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	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	04
117	04

1 Case Number: 22-002927

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

3 Station/Precinct:

10 Crash Occurred On: ADAMS ST — Road Name — Dir — 11 Speed Limit: 25 — 12 Route No. — Suffix — 13 Milepost

☐ At Intersection With ☒ Feet ☐ Miles: 40 (14) — ☐ N ☐ E ☐ S ☐ W of: VAN BUREN AVE (15) — 18 Speed Limit: 25 (16)

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

4 Date of Crash (mm dd yy): 01/13/22 — 5 Day Of Week: THURSDAY — 6 Time (use 2400 hrs): 0844 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: -- — 21 Latitude: 40.097950 — 22 Longitude: -74.248910

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

Vehicle 1

23 Veh #: 1 — 24 Policy No.: F101041218 — 25 NJ Ins. Code: 426

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

26 Driver's First Name: ALEX — Initial: A — Last Name: YILMAZ — 29 Sex: M

27 Number & Street: 417 EASTERN BLVD

28 City: BAYVILLE — State: NJ — Zip: 08721

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

32 Driver's License Number: Y43830196109722 — 33 DOB (mm dd yyyy): 09/10/1972 — 34 Expires (mm yy): 09 23

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

36 Number & Street: 417 EASTERN BLVD

37 City: BAYVILLE — State: NJ — Zip: 08721

38 Make: HOND — 39 Model: PLT — 40 Color: BLK — 41 Year: 2012 — 42 Plate No.: V71CLW — 43 State: NJ

44 VIN: 5FNYF4H52CB081906 — 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.: 4618268819 — 55 NJ Ins. Code: 148

☒ 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: AVRAHOM — Initial: C — Last Name: JOSEPH

66 Number & Street: 198 GLEN AVE S

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

68 Make: TOYT — 69 Model: COR — 70 Color: BRO — 71 Year: 2018 — 72 Plate No.: B55MYS — 73 State: NJ

74 VIN: 2T1BURHE7JC031593 — 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 ☐ 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.	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	-	49	M	-	-	-	11	04	-	-	ALEX A YILMAZ - 417 EASTERN BLVD BAYVILLE NJ 08721
B														
C														
D														

New Jersey Police Crash Investigation Report

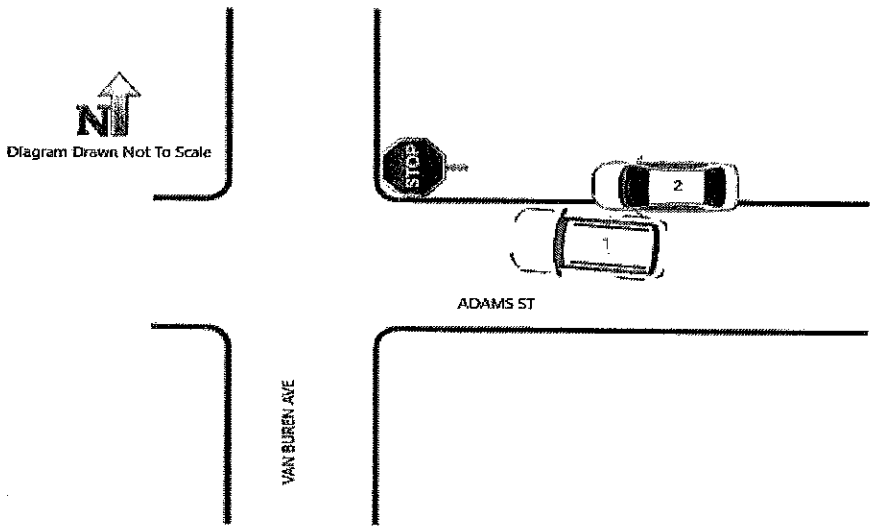
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-002927

(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 West on Adams St East of Van Buren Ave. Vehicle #2 was parked legally on the side of the roadway facing East on Adams St. Vehicle #1 sideswiped vehicle #2. Driver #1 stated that there were vehicles parked on both sides of the road and a large vehicle was traveling East on Adams St. Driver #1 stated that he was attempting to let the oncoming vehicle pass and he struck vehicle #2. Driver #1 is at fault for the crash.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
PRZEWOZNIK J	308	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-003087
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	07	3 Station/Precinct	-
99	01	4 Date of Crash (mm dd yy)	01/13/22
100a	01	5 Day Of Week	THURSDAY
		6 Time (use 2400 hrs)	2143
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	--
		10 Crash Occurred On:	RIVER AVE
		Road Name	
		Dir	-
		11 Speed Limit	45
		12 Route No.	0009
		Suffix	-
		13 Milepost	-
		14 At Intersection With	☐
		15 Feet	☒
		16 Miles	☐
		500	
		of:	JOHN ST
		☒ N ☐ E ☐ S ☐ W	
		17 Cross Road Name	-
		18 Speed Limit	25
		19 Ramp ☐ To ☐ From:	
		20 Route/Name	
		21 Latitude	-
		22 Longitude	-
		☐ NB ☐ EB ☐ SB ☐ WB	

118a	25	118b	-	119a	09	119b	02	120a	01	120b	-	121a	01	121b	-	122	07	123	01

100b	04	101	02	102	01	103	01	104	2	105	01	106	-	107	-	108	01	109	01

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: CLAIRE | Initial: - | Last Name: NALWOGA | 29 Sex: F
27 Number & Street: 326 SUMNER AVE
28 City: SEASIDE HGTS | State: NJ | Zip: 08751
30 Eyes: BR | DL Class: D | Restrictions: - | Endorsements: - | 31 State: MA
32 Driver's License Number: S12357500 | 33 DOB (mm dd yyyy): 12/05/1996 | 34 Expires (mm yy): 06 22
35 Owner's ☐ Same As Driver | First Name: KRISTOFER | Initial: C | Last Name: NORRIS
36 Number & Street: 4 ARCHSTONE CIR
37 City: READING | State: MA | Zip: 01867
38 Make: VOLV | 39 Model: S60 | 40 Color: BLK | 41 Year: 2018 | 42 Plate No.: 3CGV69 | 43 State: MA
44 VIN: YV140MTLXJ2454738 | 45 Expires: 09 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. *** | 55 NJ Ins. Code -
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run

56 Driver's First Name: SHALOM | Initial: - | Last Name: STEIN | 59 Sex: M
57 Number & Street: 6100 RUSK AVE
58 City: BALTIMORE | State: MD | Zip: 21209
60 Eyes: - | DL Class: - | Restrictions: - | Endorsements: - | 61 State: MD
62 Driver's License Number: S350765001072 | 63 DOB (mm dd yyyy): 01/27/2002 | 64 Expires (mm yy): 03 23
65 Owner's ☐ Same As Driver | First Name: ARYEH | Initial: E | Last Name: STEIN
66 Number & Street: 6100 RUSK AVE
67 City: BALTIMORE | State: MD | Zip: 21209
68 Make: HOND | 69 Model: ODY | 70 Color: 1 | 71 Year: 2015 | 72 Plate No.: M370303 | 73 State: MD
74 VIN: 5FNRL5H47FB125087 | 75 Expires: 11 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 - ☒ 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: -

118a	25	118b	-	119a	09	119b	02	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		

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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	NO STATUTE	-	-	NO STATUTE	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	NO STATUTE	-	-	NO STATUTE	-

	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	25	F	-	-	-	11	04	-	-	CLAIRE - NALWOGA - 326 SUMNER AVE SEASIDE HGTS NJ 08751 - -
B	02	01	01	05	19	M	-	-	-	11	04	-	-	SHALOM - STEIN - 6100 RUSK AVE BALTIMORE MD 21209 - -
C														
D														

New Jersey Police Crash Investigation Report

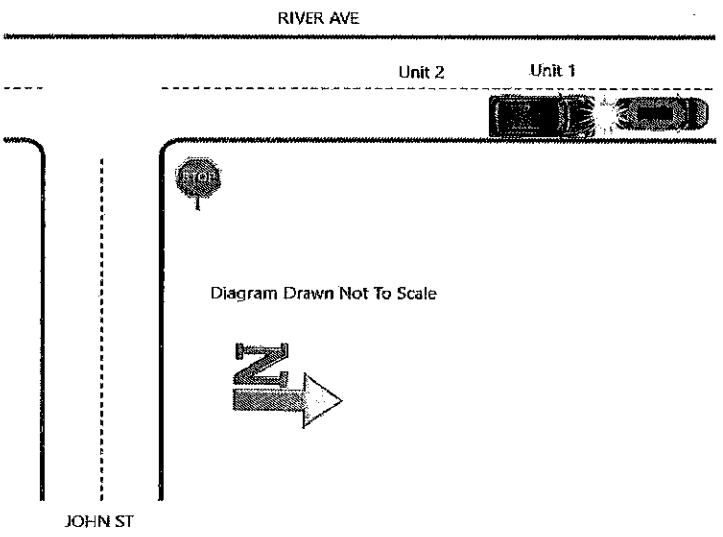
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-003087

(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

V1 AND V2 WERE LOCATED IN THE NORTHBOUND LANE ON RIVER AVENUE. BOTH VEHICLES HAD MINIMUM DAMAGE.

DRIVER OF V2 STATED HE WAS DRIVING DIRECTLY BEHIND V1 TRAVELING NORTHBOUND ON RIVER AVENUE. DRIVER OF V2 ADMITTED TO NOT BRAKING IN TIME CAUSING HIS VEHICLE TO COLLIDE INTO THE REAR OF V1.

V1 STATED SHE WAS TRAVELING NORTHBOUND ON RIVER AVE AND WAS COMING TO A STOP WHEN V2 REAR ENDED HER.

NO INJURIES WERE REPORTED.

INSURANCE INFO FOR V1: GEICO 22063 POLICY # 4557 8809 54

INSURANCE FOR V2: GEICO POLICY # 4015 3307 25

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
BANUELOS M	398	M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05		
97	01	1 Case Number	22-004244
		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
		5 Day Of Week	MONDAY
		6 Time (use 2400 hrs)	0927
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	1
100a	01	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	200
		14	
		15	
		☐ N ☒ E / ☐ S ☐ W	
		16 of:	VINE STREET
		17 Cross Road Name	
		18 Speed Limit	25
		19 Ramp ☐ To ☐ From:	
		20 Route/Name	
		☐ NB ☐ EB ☐ SB ☐ WB	
		21 Latitude	-
		22 Longitude	-

100b	04	23 Veh #	1	24 Policy No.	944794782	25 NJ Ins. Code	135	53 Veh #	2	54 Policy No.	TCA00001006139	55 NJ Ins. Code	632	118a	09	118b	-	119a	25
101	02	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						119b	-	120a	01	120b	-
102	02	26 Driver's First Name	GELLA	Initial	B	Last Name	ZAKS -	29 Sex	F	56 Driver's First Name	YOCHEVED	Initial	J	Last Name	REICH -	59 Sex	F	121a	01
103	02	27 Number & Street	28 HILLTOP PL							57 Number & Street	226 LAKE DR. TERRACE							121b	-
104	2	28 City	MONSEY			State	NY	Zip	10952	58 City	LAKEWOOD			State	NJ	Zip	08701		
		30 Eyes	5	DL Class	I	Restrictions	-	Endorsements	-	31 State	NY	60 Eyes	5	DL Class	D	Restrictions	-	Endorsements	-
		61 State	NJ	122	01														
105	01	32 Driver's License Number	426383236	33 DOB (mm dd yyyy)	05/09/1995	34 Expires mm	05	yy	26	62 Driver's License Number	R22517907161585	63 DOB (mm dd yyyy)	11/15/1958	64 Expires mm	11	yy	22	123	01
106	-	35 Owner's First Name	☐ Same As Driver GELLA	Initial	B	Last Name	ZAKS -			65 Owner's First Name	☐ Same As Driver NAFTALI	Initial	-	Last Name	REICH -			124	04
107	-	36 Number & Street	28 HILLTOP PL							66 Number & Street	226 LAKE DRIVE TER							125	04
108	01	37 City	MONSEY			State	NY	Zip	10952	67 City	LAKEWOOD			State	NJ	Zip	08701		
109	01	38 Make	TOYT	39 Model	CAM	40 Color	GRY	41 Year	2016	42 Plate No.	P14NBX	43 State	NJ	68 Make	TOYT	69 Model	RAV	70 Color	BRO
		71 Year	2010	72 Plate No.	U75DHW	73 State	NJ	126a	26	126b	-								
110	01	44 VIN	4T1BF1FK6GU251013	45 Expires	01	22		74 VIN	JTMBF4DV5AD038189	75 Expires	08	22		126c	-				
111	01	46 Vehicle Removed To	-					76 Vehicle Removed To						126d	-				
112	-	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded						☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded						126e	26				
113	-	47 Authority	☒ Owner ☐ Driver ☐ Police					77 Authority	☒ Owner ☐ Driver ☐ Police					127a	26				
114	-	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused					49 Hazardous Material	☒ None ☐ On Board ☐ Spill					78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused			79 Hazardous Material	☒ None ☐ On Board ☐ Spill
115	-	Type: ☐ Breath ☐ Blood ☐ Urine						Hazard Class	Placard No.					Type: ☐ Breath ☐ Blood ☐ Urine				Hazard Class	Placard No.
116	02	Results: 0. - % ☐ Pending												Results: 0. - % ☐ Pending					
117	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
		52 Motor Carrier or Government Entity	-											82 Motor Carrier or Government Entity	-				
		Number & Street	-											Number & Street	-				
		City	-	State	-	Zip	-							City	-	State	-	Zip	-
		127b	-	127c	-	127d	-	127e	26	128	26	129	02	130	02				
		135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No															131	07
		Oper.	-	136 Charge		137 Summons. No.	-	Oper.	-	138 Charge		139 Summons. No.	-	132	07				
		Oper.	-	140 Charge		141 Summons. No.	-	Oper.	-	142 Charge		143 Summons. No.	-	133	03				
		134	03																

	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	-	-	GELLA B ZAKS - 28 HILLTOP PL MONSEY NY 10952
B	02	01	01	03	63	F	06	08	01	11	04	-	-	YOCHEVED J REICH - 226 LAKE DR. TERRACE LAKEWOOD NJ 08701
C														
D														

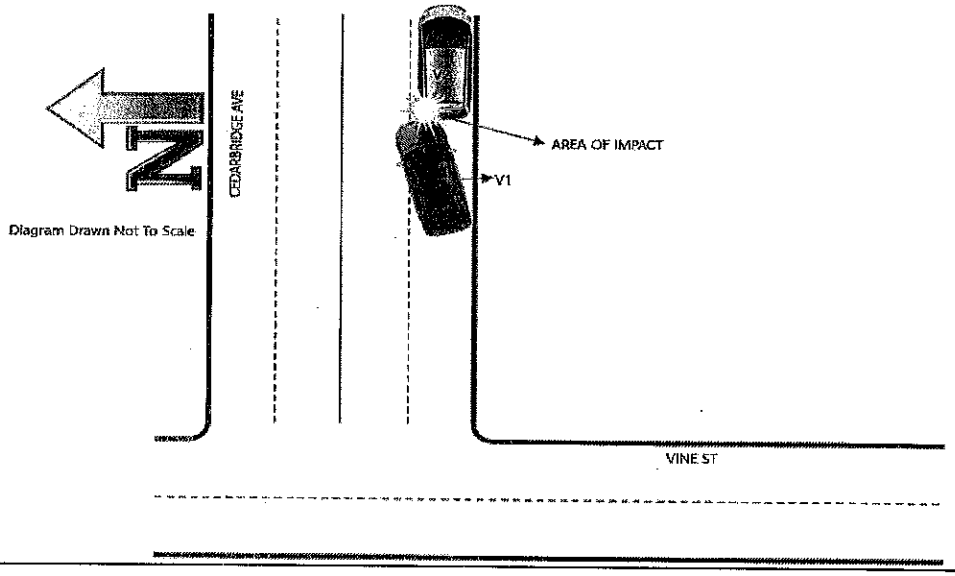
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004244

(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 ALL VEHICLES WERE ON THE SIDE OF THE ROAD FACING EAST ON CEDARBRIDGE AVE. DRIVER OF VEHICLE 2 HAD A COMPLAINT OF BACK PAIN BUT DRIVER OF VEHICLE 1 HAD NO INJURIES. DRIVER OF VEHICLE 2 DECLINED MEDICAL ATTENTION.

DRIVER OF VEHICLE 1 STATED THAT VEHICLE 2 STOPPED SHORT, TO WHICH SHE TRIED TO AVOID VEHICLE 2 BY TURNING LEFT. WHEN TURNING LEFT SHE STRUCK THE REAR DRIVERS SIDE LIGHT ON VEHICLE 2.

DRIVER OF VEHICLE 2 STATED SHE WAS DRIVING WHEN A VEHICLE IN FRONT OF HER STOPPED SHORT, TO WHICH SHE STOPPED AS WELL. WHEN SHE STOPPED, DRIVER OF VEHICLE 1 STRUCK HER VEHICLE.

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

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GIBSON M	409	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	04	PAGE	1
		OF	2
97	01	1 Case Number	22-004276
98	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
99	05	3 Station/Precinct	-
100a	01	4 Date of Crash (mm dd yy)	01/17/22
		5 Day Of Week	MONDAY
		6 Time (use 2400 hrs)	1148
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	--
100b	04	10 Crash Occurred On:	CLIFTON AVENUE
		Road Name	
		Dir	-
		11 Speed Limit	35
		12 Route No.	-
		Suffix	-
		13 Milepost	-
		14	-
		15	
		16	
		☒ At Intersection With	
		☐ Feet	
		☐ Miles	
		☐ N ☐ E ☐ S ☐ W	
		of:	8TH STREET
		17 Cross Road Name	-
		18 Speed Limit	25
		19 Ramp ☐ To ☐ From:	
		☐ NB ☐ EB ☐ SB ☐ WB	
		20 Route/Name	
		21 Latitude	-
		22 Longitude	-
101	02	23 Veh #	1
		24 Policy No.	2008188569
		25 NJ Ins. Code	233
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
102	01	26 Driver's First Name	SHIRA
		Initial	B
		Last Name	LEBEN
		29 Sex	F
103	01	27 Number & Street	38 POINTE CIR
104	2	28 City	JACKSON
		State	NJ
		Zip	08527
		30 Eyes	04
		DL Class	D
		Restrictions	-
		Endorsements	-
		31 State	NJ
105	03	32 Driver's License Number	L20727086259944
		33 DOB (mm dd yyyy)	09/18/1994
		34 Expires (mm yy)	09 25
106	-	35 Owner's First Name	CHARLES
		Initial	-
		Last Name	LEBEN
		☐ Same As Driver	
107	-	36 Number & Street	109 MELVILLE AVE
108	01	37 City	LAKEWOOD
		State	NJ
		Zip	08701
109	01	38 Make	TOYT
		39 Model	SIE
		40 Color	SIL
		41 Year	2018
		42 Plate No.	S13KVB
		43 State	NJ
110	01	44 VIN	5TDKZ3DCXJS955875
		45 Expires	11 22
111	01	46 Vehicle Removed To	HESHEY'S
112	-	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113	-	47 Authority	☒ Owner ☐ Driver ☐ Police
114	-	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	-		Type: ☐ Breath ☐ Blood ☐ Urine
			Results: 0. - % ☐ Pending
		49 Hazardous Material	☒ None ☐ On Board ☐ Spill
			- Hazard Class
			- Placard No.
116	03	50 Carrier No.	☐ USDOT - ☐ MC/MX - ☒ None
117	02	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 #		2	
54 Policy No.		5457724	
55 NJ Ins. Code		673	
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name		ALFRED	
Initial		H	
Last Name		LOPEZ	
59 Sex		M	
57 Number & Street		213 WILLOW AVENUE	
58 City		PISCATAWAY	
State		NJ	
Zip		08854	
60 Eyes		02	
DL Class		D	
Restrictions		-	
Endorsements		-	
61 State		NJ	
62 Driver's License Number		L65300216801622	
63 DOB (mm dd yyyy)		01/11/1962	
64 Expires (mm yy)		01 25	
65 Owner's First Name		FOWLER EQUIPMEI -	
Initial		-	
Last Name		FOWLER EQUIPMEI -	
☐ Same As Driver			
66 Number & Street		565 RAHWAY AVE	
67 City		UNION	
State		NJ	
Zip		07083	
68 Make		FORD	
69 Model		FUS	
70 Color		SIL	
71 Year		2017	
72 Plate No.		T19DWS	
73 State		NJ	
74 VIN		3FA6P0H75HR308810	
75 Expires		01 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		-	

118a	25
118b	-
119a	04
119b	16
120a	01
120b	-
121a	01
121b	-
122	01
123	01
124	04
125	08
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	01
130	01
131	11
132	11
133	04
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.

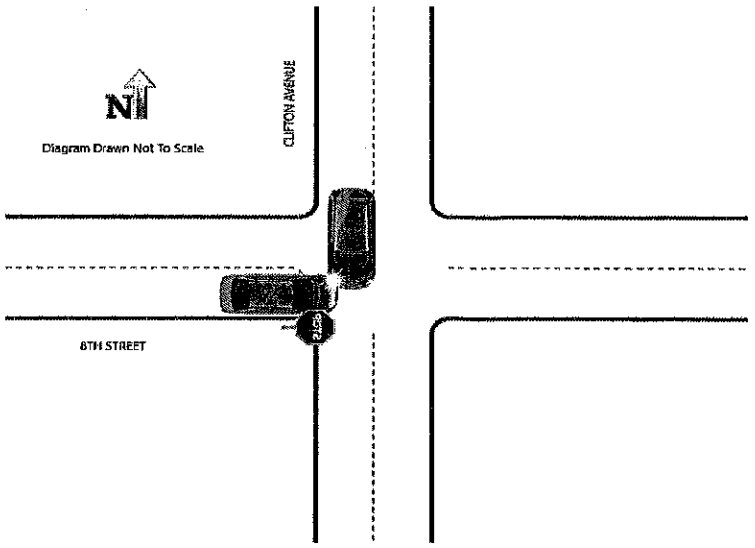
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	27	F	-	-	-	11	04	-	-	SHIRA B LEBEN - 38 POINTE CIR JACKSON NJ 08527
B	V2	01	01	05	60	M	-	-	-	11	04	-	-	ALFRED H LOPEZ - 213 WILLOW AVENUE PISCATAWAY NJ 08854
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: - Case No: 22-004276

(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

D1 STATED SHE WAS TRAVELING SOUTH BOUND ON CLIFTON AVENUE APPORACHING THE INTERSECTION OF 8TH STREET WHEN SHE NOTICED V2 ATTEMPTING TO GO EAST ON 8TH STREET. AT THIS TIME, D1 STATED THAT SHE ATTEMPTED TO AVOID V2, BUT WAS UNSUCCESSFUL CAUSING HER TO BE STRUCK IN THE FRONT PASSENGER SIDE.

D2 STATED HE WAS TRAVELING EAST BOUND ON 8TH STREET APPORACHING THE INTERSECTION OF CLIFTON AVENUE WHEN HE STOPPED AT THE STOP SIGN. D2 ADVISED ME WHEN STOPPED AT THE STOP SIGN HE NOTICED V1 TRAVELING SOUTH ON CLIFTON AVENUE AND THOUGHT HE HAD ENOUGH TIME TO CROSS THE INTERSECTION. WHEN ATTEMPTING TO CROSS THE INTERSECTION HE STRUCK V1 WITH THE FRONT DRIVER SIDE OF HIS VEHICLE.

UPON DOING MY INVESTAGATION I PUT VEHICLE V2 AT FAULT DUE TO FAILING TO YEILD THE RIGHT AWAY TO ON COMING TRAFFIC CAUSING THE ACCIDENT TO OCCUR.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
HOURIGAN D	827	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 07 | 99 05 | 100a 01 | 100b 04 | 101 02 | 102 01 | 103 01 | 104 2 | 105 06 | 106 - | 107 - | 108 01 | 109 01 | 110 01 | 111 01 | 112 - | 113 - | 114 - | 115 - | 116 02 | 117 02

1 Case Number: 22-004416

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): 2111

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 1

10 Crash Occurred On: CENTRAL AVE

☐ At Intersection With — Road Name — Dir

☒ Feet ☐ Miles — 14 — 15 — 16

☐ N ☒ E ☐ S ☐ W

100 of: BRADSHAW RD

11 Speed Limit: 40

12 Route No.: CR 547 — Suffix — 13 Milepost

18 Speed Limit: 25

19 Ramp ☐ To ☐ From:

17 Cross Road Name:

20 Route/Name:

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.087090

22 Longitude: -74.219730

118a 02 | 118b - | 119a - | 119b - | 120a 01 | 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 12 | 130 12 | 131 06 | 132 06 | 133 04 | 134 04

Vehicle 1

23 Veh #: 1

24 Policy No.: SEE BOTTOM***

25 NJ Ins. Code:

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

26 Driver's First Name: SHAUL — Initial: - — Last Name: SULTAN — 29 Sex: M

27 Number & Street: 905 AVENUE P

28 City: BROOKLYN — State: NY — Zip: 11223

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

32 Driver's License Number: 107264733 — 33 DOB (mm dd yyyy): 03/16/1991 — 34 Expires (mm yy): 03 28

35 Owner's First Name: DAVID — Initial: - — Last Name: SULTAN

☐ Same As Driver

36 Number & Street: 905 AVENUE P

37 City: BROOKLYN — State: NY — Zip: 11223

38 Make: HYUN — 39 Model: S0N — 40 Color: - — 41 Year: 2021 — 42 Plate No.: KJK2050 — 43 State: NY

44 VIN: 5NPEL4JA7MH092406 — 45 Expires: 01 23

46 Vehicle Removed To: MOISHY'S AUTO & 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.: 963PAA00002607357

55 NJ Ins. Code: 963

☒ 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: ARIEL — Initial: - — Last Name: FREUD

☐ Same As Driver

66 Number & Street: 54 BAIRD ROAD

67 City: MILLSTONE TWP — State: NJ — Zip: 08535

68 Make: HOND — 69 Model: ACC — 70 Color: GRY — 71 Year: 2005 — 72 Plate No.: C44MCY — 73 State: NJ

74 VIN: 1HGCM66535A038235 — 75 Expires: 02 23

76 Vehicle Removed To: MOISHY'S AUTO & 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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
V1	39:4-88A	1514-A-291716	V1	39:4-97	1514-A-291717
V1	39:3-76.2	1514-A-291718	V1	142 Charge: 39:3-29	143 Summons. No.: 1514-A-291719

	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	30	M	01	02	01	11	10	01	-	SHAUL - SULTAN - 905 AVENUE P BROOKLYN NY 11223
B														
C														
D														

New Jersey Police Crash Investigation Report

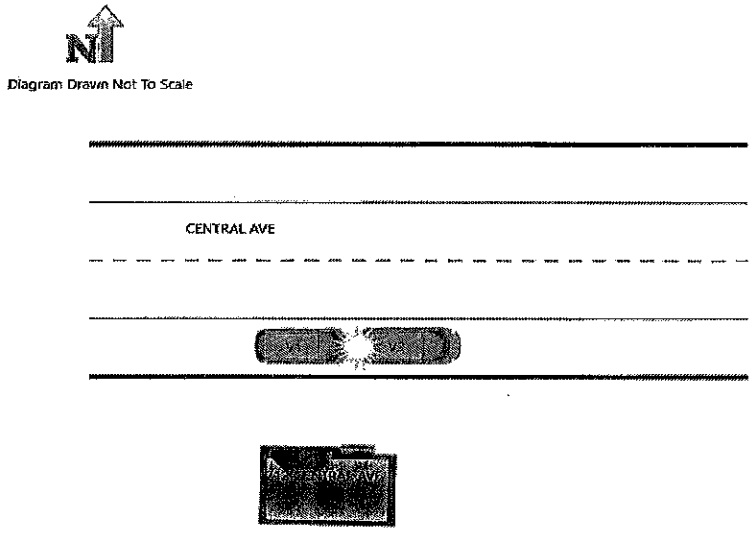
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-004416

(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 V1 stated that he believes he was struck at the 7 o'clock which caused him to strike V2 at the 6 o'clock. It should be noted the Driver of V1 was evaluated by both Hatzolah and Lakewood EMS which he subsequently refused to be transported to the hospital for his head injury.

V2 was parked and the owner of the vehicle was not present for the crash to provide a statement.

The results of the investigation revealed that Driver of V1 somehow lost control of his vehicle which he then subsequently struck V2. It should be noted the Driver of V1 stated that he was struck at the 7 o'clock by another vehicle but there was no damage to that location. Further investigation showed that V1 was partially covered in road salt residue which did not show any signs of an impact from another vehicle. Additionally because V1's front airbag was deployed I checked the Driver of V1's seatbelt to see if it was locked in place. The Driver of V1 was seated on top of his seatbelt but he was not secured and the belt was locked tight in place. I also observed the front windshield was cracked which the Driver of V1 may have hit his head possibly causing a concussion.

