☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

Left margin codes	
96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	02
103	02
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	03

Right margin codes	
118a	04
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	04
130	04
131	02
132	02
133	02
134	02

1 Case Number: 22-004105
2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01
3 Station/Precinct:

10 Crash Occurred On: NEW HAMPSHIRE AVE (Road Name) — Dir
☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: PINE ST (17 Cross Road Name)
11 Speed Limit: 50
12 Route No. — Suffix — 13 Milepost — 18 Speed Limit: 45
14 — 15 — 16
19 Ramp ☐ To ☐ From:
20 Route/Name — ☐ NB ☐ EB ☐ SB ☐ WB

4 Date of Crash (mm dd yy)	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured	21 Latitude	22 Longitude
01/16/22	SUNDAY	1944	1514	--	--	40.06854	-74.18943

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	6070847282061	54 Policy No.	6108864312061
25 NJ Ins. Code	884	55 NJ Ins. Code	884
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp. To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	JUDAH - KAUFMAN -	56 Driver's First Name / Initial / Last Name	BINYAMIN - MILLER -
29 Sex	M	59 Sex	M
27 Number & Street	1465 TANGLEWOOD LN	57 Number & Street	505 8TH ST
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes	1	60 Eyes	2
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	K08744160007811	62 Driver's License Number	M43580930008032
33 DOB (mm dd yyyy)	07/10/1981	63 DOB (mm dd yyyy)	08/22/2003
34 Expires (mm yy)	07 24	64 Expires (mm yy)	08 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver JUDAH - KAUFMAN -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver BINYAMIN - MILLER -
36 Number & Street	1465 TANGLEWOOD LN	66 Number & Street	505 8TH ST
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	LAKEWOOD NJ 08701
38 Make	CHRY	68 Make	FORD
39 Model	PAC	69 Model	EXP
40 Color	BLK	70 Color	1
41 Year	2020	71 Year	2017
42 Plate No.	B86MLA	72 Plate No.	Z32PJS
43 State	NJ	73 State	NJ
44 VIN	2C4RC1BG9LR143022	74 VIN	1FM5K8AR9HGC86991
45 Expires	07 24	75 Expires	12 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☐ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☐ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1		-			

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
2		-			

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	40	M	-	-	-	11	04	-	-	JUDAH - KAUFMAN - 1465 TANGLEWOOD LN LAKEWOOD NJ 08701
B	2	01	01	05	18	M	-	-	-	11	04	-	-	BINYAMIN - MILLER - 505 8TH ST LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

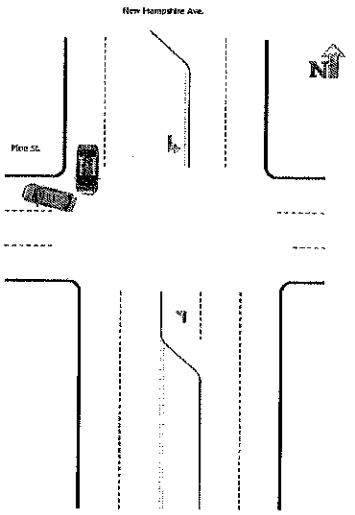
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-004105

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 was traveling north on New Hampshire Ave. stated that he was making a left turn and believed that he had enough distance from Vehicle 2 to properly make the turn. While turning, Vehicle 1 crashed into Vehicle 2 causing minor damage.

The driver of Vehicle 2 was traveling south on New Hampshire Ave. when Vehicle 1 made a turn in front of him causing the crash. After speaking with both drivers I determined that Vehicle 1 did not yield to Vehicle 2 prior to entering his lane and attempting his left turn.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
NICKERSON, K	378	DIBIASE	286	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	01
109	05
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	04

1 Case Number: 22-003415

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

10 Crash Occurred On: OCEAN AVE — Road Name — Dir: - — 11 Speed Limit: 35 — 12 Route No.: 0088 — Suffix: - — 13 Milepost: -

☐ At Intersection With — Road Name: LANES MILL RD — 18 Speed Limit: 35

☒ Feet ☐ Miles — 14: 10 — 15: ☐ N ☒ E ☐ S ☐ W — of:

19 Ramp ☐ To ☐ From: - — 17 Cross Road Name: - — ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

4 Date of Crash (mm dd yy): 01/14/22 — 5 Day Of Week: FRIDAY — 6 Time (use 2400 hrs): 1945 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: -- — 21 Latitude: 40.081770 — 22 Longitude: -74.157640

118a	09
118b	02
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	07
123	08
124	04
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	02
134	01

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 6053147994 — 25 NJ Ins. Code: 100

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: JESSIKA — Initial: B — Last Name: ZAMBRANO-SALAS — 29 Sex: F

27 Number & Street: 240 SOUTH LINCOLN AVENUE;30

28 City: LONG BRANCH — State: NJ — Zip: 07740

30 Eyes: BL — DL Class: - — Restrictions: - — Endorsements: - — 31 State: -

32 Driver's License Number: - — 33 DOB (mm dd yyyy): 06/24/1992 — 34 Expires (mm yy): - -

35 Owner's ☐ Same As Driver — First Name: MIGUEL — Initial: A — Last Name: CALDERON

36 Number & Street: 1112 SEWALL AVE

37 City: ASBURY PARK — State: NJ — Zip: 07712

38 Make: HOND — 39 Model: CIV — 40 Color: 4 — 41 Year: 2003 — 42 Plate No.: B78NPD — 43 State: NJ

44 VIN: 1HGEM225X3L029461 — 45 Expires: 04 22

46 Vehicle Removed To: ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2 — 54 Policy No.: 939898463 — 55 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: GEORGE — Initial: - — Last Name: BUTKUS — 59 Sex: M

57 Number & Street: 6 REUBEN CT

58 City: HOWELL — State: NJ — Zip: 07731

60 Eyes: 04 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: B94872780001714 — 63 DOB (mm dd yyyy): 01/14/1971 — 64 Expires (mm yy): 01 24

65 Owner's ☐ Same As Driver — First Name: GEORGE — Initial: - — Last Name: BUTKUS

66 Number & Street: 6 REUBEN CT

67 City: HOWELL — State: NJ — Zip: 07731

68 Make: RAM — 69 Model: 150 — 70 Color: GRY — 71 Year: 2021 — 72 Plate No.: Y64PCN — 73 State: NJ

74 VIN: 1C6SRFBT4MN734889 — 75 Expires: 08 24

76 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:3-10	291083			

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	29	F	-	-	-	11	04	-	-	JESSIKA B ZAMBRANO-SALAS - 240 SOUTH LINCOLN AV LONG BRANCH NJ 07740
B	1	05	01	05	06M	F	-	-	-	06	06	-	-	MILENYS - CALDERON - 240 SOUTH LINCOLN AV LONG BRANCH NJ 07740
C	2	01	01	05	51	M	-	-	-	11	04	-	-	GEORGE - BUTKUS - 6 REUBEN CT HOWELL NJ 07731
D	2	03	01	05	45	F	-	-	-	11	04	-	-	KAREN A BUTKUS - 6 REUBEN COURT HOWELL NJ 07731

New Jersey Police Crash Investigation Report

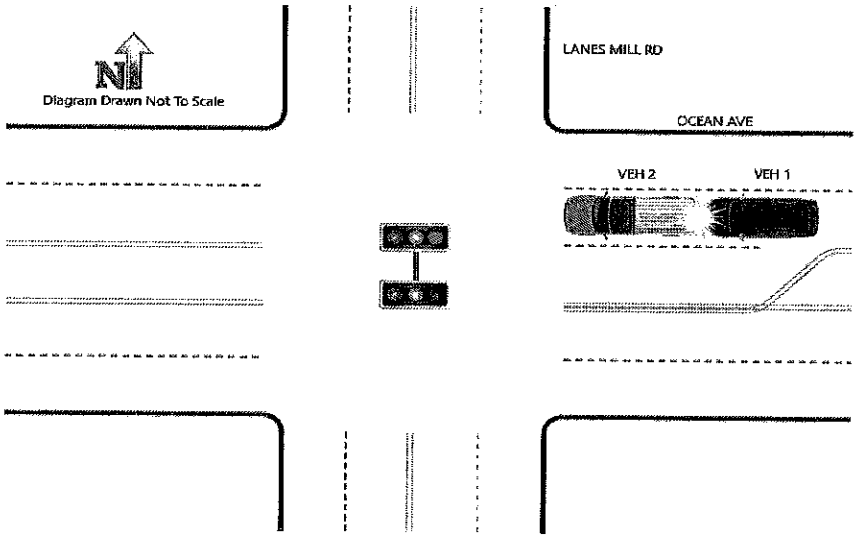
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-003415

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E	2	06	01	05	22	F	-	-	-	11	04	-	-	KAYLA M BUTKUS - 6 REUBEN CT. HOWELL NJ 07731
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLES ONE AND TWO WERE TRAVELING WEST ON OCEAN AVENUE. VEHICLE TWO STOPPED AT THE INTERSECTION OF OCEAN AVENUE AND LANES MILL RD. VEHICLE ONE SLOWED DOWN BUT DID NOT STOP IN TIME AND STRUCK THE REAR OF VEHICLE TWO. DRIVER ONE STATED SHE THOUGHT SHE WAS GOING TO BE ABLE TO STOP IN TIME, BUT LOOKED AWAY LAST MINUTE DUE TO HER INFANT CHILD CRYING IN THE REAR SEAT WHICH RESULTED IN HER VEHICLE STRIKING VEHICLE TWO. DRIVER ONE STATED HE WAS TRAVELING WEST ON OCEAN AVENUE, STOPPED FOR THE TRAFFIC SIGNAL AT THE INTERSECTION OF OCEAN AVENUE AND LANES MILL RD WHEN VEHICLE ONE STRUCK HIS VEHICLE IN THE REAR.

DUE TO MY INVESTIGATION I FOUND DRIVER ONE TO BE AT FAULT FOR FOLLOWING TOO CLOSELY AND DRIVER INATTENTION. NO INJURIES WERE REPORTED AT THE SCENE. DRIVER ONE WAS ISSUED A SUMMONS FOR DRIVING WITHOUT A LICENSE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SOLOMON A	380	KCM	335	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	07
100a	01
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	01
118a	04
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	08
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	01
130	01
131	02
132	02
133	02
134	02

1 Case Number: 22-004594

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

10 Crash Occurred On: N LAKE DR — Road Name — Dir

☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: LAKEWOOD RD

11 Speed Limit: 35 — 12 Route No. — Suffix — 13 Milepost — 18 Speed Limit: 25

14 — 15 — 16

19 Ramp ☐ To ☐ From: — 17 Cross Road Name: — ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

4 Date of Crash (mm dd yy): 01/18/22 — 5 Day Of Week: TUESDAY — 6 Time (use 2400 hrs): 1312 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

21 Latitude: 40.09397 — 22 Longitude: -74.22547

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 939 914 042 — 25 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: YERUCHAM — Initial: S — Last Name: FISHMAN — 29 Sex: M

27 Number & Street: 404 MELVILLE AVE

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 1 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: OH

32 Driver's License Number: UM694040 — 33 DOB (mm dd yyyy): 01/21/1999 — 34 Expires (mm yy): 01 23

35 Owner's ☐ Same As Driver — First Name: YERUCHAM — Initial: S — Last Name: FISHMAN

36 Number & Street: 404 MELVILLE AVE

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: TOYT — 39 Model: AVA — 40 Color: BLK — 41 Year: 2012 — 42 Plate No.: G80PNM — 43 State: NJ

44 VIN: 4T1BK3DB3CU464831 — 45 Expires: 01 23

46 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2 — 54 Policy No.: ** — 55 NJ Ins. Code:

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: EN — Initial: - — Last Name: SHI — 59 Sex: M

57 Number & Street: 322 ADAM RD

58 City: FREDERICK — State: MD — Zip: 21701

60 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: MD

62 Driver's License Number: S000230000244 — 63 DOB (mm dd yyyy): 03/27/1982 — 64 Expires (mm yy): 03 23

65 Owner's ☐ Same As Driver — First Name: EN — Initial: - — Last Name: SHI

66 Number & Street: 322 ADAM RD

67 City: FREDERICK — State: MD — Zip: 21701

68 Make: TOYT — 69 Model: CAM — 70 Color: WHI — 71 Year: 2011 — 72 Plate No.: 3ER4791 — 73 State: MD

74 VIN: 4T1C11AKXMU417779 — 75 Expires: 05 23

76 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.

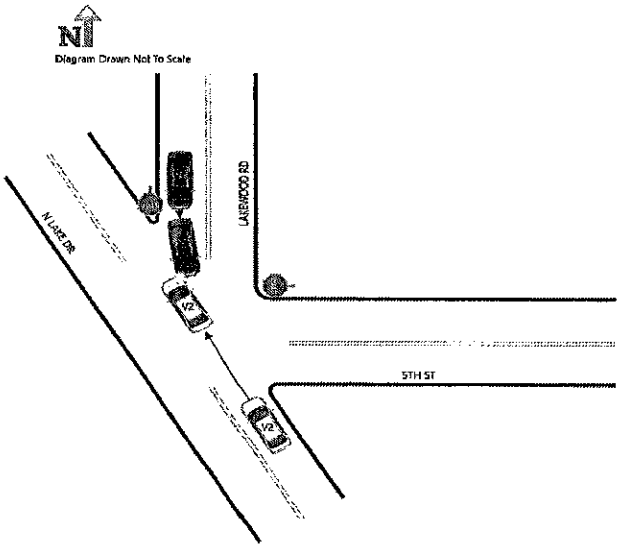
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	22	M	-	-	-	11	04	-	-	YERUCHAM S FISHMAN - 404 MELVILLE AVE LAKEWOOD NJ 08701
B	02	01	01	05	39	M	-	-	-	11	04	-	-	EN - SHI - 322 ADAM RD FREDERICK MD 21701
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01
	Station: _____ Case No: 22-004594

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 Insurance Information:
Agency Insurance
Policy# AU0460813
NAIC# 35173
P.O. Box 8900
Elkridge, MD 21075
410-684-2727

Driver of V1 stated he was stopped South on Lakewood Rd at the stop sign. D1 reported he believed the stop sign for 5th St was for D2 on N Lake Dr and attempted to turn right. D1 stated he collided with V2.

Driver of V2 stated he was traveling North on N Lake Dr. D2 stated V1 pulled out from the stoop sign and collided with his vehicle.

Both vehicles had minor damage to the front bumpers.

I determined V1 was at fault for the crash. D1 had a stop sign and did not yield to V2, who was oncoming traffic. I made this determination based on statements from both drivers, the location of damage to both vehicles and my observations of the crash scene.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MICALLEF E	366	MY	329	☐ Pending ☒ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

Code	Value
96	05
97	01
98	01
99	07
100a	01
100b	04
101	02
102	01
103	01
104	2
105	02
106	-
107	-
108	04
109	01
110	03
111	01
112	02
113	-
114	-
115	-
116	02
117	02

1 Case Number: 22-004613

2 Police Dept of: LAKEWOOD TOWNSHIP P Code: 01

3 Station/Precinct: --

10 Crash Occurred On: 6TH STREET Road Name Dir: - 11 Speed Limit: 25 12 Route No. Suffix 13 Milepost

☐ At Intersection With ☒ Feet ☐ Miles 14: 150 15 16: ☐ N ☐ E ☐ S ☒ W of: PRIVATE WAY 17 Cross Road Name 18 Speed Limit: 25

19 Ramp ☐ To ☐ From: 20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

4 Date of Crash (mm dd yy)	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured	21 Latitude	22 Longitude
01/18/22	TUESDAY	1458	1514	--	--	40.095850	-74.221500

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	SELF INSURED	54 Policy No.	6077427812061
25 NJ Ins. Code	-	55 NJ Ins. Code	884
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	THEODORE R WIELICHOSKI -	56 Driver's First Name / Initial / Last Name	YEHUDIS C BAK -
29 Sex	M	59 Sex	F
27 Number & Street	PO BOX 2191	57 Number & Street	123 IRIS RD
28 City / State / Zip	TOMS RIVER NJ 08753	58 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes	02	60 Eyes	02
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	W41717387910672	62 Driver's License Number	B02107896362012
33 DOB (mm dd yyyy)	10/15/1967	63 DOB (mm dd yyyy)	12/13/2001
34 Expires (mm yy)	10 25	64 Expires (mm yy)	12 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver OCEAN COUNTY - SHERIFF DEPT -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver AKIVA S BAK -
36 Number & Street	PO BOX 2191	66 Number & Street	123 IRIS RD
37 City / State / Zip	TOMS RIVER NJ 08754	67 City / State / Zip	LAKEWOOD NJ 08701
38 Make	FORD	68 Make	CHEV
39 Model	EPD	69 Model	MAL
40 Color	BLK	70 Color	1
41 Year	2011	71 Year	2008
42 Plate No.	YSW88Z	72 Plate No.	W31HUY
43 State	NJ	73 State	NJ
44 VIN	1FMJU1J50BEF03084	74 VIN	1G1ZH57B684249260
45 Expires	09 22	75 Expires	05 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity	
Number & Street		Number & Street	
City / State / Zip		City / State / Zip	

Code	Value
118a	25
118b	-
119a	02
119b	04
120a	01
120b	-
121a	01
121b	-
122	01
123	05
124	11
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	05
130	05
131	12
132	11
133	02
134	02

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	54	M	-	-	-	11	04	-	-	THEODORE R WIELICHOSKI - 1117 S MAPLECREST CT TOMS RIVER NJ 08753
B	02	01	01	05	20	F	-	-	-	11	04	-	-	YEHUDIS C BAK - 123 IRIS RD LAKEWOOD NJ 08701
C														
D														

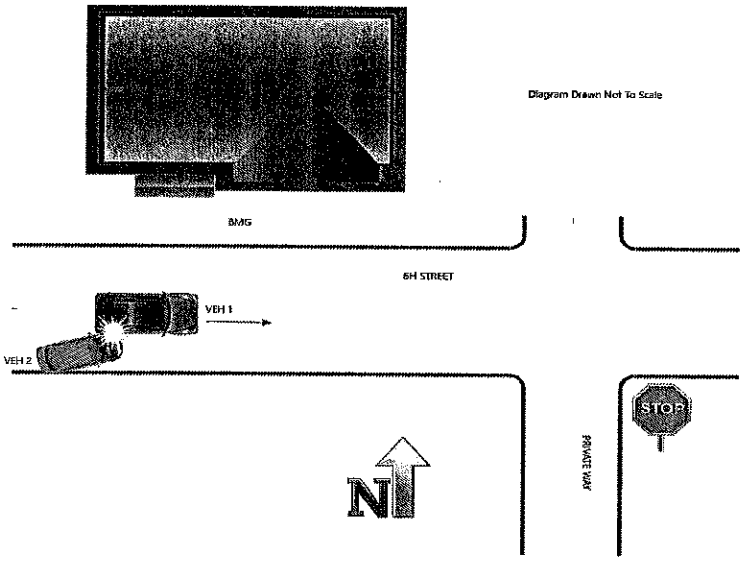
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: --
Case No: 22-004613

(Refer to vehicle by number)

	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEH 1 STATED HE WAS TRAVELING EAST ON 6TH STREET, WHEN VEHICLE 2THAT WAS PARKED ON THE SIDE OF THE ROAD PULLED OUT AND HIT HIS VEHICLE.

DRIVER OF VEH 2 STATED SHE WAS PARKED ON THE SIDE OF THE ROAD ON 6TH STREET, FACING EASTBOUND, WAITING TO PICK UP HER BROTHER FROM SCHOOL (BMG). DRIVER 2 SAID SHE SAW HER BROTHER WALKING TOWARDS HER AND PULLED HER VEHICLE OUT OF THE PARKING SPOT AND INTO TRAFFIC. WHEN DRIVER 2 DID THIS, SHE DID NOT SEE VEHILE 1, AND STRUCK VEHICLE 1.

UPON MY INVESTIGATION I DETERMINED DRIVER 2 AT FAULT FOR THE CRASH. DRIVER 1 WAS AN ON DUTY SHERIFF K-9 OFFICER, AND THERE WERE TWO K-9'S IN THE REAR OF HIS VEHICLE 1. K-9 JAX AND K-9 KANE WERE THE NAMES OF THE DOGS AND BOTH WERE UNHARMED FROM THE CRASH. CSI RESPONDED TO THE SCENE TO TAKE PHOTOS. VEH 1 IS A SELF INSURED VEHICLE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CLARKE N	334	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	07
100a	01
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	04

1 Case Number: 22-004983

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

10 Crash Occurred On: 111 CLIFTON AVE — Road Name — Dir

☐ At Intersection With

☒ Feet ☐ Miles — 14: 45 — 15

☒ N ☐ E ☐ S ☐ W of: 1ST STREET

11 Speed Limit: 25

12 Route No. — Suffix — 13 Milepost

18 Speed Limit: 25

19 Ramp ☐ To ☐ From:

17 Cross Road Name

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: - — 22 Longitude: -

16

4 Date of Crash (mm dd yy): 01/19/22

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 2254

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

118a	02
118b	-
119a	02
119b	-
120a	01
120b	-
121a	01
121b	-
122	13
123	10
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	09
130	09
131	06
132	06
133	01
134	01

Vehicle 1

23 Veh #: 1

24 Policy No.: HPA00002758652

25 NJ Ins. Code: 411

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: SANHUNG — Initial: - — Last Name: KWOK — 29 Sex: M

27 Number & Street: 5 KINGLET AVENUE

28 City: MARLBORO — State: NJ — Zip: 07746

30 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: -

31 State: NJ

32 Driver's License Number: K96126910004762

33 DOB (mm dd yyyy): 04/19/1976

34 Expires (mm yy): 04 26

35 Owner's ☐ Same As Driver — First Name: SANHUNG — Initial: - — Last Name: KWOK

36 Number & Street: 5 KINGLET AVENUE

37 City: MARLBORO — State: NJ — Zip: 07746

38 Make: HOND — 39 Model: ODY — 40 Color: GRY — 41 Year: 2015 — 42 Plate No.: Z44EYJ — 43 State: NJ

44 VIN: 5FNRL5H64FB033050

45 Expires: 11 22

46 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

47 Authority

☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

49 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class — Placard No.

50 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2

54 Policy No.: G01002963205

55 NJ Ins. Code: 392

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: ERASTO — Initial: - — Last Name: VIDALROJAS — 59 Sex: M

57 Number & Street: 631 MAPLE AVE

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 2 — DL Class: I — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: V41232310007862

63 DOB (mm dd yyyy): 07/26/1986

64 Expires (mm yy): 07 25

65 Owner's ☐ Same As Driver — First Name: ERASTO — Initial: - — Last Name: VIDALROJAS

66 Number & Street: 631 MAPLE AVE

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: CHEV — 69 Model: UPL — 70 Color: SIL — 71 Year: 2005 — 72 Plate No.: M91MMS — 73 State: NJ

74 VIN: 1GNDV23L95D167274

75 Expires: 07 22

76 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority

☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

79 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class — Placard No.

80 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	45	M	-	-	-	11	04	-	-	SANHUNG - KWOK - 5 KINGLET AVENUE MARLBORO NJ 07746 - -
B	02	01	01	05	35	M	-	-	-	11	04	-	-	ERASTO - VIDALROJAS - 631 MAPLE AVE LAKEWOOD NJ 08701 - -
C														
D														

New Jersey Police Crash Investigation Report

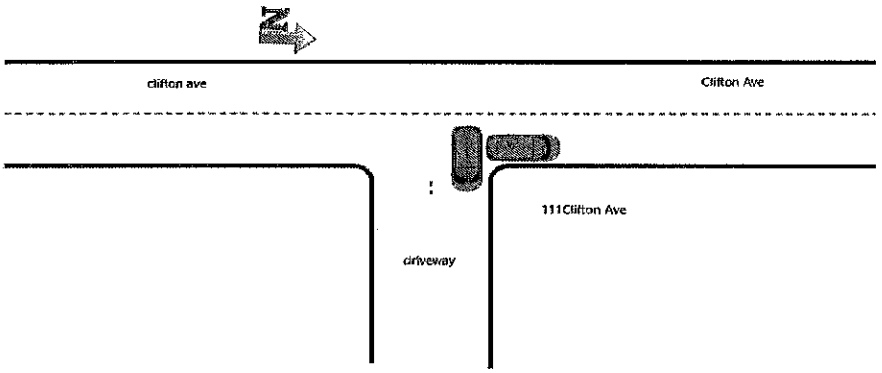
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004983

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Conflicting stories.

D1 stated he was parked in the driveway of the alley located next to 111 Clifton Ave. D1 stated as he was backing out into the street, Veh 2 who was parked north of the driveway on Clifton Ave facing North. D1 stated D2 must have started to back as well. D1 stated the two cars bumped into each other.
No new damages seen to Veh 1. Veh one may have some dust/dirt which was wiped away from rubbing against veh 2's bumper.

D2 stated he was parked facing north on Clifton Ave, when Veh 1 struck his rear bumper. Veh 2's bumper was scraped and cracked all over from prior wear and tear and i did not see or nor could I identify any new damages. Neither could D2 himself, however, wanted the incident documented.

Due to conflicting stories I was unable to determine complete fault. NO DAMAGES OCCURRED FROM THE IMPACT.
There are camera's outside of the building on 111 Clifton Ave, unknown who owns them and businesses were closed.

No Injuries were reported.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MORGAN T	349	SGT. M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

Code	Value
96	05
97	01
98	07
99	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	04
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	02

Code	Value
118a	25
118b	-
119a	04
119b	-
120a	01
120b	01
121a	01
121b	01
122	01
123	03
124	04
125	08
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	08
130	09
131	01
132	01
133	02
134	02

1 Case Number: 22-004975

2 Police Dept of: LAKEWOOD TOWNSHIP F Code: 01

3 Station/Precinct: --

10 Crash Occurred On: MADISON AVE — 11 Speed Limit: 40

Road Name / Dir / 12 Route No. / Suffix / 13 Milepost — 18 Speed Limit: 25

☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: CAREY ST

14: -- 15 16

19 Ramp ☐ To ☐ From: — 17 Cross Road Name

20 Route/Name — ☐ NB ☐ EB ☐ SB ☐ WB

4 Date of Crash (mm dd yy): 01/19/22

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 2201

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

21 Latitude: 40.10068

22 Longitude: -74.21832

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	0309945 09-108837	54 Policy No.	0290-46-65-07
25 NJ Ins. Code	653	55 NJ Ins. Code	148
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	JOEL - MEISELS -	56 Driver's First Name / Initial / Last Name	RAPHAEL - SASSOON -
29 Sex	M	59 Sex	M
27 Number & Street	18 BOERUM ST APT 7C	57 Number & Street	30 ST ALBANS TERRACE
28 City / State / Zip	BROOKLYN NY 11206	58 City / State / Zip	GATESHEAD EN NE84H
30 Eyes	1	60 Eyes	02
DL Class / Restrictions / Endorsements	- / - / -	DL Class / Restrictions / Endorsements	- / - / -
31 State	NY	61 State	EN
32 Driver's License Number	707814465	62 Driver's License Number	SASSO911026R99SB
33 DOB (mm dd yyyy)	12/14/1996	63 DOB (mm dd yyyy)	02/11/1996
34 Expires (mm yy)	12 23	64 Expires (mm yy)	09 30
35 Owner's First Name / Initial / Last Name	☐ Same As Driver REGISTERED - OWNER -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver NATHAN - SULL -
36 Number & Street	540 MAIN ST	66 Number & Street	2730 N FOREST RD 132
37 City / State / Zip	FLEISCHMANNS NY 12430	67 City / State / Zip	GETZVILLE NY 14068
38 Make	CHEV	68 Make	KIA
39 Model	TRV	69 Model	SOL
40 Color	BLK	70 Color	RD
41 Year	2021	71 Year	2014
42 Plate No.	KEK5274	72 Plate No.	KJZ4440
43 State	NY	73 State	NY
44 VIN	1GNERFKW3MJ184518	74 VIN	KNDJP3A50E7745373
45 Expires	03 23	75 Expires	02 23
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	25	M	-	-	-	11	04	-	-	JOEL - MEISELS - 18 BOERUM ST APT 7C BROOKLYN NY 11206
B	1	03	01	05	34	M	-	-	-	11	04	-	-	JOSEF - HOROWITZ - 188 KEAP STREET BROOKLYN NY 11211
C	1	04	01	05	20	M	-	-	-	11	04	-	-	SENDER - TWERSKY - 205 WALLABOUT STREET BROOKLYN NY 11206
D	1	05	01	05	18	F	-	-	-	11	04	-	-	YITTY - TWERSKY - 205 WALLABOUT STREET BROOKLYN NY 11206

New Jersey Police Crash Investigation Report

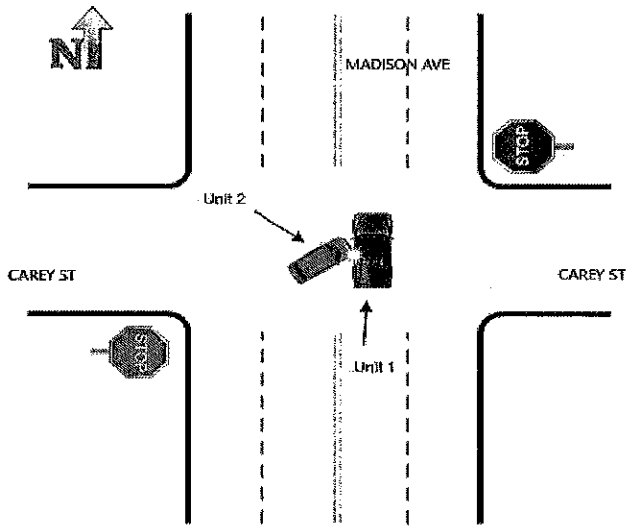
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: -- Case No: 22-004975

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E	2	01	01	05	25	M	-	-	-	11	04	-	-	RAPHAEL - SASSOON - 30 ST ALBANS TERRACE GATESHEAD EN NE84H
F	2	03	01	05	23	M	-	-	-	11	04	-	-	GAD - SCHLEIDER - 418 RIDGE 4TH ST LAKEWOOD NJ 08701
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS TRAVELING NORTH ON MADISON AVENUE, WHEN VEHICLE #2 PULLED OUT FROM CAREY STREET CAUSING BOTH VEHICLES TO COLLIDE. DRIVER #2 STATED THAT HE PULLED OUT FROM CAREY STREET ATTEMPTING TO MAKE A LEFT TURN ONTO MADISON AVENUE AND COLLIDED WITH VEHICLE #1 WHICH WAS TRAVELING NORTH ON MADISON AVENUE. NO INJURIES REPORTED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RIVERA F	294	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 07 | 100a 01 | 100b 04 | 101 02 | 102 01 | 103 01 | 104 2 | 105 06 | 106 00 | 107 - | 108 00 | 109 01 | 110 00 | 111 01 | 112 00 | 113 - | 114 00 | 115 - | 116 00 | 117 01

1 Case Number: 22-004313

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 01/17/22

5 Day Of Week: MONDAY

6 Time (use 2400 hrs): 1416

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: PARK AVE

11 Speed Limit: 2525

12 Route No.: — Suffix: — 13 Milepost: —

☐ At Intersection With — Road Name — Dir

14: 500 ☐ Feet ☐ Miles (15) — 16: ☐ N ☐ E ☒ S ☐ W of: E 2ND ST

17 Cross Road Name:

18 Speed Limit: 25

19 Ramp ☐ To ☐ From:

20 Route/Name: — ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.09316

22 Longitude: -74.20807

118a 00 | 118b - | 119a 25 | 119b - | 120a 00 | 120b 00 | 121a - | 121b - | 122 00 | 123 10 | 124 11 | 125 11 | 126a 28 | 126b - | 126c - | 126d - | 126e 28 | 127a 26 | 127b - | 127c - | 127d - | 127e 26 | 128 28 | 129 00 | 130 00 | 131 08 | 132 08 | 133 00 | 134 02

Vehicle 1

23 Veh #: 1

24 Policy No.:

25 NJ Ins. Code:

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run

26 Driver's First Name — Initial — Last Name:

29 Sex:

27 Number & Street:

28 City — State — Zip:

30 Eyes — DL Class — Restrictions — Endorsements:

31 State:

32 Driver's License Number:

33 DOB (mm dd yyyy):

34 Expires (mm yy):

35 Owner's First Name — Initial — Last Name: ☐ Same As Driver

36 Number & Street:

37 City — State — Zip:

38 Make: — 39 Model: — 40 Color: — 41 Year: — 42 Plate No.: — 43 State:

44 VIN: — 45 Expires:

46 Vehicle Removed To:

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

50 Carrier No.: ☐ USDOT ☐ None ☐ MC/MX

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity:

Number & Street:

City — State — Zip:

Vehicle 2

53 Veh #: 2

54 Policy No.: 4626626743

55 NJ Ins. Code: 100

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name — Initial — Last Name: - - - -

59 Sex: -

57 Number & Street: -

58 City: - State: - Zip: -

60 Eyes: - DL Class: - Restrictions: - Endorsements: -

61 State: -

62 Driver's License Number: -

63 DOB (mm dd yyyy): -

64 Expires (mm yy): - -

65 Owner's First Name: ☐ Same As Driver — NISAN — Initial: - — Last Name: LAVIHAYEM -

66 Number & Street: 47 KEDMA DR

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: VOLK — 69 Model: PAS - PA — 70 Color: GRY — 71 Year: 2018 — 72 Plate No.: Z51KEF — 73 State: NJ

74 VIN: 1VWBA7A3XJC016159 — 75 Expires: 07 22

76 Vehicle Removed To:

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

80 Carrier No.: ☐ USDOT ☐ None ☐ 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:

Number & Street:

City — State — Zip:

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☐ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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														
B														
C														
D														

New Jersey Police Crash Investigation Report

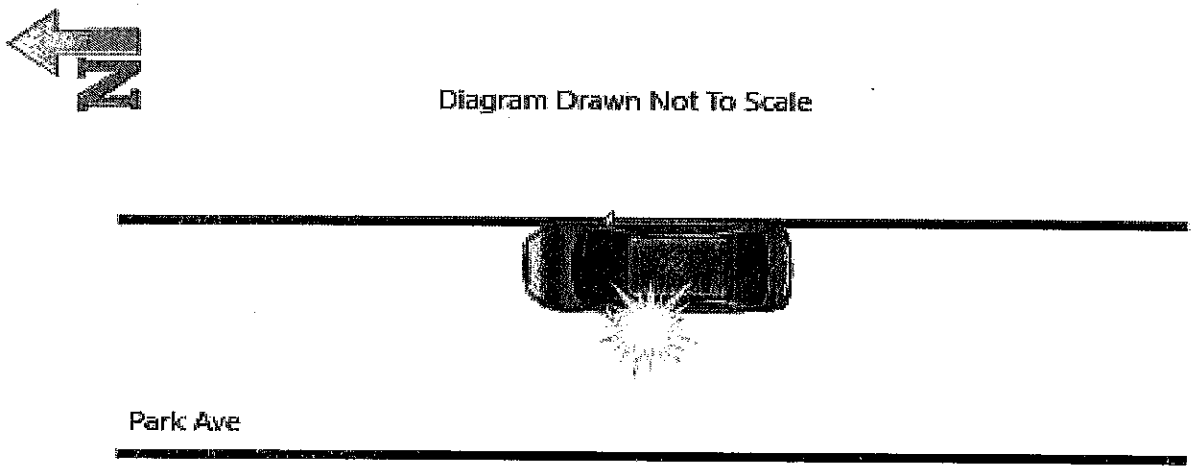
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004313

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Owner of vehicle 2 stated that an unknown vehicle struck his vehicle while parked. Vehicle 2 was parked legally on Park Avenue facing North. I noticed damage consistent with another vehicle side swiping vehicle 2. However, no information on suspect vehicle. No cameras in the area also.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VEGA E	311	PA	325	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

Left margin		Right margin	
96	05	118a	04
97	01	118b	-
98	07	119a	25
99	09	119b	-
100a	01	120a	01
100b	04	120b	-
101	02	121a	01
102	01	121b	-
103	01	122	02
104	2	123	01
105	03	124	04
106	-	125	04
107	-	126a	26
108	01	126b	-
109	04	126c	-
110	01	126d	-
111	01	126e	26
112	-	127a	26
113	-	127b	-
114	-	127c	-
115	-	127d	-
116	04	127e	26
117	01	128	26
		129	11
		130	11
		131	02
		132	03
		133	04
		134	02

1 Case Number: 22-005187
2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 01/20/22
5 Day Of Week: THURSDAY
6 Time (use 2400 hrs): 1827
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: 901 CEDARBRIDGE AVE — Road Name
11 Speed Limit: 15
Dir: - 12 Route No.: - Suffix: - 13 Milepost: -
☐ At Intersection With
14: - ☐ Feet ☐ Miles 15 ☐ N ☐ E ☐ S ☐ W 16 of: -
19 Ramp ☐ To ☐ From:
17 Cross Road Name:
18 Speed Limit: -
☐ NB ☐ EB ☐ SB ☐ WB
20 Route/Name:
21 Latitude: 40.07599
22 Longitude: -74.18327

Vehicle 1

23 Veh #: 1
24 Policy No.: 93006307
25 NJ Ins. Code: 135
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: RICKY — Initial: - — Last Name: MORALESTLAPANCO - — 29 Sex: M
27 Number & Street: 84 FAIRWAY CT; J
28 City: LAKEWOOD — State: NJ — Zip: 08701
30 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ
32 Driver's License Number: M65546560009022
33 DOB (mm dd yyyy): 09/11/2002
34 Expires (mm yy): 09 24
35 Owner's ☐ Same As Driver — First Name: BENJAMIN — Initial: M — Last Name: MORALESHERNANI -
36 Number & Street: 11 N HOPE CHAPEL RD
37 City: JACKSON — State: NJ — Zip: 08527
38 Make: NISS — 39 Model: ALT — 40 Color: BLK — 41 Year: 2018 — 42 Plate No.: N12NKL — 43 State: NJ
44 VIN: 1N4AL3AP2JC172139 — 45 Expires: 02 23
46 Vehicle Removed To: FREEDOM
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.
50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: -
Number & Street: -
City: - State: - Zip: -

Vehicle 2

53 Veh #: 2
54 Policy No.: A0J-238-615975-40 1 6
55 NJ Ins. Code: 370
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: SHIMON — Initial: E — Last Name: JACOBOVITS - — 59 Sex: M
57 Number & Street: 15 11TH ST
58 City: LAKEWOOD — State: NJ — Zip: 08701
60 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ
62 Driver's License Number: J00747086509852
63 DOB (mm dd yyyy): 09/22/1985
64 Expires (mm yy): 09 25
65 Owner's ☐ Same As Driver — First Name: SHIMON — Initial: E — Last Name: JACOBOVITS -
66 Number & Street: 15 11TH ST
67 City: LAKEWOOD — State: NJ — Zip: 08701
68 Make: AUDI — 69 Model: SQ8 — 70 Color: BLK — 71 Year: 2021 — 72 Plate No.: H60NLV — 73 State: NJ
74 VIN: WA1CWBF10MD016165 — 75 Expires: 03 24
76 Vehicle Removed To:
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.
80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity: -
Number & Street: -
City: - State: - Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	19	M	-	-	-	11	04	-	-	RICKY - MORALESTLAPANCO - 84 FAIRWAY CT; J LAKEWOOD NJ 08701
B	2	01	01	05	36	M	-	-	-	11	04	-	-	SHIMON E JACOBOVITS - 15 11TH ST LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

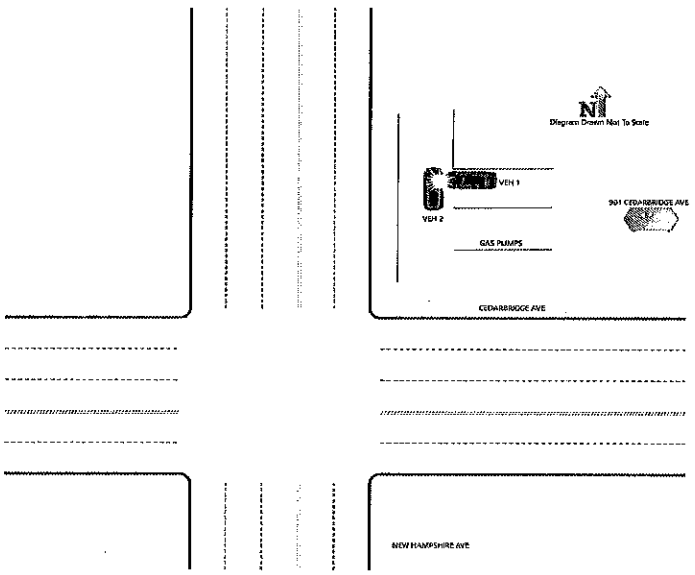
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-005187

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE ONE WAS TRAVELING WEST IN THE PARKING LOT OF 901 CEDARBRIDGE AVE. VEHICLE TWO WAS TRAVELING NORTH IN THE PARKING LOT OF 901 CEDARBRIDGE AVE. VEHICLE ONE DID NOT YEILD TO VEHICLE TWO WHO WAS TRAVELING STRAIGHT AND HAD THE RIGHT OF WAY. BOTH VEHICLE COLLIDED CAUSING MINOR DAMAGE TO VEHICLE TWO, AND DISABLING DAMAGE TO VEHICLE ONE. DRIVER ONE STATED HE LOOKED LEFT, DID NOT SEE A VEHICLE AND PROCEEDED TO TURN RIGHT WHEN BOTH VEHICLES COLLIDED. DRIVER TWO STATED HE WAS TRAVELING STRAIGHT WHEN VEHICLE ONE MADE A RIGHT TURN INTO HIS VEHICLE.

