

96	Page 1 of 3 ☐ Fatal New Jersey Police Crash Investigation Report ☐ Reportable ☒ Non-Reportable ☐ Change Report		118a
05	1. Case Number 2021-00086320		99
01	2. Police Dept. of Brick Police Code 01		118b
04	3. Station/Precinct _____		119a
02	4. Date of Crash mm dd yy 1 2 2 9 2 1		119b
100a	5. Day of Week Su M Tu W Th F Sa W		120a
01	6. Time (use 2400 hrs.) mm hh 0 8 1 4		01
100b	7. Municipality Code 1 5 0 6		120b
04	8. Total Killed 0		121a
02	9. Total Injured 0		121b
101	10. Crash Occurred On: BARB LN Dir S 11. Speed Limit 2 5		122
02	12. Route No. _____ Suffix _____ 13. Milepost _____ 18. Speed Limit 3 5		02
102	14. _____ 15. _____ 16. _____ 19. ☐ To: _____ 17. Cross Road Name/Route No. _____		123
02	20. Route Name/Route No. _____ 21. Latitude _____ 22. Longitude _____		124
01	23. Veh. # 01 24. Policy No. _____ 25. NJ Ins. Code _____		03
103	26. Driver's First Name ANTONIO Initial _____ Last Name ORTIZ 29. Sex M		125
02	27. Number & Street 453 SOUTH COMMUNITY DR		126a
02	28. City BRICK TOWNSHIP State NJ Zip 08723		126b
01	30. Eyes 0 2 DL Class B Restrictions 0 Endorsements N 31. State NJ		126c
105	32. Driver's License Number 0 7 6 3 3 33. DOB mm dd yy 0 6 1 4 7 6 34. Expires mm yy 0 6 2 3		126d
106	35. Owner's First Name _____ Initial _____ Last Name _____		126e
107	36. Number & Street 401 CHAMBERS BRIDGE RD		127a
108	37. City BRICK TOWNSHIP State NJ Zip 08723		127b
109	38. Make _____ 39. Model _____ 40. Color WT 41. Year 2014 42. Plate No. MG98553 43. State NJ		127c
110	44. VIN 3 B P Z L 7 0 X 2 E F 2 1 7 6 2 7 45. Expires 06/26		127d
111	46. Vehicle Removed to: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		127e
112	47. Authority ☐ Owner ☒ Driver ☐ Police		128
113	48. Alcohol Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine		129
114	49. Hazardous Material ☒ None ☐ On Board ☐ Spill		130
115	50. Carrier No. _____ 51. GVWR / GCWR (trucks & buses only) ☐ ≤ 10,000 lbs. ☐ 10,001 - 26,000 lbs. ☐ ≥ 26,001 lbs.		131
116	52. Motor Carrier or Government Entity _____		132
117	53. Veh. # _____ 54. Policy No. _____ 55. NJ Ins. Code _____		133
03	56. Driver's First Name _____ Initial _____ Last Name _____ 59. Sex _____		02
02	57. Number & Street _____		134
01	58. City _____ State _____ Zip _____		03
100	59. City _____ State _____ Zip _____		03
101	60. Eyes _____ DL Class _____ Restrictions _____ Endorsements _____ 61. State _____		131
102	62. Driver's License Number _____ 63. DOB mm dd yy _____ 64. Expires mm yy _____		132
103	65. Owner's First Name _____ Initial _____ Last Name _____		133
104	66. Number & Street _____		02
105	67. City _____ State _____ Zip _____		134
106	68. Make _____ 69. Model _____ 70. Color _____ 71. Year _____ 72. Plate No. _____ 73. State _____		03
107	74. VIN _____ 75. Expires _____		03
108	76. Vehicle Removed to: ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		131
109	77. Authority ☐ Owner ☐ Driver ☐ Police		132
110	78. Alcohol Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine		133
111	79. Hazardous Material ☐ None ☐ On Board ☐ Spill		134
112	80. Carrier No. _____ 81. GVWR / GCWR (trucks & buses only) ☐ ≤ 10,000 lbs. ☐ 10,001 - 26,000 lbs. ☐ ≥ 26,001 lbs.		02
113	82. Motor Carrier or Government Entity _____		131
114	83. Damage to Other Property ☒ Yes (If Yes, describe) _____ ☐ No		132
115	State of NJ, . 1035 PARKWAY AVE, Trenton, NJ 08625 Damage to the traffic light coverings.		133
116	Oper. _____ 136. Charge _____ 137. Summons No. _____		02
117	Oper. _____ 140. Charge _____ 141. Summons No. _____		134
118	Oper. _____ 142. Charge _____ 143. Summons No. _____		03
119	Names & Addresses of Occupants If Deceased, Date & Time of Death		03
120	83 84 85 86 87 88 89 90 91 92 93 94 95		03
121	A 01 01 01 - 45 M - - - 11 04 - - ANTONIO ORTIZ 453 SOUTH COMMUNITY DR BRICK TOWNSHIP NJ 08723		03
122	B		03
123	C		03
124	D		03

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

144. Crash Diagram

Show NORTH by Arrow
(Not to Scale)

SEE ATTACHED DIAGRAM

145. Crash Description/Narrative

Vehicle 1 attempting a right turn from Route 88 eastbound onto Barb Lane southbound.