Driver of V1 Insurance Policy
Allstate Fire and Casualty Insurance Company
Insurance policy Code: 743
Insurance policy number:000000978699788
Expired:08/05/2021
Insurance Company Address:
1125 RXR Plaza, Suite 1100E
Uniondale, NY 11556
(800) 255-7828

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RIHACEK, A	421	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 1 Case Number: 22-003482

97 01 | 2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

98 06 | 3 Station/Precinct: -

99 07 | 4 Date of Crash (mm dd yy): 01/14/22 | 5 Day Of Week: FRIDAY

100a 01 | 6 Time (use 2400 hrs): 2230 | 7 Municipality Code: 1514 | 8 Total Killed: -- | 9 Total Injured: 1

10 Crash Occurred On: 5TH ST | W | 11 Speed Limit: 35 | - | - | - (12 Route No. | Suffix | 13 Milepost)

118a 02

☐ At Intersection With | Road Name | Dir | 18 Speed Limit: 35

118b -

☒ Feet ☐ Miles | 350 (14 15) | ☐ N ☐ E ☐ S ☒ W (16) | of: LEXINGTON AVE

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

119a 25

20 Route/Name | 21 Latitude: 40.09533 | 22 Longitude: -74.21276

119b -

100b 04 | 23 Veh #: 1 | 24 Policy No.: - | 25 NJ Ins. Code: -

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

101 02 | 26 Driver's First Name: JOSE | Initial: A | Last Name: PEREZRAFAEL | 29 Sex: M

102 01 | 27 Number & Street: 106 CEDARWOOD DRIVE

103 01 | 28 City: BRICK | State: NJ | Zip: 08723

104 3 | 30 Eyes: 2 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ

105 04 | 32 Driver's License Number: P26794106104032 | 33 DOB (mm dd yyyy): 04/07/2003 | 34 Expires (mm yy): 04 25

106 - | 35 Owner's ☐ Same As Driver | First Name: JENNIFER | Initial: - | Last Name: PEREZ

107 - | 36 Number & Street: 106 CEDARWOOD DRIVE

108 01 | 37 City: BRICK | State: NJ | Zip: 08723

109 01 | 38 Make: TOYT | 39 Model: TAC | 40 Color: SIL | 41 Year: 2018 | 42 Plate No.: V88NUY | 43 State: NJ

110 01 | 44 VIN: 3TMDZ5BN8JM050463 | 45 Expires: 06 22

111 01 | 46 Vehicle Removed To: ACME TOWING

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

113 - | 47 Authority: ☐ Owner ☐ Driver ☒ Police

114 - | 48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused

115 - Type: ☐ Breath ☐ Blood ☐ Urine

116 04 Results: 0. - % ☐ Pending

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

117 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

52 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

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: MEYER | Initial: S | Last Name: LANDAU

66 Number & Street: 514 MONMOUTH AVENUE

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

68 Make: TOYT | 69 Model: SIE | 70 Color: 3 | 71 Year: 2012 | 72 Plate No.: W18NBW | 73 State: NJ

74 VIN: 5TDZK3DC7CS264339 | 75 Expires: 12 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 - ☐ 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 02 | 118b - | 119a 25 | 119b - | 120a 03 | 120b - | 121a - | 121b - | 122 01 | 123 10 | 124 04 | 125 04 | 126a 26 | 126b - | 126c - | 126d - | 126e 26 | 127a 28 | 127b - | 127c - | 127d - | 127e 28 | 128 26 | 129 12 | 130 12 | 131 12 | 132 12 | 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.
V1	39:4-129	291240	V1	39:4-130	291241

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
V1	39:4-97	291242	-		-

	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	18	M	08	04	01	11	04	01	-	JOSE A PEREZRAFAEL - 106 CEDARWOOD DRIVE BRICK NJ 08723
B													-	
C														
D														

PAGE 2 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 97 01 | 98 06 | 99 07 | 100a 01

1 Case Number: 22-003482

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): 2230

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 1

10 Crash Occurred On: 5TH ST (Road Name) W (Dir) | 11 Speed Limit: 35 | 12 Route No.: - | Suffix: - | 13 Milepost: -

☐ At Intersection With

☒ Feet ☐ Miles: 350 (14) (15)

☐ N ☐ E ☐ S ☒ W of: LEXINGTON AVE

18 Speed Limit: 35

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.09533

22 Longitude: -74.21276

118a 25 | 118b - | 119a - | 119b - | 120a - | 120b - | 121a - | 121b - | 122 10 | 123 - | 124 04 | 125 - | 126a 28 | 126b - | 126c 05 | 126d - | 126e 28 | 127a - | 127b - | 127c - | 127d - | 127e - | 128 26 | 129 12 | 130 12 | 131 - | 132 - | 133 04 | 134 -

100b 04 | 101 02 | 102 01 | 103 01 | 104 3

23 Veh #: 3 | 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: DOVID | Initial: - | Last Name: EZRAS

☐ Same As Driver

36 Number & Street: 421 PRINCETON AVE

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

38 Make: TOYT | 39 Model: SIE | 40 Color: GRY | 41 Year: 2011 | 42 Plate No.: Y86EFF | 43 State: NJ

44 VIN: 5TDKK3DC7BS026409 | 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: -

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 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

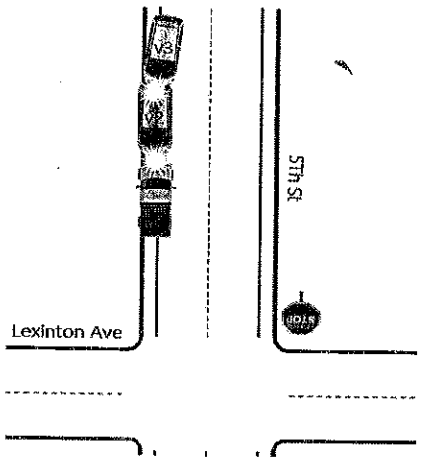
Station: - Case No: 22-003482

(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

Upon my arrival to the crash, I observed V1 collided into the front of V2 head on, which V2's rear bumper then collided into the front of V3.

Driver of V1 fled the scene upon my arrival.

Driver of V1 was then located on 8th and Clifton Ave and per his statements, he was traveling West from 5th St getting chased by an unknown vehicle. Driver of V1 then crossed from Lexington Ave into 5th St and collided head on into V2 which then V2 collided into V3. Driver of V1 stated he left the scene once he crashed his vehicle because he was afraid of the unknown person in the vehicle chasing him.

It should be noted that witnesses to this accident did not mention anything about a 4th vehicle.

When questioning Driver of V1 if he had valid insurance, he stated his sister had the information on her phone. Driver of V1 was advised to present a copy of the insurance as soon as possible.

No injuries were reported at the time of the scene

Driver of V1 was charged with 39:4-130, 39:4-97 and 39:4-129 and later transferred to OCJ for violation of 2C:35-10A (1).

End report

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RODRIGUEZ, B	424	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	04
101	02
102	02
103	02
104	2
105	05
106	-
107	-
108	04
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	04

1 Case Number: 21-133945

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

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 12/29/21

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 0855

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 1

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

☐ At Intersection With

☒ Feet ☐ Miles — 14 — 15

☐ N ☒ E ☐ S ☐ W of: ELAINE ST

11 Speed Limit: 35

12 Route No.: 0628 — Suffix: - — 13 Milepost: -

18 Speed Limit: 25

16 — 19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name:

21 Latitude: 40.073780

22 Longitude: -74.221790

118a	25
118b	-
119a	14
119b	-
120a	01
120b	01
121a	01
121b	01
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	08
130	08
131	10
132	10
133	04
134	04

Vehicle 1

23 Veh #: 1

24 Policy No.: 4618-02-60-43

25 NJ Ins. Code: 100

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

26 Driver's First Name: MARIA — Initial: E — Last Name: MONTES-RAMIREZ - — 29 Sex: F

27 Number & Street: 2137 ALDRIN RD APT 2A

28 City: OCEAN — State: NJ — Zip: 07712

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

31 State: NJ

32 Driver's License Number: M64435196551772

33 DOB (mm dd yyyy): 01/18/1977

34 Expires (mm yy): 01 25

35 Owner's First Name: MARIA — Initial: E — Last Name: MONTES-RAMIREZ - ☐ Same As Driver

36 Number & Street: 2137 ALDRIN RD APT 2A

37 City: OCEAN — State: NJ — Zip: 07712

38 Make: HOND — 39 Model: PIL — 40 Color: WHI — 41 Year: 2004 — 42 Plate No.: U71NZR — 43 State: NJ

44 VIN: 2HKYF18574H532202

45 Expires: 07 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 - ☒ 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.: 51291004267

55 NJ Ins. Code: 917

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

56 Driver's First Name: SARAH — Initial: - — Last Name: FRIEDMAN - — 59 Sex: F

57 Number & Street: 31 KEDMA DR

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

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

61 State: NJ

62 Driver's License Number: F74026910053942

63 DOB (mm dd yyyy): 03/08/1994

64 Expires (mm yy): 03 25

65 Owner's First Name: SARAH — Initial: - — Last Name: FRIEDMAN - ☐ Same As Driver

66 Number & Street: 31 KEDMA DR

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

68 Make: TOYT — 69 Model: CAM — 70 Color: 1 — 71 Year: 2016 — 72 Plate No.: H70JEB — 73 State: NJ

74 VIN: 4T1BF1FK3GU250353

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 - ☒ 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		-	2		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
1		-	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	V1	01	01	03	44	F	04	08	-	11	04	-	-	MARIA E MONTES-RAMIREZ - 2137 ALDRIN RD APT 2A OCEAN NJ 07712
B	V2	01	01	-	27	F	-	-	-	11	04	-	-	SARAH - FRIEDMAN - 31 KEDMA DR LAKEWOOD NJ 08701
C	V2	04	01	-	2	F	-	-	-	05	05	-	-	TOVA - FRIEDMAN - 31 KEDMA DR LAKEWOOD NJ 08701
D														

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☐ Non-Reportable ☒ Change Report

1 Case Number: 21-133945

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

3 Station/Precinct: -

4 Date of Crash (mm dd yy): 12/29/21

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 0855

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

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

11 Speed Limit

12 Route No. Suffix 13 Milepost 18 Speed Limit

14 15 16

19 Ramp ☐ To ☐ From:

17 Cross Road Name

20 Route/Name

21 Latitude 22 Longitude

☐ NB ☐ EB ☐ SB ☐ WB

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: MARIA Initial: E Last Name: MONTES-RAMIREZ - 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: TILTON'S 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.

55 NJ Ins. Code

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

56 Driver's First Name: SARAH Initial: - Last Name: FRIEDMAN - 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: YITZ AUTO BODY

☐ 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

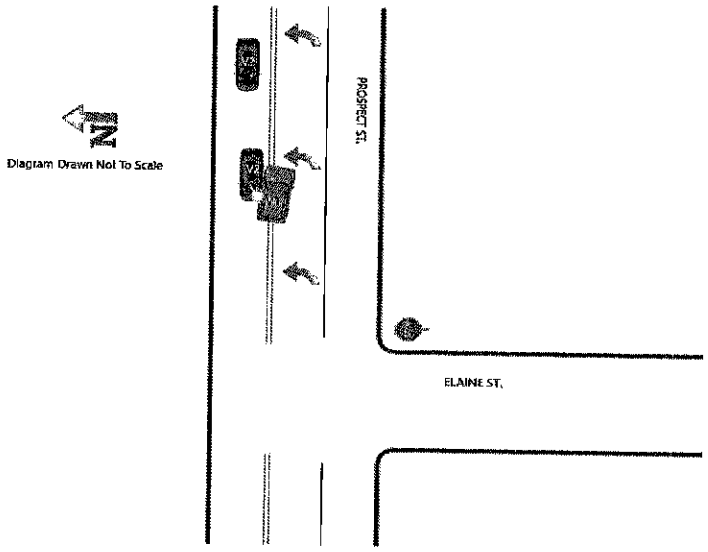
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 21-133945

(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 traveling eastbound on Prospect St. in the left turn only lane to make a left turn onto Williams St. when her vehicle collided with vehicle #2. The driver of vehicle #2 stated she was traveling westbound on Prospect St. when her vehicle was struck by vehicle #1. Driver #2 stated vehicle #1 was partially in her lane of travel which caused the collision.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
W. ALLEN	287	MY	329	☐ 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 05 | 100a 01 | 100b 04 | 101 02 | 102 01 | 103 01 | 104 3 | 105 01 | 106 - | 107 - | 108 01 | 109 01 | 110 01 | 111 01 | 112 - | 113 - | 114 - | 115 - | 116 03 | 117 03

1 Case Number: 22-003293

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): 1233

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 2

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

☐ At Intersection With ☒ Feet ☐ Miles (14) 20 (15) ☐ N ☐ E ☐ S ☐ W (16) of: SWARTHMORE AVENUE

18 Speed Limit: 35

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

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.08127 | 22 Longitude: -74.18070

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

Vehicle 1

23 Veh #: 1 | 24 Policy No.: 6068-64-15-91 | 25 NJ Ins. Code: 148

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

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

27 Number & Street: 946 52ND ST

28 City: BROOKLYN | State: NY | Zip: 11219

30 Eyes: 4 | DL Class: - | Restrictions: - | Endorsements: -

31 State: NY

32 Driver's License Number: 776835597

33 DOB (mm dd yyyy): 03/27/1984

34 Expires (mm yy): 03 23

35 Owner's ☐ Same As Driver | First Name: CHANA | Initial: - | Last Name: FELDMAN -

36 Number & Street: 33 PROVIDENCE AVE

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

38 Make: KIA | 39 Model: SOR | 40 Color: SIL | 41 Year: 2022 | 42 Plate No.: K94PKN | 43 State: NJ

44 VIN: 5XYRKDLF6NG076882

45 Expires: 11 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.: 5129J 005318 | 55 NJ Ins. Code: 917

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

56 Driver's First Name: YOCHEVED | Initial: T | Last Name: ZOHN - | 59 Sex: F

57 Number & Street: 18 ESTHER CT

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

60 Eyes: 4 | DL Class: D | Restrictions: - | Endorsements: -

61 State: NJ

62 Driver's License Number: Z61687908360984

63 DOB (mm dd yyyy): 10/23/1998

64 Expires (mm yy): 10 22

65 Owner's ☐ Same As Driver | First Name: YEHUDAH | Initial: Z | Last Name: ZOHN -

66 Number & Street: 18 ESTHER CT

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

68 Make: TOYT | 69 Model: COR | 70 Color: SIL | 71 Year: 2012 | 72 Plate No.: B76MYT | 73 State: NJ

74 VIN: 2T1BU4EE7CC782218

75 Expires: 11 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 ☐ 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	2C:40-26	291912	3	39:3-4	291570
3	39:6B-2	291911	-		

	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	00	-	-	MOSES - FELDMAN - 946 52ND ST BROOKLYN NY 11219
B	02	01	01	04	23	F	08	08	-	11	00	-	-	YOCHEVED T ZOHN - 18 ESTHER CT LAKEWOOD NJ 08701
C	03	01	01	02	52	M	08	07	-	11	04	-	-	JOSEPH I ROSENBAUM - 1125 OCEAN AVE LAKEWOOD NJ 08701
D														

PAGE 2 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-003293
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)	01/14/22
100a	01	5 Day Of Week	FRIDAY
		6 Time (use 2400 hrs)	1233
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	2
		10 Crash Occurred On:	NEW HAMPSHIRE AVENUE
		Road Name	
		Dir	-
		11 Speed Limit	45
		12 Route No.	-
		Suffix	-
		13 Milepost	-
		18 Speed Limit	35
		☐ At Intersection With	
		☒ Feet / ☐ Miles	20 (14 / 15)
		☐ N ☐ E ☐ S ☐ W of:	SWARTHMORE AVENUE
		19 Ramp ☐ To ☐ From:	-
		17 Cross Road Name	-
		☐ NB ☐ EB ☐ SB ☐ WB	
		20 Route/Name	
		21 Latitude	40.08127
		22 Longitude	-74.18070
118a	09		
118b	-		
119a	-		
119b	-		
120a	01		
120b	01		
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	-		

100b	04	23 Veh #	3
		24 Policy No.	
		25 NJ Ins. Code	
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
101	02	26 Driver's First Name	JOSEPH
		Initial	I
		Last Name	ROSENBAUM
		29 Sex	M
102	01	27 Number & Street	1125 OCEAN AVE
103	01	28 City	LAKEWOOD
		State	NJ
		Zip	08701
104	3	30 Eyes	2
		DL Class	-
		Restrictions	-
		Endorsements	-
		31 State	NJ
105	01	32 Driver's License Number	R669341069036 92
		33 DOB (mm dd yyyy)	03/15/1969
		34 Expires (mm yy)	03 24
106	-	35 Owner's First Name	☐ Same As Driver -
		Initial	-
		Last Name	MADISON TITLE AG -
107	-	36 Number & Street	1125 OCEAN AVE
108	01	37 City	LAKEWOOD
		State	NJ
		Zip	08701
109	-	38 Make	TOYT
		39 Model	AVA
		40 Color	MAR
		41 Year	2012
		42 Plate No.	M40JDB
		43 State	NJ
110	01	44 VIN	4T1BK3DB0CU467590
		45 Expires	09 21
111	-	46 Vehicle Removed To	ACME TOWING
112	-	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113	-	47 Authority	☒ Owner ☐ Driver ☐ Police
114	-	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	-		Type: ☐ Breath ☐ Blood ☐ Urine
			Results: 0. - % ☐ Pending
		49 Hazardous Material	☒ None ☐ On Board ☐ Spill
			Hazard Class / Placard No.
116	03	50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
117	-	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	-	59 Sex	-
Initial	-		
Last Name	-		
57 Number & Street	-		
58 City	-		
State	-		
Zip	-		
60 Eyes	-	61 State	-
DL Class	-		
Restrictions	-		
Endorsements	-		
62 Driver's License Number	-	64 Expires	- -
63 DOB (mm dd yyyy)	-		
65 Owner's First Name	☐ Same As Driver -		
Initial	-		
Last Name	-		
66 Number & Street	-		
67 City	-		
State	-		
Zip	-		
68 Make	-	73 State	-
69 Model	-		
70 Color	-		
71 Year	-		
72 Plate No.	-		
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

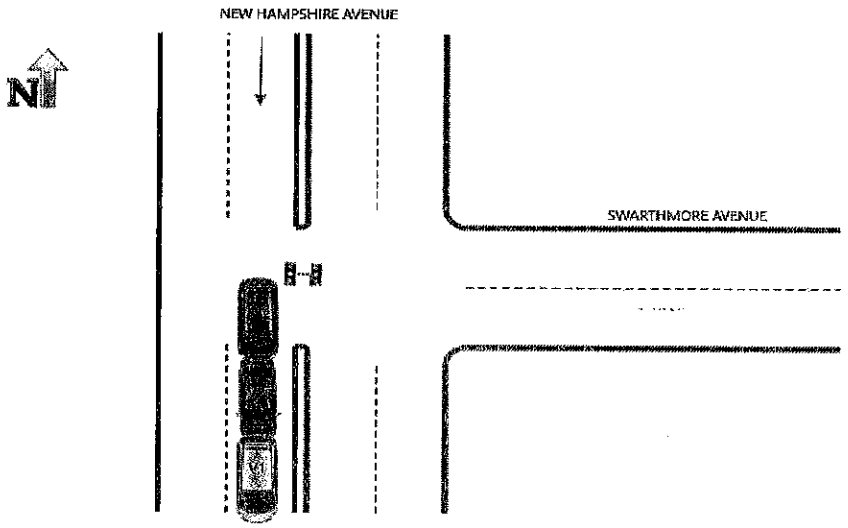
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-003293

(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 STOPPED IN TRAFFIC ON NEW HAMPSHIRE AVENUE FACING SOUTH WHEN HE WAS LIGHTLY STRUCK IN THE REAR BY VEHICLE 2. HE WAS THEN STRUCK A SECOND TIME IN THE REAR WITH A LOT MORE FORCE.

DRIVER OF VEHICLE 2 STATED SHE WAS STOPPED BEHIND VEHICLE 1 WHEN SHE WAS STRUCK IN THE REAR BY VEHICLE 2. THE FORCE OF THE CRASH PUSHED VEHICLE 2 INTO THE REAR OF VEHCILE 1.

DRIVER OF VEHICLE 3 STATED HE WAS BEHIND VEHICLE 2 TRAVELING SOUTH ON NEW HAMPSHIRE AVENUE WHEN VEHICLE 2 CRASHED INTO THE REAR OF VEHICLE 1. HE WAS UNABLE TO STOP AND CRASHED INTO THE REAR OF VEHICLE 2.

THIS INVESTIGATION DETERMINED THAT THE FIRST CRASHED OCCURRED WHEN VEHICLE 2 STRUCK VEHICLE 1 IN THE REAR. THEN A SECOND CRASH OCCURRED WHEN VEHICLE 3 STRUCK VEHICLE 2 IN THE REAR.

BOX 24,25... UNINSURED

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SEUNATH K	284	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: 07 | 100a: 01 | 100b: 04 | 101: 02 | 102: 01 | 103: 01 | 104: 2

1 Case Number: 22-002939

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

3 Station/Precinct:

10 Crash Occurred On: FOREST AVENUE | 11 Speed Limit: 35 | 12 Route No. | Suffix | 13 Milepost

☐ At Intersection With | Road Name | Dir | 18 Speed Limit: 25

☒ Feet ☒ N ☐ E of: 8TH STREET

50 ☐ 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): 01/13/22 | 5 Day Of Week: THURSDAY | 6 Time (use 2400 hrs): 0942 | 7 Municipality Code: 1514 | 8 Total Killed: -- | 9 Total Injured: -- | 21 Latitude: 40.09756 | 22 Longitude: -74.21984

118a: 02 | 118b: - | 119a: 25 | 119b: - | 120a: 01 | 120b: - | 121a: 01 | 121b: - | 122: 06 | 123: 01 | 124: 11 | 125: 11 | 126a: 26 | 126b: - | 126c: - | 126d: - | 126e: 26 | 127a: 26 | 127b: - | 127c: - | 127d: - | 127e: 26 | 128: 26 | 129: 11 | 130: 12 | 131: 01 | 132: 01 | 133: 04 | 134: 04

Vehicle 1

23 Veh #: 1 | 24 Policy No.: 932840848 | 25 NJ Ins. Code: 134

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

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

27 Number & Street: 1398 FOREST AVE

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

30 Eyes: 4 | DL Class: A | Restrictions: - | Endorsements: - | 31 State: NJ

32 Driver's License Number: P27355630012914 | 33 DOB (mm dd yyyy): 12/07/1991 | 34 Expires (mm yy): 12 23

35 Owner's First Name: MORDECHAI | Initial: - | Last Name: PERR

☐ Same As Driver

36 Number & Street: 1398 FOREST AVE

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

38 Make: BUIC | 39 Model: LCR | 40 Color: 3 | 41 Year: 2007 | 42 Plate No.: R19GAN | 43 State: NJ

44 VIN: 2G4WC582471243941 | 45 Expires: 11 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 ☐ 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.: 939 673 392 | 55 NJ Ins. Code: 054

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

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

57 Number & Street: 418 7TH STREET APT 14

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

60 Eyes: 6 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

62 Driver's License Number: K08620700008926 | 63 DOB (mm dd yyyy): 08/10/1992 | 64 Expires (mm yy): 08 23

65 Owner's First Name: AVI | Initial: - | Last Name: KATZENSTEIN

☐ Same As Driver

66 Number & Street: 418 7TH STREET APT 14

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

68 Make: TOYT | 69 Model: CAM | 70 Color: WHI | 71 Year: 2002 | 72 Plate No.: X27NPC | 73 State: NJ

74 VIN: 4T1BE32K92U042474 | 75 Expires: 04 22

76 Vehicle Removed To: YITZ AUTO BODY

☐ 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.

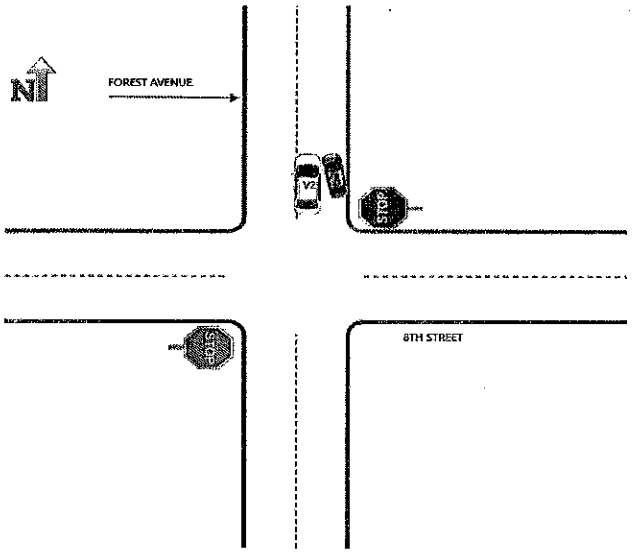
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	30	M	-	-	-	11	04	-	-	MORDECHAI - PERR - 1398 FOREST AVE LAKEWOOD NJ 08701
B	02	01	01	05	29	M	-	-	-	11	04	-	-	AVI - KATZENSTEIN - 418 7TH STREET APT 14 LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: Case No: 22-002939

(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 V1 STATED THAT HE WAS PULLED OVER TO THE SIDE ALONGSIDE SOME PARKED VEHICLES, HE BAGAN TO PULL OUT, DOES NOT REMEMBER IF HE USED A SIGNAL, AND THE OTHER VEHICLE (V2) WAS IN HIS BLIND SPOT. DRIVER OF V2 STATED THAT HE WAS DRIVING ON FOREST AVENUE AND THE OTHER CAR(V1) PULLED OUT AND HIT HIM. V2 HAD THE RIGHT OF WAY AT THE TIME OF THE CRASH.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
YOUMANS R	250	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	01
104	2
105	07
106	-
107	-
108	01
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	04

1 Case Number: 22-003614

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

3 Station/Precinct: -

10 Crash Occurred On: W COUNTY LINE RD — Dir: - — 11 Speed Limit: 45

☒ At Intersection With — Road Name: KENT RD — 12 Route No.: 0526 — Suffix: - — 13 Milepost: -

☐ Feet ☐ Miles — 14: - — 15: ☐N ☐E ☐S ☐W — 16: of:

18 Speed Limit: 35

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

20 Route/Name:

4 Date of Crash (mm dd yy): 01/15/22 — 5 Day Of Week: SATURDAY — 6 Time (use 2400 hrs): 1150 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: 3

21 Latitude: 40.10956 — 22 Longitude: -74.23659

118a	25
118b	-
119a	03
119b	-
120a	01
120b	-
121a	01
121b	-
122	03
123	01
124	03
125	03
126a	26
126b	56
126c	59
126d	26
126e	26
127a	26
127b	56
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.: 1223061-D02-30C — 25 NJ Ins. Code: 962

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

26 Driver's First Name: LESTER — Initial: - — Last Name: OSORIO-MEJIA — 29 Sex: M

27 Number & Street: 1146 CENTRAL AVE

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

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

32 Driver's License Number: - — 33 DOB (mm dd yyyy): 08/01/2001 — 34 Expires (mm yy): - -

35 Owner's First Name: CARLOS — Initial: J — Last Name: RIVERAVILLANUEV -

☐ Same As Driver

36 Number & Street: 196 COVENTRY DR

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

38 Make: ACUR — 39 Model: RSX — 40 Color: GRY — 41 Year: 2002 — 42 Plate No.: U99NYE — 43 State: NJ

44 VIN: JH4DC54832C024721 — 45 Expires: 07 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.: PANJ-004650658 — 55 NJ Ins. Code: 071

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

56 Driver's First Name: CHRISTINE — Initial: D — Last Name: PALMESE — 59 Sex: F

57 Number & Street: 901 MORNING GLORY CT

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

60 Eyes: 4 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: P03101246456824 — 63 DOB (mm dd yyyy): 06/11/1982 — 64 Expires (mm yy): 06 23

65 Owner's First Name: CHRISTINE — Initial: D — Last Name: PALMESE -

☒ Same As Driver

66 Number & Street: 901 MORNING GLORY CT

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

68 Make: CHEV — 69 Model: EQU — 70 Color: SIL — 71 Year: 2016 — 72 Plate No.: Z50MLG — 73 State: NJ

74 VIN: 2GNFLFEK6G6213235 — 75 Expires: 04 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 ☐ 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 ON THE PROPERTY OF 2 KENT RD WAS DAMAGED WHEN VEHICLE 1 STRUCK IT

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:3-10	A291331	2	39:4-81	A291332
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.

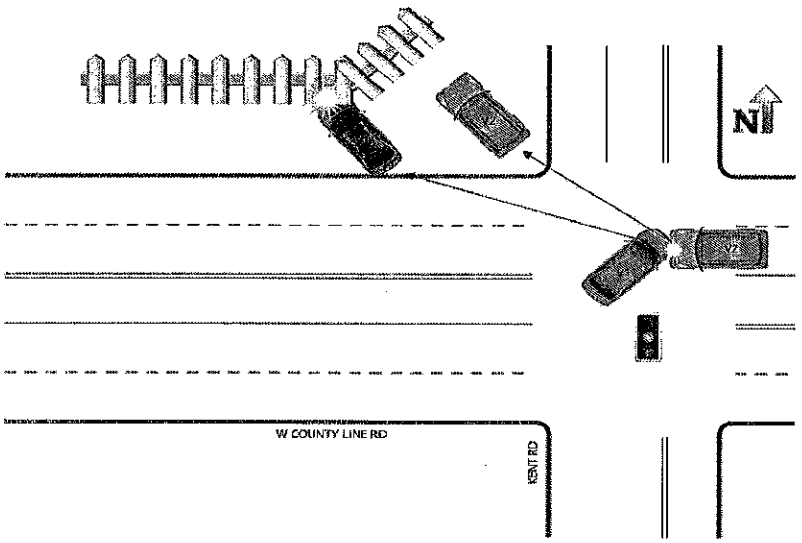
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	-	20	M	-	-	-	11	04	-	-	LESTER - OSORIO-MEJIA - 1146 CENTRAL AVE LAKEWOOD NJ 08701
B	1	03	01	03	17	F	02	04	01	11	04	-	-	KIMBERLY - OSORIO - 1146 CENTRAL AVE LAKEWOOD NJ 08701
C	1	06	01	03	13	F	02	04	01	04	04	-	-	ASHLEY - OSORIO - 1146 CENTRAL AVE LAKEWOOD NJ 08701
D	2	01	01	02	39	F	08	07	02	11	11	01	6303	CHRISTINE D PALMESE - 901 MORNING GLORY C JACKSON NJ 08527

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: - Case No: 22-003614

(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 TRAVELING EAST ON W COUNTY LINE RD APPROACHING KENT RD. VEHICLE 2 WAS TRAVELING WEST ON W COUNTY LINE RD APPROACHING KENT RD.

DRIVER 1 STATED THAT HE WAS STOPPED AT THE TRAFFIC SIGNAL WHEN THE RED LIGHT TURNED TO A GREEN LEFT ARROW. HE STATED THAT AS HE BEGAN TURNING LEFT, VEHICLE 2 CAME SPEEDING AND STRUCK HIS VEHICLE.

DRIVER 1 STATED THAT SHE HAD A GREEN LIGHT AND VEHICLE 1 MADE A SUDDEN LEFT TURN IN FRONT OF HER VEHICLE CAUSING THE CRASH.

I WAS ABLE TO VIEW SURVEILLANCE FOOTAGE OF THE CRASH AND IT APPEARS THAT DRIVER 1 HAD A LEFT TURN GREEN LIGHT AND VEHICLE 2 RAN THE RED LIGHT CAUSING VEHICLE 1 TO CRASH THROUGH THE FENCE OF 2 KENT RD.