DUE TO MY INVESTIGATION I FOUND DRIVER ONE TO BE AT FAULT FOR FAILING TO YEILD TO VEHICLE TWO. NO INJURIES WERE REPORTED. NO SUMMONS WERE ISSUED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SOLOMON A	380	E. MIICK	307	☐ Pending ☒ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

Code	Value
96	05
97	01
98	01
99	05
100a	03
100b	04
101	02
102	02
103	02
104	2
105	01
106	-
107	-
108	04
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	01

1 Case Number: 22-005159
2 Police Dept of: LAKEWOOD TOWNSHIP F | Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 01/20/22
5 Day Of Week: THURSDAY
6 Time (use 2400 hrs): 1534
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: NEW HAMPSHIRE AVE (Road Name) | Dir: - | 11 Speed Limit: 45 | 12 Route No.: 0623 | Suffix: - | 13 Milepost: -
☐ At Intersection With
14: 20 ☒ Feet ☐ Miles (15) | 16: ☐ N ☐ E ☒ S ☐ W of: OCEAN AVENUE (17 Cross Road Name) | 18 Speed Limit: 45
19 Ramp: ☐ To ☐ From: | 20 Route/Name: | ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude: 40.085580 | 22 Longitude: -74.176920

Field	Vehicle 1	Vehicle 2
Veh #	1	2
Policy No.	F825033-4	6082-76-94-79
NJ Ins. Code	426	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		
Driver's First Name / Initial / Last Name	ERICA L DEMAIO -	MADISON V SCHIEBLER -
Sex	F	F
Number & Street	712 MANOR DRIVE	3 FROST DRIVE
City / State / Zip	BRICK NJ 08723	BAYVILLE NJ 08721
Eyes	05	05
DL Class	D	D
Restrictions	-	-
Endorsements	-	-
State	NJ	NJ
Driver's License Number	D24442327357815	S13835068560945
DOB (mm dd yyyy)	07/11/1981	10/07/1994
Expires (mm yy)	07 22	10 23
Owner's First Name / Initial / Last Name	☐ Same As Driver ERICA L DEMAIO -	☐ Same As Driver LUKE J SCHIEBLER -
Owner Number & Street	712 MANOR DRIVE	3 FROST DRIVE
Owner City / State / Zip	BRICK NJ 08723	BAYVILLE NJ 08721
Make	NISS	HOND
Model	PAT	PIL
Color	GRY	GRY
Year	2014	2008
Plate No.	N19HWS	V51PDW
State	NJ	NJ
VIN	5N1AR2MM0EC620870	5FNYF18578B045702
Expires	05 22	10 22
Vehicle Removed To	-	-
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority	☒ Owner ☐ Driver ☐ Police	☐ Owner ☒ Driver ☐ Police
Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	☐ USDOT - ☐ MC/MX - ☒ None
GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity	-	-
Number & Street	-	-
City / State / Zip	- - -	- - -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No
-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	V1	01	01	05	40	F	-	-	-	11	04	-	-	ERICA L DEMAIO - 712 MANOR DRIVE BRICK NJ 08723
B	V2	01	01	05	27	F	-	-	-	11	04	-	-	MADISON V SCHIEBLER - 3 FROST DRIVE BAYVILLE NJ 08721
C	V2	05	01	05	2	M	-	-	-	05	05	-	-	MARK BOLLARO 507 SUNRISE BLVD FORKED RIVER NJ 08731
D														

Code	Value
118a	09
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	07
124	04
125	09
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	02
134	02

New Jersey Police Crash Investigation Report

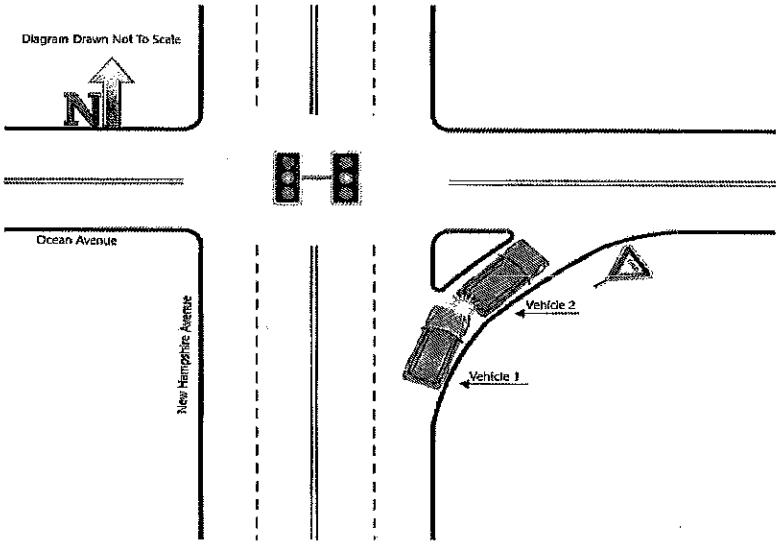
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-005159

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 stated she was driving behind Vehicle 2 northbound on New Hampshire Avenue bearing right to make a right hand turn on to Ocean Avenue. When Vehicle 2 slowed down to yield to a vehicle coming eastbound on Ocean Avenue, she applied the brakes and her tires slid on the wet pavement causing a minor rear-end crash. Vehicle 1 sustained minor damage to the front of the vehicle.

The driver of Vehicle 2 stated she was on New Hampshire Avenue, yielding for a vehicle traveling eastbound on Ocean Avenue when she felt a small bump from the rear of her vehicle which was Vehicle 1 crashing into the rear of her vehicle. Vehicle 2 sustained minor damage to the rear of the vehicle.

No injuries were reported.

Based on my observations and statements provided by both drivers, Vehicle 1 is at fault for the collision.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RUSK J	388	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-005152
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	01/20/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1506
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	1255 STATE HWY 70 W
11 Speed Limit	15
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	
17 Cross Road Name	
20 Route/Name	
21 Latitude	40.05191
22 Longitude	-74.18701

☐ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: 19 Ramp ☐ To ☐ From: ☐ NB ☐ EB ☐ SB ☐ WB

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	F981077-1	54 Policy No.	6022983822061
25 NJ Ins. Code	426	55 NJ Ins. Code	884
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	FREDERICK L PANCKERI -	56 Driver's First Name / Initial / Last Name	- - - -
29 Sex	M	59 Sex	-
27 Number & Street	27 HARROGATE LANE	57 Number & Street	-
28 City / State / Zip	MANCHESTER NJ 08759	58 City / State / Zip	- - -
30 Eyes	2	60 Eyes	-
DL Class	D	DL Class	-
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	-
32 Driver's License Number	P03902687301352	62 Driver's License Number	-
33 DOB	01/01/1935	63 DOB	-
34 Expires (mm yy)	01 26	64 Expires (mm yy)	- -
35 Owner's First Name / Initial / Last Name	☐ Same As Driver FREDERICK L PANCKERI -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver KEVIN J HAND -
36 Number & Street	27 HARROGATE LANE	66 Number & Street	1264 MIDDLE AVE
37 City / State / Zip	MANCHESTER NJ 08759	67 City / State / Zip	WATERFORD WORK NJ 08089
38 Make	PONT	68 Make	FORD
39 Model	VIB	69 Model	150
40 Color	SIL	70 Color	WHI
41 Year	2008	71 Year	2016
42 Plate No.	PANCK	72 Plate No.	U62LSC
43 State	NJ	73 State	NJ
44 VIN	5Y2SL65848Z419879	74 VIN	1FTEW1EG9GFB55315
45 Expires	10 22	75 Expires	09 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	76 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	87	M	-	-	-	11	04	-	-	FREDERICK L PANCKERI - 27 HARROGATE LANE MANCHESTER NJ 08759
B														
C														
D														

Left margin code	Value
96	05
97	01
98	01
99	09
100a	01
100b	04
101	02
102	02
103	05
104	2
105	04
106	-
107	-
108	01
109	05
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	04

Right margin code	Value
118a	20
118b	-
119a	25
119b	-
120a	01
120b	-
121a	-
121b	-
122	07
123	10
124	04
125	04
126a	28
126b	-
126c	-
126d	-
126e	28
127a	26
127b	-
127c	-
127d	-
127e	26
128	28
129	12
130	12
131	12
132	12
133	02
134	02

New Jersey Police Crash Investigation Report

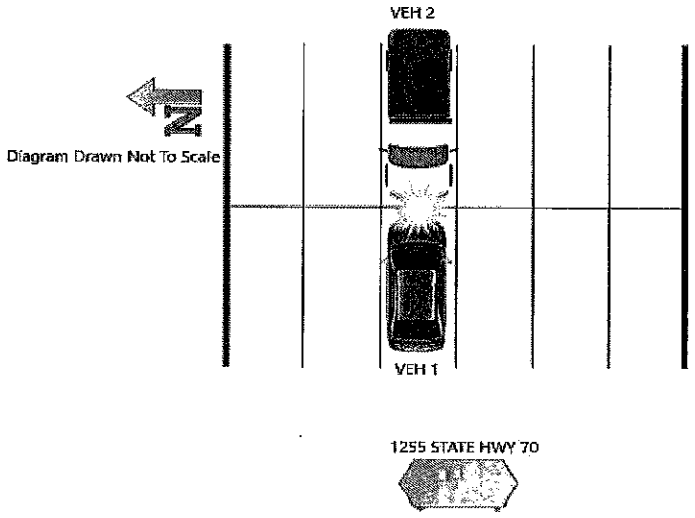
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-005152

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE ONE WAS ATTEMPTING TO PARK IN A PARKING SPOT FACING WEST IN THE PARKING LOT OF 1255 STATE HWY 70 W. AS VEHICLE ONE WAS PARKING, DRIVER ONE STATED HIS FOOT SLIPPED OF THE BRAKE AND HIS VEHICLE STRUCK VEHICLE TWO, WHICH WAS PARKED DIRECTLY ACROSS FROM VEHICLE ONE FACING EAST. VEHICLE TWO AT THE TIME WAS PARKED LEGALLY, AND UNOCCUPIED. DRIVER ONE SUFFERED NO INJURIES, BOTH VEHICLES SUFFERED MINOR DAMAGE. NO SUMMONS WERE ISSUED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SOLOMON A	380	E. MIICK	307	☐ Pending ☒ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Value
96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	02
103	02
104	1
105	11
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	02
117	-

1 Case Number: 22-000125
2 Police Dept of: LAKEWOOD TOWNSHIP P Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 01/01/22
5 Day Of Week: SATURDAY
6 Time (use 2400 hrs): 1903
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: OCEAN AVE (Road Name) Dir:
11 Speed Limit: 35
12 Route No.: 0088 Suffix: 13 Milepost:
☐ At Intersection With
14: 50 15: ☒ Feet ☐ Miles 16: ☐ N ☒ E ☐ S ☐ W of: HOOVER AVE
17 Cross Road Name
18 Speed Limit: 25
19 Ramp: ☐ To ☐ From:
20 Route/Name: ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude: 40.082290
22 Longitude: -74.166570

Code	Value
118a	49
118b	-
119a	-
119b	-
120a	01
120b	-
121a	-
121b	-
122	01
123	-
124	04
125	-
126a	56
126b	-
126c	-
126d	-
126e	-
127a	-
127b	-
127c	-
127d	-
127e	-
128	56
129	02
130	02
131	-
132	-
133	04
134	-

Vehicle 1

23 Veh #: 1
24 Policy No.: F225913-3
25 NJ Ins. Code: 426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: OMOLOLA Initial: A Last Name: AYOOLA -
29 Sex: F
27 Number & Street: 985 BARNACLE WAY
28 City: MANAHAWKIN State: NJ Zip: 08050
30 Eyes: 02 DL Class: D Restrictions: - Endorsements: -
31 State: NJ
32 Driver's License Number: A96736056160792
33 DOB (mm dd yyyy): 10/05/1979
34 Expires (mm yy): 10 24
35 Owner's: ☐ Same As Driver First Name: OMOLOLA Initial: A Last Name: AYOOLA -
36 Number & Street: 985 BARNACLE WAY
37 City: MANAHAWKIN State: NJ Zip: 08050
38 Make: TOYT 39 Model: RAV 40 Color: BRO 41 Year: 2014 42 Plate No.: D92DYJ 43 State: NJ
44 VIN: 2T3RFREV4EW126265
45 Expires: 01 22
46 Vehicle Removed To:
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine
Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill
Hazard Class Placard No.
50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity:
Number & Street:
City: State: Zip:

Vehicle 2

53 Veh #: -
54 Policy No.: -
55 NJ Ins. Code: -
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: - Initial: - Last Name: - -
59 Sex: -
57 Number & Street: -
58 City: - State: - Zip: -
60 Eyes: - DL Class: - Restrictions: - Endorsements: -
61 State: -
62 Driver's License Number: -
63 DOB (mm dd yyyy): -
64 Expires (mm yy): - -
65 Owner's: ☐ Same As Driver 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: -
74 VIN: -
75 Expires: - -
76 Vehicle Removed To: -
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine
Results: 0. - % ☐ Pending
79 Hazardous Material: ☐ None ☐ On Board ☐ Spill
Hazard Class: - Placard No.: -
80 Carrier No.: ☐ USDOT - ☐ MC/MX - ☐ None
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity: -
Number & Street: -
City: - State: - Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	42	F	-	-	-	11	04	-	-	OMOLOLA A AYOOLA - 985 BARNACLE WAY MANAHAWKIN NJ 08050
B														
C														
D														

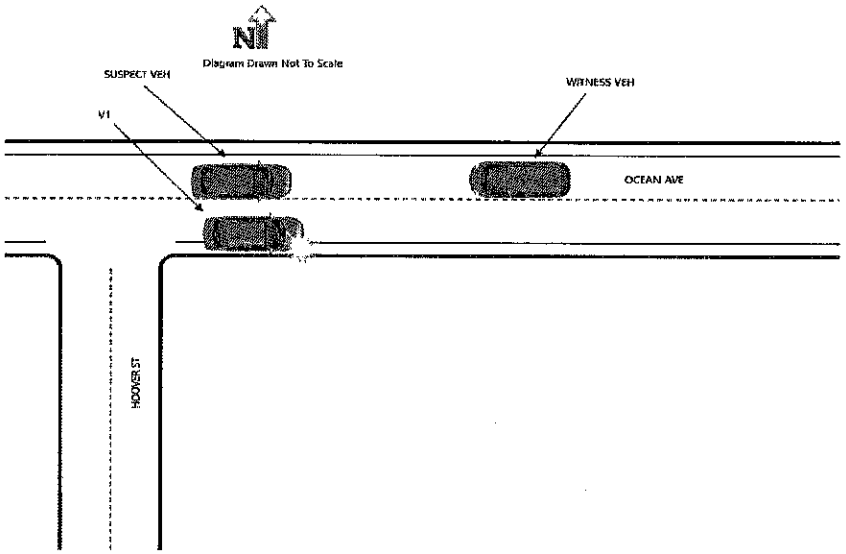
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-000125

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle one stated she was traveling East on Ocean Ave, just past Hoover Ave. Behind her, she saw the suspect vehicle driving in a careless manner, ultimately attempting to pass her in a double yellow. Ahead, Driver of vehicle one observed oncoming traffic. To avoid a head on collision next to her, Driver of vehicle one attempted to move to the shoulder. In doing so, she struck the curb, causing both her passenger side tires to deflate.

Driver of the suspect vehicle stated she was driving behind vehicle one. She further stated she believed there were two Eastbound lanes and attempted to go around vehicle one. While passing vehicle one, she observed traffic coming at her head on. Driver of the suspect vehicle stated due to vehicle one moving to the shoulder, she moved into the Eastbound lane and avoided a head on collision.

Driver of the witness vehicle stated he was traveling West on Ocean Ave. While going West, he observed the suspect vehicle illegally pass vehicle one and driving in a careless manner. To avoid a head on collision, witness stated he moved to the shoulder.

As a result of my investigation, I determined the driver of the suspect vehicle to be at fault for vehicle ones crash, due to improper passing and careless driving.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GRANT M	396	CM	332	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☒ Change Report

1 Case Number: 22-000125

2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

3 Station/Precinct:

10 Crash Occurred On: ☐ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:

Road Name | Dir | 11 Speed Limit | 12 Route No. | Suffix | 13 Milepost | 18 Speed Limit

14 15 16

19 Ramp ☐ To ☐ From: | 17 Cross Road Name | ☐ NB ☐ EB ☐ SB ☐ WB | 20 Route/Name

21 Latitude | 22 Longitude

4 Date of Crash (mm dd yy)	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured
01/01/22	SATURDAY	1903	1514	--	--

23 Veh # | 24 Policy No. | 25 NJ Ins. Code | ☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

53 Veh # | 54 Policy No. | 55 NJ Ins. Code | ☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: OMOLOLA | Initial: A | Last Name: AYOOLA | 29 Sex: -

56 Driver's First Name: - | Initial: - | Last Name: - | 59 Sex: -

27 Number & Street | 28 City | State | Zip

57 Number & Street | 58 City | State | Zip

30 Eyes: 0 | DL Class | Restrictions | Endorsements | 31 State

60 Eyes | DL Class | Restrictions | Endorsements | 61 State

32 Driver's License Number | 33 DOB (mm dd yyyy) | 34 Expires (mm yy)

62 Driver's License Number | 63 DOB (mm dd yyyy) | 64 Expires (mm yy)

35 Owner's First Name | Initial | Last Name | ☐ Same As Driver

65 Owner's First Name | Initial | Last Name | ☐ Same As Driver

36 Number & Street

66 Number & Street

37 City | State | Zip

67 City | State | Zip

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

44 VIN | 45 Expires

74 VIN | 75 Expires

46 Vehicle Removed To: ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

76 Vehicle Removed To: ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☐ Driver ☐ Police

77 Authority: ☐ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.___ % ☐ Pending

49 Hazardous Material: ☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.

78 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.___ % ☐ Pending

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☐ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

80 Carrier No.: ☐ USDOT ☐ MC/MX ☐ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity | Number & Street | City | State | Zip

82 Motor Carrier or Government Entity | Number & Street | City | State | Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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														
B														
C														
D														

New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-000125

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

The purpose of this NJTR-1 is to identify the suspect in the original NJTR-1 as Precious C Onuwa. Precious Onuwa's information has been uploaded to the Spillman case file

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GRANT M	396	KCM	335	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	01

1 Case Number: 22-002229

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

10 Crash Occurred On: RIVER AVE — Road Name — Dir: - — 11 Speed Limit: 45 — 12 Route No.: 0009 — Suffix: - — 13 Milepost: -

☐ At Intersection With — Road Name: OAK ST

☒ Feet ☐ Miles — 14: 25 — 15

☒ N ☐ E ☐ S ☐ W — 16

18 Speed Limit: 25

19 Ramp ☐ To ☐ From: - — 17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

4 Date of Crash (mm dd yy): 01/10/22 — 5 Day Of Week: MONDAY — 6 Time (use 2400 hrs): 1718 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: -- — 21 Latitude: 40.066950 — 22 Longitude: -74.218550

118a	25
118b	-
119a	09
119b	-
120a	01
120b	-
121a	01
121b	-
122	07
123	01
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	12
132	12
133	02
134	02

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 939412296 — 25 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: MIRIAM — Initial: - — Last Name: BRAUN — 29 Sex: F

27 Number & Street: 53 RENA LN

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 02 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: B72295580053872 — 33 DOB (mm dd yyyy): 03/12/1987 — 34 Expires (mm yy): 03 25

35 Owner's First Name: VOLVIE — Initial: - — Last Name: BERKOVIC — ☐ Same As Driver

36 Number & Street: 109 HADASSAH LN

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: TOYT — 39 Model: CAM — 40 Color: GRY — 41 Year: 2017 — 42 Plate No.: P39MCK — 43 State: NJ

44 VIN: 4T1BF1FK8HU369632 — 45 Expires: 01 23

46 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

50 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2 — 54 Policy No.: - — 55 NJ Ins. Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: ILANA — Initial: - — Last Name: ROTEM — 59 Sex: F

57 Number & Street: 1851 HIDDEN BROOK CT

58 City: TOMS RIVER — State: NJ — Zip: 08753

60 Eyes: 05 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: R67603580059995 — 63 DOB (mm dd yyyy): 09/28/1999 — 64 Expires (mm yy): 09 24

65 Owner's First Name: JANETT — Initial: - — Last Name: ROTEM — ☐ Same As Driver

66 Number & Street: 1851 HIDDEN BROOK COURT

67 City: TOMS RIVER — State: NJ — Zip: 08753

68 Make: HYUN — 69 Model: SAN — 70 Color: SIL — 71 Year: 2018 — 72 Plate No.: J34KDG — 73 State: NJ

74 VIN: KM8SMDHF2JU280541 — 75 Expires: 07 22

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

80 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
02	39:6B-2	1514 A 291068	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	34	F	-	-	-	11	04	-	-	MIRIAM - BRAUN - 53 RENA LN LAKEWOOD NJ 08701 - -
B	01	03	01	05	11	F	-	-	-	11	04	-	-	CHAVA - BRAUN - 53 RENA LN LAKEWOOD NJ 08701 - -
C	02	01	01	05	22	F	-	-	-	11	04	-	-	ILANA - ROTEM - 1851 HIDDEN BROOK CT TOMS RIVER NJ 08753 - -
D														

New Jersey Police Crash Investigation Report

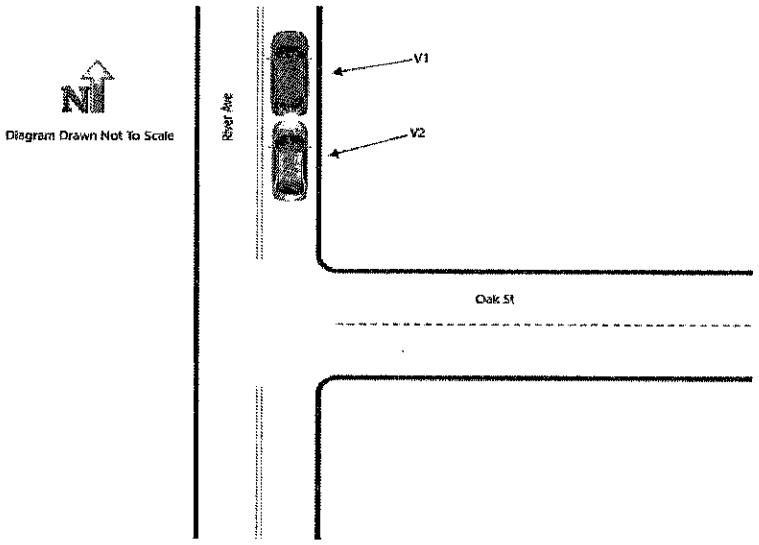
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-002229

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated, she was in northbound stop and go traffic on River Ave. She stated, while in traffic she was rear ended by vehicle 2. The damage was primarily to the rear. No injuries reported.

Driver 2 stated, she was traveling northbound on River Ave. She stated, she believed vehicle 1 began to travel and accidently collided into the rear. The damage was primarily to the front end. No injuries reported.

As a result of my investigation, I, Patrolman Connor Woods #418 determined driver 2 at fault for the crash due to following to closely.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WOODS, C	418	E. MIICK	307	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☒ Change Report

Field	Value
1 Case Number	22-002229
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	01/10/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1718
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	RIVER AVE
Dir	-
11 Speed Limit	45
12 Route No.	0009
Suffix	-
13 Milepost	-
14	25
15	☒ Feet ☐ Miles ☐ At Intersection With
16	☒ N ☐ E ☐ S ☐ W of:
17 Cross Road Name	OAK ST
18 Speed Limit	25
19 Ramp	☐ To ☐ From: -
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.066950
22 Longitude	-74.218550

Vehicle 1

Field	Value
23 Veh #	-
24 Policy No.	-
25 NJ Ins. Code	-
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	MIRIAM - BRAUN -
29 Sex	F
27 Number & Street	53 RENA LN
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	B72295580053872
33 DOB	03/12/1987
34 Expires (mm yy)	03 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - - -
36 Number & Street	-
37 City / State / Zip	- - -
38 Make	-
39 Model	-
40 Color	-
41 Year	-
42 Plate No.	-
43 State	-
44 VIN	-
45 Expires	- -
46 Vehicle Removed To	-
	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. % ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- - -

Vehicle 2

Field	Value
53 Veh #	2
54 Policy No.	006962761U71010
55 NJ Ins. Code	355
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name / Initial / Last Name	ILANA - ROTEM -
59 Sex	F
57 Number & Street	1851 HIDDEN BROOK CT
58 City / State / Zip	TOMS RIVER NJ 08753
60 Eyes	05
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	R67603580059995
63 DOB	09/28/1999
64 Expires (mm yy)	09 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver - - - -
66 Number & Street	-
67 City / State / Zip	- - -
68 Make	-
69 Model	-
70 Color	-
71 Year	-
72 Plate No.	-
73 State	-
74 VIN	-
75 Expires	- -
76 Vehicle Removed To	-
	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☐ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. % ☐ Pending
79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ None ☐ 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	-
Number & Street	-
City / State / Zip	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
02	39:6B-2	1514 A 291069			

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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														
B														
C														
D														

Margin fields	
96	-
97	-
98	-
99	-
100a	-
100b	-
101	-
102	-
103	-
104	1
105	-
106	-
107	-
108	-
109	-
110	-
111	-
112	-
113	-
114	-
115	-
116	-
117	-
118a	-
118b	-
119a	-
119b	-
120a	-
120b	-
121a	-
121b	-
122	-
123	-
124	-
125	-
126a	-
126b	-
126c	-
126d	-
126e	-
127a	-
127b	-
127c	-
127d	-
127e	-
128	-
129	-
130	-
131	-
132	-
133	-
134	-

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-002229

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Change report solely reflects box 54 and 55 completed for insurance provided after report was submitted. In addition, box 137 updated due to improper ticket number listed in initial report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
PTL. C WOODS	418	DIBIASE	286	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 21-121502
2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01
3 Station/Precinct: -
4 Date of Crash (mm dd yy): 11/08/21
5 Day Of Week: MONDAY
6 Time (use 2400 hrs): 1623
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: 10 AMERICA AVENUE | Road Name | Dir: -
11 Speed Limit: 15
12 Route No.: - | Suffix: - | 13 Milepost: -
☐ At Intersection With
14: - ☐ Feet ☐ Miles (15) ☐ N ☐ E ☐ S ☐ W (16) of: -
17 Cross Road Name: -
19 Ramp ☐ To ☐ From: -
18 Speed Limit: -
☐ NB ☐ EB ☐ SB ☐ WB
20 Route/Name:
21 Latitude: 40.079400
22 Longitude: -74.183160

Left margin codes: 96: 05 | 97: 01 | 98: 01 | 99: 07 | 100a: 01 | 100b: 04 | 101: 02 | 102: 01 | 103: 01 | 104: 2 | 105: 05 | 106: - | 107: - | 108: 01 | 109: 01 | 110: 01 | 111: 01 | 112: - | 113: - | 114: - | 115: - | 116: 04 | 117: 02

Right margin codes: 118a: 04 | 118b: - | 119a: 25 | 119b: - | 120a: 01 | 120b: - | 121a: 01 | 121b: - | 122: 02 | 123: 01 | 124: 08 | 125: 04 | 126a: 26 | 126b: - | 126c: - | 126d: - | 126e: 26 | 127a: 26 | 127b: - | 127c: - | 127d: - | 127e: 26 | 128: 26 | 129: 01 | 130: 01 | 131: 01 | 132: 01 | 133: 02 | 134: 02

Vehicle 1

23 Veh #: 1
24 Policy No.: 5129J 000798
25 NJ Ins. Code: 917
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: SHOSHANA | Initial: - | Last Name: MIZRACHI | - | 29 Sex: F
27 Number & Street: 25 N APPLE ST
28 City: LAKEWOOD | State: NJ | Zip: 08701
30 Eyes: 04 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ
32 Driver's License Number: M47727090062964
33 DOB (mm dd yyyy): 12/31/1996
34 Expires (mm yy): 12 24
35 Owner's ☐ Same As Driver | First Name: SHOSHANA | Initial: - | Last Name: MIZRACHI | -
36 Number & Street: 25 N APPLE ST
37 City: LAKEWOOD | State: NJ | Zip: 08701
38 Make: HYUN | 39 Model: SON | 40 Color: GRY | 41 Year: 2018 | 42 Plate No.: H34KJN | 43 State: NJ
44 VIN: 5NPE24AF2JH723668 | 45 Expires: 08 22
46 Vehicle Removed To: -
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -
50 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: -
Number & Street: -
City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2
54 Policy No.: 939692619
55 NJ Ins. Code: 054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: RACHEL | Initial: - | Last Name: ENGELMAN | - | 59 Sex: F
57 Number & Street: 1638 WINSTON CT
58 City: TOMS RIVER | State: NJ | Zip: 08755
60 Eyes: 04 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NY
62 Driver's License Number: 546624020
63 DOB (mm dd yyyy): 04/15/1997
64 Expires (mm yy): 04 20
65 Owner's ☐ Same As Driver | First Name: TZVI | Initial: - | Last Name: DREW | -
66 Number & Street: 19 HOPE TER
67 City: LAKEWOOD | State: NJ | Zip: 08701
68 Make: HYUN | 69 Model: SAN | 70 Color: BLK | 71 Year: 2017 | 72 Plate No.: A57LUL | 73 State: NJ
74 VIN: KM8SM4HF0HU187320 | 75 Expires: 09 22
76 Vehicle Removed To: -
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -
80 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity: -
Number & Street: -
City: - | State: - | Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No
-

Oper.	136 Charge	137 Summons No.	Oper.	138 Charge	139 Summons No.
02	39:3-10	290530	-		-

Oper.	140 Charge	141 Summons No.	Oper.	142 Charge	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	05	24	F	-	-	-	11	04	-	-	SHOSHANA - MIZRACHI - 25 N APPLE ST LAKEWOOD NJ 08701
B	01	04	01	05	1	F	-	-	-	06	06	-	-	CHANA - MIZRACHI - 25 N APPLE ST LAKEWOOD NJ 08701
C	02	01	01	05	24	F	-	-	-	11	04	-	-	RACHEL - ENGELMAN - 1638 WINSTON CT TOMS RIVER NJ 08755
D	02	05	01	05	3	M	-	-	-	11	04	-	-	ZEV - DREW - 1638 WINSTON CT TOMS RIVER NJ 08755

New Jersey Police Crash Investigation Report

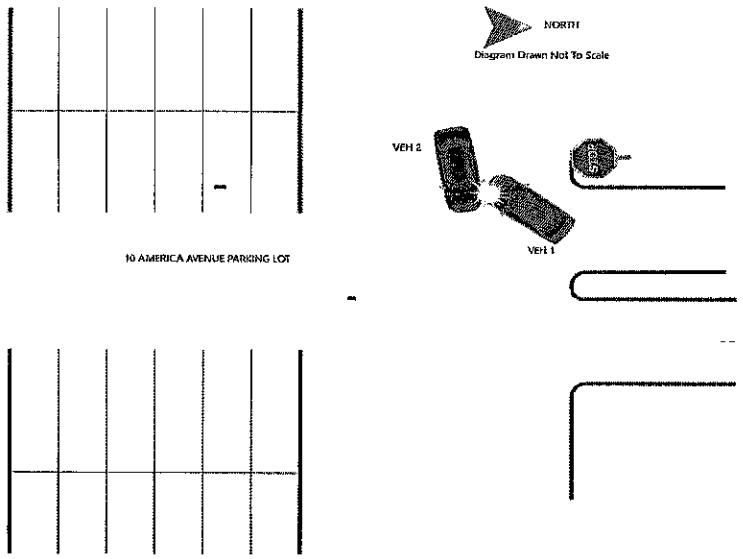
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 21-121502

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E	02	06	01	05	1	F	-	-	-	05	05	-	-	ELI - DREW - 1638 WINSTON CT TOMS RIVER NJ 08755
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was making a right turn into the parking lot of 10 America Ave. Upon her making the right turn, vehicle 2 was traveling east in the parking lot and making a left turn to exit the parking lot. She stated as she made the right turn into the parking lot, her vehicle and vehicle 2 crashed.

Driver of vehicle 2 stated she was traveling east in the parking lot of 10 America Ave. She stated she was making a left turn to leave the parking lot and vehicle 1 took the turn to wide and crashed into her vehicle.

Vehicle 1 sustained minor damage to the front drivers side bumper and was driven from the scene. Vehicle 2 sustained minor damage to the front drivers side bumper and was driven from the scene. No injuries were reported at the scene.

Driver 2 was issued one motor vehicle summons for an expired drivers license.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VADINO, L	419	CM	332	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☐ Non-Reportable ☒ Change Report

1 Case Number: 21-121502

2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 11/08/21

5 Day Of Week: MONDAY

6 Time (use 2400 hrs): 1623

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: ☐ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: Road Name Dir

11 Speed Limit

12 Route No. Suffix 13 Milepost

18 Speed Limit

14 15 16

19 Ramp ☐ To ☐ From:

17 Cross Road Name

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude 22 Longitude

23 Veh # 24 Policy No. 25 NJ Ins. Code

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: SHOSHANA Initial: - Last Name: MIZRACHI - 29 Sex

27 Number & Street

28 City State Zip

30 Eyes DL Class Restrictions Endorsements 31 State

32 Driver's License Number 33 DOB (mm dd yyyy) 34 Expires (mm yy)

35 Owner's First Name Initial Last Name

☐ Same As Driver

36 Number & Street

37 City State Zip

38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State

44 VIN 45 Expires

46 Vehicle Removed To

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority

☐ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. % ☐ Pending

49 Hazardous Material

☐ None ☐ On Board ☐ Spill

Hazard Class Placard No.

50 Carrier No.

☐ USDOT ☐ None

☐ MC/MX

51 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City State Zip

53 Veh # 54 Policy No. 55 NJ Ins. Code

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: RACHEL Initial: - Last Name: ENGELMAN - 59 Sex

57 Number & Street

58 City State Zip

60 Eyes DL Class Restrictions Endorsements 61 State

62 Driver's License Number 63 DOB (mm dd yyyy) 64 Expires (mm yy)

65 Owner's First Name Initial Last Name

☐ Same As Driver

66 Number & Street

67 City State Zip

68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State

74 VIN 75 Expires

76 Vehicle Removed To

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority

☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. % ☐ Pending

79 Hazardous Material

☐ None ☐ On Board ☐ Spill

Hazard Class Placard No.

80 Carrier No.

☐ USDOT ☐ None

☐ 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

Number & Street

City State Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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														
B														
C														
D														

New Jersey Police Crash Investigation Report

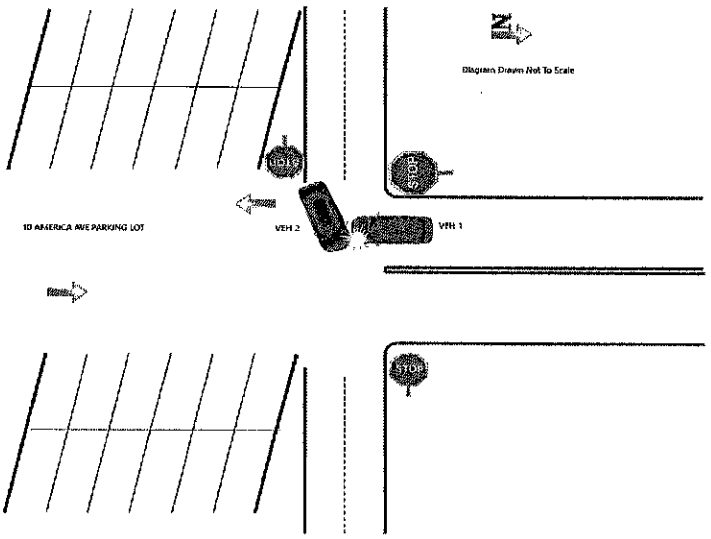
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 21-121502

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

After speaking with driver 1 and re-watching my Body Worn Camera Footage, The initial narrative was incorrect.

Driver 1 stated she was stopped at the stop sign entering the parking lot of 10 America Ave. She stated she traveled straight into the parking lot and vehicle 2 was traveling east through the parking lot. Upon traveling through the stop sign, vehicle 2 was traveling and east both vehicles crashed.

