Street                      |  | 150 3RD AVENUE SOUTH                     |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  | State                                      |  | Zip                             |  | 125 |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | BRICK TOWNSHIP                                                                                      |  | NJ                                                                                                          |  |                                                     |  |                                        |  |                                          |  |                                            |  | 08724                                                                                               |  | 67. City                                                                                                  |  | NASHVILLE                                |  |                                          |  |                 |   |                        |      |                                                                                                     |  | TN                                                                                                          |  | 37201                                      |  | 04                              |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 04 | 38. Make                                                                                            |  | 39. Model                                                                                                   |  | 40. Color                                           |  | 41. Year                               |  | 42. Plate No.                            |  | 43. State                                  |  | 68. Make                                                                                            |  | 69. Model                                                                                                 |  | 70. Color                                |  | 71. Year                                 |  | 72. Plate No.   |   | 73. State              |      | 126a                                                                                                |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 30 | JEEP                                                                                                |  | LIBERTY                                                                                                     |  | GY                                                  |  | 2011                                   |  | UUR41P                                   |  | NJ                                         |  | Ford                                                                                                |  | Transit                                                                                                   |  | WT                                       |  | 2016                                     |  | XESS63          |   | NJ                     |      | 26                                                                                                  |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 01 | 44. VIN                                                                                             |  | 45. Expires                                                                                                 |  |                                                     |  |                                        |  |                                          |  |                                            |  | 74. VIN                                                                                             |  | 75. Expires                                                                                               |  |                                          |  |                                          |  |                 |   |                        |      | 126b                                                                                                |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | 1J4PN2GK1B W571378                                                                                  |  | 05/18                                                                                                       |  | 1FDRS6PM4GKA22445                                   |  | 11/18                                  |  |                                          |  |                                            |  |                                                                                                     |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      | 126c                                                                                                |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 02 | 46. Vehicle Removed to:                                                                             |  | Legacy Towing                                                                                               |  |                                                     |  |                                        |  |                                          |  |                                            |  | 76. Vehicle Removed to:                                                                             |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      | 126d                                                                                                |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | <input type="checkbox"/> Driven                                                                     |  | <input checked="" type="checkbox"/> Towed Disabled                                                          |  | <input type="checkbox"/> Towed Disabled & Impounded |  | <input type="checkbox"/> Left at Scene |  | <input type="checkbox"/> Towed Impounded |  | <input checked="" type="checkbox"/> Driven |  | <input type="checkbox"/> Towed Disabled                                                             |  | <input type="checkbox"/> Towed Disabled & Impounded                                                       |  | <input type="checkbox"/> Left at Scene   |  | <input type="checkbox"/> Towed Impounded |  |                 |   | 126e                   |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 12 | 47. Authority                                                                                       |  | <input type="checkbox"/> Owner                                                                              |  |                                                     |  |                                        |  |                                          |  |                                            |  | <input checked="" type="checkbox"/> Driver                                                          |  | <input type="checkbox"/> Police                                                                           |  | 77. Authority                            |  | <input type="checkbox"/> Owner           |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  | <input checked="" type="checkbox"/> Driver |  | <input type="checkbox"/> Police |  | 26  |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | 48. Alcohol Drug Test                                                                               |  | Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused |  |                                                     |  |                                        |  |                                          |  |                                            |  | 49. Hazardous Material                                                                              |  | <input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill |  |                                          |  |                                          |  |                 |   |                        |      | 78. Alcohol Drug Test                                                                               |  | Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused |  |                                            |  |                                 |  |     |  |                  |  | 79. Hazardous Material                                                                              |  | <input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill |  |     |  |  |  |     |  |          |  | 127a |  |  |  |  |  |  |  |   |  |      |
|    | 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 |  |                                                                                                           |  |     |  |  |  |     |  |          |  | 127b |  |  |  |  |  |  |  |   |  |      |
|    | Results: 0.00 % <input type="checkbox"/> Pending                                                    |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | Hazard Class                                                                                        |  | Placard No.                                                                                               |  |                                          |  |                                          |  |                 |   |                        |      | Results: 0.00 % <input type="checkbox"/> Pending                                                    |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | Hazard Class                                                                                        |  | Placard No.                                                                                               |  |     |  |  |  |     |  |          |  | 127c |  |  |  |  |  |  |  |   |  |      |
| 03 | 50. Carrier No.                                                                                     |  | <input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None                                     |  |                                                     |  |                                        |  |                                          |  |                                            |  | 51. GVWR / GCWR (trucks & buses only)                                                               |  | <input type="checkbox"/> ≤ 10,000 lbs.                                                                    |  |                                          |  |                                          |  |                 |   |                        |      | 80. Carrier No.                                                                                     |  | <input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None                                     |  |                                            |  |                                 |  |     |  |                  |  | 81. GVWR / GCWR (trucks & buses only)                                                               |  | <input type="checkbox"/> ≤ 10,000 lbs.                                                                    |  |     |  |  |  |     |  |          |  | 127d |  |  |  |  |  |  |  |   |  |      |
|    | <input type="checkbox"/> MC/MX                                                                      |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | <input type="checkbox"/> ≤ 10,001 - 26,000 lbs.                                                     |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      | <input type="checkbox"/> MC/MX                                                                      |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | <input type="checkbox"/> ≤ 10,001 - 26,000 lbs.                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  | 127e |  |  |  |  |  |  |  |   |  |      |