DRIVER 1 WAS ISSUED A SUMMONS FOR UNLICENSED DRIVER. DRIVER 2 WAS ISSUED A SUMMONS FOR FAILURE TO OBSERVE SIGNAL.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RIVERA M	327	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	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	04

1 Case Number: 22-004586

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

3 Station/Precinct: -

10 Crash Occurred On: CLIFTON AVE — 11 Speed Limit: 35 — 12 Route No.: - — Suffix: - — 13 Milepost: -

☒ At Intersection With — Road Name: FIRST STREET — Dir: -

☐ Feet ☐ Miles — 14: - — 15: ☐ N ☐ E ☐ S ☐ W — 16: of:

18 Speed Limit: 25

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): 01/18/22 — 5 Day Of Week: TUESDAY — 6 Time (use 2400 hrs): 1228 — 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	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	12
130	12
131	02
132	02
133	03
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 951724825 — 25 NJ Ins. Code: 134

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

26 Driver's First Name: RICHARD — Initial: T — Last Name: BADALI JR — 29 Sex: M

27 Number & Street: 546 BRENTWOOD DRIVE

28 City: FORKED RIVER — State: NJ — Zip: 08731

30 Eyes: 05 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: B00896558303835 — 33 DOB (mm dd yyyy): 03/15/1983 — 34 Expires (mm yy): 03 22

35 Owner's ☒ Same As Driver — First Name: RICHARD — Initial: T — Last Name: BADALI JR -

36 Number & Street: 546 BRENTWOOD DRIVE

37 City: FORKED RIVER — State: NJ — Zip: 08731

38 Make: HOND — 39 Model: ACC — 40 Color: BLU — 41 Year: 2007 — 42 Plate No.: X39NBW — 43 State: NJ

44 VIN: 1HGCM82627A002873 — 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 - ☒ 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.: 11-45-013675543 — 55 NJ Ins. Code: -

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

56 Driver's First Name: MIRYAN — Initial: - — Last Name: SANCHEZ-POMIAN - — 59 Sex: F

57 Number & Street: 108 WASHINGTON ST

58 City: FREDERICKSBURG — State: VA — Zip: 22405

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

62 Driver's License Number: - — 63 DOB (mm dd yyyy): 08/13/1979 — 64 Expires (mm yy): - -

65 Owner's ☒ Same As Driver — First Name: MIRYAN — Initial: - — Last Name: SANCHEZ-POMIAN -

66 Number & Street: 108 WASHINGTON ST

67 City: FREDERICKSBURG — State: VA — Zip: 22405

68 Make: MAZD — 69 Model: 3 — 70 Color: 6 — 71 Year: 2004 — 72 Plate No.: UAN1094 — 73 State: VA

74 VIN: JM1BK12F641161009 — 75 Expires: 08 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: -

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
2	39:3-10	291471	2	39:4-144	291472
-	NO STATUTE	-	-	NO STATUTE	-

	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	-	38	M	-	-	-	11	04	-	-	RICHARD T BADALI JR - 546 BRENTWOOD DRIVE FORKED RIVER NJ 08731 - -
B	02	01	01	-	42	F	-	-	-	11	04	-	-	MIRYAN - SANCHEZ-POMIAN - 108 WASHINGTON ST FREDERICKSBURG VA 22405 - -
C	02	03	01	04	16	F	04	08	02	11	04	-	6502	DEAVILA - XENIA - 2775 HOOPER AVE BRICK NJ 08724 - -
D														

New Jersey Police Crash Investigation Report

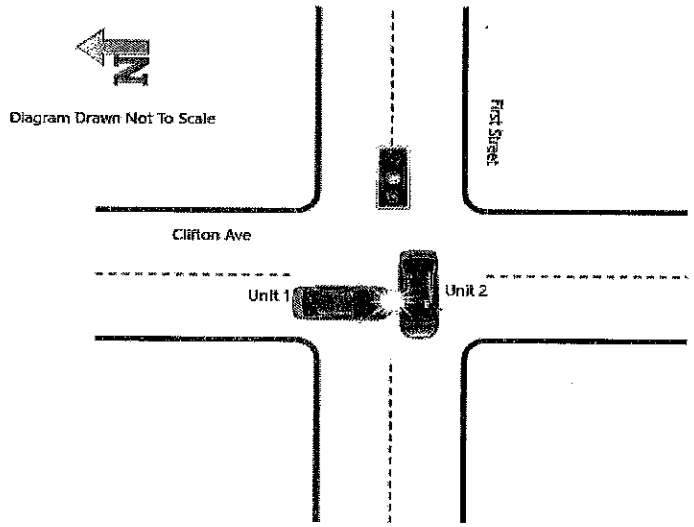
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004586

(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 states he was traveling South bound on Clifton Ave. approaching First Street. He states vehicle 2 was crossing the intersection going West bound on First Street. At which time he struck vehicle 2.

Driver of vehicle 2 states she was traveling West bound on First Street approaching Clifton Ave. She states that vehicle 1 was traveling South bound on Clifton Ave. While she was crossing the intersection she was struck by vehicle 1.

Vehicle 1 was traveling South bound on Clifton Ave. approaching First street. Vehicle 2 was traveling West bound on First Street crossing Clifton Ave. Vehicle 1 struck vehicle 2 in the intersection.

Vehicle 1 had the right of way due to the amber blinking light. Vehicle 2 had a flashing red light. Vehicle 2 was found at fault for failure to yield to vehicle 1.

Vehicle 2 insurance information: Trexis Insurance. P.O. Box 682322 Franklin, TN 37068-1618(877) Phone Number: 877-384-7477

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAMACHO L	828	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	01
104	2
105	06
106	-
107	-
108	25
109	01
110	02
111	01
112	-
113	-
114	05
115	-
116	01
117	-

1 Case Number: 22-004819

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

3 Station/Precinct: -

10 Crash Occurred On: SUNSET RD | - | 11 Speed Limit: 35 | 0034 - - | 118a: 25

Road Name | Dir | 12 Route No. | Suffix | 13 Milepost | 118b: -

☐ At Intersection With | ☒ Feet | ☒ N ☐ E | of: JAMES ST | 18 Speed Limit: 35

14: 10 | ☐ Miles | ☐ S ☐ W | 15 | 16 | 19 Ramp ☐ To ☐ From: - | 17 Cross Road Name | ☐ NB ☐ EB ☐ SB ☐ WB | 119a: 13

4 Date of Crash mm dd yy: 01/19/22 | 5 Day Of Week: WEDNESDAY | 6 Time (use 2400 hrs): 0743 | 7 Municipality Code: 1514 | 8 Total Killed: -- | 9 Total Injured: -- | 20 Route/Name | 21 Latitude: 40.07982 | 22 Longitude: -74.22628 | 119b: -

23 Veh #	24 Policy No.	25 NJ Ins. Code	53 Veh #	54 Policy No.	55 NJ Ins. Code	120a	120b
1	29N0450921	276	2	-	-	01	-

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

26 Driver's First Name	Initial	Last Name	29 Sex	56 Driver's First Name	Initial	Last Name	59 Sex	121a	121b
VINCENT	E	PEPEK -	M	-	-	- -	-	-	-

27 Number & Street	57 Number & Street
10 GREEN TREE DR	-
28 City	State	Zip	58 City	State	Zip
JACKSON	NJ	08527	-	-	-

30 Eyes	DL Class	Restrictions	Endorsements	31 State	60 Eyes	DL Class	Restrictions	Endorsements	61 State	122
2	A	-	-	NJ	-	-	-	-	-	02

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	123
P26237696501642	01/16/1964	01	23	-	-	-	-	10

35 Owner's	First Name	Initial	Last Name	65 Owner's	First Name	Initial	Last Name
☐ Same As Driver	-	-	NORTH EASTERN LI-	☐ Same As Driver	TZIPPORAH	-	TCHIPROUT -

36 Number & Street	66 Number & Street	124
261 GATZMER AVE	413 OCEAN AVE	04
37 City	State	Zip	67 City	State	Zip	125
JAMESBURG	NJ	08831	LAKEWOOD	NJ	08701	04

38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State	68 Make	69 Model	70 Color	71 Year	72 Plate No.	73 State	126a	126b
CLAR	880	WHI	2016	AU519G	NJ	LEXU	G45	SIL	2007	W33PJS	NJ	28	-

44 VIN	45 Expires		74 VIN	75 Expires		126c
1XKZDP0X0GJ129978	03	22	JTHBC96S775008170	12	22	-

46 Vehicle Removed To	76 Vehicle Removed To	126d
-	-	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	126e
47 Authority	77 Authority	28
☒ Owner ☐ Driver ☐ Police	☐ Owner ☐ Driver ☒ Police	

48 Alcohol/Drug Test	49 Hazardous Material	78 Alcohol/Drug Test	79 Hazardous Material	127a
Given: ☒ No ☐ Yes ☐ Refused	☒ None ☐ On Board ☐ Spill	Given: ☒ No ☐ Yes ☐ Refused	☒ None ☐ On Board ☐ Spill	26
Type: ☐ Breath ☐ Blood ☐ Urine	-	Type: ☐ Breath ☐ Blood ☐ Urine		127b
Results: 0. - % ☐ Pending	Hazard Class - Placard No. -	Results: 0. - % ☐ Pending	Hazard Class Placard No.	-
50 Carrier No.	51 GVWR/GCWR	80 Carrier No.	81 GVWR/GCWR	127c
☒ USDOT 1864057 ☐ None	☐ Weight <= 10,000 lbs	☐ USDOT - ☒ None	☐ Weight <= 10,000 lbs	-
☐ MC/MX -	☐ Weight 10,001-26,000 lbs	☐ MC/MX -	☐ Weight 10,001-26,000 lbs	127d
	☒ Weight >= 26,001 lbs		☐ Weight >= 26,001 lbs	-
52 Motor Carrier or Government Entity	82 Motor Carrier or Government Entity	127e
-	-	26
Number & Street	Number & Street	128
-	-	28
City / State / Zip	City / State / Zip	129
- / - / -	- / - / -	05

135 Damage To Other Property	☐ Yes (If Yes, describe)	☒ No				130
-						05
Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.	131
-		-	-		-	07
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.	132
-		-	-		-	07
						133
						02
						134
						03

	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	58	M	-	-	-	11	04	-	-	VINCENT E PEPEK - 10 GREEN TREE DR JACKSON NJ 08527 - -
B														
C														
D														

New Jersey Police Crash Investigation Report

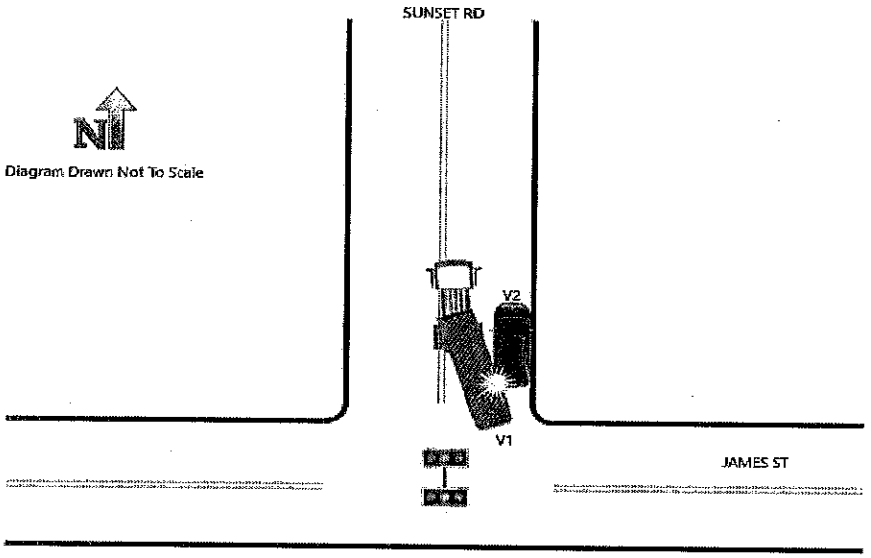
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004819

(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

On 1/19/2022 at approximately 0743hrs, I responded to Sunset Road in reference to a crash. Upon arrival, I met with the driver of vehicle 1 who was identified as Vincent Pepek. Mr. Pepek reported that while he was turning right onto Sunset Road, the back passenger side of his vehicle struck vehicle 2. Mr. Pepek further reported that while he was attempting to make a wider turn onto Sunset Road, he was unable to do so due to the oncoming traffic. Mr. Pepek also stated that vehicle 2 was parked too close to the intersection for larger vehicles to make proper turns.

I then observed where vehicle 2 was located and deemed it was in fact parked improperly. Vehicle 2 was too close to the intersection causing larger vehicles to not make a turn properly. I was unable to make contact with the owner of vehicle 2 but left a Lakewood Police Report card on the vehicle with all information on it needed for this report.

It should be noted, I attempted to contact the party listed as the registered owner of vehicle 2 multiple times with no success at the time of this writing.

There were no injuries reported at the scene of the crash.

Vehicle 1 sustained minimal scratching on the back passenger side tire.

Vehicle 2 sustained heavy damage to the rear driver side of the vehicle.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SHEEHAN, M	423	MY	329	☐ 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	05
100a	01
100b	04
101	02
102	01
103	01
104	3
105	02
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	03
117	03

1 Case Number: 22-004887

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

3 Station/Precinct: -

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1412

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

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

☐ At Intersection With

☒ Feet ☐ Miles — 14: 100 — 15: ☒ N ☐ E ☐ S ☐ W — 16: of: CHESTNUT ST

11 Speed Limit: 45

12 Route No.: 0009 — Suffix: - — 13 Milepost: -

18 Speed Limit: 35

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.05342

22 Longitude: -74.22083

118a	04
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	02
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	03
132	03
133	03
134	04

Vehicle 1

23 Veh #: 1

24 Policy No.: 4360105565

25 NJ Ins. Code: 148

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

26 Driver's First Name: TZVI — Initial: - — Last Name: DINKELS — 29 Sex: M

27 Number & Street: 22 SABLOW DR

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

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

32 Driver's License Number: D45037530011872

33 DOB (mm dd yyyy): 11/24/1987

34 Expires (mm yy): 11 25

35 Owner's First Name: ☒ Same As Driver TZVI — Initial: - — Last Name: DINKELS

36 Number & Street: 22 SABLOW DR

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

38 Make: TOYT — 39 Model: AVA — 40 Color: GRY — 41 Year: 2015 — 42 Plate No.: Z85NEF — 43 State: NJ

44 VIN: 4T1BK1EB2FU149476

45 Expires: 02 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.: 4348438484

55 NJ Ins. Code: 148

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

56 Driver's First Name: RAPHAEL — Initial: - — Last Name: EISEMANN — 59 Sex: M

57 Number & Street: 50 TOVA DR

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

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

62 Driver's License Number: E46436410010912

63 DOB (mm dd yyyy): 10/08/1991

64 Expires (mm yy): 10 23

65 Owner's First Name: ☒ Same As Driver RAPHAEL — Initial: - — Last Name: EISEMANN

66 Number & Street: 50 TOVA DR

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

68 Make: TOYT — 69 Model: CAM — 70 Color: 3 — 71 Year: 2015 — 72 Plate No.: B27KZU — 73 State: NJ

74 VIN: 4T1BF1FK5FU994096

75 Expires: 02 23

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 - ☐ 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	34	M	-	-	-	11	04	-	-	TZVI - DINKELS - 22 SABLOW DR LAKEWOOD NJ 08701 - -
B	02	01	01	05	30	M	-	-	-	11	04	-	-	RAPHAEL - EISEMANN - 50 TOVA DR LAKEWOOD NJ 08701 - -
C	02	02	01	05	13	M	-	-	-	11	04	-	-	YOSEF - SOUDRY - 561 HOWARD DR LAKEWOOD NJ 08701 - -
D	03	01	01	05	39	F	-	-	-	11	04	-	-	JOANNE M ASTA - 32 CENTRAL AVE WARETOWN NJ 08758 - -

PAGE 2 OF 3 ☐ 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	3
105	02
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	03
117	-

1 Case Number: 22-004887

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

3 Station/Precinct: -

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1412

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

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

☐ At Intersection With

☒ Feet ☐ Miles — 100 (14, 15)

☒ N ☐ E ☐ S ☐ W of: CHESTNUT ST

11 Speed Limit: 45

12 Route No.: 0009 — Suffix: - — 13 Milepost: -

18 Speed Limit: 35

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name: -

21 Latitude: 40.05342

22 Longitude: -74.22083

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

23 Veh #: 3 — 24 Policy No.: 50455528 — 25 NJ Ins. Code: 134

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

26 Driver's First Name: JOANNE — Initial: M — Last Name: ASTA — 29 Sex: F

27 Number & Street: 32 CENTRAL AVE

28 City: WARETOWN — State: NJ — Zip: 08758

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

32 Driver's License Number: A80604027455822 — 33 DOB (mm dd yyyy): 05/26/1982 — 34 Expires (mm yy): 05 25

35 Owner's First Name: ☒ Same As Driver JOANNE — Initial: M — Last Name: ASTA

36 Number & Street: 32 CENTRAL AVE

37 City: WARETOWN — State: NJ — Zip: 08758

38 Make: VOLK — 39 Model: JET - JE — 40 Color: GRY — 41 Year: 2012 — 42 Plate No.: YZS97L — 43 State: NJ

44 VIN: 3VWDP7AJ6CM348963 — 45 Expires: 07 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: -

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 First Name: ☐ Same As Driver - — 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														
B														
C														
D														

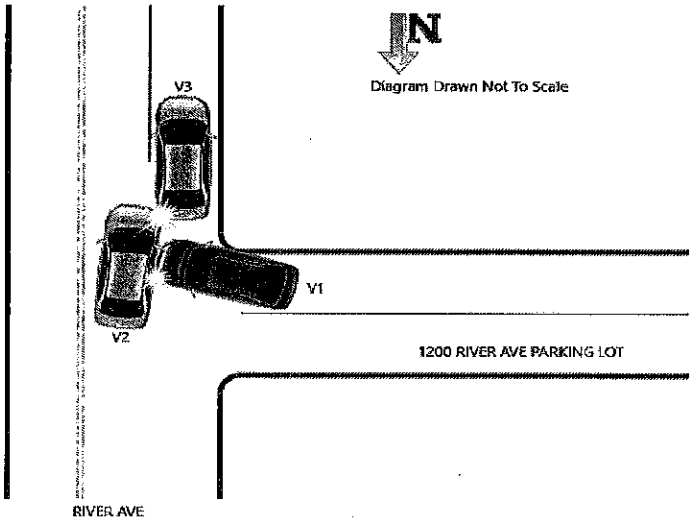
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-004887

(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

On 1/19/2022 at approximately 1412hrs, I responded to River Avenue & Chestnut Street in reference to a crash. Upon arrival, I met with the driver of vehicle 2 who was identified as Raphael Eisemann. Mr. Eisemann reported that while he was traveling South on River Avenue, he attempted to get into the turning lane so he could make a left onto Chestnut Street. Mr. Eisemann further reported that while attempting to do so, his vehicle was struck on the passenger side door area by vehicle 1, causing his vehicle to crash into the rear driver side of vehicle 3.

I then spoke to the driver of vehicle 1 who was identified as Tzvi Dinkels. Mr. Dinkels reported that while he was attempting to make a right onto River Avenue, he was did not observe vehicle 2 traveling South and he then crashed into vehicle 2.

I then met with the driver of vehicle 3 who was identified as Joanne Asta. Ms. Asta reported that while she was waiting for the light to turn green, her vehicle was suddenly struck in the rear driver side by vehicle 2 as a result of the crash.

Vehicle 2 was towed by Moishy's Towing.

There were no injuries reported at the scene of the crash.

Vehicle 1 sustained a cracked driver side headlight, scratches and cracks in the bumper and scratches on the driver side door.

Vehicle 2 sustained damage to the front passenger side door causing it to be ripped away from the vehicle near the fender, scratches to the front fender.

Vehicle 3 sustained scratches to the rear driver side bumper.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SHEEHAN, M	423	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	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	04

1 Case Number: 22-004903

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

3 Station/Precinct:

10 Crash Occurred On: HEARTH CT E — 11 Speed Limit: 35

☒ At Intersection With — Road Name: HEARTH CT E — Dir — 12 Route No. — Suffix — 13 Milepost

☐ Feet ☐ N ☐ E of: POWDERHORN DR — 18 Speed Limit: 35

☐ Miles ☐ S ☐ W — 14 — 15 — 16

19 Ramp ☐ To ☐ From — 17 Cross Road 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): 1509 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

20 Route/Name — 21 Latitude: 40.08212 — 22 Longitude: -74.22919

118a	25
118b	-
119a	16
119b	04
120a	01
120b	01
121a	01
121b	01
122	01
123	01
124	11
125	08
126a	26
126b	50
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	01
132	01
133	04
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 939631577 — 25 NJ Ins. Code: 054

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

26 Driver's First Name: BATSHEVA — Initial: - — Last Name: TESSER — 29 Sex: F

27 Number & Street: 113 GOVERNORS RD

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

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

32 Driver's License Number: T28180780062912 — 33 DOB (mm dd yyyy): 12/31/1991 — 34 Expires (mm yy): 02 22

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

36 Number & Street: 113 GOVERNORS RD

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

38 Make: CHRY — 39 Model: PAC — 40 Color: BLK — 41 Year: 2018 — 42 Plate No.: Y52KNJ — 43 State: NJ

44 VIN: 2C4RC1BG4JR354450 — 45 Expires: 10 21

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 ☐ 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.: 5129J004837 — 55 NJ Ins. Code: 917

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

56 Driver's First Name: RIVKA — Initial: L — Last Name: GREENSPAN — 59 Sex: F

57 Number & Street: 2 PONDEROSA DR

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

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

62 Driver's License Number: G73126587357952 — 63 DOB (mm dd yyyy): 07/13/1995 — 64 Expires (mm yy): 07 22

65 Owner's First Name: MEIR — Initial: T — Last Name: GREENSPAN — ☐ Same As Driver

66 Number & Street: 17 HAMPTON DR

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

68 Make: HOND — 69 Model: ODY — 70 Color: SIL — 71 Year: 2014 — 72 Plate No.: N50NPC — 73 State: NJ

74 VIN: 5FNRL5H41EB054631 — 75 Expires: 04 22

76 Vehicle Removed To: HESHEYS 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

THE FRONT LAWN OF 204 POWDERHORN DR

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:3-4	291638			
2	39:4-144	291637			

	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	F	-	-	-	11	11	04	-	BATSHEVA - TESSER - 113 GOVERNORS RD LAKEWOOD NJ 08701
B	02	01	01	05	26	F	-	-	-	11	11	04	-	RIVKA L GREENSPAN - 2 PONDEROSA DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

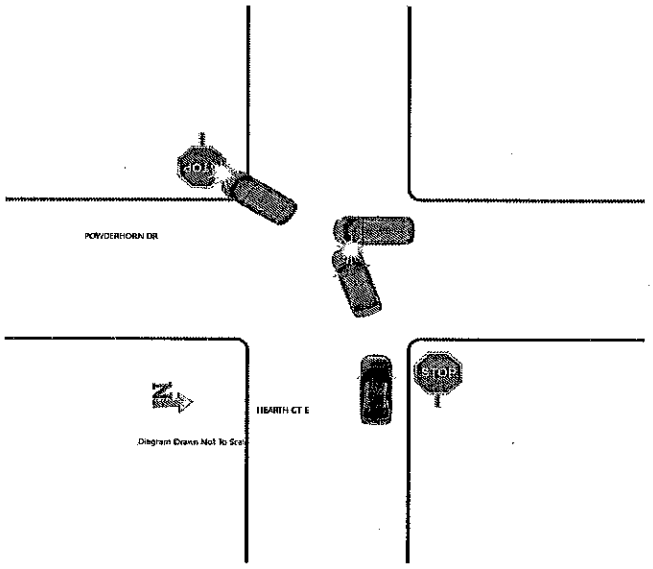
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-004903

(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 stated she was Southbound on Powderhorn DR. She stated as she was approaching the intersection of Hearth CT E vehicle 2 crashed into the side of her vehicle. She stated the impact then caused her to crash into the stop sign knocking it over where her vehicle then came to a rest.

Driver of vehicle 2 stated she was Westbound on Hearth CT E and was approaching the intersection of Powderhorn DR. She stated as she went forward she crashed into the side of vehicle 1. She stated she does not think she stopped at the stop sign prior to crashing into vehicle 1.

The front lawn of 204 Powderhorn DR was damage with tire marks due to the crash.

In my investigation I find vehicle 2 at fault for this crash for failure to yield to vehicle and failure to stop at a stop sign due to vehicle 2 having a stop sign.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SORIANO J	352	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	01
99	07
100a	01
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	04
117	04

1 Case Number: 22-004912

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

3 Station/Precinct:

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1537

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: FINCHLEY BLVD — Road Name

☐ At Intersection With

☒ Feet ☐ Miles: 300 (14 15)

☐ N ☒ E ☐ S ☐ W of: SHAYAS RD — Dir

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: 40.06041

22 Longitude: -74.22135

118a	14
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	12
123	01
124	11
125	11
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	03
132	03
133	03
134	03

Vehicle 1

23 Veh #: 1

24 Policy No.: 326171445

25 NJ Ins. Code: 148

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

26 Driver's First Name: CHESKY — Initial: - — Last Name: DEMBINSKY — 29 Sex: M

27 Number & Street: 6210 19TH AVE

28 City: BROOKLYN — State: NY — Zip: 11204

30 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: - — 31 State: NY

32 Driver's License Number: 326171445 — 33 DOB (mm dd yyyy): 12/16/1993 — 34 Expires (mm yy): 12 26

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

36 Number & Street: 6210 19TH AVE

37 City: BROOKLYN — State: NY — Zip: 11204

38 Make: VOLK — 39 Model: JET - JE — 40 Color: BLK — 41 Year: 2007 — 42 Plate No.: K65PBB — 43 State: NJ

44 VIN: 3VWEG71K07M133341 — 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.: 939836533

55 NJ Ins. Code: 054

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

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

57 Number & Street: 117 CLAIRMONT CT

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

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

62 Driver's License Number: S63545596655812 — 63 DOB (mm dd yyyy): 05/09/1981 — 64 Expires (mm yy): 05 25

65 Owner's ☐ Same As Driver — First Name: YISROEL — Initial: M — Last Name: SOMMERS

66 Number & Street: 117 CLAIRMONT CT

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

68 Make: TOYT — 69 Model: SIE — 70 Color: 3 — 71 Year: 2012 — 72 Plate No.: M26DFA — 73 State: NJ

74 VIN: 5TDKK3DC4CS181310 — 75 Expires: 05 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	28	M	-	-	-	11	04	-	-	CHESKY - DEMBINSKY - 6210 19TH AVE BROOKLYN NY 11204
B	02	01	01	05	40	F	-	-	-	11	04	-	-	MIRYAM F SOMMERS - 117 CLAIRMONT CT LAKEWOOD NJ 08701
C	02	05	01	05	5	M	-	-	-	07	07	-	-	SHMUEL - SOMMERS - 117 CLAIRMONT CT LAKEWOOD NJ 08701
D	02	04	01	05	5	M	-	-	-	07	07	-	-	SHOLMO TILLIM 113 CLAIRMONT CT LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

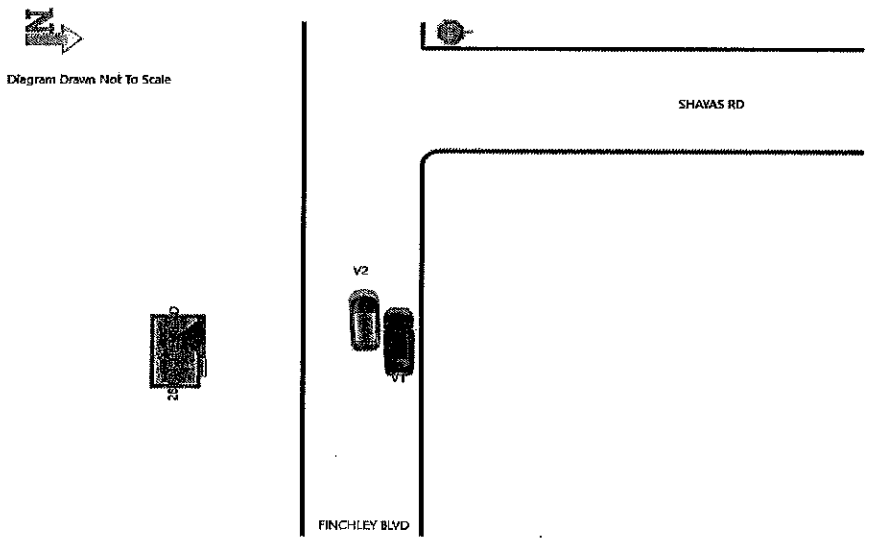
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004912

(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

Upon arriving to the scene of the crash the driver of vehicle and the occupants of vehicle #2 were not on scene. The vehicle was left on the side of the roadway and I was advised by the registered owner that his wife was driving and was now home at their residence. She ultimately responded back to the scene after being advised to do so.

The driver of vehicle #1 reported that he was starting from being parked and when he went to enter the roadway he did not see vehicle #2 and the two collided.

The driver of vehicle #2 reported that she was traveling West on Finchley Blvd. when her vehicle was struck by vehicle #1.