Driver 2 stated she was traveling east through the parking lot of 10 America Ave. She stated as she drove east, vehicle 1 was traveling straight and both vehicles crashed into each other.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VADINO, L	419	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code box	Value
96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	02
103	02
104	2
105	06
106	-
107	-
108	01
109	03
110	01
111	02
112	-
113	01
114	-
115	03
116	03
117	03

1 Case Number: 22-004100

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 01/16/22

5 Day Of Week: SUNDAY

6 Time (use 2400 hrs): 1927

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: NEW HAMPSHIRE AVE — Road Name; Dir: -

11 Speed Limit: 45

12 Route No.: - ; Suffix: - ; 13 Milepost: -

☐ At Intersection With

14: 25 ; 15: ☒ Feet ☐ Miles ; 16: ☐ N ☐ E ☒ S ☐ W of: CORBIN CT

17 Cross Road Name: CORBIN CT

18 Speed Limit: 25

19 Ramp: ☐ To ☐ From: -

20 Route/Name: ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.047040

22 Longitude: -74.197270

Code box	Value
118a	02
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	10
124	04
125	04
126a	28
126b	-
126c	-
126d	-
126e	28
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	06
132	06
133	04
134	02

Vehicle 1

23 Veh #: 1

24 Policy No.: 8454902

25 NJ Ins. Code: 096

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: JUSTIN — Initial: R — Last Name: KING -

29 Sex: M

27 Number & Street: 137 BRAND ROAD

28 City: TOMS RIVER — State: NJ — Zip: 08753

30 Eyes: 05 — DL Class: - — Restrictions: - — Endorsements: -

31 State: NJ

32 Driver's License Number: K44864237902915

33 DOB (mm dd yyyy): 02/28/1991

34 Expires (mm yy): 02 24

35 Owner's: ☐ Same As Driver — First Name: MARY — Initial: E — Last Name: SCHAAFSMA -

36 Number & Street: 137 BRAND RD

37 City: TOMS RIVER — State: NJ — Zip: 08753

38 Make: FORD

39 Model: F15

40 Color: RD

41 Year: 2002

42 Plate No.: G26NCP

43 State: NJ

44 VIN: 1FTRF17282NA91432

45 Expires: 01 23

46 Vehicle Removed To: ACME TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class: - ; Placard No.: -

50 Carrier No.: ☐ USDOT - ☒ None; ☐ MC/MX -

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - State: - Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: IL56-V0001190

55 NJ Ins. Code: 013

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: - — Initial: - — Last Name: - -

59 Sex: -

57 Number & Street: -

58 City: - — State: - — Zip: -

60 Eyes: - — DL Class: - — Restrictions: - — Endorsements: -

61 State: -

62 Driver's License Number: -

63 DOB (mm dd yyyy): -

64 Expires (mm yy): - -

65 Owner's: ☐ Same As Driver — First Name: - — Initial: - — Last Name: SDB PACKAGE & DE -

66 Number & Street: 292 BIRCH BARK DR

67 City: BRICK — State: NJ — Zip: 08723

68 Make: FREI

69 Model: -

70 Color: WHI

71 Year: 2019

72 Plate No.: XFPY13

73 State: NJ

74 VIN: 4UZAC2EA6KCKN3622

75 Expires: 09 22

76 Vehicle Removed To: -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class: - ; Placard No.: -

80 Carrier No.: ☒ USDOT 265752 ☐ None; ☐ 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: -

Number & Street: -

City: - State: - Zip: -

Other

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:4-97	1514-A-291556	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	30	M	-	-	-	11	11	01	-	JUSTIN R KING - 137 BRAND ROAD TOMS RIVER NJ 08753 - -
B	2	03	01	05	29	F	-	-	-	11	11	01	-	TONI L KOEHLER - 90 VICTORIA DR EATONTOWN NJ 07724 - -
C														
D														

New Jersey Police Crash Investigation Report

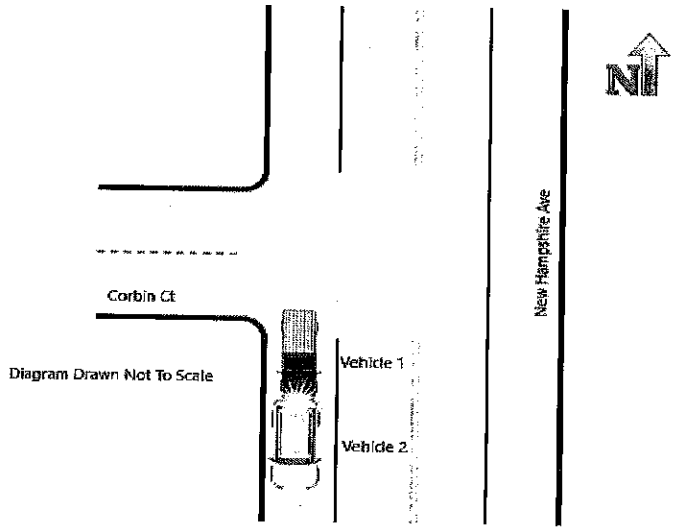
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004100

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of Vehicle 1 stated he was travelling south bound on New Hampshire Ave when he struck the back of Vehicle 2 a Fed-Ex truck, which was parked. Driver of Vehicle 1 could not provide a reason as to why he struck the parked vehicle. Vehicle was legally parked and had no occupants inside during the crash.

Vehicle 1 sustained heavy damage to the front bumper area and to the engine, as well as front airbag deployment. Vehicle 2 sustained denting to the metal step attached, as well as minor denting to the rear panel of Vehicle 2. Owner of Vehicle 2

From my investigation, I concluded that driver of Vehicle 1 was at fault for driver inattention, due to the driver unable to explain why he struck Vehicle 2.

Driver of Vehicle 1 was issued a motor vehicle citation for Careless Driving 39:4-97

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SEEHAUSEN, K	416	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05 | 97: 01 | 98: 07 | 99: 09 | 100a: 01 | 100b: 04 | 101: 02 | 102: 02 | 103: 02 | 104: 2 | 105: 06 | 106: - | 107: - | 108: 01 | 109: - | 110: 01 | 111: - | 112: - | 113: - | 114: - | 115: - | 116: 03 | 117: -

1 Case Number: 22-004119

2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

3 Station/Precinct: -

10 Crash Occurred On: 435 4TH ST

☐ At Intersection With | Road Name | Dir

☐ Feet ☐ N ☐ E of: -

☐ Miles ☐ S ☐ W

14 | 15 | 16

11 Speed Limit: 10 | 12 Route No. | Suffix | 13 Milepost

18 Speed Limit: -

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.093910

22 Longitude: -74.218740

4 Date of Crash (mm dd yy): 01/16/22

5 Day Of Week: SUNDAY

6 Time (use 2400 hrs): 2116

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

118a: 25 | 118b: - | 119a: - | 119b: - | 120a: - | 120b: - | 121a: - | 121b: - | 122: 10 | 123: - | 124: 11 | 125: - | 126a: 28 | 126b: - | 126c: - | 126d: - | 126e: 28 | 127a: - | 127b: - | 127c: - | 127d: - | 127e: - | 128: 28 | 129: 12 | 130: 12 | 131: - | 132: - | 133: 02 | 134: -

Vehicle 1

23 Veh #: 1

24 Policy No.: 4510113154

25 NJ Ins. Code: 100

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: - | Initial: - | Last Name: - | 29 Sex: -

27 Number & Street: -

28 City: - | State: - | Zip: -

30 Eyes: - | DL Class: - | Restrictions: - | Endorsements: - | 31 State: -

32 Driver's License Number: - | 33 DOB (mm dd yyyy): - | 34 Expires (mm yy): - -

35 Owner's ☐ Same As Driver | First Name: GICEL | Initial: - | Last Name: RODRIGUEZ

36 Number & Street: 435 4TH ST

37 City: LAKEWOOD | State: NJ | Zip: 08701

38 Make: NISS | 39 Model: MAX | 40 Color: BLK | 41 Year: 2018 | 42 Plate No.: F65MAU | 43 State: NJ

44 VIN: 1N4AA6AP2JC403984 | 45 Expires: 12 22

46 Vehicle Removed To: -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☒ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill

Hazard Class | Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: -

55 NJ Ins. Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run

56 Driver's First Name: - | Initial: - | Last Name: - | 59 Sex: -

57 Number & Street: -

58 City: - | State: - | Zip: -

60 Eyes: - | DL Class: - | Restrictions: - | Endorsements: - | 61 State: -

62 Driver's License Number: - | 63 DOB (mm dd yyyy): - | 64 Expires (mm yy): - -

65 Owner's ☐ Same As Driver - | 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: -

74 VIN: - | 75 Expires: - -

76 Vehicle Removed To: -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill

Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - ☐ MC/MX - ☐ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	V2	01	00											
B														
C														
D														

New Jersey Police
Crash Investigation Report

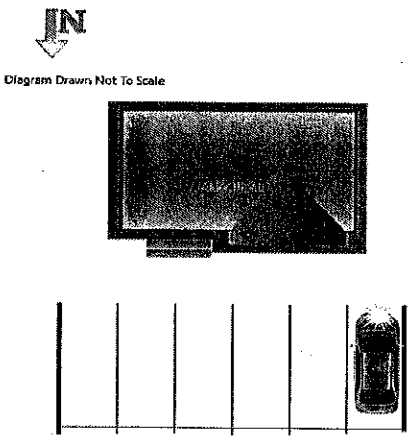
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004119

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was parked in the rear lot of 435 4th St. The owner of Vehicle 1 stated she came out to her vehicle and found that the vehicle had been struck while parked. The front license plate of the vehicle fell off from the impact. The suspect placed the license plate on the vehicle windshield with a phone number. Multiple attempts where made but no answer. Voicemail was left (917-916-5810).

End of report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DILONE L	382	LNJ	322	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	02
103	02
104	2
105	01
106	-
107	-
108	01
109	01
110	01
111	00
112	-
113	00
114	-
115	-
116	04
117	04

1 Case Number: 22-004121

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 01/16/22

5 Day Of Week: SUNDAY

6 Time (use 2400 hrs): 2131

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: CENTRAL AVE

☐ At Intersection With — Road Name — Dir

☒ Feet ☐ Miles — 14 — 15 — 16

☐ N ☒ E ☐ S ☐ W of: SUNSET RD

11 Speed Limit: 40

12 Route No. — Suffix — 13 Milepost

18 Speed Limit: 35

19 Ramp ☐ To ☐ From:

17 Cross Road Name:

20 Route/Name:

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.09102

22 Longitude: -74.23761

118a	25
118b	10
119a	00
119b	-
120a	01
120b	-
121a	00
121b	-
122	08
123	07
124	03
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	12
132	00
133	02
134	00

Vehicle 1

23 Veh #: 1

24 Policy No.: 949272379

25 NJ Ins. Code: 135

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: DOV — Initial: - — Last Name: GINSPARG — 29 Sex: M

27 Number & Street: 6858 LOCKWOOD AVE

28 City: SKOKIE — State: IL — Zip: 60077

30 Eyes: 5 — DL Class: - — Restrictions: - — Endorsements: -

31 State: IL

32 Driver's License Number: G52116093364

33 DOB (mm dd yyyy): 12/23/1993

34 Expires (mm yy): 12 23

35 Owner's First Name: MALKA — Initial: - — Last Name: GELLERMAN

☐ Same As Driver

36 Number & Street: 250 RIDGE AVE

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: KIA — 39 Model: SED — 40 Color: 1 — 41 Year: 2018 — 42 Plate No.: J55NUV — 43 State: NJ

44 VIN: KNDMC5C17J6423618

45 Expires: 06 22

46 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded
☐ Left At Scene ☐ Towed Impounded

47 Authority

☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

49 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class — Placard No.

50 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR

☒ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs
☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2

54 Policy No.:

55 NJ Ins. Code:

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run

56 Driver's First Name — Initial — Last Name — 59 Sex

57 Number & Street

58 City — State — Zip

60 Eyes — DL Class — Restrictions — Endorsements — 61 State

62 Driver's License Number — 63 DOB (mm dd yyyy) — 64 Expires (mm yy)

65 Owner's First Name — Initial — Last Name

☐ Same As Driver

66 Number & Street

67 City — State — Zip

68 Make — 69 Model — 70 Color — 71 Year — 72 Plate No. — 73 State

74 VIN — 75 Expires

76 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded
☐ Left At Scene ☐ Towed Impounded

77 Authority

☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

79 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class — Placard No.

80 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR

☒ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs
☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1		--	2		--

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	28	M	-	-	-	11	04	-	-	DOV - GINSPARG - 6858 LOCKWOOD AVE SKOKIE IL 60077
B	2	01	01	-	U	M	00	00	-	00	00	-	-	DRIVER 2
C														
D														

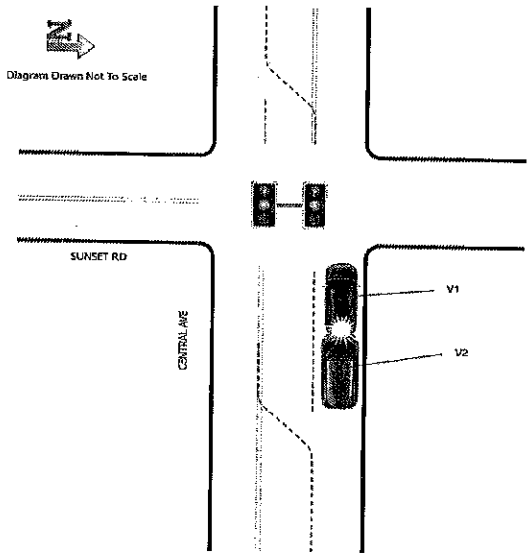
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004121

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling west bound on Central Ave approaching the intersection of Central Ave and Sunset Rd. As V1 reached the intersection, the traffic light turned red for Central Ave and V1 slowed to a stop. As V1 stopped, the driver stated that V2 attempted to stop behind his vehicle but could not. The front bumper of V2 struck the rear bumper of V1 at a slow speed causing minor damage to V1.

After the collision, both drivers exited their vehicles to speak. Mr. Ginsparg stated that he spoke with the driver of V2 that he describes as a Hispanic male of average height and build. Mr. Ginsparg asked D2 if he could use his phone to call his wife and D2 agreed. Mr. Ginsparg then called his wife and decided he wanted to make a police report. When he said this to D2, the male stated "wait one minute" then got into his vehicle and drove off west bound on Central Ave. Mr. Ginsparg gave an Illinois registration number of CW88593 for V2 and described it as a minivan of unknown make, model or color. The registration shows V2 to be a 2007 Nissan registered to a Marvin Monroy in Illinois. He was further able to provide a telephone number of 848-480-7467 for D2 that he obtained from his wife's telephone. I attempted to contact D2 through this number with negative results.

No reported injuries.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MACERINO J	326	LNJ	322	☒ Pending ☐ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	02
103	02
104	2
105	05
106	02
107	02
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	02

1 Case Number: 22-004126
2 Police Dept of: LAKEWOOD TOWNSHIP F Code: 01
3 Station/Precinct: -
4 Date of Crash (mm dd yy): 01/16/22
5 Day Of Week: SUNDAY
6 Time (use 2400 hrs): 2200
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: CEDARBRIDGE AVE (Road Name) Dir: -
11 Speed Limit: 45
12 Route No.: 0528 Suffix: - 13 Milepost: -
☒ At Intersection With ☐ Feet ☐ Miles (14: - 15) ☐N ☐E ☐S ☐W (16) of: NEW HAMPSHIRE (17 Cross Road Name)
18 Speed Limit: 45
19 Ramp ☐ To ☐ From: -
20 Route/Name ☐NB ☐EB ☐SB ☐WB
21 Latitude: 40.075800
22 Longitude: -74.18446

118a	04
118b	02
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	18
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	01
132	01
133	02
134	02

Vehicle 1

23 Veh #: 1
24 Policy No.: 4041-43-04-08
25 NJ Ins. Code: 148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: ESTHER Initial: G Last Name: WEITZNER -
29 Sex: F
27 Number & Street: 19 WALCOTT AVE
28 City: STATEN ISLAND State: NY Zip: 10314
30 Eyes: 5 DL Class: - Restrictions: - Endorsements: -
31 State: NY
32 Driver's License Number: 664981266
33 DOB (mm dd yyyy): 08/17/1998
34 Expires (mm yy): 08 28
35 Owner's ☐ Same As Driver First Name: MAX Initial: L Last Name: SHARF -
36 Number & Street: 45 RUPERT AVE STATEN
37 City: ISLAND State: NY Zip: 10314
38 Make: HOND
39 Model: CIVIC
40 Color: GRY
41 Year: 2020
42 Plate No.: K3J306
43 State: NY
44 VIN: 2HGFC2F63LH590804
45 Expires: 08 22
46 Vehicle Removed To: -
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine
Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill
Hazard Class: - Placard No.: -
50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: -
Number & Street: -
City: - State: - Zip: -

Vehicle 2

53 Veh #: 2
54 Policy No.: 4611-86-88-21
55 NJ Ins. Code: 148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: DULCE Initial: - Last Name: ALVAREZ-FLORES -
59 Sex: F
57 Number & Street: 740 MARLIN AVE
58 City: LAKEWOOD State: NJ Zip: 08701
60 Eyes: 2 DL Class: D Restrictions: - Endorsements: -
61 State: NJ
62 Driver's License Number: A56751820056982
63 DOB (mm dd yyyy): 06/04/1998
64 Expires (mm yy): 06 24
65 Owner's ☐ Same As Driver First Name: DULCE Initial: - Last Name: ALVAREZ-FLORES -
66 Number & Street: 740 MARLIN AVE
67 City: LAKEWOOD State: NJ Zip: 08701
68 Make: AUDI
69 Model: A84
70 Color: BLK
71 Year: 2006
72 Plate No.: 3100LS
73 State: NJ
74 VIN: WAULL44E56N010100
75 Expires: 06 22
76 Vehicle Removed To: -
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine
Results: 0. - % ☐ Pending
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill
Hazard Class: - Placard No.: -
80 Carrier No.: ☐ USDOT - ☒ None ☐ 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: -
Number & Street: -
City: - State: - Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No
-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:4-129	289254	1	39:4-130	289253
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

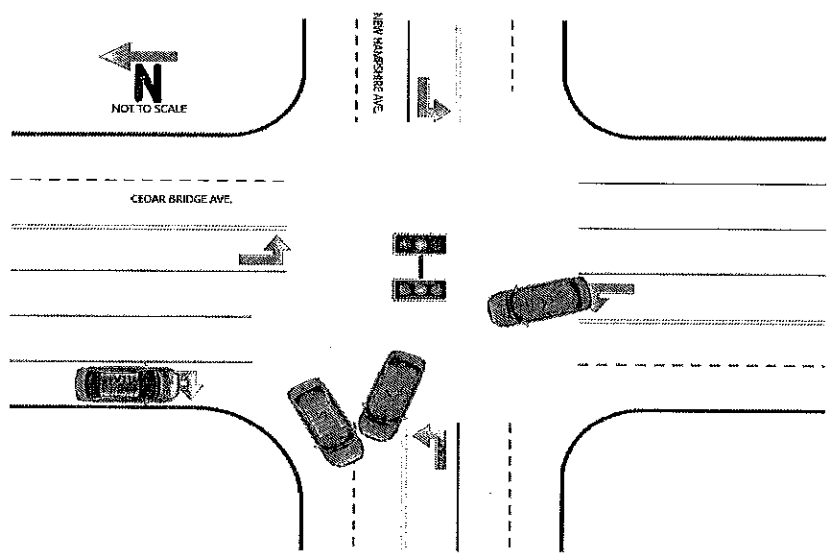
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	23	F	-	-	-	11	04	-	-	ESTHER G WEITZNER - 19 WALCOTT AVE STATEN ISLAND NY 10314 - -
B	2	01	01	05	23	F	-	-	-	11	04	-	-	DULCE - ALVAREZ-FLORES - 740 MARLIN AVE LAKEWOOD NJ 08701 - -
C	2	03	01	05	20	M	-	-	-	11	04	-	-	JOSE E MENA - 339 LAUREL AVE LAKEWOOD NJ 08701 - -
D	-	-	-	-	-	-	-	-	-	-	-	-	-	- - - - - - - - -

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIF Code: 01
	Station: - Case No: 22-004126

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-
G	-	-	-	-	-	-	-	-	-	-	-	-	-	-
H	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I	-	-	-	-	-	-	-	-	-	-	-	-	-	-
J	-	-	-	-	-	-	-	-	-	-	-	-	-	-

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling South on Cedarbridge Ave. as Vehicle 2 was traveling Northbound on Cedarbridge Ave. Both vehicles collided in the intersection of Cedarbridge Ave. and New Hampshire Ave. as they both attempted to turn and head West on New Hampshire Ave.

Driver of Vehicle 2 stated she had a green left turn signal and entered into the intersection of New Hampshire Ave. and Cedarbridge Ave. Vehicle 1 collided with her vehicle on the passenger side causing minor damage to both vehicles when she made a right on red and attempted to turned into the left most lane on New Hampshire Ave.

Driver of Vehicle 1 stated that she was unsure of what the traffic signal was at the time of the collision. She stated that it was dark out. When asked why she did not stop at the time of the incident, she replied by stating she thought the driver of Vehicle 2 would get out of the car to speak to her at the next red light.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DEBARTOLOMEIS D	406	LNJ	322	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	05
100a	01
100b	06
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	01

1 Case Number: 22-003301

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

10 Crash Occurred On: SOUTH CLIFTON AVE — Road Name — Dir: -

☐ At Intersection With

☒ Feet ☐ Miles — 14: 25 — 15

☐ N ☐ E ☒ S ☐ W — 16

of: MAIN ST

11 Speed Limit: 35

12 Route No.: - — Suffix — 13 Milepost:

18 Speed Limit: 35

19 Ramp ☐ To ☐ From: 88

17 Cross Road Name: ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

21 Latitude: - — 22 Longitude: -

4 Date of Crash (mm dd yy): 01/14/22

5 Day Of Week: FRIDAY

6 Time (use 2400 hrs): 1300

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

118a	09
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	08
123	07
124	03
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	12
132	12
133	03
134	03

Vehicle 1

23 Veh #: 1

24 Policy No.: SEE NARRATIVE

25 NJ Ins. Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: BRACHA — Initial: - — Last Name: STURMAN — 29 Sex: F

27 Number & Street: 35 SPRUCE ST

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 02 — DL Class: - — Restrictions: - — Endorsements: -

31 State: ON

32 Driver's License Number: S84200951016117

33 DOB (mm dd yyyy): 11/17/2001

34 Expires (mm yy): 12 22

35 Owner's First Name: SENDOR — Initial: - — Last Name: STURMAN

☐ Same As Driver

36 Number & Street: 46 STORMONT AVENUE

37 City: TORONTO — State: ON — Zip: M5N 2

38 Make: TOYT — 39 Model: AVA — 40 Color: BLU — 41 Year: 2012 — 42 Plate No.: BVRX574 — 43 State: ON

44 VIN: 4T1BK3DB5CU455953

45 Expires: 02 24

46 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

47 Authority

☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

49 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class — Placard No.

50 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: 951258301

55 NJ Ins. Code: 135

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: NICOLAS — Initial: D — Last Name: THOMPSON — 59 Sex: M

57 Number & Street: 161 COVENTRY DR

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 1 — DL Class: D — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: T36015916409921

63 DOB (mm dd yyyy): 09/25/1992

64 Expires (mm yy): 09 23

65 Owner's First Name: NICOLAS — Initial: D — Last Name: THOMPSON

☐ Same As Driver

66 Number & Street: 161 COVENTRY DR

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: FORD — 69 Model: FOC — 70 Color: BLK — 71 Year: 2006 — 72 Plate No.: K75MSE — 73 State: NJ

74 VIN: 1FAFP34N96W118945

75 Expires: 08 21

76 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority

☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

79 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class — Placard No.

80 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	20	F	-	-	-	11	04	-	-	BRACHA - STURMAN - 35 SPRUCE ST LAKEWOOD NJ 08701
B	02	01	01	05	29	M	-	-	-	11	04	-	-	NICOLAS D THOMPSON - 161 COVENTRY DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

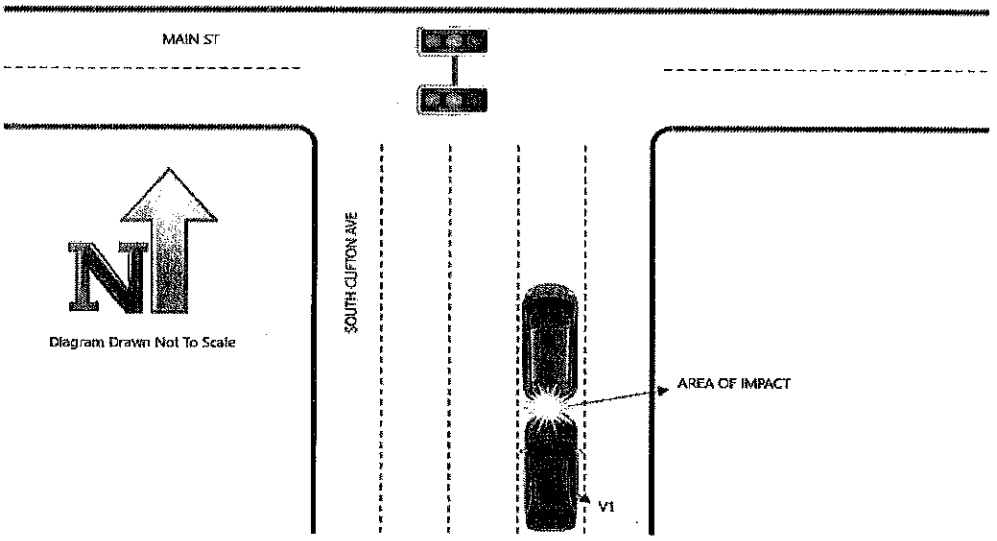
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-003301

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

WHEN I ARRIVED BOTH VEHICLES WERE IN THE MIDDLE LANE ON SOUTH CLIFTON AVE FACING NORTH. BOTH DRIVERS WERE NOT INJURED. THERE WAS SEVERAL DENTS IN BOTH VEHICLES DUE TO THE ACCIDENT BUT NO SERIOUS DAMAGE.

DRIVER OF VEHICLE 1 STATED SHE WAS SLOWING AND STOPPING IN TRAFFIC WHEN SHE ACCIDENTLY HIT THE GAS PEDAL AND STRUCK VEHICLE 2.

DRIVER OF VEHICLE 2 STATED HE WAS STOPPED IN TRAFFIC WHEN VEHICLE 1 STRUCK THE REAR OF HIS VEHICLE.

BASED ON MY INVESTIGATION, DRIVER OF VEHICLE 1 IS A FAULT FOR FOLLOWING TO CLOSELY.

VEHICLE 1 INSURANCE INFORMATION
CHUBB INSURANCE COMPANY OF CANADA
POLICY NUMBER 30594606
AGENT BEDROCK INSURANCE BROKERS INC.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GIBSON M	409	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Value
96	05
97	01
98	01
99	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	01

1 Case Number: 22-003581
2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01
3 Station/Precinct: -
4 Date of Crash (mm dd yy): 01/15/22
5 Day Of Week: SATURDAY

10 Crash Occurred On: NEW HAMPSHIRE AVE — Dir: - — 11 Speed Limit: 45 — 12 Route No.: 0623 — Suffix: - — 13 Milepost: -
☒ At Intersection With ☐ Feet ☐ Miles — ☐ N ☐ E ☐ S ☐ W — of: OCEAN AVE (17 Cross Road Name) — 18 Speed Limit: 45
14: - 15 16
19 Ramp ☐ To ☐ From: -
20 Route/Name — ☐ NB ☐ EB ☐ SB ☐ WB

6 Time (use 2400 hrs): 0824
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: 3
21 Latitude: 40.085580
22 Longitude: -74.176920

Vehicle 1

23 Veh #: 1
24 Policy No.: 928687234
25 NJ Ins. Code: 134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: MARC — Initial: A — Last Name: SEVILLA — - — 29 Sex: M
27 Number & Street: 344 DEWEY AVE; APT B
28 City: LAKEWOOD — State: NJ — Zip: 08701
30 Eyes: 01 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ
32 Driver's License Number: S29295176112991
33 DOB (mm dd yyyy): 12/17/1999
34 Expires (mm yy): 12 20
35 Owner's ☐ Same As Driver — First Name: MARC — Initial: A — Last Name: SEVILLA — -
36 Number & Street: 344 DEWEY AVE; APT B
37 City: LAKEWOOD — State: NJ — Zip: 08701
38 Make: NISS — 39 Model: ALT — 40 Color: RD — 41 Year: 2015 — 42 Plate No.: A34LEG — 43 State: NJ
44 VIN: 1N4AL3APXFN900947 — 45 Expires: 03 22
46 Vehicle Removed To: ACME TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test — Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -
50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: -
Number & Street: -
City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2
54 Policy No.: 934246589
55 NJ Ins. Code: 134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: ISABELLA — Initial: P — Last Name: HERNANDEZ — - — 59 Sex: F
57 Number & Street: 106 YOUNGER ST
58 City: BRICK — State: NJ — Zip: 08724
60 Eyes: 02 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ
62 Driver's License Number: H27183717755042
63 DOB (mm dd yyyy): 05/28/2004
64 Expires (mm yy): 05 25
65 Owner's ☐ Same As Driver — First Name: KIMBERLY — Initial: A — Last Name: HERNANDEZ — -
66 Number & Street: 106 YOUNGER STREET
67 City: BRICK — State: NJ — Zip: 08724
68 Make: NISS — 69 Model: ROG — 70 Color: BLU — 71 Year: 2019 — 72 Plate No.: A74MSA — 73 State: NJ
74 VIN: JN8AT2MV7KW395361 — 75 Expires: 10 22
76 Vehicle Removed To: ACME TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test — Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -
80 Carrier No.: ☐ USDOT - ☒ None ☐ 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: -
Number & Street: -
City: - — State: - — Zip: -

Code	Value
118a	25
118b	-
119a	03
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	56
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	10
132	10
133	04
134	04

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No
-

Oper.	136 Charge	137 Summons No.	Oper.	138 Charge	139 Summons No.
02	39:4-81	289278			

Oper.	140 Charge	141 Summons No.	Oper.	142 Charge	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	02	22	M	05	08	02	11	11	01	6505	MARC A SEVILLA - 344 DEWEY AVE; APT B LAKEWOOD NJ 08701 - -
B	02	01	01	02	17	F	09	08	02	11	11	02	5204	ISABELLA P HERNANDEZ - 106 YOUNGER ST BRICK NJ 08724 - -
C	02	03	01	04	17	F	01	08	02	11	11	02	-	JENNA - AMOGRETTI - 330 MARTIN PL BRICK NJ 08724 - -
D														

New Jersey Police Crash Investigation Report

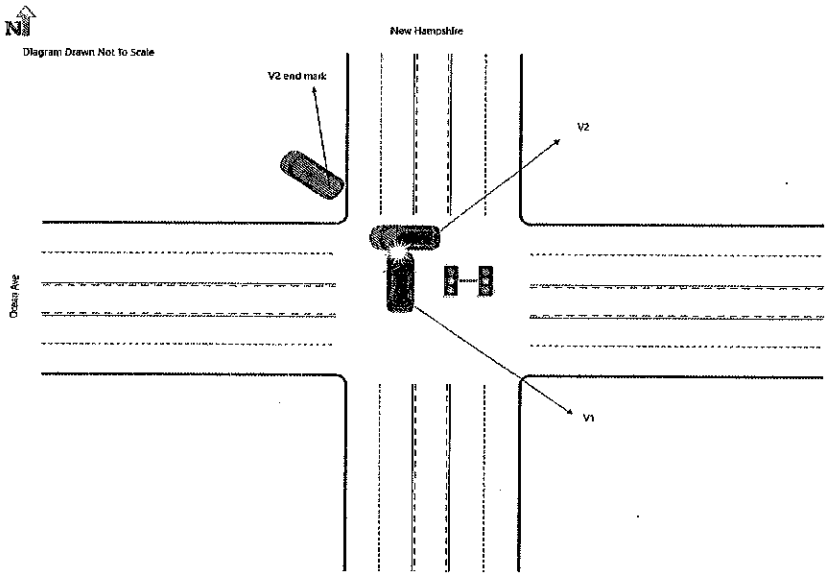
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-003581

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V2 stated that she was traveling west on Ocean Avenue. While traveling west, she proceeded to go through the intersection of New Hampshire & Ocean Ave. As she was driving through the intersection, she noticed a red light. The driver of V2 expressed as soon as she noticed she had a red light, that's when v1 collided into her diver's side. The driver of V2 explained that she didn't notice the red light until the last moment due to the sun in her eyes. The driver of V2 was transported to Hackensack Meridian Jersey Shore University due to complaints of right leg complications. The passenger inside V2 was checked out and treated by EMS at the scene. V2 was disabled and removed from the scene by ACME Towing. The driver of V2 was issued a summons #289278 for failure to obey a traffic signal.

Due to the driver of V1 complaint of chest pain and possible broken ribs, I could not get a statement. V1 was disabled and removed from the scene by ACME Towing.

Witness: Witnesses stated that the driver of V1 was traveling north on New Hampshire. While he was going through the intersection of New Hampshire & Ocean Ave, he collided into V2. Witness mentioned that V1 had a green light and V2 had a red light.

Based on my investigation V2 is at fault for failure to obey traffic signal.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
TOWNSEND T	403	DTWORKOSKI	249	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	05
100a	01
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	04

1 Case Number: 22-003587

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

10 Crash Occurred On: MAIN ST — Road Name — Dir: -

☒ At Intersection With ☐ Feet ☐ Miles — 14 — 15 — 16

☐ N ☐ E ☐ S ☐ W of: CLIFTON AVE

11 Speed Limit: 35

12 Route No.: 0088 — Suffix: - — 13 Milepost: -

18 Speed Limit: 25

17 Cross Road Name:

19 Ramp ☐ To ☐ From: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

21 Latitude: 40.09006 — 22 Longitude: -74.21422

4 Date of Crash (mm dd yy): 01/15/22 — 5 Day Of Week: SATURDAY — 6 Time (use 2400 hrs): 0933 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 955012838 — 25 NJ Ins. Code: 134

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: GABINO — Initial: - — Last Name: GARCIASORIANO - — 29 Sex: M

27 Number & Street: 341 NEW CENTRAL AVE

28 City: JACKSON — State: NJ — Zip: 08527

30 Eyes: 2 — DL Class: I — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: G05542700012912 — 33 DOB (mm dd yyyy): 12/24/1991 — 34 Expires (mm yy): 12 25

35 Owner's: ☒ Same As Driver — First Name: GABINO — Initial: - — Last Name: GARCIASORIANO -

36 Number & Street: 341 NEW CENTRAL AVE

37 City: JACKSON — State: NJ — Zip: 08527

38 Make: CHEV — 39 Model: TBZ — 40 Color: SIL — 41 Year: 2002 — 42 Plate No.: B41PMH — 43 State: NJ

44 VIN: 1GNDT13S122517852 — 45 Expires: 12 22

46 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: — Placard No.:

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2 — 54 Policy No.: 0903733F2630G — 55 NJ Ins. Code: 962

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: ALVARO — Initial: A — Last Name: GORDILLO-RENTERI - — 59 Sex: M

57 Number & Street: 786 BAY AVE

58 City: TOMS RIVER — State: NJ — Zip: 08753

60 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: G65760346111912 — 63 DOB (mm dd yyyy): 11/16/1991 — 64 Expires (mm yy): 11 24

65 Owner's: ☐ Same As Driver — First Name: ALVARO — Initial: A — Last Name: GORDILLO-RENTER -

66 Number & Street: 786 BAY AVE

67 City: TOMS RIVER — State: NJ — Zip: 08753

68 Make: FORD — 69 Model: F15 — 70 Color: GRY — 71 Year: 2021 — 72 Plate No.: N98NZL — 73 State: NJ

74 VIN: 1FTFW1E83MFC16442 — 75 Expires: 09 24

76 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: — Placard No.:

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

118a	03
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	07
130	07
131	02
132	02
133	03
134	03

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	30	M	-	-	-	11	04	-	-	GABINO - GARCIASORIANO - 341 NEW CENTRAL AVE JACKSON NJ 08527
B	02	01	01	05	30	M	-	-	-	11	04	-	-	ALVARO A GORDILLO-RENTERIA - 786 BAY AVE TOMS RIVER NJ 08753
C														
D														

New Jersey Police Crash Investigation Report

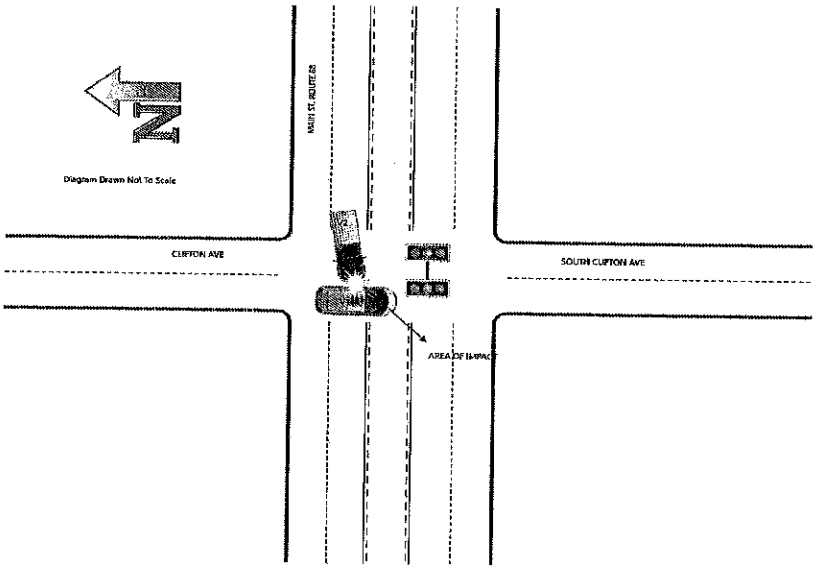
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-003587

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

WHEN I ARRIVED BOTH VEHICLES WERE FACING WEST ON MAIN STREET PARKED ON THE SIDE OF THE ROAD. BOTH VEHICLES HAD MODERATE DAMAGE. THERE WERE NO INJURIES.

DRIVER OF VEHICLE 1 STATED HE WAS HEADING SOUTH ON CLIFTON AVE WHEN HE WASN'T ABLE TO SEE THE LIGHT BECAUSE OF THE SUN AND REALIZED HE WENT THROUGH THE RED LIGHT. IT WAS TOO LATE FOR HIM TO STOP WHICH CAUSED HIM TO COLLIDE WITH VEHICLE 2.

DRIVER OF VEHICLE 2 STATED HE WAS DRIVING WEST ON ROUTE 88 WHEN VEHICLE 1 DISREGARDED THE LIGHT TO WHICH HE TRIED TO AVOID VEHICLE 1 BUT WAS TOO LATE.