Driver 1 stated as he was making his right turn, an unknown vehicle traveling northbound on Barb Lane sped up, attempting to cross the intersection before the traffic light changed to red. Driver 1 was forced to swerve further to the right, which caused him to strike the traffic light on the southwest corner of the intersection.

Vehicle 1 had minor scratches to the paint and the traffic light shades were damaged.

Vehicle 1 Box 24 & 25:

Self insured by Perma Inc., 9 Campus Dr., Suite 216, Parsippany, NJ, 07054

146. Officer's Signature John C Boronkas	147. Badge # 165	148. Reviewer Glenn C Turner	Badge # 178	149. Case Status ☐ Pending ☒ Complete
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New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: Brick Police

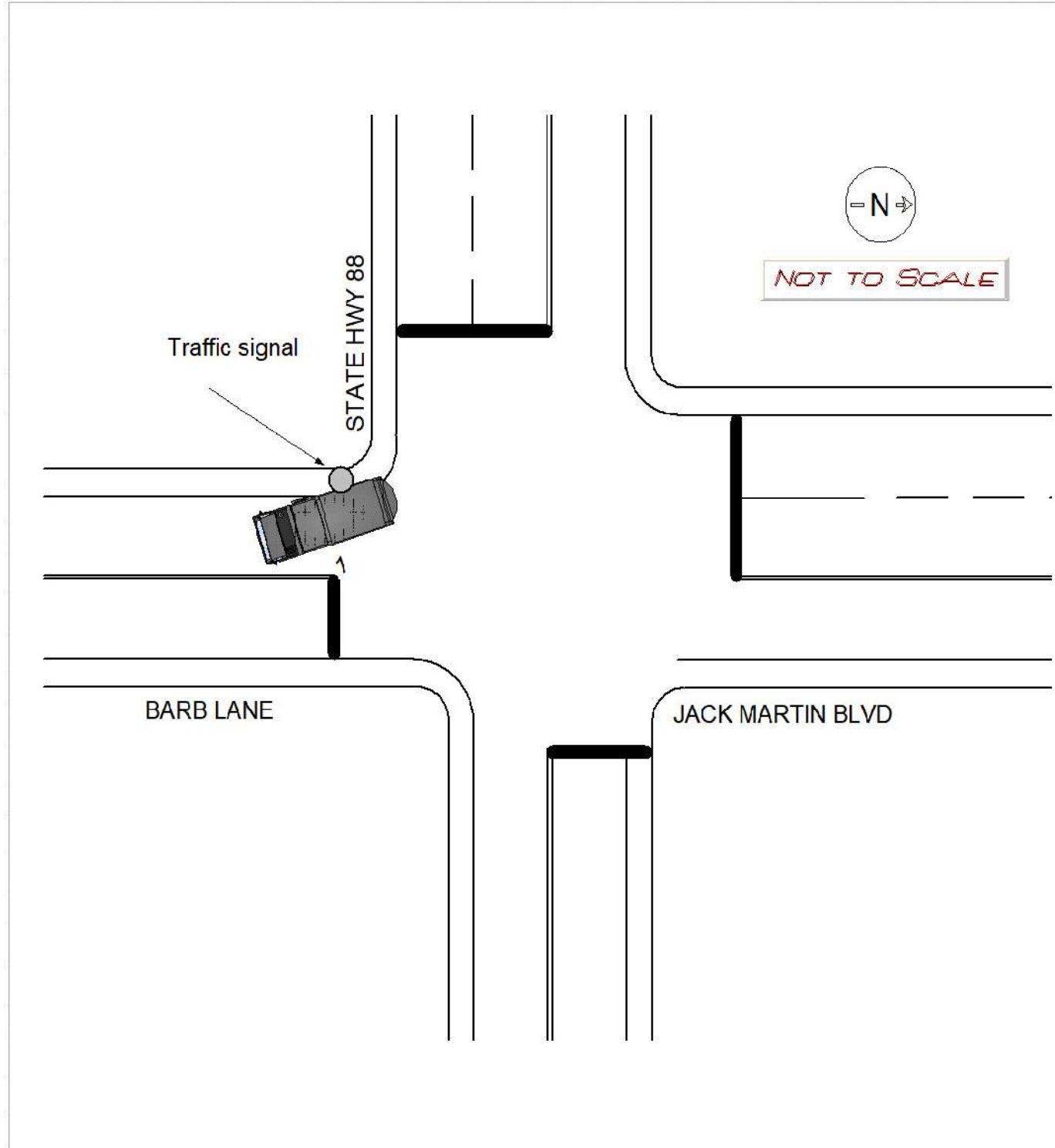
Code: 01

Station:

Case No: 2021-00086320

144 Crash Diagram (NOT TO SCALE)

○ Indicate
North



John C Boronkas

Officer's Signature

165

Badge Number