There were no injuries reported at the scene. Vehicle #1 had pre-existing damage to the front driver side fender as there was a fist sized rot hole in the fender. As a result of this crash the front of the fender was now scratched and dented and there were scratches to the front driver side of the bumper. Vehicle #2 had pre-existing damage to the front passenger side door and there was evidence of a dent and rusting on the lower portion of the front passenger side door. As a result of this crash both the front and rear passenger side doors were scratched and dented.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
KOWALESKI S	319	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	01
99	07
100a	01
100b	04
101	02
102	01
103	01
104	1
105	12
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	02
117	-

1 Case Number: 22-004926

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

3 Station/Precinct: --

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1621

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: 14TH ST — Road Name — Dir: -

☐ At Intersection With

☒ Feet ☐ Miles: 200 (14) (15) (16)

☐ N ☒ E ☐ S ☐ W of: TANGLEWOOD LN

11 Speed Limit: 30

12 Route No. — Suffix — 13 Milepost

18 Speed Limit: 25

17 Cross Road Name

19 Ramp ☐ To ☐ From:

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.103570

22 Longitude: -74.230000

118a	25
118b	-
119a	-
119b	-
120a	01
120b	01
121a	-
121b	-
122	01
123	-
124	04
125	-
126a	24
126b	-
126c	-
126d	-
126e	24
127a	-
127b	-
127c	-
127d	-
127e	24
128	24
129	08
130	09
131	-
132	-
133	02
134	-

23 Veh #: 1 — 24 Policy No.: 909 952616 0329 — 25 NJ Ins. Code: 054

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

26 Driver's First Name: LIBBY — Initial: - — Last Name: HALPERN — 29 Sex: F

27 Number & Street: 1333 14TH ST

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

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

32 Driver's License Number: H03164670062962 — 33 DOB (mm dd yyyy): 12/11/1996 — 34 Expires (mm yy): 12 25

35 Owner's First Name: JOSEPH — Initial: S — Last Name: HALPERN

☐ Same As Driver

36 Number & Street: 1333 14TH ST

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

38 Make: TOYT — 39 Model: AVA - AV — 40 Color: GRN — 41 Year: 2011 — 42 Plate No.: Z83AFK — 43 State: NJ

44 VIN: 4T1BK3DB3BU396352 — 45 Expires: 10 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

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 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	1	01	01	05	25	F	-	-	-	11	04	-	-	LIBBY - HALPERN - 1333 14TH ST LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

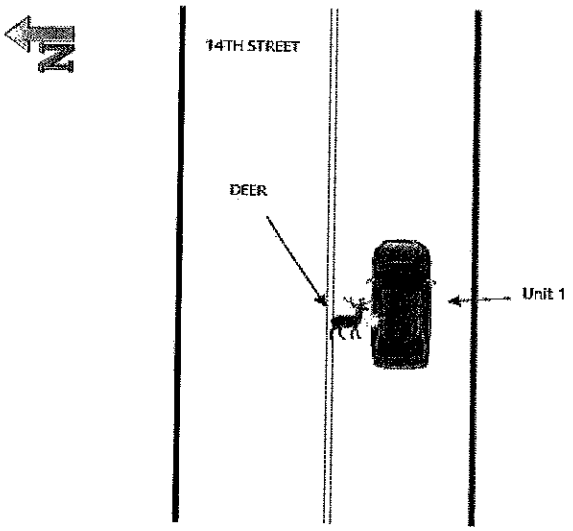
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: -- Case No: 22-004926

(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 SHE WAS TRAVELING EAST ON 14TH STREET, WHEN A DEER RAN ACROSS THE ROAD CAUSING THE DEER TO STRIKE VEHICLE #1 ON THE LEFT SIDE. VEHICLE #1 SUSTAINED DAMAGE ON THE REAR LEFT SIDE PASSENGER DOOR AND THE REAR LEFT SIDE. NO INJURIES REPORTED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RIVERA F	294	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	05
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	02
117	02

1 Case Number: 22-004930

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

3 Station/Precinct:

10 Crash Occurred On: CEDARBRIDGE AVE — Road Name — Dir — 12 Route No. — Suffix — 13 Milepost

☐ At Intersection With

☒ Feet ☐ Miles — 14 — 15 — 16

☐ N ☐ E ☐ S ☒ W of: MARTIN LUTHER KING DR

17 Cross Road Name

19 Ramp ☐ To ☐ From:

20 Route/Name

☐ NB ☐ EB ☐ SB ☐ WB

11 Speed Limit: 40

18 Speed Limit: 25

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1627

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

21 Latitude: 40.08626

22 Longitude: -74.21036

118a	02
118b	-
119a	25
119b	-
120a	01
120b	01
121a	01
121b	01
122	08
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	02

Vehicle 1

23 Veh #: 1

24 Policy No.: 939 746 760

25 NJ Ins. Code: 054

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

26 Driver's First Name: ALVARO — Initial: - — Last Name: MORALES-LUNA - — 29 Sex: M

27 Number & Street: 121 MADISON AVE

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

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

32 Driver's License Number: M65540340002022 — 33 DOB (mm dd yyyy): 02/16/2002 — 34 Expires (mm yy): 02 23

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

36 Number & Street: 13 SAINT NICHOALS AVE

37 City: WESTWOOD — State: NJ — Zip: 07675

38 Make: TOYT — 39 Model: CAM — 40 Color: WHI — 41 Year: 2021 — 42 Plate No.: A37NYV — 43 State: NJ

44 VIN: 4T1G11BKXMU038720 — 45 Expires: 07 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.: TCA00001013905

55 NJ Ins. Code: 632

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

56 Driver's First Name: KENNETH — Initial: - — Last Name: CASTELLANO - — 59 Sex: M

57 Number & Street: 3320 LONG POINT DRIVE

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

60 Eyes: 4 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: C07744310003514 — 63 DOB (mm dd yyyy): 03/28/1951 — 64 Expires (mm yy): 03 22

65 Owner's ☐ Same As Driver — First Name: KENNETH — Initial: - — Last Name: CASTELLANO -

66 Number & Street: 3320 LONG POINT DRIVE

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

68 Make: CHEV — 69 Model: COL — 70 Color: RD — 71 Year: 2016 — 72 Plate No.: MKC29 — 73 State: NJ

74 VIN: 1GCGTDE31G1158304 — 75 Expires: 03 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	1	01	01	05	19	M	-	-	-	11	04	-	-	ALVARO - MORALES-LUNA - 121 MADISON AVE LAKEWOOD NJ 08701
B	2	01	01	05	70	M	-	-	-	11	04	-	-	KENNETH - CASTELLANO - 3320 LONG POINT DRIV TOMS RIVER NJ 08753
C														
D														

New Jersey Police Crash Investigation Report

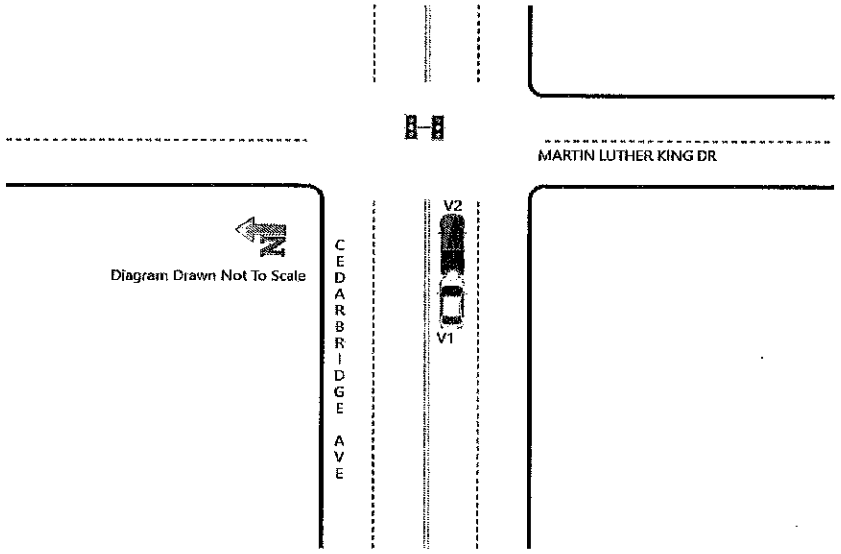
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004930

(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

Driver 1 stated that while stopped in traffic he lost his concentration, took his foot off the brake and crashed into the rear of Vehicle 2.

Driver 2 stated that he was stopped at a red traffic signal on Cedarbridge Ave when his vehicle was suddenly struck in the rear.

Vehicle 1 sustained damage to the front bumper and license plate consisting of minor dents and the license plate being dented.

Vehicle 2 sustained damage to the rear bumper consisting of minor dents and paint transfer.

Due to driver statements and my observations I determined that Driver 1 was not paying attention and crashed into the rear of Vehicle 2.

There were no injuries reported on scene. End of report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SCHAAL, K	376	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-004939
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	07	3 Station/Precinct	-
99	09	4 Date of Crash (mm dd yy)	12/31/21
100a	01	5 Day Of Week	FRIDAY
		6 Time (use 2400 hrs)	2100
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	--
		10 Crash Occurred On:	9 LISA ROBYN CIR
		Road Name	
		Dir	-
		11 Speed Limit	15
		12 Route No.	-
		Suffix	-
		13 Milepost	-
		18 Speed Limit	-
		☐ At Intersection With	
		☐ Feet ☐ Miles (14 15 16)	-
		☐ N ☐ E ☐ S ☐ W of:	-
		19 Ramp ☐ To ☐ From:	-
		17 Cross Road Name	-
		☐ NB ☐ EB ☐ SB ☐ WB	
		20 Route/Name	
		21 Latitude	40.053180
		22 Longitude	-74.197430
118a	02		
118b	-		
119a	25		
119b	-		
120a	00		
120b	-		
121a	-		
121b	-		
122	13		
123	10		
124	04		
125	04		
126a	28		
126b	-		
126c	-		
126d	-		
126e	28		
127a	26		
127b	-		
127c	-		
127d	-		
127e	26		
128	28		
129	07		
130	17		
131	11		
132	11		
133	01		
134	03		

100b	04	23 Veh #	1
101	02	24 Policy No.	110 8112-B05-30
		25 NJ Ins. Code	962
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
102	01	26 Driver's First Name	FALON
		Initial	L
		Last Name	DOMBROWSKI
		29 Sex	F
103	01	27 Number & Street	10 CEDAR AVE
104	2	28 City	BORDENTOWN
		State	NJ
		Zip	08505
		30 Eyes	04
		DL Class	D
		Restrictions	-
		Endorsements	-
		31 State	NJ
105	06	32 Driver's License Number	D63322597358994
		33 DOB (mm dd yyyy)	08/10/1999
		34 Expires (mm yy)	08 24
106	-	35 Owner's First Name	FALON
		Initial	L
		Last Name	DOMBROWSKI
		☐ Same As Driver	
107	-	36 Number & Street	10 CEDAR AVE
108	05	37 City	BORDENTOWN
		State	NJ
		Zip	08505
109	01	38 Make	GMC
		39 Model	SIE
		40 Color	SIL
		41 Year	2011
		42 Plate No.	V70LFB
		43 State	NJ
110	01	44 VIN	1GTR2VE39BZ166856
		45 Expires	04 20
111	01	46 Vehicle Removed To	-
112	-	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113	-	47 Authority	☐ Owner ☒ Driver ☐ Police
114	-	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	-		Type: ☐ Breath ☐ Blood ☐ Urine
			Results: 0.- % ☐ Pending
		49 Hazardous Material	☒ None ☐ On Board ☐ Spill
			Hazard Class / Placard No.
116	03	50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
117	03	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 #	2		
54 Policy No.	4612-33-05-16		
55 NJ Ins. Code	148		
☒ 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	JEFFREY		
Initial	M		
Last Name	DEITZ		
☐ Same As Driver			
66 Number & Street	9 LISA ROBYN CIRCLE APT 210		
67 City	LAKEWOOD		
State	NJ		
Zip	08701		
68 Make	CHEV		
69 Model	CAM		
70 Color	YEL		
71 Year	2013		
72 Plate No.	NGD204		
73 State	NJ		
74 VIN	2G1FK1EJ0D9186333		
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 ☐ 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	39:3-4	A291308			
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	F	-	-	-	11	04	-	-	FALON L DOMBROWSKI - 10 CEDAR AVE BORDENTOWN NJ 08505
B														
C														
D														

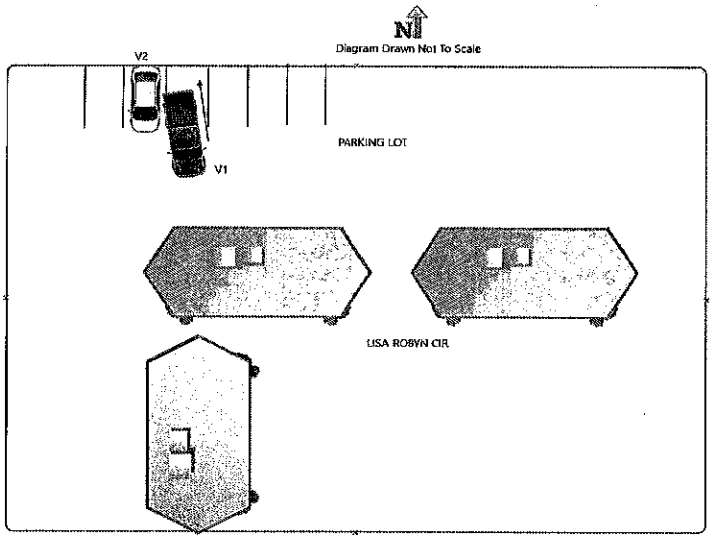
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-004939

(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

V2 was parked in the parking lot of Andrew's Corner, 9 Lisa Robyn Cir. The owner had not driven V2 in a few weeks. He drove V2 on January 19th, 2022. While operating V2, he noticed the alignment was off. He noticed damage to the front bumper, driver fender, and front driver wheel. When he returned home, two neighbors approached him to advise him of an accident that occurred with V2.

On December 31st, 2021 at approximately 2100 hours Joseph Glinski and Brandon McNamara were outside conversing. They observed V1 described to be a large silver pickup truck, possibly a Chevrolet Silverado, attempting to either park or leave a parking space. V2 was parked next to where V1 was parking or leaving. They heard a what sounded like a tire rubbing on a fender and observed V1 exit that parking space. They observed damage to V2. They were unable to contact the owner until this date.

I was able to locate V1 in the parking lot a few spots east of where the crash occurred. The owner of V1 responded to the parking lot. She advised that she came to Lisa Robyn Cir on December 31st, 2021 to visit her girlfriend. While parking she heard her tire rubbing against the fender which was normal. She was unaware that V1 struck V2. She cooperated fully with the investigation. V1's exhaust pipe extended further than the rear passenger tire and was approximately the same height of the damage on V2.

Based on my investigation, V1 caused the crash by striking V2 while V2 was legally parked.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	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	02
100a	01
100b	04
101	02
102	01
103	01
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: 22-004957

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

3 Station/Precinct: -

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1850

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

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

☐ At Intersection With

☒ Feet / ☐ Miles: 30 (14, 15)

☐ N ☐ E ☒ S ☐ W of: HADASSAH LN

11 Speed Limit: 40

12 Route No.: 0009 — Suffix: - — 13 Milepost: -

18 Speed Limit: 15

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

21 Latitude: 40.067770

22 Longitude: -74.218410

118a	02
118b	-
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	12
130	12
131	06
132	06
133	02
134	02

Vehicle 1

23 Veh #: 1

24 Policy No.: F601006-0

25 NJ Ins. Code: 426

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

26 Driver's First Name: ARTHUR — Initial: R — Last Name: STAHL

29 Sex: M

27 Number & Street: 81 BRANDYWINE CT

28 City: BRICK — State: NJ — Zip: 08724

30 Eyes: 06 — DL Class: D — Restrictions: - — Endorsements: -

31 State: NJ

32 Driver's License Number: S81000617907686

33 DOB (mm dd yyyy): 07/29/1968

34 Expires (mm yy): 07 25

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

36 Number & Street: 81 BRANDYWINE CT

37 City: BRICK — State: NJ — Zip: 08724

38 Make: MAZD — 39 Model: CX5 — 40 Color: BLK — 41 Year: 2020 — 42 Plate No.: R45MMW — 43 State: NJ

44 VIN: JM3KFBBM4L1720894

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 ☐ 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.: NJSS207765584

55 NJ Ins. Code: 217

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

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

59 Sex: M

57 Number & Street: 1969 RIDGE HILL DRIVE

58 City: TOMS RIVER — State: NJ — Zip: 08755

60 Eyes: 02 — DL Class: D — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: R90234100011572

63 DOB (mm dd yyyy): 11/13/1957

64 Expires (mm yy): 11 25

65 Owner's ☐ Same As Driver — First Name: ANTONIETT — Initial: - — Last Name: RUBERTO

66 Number & Street: 1969 RIDGE HILL DRIVE

67 City: TOMS RIVER — State: NJ — Zip: 08755

68 Make: TOYT — 69 Model: 4RU — 70 Color: GRY — 71 Year: 2019 — 72 Plate No.: K89KZK — 73 State: NJ

74 VIN: JTEBU5JRXK5654979

75 Expires: 02 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	53	M	-	-	-	11	04	-	-	ARTHUR R STAHL - 81 BRANDYWINE CT BRICK NJ 08724
B	02	01	01	05	64	M	-	-	-	11	04	-	-	JOSEPH - RUBERTO - 1969 RIDGE HILL DRIVE TOMS RIVER NJ 08755
C	02	01	01	05	63	F	-	-	-	11	04	-	-	ANTONIETT - RUBERTO - 1969 RIDGE HILL DRIVE TOMS RIVER NJ 08755
D														

New Jersey Police Crash Investigation Report

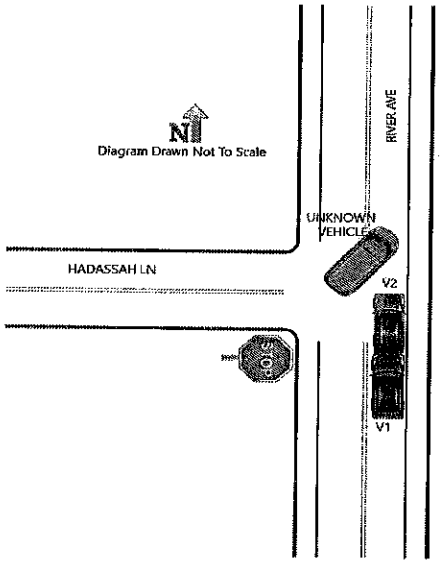
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004957

(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 north on River Ave in stop and go traffic. He observed V2 in front of him stop short. He attempted to stop but was unable to do so prior to colliding with V2.

The driver of V2 stated he was traveling north on River Ave in stop and go traffic. He observed a vehicle turn left from Hadassah Ln in front of him causing V2 to stop short. When V2 stopped short, V1 collided with V1 from the rear.

Based on my investigation, V1 and the unknown vehicle that turned from Hadassah Ln caused the crash.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-004380
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	07	3 Station/Precinct	-
99	02	4 Date of Crash (mm dd yy)	01/17/22
100a	01	5 Day Of Week	MONDAY
		6 Time (use 2400 hrs)	1746
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	1
100b	04	10 Crash Occurred On:	MAIN STREET
		Road Name	
		Dir	-
		11 Speed Limit	40
		12 Route No.	0088
		Suffix	-
		13 Milepost	-
		☐ At Intersection With	
		☒ Feet	15
		☐ Miles	
		☐ N ☒ E ☐ S ☐ W	
		of:	MADISON AVENUE
		14	
		15	
		16	
		17 Cross Road Name	-
		18 Speed Limit	40
		19 Ramp ☐ To ☐ From:	
		20 Route/Name	
		21 Latitude	-
		22 Longitude	-
		☐ NB ☐ EB ☐ SB ☐ WB	
118a	09		
118b	-		
119a	25		
119b	-		
120a	00		
120b	-		
121a	01		
121b	-		
122	01		
123	07		
124	99		
125	99		
126a	26		
126b	26		
126c	-		
126d	-		
126e	26		
127a	26		
127b	26		
127c	-		
127d	-		
127e	26		
128	26		
129	12		
130	12		
131	06		
132	06		
133	00		
134	02		

100a	23 Veh #	24 Policy No.	25 NJ Ins. Code	53 Veh #	54 Policy No.	55 NJ Ins. Code			
01	1	00	-	2	SEE NARRATIVE	-			
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run			☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run					
101	26 Driver's First Name	Initial	Last Name	29 Sex	56 Driver's First Name	Initial	Last Name	59 Sex	
02	00	-	00 -	-	SHOSHANA	R	GREENSPAN -	F	
102	27 Number & Street				57 Number & Street				
01	00				113 GRASMERE RD				
103	28 City		State	Zip	58 City		State	Zip	
01	00		-	00	CYNWYD		PA	19004	
104	30 Eyes	DL Class	Restrictions	Endorsements	31 State	60 Eyes	DL Class	Restrictions	Endorsements	61 State
2	00	00	00	00	-	05	-	-	-	PA
105	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)		
01	00	00	00 00		32947083	05/08/2000	05 22		
106	35 Owner's	First Name	Initial	Last Name	65 Owner's	First Name	Initial	Last Name	
-	☐ Same As Driver	GUILLERMO	-	ALVAREZMORALES -	☐ Same As Driver	URI	Y	GREENSPAN -	
107	36 Number & Street				66 Number & Street				
-	15 PEARL ST				113 GRASMERE RD				
108	37 City		State	Zip	67 City		State	Zip	
01	LAKEWOOD		NJ	08701	CYNWYD		PA	19004	
109	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
01	DODG	CAR	BGE	2008	W62MSE	NJ	TOYT	CAM	BLU	2017	GBD1905	PA
110	44 VIN	45 Expires			74 VIN	75 Expires			
01	2D8HN54X28R145486	08 22			4T1BF1FK0HU667219	12 22			
111	46 Vehicle Removed To				76 Vehicle Removed To				
00	00				-				
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded				☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded				
113	47 Authority				77 Authority				
-	☐ Owner ☒ Driver ☐ Police				☐ Owner ☒ Driver ☐ Police				
114	48 Alcohol/Drug Test			49 Hazardous Material	78 Alcohol/Drug Test			79 Hazardous Material	
-	Given: ☒ No ☐ Yes ☐ Refused			☒ None ☐ On Board ☐ Spill	Given: ☒ No ☐ Yes ☐ Refused			☒ None ☐ On Board ☐ Spill	
115	Type: ☐ Breath ☐ Blood ☐ Urine			Hazard Class / Placard No.	Type: ☐ Breath ☐ Blood ☐ Urine			Hazard Class / Placard No.	
-	Results: 0. - % ☐ Pending				Results: 0. - % ☐ Pending				
116	50 Carrier No.			51 GVWR/GCWR	80 Carrier No.			81 GVWR/GCWR	
04	☐ USDOT 00 ☐ None			☒ Weight <= 10,000 lbs	☐ USDOT ☒ None			☒ Weight <= 10,000 lbs	
117	☐ MC/MX 00			☐ Weight 10,001-26,000 lbs	☐ MC/MX			☐ Weight 10,001-26,000 lbs	
04				☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs	
	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity				
	00				-				
	Number & Street				Number & Street				
	00				-				
	City	State	Zip		City	State	Zip		
	00	-	00		-	-	-		

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.
-		-	-		-

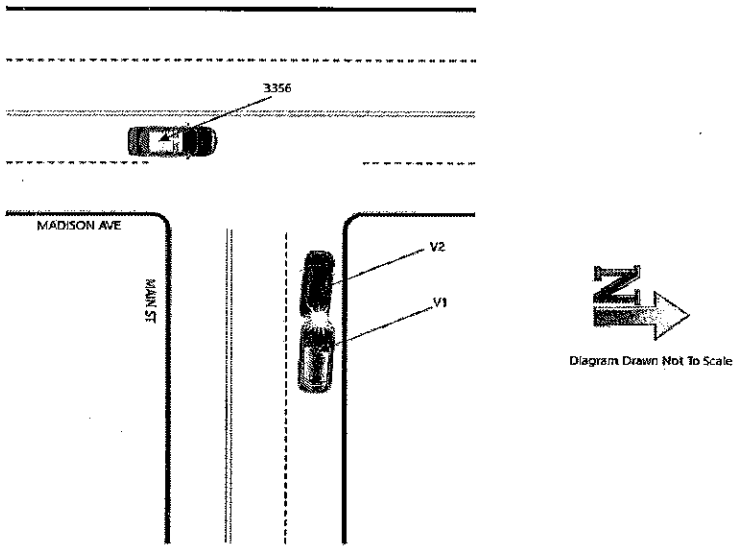
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	00	U	00	00	00	00	00	-	-	00 - 00 - 00 00 - 00 - -
B	02	01	01	03	21	F	01	08	01	11	04	-	-	SHOSHANA R GREENSPAN - 113 GRASMERE RD CYNWYD PA 19004 - -
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: - Case No: 22-004380

(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 she was traveling west on Main Street, in the right turn lane prior to Madison Avenue. The driver stated a Lakewood Police Officer was traveling north on Madison Avenue with their overhead lights and audible device activated. The driver stated, she then applied her brakes and did not enter the intersection, when she was rear ended by V1. The driver described V1 as an older model, gold in color, Dodge Caravan which was bearing NJ Registration W62MSE. The driver described the driver of V1 has a middle aged (40-50) Hispanic male. The driver stated the male got out of his vehicle, asked if she was okay and then left. Damage was a minor scratch to the rear of V2. The driver had a complaint of head pain, was checked out on scene by Hatzolah EMS but refused further medical attention.

I observed MVR footage from Ptl. Joseph Mandelbaum's patrol vehicle #3356. I observed Ptl. Mandelbaum #420 traveling north on Madison Avenue. On Main Street just east of Madison Avenue, I observed a beige colored minivan (V1) rear end a black Toyota sedan (V2). The Toyota goes forward and then is rear ended again by V1. The registration given by the driver of V2 comes back on a 2008 Dodge Caravan, beige in color. The Registered Owner for V1's residence was checked for V1, yielding negative results. An attempt to contact the Registered Owner in person and telephonically also yielded negative results. It is unknown who was driving V1 at this time.

Insurance for V2:

GEICO GENERAL INSURANCE CO
ONE GEICO BLVD, FREDERICKSBURG, VA. 22412.
1-800-841-3000
NAIC CODE: 35882 POLICY: 4153-30-24-11
EFFECTIVE: 08-01-2021, EXPIRES: 02-01-2022

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MEYER JR R	401	KCM	335	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-004376
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	06	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)	1732
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	1
		10 Crash Occurred On:	E COUNTY LINE RD
		☒ At Intersection With	Road Name
		☐ Feet ☐ Miles	☐ N ☐ E ☐ S ☐ W
		of:	SQUANKUM RD
		11 Speed Limit	35
		12 Route No.	0526
		Suffix	
		13 Milepost	
		16 Speed Limit	25
		17 Cross Road Name	
		19 Ramp ☐ To ☐ From:	
		☐ NB ☐ EB ☐ SB ☐ WB	
		20 Route/Name	
		21 Latitude	40.10520
		22 Longitude	-74.20519
118a	25		
118b	-		
119a	89		
119b	78		
120a	01		
120b	01		
121a	01		
121b	01		
122	01		
123	42		
124	04		
125	04		
126a	22		
126b	-		
126c	-		
126d	-		
126e	22		
127a	26		
127b	-		
127c	-		
127d	-		
127e	26		
128	22		
129	12		
130	12		
131	-		
132	-		
133	03		
134	-		

Vehicle 1

100b	04	23 Veh #	1
101	02	24 Policy No.	SELF INSURED
		25 NJ Ins. Code	-
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
102	01	26 Driver's First Name	ARYEH
		Initial	L
		Last Name	GIFTER
		29 Sex	M
103	01	27 Number & Street	145 E 9TH ST
104	1	28 City	LAKEWOOD
		State	NJ
		Zip	08701
		30 Eyes	2
		DL Class	D
		Restrictions	-
		Endorsements	-
		31 State	NJ
105	13	32 Driver's License Number	G42280627305922
		33 DOB (mm dd yyyy)	05/15/1992
		34 Expires (mm yy)	03 22
106	-	35 Owner's First Name	☐ Same As Driver LLC
		Initial	-
		Last Name	EAN HOLDINGS
			-
107	-	36 Number & Street	14002 EAST 21ST ST STE 1500
108	04	37 City	TULSA
		State	OK
		Zip	74134
109	-	38 Make	JEEP
		39 Model	GRA
		40 Color	GRY
		41 Year	2020
		42 Plate No.	F98MJX
		43 State	NJ
110	01	44 VIN	1C4RJFBG4LC322449
		45 Expires	06 22
111	-	46 Vehicle Removed To	ACME TOWING
112	-	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☒ Towed Impounded	
113	-	47 Authority	☐ Owner ☒ Driver ☐ Police
114	-	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	-		Type: ☐ Breath ☐ Blood ☐ Urine
116	04		Results: 0. - % ☐ Pending
		49 Hazardous Material	☒ None ☐ On Board ☐ Spill
			Hazard Class / Placard No.
117	01	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 P1

53 Veh #	P1		
54 Policy No.	-		
55 NJ Ins. Code	-		
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run			
56 Driver's First Name	GITTY		
Initial	-		
Last Name	RUBIN		
59 Sex	F		
57 Number & Street	5 WHISPERING PINES LN		
58 City	LAKEWOOD		
State	NJ		
Zip	08701		
60 Eyes	-		
DL Class	-		
Restrictions	-		
Endorsements	-		
61 State	-		
62 Driver's License Number	-		
63 DOB (mm dd yyyy)	08/15/2014		
64 Expires (mm yy)	- -		
65 Owner's First Name	☐ Same As Driver		
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	1	01	01	05	29	M	-	-	-	11	04	-	-	ARYEH L GIFTER - 145 E 9TH ST LAKEWOOD NJ 08701
B	P1	-	-	02	7	F	01	07	02	-	-	-	6303	GITTY - RUBIN - 5 WHISPERING PINES LI LAKEWOOD NJ 08701
C														
D														

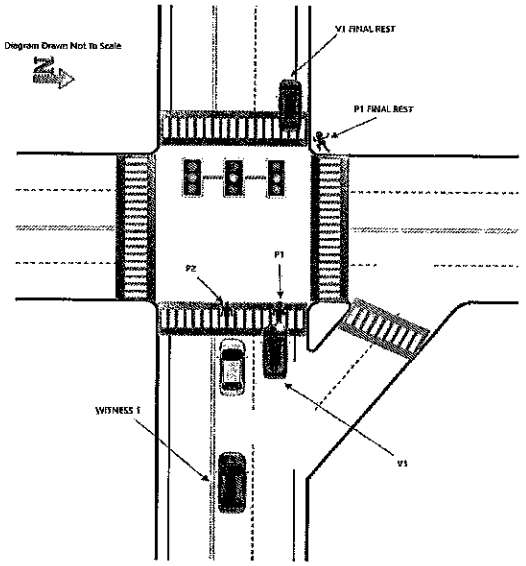
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004376

(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

D1 stated that he was driving West on E County Line Rd towards Squankum Rd. He stated the traffic signal was green when suddenly a girl just came out in front of his vehicle and he struck P1 in the crosswalk in the intersection of E County Line Rd & Squankum Rd. D1 than pulled to the side of the road, D1 was visibly shaken up by the incident and was checked by EMS but denied any medical treatment.

A Witness stated he was in the left lane on E County Line Rd when he saw 2 girls running on the crosswalk and heard a loud bang. W1 stated he did not see the impact but once he heard the bang something didn't seem right. He than pulled over to the side and dialed "911". W1 stated he doesn't really remember if the light was green or not but he believes it was. We were able to obtain video footage from Wawa and burn it on a disc. Footage matches both drivers and witness story.

P1 was walking with her older sister (P2) P2 stated they were crossing on the cross walk, when she realized a vehicle was coming towards the intersection, she yelled for P1 to stop but she continued to run towards the center island as was struck by V1.

P1 was transported to Jersey Shore Medical Center by Hatzolah. Ptl. Guzman #301 was advised by medical staff that P1 suffered a Skull fracture, right femur fracture and a left side laceration to the forehead. Gitty's injuries required emergency surgery. As of 01/18/2022 P1 was in stable condition.

State of New Jersey Certificate No: 79 Enterprise Rent-A-Car Company, Enterprise Leasing Company of Philadelphia and EAN Holding LLC, has qualified as a self-insurer pursuant to chapter 428 of laws of 987 (N.J.S.A. 39:6-52 et seq.).