BASED ON MY INVESTIGATION, DRIVER OF VEHICLE 1 IS AT FAULT FOR FAILING TO OBSERVE THE TRAFFIC SIGNAL.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GIBSON M	409	DTWORKOSKI	249	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05	97: 01	98: 01	99: 09
100a: 01	100b: 04	101: 02	102: 01
103: 01	104: 1	105: 11	106: -
107: -	108: 01	109: -	110: 01
111: -	112: -	113: -	114: -
115: -	116: 03	117: -	

1 Case Number: 22-003590

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 01/15/22

5 Day Of Week: SATURDAY

6 Time (use 2400 hrs): 0947

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 1

10 Crash Occurred On: 4 SEASONS BLVD (Road Name) Dir: -

11 Speed Limit: 35

12 Route No.: - Suffix: - 13 Milepost: -

☐ At Intersection With ☒ Feet ☐ Miles 250 (14, 15) ☐ N ☐ E ☐ S ☒ W (16) of: GOLDENEDGE WAY (17 Cross Road Name)

18 Speed Limit: 35

19 Ramp: ☐ To ☐ From: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

21 Latitude: 40.03814

22 Longitude: -74.16508

118a: 02	118b: -	119a: -	119b: -
120a: 01	120b: -	121a: -	121b: -
122: 01	123: -	124: 04	125: -
126a: 26	126b: -	126c: -	126d: -
126e: 26	127a: -	127b: -	127c: -
127d: -	127e: -	128: 26	129: 12
130: 12	131: -	132: -	133: 04
134: -			

Vehicle 1

23 Veh #: 1

24 Policy No.: 939674105

25 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: LOUIS Initial: D Last Name: ESPOSITO -

29 Sex: M

27 Number & Street: 70 GREENWAYS LN

28 City: LAKEWOOD State: NJ Zip: 08701

30 Eyes: 2 DL Class: D Restrictions: - Endorsements: -

31 State: NJ

32 Driver's License Number: E80544886404302

33 DOB (mm dd yyyy): 04/01/1930

34 Expires (mm yy): 08 21

35 Owner's: ☐ Same As Driver First Name: DENISE Initial: M Last Name: DEANGELIS-ESPOS -

36 Number & Street: 70 GREENWAYS LN

37 City: LAKEWOOD State: NJ Zip: 08701

38 Make: VOLV 39 Model: S60 - S6 40 Color: GRY 41 Year: 2020 42 Plate No.: N19MTP 43 State: NJ

44 VIN: 7JRA22TK3LG048614

45 Expires: 09 23

46 Vehicle Removed To: ACME TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☐ Driver ☒ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - Placard No.: -

50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - State: - Zip: -

Vehicle 2

53 Veh #: -

54 Policy No.: -

55 NJ Ins. Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: - Initial: - Last Name: - -

59 Sex: -

57 Number & Street: -

58 City: - State: - Zip: -

60 Eyes: - DL Class: - Restrictions: - Endorsements: -

61 State: -

62 Driver's License Number: -

63 DOB (mm dd yyyy): -

64 Expires (mm yy): - -

65 Owner's: ☐ Same As Driver 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: -

74 VIN: -

75 Expires: - -

76 Vehicle Removed To: -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☐ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class: - Placard No.: -

80 Carrier No.: ☐ USDOT - ☒ None ☐ 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: -

Number & Street: -

City: - State: - Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	V1	01	01	03	91	M	08	08	01	11	04	01	-	LOUIS D ESPOSITO - 70 GREENWAYS LN LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

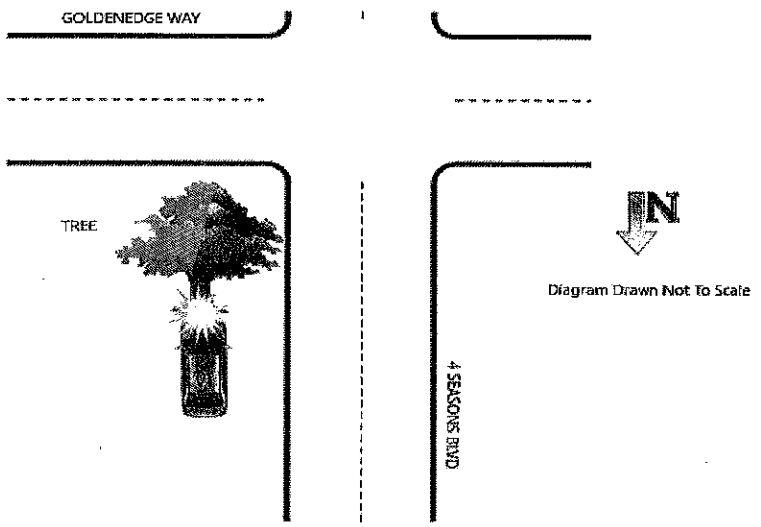
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-003590

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated he was driving South on 4 Seasons Blvd approaching GoldenEdge Way. Driver of V1 stated he went off the road and hit a tree causing damage to the front of V1. When questioning Driver of V1 how did his vehicle crash into the tree his response was he doesn't know why his car went off the road.

Driver of V1 stated he had pain on both his hands due to the airbag deployment but did not want to go seek treatment.

Nothing further to report.

End report

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RODRIGUEZ, B	424	DTWORKOSKI	249	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-003688
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	01/15/22
5 Day Of Week	SATURDAY
6 Time (use 2400 hrs)	1806
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On (Road Name)	NEW HAMPSHIRE AVE
Dir	-
11 Speed Limit	45
12 Route No.	0623
Suffix	-
13 Milepost	-
☐ At Intersection With	
14	500
15	☒ Feet ☐ Miles
16	☐ N ☐ E ☒ S ☐ W
of: 17 Cross Road Name	CEDARBRIDGE AVE
18 Speed Limit	45
19 Ramp	☐ To ☐ From:
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.075800
22 Longitude	-74.18446

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	HPA00002759603	54 Policy No.	4233-83-45-73
25 NJ Ins. Code	017	55 NJ Ins. Code	100
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	CARPIO - CRUZ-SILVINO -	56 Driver's First Name / Initial / Last Name	WILSON J FIGUEROA -
29 Sex	M	59 Sex	M
27 Number & Street	1389 PASADENA ST	57 Number & Street	2215 DEER PATH
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -	60 Eyes / DL Class / Restrictions / Endorsements	1 / - / - / -
31 State	-	61 State	NJ
32 Driver's License Number	-	62 Driver's License Number	F42607877108901
33 DOB	07/12/1976	63 DOB	08/02/1990
34 Expires	- -	64 Expires	08 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver; MARLON - SANDOVAL-ROJAN(-	65 Owner's First Name / Initial / Last Name	☐ Same As Driver; WILSON J FIGUEROA -
36 Number & Street	158 BENNETTS MILLS RD	66 Number & Street	2215 DEER PATH
37 City / State / Zip	JACKSON NJ 08527	67 City / State / Zip	LAKEWOOD NJ 08701
38 Make	FORD	68 Make	HOND
39 Model	150	69 Model	ACC
40 Color	DBL	70 Color	SIL
41 Year	2004	71 Year	2005
42 Plate No.	W69PJS	72 Plate No.	T12DFS
43 State	NJ	73 State	NJ
44 VIN	1FTPX14534NA27658	74 VIN	1HGCM56725A148043
45 Expires	12 22	75 Expires	07 22
46 Vehicle Removed To	-	76 Vehicle Removed To	ACME TOWING
Disposition	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	Disposition	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:3-10	290510	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	V1	01	01	05	45	M	-	-	-	11	04	-	-	CARPIO - CRUZ-SILVINO - 1389 PASADENA ST LAKEWOOD NJ 08701
B	V2	01	01	05	31	M	-	-	-	11	04	02	-	WILSON J FIGUEROA - 2215 DEER PATH LAKEWOOD NJ 08701
C														
D														

Left margin codes:

Code	Value
96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	01
103	01
104	2
105	02
106	-
107	-
108	05
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	03

Right margin codes:

Code	Value
118a	05
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	11
123	01
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	05
127c	-
127d	-
127e	26
128	26
129	02
130	02
131	10
132	12
133	02
134	04

New Jersey Police Crash Investigation Report

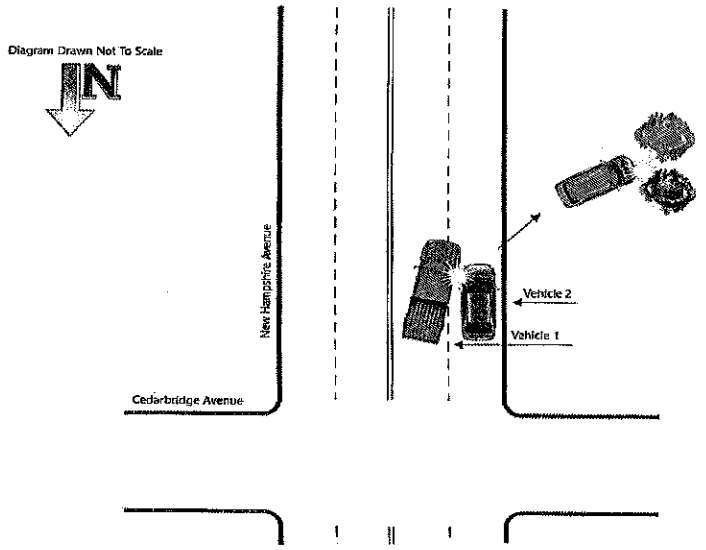
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-003688

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 stated he was driving south on New Hampshire Avenue. As he attempted to switch lanes from the left lane to the right lane, he did not see Vehicle 2 on his right hand side. He struck the drivers side front bumper of Vehicle 2 causing Vehicle 2 to exited the roadway to the right and crash into a brush area. Vehicle 2 sustained minor damage to the passengers side front bumper.

The driver of Vehicle 2 stated he was driving southbound on New Hampshire Avenue on the outside lane when Vehicle 1 cut him off and caused him to exit the roadway to the right and crash into the wooded brush area.

No injuries were reported.

Based on my observations and statements provided by both drivers, Vehicle 1 is at fault for the crash.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RUSK J	388	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 22-003751

2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

3 Station/Precinct: -

10 Crash Occurred On: 1700 MADISON AVE (Road Name) | Dir | 11 Speed Limit: 25 | 12 Route No.: - | Suffix | 13 Milepost: - | 18 Speed Limit: -

☐ At Intersection With | ☐ Feet ☐ Miles | ☐ N ☐ E ☐ S ☐ W of: -

14: - | 15 | 16

17 Cross Road Name | 19 Ramp ☐ To ☐ From: - | ☐ NB ☐ EB ☐ SB ☐ WB

4 Date of Crash (mm dd yy)	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured	21 Latitude	22 Longitude
01/15/22	SATURDAY	2007	1514	--	--	40.108610	-74.221270

20 Route/Name

Vehicle 1

23 Veh #: 1 | 24 Policy No.: 4433628205 | 25 NJ Ins. Code: 639

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: - | Initial: - | Last Name: - | - | 29 Sex: -

27 Number & Street: -

28 City: - | State: - | Zip: -

30 Eyes: - | DL Class: - | Restrictions: - | Endorsements: - | 31 State: -

32 Driver's License Number: - | 33 DOB (mm dd yyyy): - | 34 Expires (mm yy): - -

35 Owner's ☐ Same As Driver | First Name: MARIN | Initial: - | Last Name: BREBAN | -

36 Number & Street: PO BOX 89

37 City: SOUTH FALLSBURG | State: NY | Zip: 12779

38 Make: TOYT | 39 Model: CAM | 40 Color: SIL | 41 Year: 2018 | 42 Plate No.: KLA7630 | 43 State: NY

44 VIN: JTNB11HK0J3050247 | 45 Expires: 05 23

46 Vehicle Removed To:

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

50 Carrier No.: ☐ USDOT - | ☒ None | ☐ MC/MX -

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State | Zip: -

Vehicle 2

53 Veh #: 2 | 54 Policy No.: 6075088362061 | 55 NJ Ins. Code: 884

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: JUDAH | Initial: - | Last Name: WEISS | - | 59 Sex: M

57 Number & Street: 1541 E 7TH ST

58 City: BROOKLYN | State: NY | Zip: 11230

60 Eyes: 02 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NY

62 Driver's License Number: 879164651 | 63 DOB (mm dd yyyy): 03/10/1994 | 64 Expires (mm yy): 03 29

65 Owner's ☐ Same As Driver | First Name: JUDAH | Initial: - | Last Name: WEISS | -

66 Number & Street: 1541 E 7TH ST

67 City: BROOKLYN | State: NY | Zip: 11230

68 Make: HOND | 69 Model: PIL | 70 Color: WHI | 71 Year: 2021 | 72 Plate No.: D34MYH | 73 State: NJ

74 VIN: 5FNYF6H20MB022663 | 75 Expires: 01 24

76 Vehicle Removed To:

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class: - | Placard No.: -

80 Carrier No.: ☐ USDOT - | ☒ None | ☐ 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: -

Number & Street: -

City: - | State | Zip: -

Other

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	2	01	01	05	27	M	-	-	-	11	04	-	-	JUDAH - WEISS - 1541 E 7TH ST BROOKLYN NY 11230
B														
C														
D														

Margin codes

Field	Value
96	05
97	01
98	06
99	09
100a	01
100b	04
101	02
102	01
103	01
104	2
105	06
106	-
107	-
108	01
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	03

Field	Value
118a	-
118b	-
119a	10
119b	-
120a	-
120b	-
121a	01
121b	01
122	10
123	13
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	28
127b	-
127c	-
127d	-
127e	28
128	26
129	06
130	06
131	06
132	06
133	02
134	02

New Jersey Police Crash Investigation Report

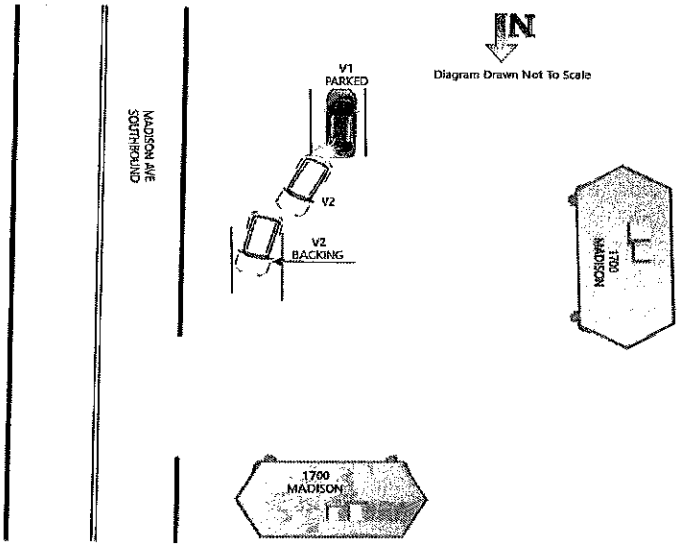
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-003751

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was Parked (Unoccupied) facing Southbound in a parking spot at the address of 1700 Madison.

Driver 2 stated his Vehicle was parked facing Northbound in a parking spot at the address of 1700 Madison Ave. He stated he felt it was safe to back out of the parking spot. Driver 2 stated he backed out of the parking spot too much and collided into the rear of Vehicle 1.

I determined Crash was caused by Vehicle 2 for Backing Unsafely.

A short time later Owner of Vehicle 1 arrived on scene and provided documents.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MCAVOY D	372	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Field	Value
96: 05	1 Case Number	22-003772
97: 01	2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
98: 07	3 Station/Precinct	-
99: 07	4 Date of Crash (mm dd yy)	01/15/22
100a: 01	5 Day Of Week	SATURDAY
	6 Time (use 2400 hrs)	2047
	7 Municipality Code	1514
	8 Total Killed	--
	9 Total Injured	--

10 Crash Occurred On: CUSHMAN ST - (Road Name, Dir)
11 Speed Limit: 25
12 Route No.: - Suffix: - 13 Milepost: -
☐ At Intersection With
14: 30 ☒ Feet ☐ Miles 15
16: ☐ N ☐ E ☐ S ☒ W of: CHATEAU DR (17 Cross Road Name)
18 Speed Limit: 25
19 Ramp ☐ To ☐ From: -
20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude: 40.064720
22 Longitude: -74.222060

Right margin codes: 118a: 25; 118b: -; 119a: 00; 119b: -; 120a: 01; 120b: -; 121a: 00; 121b: -; 122: 10; 123: 00; 124: -; 125: -; 126a: 26; 126b: 56; 126c: -; 126d: -; 126e: 26; 127a: 28; 127b: -; 127c: -; 127d: -; 127e: 28; 128: 28; 129: 07; 130: 07; 131: 00; 132: 00; 133: 03; 134: 00

Left margin codes: 100b: 04; 101: 02; 102: 01; 103: 01; 104: 2; 105: 06; 106: -; 107: 00; 108: 01; 109: 04; 110: 02; 111: 00; 112: -; 113: -; 114: -; 115: -; 116: 03; 117: 04

Vehicle 1

Field	Value
23 Veh #	1
24 Policy No.	9929557692061
25 NJ Ins. Code	884
Status	☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	- / - / -
29 Sex	-
27 Number & Street	-
28 City / State / Zip	- / - / -
30 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
31 State	-
32 Driver's License Number	-
33 DOB (mm dd yyyy)	-
34 Expires (mm yy)	- / -
35 Owner's First Name / Initial / Last Name	☐ Same As Driver NECHAMA - WEBER -
36 Number & Street	1021 NETHERWOOD DR
37 City / State / Zip	LAKEWOOD / NJ / 08701
38 Make	TOYT
39 Model	CAM - CA
40 Color	GRY
41 Year	2009
42 Plate No.	M94EBB
43 State	NJ
44 VIN	4T1BE46K79U414744
45 Expires	03 22
46 Vehicle Removed To	-
	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

Field	Value
53 Veh #	2
54 Policy No.	-
55 NJ Ins. Code	-
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run
56 Driver's First Name / Initial / Last Name	
59 Sex	
57 Number & Street	
58 City / State / Zip	
60 Eyes / DL Class / Restrictions / Endorsements	
61 State	
62 Driver's License Number	
63 DOB (mm dd yyyy)	
64 Expires (mm yy)	
65 Owner's First Name / Initial / Last Name	☐ Same As Driver
66 Number & Street	
67 City / State / Zip	
68 Make	
69 Model	
70 Color	
71 Year	
72 Plate No.	
73 State	
74 VIN	
75 Expires	
76 Vehicle Removed To	
	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☐ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. % ☐ Pending
79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☐ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No
-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

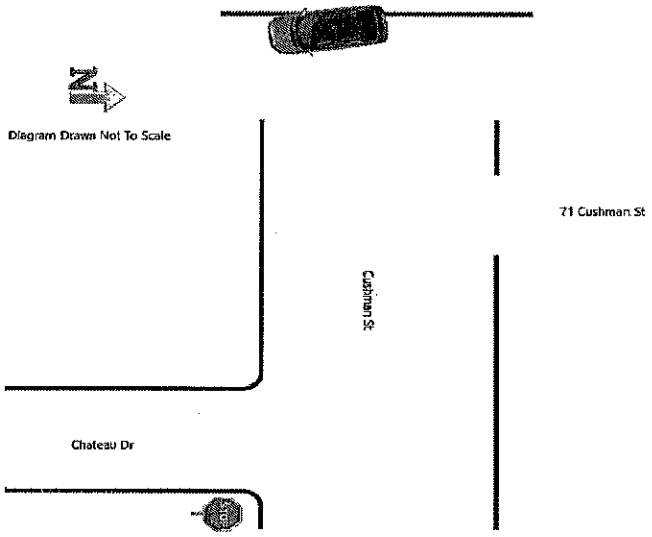
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: - Case No: 22-003772

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 was parked in the area of 71 Cushman St facing southbound. He reported that he parked it there in front of the synagogue during Shabbos so he can pray. After Shabbos was over, he went to his vehicle and found the driver rear side of the vehicle to be smashed and the passenger rear side tire pushed up on the curb.

Vehicle 1 sustained disabling damage to the driver rear side near the tire and also the passenger rear tire was flat due to the impact of it hitting the curb. The vehicle is parked on the street at a dead end. There is camera footage that will be attached to this case but it is unclear to get a registration of the other vehicle involved. It is seen to be a white SUV, presumably a Jeep Grand Cherokee.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
AMOROSO, A	415	KCM	335	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
96	05
1 Case Number	22-003870
97	01
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
98	07
3 Station/Precinct	-
99	07
4 Date of Crash (mm dd yy)	01/16/22
100a	01
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	0037
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On: (Road Name)	LAUREL AVE
Dir	
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
☐ At Intersection With	
14	200
15	☒ Feet ☐ Miles
16	☐ N ☒ E ☐ S ☐ W of:
17 Cross Road Name	PEARL ST
18 Speed Limit	25
19 Ramp	☐ To ☐ From: -
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.089400
22 Longitude	-74.198650
118a	01
118b	02
119a	-
119b	-

Vehicle 1 / Vehicle 2

Field	Vehicle 1	Field	Vehicle 2
100b	04	120a	02
23 Veh #	1	53 Veh #	2
24 Policy No.	4511-12-14-95	54 Policy No.	*
25 NJ Ins. Code	100	55 NJ Ins. Code	-
101	02	120b	-
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	EDUARDO - AXALCO-AGUILAR -	56 Driver's First Name / Initial / Last Name	- - - -
29 Sex	M	59 Sex	-
102	01	121a	-
27 Number & Street	276 WOODLAKE MANOR DR	57 Number & Street	-
103	01	121b	-
28 City	LAKEWOOD	58 City	-
State / Zip	NJ 08701	State / Zip	- -
104	2		
30 Eyes	2	60 Eyes	-
DL Class	-	DL Class	-
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	-	61 State	-
105	01	122	01
32 Driver's License Number	-	62 Driver's License Number	-
33 DOB (mm dd yyyy)	12/30/1998	63 DOB (mm dd yyyy)	-
34 Expires (mm yy)	- -	64 Expires (mm yy)	- -
106	-	123	10
35 Owner's First Name / Initial / Last Name	☐ Same As Driver TERESA - MORALES-HERNAN -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver YEHUDA T PAVLOV -
107	-	124	11
36 Number & Street	117 2ND ST; 3	66 Number & Street	12 COURTNEY RD
108	05	125	11
37 City	LAKEWOOD	67 City	LAKEWOOD
State / Zip	NJ 08701	State / Zip	NJ 08701
109	01	126a	28
38 Make	DODG	68 Make	FORD
39 Model	DAK	69 Model	EC
40 Color	BLK	70 Color	SIL
41 Year	2000	71 Year	2002
42 Plate No.	K26MYR	72 Plate No.	G37KJA
43 State	NJ	73 State	NJ
110	01	126b	-
44 VIN	1B7GL2AX8YS694661	74 VIN	1FBSS31S12HA56400
45 Expires	10 22	75 Expires	08 22
111	01	126c	-
46 Vehicle Removed To	ACME TOWING	76 Vehicle Removed To	
112	-	126d	-
Removal	☐ Driven ☐ Towed Disabled ☒ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	Removal	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
113	-	126e	28
47 Authority	☐ Owner ☐ Driver ☒ Police	77 Authority	☐ Owner ☐ Driver ☒ Police
114	-	127a	26
48 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☒ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
115	-	127b	-
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
116	04	127c	-
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
117	04	127d	-
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
		127e	26
52 Motor Carrier or Government Entity	-	82 Motor Carrier or Government Entity	-
		128	28
Number & Street	-	Number & Street	-
		129	11
City / State / Zip	- - -	City / State / Zip	- - -
		130	11

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

131	07
132	07
133	04
134	03

Charges

Oper.	Charge	Summons No.
1	136: 39:4-50	137: 291426
1	138: 39:4-96	139: 291427
1	140: 39:4-50.2	141: 289405
1	142: 39:4-130	143: 291428

Occupants

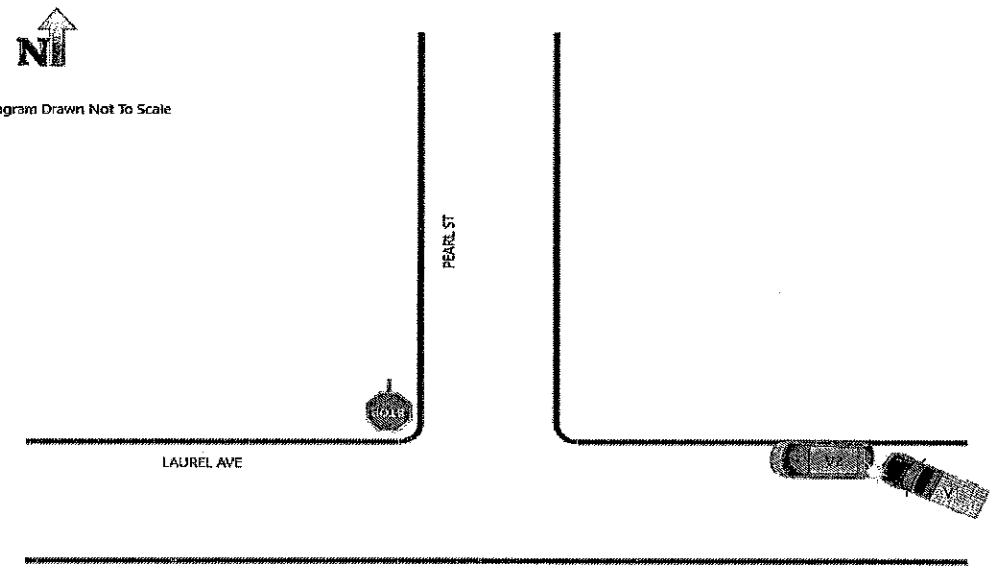
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	23	M	-	-	-	11	04	-	-	EDUARDO - AXALCO-AGUILAR - 276 WOODLAKE MANOR LAKEWOOD NJ 08701
B	V2	-	-	-			-	-	-	-	-	-	-	
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: - Case No: 22-003870

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

THE DRIVER OF V1 STATED THAT HE WAS TRAVELING WESTBOUND ON LAUREL AVE. HE STATED THAT AS HE TRAVELED WESTBOUND, HE CRASHED INTO V2 THAT WAS LEGALLY PARKED ON LAUREL AVE. V2 WAS UNOCCUPIED AT THE TIME OF THE CRASH. THE DRIVER OF V1 WAS FOUND SITTING IN THE DRIVER'S SEAT OF V1 PARKED FURTHER DOWN THE ROAD FROM WHERE THE CRASH ORIGINALLY OCCURRED. THE DRIVER OF V1 WAS PLACED UNDER ARREST FOR DRIVING UNDER THE INFLUENCE (39:4-50) AND TRANSPORTED BACK TO LAKEWOOD POLICE HEADQUARTERS. THE VEHICLE WAS TOWED AND IMPOUNDED BY ACME TOWING (JOHNS LAW). AIR BAG DEPLOYMENT WAS NOT OBSERVED, V1 SUSTAINED DISABLING DAMAGE, AND DRIVER OF V1 DECLINED MEDICAL ATTENTION.

NO INJURIES WERE REPORTED ON SCENE.

TRAFFIC OFFENSES:	SUMMONS NUMBER:
39:4-50	291426
39:4-96	291427
39:4-130	291428
39:4-129	291429
39:3-10	291430
39:4-50.2	289405

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VILLALBA, M	425	LNJ	322	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-003954
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	01/16/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	0846
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On: Road Name	SIENNA WAY
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
☐ At Intersection With / ☒ Feet / ☐ Miles (14)	150
15 ☐ N ☐ E ☐ S ☐ W of:	MILANO DRIVE
16	
17 Cross Road Name	MILANO DRIVE
18 Speed Limit	25
19 Ramp ☐ To ☐ From:	-
20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.107510
22 Longitude	-74.191850

Code	Value
96	05
97	01
98	01
99	07
100a	01
100b	04
101	02
102	01
103	01
104	2
105	06
106	-
107	-
108	02
109	01
110	02
111	01
112	-
113	-
114	-
115	-
116	02
117	01
118a	13
118b	-
119a	10
119b	-
120a	01
120b	-
121a	01
121b	-
122	10
123	13
124	11
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	28
127b	-
127c	-
127d	-
127e	28
128	26
129	05
130	05
131	05
132	05
133	03
134	03

Vehicle 1

Field	Value
23 Veh #	1
24 Policy No.	CIAU251136
25 NJ Ins. Code	187
Status	☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	- - -
29 Sex	-
27 Number & Street	-
28 City / State / Zip	- / - / -
30 Eyes	-
DL Class	-
Restrictions	-
Endorsements	-
31 State	-
32 Driver's License Number	-
33 DOB (mm dd yyyy)	-
34 Expires (mm yy)	- -
35 Owner's ☐ Same As Driver — First Name / Initial / Last Name	- / - / CIRCUIT ELECTRIC -
36 Number & Street	136 CHESTNUT ST
37 City / State / Zip	LAKEWOOD / NJ / 08701
38 Make	FORD
39 Model	T25
40 Color	WHI
41 Year	2016
42 Plate No.	XEHJ15
43 State	NJ
44 VIN	1FTYR2CM9GKA29238
45 Expires	10 22
46 Vehicle Removed To	-
Removal	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

Field	Value
53 Veh #	2
54 Policy No.	4609536497
55 NJ Ins. Code	148
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name / Initial / Last Name	SIMI / - / SCHMIDT -
59 Sex	F
57 Number & Street	8 SIENNA WAY
58 City / State / Zip	LAKEWOOD / NJ / 08701
60 Eyes	05
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	S14477160052845
63 DOB (mm dd yyyy)	02/02/1984
64 Expires (mm yy)	02 26
65 Owner's ☐ Same As Driver — First Name / Initial / Last Name	MOSHE / - / SCHMIDT -
66 Number & Street	8 SIENNA WAY
67 City / State / Zip	LAKEWOOD / NJ / 08701
68 Make	HOND
69 Model	ODY
70 Color	WHI
71 Year	2021
72 Plate No.	K29NRT
73 State	NJ
74 VIN	5FNRL6H78MB045116
75 Expires	04 24
76 Vehicle Removed To	-
Removal	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

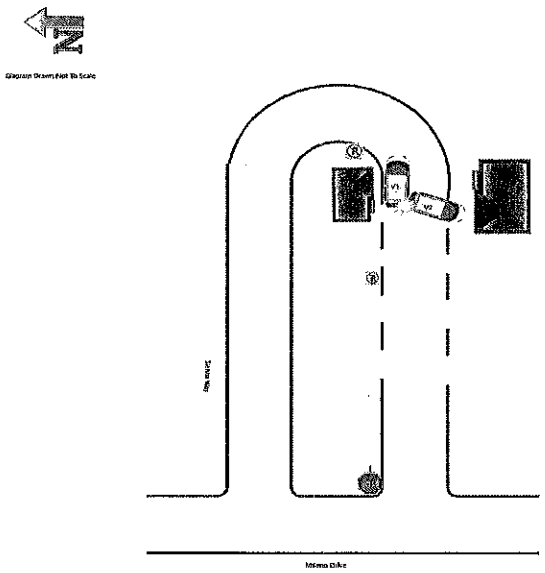
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V2	01	01	05	37	F	-	-	-	11	04	-	-	SIMI - SCHMIDT - 8 SIENNA WAY LAKEWOOD NJ 08701 - -
B														
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01
	Station: - Case No: 22-003954

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The Driver of Vehicle #2 stated that she was exiting her home at 8 Sienna Way prior to the crash. The Driver of Vehicle #2 stated that she was in a hurry and not paying attention causing her to hit Vehicle #1. The Driver of Vehicle #2 backed into Vehicle #1 which was parked and unoccupied. The Driver of Vehicle #2 did not report any injury to Police.

Vehicle #1 was parked on the west bound side of Sienna Way. There are " No Stopping or Standing" signs posted on the Street.

Due to the Driver of Vehicle #2 admittingly backing unsafely and Vehicle #1 being parked improperly, I find both parties at fault for this crash.

END OF REPORT

Submitted By: Ptl. R. Ingram #408

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
INGRAM R	408	PA	325	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Left margin	Field	Value
96 / 01	1 Case Number	22-003999
97 / 01	2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
98 / 01	3 Station/Precinct	
99 / 02	4 Date of Crash (mm dd yy)	01/16/22
100a / 01	5 Day Of Week	SUNDAY
	6 Time (use 2400 hrs)	1144
	7 Municipality Code	1514
	8 Total Killed	--
	9 Total Injured	--
	10 Crash Occurred On	STATE HWY 70 E
	11 Speed Limit	50
	12 Route No.	0070
	13 Milepost	053.00
	☐ At Intersection With / ☒ Feet / ☐ Miles	50 (14)
	15 / 16 Dir	☐ N ☒ E ☐ S ☐ W of:
	17 Cross Road Name	SHORROCK ST
	18 Speed Limit	35
	19 Ramp	☐ To ☐ From:
	20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
	21 Latitude	40.055560
	22 Longitude	-74.161010

Right margin codes: 118a 05; 118b 08; 119a 25; 119b -; 120a 01; 120b -; 121a 01; 121b -; 122 01; 123 01; 124 04; 125 04; 126a 26; 126b -; 126c -; 126d -; 126e 26; 127a 26; 127b -; 127c -; 127d -; 127e 26; 128 26; 129 05; 130 05; 131 10; 132 10; 133 02; 134 03

Left margin codes: 100b 04; 101 02; 102 01; 103 01; 104 2; 105 02; 106 -; 107 -; 108 01; 109 01; 110 01; 111 01; 112 -; 113 -; 114 -; 115 -; 116 02; 117 02

Field	Vehicle 1	Vehicle 2
Veh # (23 / 53)	1	2
Policy No. (24 / 54)	1102778024	F749760-5
NJ Ins. Code (25 / 55)	426	426
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name (26 / 56)	ALAN - STREICHER -	MARGARET G MILKEWICZ -
Sex (29 / 59)	M	F
Number & Street (27 / 57)	606 APOLLO RD	57 PHLOX CT
City / State / Zip (28 / 58)	LAKEWOOD NJ 08701	WHT STATION NJ 08889
Eyes (30 / 60)	02	02
DL Class	D	D
Restrictions	-	-
Endorsements	-	-
State (31 / 61)	NJ	NJ
Driver's License Number (32 / 62)	S83530150012842	M43445186758542
DOB (33 / 63)	12/01/1984	08/31/1954
Expires (34 / 64)	12 25	08 25
Owner's First Name / Initial / Last Name (35 / 65)	☐ Same As Driver; C - BARON BUILDERS I -	☐ Same As Driver; MARGARET G MILKEWICZ -
Number & Street (36 / 66)	104 LEONARD ST	57 PHLOX CT
City / State / Zip (37 / 67)	LAKEWOOD NJ 08701	WHT STATION NJ 08889
Make (38 / 68)	TOYT	TOYT
Model (39 / 69)	SIE	CAM
Color (40 / 70)	BLK	BLK
Year (41 / 71)	2021	2012
Plate No. (42 / 72)	G78NNJ	U85CPY
State (43 / 73)	NJ	NJ
VIN (44 / 74)	5TDJRKEC0MS029039	4T4BF1FK7CR221793
Expires (45 / 75)	03 24	12 22
Vehicle Removed To (46 / 76)	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
Authority (47 / 77)	☐ Owner ☒ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test (48 / 78)	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
Hazardous Material (49 / 79)	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
Carrier No. (50 / 80)	☐ USDOT ☐ MC/MX ☒ None	☐ USDOT ☐ MC/MX ☒ None
GVWR/GCWR (51 / 81)	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity (52 / 82)	-	-
Number & Street	-	-
City / State / Zip	- / - / -	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	37	M	-	-	-	11	04	-	-	ALAN - STREICHER - 606 APOLLO RD LAKEWOOD NJ 08701
B	01	03	01	05	14	F	-	-	-	11	04	-	-	RACHEL - STREICHER - 606 APPOLO RD LAKEWOOD NJ 08701
C	02	01	01	05	67	F	-	-	-	11	04	-	-	MARGARET G MILKEWICZ - 57 PHLOX CT WHT STATION NJ 08889
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-003999

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

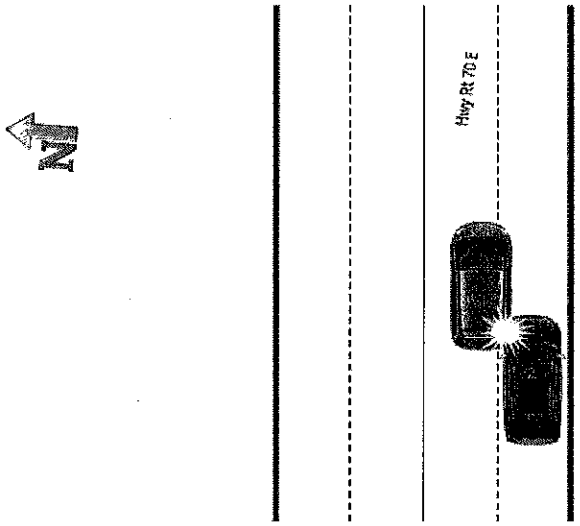


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver of veh 1 stated that he was traveling East on RT 70 when veh2 crashed into him. He does not know how it happened. He did explain that if he continued to travel , he would have needed to enter in her lane of travel the closer he approached the traffic light.

Driver of veh2 stated that she was traveling East on Rt70 when veh1 entered into her lane of travel. The sudden transition did not leave her anytime to avoid the crash, which resulted in veh1 side swiping her.

No medical attention needed.

Veh1 sustained very minor damage. Veh2 sustained moderate damage. Veh2 driver side door is currently unable to be opened.

I find veh1 at fault for this accident.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SMITH D	411	PA	325	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-004020
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	01/16/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	1416
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	CHASE AVE
11 Speed Limit	15
14 / 15 / 16	30 ☐ Feet ☐ Miles ☐ N ☒ E ☐ S ☐ W of: FLANNERY AVE
☐ At Intersection With	
17 Cross Road Name	FLANNERY AVE
18 Speed Limit	15
19 Ramp	☐ To ☐ From:
12 Route No. / Suffix / 13 Milepost	
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.075390
22 Longitude	-74.182000

Left margin codes: 96: 05; 97: 01; 98: 01; 99: 09; 100a: 01; 100b: 04; 101: 02; 102: 01; 103: 01; 104: 2; 105: 06; 106: -; 107: -; 108: 31; 109: 01; 110: 02; 111: 01; 112: 09; 113: -; 114: 02; 115: -; 116: 02; 117: 02

Right margin codes: 118a: 02; 118b: -; 119a: 25; 119b: -; 120a: 00; 120b: -; 121a: -; 121b: -; 122: 01; 123: 10; 124: 04; 125: 04; 126a: 28; 126b: -; 126c: -; 126d: -; 126e: 28; 127a: 26; 127b: -; 127c: -; 127d: -; 127e: 26; 128: 28; 129: 01; 130: 00; 131: 10; 132: 11; 133: 00; 134: 03

Vehicle 1

Field	Value
23 Veh #	1
24 Policy No.	
25 NJ Ins. Code	
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run
26 Driver's First Name / Initial / Last Name	
29 Sex	
27 Number & Street	
28 City / State / Zip	
30 Eyes / DL Class / Restrictions / Endorsements	
31 State	
32 Driver's License Number	
33 DOB	
34 Expires	
35 Owner's First Name / Initial / Last Name	☐ Same As Driver
36 Number & Street	
37 City / State / Zip	
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	
44 VIN	
45 Expires	
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☐ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

Field	Value
53 Veh #	2
54 Policy No.	939851035
55 NJ Ins. Code	054
Status	☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name / Initial / Last Name	- / - / -
59 Sex	-
57 Number & Street	-
58 City / State / Zip	- / - / -
60 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
61 State	-
62 Driver's License Number	-
63 DOB	-
64 Expires	- / -
65 Owner's First Name / Initial / Last Name	☐ Same As Driver; RIVKA - SCHARFER -
66 Number & Street	26 ZINFANDEL RD
67 City / State / Zip	LAKEWOOD / NJ / 08701
68 Make	NISS
69 Model	ALT
70 Color	BLU
71 Year	2012
72 Plate No.	M55CJP
73 State	NJ
74 VIN	1N4AL2AP6CN546155
75 Expires	08 22
76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No

Oper.	136 Charge	137 Summons No.	Oper.	138 Charge	139 Summons No.

