

96	Page 1 of 3		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report		118a																																								
05	1. Case Number				2017-00067926										10. Crash Occurred On: RT 88				11. Speed Limit		88		12. Route No.		13. Milepost		02																																		
01	2. Police Dept. of				Code		Brick Police										01										118b																																		
01	3. Station/Precinct														☒ At Intersection with		☐ N ☐ E		of: POST RD		☐ S ☐ W		18. Speed Limit		25																																				
02	4. Date of Crash				5. Day of Week		6. Time (use 2400 hrs.)		7. Municipality Code		8. Total Killed		9. Total Injured		19. Ramp		17. Cross Road Name/Route No.		☐ NB ☐ EB		☐ SB ☐ WB		119a																																						
01	1 0 0 6 1 7				Su M Tu W Th Sa		1 7 2 8		1 5 0 6		-		0 2										119b																																						
04	23. Veh. #				24. Policy No.				25. NJ Ins. Code				53. Veh. #				54. Policy No.				55. NJ Ins. Code				120a																																				
01	01				66929315				135				02				AOJ-238-006118-70 7 7				370				01																																				
02	26. Driver's First Name				Initial		Last Name		29. Sex		56. Driver's First Name				Initial		Last Name		59. Sex						121a																																				
01	HELEN				C		CONIGLIARO		F		JOANNE				M		DEMANT		F						121b																																				
05	27. Number & Street				229 WINCHESTER DR										57. Number & Street				2421 AGINCOURT RD												122																														
02	28. City				State				Zip				58. City				State				Zip						123																																		
	BRICK TOWNSHIP				NJ				08724				TOMS RIVER TOWNSHIP				NJ				08755						03																																		
	30. Eyes				DL Class		Restrictions		Endorsements		31. State		60. Eyes				DL Class		Restrictions		Endorsements		61. State		124																																				
	0 4				D		-		-		NJ		0 5				D		1		-		NJ		03																																				
01	32. Driver's License Number				33. DOB				34. Expires				62. Driver's License Number				63. DOB				64. Expires						125																																		
	C 6 4 0 9				3 2 2 6 3				5 5 5 8 4				0 5 0 3 5 8				1 0 2 0				D 2 4 4 6				4 0 2 0 0				5 6 3 7 5				0 6 2 9 3 7				0 7 1 9				126																				
	35. Owner's First Name				Initial		Last Name		65. Owner's First Name				Initial		Last Name														126b																																
	☒ Same as Driver				HELEN C CONIGLIARO				☒ Same as Driver				JOANNE M DEMANT																126c																																
	36. Number & Street				229 WINCHESTER DR										66. Number & Street				2421 AGINCOURT RD												126d																														
01	37. City				State				Zip				67. City				State				Zip						126e																																		
	BRICK TOWNSHIP				NJ				08724				TOMS RIVER TOWNSHIP				NJ				08755						26																																		
01	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				127a												
	Volvo				S80				WT				2008				G71CXH				NJ				Subaru				Legacy				WT				2011				N61ALZ				NJ				127b												
01	44. VIN				45. Expires										74. VIN				75. Expires												127c																														
	Y V 1 A S 9 8 2 7 8 1 0 8 1 3 1 4				03/18										4 S 3 B M B C 6 4 B 3 2 3 6 5 4 7				01/18												127d																														
01	46. Vehicle Removed to:				Lepore Enterprises										76. Vehicle Removed to:																127e																														
	☐ Driven				☒ Towed Disabled				☐ Towed Disabled & Impounded				☐ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded						128																																		
	☐ Left at Scene				☐ Towed Impounded				☒ Left at Scene				☐ Towed Impounded														26																																		
	47. Authority				☐ Owner ☒ Driver ☐ Police										77. Authority				☐ Owner ☒ Driver ☐ Police												129																														
	48. Alcohol Drug Test				49. Hazardous Material										78. Alcohol Drug Test				79. Hazardous Material												130																														
	Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill										Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill												131																														
	Type: ☐ Breath ☐ Blood ☐ Urine														Type: ☐ Breath ☐ Blood ☐ Urine																06																														
	Results: 0. - % ☐ Pending				Hazard Class										Results: 0. - % ☐ Pending				Hazard Class												06																														
02	50. Carrier No.				51. GVWR / GCWR (trucks & buses only)										80. Carrier No.				81. GVWR / GCWR (trucks & buses only)												133																														
	☐ USDOT				☒ None										☐ USDOT				☒ None												04																														
	☐ MC/MX				☐ ≤ 10,000 lbs.										☐ MC/MX				☐ ≤ 10,000 lbs.												134																														
	☐ ≥ 10,001 - 26,000 lbs.				☐ ≥ 26,001 lbs.										☐ ≥ 10,001 - 26,000 lbs.				☐ ≥ 26,001 lbs.												03																														
	52. Motor Carrier or Government Entity														82. Motor Carrier or Government Entity																																														
	Number & Street														Number & Street																																														
	City				State				Zip				City				State				Zip																																								
	135. Damage to Other Property				☐ Yes (If Yes, describe) ☒ No																																																								
	Oper.				136. Charge										Oper.				138. Charge										Oper.				139. Summons No.																												
	Oper.				140. Charge										Oper.				142. Charge										Oper.				143. Summons No.																												
	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants								
																																																	If Deceased, Date & Time of Death												
A	01				01				01				04				59				F				08				08				02				11				11				01				6505				HELEN Carolyn CONIGLIARO								
																																																					229 WINCHESTER DR BRICK TOWNSHIP NJ 08724								
B	02				01				01				04				80				F				04				08				01				04				04				-				-				JOANNE Mary DEMANT								
																																																					2421 AGINCOURT RD TOMS RIVER TOWNSHIP NJ 08755								
C																																																													
D																																																													