D1 PERSONAL CAR INSURANCE WITH RENTAL COMPANY: ALLSTATE 939-943-320 COMPANY CODE: 054

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MERCADO D	370	SGT. FRANK WORK	217	☐ 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	1
105	13
106	-
107	-
108	01
109	11
110	00
111	01
112	00
113	-
114	00
115	-
116	03
117	02

1 Case Number: 22-004423

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): 2139

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 1

10 Crash Occurred On: PINE ST — 11 Speed Limit: 40 — 12 Route No.: - — Suffix: - — 13 Milepost: -

☒ At Intersection With — Road Name — Dir

☐ Feet ☐ N ☐ E of: WASHINGTON AVE — 18 Speed Limit: 35

☐ Miles ☐ S ☐ W — 14 — 15 — 16

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

20 Route/Name

21 Latitude: 40.075370 — 22 Longitude: -74.206250

118a	04
118b	02
119a	85
119b	-
120a	00
120b	00
121a	01
121b	-
122	03
123	01
124	04
125	04
126a	22
126b	-
126c	-
126d	-
126e	22
127a	26
127b	-
127c	-
127d	-
127e	26
128	22
129	04
130	00
131	12
132	12
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 ☐ 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 #: P1 — 54 Policy No. — 55 NJ Ins. Code

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

56 Driver's First Name: ARON — Initial: - — Last Name: MUSHEYEV — 59 Sex: M

57 Number & Street: 770 EMPIRE AVE

58 City: FAR ROCKAWAY — State: NY — Zip: 11691

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

62 Driver's License Number — 63 DOB (mm dd yyyy): 12/25/1999 — 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	01	01	01	05			00	00	00	00	00	-	-	
B	P1	01	02	03	22	M	08	08	02	01	01	-	6502	ARON - MUSHEYEV - 770 EMPIRE AVE FAR ROCKAWAY NY 11691
C														
D														

New Jersey Police Crash Investigation Report

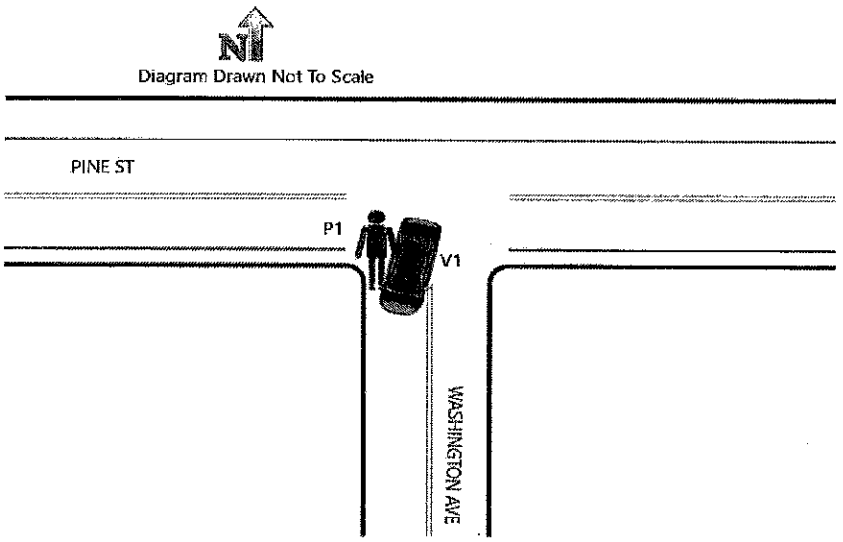
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004423

(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

P1 stated he was traveling east on Pine St on an electric scooter. While crossing the intersection of Washington Ave, V1 turned left from Pine St onto Washington Ave. P1 struck the side of V1 causing P1 to fall to the ground. V1 pulled over momentarily then fled the scene.

V1 was described to be a dark colored "90s" style sedan.

Based on my investigation, V1 caused the crash by not yielding to the right of way of P1.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	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	02
100a	01
100b	04
101	02
102	01
103	01
104	3
105	01
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	01
117	01

1 Case Number: 22-004618

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

3 Station/Precinct:

10 Crash Occurred On: MADISON AVE — Road Name — Dir

☐ At Intersection With

☒ Feet ☒ N ☐ E of: 2ND ST

25 ☐ Miles ☐ S ☐ W

14 15 16

19 Ramp ☐ To ☐ From:

17 Cross Road Name

☐ NB ☐ EB ☐ SB ☐ WB

20 Route/Name

11 Speed Limit: 35

12 Route No. — Suffix — 13 Milepost

18 Speed Limit: 25

4 Date of Crash (mm dd yy): 01/18/22

5 Day Of Week: TUESDAY

6 Time (use 2400 hrs): 1507

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

21 Latitude: 40.09190

22 Longitude: -74.21666

118a	25
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	07
123	07
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	26
127c	-
127d	-
127e	26
128	26
129	06
130	17
131	06
132	06
133	04
134	01

Vehicle 1

23 Veh #: 1

24 Policy No.: 2007042645

25 NJ Ins. Code: 233

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

26 Driver's First Name: HANNAH — Initial: P — Last Name: STEFANSKY — 29 Sex: F

27 Number & Street: 626 14TH ST

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

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

31 State: NJ

32 Driver's License Number: S81813127756022

33 DOB (mm dd yyyy): 06/30/2002

34 Expires (mm yy): 06 24

35 Owner's First Name: ISAAC — Initial: M — Last Name: STEFANSKY

☐ Same As Driver

36 Number & Street: 626 14TH ST

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

38 Make: HYUN — 39 Model: SON — 40 Color: WHI — 41 Year: 2021 — 42 Plate No.: K69NZL — 43 State: NJ

44 VIN: KMHL64JA2MA151492

45 Expires: 06 24

46 Vehicle Removed To: HERSHEY'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 ☐ 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.: 939735624

55 NJ Ins. Code: 054

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

56 Driver's First Name: DEVORA — Initial: - — Last Name: WOHLGELERNTER — 59 Sex: F

57 Number & Street: 5 CEDAR DR

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

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

61 State: NJ

62 Driver's License Number: W61661650058992

63 DOB (mm dd yyyy): 08/12/1999

64 Expires (mm yy): 08 25

65 Owner's First Name: YECHESKEL — Initial: - — Last Name: MARBURGER

☐ Same As Driver

66 Number & Street: 418 7TH ST

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

68 Make: TOYT — 69 Model: CAM — 70 Color: BLK — 71 Year: 2012 — 72 Plate No.: F11MCT — 73 State: NJ

74 VIN: 4T4BF1FK6CR185563

75 Expires: 01 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.
1		-	3		-
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	19	F	-	-	-	11	04	-	-	HANNAH P STEFANSKY - 626 14TH ST LAKEWOOD NJ 08701
B	2	01	01	05	22	F	-	-	-	11	04	-	-	DEVORA - WOHLGELERNTER - 5 CEDAR DR LAKEWOOD NJ 08701
C	2	04	01	05	08M	M	-	-	-	06	06	-	-	YISROEL - WOHLGELERNTER - 5 CEDAR DR LAKEWOOD NJ 08701
D														

PAGE 2 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05		
97	01	1 Case Number	22-004618
98	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
99	02	3 Station/Precinct	
100a	01	4 Date of Crash (mm dd yy)	01/18/22
		5 Day Of Week	TUESDAY
		6 Time (use 2400 hrs)	1507
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	--
10 Crash Occurred On:		MADISON AVE	
		Road Name	
		Dir	
		11 Speed Limit	35
		12 Route No.	
		Suffix	
		13 Milepost	
		18 Speed Limit	25
		☐ At Intersection With	
		☒ Feet ☐ Miles	25
		☒ N ☐ E ☐ S ☐ W	
		of:	2ND ST
		19 Ramp ☐ To ☐ From:	
		17 Cross Road Name	
		20 Route/Name	
		☐ NB ☐ EB ☐ SB ☐ WB	
		21 Latitude	40.09190
		22 Longitude	-74.21666

118a	04		
118b	09		
119a			
119b			
120a	00		
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	00		
131			
132			
133	00		
134			

100b	04	23 Veh #	3
		24 Policy No.	
		25 NJ Ins. Code	
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run	
101	02	26 Driver's First Name / Initial / Last Name	
		29 Sex	
102	01	27 Number & Street	
103	01	28 City / State / Zip	
104	3	30 Eyes / DL Class / Restrictions / Endorsements	
		31 State	
105	01	32 Driver's License Number	
		33 DOB (mm dd yyyy)	
		34 Expires (mm yy)	
106	-	35 Owner's First Name / Initial / Last Name	
		☐ Same As Driver	
107		36 Number & Street	
108	00	37 City / State / Zip	
109		38 Make	
		39 Model	
		40 Color	
		41 Year	
		42 Plate No.	
		43 State	
110	00	44 VIN	
		45 Expires	
111		46 Vehicle Removed To	
112	00	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113		47 Authority	☐ Owner ☒ Driver ☐ Police
114	-	48 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused
115			Type: ☐ Breath ☐ Blood ☐ Urine
116	01		Results: 0. % ☐ Pending
		49 Hazardous Material	☐ None ☐ On Board ☐ Spill
			Hazard Class / Placard No.
117		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	

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 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.
3		-			
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	3	01	01	-		M	00	00	00	00	00	-	-	
B														
C														
D														

New Jersey Police Crash Investigation Report

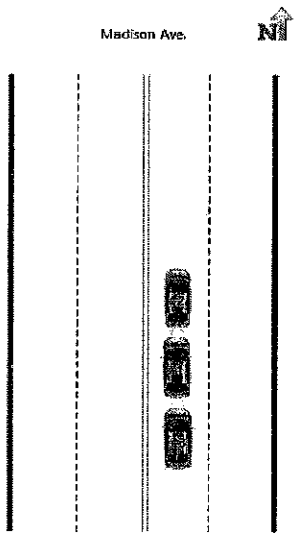
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004618

(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 was traveling north on Madison Ave. and was slowing to a stop for traffic when Vehicle 3 crashed into the rear of Vehicle 2. This crash pushed Vehicle 2 into Vehicle 1. The driver of Vehicle 1 was traveling north on Madison Ave. and was slowing to a stop when Vehicle 2 crashed into the rear of Vehicle 1.

Based off my observations and speaking with both drivers involved, it appeared that Vehicle 3 did not yield / stop for Vehicle 2 and crashed into the rear of Vehicle 2, which caused Vehicle 2 to crash into Vehicle 1. At this time no witnesses have come forward or stayed on scene and no surveillance footage has been located in that location. The only description provided by the drivers involved, is a younger male, possibly in his 20's, and a dark colored unknown make / model vehicle.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
NICKERSON, K	378	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	01
99	09
100a	01
100b	04
101	02
102	01
103	01
104	2
105	06
106	-
107	-
108	03
109	01
110	01
111	01
112	-
113	-
114	03
115	-
116	02
117	03

1 Case Number: 22-004624

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): 1536

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: 12 AMERICA AVE — Road Name — Dir: -

☐ At Intersection With

☐ Feet ☐ Miles (14) ☐ N ☐ E ☐ S ☐ W (15) of: - (16)

11 Speed Limit: 10

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

18 Speed Limit: -

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

20 Route/Name: ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.077120

22 Longitude: -74.187710

118a	02
118b	-
119a	25
119b	-
120a	00
120b	00
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	12
130	12
131	06
132	06
133	02
134	02

Vehicle 1

23 Veh #: 1

24 Policy No.: AOS-221-565438-40 1

25 NJ Ins. Code: 183

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

26 Driver's First Name: SHMUEL — Initial: - — Last Name: FRYDMAN — 29 Sex: M

27 Number & Street: 17 BARNACLE DR

28 City: SPRING VALLEY — State: NY — Zip: 10977

30 Eyes: 04 — DL Class: B — Restrictions: - — Endorsements: -

31 State: NY

32 Driver's License Number: 795244819

33 DOB (mm dd yyyy): 11/22/1964

34 Expires (mm yy): 11 27

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

36 Number & Street: 17 BARNACLE DR

37 City: SPRING VALLEY — State: NY — Zip: 10977

38 Make: MERZ — 39 Model: SPR — 40 Color: WHI — 41 Year: 2021 — 42 Plate No.: KUH2207 — 43 State: NY

44 VIN: W1Y5DCHY0MT045963

45 Expires: 12 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.: 6054-38-68-56

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 ☐ Same As Driver — First Name: JESSICA — Initial: A — Last Name: ABTAN

66 Number & Street: 14 ELBERON TERRACE

67 City: ELBERON — State: NJ — Zip: 07740

68 Make: BMW — 69 Model: Z4 — 70 Color: WHI — 71 Year: 2020 — 72 Plate No.: L47MKX — 73 State: NJ

74 VIN: WBAHF3C01LWW69858

75 Expires: 06 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	57	M	-	-	-	11	04	-	-	SHMUEL - FRYDMAN - 17 BARNACLE DR SPRING VALLEY NY 10977
B														
C														
D														

New Jersey Police Crash Investigation Report

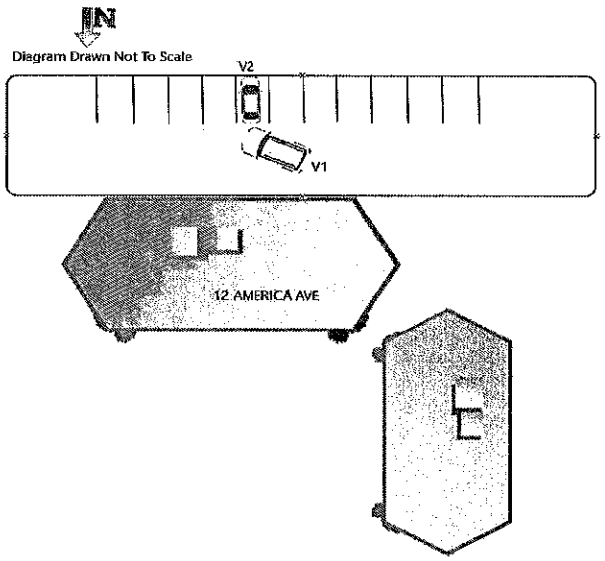
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004624

(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 owner of V2 stated she parked V2 in a parking space behind her place of work at 12 America Ave at approximately 1100 hours. She went out to V2 to retrieve an item at approximately 1500 hours and observed damage to the rear bumper. She contacted the management of the building. They obtained video of V1, white Mercedes sprinter van bearing NY registration KUH2207, strike V2 at 1147 hours.

The owner of V1 was contacted via his local PD. I spoke to him via telephone. He admitted to operating V1 at the time of the crash. He stated V2 was sticking out of the parking space slightly more and V1 struck the rear of V2. He did not believe there was significant damage and left the area. He provided his information and fully cooperated with the investigation.

Based on my investigation, V1 caused the crash by striking V2 while V2 was legally parked.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	E. MIICK	307	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-004650
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	01	3 Station/Precinct	
99	07	4 Date of Crash (mm dd yy)	01/18/22
100a	01	5 Day Of Week	TUESDAY
		6 Time (use 2400 hrs)	1705
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	--
		10 Crash Occurred On:	RIDGE 4TH ST
		Road Name	
		Dir	
		11 Speed Limit	25
		12 Route No.	
		Suffix	
		13 Milepost	
		14	100
		15	☒ Feet ☐ Miles
		16	☒ N ☐ E ☐ S ☐ W
		of:	E. 4TH ST
		17 Cross Road Name	
		18 Speed Limit	25
		19 Ramp	☐ To ☐ From:
		20 Route/Name	
		21 Latitude	40.09464
		22 Longitude	-74.20517
		118a	02
		118b	-
		119a	25
		119b	-
		120a	00
		120b	00
		121a	-
		121b	-
		122	01
		123	10
		124	11
		125	11
		126a	28
		126b	-
		126c	-
		126d	-
		126e	28
		127a	26
		127b	-
		127c	-
		127d	-
		127e	26
		128	26
		129	03
		130	03
		131	10
		132	09
		133	00
		134	03

☐ NB ☐ EB ☐ SB ☐ WB

100b	04	23 Veh #	1
101	02	24 Policy No.	
		25 NJ Ins. Code	
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run	
102	01	26 Driver's First Name / Initial / Last Name	
		29 Sex	
103	01	27 Number & Street	
104	2	28 City / State / Zip	
105	06	30 Eyes / DL Class / Restrictions / Endorsements	
		31 State	
		32 Driver's License Number	
		33 DOB (mm dd yyyy)	
		34 Expires (mm yy)	
106	00	35 Owner's First Name / Initial / Last Name	
		☐ Same As Driver	
107	-	36 Number & Street	
108	00	37 City / State / Zip	
109	01	38 Make	
		39 Model	
		40 Color	
		41 Year	
		42 Plate No.	
		43 State	
110	00	44 VIN	
		45 Expires	
111	01	46 Vehicle Removed To	
112	00	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113	-	47 Authority	☐ Owner ☒ Driver ☐ Police
114	00	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	-		Type: ☐ Breath ☐ Blood ☐ Urine
116	01		Results: 0. - % ☐ Pending
		49 Hazardous Material	☐ None ☐ On Board ☐ Spill
			Hazard Class / Placard No.
117	01	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	

53 Veh #	2	54 Policy No.	939621114
		55 NJ Ins. Code	054
		☒ 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 FRAYDA B RUBINOV -
66 Number & Street			305 CASE RD
67 City / State / Zip			LAKEWOOD NJ 08701
68 Make	NISS	69 Model	ALT
		70 Color	GRY
		71 Year	2019
		72 Plate No.	A90KYG
		73 State	NJ
74 VIN	1N4BL4BV2KC168794		
		75 Expires	02 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	1	01	01	05	00	U	00	00	00	00	00			UNKNOWN
B														
C														
D														

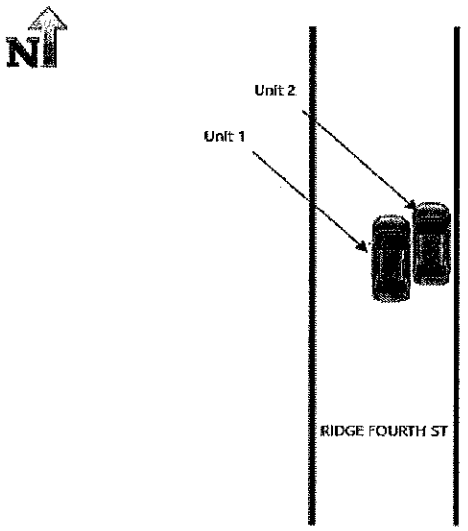
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004650

(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 #2 STATED SHE PARKED HER VEHICLE LAGALLY AT APPROX. 1530HRS ON RIDGE FOURTH ST. WHEN SHE RETURNED TO HER VEHICLE SHE NOTICED DAMAGE TO THE DRIVERS SIDE FRONT FENDER AND DOOR.

IT APPEARS THAT AN UNKNOWN MAKE AND MODEL VEHICLE SIDESWIPED VEHICLE #2. THE ONE SECURITY CAMERA IN THE AREA DOES NOT COVER WHERE THE CRASH OCCURRED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WARD S	302	DIBIASE	286	☒ Pending ☐ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05
97	01
98	
99	07
100a	01
100b	04
101	02
102	01
103	01
104	3
105	06
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	02

1 Case Number: 22-004758

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

3 Station/Precinct:

10 Crash Occurred On: SPRUCE ST — Dir: E — 11 Speed Limit: 25

☐ At Intersection With — Road Name — Dir — 12 Route No. — Suffix — 13 Milepost

☒ Feet ☐ Miles — 14: 100 — 15: ☐ N ☐ E ☐ S ☒ W — 16: of: MARC DR — 18 Speed Limit: 25

19 Ramp ☐ To ☐ From: — 17 Cross Road 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): 0008 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: 1 — 20 Route/Name: — 21 Latitude: 40.07169 — 22 Longitude: -74.21082

118a	01
118b	02
119a	-
119b	-
120a	02
120b	-
121a	-
121b	01
122	01
123	10
124	11
125	-
126a	28
126b	28
126c	56
126d	-
126e	28
127a	26
127b	-
127c	-
127d	-
127e	26
128	28
129	09
130	09
131	03
132	01
133	04
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 602535307 206 1 — 25 NJ Ins. Code: 884

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

26 Driver's First Name: YITZCHOK — Initial: - — Last Name: SIMCHA — 29 Sex: M

27 Number & Street: 13 NOAM LN

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

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

32 Driver's License Number: S44207900005032 — 33 DOB (mm dd yyyy): 05/03/2003 — 34 Expires (mm yy): 05 24

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

36 Number & Street: 13 NOAM LN

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

38 Make: ACUR — 39 Model: MDX — 40 Color: 1 — 41 Year: 2007 — 42 Plate No.: S93PFL — 43 State: NJ

44 VIN: 2HNYD28427H553243 — 45 Expires: 10 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.: 925 236 360 — 55 NJ Ins. Code: 134

☒ 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: YAAKOV — Initial: - — Last Name: KAUFMAN

66 Number & Street: 106 SPRUCE ST

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

68 Make: HOND — 69 Model: PIL — 70 Color: 4 — 71 Year: 2006 — 72 Plate No.: N38LUK — 73 State: NJ

74 VIN: 5FNYF186X6B003370 — 75 Expires: 08 22

76 Vehicle Removed To: HESHEY'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 ☐ 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	39:4-50	A289287	1	39:4-96	A289289
Oper.	**140 Charge**	**141 Summons. No.**	**Oper.**	**142 Charge**	**143 Summons. No.**
1	39:4-50.2	A289288	1	39:4-97	A289290

	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	03	18	M	08	08	02	11	11	04	-	YITZCHOK - SIMCHA - 13 NOAM LN LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

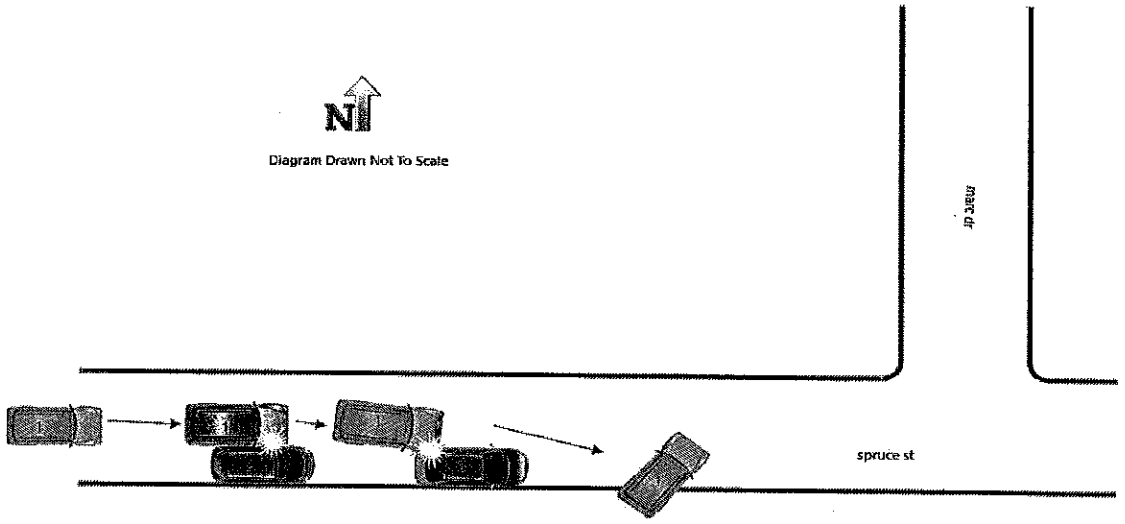
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004758

(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

Veh #1 was traveling East on Spruce St. Veh#2 was parked facing East on Spruce St. Veh#3 was parked facing East on Spruce St.

The driver of Vehicle #1 stated that he was driving from Route 9, and coming from a wedding. He stated that he was the only occupant of vehicle #1. The driver of vehicle #1 would admit to driving and crashing.

Based on observations on scene, it would appear that Veh#1, while traveling East on Spruce St, first side swiped Veh #2, then continued on, crashing into Veh#3, then came to a stop after jumping the curb.

The driver of Veh#1 was arrested for DWI, see police investigative report for further details of the incident. The driver of Veh#1 was evaluated by Hatzolah EMS, but refused to go to the hospital, not claiming any injury. Later while at Lakewood Police Headquarters, the driver of Veh #1 would coplain of pain to his left wrist/arm, but refuse medical treatment.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DEBARTOLOMEIS J	358	SGT. M. MARZOCCA	314	☐ Pending ☒ Complete

PAGE 3 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96 05 | 1 Case Number: 22-004758

97 01 | 2 Police Dept of: LAKEWOOD TOWNSHIP P | Code: 01

98 | 3 Station/Precinct:

10 Crash Occurred On: SPRUCE ST | Dir: E | 11 Speed Limit: 25 | 12 Route No. | Suffix | 13 Milepost | 18 Speed Limit: 25

☐ At Intersection With Road Name ☒ Feet ☐ Miles | 14: 100 | 15 | ☐ N ☐ E ☐ S ☒ W of: MARC DR | 16 | 19 Ramp ☐ To ☐ From: | 17 Cross Road Name | ☐ NB ☐ EB ☐ SB ☐ WB | 20 Route/Name

99 07 | 4 Date of Crash mm dd yy: 01/19/22 | 5 Day Of Week: WEDNESDAY | 6 Time (use 2400 hrs): 0008 | 7 Municipality Code: 1514 | 8 Total Killed: -- | 9 Total Injured: 1 | 21 Latitude: 40.07169 | 22 Longitude: -74.21082

100a 01 | 100b 04 | 23 Veh #: 3 | 24 Policy No.: 282 642 743 | 25 NJ Ins. Code: 139

☒ 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

101 02 | 26 Driver's First Name: - | Initial: - | Last Name: - | 29 Sex: -

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

102 01 | 27 Number & Street: -

57 Number & Street: -

103 01 | 28 City: - | State: - | Zip: -

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

104 3 | 30 Eyes: - | DL Class: - | Restrictions: - | Endorsements: - | 31 State: -

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

105 06 | 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: - -

106 - | 35 Owner's First Name: MORDECAI | Initial: - | Last Name: NEIMAN | ☐ Same As Driver

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

107 - | 36 Number & Street: 108 SPRUCE ST

66 Number & Street: -

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

67 City: - | State: - | Zip: -

109 - | 38 Make: CHEV | 39 Model: CAV | 40 Color: GLD | 41 Year: 2002 | 42 Plate No.: G41MVV | 43 State: NJ

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

110 01 | 44 VIN: 1G1JC524527458662 | 45 Expires: 09 22

74 VIN: - | 75 Expires: - -

111 - | 46 Vehicle Removed To: MOISHEY'S TOWING

112 - | ☐ 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

113 - | 47 Authority: ☒ Owner ☐ Driver ☐ Police

77 Authority: ☐ Owner ☐ Driver ☐ Police

114 - | 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.

115 - | 116 02 | 117 - | 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.
1	39:4-88A	A291801	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
1	39:4-51B	A291802	-		-

	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														

118a - | 118b - | 119a - | 119b - | 120a - | 120b - | 121a - | 121b - | 122 10 | 123 - | 124 - | 125 - | 126a 26 | 126b - | 126c - | 126d - | 126e 26 | 127a - | 127b - | 127c - | 127d - | 127e - | 128 28 | 129 07 | 130 07 | 131 - | 132 - | 133 04 | 134 -

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

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

1 Case Number: 22-004861

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

3 Station/Precinct: -

10 Crash Occurred On: NEW HAMPSHIRE AVE | - | 11 Speed Limit: 40 | 0623 - - (12 Route No. / Suffix / 13 Milepost)

☒ At Intersection With | Road Name | Dir | 18 Speed Limit: 35

☐ Feet ☐ N ☐ E of: SWARTHMORE AVE

- ☐ 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): 01/19/22 | 5 Day Of Week: WEDNESDAY | 6 Time (use 2400 hrs): 1113 | 7 Municipality Code: 1514 | 8 Total Killed: -- | 9 Total Injured: 2

21 Latitude: 40.081270 | 22 Longitude: -74.18070

118a 02 | 118b 03 | 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 05 | 127c 69 | 127d - | 127e 26 | 128 26 | 129 12 | 130 12 | 131 09 | 132 09 | 133 04 | 134 04

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: CARLOS | Initial: E | Last Name: MILLAN-RODRIGUES- | 29 Sex: M

27 Number & Street: 174 MELVILLE AVE

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

30 Eyes: 2 | DL Class: D | Restrictions: - | Endorsements: - | 31 State: NJ

32 Driver's License Number: M43531106511712 | 33 DOB (mm dd yyyy): 11/09/1971 | 34 Expires (mm yy): 11 25

35 Owner's First Name: ☒ Same As Driver CARLOS | Initial: E | Last Name: MILLAN-RODRIGUI-

36 Number & Street: 174 MELVILLE AVE

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

38 Make: DODG | 39 Model: RAM | 40 Color: 3 | 41 Year: 2005 | 42 Plate No.: T14LNY | 43 State: NJ

44 VIN: 3D7KS26C25G777482 | 45 Expires: 08 22

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.: 4081348155 | 55 NJ Ins. Code: 148

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

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

57 Number & Street: 15 GRANDVIEW DR

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

60 Eyes: 4 | DL Class: D | Restrictions: - | Endorsements: - | 61 State: NJ

62 Driver's License Number: S22151560010804 | 63 DOB (mm dd yyyy): 10/23/1980 | 64 Expires (mm yy): 10 22

65 Owner's First Name: ☒ Same As Driver DAVID | Initial: - | Last Name: SEGAL -

66 Number & Street: 15 GRANDVIEW DR

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

68 Make: HOND | 69 Model: ODY | 70 Color: BLU | 71 Year: 2021 | 72 Plate No.: N61NLM | 73 State: NJ

74 VIN: 5FNRL6H71MB044857 | 75 Expires: 03 24

76 Vehicle Removed To: FREEDOM 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

TRAFFIC LIGHT BOX

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:4-97	291466	-		-

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	04	50	M	05	08	02	11	11	01	6502	CARLOS E MILLAN-RODRIGUES - 174 MELVILLE AVE LAKEWOOD NJ 08701 - -
B	02	01	01	04	41	M	01	02	02	11	11	04	6303	DAVID - SEGAL - 15 GRANDVIEW DR LAKEWOOD NJ 08701 - -
C														
D														

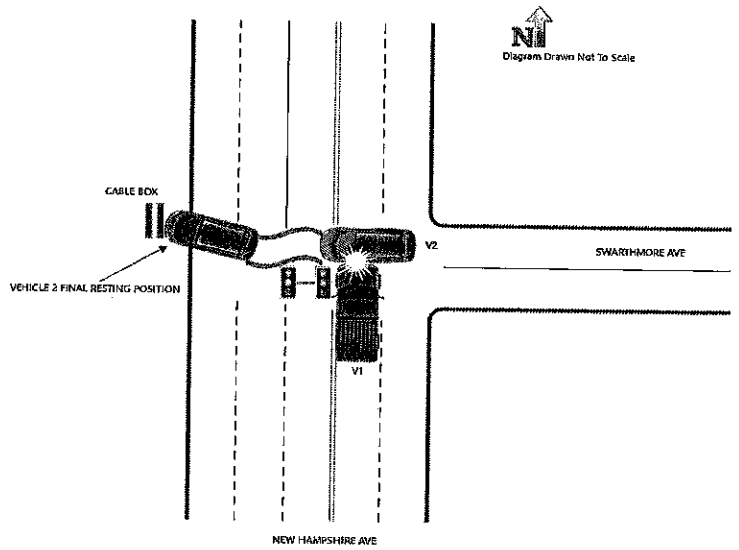
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-004861

(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

On 1/19/2022 at approximately 1113hrs, I was dispatched to New Hampshire Avenue & Swarthmore Avenue in reference to a crash with injuries. Upon arrival, Hatzolah members had already removed the driver of vehicle 2, who was later identified as David Segal, from his vehicle. Mr. Segal was complaining of head pain from the crash. One Hatzolah member did inform me that Mr. Segal was suffering from a concussion and was being taken to Jersey Shore Medical Center.

A witness by the name of David Burket approached Ptl. M. Mooney and reported to him that he was traveling directly behind vehicle 2. Mr. Burket stated that the Swarthmore Avenue light turned green and vehicle 2 began to travel in an attempt to make the left onto New Hampshire Avenue. While doing so, Mr. Burket stated that vehicle 1 crashed into the driver side of vehicle 2 which cause vehicle 2 to swerve off of the roadway and crash into a phone box on the side of New Hampshire Avenue.