Oper.	140 Charge	141 Summons No.	Oper.	142 Charge	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														
B														
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-004020

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

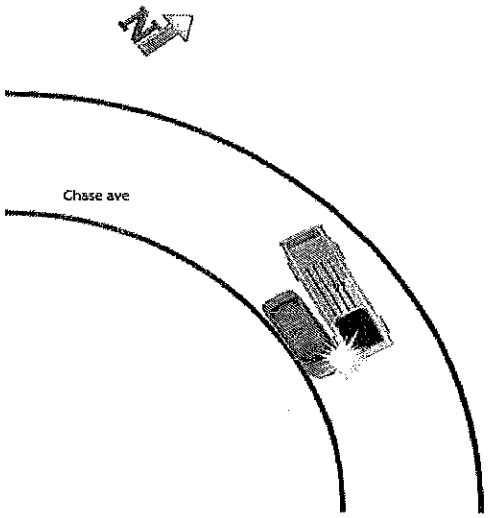


Diagram Drawn Not To Scale

145 Crash Description/Narrative

The driver of the vehicle did not witness the crash. However a witness observed the entire incident. She stated that she observed a Jay's School bus crash into veh2. The bus did not stop, yet the driver blew through a near by red traffic light.

I observed cameras on the building of 101 chase. I also spoke with a gas attendant at Quick Chek who also confirmed that he noticed two Jay buses in the parking lot shopping around the time of the crash.

Veh2 sustained moderate damage. The front bumper was taking off but the driver was still able to drive his vehicle home.

I attempted to contact the owner of Jay's bus company via telephone. My results were negative at this time.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SMITH D	411	DIBIASE	286	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	09
100a	01
100b	04
101	02
102	02
103	02
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	03

1 Case Number: 22-004090

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

4 Date of Crash (mm dd yy): 01/16/22

5 Day Of Week: SUNDAY

6 Time (use 2400 hrs): 1830

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: SUMMERFIELD DR

☒ At Intersection With — Road Name: SUMMERFIELD DR — Dir: — 12 Route No.: — Suffix: — 13 Milepost:

☐ Feet ☐ N ☐ E of: 4 SEASONS DR

☐ Miles ☐ S ☐ W

14 15 16

19 Ramp ☐ To ☐ From: — 17 Cross Road Name: — ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

21 Latitude: 40.03647 — 22 Longitude: -74.17255

11 Speed Limit: 35

18 Speed Limit: 35

118a	02
118b	16
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	03
124	08
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	02
130	02
131	09
132	09
133	02
134	03

Vehicle 1

23 Veh #: 1

24 Policy No.: 4608325090

25 NJ Ins. Code: 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: MICHAEL — Initial: M — Last Name: TIEDEMANN — 29 Sex: M

27 Number & Street: 1 GOLDENSPRINGS DR

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: -

31 State: NJ

32 Driver's License Number: T41525447408742

33 DOB (mm dd yyyy): 08/16/1974

34 Expires (mm yy): 08 25

35 Owner's First Name: NANCY — Initial: E — Last Name: TIEDEMANN

☐ Same As Driver

36 Number & Street: 1 GOLDENSPRINGS DR

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: KIA — 39 Model: OPT — 40 Color: BLU — 41 Year: 2019 — 42 Plate No.: X80NXD — 43 State: NJ

44 VIN: 5XXGV4L26KG292422

45 Expires: 06 22

46 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class: — Placard No.:

50 Carrier No.: ☐ USDOT ☐ MC/MX ☐ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2

54 Policy No.: 939842713

55 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: ADAM — Initial: C — Last Name: SCARANO — 59 Sex: M

57 Number & Street: 43 SUMMERWINDS DR

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 5 — DL Class: D — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: S11060086302915

63 DOB (mm dd yyyy): 02/08/1991

64 Expires (mm yy): 02 25

65 Owner's First Name: ARTHUR — Initial: J — Last Name: SCARANO

☐ Same As Driver

66 Number & Street: 43 SUMMERWINDS DR

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: HOND — 69 Model: CRV — 70 Color: WHI — 71 Year: 2021 — 72 Plate No.: U21NXP — 73 State: NJ

74 VIN: 2HKRW2H88MH662476

75 Expires: 07 24

76 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☐ None ☐ On Board ☐ Spill — Hazard Class: — Placard No.:

80 Carrier No.: ☐ USDOT ☐ MC/MX ☐ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:4-144	1514A289264			
2		-			

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	47	M	-	-	-	11	04	-	-	MICHAEL M TIEDEMANN - 1 GOLDENSPRINGS DR LAKEWOOD NJ 08701
B	2	01	01	05	30	M	-	-	-	11	04	-	-	ADAM C SCARANO - 43 SUMMERWINDS DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

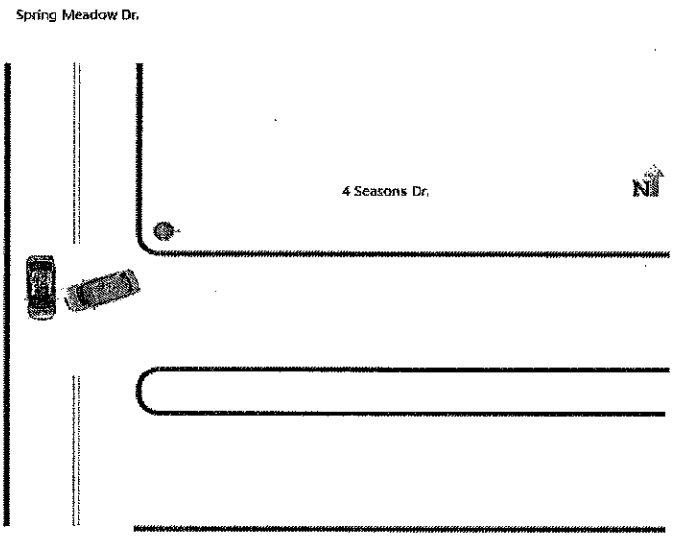
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-004090

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 was travelling west on 4 Seasons Dr. and stated that as he approached the posted stop sign, he hit the accelerator instead of the brakes. He then continued into the intersection and crashed into Vehicle 2.

The driver of Vehicle 2 was traveling south on Spring Meadow Dr. and stated he was about to make a left turn when he observed Vehicle 1 continuing into the intersection without stopping. Vehicle 2 was unable to avoid the crash in time. Based on my observations and speaking with each driver, I determined that Vehicle 1 did not stop at the posted stop sign and crashed into Vehicle 2.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
NICKERSON, K	378	DIBIASE	286	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	02
103	02
104	2
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	03

1 Case Number: 22-004075

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 01/16/22

5 Day of Week: SUNDAY

10 Crash Occurred On: NEW HAMPSHIRE AVE (Road Name) — Dir: - — 11 Speed Limit: 45 — 12 Route No.: 0623 — Suffix: - — 13 Milepost: -

☐ At Intersection With

14: 100 ☒ Feet ☐ Miles — 15 — 16: ☒ N ☐ E ☐ S ☐ W of: LISA ROBYN CIR (17 Cross Road Name) — 18 Speed Limit: 25

19 Ramp ☐ To ☐ From: -

☐ NB ☐ EB ☐ SB ☐ WB — 20 Route/Name

6 Time (use 2400 hrs): 1738

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

21 Latitude: 40.053090

22 Longitude: -74.196250

118a	09
118b	-
119a	08
119b	-
120a	01
120b	03
121a	01
121b	-
122	01
123	07
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	04
132	04
133	04
134	04

Vehicle 1

23 Veh #: 1

24 Policy No.: 14-3020093-00 — 25 NJ Ins. Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: PABLO — Initial: C — Last Name: VELASCO-GONZALEZ - — 29 Sex: M

27 Number & Street: 524 DAVIDS CT

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 02 — DL Class: - — Restrictions: - — Endorsements: - — 31 State: -

32 Driver's License Number: -

33 DOB (mm dd yyyy): 09/06/1976 — 34 Expires (mm yy): - -

35 Owner's First Name: - ☐ Same As Driver — Initial: - — Last Name: - -

36 Number & Street: -

37 City: - — State: - — Zip: -

38 Make: LEXU — 39 Model: ES 300 — 40 Color: SIL — 41 Year: 2001 — 42 Plate No.: LTC7171 — 43 State: PA

44 VIN: JT8BF28G715106520 — 45 Expires: - -

46 Vehicle Removed To: FREEDOM TOWING

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☒ Towed Impounded

47 Authority: ☐ Owner ☐ Driver ☒ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: 933302238 — 55 NJ Ins. Code: 134

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: MIRYAM — Initial: - — Last Name: HOROWITZ - — 59 Sex: F

57 Number & Street: 929 NEW HAMPSHIRE AVE

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 02 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: H66415590059952

63 DOB (mm dd yyyy): 09/10/1995 — 64 Expires (mm yy): 09 22

65 Owner's First Name: MIRYAM ☐ Same As Driver — Initial: - — Last Name: HOROWITZ -

66 Number & Street: 929 NEW HAMPSHIRE AVE

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: HYUN — 69 Model: TUC — 70 Color: RD — 71 Year: 2020 — 72 Plate No.: C37MSR — 73 State: NJ

74 VIN: KM8J3CALXLU252871 — 75 Expires: 07 23

76 Vehicle Removed To: ACME TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

80 Carrier No.: ☐ USDOT - ☒ None ☐ 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: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons No.	Oper.	138 Charge	139 Summons No.
1	39:3-10	1514-A-291557	1	39:3-4	1514-A-291558

Oper.	140 Charge	141 Summons No.	Oper.	142 Charge	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	1	01	01	05	45	M	-	-	-	11	11	01	-	PABLO C VELASCO-GONZALEZ - 524 DAVIDS CT LAKEWOOD NJ 08701 - -
B	2	01	01	05	26	F	-	-	-	11	04	-	-	MIRYAM - HOROWITZ - 929 NEW HAMPSHIRE A\ LAKEWOOD NJ 08701 - -
C														
D														

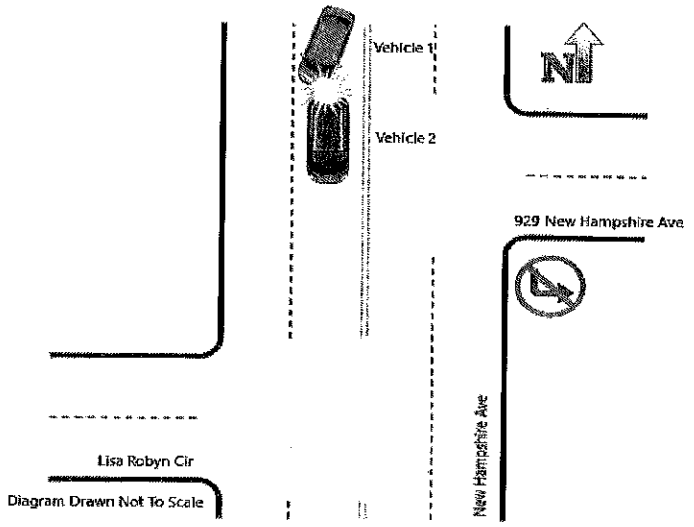
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-004075

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of Vehicle 2 stated she was attempting to conduct a left turn from New Hampshire Ave south bound onto 929 New Hampshire Ave, when she was struck from behind by Vehicle 1. Driver of Vehicle 1 stated he was driving south bound on New Hampshire Ave, when he struck Vehicle 2.

Vehicle 1 sustained damages consisting of major denting, as well as undercarriage damage, to the rear passenger side area of the vehicle, resulting in disabling it. Vehicle 2 sustained major damages to the front driver side area and engine, as well as front airbag deployment.

Vehicle 1 was impounded due to the registration being invalid. Vehicle 2 was towed due to the damages.

From my investigation, I concluded that driver of Vehicle 1 was at fault for following too closely behind Vehicle 2, and that Vehicle 2 was at fault for conducting an illegal left turn.

Driver of Vehicle 1 was issued a motor vehicle citation for operating a vehicle as an unlicensed driver (39:3-10), and operating an unregistered vehicle (39:3-4).

***Box 25 NJ Ins. Code - Vehicle 1 is insured by American Freedom Insurance Company out of 1699 Wall St, Suite 600, Mount Prospect, IL 60056 #10864. The producer of the insurance, A Plus Ins Agency LLC is located at 1509 Tyson Ave, Philadelphia, PA 19149 (215) 745-6900.**

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SEEHAUSEN, K	416	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05

1 Case Number: 22-004271

97: 01

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

98: 01

3 Station/Precinct:

99: 05

4 Date of Crash (mm dd yy): 01/17/22

100a: 01

5 Day Of Week: MONDAY

6 Time (use 2400 hrs): 0927

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: CEDARBRIDGE AVE — Road Name — Dir: -

☐ At Intersection With

☒ Feet ☐ Miles — 14: 200 — 15

☐ N ☐ E ☐ S ☐ W — 16

of: VINE STREET

11 Speed Limit: 45

12 Route No.: 0528 — Suffix: - — 13 Milepost: -

18 Speed Limit: 25

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

21 Latitude: -

22 Longitude: -

118a: 09

118b: -

119a: -

119b: -

100b: 04

23 Veh #: 1

24 Policy No.: 939951119

25 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

53 Veh #: -

54 Policy No.: -

55 NJ Ins. Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

120a: 01

120b: -

101: 02

26 Driver's First Name: ALEXANDER — Initial: Z — Last Name: BLUMENFRUCHT — 29 Sex: M

56 Driver's First Name: - — Initial: - — Last Name: - — 59 Sex: -

121a: -

102: 02

27 Number & Street: 517 REYNOLDS AVE

57 Number & Street: -

121b: -

103: 02

28 City: TOMS RIVER — State: NJ — Zip: 08755

58 City: - — State: - — Zip: -

104: 1

30 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: -

31 State: NJ

60 Eyes: - — DL Class: - — Restrictions: - — Endorsements: -

61 State: -

122: 01

105: 11

32 Driver's License Number: B56530198901882

33 DOB (mm dd yyyy): 01/07/1988

34 Expires (mm yy): 12 19

62 Driver's License Number: -

63 DOB (mm dd yyyy): -

64 Expires (mm yy): - -

123: -

106: -

35 Owner's First Name: ALEXANDER — Initial: Z — Last Name: BLUMENFRUCHT

☐ Same As Driver

65 Owner's First Name: - — Initial: - — Last Name: -

☐ Same As Driver

124: 04

107: -

36 Number & Street: 517 REYNOLDS AVE

66 Number & Street: -

125: -

108: 01

37 City: TOMS RIVER — State: NJ — Zip: 08755

67 City: - — State: - — Zip: -

126a: 56

109: -

38 Make: TOYT — 39 Model: CAM — 40 Color: GRY — 41 Year: 2013 — 42 Plate No.: X12DJE — 43 State: NJ

68 Make: - — 69 Model: - — 70 Color: - — 71 Year: - — 72 Plate No.: - — 73 State: -

126b: -

110: 01

44 VIN: 4T4BF1FK5DR278446

45 Expires: 05 22

74 VIN: -

75 Expires: - -

126c: -

111: -

46 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

76 Vehicle Removed To: -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

126d: -

126e: 56

112: -

113: -

47 Authority

☒ Owner ☐ Driver ☐ Police

77 Authority

☐ Owner ☐ Driver ☐ Police

127a: -

114: -

48 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

115: -

☐ Pending

49 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class: — Placard No.:

78 Alcohol/Drug Test

Given: ☐ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

79 Hazardous Material

☐ None ☐ On Board ☐ Spill

Hazard Class: - — Placard No.: -

127b: -

127c: -

116: 02

50 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

80 Carrier No.

☐ USDOT - ☐ MC/MX - ☐ None

81 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

127d: -

127e: -

117: -

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

128: 56

129: 02

130: 02

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

131: -

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

132: -

133: 02

134: -

	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	05	34	M	-	-	-	11	04	-	-	ALEXANDER Z BLUMENFRUCHT - 517 REYNOLDS AVE TOMS RIVER NJ 08755
B														
C														
D														

New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004271

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

WHEN I ARRIVED DRIVER OF VEHICLE 1 WAS PARKED FACING EAST ON CEDARBRIDGE AVE. THERE WERE NO INJURIES.

DRIVER OF VEHICLE 1 STATED THAT HE WAS HEADING EAST ON CEDARBRIDGE AVE. WHEN AN UNKNOWN VEHICLE STOPPED SHORT IN FRONT OF HIM. DUE TO THE VEHICLE IN FRONT STOPPING SHORT DRIVER OF VEHICLE 1 TURNED HIS CAR RIGHT HITTING THE CURB TO AVOID STRIKING THE UNKNOWN VEHICLE IN FRONT OF HIM.

DRIVER OF VEHICLE 1 WANTED A REPORT GENERATED FOR THE DAMAGE TO THE RIM OF HIS PASSENGER SIDE OF HIS VEHICLE.

BASED ON MY INVESTIGATION, DRIVER OF VEHICLE 1 IS AT FAULT DUE TO HITTING THE CURB TO AVOID STRIKING THE VEHICLE IN FRONT OF HIM. HE WAS ALSO FOLLOWING TO CLOSELY.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GIBSON M	409	PA	325	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-004316
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	01/17/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1441
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	NEW HAMPSHIRE AVE
11 Speed Limit	45
☐ At Intersection With / Road Name / Dir	
12 Route No. / Suffix / 13 Milepost / 18 Speed Limit	
14	500 ☒ Feet ☐ Miles
16	☒ N ☐ E ☐ S ☐ W of: OCEAN AVE
17 Cross Road Name	
19 Ramp	☐ To ☐ From:
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.08558
22 Longitude	-74.17692

Left margin codes: 96: 05; 97: 01; 98: 01; 99: 05; 100a: 02; 100b: 04; 101: 02; 102: 01; 103: 05; 104: 2; 105: 02; 106: -; 107: -; 108: 29; 109: 01; 110: 02; 111: 01; 112: 99; 113: -; 114: 06; 115: -; 116: 01; 117: 01

Right margin codes: 118a: 02; 118b: -; 119a: 06; 119b: -; 120a: 01; 120b: -; 121a: 01; 121b: -; 122: 01; 123: 01; 124: 04; 125: 04; 126a: 26; 126b: -; 126c: -; 126d: -; 126e: 26; 127a: 26; 127b: -; 127c: -; 127d: -; 127e: 26; 128: 26; 129: 01; 130: 01; 131: 07; 132: 07; 133: 03; 134: 02

Field	Vehicle 1	Vehicle 2
Veh # (23 / 53)	1	2
Policy No. (24 / 54)	1209300-C15-30	5460018880
NJ Ins. Code (25 / 55)	896	945
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name (26 / 56)	THOMAS R MILLER 3RD -	MAYER S GIFTER -
Sex (29 / 59)	M	M
Number & Street (27 / 57)	296 BIRCH BARK DRIVE	7 SABLOW DR
City / State / Zip (28 / 58)	BRICK NJ 08723	LAKEWOOD NJ 08701
Eyes (30 / 60)	4	2
DL Class	A	D
Restrictions	-	-
Endorsements	-	-
State (31 / 61)	NJ	NJ
Driver's License Number (32 / 62)	M43587407905994	G42285368210952
DOB (33 / 63)	05/22/1999	10/08/1995
Expires mm yy (34 / 64)	05 24	10 24
Owner's First Name / Initial / Last Name (35 / 65)	☐ Same As Driver LLC - FOUR SEASONS TRI -	☐ Same As Driver CHANA R SHECHET -
Number & Street (36 / 66)	1301 VENTURA DR	76 PONDEROSA DR
City / State / Zip (37 / 67)	LAKEWOOD NJ 08701	LAKEWOOD NJ 08701
Make (38 / 68)	MACK	KIA
Model (39 / 69)	GR6	OPT
Color (40 / 70)	YEL	MAR
Year (41 / 71)	2021	2020
Plate No. (42 / 72)	XJKB23	E80MMU
State (43 / 73)	NJ	NJ
VIN (44 / 74)	1M2GR4GC6MM022705	5XXGT4L35LG420861
Expires (45 / 75)	08 22	03 23
Vehicle Removed To (46 / 76)		
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority (47 / 77)	☐ Owner ☒ Driver ☐ Police	☐ Owner ☒ Driver ☐ Police
Alcohol/Drug Test (48 / 78)	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
Hazardous Material (49 / 79)	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
Carrier No. (50 / 80)	☐ USDOT ☐ MC/MX ☒ None	☐ USDOT ☐ MC/MX ☒ None
GVWR/GCWR (51 / 81)	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity (52 / 82)		
Number & Street		
City / State / Zip		

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons No.	Oper.	138 Charge	139 Summons No.
1		-	2		-

Oper.	140 Charge	141 Summons No.	Oper.	142 Charge	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	05	22	M	-	-	-	11	04	-	-	THOMAS R MILLER 3RD - 296 BIRCH BARK DRIVE BRICK NJ 08723
B	02	01	01	05	26	M	-	-	-	11	04	-	-	MAYER S GIFTER - 7 SABLOW DR LAKEWOOD NJ 08701
C	02	02	01	05	23	F	-	-	-	11	04	-	-	CHAYA S SHECHET - 7 SABLOW DR LAKEWOOD NJ 08701
D														

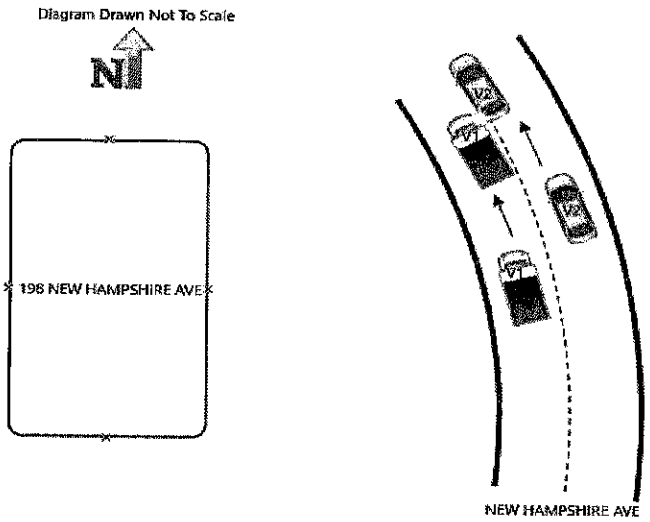
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004316

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated he was traveling North on New Hampshire Avenue in the left lane while Vehicle #2 was in the right lane traveling North as well. Driver #1 stated as Vehicle #2 was slightly ahead of him, the right front tire of Vehicle #1 collided with the left rear corner of Vehicle #2. Vehicle #1 sustained minor damage to the right front tire and was able to be driven from the scene.

Driver #2 stated he was traveling North on New Hampshire Avenue in the right lane while Vehicle #1 was traveling North in the left lane. Driver #2 stated as he was passing Vehicle #1, the right front tire of Vehicle #1 collided with the left rear corner of his vehicle. Vehicle #2 sustained moderate damage to the left rear corner.

No summonses were issued.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAVALLO M	337	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	05
100a	01
100b	04
101	02
102	01
103	05
104	2
105	03
106	-
107	-
108	01
109	05
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	01

1 Case Number: 22-004317

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

10 Crash Occurred On: CEDARBRIDGE AVE — Road Name — Dir: -

☒ At Intersection With ☐ Feet ☐ Miles — 14 — 15 — 16

☐ N ☐ E ☐ S ☐ W of: MELVILLE AVE

11 Speed Limit: 45 — 12 Route No.: 0528 — Suffix: - — 13 Milepost: -

18 Speed Limit: 25

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

4 Date of Crash (mm dd yy): 01/17/22 — 5 Day Of Week: MONDAY — 6 Time (use 2400 hrs): 1442 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

21 Latitude: 40.084820 — 22 Longitude: -74.206730

118a	25
118b	-
119a	04
119b	-
120a	01
120b	01
121a	01
121b	01
122	01
123	03
124	04
125	08
126a	26
126b	06
126c	56
126d	59
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	10
132	10
133	04
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 4311248969 — 25 NJ Ins. Code: 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: NAOMI — Initial: - — Last Name: GOLDSTEIN — 29 Sex: F

27 Number & Street: 977 WOODLANE RD

28 City: JACKSON — State: NJ — Zip: 08527

30 Eyes: BR — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: G62325790062882 — 33 DOB (mm dd yyyy): 12/07/1988 — 34 Expires (mm yy): 12 25

35 Owner's ☐ Same As Driver — First Name: AZRIEL — Initial: D — Last Name: GOLDSTEIN

36 Number & Street: 977 WOODLANE RD

37 City: JACKSON — State: NJ — Zip: 08527

38 Make: HOND — 39 Model: ACC — 40 Color: LBR — 41 Year: 2006 — 42 Plate No.: YXS12H — 43 State: NJ

44 VIN: 1HGCM56426A128396 — 45 Expires: 06 22

46 Vehicle Removed To: FREEDOM TOWING & RECOVERY

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: — Placard No.:

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2 — 54 Policy No.: 1290384756 — 55 NJ Ins. Code: 360

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: JUAN — Initial: U — Last Name: GONZALEZ-CRUZ — 59 Sex: M

57 Number & Street: 845 KNIGHT ST

58 City: TOMS RIVER — State: NJ — Zip: 08753

60 Eyes: BR — DL Class: - — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: G64594158412732 — 63 DOB (mm dd yyyy): 12/28/1973 — 64 Expires (mm yy): 12 25

65 Owner's ☐ Same As Driver — First Name: JUAN — Initial: U — Last Name: GONZALEZ-CRUZ

66 Number & Street: 845 KNIGHT ST

67 City: TOMS RIVER — State: NJ — Zip: 08753

68 Make: CHEV — 69 Model: SIL — 70 Color: SIL — 71 Year: 2002 — 72 Plate No.: T95CYG — 73 State: NJ

74 VIN: 2GCEC19T221303417 — 75 Expires: 03 22

76 Vehicle Removed To: FREEDOM TOWING & RECOVERY

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: — Placard No.:

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property ☒ Yes (If Yes, describe) ☐ No

FENCE DAMAGED AT THE EAST SIDE OF GREENWOD CEMETERY AT 391 CEDAR BRIDGE AVENUE.

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01			01		
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
02			02		

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	33	F	-	-	-	11	11	04	-	NAOMI - GOLDSTEIN - 977 WOODLANE RD JACKSON NJ 08527
B	01	04	01	05	06M	M	-	-	-	11	11	04	-	MOSHE - GOLDSTEIN - 977 WOODLINE ROAD JACKSON NJ 08527
C	01	06	01	05	5	M	-	-	-	11	11	04	-	YISROEL - GOLDSTEIN - 977 WOODLANE ROAD JACKSON NJ 08527
D	02	01	01	05	48	M	-	-	-	04	02	-	-	JUAN U GONZALEZ-CRUZ - 845 KNIGHT ST TOMS RIVER NJ 08753

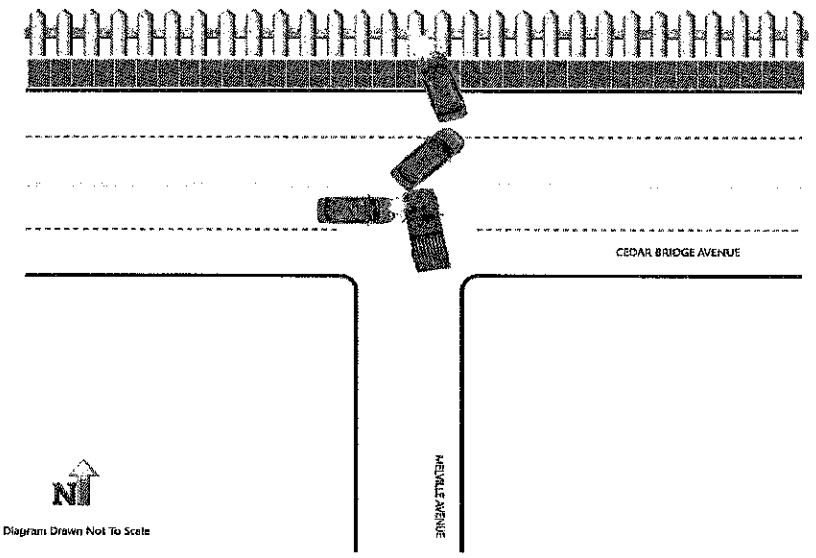
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-004317

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle one stated she was traveling East on Cedar Bridge Avenue in the left hand lane. Furthermore she stated upon approaching the intersection at Melville Road, vehicle two turned left from Melville Road subsequently violating her right of way and striking her vehicle.

Upon the collision and due to the force of the impact, vehicle one went off the roadway to the left. It then crossed the West bound traffic lanes on Cedar Bridge Avenue striking a curb then a fence on the South side of the property at 391 Cedar Bridge Avenue. Minor property damage was caused as a result of impact.

Driver of vehicle two stated he was stopped at the stop sign at Melville Road at the intersection of Cedar Bridge Avenue preparing to turn Left. Upon turning, his view became obstructed by traffic causing him to collide with vehicle one.

As a result of my investigation and a statement from an eye witness, I have determined the driver of vehicle two to be at fault due to failure to yield right of way to vehicle one.

END OF NARRATIVE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MCMILLAN, P	426	KCM	335	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-000079
2 Police Dept of	LAKEWOOD TOWNSHIP F
Code	01
3 Station/Precinct	
10 Crash Occurred On	1248 RIVER AVE
Road Name / Dir	
11 Speed Limit	10
12 Route No. / Suffix / 13 Milepost / 18 Speed Limit	
☐ At Intersection With / ☐ Feet / ☐ Miles (14, 15, 16) ☐ N ☐ E ☐ S ☐ W of:	
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash (mm dd yy)	01/01/22
5 Day Of Week	SATURDAY
6 Time (use 2400 hrs)	1332
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.05414
22 Longitude	-74.22103

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	2007636876	54 Policy No.	*
25 NJ Ins. Code	225	55 NJ Ins. Code	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JOSE N ROMERO -	56 Driver's First Name / Initial / Last Name	MICHAEL J LOPEZ -
29 Sex	M	59 Sex	M
27 Number & Street	202 WILLIAMS ST	57 Number & Street	55 ALBERT CUCCI DR
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	BRICK NJ 08724
30 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -	60 Eyes / DL Class / Restrictions / Endorsements	2 / A / - / -
31 State	-	61 State	NJ
32 Driver's License Number	-	62 Driver's License Number	L65305447111732
33 DOB (mm dd yyyy)	04/14/1982	63 DOB (mm dd yyyy)	11/27/1973
34 Expires (mm yy)	- -	64 Expires (mm yy)	11 24
35 Owner's ☐ Same As Driver / First Name / Initial / Last Name	RIGO A CHACON-MERLOS -	65 Owner's ☐ Same As Driver / First Name / Initial / Last Name	- - EAN HOLDINGS LL(-
36 Number & Street	136 E 17TH ST	66 Number & Street	14002 E 21ST ST STE 1500
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	TULSA OK 74134
38 Make	CHEV	68 Make	FORD
39 Model	G10	69 Model	F150
40 Color	WHI	70 Color	RD
41 Year	2005	71 Year	2020
42 Plate No.	J31PBB	72 Plate No.	KBXX51
43 State	NJ	73 State	FL
44 VIN	1GCFG15X851234387	74 VIN	1FTEW1E45LFA74666
45 Expires	08 22	75 Expires	06 22
46 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:3-10	1514A289777			
Oper.	**140 Charge**	**141 Summons. No.**	**Oper.**	**142 Charge**	**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	05	39	M	-	-	-	11	04	-	-	JOSE N ROMERO - 202 WILLIAMS ST LAKEWOOD NJ 08701
B	02	01	01	05	39	M	-	-	-	11	04	-	-	JOSE N ROMERO - 202 WILLIAMS ST LAKEWOOD NJ 08701
C														
D														

Box	Value
96	-
97	-
98	01
99	09
100a	01
100b	04
101	02
102	01
103	05
104	2
105	08
106	-
107	-
108	03
109	05
110	01
111	02
112	-
113	-
114	-
115	-
116	03
117	04

Box	Value
118a	10
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	13
123	10
124	11
125	11
126a	28
126b	-
126c	-
126d	-
126e	28
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	04
132	04
133	02
134	03

New Jersey Police Crash Investigation Report

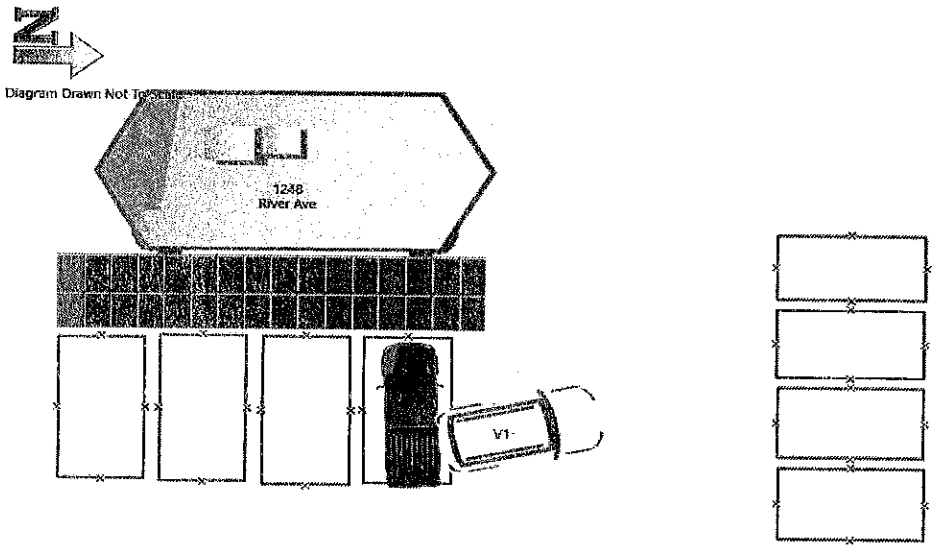
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-000079

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

*** Insurance for vehicle 2**
Florida state self insured
Certificate Number 4620

The driver of vehicle 1 stated that he was parked in the parking lot of 1248 River Ave facing west when vehicle 2 crashed into his vehicle.

The driver of vehicle 2 stated he was backing out of a parking spot, did not see vehicle 1, and backed into it.

There were no injuries observed or reported. Vehicle 1 was driven from the scene by the driver, vehicle 2 was left on the scene for a licensed driver.

Based on driver statements, I find driver 2 at fault of the crash for backing unsafely and for being an unlicensed driver.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MOONEY JR M	330	PA	325	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-002484
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	01/11/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1602
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	E 5TH ST (Road Name)
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
☒ At Intersection With / ☐ Feet / ☐ Miles	-
☐ N ☐ E ☐ S ☐ W of	RIDGE AVE
17 Cross Road Name	RIDGE AVE
18 Speed Limit	25
19 Ramp ☐ To ☐ From	-
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.095560
22 Longitude	-74.206400

Left margin codes: 96: 05; 97: 01; 98: 01; 99: 07; 100a: 01; 100b: 04; 101: 02; 102: 01; 103: 01; 104: 2; 105: 01; 106: 02; 107: 02; 108: 31; 109: 01; 110: 02; 111: 01; 112: 09; 113: -; 114: 02; 115: -; 116: 04; 117: 04

Right margin codes: 118a: 25; 118b: -; 119a: 09; 119b: 02; 120a: 01; 120b: -; 121a: 01; 121b: -; 122: 08; 123: 01; 124: 11; 125: 13; 126a: 26; 126b: -; 126c: -; 126d: -; 126e: 26; 127a: 26; 127b: -; 127c: -; 127d: -; 127e: 01; 128: 26; 129: 07; 130: 07; 131: 12; 132: 12; 133: 03; 134: 04

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	BA51257Z (SEE NARRATIVE)	54 Policy No.	4394699328
25 NJ Ins. Code	-	55 NJ Ins. Code	148
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	SHMUEL Y SAKS -	56 Driver's First Name / Initial / Last Name	FAIGY M FRIEDMAN -
29 Sex	M	59 Sex	F
27 Number & Street	24 FINCHLEY BLVD	57 Number & Street	14 WINDSOR CT
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes	05	60 Eyes	02
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NY
32 Driver's License Number	S02267098804945	62 Driver's License Number	173609821
33 DOB	04/25/1994	63 DOB	04/14/1990
34 Expires (mm yy)	04 20	64 Expires (mm yy)	04 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - HT BUS SERVICES I -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver ABRAHAM - JACOBS -
36 Number & Street	253 RIVER AVE	66 Number & Street	14 WINDSOR CT
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	LAKEWOOD NJ 08701
38 Make	THO	68 Make	HOND
39 Model	310	69 Model	ODY
40 Color	YEL	70 Color	GRY
41 Year	2020	71 Year	2020
42 Plate No.	R928S1	72 Plate No.	P87MYY
43 State	NJ	73 State	NJ
44 VIN	4UZABPFD6LCLP6816	74 VIN	5FNRL6H76LB030628
45 Expires	04 22	75 Expires	10 23
46 Vehicle Removed To	-	76 Vehicle Removed To	PARKED ON PRIVATE PROPERTY
Removal	☒ Driven ☐ Left At Scene ☐ Towed Disabled ☐ Towed Impounded ☐ Towed Disabled & Impounded	Removal	☐ Driven ☒ Left At Scene ☐ Towed Disabled ☐ Towed Impounded ☐ Towed Disabled & Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☒ USDOT 3454688 ☐ None; ☐ MC/MX 1125751	80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	HT BUS SERVICES INC.	82 Motor Carrier or Government Entity	-
Number & Street	688 CROSS ST; PO BOX 438	Number & Street	-
City / State / Zip	LAKEWOOD NJ 08701	City / State / Zip	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons, No.	Oper.	138 Charge	139 Summons, No.
02	39:4-97	1514 A 291068	-		-

Oper.	140 Charge	141 Summons, No.	Oper.	142 Charge	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	05	27	M	-	-	-	11	04	-	-	SHMUEL Y SAKS - 24 FINCHLEY BLVD LAKEWOOD NJ 08701 - -
B	02	01	01	05	31	F	-	-	-	11	04	-	-	FAIGY M FRIEDMAN - 14 WINDSOR CT LAKEWOOD NJ 08701 - -
C														
D														

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTION

Police Agency LAKEWOOD TOWNSHIP POLICE DEPT.
Station -
Case No. 22-002484

1.	HENNA	FRIEDMAN
2.	CHANA	GORDON
3.	MIRIAM	GORDON
4.	MIRIAM	ISAACSON
5.	CHANA	KAPLAN
6.	NECHAMA	KAPLAN
7.	VICHNA	KAPLAN
8.	CHANA	ROTHSTEIN
9.	ROCHEL	ROTHSTEIN
10.	YOCHEVED	ROTHSTEIN
11.	ROIZY	WEITMAN
12.	RECHY	WIESNER
13.	SARA	WIESNER
14.		
15.		
16.		
17.		
18.		
19.		
20.		
21.		
22.		
23.		
24.		
25.		
26.		
27.		
28.		
29.		
30.		
31.		
32.		
33.		
34.		
35.		
36.		
37.		
38.		
39.		
40.		
41.		
42.		
43.		
44.		
45.		
46.		
47.		
48.		
49.		
50.		
51.		
52.		
53.		
54.		

