

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☐ Reportable ☒ Non-Reportable ☐ Change Report					
05	1 Case Number	22-010987		10 Crash Occurred On:	NEW HAMPSHIRE AVE	11 Speed Limit	50	0623	09
01	2 Police Dept of	Code		At Intersection With	Road Name	Dir	12 Route No.	Suffix	13 Milepost
01	LAKEWOOD TOWNSHIP	F01		☒ Feet	☒ N ☐ E of:	OCEAN AVE	18 Speed Limit	35	
01	3 Station/Precinct	15		☐ Miles	☐ S ☐ W	19 To	17 Cross Road Name	☐ NB ☐ EB	25
05	4 Date of Crash	5 Day Of Week	6 Time (usa 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured	21 Latitude	22 Longitude	
01	02/10/22	THURSDAY	1623	1514	--	--	40.08558	-74.17692	
04	23 Veh #	24 Policy No.	25 NJ Ins. Code	53 Veh #	54 Policy No.	55 NJ Ins. Code			
01	1	TCA00001007158	632	2	911611994	134			
02	26 Driver's First Name	Initial	Last Name	29 Sex	56 Driver's First Name	Initial	Last Name	59 Sex	
01	BASYA	H	LEFKOWITZ	- F	FERNANDO	-	MORALES-GARCIA	- M	
01	27 Number & Street				57 Number & Street				
01	13 ABRAHAMS WAY				50 HOLLY ST				
01	28 City	State	Zip	58 City	State	Zip			
01	LAKEWOOD	NJ	08701	LAKEWOOD	NJ	08701			
02	30 Eyes	DL Class	Restrictions	Endorsements	31 State	60 Eyes	DL Class	Restrictions	Endorsements
01	5	D	-	-	NJ	2	D	-	-
01	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	L22100786860995	10/14/1999	10 25	M65542620007962	07/12/1996	07 22			
01	35 Owner's First Name	Initial	Last Name	65 Owner's First Name	Initial	Last Name			
01	BINYOMIN	Y	LEFKOWITZ	FERNANDO	-	MORALES-GARCIA			
01	36 Number & Street				66 Number & Street				
01	13 ABRAHAMS WAY				50 HOLLY ST				
01	37 City	State	Zip	67 City	State	Zip			
01	LAKEWOOD	NJ	08701	LAKEWOOD	NJ	08701			
01	38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State	68 Make	69 Model	70 Color
01	TOYT	CAM	GRY	2017	C22NAM	NJ	TOYT	COR	RD
01	44 VIN	45 Expires			74 VIN	75 Expires			
01	4T1BF1FK6HU268606	12 22			2T1BURHE1EC207317	01 23			
01	46 Vehicle Removed To				76 Vehicle Removed To				
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				
01	☐ Left At Scene ☐ Towed Impounded				☐ Left At Scene ☐ Towed Impounded				
01	47 Authority				77 Authority				
01	☐ Owner ☒ Driver ☐ Police				☐ Owner ☒ Driver ☐ Police				
01	48 Alcohol/Drug Test				78 Alcohol/Drug Test				
01	Given: ☒ No ☐ Yes ☐ Refused				Given: ☒ No ☐ Yes ☐ Refused				
01	Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				
01	Results: 0. - % ☐ Pending				Results: 0. - % ☐ Pending				
01	50 Carrier No.				80 Carrier No.				
01	☐ USDOT ☒ None				☐ USDOT ☒ None				
01	☐ MC/MX				☐ MC/MX				
01	51 GVWR/GCWR				81 GVWR/GCWR				
01	☒ Weight <= 10,000 lbs				☒ Weight <= 10,000 lbs				
01	☐ Weight 10,001-26,000 lbs				☐ Weight 10,001-26,000 lbs				
01	☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs				
01	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity				
01	Number & Street				Number & Street				
01	City	State	Zip	City	State	Zip			
01	135 Damage To Other Property								
01	☐ Yes (If Yes, describe) ☒ No								
01	Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.			
01	Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.			
01	Names & Addresses of Occupants - If Deceased, Date & Time of Death								
01	83	84	85	86	87	88	89	90	91
01	1	01	01	05	22	F	-	-	-
01	11	04	-	-	-	-	-	-	-
01	BASYA H LEFKOWITZ								
01	13 ABRAHAMS WAY LAKEWOOD NJ 08701								
01	2	01	01	05	25	M	-	-	-
01	11	04	-	-	-	-	-	-	-
01	FERNANDO - MORALES-GARCIA								
01	50 HOLLY ST LAKEWOOD NJ 08701								

New Jersey Police Crash Investigation Report

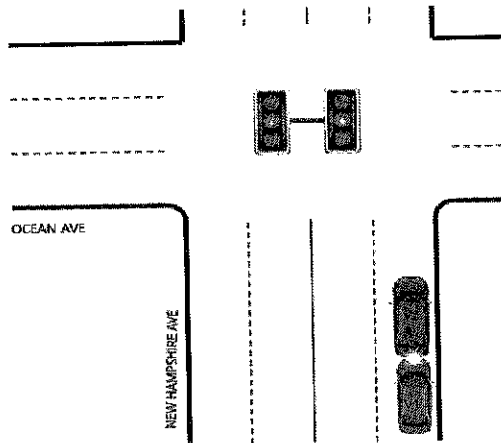
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-010987**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)


 Diagram Drawn Not To Scale



145 Crash Description/Narrative

Driver 1 stated she was stopped in traffic on New Hampshire Ave and took her foot off the brake by accident real quick and lightly struck V2.

Driver 2 stated he was stopped in traffic at a red light on New Hampshire Ave and was suddenly struck from behind by V1.

Upon my arrival, I spoke with all parties involved in this accident. Driver 1 is at fault for following too closely. No injuries reported. Very minor damage occurred.

146 Officer's Signature
GIANOULIS J

147 Badge #
410

148 Reviewer
E. MIICK

Badge #
307

149 Case Status
☐ Pending ☒ Complete

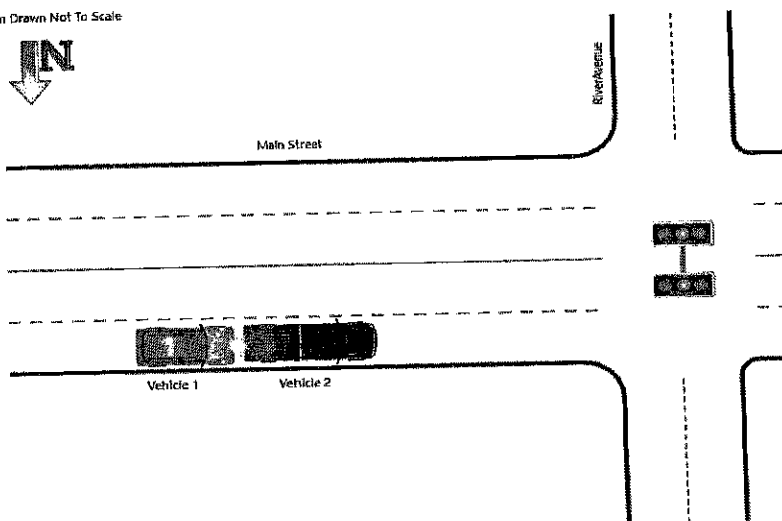
New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-010970

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L U N T A R Y	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)

Diagram Drawn Not To Scale



145 Crash Description/Narrative

The driver of Vehicle 1 stated she was driving west on Main Street and as she was stopping she softly bumped into Vehicle 2 which was directly in front of her causing the collision. Vehicle 1 sustained minor damage to the front bumper of the vehicle.

The driver of Vehicle 2 stated he was stopped in traffic facing west on Main Street when he felt the rear of his vehicle get bumped in to from Vehicle 1. Vehicle 2 sustained minor damage to the rear bumper of the vehicle.

No injuries were reported.

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

146 Officer's Signature

RUSK J

147 Badge #

388

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

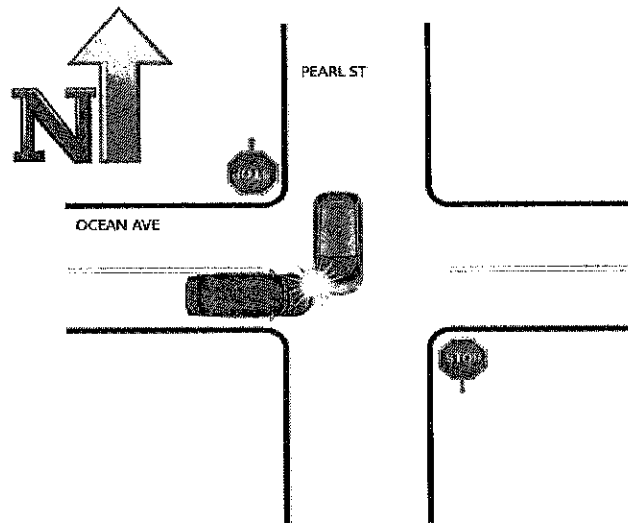
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **LAKEWOOD** Case No: **22-010901**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE #1 WAS TRAVELING EAST ON OCEAN AVE. GOING STRAIGHT AHEAD. VEHICLE #2 WAS TRAVELING SOUTH ON PEARL ST. AND STOPPED AT THE STOP SIGN. VEHICLE #2 ATTEMPTED TO CROSSOVER THE INTERSECTION FAILING TO YIELD TO VEHICLE #1 CAUSING BOTH VEHICLES TO COLLIDE CAUSING DAMAGE TO BOTH.

146 Officer's Signature

QUALIANO J

147 Badge #

260

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☐ Reportable ☒ Non-Reportable ☐ Change Report			
05	1 Case Number		10 Crash Occurred On: 7TH ST		11 Speed Limit 25		118a 25	
97	22-010893						118b -	
01	2 Police Dept of		☒ At Intersection With Road Name		12 Route No. Suffix 13 Milepost		119a -	
98	LAKEWOOD TOWNSHIP 01		☐ Feet ☐ N ☐ E of: CLIFTON AVE		18 Speed Limit 35		119b -	
01	3 Station/Precinct		☐ S ☐ W		17 Cross Road Name		119a 03	
99			14 15 16		19 Ramp To From: -		119b 04	
07	4 Date of Crash mm dd yy		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 0850		7 Municipality Code 1514	
100a	02/10/22				8 Total Killed --		9 Total Injured --	
01					21 Latitude 40.09704		22 Longitude -74.21554	
100b	23 Veh #		24 Policy No. KPP1026288		25 NJ Ins. Code		01	
04	1						120b -	
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run							
02	26 Driver's First Name Initial Last Name		29 Sex		53 Veh #		54 Policy No. 6044611959	
102	JOSEPH - HERSKOVITS -		M		55 NJ Ins. Code 639		121a 01	
02	27 Number & Street				56 Driver's First Name Initial Last Name		59 Sex	
103	606 MONMOUTH AVE				ALEXA C PAZ-FLORES -		F	
01	28 City		State Zip		57 Number & Street		121b -	
104	LAKEWOOD NJ 08701				235 WOODLAKE MANOR DR			
2	30 Eyes		DL Class		Restrictions		Endorsements	
105	6		D				NJ	
03	32 Driver's License Number		33 DOB mm dd yyyy		34 Expires mm yy		61 State	
106	H27674100002626		02/07/1962		11 21		NJ	
03	35 Owner's First Name Initial Last Name		62 Driver's License Number		63 DOB mm dd yyyy		64 Expires mm yy	
107	36 Number & Street		2 KENT RD		P09790196353892		03/28/1989 03 25	
04	37 City		State Zip		65 Owner's First Name Initial Last Name		124 04	
108	LAKEWOOD NJ 08701				ALEXA C PAZ-FLORES -		125 08	
09	38 Make		39 Model		40 Color		41 Year	
109	DODG		JOU		GRY		2016	
01	42 Plate No.		43 State		44 VIN		45 Expires	
110	L16HWW NJ				3C4PDDBG9GT154773		05 21	
01	46 Vehicle Removed To		75 Vehicle Removed To		76 VIN		77 Expires	
111	47 Authority		78 Authority		79 Hazardous Material		80 Carrier No.	
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ None ☐ On Board ☐ Spill		☐ USDOT ☒ None	
113	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded		Given: ☒ No ☐ Yes ☐ Refused		☐ MC/MX ☐ None	
114	48 Alcohol/Drug Test		49 Hazardous Material		Type: ☐ Breath ☐ Blood ☐ Urine		81 GVWR/GCWR	
115	Results: 0. - % ☐ Pending		Hazard Class Placard No.		Results: 0. - % ☐ Pending		☐ Weight <= 10,000 lbs	
116	50 Carrier No.		51 GVWR/GCWR		82 Motor Carrier or Government Entity		☐ Weight 10,001-26,000 lbs	
03	☐ USDOT ☒ None		☐ Weight <= 10,000 lbs		Number & Street		☐ Weight >= 26,001 lbs	
04	☐ MC/MX ☐ None		☐ Weight 10,001-26,000 lbs		City		☐ Weight >= 26,001 lbs	
117	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity		State		Zip	
118	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		137 Summons. No.		138 Charge		139 Summons. No.	
119	Oper. 136 Charge		141 Summons. No.		Oper. 142 Charge		143 Summons. No.	
120	Oper. 140 Charge		144 Summons. No.		Oper. 144 Charge		145 Summons. No.	
121	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		JOSEPH - HERSKOVITS		-	
122	1 01 01 - 60 M - - - 11 04 - -		606 MONMOUTH AVE LAKEWOOD NJ 08701		ALEXA C PAZ-FLORES		-	
123	2 01 01 - 32 F - - - 11 04 - -		235 WOODLAKE MANOR LAKEWOOD NJ 08701		CRISTY V APARICIO-PAZ		-	
124	2 03 01 - 4 F - - - 05 05 - -		235 WOODLAKE MANOR LAKEWOOD NJ 08701				-	
125							-	

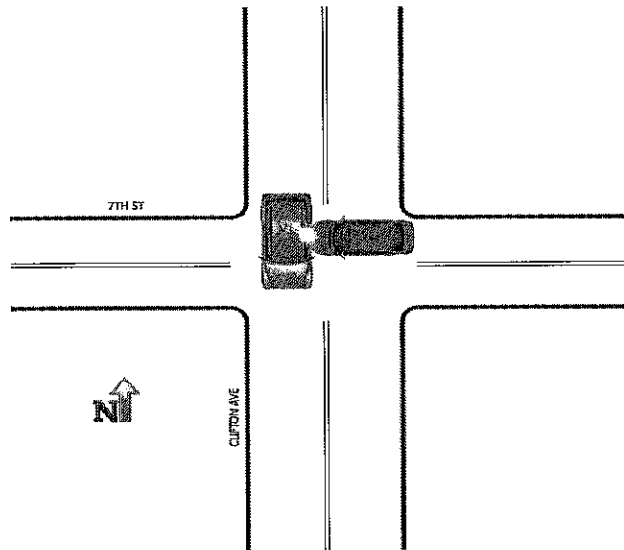
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-010893**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING SOUTH ON CLIFTON AVE APPROACHING 7TH ST. VEHICLE 2 WAS TRAVELING WEST ON 7TH ST APPROACHING CLIFTON AVE.

DRIVER 1 STATED THAT HE DID NOT SEE VEHICLE 2 UNTIL IT STRUCK HIS VEHICLE.

DRIVER 1 STATED THAT SHE STOPPED AT THE STOP SIGN BUT DID NOT SEE VEHICLE 1 COMING WHEN SHE PROCEEDED.

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

VEHICLE 1 IS INSURED BY AMTRUST INSURANCE COMPANY FAIRMONT INS BROKERS LTD 1600 60TH ST BROOKLYN, NY 11204 (718)-232-3300.

146 Officer's Signature

RIVERA M

147 Badge #

327

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

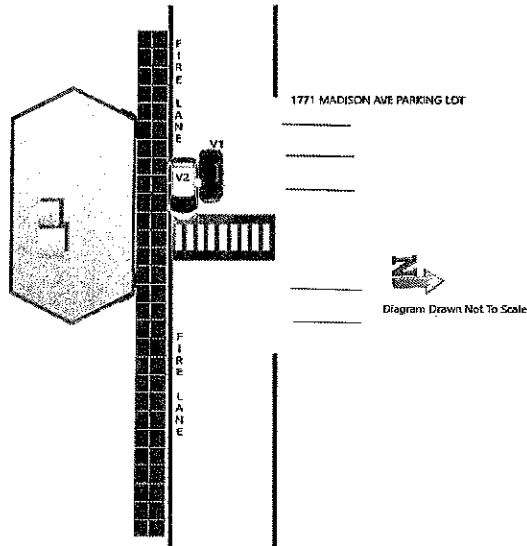
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-012034

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 2 stated that while parked in the parking lot of 1771 Madison Ave a red vehicle side swiped her vehicle and kept driving. Driver 2 provided a New Jersey registration of M84NEC for the suspect vehicle.

Driver 2 stated that her vehicle sustained damage to the driver side rear and front doors consisting of black marks, and a minor dent. There were no injuries reported on scene.

I observed Vehicle 2 which was parked in a fire lane, it had damage throughout the driver side doors consisting of black marks. Driver 2 could not identify which was new and old damage. The suspect vehicle is red.

The driver of the suspect vehicle was not on scene. I was able to later make contact with him over the telephone. He stated that he did drive through that parking lot but did not hit any vehicles. He stated that he has no damage to his vehicle and was adamant that he was not involved in a crash. Due to him not living in town he was unable to return at this time for me to observe his vehicle. Beachwood PD responded to the registered owners address and stated that there was no damage to the suspect vehicle.

I was able to review video footage of the parking lot. I observed the suspect vehicle drive past Vehicle 2. Due to the angle I can not be positive that there was no contact made between the two vehicles. However it did not look as if the vehicles made contact. I was able to get a good view of the suspect vehicles passenger side after it past Vehicle 2 and there was no visible damage observed in the footage. Footage was unable to be copied at this time but is available if needed. End of report.

146 Officer's Signature

SCHAAL, K

147 Badge #

376

148 Reviewer

CM

Badge #

332

149 Case Status

☒ Pending ☐ Complete

05	1 Case Number 22-011993		10 Crash Occurred On: 10TH ST & CLIFTON AVE		11 Speed Limit 10		118a	
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		Code 01		12 Route No.		118b	
01	3 Station/Precinct		13 Milepost 10		18 Speed Limit 10		118c	
07	4 Date of Crash mm dd yy 02/14/22		5 Day Of Week MONDAY		6 Time (use 2400 hrs) 1346		118d	
01	7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		118e	
01	21 Latitude 40.09995		22 Longitude -74.21609		19 Ramp		118f	
04	23 Veh # 1		24 Policy No. 4594110241		25 NJ Ins. Code 148		118g	
02	26 Driver's First Name MATTHEW		27 Number & Street 1717 TALL OAK LANE		28 City TOMS RIVER		118h	
01	29 Sex M		30 Eyes 2		31 State NJ		118i	
01	32 Driver's License Number W02095290005972		33 DOB mm dd yyyy 05/08/1997		34 Expires mm yy 05/23		118j	
03	35 Owner's First Name MATTHEW		36 Number & Street 1717 TALL OAK LANE		37 City TOMS RIVER		118k	
01	38 Make HOND		39 Model ACC		40 Color BLK		118l	
01	41 Year 2019		42 Plate No. H70LJB		43 State NJ		118m	
01	44 VIN 1HGCV1F19KA098206		45 Expires 05/22		46 Vehicle Removed To		118n	
01	47 Authority Owner		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.		118o	
04	50 Carrier No. ☐ USDOT ☒ None		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		52 Motor Carrier or Government Entity		118p	
03	53 Veh # 2		54 Policy No. 5129J005196		55 NJ Ins. Code 917		118q	
01	56 Driver's First Name AVRAHAM		57 Number & Street 100 CENTRAL AVE		58 City LAKEWOOD		118r	
01	59 Sex M		60 Eyes 2		61 State NJ		118s	
01	62 Driver's License Number T42860718811902		63 DOB mm dd yyyy 11/07/1990		64 Expires mm yy 11/23		118t	
01	65 Owner's First Name CHANA		66 Number & Street 52 E 9TH ST		67 City LAKEWOOD		118u	
01	68 Make TOYT		69 Model CAM		70 Color GRY		118v	
01	71 Year 2015		72 Plate No. J99KVM		73 State NJ		118w	
01	74 VIN 4T4BF1FKXFR488222		75 Expires 12/20		76 Vehicle Removed To		118x	
01	77 Authority Driver		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.		118y	
01	80 Carrier No. ☐ USDOT ☒ None		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		82 Motor Carrier or Government Entity		118z	
01	83 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		84 Charge 136		85 Summons No. 137		119a	
01	86 Charge 140		87 Summons No. 141		88 Charge 142		119b	
01	89 Summons No. 143		90 Charge 144		91 Summons No. 145		119c	
01	92 Charge 146		93 Summons No. 147		94 Charge 148		119d	
01	95 Summons No. 149		96 Charge 150		97 Summons No. 151		119e	
01	98 Charge 152		99 Summons No. 153		100 Charge 154		119f	
01	101 Summons No. 155		102 Charge 156		103 Summons No. 157		119g	
01	104 Charge 158		105 Summons No. 159		106 Charge 160		119h	
01	107 Summons No. 161		108 Charge 162		109 Summons No. 163		119i	
01	110 Charge 164		111 Summons No. 165		112 Charge 166		119j	
01	113 Summons No. 167		114 Charge 168		115 Summons No. 169		119k	
01	116 Charge 170		117 Summons No. 171		118 Charge 172		119l	
01	119 Summons No. 173		120 Charge 174		121 Summons No. 175		119m	
01	122 Charge 176		123 Summons No. 177		124 Charge 178		119n	
01	125 Summons No. 179		126 Charge 180		127 Summons No. 181		119o	
01	128 Charge 182		129 Summons No. 183		130 Charge 184		119p	
01	131 Summons							

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-011993

(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
A														
L														
E														
I														
N														
V														
O														
L														
H														
E														
D														
J														

144 Crash Diagram (NOT TO SCALE)

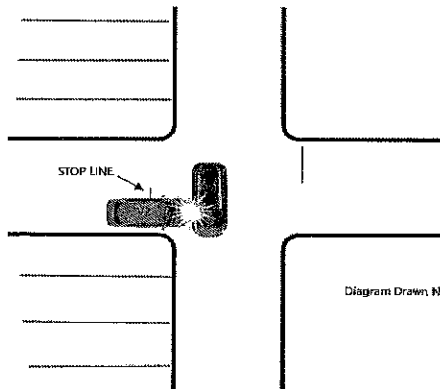


Diagram Drawn Not To Scale

PARKING LOT

145 Crash Description/Narrative

DRIVER OF V1 STATED HE WAS TRAVELING WEST IN THE MUNICIPAL LOT LOCATED AT 10TH ST AND CLIFTON AVE, WHEN HIS VEHICLE WAS STRUCK BY V2.

DRIVER OF V2 STATED HE WAS TRAVELING SOUTH IN THE MUNICIPAL LOT LOCATED AT 10TH ST AND CLIFTON AVE. HE DID NOT NOTICE THE STOP LINE PAINTED ON THE GROUND OF THE LANE HE WAS TRAVELING ON AND STRUCK V1 AS HE WENT THROUGH THE INTERSECTION.

IN CONCLUSION I FIND THE DRIVER OF V2 TO BE AT FAULT.

146 Officer's Signature

RENNA V

147 Badge #

341

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

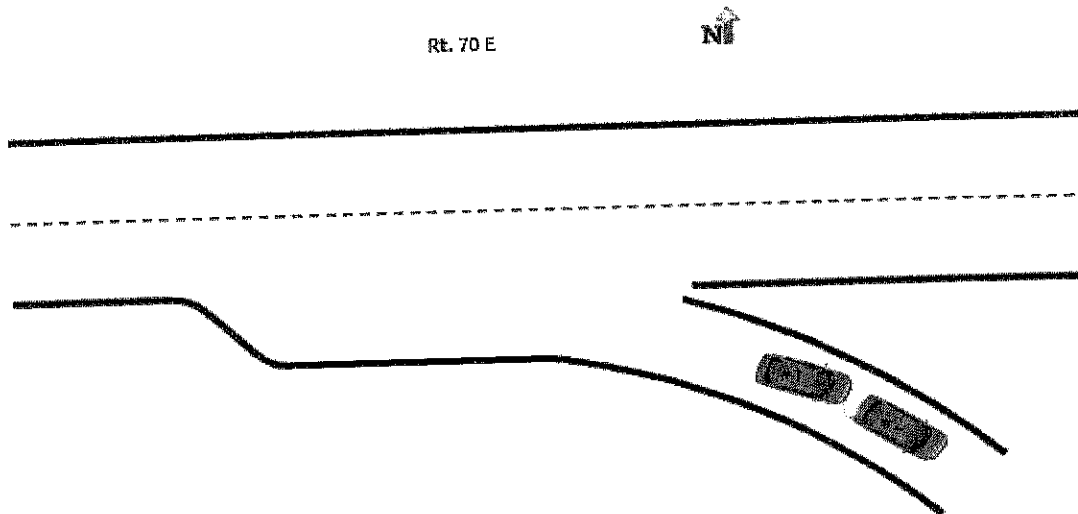
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-012300**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
L														
E														
F														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 was traveling east of Rt. 70 E and entered the off-ramp to merge onto Shorrock St. and stated she observed Vehicle 2 slowing due to traffic and then Vehicle 2 quickly applied their brakes. The driver of Vehicle 1 stated it happened too fast for her to react in time to avoid the crash.

The Driver of Vehicle 2 stated she was slowing and then stopped to yield for traffic so that she could properly enter Shorrock St. when Vehicle 1 crashed into the rear of her vehicle. Based on my observations and speaking with both drivers involved, I determined that Vehicle 1 did not give proper distance to Vehicle 2 in order to avoid the crash.

Vehicle #2 NAIC: 26042

146 Officer's Signature
NICKERSON, K

147 Badge #
378

148 Reviewer
E. MIICK

Badge #
307

149 Case Status
☐ Pending ☒ Complete

PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										Reportable		Non-Reportable		Change Report			
05	1 Case Number 22-012498										10 Crash Occurred On: NEW HAMPSHIRE AVE - 50 0623 - -										09
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										11 Speed Limit 12 Route No. 13 Milepost 14 Speed Limit 35										118a
01	3 Station/Princt -										15 At Intersection With 16 Feet 17 Cross Road Name 18 Speed Limit 35										118b
05	4 Date of Crash mm dd yy 02/16/22										5 Day Of Week WEDNESDAY										119a
01	6 Time (use 2400 hrs) 0747										7 Municipality Code 1514										25
00a	8 Total Killed --										9 Total Injured --										119b
01	21 Latitude 40.05542										22 Longitude -74.19586										120a
00b	23 Veh # 1										24 Policy No. 955739426										01
04	25 NJ Ins. Code 134										53 Veh # 2										120b
01	54 Policy No. 4473-11-79-29										55 NJ Ins. Code 148										-
02	26 Driver's First Name CASEY										27 Sex M										121a
01	28 Number & Street 19 MAIN STREET APT 2A										29 Sex F										01
01	28 City MIDDLEPORT										28 City TOMS RIVER										121b
04	28 State PA										28 State NJ										-
2	28 Zip 17953										28 Zip 08753										-
05	30 Eyes 4										30 Eyes 2										122
01	32 Driver's License Number 31753591										32 Driver's License Number S70035087457542										11
06	35 Owner's First Name BRITTANY										35 Owner's First Name FREDERICK										123
07	36 Number & Street 209 MANAPQUA AVENUE										36 Number & Street 1601 WOODCREST DRIVE										08
08	37 City LAKEHURST										37 City TOMS RIVER										124
01	38 Make TOYT										38 Make HOND										04
04	39 Model CAM										39 Model PIL										125
01	40 Color SIL										40 Color GRY										04
01	41 Year 2006										41 Year 2012										126a
01	42 Plate No. T81MJR										42 Plate No. G62FGR										26
01	43 State NJ										43 State NJ										126b
01	44 VIN 4T1BE32K36U747938										44 VIN 5FN9Y4H61CB064751										-
01	45 Expires 02 23										45 Expires 05 22										126c
01	46 Vehicle Removed To -										46 Vehicle Removed To -										126d
01	47 Authority Owner										47 Authority Driver										126e
01	48 Alcohol/Drug Test Given: No Yes Refused										48 Alcohol/Drug Test Given: No Yes Refused										26
01	49 Hazardous Material None On Board Spill										49 Hazardous Material None On Board Spill										127a
01	50 Carrier No. USDOT MC/MX										50 Carrier No. USDOT MC/MX										26
01	51 GVWR/GCWR Weight <= 10,000 lbs										51 GVWR/GCWR Weight <= 10,000 lbs										127b
01	52 Motor Carrier or Government Entity -										52 Motor Carrier or Government Entity -										-
01	53 Number & Street -										53 Number & Street -										127c
01	54 City -										54 City -										127d
01	55 State -										55 State -										-
01	56 Zip -										56 Zip -										127e
01	135 Damage To Other Property Yes (If Yes, describe) No										135 Damage To Other Property Yes (If Yes, describe) No										26
01	136 Charge -										136 Charge -										128
01	137 Summons. No. -										137 Summons. No. -										26
01	138 Charge -										138 Charge -										129
01	139 Summons. No. -										139 Summons. No. -										11
01	140 Charge -										140 Charge -										130
01	141 Summons. No. -										141 Summons. No. -										11
01	142 Charge -										142 Charge -										131
01	143 Summons. No. -										143 Summons. No. -										05
01	144 Summons. No. -										144 Summons. No. -										132
01	145 Summons. No. -										145 Summons. No. -										05
01	146 Summons. No. -										146 Summons. No. -										133
01	147 Summons. No. -										147 Summons. No. -										02
01	148 Summons. No. -										148 Summons. No. -										02
01	149 Summons. No. -										149 Summons. No. -										02
01	150 Summons. No. -										150 Summons. No. -										02
01	151 Summons. No. -										151 Summons. No. -										02
01	152 Summons. No. -										152 Summons. No. -										02
01	153 Summons. No. -										153 Summons. No. -										02
01	154 Summons. No. -										154 Summons. No. -										02
01	155 Summons. No. -										155 Summons. No. -										02
01	156 Summons. No. -										156 Summons. No. -										02
01	157 Summons. No. -										157 Summons. No. -										02
01	158 Summons. No. -										158 Summons. No. -										02
01	159 Summons. No. -										159 Summons. No. -										02
01	160 Summons. No. -										160 Summons. No. -										02
01	161 Summons. No. -										161 Summons. No. -										02
01	162 Summons. No. -										162 Summons. No. -										02
01	163 Summons. No. -										163 Summons. No. -										02
01	164 Summons. No. -										164 Summons. No. -										02
01	165 Summons. No. -										165 Summons. No. -										

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-012498**

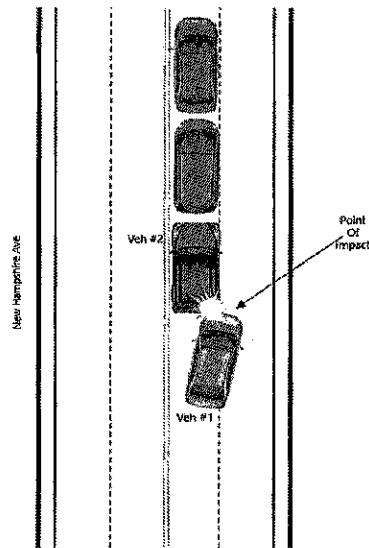
(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Both drivers were traveling North on New Hampshire Avenue in the far left lane just North of Chestnut Street. Driver #1 said that traffic was stopped and he was going to change lanes and pass the stopped traffic when he struck vehicle #2.

Driver #2 said that she was stopped when vehicle #2 struck her vehicle causing minor damage. No reported injuries at this time. Driver #1 was found to be at fault for the crash.

146 Officer's Signature

MERRILL D

147 Badge #

323

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

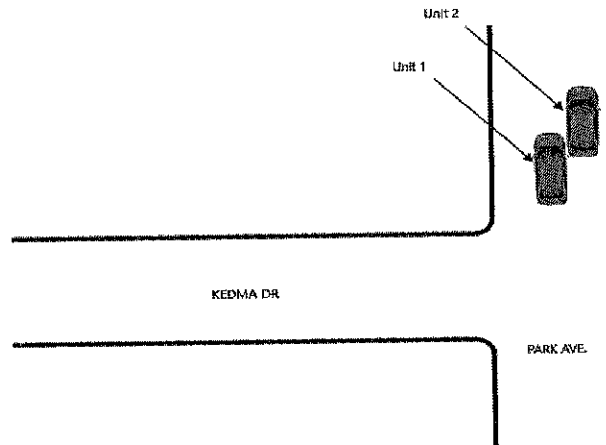
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012305**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS TRAVELING SOUTH ON PARK AVE. HE SAID THAT ANOTHER VEHICLE WAS TRAVELING NORTH WHICH MADE HIM DRIVE TO THE RIGHT OF THE ROAD. HE SAID WHILE DRIVING TO THE RIGHT OF THE ROAD HE STRUCK VEHICLE #2 THAT WAS PARKED.

OWNER OF VEHICLE #2 STATED THAT HE WAS PARKED ON PARK AVE AND SITTING IN HIS VEHICLE WHEN VEHICLE #1 STRUCK HIS VEHICLE.

I DID NOTICE THAT VEHICLE #2 WAS PARKED AND APPROXIMATELY 18 INCHES AWAY FROM THE CURB.

146 Officer's Signature

WARD S

147 Badge #

302

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending
 ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-011179**

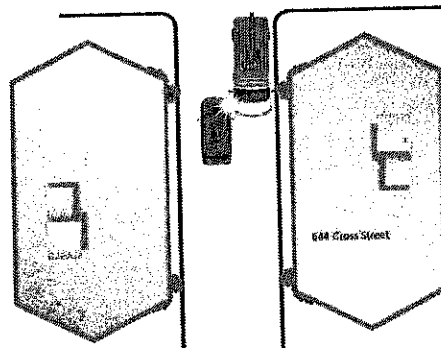
(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

The Driver of Vehicle #1 stated that prior to the crash she was dropping her son, the Vehicle owner off in the same location to work. The Driver of Vehicle #1 stated that she doesn't know what happened but as she pulled off she hit a curb before side swiping Vehicle #2. The Driver of Vehicle #1 was not under the influence of alcohol. The Driver of Vehicle #1 left the Vehicle parked and was picked up by a family member.

I find the Driver of Vehicle #1 to be at fault for the crash.

END OF REPORT

Submitted By: **Ptl. R. Ingram #408**

146 Officer's Signature
INGRAM R

147 Badge #
408

148 Reviewer
DTWORKOSKI

Badge #
249

149 Case Status
☐ Pending ☒ Complete

PAGE		1		OF		2				Fatal		New Jersey Police Crash Investigation Report Form																				Reportable		Non-Reportable		Change Report																																								
05	1 Case Number 22-012884						10 Crash Occurred On: ☒ At Intersection With Road Name E COUNTY LINE RD						11 Speed Limit 40						118a										25																																															
97	2 Police Dept of LAKEWOOD TOWNSHIP E01						Code 01						12 Route No.						Suffix						13 Milepost 25						18 Speed Limit		25																																											
01	3 Station/Precinct ---						--- --						14						15						16						17 Cross Road Name SHAFTO AVE						19 Ramp		20 To From:		21 NB EB SB WB		119a		04																															
99	4 Date of Crash mm dd yy 02/17/22						5 Day Of Week THURSDAY						6 Time (use 2400 hrs) 1607						7 Municipality Code 1514						8 Total Killed ---						9 Total Injured ---						21 Latitude 40.10536						22 Longitude -74.20765						119b		12																									
100a	23 Veh # 1						24 Policy No. 092 8597-B20-30H						25 NJ Ins. Code 896						53 Veh # 2						54 Policy No. 939 581 615						55 NJ Ins. Code 054						120a		01																																					
04	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						26 Driver's First Name MARIELA						Initial Last Name - ARGUEDAS-RODRIGI-						29 Sex F						56 Driver's First Name TZVI						Initial Last Name A FRIEDMAN						59 Sex M						120b		01																									
02	27 Number & Street 506 E COUNTY LINE RD						State Zip NJ 08701						57 Number & Street 39 E 13TH ST						State Zip NJ 08701						121a		01																																																	
102	30 Eyes 2						DL Class D						Restrictions -						Endorsements -						31 State NJ						60 Eyes 5						DL Class A						Restrictions -						Endorsements -						61 State NJ						121b		01													
01	32 Driver's License Number A73845190058852						33 DOB mm dd yyyy 08/22/1985						34 Expires mm yy 08 25						62 Driver's License Number F74027536103885						63 DOB mm dd yyyy 03/09/1988						64 Expires mm yy 03 25						122		03																																					
106	35 Owner's First Name MARIELA						Initial Last Name - ARGUEDAS-RODRIGI-						65 Owner's First Name TZVI						Initial Last Name A FRIEDMAN						66 Number & Street 39 E 13TH ST						State Zip NJ 08701						123		07																																					
107	36 Number & Street 506 E COUNTY LINE RD						State Zip NJ 08701						67 City LAKEWOOD						State Zip NJ 08701						124		04																																																	
04	38 Make TOYT						39 Model HIG						40 Color BLU						41 Year 2013						42 Plate No. T61MXX						43 State NJ						68 Make HOND						69 Model ACC						70 Color GRY						71 Year 2016						72 Plate No. C77LGL						73 State NJ						125		08	
110	44 VIN 5TDZK3EH4DS100266						45 Expires 10 22						74 VIN 1HGCR2F3XGA100256						75 Expires 05 22						126a		26																																																	
01	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						126b		-																																																													
113	47 Authority ☒ Owner ☐ Driver ☐ Police						77 Authority ☒ Owner ☐ Driver ☐ Police						126c		-																																																													
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.						126d		-																																																	
04	50 Carrier No. ☐ USDOT ☒ None						51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs						80 Carrier No. ☐ USDOT ☒ None						81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs						126e		-																																																	
117	52 Motor Carrier or Government Entity						82 Motor Carrier or Government Entity						126f		-																																																													
01	Number & Street						City State Zip						Number & Street						City State Zip						127a		26																																																	
135	Damage To Other Property ☐ Yes (If Yes, describe) ☒ No						Oper. 136 Charge						137 Summons. No.						Oper. 138 Charge						139 Summons. No.						127b		-																																											
136	Oper. 140 Charge						141 Summons. No.						Oper. 142 Charge						143 Summons. No.						127c		-																																																	
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										127d		-																																																		
B	1	01	01	05	36	F	-	-	-	11	04	-	-	MARIELA - ARGUEDAS-RODRIGUE 506 E COUNTY LINE RD LAKEWOOD NJ 08701										127e		-																																																		
C	2	01	01	05	33	M	-	-	-	11	04	-	-	TZVI A FRIEDMAN 39 E 13TH ST LAKEWOOD NJ 08701										127f		-																																																		
D																								128		26																																																		

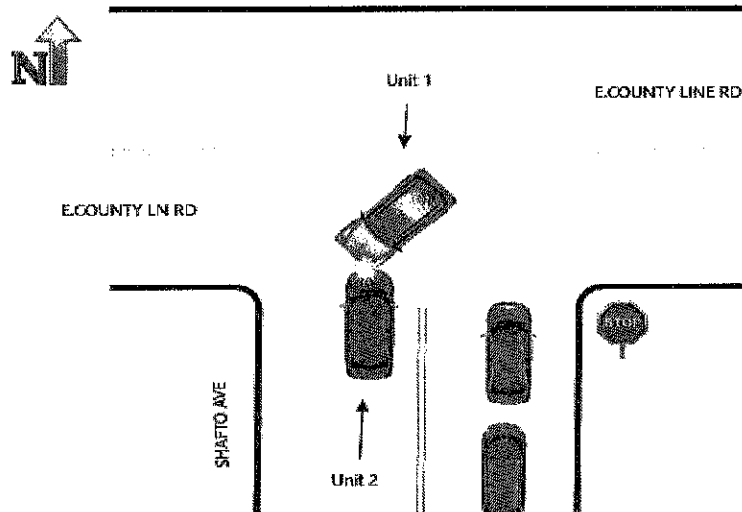
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **--** Case No: **22-012884**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT SHE WAS ON E. COUNTY LINE ROAD FACING WEST AND ATTEMPTED TO MAKE A LEFT TURN ONTO SHAFTO AVENUE, WHEN VEHICLE #2 ATTEMPTED TO PULL OUT FROM SHAFTO AVENUE CAUSING A COLLISION. DRIVER #1 ALSO STATED THAT VEHICLE #2 WAS ON THE OPPOSITE SIDE OF TRAFFIC ON SHAFTO AVENUE WHEN HE WAS PULLING OUT FROM SHAFTO AVENUE. DRIVER #2 STATED THAT THERE WAS TRAFFIC ON SHAFTO AVENUE. DRIVER #2 STATED THAT THERE WERE VEHICLES LINED UP WAITING FOR SCHOOL PICK UP.

DRIVER #2 THEN DROVE PARTIALLY OVER TO THE OPPOSITE SIDE OF TRAFFIC AND STOPPED AT THE STOP SIGN WHEN VEHICLE #1 MADE A LEFT TURN AND STRUCK HIS VEHICLE. WITNESS JOHN RIVERA, STATED THAT VEHICLE #2 WAS ON THE OPPOSITE SIDE OF TRAFFIC AND ATTEMPTED TO PULL OUT WHEN VEHICLE #1 WAS MAKING A LEFT TURN ONTO SHAFTO AVENUE. I WAS PROVIDED WITH A PHOTO OF VEHICLE #2 ON SHAFTO AVENUE ON THE OPPOSITE SIDE OF TRAFFIC. THE PHOTO WAS IMPORTED INTO THE FILE. NO INJURIES REPORTED.

146 Officer's Signature

RIVERA F

147 Badge #

294

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal ☒ New Jersey Police Crash Investigation Report ☐ Reportable ☒ Non-Reportable ☐ Change Report									
05	1 Case Number 22-012806		10 Crash Occurred On: REMON LN				11 Speed Limit 25		118a
01	2 Police Dept of LAKEWOOD TOWNSHIP 01		Code 01		12 Route No. 25		13 Milepost 25		118b
01	3 Station/Precinct 50		14 ☒ Feet ☐ Miles		15 ☐ N ☒ E of GEFEN DR		16 ☐ S ☐ W		119a
07	4 Date of Crash mm dd yy 02/17/22		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 0935		7 Municipality Code 1514		119b
01	8 Total Killed --		9 Total Injured --		19 Ramp ☐ To ☐ From: --		17 Cross Road Name 40.09913 -74.18511		120a
04	23 Veh # 1		24 Policy No. 939735423		25 NJ Ins. Code 054		53 Veh # 2		120b
01	26 Driver's First Name NAOMI		Initial B		Last Name SCHUBERT		29 Sex F		121a
01	27 Number & Street 18 GEFEN DR		State NJ		Zip 08701		56 Driver's First Name JUNIORS		121b
01	28 City LAKEWOOD		State NJ		Zip 08701		57 Number & Street 82 CEDAR HILL AVE APT2		122
2	30 Eyes 6		DL Class D		Restrictions --		Endorsements --		123
08	32 Driver's License Number S15365796253016		33 DOB mm dd yyyy 03/30/2001		34 Expires mm yy 03 23		62 Driver's License Number R09084226604862		124
01	35 Owner's First Name AVROHOM		Initial F		Last Name SCHUBERT		65 Owner's First Name RYDER TRUCK REN -		125
02	36 Number & Street 18 GEFEN DR		State NJ		Zip 08701		66 Number & Street 119 MOONACHIE AVE		126a
02	37 City LAKEWOOD		State NJ		Zip 08701		67 City MOONACHIE		126b
20	38 Make TOYT		39 Model SNA		40 Color TN		41 Year 2006		126c
01	42 Plate No. PGU56K		43 State NJ		44 VIN 5TDZA23C66S572492		45 Expires 02 23		126d
02	46 Vehicle Removed To ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & 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.		127a
03	50 Carrier No.		51 GVWR/GCWR		52 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		53 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class ☐ Placard No.		127b
01	54 Carrier No.		55 GVWR/GCWR		56 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		57 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class ☐ Placard No.		127c
01	58 Carrier No.		59 GVWR/GCWR		60 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		61 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class ☐ Placard No.		127d

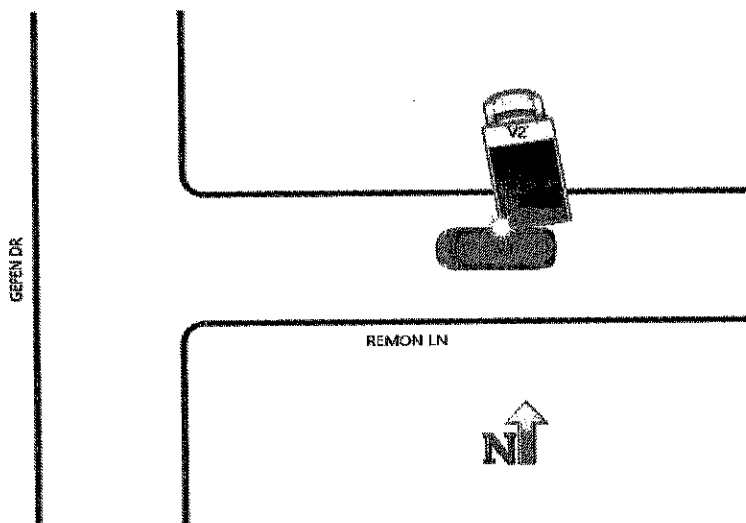
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-012806

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING WEST ON REMON LN APPROACHING GEFEN DR. VEHICLE 2 WAS BACKING OUT OF 2 REMON LN.

DRIVER 1 STATED THAT VEHICLE 2 WAITED FOR THE VEHICLE IN FRONT OF HER TO PASS BUT THEN BACKED INTO HER VEHICLE AS SHE WAS PASSING IT.

DRIVER 2 STATED THAT HE WAITED FOR A VEHICLE TO PASS HIM BEFORE BACKING UP BUT DID NOT SEE VEHICLE 1 WHEN HE BEGAN TO BACK UP AND STRUCK IT.

IT APPEARS THAT DRIVER 2 DID NOT MAKE SURE IT WAS SAFE BEFORE BACKING UP AND CAUSED THE CRASH.

146 Officer's Signature

RIVERA M

147 Badge #

327

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

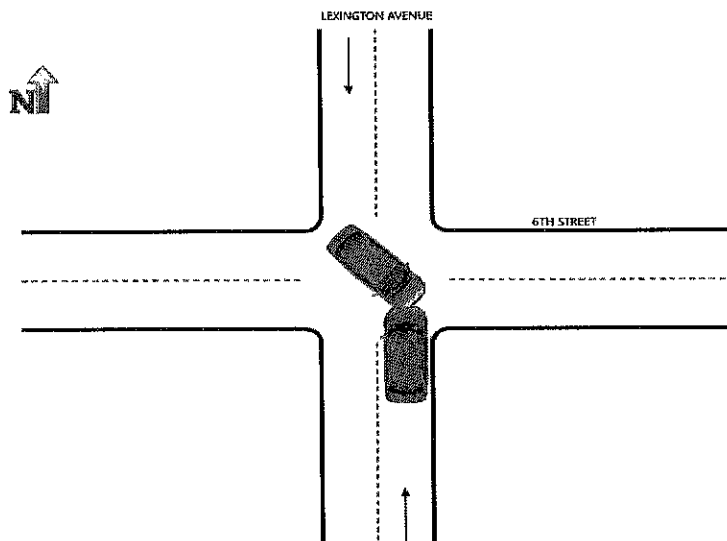
PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										Reportable		Non-Reportable		Change Report												
05	1 Case Number	22-012807										11 Speed Limit	35		118a	25														
01	2 Police Dept of	LAKEWOOD TOWNSHIP 01										12 Route No.	-		13 Milepost	25		118b	-											
01	3 Station/Precinct											14	6TH STREET		15	25		119a	04											
07	4 Date of Crash	mm dd yy		5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude		119b	-											
01		02/17/22		THURSDAY		0936		1514		--		--		40.09633		-74.21295		120a	-											
04	23 Veh #	24 Policy No.										25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code		120b	01									
01		1										1040584902		2		605032357 206 1		884		120b	01									
02	26 Driver's First Name	Initial Last Name										29 Sex		56 Driver's First Name		Initial Last Name		59 Sex		121a	01									
02		DAVID Y FINKELSTEIN - M												SHOLOM S KLEIN - M						121b	01									
05	27 Number & Street	254 BRUCE STREET										State Zip		57 Number & Street		State Zip				122	01									
04		LAKEWOOD NJ 08701												801 LEXINGTON AVE; 3A		NJ 08701				123	03									
07	30 Eyes	DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State	124											
01		2		D		-		NJ		2		D		-		NJ		01												
07	32 Driver's License Number	33 DOB										34 Expires		62 Driver's License Number		63 DOB		64 Expires		125										
01		F45031568809912										09/21/1991 09 24		K52347098209782		09/18/1978 09 26														
01	35 Owner's First Name	Initial Last Name										65 Owner's First Name		Initial Last Name						126	04									
01		ELAZAR E FINKELSTEIN										SHOLOM S KLEIN																		
01	36 Number & Street	2702 BARTOL AVENUE										State Zip		66 Number & Street		State Zip				126a	26									
01		BATIMORE MD 21209												LAKEWOOD NJ 08701																
01	38 Make	39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State								
01		CHEV		4S		GN		01		MTK491 MD		TOYT		SIE		GRY		2007		W21PMG		NJ								
01	44 VIN	45 Expires										74 VIN		75 Expires						126b	-									
01		2G1WL52J11296211 08 22										5TDZK22C67S010429 12 22																		
01	46 Vehicle Removed To	47 Authority										77 Authority		78 Alcohol/Drug Test		79 Hazardous Material				126c	-									
01		Owner Driver Police										Owner Driver Police		Given: No Yes Refused		None On Board Spill														
01		Type: Breath Blood Urine										Type: Breath Blood Urine		Type: Breath Blood Urine		Type: Breath Blood Urine														
01		Results: 0. % Pending										Results: 0. % Pending		Results: 0. % Pending		Results: 0. % Pending														
03	50 Carrier No.	51 GVWR/GCWR										80 Carrier No.		81 GVWR/GCWR						126d	-									
03		USDOT MC/MX None										USDOT MC/MX None		USDOT MC/MX None		USDOT MC/MX None														
	52 Motor Carrier or Government Entity	82 Motor Carrier or Government Entity																		126e	26									
	Number & Street	Number & Street																		127	12									
	City	City																		127a	01									
	State	State																		127b	12									
	Zip	Zip																		127c	03									
	135 Damage To Other Property	Yes (If Yes, describe) No																		127d	03									
	Oper.	136 Charge										137 Summons. No.		Oper.		138 Charge										139 Summons. No.		127e	01	
																												127f	03	
	Oper.	140 Charge										141 Summons. No.		Oper.		142 Charge										143 Summons. No.		127g	03	
																												127h	03	
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										127i	01					
A	01	01	01	05	30	M	-	-	-	11	04	-	-	DAVID Y FINKELSTEIN 254 BRUCE STREET LAKEWOOD NJ 08701										127j	-					
B	02	01	01	05	43	M	-	-	-	11	04	-	-	SHOLOM S KLEIN 801 LEXINGTON AVE; 3A LAKEWOOD NJ 08701										127k	-					
C																								127l						
D																								127m						

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012807**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED HE WAS TRAVELING NORTH ON LEXINGTON AVENUE WHEN VEHICLE 2 MADE A LEFT TURN IN FRONT OF VEHICLE 1.

DRIVER OF VEHICLE 2 STATED HE WAS MAKING A LEFT TURN ONTO THE BLOCK AND DIDN'T SEE VEHICLE 1.

THIS INVESTIGATION DETERMINED THAT THE DRIVER OF VEHICLE 2 MADE A UNSAFE LEFT TURN.

**BOX #25... UNITRIN AUTO AND HOME INSURANCE COMPANY
37 WALKER AVENUE STE. 200
PIKESVILLE, MD 21208
410-653-3053**

146 Officer's Signature

SEUNATH K

147 Badge #

284

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-012817

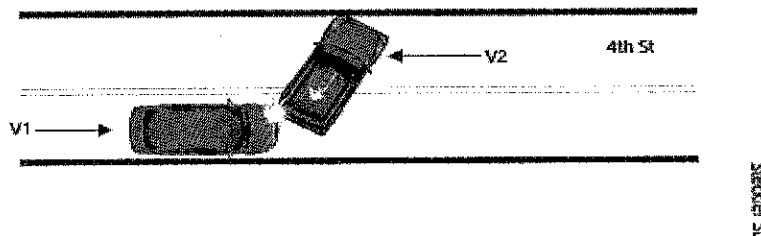
(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Driver of vehicle 1 stated he was traveling east on 4th St, behind vehicle 2. Driver of vehicle 1 stated vehicle 2 made a left, so he stopped. Driver of vehicle 1 stated vehicle 2 stopped and then back up into his vehicle.

Driver of vehicle 2 stated he was east on 4th St, and started a left turn, to back up onto the sidewalk. Driver of vehicle 2 stated once he backed up, he backed into vehicle 1, who he stated must have been trying to go around him.

As a result of my investigation, I, Ptl. Livingston determined driver 2 is at fault for this crash for backing unsafely.