Another witness by the name of Shmuel Lipschutz, approached me and had told me that he had observed the crash. Mr. Lipschutz stated that he was traveling North on New Hampshire Avenue and was two vehicles behind vehicle 1. Mr. Lipschutz then reported that the New Hampshire Avenue light turned red and vehicle 1 never stopped and continued through the intersection, causing him to crash into the driver side of vehicle 2.

I then approached vehicle 1 and attempted to speak to the driver who was identified as Carlos Millan-Rodrigues. Mr. Rodrigues was complaining of chest pain from the crash. Mr. Millan-Rodrigues was not able to provide a statement due to his injuries and was taken to Kimbal Medical Center by Lakewood EMS.

Freedom Towing towed both vehicles to their tow yard.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SHEEHAN, M	423	MY	329	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-004861

(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 sustained heavy front end damage causing both front airbags to deploy.

Vehicle 2 sustained heavy front end and driver side damage causing multiple airbag deployments.

I went to Kimbal Medical Center and was unable to speak to Mr. Millan-Rodrigues because he was undergoing testing. I did leave a note with all information needed from Mr. Millan-Rodrigues along with his keys and registration card.

As of this writing, I still have not received any information from Mr. Millan-Rodrigues.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SHEEHAN, M	423	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	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	02
117	01

1 Case Number: 22-004866

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

3 Station/Precinct: -

10 Crash Occurred On: E COUNTY LINE RD (Road Name) - (Dir)

☒ At Intersection With ☐ Feet ☐ Miles (14) (15) ☐ N ☐ E ☐ S ☐ W (16) of: LEXINGTON AVE

11 Speed Limit: 40

12 Route No.: 0526 — Suffix: - — 13 Milepost: -

18 Speed Limit: 25

19 Ramp ☐ To ☐ From: -

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

20 Route/Name:

21 Latitude: 40.10587 — 22 Longitude: -74.21472

4 Date of Crash (mm dd yy): 01/19/22 — 5 Day Of Week: WEDNESDAY — 6 Time (use 2400 hrs): 1137 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: 2

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

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 4239-35-46-26 — 25 NJ Ins. Code: 148

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

26 Driver's First Name: AVROHOM — Initial: - — Last Name: SINGER — 29 Sex: M

27 Number & Street: 24600 GREENFIELD RD

28 City: OAK PARK — State: MI — Zip: 48237

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

32 Driver's License Number: S526075018866 — 33 DOB (mm dd yyyy): 11/11/1983 — 34 Expires (mm yy): 11 23

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

36 Number & Street: 280 FOREST AVE

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

38 Make: TOYT — 39 Model: CAM — 40 Color: BGE — 41 Year: 1998 — 42 Plate No.: R72GHE — 43 State: NJ

44 VIN: 4T1BG22K4WU326640 — 45 Expires: 02 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: TOMAS — Initial: - — Last Name: PEREZ-CASTRO — 59 Sex: M

57 Number & Street: 18 CLOVER ST

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

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

62 Driver's License Number: P26787400009730 — 63 DOB (mm dd yyyy): 09/22/1973 — 64 Expires (mm yy): - -

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

66 Number & Street: -

67 City: - — State: - — Zip: -

68 Make: CHRY — 69 Model: VOY — 70 Color: RD — 71 Year: 2001 — 72 Plate No.: - — 73 State: -

74 VIN: 1C4GJ453Y1B269599 — 75 Expires: - -

76 Vehicle Removed To: FREEDOM 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

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
2	39:4-144	A291333	2	39:3-10	A291334
2	39:3-4	A291335	2	39:6B-2	A291336

	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	-	38	M	-	-	-	11	04	-	-	AVROHOM - SINGER - 24600 GREENFIELD RD OAK PARK MI 48237
B	2	01	01	03	48	M	09	08	01	11	04	-	-	TOMAS - PEREZ-CASTRO - 18 CLOVER ST LAKEWOOD NJ 08701
C	2	03	01	03	25	M	01	08	01	11	04	-	-	SEBASTIAN - SILVA-PAYAN - 25 4TH ST APT3 LAKEWOOD NJ 08701
D														

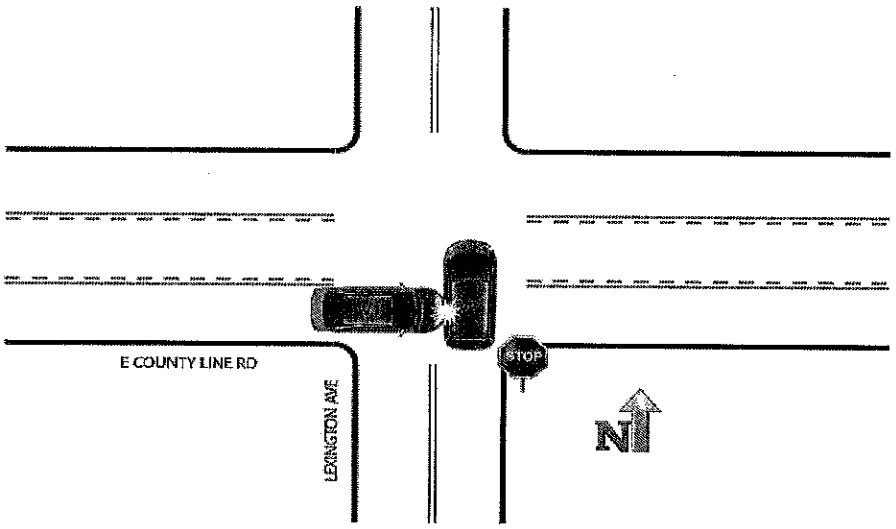
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-004866

(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 EAST ON E COUNTY LINE RD APPROACHING LEXINGTON AVE. VEHICLE 2 WAS TRAVELING NORTH ON LEXINGTON AVE APPROACHING E COUNTY LINE RD.

DRIVER 1 STATED THAT VEHICLE 2 PULLED OUT IN FRONT OF HIS VEHICLE AS HE ENTERED THE INTERSECTION. HE STATED HE ATTEMPTED TO SWERVE TO AVOID THE CRASH BUT COULD NOT.

DRIVER 2 STATED THAT VEHICLE 1 WAS SPEEDING AND STRUCK HIS VEHICLE.

IT APPEARS THAT DRIVER 2 FAILED TO YIELD TO VEHICLE 1 BEFORE ENTERING THE INTERSECTION CAUSING THE CRASH.

DRIVER 2 ADVISED ME THAT VEHICLE 2 WAS UNREGISTERED, UNINSURED AND HAD FICTITIOUS LICENSE PLATES ON IT. DRIVER 2 WAS ISSUED A SUMMONS FOR FAILURE TO YIELD, UNREGISTERED VEHICLE, FICTITIOUS PLATES, UNLICENSED DRIVER AND UNINSURED MOTOR VEHICLE. VEHICLE 2 WAS IMPOUNDED.

THERE IS NO PAPERWORK TO PROVE WHO IS THE OWNER OF THE VEHICLE, SO NO OWNER INFORMATION CAN BE ADDED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RIVERA M	327	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	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	01
106	-
107	-
108	01
109	20
110	01
111	02
112	-
113	16
114	-
115	14
116	01
117	01

1 Case Number: 22-004919

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

3 Station/Precinct:

10 Crash Occurred On: MADISON AVE — Road Name — Dir

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

☐ N ☐ E ☒ S ☐ W of: 6TH ST — 16

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): 01/19/22 — 5 Day Of Week: WEDNESDAY — 6 Time (use 2400 hrs): 1602 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

21 Latitude: 40.09579 — 22 Longitude: -74.21741

118a	02
118b	-
119a	25
119b	-
120a	01
120b	01
121a	01
121b	01
122	01
123	08
124	04
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	01
130	01
131	03
132	17
133	04
134	01

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 7707188 — 25 NJ Ins. Code: 178

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

26 Driver's First Name: ABRAHAM — Initial: - — Last Name: MENDEZMARIN — 29 Sex: M

27 Number & Street: 212 CLIFTON AVE APT 3

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

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

32 Driver's License Number: M25130050004962 — 33 DOB (mm dd yyyy): 04/15/1996 — 34 Expires (mm yy): 04 25

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

36 Number & Street: 503 CLIFTON AVE

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

38 Make: KIA — 39 Model: RIO — 40 Color: RD — 41 Year: 2013 — 42 Plate No.: T65PHK — 43 State: NJ

44 VIN: KNADM5A38D6299832 — 45 Expires: 12 22

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 ☐ 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.: EAP1655662 — 55 NJ Ins. Code: 934

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

56 Driver's First Name: YEHUDA — Initial: - — Last Name: WOLFF — 59 Sex: M

57 Number & Street: 3822A 15TH AVE

58 City: BROOKLYN — State: NY — Zip: 11218

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

62 Driver's License Number: 901128135 — 63 DOB (mm dd yyyy): 01/27/2003 — 64 Expires (mm yy): 01 26

65 Owner's ☐ Same As Driver — First Name: - — Initial: - — Last Name: YITZ AUTO BODY L -

66 Number & Street: 6001 ROUTE 9 NORTH

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

68 Make: FORD — 69 Model: 550 — 70 Color: WHI — 71 Year: 2013 — 72 Plate No.: XACY91 — 73 State: NJ

74 VIN: 1FD0X5HY1DEA24878 — 75 Expires: 02 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: YITZ AUTO BODY LLC

Number & Street: 6001 ROUTE 9 NORTH

City: HOWELL — State: NJ — Zip: 07731

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-289300	-		-
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	-	-	ABRAHAM - MENDEZMARIN - 212 CLIFTON AVE APT 3 LAKEWOOD NJ 08701
B	2	01	01	05	18	M	-	-	-	11	04	-	-	YEHUDA - WOLFF - 3822A 15TH AVE BROOKLYN NY 11218
C														
D														

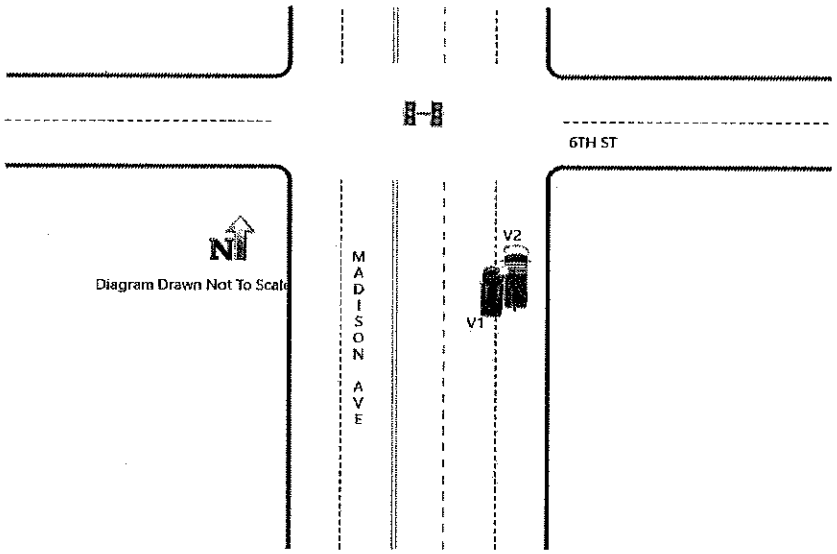
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: Case No: 22-004919

(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 Deept 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 1 stated that while traveling North on Madison Ave he was not paying attention and accidentally drifted into the right lane striking Vehicle 2.

Driver 2 stated that he was stopped in traffic at the red light on Madison Ave and 6th St when his vehicle was suddenly struck by Vehicle 1.

Vehicle 1 sustained damage to the front bumper and passenger side corner panel consisting of the bumper and panel being cracked and dented. Vehicle 1 would not start and was towed due to being disabled.

Vehicle 2 did not have any visible damage.

Due to driver statements and my observations I determined that Driver 1 was not paying attention and caused the crash.

There were no injuries on scene.

Driver 1 was issued a summons for being unlicensed. End of report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SCHAAL, K	376	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	01
99	05
100a	01
100b	04
101	02
102	01
103	01
104	2
105	02
106	-
107	-
108	04
109	04
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	02

1 Case Number: 22-004937

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

3 Station/Precinct:

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1704

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: CENTRAL AVE

☒ At Intersection With — Road Name: CENTRAL AVE — Dir: — of: COLUMBUS AVE

☐ Feet ☐ N ☐ E ☐ Miles ☐ S ☐ W

14 15 16

11 Speed Limit: 45

12 Route No.: 0031 — Suffix — 13 Milepost

18 Speed Limit: 25

17 Cross Road Name:

19 Ramp ☐ To ☐ From:

20 Route/Name

21 Latitude: 40.090480

22 Longitude: -74.235160

☐ NB ☐ EB ☐ SB ☐ WB

118a	25
118b	-
119a	02
119b	08
120a	01
120b	01
121a	01
121b	01
122	02
123	02
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	56
127c	-
127d	-
127e	26
128	26
129	03
130	03
131	11
132	11
133	03
134	04

Vehicle 1

23 Veh #: 1

24 Policy No.: 4392587889

25 NJ Ins. Code: 148

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

26 Driver's First Name: ARYEH — Initial: L — Last Name: REICH — 29 Sex: M

27 Number & Street: 32E 9TH ST

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

30 Eyes: 06 — DL Class: A — Restrictions: - — Endorsements: -

31 State: NJ

32 Driver's License Number: R22510627307986

33 DOB (mm dd yyyy): 07/21/1998

34 Expires (mm yy): 07 25

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

36 Number & Street: 32E 9TH ST

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

38 Make: HYUN — 39 Model: TUC — 40 Color: WHI — 41 Year: 2016 — 42 Plate No.: C40MVW — 43 State: NJ

44 VIN: KM8J3CA27GU113648

45 Expires: 09 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.: 940337730

55 NJ Ins. Code: 134

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

56 Driver's First Name: MOSHE — Initial: - — Last Name: SHOHAT — 59 Sex: M

57 Number & Street: 700 S LAKE DR

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

60 Eyes: 02 — DL Class: D — Restrictions: - — Endorsements: -

61 State: IS

62 Driver's License Number: 207141284

63 DOB (mm dd yyyy): 06/25/1998

64 Expires (mm yy): 06 23

65 Owner's ☐ Same As Driver — First Name: ISRAEL — Initial: A — Last Name: KUGIELSKY

66 Number & Street: 419 CEDAR BRIDGE AVE 409

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

68 Make: LINC — 69 Model: NAV - NA — 70 Color: BLK — 71 Year: 2020 — 72 Plate No.: K12NMA — 73 State: NJ

74 VIN: 5LMJJ3LTXLEL21486

75 Expires: 03 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	23	M	-	-	-	11	04	-	-	ARYEH L REICH - 32E 9TH ST LAKEWOOD NJ 08701
B	02	01	01	05	23	M	-	-	-	11	04	-	-	MOSHE - SHOHAT - 700 S LAKE DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

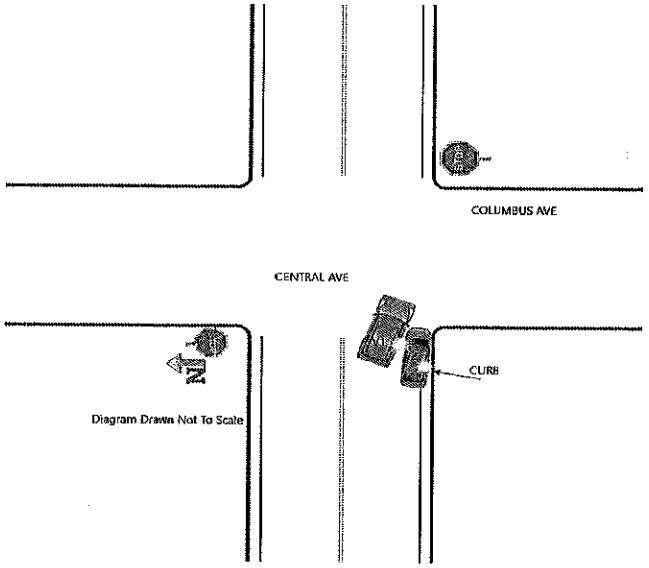
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004937

(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 stated he was Eastbound on Central Ave and was approaching the intersection of Columbus Ave. He stated as he attempted to turn right onto Columbus Ave, vehicle 2 crashed into the side of his vehicle. He stated he was in front of vehicle 2. Driver 1 stated vehicle 2 attempted to pass him on the right to turn right. Driver 1 also noted he is really sure he had his right turn signal on.

Driver of vehicle 2 stated he was Eastbound on Central Ave and was approaching the intersection of Columbus Ave. He stated as he was approaching Columbus Ave he observed vehicle 1 in front of him. He stated it appeared that vehicle 1 was going forward so he attempted to turn right onto Columbus Ave but vehicle 1 made a wide right turn and crashed into the side of his vehicle. He stated vehicle 1 pushed his vehicle into the curb. He also stated vehicle 1 did not have his right turn signal on.

In my investigation I find vehicle 2 at fault for this crash for driver inattention and improper turning as vehicle 2 needs to yield to the vehicle in front and make sure it is clear before attempting to turn.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SORIANO J	352	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	05
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	02

1 Case Number: 22-004942

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

3 Station/Precinct:

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

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1718

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: E 7TH ST

☒ At Intersection With — Road Name: SOMERSET AVE — Dir:

☐ Feet ☐ N ☐ E of: ☐ Miles ☐ S ☐ W

14 15 16

11 Speed Limit: 25

12 Route No. Suffix 13 Milepost

18 Speed Limit: 25

19 Ramp ☐ To ☐ From:

17 Cross Road Name

20 Route/Name

21 Latitude: -

22 Longitude: -

☐ NB ☐ EB ☐ SB ☐ WB

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

Vehicle 1

23 Veh #: 1

24 Policy No.: K3589350

25 NJ Ins. Code: 900

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

26 Driver's First Name: ROSALYN — Initial: - — Last Name: BEN-DOV -

29 Sex: F

27 Number & Street: 841 CLAY AVE

28 City: SCRANTON — State: PA — Zip: 18510

30 Eyes: 04 — DL Class: - — Restrictions: - — Endorsements: -

31 State: PA

32 Driver's License Number: 31302052

33 DOB (mm dd yyyy): 01/13/1999

34 Expires (mm yy): 01 25

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

36 Number & Street: 841 CLAY AVENUE

37 City: SCRANTON — State: PA — Zip: 18510

38 Make: HOND — 39 Model: ACC — 40 Color: 4 — 41 Year: 2008 — 42 Plate No.: LFF2983 — 43 State: PA

44 VIN: 1HGCP36758A029872

45 Expires: 10 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.: PAAC22097

55 NJ Ins. Code: 168

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

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

59 Sex: F

57 Number & Street: 6A TUSCANY TER

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

60 Eyes: 04 — DL Class: D — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: A75461590051994

63 DOB (mm dd yyyy): 01/16/1999

64 Expires (mm yy): 01 23

65 Owner's ☐ Same As Driver — First Name: DANIEL — Initial: Y — Last Name: ARONIN -

66 Number & Street: 6 TUSCANY TER

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

68 Make: KIA — 69 Model: OPT — 70 Color: WHI — 71 Year: 2020 — 72 Plate No.: V30LZU — 73 State: NJ

74 VIN: 5XXGT4L30LG386165

75 Expires: 11 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	1	01	01	05	23	F	-	-	-	11	04	-	-	ROSALYN - BEN-DOV - 841 CLAY AVE SCRANTON PA 18510
B	2	01	01	05	23	F	-	-	-	11	04	-	-	DEENA - ARONIN - 6A TUSCANY TER LAKEWOOD NJ 08701
C	2	06	01	05	1	F	-	-	-	06	06	-	-	MINDY ARONIN 6A TUSCANY TER LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

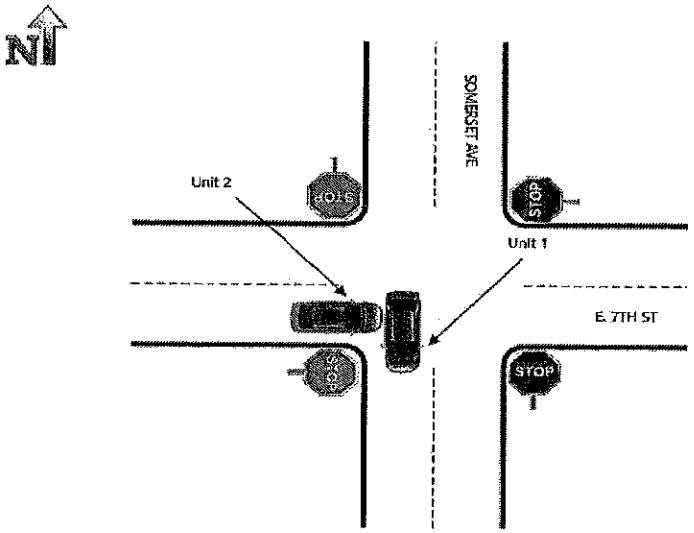
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004942

(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 #2 WAS ASKED WHAT HAPPENED AT THE ACCIDENT AND SHE IMMEDIATELY SAID SHE WAS AT FAULT. I THEN ASKED HER AGAIN WHAT HAPPENED, WHICH WAY WAS SHE TRAVELING. SHE SAID SHE WAS TRAVELING EAST ON E. 7TH ST. AND STOPPED AT THE STOP SIGN AT THE INTERSECTION OF SOMERSET AVE. SHE SAID VEHICLE #1 STARTED TO MOVE FORWARD AND THEN STOPPED. SHE SAID SHE THEN PROCEEDED TO MOVED FORWARD AND SO DID VEHICLE #1. CAUSING THEM TO COLLIDE.

DRIVER #1 STATED THAT SHE WAS TRAVELING SOUTH ON SOMERSET AVE. AND STOPPED AT THE STOP SIGN AT E. 7TH ST. SHE SAID THAT SHE ARRIVED AT THE INTERSECTION PRIOR TO VEHICLE #2 AND HAD THE RIGHT OF WAY. SO SHE ATTEMPTED TO CROSS THE INTERSECTION AND WAS STRUCK BY VEHICLE #2.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WARD S	302	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	07
100a	03
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	02
117	04

1 Case Number: 22-004943

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

3 Station/Precinct:

10 Crash Occurred On: MILLER RD — Road Name — Dir

☐ At Intersection With

☒ Feet ☒ N ☐ E of: ADAMS ST

300 ☐ Miles ☐ S ☐ W

14 15 16

11 Speed Limit: 35

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: 40.098640 — 22 Longitude: -74.247060

4 Date of Crash (mm dd yy): 01/19/22 — 5 Day Of Week: WEDNESDAY — 6 Time (use 2400 hrs): 1720 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

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	56
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	11
132	11
133	04
134	04

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 909830864 — 25 NJ Ins. Code: 054

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

26 Driver's First Name: BELANE — Initial: - — Last Name: KOVACS — 29 Sex: F

27 Number & Street: 386 NEW CENTRAL AVE

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

30 Eyes: 04 — DL Class: - — Restrictions: - — Endorsements: - — 31 State: -

32 Driver's License Number: - — 33 DOB (mm dd yyyy): 10/28/1963 — 34 Expires (mm yy): - -

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

36 Number & Street: 59 JOE ENT RD

37 City: FLEMINGTON — State: NJ — Zip: 08822

38 Make: HYUN — 39 Model: ACC — 40 Color: GRY — 41 Year: 2010 — 42 Plate No.: R36PDA — 43 State: NJ

44 VIN: KMHCM3AC3AU167552 — 45 Expires: 11 22

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 ☐ 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.: 4168578500 — 55 NJ Ins. Code: 148

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

56 Driver's First Name: DARIA — Initial: - — Last Name: GRIPPO — 59 Sex: F

57 Number & Street: 4 GOWER RD

58 City: TOMS RIVER — State: NJ — Zip: 08757

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

62 Driver's License Number: G74421550056844 — 63 DOB (mm dd yyyy): 06/20/1984 — 64 Expires (mm yy): 08 21

65 Owner's ☐ Same As Driver — First Name: DARIA — Initial: - — Last Name: GRIPPO

66 Number & Street: 4 GOWER RD

67 City: TOMS RIVER — State: NJ — Zip: 08757

68 Make: SATU — 69 Model: SW2 — 70 Color: 3 — 71 Year: 1995 — 72 Plate No.: S97NWZ — 73 State: NJ

74 VIN: 1G8ZK827XSZ342557 — 75 Expires: 07 22

76 Vehicle Removed To: FREEDOM 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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1	39:3-10	A291489			
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	58	F	-	-	-	11	04	-	-	BELANE - KOVACS - 386 NEW CENTRAL AVE LAKEWOOD NJ 08701
B	02	01	01	05	37	F	-	-	-	11	04	-	-	DARIA - GRIPPO - 4 GOWER RD TOMS RIVER NJ 08757
C														
D														

New Jersey Police Crash Investigation Report

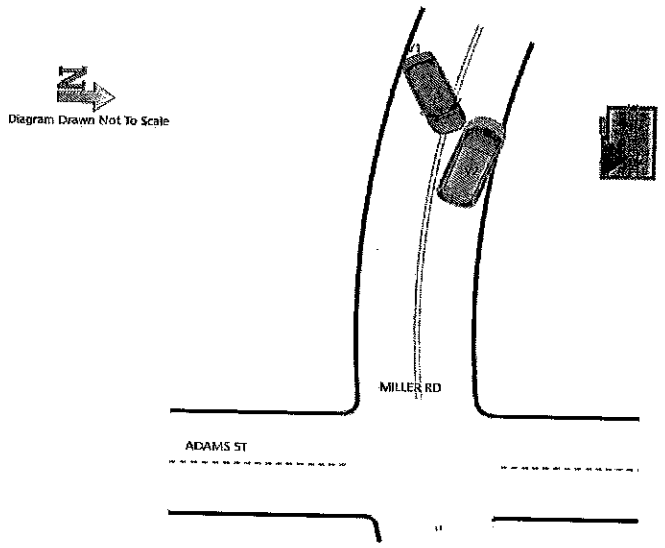
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-004943

(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 reported that she was on Miller Rd. and intended to turn into the driveway of 309 Miller Rd. As she began her turn her vehicle was struck by vehicle #2.

The driver of vehicle #2 reported that she was traveling on Miller Rd. when vehicle #1 entered the roadway and although she tried to avoid the crash she could not. After colliding with vehicle #1 her vehicle struck the and travelled over the curb on her right side.

There were no injuries reported at the scene of the crash. Both vehicles had damage to the front driver side fenders and the bumpers and both were towed from the scene.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
KOWALESKI S	319	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	07
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	02
117	02

1 Case Number: 22-004951

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

3 Station/Precinct:

10 Crash Occurred On: RIDGE AVE — ☐ At Intersection With — Road Name — Dir

☒ Feet ☐ Miles — 60 (14, 15) — ☐ N ☐ E ☐ S ☒ W of: NEW HAMPHIRE AVE

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

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

4 Date of Crash (mm dd yy): 01/19/22 — 5 Day Of Week: WEDNESDAY — 6 Time (use 2400 hrs): 1810 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: -- — 20 Route/Name — 21 Latitude: 40.09957 — 22 Longitude: -74.17654

118a	25
118b	-
119a	09
119b	-
120a	01
120b	-
121a	01
121b	-
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	07
130	07
131	01
132	01
133	02
134	02

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 66328278 — 25 NJ Ins. Code: 134

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

26 Driver's First Name: DANIEL — Initial: A — Last Name: SILVESTRI — 29 Sex: M

27 Number & Street: 17 ARLYN DRIVE

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

30 Eyes: 4 — DL Class: A — Restrictions: - — Endorsements: - — 31 State: NJ

32 Driver's License Number: S44071536103814 — 33 DOB (mm dd yyyy): 03/20/1981 — 34 Expires (mm yy): 03 22

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

36 Number & Street: 17 ARLYN DRIVE

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

38 Make: HOND — 39 Model: FIT — 40 Color: SIL — 41 Year: 2010 — 42 Plate No.: A91ACD — 43 State: NJ

44 VIN: JHMGE8H65AC030536 — 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.: 943513426 — 55 NJ Ins. Code: 134

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

56 Driver's First Name: ANA — Initial: M — Last Name: DAWSON — 59 Sex: F

57 Number & Street: 23 FOUNTAIN DRIVE APT 7

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

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

62 Driver's License Number: D09420417462922 — 63 DOB (mm dd yyyy): 12/17/1992 — 64 Expires (mm yy): 12 23

65 Owner's ☐ Same As Driver — First Name: ANA — Initial: M — Last Name: DAWSON

66 Number & Street: 23 FOUNTAIN DRIVE APT 7

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

68 Make: NISS — 69 Model: ROG — 70 Color: BLK — 71 Year: 2020 — 72 Plate No.: C81MHE — 73 State: NJ

74 VIN: JN8AT2MV7LW133616 — 75 Expires: 02 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		N/A	2		N/A
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	40	M	-	-	-	11	04	-	-	DANIEL A SILVESTRI - 17 ARLYN DRIVE HOWELL NJ 07731
B	2	01	01	05	29	F	-	-	-	11	04	-	-	ANA M DAWSON - 23 FOUNTAIN DRIVE APT LAKEWOOD NJ 08701
C	2	04	01	05	3	F	-	-	-	05	05	-	-	LUCIANA - DAWSON - 23 FOUNTAIN DR; APT 1 LAKEWOOD NJ 08701
D	2	05	01	05	2	M	-	-	-	05	05	-	-	CHRISTIAN - DAWSON - 23 FOUNTAIN DR; APT 7 LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

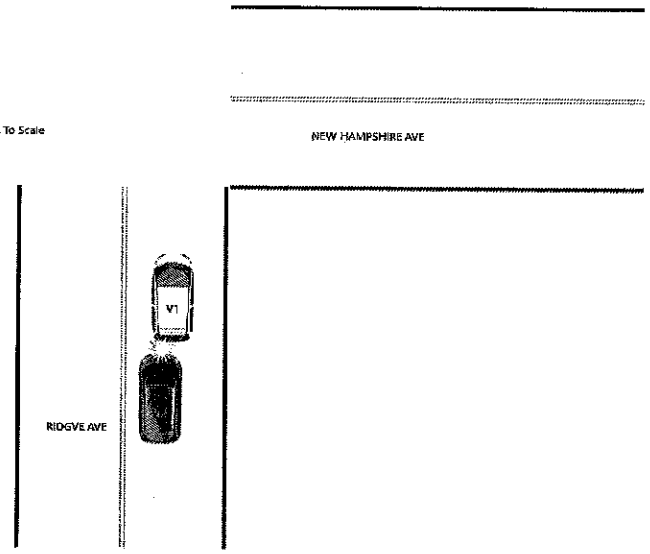
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004951

(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 travelling East on Ridge Avenue getting ready to make a right turn onto New Hampshire Avenue. Vehicle #2 was travelling behind Vehicle #1. Vehicle #1 made an abrupt stop due to the vehicle in front of him stopping short. Vehicle #2 was unable to stop in time and crashed into the rear of Vehicle #1. Vehicle #1 sustained scratches to the rear driver side bumper. Vehicle #2 sustained scratches to the front passenger side fender. There were no reports of injuries.