SCHOOL BUS
(full size)

● DRIVER				DOOR →	
1	2	3		4	5
6	7	8		9	10
11	12	13		14	15
16	17	18		19	20
21	22	23		24	25
26	27	28		29	30
31	32	33		34	35
36	37	38		39	40
41	42	43		44	45
46	47	48		49	50
51	52			53	54

MINIBUS

● DRIVER			DOOR →	
1	2		3	4
5	6		7	8
9	10		11	12
13	14		15	16

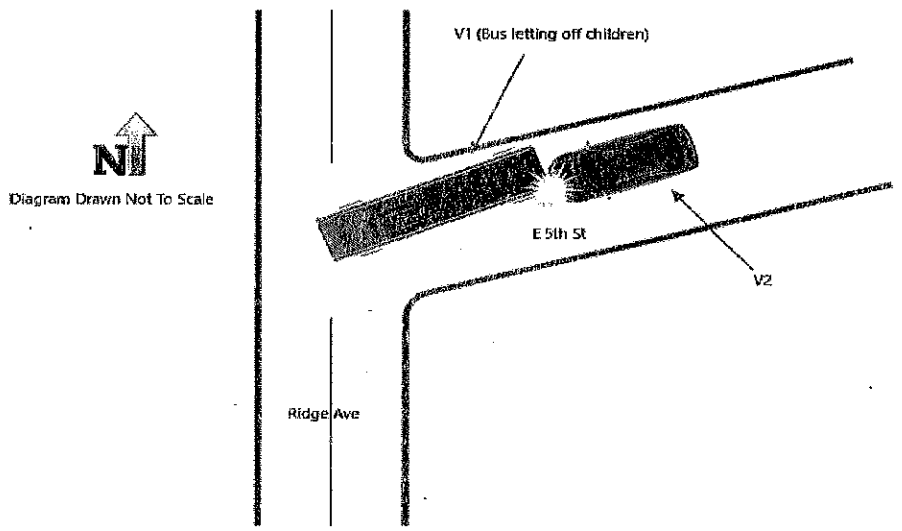
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-002484

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated, he was stopped at the intersection of E 5th St and Ridge Ave letting children off of the bus. He stated, the emergency lights were activated and the stop sign was signaling. He stated, as the children began to exit the bus, he was rear ended by vehicle 2. No injuries reported. The damage was primarily to the rear.

Driver 2 stated, she was stopped behind the school bus at the stop sign on the intersection of E 5th St & Ridge Ave. She stated, the bus began to go and quickly stopped again, causing the collision It should be noted, vehicle 2 exhibited heavy front end damage and did not appear to be consistent with driver 2's statement.

As a result of my investigation, I, Patrolman Connor Woods #418 determined driver 2 at fault for the crash due to following to closely and driver inattention.

Vehicle 1 Insurance Info:
Policy #BA51257Z
Company #23787
Central Insurers Group Inc.
1360 North Atherton Street
State College, PA 16803

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WOODS, C	418	E. MIICK	307	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-003069
2 Police Dept of	LAKEWOOD POLICE
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	01/13/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	2056
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	RIVER AVE -
11 Speed Limit	40
12 Route No.	0009
Suffix	-
13 Milepost	-
☐ At Intersection With	
14	150 ☒ Feet ☐ Miles
16	☒ N ☐ E ☐ S ☐ W of:
17 Cross Road Name	HENRY ST
18 Speed Limit	25
19 Ramp	☐ To ☐ From: -
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.077400
22 Longitude	-74.216780

Margin codes (left): 96 05; 97 05; 98 07; 99 02; 100a 01; 100b 04; 101 02; 102 01; 103 05; 104 2; 105 01; 106 -; 107 -; 108 01; 109 01; 110 01; 111 01; 112 -; 113 -; 114 -; 115 -; 116 01; 117 01

Margin codes (right): 118a 02; 118b -; 119a 25; 119b -; 120a 01; 120b -; 121a 01; 121b -; 122 01; 123 07; 124 04; 125 04; 126a 26; 126b -; 126c -; 126d -; 126e 26; 127a 26; 127b -; 127c -; 127d -; 127e 26; 128 26; 129 12; 130 12; 131 06; 132 06; 133 03; 134 03

Vehicles

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	4208-61-35-80	54 Policy No.	939 612 615
25 NJ Ins. Code	148	55 NJ Ins. Code	054
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	YECHIEL S SCHWARTZ -	56 Driver's First Name / Initial / Last Name	MENACHEM A LOWI -
29 Sex	M	59 Sex	M
27 Number & Street	906 MORRIS AVE	57 Number & Street	402 WARREN AVE
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes	04	60 Eyes	04
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	S15707898204824	62 Driver's License Number	L68855396112864
33 DOB (mm dd yyyy)	04/07/1982	63 DOB (mm dd yyyy)	12/04/1986
34 Expires (mm yy)	04 25	64 Expires (mm yy)	12 22
35 Owner's First Name / Initial / Last Name	☒ Same As Driver YECHIEL S SCHWARTZ -	65 Owner's First Name / Initial / Last Name	☒ Same As Driver MENACHEM A LOWI -
36 Number & Street	906 MORRIS AVE	66 Number & Street	402 WARREN AVE
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	LAKEWOOD NJ 08701
38 Make	TOYT	68 Make	TOYT
39 Model	COA	69 Model	SIE
40 Color	SIL	70 Color	BLK
41 Year	2014	71 Year	2013
42 Plate No.	P56ADC	72 Plate No.	V83FSL
43 State	NJ	73 State	NJ
44 VIN	2T1BURHE1EC101983	74 VIN	5TDKK3DC1DS347977
45 Expires	09 22	75 Expires	08 22
46 Vehicle Removed To	-	76 Vehicle Removed To	-
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

Occupants

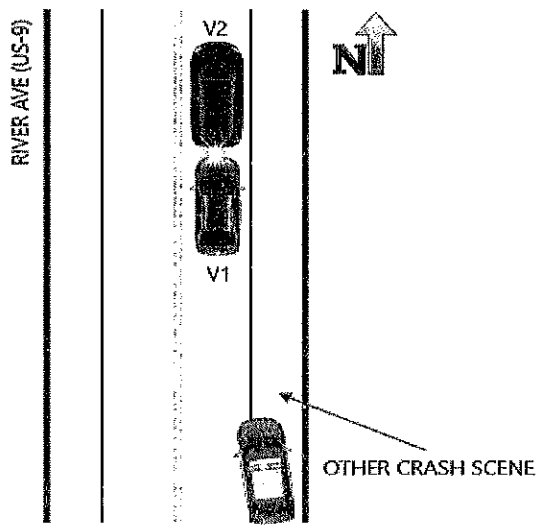
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	39	M	-	-	-	11	04	-	-	YECHIEL S SCHWARTZ - 906 MORRIS AVE LAKEWOOD NJ 08701 - -
B	2	01	01	05	35	M	-	-	-	11	04	-	-	MENACHEM A LOWI - 402 WARREN AVE LAKEWOOD NJ 08701 - -
C	2	03	01	05	15	F	-	-	-	11	04	-	-	MICHAL - ROBINSON - 21 SHONNY CT LAKEWOOD NJ 08701 - -
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD POLICE Code: 01
	Station: - Case No: 22-003069

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 struck V2 from behind on River Avenue (US-9) northbound, approximately 150 feet north of Henry Street. Prior to the crash both vehicles were being driven straight ahead past an existing crash scene. A police vehicle was set up with emergency lights activated behind this other scene, angled slightly into the roadway to allow for a safe investigation of this other crash.

Driver 1's statement explained that he went past the crash and slowing in traffic when he was struck from behind.

Driver 2's statement explained that he was distracted by the crash scene and struck V2.

Both statements were recorded on my body worn camera. No injuries were reported. Both vehicles were driven from the scene. I find that Driver 1 is responsible for the crash due to inattention.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
BURKHARDT B	361	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	02

1 Case Number: 22-003111

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 01/13/22

5 Day Of Week: THURSDAY

6 Time (use 2400 hrs): 2302

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 1

10 Crash Occurred On: WEST COUNTY LINE ROAD — Road Name — Dir: -

☒ At Intersection With ☐ Feet ☐ Miles (14) (15) ☐ N ☐ E ☐ S ☐ W (16) of: HOPE CHAPEL ROAD

11 Speed Limit: 45

12 Route No.: - Suffix: - 13 Milepost: -

18 Speed Limit: 35

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

20 Route/Name: ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.110800

22 Longitude: -74.239210

118a	02
118b	-
119a	25
119b	-
120a	01
120b	01
121a	01
121b	01
122	03
123	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	56
127c	60
127d	-
127e	26
128	26
129	11
130	11
131	09
132	09
133	04
134	04

Vehicle 1

23 Veh #: 1

24 Policy No.: 5129J006338

25 NJ Ins. Code: 917

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: AKIVA — Initial: - — Last Name: COHEN — 29 Sex: M

27 Number & Street: 12 DARBY ROAD

28 City: MONSEY — State: NY — Zip: 10952

30 Eyes: - — DL Class: D — Restrictions: - — Endorsements: -

31 State: NY

32 Driver's License Number: 496798030

33 DOB (mm dd yyyy): 02/05/1995

34 Expires (mm yy): 02 27

35 Owner's First Name: FAIGA — Initial: - — Last Name: FRIEDMAN

☐ Same As Driver

36 Number & Street: 26 OLIVER ST

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: HYUN — 39 Model: SON — 40 Color: BLU — 41 Year: 2020 — 42 Plate No.: U68MWY — 43 State: NJ

44 VIN: 5NPEG4JA1LH050414

45 Expires: 08 23

46 Vehicle Removed To: MOSHEYS TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.:

50 Carrier No.: ☐ USDOT ☐ MC/MX ☐ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: — Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: 4619-20-90-51

55 NJ Ins. Code: 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: YAKOV — Initial: - — Last Name: LANGER — 59 Sex: M

57 Number & Street: 35 WHISPERING PINES LN

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 04 — DL Class: D — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: L04227890004964

63 DOB (mm dd yyyy): 04/03/1996

64 Expires (mm yy): 04 24

65 Owner's First Name: YAKOV — Initial: - — Last Name: LANGER

☐ Same As Driver

66 Number & Street: 35 WHISPERING PINES LN

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: TOYT — 69 Model: COR — 70 Color: GRY — 71 Year: 2019 — 72 Plate No.: C68NYC — 73 State: NJ

74 VIN: 5YFBURHE6KP864609

75 Expires: 07 22

76 Vehicle Removed To: MOSHEYS TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.:

80 Carrier No.: ☐ USDOT ☐ MC/MX ☐ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: — Zip: -

135 Damage To Other Property: ☒ Yes (If Yes, describe) ☐ No

DAMAGE TO REAR YARD AND TREE AT 14 CATHEDRAL DRIVE LAKEWOOD NJ

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	0.0.0.0	-	02	0.0.0.0	-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	0.0.0.0	-	-	0.0.0.0	-

	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	-	26	M	-	-	-	11	11	01	-	AKIVA - COHEN - 12 DARBY ROAD MONSEY NY 10952 - -
B	02	01	01	04	25	M	-	-	01	11	04	-	-	YAKOV - LANGER - 35 WHISPERING PINES I LAKEWOOD NJ 08701 - -
C														
D														

New Jersey Police Crash Investigation Report

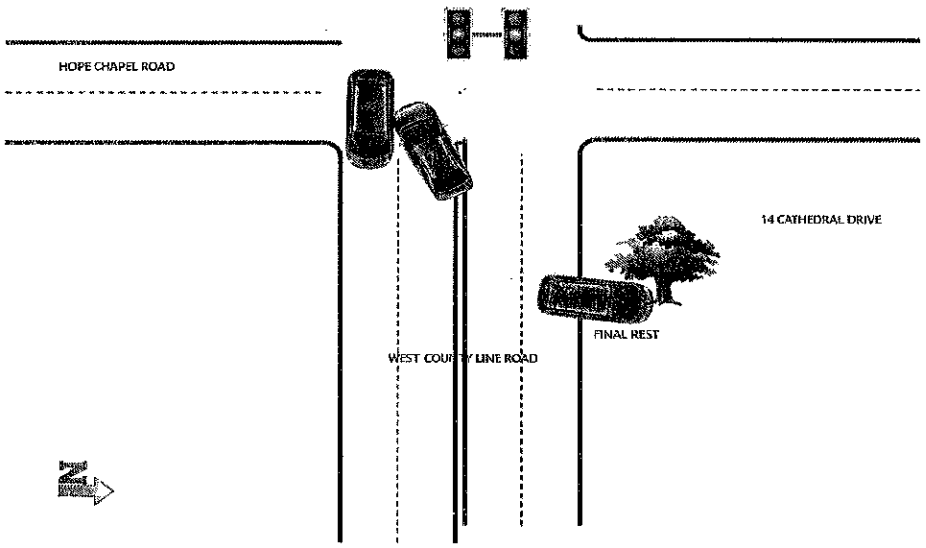
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: " Case No: 22-003111

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER 1 STATED THAT HE WAS TRAVELLING WEST ON WEST COUNTY LINE ROAD AND BEGAN TO MAKE A LEFT TURN ONTO HOPE CHAPEL ROAD. HE STATED THAT IT DID NOT APPEAR ANY VEHICLES WERE COMING HOWEVER HE CRASHED INTO VEHICLE 2 WHILE MAKING THE TURN.

DRIVER 2 STATED THAT HE WAS TRAVELLING EAST ON WEST COUNTY LINE ROAD WHEN VEHICLE 1 TURNED AND CRASHED INTO HIM.

IT APPEARED TO ME THAT DRIVER 1 DID NOT SEE VEHICLE 2 DUE TO POSSIBLE LOW LIGHTING IN THE AREA. I AM ALSO UNABLE TO DETERMINE IF VEHICLE 2 WAS DRIVING OVER THE SPEED LIMIT.

VEHICLE 2 CAUSED DAMAGE TO THE REAR PROPERTY AT 14 CATHEDRAL DRIVE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GANLEY J	362	LNJ	322	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	07
100a	01
100b	04
101	02
102	01
103	01
104	2
105	06
106	-
107	-
108	29
109	31
110	02
111	02
112	-
113	09
114	09
115	02
116	03
117	03

1 Case Number: 22-003239

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 01/14/22

5 Day Of Week: FRIDAY

6 Time (use 2400 hrs): 0812

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: ASPEN COURT (Road Name) - (Dir) 11 Speed Limit: 25 - - - (12 Route No. Suffix 13 Milepost)

☐ At Intersection With ☒ Feet ☐ Miles (14 15) ☐ N ☐ E ☐ S ☐ W of: OCEAN AVENUE (16) 18 Speed Limit: 45

19 Ramp ☐ To ☐ From: - 17 Cross Road Name: - ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name: 21 Latitude: - 22 Longitude: -

118a	06
118b	-
119a	25
119b	-
120a	-
120b	-
121a	02
121b	-
122	10
123	01
124	11
125	11
126a	28
126b	-
126c	-
126d	-
126e	28
127a	26
127b	-
127c	-
127d	-
127e	26
128	28
129	03
130	03
131	08
132	08
133	02
134	02

Vehicle 1

23 Veh #: 1 — 24 Policy No.: SELF-INSURED — 25 NJ Ins. Code: -

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: - Initial: - Last Name: - — 29 Sex: -

27 Number & Street: -

28 City: - State: - Zip: -

30 Eyes: - DL Class: - Restrictions: - Endorsements: - 31 State: -

32 Driver's License Number: - 33 DOB (mm dd yyyy): - 34 Expires (mm yy): - -

35 Owner's ☐ Same As Driver — First Name: LAKEWOOD Initial: - Last Name: TOWNSHIP OF LAK -

36 Number & Street: 231 3RD ST

37 City: LAKEWOOD State: NJ Zip: 08701

38 Make: IC 39 Model: 218 40 Color: YEL 41 Year: 2015 42 Plate No.: E431S1 43 State: NJ

44 VIN: 4DRBUC8P4FB640558 45 Expires: 06 22

46 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - Placard No.: -

50 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: TOWNSHIP OF LAKEWOOD

Number & Street: 231 THIRD STREET

City: LAKEWOOD State: NJ Zip: 08701

Vehicle 2

53 Veh #: 2 — 54 Policy No.: BA2997BD — 55 NJ Ins. Code: -

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: ONEIDA Initial: A Last Name: DELEON - — 59 Sex: F

57 Number & Street: 417 WYNNEWOOD RD

58 City: FORKED RIVER State: NJ Zip: 08731

60 Eyes: 01 DL Class: B Restrictions: - Endorsements: - 61 State: NJ

62 Driver's License Number: D23676056151711 63 DOB (mm dd yyyy): 01/08/1971 64 Expires (mm yy): 01 26

65 Owner's ☐ Same As Driver — First Name: BUS SERVICE INC Initial: - Last Name: JAYS -

66 Number & Street: 672 CROSS STREET

67 City: LAKEWOOD State: NJ Zip: 08701

68 Make: MACK 69 Model: GU8 70 Color: WHI 71 Year: 2018 72 Plate No.: 25586MG 73 State: NJ

74 VIN: 1M2AX13C5JM039989 75 Expires: 07 23

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - Placard No.: -

80 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: JAYS BUS SERVICE INC.

Number & Street: 672 CROSS STREET

City: LAKEWOOD State: NJ Zip: 08701

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

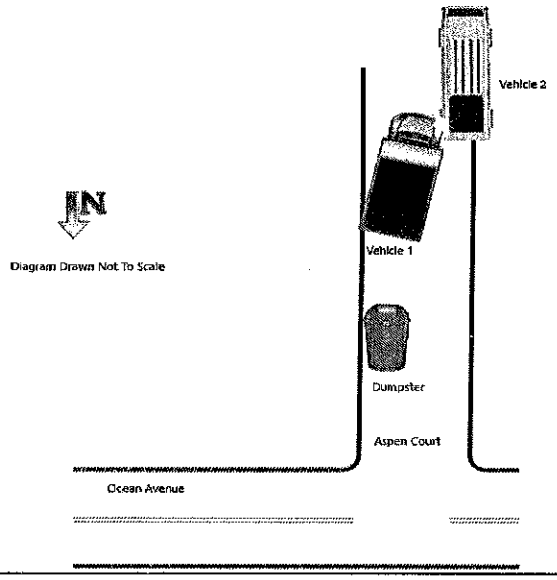
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	51	F	-	-	-	11	04	-	-	ONEIDA A DELEON - 417 WYNNEWOOD RD FORKED RIVER NJ 08731 - -
B	02	01	01	05	22	M	-	-	-	11	04	-	-	DAVID F MCCLENDON 4TH 4TH 462 NAUTILUS DR MANAHAWKIN NJ 08050 - -
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: - Case No: 22-003239

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1, a Department of Public Works vehicle, was parked on Aspen Court facing north. Driver 1 stated he was not inside of the vehicle when it was struck by vehicle 2. Vehicle 1 was parked approximately 25 feet away from the dumpster, the front end of the vehicle was angled in the roadway. He stated he believed there was enough room as vehicle 2 was trying to pass through. He stated heard as driver of vehicle 2 had struck vehicle 1.

Vehicle 2, a Jay's School Bus, was traveling north on Aspen Court. She stated as she was driving passed vehicle 1, driver 1 began to move the vehicle forward striking the rear left side of vehicle 2.

Vehicle 1 had damage to the right front side of the fender and vehicle 2 had damage the left rear side of the bumper.

There were student passengers on board vehicle 2, ages ranging from 5 to 12 years of age.

Vehicle 1 Insurance Information
Self-insured ID 05-87

Vehicle 2 Insurance Information
Company Number: 23787

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
PTL. A. ESMART	402	PA	325	☐ Pending ☒ Complete

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTION

Police Agency LAKEWOOD TOWNSHIP POLICE DEPT.
Station -
Case No. 22-003239

1.	ONEIDA	DELEON	A
2.	YAAKOV	GINSBERG	T
3.	GERSHON	STERN	Y
4.	AVNER	STERN	-
5.	AVRAHAM	SALZMAN	-
6.	YAAKOV	WASILSKI	-
7.	SHMULLY	WEISS	-
8.	TZVI	WEISS	-
9.	ELIMELECH	STEINHARTER	-
10.	MEIR	STEINHARTER	-
11.	CHAIM	ALLSTADLER	-
12.	MOSHE	ALLSTADLER	-
13.	ARYAH	ADAMS	-
14.	YEHOSHUA	FRANKEL	-
15.	YISRAEL	FRANKEL	-
16.	CHAIM	GURWITZ	-
17.	ISAAC	GUTTMAN	-
18.	YOSSI	GUTTMAN	-
19.	CHAIM	LEIMAN	-
20.	DOVID	CHARISH	S
21.	MOISHE	RUBIN	-
22.	YEHOSHUA	RUBIN	-
23.	MOISHY	MINZER	-
24.	NAFTALI	MINZER	-
25.	MOISHE	MILLER	-
26.	YITZCHOK	MILLER	-
27.	ELIYAHU	CARLEBACH	-
28.	MOSHE	GINSBERG	-
29.	BINYOMIN	FEIG	-
30.	YISROEL	FEIG	-
31.	SHUA	KOPLOWITZ	-
32.	SRULY	KOHN	-
33.	YITZCHOK	BIEGELEISEN	M
34.	YOSEF	COHEN	-
35.	AARON	WEILL	-
36.	SHIMMY	WEILL	-
37.	YAAKOV	FRANKEL	-
38.			
39.			
40.			
41.			
42.			
43.			
44.			
45.			
46.			
47.			
48.			
49.			
50.			
51.			
52.			
53.			
54.			

SCHOOL BUS
(full size)

● DRIVER DOOR →

1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25
26	27	28	29	30
31	32	33	34	35
36	37	38	39	40
41	42	43	44	45
46	47	48	49	50
51	52		53	54

MINIBUS

● DRIVER DOOR →

1	2	3	4
5	6	7	8
9	10	11	12
13	14	15	16

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	09
100a	01
100b	04
101	02
102	01
103	01
104	2
105	04
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	04

1 Case Number: 22-003245

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 01/14/22

5 Day Of Week: FRIDAY

6 Time (use 2400 hrs): 0847

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: 386 CLIFTON AVE — Road Name — Dir — 12 Route No. — Suffix — 13 Milepost

☐ At Intersection With

☐ Feet ☐ N ☐ E of: -

☐ Miles ☐ S ☐ W

14 15 16

19 Ramp ☐ To ☐ From: -

17 Cross Road Name

20 Route/Name

21 Latitude: 40.093786

22 Longitude: -74.215227

11 Speed Limit: 25

18 Speed Limit: 25

☐ NB ☐ EB ☐ SB ☐ WB

118a	99
118b	-
119a	02
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	02
132	02
133	02
134	02

Vehicle 1

23 Veh #: 1

24 Policy No.: 6056-93-74-33

25 NJ Ins. Code: 100

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: MANUEL — Initial: I — Last Name: SARAVIAMORA — 29 Sex: M

27 Number & Street: 3 WESTMINSTER DR

28 City: JACKSON — State: NJ — Zip: 08527

30 Eyes: 02 — DL Class: I — Restrictions: - — Endorsements: -

31 State: NJ

32 Driver's License Number: S05405166905582

33 DOB (mm dd yyyy): 05/19/1958

34 Expires (mm yy): 05 25

35 Owner's First Name: JOSE — Initial: A — Last Name: PALACIOS

☐ Same As Driver

36 Number & Street: 11 CITADEL CT

37 City: JACKSON — State: NJ — Zip: 08527

38 Make: HOND — 39 Model: HRV — 40 Color: BLK — 41 Year: 2019 — 42 Plate No.: U42MFM — 43 State: NJ

44 VIN: 3CZRU6H57KM704625 — 45 Expires: 02 22

46 Vehicle Removed To: -

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☒ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

49 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class: - Placard No.: -

50 Carrier No.

☐ USDOT - ☒ None

☐ MC/MX -

51 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - State: - Zip: -

Vehicle 2

53 Veh #: 2

54 Policy No.: 92052920PM

55 NJ Ins. Code: 019

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: SIMON — Initial: H — Last Name: SZIMONOWITZ — 59 Sex: M

57 Number & Street: 1468 SOUTH ST

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 05 — DL Class: D — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: S97547166812815

63 DOB (mm dd yyyy): 12/11/1981

64 Expires (mm yy): 11 19

65 Owner's First Name: SIMON — Initial: H — Last Name: SZIMONOWITZ

☐ Same As Driver

66 Number & Street: 1468 SOUTH ST

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: KIA — 69 Model: FOR — 70 Color: BLK — 71 Year: 2019 — 72 Plate No.: D64KWE — 73 State: NJ

74 VIN: 3KPF24AD1KE059520 — 75 Expires: 12 22

76 Vehicle Removed To: -

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

79 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class: - Placard No.: -

80 Carrier No.

☐ USDOT - ☒ None

☐ 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: -

Number & Street: -

City: - State: - Zip: -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:3-10	289277			
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	63	M	-	-	-	11	04	-	-	MANUEL I SARAVIAMORA - 3 WESTMINSTER DR JACKSON NJ 08527 - -
B	01	03	01	05	57	F	-	-	-	11	04	-	-	GLORIA I ORTEGA-PACHECO - 306 MAIN ST; 2A; 2FL LAKEWOOD NJ 08701 - -
C	02	01	01	05	40	M	-	-	-	11	04	-	-	SIMON H SZIMONOWITZ - 1468 SOUTH ST LAKEWOOD NJ 08701 - -
D														

New Jersey Police Crash Investigation Report

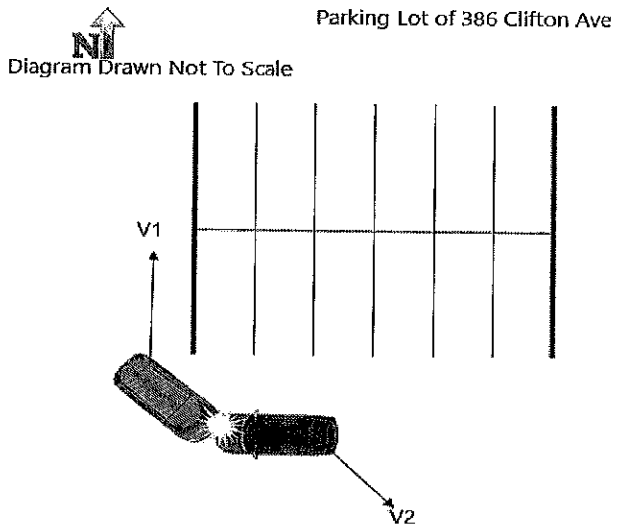
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-003245

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated that as he was entering the parking lot of 386 Clifton Avenue. He began to make a left-hand turn; as he was making his left-hand turn, he noticed a V2 coming directly towards him, so he began to beep his horn multiple times. The driver of V1 mentioned that he tried to avoid the collision, but V2 collided into him. All parties inside V1 were not injured and did not need medical attention.

The driver of V2 stated that he was driving towards the parking lot's exit. As he was going towards the exited he lost focus and collided into V1. The driver of V2 explained that he was not injured and did not need medical attention.

The driver of V1 was issued a summons #289277 for unregistered Vehicle.

Based on the investigation: V2 is at fault for losing focus while operating a motor vehicle.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
TOWNSEND T	403	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 07 | 100a 01 | 100b 04 | 101 02 | 102 01 | 103 01 | 104 2 | 105 07 | 106 - | 107 - | 108 01 | 109 01 | 110 01 | 111 02 | 112 - | 113 01 | 114 - | 115 - | 116 02 | 117 01

1 Case Number: 22-003251

2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

3 Station/Precinct:

10 Crash Occurred On: 14TH ST

☒ At Intersection With | Road Name: ROSELLE CT | Dir:

☐ Feet ☐ N ☐ E of: | ☐ Miles ☐ S ☐ W

14 15 16

11 Speed Limit: 45

12 Route No. | Suffix | 13 Milepost | 18 Speed Limit: 25

19 Ramp ☐ To ☐ From: | 17 Cross Road Name: | ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

4 Date of Crash (mm dd yy): 01/14/22 | 5 Day Of Week: FRIDAY | 6 Time (use 2400 hrs): 0920 | 7 Municipality Code: 1514 | 8 Total Killed: -- | 9 Total Injured: --

21 Latitude: 40.10333 | 22 Longitude: -74.23516

118a 25 | 118b - | 119a 02 | 119b 16 | 120a 01 | 120b - | 121a 01 | 121b - | 122 01 | 123 03 | 124 11 | 125 08 | 126a 26 | 126b - | 126c - | 126d - | 126e 26 | 127a 26 | 127b - | 127c - | 127d - | 127e 26 | 128 26 | 129 05 | 130 05 | 131 01 | 132 01 | 133 02 | 134 02

Vehicle 1

23 Veh #: 1 | 24 Policy No.: 939632311 | 25 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: ISRAEL | Initial: S | Last Name: SOLNY | 29 Sex: M

27 Number & Street: 1461 PINE PARK AVE

28 City: LAKEWOOD | State: NJ | Zip: 08701

30 Eyes: 4 | DL Class: D | Restrictions: - | Endorsements: -

31 State: NJ

32 Driver's License Number: S62903768202614

33 DOB (mm dd yyyy): 02/23/1961

34 Expires (mm yy): 02 24

35 Owner's First Name: ISRAEL | Initial: S | Last Name: SOLNY

☐ Same As Driver

36 Number & Street: 1461 PINE PARK AVE

37 City: LAKEWOOD | State: NJ | Zip: 08701

38 Make: TOYT | 39 Model: CAM | 40 Color: 1 | 41 Year: 2017 | 42 Plate No.: E82KWX | 43 State: NJ

44 VIN: 4T1BF1FK4HU741354 | 45 Expires: 01 23

46 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

47 Authority

☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

49 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class | Placard No.

50 Carrier No.

☐ USDOT ☒ None

☐ MC/MX

51 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City | State | Zip

Vehicle 2

53 Veh #: 2 | 54 Policy No.: S2387237 | 55 NJ Ins. Code: 206

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: NOSSON | Initial: S | Last Name: GOLDSTEIN | 59 Sex: M

57 Number & Street: 85 ROSELLE CT

58 City: LAKEWOOD | State: NJ | Zip: 08701

60 Eyes: 6 | DL Class: D | Restrictions: - | Endorsements: -

61 State: NJ

62 Driver's License Number: G62326008208006

63 DOB (mm dd yyyy): 08/20/2000

64 Expires (mm yy): 08 25

65 Owner's First Name: - | Initial: - | Last Name: ENM CONTRACTIN(-

☐ Same As Driver

66 Number & Street: 990 CEDAR BRD AVE UN B7 235

67 City: BRICK | State: NJ | Zip: 08723

68 Make: FORD | 69 Model: TRA | 70 Color: WHI | 71 Year: 2019 | 72 Plate No.: XLFR96 | 73 State: NJ

74 VIN: 1FTYR2ZM6KKB12108 | 75 Expires: 10 22

76 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority

☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - %

☐ Pending

79 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class | Placard No.

80 Carrier No.

☒ USDOT 3518708 ☐ None

☐ 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

Number & Street

City | State | Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	60	M	-	-	-	11	04	-	-	ISRAEL S SOLNY - 1461 PINE PARK AVE LAKEWOOD NJ 08701
B	02	01	01	05	21	M	-	-	-	11	04	-	-	NOSSON S GOLDSTEIN - 85 ROSELLE CT LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

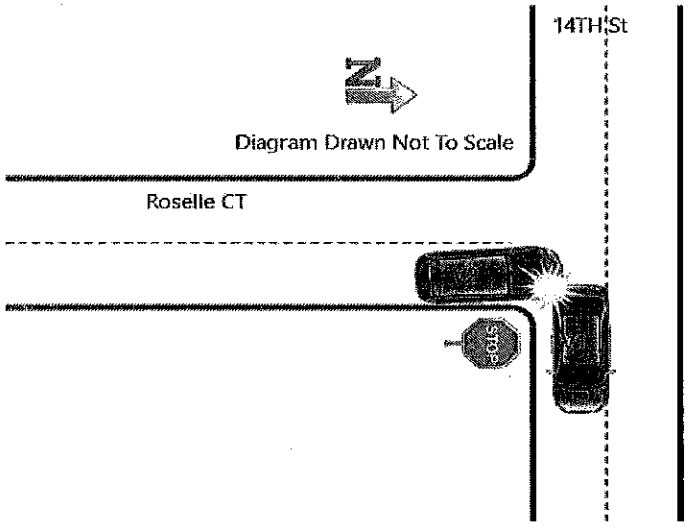
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-003251

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	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 (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was traveling East on 14Th Street. Driver of vehicle 1 stated the driver of vehicle 2 did not come to a complete stop at the stop sign. Driver of vehicle 1 stated vehicle 2 struck the rear passenger side of vehicle1 causing minor damage. Driver of vehicle 1 had no complaint of pain.

Driver of vehicle 2 stated he was traveling North on Roselle CT. Driver of vehicle 2 stated he came to a complete stop at the intersection of 14Th St and Roselle Ct. Driver of vehicle 2 attempted to make a left turn onto 14th St striking the rear passenger side of vehicle 1. Vehicle 2 had minor front passenger side damage. Driver of vehicle 2 had no complaint of pain.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ORTIZ, K	377	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	02
100a	01
100b	04
101	02
102	01
103	01
104	3
105	07
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	02

1 Case Number: 22-003291

2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

3 Station/Precinct:

10 Crash Occurred On: MADISON AVE

☐ At Intersection With Road Name Dir

☒ Feet ☒ N ☐ E of: W KENNEDY BLVD

250 ☐ Miles ☐ S ☐ W

14 15 16

11 Speed Limit: 45

12 Route No. Suffix 13 Milepost

18 Speed Limit: 45

17 Cross Road Name

19 Ramp ☐ To ☐ From:

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.10693 22 Longitude: -74.21948

4 Date of Crash (mm dd yy): 01/14/22 | 5 Day Of Week: FRIDAY | 6 Time (use 2400 hrs): 1223 | 7 Municipality Code: 1514 | 8 Total Killed: -- | 9 Total Injured: --

118a	25
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	02
124	04
125	08
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	11
132	11
133	04
134	02

Vehicle 1

23 Veh #: 1 | 24 Policy No.: 4595355126 | 25 NJ Ins. Code: 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: EZRIEL | Initial: - | Last Name: DANZIGER | 29 Sex: M

27 Number & Street: 309 COLES WAY

28 City: LAKEWOOD | State: NJ | Zip: 08701

30 Eyes: 6 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ

32 Driver's License Number: D05052580012946 | 33 DOB (mm dd yyyy): 12/11/1994 | 34 Expires (mm yy): 12 22

35 Owner's ☐ Same As Driver First Name: EZRIEL | Initial: - | Last Name: DANZIGER

36 Number & Street: 309 COLES WAY

37 City: LAKEWOOD | State: NJ | Zip: 08701

38 Make: TOYT | 39 Model: COR | 40 Color: GRY | 41 Year: 2007 | 42 Plate No.: H61NPD | 43 State: NJ

44 VIN: 2T1BR32E77C746292 | 45 Expires: 05 22

46 Vehicle Removed To: YITZ AUTO BODY

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill

Hazard Class Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City State Zip

Vehicle 2

53 Veh #: 2 | 54 Policy No.: 9969178472062 | 55 NJ Ins. Code: 884

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: ELIMELECH | Initial: G | Last Name: POSSICK | 59 Sex: M

57 Number & Street: 38 SEA POINT DR

58 City: LAKEWOOD | State: NJ | Zip: 08701

60 Eyes: 4 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

62 Driver's License Number: P67312096702884 | 63 DOB (mm dd yyyy): 02/10/1988 | 64 Expires (mm yy): 02 25

65 Owner's ☐ Same As Driver First Name: ELIMELECH | Initial: G | Last Name: POSSICK

66 Number & Street: 38 SEA POINT DR

67 City: LAKEWOOD | State: NJ | Zip: 08701

68 Make: HOND | 69 Model: ACC | 70 Color: BLK | 71 Year: 2021 | 72 Plate No.: N51NZH | 73 State: NJ

74 VIN: 1HGCV1F4XMA069147 | 75 Expires: 07 25

76 Vehicle Removed To:

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill

Hazard Class Placard No.