146 Officer's Signature

LIVINGSTON M

147 Badge #

373

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☐ Reportable		☒ Non-Reportable		☐ Change Report																																																																																																																
05	1 Case Number 22-011191										10 Crash Occurred On: 814 MADISON AVE										11 Speed Limit		118a																																																																																																											
01	2 Police Dept of LAKEWOOD TOWNSHIP 01										At Intersection With										Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		118b																																																																																																	
01	3 Station/Precinct										Feet										N		E		of		17 Cross Road Name		NB		EB		119a																																																																																																	
09	4 Date of Crash 02/11/22										5 Day Of Week FRIDAY										6 Time (use 2400 hrs) 0819										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										21 Latitude 40.09829										22 Longitude -74.21838										119b																																																	
04	23 Veh # 1										24 Policy No. S1643799										25 NJ Ins. Code 205										53 Veh # 2										54 Policy No. 4474-92-11-96										55 NJ Ins. Code 148										120a																																																																					
02	26 Driver's First Name DANIEL										Initial T										Last Name WRENSEN										29 Sex M										56 Driver's First Name										Initial										Last Name										59 Sex										120b																																																	
01	27 Number & Street 100 ASBURY AVE										State NJ										Zip 07716										57 Number & Street										State										Zip										121a																																																																					
01	28 City ATLANTIC HLDS										State NJ										Zip 07716										58 City										State										Zip										121b																																																																					
2	30 Eyes 6										DL Class D										Restrictions										Endorsements										31 State NJ										60 Eyes										DL Class										Restrictions										Endorsements										61 State										122																													
06	32 Driver's License Number W73441538306916										33 DOB 06/24/1991										34 Expires 06 24										62 Driver's License Number										63 DOB										64 Expires										123																																																																					
06	35 Owner's First Name G										Initial C										Last Name INDUSTRIAL COOL										65 Owner's First Name YITZCHAK										Initial -										Last Name ZADMEHR										124																																																																					
01	36 Number & Street 70 LIBERTY ST										State NJ										Zip 08840										66 Number & Street 191 E 4TH ST										State NJ										Zip 08701										125																																																																					
20	37 City METUCHEN										State NJ										Zip 08840										67 City LAKEWOOD										State NJ										Zip 08701										126a																																																																					
01	38 Make FORD										39 Model TRA										40 Color WHI										41 Year 2017										42 Plate No. XEKA46										43 State NJ										68 Make TOYT										69 Model CAM										70 Color GRY										71 Year 2012										72 Plate No. S38HML										73 State NJ										126b									
02	44 VIN 1FTYE1ZM3HKA94469										45 Expires 05 22										74 VIN 4T4BF1FK1CR262582										75 Expires 02 22										126c																																																																																									
01	46 Vehicle Removed To										47 Authority Owner										48 Alcohol/Drug Test Given: No										49 Hazardous Material None										76 Vehicle Removed To										77 Authority Owner										78 Alcohol/Drug Test Given: No										79 Hazardous Material None										126d																																																	
04	50 Carrier No. USDOT										51 GVWR/GCWR Weight <= 10,000 lbs										80 Carrier No. USDOT										81 GVWR/GCWR Weight <= 10,000 lbs										126e																																																																																									
04	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										126f																																																																																																													
Number & Street										Number & Street										127a																																																																																																														
City										City										127b																																																																																																														
State										State										127c																																																																																																														
Zip										Zip										127d																																																																																																														
135 Damage To Other Property										136 Charge										137 Summons. No.										138 Charge										139 Summons. No.										127e																																																																																
140 Charge										141 Summons. No.										142 Charge										143 Summons. No.										127f																																																																																										
Names & Addresses of Occupants - If Deceased, Date & Time of Death										DANIEL T WRENSEN										100 ASBURY AVE ATLANTIC HLDS NJ 07716										127g																																																																																																				
83										84										85										86										87										88										89										90										91										92										93										94										95										127h
1										01										01										-										30										M										-										-										11										04										-										-										127i										
B										C										D										127j																																																																																																				
C										D										127k																																																																																																														
D										127l																																																																																																																								

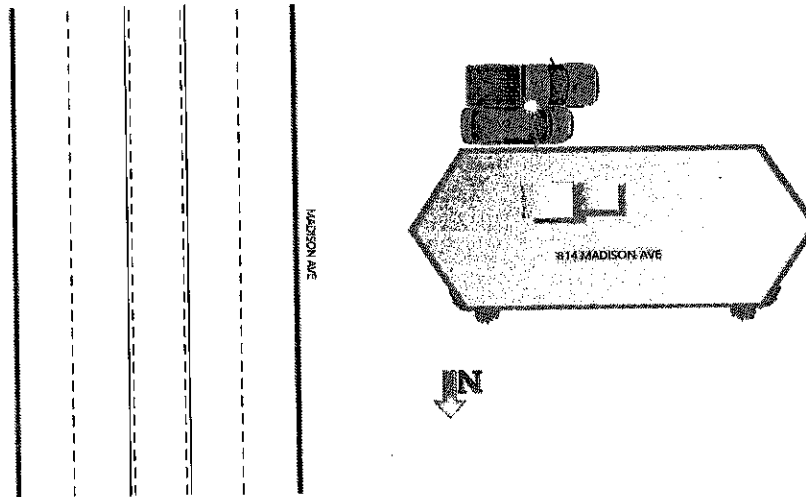
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-011191**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING WEST IN THE PARKING LOT OF 814 MADISON AVE. VEHICLE 2 WAS PARKED, UNOCCUPIED, IN THE SAME PARKING LOT.

DRIVER 1 STATED THAT IT WAS A TIGHT SQUEEZE TO GET PAST VEHICLE 2 AND HIS VEHICLE SIDESWIPE IT.

146 Officer's Signature

RIVERA M

147 Badge #

327

148 Reviewer

MY

Badge #

329

149 Case Status

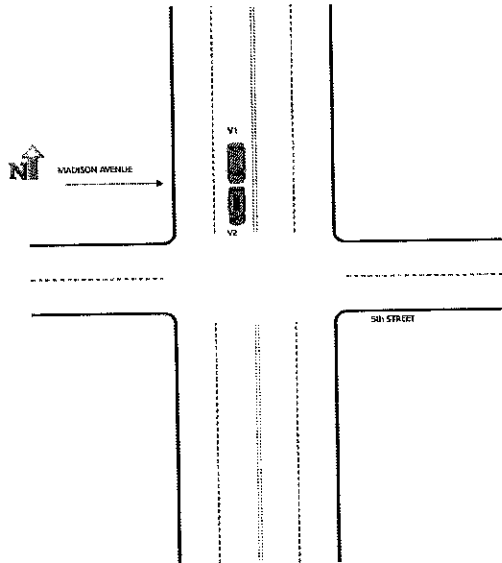
☐ Pending
 ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01
Station: _____ Case No: 22-012579

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V2 STATED THAT SHE WAS DRIVING ON RT 9 IN THE LEFT LANE AND SHE WAS HIT IN THE REAR. DRIVER OF V1 STATED THAT SHE WAS DRIVING ABOUT 5MPH AND SHE TRIED TO STOP BUT COULD NOT STOP IN TIME.

146 Officer's Signature
YOUMANS R147 Badge #
250148 Reviewer
MYBadge #
329149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 3 ☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report								
05	1 Case Number 22-009759										10 Crash Occurred On: NEW HAMPSHIRE AVENUE - 50 11 Speed Limit 0623 - -										118a
01	2 Police Dept of LAKEWOOD TOWNSHIP 01										12 Route No. Suffix 13 Milepost 16 Speed Limit 50										09
01	3 Station/Precinct -										17 Cross Road Name CEDARBRIDGE AVENUE										118b
05	4 Date of Crash mm dd yy 02/06/22										18 Direction of Travel 2 ☒ Feet ☐ Miles ☐ N ☐ E of S ☐ W										119a
01	5 Day Of Week SUNDAY										19 Ramp ☐ To ☐ From ☐ 20 Route/Name										25
05	6 Time (use 2400 hrs) 1210										21 Latitude 22 Longitude										119b
01	7 Municipality Code 1514										23 Total Killed 24 Total Injured										120a
04	23 Veh # 1 24 Policy No. 059 0642-F21-30P 25 NJ Ins. Code 962										53 Veh # 2 54 Policy No. 952719880 55 NJ Ins. Code 134										01
01	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										120b
02	26 Driver's First Name Initial Last Name SAMANTHA J SACCHI										56 Driver's First Name Initial Last Name ANDRES S AMADOR-ALVARADO										121a
01	27 Number & Street 405 KETTLE CREEK RD APT 4										57 Number & Street 20 VIEW DR										01
01	28 City State Zip TOMS RIVER NJ 08753										58 City State Zip BRICK NJ 08723										121b
03	30 Eyes DL Class Restrictions Endorsements 31 State 06 D - - NJ										60 Eyes DL Class Restrictions Endorsements 61 State 02 I - - NJ										122
05	32 Driver's License Number S00316877152906										62 Driver's License Number A57020428206912										01
01	33 DOB mm dd yyyy 02/10/1990 34 Expires mm yy 02 23										63 DOB mm dd yyyy 06/19/1991 64 Expires mm yy - -										123
06	35 Owner's First Name Initial Last Name ☐ Same As Driver MARCELLA R GROSS										65 Owner's First Name Initial Last Name ☐ Same As Driver OSCAR A LEIVA-CALDERON										124
07	36 Number & Street 284 CORBIN CT										66 Number & Street 214 MURRAY ST										03
01	37 City State Zip LAKEWOOD NJ 08701										67 City State Zip LAKEWOOD NJ 08701										125
01	38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State LINC MKZ WHI 2008 N86NLT NJ										68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State TOYT COR BLU 1986 CCFB72 NJ										26
01	44 VIN 3LNHM28TX8R65534										74 VIN JT2AE83EXG3408244										126a
01	45 Expires 08 22										75 Expires 10 22										126b
01	46 Vehicle Removed To -										76 Vehicle Removed To -										126c
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										126d
01	☐ Left At Scene ☐ Towed Impounded										☐ Left At Scene ☐ Towed Impounded										126e
01	47 Authority ☐ Owner ☒ Driver ☐ Police										77 Authority ☐ Owner ☒ Driver ☐ Police										26
01	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending										78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending										127a
01	49 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.										79 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.										26
01	50 Carrier No. ☐ USDOT ☒ None										80 Carrier No. ☐ USDOT ☒ None										127b
01	51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127c
01	52 Motor Carrier or Government Entity -										82 Motor Carrier or Government Entity -										127d
01	Number & Street -										83 Number & Street -										127e
01	City State Zip -										84 City State Zip -										26
01	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No										85 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No										128
01	Oper. 136 Charge 137 Summons. No.										Oper. 138 Charge 139 Summons. No.										129
01	Oper. 140 Charge 141 Summons. No.										Oper. 142 Charge 143 Summons. No.										130
01	83 84 85 86 87 88 89 90 91 92 93 94 95										Names & Addresses of Occupants - If Deceased, Date & Time of Death										131
A	01 01 01 05 31 F - - - 11 04 - -										SAMANTHA J SACCHI 405 KETTLE CREEK RD A/TOMS RIVER NJ 08753 - -										06
B	02 01 01 05 30 M - - - 11 04 - -										ANDRES S AMADOR-ALVARADO 20 VIEW DR BRICK NJ 08723 - -										132
C	03 01 01 05 23 F - - - 11 04 - -										CHANA B GRUSKIN 53 HANOVER WAY LAKEWOOD NJ 08701 - -										03
D	03 03 01 05 07M F - - - 06 04 - -										RACHEL - PINTER 53 HANOVER WAY LAKEWOOD NJ 08701 - -										133
																					134

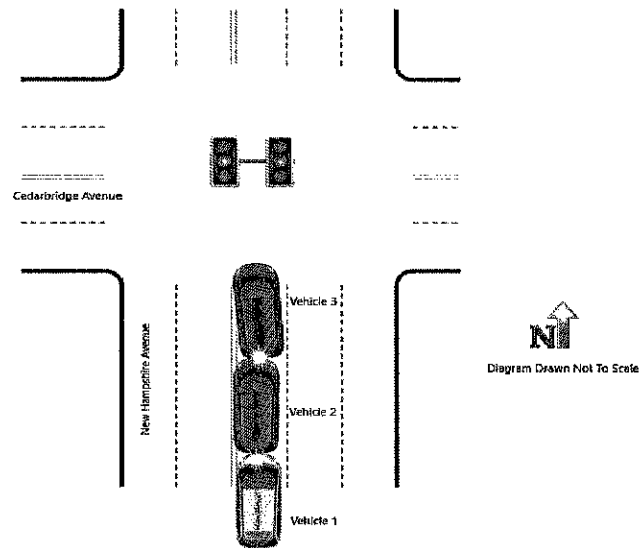
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-009759**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 was traveling northbound on New Hampshire Avenue. Driver 1 stated as she approached the left turn lane, vehicle 2 was in front of her. She was not sure if vehicle 2 had stalled or she pressed on the accelerated too much resulting in a collision. She did state the traffic light was green so she was not sure why they were stopped.

Driver of vehicle 2 was traveling northbound on New Hampshire Avenue. Driver 2 was in the left turn lane. He stated that Driver 3 was attempting to make the left turn. The traffic light had just turned yellow and he believed that driver 3 was going to proceed in making the left turn onto Cedar bridge Avenue but she did not. At that point he stated he felt the rear of his vehicle being struck causing him to strike vehicle 3.

Driver of vehicle 3 was traveling northbound on New Hampshire Avenue. She was in the left turn lane. The traffic light had turned yellow so she decided to stop instead of proceeding in making a left turn onto Cedar bridge Avenue. And at this point she felt the rear of her vehicle had been struck.

All drivers were offered medical attention which they declined on scene. I asked the driver of vehicle 3 if her rear seat passenger needed medical attention and she stated no she was okay.

Vehicle 1 had damage to the fender, vehicle 2 had damage to the right side of the bumper and vehicle 3 had damage to the left panel and the left side of the bumper.

As per my observation and the information provided, driver 1 was at fault for following too closely.

Driver 2 Costa Rica Driver's License # CI-114680742
Expiration Date: 03/17/2026

146 Officer's Signature

ESMART A

147 Badge #

402

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 3 ☐ Fatal		New Jersey Police Crash Investigation Report										☐ Reportable ☐ Non-Reportable ☒ Change Report																								
97	1 Case Number 22-009759			10 Crash Occurred On: ☐ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: ☐ 11 Speed Limit										118a																							
98	2 Police Dept of LAKEWOOD TOWNSHIP F01			12 Route No. ☐ 13 Milepost ☐ 18 Speed Limit										118b																							
99	3 Station/Precinct			17 Cross Road Name ☐ NB ☐ EB ☐ SB ☐ WB										119a																							
100a	4 Date of Crash mm dd yy 02/06/22		5 Day Of Week SUNDAY		6 Time (use 2400 hrs) 1210		7 Municipality Code 1514		8 Total Killed		9 Total Injured		20 Route/Name		21 Latitude		22 Longitude		119b																		
100b	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code								120a																		
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										120b																
102	26 Driver's First Name SAMANTHA				Initial J				Last Name SACCHI				29 Sex -		56 Driver's First Name ANDRES				Initial S				Last Name AMADOR-ALVARADO-				59 Sex		121a								
103	27 Number & Street																		57 Number & Street		121b																
104	28 City																		State		Zip		58 City		State		Zip										
105	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State						122												
106	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										
107	35 Owner's First Name ☐ Same As Driver																		Initial		Last Name		65 Owner's First Name ☐ Same As Driver		Initial		Last Name						124				
108	36 Number & Street 205 WILLIAMS ST																		66 Number & Street														125				
109	37 City		State		Zip		67 City		State		Zip														126a												
110	38 Make PCAI		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make TOYT		69 Model COR		70 Color BLU		71 Year 1986		72 Plate No. CCFB72		73 State NJ		126b												
111	44 VIN				45 Expires				74 VIN JT2AE83EXG3408244				75 Expires 10 22										126c														
112	46 Vehicle Removed To																		76 Vehicle Removed To														126d				
113	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded																		77 Authority ☐ Owner ☐ Driver ☐ Police																126e		
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. ☐												127a												
115	50 Carrier No. ☐ USDOT ☐ MC/MX				51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				80 Carrier No. ☐ USDOT ☐ MC/MX				81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs												127b												
116	52 Motor Carrier or Government Entity																		82 Motor Carrier or Government Entity														127c				
117	Number & Street																		Number & Street														127d				
	City																		State		Zip		City		State		Zip						127e				
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No																																				128
	Oper. 136 Charge				137 Summons. No.				Oper. 138 Charge				139 Summons. No.												129												
	Oper. 140 Charge				141 Summons. No.				Oper. 142 Charge				143 Summons. No.														130										
	Names & Addresses of Occupants - If Deceased, Date & Time of Death																																131				
A	83	84	85	86	87	88	89	90	91	92	93	94	95											132													
B																									133												
C																									134												
D																																					

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-009759**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

***The registered owner of vehicle wanted to update his home address on the crash report from 214 Murray Street to 205 Williams Street. Address was updated.**

146 Officer's Signature

PTL. A. ESMART

147 Badge #

402

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

A
B
C
D

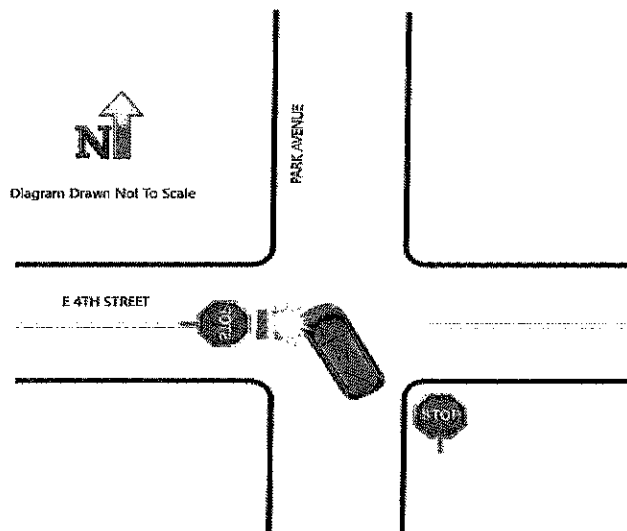
**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-011649**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was making a left turn onto E 4th Street from traveling North on Park Avenue. While making the left turn, vehicle 1 struck a fixed concrete object which is located in front of the stop sign on E 4th Street.

Driver of vehicle 1 stated she did not see this fixed concrete object as she was turning.

I did not observe any damage on the fixed concrete object.

Upon my investigation I determined the driver of vehicle 1 was turning too closely which caused vehicle 1 to collide with this fixed object. Vehicle was impounded due to being unregistered.

END OF REPORT

146 Officer's Signature

PRISCO, A

147 Badge #

427

148 Reviewer

LNJ

Badge #

322

149 Case Status

☐ Pending☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-011737**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL F I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

THE DRIVER OF V1 STATED THAT HE WAS TRAVELING NORTHBOUND ON CEDARBRIDGE AVE. AS HE TRAVELED NORTHBOUND, HE ATTEMPTED TO HIT HIS BRAKES BECAUSE THE TRAFFIC LIGHT TURNED RED. THE DRIVER OF V1 STATED THAT DUE TO THE GROUND BEING WET, HIS VEHICLE CRASHED INTO V2.

THE DRIVER OF V2 STATED THAT HE WAS TRAVELING NORTHBOUND ON CEDARBRIDGE AVE. HE CAME TO A COMPLETE STOP AT THE TRAFFIC LIGHT WHERE CEDARBRIDGE AVE AND HURLEY AVE INTERSECT. THE DRIVER OF V2 THEN STATED THAT HE FELT V1 CRASH INTO THE REAR OF HIS VEHICLE.

AFTER OBSERVING THE SCENE AND SPEAKING WITH BOTH PARTIES, I FIND V1 AT FAULT FOR FOLLOWING TOO CLOSELY.

NO INJURIES WERE REPORTED ON SCENE.

V1 INSURANCE INFORMATION:

GEICO GENERAL INSURANCE COMPANY
 ONE GEICO BOULEVARD FREDERICK, VA 22412-0003
 NAIC CODE: 35882
 POLICY NUMBER: 4153-30-24-11

146 Officer's Signature
VILLALBA, M

147 Badge #
425

148 Reviewer
PA

Badge #
325

149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report		
04	1 Case Number										11 Speed Limit										118a
97	22-011751										25										06
01	2 Police Dept of										12 Route No.										118b
98	LAKEWOOD TOWNSHIP F01										40										-
01	3 Station/Precinct										17 Cross Road Name										119a
99																					25
07	4 Date of Crash										20 Route/Name										119b
100a	02/13/22										-74.21357										-
01	SUNDAY																				120a
100b	23 Veh #										53 Veh #										01
04	1										2										120b
101	24 Policy No.										54 Policy No.										-
02	939 582 299										6080-10-81-83										01
102	26 Driver's First Name										56 Driver's First Name										121a
02	LEAH										CARLOS										01
103	27 Number & Street										57 Number & Street										121b
03	1641 48TH ST										4 SPARTAN AVE										-
104	28 City										58 City										
2	BROOKLYN										LAKEWOOD										
105	30 Eyes										60 Eyes										122
07	4										1										01
106	32 Driver's License Number										62 Driver's License Number										123
07	854219204										V23721106101811										03
107	35 Owner's First Name										65 Owner's First Name										124
-	JACOB										CARLOS										04
108	36 Number & Street										66 Number & Street										125
01	495 BRENTWOOD AVE										4 SPARTAN AVE										04
109	37 City										67 City										126a
01	TOMS RIVER										LAKEWOOD										26
110	38 Make										68 Make										126b
01	HOND										TOYT										-
111	39 Model										69 Model										126c
01	ODY										SIE										-
112	40 Color										70 Color										126d
-	BLK										SIL										-
113	41 Year										71 Year										126e
02	2019										2005										26
114	42 Plate No.										72 Plate No.										127a
01	V77LGL										R11PDV										127b
115	43 State										73 State										127c
01	NJ										NJ										-
116	44 VIN										74 VIN										127d
01	5FNRL6H76KB087135										5TDZA23C35S309195										127e
117	45 Expires										75 Expires										26
01	05 22										09 22										128
118	46 Vehicle Removed To										76 Vehicle Removed To										129
01	☐ Driven										☒ Driven										04
119	☐ Towed Disabled										☐ Towed Disabled										130
01	☐ Towed Disabled & Impounded										☐ Towed Disabled & Impounded										04
120	☒ Left At Scene										☐ Left At Scene										131
01	☐ Towed Impounded										☐ Towed Impounded										12
121	47 Authority										77 Authority										132
01	☐ Owner										☒ Driver										12
122	☐ Police										☐ Police										02
123	48 Alcohol/Drug Test										78 Alcohol/Drug Test										133
02	Given: ☒ No										Given: ☒ No										02
124	☐ Yes										☐ Yes										-
01	☐ Refused										☐ Refused										134
125	Type: ☐ Breath										Type: ☐ Breath										-
01	☐ Blood										☐ Blood										135
126	☐ Urine										☐ Urine										02
127	Results: 0. - %										Results: 0. - %										136
01	☐ Pending										☐ Pending										137
128	50 Carrier No.										80 Carrier No.										02
129	☐ USDOT										☐ USDOT										-
01	☒ None										☒ None										138
130	51 GVWR/GCWR										81 GVWR/GCWR										139
131	☐ Weight <= 10,000 lbs										☐ Weight <= 10,000 lbs										12
132	☐ Weight 10,001-26,000 lbs										☐ Weight 10,001-26,000 lbs										02
133	☐ Weight >= 26,001 lbs										☐ Weight >= 26,001 lbs										134
134	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										02
135	Number & Street										Number & Street										-
136	City										City										-
137	State										State										-
138	Zip										Zip										-
139	135 Damage To Other Property										139 Summons. No.										12
140	☐ Yes (If Yes, describe)										☒ No										02
141	Oper. 136 Charge										Oper. 138 Charge										132
142	137 Summons. No.										139 Summons. No.										133
143	Oper. 140 Charge										Oper. 142 Charge										02
144	141 Summons. No.										143 Summons. No.										134
145	83										Names & Addresses of Occupants - If Deceased, Date & Time of Death										02
146	84																				-
147	85																				-
148	86																				-
149	87																				-
150	88																				-
151	89																				-
152	90																				-
153	91																				-
154	92																				-
155	93																				-
156	94																				-
157	95																				-
158	1										LEAH										-
159	01										1641 48TH ST										-
160	01										BROOKLYN										-
161	05										NY 11204										-
162	28																				-
163	F																				-
164	-																				-
165	-																				-
166	-																				-
167	11																				-
168	04																				-
169	-																				-
170	-																				-
171	2										CARLOS										-
172	01										4 SPARTAN AVE										-
173	01										LAKEWOOD										-
174	05										NJ 08701										-
175	41																				-
176	M																				-
177	-																				-
178	-																				-
179	-																				-
180	11																				-
181	04																				-
182	-																				-
183	-																				-
184	-																				-
185	-																				-
186	-																				-
187	-																				-
188	-																				-
189	-																				-
190	-																				-
191	-																				-
192	-																				-
193	-																				-
194	-																				-
195	-																				-
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197	-																				-
198	-																				-
199	-																				-
200	-																				-

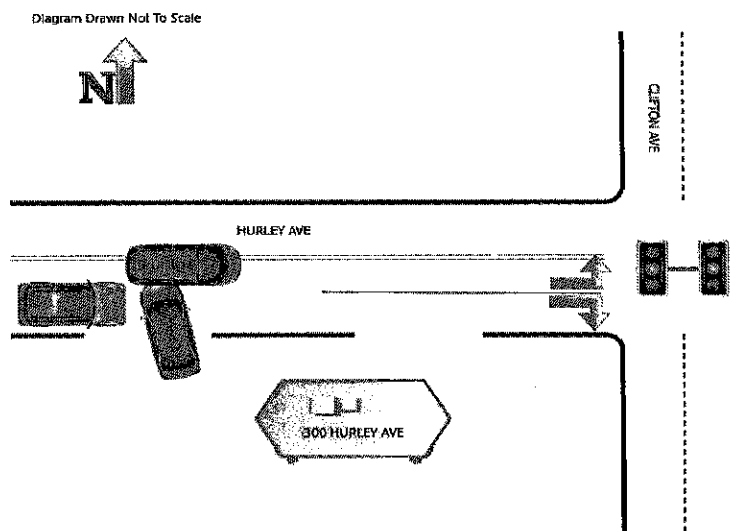
New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-011751

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	
A														
L														
E														
F														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 2 STATED HE WAS WAITING TO MAKE A LEFT TURN INTO HURLEY AVE FROM 300 HURLEY AVE. HE STATED A VEHICLE STOPPED TO LET HIM MAKE THE TURN. HE STATED AS HE WAS MAKING THE LEFT TURN VEHICLE 1 WHEN AROUND THE OTHER VEHICLE INTO THE YELLOW LINES AND HE STRUCK VEHICLE 1.

DRIVER OF VEHICLE 1 STATED SHE WAS ON HURLEY AVE TRAVELING EAST TOWARDS CLIFTON AVE, AS SHE WAS PASSING 300 HURLEY AVE VEHICLE 2 STRUCK HER VEHICLE AS HE WAS ATTEMPTING A LEFT TURN. DRIVER OF VEHICLE 1 STATED SHE DID NOT GO AROUND ANY VEHICLE BUT LATER STATED SHE MIGHT HAVE WENT ON THE DOUBLE YELLOW TO ENTER THE LEFT TURNING LANE.

NO INJURIES ON SCENE.

VIDEO FROM 300 HURLEY AVE WERE UNAVAILABLE AT THE TIME OF THE REPORT.

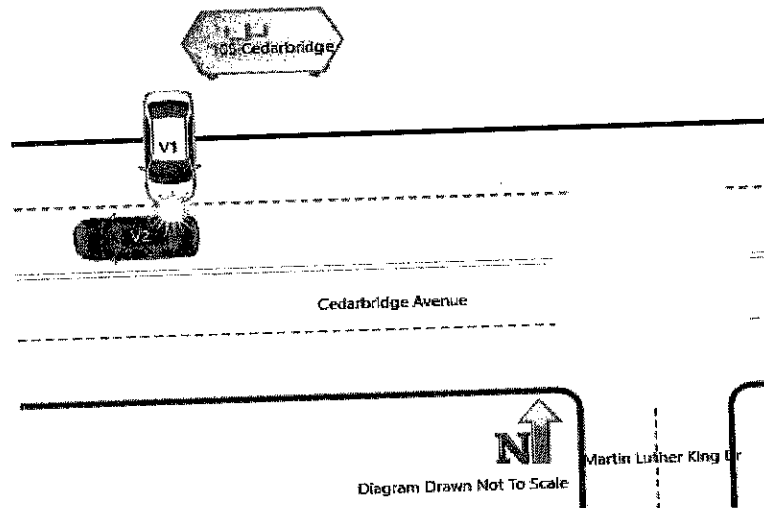
95	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable			☐ Non-Reportable			☐ Change Report									
05	1 Case Number				10 Crash Occurred On: CEDARBRIDGE AVENUE										11 Speed Limit		35		0528				118a							
97	22-011763																						04							
01	2 Police Dept of				Code		☐ At Intersection With										Road Name		Dir		12 Route No.		Suffix		13 Milepost		118b			
98	LAKEWOOD TOWNSHIP F01						☒ Feet												of: MARTIN LUTHER KING DR				18 Speed Limit		25					
01	3 Station/Precinct						☐ Miles												19		To		17 Cross Road Name				☐ NB ☐ EB		119a	
99																			Ramp		From:						☐ SB ☐ WB		119b	
05	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		20 Route/Name		22 Longitude						119c					
100a	02/13/22				SUNDAY		1420		1514		--		--		40.086260		-74.210360								119d					
01																									120a					
100b	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01					
04	1				6043140968				100				2				939164909				054				120b					
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																	
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex						121a					
102	MICHELLE				-		BERKO		F		JACK				-		WEISZ		M						01					
02	27 Number & Street												57 Number & Street												121b					
103	21 HILTON DR												854 WOODLAND DR																	
03	28 City				State		Zip		58 City				State		Zip															
104	LAKEWOOD				NJ		08701		LAKEWOOD				NJ		08701															
2	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State				122					
105	02				-		-		-		NY		06		D		-		-		NJ				03					
03	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires				123					
106	924621294				01/18/1999				01 30				W23183800012696				12/30/1969				12 25				01					
35	Owner's First Name				Initial		Last Name		55 Owner's First Name				Initial		Last Name										124					
107	☐ Same As Driver				BENJAMIN				-		SALZER		☐ Same As Driver		JACK				-		WEISZ									
36	Number & Street												66 Number & Street												125					
108	21 HILTON DR												854 WOODLAND DR												04					
01	37 City				State		Zip		67 City				State		Zip										126a					
109	LAKEWOOD				NJ		08701		LAKEWOOD				NJ		08701										26					
01	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		126b					
110	KIA		FOR		SIL		2021		T85NCY		NJ		HYUN		ELA		BLK		2021		H66NPL		NJ							
01	44 VIN								45 Expires				74 VIN								75 Expires				126c					
111	3KPF24AD9ME287686								11 23				5NPLL4AG5MH014265								04 24									
01	46 Vehicle Removed To												76 Vehicle Removed To												126d					
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded												☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded												126e					
47	Authority												77 Authority												126f					
113	☐ Owner ☒ Driver ☐ Police												☒ Owner ☐ Driver ☐ Police												26					
48	Alcohol/Drug Test								49 Hazardous Material				78 Alcohol/Drug Test								79 Hazardous Material				127a					
114	Given: ☒ No ☐ Yes ☐ Refused								☒ None ☐ On Board ☐ Spill				Given: ☒ No ☐ Yes ☐ Refused								☒ None ☐ On Board ☐ Spill				26					
115	Type: ☐ Breath ☐ Blood ☐ Urine												Type: ☐ Breath ☐ Blood ☐ Urine												127b					
116	Results: 0, - % ☐ Pending								Hazard Class				Placard No.		Results: 0, - % ☐ Pending								Hazard Class				Placard No.		127c	
03	50 Carrier No.								51 GVWR/GCWR				80 Carrier No.								81 GVWR/GCWR				127d					
117	☐ USDOT ☐ MC/MX								☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				☐ USDOT ☐ MC/MX								☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				127e					
52	Motor Carrier or Government Entity												82 Motor Carrier or Government Entity												26					
Number & Street													Number & Street												128					
City					State		Zip		City				State		Zip										129					
135	Damage To Other Property				☐ Yes (If Yes, describe) ☒ No																				130					
Oper.	136 Charge								137 Summons. No.				Oper.				138 Charge								139 Summons. No.				131	
140	Charge												142 Charge																05	
141	Summons. No.												143 Summons. No.																133	
83													Names & Addresses of Occupants - If Deceased, Date & Time of Death												134					
01	01 01 05 23 F								11 04				MICHELLE				- BERKO								02					
21	HILTON DR												LAKEWOOD				NJ				08701									
01	04 01 05 7M F								06 06				MINDY				- SALZER													
21	HILTON DR												LAKEWOOD				NJ				08701									
01	06 01 05 17 F								11 04				LEAH				- BERKO													
2130	58TH ST												BROOKLYN				NY				11204									
02	01 01 05 52 M								11 04				JACK				- WEISZ													
854	WOODLAND DR												LAKEWOOD				NJ				08701									

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-011763

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated she was pulling out of 105 Cedarbridge onto Cedarbridge Avenue. A vehicle in the right lane stopped to allow her to pull out but she did not see vehicle 2 in the left lane. She crashed into the passenger side of vehicle 2. Vehicle 1 sustained minor damage to the front bumper.

Driver 2 stated he was driving west on Cedarbridge Avenue when vehicle 1 pulled out and crashed into him. Vehicle 2 sustained damage to the passenger side rear fender area.

No injuries were reported.

146 Officer's Signature

MANDELBAUM, J

147 Badge #

420

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

97	1 Case Number 22-011765		10 Crash Occurred On: PINE ST		11 Speed Limit 40		12 Route No.		13 Milepost		14 Speed Limit		118a
01	2 Police Dept of LAKEWOOD TOWNSHIP		3 Station/Precinct 01		4 Date of Crash 02/13/22		5 Day of Week SUNDAY		6 Time (use 2400 hrs) 1429		7 Municipality Code 1514		118b
98	8 Total Killed 50		9 Total Injured 14		10 Road Name SWAN LN		11 Direction N		12 Cross Road Name 19		13 From: To		118c
01	14 Date of Crash 02/13/22		15 Day of Week SUNDAY		16 Time (use 2400 hrs) 1429		17 Municipality Code 1514		18 Total Killed 50		19 Total Injured 14		118d
99	20 Vehicle # 1		21 Policy No. 4499-98-75-52		22 NJ Ins. Code 148		23 Driver's First Name MENASHE		24 Driver's Last Name HOROWICZ		25 Sex M		118e
07	26 Driver's License Number H66415390003882		27 DOB 03/03/1988		28 Expires 03/25		29 Owner's First Name MENASHE		30 Owner's Last Name HOROWICZ		31 Sex M		118f
100a	32 Driver's License Number H66415390003882		33 DOB 03/03/1988		34 Expires 03/25		35 Owner's First Name MENASHE		36 Owner's Last Name HOROWICZ		37 Sex M		118g
01	38 Driver's License Number H66415390003882		39 DOB 03/03/1988		40 Expires 03/25		41 Owner's First Name MENASHE		42 Owner's Last Name HOROWICZ		43 Sex M		118h
100b	44 Driver's License Number H66415390003882		45 DOB 03/03/1988		46 Expires 03/25		47 Owner's First Name MENASHE		48 Owner's Last Name HOROWICZ		49 Sex M		118i
04	50 Driver's License Number H66415390003882		51 DOB 03/03/1988		52 Expires 03/25		53 Owner's First Name MENASHE		54 Owner's Last Name HOROWICZ		55 Sex M		118j
101	56 Driver's License Number H66415390003882		57 DOB 03/03/1988		58 Expires 03/25		59 Owner's First Name MENASHE		60 Owner's Last Name HOROWICZ		61 Sex M		118k
02	62 Driver's License Number H66415390003882		63 DOB 03/03/1988		64 Expires 03/25		65 Owner's First Name MENASHE		66 Owner's Last Name HOROWICZ		67 Sex M		118l
102	68 Driver's License Number H66415390003882		69 DOB 03/03/1988		70 Expires 03/25		71 Owner's First Name MENASHE		72 Owner's Last Name HOROWICZ		73 Sex M		118m
02	74 Driver's License Number H66415390003882		75 DOB 03/03/1988		76 Expires 03/25		77 Owner's First Name MENASHE		78 Owner's Last Name HOROWICZ		79 Sex M		118n
103	80 Driver's License Number H66415390003882		81 DOB 03/03/1988		82 Expires 03/25		83 Owner's First Name MENASHE		84 Owner's Last Name HOROWICZ		85 Sex M		118o
03	86 Driver's License Number H66415390003882		87 DOB 03/03/1988		88 Expires 03/25		89 Owner's First Name MENASHE		90 Owner's Last Name HOROWICZ		91 Sex M		118p
104	92 Driver's License Number H66415390003882		93 DOB 03/03/1988		94 Expires 03/25		95 Owner's First Name MENASHE		96 Owner's Last Name HOROWICZ		97 Sex M		118q
2	98 Driver's License Number H66415390003882		99 DOB 03/03/1988		100 Expires 03/25		101 Owner's First Name MENASHE		102 Owner's Last Name HOROWICZ		103 Sex M		118r
105	104 Driver's License Number H66415390003882		105 DOB 03/03/1988		106 Expires 03/25		107 Owner's First Name MENASHE		108 Owner's Last Name HOROWICZ		109 Sex M		118s
01	106 Driver's License Number H66415390003882		107 DOB 03/03/1988		108 Expires 03/25		109 Owner's First Name MENASHE		110 Owner's Last Name HOROWICZ		111 Sex M		118t
106	108 Driver's License Number H66415390003882		109 DOB 03/03/1988		110 Expires 03/25		111 Owner's First Name MENASHE		112 Owner's Last Name HOROWICZ		113 Sex M		118u
-	110 Driver's License Number H66415390003882		111 DOB 03/03/1988		112 Expires 03/25		113 Owner's First Name MENASHE		114 Owner's Last Name HOROWICZ		115 Sex M		118v
107	112 Driver's License Number H66415390003882		113 DOB 03/03/1988		114 Expires 03/25		115 Owner's First Name MENASHE		116 Owner's Last Name HOROWICZ		117 Sex M		118w
-	114 Driver's License Number H66415390003882		115 DOB 03/03/1988		116 Expires 03/25		117 Owner's First Name MENASHE		118 Owner's Last Name HOROWICZ		119 Sex M		118x
108	116 Driver's License Number H66415390003882		117 DOB 03/03/1988		118 Expires 03/25		119 Owner's First Name						

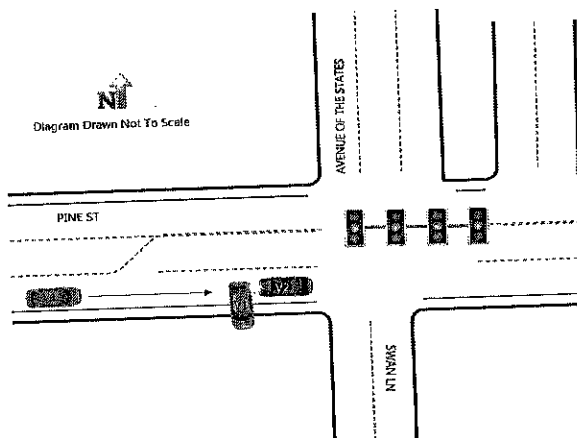
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-011765**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V2 stated she was stopped at a red light when she was then struck from the rear by V1.

Driver of V1 stated he attempted to stop by due to the snow his vehicle slid sideways causing him to strike V2.

The result of the investigation revealed that the driver of V1 was at fault due to him following too closely which resulted in him swerving while simultaneously braking to avoid striking V2. This resulted in V1 turning 90 degrees which resulted in V1 striking V2 at the 6 o'clock. Both parties reported no injuries at this time.

146 Officer's Signature
RIHACEK, A

147 Badge #
421

148 Reviewer
CM

Badge #
332

149 Case Status
☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-011766**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	
A L L E F I N V O L U N T A R Y	02	01	01	05	61	M	-	-	-	11	01	-	-	ABEL - COTTO 76 BOWMAN RD JACKSON NJ 08527

144 Crash Diagram (NOT TO SCALE)



Clifton Ave



Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver of veh1 stated that she was attempting to park, when she struck the rear of veh2. She advised that the impact was very light but noticeable.

The occupant of veh2 stated that he was sleep inside of his parked vehicle. While asleep he felt a hard thud from the rear of his vehicle that woke him up.

No medical attention needed.

Veh2 had prior bumper damage before this crash. The damage on the rear bumper were scratches and minor dents. However the new damage was removed paint from his bumper. Veh1 sustained no visible damage.

I find veh1 at fault for this crash.

146 Officer's Signature

SMITH D

147 Badge #

411

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

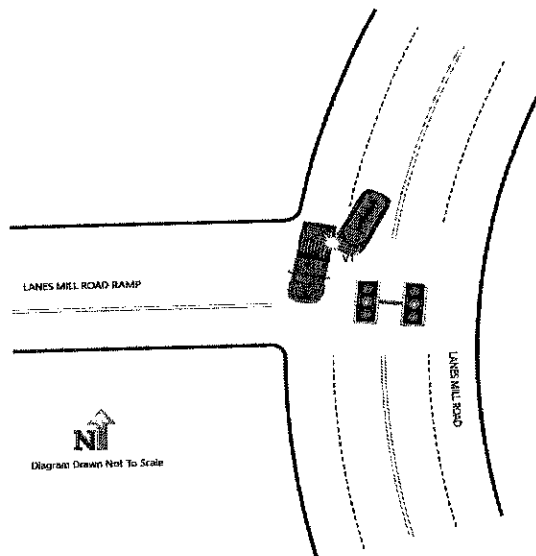
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-011790**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
83	84	85	86	87	88	89	90	91	92	93	94	95	
V2	01	01	05	34	F	-	-	-	11	04	-	-	RAQUEL - ROMERO 300 MAIN ST LAKEWOOD NJ 08701
V2	03	01	05	38	M	-	-	-	11	04	-	-	LEONARDO A VERGARA 300 OCEAN AVE; 1 LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle one stated to the effect: I was traveling South on Lanes Mills Road in the left lane. Upon approaching the intersection at Lanes Mills Road Ramp, I attempted to switch lanes to make a right turn. Upon doing so, I collided with vehicle two.

Driver of vehicle two stated to the effect: I was traveling South on Lanes Mills Road in the right lane. Upon approaching the intersection at Lanes Mills Road Ramp I continued straight ahead. I felt vehicle one strike my vehicle in the rear area.

As a result of my investigation, I have determined the driver of vehicle one to be at fault for improperly changing lanes to attempt a right hand turn. Vehicle one collided with vehicle two puncturing it's left rear tire. The tire was repaired on scene and vehicle two was driven. Driver of vehicle one was issued summonses for careless driving and operating an unregistered vehicle. The vehicle's registration was renewed at the scene and towed due to disablement. Driver of vehicle two was issued a summons for operating unlicensed. No injuries observed or reported.

END OF NARRATIVE.

146 Officer's Signature

MCMILLAN, P

147 Badge #

426

148 Reviewer

CM

Badge #

332

149 Case Status

☐ Pending ☒ Complete

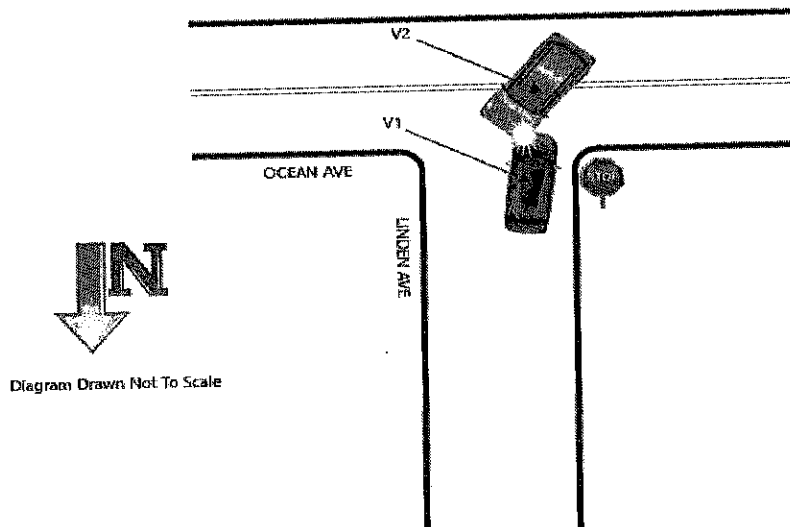
96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report		☒ Reportable		☐ Non-Reportable		☐ Change Report		
05	1 Case Number				10 Crash Occurred On:				11 Speed Limit				
97	22-011808				OCEAN AVE				40				0088
01	2 Police Dept of				At Intersection With				Road Name				Dir
98	LAKEWOOD TOWNSHIP F01				☒ Feet				☐ N ☐ E of				LINDEN AVE
07	3 Station/Precinct				☐ Miles				☐ S ☐ W				17 Cross Road Name
99					14				15				16
02	4 Date of Crash				5 Day Of Week				6 Time (use 2400 hrs)				7 Municipality Code
100a	02/13/22				SUNDAY				1820				1514
01	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #
100b	1				TLA00001544087				348				2
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												54 Policy No.
02	26 Driver's First Name				Initial				Last Name				56 Driver's First Name
102	MORDECHAI				B				GOFMAN				M
02	27 Number & Street												57 Number & Street
103	130 RICKY LN												1116 SOMERSET AVE
03	28 City				State				Zip				58 City
104	LAKEWOOD				NJ				08701				LAKEWOOD
2	30 Eyes				DL Class				Restrictions				Endorsements
	02				A								
105	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number
03	G61285636212892				12/23/1989				12 22				C91955130053746
106	35 Owner's First Name				Initial				Last Name				65 Owner's First Name
	☐ Same As Driver				MORDECHAI				B				GOFMAN
107	36 Number & Street												66 Number & Street
	130 RICKY LN												1116 SOMERSET AVE
108	37 City				State				Zip				67 City
01	LAKEWOOD				NJ				08701				LAKEWOOD
109	38 Make				39 Model				40 Color				41 Year
04	HOND				CIV				4				2019
110	44 VIN				45 Expires				46 Vehicle Removed To				74 VIN
01	2HGFC2F66KH594067				02 23								1GNSKHKC8KR243067
111	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded												☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded
112	☐ Left At Scene ☐ Towed Impounded												☐ Left At Scene ☐ Towed Impounded
113	47 Authority				☐ Owner ☒ Driver ☐ Police								77 Authority
114	48 Alcohol/Drug Test				Given: ☒ No ☐ Yes ☐ Refused				49 Hazardous Material				
115	Type: ☐ Breath ☐ Blood ☐ Urine								☒ None ☐ On Board ☐ Spill				
116	Results: 0. - % ☐ Pending								Hazard Class				
03	50 Carrier No.				☐ USDOT ☒ None				51 GVWR/GCWR				
117	☐ MC/MX								☒ Weight <= 10,000 lbs				
02									☐ 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				
	135 Damage To Other Property				☐ Yes (If Yes, describe) ☒ No								
	Oper.				136 Charge				137 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				05				
	32				M				11				
	04												
	MORDECHAI				B				GOFMAN				
	130 RICKY LN				LAKEWOOD				NJ 08701				
B	02				01				05				
	47				F				11				
	04												
	MALKA								CULANG				
	1116 SOMERSET AVE				LAKEWOOD				NJ 08701				
C	02				04				05				
	8				F				11				
	04												
	LEEBA								CULANG				
	1116 SOMERSET AVE				LAKEWOOD				NJ 08701				
D	02				05				05				
	10				M				11				
	04												
	ELI								GOLDSTEIN				
	1119 SOMERSET AVE				LAKEWOOD				NJ 08701				

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-011808

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death		
ALL F I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	ABRAHAM - CULANG		
	02	06	01	05	11	M	-	-	-	11	04	-	-	1116 SOMERSET AVE	LAKEWOOD	NJ 08701 -

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was on Linden Avenue attempting to negotiate a right turn onto Ocean Avenue when V2 struck his vehicle. Damage was minor to the front passenger fender and bumper. No injuries were reported.

The driver of V2 stated she was traveling east on Ocean Avenue before attempting to turn left on Linden Avenue. The driver stated she thought she took a wide enough turn but made impact with V1. Damage was minor to the passenger front fender and bumper. No injuries were reported by the driver or passengers.

My investigation of the vehicles, roadways and statements conclude: V1 was attempting making a right turn onto Ocean Avenue off of Linden Avenue. V2 was traveling east on Ocean Avenue before attempting to make a left turn onto Linden Avenue. V1 disobeyed the stop sign at the intersection and entered Ocean Avenue as V2 was attempting to turn. V1 is found to be at fault.

146 Officer's Signature
MEYER JR R147 Badge #
401148 Reviewer
CMBadge #
332149 Case Status
☐ Pending ☒ Complete

1 Case Number	22-011812										10 Crash Occurred On	BERGEN AVE										11 Speed Limit	25										118a																																																																																																			
2 Police Dept of	LAKEWOOD TOWNSHIP F01										Code											12 Route No.	12										118b																																																																																																			
3 Station/Precinct																						13 Milepost	40										119a																																																																																																			
4 Date of Crash	02/13/22										5 Day Of Week	SUNDAY										6 Time (use 2400 hrs)	1844										7 Municipality Code	1514										8 Total Killed	--										9 Total Injured	2										119b																																																																		
23 Veh #	1										24 Policy No.	4561-24-03-28										25 NJ Ins. Code	100										53 Veh #	2										54 Policy No.	PAA C1 49 57										55 NJ Ins. Code	168										120a																																																																		
26 Driver's First Name	JOSE-LUIS										Initial	-										Last Name	SANTIAGO-RAMIREZ -										29 Sex	M										56 Driver's First Name	DENA										Initial	-										Last Name	KRUPENIA										59 Sex	F										120b																																												
27 Number & Street	123 WOEHR AVE #1C										28 City	LAKEWOOD										State	NJ										Zip	08701										57 Number & Street	625 6TH ST										58 City	LAKEWOOD										State	NJ										Zip	08701										121a																																												
30 Eyes	-										DL Class	-										Restrictions	-										Endorsements	-										31 State	NJ										60 Eyes	02										DL Class	D										Restrictions	-										Endorsements	-										61 State	NJ										121b																						
32 Driver's License Number	-										33 DOB	10/10/1994										34 Expires	-										62 Driver's License Number	K76791620060002										63 DOB	10/25/2000										64 Expires	10 22										122																																																																		
35 Owner's First Name	BENITA										Initial	-										Last Name	MORALES										65 Owner's First Name	AARON										Initial	-										Last Name	KRUPENIA										123																																																																		
36 Number & Street	123 WOEHR AVE # 1C										37 City	LAKEWOOD										State	NJ										Zip	08701										66 Number & Street	128 E 8TH ST										67 City	LAKEWOOD										State	NJ										Zip	08701										124																																												
38 Make	HOND										39 Model	ACC										40 Color	STL										41 Year	2009										42 Plate No.	R75PDV										43 State	NJ										68 Make	CHEV										69 Model	IMP - IM										70 Color	WHI										71 Year	2007										72 Plate No.	H83NMG										73 State	NJ										125
44 VIN	JHMCP26429C015768										45 Expires	09 22										74 VIN	2G1WB58K579226910										75 Expires	03 23										126a																																																																																								
46 Vehicle Removed To	TOTAL CAR CARE										47 Authority	Owner										48 Alcohol/Drug Test	Given: No Yes Refused										49 Hazardous Material	None On Board Spill										76 Vehicle Removed To	-										77 Authority	Owner										78 Alcohol/Drug Test	Given: No Yes Refused										79 Hazardous Material	None On Board Spill										126b																																												
50 Carrier No.	USDOT										51 GVWR/GCWR	Weight <= 10,000 lbs										80 Carrier No.	USDOT										81 GVWR/GCWR	Weight <= 10,000 lbs										126c																																																																																								
52 Motor Carrier or Government Entity	-										82 Motor Carrier or Government Entity	-										126d																																																																																																														
Number & Street	-										City	-										State	-										Zip	-										126e																																																																																								
135 Damage To Other Property	Yes (If Yes, describe)										136 Charge	39:3-10										137 Summons. No.	291980										138 Charge	-										139 Summons. No.	-										127a																																																																													
140 Charge	-										141 Summons. No.	-										142 Charge	-										143 Summons. No.	-										127b																																																																																								
83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										127c																																																																																																													
01	01	01	03	27	M	09	08	02	11	11	02	6502	JOSE-LUIS - SANTIAGO-RAMIREZ										127d																																																																																																													
02	01	01	04	21	F	11	08	01	11	04	-	-	DENA - KRUPENIA										127e																																																																																																													
03	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										128																																																																																																													
04	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										129																																																																																																													
05	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										130																																																																																																													
06	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										131																																																																																																													
07	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										132																																																																																																													
08	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										133																																																																																																													
09	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										134																																																																																																													
10	01	01	04	21	F	11	08	01	11	04	-	-	625 6TH ST LAKEWOOD NJ 08701										135																																																																																																													

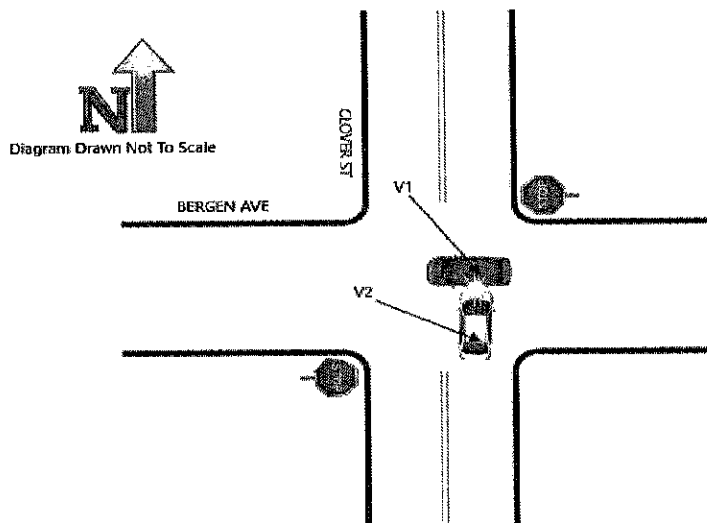
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-011812**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling west on Bergen Avenue, through the intersection of Clover Street. The driver stated he thought the intersection was clear, proceeded through and was struck. Damage is primarily to the driver rear door. The driver had a complaint of pain to his left side, predominantly to the abdomen. He was transported to MMCSC by LEMS.

The driver of V2 stated she was traveling north on Clover Street, through the intersection of Bergen Avenue. The driver stated V1 disregarded the stop sign on Bergen Avenue, proceeded through the intersection and was unable to avoid the collision. The damage was primarily to the front end. The driver had a complaint of pain to her left knee but refused medical attention on scene.

My investigation reveals: V1 was traveling west on Bergen Avenue, through the intersection of Clover Street. The driver of V1 disobeyed the stop sign on Bergen Avenue and entered the intersection. V2 was unable to avoid the crash. V1 is found to be at fault.

146 Officer's Signature

MEYER JR R

147 Badge #

401

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

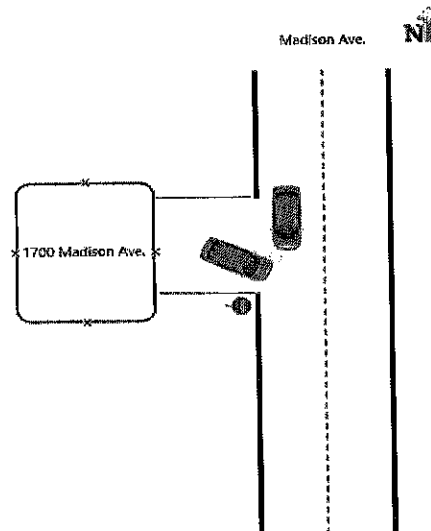
96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		10 Crash Occurred On: MADISON AVE		11 Speed Limit 0009		118a 04
97	22-011819						
01	2 Police Dept of		Code		12 Route No. 13 Milepost 18 Speed Limit		118b -
98	LAKEWOOD TOWNSHIP		01				
07	3 Station/Preinct				17 Cross Road Name		119a 25
99							119b -
02	4 Date of Crash		5 Day Of Week		6 Time (use 2400 hrs)		120a -
100a	02/13/22		SUNDAY		1933 1514		120b 01
01	23 Veh #		24 Policy No.		25 NJ Ins. Code		
100b	1		902295735		135		
04	26 Driver's First Name		Initial Last Name		29 Sex		
101	BENZION		B TEICHMAN		M		
02	27 Number & Street		57 Number & Street		59 Sex		
102	515 RIDGE CT		71 S PARKER DR		M		121a 01
02	28 City		State Zip		61 State		121b -
104	LAKEWOOD		NJ 08701		NY 10952		
2	30 Eyes		DL Class		Restrictions		122 12
	3		D				123 07
105	32 Driver's License Number		33 DOB		34 Expires		
03	T22550846209973		09/16/1997		09 25		
106	35 Owner's First Name		Initial Last Name		65 Owner's First Name		
-	JOSEPH		TEICHMAN		CHAIM		124 08
107	36 Number & Street		515 RIDGE CT		71 S PARKER DR		125 04
-							126a 26
108	37 City		State Zip		67 City		126b -
01	LAKEWOOD		NJ 08701		MONSEY		126c -
109	38 Make		39 Model		40 Color		126d -
01	HOND		ACC		BLK		126e 26
110	44 VIN		45 Expires		74 VIN		
01	1HGCR2F39HA812159		01 23		4T1BE32K83U171100		127a 26
111	46 Vehicle Removed To		76 Vehicle Removed To		79 Hazardous Material		127b -
01	HESHEY'S TOWING						127c -
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded				127d -
-	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded				127e 26
113	47 Authority		77 Authority		80 Carrier No.		
-	☐ Owner ☒ Driver ☐ Police		☒ Owner ☐ Driver ☐ Police		☐ USDOT ☒ None		128 26
114	48 Alcohol/Drug Test		49 Hazardous Material		81 GVWR/GCWR		
-	Given: ☒ No ☐ Yes ☐ Refused		☒ None ☐ On Board ☐ Spill		☒ Weight <= 10,000 lbs		129 11
115	Type: ☐ Breath ☐ Blood ☐ Urine				☐ Weight 10,001-26,000 lbs		130 11
-	Results: 0. - % ☐ Pending		Hazard Class Placard No.		☐ Weight >= 26,001 lbs		131 02
116	50 Carrier No.		51 GVWR/GCWR		82 Motor Carrier or Government Entity		132 02
02	☐ USDOT ☒ None		☒ Weight <= 10,000 lbs				133 03
117	☐ MC/MX		☐ Weight 10,001-26,000 lbs				134 04
03	☐ MC/MX		☐ Weight >= 26,001 lbs				
	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity				
	Number & Street		Number & Street				
	City		City				
	State		State				
	Zip		Zip				
	135 Damage To Other Property		☐ Yes (If Yes, describe) ☒ No				
	Oper. 136 Charge		137 Summons. No.		Oper. 138 Charge		
	1				139 Summons. No.		
	Oper. 140 Charge		141 Summons. No.		Oper. 142 Charge		
	2				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		05		
B	2		01		05		
C	2		03		05		
D							
	BENZION		B TEICHMAN				
	515 RIDGE CT		LAKEWOOD		NJ 08701		
	CHAIM		LEITMAN				
	71 S PARKER DR		MONSEY		NY 10952		
	HANA		LEITMAN				
	71 S PARKER DR		MONSEY		NY 10952		

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011819**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 was attempting to exit the parking lot of 1700 Madison Ave. and crashed into Vehicle 2. The driver of Vehicle 1 believed Vehicle 2 had their right turning signal on and was attempting to enter 1700 Madison Ave., so he began to enter Rt. 9 south and merge with traffic.