Driver 1 stated he was travelling on Ridge Avenue getting ready to make a right turn onto New Hampshire Avenue. He stated he stopped for the vehicle in front of him and Vehicle #2 crashed into the rear of his vehicle.

Driver 2 stated she was travelling behind Vehicle #1 who kept hitting his brakes. Vehicle #1 made an abrupt stop and Driver 2 was unable to stop in time.

My investigation finds Vehicle #2 to be at fault for following too closely.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MCAVOY M	354	E.MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	PAGE 1 OF 2 ☐ Fatal	New Jersey Police Crash Investigation Report ☒ Reportable ☐ Non-Reportable ☐ Change Report
97	01	1 Case Number: 22-004960	10 Crash Occurred On: PROSPECT ST ☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: CABERNET DR (Road Name / Dir)
98	07	2 Police Dept of: LAKEWOOD TOWNSHIP P; Code: 01	11 Speed Limit: 40
99	07	3 Station/Precinct	12 Route No. / Suffix / 13 Milepost / 16 Speed Limit: 25
100a	01	4 Date of Crash (mm dd yy): 01/19/22	5 Day Of Week: WEDNESDAY
100b	04	6 Time (use 2400 hrs): 1952	7 Municipality Code: 1514
101	02	8 Total Killed: --	9 Total Injured: --
102	01	14 / 15 / 16	17 Cross Road Name
103	01	19 Ramp ☐ To ☐ From:	20 Route/Name
104	2	21 Latitude: -	22 Longitude: -
105	03	☐ NB ☐ EB ☐ SB ☐ WB	
106	-		
107	-		
108	04		
109	04		
110	01		
111	01		
112	-		
113	-		
114	-		
115	-		
116	01		
117	04		

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	02
130	02	131	12	132	12	133	03	134	03														

Veh #	Policy No.	NJ Ins. Code	Driver's First Name	Initial	Last Name	Sex	Number & Street	City	State	Zip	Eyes	DL Class	Restrictions	Endorsements	State	Driver's License Number	DOB (mm dd yyyy)	Expires (mm yy)
23 Veh # 1	24 Policy No. 909997648	25 NJ Ins. Code 054	26 Driver's First Name STEVEN	J	PALAZZOLLA -	29 Sex M	27 Number & Street 772 APPLEWOOD CT	28 City JACKSON	NJ	08527	2	D	-	-	NJ	32 Driver's License Number P02427237103542	33 DOB 03/02/1954	34 Expires 03 23
53 Veh # 2	54 Policy No. 6027113662061	55 NJ Ins. Code 884	56 Driver's First Name SHIMON	-	KOPP -	59 Sex M	57 Number & Street 103 CABERNET DR	58 City LAKEWOOD	NJ	08701	2	D	-	-	NJ	62 Driver's License Number K65397080008952	63 DOB 08/22/1995	64 Expires 08 25

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

Owner	Same As Driver	First Name	Initial	Last Name	Number & Street	City	State	Zip
35 Owner's	☐	STEVEN	J	PALAZZOLLA -	36 Number & Street: 772 APPLEWOOD CT	37 City: JACKSON	NJ	08527
65 Owner's	☐	SHIMON	-	KOPP -	66 Number & Street: 103 CABERNET DR	67 City: LAKEWOOD	NJ	08701

Vehicle	Make	Model	Color	Year	Plate No.	State	VIN	Expires
1	NISS	ROG	BLK	2019	K15CFK	NJ	5N1AT2MV6KC817323	09 22
2	TOYT	HIG	1	2015	F74NTE	NJ	5TDBKRFH1FS184083	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

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	01	01	01	05	67	M	-	-	-	11	04	-	-	STEVEN J PALAZZOLLA - 772 APPLEWOOD CT JACKSON NJ 08527
B	02	01	01	05	26	M	-	-	-	11	04	-	-	SHIMON - KOPP - 103 CABERNET DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

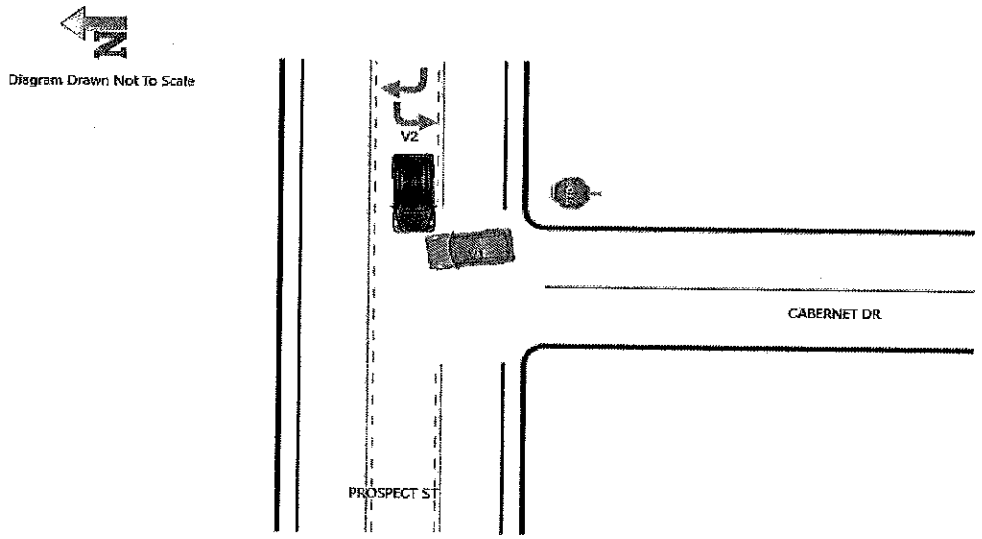
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-004960

(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 reported that he intended to make a left hand turn from Cabernet Dr. onto Prospect St. Once he was into his turn he was struck by vehicle #2. He added that vehicle #2 may have been traveling at a high rate of speed.

The driver of vehicle #2 reported that he was traveling West on Prospect St. and intended to make a left hand turn onto Cabernet Dr. He reported that vehicle #1 was stopped at the stop sign but as he approached vehicle #1 entered the roadway and he could not avoid the crash.

There were no injuries reported at the scene of the crash. Vehicle #1 sustained damage to the front passenger side fender, bumper, and headlight. Vehicle #2 sustained damage to the front end of the vehicle. Both were driven from the scene.

This crash resulted when vehicle #1 failed to yield to the right away of vehicle #2.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
KOWALESKI S	319	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	04
97	01
98	07
99	05
100a	01
100b	04
101	02
102	01
103	01
104	2
105	11
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	04
117	-

1 Case Number: 22-005197

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): 1951

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: 1

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

☐ At Intersection With

☒ Feet ☐ Miles — 14: 50 — 15

☐ N ☐ E ☐ S ☒ W — 16

of: SPARTAN AVE

11 Speed Limit: 45

12 Route No.: 0626 — Suffix: - — 13 Milepost: -

18 Speed Limit: 25

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

20 Route/Name: -

☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.062870

22 Longitude: -74.233080

118a	99
118b	-
119a	-
119b	-
120a	01
120b	-
121a	-
121b	-
122	01
123	-
124	04
125	-
126a	05
126b	69
126c	-
126d	-
126e	69
127a	-
127b	-
127c	-
127d	-
127e	-
128	69
129	12
130	12
131	-
132	-
133	04
134	-

Vehicle 1

23 Veh #: 1

24 Policy No.: 993494693 206 1

25 NJ Ins. Code: 884

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

26 Driver's First Name: ELI — Initial: D — Last Name: GOBIOFF

29 Sex: M

27 Number & Street: 830 WENSTROM AVE

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

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

31 State: NJ

32 Driver's License Number: G60232056409022

33 DOB (mm dd yyyy): 09/10/2002

34 Expires (mm yy): 09 24

35 Owner's First Name: ABRAHAM — Initial: S — Last Name: GOBIOFF

☐ Same As Driver

36 Number & Street: 830 WENSTROM AVE

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

38 Make: TOYT — 39 Model: CAM — 40 Color: GRN — 41 Year: 2003 — 42 Plate No.: S56KVM — 43 State: NJ

44 VIN: 4T1BE32K03U696359

45 Expires: 12 22

46 Vehicle Removed To: PRIVATE TOW

☐ 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.: -

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 ☐ 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

POLE JC562LD STRUCK DURING CRASH, HOWEVER NO DAMAGES OBSERVED TO POLE.

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	04	19	M	08	05	01	11	11	01	-	ELI D GOBIOFF - 830 WENSTROM AVE LAKEWOOD NJ 08701 - -
B														
C														
D														

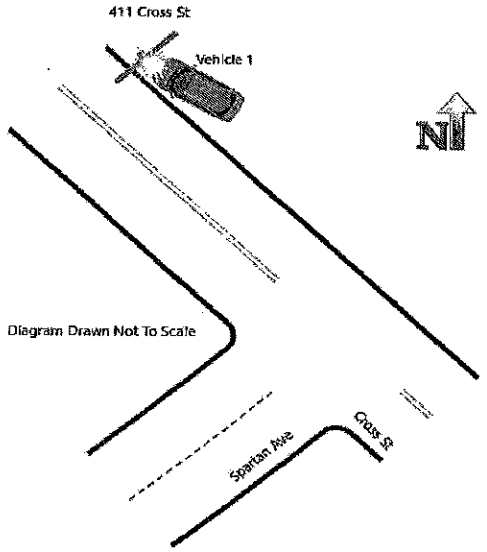
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-005197

(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 west on Cross St when a white older model Toyota Sienna was either entering or exiting the driveway of 411 Cross St. Driver of Vehicle 1 stated he had to swerve out of the way in order to not strike the Toyota Sienna, resulting in Vehicle 1 running off the road and striking a utility pole (JC562LD). The Toyota Sienna was not on scene.

Vehicle 1 sustained heavy front end damages, including engine damage and front air bag deployment. Vehicle 1 was towed by Moishy's.

Driver of Vehicle 1 was assessed by Hatzolah First Aid, and suffered bruising to his left arm. Driver of Vehicle 1 refused medical attention.

No exterior security cameras were located nearby where the crash occurred, and a resident inside 411 Cross St stated he did not witness the incident. Individual refused to provide personal information.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SEEHAUSEN, K	416	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	04
117	04

1 Case Number: 22-005205

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

3 Station/Precinct:

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

☐ At Intersection With

☒ Feet ☐ Miles: 100 (14) — ☐ N ☒ E ☐ S ☐ W (15) — of: RIVER AVE (16)

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

18 Speed Limit: 45

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

4 Date of Crash (mm dd yy): 01/20/22 — 5 Day Of Week: THURSDAY — 6 Time (use 2400 hrs): 2120 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: -- — 21 Latitude: 40.086420 — 22 Longitude: -74.215340

118a	02
118b	04
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	-
127c	-
127d	-
127e	26
128	26
129	11
130	11
131	05
132	05
133	03
134	03

Vehicle 1

23 Veh #: 1 — 24 Policy No.: PANJ-009312828 — 25 NJ Ins. Code: 071

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

26 Driver's First Name: LEVI — Initial: Y — Last Name: MILLER — 29 Sex: M

27 Number & Street: 141 SPRUCE ST

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

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

32 Driver's License Number: M43584658808912 — 33 DOB (mm dd yyyy): 08/10/1991 — 34 Expires (mm yy): 08 25

35 Owner's ☒ Same As Driver — First Name: LEVI — Initial: Y — Last Name: MILLER

36 Number & Street: 141 SPRUCE ST

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

38 Make: TOYT — 39 Model: COR — 40 Color: TN — 41 Year: 2009 — 42 Plate No.: J75PNM — 43 State: NJ

44 VIN: 1NXBU40E39Z140108 — 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.: 4467-37-59-05 — 55 NJ Ins. Code: 148

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

56 Driver's First Name: YOSEF — Initial: T — Last Name: EISENBERGER — 59 Sex: M

57 Number & Street: 432 2ND ST

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

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

62 Driver's License Number: E46447908312744 — 63 DOB (mm dd yyyy): 12/03/1974 — 64 Expires (mm yy): 11 19

65 Owner's ☐ Same As Driver — First Name: YOSEF — Initial: T — Last Name: EISENBERGER

66 Number & Street: 432 2ND ST

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

68 Make: HYUN — 69 Model: SON — 70 Color: GRY — 71 Year: 2018 — 72 Plate No.: YEL92M — 73 State: NJ

74 VIN: 5NPE24AF2JH646140 — 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	V1	01	01	05	30	M	-	-	-	11	04	-	-	LEVI Y MILLER - 141 SPRUCE ST LAKEWOOD NJ 08701
B	V2	01	01	05	47	M	-	-	-	11	04	-	-	YOSEF T EISENBERGER - 432 2ND ST LAKEWOOD NJ 08701
C	V2	03	01	05	22	M	-	-	-	11	04	-	-	BENJAMIN E WUNSCH - 617 9TH ST LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

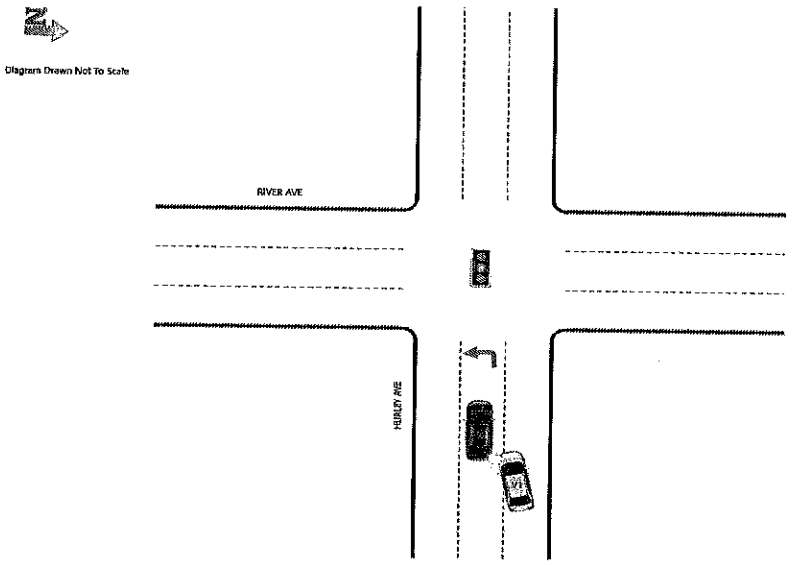
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-005205

(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 HURLEY AVE. HE STATED THAT HE ATTEMPTED TO SWITCH LANES AND GO INTO THE LEFT TURN ONLY LANE WHEN HE STRUCK V2 WHO WAS TRAVELING WESTBOUND ON HURLEY AVE IN THE LEFT TURN ONLY LANE.

THE DRIVER OF V2 STATED THAT HE WAS TRAVELING WESTBOUND ON HURLEY AVE. AS HE TRAVELED WESTBOUND, HE WAS STRUCK BY V1 WHO WAS ATTEMPTING TO SWITCH INTO V2'S LEFT TURN ONLY LANE.

NO INJURIES WERE REPORTED ON SCENE.

AFTER OBSERVING THE SCENE AND SPEAKING WITH BOTH PARTIES, I FIND V1 AT FAULT FOR FAILING TO YIELD THE RIGHT OF WAY TO V2.

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

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-005167
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	01	3 Station/Precinct	-
99	02	4 Date of Crash (mm dd yy)	01/20/22
100a	01	5 Day Of Week	THURSDAY
		6 Time (use 2400 hrs)	1618
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	--
		10 Crash Occurred On:	MADISON AVE
		Road Name	
		Dir	
		11 Speed Limit	40
		12 Route No.	0009
		Suffix	-
		13 Milepost	-
118a	25		
118b	-	18 Speed Limit	25
		☐ At Intersection With	
		☒ Feet ☐ Miles (14)	10
		☐ N ☐ E ☒ S ☐ W (15)	
		of:	11TH ST
		19 Ramp ☐ To ☐ From:	-
		17 Cross Road Name	-
		20 Route/Name	
		21 Latitude	40.100680
		22 Longitude	-74.218320
119a	99	☐ NB ☐ EB ☐ SB ☐ WB	
119b	-		

100b	04	23 Veh #	1
		24 Policy No.	BA0000002997BD
		25 NJ Ins. Code	149
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run	
101	02	26 Driver's First Name	HINDA
		Initial	-
		Last Name	GREENBERG
		29 Sex	F
102	01	27 Number & Street	109 ELM ST
103	01	28 City	LAKEWOOD
		State	NJ
		Zip	08701
104	2	30 Eyes	02
		DL Class	D
		Restrictions	-
		Endorsements	-
		31 State	NJ
105	02	32 Driver's License Number	G73063330058832
		33 DOB (mm dd yyyy)	08/03/1983
		34 Expires (mm yy)	08 22
106	-	35 Owner's First Name	-
		Initial	-
		Last Name	JAYS BUS SERVICE -
		☐ Same As Driver	
107	00	36 Number & Street	672 CROSS ST
108	31	37 City	LAKEWOOD
		State	NJ
		Zip	08701
109	00	38 Make	THO
		39 Model	BUS
		40 Color	YEL
		41 Year	2013
		42 Plate No.	H579S1
		43 State	NJ
110	02	44 VIN	4UZABRDU5DCBT1489
		45 Expires	08 22
111	00	46 Vehicle Removed To	-
112	09	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113	00	47 Authority	☐ Owner ☒ Driver ☐ Police
114	01	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	00		Type: ☐ Breath ☐ Blood ☐ Urine
116	01		Results: 0. - % ☐ Pending
		49 Hazardous Material	☒ None ☐ On Board ☐ Spill
			Hazard Class / Placard No.
117	01	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	-

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 - ☐ 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	-		

118a	25	118b	-
119a	99	119b	-
120a	01	120b	-
121a	00	121b	-
122	01	123	01
124	04	125	04
126a	26	126b	-
126c	-	126d	-
126e	26	127a	26
127b	00	127c	00
127d	00	127e	26
128	26	129	01
130	01	131	
132	11	133	01
134	00		

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	38	F	-	-	-	11	04	-	-	HINDA - GREENBERG - 109 ELM ST LAKEWOOD NJ 08701
B														
C														
D														

BUS SEATING ARRANGEMENT

1	MIRIAM	SICKER	
2	NECHMA	SICKER	
3	BATSHEVA	SILBERSTEIN	
4	BATSHEVA	SKOLNIK	
5	CHAYA	SKOLNIK	
6	SARA	SKOLNIK	C
7	HENNY	SOMMERFIELD	D
8	RACHELLI	SOMMERFIELD	
9	RIVKY	WEISS	
10	AHUVA	WEISS	
11	ALIZA	LAX	
12	YEHUDIS	ROKOWSKY	
13	ESTI	LAGOVIYER	
14	YITTI	STEIN	E
15	YOCHEVED	STEIN	
16	BAILE	ROKOWSKI	
17			
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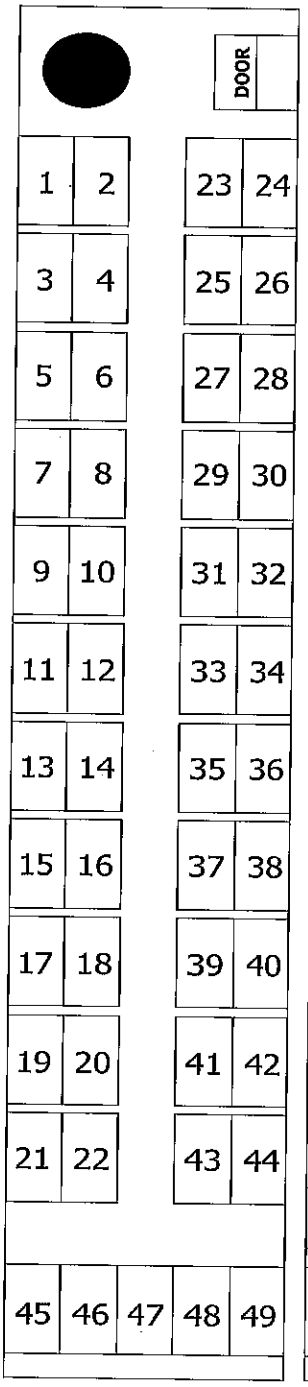
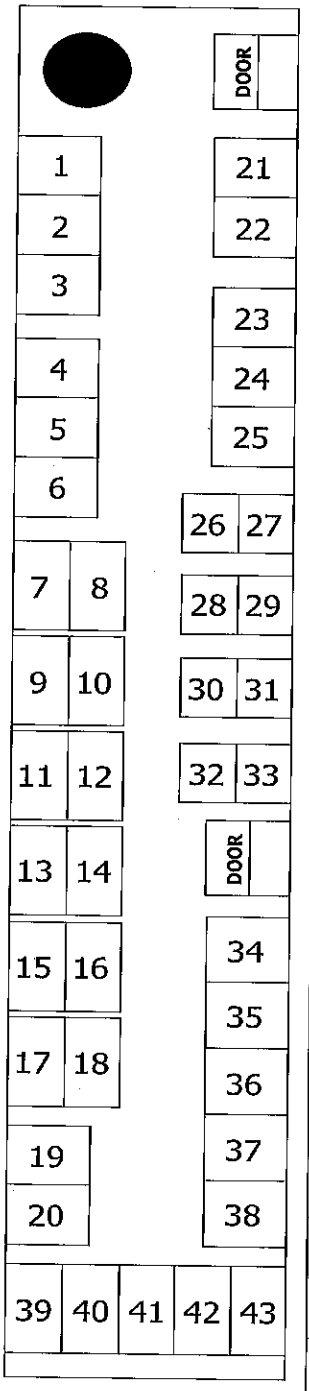
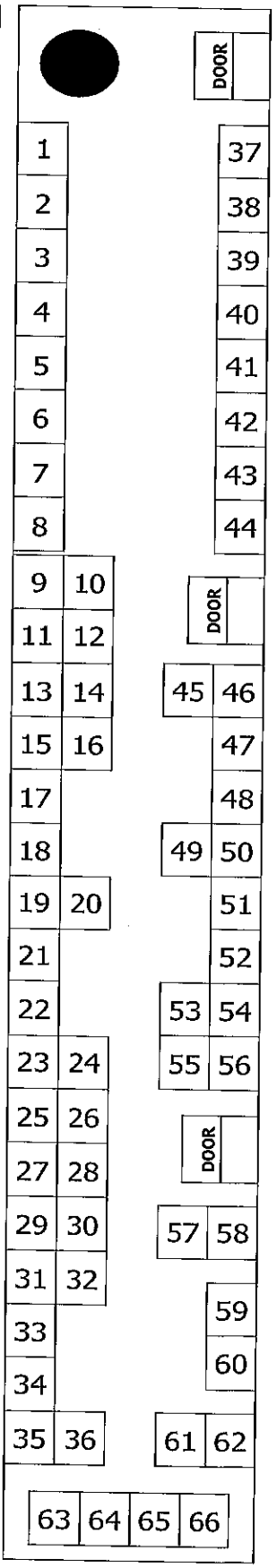
MCI-9, EAGLE & FLXIBLE



FLXIBLE TRANSIT & NOVA 06



VOLVO ARTIC



Rear

Police Agency LAKEWOOD TOWNSHIP POLICE DEPT.

New Jersey Police Crash Investigation Report

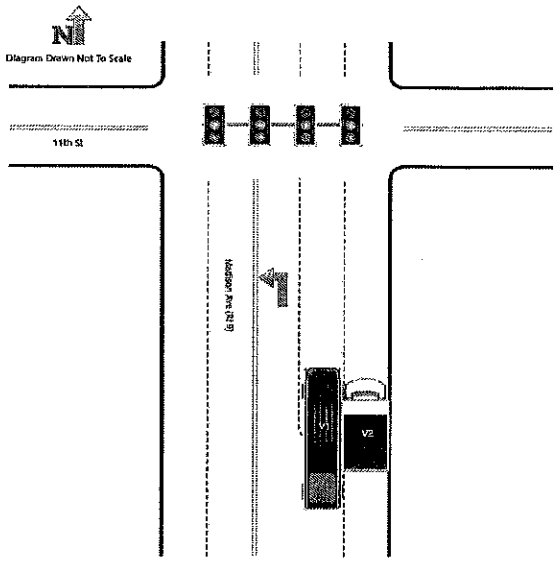
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-005167

(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 was travelling northbound on Madison Ave (Rt 9) in the inside lane. She stated that a white truck was travelling next to her on the outside lane heading northbound on Madison Ave, as well. She reported that the mirror of the white truck and the mirror of vehicle 1 brushed each other in transport. Vehicle 1 was Jay's School Bus #306 that contained children on board. There were no injuries reported at the scene of the accident. Vehicle 1 was able to drive. The white truck was not on scene upon my arrival. Driver of vehicle 1 was unable to provide any further information about the white truck.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
AMOROSO, A	415	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	22-005177
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	07	3 Station/Precinct	
99	02	4 Date of Crash (mm dd yy)	01/20/22
100a	01	5 Day Of Week	THURSDAY
		6 Time (use 2400 hrs)	1748
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	1
		10 Crash Occurred On:	MADISON AVE
		☒ At Intersection With	Road Name
		☐ Feet ☐ N ☐ E	of: 10TH ST
		☐ Miles ☐ S ☐ W	Dir
		11 Speed Limit	45
		12 Route No.	0009
		Suffix	
		13 Milepost	
		14 Speed Limit	35
		15	
		16	
		17 Cross Road Name	
		18 Ramp ☐ To ☐ From:	
		19 ☐ NB ☐ EB ☐ SB ☐ WB	
		20 Route/Name	
		21 Latitude	40.09973
		22 Longitude	-74.21815
118a	25		
118b	-		
119a	16		
119b	-		
120a	01		
120b	-		
121a	01		
121b	-		
122	01		
123	01		
124	04		
125	08		
126a	26		
126b	-		
126c	-		
126d	-		
126e	26		
127a	26		
127b	-		
127c	-		
127d	-		
127e	26		
128	26		
129	12		
130	12		
131	09		
132	09		
133	04		
134	04		

100b	04	23 Veh #	1
101	02	24 Policy No.	909 576 411
		25 NJ Ins. Code	012
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
102	01	26 Driver's First Name	BRIAN
		Initial	C
		Last Name	WALKER -
		29 Sex	M
103	01	27 Number & Street	4 BOCK BLVD
104	2	28 City	HOWELL
		State	NJ
		Zip	07731
		30 Eyes	2
		DL Class	D
		Restrictions	-
		Endorsements	-
		31 State	NJ
105	03	32 Driver's License Number	W02830966305752
		33 DOB (mm dd yyyy)	05/07/1975
		34 Expires (mm yy)	05 25
106	-	35 Owner's ☐ Same As Driver	First Name NICOLE
		Initial	M
		Last Name	JACKSON-WALKER -
107	-	36 Number & Street	4 BOCK BOULEVARD
108	01	37 City	HOWELL
		State	NJ
		Zip	07731
109	01	38 Make	MERZ
		39 Model	C30
		40 Color	1
		41 Year	2019
		42 Plate No.	C16PDJ
		43 State	NJ
110	01	44 VIN	55SWF8EB5KU305692
		45 Expires	09 22
111	01	46 Vehicle Removed To	FREEDOM TOWING
112	-	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
113	-	47 Authority	☐ Owner ☒ Driver ☐ Police
114	-	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	-		Type: ☐ Breath ☐ Blood ☐ Urine
116	01		Results: 0. - % ☐ Pending
		49 Hazardous Material	☒ None ☐ On Board ☐ Spill
			Hazard Class / Placard No.
117	04	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	

53 Veh #	2	54 Policy No.	603492872 206 1
		55 NJ Ins. Code	884
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	CHAVA	Initial	-
		Last Name	ABECASIS -
		59 Sex	F
57 Number & Street	131 IRIS RD		
58 City	LAKEWOOD		
State	NJ		
Zip	08701		
60 Eyes	2		
DL Class	D		
Restrictions	-		
Endorsements	-		
61 State	NJ		
62 Driver's License Number	A10171220054042		
63 DOB (mm dd yyyy)	04/07/2004		
64 Expires (mm yy)	04 25		
65 Owner's ☐ Same As Driver	First Name YOSEF	Initial -	Last Name ABECASIS -
66 Number & Street	131 IRIS RD		
67 City	LAKEWOOD		
State	NJ		
Zip	08701		
68 Make	JAGU		
69 Model	XF		
70 Color	WHI		
71 Year	2013		
72 Plate No.	F90PNW		
73 State	NJ		
74 VIN	SAJWJ0EF9D8U04900		
75 Expires	01 23		
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 ☐ 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		N/A	2	39:4-144	1514A290640
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	03	46	M	08	04	01	11	11	01	-	BRIAN C WALKER - 4 BOCK BLVD HOWELL NJ 07731
B	2	01	01	05	17	F	-	-	-	11	11	02	-	CHAVA - ABECASIS - 131 IRIS RD LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

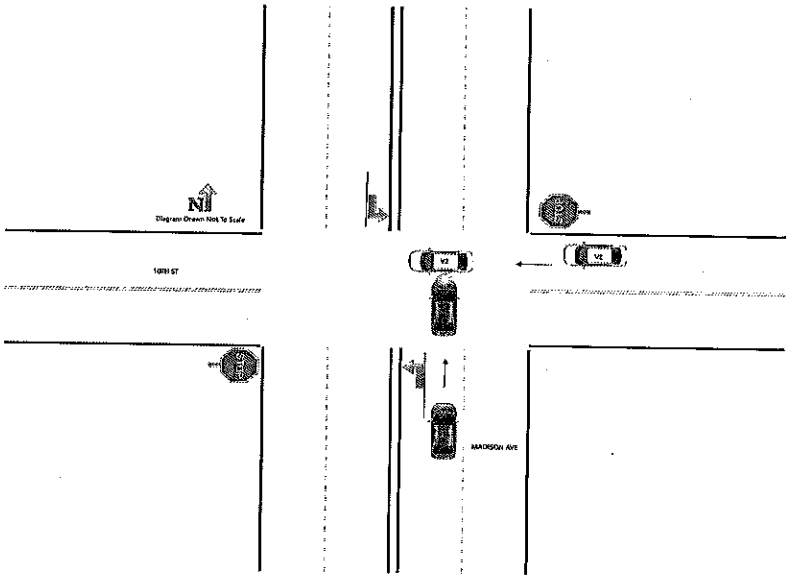
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-005177

(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 travelling North on Madison Avenue going straight ahead. Vehicle #2 was travelling West on 10th Street approaching a stop sign. As Vehicle #1 was crossing the intersection, Vehicle #2 also proceeded forward and the two vehicles crashed at the intersection. Vehicle #1 sustained heavy front end damage with front airbag deployment and was towed by Freedom towing. Vehicle #2 sustained dents and scratches to the middle driver side of the vehicle with airbag deployment and was towed by Moishy's towing. Driver 1 sustained a laceration to his thumb but declined medical attention.

Driver 1 stated he was travelling straight ahead on Madison Avenue. As he was crossing the intersection, his vehicle was struck by Vehicle #2.