| 04 | <input type="checkbox"/> ≥ 26,001 lbs.                                                              |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | <input type="checkbox"/> ≥ 26,001 lbs.                                                              |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      | <input type="checkbox"/> ≥ 26,001 lbs.                                                              |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | <input type="checkbox"/> ≥ 26,001 lbs.                                                              |  |                                                                                                           |  |     |  |  |  |     |  |          |  | 26   |  |  |  |  |  |  |  |   |  |      |
|    | 52. Motor Carrier or Government Entity                                                              |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | 82. Motor Carrier or Government Entity                                                              |  | MERIDAN HEALTH                                                                                            |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | 128                                                                                                 |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | Number & Street                                                                                     |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | Number & Street                                                                                     |  | 425 JACK MARTIN BLVD                                                                                      |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | 12                                                                                                  |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | City                                                                                                |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | City                                                                                                |  | BRICK TOWNSHIP                                                                                            |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  | NJ                                                                                                  |  | 08724                                                                                                     |  | 12  |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | 135. Damage to Other Property                                                                       |  | <input type="checkbox"/> Yes (If Yes, describe)                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  | <input checked="" type="checkbox"/> No                                                              |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  | 131 |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | Oper.                                                                                               |  | 136. Charge                                                                                                 |  |                                                     |  |                                        |  |                                          |  |                                            |  | 137. Summons No.                                                                                    |  |                                                                                                           |  |                                          |  |                                          |  |                 |   | Oper.                  |      | 138. Charge                                                                                         |  |                                                                                                             |  |                                            |  |                                 |  |     |  | 139. Summons No. |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  | 133 |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| 01 |                                                                                                     |  | 39:4-97                                                                                                     |  |                                                     |  |                                        |  |                                          |  |                                            |  | E18001394                                                                                           |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  | 04  |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | Oper.                                                                                               |  | 140. Charge                                                                                                 |  |                                                     |  |                                        |  |                                          |  |                                            |  | 141. Summons No.                                                                                    |  |                                                                                                           |  |                                          |  |                                          |  |                 |   | Oper.                  |      | 142. Charge                                                                                         |  |                                                                                                             |  |                                            |  |                                 |  |     |  | 143. Summons No. |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  | 134 |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    |                                                                                                     |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  |                                                                                                     |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  | 03  |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
|    | 83                                                                                                  |  | 84                                                                                                          |  | 85                                                  |  | 86                                     |  | 87                                       |  | 88                                         |  | 89                                                                                                  |  | 90                                                                                                        |  | 91                                       |  | 92                                       |  | 93              |   | 94                     |      | 95                                                                                                  |  | Names & Addresses of Occupants<br>If Deceased, Date & Time of Death                                         |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| A  | 01                                                                                                  |  | 01                                                                                                          |  | 01                                                  |  | —                                      |  | 68                                       |  | F                                          |  | —                                                                                                   |  | —                                                                                                         |  | —                                        |  | 11                                       |  | 04              |   | —                      |      | —                                                                                                   |  | DOLORES MONICA<br>28 COOLIDGE DR BRICK TOWNSHIP NJ 08724                                                    |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| B  | 01                                                                                                  |  | 03                                                                                                          |  | 01                                                  |  | —                                      |  | 71                                       |  | F                                          |  | —                                                                                                   |  | —                                                                                                         |  | —                                        |  | 11                                       |  | 04              |   | —                      |      | —                                                                                                   |  | EVA CARLONI<br>27 COOLIDGE DR BRICK TOWNSHIP NJ 08724                                                       |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| C  | 02                                                                                                  |  | 01                                                                                                          |  | 01                                                  |  | —                                      |  | 57                                       |  | M                                          |  | —                                                                                                   |  | —                                                                                                         |  | —                                        |  | 11                                       |  | 04              |   | —                      |      | —                                                                                                   |  | DAVID LAWRENCE HALLIDAY<br>201 MCGUIRE BLVD BRICK TOWNSHIP NJ 08724                                         |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |
| D  |                                                                                                     |  |                                                                                                             |  |                                                     |  |                                        |  |                                          |  |                                            |  |                                                                                                     |  |                                                                                                           |  |                                          |  |                                          |  |                 |   |                        |      |                                                                                                     |  |                                                                                                             |  |                                            |  |                                 |  |     |  |                  |  |                                                                                                     |  |                                                                                                           |  |     |  |  |  |     |  |          |  |      |  |  |  |  |  |  |  |   |  |      |