The driver of Vehicle 2 stated he was traveling south on Rt. 9 and was slowing down with traffic due to a red traffic signal that was ahead. He stated he did not have his turn signal on and Vehicle 1 entered his lane of travel and crashed into him.

Based on my observations and speaking with all parties involved, I determined that Vehicle 1 entered the roadway and did not properly yield to traffic that was already in the roadway.

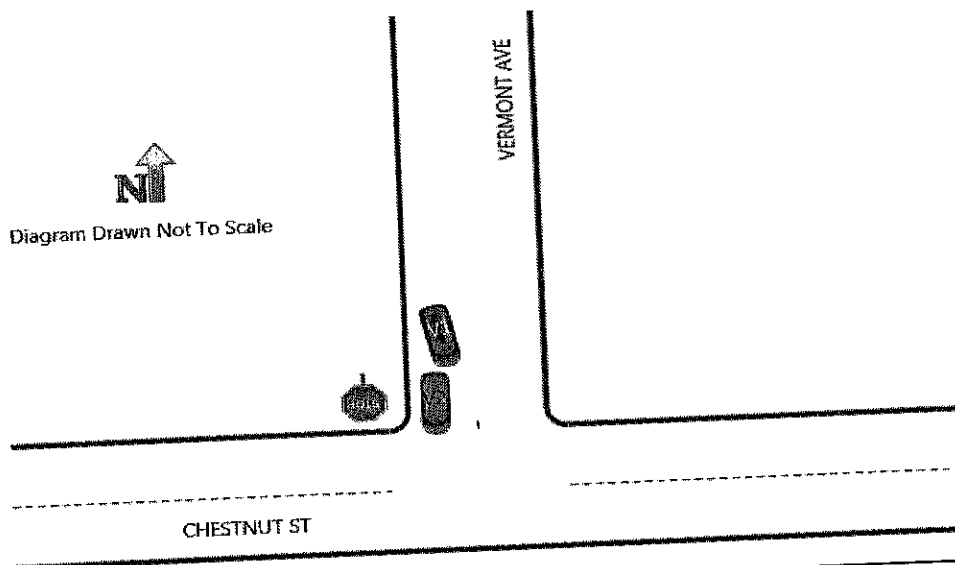
146 Officer's Signature
NICKERSON, K147 Badge #
378148 Reviewer
CMBadge #
332149 Case Status
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**
Station: _____ Case No: **22-011814**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V2 stated that she was stopped at the stop sign on waiting for a vehicle to pass and was then struck from the rear by V1.

Driver of V1 stated he believed that V2 was going to make a right turn and did not realize that V2 had stopped to yield to the right of way for traffic which resulted in V1 striking V2.

The results of the investigation revealed that Driver of V1 was at fault due to following too closely which resulted in V1 striking V2 at the 7 o'clock. Both parties reported no injuries at this time.

146 Officer's Signature
RIHACEK, A147 Badge #
421148 Reviewer
CMBadge #
332149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																			
05	1 Case Number				22-011836										11 Speed Limit		35		118a																																			
01	2 Police Dept of				Code		LAKEWOOD TOWNSHIP F01										10 Crash Occurred On:		CLIFTON		02																																	
98	3 Station/Precinct																☐ At Intersection With		Road Name		12 Route No.		Suffix		13 Milepost		18 Speed Limit		25																									
05																	☒ Feet		N		E		of: 10TH																															
99																	☐ Miles		S		W																																	
08	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19 Ramp		17 Cross Road Name		20 Route/Name		22 Longitude		21 Latitude		40.09995		-74.21609																											
100a	mm dd yy				02/13/22		SUNDAY		2202		1514																																											
01	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01																													
04	1				4477078176				148				2				953863744				134				02																													
101	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run																																					
02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				59 Sex																									
102	ELIYAHU				Y				LAUFER				-				M				JACQUES				-				GRUNSPAN				-																					
02	27 Number & Street																57 Number & Street																121a																					
103	363 BERGEN AVE																31 5TH ST																121b																					
02	28 City				State				Zip				58 City				State				Zip																																	
104	LAKEWOOD				NJ				08701				LAKEWOOD				NJ				08701																																	
2	30 Eyes				DL Class				Restrictions				Endorsements				60 Eyes				DL Class				Restrictions				Endorsements				61 State																					
	6				D												6				D												NJ																					
105	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires																																	
05	L08732128808926				08/11/1992				08				25				G76753820007566				07/26/1956				12				19																									
106	35 Owner's				First Name				Initial				Last Name				65 Owner's				First Name				Initial				Last Name																									
-	☐ Same As Driver				PERRY				-				LAUFER				☐ Same As Driver				JACQUES				-				GRUNSPAN				-																					
107	36 Number & Street																66 Number & Street																																					
-	72 KEW GARDENS DR																31 5TH ST																																					
108	37 City				State				Zip				67 City				State				Zip																																	
	PCALAKEWOOD				NJ				08701				LAKEWOOD				NJ				08701																																	
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									
	PCALTOYT				CAM				GRY				2010				B58GCT				NJ				TOYT				HIG				BLK				2019				R46KVD				NJ									
110	44 VIN												45 Expires				74 VIN												75 Expires																									
01	4T4BF3EKXAR070796												12				22				5TDBZRFH8KS935556												12				22																	
111	46 Vehicle Removed To																76 Vehicle Removed To																																					
01	HESHEY TOWING																																																					
112	☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☐ Driven				☒ Towed Disabled				☐ Towed Disabled & Impounded																																	
-	☐ Left At Scene				☐ Towed 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																																	
-	Given: ☒ No				☐ Yes				☐ Refused				☒ None				☐ On Board				☐ Spill				Given: ☒ No				☐ Yes				☐ Refused				☒ None				☐ On Board				☐ Spill									
115	Type: ☐ Breath				☐ Blood				☐ Urine												Type: ☐ Breath				☐ Blood				☐ Urine																									
116	Results: 0, - %				☐ Pending								Hazard Class				Placard No.				Results: 0, - %				☐ Pending								Hazard Class				Placard No.																	
01	50 Carrier No.												51 GVWR/GCWR								80 Carrier No.												81 GVWR/GCWR																					
117	☐ USDOT								☒ None				☒ Weight <= 10,000 lbs				☐ Weight 10,001-25,000 lbs				☐ Weight >= 26,001 lbs				☐ USDOT								☒ None				☒ Weight <= 10,000 lbs				☐ Weight 10,001-25,000 lbs				☐ Weight >= 26,001 lbs									
04	☐ MC/MX																								☐ MC/MX																													
	52 Motor Carrier or Government Entity																82 Motor Carrier or Government Entity																																					
	Number & Street																Number & Street																																					
	City				State				Zip				City				State				Zip																																	
	135 Damage To Other Property				☐ Yes (If Yes, describe)				☐ No																																													
	Oper.				136 Charge				137 Summons. No.				Oper.				138 Charge				139 Summons. No.																																	
	Oper.				140 Charge				141 Summons. No.				Oper.				142 Charge				143 Summons. No.																																	
	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death	
A	1				01				01				05				29				M				-				-				01				11				04				-				-				ELIYAHU Y LAUFER	
B	2				01				01				05				65				M				-				-				01				11				04				-				-				363 BERGEN AVE LAKEWOOD NJ 08701	
C																																																					JACQUES - GRUNSPAN	
D																																																					31 5TH ST LAKEWOOD NJ 08701	

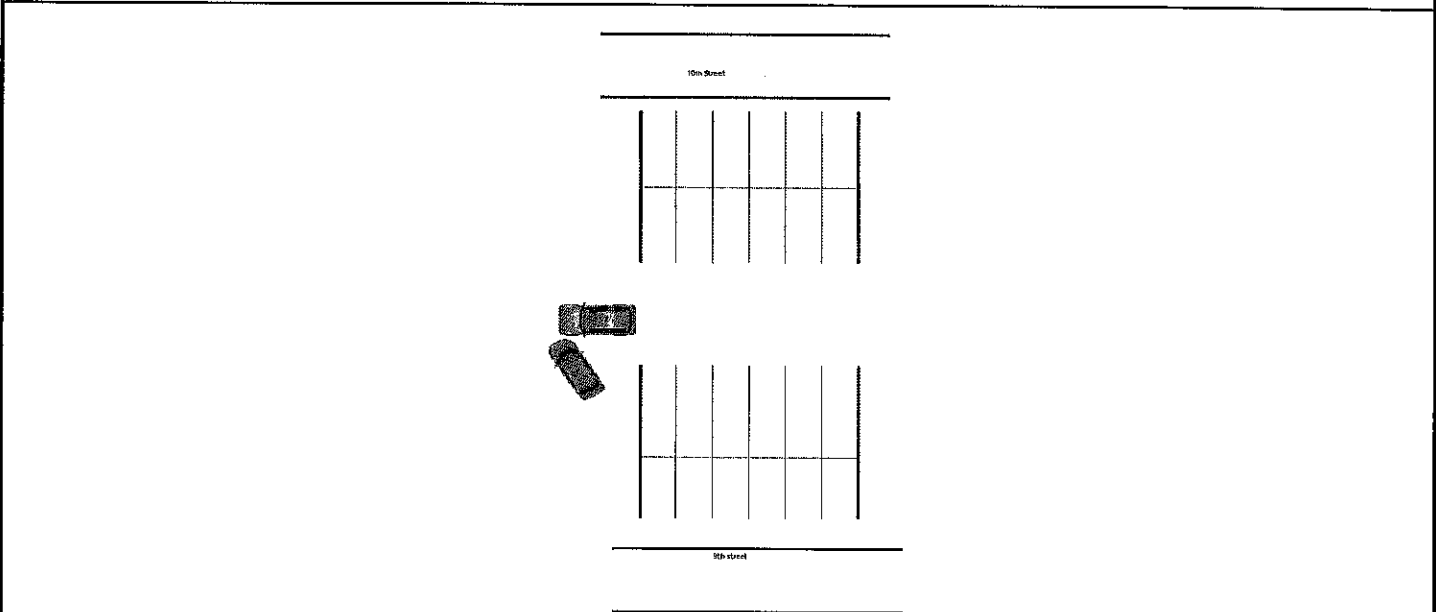
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011836**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver one stated he pulled into the municipal lot located in between 9th and 10th street. He then made a left heading west down one of the driving aisles. Driver one then made a right heading north when vehicle two attempted to turn left in front of his vehicle causing the collision.

Driver two stated he entered the municipal lot behind vehicle one. Vehicle one then made a left down one of the driving aisles heading west. Driver two stated he continued north in the parking lot approximately two driving aisles north. Driver two then made a left heading west. Driver two stated he continued west until the collision occurred between both vehicles.

When asked how the crash occurred both driver one and two were unsure how the collision actually occurred. Both vehicles were moved to a different location in the municipal lot upon my arrival. I observed vehicle two to have initial impact on the drivers front fender, the impact traveled down the drivers side of vehicle two to the rear bumper. Vehicle one damage was located only on the passenger front bumper/fender area.

146 Officer's Signature

SPAGNUOLO D

147 Badge #

394

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending ☒ Complete

A
B
C
D

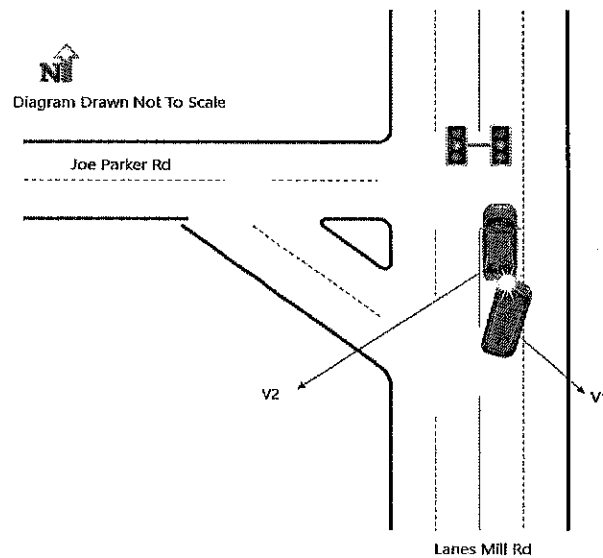
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-011520**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle 1 stated that she was traveling north on Lanes Mill Road. While traveling north, she saw vehicle 2 indicating with her signal that she was making a left-hand turn. The driver of vehicle 1 expressed that she thought that the driver of vehicle 2 would make the left-hand turn, and as she got closer, she attempted to avoid the collision. While trying to avoid the collision, she struck her rear bumper. The driver and passenger of vehicle 1 were not injured and refused medical attention. Vehicle 1 was disabled and removed by Tilton Body Works.

The driver of vehicle 2 stated that she was stopped in traffic at the intersection of Lanes Mill & Joe Parker. While she was stopped due to traffic, vehicle 1 collided into her. The driver and passenger of vehicle 2 were not injured and refused medical attention. Vehicle 2 left the scene safely.

146 Officer's Signature
TOWNSEND T

147 Badge #
403

148 Reviewer
PA

Badge #
325

149 Case Status
☐ Pending ☒ Complete

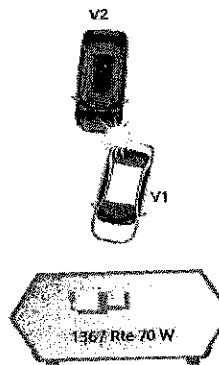
[illegible]

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-011521

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was backing in the parking lot of 1367 Rte 70 W and crashed into the front of vehicle 2 which was stopped in traffic in the parking lot of 1367 Rte 70 W.

Driver 1 stated she was at the car was on 1367 Rte 70 W when she had to back up due to being too close to the entrance of the car wash. When she attempted to back up she did not see vehicle 2, which was on her right side, and crashed into the front of vehicle 2.

Driver 2 stated he was in line for the carwash when vehicle 2 backed into his vehicle.

There were no injuries reported on scene and both vehicles sustained minor damage.

Based on my observations and speaking with both drivers, I determined that driver 1 was at fault for failing to see vehicle 2 which would have avoided the crash.

Driver 2 has New York insurance and the information is as follows; USAA General Idemnity 9800 Fredericksburg Rd San Antonio TX, 78288. Policy Number 03192 61 60G. Phone number 210-531-8722

146 Officer's Signature
GARRETSON C147 Badge #
391148 Reviewer
PABadge #
325149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																	
05	1 Case Number 22-011542										10 Crash Occurred On: 935 JESSICA CT										11 Speed Limit 15		118a		10																											
01	2 Police Dept of LAKEWOOD TOWNSHIP										Code 01		30 At Intersection With ☐ Feet ☒ Miles										Road Name OCEAN AVE		12 Route No.		Suffix		13 Milepost 40		118b		-																			
01	3 Station/Precinct										100		14 ☐ 15 ☐ 16 ☒ 17 Cross Road Name										19 To From:		17		18 Speed Limit 40		119a		25																					
09	4 Date of Crash mm dd yy 02/12/22										5 Day Of Week SATURDAY		6 Time (use 2400 hrs) 1518		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		21 Latitude 40.085980		20 Route/Name		22 Longitude -74.179130		119b		-																							
04	23 Veh # 1										24 Policy No. 934380690										25 NJ Ins. Code 135		53 Veh # 2										54 Policy No. HPA00002710838										55 NJ Ins. Code 017		120a		01					
02	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										26 Driver's First Name Initial Last Name JUAN C HUERTERO										29 Sex M		56 Driver's First Name Initial Last Name EMIGDIO - NIEVES-SANCHEZ										59 Sex M		120b		00															
01	27 Number & Street 608 6TH ST										28 City JACKSON										State NJ		Zip 08527		57 Number & Street 235 1ST ST										58 City LAKEWOOD										State NJ		Zip 08701		121a		01	
01	30 Eyes 02										DL Class D		Restrictions -		Endorsements -		31 State NJ		60 Eyes 02										DL Class D		Restrictions -		Endorsements -		61 State NJ		122		13													
08	32 Driver's License Number H91194156305892										33 DOB mm dd yyyy 05/11/1989		34 Expires mm yy 05 23		62 Driver's License Number N42162240008812										63 DOB mm dd yyyy 08/05/1981		64 Expires mm yy 08 25		123		01																					
06	35 Owner's First Name JUAN										Initial C		Last Name HUERTERO		-		65 Owner's First Name EMIGDIO										Initial -		Last Name NIEVES-SANCHEZ		-		124		04																	
07	36 Number & Street 608 6TH ST										37 City JACKSON										State NJ		Zip 08527		66 Number & Street 235 1ST ST										67 City LAKEWOOD										State NJ		Zip 08701		125		04	
04	38 Make TOYT										39 Model TAC		40 Color WHI		41 Year 2004		42 Plate No. H56NCP		43 State NJ		68 Make TOYT										69 Model CHR		70 Color SIL		71 Year 2018		72 Plate No. N53NRX		73 State NJ		126a		26									
01	44 VIN STENL42N24Z395737										45 Expires 01 22		74 VIN NMTKHMBX6JR020740										75 Expires 04 22		126b		-																									
01	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										126c		-																													
01	47 Authority ☒ Owner ☐ Driver ☐ Police										77 Authority ☒ Owner ☐ Driver ☐ Police										126d		-																													
02	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.										126e		26									
02	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127d		-									
01	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										127e		26																													
	Number & Street										Number & Street										128		26																													
	City										State		Zip		City										State		Zip		129		07																					
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No																				130		07																													
	Oper. 136 Charge										137 Summons. No.										Oper. 138 Charge										139 Summons. No.										131		03									
	Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										143 Summons. No.										132		03									
																																									133		02									
																																									134		02									
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death																																						
	01	01	01	05	32	M	-	-	-	11	04	-	-	JUAN C HUERTERO 608 6TH ST JACKSON NJ 08527										-																												
B	02	01	01	05	40	M	-	-	-	11	04	-	-	EMIGDIO - NIEVES-SANCHEZ 235 1ST ST LAKEWOOD NJ 08701										-																												
C																																																				
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New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011542**

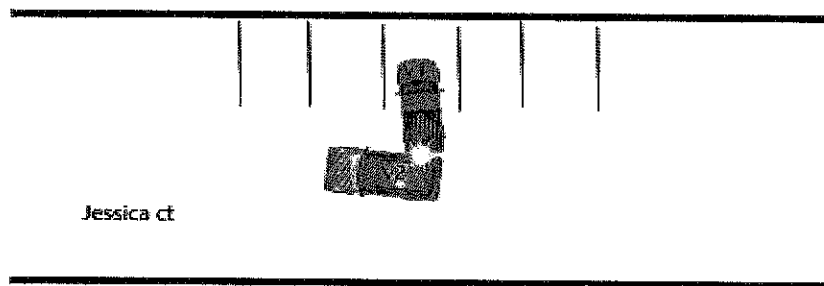
(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Driver of vehicle 1 stated that he was backing up out of a parking space when he crashed into veh2. He did not notice veh2 driving.

Driver of vehicle 2 stated that he was driving on Jessica Ct when he was hit by veh1.

Both drivers did not need medical attention at the time of the crash

Veh1 is up to date with his registration. I observed the receipt with his updated Reg. Local DMV did not update in the system yet.

Driver of veh1 is at fault for the crash.

146 Officer's Signature

SMITH D

147 Badge #

411

148 Reviewer

JP

Badge #

290

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Form with multiple sections for accident details, including vehicle information, driver details, and witness statements. Includes checkboxes for 'Reportable', 'Non-Reportable', and 'Change Report'.

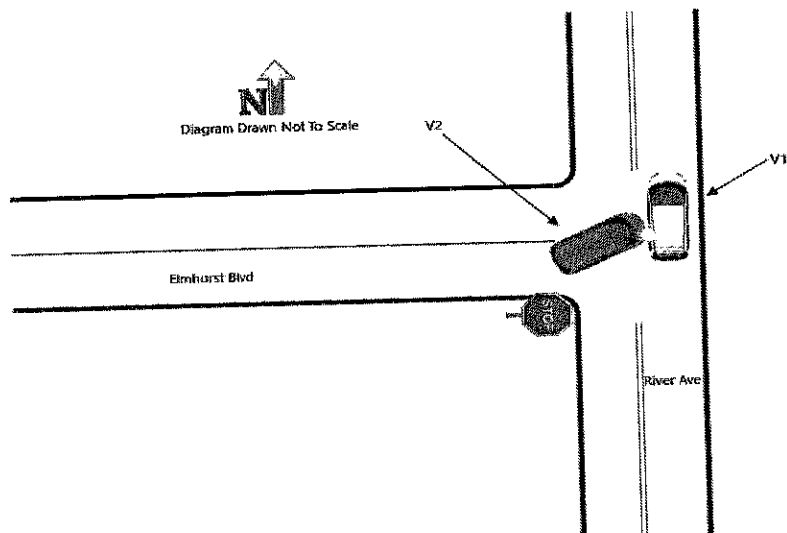
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-011600**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
F														
I														
N														
V														
O														
L														
V														
E														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated, he was traveling north on River Ave. He stated, when he saw vehicle 2 entering the roadway from Elmhurst Blvd he activated his horn but was unable to avoid the crash. The damage was primarily to the driver side rear door. No injuries reported.

Driver 2 stated, he was making a left turn from Elmhurst Blvd onto River Ave. He stated, he did not observe vehicle 1 coming and collided into vehicle 1. The damage was primarily to the passenger side front end. No injuries reported.

As a result of my investigation, I, Patrolman Connor Woods #418 determined driver 2 at fault for the crash for failing to yield the right of way to vehicle 1.

146 Officer's Signature
WOODS, C147 Badge #
418148 Reviewer
DIBIASEBadge #
286149 Case Status
☐ Pending ☒ Complete

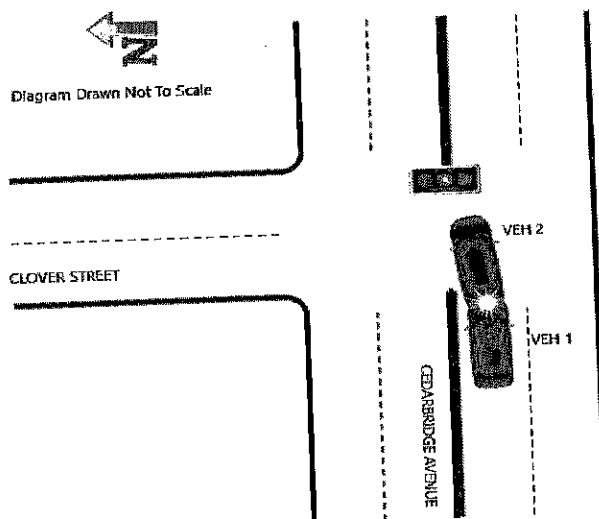
96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable			☐ Non-Reportable			☐ Change Report																																																																																																																																																																									
05	1 Case Number										10 Crash Occurred On: CEDARBRIDGE AVE										11 Speed Limit		45		0528		-		-		118a																																																																																																																																																															
01	2 Police Dept of										Code		☒ At Intersection With										Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		09																																																																																																																																																											
07	LAKEWOOD TOWNSHIP										01		☐ Feet										☐ N		☐ E		of: S CLOVER ST						25		-		118b																																																																																																																																																									
07	3 Station/Precinct												☐ Miles										☐ S		☐ W		19		To		17 Cross Road Name		☐ NB		☐ EB		119a																																																																																																																																																									
05	4 Date of Crash										5 Day Of Week		6 Time										7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		20 Route/Name		22 Longitude		119b																																																																																																																																																											
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02	26 Driver's First Name										Initial										Last Name										29 Sex										56 Driver's First Name										Initial										Last Name										59 Sex										121a																																																																																																													
01	JAMES										L										NANSON										-										M										OMAR										L										RIVERA										-										M										01																																																																																									
01	27 Number & Street										40 YELLOWBROOK ROAD										57 Number & Street										324 COTTAGE PL										121b																																																																																																																																																					
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2	30 Eyes										DL Class										Restrictions										Endorsements										31 State										60 Eyes										DL Class										Restrictions										Endorsements										61 State										122																																																																																									
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106	35 Owner's										First Name										Initial										Last Name										65 Owner's										First Name										Initial										Last Name										124																																																																																																													
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107	36 Number & Street										35 REDWOOD DRIVE										66 Number & Street										1860 LANES MILL RD										126a																																																																																																																																																					
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01	EATONTOWN										NJ										07724										LAKEWOOD										NJ										08701										26																																																																																																																																	
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										126c																																																																					
01	PONT										G6										RD										2008										V71MYP										NJ										VOLK										JET - JE										BLK										2013										T29PDW										NJ										-																																																																					
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111	46 Vehicle Removed To										76 Vehicle Removed To										127c																																																																																																																																																																									
01	FREEDOM TOWING & RECOVERY										-										127d																																																																																																																																																																									
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115	Type: ☐ Breath										☐ Blood										☐ Urine										Type: ☐ Breath										☐ Blood										☐ Urine										Type: ☐ Breath										☐ Blood										☐ Urine										127j																																																																																																			
116	Results: 0, -										%										☐ Pending										Hazard Class										Placard No.										Results: 0, -										%										☐ Pending										Hazard Class										Placard No.										127k																																																																																									
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117	☐ USDOT										☒ None										☐ USDOT										☒ None										☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										127m																																																																																									
02	☐ MC/MX										☐ MC/MX										☐ MC/MX										☐ MC/MX										☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										127n																																																																																									
118	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										127o																																																																																																																																																																									
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123	Oper.										140 Charge										141 Summons. No.										Oper.										142 Charge										143 Summons. No.										04																																																																																																																																	
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New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**
Station: **-** Case No: **22-011603**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was traveling in the left lane eastbound on Cedar Bridge Ave approaching the intersection with Clover Street. He stated a dark colored mini van was traveling in the right lane eastbound on Cedar Bridge Ave and would not let him over. He stated the mini van boxed him in and he did not see vehicle 2 making the left turn in front of him. He stated due to the mini van blocking him from getting over into the right lane, it caused him to crash into vehicle 2 in the intersection.

Driver of vehicle 2 stated he was attempting to make a left turn from Cedar bridge Ave eastbound onto Clover Street. He stated as he begun to turn he was crashed into by vehicle 1.

Vehicle 1 sustained disabling damage to the front of the vehicle and front airbag deployment. Vehicle 1 was towed by Freedom Towing. Vehicle 2 sustained minor damage to the rear of the vehicle and was driven from the scene by a valid licensed driver. P3 and P5 in Vehicle 1 had complaint of pain and signed off with Lakewood EMS.

Driver of vehicle 1 was issued one motor vehicle summons for Careless Driving and the Driver of vehicle 2 was issued one motor vehicle summons for being an Unlicensed Driver.

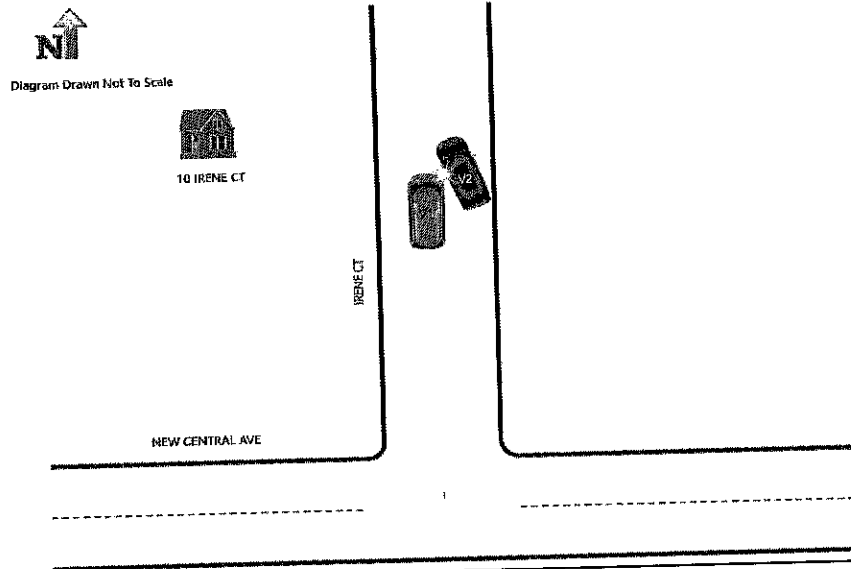
146 Officer's Signature
VADINO, L147 Badge #
419148 Reviewer
DIBIASEBadge #
286149 Case Status
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-011638**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL IF INVOLVED J	83	84	85	86	87	88	89	90	91	92	93	94	95	
	V1	07	01	05	3	M	-	-	-	11	04	-	-	MOSHE - HAGER 810 E COUNTY LINE RD LAKEWOOD NJ 08701
	V1	08	01	05	4	F	-	-	-	11	04	-	-	PEARL - HAGER 810 E COUNTY LINE RD LAKEWOOD NJ 08701
	V1	09	01	05	9	F	-	-	-	11	04	-	-	SERYL - HAGER 810 E COUNTY LINE RD LAKEWOOD NJ 08701
	V2	01	01	05	23	M	-	-	-	11	04	-	-	ARI - LIPSCHUTZ 110 SHADY LANE DR LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

THE DRIVER OF V1 STATED HE WAS TRAVELING NORTHBOUND ON IRENE CT. THE DRIVER OF V1 OBSERVED V2 MAKE A WIDE LEFT TURN AND ATTEMPT TO PARK IN THE DRIVEWAY OF 10 IRENE CT. THE DRIVER OF V1 STATED THAT HE THOUGHT THAT V2 WAS GOING TO PARK ON THE EASTSIDE OF IRENE CT. THE DRIVER OF V1 ATTEMPTED TO DRIVE AROUND V2 AND CRASHED INTO V2'S DRIVER SIDE DOOR.

THE DRIVER OF V2 STATED THAT HE WAS TRAVELING NORTHBOUND ON IRENE CT. AS HE TRAVELED NORTH ON IRENE CT, HE ATTEMPTED TO MAKE A LEFT TURN INTO THE DRIVEWAY OF 10 IRENE CT. AS V2 WAS ATTEMPTING THE LEFT TURN, V1 STRUCK HIS VEHICLE ON THE DRIVER SIDE.

AFTER OBSERVING THE SCENE AND SPEAKING WITH BOTH PARTIES, I FIND V1 AT FAULT FOR FAILING TO YIELD THE RIGHT OF WAY TO V2.

NO INJURIES WERE REPORTED ON SCENE.

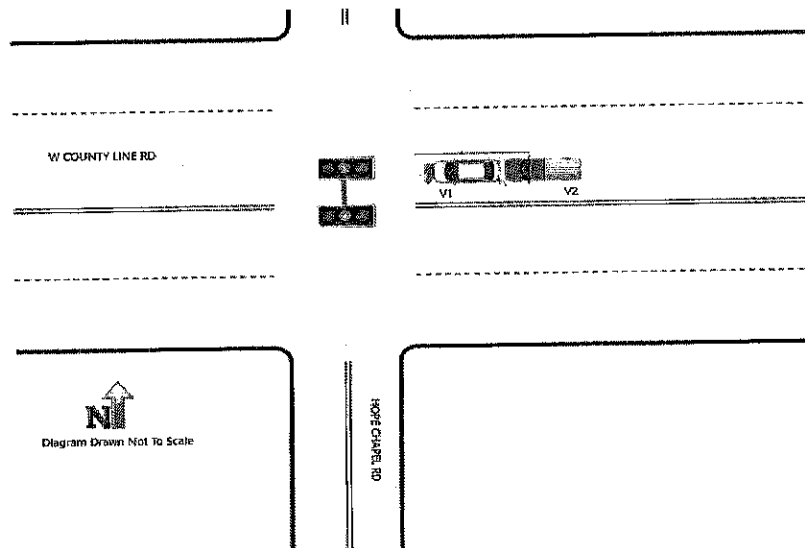
146 Officer's Signature
VILLALBA, M147 Badge #
425148 Reviewer
LNJBadge #
322149 Case Status
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-011010

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated she was facing Westbound on West County Line Rd at the intersection of Hope Chapel Rd in the Left Turn Lane awaiting to negotiate turn. She stated while awaiting to negotiate a left turn onto Hope Chapel Rd Vehicle 2 collided into the rear of her Vehicle.

Driver 2 stated he was in the Left Turn Lane behind Vehicle 1 awaiting to negotiate a Left Turn. He stated while awaiting to make turn a tool box in his truck began to move within his Vehicle. Driver 2 stated as he attempted to grab the toolbox his foot came off the brake and his Vehicle collided into the rear of Vehicle 1.

I determined Crash was caused by Vehicle 2 for Following too Closely.

146 Officer's Signature

MCAVOY D

147 Badge #

372

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number 22-011013		10 Crash Occurred On: E COUNTY LINE RD		11 Speed Limit 40
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		12 Route No. 0526		13 Milepost 15
07	3 Station/Predinct		14 Date of Crash 02/10/22		15 Day Of Week THURSDAY
05	4 Date of Crash mm dd yy		5 Time (use 2400 hrs) 1804		6 Municipality Code 1514
01	7 Total Killed 1		8 Total Injured 1		9 Latitude 40.10262
04	23 Veh # 1		24 Policy No. 45MGEP0162244-09		25 NJ Ins. Code 962
01	26 Driver's First Name EDUVIGES		27 Number & Street 633 W COUNTY LINE RD		28 City LAKEWOOD
01	29 Sex F		30 Eyes -		31 State NJ
01	32 Driver's License Number -		33 DOB mm dd yyyy 10/16/1989		34 Expires mm yy -
01	35 Owner's First Name BELMAR		36 Number & Street 101 DUBBS AVE LOT 118		37 City WEST COLUMBIA
04	38 Make CHEV		39 Model EQX		40 Color GRY
04	41 Year 2007		42 Plate No. LXS480		43 State SC
01	44 VIN 2CNDL63F576028806		45 Expires 02 24		46 Vehicle Removed To TOTAL CAR CARE
01	47 Authority Driver		48 Alcohol/Drug Test Given: No Yes Refused		49 Hazardous Material None On Board Spill
02	50 Carrier No. USDOT MC/MX		51 GVWR/GCWR Weight <= 10,000 lbs		52 Motor Carrier or Government Entity
02	53 Veh # 2		54 Policy No. 136 4588-E18-30		55 NJ Ins. Code 962
01	56 Driver's First Name ELIZABETH		57 Number & Street 1303 MARSHALL ST		58 City LAKEWOOD
01	59 Sex F		60 Eyes 2		61 State NJ
01	62 Driver's License Number V22152128861022		63 DOB mm dd yyyy 11/15/2002		64 Expires mm yy 11 25
04	65 Owner's First Name AGUSTIN		66 Number & Street 1303 MARSHALL ST		67 City LAKEWOOD
04	68 Make NISS		69 Model PAT		70 Color WHI
04	71 Year 2005		72 Plate No. S51PGV		73 State NJ
01	74 VIN 5N1AR18UX5C734623		75 Expires 11 22		76 Vehicle Removed To Driven Towed Disabled Towed Disabled & Impounded
01	77 Authority Driver		78 Alcohol/Drug Test Given: No Yes Refused		79 Hazardous Material None On Board Spill
02	80 Carrier No. USDOT MC/MX		81 GVWR/GCWR Weight <= 10,000 lbs		82 Motor Carrier or Government Entity
02	83 Damage To Other Property No		84 Motor Carrier or Government Entity		85 Number & Street
06	86 City LAKEWOOD		87 State NJ		88 Zip 08701
06	89 Summons. No. 290913		90 Summons. No. 139		91 Summons. No. 143
04	92 Charge 39:3-10		93 Charge 142		94 Charge 143
03	95 Names & Addresses of Occupants - If Deceased, Date & Time of Death		96 Names & Addresses of Occupants - If Deceased, Date & Time of Death		97 Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1 01 01 03 32 F 02 04 01 11 04 - -		EDUVIGES REYES		633 W COUNTY LINE RD LAKEWOOD NJ 08701
B	1 06 01 05 11 F - - - 11 04 - -		KELLYN LOPEZ		633 W COUNTY LINE RD LAKEWOOD NJ 08701
C	1 05 01 05 1 F - - - 05 05 - -		JAYDEN LOPEZ		633 W COUNTY LINE RD LAKEWOOD NJ 08701
D	2 01 01 05 19 F - - - 11 04 - -		ELIZABETH Y VEGAALVA		1303 MARSHALL ST LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011013**

(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
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144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale

E COUNTY LINE RD

V2

145 Crash Description/Narrative

Driver 1 stated she was traveling on E County Line Rd and did not realize traffic was stopped in front of her and she did not have enough time to brake causing her to collide into the back of V2.

Driver 2 stated she was stopped in traffic on E County Line Rd when she was suddenly hit from behind by V1.

Upon my arrival, I spoke with all parties involved in this accident. Driver 1 is at fault for following too closely to V2. Driver 1 was issued a summons for unlicensed driver. Driver 1 sustained a minor cut on her lip but refused medical attention. No other injuries reported.

Driver 1 insurance:

**Gainsco Auto Insurance
Code #40150
1-833-752-9078
No address available**

146 Officer's Signature

GIANOUIS J

147 Badge #

410

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																																				
05	1 Case Number	22-011069										10 Crash Occurred On:	570 STATE HWY 70					E	11 Speed Limit	15	118a	10																																																																																																																
97	2 Police Dept of	LAKEWOOD TOWNSHIP F01										Code											12 Route No.	Suffix	13 Milepost	18 Speed Limit		118b																																																																																																										
98	3 Station/Predict											At Intersection With											Dir											17 Cross Road Name											NB	EB	119a	13																																																																																						
06	4 Date of Crash	mm		dd		yy		5 Day Of Week	THURSDAY		6 Time (use 2400 hrs)	2232		7 Municipality Code	1514		8 Total Killed			9 Total Injured			21 Latitude	40.05045		22 Longitude	-74.19614		SB	WB	119b																																																																																																							
09	23 Veh #	1										24 Policy No.	939553143										25 NJ Ins. Code	134										53 Veh #	2										54 Policy No.	F10018841-6										55 NJ Ins. Code	426										01	01																																																																		
100b	26 Driver's First Name	JOSEPH										Initial	E										Last Name	FULLER JR										29 Sex	M										56 Driver's First Name											Initial											Last Name											59 Sex											120a																																													
04	27 Number & Street	529 DAVIDS COURT										State	NJ										Zip	08701										57 Number & Street											State											Zip											120b																																																																			
101	28 City	LAKEWOOD										State	NJ										Zip	08701										58 City											State											Zip											121a	01																																																																		
102	30 Eyes	2										DL Class	A										Restrictions											Endorsements											31 State	NJ										60 Eyes											DL Class											Restrictions											Endorsements											61 State											122	13																						
103	32 Driver's License Number	F92194106504962										33 DOB mm dd yyyy	04/28/1996										34 Expires mm yy	04 22										62 Driver's License Number											63 DOB mm dd yyyy											64 Expires mm yy											123	10																																																																		
06	35 Owner's First Name	JOSEPH										Initial	E										Last Name	FULLER										65 Owner's First Name	MICHELE										Initial	T										Last Name	HANLEY										124	11																																																																		
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107	37 City	LAKEWOOD										State	NJ										Zip	08701										67 City	TOMS RIVER										State	NJ										Zip	08757										126a	28																																																																		
108	38 Make	HOND										39 Model	CIV										40 Color	SIL										41 Year	2002										42 Plate No.	P68HZH										43 State	NJ										68 Make	SUBA										69 Model	FOR - FO										70 Color	1										71 Year	2017										72 Plate No.	UMS87Y										73 State	NJ										126b	
109	44 VIN	2HGES16592H510372										45 Expires	06 21										74 VIN	JF2SJAEC4HH592502										75 Expires	03 23										126c																																																																																									
01	46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										47 Authority	☐ Owner ☒ Driver ☐ Police										76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										126d																																																																																																				
111	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Pending										49 Hazardous Material	☒ None ☐ On Board ☐ Spill										77 Authority	☒ Owner ☐ Driver ☐ Police										78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Pending										79 Hazardous Material	☒ None ☐ On Board ☐ Spill										126e	28																																																																													
112	Type: ☐ Breath ☐ Blood ☐ Urine											Hazard Class											Placard No.											Type: ☐ Breath ☐ Blood ☐ Urine											Results: 0. - % ☐ Pending											Hazard Class											Placard No.											127a	26																																																							
113	50 Carrier No.	☐ USDOT ☒ None										51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No.	☐ USDOT ☒ None										81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127b																																																																																									
114	52 Motor Carrier or Government Entity											82 Motor Carrier or Government Entity											127c																																																																																																															
115	Number & Street											City											State											Zip											127d																																																																																									
116	135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No										136 Charge											137 Summons. No.											138 Charge											139 Summons. No.											127e	26																																																																													
04	140 Charge											141 Summons. No.											142 Charge											143 Summons. No.											128	28																																																																																								
04	Names & Addresses of Occupants - If Deceased, Date & Time of Death											129											130											131											132											133											134											02	02																																																							
A	83	84	85	86	87	88	89	90	91	92	93	94	95	JOSEPH E FULLER JR										529 DAVIDS COURT LAKEWOOD NJ 08701										JR																																																																																																				
B	1	01	01	05	25	M	-	-	-	11	04	-	-																																																																																																																									
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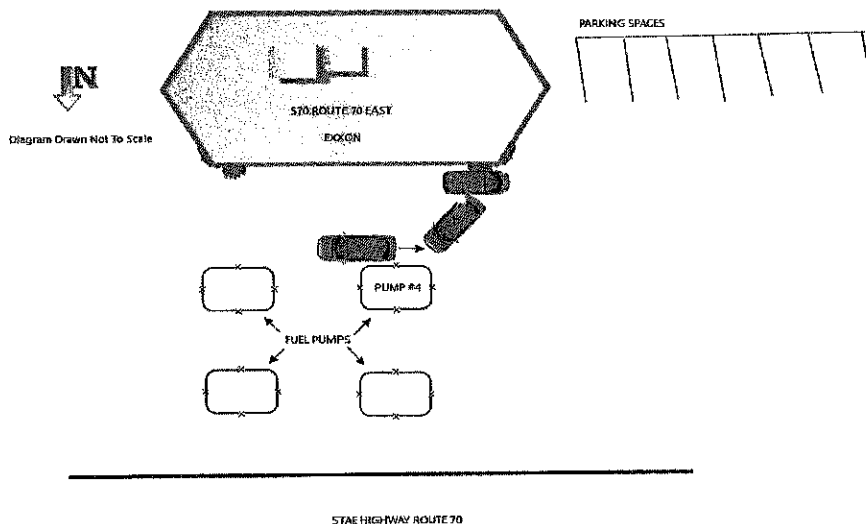
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011069**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Veh #1 was parked facing East at a fuel pump at an Exxon Station located at 570 State Highway 70 East. Veh #2 was parked facing West, against the curb, in the same business.

The driver of Veh #1 stated when he had pulled up to pump #4 to purchase gas, Veh #2 was not yet parked in its location. He stated that after fueling, he backed his vehicle, and did not see that Veh #2 had parked in its position against the curb in front of the store.

The owner of Veh #2 stated that as she parked her vehicle against the curb, she saw Veh #1 beginning to back up. She stated that there was plenty of space for Veh #1 to back up safely and she went into the store. When she came out she was made aware by the driver of Veh #1 that he had backed into her vehicle.

It should be noted that the business does have painted parking spaces designated for its store customers. Veh #2 was not parked in a parking space but rather against the curb in front of the store. The curb is faintly painted yellow, as to signify a non parking area, however there is no signage indicating it as such. The owner of Veh #2 stated that she did not think the curb was yellow due to the paint being worn out.

No injuries were reported.

146 Officer's Signature

DEBARTOLOMEIS J

147 Badge #

358

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

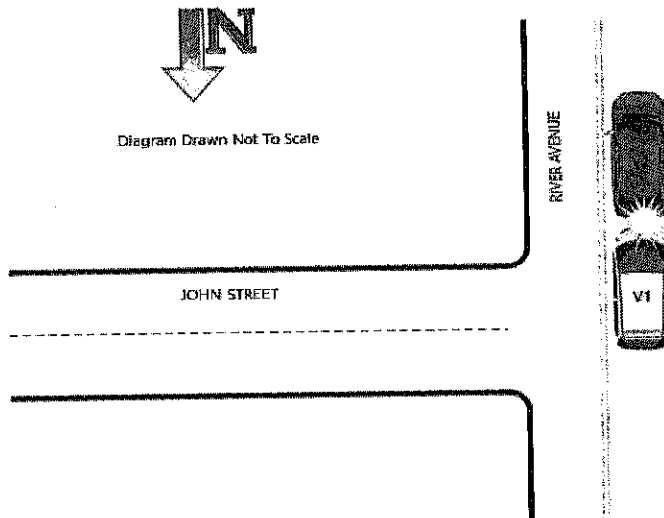
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-011053

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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F														
I														
N														
V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 2 stated he was traveling south on River Avenue slowing in traffic. While slowing, the driver of vehicle 2 stated he was rear ended by vehicle 1. The driver of vehicle 2 stated vehicle 1 continued traveling south on River Avenue leaving the scene of the accident. The driver of vehicle 2 was unable to provide a description of vehicle 1.

A witness stated he was traveling behind vehicle 1 when the crash occurred. The witness was able to provide a license plate of vehicle 1 bearing PA registration LTK8509. The witness was added into Spillman.

I was able to obtain video surveillance from 100 River Avenue. This video shows vehicle 2 slowing in traffic traveling south on River Avenue, with vehicle 1 colliding with the rear end of vehicle 2. I am not able to determine vehicle 1's registration in the video provided. This video was attached into Spillman.

END OF REPORT
PTL. A. PRISCO #427

146 Officer's Signature
PRISCO, A

147 Badge #
427

148 Reviewer
SGT. M. LORENC

Badge #
316

149 Case Status
☐ Pending ☒ Complete

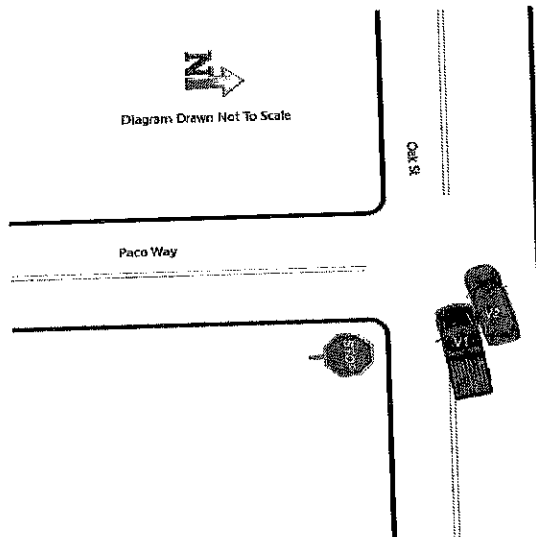
05	1 Case Number 22-010974		10 Crash Occurred On: OAK ST		11 Speed Limit 40		12 Route No.		Suffix		13 Milepost		18 Speed Limit 25		06		
97	2 Police Dept of LAKEWOOD TOWNSHIP F01		Code		14 At Intersection With ☒ Feet ☐ N ☐ E of ☐ S ☐ W		15		16		17 Cross Road Name		19 To Ramp From: -		118a		
98	3 Station/Precinct		4 Date of Crash mm dd yy 02/10/22		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 1534		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		118b		
01	23 Veh # 1		24 Policy No. 4403901756		25 NJ Ins. Code 148		53 Veh # 2		54 Policy No. 939895001		55 NJ Ins. Code 054		59 Sex M		119a		
01	26 Driver's First Name RODRIGO		Initial C		Last Name MINA JR		29 Sex M		56 Driver's First Name JAVIER		Initial A		Last Name INIGUEZ		119b		
01	27 Number & Street 308 ROBERTS ROAD		28 City TOMS RIVER		State NJ		Zip 08755		57 Number & Street 20 ROSLYN DR		58 City OAKHURST		State NJ		120a		
01	30 Eyes 02		DL Class D		Restrictions -		Endorsements -		60 Eyes 02		DL Class -		Restrictions -		120b		
02	32 Driver's License Number M44546646307432		33 DOB mm dd yyyy 07/23/1943		34 Expires mm yy 07 23		62 Driver's License Number I59353906110792		63 DOB mm dd yyyy 10/11/1979		64 Expires mm yy 10 22		65 Owner's First Name JAVIER		121a		
01	35 Owner's First Name RODRIGO		Initial C		Last Name MINA JR		65 Owner's First Name JAVIER		Initial A		Last Name INIGUEZ		66 Number & Street 20 ROSLYN DR		121b		
01	36 Number & Street 308 ROBERTS ROAD		37 City TOMS RIVER		State NJ		Zip 08755		67 City OAKHURST		State NJ		Zip 07755		122		
01	38 Make CHEV		39 Model COL		40 Color BLK		41 Year 2021		42 Plate No. T82NJB		43 State NJ		68 Make CHEV		123		
01	44 VIN 1GCHSBEAXM1206629		45 Expires 01 25		74 VIN 1G1JC52F947314780		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		124		
01	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.		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		125
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		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		83 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		136 Charge 137 Summons. No.		138 Charge 139 Summons. No.		126a
01	52 Motor Carrier or Government Entity Number & Street City State Zip		83 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		136 Charge 137 Summons. No.		138 Charge 139 Summons. No.		140 Charge 141 Summons. No.		142 Charge 143 Summons. No.		144 Charge 145 Summons. No.		146 Charge 147 Summons. No.		126b
01	83		84		85		86		87		88		89		90		126c
01	83		84		85		86		87		88		89		90		126d
01	83		84		85		86		87		88		89		90		126e
01	83		84		85		86		87		88		89		90		126f
01	83		84		85		86		87		88		89		90		126g
01	83		84		85		86		87		88		89		90		126h
01	83		84		85		86		87		88		89		90		126i
01	83		84		85		86		87		88		89		90		126j
01	83		84		85		86		87		88		89		90		126k
01</																	

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-010974

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
L														
F														
I														
N														
V														
O														
L														
V														
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D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 was travelling westbound on Oak St approaching the intersection of Paco Way. He reported that a blue vehicle (vehicle 2) had their 4-way hazards on and was stopped on the shoulder lane of Oak St. As vehicle 1 approached vehicle 2, he passed him and then vehicle 2 turned into vehicle 1.

Driver of vehicle 2 was stopped in traffic facing westbound on Oak St with his left turn signal activated to turn onto Paco Way. Once it was safe to turn onto Paco Way, driver of vehicle 2 started to turn when vehicle 1 passed him on the inside of his vehicle.

After my investigation, I determined that driver of vehicle 1 is at fault for improper passing. Vehicle 1 sustained moderate damage to the front passenger fender near the tire. Vehicle 2 sustained moderate damage to the front driver side window and area near the tire. Both vehicle 1 and vehicle 2 were able to drive from the scene. No injuries reported at this time.

146 Officer's Signature
AMOROSO, A147 Badge #
415148 Reviewer
E. MIICKBadge #
307149 Case Status
☐ Pending ☒ Complete

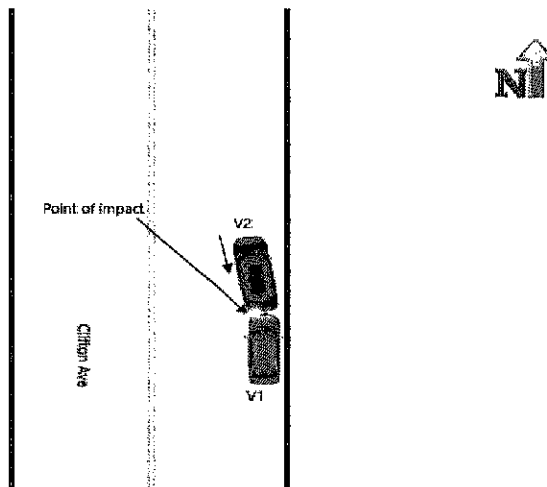
New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-010911

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL F I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)

Diagram Drawn Not To Scale



145 Crash Description/Narrative

Vehicle 2 struck vehicle 1 while backing into a parking space on Clifton Ave.

I spoke with the driver of vehicle 2 and owner of vehicle 1. Owner of vehicle 1 stated that he witnessed driver of vehicle 2 hit his legally parked vehicle while trying to back into a parking spot causing minimal damage to his front bumper.

Driver of vehicle 2 stated that while he was backing into a parking spot on Clifton Ave he struck the front bumper of vehicle 1.

Based on my observation and driver statements I determined that driver of vehicle 2 is at fault due to driver inattention and backing unsafely.

It should be noted that the insurance for vehicle 2 is an out of state insurance: New York State Farm Mutual Automobile, company code 328, policy 258 1230-F09-32, phone number (718)-692-2500.

146 Officer's Signature

CARRINGTON K

147 Badge #

829

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☒ Pending ☐ Complete

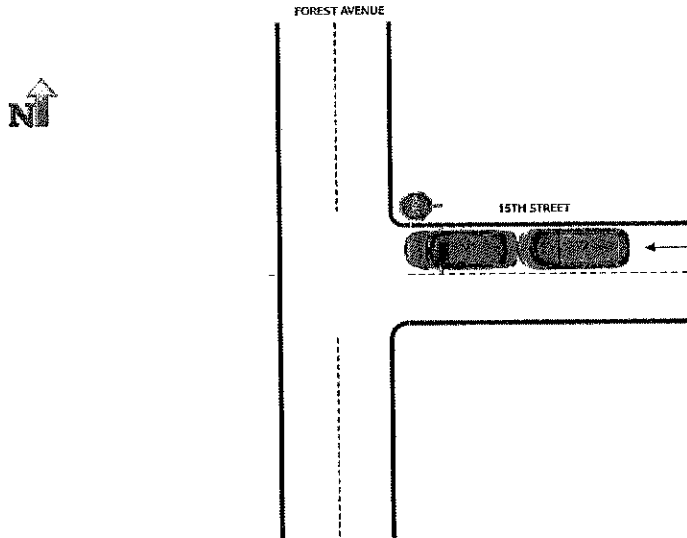
New Jersey Police
Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
Station: _____ Case No: **22-010947**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED "I WAS STOPPED AND PUSHED IN THE BACK."