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City State Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	27	M	-	-	-	11	04	-	-	EZRIEL - DANZIGER - 309 COLES WAY LAKEWOOD NJ 08701
B	02	01	01	05	33	M	-	-	-	11	04	-	-	ELIMELECH G POSSICK - 38 SEA POINT DR LAKEWOOD NJ 08701
C	03	01	01	05	24	F	-	-	-	11	04	-	-	JODIAN - MCCURVIN - 147 TUDOR CT LAKEWOOD NJ 08701
D														

 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05	97 01	98 01	99 02	100a 01	100b 04	101 02	102 01	103 01	104 3	105 07	106 -	107 -	108 01	109 -	110 01	111 -	112 -	113 -	114 -	115 -	116 01	117 -

1 Case Number: 22-003291
2 Police Dept of: LAKEWOOD TOWNSHIP P Code: 01
3 Station/Precinct:
10 Crash Occurred On: MADISON AVE
11 Speed Limit: 45
☐ At Intersection With
250 (14) ☒ Feet (15) ☐ Miles
☒ N ☐ E ☐ S ☐ W (16) of: W KENNEDY BLVD (17 Cross Road Name)
12 Route No. Suffix 13 Milepost
18 Speed Limit: 45
19 Ramp ☐ To ☐ From:
20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
4 Date of Crash: 01/14/22
5 Day Of Week: FRIDAY
6 Time (use 2400 hrs): 1223
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --
21 Latitude: 40.10693
22 Longitude: -74.21948

118a 04 | 118b - | 119a - | 119b - | 120a 01 | 120b - | 121a - | 121b - | 122 03 | 123 - | 124 04 | 125 - | 126a 26 | 126b 26 | 126c - | 126d - | 126e 26 | 127a - | 127b - | 127c - | 127d - | 127e - | 128 26 | 129 01 | 130 01 | 131 - | 132 - | 133 04 | 134 -

Field	Vehicle 3	Field	Vehicle -
23 Veh #	3	53 Veh #	-
24 Policy No.	4433622513	54 Policy No.	-
25 NJ Ins. Code	100	55 NJ Ins. Code	-
Flags	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Flags	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	JODIAN - MCCURVIN -	56 Driver's First Name / Initial / Last Name	- - - -
29 Sex	F	59 Sex	-
27 Number & Street	147 TUDOR CT	57 Number & Street	-
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	- - -
30 Eyes	2	60 Eyes	-
DL Class	D	DL Class	-
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	-
32 Driver's License Number	M11974050057972	62 Driver's License Number	-
33 DOB	07/20/1997	63 DOB	-
34 Expires	07 24	64 Expires	- -
35 Owner's First Name / Initial / Last Name	☐ Same As Driver JODIAN - MCCURVIN -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver - - - -
36 Number & Street	147 TUDOR CT	66 Number & Street	-
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	- - -
38 Make	TOYT	68 Make	-
39 Model	SXD	69 Model	-
40 Color	SIL	70 Color	-
41 Year	2008	71 Year	-
42 Plate No.	T45JHX	72 Plate No.	-
43 State	NJ	73 State	-
44 VIN	JTKKU10468J021651	74 VIN	-
45 Expires	10 22	75 Expires	- -
46 Vehicle Removed To	ACME TOWING	76 Vehicle Removed To	-
Disposition	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	Disposition	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	78 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: ; Placard No.:	79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☐ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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														
B														
C														
D														

New Jersey Police Crash Investigation Report

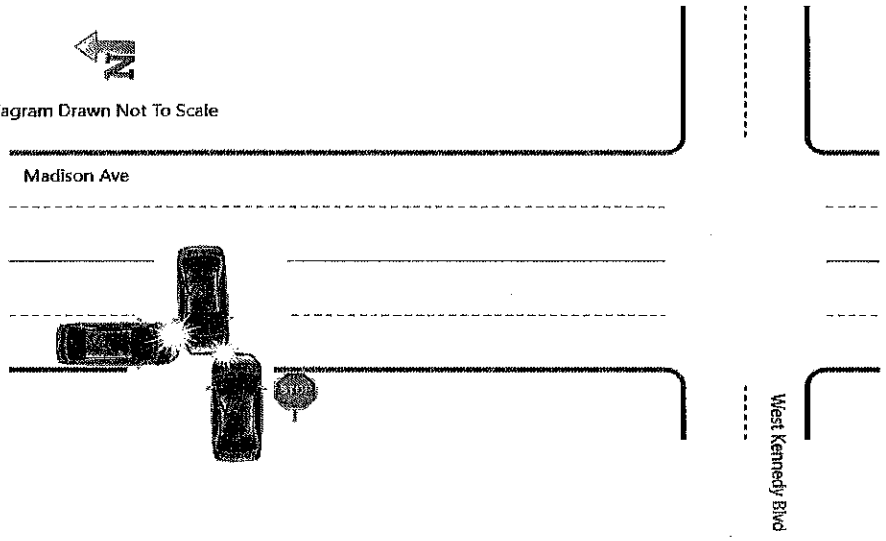
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-003291

(Refer to vehicle by number)

	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was driving South on Madison Avenue. Driver of vehicle 1 stated vehicle 3 attempted to make a left turn into 1700 Madison Avenue. Driver of vehicle 1 struck the front passenger side of vehicle 3 causing moderate damage disabling vehicle 1. Driver of vehicle 1 had no complaint of pain.

Driver of vehicle 2 stated he was at a complete stop waiting to make a right turn out of 1700 Madison Avenue on to Madison Avenue. Driver of vehicle 2 stated vehicle 3 struck the front driver side of his vehicle after the initial impact from vehicle 1. It should be noted that I observed no damage to the front driver side of vehicle 2. Driver of vehicle 2 had no complaint of pain.

Driver of vehicle 3 stated she was at a complete stop on Madison Avenue facing North. Driver of vehicle 3 stated she was preparing to make a left turn into 1700 Madison Avenue. Driver of vehicle 3 stated an unknown vehicle that was traveling South on Madison Avenue came to a completed to allow vehicle 3 to make a left into 1700 Madison Avenue. Driver of vehicle 3 attempted to make a left turn into 1700 Madison Avenue and was struck by vehicle 1. Vehicle 3 had moderate damage disabling it on the front passenger side. It should be noted that the driver of vehicle 3 stated vehicle 1 was speeding. Driver of vehicle 3 had no complaint of pain.

Based on the statements given by the three drivers involved I determined the driver of vehicle 3 to be at fault for failure to yield to the righter way of traffic.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ORTIZ, K	377	DTWORKOSKI	249	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05 | 97: 01 | 98: 01 | 99: 02 | 100a: 01 | 100b: 04 | 101: 02 | 102: 01 | 103: 01 | 104: 2 | 105: 02 | 106: - | 107: 01 | 108: 01 | 109: 00 | 110: 01 | 111: 00 | 112: - | 113: 00 | 114: - | 115: 00 | 116: 03 | 117: 03

118a: 25 | 118b: - | 119a: 02 | 119b: - | 120a: 01 | 120b: - | 121a: 00 | 121b: 00 | 122: 01 | 123: 01 | 124: 04 | 125: 04 | 126a: 26 | 126b: - | 126c: - | 126d: - | 126e: 26 | 127a: 26 | 127b: - | 127c: - | 127d: - | 127e: 26 | 128: 26 | 129: 10 | 130: 10 | 131: 00 | 132: 00 | 133: 02 | 134: 00

1 Case Number: 22-003302
2 Police Dept of: LAKEWOOD TOWNSHIP F — Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 01/14/22
5 Day Of Week: FRIDAY
6 Time (use 2400 hrs): 1305
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: MADISON AVE (Road Name)
11 Speed Limit: 45
12 Route No.: | Suffix: | 13 Milepost:
☐ At Intersection With
14: 25 ☒ Feet ☐ Miles
16: ☐ N ☐ E ☒ S ☐ W of: N LAKE DR
18 Speed Limit: 25
19 Ramp: ☐ To ☐ From:
17 Cross Road Name:
☐ NB ☐ EB ☐ SB ☐ WB
20 Route/Name:
21 Latitude: 40.08971
22 Longitude: -74.21624

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	4619927983	54 Policy No.	
25 NJ Ins. Code	148	55 NJ Ins. Code	
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run
26 Driver's First Name / Initial / Last Name	FRIEDA R OHNOUNA -	56 Driver's First Name / Initial / Last Name	
29 Sex	F	59 Sex	
27 Number & Street	241 HEARTH CT. W	57 Number & Street	
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	
30 Eyes	2	60 Eyes	
DL Class	A	DL Class	
Restrictions	-	Restrictions	
Endorsements	-	Endorsements	
31 State	NJ	61 State	
32 Driver's License Number	035672697958802	62 Driver's License Number	
33 DOB (mm dd yyyy)	08/20/1980	63 DOB	
34 Expires (mm yy)	08 24	64 Expires	
35 Owner's First Name / Initial / Last Name	☐ Same As Driver — ELISE J OHNOUNA -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver
36 Number & Street	21 9TH ST	66 Number & Street	
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	
38 Make	TOYT	68 Make	
39 Model	MAT	69 Model	
40 Color	4	70 Color	
41 Year	2006	71 Year	
42 Plate No.	VCV83E	72 Plate No.	
43 State	NJ	73 State	
44 VIN	2T1LR32E16C559083	74 VIN	
45 Expires	09 22	75 Expires	
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	76 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☐ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	41	F	-	-	-	11	04	-	-	FRIEDA R OHNOUNA - 241 HEARTH CT. W LAKEWOOD NJ 08701
B														
C														
D														

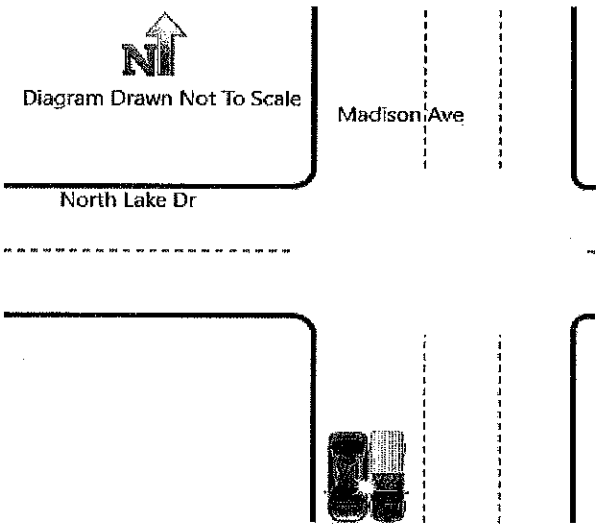
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-003302

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was traveling South on Madison Avenue. Driver of vehicle 1 stated an unknown truck side swiped the driver side of her vehicle damaging the driver side mirror. Driver of vehicle 1 stated vehicle 2 continued south on Madison Avenue . Driver of vehicle 1 believes the truck was a flatbed with a forklift on it. Driver of vehicle 1 was unsure if vehicle 2 was white or orange. Vehicle 1 had a transfer of white paint on the front driver side. I was unable to locate any cameras in the area. Driver of vehicle 1 stated the license plate was either 11jc or x11 she was not able to get the full license plate.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ORTIZ, K	377	DTWORKOSKI	249	☒ Pending ☐ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 01 | 99 05 | 100a 01 | 100b 04 | 101 02 | 102 01 | 103 01 | 104 2 | 105 07 | 106 - | 107 - | 108 01 | 109 01 | 110 01 | 111 01 | 112 - | 113 - | 114 - | 115 - | 116 01 | 117 04

118a 09 | 118b - | 119a 25 | 119b - | 120a 01 | 120b - | 121a 01 | 121b - | 122 01 | 123 03 | 124 04 | 125 04 | 126a 26 | 126b - | 126c - | 126d - | 126e 26 | 127a 26 | 127b - | 127c - | 127d - | 127e 26 | 128 26 | 129 02 | 130 02 | 131 09 | 132 09 | 133 03 | 134 03

1 Case Number: 22-003307
2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01
3 Station/Precinct: -

10 Crash Occurred On: SUNSET RD (Road Name) | Dir: - | 11 Speed Limit: 35 | 12 Route No.: 0034 | Suffix: - | 13 Milepost: -
☐ At Intersection With
14: 10 | 15: ☒ Feet ☐ Miles | 16: ☐ N ☒ E ☐ S ☐ W of: POWDERHORN DR (17 Cross Road Name) | 18 Speed Limit: 25
19 Ramp: ☐ To ☐ From: - | ☐ NB ☐ EB ☐ SB ☐ WB | 20 Route/Name

4 Date of Crash (mm dd yy)	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured	21 Latitude	22 Longitude
01/14/22	FRIDAY	1334	1514	--	--	40.084530	-74.224560

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	939891610	54 Policy No.	6098435242031
25 NJ Ins. Code	134	55 NJ Ins. Code	361
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	MARIA - DELCARMEN -	56 Driver's First Name / Initial / Last Name	SARAH - GLAZER -
29 Sex	F	59 Sex	F
27 Number & Street	562 OCEAN AVE	57 Number & Street	5913 KEY AVE
28 City / State / Zip	LAKEWOD NJ 08701	58 City / State / Zip	BALTIMORE MD 21215
30 Eyes	02	60 Eyes	02
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	MM	61 State	MD
32 Driver's License Number	205396343	62 Driver's License Number	G426758235760
33 DOB (mm dd yyyy)	11/14/1985	63 DOB (mm dd yyyy)	10/02/2001
34 Expires (mm yy)	01 26	64 Expires (mm yy)	12 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ADOLFO A HILARIOBONILLA -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver MICHAEL - GLAZER -
36 Number & Street	562 OCEAN AVE	66 Number & Street	5913 KEY AVE
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	BALTIMORE MD 21215
38 Make	CADI	68 Make	TOYT
39 Model	ATS	69 Model	COA
40 Color	BLK	70 Color	BLU
41 Year	2013	71 Year	2021
42 Plate No.	M64MMS	72 Plate No.	7ET1521
43 State	NJ	73 State	MD
44 VIN	1G6AG5RX5D0142396	74 VIN	5YFEPMAE7MP255386
45 Expires	07 22	75 Expires	08 23
46 Vehicle Removed To	-	76 Vehicle Removed To	-
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None	80 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	36	F	-	-	-	11	04	-	-	MARIA - DELCARMEN - 562 OCEAN AVE LAKEWOD NJ 08701 - -
B	02	01	01	05	20	F	-	-	-	11	04	-	-	SARAH - GLAZER - 5913 KEY AVE BALTIMORE MD 21215 - -
C														
D														

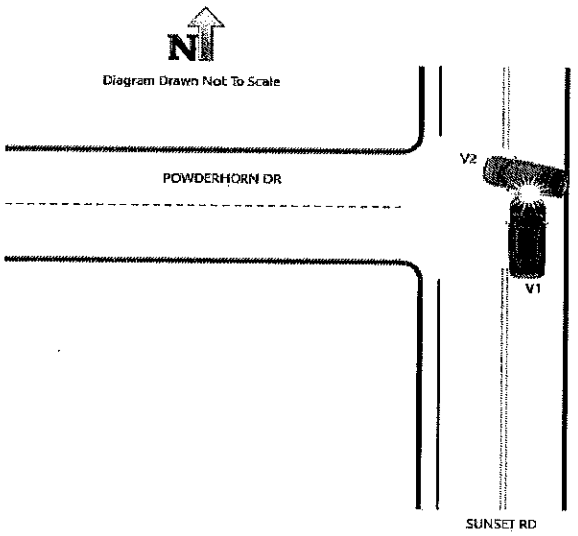
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-003307

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

On 1/14/2022 at approximately 1335hrs, I was dispatched to Sunset Road for a report of a crash. Upon arrival, I met with the driver of vehicle 2 who was identified as Sarah Glazer. Ms. Glazer reported that while she was attempting to turn left onto Powderhorn Drive, she was struck by vehicle 1 on the driver side.

I then spoke with the driver of vehicle 1 who was identified as Maria Delcarmen. Ms. Delcarmen reported that while she was traveling North on Sunset Road, she did not observe vehicle 2's turn signal and crashed into the driver side of vehicle 2 which was turning left onto Powderhorn Drive.

There were no injuries reported at the scene of the crash.

Vehicle 1 sustained large dents and scratches to the driver side front and rear door area.

Vehicle 2 sustained a broken passenger side headlight, cracks dents and scratches to the passenger side bumper and fender.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SHEEHAN, M	423	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Value
96	05
97	01
98	01
99	05
100a	01
100b	06
101	02
102	02
103	03
104	2
105	04
106	-
107	-
108	03
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	04

1 Case Number: 22-004558

2 Police Dept of: LAKEWOOD TOWNSHIP P Code: 01

3 Station/Precinct: -

10 Crash Occurred On: MASSACHUSETTS AVE - Road Name; Dir
11 Speed Limit: 40
12 Route No.: 0637 Suffix: - 13 Milepost: -

☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: PROSPECT ST (17 Cross Road Name)
18 Speed Limit: 40

14: - 15 16

19 Ramp ☐ To ☐ From: -

20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: - 22 Longitude: -

4 Date of Crash (mm dd yy): 01/18/22
5 Day Of Week: TUESDAY
6 Time (use 2400 hrs): 0901
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: 1

	Vehicle 1	Vehicle 2
Veh # (23 / 53)	1	2
Policy No. (24 / 54)	4497953325	142560565907001
NJ Ins. Code (25 / 55)	148	-
Parked / Ped / Pedalcyclist / Resp To Emergency / Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name (26 / 56)	SHMUEL DOV - GLIK -	LUIZ-MACIAS - MENDOZA -
Sex (29 / 59)	M	M
Number & Street (27 / 57)	61 SPRUCEWOOD DR	326 LAUREL AVE
City / State / Zip (28 / 58)	TOMS RIVER NJ 08755	LAKEWOOD NJ 08701
Eyes (30 / 60)	-	BR
DL Class	-	D
Restrictions	-	-
Endorsements	-	-
State (31 / 61)	IS	TX
Driver's License Number (32 / 62)	207563669	40781396
DOB (33 / 63) mm dd yyyy	08/22/1998	06/28/1990
Expires (34 / 64) mm yy	08 22	06 25
Owner's First Name / Initial / Last Name (35 / 65)	☐ Same As Driver PINHAS E AMOYELLE -	☐ Same As Driver LUIZ-MACIAS - MENDOZA -
Number & Street (36 / 66)	700 PARK AVE	326 LAUREL AVE
City / State / Zip (37 / 67)	LAKEWOOD NJ 08701	LAKEWOOD NJ 08701
Make (38 / 68)	FORD	FORD
Model (39 / 69)	ECO	XPL
Color (40 / 70)	WHI	BLK
Year (41 / 71)	2011	2016
Plate No. (42 / 72)	L59HZH	NDC8196
State (43 / 73)	NJ	TX
VIN (44 / 74)	1FBSS3BL6BDB28884	1FM5K7D85GGB04814
Expires (45 / 75)	06 22	03 22
Vehicle Removed To (46 / 76)	-	-
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority (47 / 77)	☐ Owner ☒ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test (48 / 78)	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
Hazardous Material (49 / 79)	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
Carrier No. (50 / 80)	☐ USDOT - ☐ MC/MX - ☒ None	☐ USDOT - ☐ MC/MX - ☒ None
GVWR/GCWR (51 / 81)	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity (52 / 82)	-	-
Number & Street	-	-
City / State / Zip	- - -	- - -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	V1	01	01	05	23	M	-	-	-	11	04	-	-	SHMUEL DOV - GLIK - 61 SPRUCEWOOD DR TOMS RIVER NJ 08755
B	V1	03	01	05	28	M	-	-	-	11	04	-	-	EJAY - TYBERG - 752 CROWN ST BROOKLYN NY 11213
C	V2	01	01	05	31	M	-	-	-	11	04	-	-	LUIZ-MACIAS - MENDOZA - 326 LAUREL AVE LAKEWOOD NJ 08701
D	V2	03	01	04	29	F	00	00	02	11	04	-	6303	GLADIS - MANCIA - 326 LAUREL AVE LAKEWOOD NJ 08701

Code	Value
118a	04
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	01
124	03
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	03
130	03
131	12
132	12
133	03
134	04

New Jersey Police Crash Investigation Report

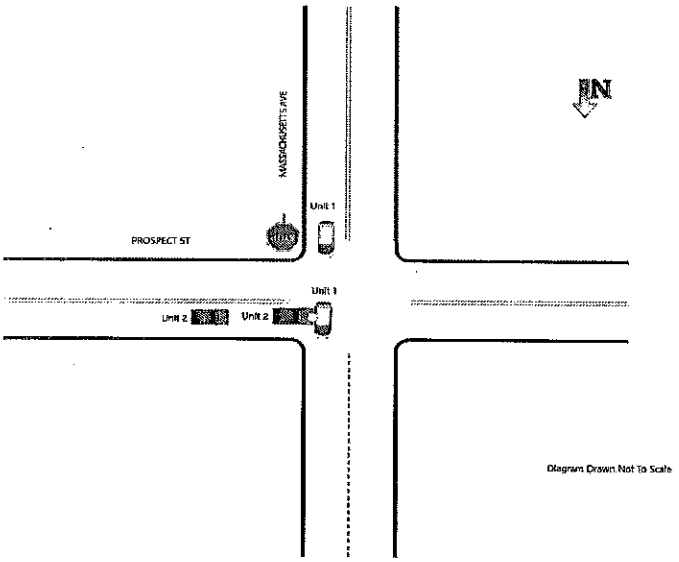
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004558

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D1 OF V1 STATED TO ME THAT WHILE AT THE INTERSECTION OF MASSACHUSETTS AVE AND PROSPECT ST HIS VEHICLE WAS STRUCK AS HE WAS CROSSING OVER THE INTERSECTION. NOTE THAT V1 HAD A STOP SIGN ON MASSACHUSETS AVE SIDE AND V2 HAD THE RIGHT OF THE WAY. D1 ALSO WANTED TO NOTE THAT HIS VIEW OF THE INTERSECTION WAS PARTIALLY OBSTRUCTED BY A BUS AT THIS INTERSECTION. D2 OF V2 STATED TO ME THAT HE WAS TRAVELING WEST ON PROSPECT ST WHEN V1 CROSSED THE INTERSECTION IN FRONT OF HIM CAUSING HIM TO STRIKE IT. PASSENGER OF V2 WAS TRANSPORTED TO JERSEY SHORE MEDICAL CENTER FOR FURTHER OBSERVATION DUE TO HER PREGNANCY. I DETERMINED THAT D1 OF V1 WAS AT FAULT FOR THE CRASH.

V2 INSURANCE INFORMATION:
POLICY#142560565907001 NAIC#13820
INFINITY COUNTY MUTUAL INSURANCE 1-800-782-1020

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ZAVALNYUK T	359	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	05
100a	01
100b	04
101	02
102	03
103	08
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	02

1 Case Number: 22-004562

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 01/18/22

5 Day Of Week: TUESDAY

6 Time (use 2400 hrs): 0928

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: NEW EGYPT ROAD (Road Name) - (Dir) 11 Speed Limit: 40 — 12 Route No.: 0528 — Suffix: - — 13 Milepost

☐ At Intersection With — 18 Speed Limit: 25

☒ Feet ☐ Miles — 14: 1000 — 15

☐ N ☐ E ☐ S ☒ W — 16

of: CORY COURT

19 Ramp ☐ To ☐ From: - — 17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.084830 — 22 Longitude: -74.253400

118a	04
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	01
130	01
131	12
132	12
133	04
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 4602861678 — 25 NJ Ins. Code: 100

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: MORDECHAI — Initial: D — Last Name: GEBERER — 29 Sex: M

27 Number & Street: 1024 NETHERWOOD DR

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 5 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: G20735636406815 — 33 DOB (mm dd yyyy): 06/01/1981 — 34 Expires (mm yy): 06 25

35 Owner's ☐ Same As Driver — First Name: MORDECHAI — Initial: D — Last Name: GEBERER

36 Number & Street: 1024 NETHERWOOD DR

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: TOYT — 39 Model: CAM — 40 Color: GRY — 41 Year: 2016 — 42 Plate No.: H58NUV — 43 State: NJ

44 VIN: 4T1BF1FK3GU228417 — 45 Expires: 06 22

46 Vehicle Removed To: MOISHY'S TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2 — 54 Policy No.: 4361812458 — 55 NJ Ins. Code: 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: YUBIE — Initial: - — Last Name: RICHT — 59 Sex: M

57 Number & Street: 745 ALBERT AVE

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 5 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: R40901560005825 — 63 DOB (mm dd yyyy): 05/16/1982 — 64 Expires (mm yy): 05 23

65 Owner's ☐ Same As Driver — First Name: YUBIE — Initial: - — Last Name: RICHT

66 Number & Street: 745 ALBERT AVE

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: TES — 69 Model: MOD — 70 Color: BLK — 71 Year: 2017 — 72 Plate No.: C19MKZ — 73 State: NJ

74 VIN: 5YJSA1E29HF198614 — 75 Expires: 08 22

76 Vehicle Removed To: MOISHY'S TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class: - — Placard No.: -

80 Carrier No.: ☐ USDOT - ☒ None ☐ 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: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property ☒ Yes (If Yes, describe) ☐ No

TURNING SIGN WAS DAMAGED/ D.O.T NOTIFIED

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	0.0.0.0	-	-	0.0.0.0	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	0.0.0.0	-	-	0.0.0.0	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	40	M	-	-	-	11	04	-	-	MORDECHAI D GEBERER - 1024 NETHERWOOD DR LAKEWOOD NJ 08701 - -
B	V2	01	01	05	39	M	-	-	-	11	04	-	-	YUBIE - RICHT - 745 ALBERT AVE LAKEWOOD NJ 08701 - -
C	V2	04	01	05	15	F	-	-	-	11	04	-	-	CHANA - WASSERHEIL - N/A - - - - -
D	V2	05	01	05	15	F	-	-	-	11	04	-	-	RIKKI - STEIN - N/A - - - - -

New Jersey Police Crash Investigation Report

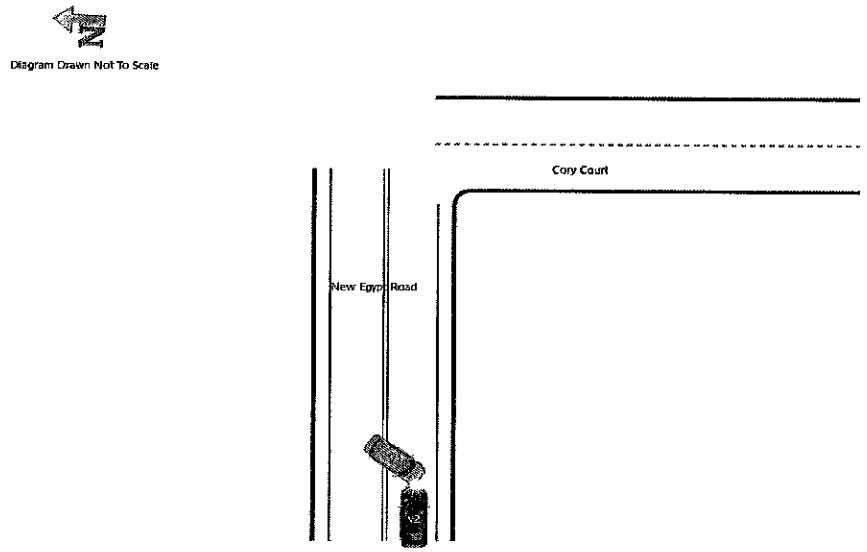
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004562

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E	V2	06	01	05	14	F	-	-	-	11	04	-	-	GITTI - STEIN - N/A - - - - -
F	V2	03	01	05	14	F	-	-	-	11	03	-	-	BATSHEVA - RICHT - 199 WALNUT AVE LAKEWOOD - - - -
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 was traveling Westbound on New Egypt Road. Driver 1 explained that he was trying to turn left into 520 New Egypt Rd. A car stopped and signaled him to make the left turn when V2 collided with his vehicle.

Driver 2 was traveling Eastbound on New Egypt Road. Driver 2 said he was going straight when V1 attempted to make a left turn and collided with his vehicle.

Investigation revealed that Driver 1 was traveling Westbound on New Egypt Road, and Driver 2 was traveling Eastbound on New Egypt Road. V2 had the right of way, and V1 crossed over the double lanes attempting a left turn. No injuries reported at this time.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CUZCO-BENITES W	407	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	02
100a	01
100b	04
101	02
102	01
103	05
104	2
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	02

1 Case Number: 22-004564

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code

3 Station/Precinct:

10 Crash Occurred On: OCEAN AVENUE — Road Name — Dir — 12 Route No. — Suffix — 13 Milepost

☐ At Intersection With: NEW HAMPSHIRE AVENUE

☐ Feet ☐ N ☒ E of: ☐ S ☐ W

.25 ☒ Miles (14 / 15 / 16)

11 Speed Limit: 45 — 0088 — 18 Speed Limit: 50

19 Ramp ☐ To ☐ From:

17 Cross Road Name: ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

4 Date of Crash (mm dd yy): 01/18/22

5 Day Of Week: TUESDAY

6 Time (use 2400 hrs): 0935

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

21 Latitude: 40.08308

22 Longitude: -74.16462

118a	25
118b	-
119a	02
119b	09
120a	01
120b	-
121a	01
121b	-
122	08
123	01
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	-
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	11
132	05
133	03
134	03

Vehicle 1

23 Veh #: 1

24 Policy No.: 608053031-206-1

25 NJ Ins. Code: 884

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: LEAH — Initial: - — Last Name: HUNGER — 29 Sex: F

27 Number & Street: 39 TRUDY LN

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: H92764500060952 — 33 DOB (mm dd yyyy): 10/13/1995 — 34 Expires (mm yy): 10 25

35 Owner's ☐ Same As Driver — First Name: YEHUDA — Initial: Z — Last Name: HUNGER

36 Number & Street: 125 SPRUCE ST

37 City: LAKWEOOD — State: NJ — Zip: 08701

38 Make: TOYT — 39 Model: CAM — 40 Color: 1 — 41 Year: 2016 — 42 Plate No.: K42KXV — 43 State: NJ

44 VIN: 4T1BF1FKXGU127357 — 45 Expires: 02 22

46 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2

54 Policy No.: 4535-60-38-17

55 NJ Ins. Code: 100

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: YECHIEL — Initial: S — Last Name: STERN — 59 Sex: M

57 Number & Street: 282 DEWEY AVE

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: S82267898206892 — 63 DOB (mm dd yyyy): 06/17/1989 — 64 Expires (mm yy): 06 23

65 Owner's ☐ Same As Driver — First Name: RACHEL — Initial: M — Last Name: STERN

66 Number & Street: 282 DEWEY AVENUE

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: HOND — 69 Model: ACC — 70 Color: TN — 71 Year: 2005 — 72 Plate No.: P71MSX — 73 State: NJ

74 VIN: 1HGCM564X5A121310 — 75 Expires: 08 22

76 Vehicle Removed To: ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1		-	2		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	26	F	-	-	-	11	04	-	-	LEAH - HUNGER - 39 TRUDY LN LAKEWOOD NJ 08701
B	02	01	01	05	32	M	-	-	-	11	04	-	-	YECHIEL S STERN - 282 DEWEY AVE LAKEWOOD NJ 08701
C														
D														

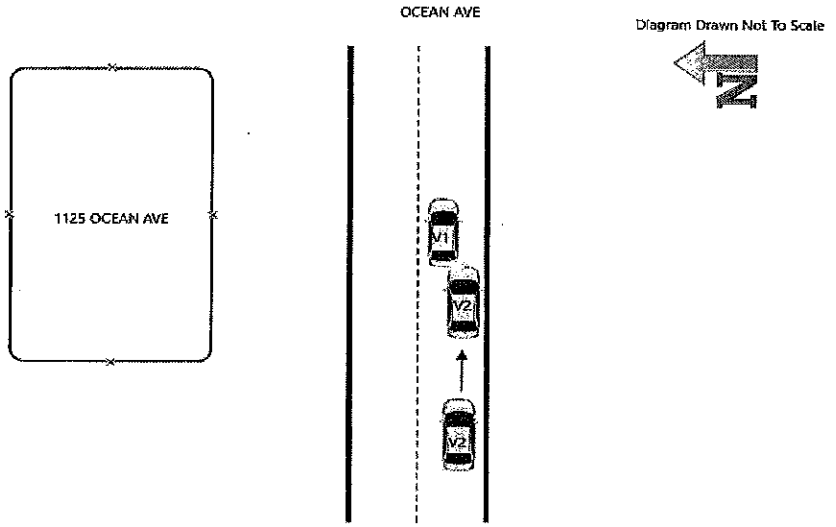
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: _____
Station: _____ Case No: 22-004564

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated she was stopped in traffic facing East waiting to make a left turn into 1125 Ocean Avenue. Driver #1 stated Vehicle #2 never stopped behind her and the left front corner of Vehicle #2 collided with the right rear corner of her vehicle. Vehicle #1 sustained moderate damage and was driven from the scene.

Driver #2 stated he was traveling East on Ocean Avenue and did not notice in time Vehicle #1 stopped in traffic and the left front corner of his vehicle collided with the right rear corner of Vehicle #1. Vehicle #2 sustained moderate damage and was driven from the scene.

Based on statements from the involved parties, and my observations at the scene and damage to the vehicles, I determined that Vehicle #2 was at fault due to driver in attention and following too closely.

No injuries reported at the scene.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAVALLO M	337	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-004565
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On	E COUNTY LINE ROAD
☒ At Intersection With / ☐ Feet / ☐ Miles	☐ N ☐ E ☐ S ☐ W of: TUSCANNY TERR
11 Speed Limit	40
12 Route No.	
Suffix	
13 Milepost	
18 Speed Limit	25
17 Cross Road Name	
19 Ramp	☐ To ☐ From:
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
4 Date of Crash (mm dd yy)	01/18/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	0948
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.10321
22 Longitude	-74.17340

Left margin codes: 96: 05; 97: 01; 98: 02; 99: 05; 100a: 01; 100b: 04; 101: 02; 102: 02; 103: 03; 104: 2; 105: 11; 106: -; 107: -; 108: 01; 109: -; 110: 01; 111: -; 112: -; 113: -; 114: -; 115: -; 116: 04; 117: -

Right margin codes: 118a: 25; 118b: -; 119a: -; 119b: -; 120a: 01; 120b: -; 121a: -; 121b: -; 122: 01; 123: -; 124: 04; 125: -; 126a: 05; 126b: 60; 126c: 05; 126d: -; 126e: 60; 127a: -; 127b: -; 127c: -; 127d: -; 127e: -; 128: 60; 129: 12; 130: 12; 131: -; 132: -; 133: 04; 134: -

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	609511590 206 1	54 Policy No.	
25 NJ Ins. Code	884	55 NJ Ins. Code	
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	CHESKY - SMITH -	56 Driver's First Name / Initial / Last Name	
29 Sex	M	59 Sex	
27 Number & Street	3 SHAYAS RD	57 Number & Street	
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	
30 Eyes	2	60 Eyes	
DL Class	A	DL Class	
Restrictions	-	Restrictions	
Endorsements	-	Endorsements	
31 State	NJ	61 State	
32 Driver's License Number	S57781220006902	62 Driver's License Number	
33 DOB	06/16/1990	63 DOB	
34 Expires (mm yy)	06 24	64 Expires	
35 Owner's First Name / Initial / Last Name	☐ Same As Driver CHESKY - SMITH -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver
36 Number & Street	3 SHAYAS RD	66 Number & Street	
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	
38 Make	TOYT	68 Make	
39 Model	CAM	69 Model	
40 Color	BLK	70 Color	
41 Year	2016	71 Year	
42 Plate No.	H33KWX	72 Plate No.	
43 State	NJ	73 State	
44 VIN	4T4BF1FK4GR527047	74 VIN	
45 Expires	01 23	75 Expires	
46 Vehicle Removed To	YITZ TOWING	76 Vehicle Removed To	
Removal	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	Removal	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	78 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. %; ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ None ☐ MC/MX	80 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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	137 Summons. No.	Oper.	138 Charge	139 Summons. No.

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	31	M	-	-	-	11	11	04	-	CHESKY - SMITH - 3 SHAYAS RD LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

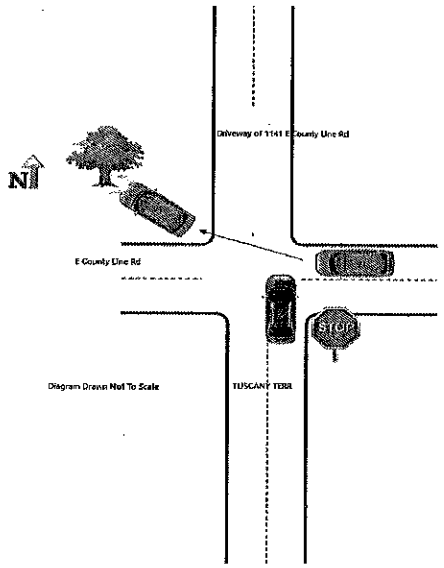
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004565

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 2 no contact crash. (2017 Lexus BL NJ Registration T78NDD VIN 2 58ABK1GGHU078165 02/23 DRIVEN by Yehuda Spiegel 09/16/1998 DL # S70627898909982 22 Tuscany Terr Lakewood, NJ 08701 Insurance Nationwide code 917 Policy # 5129J 007338).

Driver 1 stated that he was traveling West on East County Line Road and had to swerve to avoid a collision with vehicle 2 who was pulling out of Tuscany Terrace to make a left turn onto East County Line Road. While he swerved, he did not make contact with vehicle 2 described above but instead crashed into a tree at the parking lot of the Holy Family School at 1141 East County Line Road. Driver 1 stated that he had not choice to swerve right because vehicle 2 was already in the lane.

Driver of the vehicle 2 that made no contact stated that he was inching out into traffic from Tuscany Terrace and stopped when he saw vehicle 1 traveling West on East County Line Rd. Even though no contact was made, collision was caused by vehicle 2 failing to yield right of vehicle 1 which caused vehicle 1 to leave the roadway and crash into a tree.

No injuries reported.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VEGA E	311	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	05
100a	03
100b	04
101	02
102	01
103	05
104	2
105	07
106	-
107	-
108	04
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	04

1 Case Number: 22-004574

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

10 Crash Occurred On: LANES MILL ROAD — Road Name — Dir

☒ At Intersection With: LANES MILL ROAD

☐ Feet ☐ N ☐ E of: ☐ Miles ☐ S ☐ W

11 Speed Limit: 45

12 Route No. — Suffix — 13 Milepost — 18 Speed Limit

14 — 15 — 16

19 Ramp ☐ To ☐ From:

17 Cross Road Name: ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.08597 — 22 Longitude: -74.15728

4 Date of Crash (mm dd yy): 01/18/22 — 5 Day Of Week: TUESDAY — 6 Time (use 2400 hrs): 1048 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: 1

118a	25
118b	-
119a	04
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	03
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	56
127c	50
127d	-
127e	26
128	26
129	12
130	12
131	03
132	03
133	04
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 939713353 — 25 NJ Ins. Code: 054

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: YUN — Initial: - — Last Name: ZHENG — 29 Sex: F

27 Number & Street: 3 OSPERY COURT

28 City: HOWELL — State: NJ — Zip: 07731

30 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: Z33517900061802 — 33 DOB (mm dd yyyy): 11/02/1980 — 34 Expires (mm yy): 11 23

35 Owner's ☐ Same As Driver — First Name: YUN — Initial: - — Last Name: ZHENG

36 Number & Street: 3 OSPERY COURT

37 City: HOWELL — State: NJ — Zip: 07731

38 Make: MERZ — 39 Model: ML3 - ML — 40 Color: WHI — 41 Year: 2014 — 42 Plate No.: X53EEH — 43 State: NJ

44 VIN: 4JGDA5HB2EA395894 — 45 Expires: 05 22

46 Vehicle Removed To: ACME TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☐ None

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2 — 54 Policy No.: 4588-83-02-75 — 55 NJ Ins. Code: 148

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: COURTNEY — Initial: C — Last Name: MICHAELS — 59 Sex: F

57 Number & Street: 1331 RIVER AVE; F

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 5 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: M40761416354965 — 63 DOB (mm dd yyyy): 04/15/1996 — 64 Expires (mm yy): 04 25

65 Owner's ☐ Same As Driver — First Name: COURTNEY — Initial: C — Last Name: MICHAELS

66 Number & Street: 1331 RIVER AVE; F

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: VOLK — 69 Model: TIG — 70 Color: GRY — 71 Year: 2020 — 72 Plate No.: L53MVE — 73 State: NJ

74 VIN: 3VV2B7AX3LM156608 — 75 Expires: 08 24

76 Vehicle Removed To: ACME TOWING

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property: ☒ Yes (If Yes, describe) ☐ No

A "NO CROSSING" SIGN WAS STRUCK AND IS LEANING.