Driver 2 stated she approached the stop sign and made a complete stop. She awaited for traffic to clear and there was no one in sight. As she was crossing the intersection, Vehicle #1 came down at a high rate of speed.

It should be noted when travelling at this intersection on 10th street, there are signs posted between the hours of 7am and 7pm, right hand only turns are permitted.

My investigation finds Vehicle #2 to be at fault for failing to stop at a stop sign. She was also issued a summons for failing to stop.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MCAVOY M	354	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	1 Case Number	22-005184
97	01	2 Police Dept of	LAKEWOOD TOWNSHIP P
		Code	01
98	07	3 Station/Precinct	-
99	09	4 Date of Crash (mm dd yy)	01/20/22
100a	01	5 Day Of Week	THURSDAY
		6 Time (use 2400 hrs)	1814
		7 Municipality Code	1514
		8 Total Killed	--
		9 Total Injured	--
		10 Crash Occurred On	231 MAIN ST
		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:	-
		19 Ramp ☐ To ☐ From:	-
		17 Cross Road Name	-
		☐ NB ☐ EB ☐ SB ☐ WB	
		20 Route/Name	
		21 Latitude	40.09063
		22 Longitude	-74.21330
118a	10		
118b	-		
119a	25		
119b	-		
120a	01		
120b	-		
121a	01		
121b	-		
122	13		
123	08		
124	11		
125	11		
126a	26		
126b	-		
126c	-		
126d	-		
126e	26		
127a	26		
127b	-		
127c	-		
127d	-		
127e	26		
128	26		
129	09		
130	09		
131	01		
132	01		
133	03		
134	03		

100b	04	23 Veh #	1
101	02	24 Policy No.	4398281016
		25 NJ Ins. Code	148
		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
102	01	26 Driver's First Name	NADIA
		Initial	R
		Last Name	CHOUEKA
		29 Sex	F
103	01	27 Number & Street	10 BRIDLE DR
104	2	28 City	W LONG BRANCH
		State	NJ
		Zip	07764
		30 Eyes	2
		DL Class	A
		Restrictions	-
		Endorsements	-
		31 State	NJ
105	08	32 Driver's License Number	C36275767953892
		33 DOB (mm dd yyyy)	03/26/1989
		34 Expires (mm yy)	03 23
106	-	35 Owner's ☒ Same As Driver	NADIA R CHOUEKA -
107	-	36 Number & Street	10 BRIDLE DR
108	04	37 City	W LONG BRANCH
		State	NJ
		Zip	07764
109	01	38 Make	ACUR
		39 Model	RDX
		40 Color	WHI
		41 Year	2018
		42 Plate No.	G83JYU
		43 State	NJ
110	01	44 VIN	5J8TB4H30JL023499
		45 Expires	05 21
111	01	46 Vehicle Removed To	-
112	-	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
113	-	47 Authority	☐ Owner ☐ Driver ☒ Police
114	-	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
115	-		Type: ☐ Breath ☐ Blood ☐ Urine
			Results: 0. - % ☐ Pending
		49 Hazardous Material	☒ None ☐ On Board ☐ Spill
			Hazard Class - Placard No. -
116	03	50 Carrier No.	☐ USDOT - ☒ None
117	01		☐ 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 #	2	121a	01
54 Policy No.	939 692 908	120a	01
55 NJ Ins. Code	054	120b	-
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run			
56 Driver's First Name	DINA		
Initial	-		
Last Name	KROHN		
59 Sex	F		
57 Number & Street	26 BIRCH ST		
58 City	LAKEWOOD		
State	NJ		
Zip	08701		
60 Eyes	5		
DL Class	D		
Restrictions	-		
Endorsements	-		
61 State	NJ		
62 Driver's License Number	K75291690055005		
63 DOB (mm dd yyyy)	05/31/2000		
64 Expires (mm yy)	05 22		
65 Owner's ☐ Same As Driver	SIMCHA Z KROHN -		
66 Number & Street	26 BIRCH ST		
67 City	LAKEWOOD		
State	NJ		
Zip	08701		
68 Make	HOND		
69 Model	ACC		
70 Color	GRY		
71 Year	2017		
72 Plate No.	H14PBB		
73 State	NJ		
74 VIN	1HGCR2F38HA287062		
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 - ☒ 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.
O1	39:3-4	291921	-		-
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	44	M	-	-	-	11	04	-	-	SIMCHA Z KROHN - 26 BIRCH ST LAKEWOOD NJ 08701
B	V2	01	01	05	21	F	-	-	-	11	04	-	-	DINA - KROHN - 26 BIRCH ST LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

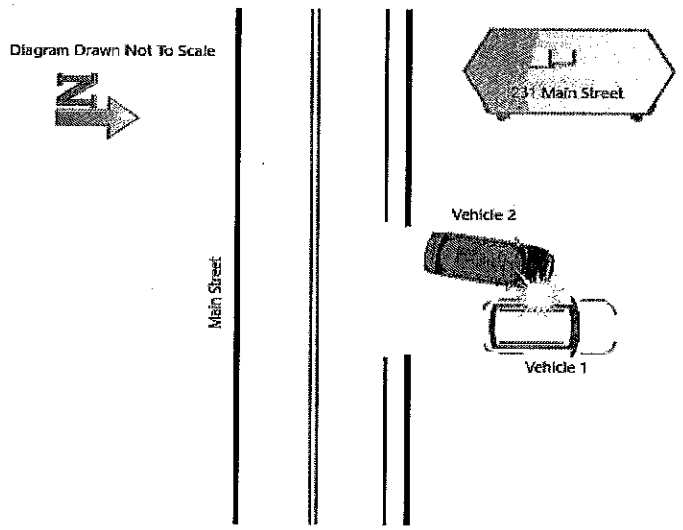
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-005184

(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 she pulled into the parking lot of 231 Main Street and since the parking lot was too congested, she began to reverse back towards Main Street to try and exit the parking lot. Driver 1 stated while she was reversing, Vehicle 2 was positioned behind her drivers side and caused them to crash. Vehicle 1 sustained damage to the drivers side rear door.

The driver of Vehicle 2 stated she pulled into the parking lot of 231 Main Street and then stopped her vehicle while waiting for the traffic ahead of her to move. As she was stopped she saw Vehicle 1 reversing towards her, however did not hit the horn thinking the driver of Vehicle 1 saw her. Vehicle 1 ended up backing into Vehicle 2. Vehicle 2 sustained damage to the Passengers side front bumper/headlight area.

No injuries were reported.

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

Vehicle 1 was issued a summons for unregistered vehicle and remained on private property until registered.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RUSK J	388	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	01
106	-
107	-
108	PCAI
109	PCAI
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	02

1 Case Number: 22-005185

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

3 Station/Precinct:

10 Crash Occurred On: PROSPECT ST — Road Name — Dir — 12 Route No. — Suffix — 13 Milepost: 0637

11 Speed Limit: 35

☐ At Intersection With — ☒ Feet ☐ Miles: 30 (14, 15, 16) — ☐ N ☒ E ☐ S ☐ W of: MAJESTIC WAY

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): 01/20/22 — 5 Day Of Week: THURSDAY — 6 Time (use 2400 hrs): 1819 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

21 Latitude: 40.07362 — 22 Longitude: -74.22362

118a	09
118b	-
119a	25
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	08
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	05
132	05
133	03
134	03

Vehicle 1

23 Veh #: 1 — 24 Policy No.: A052311988227512 — 25 NJ Ins. Code: 192

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

26 Driver's First Name: ESTHER — Initial: - — Last Name: GESTETNER — 29 Sex: F

27 Number & Street: 154 LIBERTY DR

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

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

32 Driver's License Number: G28332390051842 — 33 DOB (mm dd yyyy): 01/12/1984 — 34 Expires (mm yy): 01 25

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

36 Number & Street: 112 VINE STREET

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

38 Make: TOYT — 39 Model: SIE — 40 Color: GRY — 41 Year: 2016 — 42 Plate No.: W15LSZ — 43 State: NJ

44 VIN: 5TDKK3DC7GS727569 — 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.: 4226156059 — 55 NJ Ins. Code: 148

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

56 Driver's First Name: YISROEL — Initial: C — Last Name: GRUBER — 59 Sex: M

57 Number & Street: 5 EMPIRE LN

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

60 Eyes: 6 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: G76397906311816 — 63 DOB (mm dd yyyy): 11/20/1981 — 64 Expires (mm yy): 11 22

65 Owner's First Name: ☐ Same As Driver HADASSAH — Initial: - — Last Name: GRUBER

66 Number & Street: 5 EMPIRE LN

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

68 Make: TOYT — 69 Model: CAM — 70 Color: BLK — 71 Year: 2016 — 72 Plate No.: W969683 — 73 State: NJ

74 VIN: 4T1BF1FK9GU218085 — 75 Expires: 01 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	38	F	-	-	-	11	04	-	-	ESTHER - GESTETNER - 154 LIBERTY DR LAKEWOOD NJ 08701
B	01	06	01	05	2	F	-	-	-	05	05	-	-	FRAYDED - GESTETNER - 154 LIBERTY DR LAKEWOOD NJ 08701
C	02	01	01	05	40	M	-	-	-	11	04	-	-	YISROEL C GRUBER - 5 EMPIRE LN LAKEWOOD NJ 08701
D	02	03	01	05	14	M	-	-	-	11	04	-	-	AKIVA - GRUBER - 5 EMPIRE LN LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

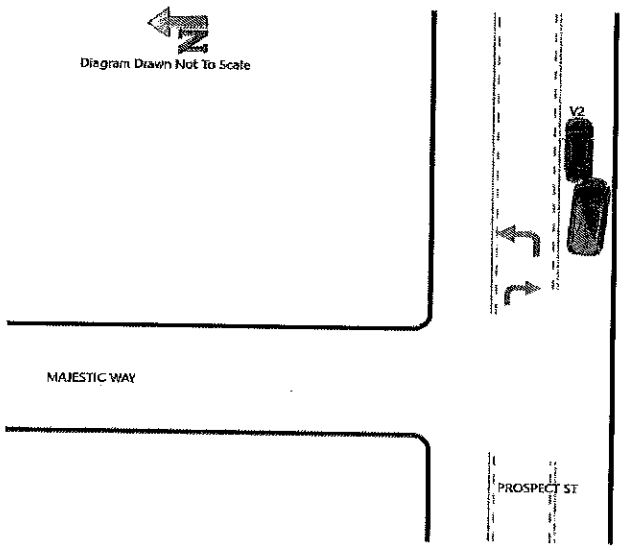
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: Case No: 22-005185

(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 #2 reported that he was traveling East on Prospect St. when he stopped in traffic due to a school bus that had stopped and activated its lights. As he was stopped his vehicle was struck by vehicle #1.

The driver of vehicle #1 indicated that there was a school bus and that once vehicle #1 had stopped she attempted to stop her vehicle but was unable to do so before striking it.

There were no injuries reported at the scene of the crash. Vehicle #1 sustained damage to the front driver side of the bumper, fender, hood, and headlight. Vehicle #2 sustained damage to the passenger side of the rear bumper and the passenger side tail light. Both were driven from the scene.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
KOWALESKI S	319	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	01
99	07
100a	01
100b	04
101	02
102	02
103	05
104	1
105	15
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	01
117	-

1 Case Number: 22-005150

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): 1507

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

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

☐ At Intersection With — Road Name: SPRUCE ST — 18 Speed Limit: 25

☒ Feet ☐ Miles — 14: 300 — 15 — ☒ N ☐ E ☐ S ☐ W — 16 of:

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

21 Latitude: 40.071320 — 22 Longitude: -74.206980

118a	53
118b	-
119a	-
119b	-
120a	01
120b	-
121a	-
121b	-
122	01
123	-
124	11
125	-
126a	39
126b	-
126c	-
126d	-
126e	39
127a	-
127b	-
127c	-
127d	-
127e	-
128	39
129	01
130	01
131	-
132	-
133	04
134	-

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 5129J 007676 — 25 NJ Ins. Code: 917

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

26 Driver's First Name: DOVID — Initial: L — Last Name: SCHWARZMER — 29 Sex: M

27 Number & Street: 23 SHILO RD

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

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

32 Driver's License Number: S15701807302932 — 33 DOB (mm dd yyyy): 02/18/1993 — 34 Expires (mm yy): 02 25

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

36 Number & Street: 23 SHILO RD

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

38 Make: ACUR — 39 Model: TLX — 40 Color: BLK — 41 Year: 2021 — 42 Plate No.: G13NUR — 43 State: NJ

44 VIN: 19UUB5F32MA008936 — 45 Expires: 05 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 #: - — 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	01	01	01	05	28	M	-	-	-	11	04	-	-	DOVID L SCHWARZMER - 23 SHILO RD LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

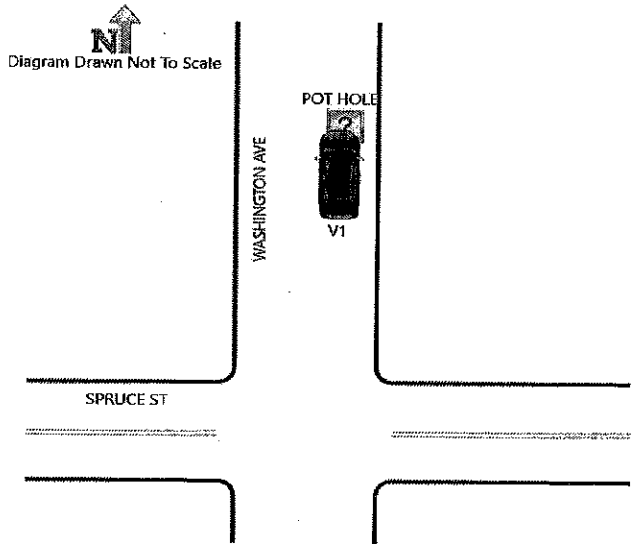
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-005150

(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 he was traveling north on Washington Ave. V1 struck a large pot hole in its lane of travel flattening the front passenger tire.

Based on my investigation, the crash was caused by V1 striking the pot hole in its lane of travel.

Lakewood DPW was contacted to repair the pot hole.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	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 05 | 100a 01 | 100b 04 | 101 02 | 102 01 | 103 01 | 104 1 | 105 12 | 106 - | 107 - | 108 05 | 109 - | 110 01 | 111 - | 112 - | 113 - | 114 - | 115 - | 116 02 | 117 -

1 Case Number: 22-005038

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): 0237

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: RIDGE AVE

☐ At Intersection With — Road Name

☒ Feet ☐ Miles — 14: 500 — 15

☐ N ☐ E ☐ S ☒ W — 16

of: NEW HAMPSHIRE AVE

11 Speed Limit: 40

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

18 Speed Limit: 40

19 Ramp ☐ To ☐ From: -

17 Cross Road Name: -

20 Route/Name

21 Latitude: -

22 Longitude: -

☐ NB ☐ EB ☐ SB ☐ WB

118a 57 | 118b 25 | 119a - | 119b - | 120a 01 | 120b 01 | 121a - | 121b - | 122 01 | 123 - | 124 04 | 125 - | 126a 24 | 126b - | 126c - | 126d - | 126e 24 | 127a - | 127b - | 127c - | 127d - | 127e - | 128 24 | 129 12 | 130 12 | 131 - | 132 - | 133 03 | 134 -

23 Veh #: 1

24 Policy No.: F10154093-8

25 NJ Ins. Code: 426

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

26 Driver's First Name: PASQUALE — Initial: M — Last Name: COLANGELO — 29 Sex: M

27 Number & Street: 9 MIRADOR COURT

28 City: TOMS RIVER — State: NJ — Zip: 08757

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

31 State: NJ

32 Driver's License Number: C62136167410572

33 DOB (mm dd yyyy): 10/14/1957

34 Expires (mm yy): 10 23

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

36 Number & Street: 9 MIRADOR COURT

37 City: TOMS RIVER — State: NJ — Zip: 08757

38 Make: TOYT — 39 Model: TAC — 40 Color: RD — 41 Year: 2020 — 42 Plate No.: E55MMG — 43 State: NJ

44 VIN: 3TYRX5GN7LT000424

45 Expires: 05 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: -

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	V1	01	01	05	64	M	-	-	-	11	04	-	-	PASQUALE M COLANGELO - 9 MIRADOR COURT TOMS RIVER NJ 08757
B														
C														
D														

New Jersey Police Crash Investigation Report

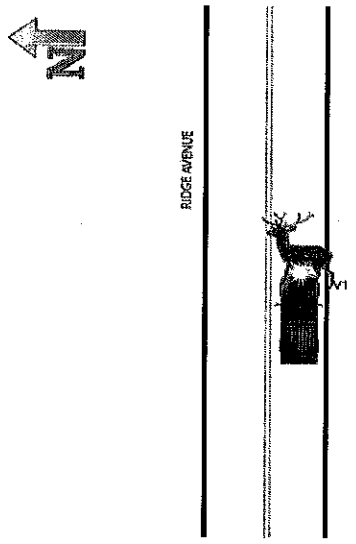
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-005038

(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 East on Ridge Avenue when a deer jumped out from the woods in front of his vehicle.

Driver 1 stated the deer jumped out from the South side into his lane of travel and he had no time to avoid contact.

I observed moderate damage to the front of Vehicle 1 with the driver side headlamp and front grill missing.

There were no reported injuries on scene. The deer had expired upon arrival to the scene and was safely removed from the roadway.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
STEFANELLI E	364	SGT. M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

96	05	118a	25
97	01	118b	-
98	01	119a	02
99	05	119b	-
100a	01	120a	01
100b	05	120b	01
101	02	121a	01
102	02	121b	01
103	02	122	08
104	2	123	07
105	01	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	02	127e	26
117	02	128	26
		129	06
		130	06
		131	12
		132	12
		133	02
		134	02

1 Case Number: 22-005093

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

3 Station/Precinct: -

10 Crash Occurred On: CENTRAL AVE

☐ At Intersection With — Road Name — Dir

☒ Feet ☐ Miles — 14 — 15 — 16

☐ N ☐ E ☐ S ☒ W of: CARANETTA DR

11 Speed Limit: 35

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: 40.086360 — 22 Longitude: -74.21587

4 Date of Crash (mm dd yy): 01/20/22 — 5 Day Of Week: THURSDAY — 6 Time (use 2400 hrs): 0900 — 7 Municipality Code: 1514 — 8 Total Killed: -- — 9 Total Injured: --

Vehicle 1

23 Veh #: 1 — 24 Policy No.: 939 721 224 — 25 NJ Ins. Code: 054

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

26 Driver's First Name: DOMINICK — Initial: J — Last Name: DANGELO — 29 Sex: M

27 Number & Street: 12 HEATH LANE

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

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

32 Driver's License Number: D04221727108482 — 33 DOB (mm dd yyyy): 08/18/1948 — 34 Expires (mm yy): 08 22

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

36 Number & Street: 12 HEATH LANE

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

38 Make: CADI — 39 Model: CT5 — 40 Color: BLK — 41 Year: 2021 — 42 Plate No.: W85PHN — 43 State: NJ

44 VIN: 1G6DV5RW3M0143198 — 45 Expires: 11 25

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.: 4248-12-42-42 — 55 NJ Ins. Code: 100

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

56 Driver's First Name: YEHUDIS — Initial: P — Last Name: MERLING — 59 Sex: F

57 Number & Street: 41 CARASALJO DR

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

60 Eyes: 6 — DL Class: D — Restrictions: - — Endorsements: - — 61 State: NJ

62 Driver's License Number: M27087897761856 — 63 DOB (mm dd yyyy): 11/07/1985 — 64 Expires (mm yy): 11 25

65 Owner's ☐ Same As Driver — First Name: YAKOV — Initial: - — Last Name: MERLING

66 Number & Street: 41 CARASALJO DR

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

68 Make: VOLV — 69 Model: XC9 - XC — 70 Color: BLK — 71 Year: 2021 — 72 Plate No.: G35MTM — 73 State: NJ

74 VIN: YV4A22PK2M1680305 — 75 Expires: 09 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.
1		-	2		-

Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
1		-	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	V1	01	01	-	73	M	-	-	-	11	04	-	-	DOMINICK J DANGELO - 12 HEATH LANE JACKSON NJ 08527
B	V2	01	01	-	36	F	-	-	-	11	04	-	-	YEHUDIS P MERLING - 41 CARASALJO DR LAKEWOOD NJ 08701
C	V2	04	01	-	4	F	-	-	-	07	07	-	-	SARAH - MERLING - 41 CARASALJO DR LAKEWOOD NJ 08701
D	V2	05	01	-	2	F	-	-	-	05	05	-	-	RIVKA - MERLING - 41 CARASALJO DR LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

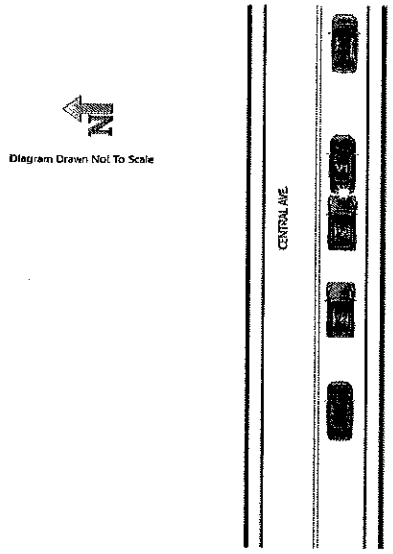
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-005093

(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 he was stopped in traffic on Central Ave. eastbound when his vehicle was struck by vehicle #2. The driver of vehicle #2 stated she was traveling behind vehicle #1, but for a moment was not paying attention to the roadway, and did not observe vehicle #1 to be stopped which resulted in the collision. No injuries were reported while on scene. -end-

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ALLEN W	287	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	02
103	03
104	2
105	03
106	-
107	-
108	01
109	01
110	01
111	01
112	-
113	-
114	-
115	-
116	02
117	01

1 Case Number: 22-005129

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): 1216

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: PINE STREET — Road Name

☒ At Intersection With ☐ Feet ☐ Miles (14 15) — ☐ N ☐ E ☐ S ☐ W (16) of: SIMS AVENUE — Road Name

11 Speed Limit: 35

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

16 Speed Limit: 25

17 Cross Road Name: -

19 Ramp ☐ To ☐ From

20 Route/Name: ☐ NB ☐ EB ☐ SB ☐ WB

21 Latitude: 40.07094

22 Longitude: -74.19539

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

Vehicle 1

23 Veh #: 1

24 Policy No.: 192009614

25 NJ Ins. Code: 170

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

26 Driver's First Name: YEHUDA — Initial: A — Last Name: SCHWARZ — 29 Sex: M

27 Number & Street: 209 HADASSAH LN

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

30 Eyes: 4 — DL Class: D — Restrictions: - — Endorsements: -

31 State: NJ

32 Driver's License Number: S15707896105824

33 DOB (mm dd yyyy): 05/17/1982

34 Expires (mm yy): 05 19

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

36 Number & Street: 209 HADASSAH LN

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

38 Make: TOYT — 39 Model: SIE — 40 Color: WHI — 41 Year: 2014 — 42 Plate No.: N13LUK — 43 State: NJ

44 VIN: 5TDKK3DC3ES526412

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.: 939 900 595

55 NJ Ins. Code: 054

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

56 Driver's First Name: AARON — Initial: K — Last Name: JOHNSON — 59 Sex: M

57 Number & Street: 1700 ROUTE 37 WEST 107 05

58 City: TOMS RIVER — State: NJ — Zip: 08757

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

61 State: CA

62 Driver's License Number: F5411780

63 DOB (mm dd yyyy): 12/17/1992

64 Expires (mm yy): 12 23

65 Owner's ☐ Same As Driver — First Name: AARON — Initial: K — Last Name: JOHNSON

66 Number & Street: 1700 ROUTE 37 WEST 107 05

67 City: TOMS RIVER — State: NJ — Zip: 08757

68 Make: BUIC — 69 Model: CEN — 70 Color: BGE — 71 Year: 2001 — 72 Plate No.: R38MUX — 73 State: NJ

74 VIN: 2G4WS52J411261365

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	01	01	01	05	39	M	-	-	-	11	04	-	-	YEHUDA A SCHWARZ - 209 HADASSAH LN LAKEWOOD NJ 08701
B	02	01	01	05	29	M	-	-	-	11	04	-	-	AARON K JOHNSON - 1700 ROUTE 37 WEST 1C TOMS RIVER NJ 08757
C														
D														

New Jersey Police Crash Investigation Report

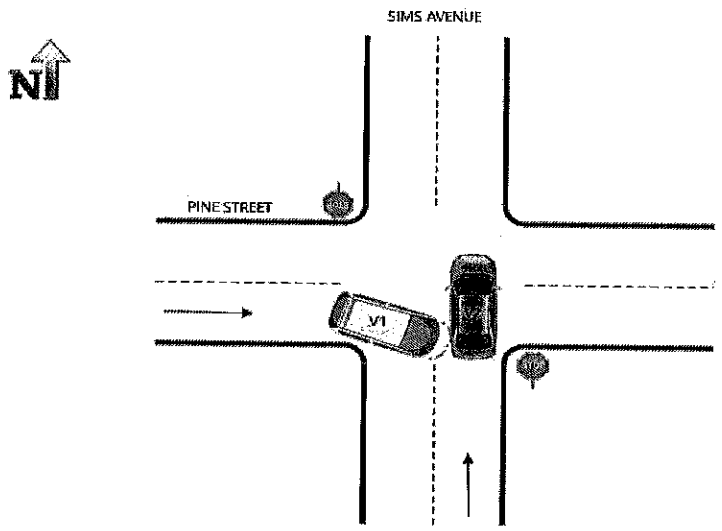
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-005129

(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 STATED HE WAS TRAVELING EAST ON PINE STREET WHEN VEHICLE 2 WENT THROUGH A STOP SIGN AT THE INTERSECTION WITH SIMS AVENUE. UNABLE TO AVOID CONTACT, HE CRASHED VEHCILE 1 INTO THE REAR DRIVERS SIDE OF VEHICLE 2.

DRIVER OF VEHICLE 2 STATED HE WAS STOPPED AT A STOP SIGN ON SIMS AVENUE FACING NORTH. ONCE STOPPED, HE LOOKED BOTH WAYS AND THEN PROCEEDED FORWARD. AS WAS CROSSING THROUGH THE INTERSECTTION HE WAS STRUCK BY VEHICLE 1.

THIS INVESTIGATION DETERMINED THAT THE DRIVER OF VEHICLE 2 FAILED TO STOP OR YEILD AT A STOP SIGN.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SEUNATH K	284	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	02
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	01
117	01

1 Case Number: 22-005136

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): 1345

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: RIVER AVE

☒ At Intersection With — Road Name — Dir

☐ Feet ☐ N ☐ E of: HURLEY AVE

☐ Miles ☐ S ☐ W

14 15 16

11 Speed Limit: 40

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

118a	25
118b	-
119a	09
119b	-
120a	01
120b	-
121a	01
121b	-
122	07
123	01
124	03
125	03
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	03

Vehicle 1

23 Veh #: 1

24 Policy No.: 939942582

25 NJ Ins. Code: 054

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

26 Driver's First Name: TOBY — Initial: - — Last Name: ALPERT — 29 Sex: F

27 Number & Street: 412 4TH ST

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

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

31 State: NJ

32 Driver's License Number: A55897450056872

33 DOB (mm dd yyyy): 06/28/1987

34 Expires (mm yy): 06 25

35 Owner's First Name: AVROHOM — Initial: Y — Last Name: ALPERT

☐ Same As Driver

36 Number & Street: 412 4TH ST

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

38 Make: HOND — 39 Model: ODY — 40 Color: BLK — 41 Year: 2022 — 42 Plate No.: X76NSS — 43 State: NJ

44 VIN: 5FNRL6H79NB010697

45 Expires: 04 25

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.: 4423-48-26-13

55 NJ Ins. Code: 148

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

56 Driver's First Name: ARYEH — Initial: Y — Last Name: ANTEBI — 59 Sex: M

57 Number & Street: 12 5TH ST

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

60 Eyes: 06 — DL Class: A — Restrictions: - — Endorsements: -

61 State: NJ

62 Driver's License Number: A59780628806836

63 DOB (mm dd yyyy): 06/20/1983

64 Expires (mm yy): 06 25

65 Owner's First Name: ARYEH — Initial: Y — Last Name: ANTEBI

☐ Same As Driver

66 Number & Street: 12 5TH ST

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

68 Make: TOYT — 69 Model: SIE — 70 Color: GRY — 71 Year: 2015 — 72 Plate No.: W60PGV — 73 State: NJ

74 VIN: 5TDZK3DC1FS635919

75 Expires: 11 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	1	01	01	-	34	F	-	-	-	11	04	-	-	TOBY - ALPERT - 412 4TH ST LAKEWOOD NJ 08701
B	2	01	01	-	38	M	-	-	-	11	04	-	-	ARYEH Y ANTEBI - 12 5TH ST LAKEWOOD NJ 08701
C	2	03	01	-	00	F	-	-	-	11	04	-	-	RUTH ANTEBI 12 5TH ST LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

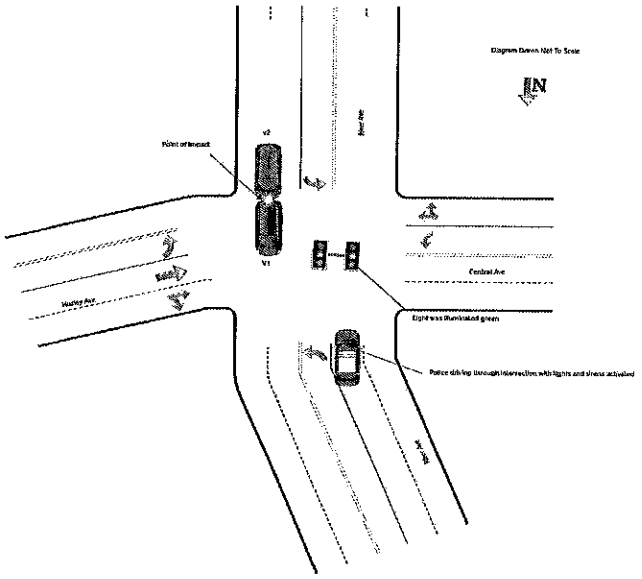
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-005136

(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 struck vehicle 1 in the rear on River Ave while the police car, which was traveling southbound on River Ave drove through the intersection with the lights and sirens activated.

I spoke with driver of vehicle 1 and she stated while traveling north bound on River Ave she stopped her vehicle due to the police car traveling through intersection with lights and sirens on. When she stopped her vehicle, she was struck by vehicle 2 in the rear.

Officer Yahr spoke with the driver of vehicle 2. Driver of vehicle 2 stated vehicle 1 stopped in front of him on River Ave and when he tried to stop his vehicle, he slid into the rear of vehicle 1. It should be noted that the roads were wet due to rain and snow throughout the day.

In conclusion, I determined that the driver of vehicle 2 is at fault due to following too closely to vehicle 1.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CARRINGTON K	829	MY	329	☐ Pending ☒ Complete