DRIVER OF VEHICLE 2 STATED SHE BUMPED VEHICLE 2 IN THE REAR.

THIS INVESTIGATION DETERMINED VEHICLE 1 WAS ON 15TH STREET STOPPED A STOP SIGN FACING WEST AT THE INTERSECTION WITH FOREST AVENUE. VEHICLE 2 WAS TRAVELING WEST ON 15TH STREET AND STRUCK VEHICLE 1 IN THE REAR.

146 Officer's Signature SEUNATH K	147 Badge # 284	148 Reviewer MY	Badge # 329	149 Case Status ☐ Pending ☒ Complete
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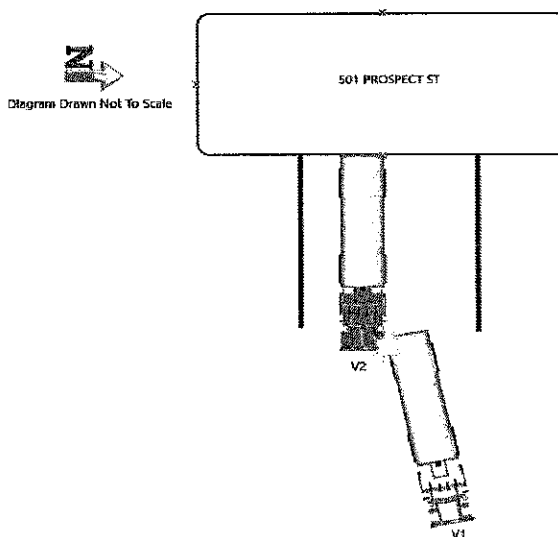
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-010950**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

On 2/10/2022 at approximately 1227hrs, I was dispatched to 501 Prospect Street in reference to a crash. Upon arrival, I met with the driver of vehicle 2 who was identified as Darren Williams. Mr. Williams reported that while his truck was backed into the loading bay of 501 Prospect Street, vehicle 1 pulled up and was going to utilize the loading bay located right next to Mr. Williams. Mr. Williams stated that as vehicle 1 was backing in, it began to get too close so he utilized his horn to notify the driver of vehicle 1. Mr. Williams further reported that as vehicle 1 began to go forward, the rear of vehicle 1 struck the front driver side of his vehicle.

I then spoke with the driver of vehicle 1 who was identified as Michael Vitale. Mr. Vitale reported that while he was backing into the loading bay, vehicle 2 began to honk their horn because he was getting too close. Mr. Vitale reported that as he began to drive forward, the rear end of his vehicle struck vehicle 1.

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

Vehicle 1 sustained no damage.

Vehicle 2 sustained the front driver side bumper to be bent forward and scratches to the driver side fender.

Vehicle 2 Insurance Information:
 TC2JCAP6E00464ATIL21 25674
 LEBAUM COMPANY, INC
 P.O. BOX 450
 MONSEY, NY 10952

146 Officer's Signature

SHEEHAN, M

147 Badge #

423

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										Reportable		Non-Reportable		Change Report																																																																																																																																																							
05	1 Case Number										10 Crash Occurred On: VINE AVENUE										11 Speed Limit		45		09																																																																																																																																																	
97	22-010894										12 Route No.										Suffix		13 Milepost		18 Speed Limit																																																																																																																																																	
01	2 Police Dept of										Code										14		15		16		17																																																																																																																																															
98	LAKEWOOD TOWNSHIP										01										19		20		21		22																																																																																																																																															
01	3 Station/Predict										5										6		7		8		9																																																																																																																																															
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100b	1										NJ00050943										946										2										SELF-INSURED										-																																																																																																																							
04	26 Driver's First Name										Initial Last Name										29 Sex										56 Driver's First Name										Initial Last Name										59 Sex																																																																																																																							
101	GITEL										- GREENSPAN										F										SHARON										K HEFTER										F																																																																																																																							
02	27 Number & Street										31 State										32 Zip										57 Number & Street										61 State										62 Zip																																																																																																																							
102	311 DAMIANO WAY										NJ										08701										36 RENEE CT										NJ										08701																																																																																																																							
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105	32 Driver's License Number										33 DOB										34 Expires										62 Driver's License Number										63 DOB										64 Expires																																																																																																																							
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106	35 Owner's First Name										Initial Last Name										65 Owner's First Name										Initial Last Name																																																																																																																																											
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107	36 Number & Street										37 City										38 State										39 Zip										66 Number & Street										67 City										68 State										69 Zip																																																																																																			
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-	Owner Driver Police										Owner Driver Police																																																																																																																																																															
05	48 Alcohol/Drug Test										49 Hazardous Material										78 Alcohol/Drug Test										79 Hazardous Material																																																																																																																																											
114	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.																																																																																																																																											
08	Results: 0. - % Pending										-										Results: 0. - % Pending										-																																																																																																																																											
01	50 Carrier No.										51 GVWR/GCWR										80 Carrier No.										81 GVWR/GCWR																																																																																																																																											
117	USDOT MC/MX										Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs										USDOT MC/MX										Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs																																																																																																																																											
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122	140 Charge										141 Summons. No.										142 Charge										143 Summons. No.																																																																																																																																											
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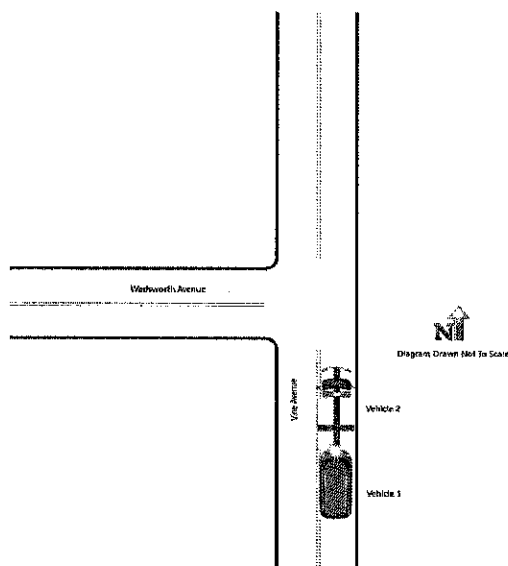
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-010894**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 was traveling north on Vine Avenue. She stated she was stopping in traffic when her vehicle made contact with the rear of vehicle 2.

Driver of vehicle 2 was traveling north on Vine Avenue. Driver 2 stated she was stopped in traffic and felt the rear of the vehicle had been struck.

Vehicle 1 had minor damage to the fender and vehicle 2 had minor damage to the bumper.

As per my observation and the information provided, driver 1 was at fault for following too closely.

Vehicle 2 Car Insurance Information:

Self- Insured : 05-87

Expiration date: 01/01/2023

146 Officer's Signature

ESMART A

147 Badge #

402

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

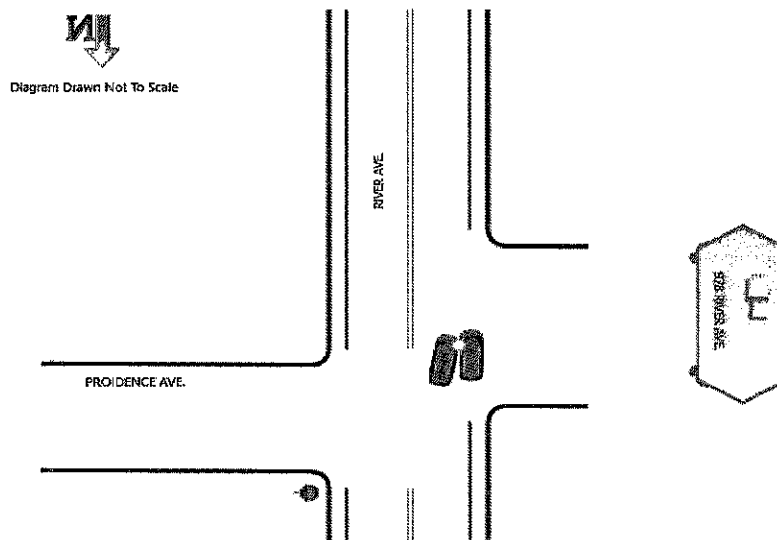
96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																																														
05	1 Case Number 22-010898										10 Crash Occurred On: RIVER AVE										11 Speed Limit 40		0009		-		118a																																																																																																																																						
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										Code										12 Route No.		Suffix		13 Milepost		118b																																																																																																																																						
01	3 Station/Precinct										10										14		15		16		119a																																																																																																																																						
02	4 Date of Crash 02/10/22										5 Day Of Week THURSDAY										6 Time (use 2400 hrs) 0857										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										17 Cross Road Name										18 Speed Limit 25										119b																																																																																
01	23 Veh # 1										24 Policy No. TCA00002024638										25 NJ Ins. Code 632										53 Veh # 2										54 Policy No. 6021248432061										55 NJ Ins. Code 884										119c																																																																																																				
02	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ N ☐ E of: PROVIDENCE CT										☐ S ☐ W										19 Ramp										20 Route/Name										☐ NB ☐ EB										120a																																																																																																				
01	26 Driver's First Name BENJAMIN										Initial -										Last Name LEMBERGER										29 Sex M										56 Driver's First Name ISSAC										Initial -										Last Name FREUND										59 Sex M										120b																																																																																
01	27 Number & Street 165 CHATEAU DR										State NJ										Zip 08701										57 Number & Street 164 CHATEAU DR										State NJ										Zip 08701										121a																																																																																																				
01	28 City LAKEWOOD										29 Sex M										58 City LAKEWOOD										59 Sex M										121b																																																																																																																								
2	30 Eyes 2										DL Class -										Restrictions -										Endorsements -										31 State NJ										60 Eyes 6										DL Class D										Restrictions -										Endorsements -										61 State NJ										122																																																												
02	32 Driver's License Number L24530820001792										33 DOB mm dd yyyy 01/23/1979										34 Expires mm yy 03 22										62 Driver's License Number F73643770004946										63 DOB mm dd yyyy 04/15/1994										64 Expires mm yy 04 23										123																																																																																																				
01	35 Owner's First Name BENJAMIN										Initial -										Last Name LEMBERGER										65 Owner's First Name ISSAC										Initial -										Last Name FREUND										124																																																																																																				
01	36 Number & Street 165 CHATEAU DR										State NJ										Zip 08701										66 Number & Street 164 CHATEAU DR										State NJ										Zip 08701										125																																																																																																				
01	37 City LAKEWOOD										38 Make CHRY										39 Model TOW - TO										40 Color GRN										41 Year 2005										42 Plate No. L62BZS										43 State NJ										67 City LAKEWOOD										68 Make KIA										69 Model SED										70 Color RD										71 Year 2017										72 Plate No. L94NUV										73 State NJ										126a																				
01	44 VIN 2C4GP44R35R402103										45 Expires 04 22										74 VIN KNDB5C10H6315435										75 Expires 06 22										126b																																																																																																																								
01	46 Vehicle Removed To										47 Authority ☒ Owner ☐ Driver ☐ Police										76 Vehicle Removed To										77 Authority ☒ Owner ☐ Driver ☐ Police										126c																																																																																																																								
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☐ Left At Scene ☐ Towed Impounded										☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☐ Left At Scene ☐ Towed Impounded										126d																																																																																																																								
03	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										126e																																																																																																																								
03	Type: ☐ Breath ☐ Blood ☐ Urine										Hazard Class										Placard No.										Type: ☐ Breath ☐ Blood ☐ Urine										Hazard Class										Placard No.										127a																																																																																																				
03	Results: 0. - % ☐ Pending										50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127b																																																																																																														
03	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										127c																																																																																																																																												
03	Number & Street										City										State										Zip										127d																																																																																																																								
03	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No										136 Charge										137 Summons. No.										138 Charge										139 Summons. No.										127e																																																																																																														
03	140 Charge										141 Summons. No.										142 Charge										143 Summons. No.										128																																																																																																																								
03	83										84										85										86										87										88										89										90										91										92										93										94										95										Names & Addresses of Occupants - If Deceased, Date & Time of Death										129																				
A	V1										01										01										-										43										M										-										-										-										11										04										-										-										BENJAMIN										-										LEMBERGER										130
B	V1										03										01										-										13										M										-										-										-										11										04										-										-										NOSSON										-										LEMBERGER										131
C	V1										04										01										-										12										M										-										-										-										11										04										-										-										AVROHOM										-										EDELTOUCH										132
D	V2										01										01										-										27										M										-										-										-										11										04										-										-										ISSAC										-										FREUND										133
	165 CHATEAU DR										LAKEWOOD										NJ										08701										164 CHATEAU DR										LAKEWOOD										NJ										08701										134																																																																																
	165 CHATEAU DR										LAKEWOOD										NJ										08701										164 CHATEAU DR										LAKEWOOD										NJ										08701										135																																																																																
	161 CHATEAU DR										LAKEWOOD										NJ										08701										164 CHATEAU DR										LAKEWOOD										NJ										08701										136																																																																																
	164 CHATEAU DR										LAKEWOOD										NJ										08701										164 CHATEAU DR										LAKEWOOD										NJ										08701										137																																																																																

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-010898**

(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
A														
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N														
V														
O														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated he was traveling southbound on River Ave., put his right turn signal on, and attempted to make a right turn into the parking lot of 978 River Ave. but collided with vehicle #2. The driver of vehicle #2 stated he was traveling behind vehicle #1, and observed vehicle #1 turn on their left hand turn signal. Driver #2 believed vehicle #1 was making a left turn onto Providence Ave., and proceeded to pass vehicle #1 in the shoulder to the right which resulted in the collision. At this time I am unable to determine fault due to the conflicting stories. No injuries were reported while on scene. -end-

146 Officer's Signature

ALLEN W

147 Badge #

287

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

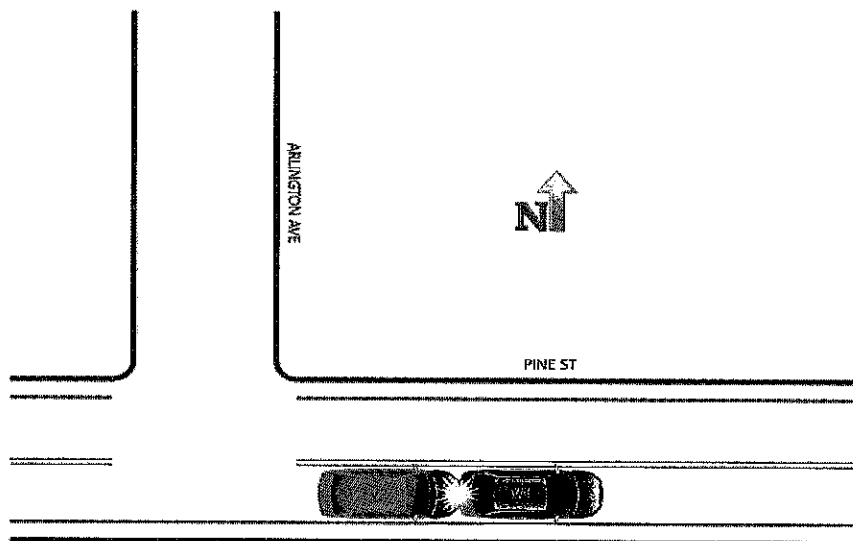
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-010867**

(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
A														
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L														
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I														
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V														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING EAST ON PINE ST. VEHICLE 2 WAS TRAVELING BEHIND VEHICLE 1.

DRIVER 1 STATED THAT A VEHICLE IN FRONT OF HIM STOPPED SO HE DID AS WELL. VEHICLE 2 THEN STRUCK HIS VEHICLE FROM BEHIND.

DRIVER 2 STATED THAT VEHICLE 1 STOPPED SHORT AND HE COULD NOT STOP IN TIME.

IT APPEARS THAT DRIVER 2 WAS FOLLOWING VEHICLE 1 TOO CLOSELY CAUSING THE CRASH. DRIVER 2 IS AT FAULT.

146 Officer's Signature

RIVERA M

147 Badge #

327

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number		10 Crash Occurred On: ISABELLA DR		11 Speed Limit 15
97	22-010868				02
01	2 Police Dept of		Code		118b
98	LAKEWOOD TOWNSHIP		01		-
02	3 Station/Precinct		15		119a
99					-
07	4 Date of Crash mm dd yy		5 Day Of Week		119b
100a	02/10/22 THURSDAY				-
01	6 Time (use 2400 hrs)		7 Municipality Code		120a
	0736 1514		--		-
100b	23 Veh #		24 Policy No.		01
04	1				120b
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		25 NJ Ins. Code		-
02	26 Driver's First Name Initial Last Name		29 Sex		121a
102	MIGUEL - PEREZ		M		-
01	27 Number & Street		56 Driver's First Name Initial Last Name		121b
103	18 SILVER BAY RD				-
01	28 City State Zip		58 City State Zip		-
104	TOMS RIVER NJ 08753				-
1	30 Eyes DL Class Restrictions Endorsements		31 State		122
	2 B - -		NJ		99
105	32 Driver's License Number		33 DOB mm dd yyyy		123
11	P26785470008632		08/08/1963 08 23		-
106	35 Owner's First Name Initial Last Name		65 Owner's First Name Initial Last Name		124
-	☐ Same As Driver LAKEWOOD - TOWNSHIP OF LAK -		☐ Same As Driver - -		-
107	36 Number & Street		66 Number & Street		11
-	231 3RD ST				125
108	37 City State Zip		67 City State Zip		-
29	LAKEWOOD NJ 08701				126a
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		61
-	MACK LR6 WHI 2019 34953MG NJ				126b
110	44 VIN 45 Expires		74 VIN 75 Expires		-
03	1M2LR2GC2KM002113 06 22				126c
111	46 Vehicle Removed To		76 Vehicle Removed To		-
-	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		126d
99	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded		126e
113	47 Authority ☒ Owner ☐ Driver ☐ Police		77 Authority ☐ Owner ☐ Driver ☐ Police		61
114	48 Alcohol/Drug Test		78 Alcohol/Drug Test		127a
09	Given: ☒ No ☐ Yes ☐ Refused		Given: ☐ No ☐ Yes ☐ Refused		127b
115	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		-
-	Results: 0. - % ☐ Pending		Results: 0. - % ☐ Pending		127c
116	49 Hazardous Material		79 Hazardous Material		-
03	☒ None ☐ On Board ☐ Spill		☐ None ☐ On Board ☐ Spill		127d
117	50 Carrier No. ☐ USDOT ☒ None		80 Carrier No. ☐ USDOT ☐ None		-
-	☐ MC/MX		☐ MC/MX		127e
	51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☒ Weight >= 26,001 lbs		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		-
	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity		128
	TOWNSHIP OF LAKEWOOD				61
	Number & Street		Number & Street		129
	231 3RD ST				03
	City State Zip		City State Zip		130
	LAKEWOOD NJ 08701				03
	135 Damage To Other Property ☒ Yes (If Yes, describe) ☐ No				131
	3 ISABELLA DR BRICK MAILBOX KNOCKED OVER				132
	Oper. 136 Charge		137 Summons. No.		133
					01
	Oper. 140 Charge		141 Summons. No.		134
					-
	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		-
A	01 01 01 05 58 M - - - 11 04 - -		MIGUEL - PEREZ		-
B			18 SILVER BAY RD TOMS RIVER NJ 08753 -		-
C					-
D					-

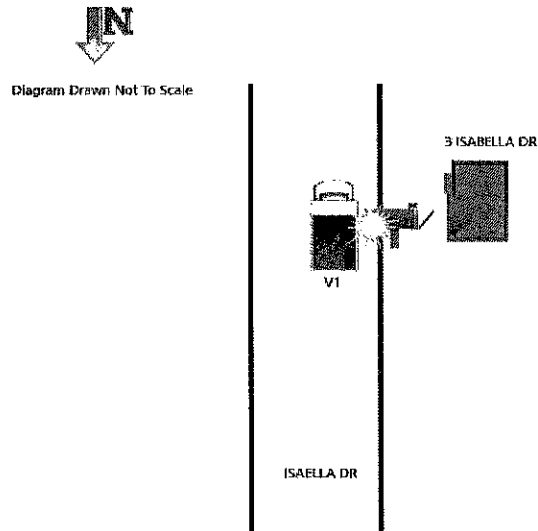
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
 Station: - Case No: 22-010868

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

On 2/10/2022 at approximately 0736hrs, I was dispatched to 3 Isabella Drive in reference to a crash. Upon arrival, I spoke to the driver of vehicle 1 who was identified as Miguel Perez. Mr. Perez reported that while he was picking up one of the garbage cans utilizing the mechanical arm of the garbage truck, the garbage can hit the mailbox causing it to topple over. There was no damage to the garbage truck or any other property.

The homeowner was notified of the damage done to the mailbox.

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

Vehicle 1 Insurance information:
 Ocean County Municipal Joint Insurance Fund
 PERMA, INC
 9 Campus Drive, Suite 216
 Parsipanny, NJ 07054

146 Officer's Signature
SHEEHAN, M

147 Badge #
423

148 Reviewer
MY

Badge #
329

149 Case Status
☐ Pending ☒ Complete

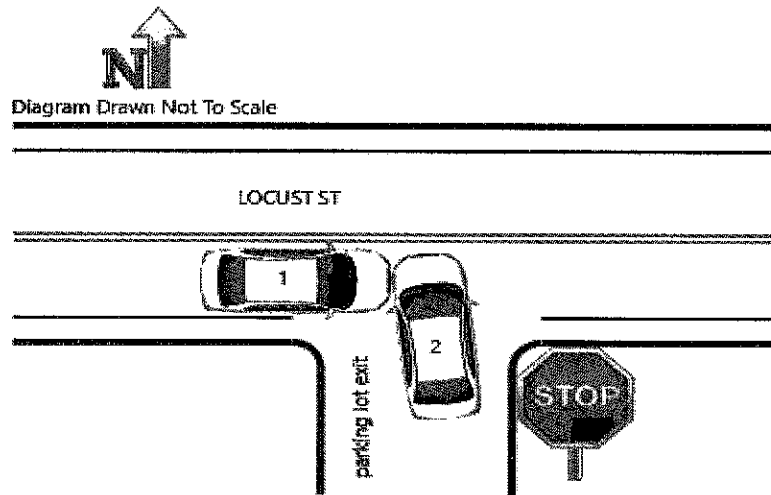
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-010870**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was traveling East on Locust St West of Vilna Ln. Vehicle #2 was exiting a parking lot making a left turn to travel West on Locust St. The vehicles collided in the roadway. Vehicle #2 had a stop sign. Driver #1 stated that he was going straight and vehicle #2 pulled out in front of him. Driver #2 stated that he stopped at the stop sign, he started to make his turn, then saw vehicle #1 too late to avoid the crash. Driver #2 failed to yield the right of way to vehicle #1 causing the crash.

146 Officer's Signature

PRZEWOZNIK J

147 Badge #

308

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

96	PAGE <u>1</u> OF <u>2</u> ☐ Fatal										New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report										
05	1 Case Number										10 Crash Occurred On: RIVER AVE										11 Speed Limit: 45										118a
97	22-010885										☒ At Intersection With Road Name										12 Route No. BROADWAY AVE										118b
01	2 Police Dept of LAKEWOOD TOWNSHIP										☐ Feet ☐ N ☐ E of: 25										☐ NB ☐ EB										02
98	3 Station/Precinct										☐ Miles ☐ S ☐ W										17 Cross Road Name										119a
01																															02
99																															119b
02	4 Date of Crash mm dd yy										5 Day Of Week THURSDAY										6 Time (use 2400 hrs) 0836										16
100a											7 Municipality Code 1514										8 Total Killed --										120a
01																					9 Total Injured --										01
100b	23 Veh # 1										24 Policy No. PAA80002138700										25 NJ Ins. Code 963										120b
04																															-
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										2										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										-
02	26 Driver's First Name Initial Last Name										29 Sex										54 Policy No. 927270649										121a
102	ABRAHAM M CASTRO										M										CHANA - KAPENSTEIN										01
02	27 Number & Street										57 Number & Street										59 Sex F										121b
103	1178 COTTONWOOD AVENUE										171 CHATEAU DR																				-
01	28 City										State Zip										58 City										122
104	TOMS RIVER NJ 08753										LAKEWOOD NJ 08701																				01
2	30 Eyes										DL Class										Restrictions										123
105	2										I										NJ										01
07	32 Driver's License Number										33 DOB mm dd yyyy										34 Expires mm yy										123
106	C7810057412712										12/22/1971										- -										01
35 Owner's First Name Initial Last Name	65 Owner's First Name Initial Last Name										63 DOB mm dd yyyy										64 Expires mm yy										
☐ Same As Driver	MARIA - MARCHAND										☐ Same As Driver										YEHUDA - KAPENSTEIN										124
107	36 Number & Street										66 Number & Street										70 Color										04
-	707 VIVIAN DRIVE										171 CHATEAU DR										4										125
108	37 City										State Zip										67 City										08
01	TOMS RIVER NJ 08753										LAKEWOOD NJ 08701										72 Plate No.										126a
109	38 Make										39 Model										40 Color										26
01	CHEV										EXP - EX										WHI										126b
110	41 Year										42 Plate No.										43 State										-
01	2006										P36CRJ										NJ										126c
44 VIN	45 Expires										74 VIN										75 Expires										-
1GCHG39V461188166	01 23										4T1BF1FK7GU531121										09 22										126d
111	46 Vehicle Removed To										76 Vehicle Removed To										79 Hazardous Material										126e
01																					ACME TOWING										-
112	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded																				126f
-	☒ Left At Scene ☐ Towed Impounded										☐ Left At Scene ☐ Towed Impounded																				126g
113	47 Authority										77 Authority										79 Hazardous Material										26
-	☐ Owner ☒ Driver ☐ Police										☐ Owner ☒ Driver ☐ Police																				127a
114	48 Alcohol/Drug Test										49 Hazardous Material										78 Alcohol/Drug Test										26
-	Given: ☒ No ☐ Yes ☐ Refused										☒ None ☐ On Board ☐ Spill										Given: ☒ No ☐ Yes ☐ Refused										127b
115	Type: ☐ Breath ☐ Blood ☐ Urine																				Type: ☐ Breath ☐ Blood ☐ Urine										-
-	Results: 0. - % ☐ Pending										Hazard Class Placard No.										Results: 0. - % ☐ Pending										127c
116	50 Carrier No.										51 GVWR/GCWR										80 Carrier No.										127d
01	☐ USDOT ☒ None										☐ Weight <= 10,000 lbs										☐ USDOT ☒ None										-
117	☐ MC/MX										☐ Weight 10,001-26,000 lbs										☐ MC/MX										127e
02											☐ Weight >= 26,001 lbs										☐ Weight >= 26,001 lbs										26
52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity																				128	
Number & Street										Number & Street																				26	
City										City																				129	
State Zip										State Zip																				11	
135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																														130	
																														11	
																														02	
Oper. 136 Charge										137 Summons. No.										Oper. 138 Charge										132	
01 39:3-10										289589										139 Summons. No.										02	
Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										133	
02 39:4-97										289590										143 Summons. No.										03	
																														134	
																														04	
83 84 85 86 87 88 89 90 91 92 93 94 95										Names & Addresses of Occupants - If Deceased, Date & Time of Death																					
A										ABRAHAM M CASTRO																					
01 01 01 05 50 M - - - 11 04 - -										1178 COTTONWOOD AVE TOMS RIVER NJ 08753																					
B										CHANA - KAPENSTEIN																					
02 01 01 05 29 F - - - 11 11 04 - -										171 CHATEAU DR LAKEWOOD NJ 08701																					
C																															
D																															

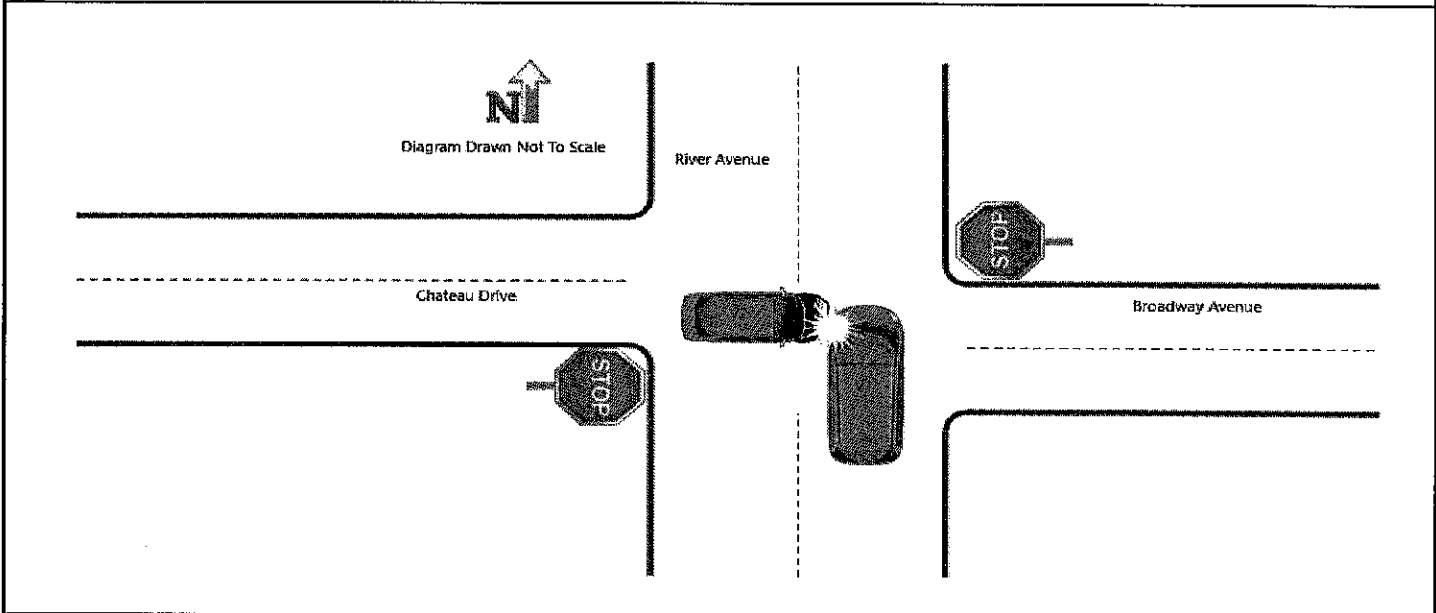
**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-010885**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was traveling North on River Avenue. Driver of vehicle 1 stated vehicle 2 attempted to go straight from Chateau Drive to Broadway Avenue striking the front driver side of vehicle 1. Driver of vehicle 1 had no complaint of pain. Vehicle 1 was parked in the parking lot of 945 River Avenue until a license driver could retrieve it. Driver of vehicle 1 was issued a summons for being unlicensed Driver 39:3-10.

Driver of vehicle 2 stated she was on Chateau Drive attempting to cross over River Avenue to Broadway Avenue. Driver of vehicle 2 stated she did not see vehicle 1 striking the front driver side of vehicle 1. Vehicle 2 had multiple airbag deployment. Driver of vehicle 2 had no complaint of pain. Driver of vehicle 2 was issued a summons for Careless Driving 39:4-97

146 Officer's Signature
ORTIZ, K

147 Badge #
377

148 Reviewer
MY

Badge #
329

149 Case Status
☐ Pending ☒ Complete

PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report	
05	1 Case Number		22-011995		10 Crash Occurred On: E COUNTY LINE RD		11 Speed Limit 45		0526		12 Route No.		Suffix		13 Milepost		18 Speed Limit 25		
01	2 Police Dept of		LAKEWOOD TOWNSHIP		3 Station/Precinct		100		14		15		16		17 Cross Road Name		19 To		
01	4 Date of Crash		02/14/22		5 Day Of Week		MONDAY		6 Time (use 2400 hrs)		1405		7 Municipality Code		1514		8 Total Killed		
05	9 Total Injured		---		10		11		12		13		14		15		16		
01	23 Veh #		1		24 Policy No.		139042089		25 NJ Ins. Code		012		53 Veh #		54 Policy No.		55 NJ Ins. Code		
04	26 Driver's First Name		CLARENCE		27 Number & Street		9 DOVER WALK		28 City		TOMS RIVER		56 Driver's First Name		57 Number & Street		58 City		
01	29 Sex		M		30 Eyes		02		31 State		NJ		59 Sex		JR		60 Eyes		
01	32 Driver's License Number		Y68091277607282		33 DOB		07/28/1928		34 Expires		07/23		61 State		NJ		62 Driver's License Number		
01	35 Owner's First Name		CLARENCE		36 Number & Street		9 DOVER WALK		37 City		TOMS RIVER		63 DOB		11/23/1956		64 Expires		
01	38 Make		FORD		39 Model		TAU		40 Color		WHI		41 Year		2013		42 Plate No.		
01	43 State		NJ		44 VIN		1FAHP2E88DG211507		45 Expires		04/22		65 Owner's First Name		WALTER		66 Number & Street		
01	46 Vehicle Removed To		-		47 Authority		Owner		48 Alcohol/Drug Test		Given: No		49 Hazardous Material		None		50 Carrier No.		
01	49 Hazardous Material		None		50 Carrier No.		USDOT		51 GVWR/GCWR		Weight <= 10,000 lbs		52 Motor Carrier or Government Entity		-		53 VIN		
01	51 GVWR/GCWR		None		52 Motor Carrier or Government Entity		-		53 VIN		2HKRW2H59NH602763		54 VIN		2HKRW2H59NH602763		55 NJ Ins. Code		
01	54 VIN		2HKRW2H59NH602763		55 NJ Ins. Code		962		56 Driver's First Name		WALTER		57 Number & Street		1701 LEXINGTON AVE.		58 City		
01	56 Driver's First Name		WALTER		57 Number & Street		1701 LEXINGTON AVE.		58 City		LAKEWOOD		59 Sex		JR		60 Eyes		
01	59 Sex		JR		60 Eyes		BL		61 State		NJ		62 Driver's License Number		C64297766411564		63 DOB		
01	61 State		NJ		62 Driver's License Number		C64297766411564		63 DOB		11/23/1956		64 Expires		-		65 Owner's First Name		
01	64 Expires		-		65 Owner's First Name		WALTER		66 Number & Street		1701 LEXINGTON AVE.		67 City		LAKEWOOD		68 Make		
01	66 Number & Street		1701 LEXINGTON AVE.		67 City		LAKEWOOD		68 Make		HOND		69 Model		CRV		70 Color		
01	68 Make		HOND		69 Model		CRV		70 Color		SIL		71 Year		2022		72 Plate No.		
01	70 Color		SIL		71 Year		2022		72 Plate No.		N38PHC		73 State		NJ		74 VIN		
01	72 Plate No.		N38PHC		73 State		NJ		74 VIN		2HKRW2H59NH602763		75 Expires		11/24		76 Vehicle Removed To		
01	74 VIN		2HKRW2H59NH602763		75 Expires		11/24		76 Vehicle Removed To		-		77 Authority		Owner		78 Alcohol/Drug Test		
01	75 Expires		11/24		76 Vehicle Removed To		-		77 Authority		Owner		78 Alcohol/Drug Test		Given: No		79 Hazardous Material		
01	76 Vehicle Removed To		-		77 Authority		Owner		78 Alcohol/Drug Test		Given: No		79 Hazardous Material		None		80 Carrier No.		
01	77 Authority		Owner		78 Alcohol/Drug Test		Given: No		79 Hazardous Material		None		80 Carrier No.		USDOT		81 GVWR/GCWR		
01	78 Alcohol/Drug Test		Given: No		79 Hazardous Material		None		80 Carrier No.		USDOT		81 GVWR/GCWR		Weight <= 10,000 lbs		82 Motor Carrier or Government Entity		
01	79 Hazardous Material		None		80 Carrier No.		USDOT		81 GVWR/GCWR		Weight <= 10,000 lbs		82 Motor Carrier or Government Entity		-		83		
01	80 Carrier No.		USDOT		81 GVWR/GCWR		Weight <= 10,000 lbs		82 Motor Carrier or Government Entity		-		83		84		85		
01	81 GVWR/GCWR		Weight <= 10,000 lbs		82 Motor Carrier or Government Entity		-		83		84		85		86		87		
01	82 Motor Carrier or Government Entity		-		83		84		85		86		87		88		89		
01	83		84		85		86		87		88		89		90		91		
01	84		85		86														

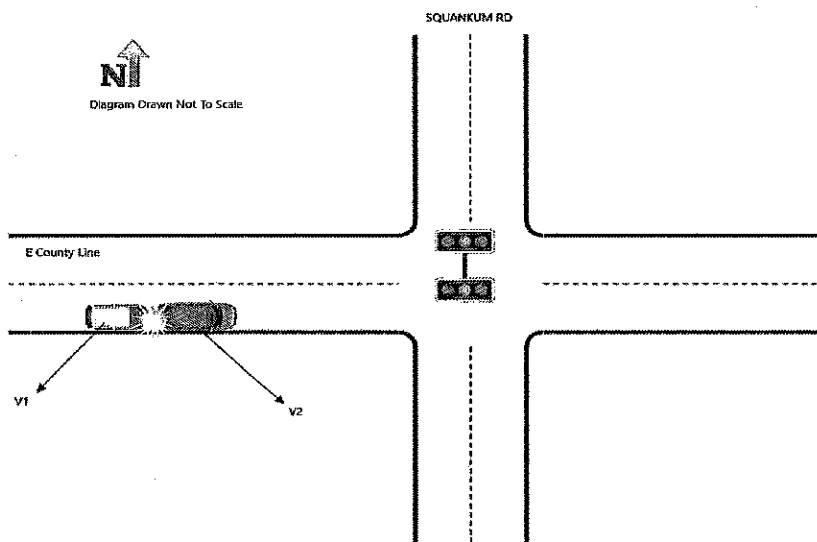
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
 Station: - Case No: 22-011995

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated that he was traveling east on East County line Road. While traveling East, he attempted to stop his vehicle but was unable to stop in time, resulting in him striking the rear of V2. The driver of vehicle 1 was not injured and refused medical attention. V1 left the scene safely.

The driver of V2 stated that he was stopped in traffic. While he was stopped due to traffic, V1 collided into him. The driver of V2 was not injured and refused medical attention. V2 left the scene safely.

146 Officer's Signature
TOWNSEND T

147 Badge #
403

148 Reviewer
PA

Badge #
325

149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report								
05	1 Case Number		10 Crash Occurred On: OCEAN AVE										11 Speed Limit		45		0088		-		-		118a				
97	22-012013																						04				
01	2 Police Dept of		Code		☒ At Intersection With										Road Name		Dir		12 Route No.		Suffix		13 Milepost		118b		
98	LAKEWOOD TOWNSHIP		01		☐ Feet										☐ N ☐ E of: CHERRY ST								25		08		
01	3 Station/Predinct				☐ Miles										☐ S ☐ W				19		To		17 Cross Road Name		☐ NB ☐ EB		118c
99																			From: -						☐ SB ☐ WB		25
02	4 Date of Crash		5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		20 Route/Name		22 Longitude						119a				
100a	02/14/22		MONDAY		1540		1514		--		1		40.090460				-74.192510						119b				
01																							-				
100b	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code												120a				
04	1		SELF INSURED		993		2		F104139845		426												01				
101	☐ Parked		☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run		☐ Parked		☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run				120b				
02	26 Driver's First Name		Initial		Last Name		29 Sex		56 Driver's First Name		Initial		Last Name		59 Sex								121a				
102	SHALOM		-		PORGESZ		M		DOMINICO		R		RAMIREZ		M								01				
01	27 Number & Street								57 Number & Street														121b				
103	11 HARMONY DR								567 COOLIDGE AVE														-				
01	28 City		State		Zip		58 City		State		Zip												-				
104	LAKEWOOD		NJ		08701		TOMS RIVER		NJ		08753												-				
2	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State				122				
105	BR		-		-		-		NJ		BR		A		-		-		NJ				03				
03	32 Driver's License Number		33 DOB		34 Expires		62 Driver's License Number		63 DOB		64 Expires												123				
106	P65927030009852		09/05/1985		02		23		R03551727907632		07/06/1963		07		25								01				
35	Owner's First Name		Initial		Last Name		65 Owner's First Name		Initial		Last Name												124				
107	☐ Same As Driver		PV HOLDING		CORP		☐ Same As Driver		DOMINICO		RAMIREZ												04				
36	Number & Street						66 Number & Street																125				
108	23-45 87TH STREET EAST						567 COOLIDGE AVE																04				
01	37 City		State		Zip		67 City		State		Zip												126a				
109	ELMHURST		NY		11369		TOMS RIVER		NJ		08753												26				
01	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State				
110	KIA		CARNIVAL		GRY		2022		KLP9987		NY		CHRY		TOW		ONG		2006		Z70PJS		NJ				
01	44 VIN		45 Expires				74 VIN		75 Expires														-				
111	KNDNB4H34N6107367		09		22		2A4GP54L86R704211		12		22												126c				
01	46 Vehicle Removed To						76 Vehicle Removed To																126d				
112	☐ Driven		☒ Towed Disabled		☐ Towed Disabled & Impounded		☒ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded												126e				
47	Authority						77 Authority																26				
113	☐ Owner		☒ Driver		☐ Police		☐ Owner		☒ Driver		☐ Police												127a				
48	Alcohol/Drug Test						78 Alcohol/Drug Test																127b				
114	Given: ☒ No ☐ Yes ☐ Refused						Given: ☒ No ☐ Yes ☐ Refused																-				
115	Type: ☐ Breath ☐ Blood ☐ Urine						Type: ☐ Breath ☐ Blood ☐ Urine																127c				
116	Results: 0, - % ☐ Pending						Results: 0, - % ☐ Pending																-				
04	50 Carrier No.		51 GVWR/GCWR				80 Carrier No.		81 GVWR/GCWR														127d				
117	☐ USDOT -		☒ Weight <= 10,000 lbs				☐ USDOT -		☒ Weight <= 10,000 lbs														-				
04	☐ MC/MX -		☐ Weight 10,001-26,000 lbs				☐ MC/MX -		☐ Weight 10,001-26,000 lbs														127e				
			☐ Weight >= 26,001 lbs						☐ Weight >= 26,001 lbs														26				
52	Motor Carrier or Government Entity						82 Motor Carrier or Government Entity																128				
118																							26				
Number & Street							Number & Street																129				
119																							11				
City			State		Zip		City				State		Zip										130				
120																							11				
135	Damage To Other Property		☐ Yes (If Yes, describe)		☒ No																		131				
132																							12				
133	135 Charge		137 Summons. No.				138 Charge		139 Summons. No.														12				
134	140 Charge		141 Summons. No.				142 Charge		143 Summons. No.														03				
83	84		85		86		87		88		89		90		91		92		93		94		95				
A	V1		01		01		05		36		M		-		-		11		04		-		-				
B	V2		01		01		04		58		M		12		08		02		11		11		04				
C																							6505				
D																							-				
Names & Addresses of Occupants - If Deceased, Date & Time of Death																											
SHALOM - PORGESZ																							-				
11 HARMONY DR LAKEWOOD NJ 08701																							-				
DOMINICO R RAMIREZ																							-				
567 COOLIDGE AVE TOMS RIVER NJ 08753																							-				

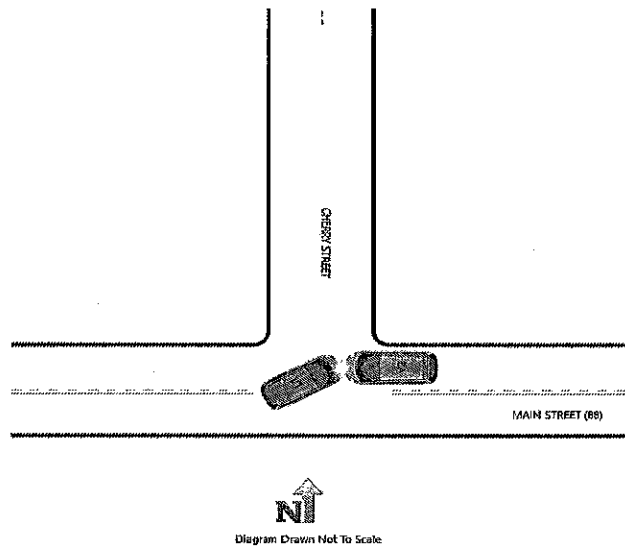
**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-012013**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL IN VOL VE I D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle one stated to the effect: I was traveling East on Main Street. While attempting to turn left on to Cherry Street, I thought I had enough time and space to turn in front of vehicle two. Vehicle two was traveling too fast and I couldn't avoid striking his vehicle while turning.

Driver of vehicle two stated to the effect: I was traveling West on Main Street approaching the intersection at Cherry Street. Vehicle one attempted a left hand turn on to Cherry Street from Main Street and struck my vehicle. I could not stop in time to avoid the collision and I locked up my brakes attempting to due so.

As a result of my investigation, I have determined the driver of vehicle one to be at fault for violating vehicle two's right of way by attempting to turn left while vehicle two was going straight ahead. Vehicle one was towed disabled and a combination of airbags were deployed upon impact. Driver of vehicle one was transported to Ocean Medical Center by Lakewood first-aid for complaints of pain in his legs and back. Vehicle two driven from scene by driver.

END OF NARRATIVE.

146 Officer's Signature
MCMILLAN, P

147 Badge #
426

148 Reviewer
CM

Badge #
332

149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report									
05	1 Case Number				22-011923										10 Crash Occurred On: MADISON AVE		11 Speed Limit 45		0009		06							
97	2 Police Dept of				Code		LAKEWOOD TOWNSHIP F01										☐ At Intersection With		Road Name		Dir		118b					
01	3 Station/Precinct						100										☒ Feet		☐ N ☐ E of: NORTH LAKE DRIVE		18 Speed Limit 25		09					
98	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19 Ramp		17 Cross Road Name		☐ NB ☐ EB		119a							
01	02/14/22				MONDAY		0752		1514		--		1						☐ SB ☐ WB		25							
99	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01			
100a	1				1900829451				945				2				F104211388				426				120b			
01	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												-			
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex		121a							
04	ZULEYKA				-		LOPEZ		F		JAMES				J		MCGRATH		M		01							
102	27 Number & Street				3 FOUNTAIN DR APT 9								57 Number & Street				959 ADELPHIA DR								121b			
103	28 City				State				Zip				58 City				State				Zip				-			
104	LAKEWOOD				NJ				08701				FREEHOLD				NJ				07731							
2	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes				DL Class		Restrictions		Endorsements		61 State		122			
	2				D		-		-		NJ		4				D		-		-		NJ		01			
105	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires				123			
01	L65307970061992				11/17/1999				11 24				M12683837102744				02/18/1974				02 23				01			
106	35 Owner's First Name				Initial		Last Name		65 Owner's First Name				Initial		Last Name		124											
-	☐ Same As Driver				MARIA D BANUELOS				☐ Same As Driver				JAMES J MCGRATH				-				04							
107	36 Number & Street				3 FOUNTAIN DRIVE APT. 9								66 Number & Street				959 ADELPHIA DR								125			
-																									04			
108	37 City				State				Zip				67 City				State				Zip				126a			
01	LAKEWOOD				NJ				08701				FREEHOLD				NJ				07731				26			
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		126b			
01	SUBA		LEG - LE		GRN		2006		B33MTZ		NJ		TOYT		CAM		BLK		2021		W35PAM		NJ		-			
110	44 VIN				45 Expires				74 VIN				75 Expires				126c											
01	4S4BP61C767324249				09 22				4T1C11AK9MU607444				07 25				-											
111	46 Vehicle Removed To				76 Vehicle Removed To								126d															
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded								-															
112	☐ Left At Scene ☐ Towed Impounded				☐ Left At Scene ☐ Towed Impounded								126e															
-													26															
113	47 Authority				77 Authority								127a															
-	☐ Owner ☒ Driver ☐ Police				☒ Owner ☐ Driver ☐ Police								26															
114	48 Alcohol/Drug Test				49 Hazardous Material								78 Alcohol/Drug Test				79 Hazardous Material								26			
-	Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill								Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill								26			
115	Type: ☐ Breath ☐ Blood ☐ Urine												Type: ☐ Breath ☐ Blood ☐ Urine												127b			
-	Results: 0, - % ☐ Pending				Hazard Class								Results: 0, - % ☐ Pending				Hazard Class								127c			
116	50 Carrier No.				51 GVWR/GCWR								80 Carrier No.				81 GVWR/GCWR								127d			
03	☐ USDOT ☒ None				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs								☐ USDOT ☒ None				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs								127e			
03	☐ MC/MX												☐ MC/MX												26			
	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity								128															
-													26															
	Number & Street				Number & Street								129															
-													02															
	City		State		Zip		City		State		Zip		City		State		Zip		City		State		Zip		130			
-																									02			
	135 Damage To Other Property				☐ Yes (if Yes, describe) ☒ No								131															
-													08															
	Oper.		136 Charge		137 Summons. No.		Oper.		138 Charge		139 Summons. No.		Oper.		140 Charge		141 Summons. No.		Oper.		142 Charge		143 Summons. No.		132			
-																									08			
	Oper.		140 Charge		141 Summons. No.		Oper.		142 Charge		143 Summons. No.		Oper.		140 Charge		141 Summons. No.		Oper.		142 Charge		143 Summons. No.		133			
-																									02			
	83		84		85		86		87		88		89		90		91		92		93		94		95		134	
																									03			
A	01		01		01		04		22		F		-		-		-		11		04		-		-		Names & Addresses of Occupants - If Deceased, Date & Time of Death	
																									ZULEYKA - LOPEZ			
B	01		03		01		05		20		F		-		-		-		11		04		-		-		3 FOUNTAIN DR APT 9 LAKEWOOD NJ 08701	
																									JENNY ALEJANDRA - NIETO HERRERA			
C	02		01		01		05		47		M		-		-		-		11		04		-		-		198 CENTER ST LAKEWOOD NJ 08701	
																									JAMES J MCGRATH			
D	02		01		01		05		10		F		-		-		-		11		04		-		-		959 ADELPHIA DRIVE FREEHOLD NJ 07728	

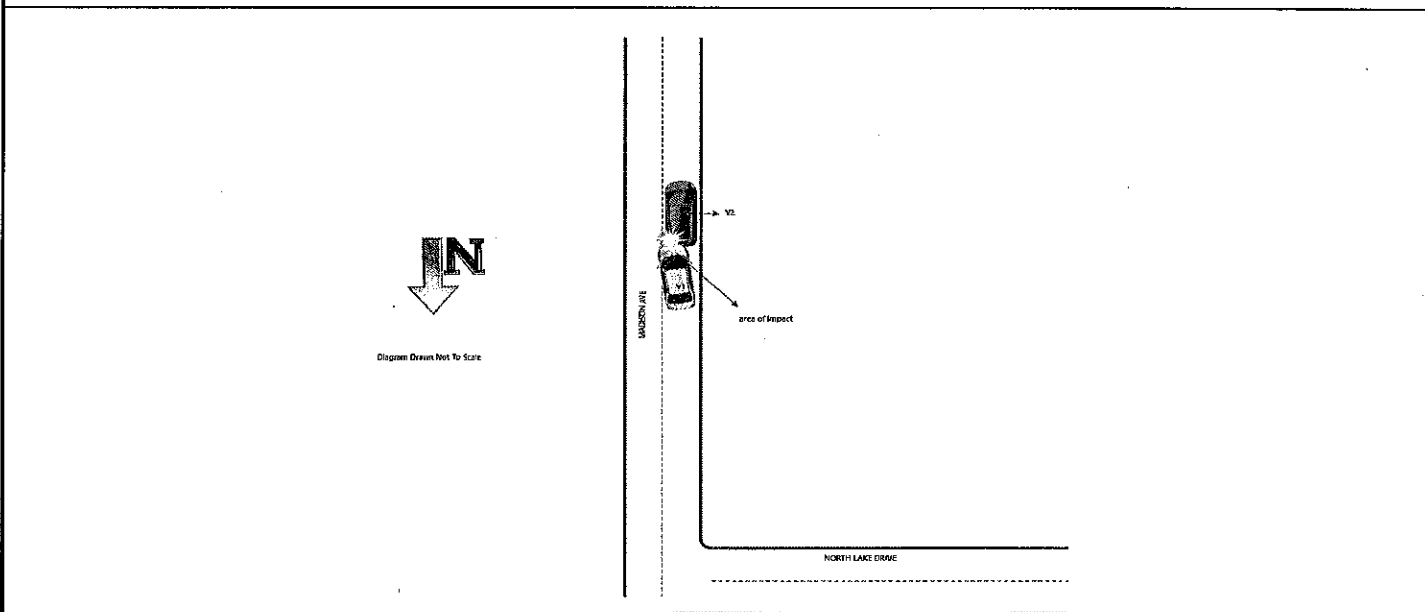
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011923**

(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
A														
L														
L														
I														
N														
V														
O														
L														
V														
E														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

WHEN I ARRIVED BOTH VEHICLES WERE FACING SOUTH ON MADISON AVE, APPROXIMATELY 100 FEET SOUTH OF NORTH LAKE DRIVE. VEHICLE 1 HAD MINOR DAMAGE WHILE VEHICLE 2 HAD MODERATE DAMAGE WITH A LARGE DENT TO THE REAR DRIVERS SIDE BUMPER.

DRIVER OF VEHICLE 1 STATED THAT SHE WAS DRIVING SOUTH ON MADISON AVE, MERGING LANES THEN ATTEMPTED TO PASS VEHICLE 2 STRIKING THE REAR DRIVERS SIDE BUMPER OF HIS VEHICLE. SHE STATED THAT THE DRIVER OF VEHICLE 2 WAS DRIVING AGGRESSIVELY.

DRIVER OF VEHICLE 2 STATED HE WAS HEADING SOUTH ON MADISON AVE WHEN DRIVER OF VEHICLE 1 WAS DRIVING AGGRESSIVELY TRYING TO PASS HIM. HE THEN STATED HE WAS STRUCK ON THE REAR DRIVERS SIDE BUMPER.

THERE WERE NO INJURIES.

BASED ON MY INVESTIGATION, AND THE LOCATION OF THE ACCIDENT IT WAS DETERMINED THAT DRIVER OF VEHICLE 1 IS AT FAULT FOR DRIVING TOO CLOSELY AND IMPROPERLY TRYING TO PASS VEHICLE 2 IN A SINGLE LANE.