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

144. Crash Diagram



Show NORTH by Arrow
(Not to Scale)

SEE ATTACHED DIAGRAM

145. Crash Description/Narrative

Investigation revealed vehicle 1 rear ended vehicle 2 in the left travel lane of Rt 88 at the intersection with Post Road. Both vehicles were removed from the roadway prior to police arrival.

Driver vehicle 1 stated she was traveling in the left lane of Rt 88 and took her eyes off the road for a second. When driver vehicle 1 looked up, she observed vehicle 2 stopped in front of her. Driver vehicle 1 attempted to stop but was unable to prior to rear ending vehicle 2.

Driver vehicle 2 stated she was stopped at a green signal waiting to make a left turn into the Baptist Church parking lot when she was rear ended by vehicle 1.

Driver vehicle 1 had a complaint of pain to her left thumb and minor abrasions on her left forearm from the airbag. Driver vehicle 1 was transported to Ocean Medical Center for medical treatment by Brick Township Police EMS. Driver vehicle 2 had a complaint of pain to her upper back and neck but refused medical attention on scene.

I observed extensive damage to the front bumper and hood of vehicle 1. Vehicle 2 had moderate damage to the rear bumper and trunk lid. Vehicle 1 was towed from the scene by PPTD for Le Pore's Towing.

Through my investigation and driver statements I determined driver vehicle 1 to be at fault for the crash.

146. Officer's Signature Mark D Storch	147. Badge # 206	148. Reviewer Jason M Matthews	Badge # 210	149. Case Status ☐ Pending ☒ Complete
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New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: Brick Police

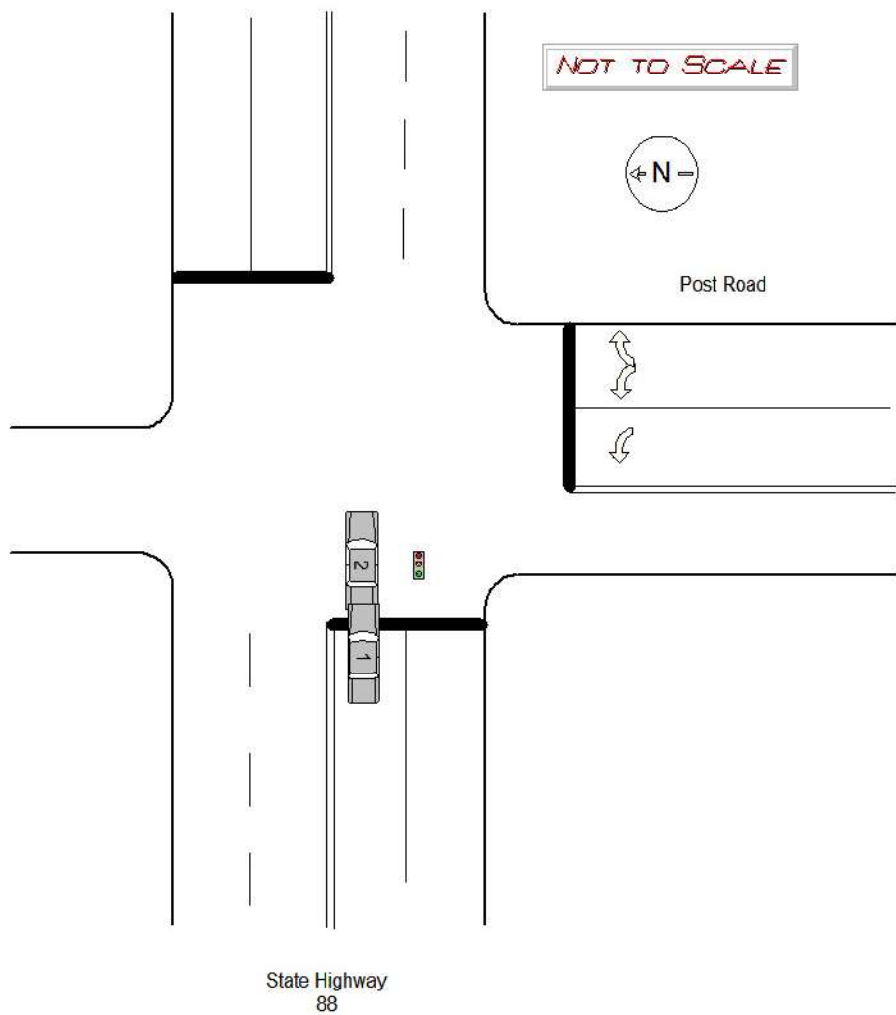
Code: 01

Station:

Case No: 2017-00067926

144 Crash Diagram (NOT TO SCALE)

○ Indicate
North



Mark D Storch

Officer's Signature

206

Badge Number