| New Jersey Police<br>Crash Investigation Report |    |    |    |    |    |    |    |    |    |    |    | Case Number<br>2018-00018400 |    |                                                                                | Page 2 of 4 |  |
|-------------------------------------------------|----|----|----|----|----|----|----|----|----|----|----|------------------------------|----|--------------------------------------------------------------------------------|-------------|--|
|                                                 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94                           | 95 | Names & Addresses of Occupants<br><i>If Deceased, Date &amp; Time of Death</i> |             |  |
| E                                               |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
| F                                               |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
| G                                               |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
| H                                               |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
| I                                               |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
| J                                               |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |

144. Crash Diagram



Show NORTH by Arrow  
(Not to Scale)

SEE ATTACHED DIAGRAM

145. Crash Description/Narrative

Vehicle 01 was attempting to make a left turn from 1608 Rt 88 onto Rt 88 east when it collided with Vehicle 02 traveling west on Rt 88.

Driver of Vehicle 01 stated she was stopped at the exit of 1608 Rt 88 waiting for traffic to clear from Rt 88 east to make a left turn when Vehicle 02 traveling west on Rt 88 struck the front of her vehicle.

Driver of Vehicle 02 stated he had just came from the hospital and was traveling Rt 88 west when he observed Vehicle 01 inching out from 1608 Rt 88. When Vehicle 02 approached Vehicle 01, Vehicle 01 darted out into the right side of Vehicle 02.

The glass from Vehicle 02 and parts from Vehicle 01 were in the west bound lane of Rt 88 west.

Driver of vehicle 01 was issued a summons for 39:4-97 #E18001394.

\*Vehicle 02 Insurance: Technology Insurance Co. Binder13622832 Nashville TN.

Agent BB&T Po Box 2385, Brentwood TN 37024

|                                         |                     |                                 |                |                                                                                                   |
|-----------------------------------------|---------------------|---------------------------------|----------------|---------------------------------------------------------------------------------------------------|
| 146. Officer's Signature<br>Robert Koch | 147. Badge #<br>170 | 148. Reviewer<br>Patrick J Cook | Badge #<br>140 | 149. Case Status<br><input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |
|-----------------------------------------|---------------------|---------------------------------|----------------|---------------------------------------------------------------------------------------------------|