146 Officer's Signature

GIBSON M

147 Badge #

409

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																				
05	1 Case Number		22-011926										10 Crash Occurred On:		ADAMS ST		11 Speed Limit		25		118a																																																		
01	2 Police Dept of		Code		LAKEWOOD TOWNSHIP #01										☒ At Intersection With		Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		04																																										
01	3 Station/Precinct												☐ Feet		☐ N ☐ E of:		MILLER RD								25		-																																												
07	4 Date of Crash		5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19 Ramp		17 Cross Road Name		21 Latitude		20 Route/Name		22 Longitude						119a																																												
01	02/14/22		MONDAY		0801		1514		--		--						40.09864		-74.24706						25																																														
100a	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code																01																																												
04	1						2		4028-50-47-87		148																120b																																												
02	☐ Parked		☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run		☐ Parked		☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run						-																																														
01	26 Driver's First Name		Initial		Last Name		29 Sex		56 Driver's First Name		Initial		Last Name		59 Sex												121a																																												
01	KATALIN				PETO		F		AVRAHOM				FREEMAN		M												01																																												
01	27 Number & Street		63 S LAKE DR										57 Number & Street		7 PRAGUE PL												121b																																												
01	28 City		State		Zip		58 City		State		Zip																-																																												
01	LAKEWOOD		NJ		08701		LAKEWOOD		NJ		08701																-																																												
02	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State								122																																												
01	2		I						NJ		6		A						NJ								01																																												
105	32 Driver's License Number		33 DOB		dd		yyyy		34 Expires		mm		yy		62 Driver's License Number		63 DOB		dd		yyyy		64 Expires		mm		yy		123																																										
03	P28584260062852		12/16/1985								F73040710001976		01/18/1997		01		26										02																																												
106	35 Owner's First Name		Initial		Last Name		65 Owner's First Name		Initial		Last Name																		124																																										
-	☐ Same As Driver		KATALIN		PETO		☐ Same As Driver		RIVKA		HIRSCH																		08																																										
107	36 Number & Street		63 S LAKE DR										66 Number & Street		7 PRAGUE PLACE												125																																												
-																											04																																												
01	37 City		State		Zip		67 City		State		Zip																		26																																										
01	LAKEWOOD		NJ		08701		LAKEWOOD		NJ		08701																		126a																																										
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				126b																																												
01	HYUN		ELN		SIL		2002		BN28433		IL		HYUN		SFE		GRY		2012		Z68PFL		NJ				-																																												
01	44 VIN		KMHWF35H82A660272										45 Expires		10		22		74 VIN		5XYZHDAG0CG103551										75 Expires		10		22		126c																																		
01	46 Vehicle Removed To												76 Vehicle Removed To																								126d																																		
01	☒ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded		☒ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded																		126e																																										
-	☐ Left At Scene		☐ Towed Impounded				☐ Left At Scene		☐ Towed Impounded																				126f																																										
113	47 Authority		☒ Owner										77 Authority		☐ Owner										☒ Driver		☐ Police						127a																																						
-																																					26																																		
114	48 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused										49 Hazardous Material		Given: ☒ No ☐ Yes ☐ Refused										79 Hazardous Material		☒ None ☐ On Board ☐ Spill														127b																														
-			Type: ☐ Breath ☐ Blood ☐ Urine												Type: ☐ Breath ☐ Blood ☐ Urine																												127c																												
115			Results: 0. - % ☐ Pending										Hazard Class		Results: 0. - % ☐ Pending										Hazard Class		Placard No.																127d																												
04	50 Carrier No.		☐ USDOT ☒ None										51 GVWR/GCWR		☒ Weight <= 10,000 lbs										80 Carrier No.		☐ USDOT ☒ None										81 GVWR/GCWR		☒ Weight <= 10,000 lbs										127e																						
03	☐ MC/MX												☐ Weight 10,001-26,000 lbs												☐ MC/MX												☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs										26																						
-	52 Motor Carrier or Government Entity												82 Motor Carrier or Government Entity																																						128																				
-	Number & Street												Number & Street																																						129																				
-	City		State		Zip		City		State		Zip																		130																																										
-																													131																																										
-	135 Damage To Other Property		☐ Yes (If Yes, describe)										☒ No																																						11																				
-	Oper.		136 Charge										137 Summons. No.										Oper.		138 Charge										139 Summons. No.																								132												
-																																																																							11
-	Oper.		140 Charge										141 Summons. No.										Oper.		142 Charge										143 Summons. No.																								133												
-																																																																							02
-																																																																							134
-																																																																							02
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death																		135																																							
01	01	01	05	36	F	-	-	-	-	11	04	-	-	KATALIN - PETO																		-																																							
02	01	01	05	25	M	-	-	-	-	11	04	-	-	63 S LAKE DR LAKEWOOD NJ 08701																		-																																							
02	01	01	05	25	M	-	-	-	-	11	04	-	-	AVRAHOM - FREEMAN																		-																																							
02	01	01	05	25	M	-	-	-	-	11	04	-	-	7 PRAGUE PL LAKEWOOD NJ 08701																		-																																							

New Jersey Police Crash Investigation Report

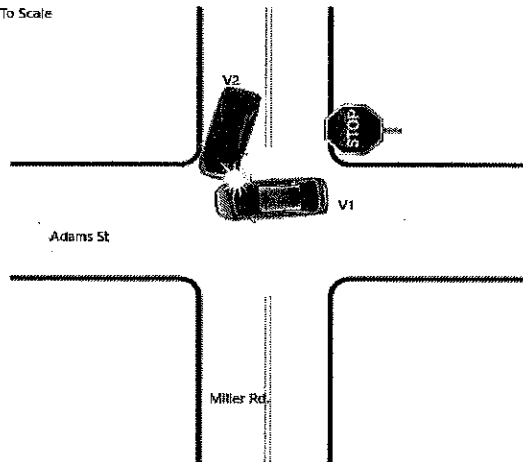
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-011926**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)


 Diagram Drawn Not To Scale



145 Crash Description/Narrative

Vehicle 2 was traveling Westbound on Adams St and crashed into vehicle 2 which was attempting to make a right turn onto Adams St.

Driver 1 stated she was traveling Westbound on Adams St and stopped at the stop sign on Adams and Miller Rd. She then resumed traveling Westbound but did not see vehicle 2 which was traveling Southbound on Miller Rd. Vehicle 2 attempted to make a right turn onto Adams St and vehicle 1 crashed into vehicle 2 in the intersection.

Driver 2 stated he was traveling Southbound on Miller Rd when he attempted to make a right turn onto Adams St. While attempting to make the turn, Vehicle 1 was traveling Westbound through the intersection and crashed into his vehicle.

There were no injuries reported on scene and both vehicles sustained minor damage.

Based on my observations and speaking with both drivers, I determined that driver 1 was at fault for failing to yield to vehicle 2 which had the right of way.

Vehicle 1 has Illinois insurance and the information is as follows; Richmol Insurance Services Inc 5731 W Montrose Ave Chicago IL 60634 Phone number 773-282-7090 Policy number 12-2241039-04

146 Officer's Signature

GARRETSON C

147 Badge #

391

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report		
05	1 Case Number										11 Speed Limit										118a
97	22-011930										25										10
01	2 Police Dept of										10 Crash Occurred On: STIRLING AVE										118b
98	LAKEWOOD TOWNSHIP 01										12 Route No. 13 Milepost 18 Speed Limit										-
01	3 Station/Precinct										14 15 16										25
99	-										17 Cross Road Name										119a
07	4 Date of Crash										19 Ramp 20 Route/Name										25
100a	02/14/22 MONDAY										21 Latitude 22 Longitude										119b
01	0829 1514										40.092390 -74.193300										-
100b	23 Veh #										53 Veh #										01
04	1										2										120b
101	24 Policy No.										54 Policy No.										-
02	0402377-09-254375										939-941-437										01
102	26 Driver's First Name										56 Driver's First Name										121a
01	ABRAHAM										PINCHAS										01
103	27 Number & Street										57 Number & Street										121b
01	245 CAREY ST										130 LEONARD ST										-
104	28 City										58 City										
2	LAKEWOOD NJ 08701										LAKEWOOD NJ 08701										
	30 Eyes										60 Eyes										122
	02 D										02 D										13
105	32 Driver's License Number										62 Driver's License Number										123
08	G67820050012822										M67376308204792										08
106	35 Owner's First Name										65 Owner's First Name										124
-	TALMUD TRH YSD I-										PINCHAS S MOST										08
107	36 Number & Street										66 Number & Street										125
-	21 N APPLE ST										130 LEONARD ST										04
108	37 City										67 City										126a
31	LAKEWOOD NJ 08701										LAKEWOOD NJ 08701										26
109	38 Make										68 Make										126b
01	THO										TOYT										-
110	39 Model										69 Model										126c
02	310										HIG										-
111	40 Color										70 Color										126d
01	YEL										SIL										-
112	41 Year										71 Year										126e
07	2022										2016										26
113	42 Plate No.										72 Plate No.										127a
-	X146S1										E26PAR										-
114	43 State										73 State										127b
-	NJ										NJ										-
115	44 VIN										74 VIN										127c
02	4UZABRFD0NCMU0010										5TDJRKRFH3GS355302										127d
116	45 Expires										75 Expires										-
04	09 22										08 22										127e
117	46 Vehicle Removed To										76 Vehicle Removed To										26
04	-										-										-
	☒ Driven										☒ Driven										-
	☐ Towed Disabled										☐ Towed Disabled										-
	☐ Towed Disabled & Impounded										☐ Towed Disabled & Impounded										-
	☐ Left At Scene										☐ Left At Scene										-
	☐ Towed Impounded										☐ Towed Impounded										-
118	47 Authority										77 Authority										127f
-	☐ Owner										☒ Owner										127g
119	☒ Driver										☐ Driver										-
120	☐ Police										☐ Police										-
121	48 Alcohol/Drug Test										78 Alcohol/Drug Test										127h
-	Given: ☒ No										Given: ☒ No										-
122	☐ Yes										☐ Yes										-
123	☐ Refused										☐ Refused										-
124	Type: ☐ Breath										Type: ☐ Breath										127i
125	☐ Blood										☐ Blood										-
126	☐ Urine										☐ Urine										-
127	Results: 0. - %										Results: 0. - %										127j
128	☐ Pending										☐ Pending										-
129	49 Hazardous Material										79 Hazardous Material										127k
130	☒ None										☒ None										-
131	☐ On Board										☐ On Board										-
132	☐ Spill										☐ Spill										-
133	Type: ☐ Breath										Type: ☐ Breath										127l
134	☐ Blood										☐ Blood										-
135	☐ Urine										☐ Urine										-
136	Results: 0. - %										Results: 0. - %										127m
137	☐ Pending										☐ Pending										-
138	50 Carrier No.										80 Carrier No.										127n
04	☐ USDOT										☐ USDOT										-
04	☒ None										☒ None										127o
	☐ MC/MX										☐ MC/MX										26
	☐ Weight <= 10,000 lbs										☐ Weight <= 10,000 lbs										-
	☐ Weight 10,001-26,000 lbs										☐ Weight 10,001-26,000 lbs										-
	☐ Weight >= 26,001 lbs										☐ Weight >= 26,001 lbs										-
139	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										127p
-	-										-										127q
140	Number & Street										Number & Street										127r
-	-										-										06
141	City										City										130
-	-										-										06
142	State										State										131
-	-										-										12
143	Zip										Zip										132
-	-										-										133
144	135 Damage To Other Property										137 Summons. No.										134
-	☐ Yes (If Yes, describe)										☒ No										02
145	136 Charge										138 Charge										135
-	-										-										136
146	140 Charge										142 Charge										137
-	-										-										138
147	141 Summons. No.										143 Summons. No.										139
-	-										-										140
148	83										Names & Addresses of Occupants - If Deceased, Date & Time of Death										141
149	84										-										142
150	85										ABRAHAM - GOTTLIEB										-
151	86										245 CAREY ST LAKEWOOD NJ 08701										-
152	87										PINCHAS S MOST										-
153	88										130 LEONARD ST LAKEWOOD NJ 08701										-
154	89										-										-
155	90										-										-
156	91										-										-
157	92										-										-
158	93										-										-
159	94										-										-
160	95										-										-
161	01										01										01
162	01										01										01
163	05										05										05
164	39										39										39
165	M										M										M
166	-										-										-
167	-										-										-
168	-										-										-
169	11										11										11
170	04										04										04
171	-										-										-
172	-										-										-
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174	-										-										-
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198	-										-										-
199	-										-										-
200	-										-										-

New Jersey Police Crash Investigation Report

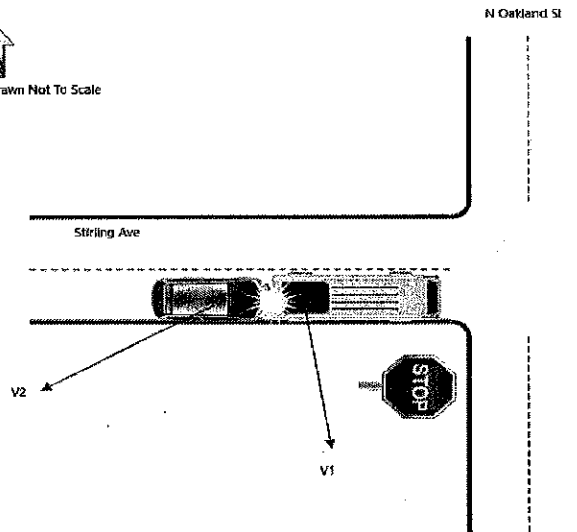
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-011930**

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

144 Crash Diagram (NOT TO SCALE)

NJ
Diagram Drawn Not To Scale



145 Crash Description/Narrative

The driver of V1 stated that he was stopped at the intersection of Stirling Ave & N Oakland St. While he was at the intersection, he decided to back up due to an incoming bus turning onto Sterling Avenue. The driver of V1 explained that as he was backing up, he collided with vehicle 2. The driver and 27 kids on board were not hurt or injured. V1 left the scene safely.

The driver of V2 stated that he was stopped behind the V1. While he was stopped behind the V1, he noticed the bus started to back up. The driver of V2 expressed that he was honking on his horn to avoid the collision but could not prevent the collision. The driver of V1 was not injured and left the scene safely.

146 Officer's Signature

TOWNSEND T

147 Badge #

403

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

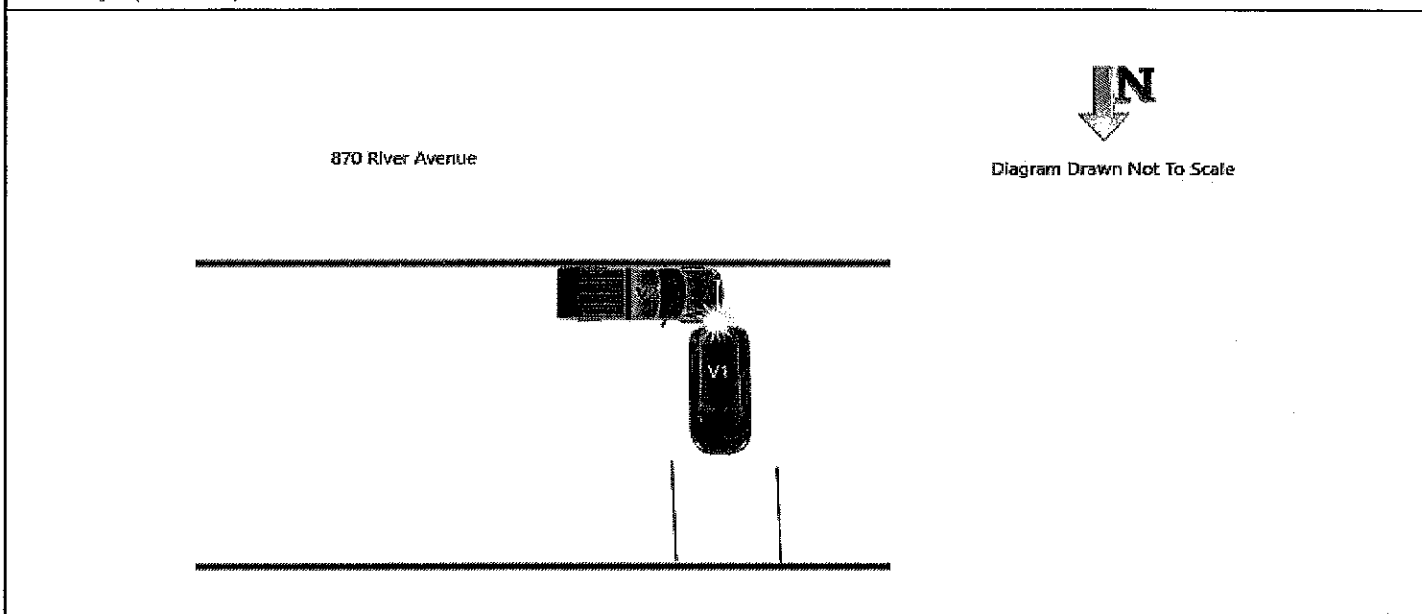
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-011935

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling Southbound at 870 River Avenue. Driver 1 mentioned backing up from a parking space and colliding with V2.

Vehicle 2 was facing Eastbound at 870 River Avenue. Driver 2 said that he was throwing down salt in front of the building when he saw V1 collide with his car.

Investigation revealed that Vehicle 1 was traveling Southbound at 870 River Avenue, and Vehicle 2 was facing Eastbound at 870 River Avenue. V1 was backing up from a parking space and collided with V2. No injuries were reported at this time.

146 Officer's Signature

CUZCO-BENITES W

147 Badge #

407

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending☒ Complete

Form with multiple sections for vehicle information, driver details, and accident report. Includes fields for vehicle number, driver name, date, time, location, and various checkboxes for accident details.

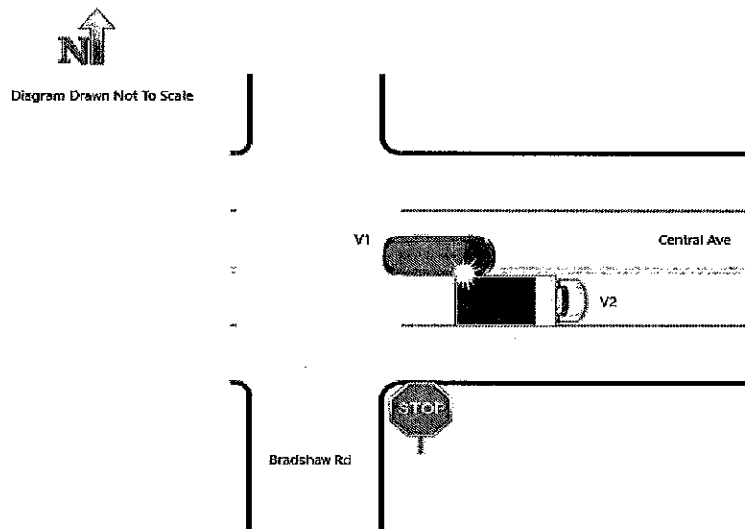
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-011939**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 2 was traveling Eastbound on Central Ave when vehicle 1 made a right turn out of Bradshaw Rd and side swiped vehicle 2.

Driver 1 left the scene prior to police arrival.

Driver 2 stated he was traveling Eastbound on Central Ave when vehicle 2 made a right turn onto Central Ave from Bradshaw Rd. He then said that vehicle 2 attempted to pass him on the left side and crashed into the back driver side of his vehicle.

After the crash the driver 1 asked driver 2 if he was ok and then turned around and left the scene traveling Westbound on Central Ave.

Vehicle 1 should have visible damage to the passenger side and was described as a charcoal colored minivan. Vehicle 2 sustained minor damage and no injuries were reported on scene.

Vehicle 2 is self insured and the information is as follows; County of Ocean PO Box 2191 101 Hooper Ave, 2nd Floor, Admin Bldg Toms River, NJ 08754. Issued by Perma 9 Campus Drive, Suite 216 Parsippany, NJ 07054. Self insured ID JIF 30-09 732-929-2109

146 Officer's Signature

GARRETSON C

147 Badge #

391

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																																				
05	1 Case Number	22-011959										10 Crash Occurred On:	NEW HAMPSHIRE AVE					11 Speed Limit	45					118a	25																																																																																																													
97	2 Police Dept of	LAKEWOOD TOWNSHIP 01										Code											12 Route No.						118b	-																																																																																																								
98	3 Station/Precinct											14	200					15						16						119a	02																																																																																																							
99	4 Date of Crash	mm		dd		yy		5 Day Of Week	MONDAY			6 Time (use 2400 hrs)	1111		7 Municipality Code	1514		8 Total Killed	--		9 Total Injured	--		21 Latitude	40.08576					22 Longitude	-74.17676					119b	09																																																																																																	
100a	23 Veh #	1										24 Policy No.	VFNUTRC008046										25 NJ Ins. Code	-										120a	01																																																																																																			
100b	26 Driver's First Name	ASHER										Initial	-										Last Name	KLITNICK										29 Sex	M										120b	-																																																																																								
101	27 Number & Street	1145 45TH ST APT 2										State	NY										Zip	11219										53 Veh #	2										54 Policy No.	AOJ-231-529587-40-14										55 NJ Ins. Code	370										121a	01																																																																		
102	28 City	BROOKLYN										State	NY										Zip	11219										56 Driver's First Name	ALEXANDER										Initial	-										Last Name	SARACAY										59 Sex	M										121b	-																																																							
103	30 Eyes	4										DL Class	D										Restrictions	-										Endorsements	-										31 State	NY										58 City	LAKEWOOD										State	NJ										Zip	08701										122	08																																												
104	32 Driver's License Number	651130375										33 DOB	mm		dd		yyyy		34 Expires	mm		yy		62 Driver's License Number	-										63 DOB	mm		dd		yyyy		64 Expires	mm		yy		123	01																																																																																						
105	35 Owner's First Name	-										Initial	-										Last Name	HATZOLAH EMER M -										65 Owner's First Name	-										Initial	-										Last Name	ITZEL										66 Number & Street	130 GOVERNORS RD; COVENTRY SQ										State	NJ										Zip	08701										124	03																																	
106	36 Number & Street	PO BOX 256										State	NJ										Zip	08701										67 City	LAKEWOOD										State	NJ										Zip	08701										125	03																																																																		
107	38 Make	FORD										39 Model	EXP										40 Color	-										41 Year	2018										42 Plate No.	NF39005										43 State	NJ										68 Make	HOND										69 Model	ODY										70 Color	4										71 Year	2002										72 Plate No.	K60KRC										73 State	NJ										126	26
108	44 VIN	1FM5K8AR0JGA58299										45 Expires	mm		dd		yy		74 VIN	2HKRL185X2H581615										75 Expires	mm		dd		yy		126a	-																																																																																																
109	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										126b	-																																																																																																														
110	47 Authority	☐ Owner ☒ Driver ☐ Police										77 Authority	☐ Owner ☒ Driver ☐ Police										126c	-																																																																																																														
111	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Breath ☐ Blood ☐ Urine ☐ Pending										49 Hazardous Material	☒ None ☐ On Board ☐ Spill ☐ Hazard Class ☐ Placard No.										78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Breath ☐ Blood ☐ Urine ☐ Pending										79 Hazardous Material	☒ None ☐ On Board ☐ Spill ☐ Hazard Class ☐ Placard No.										126d	-																																																																																								
112	50 Carrier No.	☐ USDOT ☒ None										51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No.	☐ USDOT ☒ None										81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										126e	-																																																																																								
113	52 Motor Carrier or Government Entity											82 Motor Carrier or Government Entity											126f	-																																																																																																														
114	Number & Street											City											State											Zip											127a	26																																																																																								
115	135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No										127b	-																																																																																																																									
116	Oper.	1										136 Charge											137 Summons. No.	-										Oper.	2										138 Charge	39:3-10										139 Summons. No.	A291574										127c	-																																																																		
117	Oper.											140 Charge											141 Summons. No.											Oper.											142 Charge											143 Summons. No.											127d	-																																																																		
118	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										127e	-																																																																																																													
119	01	01	01	05	31	M	-	-	-	11	04	-	-	ASHER - KLITNICK 1145 45TH ST APT 2 BROOKLYN NY 11219										127f	-																																																																																																													
120	02	01	01	05	19	M	-	-	-	11	04	-	-	ALEXANDER - SARACAY 382 WOODLAKE MANOR LAKEWOOD NJ 08701										128	26																																																																																																													
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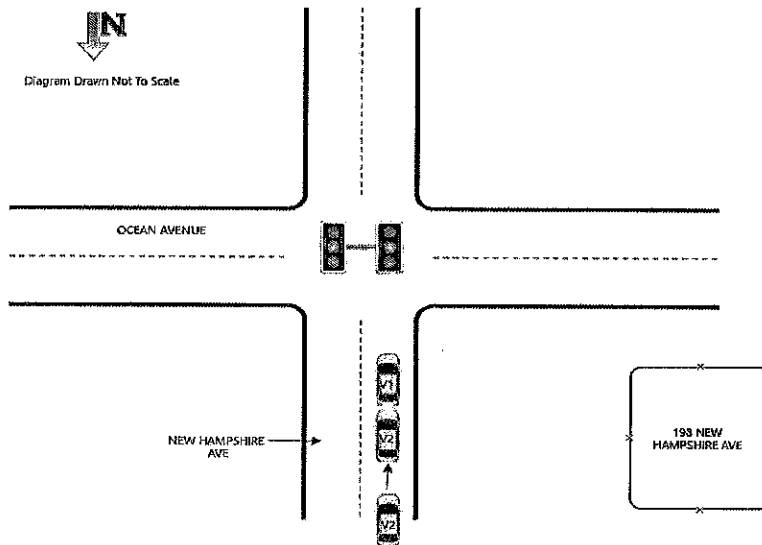
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011959**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

****Box #25: Vehicle #1 is insured out of state by:**
VFIS of New Jersey
163 Leader Heights Road
York, PA 17402-4714

Driver #1 stated he was stopped in traffic for a red light facing South on New Hampshire just north on Ocean Avenue. Driver #1 stated Vehicle #2 never stopped and rear ended his vehicle. Vehicle #1 sustained moderate damage, but was able to be driven from the scene.

Driver #2 stated he was traveling South on New Hampshire Avenue and said his brakes did not work right and he could not stop in time and the center front of his vehicle collided with the rear of Vehicle #1. Vehicle #2 sustained moderate damage, but was able to be driven from the scene.

Based on statements from the involved parties and my observations at the scene and damage to the vehicles, I determined that Vehicle #2 is at fault for Driver Inattention.

Driver #2 was issued motor vehicle summons #A291574 for 39:3-10 (Unlicensed Driver). Driver #2 parked Vehicle #2 in the parking lot of 198 New Hampshire Avenue to await for a licensed driver. Note: I followed Driver #2 into the parking lot of 198 New Hampshire Avenue to make sure he parked the vehicle, and his brakes appeared to be working fine.

No injuries reported at the scene.

146 Officer's Signature

CAVALLO M

147 Badge #

337

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																							
04	1 Case Number		22-012111										11 Speed Limit		25		118a																																																									
01	2 Police Dept of		Code		10 Crash Occurred On: 6TH STREET										W		12 Route No.		Suffix		13 Milepost		18 Speed Limit		118b																																																	
07	3 Station/Precinct		01		At Intersection With										Dir		12		13		14		15		119a																																																	
07	4 Date of Crash		5 Day Of Week		25										25		19		17		20		21		22		119b																																															
01	02/14/22		MONDAY		2242										1514		---		---		---		---		---		04																																															
07	23 Veh #		24 Policy No.		25 NJ Ins. Code										53 Veh #		54 Policy No.		55 NJ Ins. Code		01																																																					
07	P1		-		-										1		4521109399		148		01																																																					
02	26 Driver's First Name		Initial		Last Name		29 Sex		56 Driver's First Name										Initial		Last Name		59 Sex		121a																																																	
01	SHNEIOR		-		MAHGEREFTEH		M		MOSHE										E		SHUBERT		M		01																																																	
01	27 Number & Street		8254 GREENFELL STREET										57 Number & Street										14 5TH ST										121b																																									
01	28 City		State		Zip		31 State										60 Eyes		DL Class		Restrictions		Endorsements		61 State		122																																															
01	KEW GARDENS		NY		11415		NY										6		D		-		-		NJ		43																																															
1	30 Eyes		DL Class		Restrictions		Endorsements		31 State										60 Eyes		DL Class		Restrictions		Endorsements		61 State		123																																													
13	32 Driver's License Number		992912200										33 DOB										34 Expires										62 Driver's License Number										63 DOB										64 Expires										124											
13	35 Owner's First Name		Initial		Last Name		65 Owner's First Name										Initial		Last Name		66 Number & Street										67 City										State		Zip		125																													
13	36 Number & Street		14 5TH ST										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126a	
13	37 City		LAKEWOOD										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126b	
13	38 Make		DODG										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126c	
13	39 Model		GRC										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126d	
13	40 Color		GRY										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126e	
13	41 Year		2006										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126f	
13	42 Plate No.		WAE35L										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126g	
13	43 State		NJ										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126h	
13	44 VIN		1D4GP24R96B555821										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126i	
13	45 Expires		07 22										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126j	
13	46 Vehicle Removed To		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126k	
13	47 Authority		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126l	
13	48 Alcohol/Drug Test		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126m	
13	49 Hazardous Material		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126n	
13	50 Carrier No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126o	
13	51 GVWR/GCWR		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126p	
13	52 Motor Carrier or Government Entity		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126q	
13	53 Number & Street		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126r	
13	54 City		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126s	
13	55 State		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126t	
13	56 Zip		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126u	
13	57 Damage To Other Property		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126v	
13	58 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126w	
13	59 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126x	
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13	61 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										126z	
13	62 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										127a	
13	63 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										127b	
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13	65 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										127d	
13	66 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										127e	
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13	107 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										128t	
13	108 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										128u	
13	109 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										128v	
13	110 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										128w	
13	111 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										128x	
13	112 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										128y	
13	113 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										128z	
13	114 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129a	
13	115 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129b	
13	116 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129c	
13	117 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129d	
13	118 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129e	
13	119 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129f	
13	120 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129g	
13	121 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129h	
13	122 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129i	
13	123 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129j	
13	124 Summons No.		-										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										129k	
13	125 Summons No.		-										68 Make										69 Model										70 Color										71 Year																															

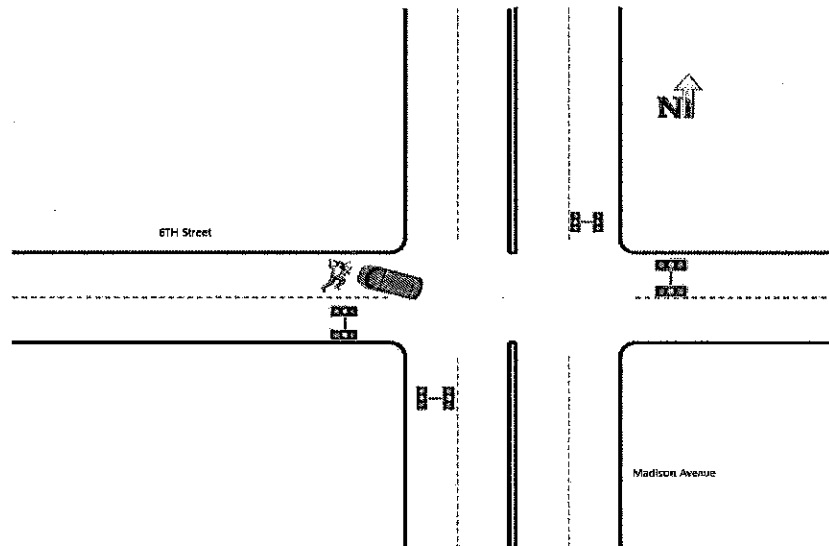
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-012111**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle #1 stated he was traveling North on Madison Avenue. He stated with a green light in his favor he attempted to make a left turn onto 6th Street. Driver of vehicle #1 stated as he made his maneuver, He crashed into a pedestrian crossing the street on the Westbound side of 6th Street. Pedestrian crossing the street traveling North on the Westbound side of 6th street stated he attempted to cross the street when he was struck by a vehicle. Pedestrian complained of pain to right arm and lower back. Pedestrian was transport to Monmouth Medical Center Southern Campus for medical treatment. Driver was issued two summonses for failure to yield right of way to pedestrian and failure to exhibit valid insurance documentation.

146 Officer's Signature

HUNTER W

147 Badge #

333

148 Reviewer

SGT. M. MARZOCCA

Badge #

314

149 Case Status

☐ Pending ☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																																				
05	1 Case Number	22-009968										10 Crash Occurred On:	NEW CENTRAL AVE										11 Speed Limit	35										118a	08																																																																																																			
97	2 Police Dept of	LAKEWOOD TOWNSHIP #01										Code											12 Route No.											13 Milepost	25										118b	-																																																																																								
01	3 Station/Precinct											14	300										15											16											17 Cross Road Name	ELDERBERRY CT										18 Speed Limit	25										119a	-																																																																		
98	4 Date of Crash	mm dd yy										5 Day Of Week	MONDAY										6 Time (use 2400 hrs)	0637										7 Municipality Code	1514										8 Total Killed	--										9 Total Injured	--										21 Latitude	40.09199										22 Longitude	-74.24737										119b	06																																												
02	23 Veh #	1										24 Policy No.	954363344										25 NJ Ins. Code	134										53 Veh #	2										54 Policy No.											55 NJ Ins. Code											120a	01																																																																		
100b	☐ Parked	☐ Ped										☐ Pedalcyclist										☐ Resp To Emergency										☐ Hit & Run										☐ Parked	☐ Ped										☐ Pedalcyclist										☐ Resp To Emergency										☒ Hit & Run										120b	01																																																		
04	26 Driver's First Name	EIDEL										Initial	-										Last Name	HODES										29 Sex	F										56 Driver's First Name											Initial											Last Name											59 Sex											121a	00																																												
101	27 Number & Street	141 REGENT PL										State	NJ										Zip	08701										57 Number & Street											121b	00																																																																																								
01	28 City	LAKEWOOD										State	NJ										Zip	08701										58 City											State											Zip											122	04																																																																		
104	30 Eyes	2										DL Class	I										Restrictions	-										Endorsements	-										31 State	NJ										60 Eyes											DL Class											Restrictions											Endorsements											61 State											123	15																						
07	32 Driver's License Number	H60791970058992										33 DOB	mm dd yyyy										34 Expires	mm yy										62 Driver's License Number											63 DOB	mm dd yyyy										64 Expires	mm yy										124	04																																																																		
106	35 Owner's First Name	EIDEL										Initial	-										Last Name	HODES										65 Owner's First Name											Initial											Last Name											125	04																																																																		
107	36 Number & Street	141 REGENT PL										State	NJ										Zip	08701										66 Number & Street											State											Zip											126a	26																																																																		
01	37 City	LAKEWOOD										State	NJ										Zip	08701										67 City											State											Zip											126b	-																																																																		
109	38 Make	NISS										39 Model	NOT										40 Color	WHI										41 Year	2018										42 Plate No.	R39PRD										43 State	NJ										68 Make											69 Model											70 Color											71 Year											72 Plate No.											73 State											126c	-
110	44 VIN	3N1CE2CP1JL352787										45 Expires	02 23										74 VIN											75 Expires											126d	-																																																																																								
00	46 Vehicle Removed To	☐ Driven										☐ Towed Disabled										☐ Towed Disabled & Impounded										76 Vehicle Removed To	☐ Driven										☐ Towed Disabled										☐ Towed Disabled & Impounded										126e	-																																																																						
112	☒ Left At Scene	☐ Towed Impounded																				☐ Left At Scene	☐ Towed Impounded																				127a	26																																																																																										
113	47 Authority	☒ Owner										☐ Driver										☐ Police										77 Authority	☐ Owner										☐ Driver										☐ Police										127b	26																																																																						
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.										127c	-								
115	50 Carrier No.	☐ USDOT										☒ None										51 GVWR/GCWR	☒ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										80 Carrier No.	☐ USDOT										☒ None										81 GVWR/GCWR	☒ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										127d	-																												
04	52 Motor Carrier or Government Entity											82 Motor Carrier or Government Entity											127e	26																																																																																																														
117	Number & Street											City											State											Zip											128	26																																																																																								
04	135 Damage To Other Property	☐ Yes (If Yes, describe)										☒ No										137 Summons. No.											138 Charge											139 Summons. No.											129	11																																																																														
116	Oper.	1										136 Charge											Oper.	2										140 Charge											Oper.	2										141 Summons. No.											Oper.	2										142 Charge											Oper.	2										143 Summons. No.											130	11																						
118	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										131	12																																																																																																													
A	V1	01	01	-	22	F	-	-	-	11	04	-	-	EIDEL - HODES										132	12																																																																																																													
B														141 REGENT PL LAKEWOOD NJ 08701										133	03																																																																																																													
C																								134	00																																																																																																													
D																																																																																																																																						

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: " Case No: 22-009968

(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
A														
L														
E														
I														
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V														
O														
L														
H														
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D														
J														

144 Crash Diagram (NOT TO SCALE)



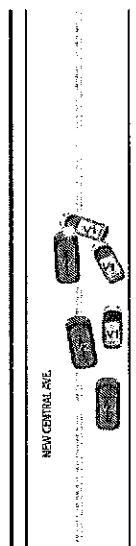
Diagram Drawn Not To Scale



1840 NEW CENTRAL AVE.



1838 NEW CENTRAL AVE.



145 Crash Description/Narrative

Driver #1 license:
Australia license
Eidel Hodes
76 Gordon St.
Elsternwick VIC 3185
Expiration: 05/06/23
License # 039099014

The driver of vehicle #1 stated she was traveling westbound on New Central Ave. passing the intersection with Elderberry Ct. Driver #1 attempted to perform a U turn to park in front of 1840 New Central Ave. eastbound, but was struck by vehicle #2 that was traveling behind vehicle #1. Driver #1 did not realize vehicle #2 was traveling behind her while doing the U turn, and believes vehicle #2 made an attempt to pass her vehicle while she was doing the turn. Vehicle #2 fled the scene of the crash, but driver #2 believes it was a dark colored minivan. No injuries were reported while on scene. -end-

146 Officer's Signature

ALLEN W

147 Badge #

287

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending
 ☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																										
05	1 Case Number	22-010685										11 Speed Limit	40	0009	118a	04																												
97	2 Police Dept of	LAKEWOOD TOWNSHIP #01										10 Crash Occurred On:	RIVER AVE			118b	-																											
01	3 Station/Precinct											☒ At Intersection With	Road Name	Dir	12 Route No.	Suffix	13 Milepost	18 Speed Limit																										
98												☐ Feet	☐ N	☐ E	of:	SPRUCE ST	25																											
99												☐ Miles	☐ S	☐ W	19 Ramp	16	17 Cross Road Name	☐ NB	☐ EB																									
02	4 Date of Crash	mm		dd		yy		5 Day Of Week	WEDNESDAY		6 Time (use 2400 hrs)	1624		7 Municipality Code	1514		8 Total Killed	--		9 Total Injured	--		21 Latitude	40.07235		22 Longitude	-74.21766		119a	25														
100a												23 Veh #	24 Policy No.		25 NJ Ins. Code		53 Veh #	54 Policy No.		55 NJ Ins. Code		119b	-																					
01												1	6870824950		170		2	4618233136		100		120a	01																					
100b												☐ Parked	☐ Ped	☐ Pedalcyclist	☐ Resp To Emergency	☐ Hit & Run	☐ Parked	☐ Ped	☐ Pedalcyclist	☐ Resp To Emergency	☐ Hit & Run	120b	-																					
02	26 Driver's First Name	Initial		Last Name		29 Sex		56 Driver's First Name	Initial		Last Name		59 Sex		121a	01																												
01		JULIANA		A LONDONO		F		MIGUEL	A		RAMIREZHERNANDE		M		121b	-																												
01	27 Number & Street	32 NEWTONS CORNER RD										57 Number & Street	215 CENTER ST										121b	-																				
01	28 City	State Zip										58 City	State Zip										122	01																				
104		HOWELL NJ 07731										LAKEWOOD NJ 08701	122	01																														
2	30 Eyes	DL Class		Restrictions		Endorsements		31 State	60 Eyes	DL Class		Restrictions		Endorsements		61 State	122	01																										
		2		D				NJ	1	D						NJ	122	01																										
105	32 Driver's License Number	33 DOB										34 Expires		62 Driver's License Number		63 DOB		64 Expires		123	01																							
03		L63884206160952										10 24		R03555476111871		11/23/1987		07 22		123	01																							
106	35 Owner's First Name	Initial		Last Name		65 Owner's First Name		Initial		Last Name		124		08																														
-		JULIANA		A LONDONO		ALEJANDRA		- RAMIREZ-HERNAN -				124	08																															
107	36 Number & Street	32 NEWTONS CORNER RD										66 Number & Street	402 LAUREL AVE										125	04																				
108	37 City	State Zip										67 City	State Zip										126a	26																				
01		HOWELL NJ 07731										LAKEWOOD NJ 08701	126a	26																														
05	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		126b	-																				
01		FOR		BGE		2015		E44LCY		NJ		TOYT	TAC		GRY		2013		E98LJX		NJ		126b	-																				
110	44 VIN	45 Expires										74 VIN	75 Expires										126c	-																				
01		KNAFK4A65F5388236										03 22	3TMMU4FN4DM053397	05 22										126c	-																			
111	46 Vehicle Removed To	76 Vehicle Removed To										126d										-																						
112	☒ Driven	☐ Towed Disabled		☐ Towed Disabled & Impounded		☒ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded		126e										-																						
-	☐ Left At Scene	☐ Towed Impounded				☐ Left At Scene		☐ Towed Impounded				126e										-																						
113	47 Authority	77 Authority										126										26																						
-	☒ Owner	☐ Driver		☐ Police		☐ Owner		☒ Driver		☐ Police		127a										26																						
114	48 Alcohol/Drug Test	49 Hazardous Material										78 Alcohol/Drug Test										79 Hazardous Material										127b	-											
-	Given: ☒ No	☐ Yes		☐ Refused		☒ None		☐ On Board		☐ Spill		Given: ☒ No		☐ Yes		☐ Refused		☒ None		☐ On Board		☐ Spill		127b	-																			
115	Type: ☐ Breath	☐ Blood		☐ Urine								Type: ☐ Breath		☐ Blood		☐ Urine								127c	-																			
-	Results: 0, - %	☐ Pending				Hazard Class		Placard No.				Results: 0, - %		☐ Pending				Hazard Class		Placard No.				127c	-																			
116	50 Carrier No.	51 GVWR/GCWR										80 Carrier No.										81 GVWR/GCWR										127d	-											
04	☐ USDOT	☒ None		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		☐ USDOT		☐ None		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		☐ USDOT		☐ None		127d	-																			
03	☐ MC/MX									☐ MC/MX										☐ MC/MX				127e	26																			
	52 Motor Carrier or Government Entity	82 Motor Carrier or Government Entity										128										26																						
	Number & Street	Number & Street										129										12																						
	City	State		Zip		City		State		Zip		130										12																						
	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	02
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										134	02																			
A	01	01	01	05	26	F	-	-	-	11	04	-	-	JULIANA A LONDONO										-																				
B	02	01	01	05	34	M	-	-	-	11	04	-	-	32 NEWTONS CORNER R HOWELL NJ 07731										-																				
C	02	03	01	05	35	M	-	-	-	11	04	-	-	MIGUEL A RAMIREZHERNANDEZ										-																				
D														215 CENTER ST LAKEWOOD NJ 08701										-																				
														EDUARDO - HERNANDEZHERNANDE										-																				
														405 CHEYENNE CT. TOMS RIVER NJ 08755										-																				

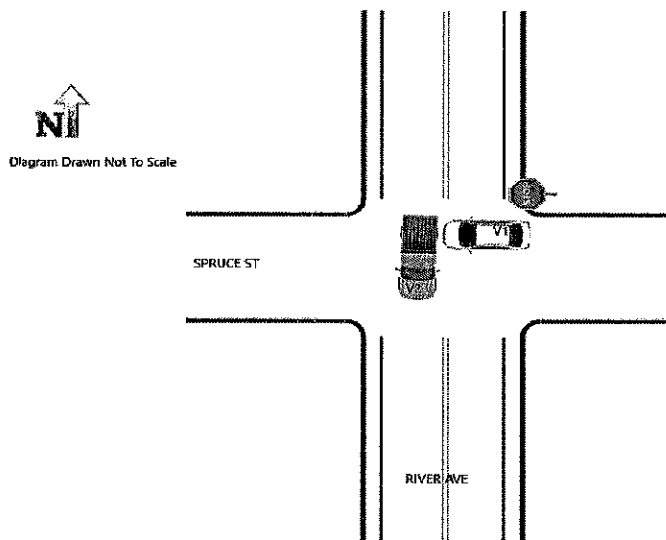
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-010685

(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
A														
L														
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V														
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V														
E														
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J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #2 reported that he was traveling South on River Ave. when his vehicle was struck in the driver side by vehicle #1.

The driver of vehicle #1 reported that she was traveling West on Spruce St. and after stopping at the stop sign had began to inch forward to cross the intersection. She reported that a school bus that was traveling North on River Ave. had stopped to allow her to cross. At that time she did not see vehicle #2 and struck it in the rear driver side rim.

There were no injuries reported at the scene of the crash. The front bumper of vehicle #1 was partially torn from the vehicle as a result of the. It was removed from the vehicle and driven from the scene. Vehicle #2 had a minor dent and scratches to the rear driver side rear rim and the vehicle was able to be driven from the scene.

146 Officer's Signature
KOWALESKI S147 Badge #
319148 Reviewer
DIBIASEBadge #
286149 Case Status
☐ Pending ☒ Complete

05	1 Case Number 22-011842										10 Crash Occurred On: BELLINGER ST										11 Speed Limit 25										118a																																																																																																			
97	2 Police Dept of LAKEWOOD TOWNSHIP F01										Code										12 Route No.										13 Milepost										18 Speed Limit 25										118b																																																																															
01	3 Station/Predict										4 Date of Crash mm dd yy 02/13/22										5 Day Of Week SUNDAY										6 Time (use 2400 hrs) 2223										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										21 Latitude 40.064750										22 Longitude -74.198250										119a																																							
98	26 Police's First Name LEAH										Initial -										Last Name INGBER										29 Sex F										56 Police's First Name YEHUDA										Initial L										Last Name BRODY										59 Sex M										119b																																																	
07	27 Number & Street 535 SETON CIR										28 City LAKEWOOD										State NJ										Zip 08701										57 Number & Street 1476 BELLINGER ST										58 City LAKEWOOD										State NJ										Zip 08701										119c																																																	
99	30 Eyes 04										DL Class D										Restrictions -										Endorsements -										31 State NJ										60 Eyes 02										DL Class A										Restrictions -										Endorsements -										61 State NJ										119d																													
07	32 Driver's License Number I59144500061724										33 DOB mm dd yyyy 11/15/1972										34 Expires mm yy 11 24										62 Driver's License Number B75207897308872										63 DOB mm dd yyyy 08/05/1987										64 Expires mm yy 08 24										119e																																																																					
01a	35 Owner's First Name JONATHAN										Initial -										Last Name INGBER										65 Owner's First Name YEHUDA										Initial L										Last Name BRODY										119f																																																																					
01	36 Number & Street 535 SETON CIR										37 City LAKEWOOD										State NJ										Zip 08701										66 Number & Street 1476 BELLINGER ST										67 City LAKEWOOD										State NJ										Zip 08701										120a																																																	
01	38 Make TOYT										39 Model HIG										40 Color BLK										41 Year 2019										42 Plate No. V70LTR										43 State NJ										68 Make KIA										69 Model FOR										70 Color BLK										71 Year 2020										72 Plate No. P49MFN										73 State NJ										120b									
01	44 VIN 5TDJZRFB4KS610480										45 Expires 09 22										74 VIN 3KPF24AD4LE205197										75 Expires 02 24										120c																																																																																									
01	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.										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.										120d																																																	
03	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										120e																																																																																									
04	52 Motor Carrier or Government Entity -										53 Motor Carrier or Government Entity -										82 Motor Carrier or Government Entity -										83 Motor Carrier or Government Entity -										120f																																																																																									
	Number & Street -										Number & Street -										City -										State -										Zip -										121a																																																																															
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No										136 Charge -										137 Summons. No. -										138 Charge -										139 Summons. No. -										121b																																																																															
	136 Charge -										137 Summons. No. -										138 Charge -										139 Summons. No. -										121c																																																																																									
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										118a																																																																																																										
	V1	01	01	05	49	F	-	-	-	11	04	-	-	LEAH - INGBER 535 SETON CIR LAKEWOOD NJ 08701										118b																																																																																																										
B	V2	01	01	05	34	M	-	-	-	11	04	-	-	YEHUDA L BRODY 1476 BELLINGER ST LAKEWOOD NJ 08701										119a																																																																																																										
C																								119b																																																																																																										
D																								119c																																																																																																										

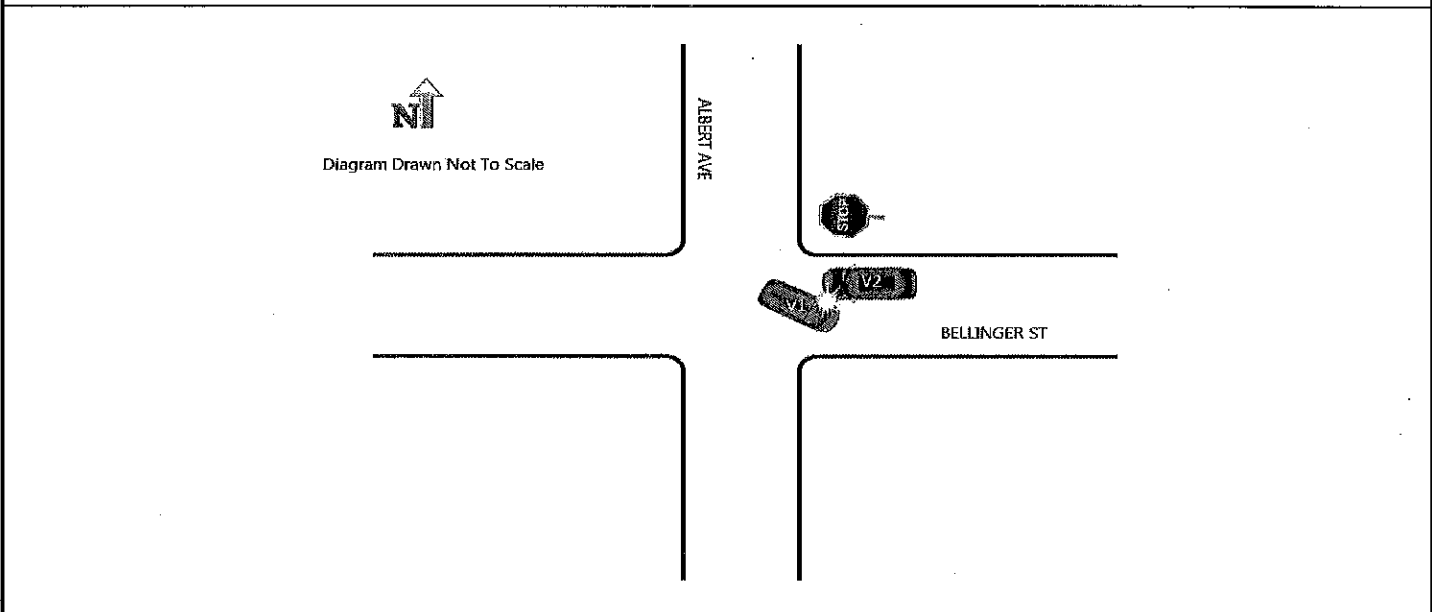
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011842**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L E F I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V2 stated that he was stopped at the stop sign when V1 made a left turn onto Bellinger St which resulted in V2 being sideswiped by V1.

Driver of V1 stated she did not see V2 when she went to make a left turn onto Bellinger St which ultimately resulted in her striking V2.

The results of the investigation revealed that Driver of V1 was at fault due to striking V1 which was not in motion. It should be noted that both Drivers stated that V2's headlights were not on and only his fog lights were on at the time of the accident. Both parties reported no injuries at this time.

146 Officer's Signature
RIHACEK, A147 Badge #
421148 Reviewer
KCMBadge #
335149 Case Status
☐ Pending ☒ Complete

[illegible]

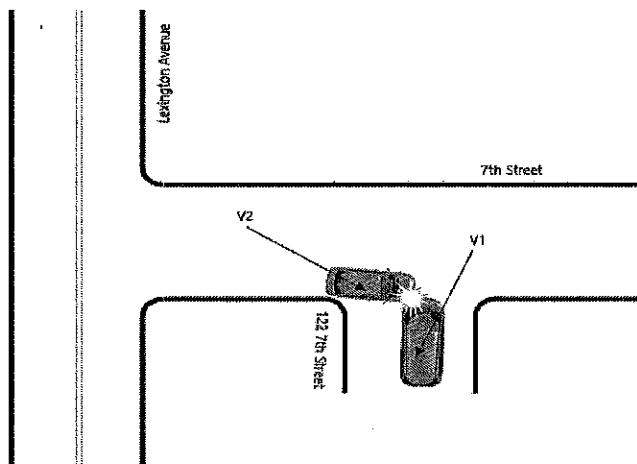
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-011596

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated she was waiting to exit her driveway onto 7th Street when she was stuck by a vehicle passing east on 7th Street. The driver stated a black, older model sedan, unknown make or model, traveling east on 7th Street, swerved to the right, struck her vehicle and continued east on 7th Street. The driver stated the vehicle was bearing an unknown state, temporary registration of '3821627'. The driver reported no injuries. Damage was disabling to the front end.

I personally observed V1. I observed the front passenger fender to be struck inward toward the center of the car, indicative that it was struck by a vehicle traveling east. I had Lakewood Police Dispatch check the aforementioned temporary registration through surrounding states as well as New Jersey yielding all negative results. I canvassed the surrounding area for the suspect vehicle yielding negative results. No cameras were observed in the area.

146 Officer's Signature

MEYER JR R

147 Badge #

401

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☒ Pending ☐ Complete

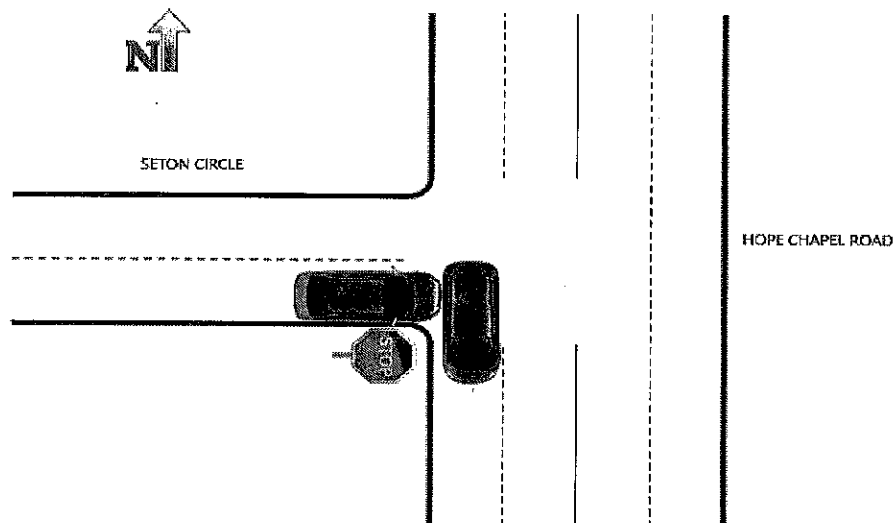
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-010865**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V1 STATED THAT HE WAS ABOUT TO MAKE A LEFT TURN OUT OF SETON CIRCLE. THERE WAS A SCHOOL BUS PAUSING, TRYING TO MAKE A LEFT TURN ONTO SETON CIRCLE. DRIVER 1 WAS DISTRACTED BY THE BUS, THERE WERE CARS GOING AROUND THE BUS, THE BUS DRIVER MOTIONED FOR HIM TO TURN.

DRIVER OF V2 HE WAS DRIVING ON HOPE CHAPEL ROAD AND HE STATED THAT THE OTHER CAR DIDNT STOP AT THE STOP SIGN.

WITNESS INFORMATION- CHARLES PINTER- 572 SETON CIRCLE LAKEWOOD NJ 08701.

MR. PINTER STATED THAT HE SAW THE BUS SECONDS AFTER HE HAD ALREADY TURNED. V2 HAD THE RIGHT OF WAY AT THE TIME OF THE CRASH.