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1		-	2	39:4-144	A291572
	140 Charge	141 Summons No.		142 Charge	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	03	41	F	12	08	02	11	11	04	6502	YUN - ZHENG - 3 OSPERY COURT HOWELL NJ 07731
B	02	01	01	05	25	F	-	-	-	11	11	04	-	COURTNEY C MICHAELS - 1331 RIVER AVE; F LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

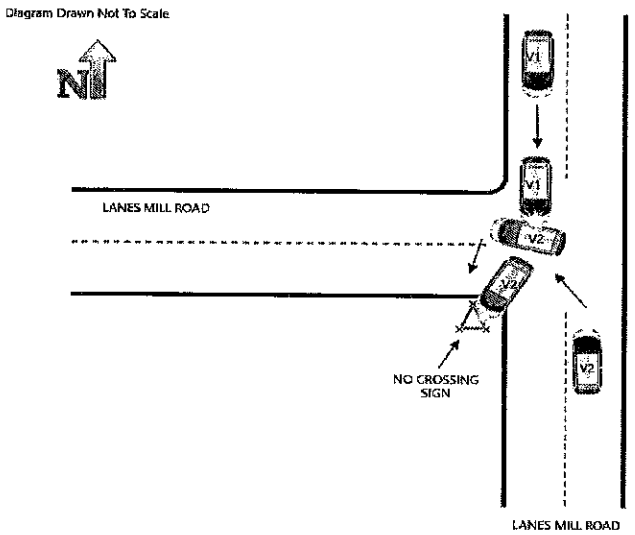
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004574

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated she was traveling South on Lanes Mill Road at the intersection of Lanes Mill Road when Vehicle #2 made a left turn in front of her causing the center front of Vehicle #1 to collide with the passenger side of Vehicle #2. Vehicle #1 sustained major damage and was towed from the scene by Acme Towing. Driver #1 stated she was extremely shaken up throughout her whole body and was transported to Monmouth Medical Center Southern Campus by the Lakewood First Aid Squad.

Driver #2 stated she was traveling North on Lanes Mill Road and made a left turn in front of Vehicle #1 onto Lanes Mill Road West bound and caused the collision. Vehicle #2 sustained major damage and was towed from the scene by Acme Towing. Driver #2 was issued motor vehicle summons #A-291572 for 39:4-144 (failure to stop for yield to vehicle).

Based on statements from the involved parties and my observations on scene and damage to the vehicles, I determined that Vehicle #2 is at fault due to Driver #2 making a left turn in front of Vehicle #1, who had the right of way.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAVALLO M	337	MY	329	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-004641
2 Police Dept of	LAKEWOOD POLICE
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	01/18/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1620
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	OBERLIN AVE S
Dir	-
11 Speed Limit	35
12 Route No.	-
Suffix	-
13 Milepost	-
☐ At Intersection With	
14	0.1
15	☐ Feet ☒ Miles
16	☒ N ☐ E ☐ S ☐ W of:
17 Cross Road Name	VASSAR AVE
18 Speed Limit	35
19 Ramp	☐ To ☐ From: -
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.068980
22 Longitude	-74.187140

Left margin box	Value
96	05
97	01
98	01
99	07
100a	01
100b	04
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	01
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	01

Right margin box	Value
118a	06
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	02
123	15
124	11
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	02
130	02
131	07
132	07
133	02
134	03

Vehicle 1

Field	Value
23 Veh #	1
24 Policy No.	F10134050-3
25 NJ Ins. Code	426
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	REGINA M FRANKLIN -
29 Sex	F
27 Number & Street	406 BRINLEY AVE
28 City / State / Zip	BRADLEY BEACH NJ 07720
30 Eyes	04
DL Class	I
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	F71926467456844
33 DOB	06/13/1984
34 Expires	06 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ANDREW - HUFF -
36 Number & Street	446 PROSPECT ST; 6
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make	TOYT
39 Model	CAM
40 Color	WHI
41 Year	2005
42 Plate No.	N85HWK
43 State	NJ
44 VIN	4T1BE32K65U626058
45 Expires	05 22
46 Vehicle Removed To	-
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

Field	Value
53 Veh #	2
54 Policy No.	6083-01-41-98
55 NJ Ins. Code	100
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name / Initial / Last Name	ELIMELECH G ROSENBLATT -
59 Sex	M
57 Number & Street	2 SHARON CT
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	R66932096707772
63 DOB	07/20/1977
64 Expires	03 25
65 Owner's First Name / Initial / Last Name	☒ Same As Driver ELIMELECH G ROSENBLATT -
66 Number & Street	2 SHARON CT
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make	HOND
69 Model	PLT
70 Color	GRY
71 Year	2020
72 Plate No.	F77MLD
73 State	NJ
74 VIN	5FNYF6H58LB067472
75 Expires	07 23
76 Vehicle Removed To	-
Removal	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ 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	-
Number & Street	-
City / State / Zip	- / - / -

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:3-10	1514-A-291329			
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	1	01	01	05	37	F	-	-	-	11	04	-	-	REGINA M FRANKLIN - / 406 BRINLEY AVE BRADLEY BEACH NJ 07720 - -
B	1	06	01	05	2	F	-	-	-	05	05	-	-	LAUREN G HUFF - / 406 BRINLEY AVE BRADLEY BEACH NJ 07720 - -
C	2	01	01	05	44	M	-	-	-	11	04	-	-	ELIMELECH G ROSENBLATT - / 2 SHARON CT LAKEWOOD NJ 08701 - -
D														

New Jersey Police Crash Investigation Report

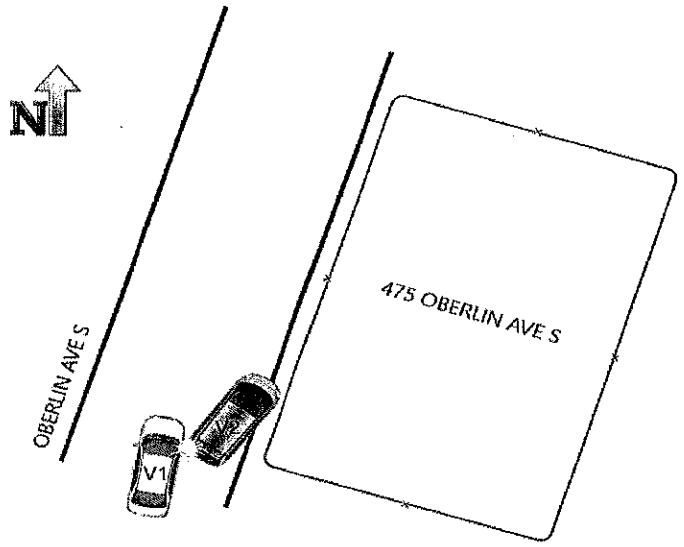
Police Dept: LAKEWOOD POLICE Code: 01

Station: - Case No: 22-004641

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 struck V2 from behind near the entrance to 475 Oberlin Avenue South.

Driver 1 stated that V2 turned out in front of her, causing her to strike it.

Driver 2 stated he came from Pine Street and was going straight on Oberlin Avenue South the whole time prior to the crash. He said that as he was turning right into his office (475 Oberlin Avenue South) V1 attempted to "zip around" him, but in doing so struck his rear driver side corner.

I observed damage to the rear driver side bumper and tail lamp housing of V2. Consistent damage was observed on the front passenger side of V1, specifically the side mirror which must have struck the lamp housing of V2.

Driver 1 is responsible due to unsafe passing around a turning vehicle. While speaking to her and Driver 2, she confirmed in my presence that she offered Driver 2 $75 to settle the crash without police involvement. Upon further questioning, her statement was not consistent. She was issued one summons for unlicensed driving.

V1's insurance was verified as active on a phone call to NJM following the crash.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
BURKHARDT B	361	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	01
99	07
100a	01
100b	04
101	01
102	01
103	01
104	2
105	06
106	-
107	-
108	30
109	01
110	02
111	01
112	-
113	-
114	-
115	-
116	04
117	04

1 Case Number: 22-004642

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct:

10 Crash Occurred On: 11TH ST — Road Name — Dir: - — 11 Speed Limit: 25 — 12 Route No. — Suffix — 13 Milepost

☐ At Intersection With — Road Name: FOREST AVENUE — 18 Speed Limit: 25

☒ Feet ☐ Miles — 14: 25 — 15 — 16 — ☒ N ☐ E ☐ S ☐ W of:

19 Ramp ☐ To ☐ From: — 17 Cross Road Name: — ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

4 Date of Crash (mm dd yy): 01/18/22 — 5 Day Of Week: TUESDAY — 6 Time (use 2400 hrs): 1621 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: -- — 21 Latitude: 40.100460 — 22 Longitude: -74.220420

118a	02
118b	-
119a	13
119b	-
120a	01
120b	-
121a	-
121b	-
122	01
123	10
124	08
125	11
126a	28
126b	-
126c	-
126d	-
126e	28
127a	26
127b	-
127c	-
127d	-
127e	26
128	28
129	04
130	04
131	10
132	11
133	02
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: BA 2997BD — 25 NJ Ins. Code: 149

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: GERHARD — Initial: - — Last Name: HILDEBRANDT — 29 Sex: M

27 Number & Street: 9 THE BLVD

28 City: BRICK — State: NJ — Zip: 08724

30 Eyes: 02 — DL Class: B — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: H43102800001392 — 33 DOB (mm dd yyyy): 01/24/1939 — 34 Expires (mm yy): 02 22

35 Owner's First Name: ☐ Same As Driver — Initial: - — Last Name: JAYS BUS SERVICE -

36 Number & Street: 672 CROSS ST

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: INTR — 39 Model: BUS — 40 Color: YEL — 41 Year: 2016 — 42 Plate No.: F810S1 — 43 State: NJ

44 VIN: 4DRBUC8P1GB733250 — 45 Expires: 06 22

46 Vehicle Removed To:

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☐ Owner ☒ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

50 Carrier No.: ☒ USDOT 1926134 ☐ None — ☐ MC/MX

51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☒ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City — State — Zip

Vehicle 2

53 Veh #: 2 — 54 Policy No.: 5129J 006539 — 55 NJ Ins. Code: 917

☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: - — Initial: - — Last Name: - — 59 Sex: -

57 Number & Street: -

58 City: - — State: - — Zip: -

60 Eyes: - — DL Class: - — Restrictions: - — Endorsements: - — 61 State: -

62 Driver's License Number: - — 63 DOB (mm dd yyyy): - — 64 Expires (mm yy): - -

65 Owner's First Name: ☐ Same As Driver SIMCHA — Initial: B — Last Name: PRESS -

66 Number & Street: 308 E 7TH ST

67 City: LAKEWOOD — State: NJ — Zip: 08701

68 Make: HYUN — 69 Model: ION — 70 Color: SIL — 71 Year: 2020 — 72 Plate No.: K82MZC — 73 State: NJ

74 VIN: KMHC75LJ6LU073747 — 75 Expires: 11 23

76 Vehicle Removed To: YITZ AUTO

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☒ Owner ☐ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

80 Carrier No.: ☐ USDOT ☐ MC/MX — ☒ None

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City — State — Zip

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	82	M	-	-	-	11	04	-	-	GERHARD - HILDEBRANDT - 9 THE BLVD BRICK NJ 08724
B														
C														
D														

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTION

Police Agency LAKEWOOD TOWNSHIP POLICE DEPT.
Station _____ Case No. 22-004642

1.	EFRAIM	HOROVIT	-
2.	CHAIM	WIENBERG	-
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			
34.			
35.			
36.			
37.			
38.			
39.			
40.			
41.			
42.			
43.			
44.			
45.			
46.			
47.			
48.			
49.			
50.			
51.			
52.			
53.			
54.			

SCHOOL BUS
(full size)

● DRIVER				DOOR →	
1	2	3		4	5
6	7	8		9	10
11	12	13		14	15
16	17	18		19	20
21	22	23		24	25
26	27	28		29	30
31	32	33		34	35
36	37	38		39	40
41	42	43		44	45
46	47	48		49	50
51	52			53	54

MINIBUS

● DRIVER			DOOR →	
1	2		3	4
5	6		7	8
9	10		11	12
13	14		15	16

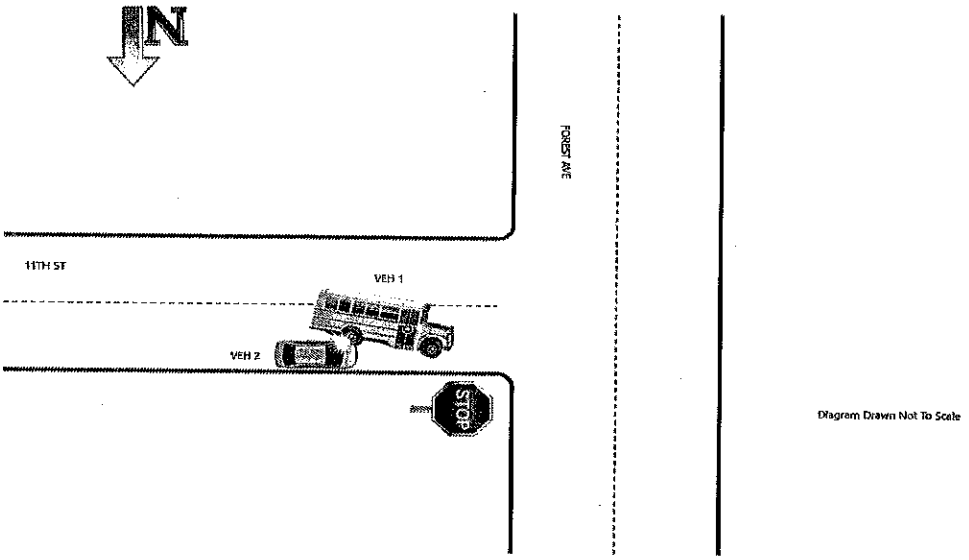
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004642

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEH 1 STATED HE WAS TRAVELING WEST ON 11 TH STREET AND WAS APPROACHING THE STOP SIGN AT THE INTERSECTION OF FOREST AVENUE. HE SAID WHEN HE WAS PREPARING TO STOP, HIS TAIL END OF THE BUS HIT A PARKED VEHICLE.

WHEN I ARRIVED ON SCENE, THE VEHICLES WERE LEFT AT THE POINT OF IMPACT. VEHICLE 2 WAS ILLEGALLY PARKED, WITHIN 25 FEET OF A STOP SIGN AND FIRE HYDRANT.

PRIOR TO MY ARRIVAL THERE WERE KIDS ON THE BUS. WHEN I ARRIVED ON SCENE MOST KIDS HAD ALREADY BEEN REMOVED AND PICKED UP FROM THE BUS. I WAS ABLE TO RETRIEVE 2 KIDS NAMES THAT WERE STILL ON THE BUS WHEN I ARRIVED ON SCENE.

BOTH VEHICLES 1 AND 2 ARE AT FAULT FOR THE CRASH.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CLARKE N	334	DIBIASE	286	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-004674
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	01/18/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1842
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	RIVER AVE
11 Speed Limit	45
12 Route No.	0009
Suffix	-
13 Milepost	-
14	100
15	☐ At Intersection With ☒ Feet ☐ Miles
16	☒ N ☐ E ☐ S ☐ W of:
17 Cross Road Name	HURLEY AVE
18 Speed Limit	35
19 Ramp	☐ To ☐ From: -
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.086420
22 Longitude	-74.215340

Left margin codes: 96: 05; 97: 01; 98: 07; 99: 02; 100a: -; 100b: -; 101: 02; 102: 01; 103: 01; 104: 2; 105: 01; 106: -; 107: -; 108: 01; 109: 01; 110: 01; 111: 01; 112: -; 113: -; 114: -; 115: -; 116: 03; 117: 03

Right margin codes: 118a: 25; 118b: -; 119a: 09; 119b: -; 120a: 01; 120b: 01; 121a: 01; 121b: 01; 122: 07; 123: 07; 124: 04; 125: 04; 126a: 26; 126b: -; 126c: -; 126d: -; 126e: 26; 127a: 26; 127b: -; 127c: -; 127d: -; 127e: 26; 128: 26; 129: 12; 130: 12; 131: 06; 132: 06; 133: 02; 134: 02

Field	Vehicle 1	Vehicle 2
Veh #	1	2
Policy No.	AOJ2312786887010	G01057381200
NJ Ins. Code	370	392
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name	DALE A YARDE -	YONA Y MOSKOWITZ 5/22
Sex	M	M
Number & Street	2335 CRYSTAL MILE CT	341 LAWRENCE AVE
City / State / Zip	TOMS RIVER NJ 08755	LAKEWOOD NJ 08701
Eyes	BR	BR
DL Class	D	D
Restrictions	-	-
Endorsements	-	-
State	NJ	NJ
Driver's License Number	Y05651516111602	M67147908805682
DOB	11/17/1960	05/22/1968
Expires (mm yy)	11 24	05 25
Owner	☒ Same As Driver DALE A YARDE -	☒ Same As Driver YONA Y MOSKOWITZ 5/22
Owner Number & Street	2335 CRYSTAL MILE CT	341 LAWRENCE AVE
Owner City / State / Zip	TOMS RIVER NJ 08755	LAKEWOOD NJ 08701
Make	LEXU	NISS
Model	IS	ALT
Color	SIL	BLU
Year	2014	2018
Plate No.	S46HKR	K81GYL
State	NJ	NJ
VIN	JTHCF1D22E5001527	1N4AL3AP1JC101594
Expires	02 23	03 22
Vehicle Removed To	-	-
Disposition	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority	☐ Owner ☒ Driver ☐ Police	☐ Owner ☒ Driver ☐ Police
Alcohol/Drug Test Given	☒ No ☐ Yes ☐ Refused	☒ No ☐ Yes ☐ Refused
Type	☐ Breath ☐ Blood ☐ Urine	☐ Breath ☐ Blood ☐ Urine
Results	0. - % ☐ Pending	0. - % ☐ Pending
Hazardous Material	☒ None ☐ On Board ☐ Spill	☒ None ☐ On Board ☐ Spill
Hazard Class / Placard No.		
Carrier No.	☐ USDOT ☐ MC/MX ☒ None	☐ USDOT ☐ MC/MX ☒ None
GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity		
Number & Street		
City / State / Zip		

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
01			01		
02			02		

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														

New Jersey Police Crash Investigation Report

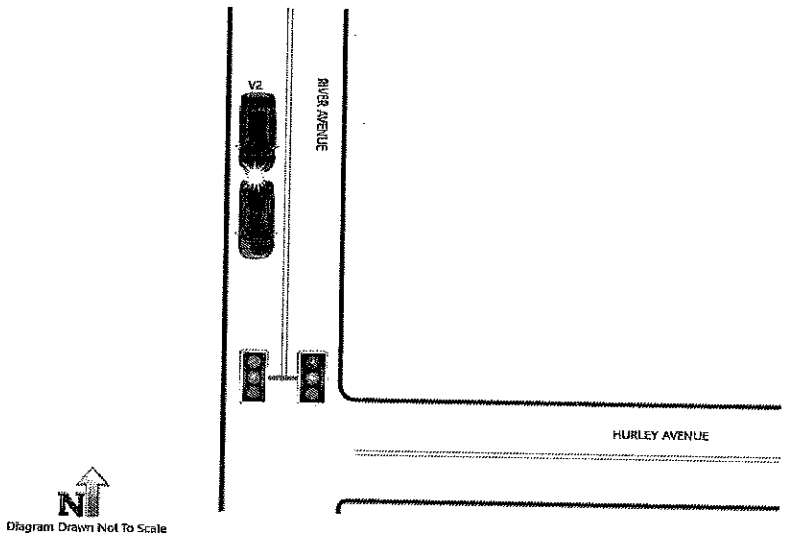
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004674

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E	01	01	01	05	61	M	-	-	-	11	04	-	-	DALE A YARDE - 2335 CRYSTAL MILE CT TOMS RIVER NJ 08755
F	02	01	01	05	53	M	-	-	-	11	04	-	-	YONA Y MOSKOWITZ 5/22 341 LAWRENCE AVE LAKEWOOD NJ 08701
G	02	06	01	05	17	F	-	-	-	11	04	-	-	LEAH - KAISER - 1442 CANTERBURY RD LAKEWOOD NJ 08701
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle one stated he was traveling South on River Avenue. Furthermore he related traffic was slowing and his vehicle was struck in the rear by vehicle two.

Driver of vehicle two stated he was traveling South on River Avenue. Furthermore he related observing a green traffic signal ahead and wasn't preparing for vehicle one to slow down in traffic, subsequently striking his vehicle while slowing down in traffic.

As a result of my investigation and observance of the damage caused to vehicle one, I have determined the driver of vehicle two to be at fault due to following too closely to vehicle one.

END OF NARRATIVE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MCMILLAN, P	426	DIBIASE	286	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	07
99	05
100a	01
100b	04
101	02
102	01
103	01
104	2
105	03
106	-
107	-
108	04
109	04
110	01
111	02
112	-
113	-
114	-
115	-
116	03
117	02

1 Case Number: 22-004682

2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01

3 Station/Precinct: -

10 Crash Occurred On: LOCUST ST — Dir: - — 11 Speed Limit: 40 — 12 Route No.: 0083 — Suffix: - — 13 Milepost: -

☒ At Intersection With — Road Name: HANOVER WAY — 18 Speed Limit: 25

☐ Feet ☐ N ☐ E of: ☐ Miles ☐ S ☐ W — 14: - — 15 — 16

19 Ramp ☐ To ☐ From: - — 17 Cross Road Name: ☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

4 Date of Crash (mm dd yy): 01/18/22 — 5 Day Of Week: TUESDAY — 6 Time (use 2400 hrs): 1941 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: -- — 21 Latitude: 40.047340 — 22 Longitude: -74.215070

118a	04
118b	16
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	01
124	08
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	01
130	01
131	12
132	12
133	04
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 5129J 005726 — 25 NJ Ins. Code: 917

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: MORDECHAI — Initial: - — Last Name: FELDMAN — 29 Sex: M

27 Number & Street: 11 SABLOW DR; A

28 City: LAKEWOOD — State: NJ — Zip: 08701

30 Eyes: 04 — DL Class: I — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: F23645630012984 — 33 DOB (mm dd yyyy): 12/16/1998 — 34 Expires (mm yy): - -

35 Owner's First Name: MORDECHAI — Initial: - — Last Name: FELDMAN — ☐ Same As Driver

36 Number & Street: 11 SABLOW DR; A

37 City: LAKEWOOD — State: NJ — Zip: 08701

38 Make: KIA — 39 Model: 734 — 40 Color: SIL — 41 Year: 2020 — 42 Plate No.: S66MDZ — 43 State: NJ

44 VIN: 5XYPGDA3XLG623859 — 45 Expires: 12 22

46 Vehicle Removed To: MOISHYS

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

47 Authority: ☒ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

Vehicle 2

53 Veh #: 2 — 54 Policy No.: SELF INSURED W/PV HOLDING — 55 NJ Ins. Code: -

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: ISRAEL — Initial: A — Last Name: LUDMIR — 59 Sex: M

57 Number & Street: 1184 TIFFANY LN

58 City: LAKEWOOD — State: NJ — Zip: 08701

60 Eyes: 02 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: IS

62 Driver's License Number: 304901960 — 63 DOB (mm dd yyyy): 09/10/1990 — 64 Expires (mm yy): 09 24

65 Owner's First Name: - — Initial: - — Last Name: PV HOLDING CORP - — ☐ Same As Driver

66 Number & Street: 18923 MAPLEWOOD AVE

67 City: CLEVELAND — State: OH — Zip: 44135

68 Make: JEEP — 69 Model: GCH — 70 Color: GRY — 71 Year: 2021 — 72 Plate No.: JNL7425 — 73 State: OH

74 VIN: 3C4NJDDB2MT603496 — 75 Expires: 09 22

76 Vehicle Removed To: MOISHYS

☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded

77 Authority: ☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending

79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.

80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - — State: - — Zip: -

135 Damage To Other Property: ☐ Yes (If Yes, describe) ☐ No

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:3-10	A291307	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	05	23	M	-	-	-	11	04	-	-	MORDECHAI - FELDMAN - 11 SABLOW DR; A LAKEWOOD NJ 08701
B	02	01	01	05	31	M	-	-	-	11	04	-	-	ISRAEL A LUDMIR - 1184 TIFFANY LN LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

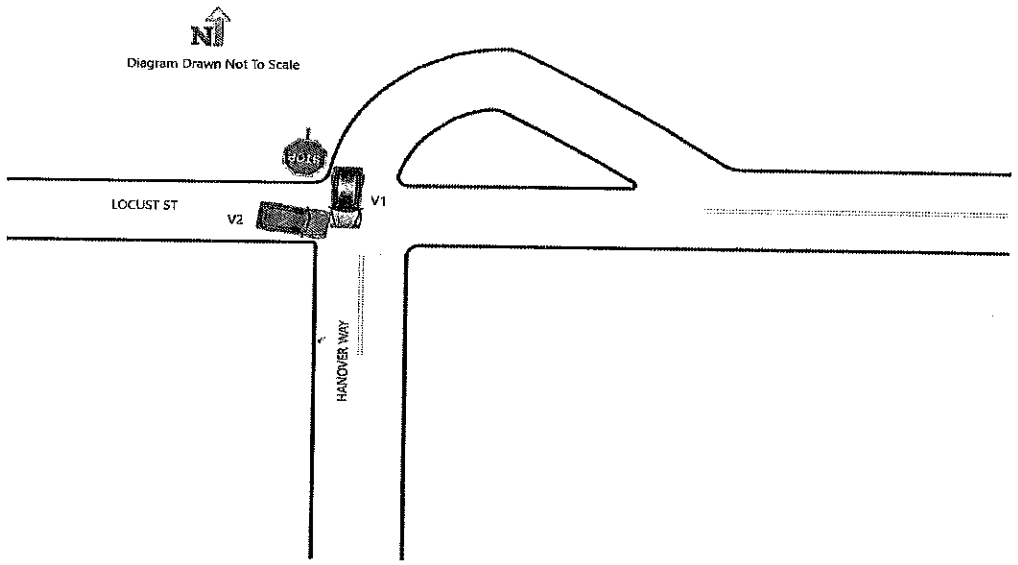
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004682

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling west on Locust St. He stopped at the stop sign to cross onto Hanover Way. He proceeded through the intersection but did not observe V2 traveling east on Locust St. V1 and V2 collided.

The driver of V2 stated he was traveling east on Locust St. V1 crossed in front of V2. V1 and V2 collided.

Based on my investigation, V1 caused the crash by failing to observe the stop sign and failed to yield to the right of way of V2.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	DIBIASE	286	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

PAGE 1 OF 2 ☐ Fatal ☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-002272
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	01/10/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	2137
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	CENTRAL AVE
11 Speed Limit	45
12 Route No.	0031
Suffix	-
13 Milepost	-
☒ At Intersection With / Road Name	SUNSET RD
14 / 15 / 16	- ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of
17 Cross Road Name	
18 Speed Limit	35
19 Ramp	☐ To ☐ From: -
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.087900
22 Longitude	-74.223340

Left margin codes: 96: 05; 97: 01; 98: 07; 99: 05; 100a: 01; 100b: 04; 101: 02; 102: 01; 103: 01; 104: 2; 105: 03; 106: -; 107: -; 108: 01; 109: 01; 110: 01; 111: 01; 112: -; 113: -; 114: -; 115: -; 116: 02; 117: 04

Right margin codes: 118a: 25; 118b: -; 119a: 03; 119b: 04; 120a: -; 120b: 01; 121a: 01; 121b: 01; 122: 01; 123: 03; 124: 04; 125: 03; 126a: 26; 126b: -; 126c: -; 126d: -; 126e: 26; 127a: -; 127b: -; 127c: -; 127d: -; 127e: 26; 128: 26; 129: 11; 130: 11; 131: 01; 132: 01; 133: 03; 134: 03

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	13240358293002	54 Policy No.	4228705853
25 NJ Ins. Code	962	55 NJ Ins. Code	148
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	KEZYA - NAVARROBENITEZ -	56 Driver's First Name / Initial / Last Name	ELIAS D GANZ -
29 Sex	F	59 Sex	M
27 Number & Street	151 PRESSBURG LN	57 Number & Street	120 POWDERHORN DR
28 City / State / Zip	LAKEWOOD NJ 08701	58 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes	BR	60 Eyes	GR
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	N09074340052952	62 Driver's License Number	G05032066411376
33 DOB	02/06/1995	63 DOB	11/30/1937
34 Expires (mm yy)	04 22	64 Expires (mm yy)	11 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver KEZYA - NAVARROBENITEZ -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver SHIRLEY A GANZ -
36 Number & Street	151 PRESSBURG LN	66 Number & Street	120 POWDERHORN DR
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	LAKEWOOD NJ 08701
38 Make	HOND	68 Make	TOYT
39 Model	FIT	69 Model	AVA
40 Color	WHI	70 Color	RD
41 Year	2016	71 Year	2011
42 Plate No.	W998970	72 Plate No.	YNF99E
43 State	NJ	73 State	NJ
44 VIN	JHMGK5H72GX035503	74 VIN	4T1BK3DB2BU408586
45 Expires	02 22	75 Expires	12 22
46 Vehicle Removed To	-	76 Vehicle Removed To	YITZ AUTO BODY & TOWING
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police	77 Authority	☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
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.	Charge	Summons No.	Oper.	Charge	Summons No.
01	136 Charge	137 Summons. No.	01	138 Charge	139 Summons. No.
02	140 Charge	141 Summons. No.	02	142 Charge	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	05	26	F	-	-	-	11	04	-	-	KEZYA - NAVARROBENITEZ - 151 PRESSBURG LN LAKEWOOD NJ 08701
B	02	01	01	05	84	M	-	-	-	11	04	-	-	ELIAS D GANZ - 120 POWDERHORN DR LAKEWOOD NJ 08701
C	02	03	01	05	80	F	-	-	-	11	04	-	-	SHIRLEY A GANZ - 120 POWDERHORN DR LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-002272

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

144 Crash Diagram (NOT TO SCALE)

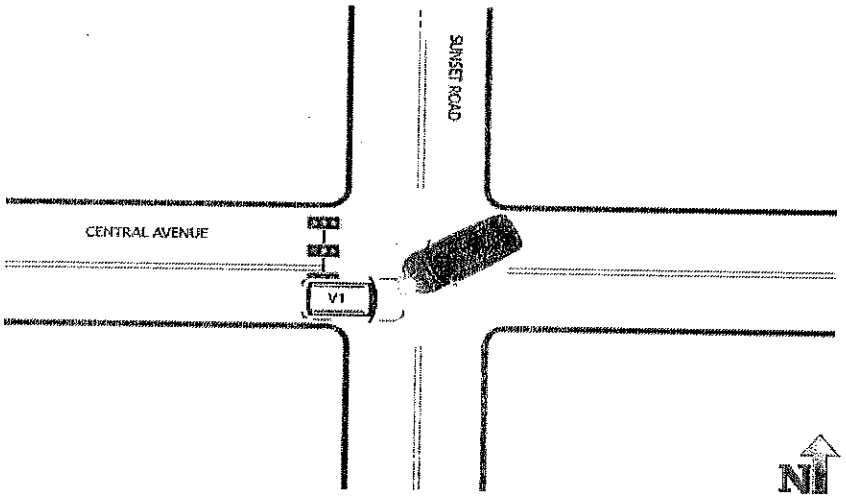


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver of vehicle one stated she was traveling East on Central Avenue. Furthermore she stated upon approaching the intersection at Sunset Road she observed the yellow traffic signal and continued through the intersection. At that time, vehicle two was attempting to turn left on to Sunset Road, and collided with her vehicle.

Driver of vehicle two stated he was traveling West on Sunset Road. Furthermore he stated upon approaching the intersection he was preparing to turn left on to Sunset Road. At that time, he observed a yellow traffic signal and proceeded to turn at the intersection, colliding with vehicle one.

As a result of my investigation, I have determined the driver of vehicle two to be at fault due to failure to yield right of way to vehicle one.

END OF NARRATIVE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MCMILLAN, P	426	M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	-
98	06
99	09
100a	01
100b	04
101	02
102	01
103	01
104	2
105	13
106	-
107	-
108	-
109	01
110	-
111	01
112	-
113	-
114	-
115	-
116	-
117	01

1 Case Number: 22-002683

2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

3 Station/Precinct:

10 Crash Occurred On: 1399 RIVER AVE; JIM CURLEY

☐ At Intersection With Road Name Dir

☐ Feet ☐ N ☐ E of:

☐ Miles ☐ S ☐ W

11 Speed Limit | 12 Route No. | Suffix | 13 Milepost | 18 Speed Limit

14 15 16

19 Ramp ☐ To ☐ From:

17 Cross Road Name

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

4 Date of Crash mm dd yy: 12/27/2021

5 Day Of Week:

6 Time (use 2400 hrs): 1950

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

21 Latitude: 40.04833

22 Longitude: -74.22000

118a	25
118b	-
119a	-
119b	10
120a	01
120b	-
121a	01
121b	-
122	31
123	13
124	-
125	-
126a	26
126b	-
126c	-
126d	-
126e	26
127a	22
127b	-
127c	-
127d	-
127e	22
128	22
129	-
130	-
131	09
132	00
133	-
134	00

Vehicle 1

23 Veh #: 1

24 Policy No.:

25 NJ Ins. Code:

☐ Parked ☒ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

26 Driver's First Name: RICHARD | Initial: J | Last Name: RUTKOWSKI | 29 Sex: M

27 Number & Street: 825 OCEAN AVE

28 City: BEACHWOOD | State: NJ | Zip: 08722

30 Eyes: 2 | DL Class: A | Restrictions: - | Endorsements: - | 31 State: NJ

32 Driver's License Number: R94876557105652

33 DOB mm dd yyyy: 05/21/1965

34 Expires mm yy: 05 25

35 Owner's First Name: | Initial: | Last Name:

☐ Same As Driver

36 Number & Street:

37 City: | State: | Zip:

38 Make: | 39 Model: | 40 Color: | 41 Year: | 42 Plate No.: | 43 State:

44 VIN: | 45 Expires:

46 Vehicle Removed To

☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

47 Authority

☐ Owner ☐ Driver ☐ Police

48 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

49 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class | Placard No.

50 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

51 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

52 Motor Carrier or Government Entity

Number & Street

City | State | Zip

Vehicle 2

53 Veh #: 2

54 Policy No.: F10290931-4

55 NJ Ins. Code: 426

☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: JONATHAN | Initial: K | Last Name: MENSAH | 59 Sex: M

57 Number & Street: 18 MARSHALL ST APT 3G

58 City: IRVINGTON | State: NJ | Zip: 07111

60 Eyes: 2 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

62 Driver's License Number: M25774097204032

63 DOB mm dd yyyy: 04/19/2003

64 Expires mm yy: 04 25

65 Owner's First Name: BEATRICE | Initial: - | Last Name: TAWIAH

☐ Same As Driver

66 Number & Street: 18 MARSHALL ST APT 3G

67 City: IRVINGTON | State: NJ | Zip: 07111

68 Make: HOND | 69 Model: ACC | 70 Color: GRY | 71 Year: 2010 | 72 Plate No.: F59PFR | 73 State: NJ

74 VIN: 1HGCP2F41AA141123 | 75 Expires: 09 22

76 Vehicle Removed To

☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded

☐ Left At Scene ☐ Towed Impounded

77 Authority

☐ Owner ☒ Driver ☐ Police

78 Alcohol/Drug Test

Given: ☒ No ☐ Yes ☐ Refused

Type: ☐ Breath ☐ Blood ☐ Urine

Results: 0. - % ☐ Pending

79 Hazardous Material

☒ None ☐ On Board ☐ Spill

Hazard Class | Placard No.

80 Carrier No.

☐ USDOT ☐ MC/MX ☒ None

81 GVWR/GCWR

☐ Weight <= 10,000 lbs

☐ Weight 10,001-26,000 lbs

☐ Weight >= 26,001 lbs

82 Motor Carrier or Government Entity

Number & Street

City | State | Zip

135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
			2		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	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	02	01	01	05		M	-	-	-	-	11	04	-	JONATHAN K MENSAH - 18 MARSHALL ST APT 3G IRVINGTON NJ 07111
B	02	03	01	05		M	-	-	-	-	11	04	-	ZEPHAN U ADJALLE - 20 MARSHALL ST APT 5S IRVINGTON NJ 07111
C	02	06	01	05		F	-	-	-	-	11	04	-	UNIQUE - MENSAH - 18 MARSHALL STREET IRVINGTON NJ 07111
D														

New Jersey Police Crash Investigation Report

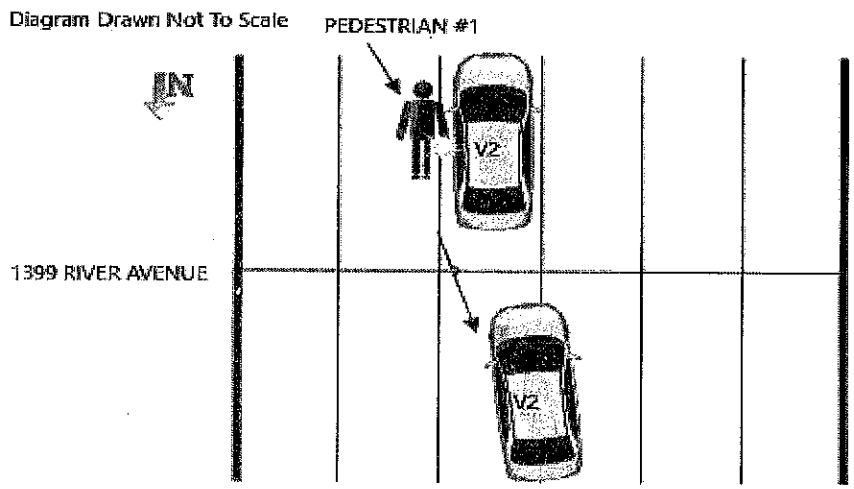
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-002683

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ 83	Pos In/On 84	Eject 85	Phys Cond 86	Age 87	Sex 88	Loc Inj 89	Type Inj 90	Ref Med 91	Equip Avail 92	Equip Used 93	Bag Dept 94	Hosp Code 95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Pedestrian #1 responded to LPD to report that on the above date and time, he followed vehicle #2, which hit his vehicle in Toms River. Pedestrian #1 stated vehicle #2 pulled into the parking lot of Jim Curley GMC and pulled into a parking space. Pedestrian #1 exited his vehicle and told Driver #2 to stay as the Police were coming. Pedestrian #1 states he overheard the passenger of Vehicle #2 yell "fuck it, just hit him" Pedestrian #1 stated Driver #2 then backed out of his space and vehicle #2 collided with his left knee. Pedestrian #1 stated he was injured at the time, but later on sought medical attention.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAVALLO M	337	PA	325	☐ Pending ☒ Complete