New Jersey Police Crash Investigation Report  
Motor Vehicle Crash Diagram

Police Dept: Brick Police

Code: 01

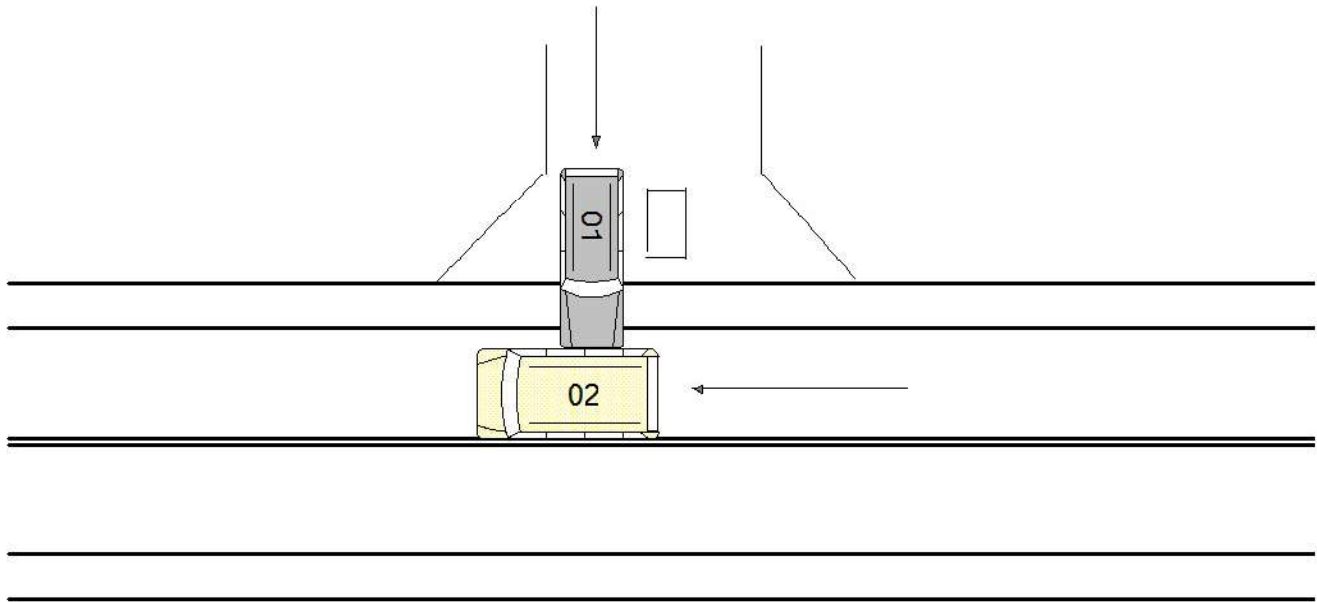
Station:     

Case No: 2018-00018400

144 Crash Diagram (NOT TO SCALE)

○ Indicate  
North

1608  
RT 88



RT 88

Robert Koch

Officer's Signature

170

Badge Number

# BUS SEATING ARRANGEMENT

## MCI-9, EAGLE & FLXIBLE

## FLXIBLE TRANSIT & NOVA 06

## VOLVO ARTIC

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| 1 DRIVER       |    | DOOR |    |
| 2              | 3  | 24   | 25 |
| 4              | 5  | 26   | 27 |
| 6              | 7  | 28   | 29 |
| 8              | 9  | 30   | 31 |
| 10             | 11 | 32   | 33 |
| 12             | 13 | 34   | 35 |
| 14             | 15 | 36   | 37 |
| 16             | 17 | 38   | 39 |
| 18             | 19 | 40   | 41 |
| 20             | 21 | 42   | 43 |
| 22             | 23 | 44   | 45 |
| 46 47 48 49 50 |    |      |    |

|                |    |      |    |
|----------------|----|------|----|
| 1 DRIVER       |    | DOOR |    |
| 2              |    | 22   |    |
| 3              |    | 23   |    |
| 4              |    | 24   |    |
| 5              |    | 25   |    |
| 6              |    | 26   |    |
| 7              |    | 27   | 28 |
| 8              | 9  | 29   | 30 |
| 10             | 11 | 31   | 32 |
| 12             | 13 | 33   | 34 |
| 14             | 15 | DOOR |    |
| 16             | 17 | 35   |    |
| 18             | 19 | 36   |    |
| 20             |    | 37   |    |
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| 40 41 42 43 44 |    |      |    |

|             |    |      |    |
|-------------|----|------|----|
| 1 DRIVER    |    | DOOR |    |
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| 3           |    | 39   |    |
| 4           |    | 40   |    |
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| 24          | 25 | 56   | 57 |
| 26          | 27 |      |    |
| 28          | 29 | DOOR |    |
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REAR