146 Officer's Signature

YOUMANS R

147 Badge #

250

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

05	1 Case Number 22-008570		10 Crash Occurred On: WYNATT ST										11 Speed Limit 25		06			
97	2 Police Dept of LAKEWOOD TOWNSHIP F01		Code 01		3 Station/Precinct 250										12 Route No. 14 13 Milepost 15 18 Speed Limit 16		118a	
01	4 Date of Crash 02/02/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1406		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		11 Latitude 40.07890		12 Longitude -74.21156		118b	
98	23 Veh # 1		24 Policy No. 4285626968		25 NJ Ins. Code 148		26 Driver's First Name YAKOV		27 Sex M		28 City LAKEWOOD		29 State NJ		30 Zip 08701		119a	
01	31 Eyes BL		32 DL Class -		33 Restrictions -		34 Endorsements -		35 State NJ		36 Eyes 2		37 DL Class A		38 Restrictions -		119b	
99	39 DOB 07/28/1987		40 Expires 07		41 yy 24		42 Driver's License Number S13547898807874		43 DOB 01/25/1995		44 Expires 05		45 yy 20		46 Driver's License Number E16427898201952		120a	
07	47 Owner's First Name YAKOV		48 Initial Y		49 Last Name SCHEINERMAN		50 Sex -		51 City LAKEWOOD		52 State NJ		53 Zip 08701		54 Eyes 2		120b	
100a	55 DL Class -		56 Restrictions -		57 Endorsements -		58 State NJ		59 Eyes 2		60 DL Class A		61 Restrictions -		62 Endorsements -		121a	
01	63 DOB 07/28/1987		64 Expires 07		65 yy 24		66 Driver's License Number S13547898807874		67 DOB 01/25/1995		68 Expires 05		69 yy 20		70 Driver's License Number E16427898201952		121b	
07	71 Owner's First Name YAKOV		72 Initial Y		73 Last Name SCHEINERMAN		74 Sex -		75 City LAKEWOOD		76 State NJ		77 Zip 08701		78 Eyes 2		122	
100b	79 DL Class -		80 Restrictions -		81 Endorsements -		82 State NJ		83 Eyes 2		84 DL Class A		85 Restrictions -		86 Endorsements -		123	
04	87 DOB 07/28/1987		88 Expires 07		89 yy 24		90 Driver's License Number S13547898807874		91 DOB 01/25/1995		92 Expires 05		93 yy 20		94 Driver's License Number E16427898201952		124	
01	95 Owner's First Name YAKOV		96 Initial Y		97 Last Name SCHEINERMAN		98 Sex -		99 City LAKEWOOD		100 State NJ		101 Zip 08701		102 Eyes 2		125	
02	103 DL Class -		104 Restrictions -		105 Endorsements -		106 State NJ		107 Eyes 2		108 DL Class A		109 Restrictions -		110 Endorsements -		126a	
101	111 DOB 07/28/1987		112 Expires 07		113 yy 24		114 Driver's License Number S13547898807874		115 DOB 01/25/1995		116 Expires 05		117 yy 20		118 Driver's License Number E16427898201952		126b	
07	119 Owner's First Name YAKOV		120 Initial Y		121 Last Name SCHEINERMAN		122 Sex -		123 City LAKEWOOD		124 State NJ		125 Zip 08701		126 Eyes 2		127a	
100a	127 DL Class -		128 Restrictions -		129 Endorsements -		130 State NJ		131 Eyes 2		132 DL Class A		133 Restrictions -		134 Endorsements -		127b	
01	135 DOB 07/28/1987		136 Expires 07		137 yy 24		138 Driver's License Number S13547898807874		139 DOB 01/25/1995		140 Expires 05		141 yy 20		142 Driver's License Number E16427898201952		127c	
07	143 Owner's First Name YAKOV		144 Initial Y		145 Last Name SCHEINERMAN		146 Sex -		147 City LAKEWOOD		148 State NJ		149 Zip 08701		150 Eyes 2		127d	
100b	151 DL Class -		152 Restrictions -		153 Endorsements -		154 State NJ		155 Eyes 2		156 DL Class A		157 Restrictions -		158 Endorsements -		127e	
04	159 DOB 07/28/1987		160 Expires 07		161 yy 24		162 Driver's License Number S13547898807874		163 DOB 01/25/1995		164 Expires 05		165 yy 20		166 Driver's License Number E16427898201952		128	
01	167 Owner's First Name YAKOV		168 Initial Y															

New Jersey Police Crash Investigation Report

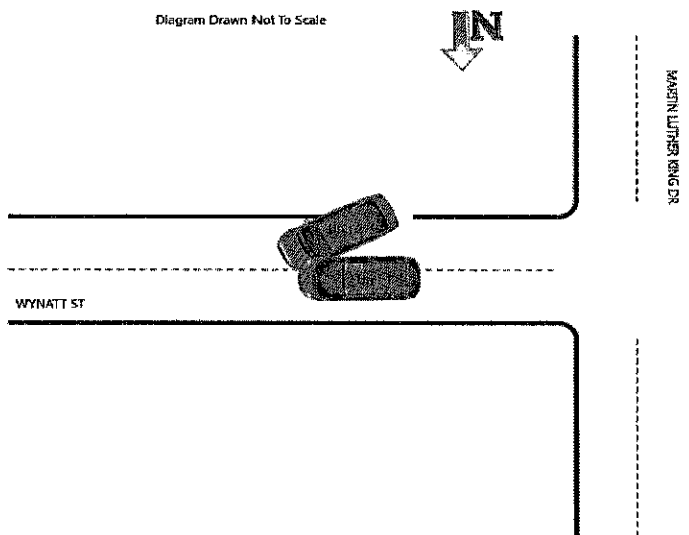
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: Case No: **22-008570**

(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
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D														
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144 Crash Diagram (NOT TO SCALE)

Diagram Drawn Not To Scale



145 Crash Description/Narrative

DRIVER OF VEHICLE 2 STATED HE WAS ON WYNATT ST AND STOPPED HIS VEHICLE TO BACK INTO A PARKING SPOT. VEHICLE 1 WENT TO GO AROUND HIS VEHICLE WHICH CAUSED VEHICLE 2 TO BE STRUCK BY VEHICLE 1. DRIVER OF VEHICLE 2 STATED VEHICLE 1 WAS BEHIND HIS VEHICLE AS HE WAS ATTEMPTING TO PARK

DRIVER OF VEHICLE 1 STATED HE TURNED INTO WYNATT ST FROM MARTIN LUTHER KING DR AND AS VEHICLE 2 STOPPED TO BACK UP, HE HONKED ON THE HORN AN ATTEMPT TO SWERVE BUT STRUCK VEHICLE 2. DRIVER OF VEHICLE 1 STATED VEHICLE DID NOT HAVE A SIGNAL ON

NO INJURIES REPORTED ON SCENE.

146 Officer's Signature

VEGA E S

147 Badge #

348

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

96	PAGE <u>1</u> OF <u>2</u> ☐ Fatal		New Jersey Police Crash Investigation Report										☐ Reportable ☐ Non-Reportable ☒ Change Report																							
97	1 Case Number 22-008570			10 Crash Occurred On: ☐ At Intersection With ☐ Feet ☐ N ☐ E ☐ S ☐ W of: ☐ 11 Speed Limit										118a																						
98	2 Police Dept of LAKEWOOD TOWNSHIP F01			12 Route No. Suffix 13 Milepost 18 Speed Limit										118b																						
99	3 Station/Precinct			14 Miles 15 16 17 Cross Road Name 18 NB ☐ EB ☐ SB ☐ WB										119a																						
100a	4 Date of Crash mm dd yy 02/02/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1406		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		20 Route/Name 22 Longitude		119b																					
100b	23 Veh # 1		24 Policy No.		25 NJ Ins. Code		53 Veh # 2		54 Policy No.		55 NJ Ins. Code				120a																					
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										120b															
102	26 Driver's First Name Initial Last Name YAKOV Y SCHEINERMAN -					29 Sex					56 Driver's First Name Initial Last Name YEHUDA S ECKSTEIN -					59 Sex					121a															
103	27 Number & Street										57 Number & Street										121b															
104	28 City State Zip										58 City State Zip																									
105	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State		122															
106	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					
107	35 Owner's First Name Initial Last Name ☐ Same As Driver										65 Owner's First Name Initial Last Name ☐ Same As Driver															124										
108	36 Number & Street										66 Number & Street															125										
109	37 City State Zip										67 City State Zip															126a										
110	38 Make					39 Model					40 Color					41 Year					42 Plate No.					43 State					126b					
111	44 VIN										45 Expires										74 VIN										75 Expires					126c
112	46 Vehicle Removed To ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										76 Vehicle Removed To ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded															126d										
113	47 Authority ☐ Owner ☐ Driver ☐ Police										77 Authority ☐ Owner ☐ Driver ☐ Police															126e										
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.										127a										
115	50 Carrier No. ☐ USDOT ☐ MC/MX					51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs					80 Carrier No. ☐ USDOT ☐ MC/MX					81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127b										
116	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity															127c										
117	Number & Street										Number & Street															127d										
	City State Zip										City State Zip															127e										
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No																									128										
	Oper. 136 Charge					137 Summons. No.					Oper. 138 Charge					139 Summons. No.					129															
	Oper. 140 Charge					141 Summons. No.					Oper. 142 Charge					143 Summons. No.					130															
	83 84 85 86 87 88 89 90 91 92 93 94 95										Names & Addresses of Occupants - If Deceased, Date & Time of Death										131															
A																					132															
B																					133															
C																					134															
D																																				

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-008570

(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
A														
L														
L														
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J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

***VIDEO WAS PROVIDED ON 2/15/22 SHOWING VEHICLE 2 TURNING INTO VEHICLE 1 AS VEHICLE 1 WAS PASSING BY. VIDEO WAS ATTACHED TO THE REPORT.**

***BOX 118a AND BOX 119a WERE CHANGED MAKING DRIVER OF VEHICLE 2 AT FAULT FOR FAILURE TO YIELD.**

146 Officer's Signature

PTL. E. VEGA

147 Badge #

348

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 3		New Jersey Police Crash Investigation Report		Reportable		Non-Reportable		Change Report		
05	1 Case Number		22-012306		10 Crash Occurred On: OAK ST		11 Speed Limit: 35		118a	
97	2 Police Dept of		LAKEWOOD TOWNSHIP		3 Station/Preinct		4 Date of Crash		05	
01	5 Day Of Week		TUESDAY		6 Time (use 2400 hrs)		7 Municipality Code		09	
98	8 Total Killed		200		9 Total Injured		10 Route/Name		119a	
01	11 Date of Crash		02/15/22		12 Time		13 Longitude		25	
99	14		15		16		17 Cross Road Name		119b	
07	18		19		20		21		25	
100a	22		23		24		25		119c	
01	26		27		28		29		120a	
100b	30		31		32		33		01	
04	34		35		36		37		120b	
101	38		39		40		41		-	
02	42		43		44		45		121a	
01	46		47		48		49		01	
103	50		51		52		53		121b	
01	54		55		56		57		-	
104	58		59		60		61		122	
2	62		63		64		65		01	
105	66		67		68		69		123	
01	70		71		72		73		08	
106	74		75		76		77		124	
-	78		79		80		81		04	
107	82		83		84		85		125	
-	86		87		88		89		04	
108	90		91		92		93		126a	
01	94		95		96		97		26	
31	98		99		100		101		126b	
110	102		103		104		105		-	
01	106		107		108		109		126c	
111	110		111		112		113		-	
02	114		115		116		117		126d	
112	118		119		120		121		-	
-	122		123		124		125		126e	
113	126		127		128		129		26	
07	130		131		132		133		127a	
114	134		135		136		137		26	
-	138		139		140		141		127b	
115	142		143		144		145		-	
02	146		147		148		149		127c	
116	150		151		152		153		-	
02	154		155		156		157		127d	
117	158		159		160		161		-	
02	162		163		164		165		127e	
118	166		167		168		169		26	
119	170		171		172		173		128	
120	174		175		176		177		26	
121	178		179		180		181		129	
122	182		183		184		185		12	
123	186		187		188		189		130	
124	190		191		192		193		12	
125	194		195		196		197		131	
126	198		199		200		201		06	
127	202		203		204		205		132	
128	206		207		208		209		06	
129	210		211		212		213		133	
130	214		215		216		217		04	
131	218		219		220		221		134	
132	222		223		224		225		02	
133	226		227		228		229		-	
134	230		231		232		233		-	
135	234		235		236		237		-	
136	238		239		240					

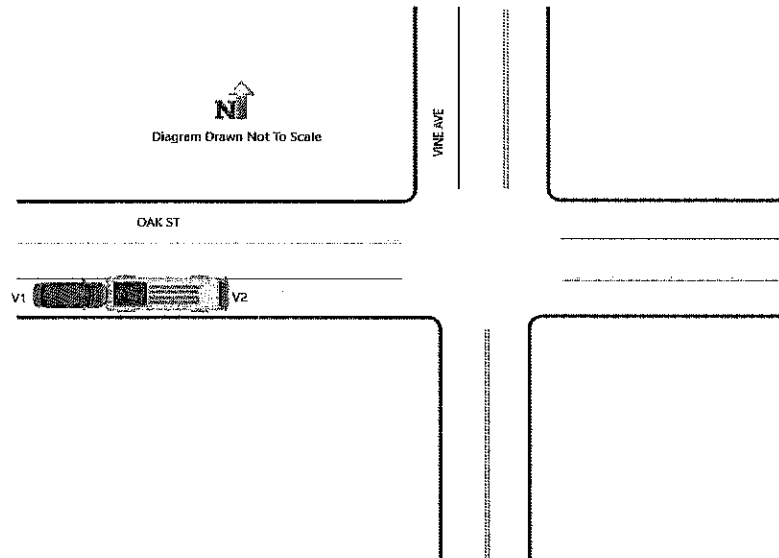
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-012306**

(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
A														
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E														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling east on Oak St. He observed V2 turn left onto Oak St from Cypress Ave. V2 traveled straight and stopped short on Oak St. V1 continued straight but did not observe V2 stop short in time to avoid a crash. V1 struck the rear of V2.

The driver of V2 stated she was stopped in traffic on Oak St while traveling east. V1 collided with the rear of V2.

Based on my investigation, V1 caused the crash by striking the rear of V2 while V2 was stopped.

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

**BUS SEATING
ARRANGEMENT**

1	CHAIM	GARFINKEL	
2	YONASON	KAPIEN	
3	SHMUEL	KAPIEN	
4	SHMUEL	GARFINKEL	
5	ARON	BRECHER	T
6	YECHIEL	ROOB	
7	EIEZEN	GREENBERG	
8	DOVID	FLEISHMAN	
9	MORDECHAI	HESS	
10			
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**MCI-9, EAGLE
&
FLXIBLE**

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**FLXIBLE TRANSIT
&
NOVA 06**

				DOOR
1		21		
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13	14	DOOR		
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				DOOR
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9	10			DOOR
11	12			
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25	26			DOOR
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29	30	57	58	
31	32			59
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35	36	61	62	
63	64	65	66	

Rear

05	1 Case Number		10 Crash Occurred On: CEDARBRIDGE AVE		11 Speed Limit 50		0528		12 Route No.		13 Milepost		18 Speed Limit		05								
97	22-012318		2 Police Dept of		Code				12 Route No.		13 Milepost		18 Speed Limit		118a								
98	LAKEWOOD TOWNSHIP #01								12 Route No.		13 Milepost		18 Speed Limit		02								
03	3 Station/Predinct								12 Route No.		13 Milepost		18 Speed Limit		119a								
99									12 Route No.		13 Milepost		18 Speed Limit		-								
005	4 Date of Crash		5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude	119b							
100a	mm dd yy															25							
01	02/15/22		TUESDAY		1709		1514		--		--		40.075800		-74.184460	120a							
100b	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code					-							
04	1		929788823		134		2		4391-96-03-68		148					120b							
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run									01							
02	26 Driver's First Name		Initial		Last Name		29 Sex		56 Driver's First Name		Initial		Last Name		59 Sex		121a						
102	ERIC		W		VOLK		M		DEBORAH		G		FRANKEL		F		-						
01	27 Number & Street						57 Number & Street										121b						
103	109 OAK HILL DRIVE						1462 54TH ST										01						
01	28 City		State		Zip		58 City		State		Zip						-						
104	TOMS RIVER		NJ		08753		BROOKLYN		NY		11219						-						
2	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements	61 State	122				
105	04		D		-		-		NJ		04		D		-		-		NY	11			
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		
106	V62642328607814		07/24/1981		07		22		521380240		10/25/2002		10		24					01			
-	35 Owner's First Name		Initial		Last Name		65 Owner's First Name		Initial		Last Name									124			
107	☐ Same As Driver ERIC		W		VOLK		☐ Same As Driver ISRAEL		Z		FRANKEL									04			
-	36 Number & Street						66 Number & Street													125			
108	109 OAK HILL DRIVE						1402 VINCENZO DR													04			
04	37 City		State		Zip		67 City		State		Zip									126a			
109	TOMS RIVER		NJ		08753		TOMS RIVER		NJ		08753									26			
01	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.	73 State	126b
110	TOYT		RAV		WHI		2016		Z61KWK		NJ		HOND		ACC		BLU		2020		V53MKA	NJ	-
01	44 VIN		45 Expires		mm yy		74 VIN		75 Expires		mm yy									126c			
111	JTMJFREXVGJ082867		12		22		1HGCY1F11LA072216		05		23									126d			
01	46 Vehicle Removed To						76 Vehicle Removed To													126e			
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded						☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded													126f			
-	☐ Left At Scene ☐ Towed Impounded						☐ Left At Scene ☐ Towed Impounded								</								

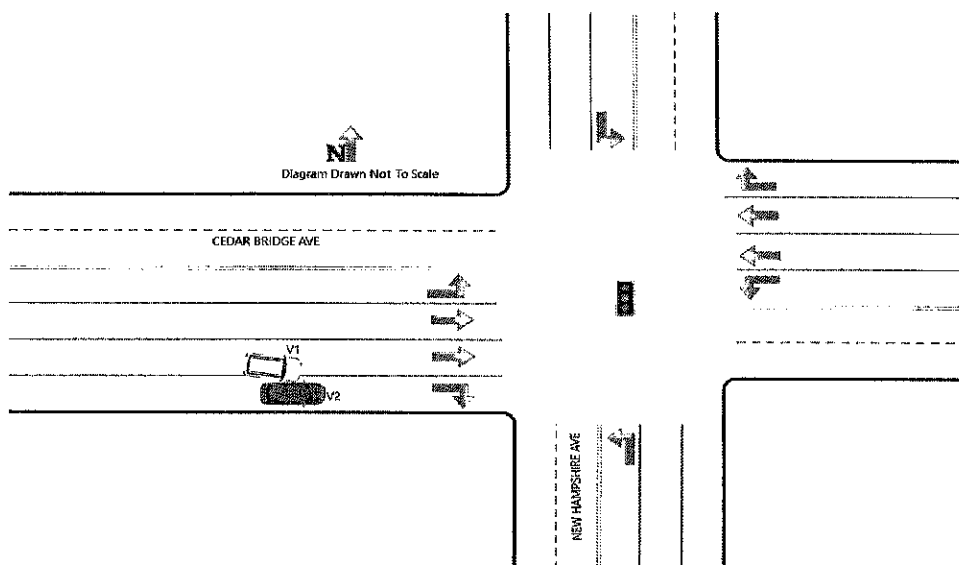
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-012318**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling east on Cedar Bridge Ave in the right middle lane. He changed lanes to the far right lane but did not observe V2 occupying that lane. V1 and V2 collided.

The driver of V2 stated she was traveling east on Cedar Bridge Ave in the right lane when V1 changed lanes and collided with V2.

Based on my investigation, V1 caused the crash by changing lanes and striking V2 while V2 was occupying the lane.

146 Officer's Signature
WITTMANN V147 Badge #
346148 Reviewer
E. MIICKBadge #
307149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																															
05	1 Case Number 22-012341										10 Crash Occurred On: E KENNEDY BLVD										11 Speed Limit 30		118a	04																										
01	2 Police Dept of LAKEWOOD TOWNSHIP										Code 01		☒ At Intersection With Road Name PRINCETON AVE										12 Route No.		13 Milepost 25		118b	-																						
07	3 Station/Precinct --										☐ Feet ☐ Miles										☐ N ☐ S ☐ E ☐ W		17 Cross Road Name		☐ NB ☐ SB ☐ EB ☐ WB		119a	-																						
07	4 Date of Crash mm dd yy 02/15/22				5 Day of Week TUESDAY				6 Time (use 2400 hrs) 1919				7 Municipality Code 1514		8 Total Killed --		9 Total Injured 1		21 Latitude 40.106290				22 Longitude -74.210490				119b	-																						
01	23 Veh # 1										24 Policy No. 924095008										25 NJ Ins. Code 882		53 Veh # P										54 Policy No. --		55 NJ Ins. Code --		120a	01												
01	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☒ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																				120b	-																		
01	26 Driver's First Name PIERO										Initial G		26 Driver's Last Name QUISEPOMOLINA										29 Sex M		56 Driver's First Name IRVING										Initial -		56 Driver's Last Name BARRERA-MEMIJE										59 Sex M		121a	99
01	27 Number & Street 4 WESTMINSTER DR										28 City JACKSON										State NJ		Zip 08527		57 Number & Street 136 ASTOR DR										58 City LAKEWOOD										State NJ		Zip 08701		121b	-
01	30 Eyes 02										DL Class D		Restrictions -		Endorsements -		31 State NJ		60 Eyes -										DL Class -		Restrictions -		Endorsements -		61 State -		122	03												
13	32 Driver's License Number Q91776306703012										33 DOB mm dd yyyy 03/15/2001				34 Expires mm yy 03 23		62 Driver's License Number -										63 DOB mm dd yyyy 11/01/1996				64 Expires mm yy -		123	-																
106	35 Owner's First Name GIOVANNI										Initial -		35 Owner's Last Name MOLINA										-		65 Owner's First Name -										Initial -		65 Owner's Last Name -										124	-		
107	36 Number & Street 4 WESTMINSTER DR										37 City JACKSON										State NJ		Zip 08527		66 Number & Street -										67 City -										State -		Zip -		125	12
109	38 Make HOND		39 Model ACCORD		40 Color RD		41 Year 2022		42 Plate No. X054552		43 State NJ		68 Make -		69 Model -		70 Color -		71 Year -		72 Plate No. -		73 State -		126a	22																								
110	44 VIN 1HGCV2F34NA001876										45 Expires 03 22		74 VIN -										75 Expires -		126b	-																								
111	46 Vehicle Removed To ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										76 Vehicle Removed To ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										126c	-																												
113	47 Authority ☐ Owner ☒ Driver ☐ Police										77 Authority ☐ Owner ☐ Driver ☐ Police										126d	-																												
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.										126e	22								
01	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☐ None										81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127a	26								
02	52 Motor Carrier or Government Entity Number & Street City State Zip										82 Motor Carrier or Government Entity Number & Street City State Zip										127b	-																												
135	Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																				127c	-																												
01	136 Charge 39:4-97										137 Summons. No. A291597										138 Charge -										139 Summons. No. -										127d	-								
01	140 Charge -										141 Summons. No. -										142 Charge -										143 Summons. No. -										127e	01								
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										131	-																									
B	01	01	01	05	20	M	-	-	-	11	04	-	-	PIERO G QUISEPOMOLINA 4 WESTMINSTER DR JACKSON NJ 08527										132	-																									
C	P	-	-	02	25	M	12	03	02	-	-	-	6303	IRVING - BARRERA-MEMIJE 136 ASTOR DR LAKEWOOD NJ 08701										133	-																									
D																								134	-																									

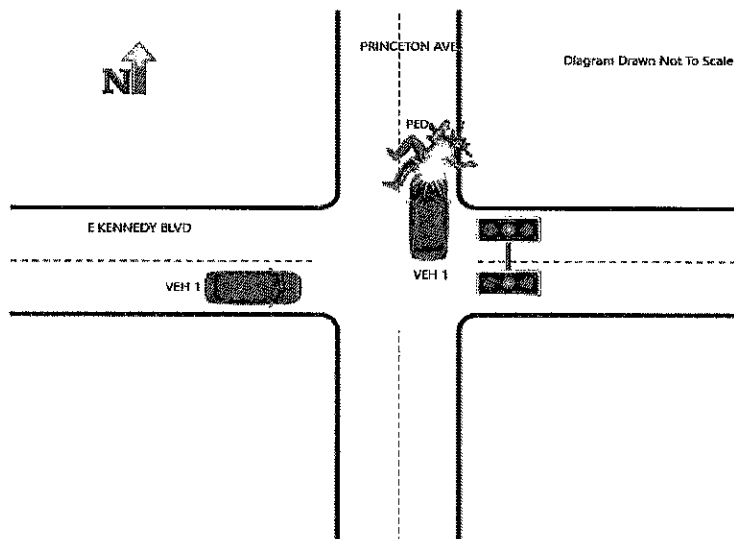
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: -- Case No: 22-012341

(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
A														
L														
E														
F														
I														
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V														
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H														
V														
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D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED HE WAS TRAVELING EAST ON E KENNEDY BLVD AND MADE A LEFT TURN ON TO PRINCETON AVENUE. DRIVER 1 STATED HE HAD THE GREEN TRAFFIC LIGHT WHEN MAKING A LEFT TURN, BUT DID NOT SEE THE PEDESTRIAN CROSSING THE STREET WHEN HE WAS TURNING AND STRUCK THE PEDESTRIAN.

WHEN I ARRIVED ON SCENE FIRST AID WAS ALREADY ON SCENE, AND THE PEDESTRIAN WAS LAYING IN THE STREET IN FRONT OF VEH 1. PEDESTRIAN WAS CONSCIOUS AND BREATHING BUT NOT TOO RESPONSIVE TO QUESTIONS. I ASKED THE PEDESTRIAN WHERE HIS BODY HURT THE MOST AND HE SAID HIS ENTIRE BODY HURTS.

DRIVER 1 SAID WHEN HE HIT THE PEDESTRIAN HE IMMEDIATELY GOT OUT THE CAR AND SAID THE PEDESTRIAN WAS LYING ON THE GROUND AND HE WAS UNCONSCIOUS FOR A SECOND AND THEN CAME TO.

TRAFFIC AND SAFETY WAS NOTIFIED. FIRST AID DETERMINED NO LIFE THREATENING INJURIES, DUE TO THIS TRAFFIC AND SAFETY DID NOT RESPOND. FIRST AID TRANSPORTED THE PEDESTRIAN TO JERSEY SHORE MEDICAL CENTER.

UPON MY INVESTIGATION I DETERMINED DRIVER 1 AT FAULT FOR THE CRASH WITH FAILING TO YIELD TO THE RIGHT OF WAY OF THE PEDESTRIAN. DRIVER 1 WAS ISSUED A SUMMONS FOR CARELESS DRIVING.

146 Officer's Signature

CLARKE N

147 Badge #

334

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

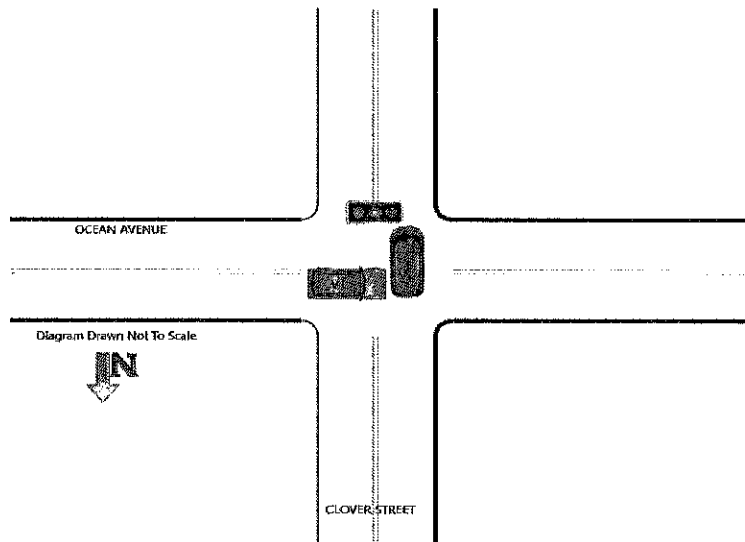
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012397**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	
	2	03	01	05	47	F	-	-	-	11	11	04	-	ESMIRNA - GINES 123 WOEHR AVE #1E LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver one stated he was traveling west on Ocean Avenue, as he approached the traffic signal he observed the traffic light turned yellow. While going through the intersection vehicle two entered the intersection causing the collision.

Driver two stated he was traveling south on Clover Street, as he approached the intersection the traffic signal was green for traffic on Clover Street. Driver two stated when he entered the intersection vehicle one crashed into the side of his vehicle.

No cameras or witnesses were observed at the scene. I was unable to determine which vehicle had the right of way due to conflicting stories from the drivers.

146 Officer's Signature

SPAGNUOLO D

147 Badge #

394

148 Reviewer

SGT. J. SPAGNUOLO

Badge #

331

149 Case Status

☐ Pending ☒ Complete

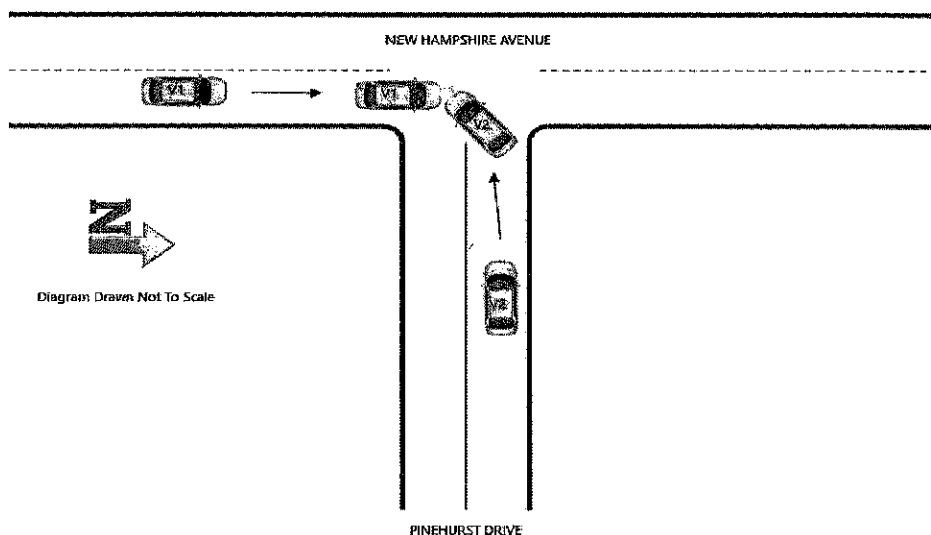
96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number		10 Crash Occurred On: NEW HAMPSHIRE AVENUE		11 Speed Limit: 45		118a 25	
97	22-012189						118b -	
01	2 Police Dept of		Code		12 Route No. Suffix 13 Milepost 18 Speed Limit		119a 16	
98	LAKEWOOD TOWNSHIP F01						119b -	
01	3 Station/Precinct		14 15 16		17 Cross Road Name		120a -	
99							120b -	
05	4 Date of Crash mm dd yy		5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code	
100a	02/15/22		TUESDAY		0651		1514	
01							119b -	
100b	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #	
04	1		6044-66-29-45		100		54 Policy No.	
101							951012283	
02	26 Driver's First Name		Initial Last Name		29 Sex		55 NJ Ins. Code	
102	MERCEDES		L BRAGG		F		135	
01	27 Number & Street		57 Number & Street					
103	535 DAVINA CT		21 FOUNTAIN DR; APT 4					
01	28 City		State Zip		58 City		State Zip	
104	LAKEWOOD		NJ 08701		LAKEWOOD		NJ 08701	
2	30 Eyes		DL Class		Restrictions		Endorsements	
105	2		D				NJ	
03	32 Driver's License Number		33 DOB mm dd yyyy		34 Expires mm yy		62 Driver's License Number	
106	B71515397359042		09/08/2004		09 25		E72735440010625	
107	35 Owner's First Name		Initial Last Name		65 Owner's First Name		Initial Last Name	
108	KELLY		A BRAGG		MICHAEL		ERCOLANO	
01	36 Number & Street		56 Number & Street					
109	535 DAVINA CT		21 FOUNTAIN DR; APT 4					
01	37 City		State Zip		67 City		State Zip	
110	LAKEWOOD		NJ 08701		LAKEWOOD		NJ 08701	
01	38 Make		39 Model		40 Color		41 Year	
111	TOYT		COR		BLK		2017	
01	44 VIN		42 Plate No.		43 State		68 Make	
112	2T1BURHE8HC937231		V10NCV		NJ		69 Model	
01	46 Vehicle Removed To		74 VIN		45 Expires		70 Color	
113	TOTAL CAR CARE		1FAFP45X5YF199631		11 22		71 Year	
114	47 Authority		76 Vehicle Removed To		TOTAL CAR CARE		72 Plate No.	
115	Owner Driver Police		77 Authority		Owner Driver Police		73 State	
116	48 Alcohol/Drug Test		78 Alcohol/Drug Test		79 Hazardous Material		74 VIN	
01	Given: No Yes Refused		Given: No Yes Refused		Given: No Yes Refused		75 Expires	
04	Type: Breath Blood Urine		Type: Breath Blood Urine		Type: Breath Blood Urine		76 VIN	
	Results: 0. % Pending		Results: 0. % Pending		Results: 0. % Pending		77 Hazardous Material	
	50 Carrier No.		51 GVWR/GCWR		80 Carrier No.		81 GVWR/GCWR	
	USDOT MC/MX		Weight <= 10,000 lbs		USDOT MC/MX		Weight <= 10,000 lbs	
			Weight 10,001-26,000 lbs				Weight 10,001-26,000 lbs	
			Weight >= 26,001 lbs				Weight >= 26,001 lbs	
	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity					
	Number & Street		Number & Street					
	City		State Zip		City		State Zip	
	135 Damage To Other Property		Yes (If Yes, describe) No					
	Oper. 136 Charge		137 Summons. No.		Oper. 138 Charge		139 Summons. No.	
	1				2		A291575	
	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 17 F - - - 11 11 04 -		MERCEDES L BRAGG					
B	02 01 01 05 59 M - - - 11 04 -		535 DAVINA CT LAKEWOOD NJ 08701					
C			MICHAEL - ERCOLANO					
D			21 FOUNTAIN DR; APT 4 LAKEWOOD NJ 08701					

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-012189

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

****Witness: Alex Mendoza**
249 Prospect Street
Lakewood, NJ 08701

Driver #1 stated she was traveling North on New Hampshire Avenue when Vehicle #2 disregarded the stop sign for Pinehurst Drive and turn left in front of her causing the collision. The center front of Vehicle #2 collided with the front of Vehicle #1. Vehicle #1 sustained heavy damage and was towed from the scene by Total Car Care.

Driver #2 said he was on Pinehurst Drive and made a left turn onto New Hampshire Avenue and did not see Vehicle #1 and caused the collision. Vehicle #2 sustained heavy damage and had to be towed from the scene.

A witness at the scene, Alex Mendoza, stated he was traveling North on New Hampshire Avenue directly behind Vehicle #1. Mr. Mendoza stated he observed Vehicle #2 never stop for the stop sign on Pinehurst Drive and cause the collision.

Based on statements from the involved parties, and my observations at the scene and damage to the vehicles, I determined that Vehicle #2 is at fault due to Driver #2 failing to stop for the stop sign at Pinehurst Drive and New Hampshire Avenue.

Driver #2 was issued motor vehicle summons #A291575 for 39:4-144 (failure to stop or yield).

No injuries reported at the scene.

146 Officer's Signature

CAVALLO M

147 Badge #

337

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable			☐ Non-Reportable			☐ Change Report																																																																																																																									
05	1 Case Number										10 Crash Occurred On: OLYMPIC CIRCLE										11 Speed Limit		25		118a																																																																																																																					
97	22-012222																								25																																																																																																																					
01	2 Police Dept of										Code		12 Route No.										Suffix		13 Milepost		118b																																																																																																																			
98	LAKEWOOD TOWNSHIP										01		17 Cross Road Name												18 Speed Limit		25																																																																																																																			
01	3 Station/Precinct												19 Ramp										To		17 Cross Road Name		04																																																																																																																			
99													21 Latitude										22 Longitude				119a																																																																																																																			
07	4 Date of Crash										5 Day Of Week		6 Time (use 2400 hrs)										7 Municipality Code		8 Total Killed		9 Total Injured		119b																																																																																																																	
100a	02/15/22										TUESDAY		1201										1514		--		--		-																																																																																																																	
01																													120a																																																																																																																	
100b	23 Veh #										24 Policy No.										25 NJ Ins. Code										53 Veh #										54 Policy No.										55 NJ Ins. Code										01																																																																																	
04	1										AOJ2382485024013										370										2										6028684709										148										01																																																																																	
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02	26 Driver's First Name										Initial		Last Name		29 Sex										56 Driver's First Name										Initial		Last Name		59 Sex										121a																																																																																													
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New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012222**

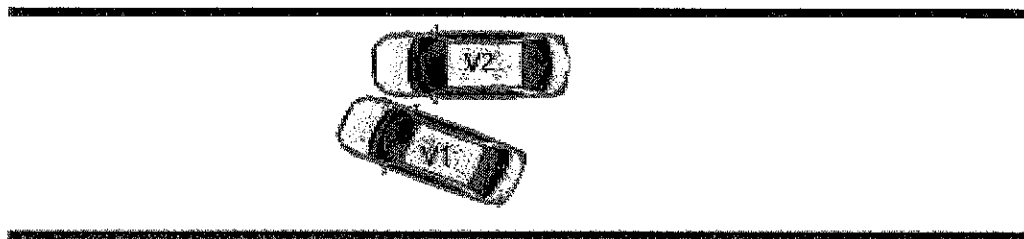
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



OLYMPIC CIRCLE

145 Crash Description/Narrative

Driver of vehicle 1 stated he was attempting to make a "K" turn in the roadway to travel north on Olympic Circle and as he was in the process of making the last maneuver needed vehicle 2 attempted to pass him on the right striking his vehicle on the passenger side front quarter panel.

Driver of vehicle 2 stated he was travelling north on Olympic Circle and saw vehicle 1 in the roadway. Driver of vehicle 2 explained that as he got closer to vehicle 1 he believed driver of vehicle 1 was allowing him to pass and thought he had enough room to do so prior to striking vehicle 1 with his drivers side front quarter panel.

After listening to the statements made by both drivers and my observations at the scene and damage to the vehicles I have determined that vehicle 2 is at fault due to failing to yield right of way to another vehicle. There were no injuries and no summonses were issued at this time.

146 Officer's Signature

DELVALLE M

147 Badge #

293

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

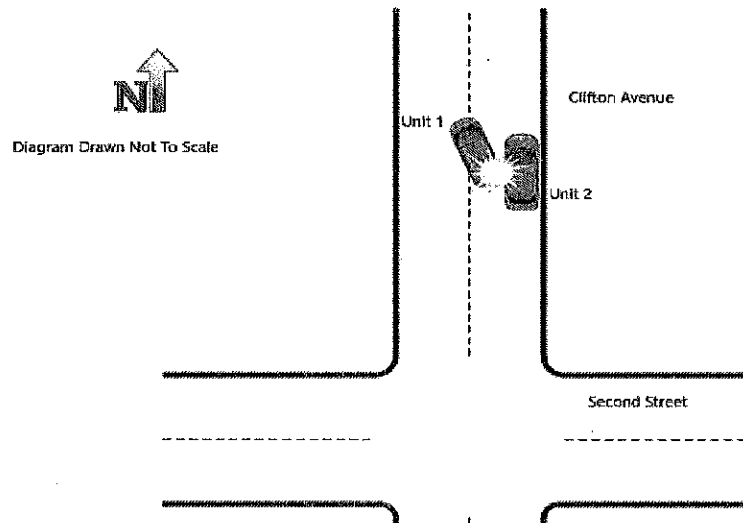
96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																																			
05	1 Case Number	22-011749										10 Crash Occurred On:	CLIFTON AVENUE										11 Speed Limit	25										118a																																																																																																			
97	2 Police Dept of	LAKEWOOD TOWNSHIP										Code	01																				118b																																																																																																				
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98	4 Date of Crash	02/13/22										5 Day of Week	SUNDAY										6 Time (use 2400 hrs)	1139										7 Municipality Code	1514										8 Total Killed											119b																																																																													
01	23 Veh #	1										24 Policy No.	1054054C0730F										25 NJ Ins. Code	962										53 Veh #	2										54 Policy No.											55 NJ Ins. Code											120a																																																																		
100b	26 Driver's First Name	DONNA										Initial	M										Last Name	WALKER										29 Sex	F										56 Driver's First Name											Initial											Last Name											59 Sex											120b																																												
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01	44 VIN	3GNCJLSB3KL159554										45 Expires	03										23	74 VIN	4T1BF1FK9HU426002										75 Expires	10										22	126c																																																																																						
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114	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Breath ☐ Blood ☐ Urine ☐ Pending																				78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Breath ☐ Blood ☐ Urine ☐ Pending																				127a																																																																																										
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	135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No																														130																																																																																																					
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New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-011749

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 states she was attempting to park her vehicle on Clifton Avenue when she backed into vehicle 2. Damage occurred to the front door of vehicle 2.

Vehicle 2 was legally parked on Clifton Avenue. Vehicle 1 backed into vehicle 2 causing damage.

Vehicle 1 was attempting to back into a parking space when she struck vehicle 2, causing damage.

Vehicle 1 is found at fault.

Attempts were made to obtain vehicle 2 insurance information. At this time all attempts were unsuccessful.

146 Officer's Signature

BELL K

147 Badge #

281

148 Reviewer

PA

Badge #

325

149 Case Status

☒ Pending ☐ Complete

New Jersey Police Crash Investigation Report

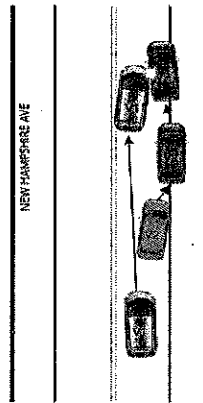
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011800**

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

144 Crash Diagram (NOT TO SCALE)


 Diagram Drawn Not To Scale



145 Crash Description/Narrative

V1 Insurance Information
 Self insured through Hertz LLC
 Certification# 4644
 877-584-7159

No other information on the insurance card for the rental vehicle.

Driver of V1 stated he was traveling North on New Hampshire Ave. D1 stated V2 pulled out of a driveway in front of him.

Driver of V2 stated he was traveling North on New Hampshire Ave. D2 stated he slowed down for traffic stopped at New Hampshire Ave and Locust St and veered to the right due to slippery road conditions. D2 stated when he came back to his lane V1 overtook a vehicle behind him and crashed into his car.

I determined V1 was at fault, with other contributing circumstances. It was snowing at the time of the crash and the roadway was slick. D1 may not have seen V2 pull to the side but denied overtaking a vehicle. D1 still had to yield to the right of way of V2, who was maneuvering to avoid a collision. The damage to the front of V1 was on the front and side of the front, passenger fender. This was consistent with V2 turning slightly to the right at the time of the crash. With respect to D2's statement, I determined V1 was either over taking a vehicle or attempting to pass V2 as if V2 was pulling over into the shoulder, causing the crash.

146 Officer's Signature

MICALLEF E

147 Badge #

366

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report:

05	1 Case Number 22-011921		10 Crash Occurred On: OCEAN AVENUE		11 Speed Limit 45		0088		118a	
01	2 Police Dept of LAKEWOOD TOWNSHIP		Code 01		12 Route No. 100		Suffix 100		118b	
01	3 Station/Precinct		13 Milepost 100		14 Speed Limit 100		15		119a	
02	4 Date of Crash mm dd yy 02/14/22		5 Day Of Week MONDAY		6 Time (use 2400 hrs) 0721		7 Municipality Code 1514		119b	
01	23 Veh # 1		24 Policy No. 6043-85-61-59		25 NJ Ins. Code 100		53 Veh # 2		54 Policy No. HPA00002632735	
04	26 Driver's First Name JOHN		Initial -		Last Name MANTO		29 Sex M		56 Driver's First Name PAUL	
01	27 Number & Street 1941 10TH AVE		28 City TOMS RIVER		State NJ		Zip 08757		57 Number & Street 30 CARVER STREET	
01	30 Eyes 2		DL Class D		Restrictions -		Endorsements -		61 State NJ	
01	32 Driver's License Number M04884070012662		33 DOB mm dd yyyy 12/18/1966		34 Expires mm yy 12 23		62 Driver's License Number J63946196106902		63 DOB mm dd yyyy 06/20/1990	
01	35 Owner's First Name JOHN		Initial -		Last Name MANTO		65 Owner's First Name MARY		66 Number & Street 30 CARVER STREET	
01	36 Number & Street 1941 10TH AVE		37 City TOMS RIVER		State NJ		Zip 08757		67 City BAYVILLE	
01	38 Make CHRY		39 Model 300		40 Color BLK		41 Year 2009		68 Make NISS	
01	42 Plate No. Y79NPC		43 State NJ		44 VIN 2C3LA63TX9H525700		45 Expires 04 22		69 Model VER	
01	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.		70 Color 4	
04	50 Carrier No. ☐ USDOT ☐ 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		53 VIN 3N1BC11EX8L447162		71 Year 2008	
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04	66 Motor Carrier or Government Entity		67 Motor Carrier or Government Entity		68 Motor Carrier or Government Entity		69 Motor Carrier or Government Entity		75 Expires 11 22	
04	70 Motor Carrier or Government Entity		71 Motor Carrier or Government Entity		72 Motor Carrier or Government Entity		73 Motor Carrier or Government Entity		76 Vehicle Removed To ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
04	74 Motor Carrier or Government Entity		75 Motor Carrier or Government Entity		76 Motor Carrier or Government Entity		77 Motor Carrier or Government Entity		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending	
04	78 Motor Carrier or Government Entity		79 Motor Carrier or Government Entity		80 Motor Carrier or Government Entity		81 Motor Carrier or Government Entity		79 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.	
04	82 Motor Carrier or Government Entity		83 Motor Carrier or Government Entity		84 Motor Carrier or Government Entity		85 Motor Carrier or Government Entity		80 Carrier No. ☐ USDOT ☐ MC/MX	
04	86 Motor Carrier or Government Entity		87 Motor Carrier or Government Entity		88 Motor Carrier or Government Entity		89 Motor Carrier or Government Entity		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
04	90 Motor Carrier or Government Entity		91 Motor Carrier or Government Entity		92 Motor Carrier or Government Entity		93 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity	
04	92 Motor Carrier or Government Entity		93 Motor Carrier or Government Entity		94 Motor Carrier or Government Entity		95 Motor Carrier or Government Entity		83 Motor Carrier or Government Entity	
04	94 Motor Carrier or Government Entity		95 Motor Carrier or Government Entity		96 Motor Carrier or Government Entity		97 Motor Carrier or Government Entity		84 Motor Carrier or Government Entity	
04	96 Motor Carrier or Government Entity		97 Motor Carrier or Government Entity		98 Motor Carrier or Government Entity		99 Motor Carrier or Government Entity		85 Motor Carrier or Government Entity	
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04	104 Motor Carrier or Government Entity		105 Motor Carrier or Government Entity		106 Motor Carrier or Government Entity		107 Motor Carrier or Government Entity		89 Motor Carrier or Government Entity	
04	106 Motor Carrier or Government Entity		107 Motor Carrier or Government Entity		108 Motor Carrier or Government Entity		109 Motor Carrier or Government Entity		90 Motor Carrier or Government Entity	
04	108 Motor Carrier or Government Entity		109 Motor Carrier or Government Entity		110 Motor Carrier or Government Entity		111 Motor Carrier or Government Entity		91 Motor Carrier or Government Entity	
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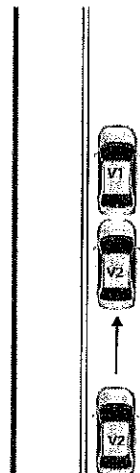
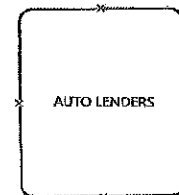
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-011921**

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

144 Crash Diagram (NOT TO SCALE)

OCEAN AVENUE
(ROUTE 88)

145 Crash Description/Narrative

Driver #1 stated he was traveling West on Ocean Avenue and stated Vehicle #2 was tailgating his vehicle while they traveled West on Ocean Avenue. Driver #1 stated Driver #2 was driving careless as they traveled West on Ocean Avenue. Driver #1 stated he slowed to make a turn into Auto Lenders and Vehicle #2 rear ended his vehicle. Vehicle #1 sustained moderate damage to the left rear corner and was able to be driven from the scene.

Driver #2 stated he was traveling West on Ocean Avenue and where two lanes merge into one, Driver #2 said Driver #1 was on his right and cut him off and continued to brake-check his vehicle as they traveled West on Ocean Avenue. Driver #2 stated vehicle #1 braked abruptly and he could not stop in time to avoid a collision and the right front corner of his vehicle collided with Vehicle #1. Vehicle #2 sustained moderate damage and was able to be driven from the scene.

No injuries reported at the scene and no summonses issued.

146 Officer's Signature

CAVALLO M

147 Badge #

337

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

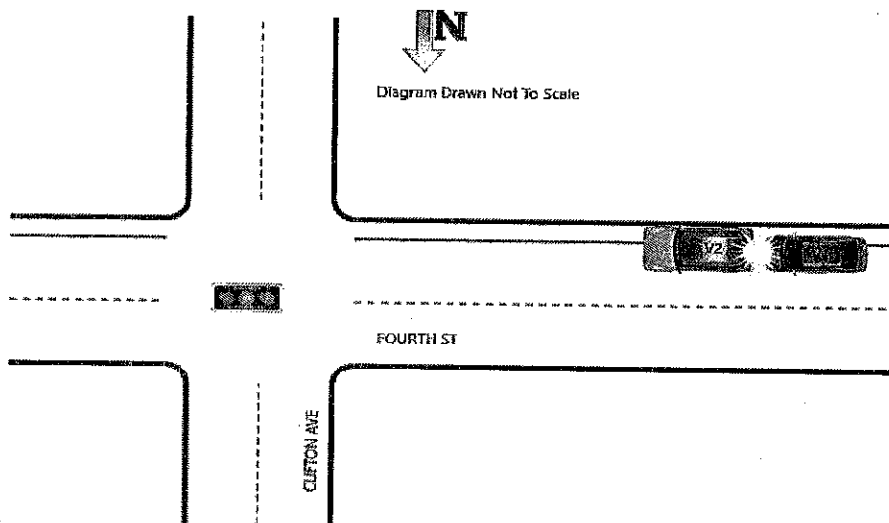
95	PAGE	1	OF	2	Fatal	New Jersey Police Crash Investigation Report										Reportable	Non-Reportable	Change Report																											
05	1 Case Number	22-010485										11 Speed Limit	25	118a	00																														
97	2 Police Dept of	LAKEWOOD TOWNSHIP F01										12 Route No.		13 Milepost	25	118b	-																												
98	3 Station/Precinct											14	200	15	16	119a	25																												
07	4 Date of Crash	02/09/22		5 Day Of Week	WEDNESDAY		6 Time (use 2400 hrs)	0141		7 Municipality Code	1514		8 Total Killed	--		9 Total Injured	--		119b	-																									
100a	10 Crash Occurred On:	4TH ST										11 Speed Limit	25	120a	00																														
01	11 At Intersection With	CLIFTON AVE										12 Route No.		13 Milepost	25	118b	-																												
98	12 Route No.											13 Milepost	25	119a	25																														
07	13 Direction of Travel	N										14	200	15	16	119b	-																												
100a	14 Date of Crash	02/09/22		15 Day Of Week	WEDNESDAY		16 Time (use 2400 hrs)	0141		17 Municipality Code	1514		18 Total Killed	--		19 Total Injured	--		119b	-																									
01	20 Crash Occurred On:	4TH ST										21 Latitude	40.094560		22 Longitude	-74.210560		120a	00																										
100b	23 Veh #	1										24 Policy No.	953601451										25 NJ Ins. Code	017	120b	-																			
04	26 Driver's First Name											27 Number & Street											28 City			121a	-																		
101	29 Sex											30 Eyes			31 State			32 Driver's License Number											33 DOB			34 Expires			121b	-									
02	35 Owner's First Name											36 Number & Street											37 City			38 Make			39 Model			40 Color			41 Year			42 Plate No.			43 State			122	01
01	44 VIN	KMHDU4AD6AU918436										45 Expires	11 22		46 Vehicle Removed To	BARINA'S AUTOMOTIVE										47 Authority	Police		48 Alcohol/Drug Test	No		49 Hazardous Material	None		50 Carrier No.	None		51 GVWR/GCWR	Weight <= 10,000 lbs		52 Motor Carrier or Government Entity			123	10
106	53 Veh #	2										54 Policy No.	HPA00002611713										55 NJ Ins. Code	017	124	04																			
101	56 Driver's First Name											57 Number & Street	301 4TH ST APT8										58 City	LAKEWOOD		59 Model	PIL		60 Color	BLK		61 Year	2012		62 Plate No.	E76LBC		63 State	NJ		125	04			
02	64 VIN	5FN9YF4H72CB061222										65 Expires	02 23		66 Vehicle Removed To											67 Authority	Owner		68 Alcohol/Drug Test	No		69 Hazardous Material	None		70 Carrier No.	None		71 GVWR/GCWR	Weight <= 10,000 lbs		72 Motor Carrier or Government Entity			126a	28
106	73 Veh #											74 Policy No.											75 NJ Ins. Code		126b	-																			
101	76 Driver's First Name											77 Number & Street											78 City			79 Make			80 Model			81 Color			82 Year			83 Plate No.			84 State			126c	-
06	85 VIN											86 Expires			87 Vehicle Removed To											88 Authority			89 Alcohol/Drug Test			90 Hazardous Material			91 Carrier No.			92 GVWR/GCWR			93 Motor Carrier or Government Entity			126d	-
106	94 Veh #											95 Policy No.											96 NJ Ins. Code		126e	-																			
101	97 Driver's First Name											98 Number & Street											99 City			100 Make			101 Model			102 Color			103 Year			104 Plate No.			105 State			127a	26
04	106 VIN											107 Expires			108 Vehicle Removed To											109 Authority			110 Alcohol/Drug Test			111 Hazardous Material			112 Carrier No.			113 GVWR/GCWR			114 Motor Carrier or Government Entity			127b	-
110	115 Veh #											116 Policy No.											117 NJ Ins. Code		127c	-																			
01	118 Driver's First Name											119 Number & Street											120 City			121 Make			122 Model			123 Color			124 Year			125 Plate No.			126 State			127d	-
01	127 VIN											128 Expires			129 Vehicle Removed To											130 Authority			131 Alcohol/Drug Test			132 Hazardous Material			133 Carrier No.			134 GVWR/GCWR			135 Motor Carrier or Government Entity			127e	26
02	136 Veh #											137 Policy No.											138 NJ Ins. Code		128	26																			
02	139 Driver's First Name											140 Number & Street											141 City			142 Make			143 Model			144 Color			145 Year			146 Plate No.			147 State			129	12
02	148 VIN											149 Expires			150 Vehicle Removed To											151 Authority			152 Alcohol/Drug Test			153 Hazardous Material			154 Carrier No.			155 GVWR/GCWR			156 Motor Carrier or Government Entity			130	06
02	157 Veh #											158 Policy No.											159 NJ Ins. Code		131	06																			
02	160 Driver's First Name											161 Number & Street											162 City			163 Make			164 Model			165 Color			166 Year			167 Plate No.			168 State			132	06
02	169 VIN											170 Expires			171 Vehicle Removed To											172 Authority			173 Alcohol/Drug Test			174 Hazardous Material			175 Carrier No.			176 GVWR/GCWR			177 Motor Carrier or Government Entity			133	04
02	178 Veh #											179 Policy No.											180 NJ Ins. Code		134	03																			
02	181 Driver's First Name											182 Number & Street											183 City			184 Make			185 Model			186 Color			187 Year			188 Plate No.			189 State			135	03
02	190 VIN											191 Expires			192 Vehicle Removed To											193 Authority			194 Alcohol/Drug Test			195 Hazardous Material			196 Carrier No.			197 GVWR/GCWR			198 Motor Carrier or Government Entity			136	03
02	199 Veh #											200 Policy No.											201 NJ Ins. Code		137	03																			
02	202 Driver's First Name											203 Number & Street											204 City			205 Make			206 Model			207 Color			208 Year			209 Plate No.			210 State			138	03
02	211 VIN											212 Expires			213 Vehicle Removed To											214 Authority			215 Alcohol/Drug Test			216 Hazardous Material			217 Carrier No.			218 GVWR/GCWR			219 Motor Carrier or Government Entity			139	03
02	220 Veh #											221 Policy No.											222 NJ Ins. Code		140	03																			
02	223 Driver's First Name											224 Number & Street											225 City			226 Make			227 Model			228 Color			229 Year			230 Plate No.			231 State			141	03
02	232 VIN											233 Expires			234 Vehicle Removed To											235 Authority			236 Alcohol/Drug Test			237 Hazardous Material			238 Carrier No.			239 GVWR/GCWR			240 Motor Carrier or Government Entity			142	03
02	241 Veh #											242 Policy No.											243 NJ Ins. Code		143	03																			
02	244 Driver's First Name											245 Number & Street											246 City			247 Make			248 Model			249 Color			250 Year			251 Plate No.			252 State			144	03
02	253 VIN											254 Expires			255 Vehicle Removed To											256 Authority			257 Alcohol/Drug Test			258 Hazardous Material			259 Carrier No.			260 GVWR/GCWR			261 Motor Carrier or Government Entity			145	03
02	262 Veh #											263 Policy No.											264 NJ Ins. Code		146	03																			
02	265 Driver's First Name											266 Number & Street											267 City			268 Make			269 Model			270 Color			271 Year			272 Plate No.			273 State			147	03
02	274 VIN											275 Expires			276 Vehicle Removed To											277 Authority			278 Alcohol/Drug Test			279 Hazardous Material			280 Carrier No.			281 GVWR/GCWR			282 Motor Carrier or Government Entity			148	03
02	283 Veh #											284 Policy No.											285 NJ Ins. Code		149	03																			
02	286 Driver's First Name											287 Number & Street											288 City			289 Make			290 Model			291 Color			292 Year			293 Plate No.			294 State			150	03
02	295 VIN											296 Expires			297 Vehicle Removed To											298 Authority			299 Alcohol/Drug Test			300 Hazardous Material			301 Carrier No.			302 GVWR/GCWR			303 Motor Carrier or Government Entity			151	03
02	304 Veh #											305 Policy No.											306 NJ Ins. Code		152	03																			
02	307 Driver's First Name											308 Number & Street											309 City			310 Make			311 Model			312 Color			313 Year			314 Plate No.			315 State			153	03
02	316 VIN											317 Expires			318 Vehicle Removed To											319 Authority			320 Alcohol/Drug Test			321 Hazardous Material			322 Carrier No.			323 GVWR/GCWR			324 Motor Carrier or Government Entity			154	03
02	325 Veh #											326 Policy No.											327 NJ Ins. Code		155	03																			
02	328 Driver's First Name											329 Number & Street											330 City			331 Make			332 Model			333 Color			334 Year			335 Plate No.			336 State			156	03
02	337 VIN											338 Expires			339 Vehicle Removed To											340 Authority			341 Alcohol/Drug Test			342 Hazardous Material			343 Carrier No.			344 GVWR/GCWR			345 Motor Carrier or Government Entity			157	03
02	346 Veh #											347 Policy No.											348 NJ Ins. Code		158	03																			
02	349 Driver's First Name											350 Number & Street											351 City			352 Make			353 Model			354 Color			355 Year			356 Plate No.			357 State			159	03
02	358 VIN											359 Expires			360 Vehicle Removed To											361 Authority			362 Alcohol/Drug Test			363 Hazardous Material			364 Carrier No.			365 GVWR/GCWR			366 Motor Carrier or Government Entity			160	03
02	367 Veh #											368 Policy No.											369 NJ Ins. Code		161	03																			
02	370 Driver's First Name											371 Number & Street											372 City			373 Make			374 Model			375 Color			376 Year			377 Plate No.			378 State			162	03
02	379 VIN											380 Expires			381 Vehicle Removed To											382 Authority			383 Alcohol/Drug Test			384 Hazardous Material			385 Carrier No.			386 GVWR/GCWR			387 Motor Carrier or Government Entity			163	03
02	388 Veh #											389 Policy No.											390 NJ Ins. Code		164	03																			
02	391 Driver's First Name											392 Number & Street											393 City			394 Make			395 Model			396 Color			397 Year			398 Plate No.			399 State			165	03
02	399 VIN											400 Expires			401 Vehicle Removed To											402 Authority			403 Alcohol/Drug Test			404 Hazardous Material			405 Carrier No.			406 GVWR/GCWR			407 Motor Carrier or Government Entity			166	03
02	408 Veh #											409 Policy No.											410 NJ Ins. Code		167	03																			
02	411 Driver's First Name											412 Number & Street											413 City			414 Make			415 Model			416 Color			417 Year			418 Plate No.			419 State			168	03
02	419 VIN											420 Expires			421 Vehicle Removed To											422 Authority			423 Alcohol/Drug Test			424 Hazardous Material			425 Carrier No.			426 GVWR/GCWR			427 Motor Carrier or Government Entity			169	03
02	428 Veh #											429 Policy No.											430 NJ Ins. Code		170	03																			
02	431 Driver's First Name											432 Number & Street											433 City			434 Make			435 Model			436 Color			437 Year			438 Plate No.			439 State			171	03
02	439 VIN											440 Expires			441 Vehicle Removed To											442 Authority			443 Alcohol/Drug Test			444 Hazardous Material			445 Carrier No.			446 GVWR/GCWR			447 Motor Carrier or Government Entity			172	03
02	448 Veh #											449 Policy No.											450 NJ Ins. Code		173	03																			
02	451 Driver's First Name											452 Number & Street											453 City			454 Make			455 Model			456 Color			457 Year			458 Plate No.			459 State			174	03
02	459 VIN											460 Expires			461 Vehicle Removed To											462 Authority			463 Alcohol/Drug Test			464 Hazardous Material			465 Carrier No.			466 GVWR/GCWR			467 Motor Carrier or Government Entity			175	03
02	468 Veh #											469 Policy No.											470 NJ Ins. Code		176	03																			
02	471 Driver's First Name											472 Number & Street											473 City			474 Make			475 Model			476 Color			477 Year			478 Plate No.			479 State			177	03
02	479 VIN											480 Expires			481 Vehicle Removed To											482 Authority			483 Alcohol/Drug Test			484 Hazardous Material			485 Carrier No.			486 GVWR/GCWR			487 Motor Carrier or Government Entity			178	03
02	488 Veh #											489 Policy No.											490 NJ Ins. Code		179	03																			
02	491 Driver's First Name											492 Number & Street											493 City			494 Make			495 Model			496 Color			497 Year			498 Plate No.			499 State			180	03
02	499 VIN											500 Expires			501 Vehicle Removed To											502 Authority			503 Alcohol/Drug Test			504 Hazardous Material			505 Carrier No.			506 GVWR/GCWR			507 Motor Carrier or Government Entity			181	03
02	508 Veh #											509 Policy No.											510 NJ Ins. Code		182	03																			
02	511 Driver's First Name											512 Number & Street											513 City			514 Make			515 Model			516 Color			517 Year			518 Plate No.			519 State			183	03
02	519 VIN											520 Expires			521 Vehicle Removed To											522 Authority			523 Alcohol/Drug Test			524 Hazardous Material			525 Carrier No.			526 GVWR/GCWR			527 Motor Carrier or Government Entity			184	03
02	528 Veh #											529 Policy No.											530 NJ Ins. Code		185	03																			
02	531 Driver's First Name											532 Number & Street											533 City			534 Make			535 Model			536 Color			537 Year			538 Plate No.			539 State			186	03
02	539 VIN											540 Expires			541 Vehicle Removed To											542 Authority			543 Alcohol/Drug Test			544 Hazardous Material</													

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-010485**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
L														
E														
F														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling east on 4th St and vehicle 2 was legally parked on the side of the road. Vehicle 1 rear ended vehicle 2, the unidentified driver of vehicle 1 continued driving failing to report the accident. The driver of vehicle 1 then abandoned the disabled vehicle 2 blocks away in front of 106 4th St. Vehicle 1 was impounded by Barina's Automotive.

*Progressive Advanced Insurance CO

146 Officer's Signature

DILONE L

147 Badge #

382

148 Reviewer

SGT. M. MARZOCCA

Badge #

314

149 Case Status

☐ Pending☒ Complete

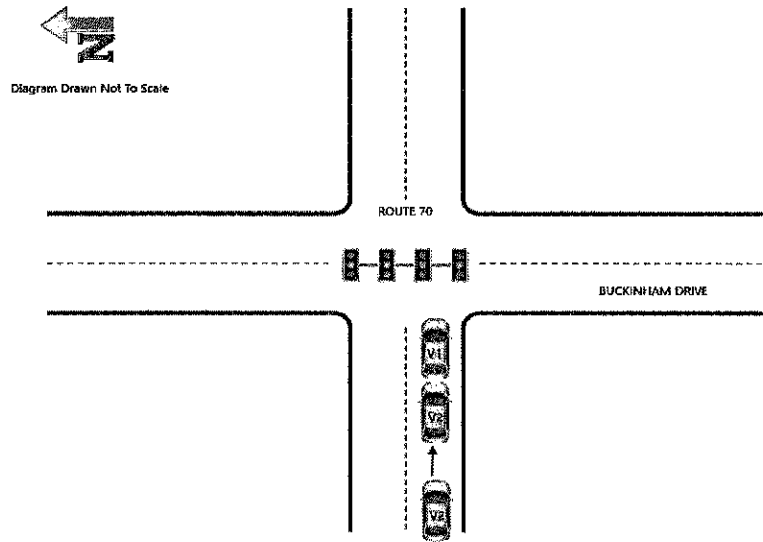
96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																								
01	1 Case Number				22-012263										10 Crash Occurred On: ROUTE 70		11 Speed Limit		50		0070		118a																				
01	2 Police Dept of				Code		LAKEWOOD TOWNSHIP F01										☒ At Intersection With		Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		118b												
01	3 Station/Precinct														☐ Feet		☐ N		☐ E		of: BUCKINGHAM DRIVE										119a												
02	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19 Ramp		20 To		17 Cross Road Name				☐ NB		☐ EB		☐ SB		☐ WB		02												
01	02/15/22				TUESDAY		1224		1514		--		--						21 Latitude		40.05297		22 Longitude		-74.17904				09														
04	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code																01																
01	1		4599-54-88-09		148		2		6038-01-30-97		-																01																
02	☐ Parked		☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run		☐ Parked		☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run																01								
01	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex																121a								
01	ESTHER				-		MEISELS		F		GOLDIN				-		CERRITO		M																01								
01	27 Number & Street				34 AMBASSADOR WAY										57 Number & Street				1 FAIRVIEW AVE APT A8																								121b
01	28 City				State		Zip		58 City				State		Zip																121b												
01	JACKSON				NJ		08527		DANBURY				CT		06810																121b												
02	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State																122								
01	2		D		-		-		CA		2		-		-		-		-																08								
01	32 Driver's License Number				33 DOB		34 Expires		62 Driver's License Number		63 DOB		64 Expires																123														
01	F7829700				12/03/1998		12 23		-				02/01/1986		-		-																01										
01	35 Owner's First Name				Initial		Last Name		65 Owner's First Name		Initial		Last Name																124														
01	JOSEPH				-		SCHWADRON		-		IRVIN				-		CERRITO		-																03								
01	36 Number & Street				34 AMBASSADOR WAY										66 Number & Street				1 FAIRVIEW AVE APT A8																								125
01	37 City				State		Zip		67 City				State		Zip																03												
01	JACKSON				NJ		08527		DANBURY				CT		06810																126a												
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																26				
01	KIA		OPT		BLK		2015		L32LNY		NJ		HOND				CRV		1		2012		AY39440		CT																126b		
01	44 VIN				45 Expires		74 VIN														75 Expires																126c						
01	5XXGM4A73FG423457				07 22		2HKRM4H33CH612492														09 23																126d						
01	46 Vehicle Removed To				76 Vehicle Removed To																								126e														
01	☒ Driven				☐ Towed Disabled		☐ Towed Disabled & Impounded		☐ Driven		☐ Towed Disabled		☐ Towed Disabled & Impounded																126e														
01	☐ Left At Scene				☐ Towed Impounded		☒ Left At Scene		☐ Towed Impounded																126e																		
01	47 Authority				☐ Owner		☒ Driver		☐ Police		77 Authority				☐ Owner		☒ Driver		☐ Police																26								
01	48 Alcohol/Drug Test				Given: ☒ No		☐ Yes		☐ Refused		78 Alcohol/Drug Test				Given: ☒ No		☐ Yes		☐ Refused																26								
01	Type: ☐ Breath				☐ Blood		☐ Urine		79 Hazardous Material				Given: ☒ None		☐ On Board		☐ Spill																127b										
01	Results: 0. - %				☐ Pending		Hazard Class		Placard No.		Results: 0. - %				☐ Pending		Hazard Class		Placard No.																127c								
02	50 Carrier No.				☐ USDOT		☒ None		80 Carrier No.				☐ USDOT		☒ None																127d												
02	☐ MC/MX				☐ MC/MX		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		☐ MC/MX				☐ MC/MX		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs																127e				
01	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity																								128														
01	Number & Street				Number & Street																								129														
01	City				State		Zip		City				State		Zip																06												
01	135 Damage To Other Property				☐ Yes (If Yes, describe)		☒ No																131																				
01	Oper. 1				136 Charge		137 Summons. No.		Oper. 2		138 Charge		139 Summons. No.																132														
01	1				140 Charge		-		2		39:3-10		A291576																133														
01	Oper. 1				140 Charge		141 Summons. No.		Oper. 2		142 Charge		143 Summons. No.																03														
01	83				84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death														03
A	01				01		01		05		23		F		-		-		-		11		04		-		-		ESTHER - MEISELS														-
B	02				01		01		05		36		M		-		-		-		11		04		-		-		34 AMBASSADOR WAY JACKSON NJ 08527														-
C	02				02		01		05		38		F		-		-		-		11		04		-		-		GOLDIN - CERRITO														-
D	02				03		01		05		8		F		-		-		-		04		04		-		-		1 FAIRVIEW AVE APT A8 DANBURY CT 06810														-
																													CARLA - AYALA														-
																													476 PROSPECT ST APT.6 LAKEWOOD NJ 08701														-
																													ASHLEY - AYALA														-
																													476 PROSPECT ST APT 6 LAKEWOOD NJ 08701														-

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-012263

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

***Box #55: Vehicle #2 is insured out of state by:**
Geico Insurance
1 Geico Blvd
Fredericksburg, VA 22412

Driver #1 stated she was stopped for a red light facing East on Route 70 and Buckingham Drive. Driver #1 stated Vehicle #2 never stopped behind her and collided with her vehicle. The center front of Vehicle #2 collided with the center rear of Vehicle #1. Vehicle #1 sustained moderate damage, but was able to be driven from the scene.

Driver #2, through translation by a family member, stated he was travelling East on Route 70 and Vehicle #1 stopped in front of him and he could not stop in time to avoid the collision. Vehicle #2 sustained moderate damage and was parked at the scene to await a licensed driver as Driver #2 did not possess a drivers license.

Based on statements from the involved parties and my observations at the scene and the damage to the vehicles, I determined that Vehicle #2 is at fault due to driver inattention.

Driver #2 was issued motor vehicle summons #A291576 for 39:3-10 (Unlicensed).

No injuries reported at the scene.

146 Officer's Signature

CAVALLO M

147 Badge #

337

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

05	1 Case Number 22-012264		10 Crash Occurred On: MADISON AVE		11 Speed Limit 50		0009		25		
97	2 Police Dept of LAKEWOOD TOWNSHIP F01		Code		12 Route No.		Suffix		13 Milepost		118a
01	3 Station/Precinct		14		15		16		18 Speed Limit 45		118b
01	4 Date of Crash mm dd yy 02/15/22		5 Day Of Week TUESDAY		6 Time (use 2400 hrs) 1246		7 Municipality Code 1514		8 Total Killed --		119a
99	9 Total Injured 1		21 Latitude 40.10693		22 Longitude -74.21948		19 Ramp		20 Route/Name		119b
02	23 Veh # 1		24 Policy No. BA00000086871T		25 NJ Ins. Code 917		53 Veh # 2		54 Policy No. 4045750694		120a
100a	26 Driver's First Name NIHAT		Initial -		Last Name CAKIR		29 Sex M		56 Driver's First Name GITTEL		120b
01	27 Number & Street 10 WILMOR DR		State NJ		Zip 08520		57 Number & Street 200 PRIVATE WAY		58 City LAKEWOOD		121a
02	28 City EAST WINDSOR		State NJ		Zip 08520		59 Sex F		60 Eyes 5		121b
04	30 Eyes 2		DL Class D		Restrictions -		Endorsements -		31 State NJ		01
101	32 Driver's License Number C02215920004602		33 DOB mm dd yyyy 04/11/1960		34 Expires mm yy 04/25		62 Driver's License Number S59962910055965		63 DOB mm dd/yyyy 05/03/1996		122
03	35 Owner's First Name SUMMIT CONSTRUI-		Initial -		Last Name -		65 Owner's First Name MIRIAM		Initial -		123
106	36 Number & Street 138 FRANKLIN ST		State NJ		Zip 08520		66 Number & Street 200 PRIVATE WAY		67 City LAKEWOOD		124
107	37 City HIGHTSTOWN		State NJ		Zip 08520		68 Make TOYT		69 Model RAV		11
108	38 Make CHEV		39 Model -		40 Color WHI		41 Year 2004		42 Plate No. XB173V		125
109	43 State NJ		44 VIN 1GCGG29U141163395		45 Expires 03/22		70 Color BLK		71 Year 2015		08
110	46 Vehicle Removed To TOTAL CAR CARE		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.		72 Plate No. Y90KRV		126a
02	50 Carrier No. ☐ USDOT ☒ None		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		73 State NJ		74 VIN 2T3BFREV1FW402548		75 Expires 11/22		126b
01	52 Motor Carrier or Government Entity		53		76 Vehicle Removed To YITZ TOWING		77 Authority ☒ Owner ☐ Driver ☐ Police		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0, - % ☐ Pending		126c
01	54		55		79 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.		80 Carrier No. ☐ USDOT ☒ None		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		126d
04	56		57		82 Motor Carrier or Government Entity		83		84		126e
	58		59		85		86		87		126f
	60		61		88		89		90		126g
	62		63		91		92		93		126h
	64		65		94		95		96		126i
	66		67		97		98		99		126j
	68		69		100		101		102		126k
	69		70		103		104		105		126l
	70		71		106		107		108		126m
	71		72		109		110		111		126n
	72		73		112		113		114		126o
	73		74		115		116		117		126p
	74		75		118		119		120		126q
	75		76		121		122		123		126r
	76		77		124		125		126		126s
	77		78		127		128		129		126t
	78		79		130		131		132		126u
	79		80		133		134		135		126v
	80		81		136		137		138		126w
	81		82								

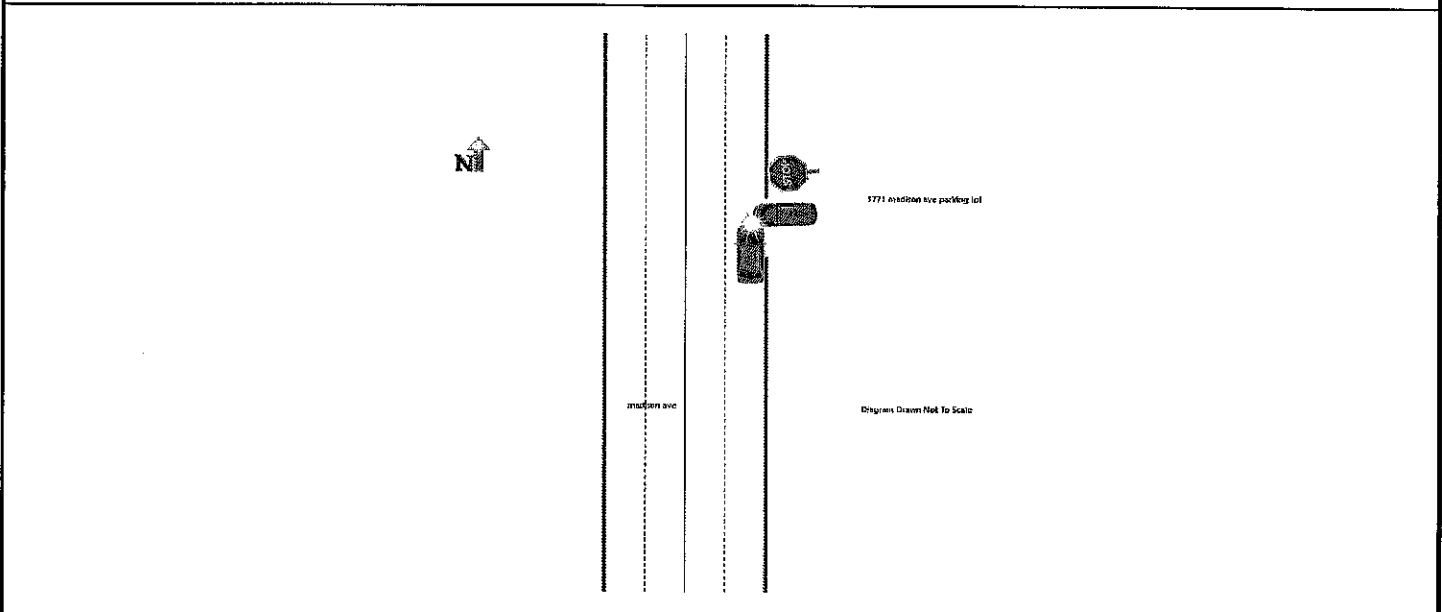
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012264**

(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
A														
L														
L														
I														
N														
V														
O														
L														
V														
E														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V1 STATED HE WAS TRAVELING NORTH ON MADISON AVE IN THE RIGHT LANE, WHEN V2 PULLED OUT IN FRONT OF HIM, FROM THE PARKING LOT OF 1771 MADISON AVE, CAUSING THE COLLISION.

DRIVER OF V2 STATED SHE WAS PULLING OUT OF THE PARKING LOT OF 1771 MADISON AVE. SHE OBSERVED V1 WITH ITS RIGHT DIRECTIONAL ON AND ASSUMED HE WAS TURNING INTO A PARKING LOT. AS SHE PULLED ONTO MADISON AVE, V1 STRUCK HER VEHICLE.

WITNESS (YOSEF KLUGMAN) STATED HE OBSERVED V1 TRAVELING NORTH BOUND, ON MADISON AVE, IN THE LEFT LANE. HE ADDED V1 MADE A LANE CHANGE AND STRUCK V2 WHO WAS PULLING OUT OF THE PARKING LOT OF 1771 MADISON AVE.

IN CONCLUSION I FIND THE DRIVER OF V2 TO BE AT FAULT.

146 Officer's Signature

RENNA V

147 Badge #

341

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

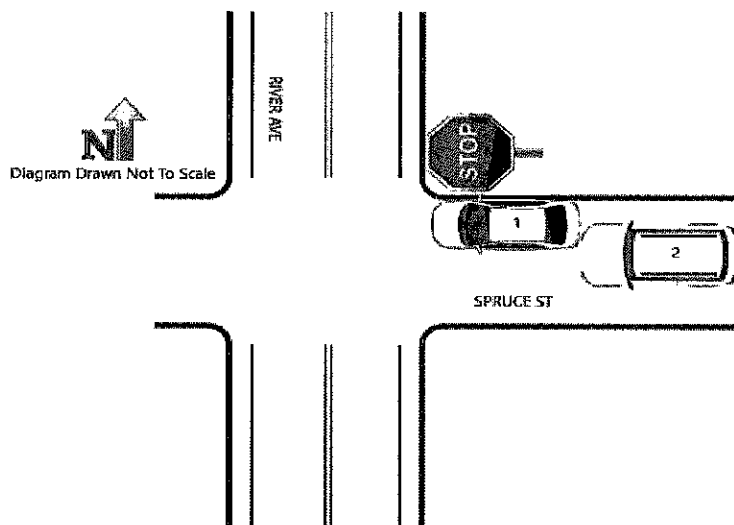
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-012268

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
H														
I														
V														
E														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was traveling West on Spruce St at the intersection with River Ave. Vehicle #2 was traveling West on Spruce St behind vehicle #1. The vehicles collided in the roadway.

Driver #1 stated that he was stopped at the stop sign and vehicle #2 struck his vehicle from the rear.

Driver #2 stated that vehicle #1 was stopped at the stop sign, he was stopped behind vehicle #1 and vehicle #1 began backing and struck his vehicle.

Due to a lack of independent witnesses and the drivers' conflicting version of events, fault could not be determined at this time.

146 Officer's Signature

PRZEWOZNIK J

147 Badge #

308

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report				
05	1 Case Number		22-012547		10 Crash Occurred On: E. COUNTY LINE ROAD		11 Speed Limit 45		
01	2 Police Dept of		Code		12 Route No.		13 Milepost		
98	LAKEWOOD TOWNSHIP		F01		14		15		
01	3 Station/Precinct				16		17 Cross Road Name		
99					18		19		
05	4 Date of Crash		5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		
100a	02/16/22		WEDNESDAY		1052		1514		
01	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		
100b	1		6029-97-71-44		148		2		
04	26 Driver's First Name		Initial Last Name		29 Sex		56 Driver's First Name		
101	SARA		- MIZRAHI		F		ANA C ORTIZ		
02	27 Number & Street				57 Number & Street				
102	32 MUSKET LN				1715 MORGAN COURT				
01	28 City		State Zip		58 City		State Zip		
104	EATONTOWN		NJ 07724		JACKSON		NJ 08527		
2	30 Eyes		DL Class		Restrictions		Endorsements		
	2		D				NJ		
105	32 Driver's License Number		33 DOB		34 Expires		62 Driver's License Number		
01	M47726910059912		09/18/1991		09 24		076330416359712		
106	35 Owner's First Name		Initial Last Name		65 Owner's First Name		Initial Last Name		
-	PV		- HOLDING CORP.		ANA C ORTIZ		-		
107	36 Number & Street				66 Number & Street				
-	375 MCCLELLAN HWY E				1715 MORGAN COURT				
108	37 City		State Zip		67 City		State Zip		
01	BOSTON		MA 02128		JACKSON		NJ 08527		
109	38 Make		39 Model		40 Color		41 Year		
01	NISSAN		ALTIMA		BK		2021		
110	44 VIN		45 Expires		74 VIN		75 Expires		
01	1N4BL4CV5MN370132		03 23		5NPD84LF5HH097776		11 22		
111	46 Vehicle Removed To				76 Vehicle Removed To				
01	PRIVATE TOW				-				
112	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded				☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				
-	☐ Left At Scene ☐ Towed Impounded				☐ Left At Scene ☐ Towed Impounded				
113	47 Authority		☒ Owner ☐ Driver ☐ Police		77 Authority		☒ Owner ☐ Driver ☐ Police		
-	48 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused		78 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused		
114	Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				
115	Results: 0. - % ☐ Pending		Hazard Class Placard No.		Results: 0. - % ☐ Pending		Hazard Class Placard No.		
116	50 Carrier No.		☐ USDOT ☒ None		80 Carrier No.		☐ USDOT ☒ None		
04	MC/MX				81 GVWR/GCWR		☐ Weight <= 10,000 lbs		
117							☐ Weight 10,001-26,000 lbs		
04							☐ Weight >= 26,001 lbs		
52 Motor Carrier or Government Entity					82 Motor Carrier or Government Entity				
-					-				
Number & Street					Number & Street				
-					-				
City					City				
-					-				
State					State				
-					-				
Zip					Zip				
-					-				
135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No									
-									
136 Charge									
-									
137 Summons. No.									
-									
138 Charge									
-									
139 Summons. No.									
-									
140 Charge									
-									
141 Summons. No.									
-									
142 Charge									
-									
143 Summons. No.									
-									
Names & Addresses of Occupants - If Deceased, Date & Time of Death									
83 84 85 86 87 88 89 90 91 92 93 94 95									
SARA - MIZRAHI									
32 MUSKET LN EATONTOWN NJ 07724									
ANA C ORTIZ									
1715 MORGAN COURT JACKSON NJ 08527									
-									
-									
-									
-									

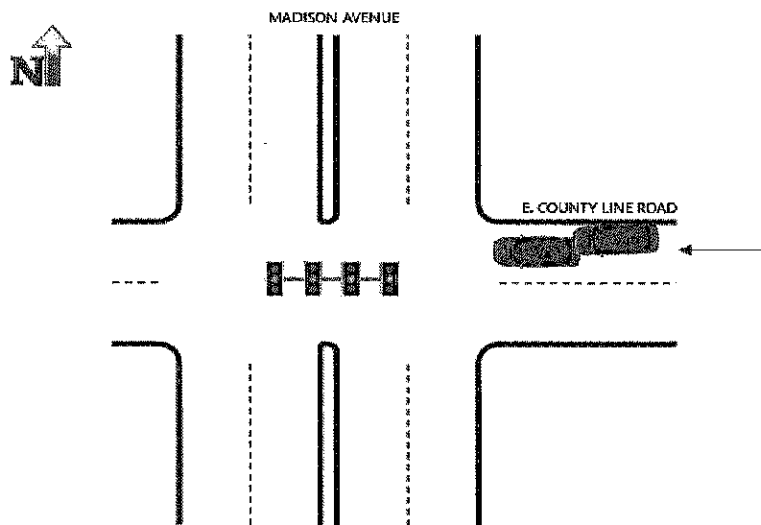
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012547**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED I'M NOT SURE WHAT HAPPENED... MAYBE THE OTHER CAR STOPPED SHORT.

DRIVER OF VEHICLE 2 STATED SHE WAS STOPPED AT A RED TRAFFIC LIGHT WHEN SHE WAS STRUCK IN THE REAR BY VEHICLE 1.

THIS INVESTIGATION DETERMINED THAT VEHICLE 2 WAS STOPPED AT A RED TRAFFIC LIGHT ON E. COUNTY LINE ROAD AT THE INTERSECTION WITH MADISON AVENUE. VEHICLE 1 WHICH WAS TRAVELING WEST E. COUNTY LINE ROAD, FAILED TO STOP AND CRASHED INTO THE REAR OF VEHICLE 2.

146 Officer's Signature

SEUNATH K

147 Badge #

284

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

05	1 Case Number 22-012549		10 Crash Occurred On: PINE ST		11 Speed Limit 40		118a	
01	2 Police Dept of LAKEWOOD TOWNSHIP F 01		Code		12 Route No.		118b	
01	3 Station/Preinct -		15		16		119a	
07	4 Date of Crash mm dd yy 02/16/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1100		119b	
01	7 Municipality Code 1514		8 Total Killed --		9 Total Injured 1		120a	
0100a	21 Latitude 40.07094		22 Longitude -74.19539				120b	
0100b	23 Veh # 1		24 Policy No. 648905762		25 NJ Ins. Code 012		121a	
06	26 Driver's First Name JOSE		Initial R		Last Name ARREAGAHERRERA -		121b	
01	27 Number & Street 19 BIRCH DR		28 City JACKSON		State NJ		122	
01	29 Sex M		30 Eyes 2		DL Class A		123	
02	31 State NJ		32 Driver's License Number A76224107904002		33 DOB mm dd yyyy 04/20/2000		124	
01	34 Expires mm yy 12 22		35 Owner's First Name FOUR CORNERS PA -		Initial -		125	
106	36 Number & Street 600 E COUNTY LINE RD		37 City LAKEWOOD		State NJ		126a	
107	38 Make FORD		39 Model TRA		40 Color WHI		126b	
108	41 Year 2016		42 Plate No. XEHP12		43 State NJ		126c	
03	44 VIN 1FTYR2XM7GKA79145		45 Expires 03 22		46 Vehicle Removed To		127a	
01	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.		127b	
04	50 Carrier No. ☐ USDOT ☐ 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		127c	
117	53 Veh # 2		54 Policy No. 4514-66-99-12		55 NJ Ins. Code 148		127d	
04	56 Driver's First Name LEAH		Initial -		Last Name STEGER		127e	
04	57 Number & Street 83 CANARY DRIVE		58 City LAKEWOOD		State NJ		128	
04	59 Sex F		60 Eyes 2		DL Class D		129	
04	61 State NJ		62 Driver's License Number S81854500058842		63 DOB mm dd yyyy 08/07/1984		130	
04	64 Expires mm yy 08 25		65 Owner's First Name TZVI		Initial A		131	
04	66 Number & Street 83 CANARY DRIVE		67 City LAKEWOOD		State NJ		132	
04	68 Make TOYT		69 Model SIE		70 Color 3		133	
04	71 Year 2011		72 Plate No. Z52EXM		73 State NJ		134	
04	74 VIN 5TDKK3DC6BS163020		75 Expires 12 22		76 Vehicle Removed To		135	
04	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.		136	
04	80 Carrier No. ☐ USDOT ☐ 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		137	
04	83		84		85		138	
04	86		87		88		139	
04	89		90		91		140	
04	92		93		94		141	
04	95		96		97		142	
04	98		99		100		143	
04	101		102		103		144	
04	104		105		106		145	
04	107		108		109		146	
04	110		111		112		147	
04	113		114		115		148	
04	116		117		118		149	
04	119		120		121		150	
04	122		123		124		151	
04	125		126		127		152	
04	128		129		130		153	
04	131		132		133		154	
04	134		135		136		155	
04	137		138		139		156	
04	140		141		142		157	
04	143		144		145		158	
04	146		147		148			

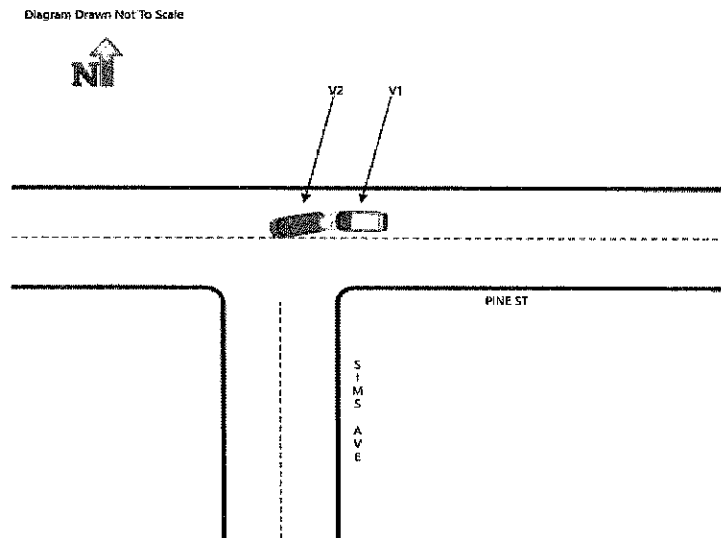
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-012549**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
L														
E														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 said he was traveling West on Pine St behind V2. He said V2 put on their blinker to make a left turn onto Sims Ave. (he observed the blinker come on last minute). He tried to stop but could not in time and struck the rear of V2.

Driver of V2 said she was traveling West on Pine St. She put her blinker on to make a left turn onto Sims Ave. As she was slowing down to make the left her vehicle was struck from behind by V1.

After speaking with both drivers it was determined that V1 was at fault for the crash.

While on scene V1's vehicle somehow came out of park and rolled into V2, but there was no new damage.

146 Officer's Signature

CARABALLO A

147 Badge #

298

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

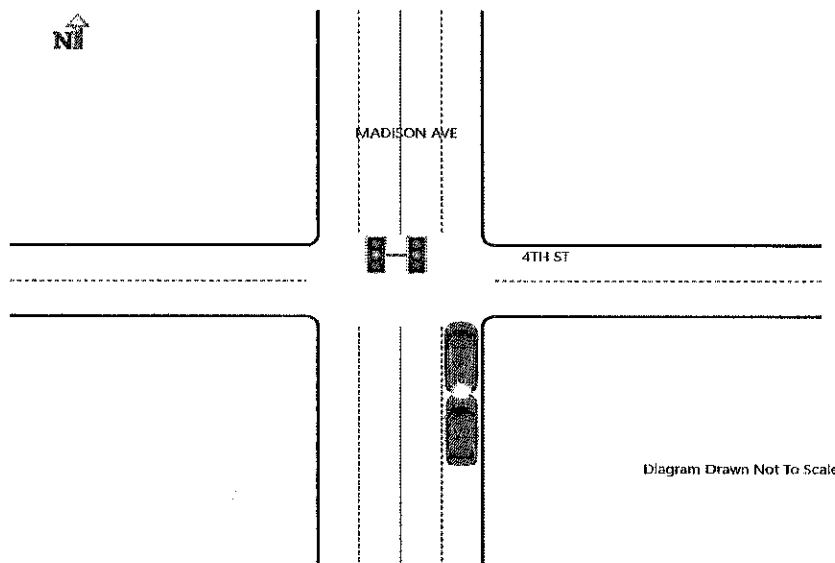
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012556**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V1 STATED HE WAS TRAVELING NORTH ON MADISON AVE. AS HE APPROACHED THE INTERSECTION OF FOURTH ST HE OBSERVED A RED LIGHT AND BEGAN TO BRAKE, WHEN V2 STRUCK HIS VEHICLE FROM BEHIND.

DRIVER OF V2 STATED HE WAS TRAVELING NORTH ON MADISON. HE ADDED, HE DID NOT REALIZE THE LIGHT WAS RED AND STRUCK V1 FROM BEHIND.

IN CONCLUSION I FIND THE DRIVER OF V2 TO BE AT FAULT.

146 Officer's Signature

RENNA V

147 Badge #

341

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

[illegible]

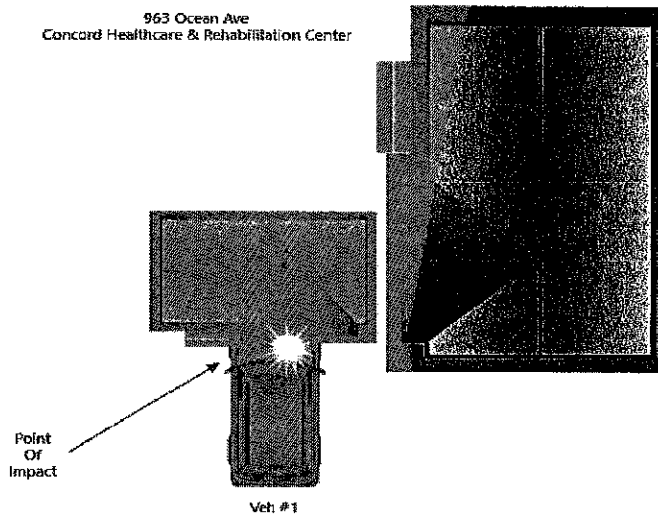
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-012569

(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
A														
L														
L														
E														
F														
I														
N														
G														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver # 1 was attempting to drive under the awning to make a delivery to Concord Healthcare. The over hang has a nine foot clearance and the truck is just over nine feet. Minor damage to both the awning and the truck.

146 Officer's Signature

MERRILL D

147 Badge #

323

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number 22-012591		10 Crash Occurred On: OCEAN AVE		11 Speed Limit 40
01	2 Police Dept of LAKEWOOD TOWNSHIP E01		12 Route No.		13 Milepost 50
01	3 Station/Preinct		14 1/2		15 1/2
02	4 Date of Crash mm dd yy 02/16/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1453
01	7 Municipality Code 1514		8 Total Killed --		9 Total Injured --
01	23 Veh # 1		24 Policy No. 939 253 615		25 NJ Ins. Code 054
04	26 Driver's First Name AARON		27 Number & Street 4 TAFT AVE		28 City LAKEWOOD
01	29 Sex M		30 Eyes 2		31 State NJ
01	32 Driver's License Number P66760006412842		33 DOB mm dd yyyy 12/25/1984		34 Expires mm yy 12 25
01	35 Owner's First Name AARON		36 Number & Street 4 TAFT AVE		37 City LAKEWOOD
04	38 Make TOYT		39 Model HIG		40 Color GRY
01	41 Year 2020		42 Plate No. H48MPD		43 State NJ
01	44 VIN 5TDGZRBH0LS025395		45 Expires 06 23		46 Vehicle Removed To ALLSTATE
01	47 Authority Owner		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.
02	50 Carrier No. USDOT 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
02	53 Veh # 2		54 Policy No. 939 655 499		55 NJ Ins. Code 054
01	56 Driver's First Name RIVKA		57 Number & Street 21 MELROSE CT		58 City LAKEWOOD
01	59 Sex F		60 Eyes 2		61 State NJ
01	62 Driver's License Number S31456580057942		63 DOB mm dd yyyy 07/25/1994		64 Expires mm yy 07 22
01	65 Owner's First Name MOSHE		66 Number & Street 2 GEFEN DRIVE		67 City LAKEWOOD
04	68 Make TOYT		69 Model SIE		70 Color 4
01	71 Year 2006		72 Plate No. R26JLG		73 State NJ
01	74 VIN 5TDZA23C76S502080		75 Expires 11 22		76 Vehicle Removed To ALLSTATE
01	77 Authority Owner		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.
02	80 Carrier No. USDOT 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
02	83 Damage To Other Property Yes (If Yes, describe) No		84 136 Charge		85 137 Summons. No.
02	86 140 Charge		87 141 Summons. No.		88 142 Charge
02	89 143 Summons. No.		90 144 Charge		91 145 Summons. No.
04	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		96
A	V1 01 01 05 37 M - - - 11 04 - -		AARON D PORTNOY 4 TAFT AVE LAKEWOOD NJ 08701		-
B	V2 01 01 05 27 F - - - 11 04 - -		RIVKA SHAIN 21 MELROSE CT LAKEWOOD NJ 08701		-
C					
D					

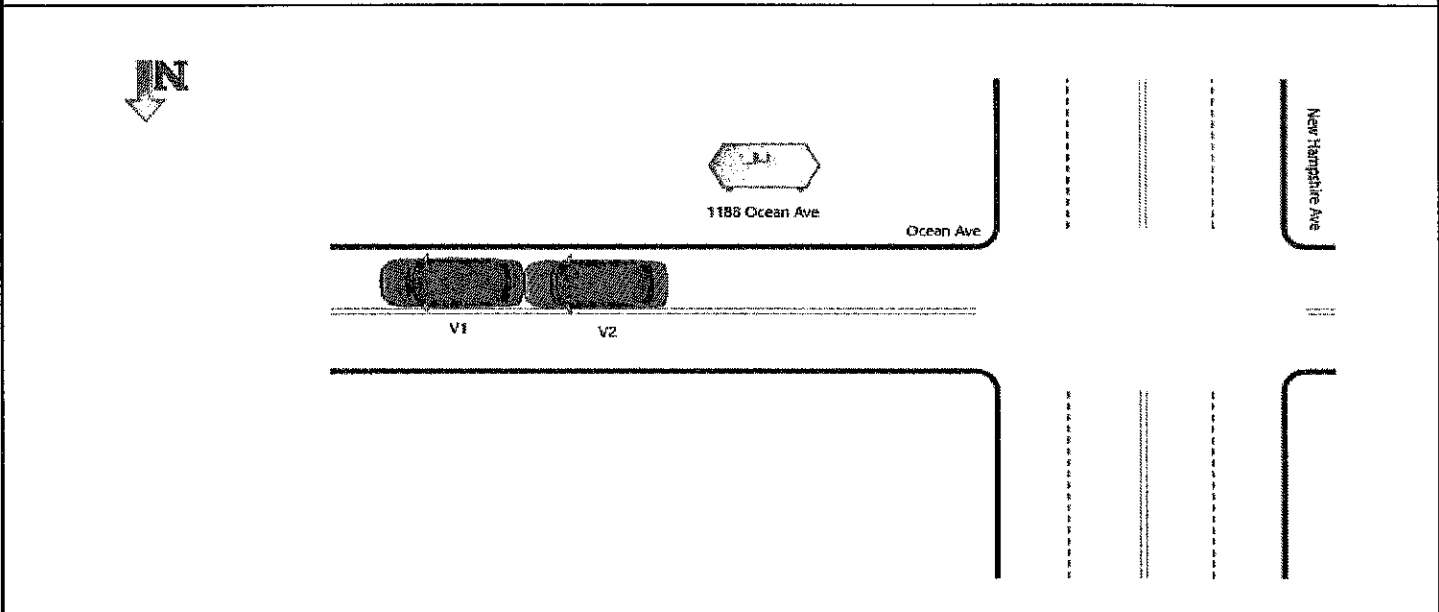
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012591**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL IN VOL VEI D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling East on Ocean Ave. V2 was traveling East on Ocean Ave, behind V1. The Driver of V1 stated that he stopped due to a vehicle exiting the parking lot of 1188 Ocean Ave and his vehicle was struck in the rear by V2. The Driver of V2 stated that the Driver of V1 stopped, then went and then stopped again and she could not stop in time. The traffic was stop and go. V1 had damage to the rear of the vehicle. V2 had heavy front damage and was towed from the scene by Allstate. No injuries. END OF REPORT.

146 Officer's Signature

JONES S

147 Badge #

277

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending
 ☒ Complete

05	1 Case Number 22-012632		10 Crash Occurred On: MAIN ST		11 Speed Limit 35		0088		118a		
01	2 Police Dept of LAKEWOOD TOWNSHIP		Code 01		12 Route No.		Suffix		13 Milepost		118b
05	3 Station/Preinct		☒ At Intersection With		Road Name LEXINGTON AVE		18 Speed Limit 25				118c
02	4 Date of Crash mm dd yy 02/16/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1717		7 Municipality Code 1514		8 Total Killed --		119a
01	9 Total Injured --		21 Latitude 40.09021		22 Longitude -74.21179		19 Ramp		20 Route/Name		119b
04	23 Veh # 1		24 Policy No. 4500176146		25 NJ Ins. Code 140		53 Veh # 2		54 Policy No. 944780818		119c
01	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run								119d
02	26 Driver's First Name STEVEN		Initial J		Last Name GOLDWASSER		29 Sex M		55 Driver's First Name SHOSHANA		119e
01	27 Number & Street 29 LONE STAR LANE		State NJ		Zip 07726		57 Number & Street 316 AVENUE I		State NY		119f
01	28 City MANALAPAN		State NJ		Zip 07726		58 City BROOKLYN		State NY		119g
2	30 Eyes 5		DL Class D		Restrictions -		Endorsements -		31 State NJ		119h
03	32 Driver's License Number G62347237104525		33 DOB mm dd yyyy 04/23/1952		34 Expires mm yy 04/25		62 Driver's License Number 328800026		63 DOB mm dd yyyy 11/20/2000		119i
06	35 Owner's First Name DEBORAH		Initial S		Last Name GOLDWASSER		59 Sex -		64 Expires mm yy 11/27		119j
07	36 Number & Street 29 LONE STAR LANE		State NJ		Zip 07726		66 Number & Street 20 REGAL CT		State NJ		119k
04	37 City MANALAPAN		State NJ		Zip 07726		67 City LAKEWOOD		State NJ		119l
04	38 Make HOND		39 Model CRV		40 Color BLK		41 Year 2009		42 Plate No. ZEJ98L		119m
01	44 VIN 5J6RE48329L067929		45 Expires 09/22		74 VIN 2T2HZMDA8LC236095		75 Expires 02/23				119n
01	46 Vehicle Removed To		76 Vehicle Removed To								119o
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded								119p
01	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded								119q
01	47 Authority ☐ Owner ☒ Driver ☐ Police		77 Authority ☐ Owner ☒ Driver ☐ Police								119r
04	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				119s
01	Type: ☐ Breath ☐ Blood ☐ Urine		Hazard Class		Type: ☐ Breath ☐ Blood ☐ Urine		Hazard Class				119t
04	Results: 0. - % ☐ Pending		Placard No.		Results: 0. - % ☐ Pending		Placard No.				119u
03	50 Carrier No. ☐ USDOT ☐ MC/MX		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		80 Carrier No. ☐ USDOT ☐ MC/MX		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				119v
03	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity								119w
03	Number & Street		Number & Street								119x
03	City		City								119y
03	State		State								119z
03	Zip		Zip								120a
03	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No										120b
03	Oper. 136 Charge		137 Summons. No.		Oper. 138 Charge		139 Summons. No.				120c
03	Oper. 140 Charge		141 Summons. No.		Oper. 142 Charge		143 Summons. No.				120d
03	83		84		85		86		87		120e
03	88		89		90		91		92		120f
03	93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death				120g
03	1		01		01		05		69		120h
03	M		-		-		-		11		120i
03	2		01		01		0				

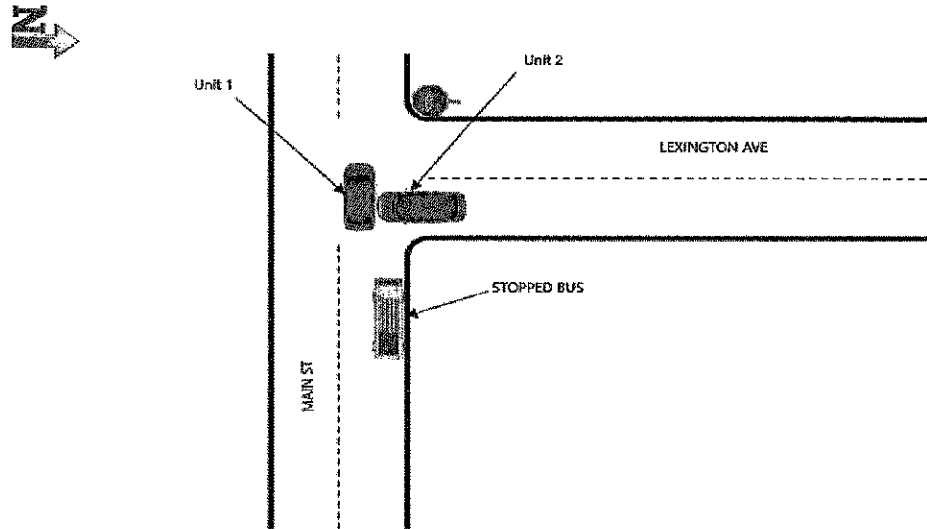
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012632**

(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
A														
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E														
I														
N														
V														
O														
L														
H														
I														
V														
E														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS TRAVELING WEST ON MAIN ST. AND WAS STRUCK BY VEHICLE #2 AS HE WAS PASSING THE INTERSECTION OF LEXINGTON AVE.

DRIVER #2 STATED THAT SHE WAS TRAVELING SOUTH ON LEXINGTON AVE AND STOPPED AT THE STOP SIGN WAITING TO MAKE A LEFT TURN ONTO MAIN ST. SHE SAID THAT A MINI BUS PULLED UP AND STOPPED ON MAIN ST. PRIOR TO LEXINGTON AVE WAVED FOR HER TO MAKE THE LEFT TURN. SHE SAID THAT VEHICLE #1 WENT ZOOMING AROUND THE MINI BUS AND STRUCK HER VEHICLE.

DRIVER #2'S FATHER WAS ON SCENE AND RETRIEVED VIDEO OF THE CRASH FROM A SECURITY CAMERA(UNKNOWN ADDRESS). HE SHOWED ME THE THE VIDEO. THE VIDEO SHOWS AN OCEAN RIDE BUS STOP APPROX. 20 TO 25 FEET EAST OF LEXINGTON AVE. WITH THE TIRES CLOSE TO THE CURB. THE BUS MAY HAVE BEEN DROPPING OFF OR PICKING UP A RIDER. ONE OR TWO CAR PASS THE BUS ON THE LEFT AND THEN VEHICLE #1 PASSES THE BUS. AS SOON AS VEHICLE #1 PASSES THE BUS VEHICLE #2 ENTERS THE INTERSECTION CAUSING THE ACCIDENT. THE BUS DID OBSTRUCT THE VIEW OF DRIVER #2 PRIOR TO THE CRASH. THE BUS LEFT THE AREA STORTLY AFTER THE CRASH AND WAS ONLY STOPPED FOR ABOUT A MINUTE.

A COPY OF THE CRASH WAS NEVER SENT TO MY WORK EMAIL SO IT COULD NOT BE ATTACHED.

146 Officer's Signature

WARD S

147 Badge #

302

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

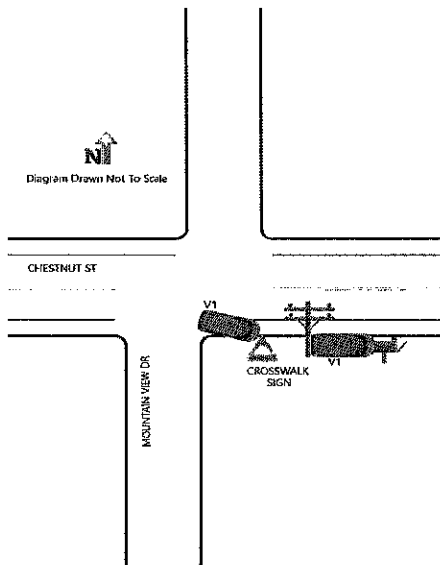
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-012649**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling east on Chestnut St. He observed a vehicle traveling west, partially in the east lane. V1 swerved right to avoid a collision. V1 struck the curb, a crosswalk sign, utility pole, and came to rest against the mailbox of 88 Chestnut St.

The vehicle in question was described to be an older model blue sedan that turned left onto Mountain View Dr. The area was checked but no results were found.

Based on my investigation, the crash was caused by V1 swerving and striking the curb, crosswalk sign, utility pole, and mailbox. The involvement of another vehicle was unable to be proven other than the driver of V1's statement at the time of the report.

Insurance Information V1
Economical Mutual Insurance Company
Policy Number 20379269

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

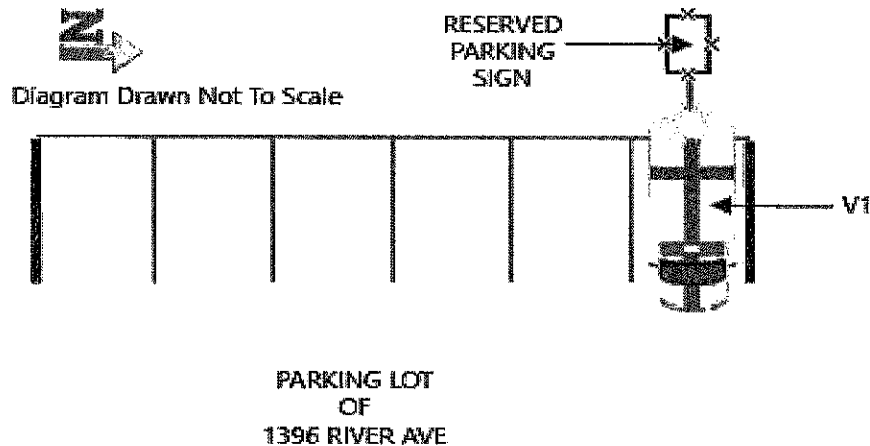
[illegible]

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-012390

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Phys Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L U N T A R Y	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was in the parking lot of 1396 River Ave backing into a parking space. As V1 backed up, the driver did not notice a "Reserved Parking" sign which was posted on a traffic sign standard at the end of the parking space. V1 continued to back into the spot until V1 struck the sign, bending the standard.

V1 is self insured by the Township of Lakewood through PERMA Inc.- 9 Campus Dr, suite 216 Parsippany, NJ 07054.

146 Officer's Signature

MACERINO J

147 Badge #

326

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-010955**

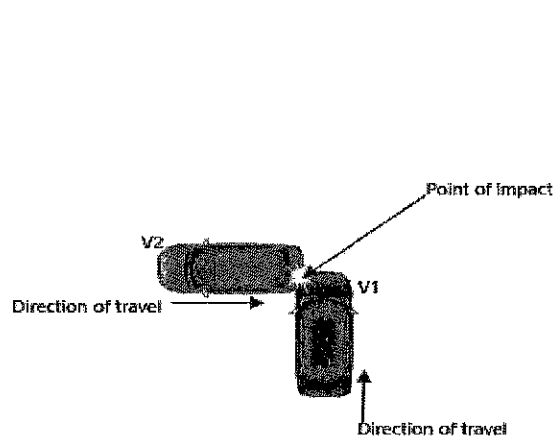
(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

Parking lot of 231 3rd St

Diagram Drawn Not To Scale



145 Crash Description/Narrative

Vehicle 2 struck vehicle 1 while backing out of the parking lot at 231 3rd St.

I spoke with the driver of vehicle 1 and multiple witnesses of the incident. Driver of Vehicle 1 stated that while he was traveling north in the parking lot his vehicle was struck on the driver side front bumper by vehicle 2 who was backing out of the parking lot at a high speed of travel and left the scene. Driver 1 provided me with the vehicle's registration. He claims that she had to leave the scene to chase another vehicle who allegedly hit her and would come back to the scene. I stood by for her return and she never came back.

Witnesses stated they observed driver of vehicle 2 hit vehicle 1 while backing out of the parking lot at a high rate of speed and then sped off and left the scene. According to a two witnesses who want to remain anonymous they identified the driver as Denise, who lives at the High-rise and drives taxis. Through investigation I was able to locate a party by the name of Denise Davis who lives at 220 E Fourth St (High-rise) and according to staff drives taxis. Denise is attached to this call as suspect. Ptl Yahr #273 attempted to locate Denise at her residence, but was unsuccessful.

146 Officer's Signature

CARRINGTON K

147 Badge #

829

148 Reviewer

EM

Badge #

307

149 Case Status

☐ Pending ☐ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
96	1 Case Number		10 Crash Occurred On: OAK ST		11 Speed Limit 40
97	22-011998				
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		Code		
98	3 Station/Precinct		14 400 15		16
01	4 Date of Crash 02/14/22		5 Day Of Week MONDAY		6 Time (use 2400 hrs) 1441
99	7 Municipality Code 1514		8 Total Killed		9 Total Injured
07	23 Veh # 1		24 Policy No. 6041-16-66-76		25 NJ Ins. Code 100
100a	26 Driver's First Name CHRISTIAN		27 Number & Street 200 HANNIBAL STREET		28 City TOMS RIVER
01	29 Sex M		30 Eyes 2		31 State NJ
100b	32 Driver's License Number R29071240009852		33 DOB 09/30/1985		34 Expires 09/25
04	35 Owner's First Name KELLY		36 Number & Street 200 HANNIBAL ST		37 City TOMS RIVER
101	38 Make MERC		39 Model SGS		40 Color BLU
02	41 Year 2000		42 Plate No. Y84NPC		43 State NJ
102	44 VIN 1MEFM50U7YA642850		45 Expires 04/22		46 Vehicle Removed To TOTAL CAR CARE
01	47 Authority Owner		48 Alcohol/Drug Test Given: No		49 Hazardous Material None
103	50 Carrier No. USDOT		51 GVWR/GCWR Weight <= 10,000 lbs		52 Motor Carrier or Government Entity
07	53 Veh # 2		54 Policy No. 07550456-1		55 NJ Ins. Code
104	56 Driver's First Name JASWINDER SINGH		57 Number & Street 14459 W EL MAR AVENUE		58 City KERMAN
01	59 Sex M		60 Eyes -		61 State CA
105	62 Driver's License Number C3665022		63 DOB 01/15/1963		64 Expires 01/24
07	65 Owner's First Name RPR TRUCKING		66 Number & Street 14459 W EL MAR AVENUE		67 City KERMAN
106	68 Make FREI		69 Model TRUCK		70 Color BLU
02	71 Year 2015		72 Plate No. XP60293		73 State CA
107	74 VIN 3AKJGLDR9HSHU4121		75 Expires 05/22		76 Vehicle Removed To
01	77 Authority Owner		78 Alcohol/Drug Test Given: No		79 Hazardous Material None
108	80 Carrier No. 2189438		81 GVWR/GCWR Weight <= 10,000 lbs		82 Motor Carrier or Government Entity RPR TRUCKING
02	83 Damage To Other Property No		84 Charge		85 Summons No.
109	86 Charge		87 Summons No.		88 Charge
01	89 Summons No.		90 Charge		91 Summons No.
110	92 Charge		93 Summons No.		94 Charge
07	95 Summons No.		96 Charge		97 Summons No.
111	98 Charge		99 Summons No.		100 Charge
01	101 Charge		102 Summons No.		103 Charge
112	104 Charge		105 Summons No.		106 Charge
02	107 Charge		108 Summons No.		109 Charge
113	110 Charge		111 Summons No.		112 Charge
07	113 Charge		114 Summons No.		115 Charge
114	116 Charge		117 Summons No.		118 Charge
01	119 Charge		120 Summons No.		121 Charge
115	122 Charge		123 Summons No.		124 Charge
02	125 Charge		126 Summons No.		127 Charge
116	128 Charge		129 Summons No.		130 Charge
07	131 Charge		132 Summons No.		133 Charge
117	134 Charge		135 Summons No.		136 Charge
02	137 Charge		138 Summons No.		139 Charge
118	140 Charge		141 Summons No.		142 Charge
01	143 Charge		144 Summons No.		145 Charge
119	146 Charge		147 Summons No.		148 Charge
07	149 Charge		150 Summons No.		151 Charge
120	152 Charge		153 Summons No.		154 Charge
02	155 Charge		156 Summons No.		157 Charge
121	158 Charge		159 Summons No.		160 Charge
07	161 Charge		162 Summons No.		163 Charge
122	164 Charge		165 Summons No.		166 Charge
01	167 Charge		168 Summons No.		169 Charge
123	170 Charge		171 Summons No.		172 Charge
07	173 Charge		174 Summons No.		175 Charge
124	176 Charge		177 Summons No.		178 Charge
02	179 Charge		180 Summons No.		181 Charge
125	182 Charge		183 Summons No.		184 Charge
01	185 Charge		186 Summons No.		187 Charge
126	188 Charge		189 Summons No.		190 Charge
07	191 Charge		192 Summons No.		193 Charge
127	194 Charge		195 Summons No.		196 Charge
02	197 Charge		198 Summons No.		199 Charge
128	200 Charge		201 Summons No.		202 Charge
01	203 Charge		204 Summons No.		205 Charge
129	206 Charge		207 Summons No.		208 Charge
07	209 Charge		210 Summons No.		211 Charge
130	212 Charge		213 Summons No.		214 Charge
02	215 Charge		216 Summons No.		217 Charge
131	218 Charge		219 Summons No.		220 Charge
07	221 Charge		222 Summons No.		223 Charge
132	224 Charge		225 Summons No.		226 Charge
01	227 Charge		228 Summons No.		229 Charge
133	230 Charge		231 Summons No.		232 Charge
07	233 Charge		234 Summons No.		235 Charge
134	236 Charge		237 Summons No.		238 Charge
02	239 Charge		240 Summons No.		241 Charge
135	242 Charge		243 Summons No.</		

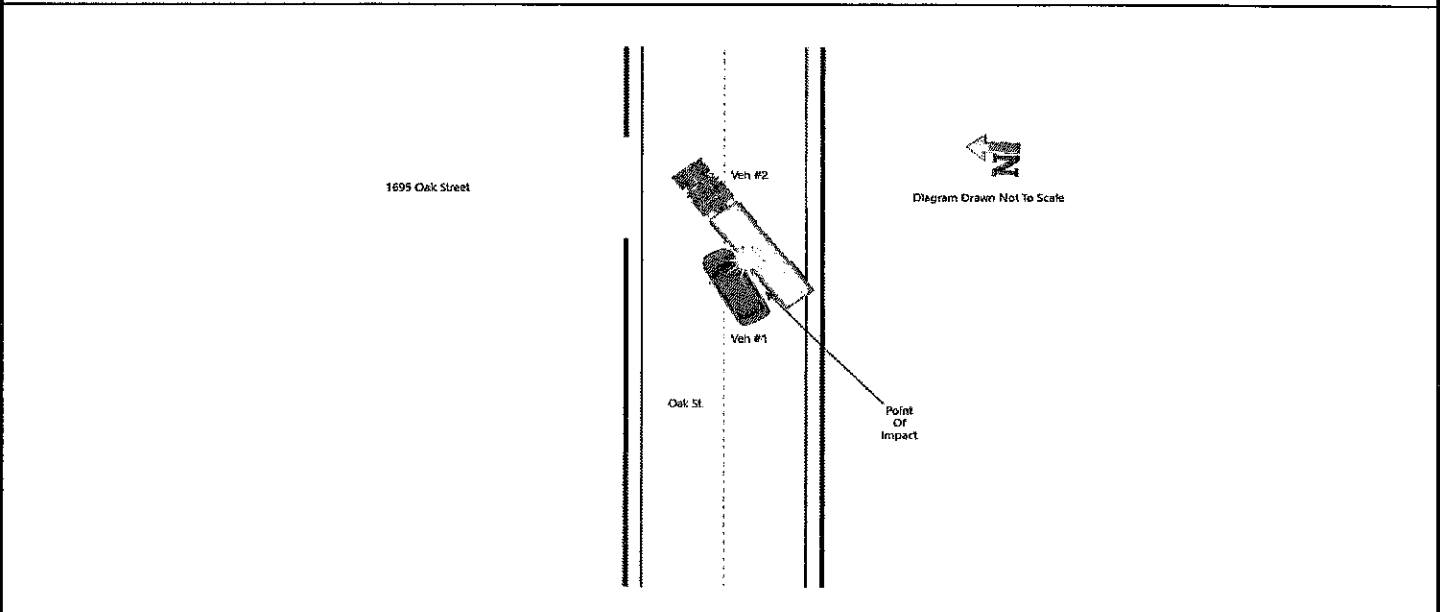
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-011998**

(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
A														
L														
E														
I														
N														
V														
O														
L														
H														
I														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #2's insurance is California Fleet Auto Insurance, Policy # 07550456-1 company # 11770 phone # 559-277-5580

Driver #1 said that he was traveling East on Oak Street behind vehicle #2. He said that driver #2 had their hazards on from Towbin Ave. He also said that the truck was more towards the shoulder of the road so he attempted to pass him on the left, and that is when driver #2 made a left turn in to 1695 Oak St.

Driver #2 of vehicle #2 were making a delivery to 1695 Oak St. He said that he had his left turn signal on and was turning in to 1695 Oak St when his truck collided with vehicle #1.

146 Officer's Signature

MERRILL D

147 Badge #

323

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		22-012890		10 Crash Occurred On: CEDARBRIDGE AVE		11 Speed Limit 45
01	2 Police Dept of		LAKEWOOD TOWNSHIP F01		12 Route No. 0528		13 Milepost 35
01	3 Station/Precinct				14 At Intersection With		15 Road Name MARTIN LUTHER KING DRIVE
05	4 Date of Crash		02/17/22		16 Feet		17 Cross Road Name
01	5 Day of Week		THURSDAY		18 To		19 From
01	6 Time (use 2400 hrs)		1615		20 Route/Name		21 Latitude 40.086260
01	7 Municipality Code		1514		22 Longitude		-74.210360
01	8 Total Killed		--		23 Veh #		24 Policy No.
01	9 Total Injured		--		25 NJ Ins. Code		26 Driver's First Name
01	10 Parked				27 Number & Street		28 City
01	11 Ped				29 Sex		30 Eyes
01	12 Pedalcyclist				31 State		32 Driver's License Number
01	13 Resp To Emergency				33 DOB		34 Expires
01	14 Hit & Run				35 Owner's First Name		36 Number & Street
01	15 Initial		LANKRY		37 City		38 Make
01	16 Last Name		ESTHER		39 Model		40 Color
01	17 State		NJ		41 Year		42 Plate No.
01	18 Zip		08701		43 State		44 VIN
01	19 State		NJ		45 Expires		46 Vehicle Removed To
01	20 Zip		08701		47 Authority		48 Alcohol/Drug Test
01	21 State		NJ		49 Hazardous Material		50 Carrier No.
01	22 Zip		08701		51 GVWR/GCWR		52 Motor Carrier or Government Entity
01	23 State		NJ		52 Motor Carrier or Government Entity		53 GVWR/GCWR
01	24 Zip		08701		54 Motor Carrier or Government Entity		55 GVWR/GCWR
01	25 State		NJ		56 Motor Carrier or Government Entity		57 GVWR/GCWR
01	26 Zip		08701		58 Motor Carrier or Government Entity		59 GVWR/GCWR
01	27 State		NJ		60 Motor Carrier or Government Entity		61 GVWR/GCWR
01	28 Zip		08701		62 Motor Carrier or Government Entity		63 GVWR/GCWR
01	29 State		NJ		64 Motor Carrier or Government Entity		65 GVWR/GCWR
01	30 Zip		08701		66 Motor Carrier or Government Entity		67 GVWR/GCWR
01	31 State		NJ		68 Motor Carrier or Government Entity		69 GVWR/GCWR
01	32 Zip		08701		70 Motor Carrier or Government Entity		71 GVWR/GCWR
01	33 State		NJ		72 Motor Carrier or Government Entity		73 GVWR/GCWR
01	34 Zip		08701		74 Motor Carrier or Government Entity		75 GVWR/GCWR
01	35 State		NJ		76 Motor Carrier or Government Entity		77 GVWR/GCWR
01	36 Zip		08701		78 Motor Carrier or Government Entity		79 GVWR/GCWR
01	37 State		NJ		80 Motor Carrier or Government Entity		81 GVWR/GCWR
01	38 Zip		08701		82 Motor Carrier or Government Entity		83 GVWR/GCWR
01	39 State		NJ		84 Motor Carrier or Government Entity		85 GVWR/GCWR
01	40 Zip		08701		86 Motor Carrier or Government Entity		87 GVWR/GCWR
01	41 State		NJ		88 Motor Carrier or Government Entity		89 GVWR/GCWR
01	42 Zip		08701		90 Motor Carrier or Government Entity		91 GVWR/GCWR
01	43 State		NJ		92 Motor Carrier or Government Entity		93 GVWR/GCWR
01	44 Zip		08701		94 Motor Carrier or Government Entity		95 GVWR/GCWR
01	45 State		NJ		96 Motor Carrier or Government Entity		97 GVWR/GCWR
01	46 Zip		08701		98 Motor Carrier or Government Entity		99 GVWR/GCWR
01	47 State		NJ		100 Motor Carrier or Government Entity		101 GVWR/GCWR
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01	49 State		NJ		104 Motor Carrier or Government Entity		105 GVWR/GCWR
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01	52 Zip		08701		110 Motor Carrier or Government Entity		111 GVWR/GCWR
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01	66 Zip		08701		138 Motor Carrier or Government Entity		139 GVWR/GCWR
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01	70 Zip		08701		146 Motor Carrier or Government Entity		147 GVWR/GCWR
01	71 State		NJ		148 Motor Carrier or Government Entity		149 GVWR/GCWR
01	72 Zip		08701		150 Motor Carrier or Government Entity		151 GVWR/GCWR
01	73 State		NJ		152 Motor Carrier or Government Entity		153 GVWR/GCWR
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01	79 State		NJ		164 Motor Carrier or Government Entity		165 GVWR/GCWR
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01	84 Zip		08701		174 Motor Carrier or Government Entity		175 GVWR/GCWR
01	85 State		NJ		176 Motor Carrier or Government Entity		177 GVWR/GCWR
01	86 Zip		08701		178 Motor Carrier or Government Entity		179 GVWR/GCWR
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01	88 Zip		08701		182 Motor Carrier or Government Entity		183 GVWR/GCWR
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01	129 State		NJ		264 Motor Carrier or Government Entity		265 GVWR/GCWR
01	130 Zip		08701		266 Motor Carrier or Government Entity		267 GVWR/GCWR
01	131 State		NJ		268 Motor Carrier or Government Entity		269 GVWR/GCWR
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01	195 State		NJ		347 Motor Carrier or Government Entity		348 GVWR/GCWR
01	196 Zip		08701		348 Motor Carrier or Government Entity		349 GVWR/GCWR
01	197 State		NJ		349 Motor Carrier or Government Entity		350 GVWR/GCWR
01	198 Zip		08701		350 Motor Carrier or Government Entity		351 GVWR/GCWR
01	199 State		NJ		351 Motor Carrier or Government Entity		352 GVWR/GCWR

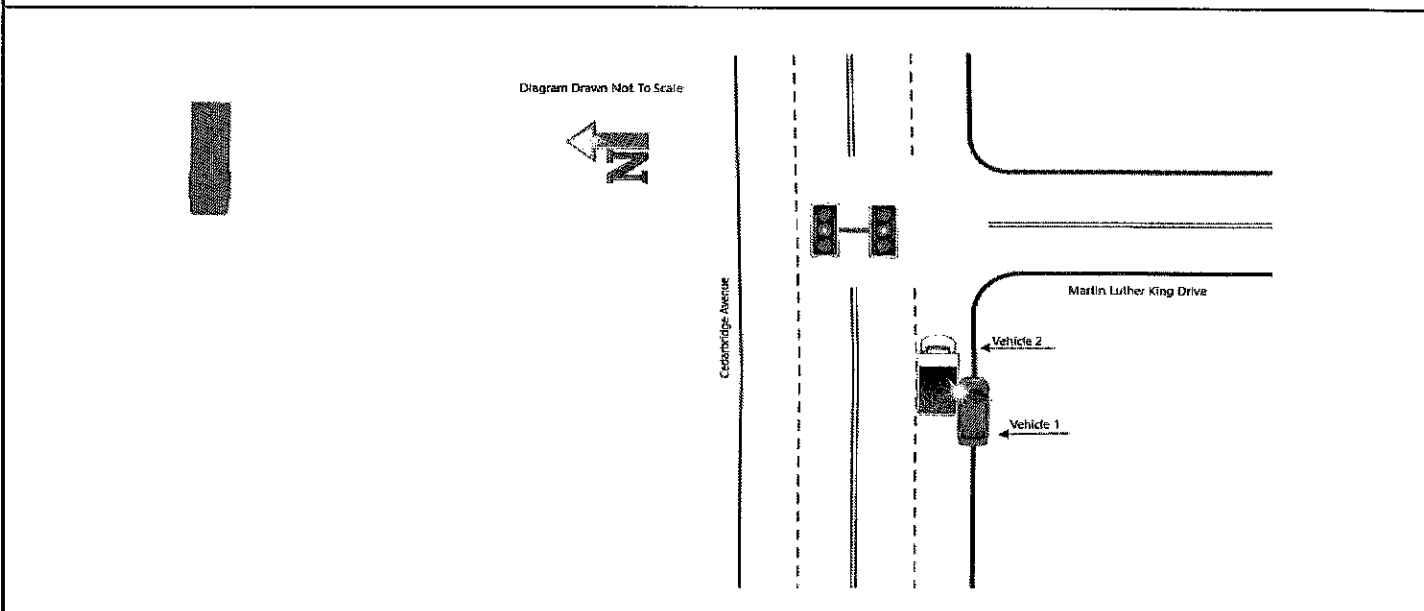
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-012890**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	V2	01	01	05	61	M	-	-	-	11	04	-	-	JAVIER C FLORES-RIVERA 5 KIMBALL RD LAKEWOOD NJ 08701
	V2	03	01	05	35	M	-	-	-	11	04	-	-	LESZLO DEMKU 620 PARKSIDE AVE TOMSRIVER NJ 08753

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 stated she was on Cedarbridge Avenue approaching Martin Luther King Drive as she attempted to pass Vehicle 2 on Vehicle 2's passenger side to make a right hand turn on to MLK Dr. The driver of Vehicle 1 stated she did not see a right hand turn signal, that is why she attempted to pass. As she attempted to pass on the right hand side, Vehicle 1 struck Vehicle 2. Vehicle 1 sustained damage to the drivers side front wheel well area.

The driver of Vehicle 2 stated he was waiting to make a right hand turn at the traffic signal of Cedarbridge Avenue and MLK Drive when he felt Vehicle 2 strike the passenger's side step ladder to the box portion of Vehicle 2. Vehicle 2 sustained minor damage to this portion of the vehicle.

No injuries were reported at the scene.

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

146 Officer's Signature

RUSK J

147 Badge #

388

148 Reviewer

KCM

Badge #

335

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number		11 Speed Limit		118a
97	22-012893		45		25
01	2 Police Dept of		0031		118b
98	LAKEWOOD TOWNSHIP		12 Route No.		-
01	3 Station/Precinct		13 Milepost		119a
99			25		02
05	4 Date of Crash		18 Speed Limit		119b
100a	mm dd yy		25		04
01	02/17/22		-74.21973		120a
100b	5 Day Of Week				01
04	THURSDAY				120b
101	6 Time (use 2400 hrs)				121a
02	1626				01
102	7 Municipality Code				121b
01	1514				01
103	8 Total Killed				122
04	--				01
104	9 Total Injured				123
03	--				02
105	23 Veh #				124
04	1				04
106	24 Policy No.				125
02	C2958759				08
107	25 NJ Ins. Code				126a
01	426				26
108	26 Driver's First Name				126b
01	JAMIL				-
109	27 Number & Street				-
01	33 BEACON DR				-
110	28 City				-
02	BARNEGAT				-
111	29 Sex				-
01	M				-
112	30 Eyes				-
03	2				-
113	31 State				-
04	NJ				-
114	32 Driver's License Number				-
05	L22033847110992				-
115	33 DOB				-
01	mm dd yyyy				-
116	34 Expires				-
02	mm yy				-
117	35 Owner's First Name				-
01	-				-
118	36 Number & Street				-
03	315 MONMOUTH AVE STE 206				-
119	37 City				-
04	LAKEWOOD				-
120	38 Make				-
05	FORD				-
121	39 Model				-
01	F55				-
122	40 Color				-
02	WHI				-
123	41 Year				-
01	2018				-
124	42 Plate No.				-
03	XJPM15				-
125	43 State				-
04	NJ				-
126	44 VIN				-
05	1FD0W5HT2JEB13247				-
127	45 Expires				-
01	mm yy				-
128	46 Vehicle Removed To				-
02	-				-
129	47 Authority				-
03	-				-
130	48 Alcohol/Drug Test				-
04	Given: ☒ No ☐ Yes ☐ Refused				-
131	Type: ☐ Breath ☐ Blood ☐ Urine				-
132	Results: 0, - % ☐ Pending				-
133	49 Hazardous Material				-
134	☒ None ☐ On Board ☐ Spill				-
135	50 Carrier No.				-
136	☐ USDOT ☒ None				-
137	51 GVWR/GCWR				-
138	☐ Weight <= 10,000 lbs				-
139	☐ Weight 10,001-26,000 lbs				-
140	☐ Weight >= 26,001 lbs				-
141	52 Motor Carrier or Government Entity				-
142	BEDROCK STEELLC				-
143	53 Veh #				-
144	2				-
145	54 Policy No.				-
146	4616538684				-
147	55 NJ Ins. Code				-
148	148				-
149	56 Driver's First Name				-
150	YOCHEVED				-
151	57 Number & Street				-
152	53 E 8TH ST				-
153	58 City				-
154	LAKEWOOD				-
155	59 Sex				-
156	F				-
157	60 Eyes				-
158	6				-
159	61 State				-
160	NJ				-
161	62 Driver's License Number				-
162	Y06337900051916				-
163	63 DOB				-
164	mm dd yyyy				-
165					

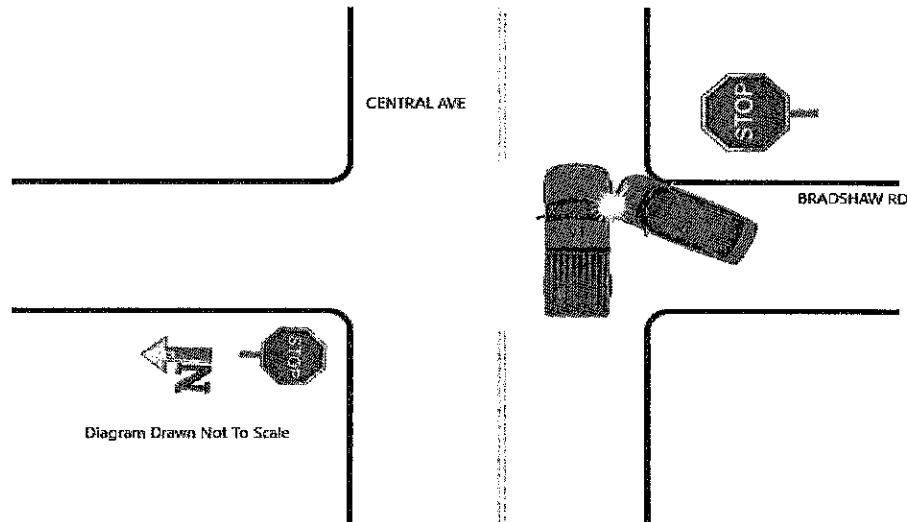
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012893**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was Eastbound on Central Ave and was in stop and go traffic. He stated as he was going forward approaching the intersection of Bradshaw RD, vehicle 2 crashed into the side of his vehicle. He stated vehicle 2 did not stop at the stop sign.

Driver of vehicle 2 stated she was Northbound on Bradshaw RD and was stopped at the stop sign located at the intersection of Central Ave. She stated as she was stopped, vehicle 1 was going Eastbound on Central Ave and was also stopped. She stated since vehicle 1 was stopped she thought he was letting her go but when she turned vehicle 1 crashed into her vehicle.

In my investigation I find vehicle 2 at fault for this crash for driver inattention and failure to yield to vehicle as vehicle 2 has the stop sign and needs to make sure it is safe before attempting to turn.

146 Officer's Signature

SORIANO J

147 Badge #

352

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

05	1 Case Number 22-012938		10 Crash Occurred On: RIVER AVE		11 Speed Limit 45		0009		12 Route No.		13 Milepost		18 Speed Limit 40		04										
97	2 Police Dept of		Code		Road Name		Dir		17 Cross Road Name		19 Ramp		20 Route/Name		02										
98	LAKEWOOD TOWNSHIP		01		☒ At Intersection With		☐ N ☐ E of: CROSS ST		☐ S ☐ W		☐ NB ☐ EB		☐ SB ☐ WB		02										
07	3 Station/Precinct				☐ Feet		☐ Miles		14 15 16		17		18		25										
99	4 Date of Crash mm dd yy		5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude		199b								
02	02/17/22		THURSDAY		1951		1514		--		1		40.054310		-74.220650		120a								
100a	23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code						01								
04	1		3246024E2652		962		P1										120b								
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						☐ Parked ☐ Ped ☒ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										-								
02	26 Driver's First Name		Initial Last Name		29 Sex		56 Driver's First Name		Initial Last Name		59 Sex						021a								
102	RIVA		S ROSENBERG		- F		BENITO		- RAMOS		M						121b								
01	27 Number & Street						57 Number & Street										-								
103	468 HAVERSTRAW RD						108 JENNA CT										-								
01	28 City		State Zip				58 City		State Zip								-								
104	SUFFERN		NY 10901				LAKEWOOD		NJ 08701								-								
1	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		122						
	02		D		-		-		NY		-		-		-		-		03						
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								123						
14	580447173		06/15/1999		06 29		-		03/20/1983		-								01						
106	35 Owner's First Name		Initial Last Name				65 Owner's First Name		Initial Last Name										124						
-	☐ Same As Driver		LAURA M ROSENBERG		-		☐ Same As Driver		-		-		-		-		-		03						
107	36 Number & Street						66 Number & Street												125						
-	468 HAVERSTRAW RD						-												03						
108	37 City		State Zip				67 City		State Zip										126a						
01	SUFFERN		NY 10901				-		-		-		-		-		-		21						
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		126b
13	HYUN		INQ		WHI		2020		KMK3484		NY		-		-		-		-		-		-		-
01	44 VIN		45 Expires				74 VIN		75 Expires																126c
01	KMHCH5LD6LU226007		05 23				-		-		-		-		-		-		-		-		-		-
111	46 Vehicle Removed To						76 Vehicle Removed To																		126d
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded						☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded																		-
112	☐ Left At Scene ☐ Towed Impounded						☐ Left At Scene ☐ Towed Impounded																		126e
113	47 Authority		☐ Owner ☒ Driver ☐ Police				77 Authority																		

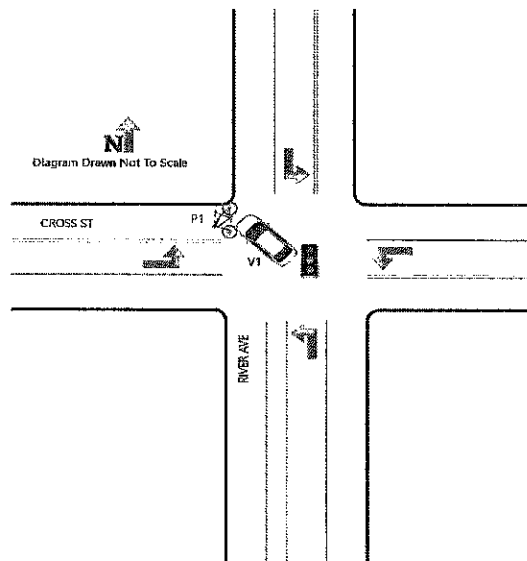
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-012938**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated she was traveling north on River Ave. She observed a green traffic signal and made a left turn onto Cross St. She did not observe P1 in the roadway. V1 and P1 collided.

The operator of P1 stated he was traveling south on River Ave. He crossed the intersection of Cross St when V1 turned left and collided with him.

Based on my investigation, V1 caused the crash by striking P1 while P1 was legally crossing the intersection.

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																																																																	
05	1 Case Number										10 Crash Occurred On: 4TH ST										11 Speed Limit		25		118a																																																																																																																																																											
97	22-012954																								02																																																																																																																																																											
01	2 Police Dept of										Code		Road Name										Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		118b																																																																																																																																																			
98	LAKEWOOD TOWNSHIP										F01		☐ At Intersection With										☒ Feet		☐ N ☒ E of:		MONMOUTH AVE				35		-																																																																																																																																																			
07	3 Station/Precinct												☐ 100										☐ 14		☐ 15		☐ 16		19 Ramp		17 Cross Road Name		☐ NB ☐ EB		25																																																																																																																																																	
99																																			25																																																																																																																																																	
07	4 Date of Crash				5 Day Of Week				6 Time (use 2400 hrs)				7 Municipality Code				8 Total Killed				9 Total Injured				21 Latitude				20 Route/Name				22 Longitude				119b																																																																																																																																															
100a	02/17/22				THURSDAY				2138				1514				---				1				40.09456				-74.21056				-																																																																																																																																																			
01	23 Veh #										24 Policy No.										25 NJ Ins. Code										53 Veh #										54 Policy No.										55 NJ Ins. Code										01																																																																																																																							
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02	26 Driver's First Name										Initial										Last Name										29 Sex										56 Driver's First Name										Initial										Last Name										59 Sex										121a																																																																																																			
102	YAAKOV										A										LONDINSKI										-										M										ROLANDO										-										FLORES JR										JR										M										01																																																																															
02	27 Number & Street																																								57 Number & Street																																																		121b																																																																																									
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105	6				D				-				-				NJ				2				D				-				-				NJ				04																																																																																																																																											
03	32 Driver's License Number										33 DOB										34 Expires										62 Driver's License Number										63 DOB										64 Expires										123																																																																																																																							
106	L63877896103756										03/19/1975										07										18										F55436650007952										07/28/1995										07										23										01																																																																																																			
03	35 Owner's First Name										Initial										Last Name										65 Owner's First Name										Initial										Last Name																																																																																																																																	
107	☒ Same As Driver										YAAKOV										A										LONDINSKI										☐ Same As Driver										-										MAPLE RX LLC,										-										124																																																																																																			
01	36 Number & Street										243 WOEHR STREET																				66 Number & Street										112 HILLSIDE BLVD																																								04																																																																																																			
108	37 City										State										Zip										67 City										State										Zip																																																																																																																																	
01	LAKEWOOD										NJ										08701										LAKEWOOD										NJ										08701																																																																																																																																	
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				126																																																																																																																																			
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110	44 VIN										45 Expires										74 VIN										75 Expires																																																																																																																																																					
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111	46 Vehicle Removed To										HESHY'S TOWING																				76 Vehicle Removed To										HESHY'S TOWING																																																																																																																																											
112	☐ Driven										☒ Towed Disabled										☐ Towed Disabled & Impounded										☐ Driven										☒ Towed Disabled										☐ Towed Disabled & Impounded																														126d																																																																																																			
01	☐ Left At Scene										☐ Towed Impounded																				☐ Left At Scene										☐ Towed Impounded																																																																																																																																											
113	47 Authority										☐ Owner										☐ Driver										☒ Police										77 Authority										☐ Owner										☐ Driver										☒ Police																														08																																																																															
114	48 Alcohol/Drug Test										Given: ☒ No ☐ Yes ☐ Refused										49 Hazardous Material										Given: ☒ No ☐ Yes ☐ Refused										79 Hazardous Material										☒ None ☐ On Board ☐ Spill																														26																																																																																																			
115	Type: ☐ Breath ☐ Blood ☐ Urine																				Type: ☐ Breath ☐ Blood ☐ Urine																				Type: ☐ Breath ☐ Blood ☐ Urine																																																																																																																																											
116	Results: 0, - %										☐ Pending										Hazard Class										Placard No.										Results: 0, - %										☐ Pending										Hazard Class										Placard No.																														127c																																																																															
04	50 Carrier No.										☐ USDOT										☒ None										51 GVWR/GCWR										☒ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										80 Carrier No.										☐ USDOT										☒ None										81 GVWR/GCWR										☒ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										127d																																							
117	☐ MC/MX																														☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs																																																																																																																																	
03	52 Motor Carrier or Government Entity										-										82 Motor Carrier or Government Entity										-																																																																																																																																																					
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	135 Damage To Other Property										☐ Yes (If Yes, describe)										☒ No																																																												11																																																																																																			
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B	D2										01										01										03										26										M										06										08										02										11										04										-										6505										ROLANDO										-										FLORES JR										JR																			
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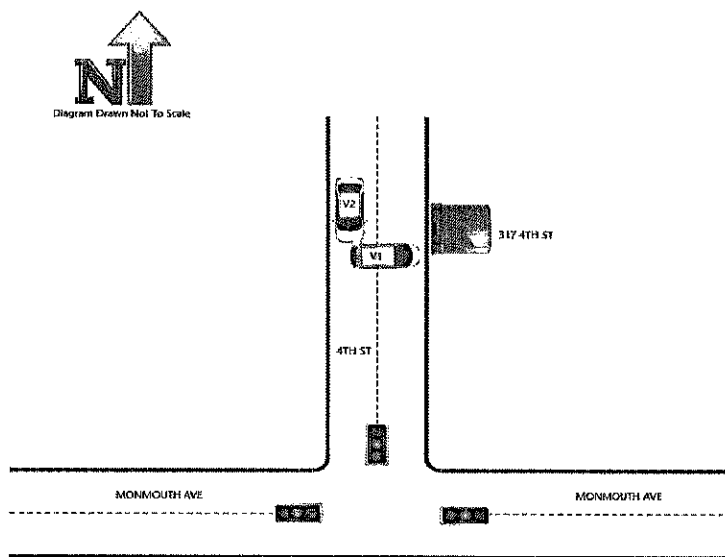
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012954**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER 1 STATED HE WAS ATTEMPTING TO MAKE A K-TURN ON 4TH ST. DRIVER 1 ADVISED ME THAT HE OBSERVED D2 BY MONMOUTH AVE AND PRINCETON AVE WELL BEFORE HE ATTEMPTED THE K-TURN.

DRIVER 2 STATED THAT HE WAS TRAVELING WEST ON 4TH ST TOWARDS MONMOUTH AVE. D2 SAID THAT D1 CUT OUT IN FRONT OF HIM ON 4TH ST WHICH CAUSED THE CRASH. D2 WAS LATER TRANSPORTED TO OCEAN MEDICAL CENTER AFTER COMPLAINING OF BACK PAIN.

BASED ON THE STATEMENTS FROM BOTH DRIVERS AS WELL AS MY OBSERVATIONS FROM THE CRASH SCENE, I FIND D1 AT FAULT FOR THE CRASH. D1 WAS ISSUED A SUMMONS FOR CARELESS DRIVING IN VIOLATION OF 39: 4-97 (1514-A-289393). THERE WAS A VIDEO SURVEILLANCE CAMERA LOCATED AT 317 4TH ST.

**VEHICLE 2 HAD A TEMPORARY STATE OF NJ INSURANCE
COMPANY : AmGUARD INUSRANCE COMPANY
COMPANY NUMBER : 42390
POLICY NUMBER : MAAU245586**

146 Officer's Signature

MAHECHA J

147 Badge #

390

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending ☒ Complete

05	1 Case Number 22-012987		10 Crash Occurred On: RIDGE AVE		11 Speed Limit 35		0024		-		09	
97	2 Police Dept of LAKEWOOD TOWNSHIP #01		Code		12 Route No.		Suffix		13 Milepost		118a	
01	3 Station/Precinct -		100		14		15		16		118b	
98	4 Date of Crash 02/17/22		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 2332		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --	
07	23 Veh # 1		24 Policy No. NJSS216363058		25 NJ Ins. Code 961		53 Veh # 2		54 Policy No. 6030-91-37-73		55 NJ Ins. Code 100	
99	26 Driver's First Name NELSON		Initial O		Last Name HILARIO-GUTIERREZ		29 Sex M		56 Driver's First Name MORDECHAI		Initial M	
05	27 Number & Street 1330 VENTURA DR		28 City LAKEWOOD		State NJ		Zip 08701		57 Number & Street 1005 FOREST AVE		58 City LAKEWOOD	
100a	30 Eyes 2		DL Class A		Restrictions -		Endorsements -		31 State NJ		59 Sex M	
03	32 Driver's License Number H42965877612962		33 DOB 12/02/1996		34 Expires 12		yy 23		62 Driver's License Number J00755637408972		63 DOB 08/14/1997	
100b	35 Owner's First Name JOSE		Initial S		Last Name TEJADA-FLORES		65 Owner's First Name MORDECHAI		Initial M		Last Name JACOBS	
04	36 Number & Street 1330 VENTURA DR		37 City LAKEWOOD		State NJ		Zip 08701		66 Number & Street 1005 FOREST AVE		67 City LAKEWOOD	
101	38 Make HOND		39 Model CIV		40 Color BLU		41 Year 2016		42 Plate No. A80JMU		43 State NJ	
02	44 VIN 19XFC1F78GE218832		45 Expires 11		yy 22		74 VIN 4T4BF1FK4DR277854		75 Expires 05		yy 22	
102	46 Vehicle Removed To BARINA'S AUTOMOTIVE		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.		76 Vehicle Removed To BARINA'S AUTOMOTIVE		77 Authority ☐ Owner ☒ Driver ☐ Police	
103	50 Carrier No. ☐ USDOT ☒ None		51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		52 Motor Carrier or Government Entity -		80 Carrier No. ☐ USDOT ☒ None		81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		82 Motor Carrier or Government Entity -	
104	53 Number & Street -		54 City -		55 State -		56 Zip -		83 Number & Street -		84 City -	
105	57 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		58		59		60		61		62	
106	136 Charge -		137 Summons. No. -		138 Charge -		139 Summons. No. -		140 Charge -		141 Summons. No. -	
107	83		84		85		86		87		88	
108	89		90		91		92		93		94	
109	95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		96		97		98		99	
110	01		01		01		05		25		M	
111	02		01		01		05		24		M	
112	03		01		01		05		25		M	
113	04		01		01		05		26		M	
114	05		01		01		05		27		M	
115	06		01		01		05		28		M	
116	07		01		01		05		29		M	
117	08		01		01		05		30		M	
118	09		01		01		05		31		M	
119	10		01		01		05		32		M	
120	11		01		01		05		33		M	
121	12		01		01		05		34		M	
122	13		01		01		05		35		M	
123	14		01		01		05		36		M	
124	15		01		01		05		37		M	
125	16		01		01		05		38		M	
126	17		01		01		05		39		M	
127	18		01		01		05					

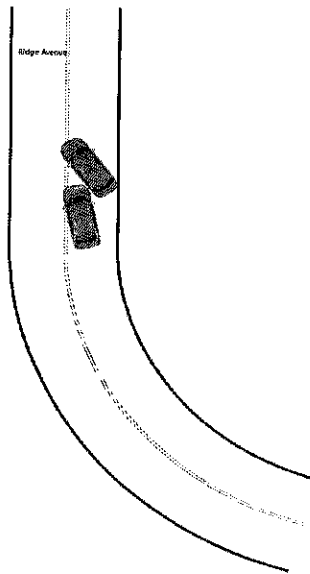
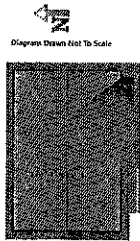
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-012987**

(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
A														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was heading East on Ridge Avenue just after the curve in the road. **Vehicle 2** was also heading East on Ridge Avenue. **Vehicle 2** began to slow down to attempt to pull into the driveway of 1737 Ridge Avenue. As **vehicle 2** slowed down, **vehicle 1** failed to stop in time and attempted to swerve around **vehicle 2** on it's driver side. As **vehicle 1** began to drive around **vehicle 2** began to make it's left turn. **Vehicle 1** collided with **vehicle 2** as it was turning.

The driver of **vehicle 1** stated that **vehicle 2** stopped short in front of him and did not have it's turn signal activated. Due to the quickness of the stop, **vehicle 1** attempted to swerve around **vehicle 2** to avoid the collision. However, **vehicle 2** was attempting to complete it's turn and the collision occurred.

The driver of **vehicle 2** stated that he was driving on Ridge avenue slowly because he was looking for a specific address he was not familiar with. After locating the address, he began to turn into the driveway when he was struck by **vehicle 1**. The driver of **vehicle 2** was not able to positively say whether or not he had his turn signal on.

146 Officer's Signature

MILANO, M

147 Badge #

381

148 Reviewer

SGT. M. LROENC

Badge #

316

149 Case Status

☐ Pending
 ☒ Complete

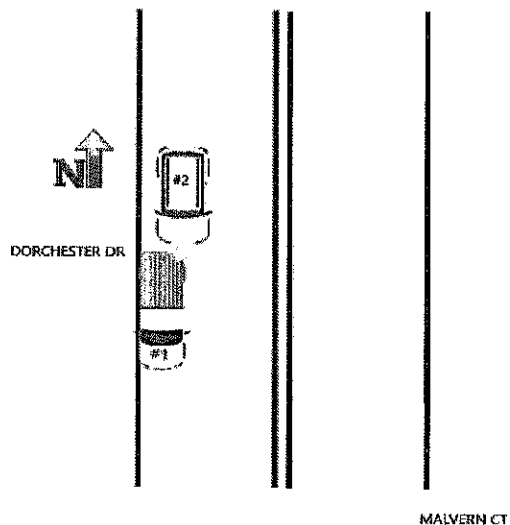
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-012831

(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
A														
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H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #2 stated she was driving south on Dorchester Dr when she was having an argument with her front seat passenger and took her eyes off the road and struck Veh #1. This officer observed Veh #1 to be legally parked and not occupied. My investigation finds Driver #2 at fault for the crash for failing to pay attention to the roadway and failing to maintain her lane of travel.

146 Officer's Signature

PREBISH J

147 Badge #

275

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

05	1 Case Number 22-012584		10 Crash Occurred On: HOPE CHAPEL ROAD										11 Speed Limit 40		12 Route No.		13 Milepost		18 Speed Limit 35		02					
01	2 Police Dept of LAKEWOOD TOWNSHIP		Code F01		☒ At Intersection With Road Name ☐ Feet ☐ Miles										Dir 14TH STREET		17 Cross Road Name		☐ NB ☐ EB ☐ SB ☐ WB		118b -					
01	3 Station/Predict		14 15 16										19 Ramp		20 Route/Name		22 Longitude		119a 25							
05	4 Date of Crash mm dd yy 02/16/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1358		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		21 Latitude 40.10646		22 Longitude -74.24271		119b -									
04	23 Veh # 1		24 Policy No.		25 NJ Ins. Code		53 Veh # 2		54 Policy No. 4392-58-78-89		55 NJ Ins. Code 148		120a 01													
02	26 Driver's First Name MOSHE		Initial M		Last Name JACOBOWITZ		29 Sex M		56 Driver's First Name ARYEH		Initial L		Last Name REICH		59 Sex M		121a 01									
01	27 Number & Street 10 GEM DR		28 City LAKEWOOD		State NJ		Zip 08701		57 Number & Street 32E 9TH ST		58 City LAKEWOOD		State NJ		Zip 08701		121b -									
2	30 Eyes 2		DL Class A		Restrictions -		Endorsements -		31 State NJ		60 Eyes 6		DL Class A		Restrictions -		Endorsements -		61 State NJ		122 08					
01	32 Driver's License Number J00745677407992		33 DOB mm dd yyyy 07/12/1999		34 Expires mm yy 07 25		62 Driver's License Number R22510627307986		63 DOB mm dd yyyy 07/21/1998		64 Expires mm yy 07 25		123 07													
-	35 Owner's First Name MOSHE		Initial M		Last Name JACOBOWITZ		65 Owner's First Name ARYEH		Initial L		Last Name REICH		124 03													
-	36 Number & Street 10 GEM DR		37 City LAKEWOOD		State NJ		Zip 08701		66 Number & Street 32E 9TH ST		67 City LAKEWOOD		State NJ		Zip 08701		125 03									
01	38 Make FORD		39 Model EPD		40 Color GRY		41 Year 2012		42 Plate No. P90MBE		43 State NJ		68 Make DODG		69 Model CHA		70 Color WHI		71 Year 2015		72 Plate No. X090456		73 State NJ		126a 26	
01	44 VIN 1FMJK2A55CEF46316		45 Expires 12 22		74 VIN 2C3CDXAG1FH902459		75 Expires 03 22		126b -																	
01	46 Vehicle Removed To		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.		76 Vehicle Removed To		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.		126c -									
03	50 Carrier No. ☐ USDOT ☐ MC/MX		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		80 Carrier No. ☐ USDOT ☐ MC/MX		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		126d -																	
-	52 Motor Carrier or Government Entity		53 Motor Carrier or Government Entity		126e -																					
-	Number & Street		Number & Street		126f 26																					
-	City		City		127 12																					
-	State		State		128 12																					
-	Zip		Zip		129 06																					
-	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		136 Charge		137 Summons. No.		138 Charge		139 Summons. No.		130 06															
-	140 Charge		141 Summons. No.		142 Charge		143 Summons. No.		131 03																	
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death								132 03				
B	01	01	01	05	22	M	-	-	-	-	11	04	-	MOSHE M JACOBOWITZ 10 GEM DR LAKEWOOD NJ 08701								133 03				
C	02	01	01	05	23	M	-	-	-	-	11	04	-	ARYEH L REICH 32E 9TH ST LAKEWOOD NJ 08701								134 03				
D																						135 03				

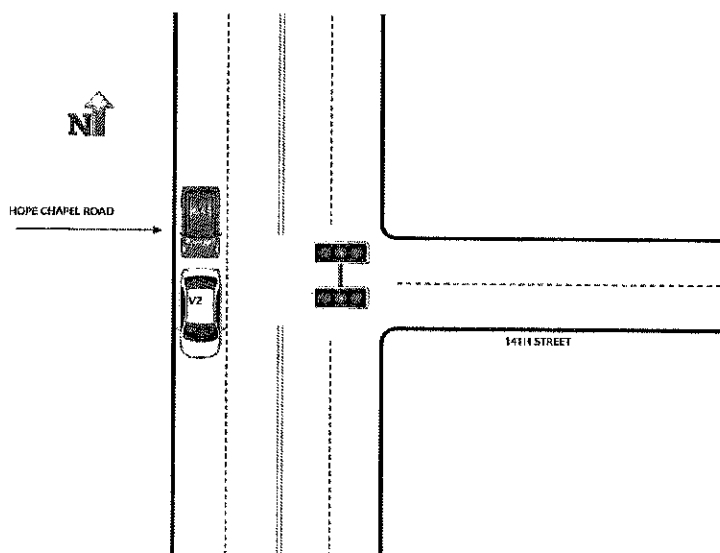
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-012584**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
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N														
V														
O														
L														
V														
E														
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D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V2 STATED THAT HE WAS STOPPED IN TRAFFIC AND THE LIGHT WAS GREEN AND HE WAS HIT FROM BEHIND. DRIVER OF V1 STATED THAT HE TRIED TO STOP BUT COULD NOT STOP IN TIME. INSURANCE INFORMATION V1- LIBERTY MUTUAL POLICY # AOD-T31-884286-40 2 2 NAIC CODE 18333.

146 Officer's Signature
YOUMANS R

147 Badge #
250

148 Reviewer
MY

Badge #
329

149 Case Status
☐ Pending ☒ Complete

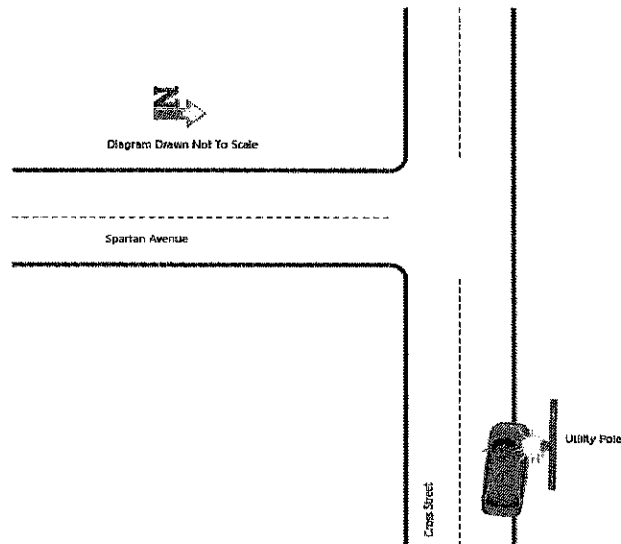
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-012773**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was traveling West on Cross Street. Driver of vehicle 1 stated she does not recall what happened but she believes she may have fell asleep while driving. Vehicle 1 ran off of the road to the right and struck a utility pole #JC3124LD causing minor damage. Vehicle 1 had moderate damage and was towed by Barinas Auto Body. Driver of vehicle 1 had no complaint of pain.

146 Officer's Signature

ORTIZ, K

147 Badge #

377

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending
 ☒ Complete

96	PAGE 1 OF 3		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number		22-012802		10 Crash Occurred On:		FLINTLOCK DR	
01	2 Police Dept of		LAKEWOOD TOWNSHIP 01		11 Speed Limit		25	
01	3 Station/Precinct				12 Route No.		25	
07	4 Date of Crash		02/17/22 THURSDAY		13 Milepost		25	
01	5 Day Of Week				14		15	
01	6 Time (use 2400 hrs)		0910		7 Municipality Code		1514	
01	8 Total Killed				9 Total Injured			
01	21 Latitude		40.080660		22 Longitude		-74.230270	
04	23 Veh #		1		24 Policy No.		4325-75-32-44	
01	25 NJ Ins. Code		148		53 Veh #		2	
01	54 Policy No.		4595-19-19-01		55 NJ Ins. Code		148	
02	26 Driver's First Name		MENACHEM		56 Driver's First Name		ROCHEL	
01	27 Number & Street		47 GEORGIAN BLVD.		57 Number & Street		37 RENA LN	
01	28 City		JACKSON		58 City		LAKEWOOD	
01	29 Sex		M		59 Sex		F	
01	30 Eyes		06		60 Eyes		2	
01	31 State		NJ		61 State		NJ	
01	32 Driver's License Number		G76505390004896		62 Driver's License Number		S13406600051912	
01	33 DOB		04/06/1989		63 DOB		01/01/1991	
01	34 Expires		04		64 Expires		01	
01	35 Owner's First Name		MENACHEM		65 Owner's First Name		ELIEZER	
01	36 Number & Street		47 GEORGIAN BLVD.		66 Number & Street		37 RENA LN; A	
01	37 City		JACKSON		67 City		LAKEWOOD	
01	38 Make		TOYT		68 Make		HYUN	
01	39 Model		SIE		69 Model		SON	
01	40 Color		TN		70 Color		WHI	
01	41 Year		2011		71 Year		2009	
01	42 Plate No.		K65KLC		72 Plate No.		L12FPC	
01	43 State		NJ		73 State		NJ	
01	44 VIN		5TDKK3DC3BS010529		74 VIN		5NPET46C49H535144	
01	45 Expires		09		75 Expires		07	
01	46 Vehicle Removed To		WAYNES AUTO BODY		76 Vehicle Removed To		BARINA'S AUTOMOTIVE	
01	47 Authority		Owner		77 Authority		Police	
01	48 Alcohol/Drug Test		Given: No		78 Alcohol/Drug Test		Given: No	
01	49 Hazardous Material		None		79 Hazardous Material		None	
01	50 Carrier No.		None		80 Carrier No.		None	
01	51 GVWR/GCWR		Weight <= 10,000 lbs		81 GVWR/GCWR		Weight <= 10,000 lbs	
01	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity			
01	53 Number & Street				83 Number & Street			
01	54 City				84 City			
01	55 State				85 State			
01	56 Zip				86 Zip			
01	135 Damage To Other Property		Yes (If Yes, describe)		136 Damage To Other Property		Yes (If Yes, describe)	
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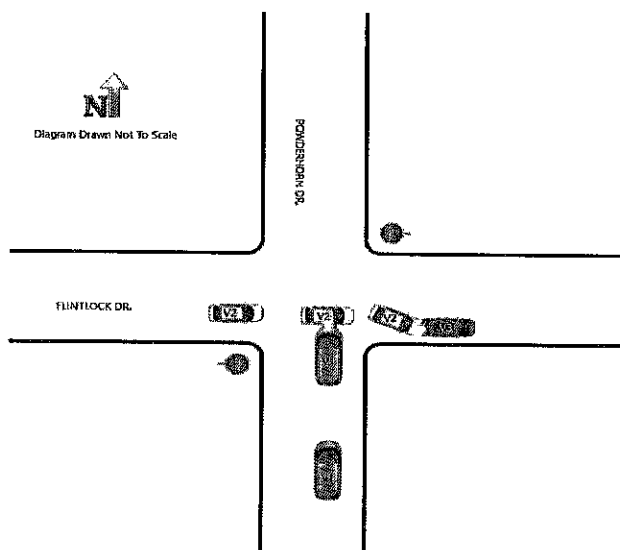
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-012802**

(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	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated he was traveling northbound on Powderhorn Dr. and began to pass through the intersection with Flintlock Dr. when his vehicle was struck by vehicle #2. Vehicle #2 was traveling eastbound on Flintlock Dr., but did not stop for the stop sign at the intersection with Powderhorn Dr. which caused the collision. After the collision, vehicle #2 then proceeded to collide with vehicle #3 that was parked unoccupied on Flintlock Dr. No injuries were reported while on scene. Driver #2 was transported to Jersey Shore University Medical Center via Hatzolah EMS as a precautionary measure due to being 11 months pregnant. -end-

146 Officer's Signature

ALLEN W

147 Badge #

287

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete