PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-032022
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	MADISON AVE
Road Name	
Dir	-
11 Speed Limit	40
12 Route No.	0009
Suffix	-
13 Milepost	-
18 Speed Limit	25
☐ At Intersection With	
☒ Feet / ☐ Miles	40
☒ N ☐ E ☐ S ☐ W of:	3RD ST
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/22/22
5 Day Of Week	FRIDAY
6 Time (use 2400 hrs)	1409
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.09289
22 Longitude	-74.21685

Vehicle 1

23 Veh #	1
24 Policy No.	939766068
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JUDA I ESCOBAR-MARTINEZ -
29 Sex	M
27 Number & Street	73 ROSEWOOD DR
28 City / State / Zip	TOMS RIVER NJ 08753
30 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
31 State	SP
32 Driver's License Number	48690387-P
33 DOB mm dd yyyy	03/11/1995
34 Expires mm yy	04 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver JULIA J MEJIAHERRERA -
36 Number & Street	309 WASHINGTON AVE APT P5
37 City / State / Zip	DOVER NJ 07801
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	MAZD / 3 / BLU / 2007 / N44MWN / NJ
44 VIN	JM1BK324271620373
45 Expires	09 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	F852111-4
55 NJ Ins. Code	426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	DOMINIC F LORENZO -
59 Sex	M
57 Number & Street	359 SEQUOIA COURT
58 City / State / Zip	HOWELL NJ 07731
60 Eyes / DL Class / Restrictions / Endorsements	2 / A / - / -
61 State	NJ
62 Driver's License Number	L65851726612632
63 DOB mm dd yyyy	12/22/1963
64 Expires mm yy	12 22
65 Owner's First Name / Initial / Last Name	☒ Same As Driver DOMINIC F LORENZO -
66 Number & Street	359 SEQUOIA COURT
67 City / State / Zip	HOWELL NJ 07731
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	FORD / RAN / SIL / 2020 / M20MNA / NJ
74 VIN	1FTER4FH3LLA32122
75 Expires	05 24
76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	-	27	M	-	-	-	11	04	-	-	JUDA I ESCOBAR-MARTINEZ - 73 ROSEWOOD DR TOMS RIVER NJ 08753
B	1	03	01	-	24	F	-	-	-	11	04	-	-	MARIA V OROZCO-PELAEZ - 73 ROSEWOOD DR TOMS RIVER NJ 08753
C	2	01	01	-	58	M	-	-	-	11	04	-	-	DOMINIC F LORENZO - 359 SEQUOIA COURT HOWELL NJ 07731
D														

New Jersey Police Crash Investigation Report

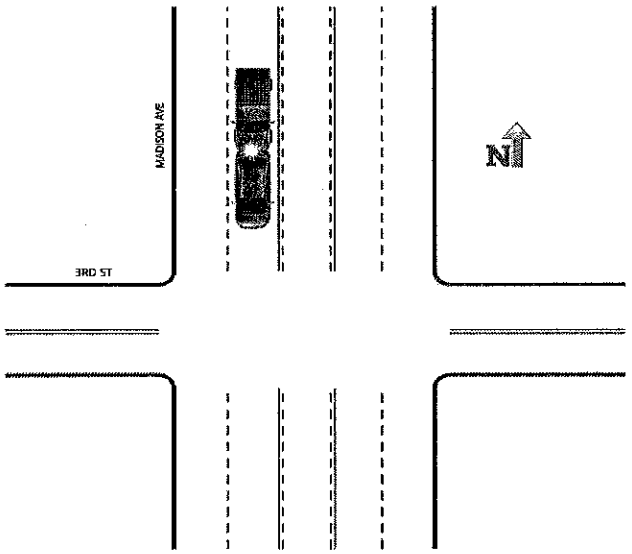
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032022

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING SOUTH ON MADISON AVE APPROACHING 3RD ST. VEHICLE 2 WAS TRAVELING BEHIND VEHICLE 1.

DRIVER 1 STATED THAT HE SAW SEVERAL PEDESTRIANS IN THE CROSSWALK SO HE PRESSED HIS BRAKE TO YIELD TO THEM AND VEHICLE 2 STRUCK HIS VEHICLE FROM THE REAR.

DRIVER 2 STATED THAT VEHICLE 1 STOPPED SUDDENLY SO HE ATTEMPED TO STOP. HIS BRAKES LOCKED UP AND HIS VEHICLE STRUCK VEHICLE 1.

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

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RIVERA M	327	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-033645
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	HAWK WAY
☒ At Intersection With	Road Name
☐ Feet ☐ Miles	☐ N ☐ E ☐ S ☐ W of: WASHINGTON AVE
11 Speed Limit	25
Dir	-
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	35
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1523
7 Municipality Code	1514
8 Total Killed	-
9 Total Injured	-
20 Route/Name	-
21 Latitude	40.074200
22 Longitude	-74.206480

Vehicle 1

23 Veh #	1
24 Policy No.	953985441
25 NJ Ins. Code	135
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	LUDMIR - ETIL RAHEL -
29 Sex	F
27 Number & Street	1184 TIFFANY LN
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements	4 / D / - / -
31 State	IS
32 Driver's License Number	203222815
33 DOB mm dd yyyy	08/12/1991
34 Expires mm yy	08 61
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ISAAC - MARKOWITZ -
36 Number & Street	18 SHEMEN ST
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	VOLV / S60 / 1 / 2015 / Z84EDG / NJ
44 VIN	YV1612TD0F1307800
45 Expires	05 16
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority ☐ Owner ☒ Driver ☐ Police	
48 Alcohol/Drug Test: Given ☒ No ☐ Yes ☐ Refused; Type ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	
50 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -	
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	2898332-F13-52B
55 NJ Ins. Code	896
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	RECHELLE - ZEIGER -
59 Sex	F
57 Number & Street	41 BLUE JAY WAY
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements	06 / D / - / -
61 State	NJ
62 Driver's License Number	Z22656460052776
63 DOB mm dd yyyy	02/04/1977
64 Expires mm yy	02 25
65 Owner's First Name / Initial / Last Name	☐ Same As Driver SHIMON - SHENKER -
66 Number & Street	41 BLUE JAY WAY
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	LEXU / LX / SIL / 2019 / FOP1801 / NY
74 VIN	JTJBM7FX8K5218507
75 Expires	03 23
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority ☐ Owner ☒ Driver ☐ Police	
78 Alcohol/Drug Test: Given ☒ No ☐ Yes ☐ Refused; Type ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	
80 Carrier No.: ☐ USDOT - ☐ None ☐ MC/MX -	
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:3-4	292715	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	30	F	-	-	-	11	04	-	-	LUDMIR - ETIL RAHEL - 1184 TIFFANY LN LAKEWOOD NJ 08701 - -
B	02	01	01	05	45	F	-	-	-	11	04	-	-	RECHELLE - ZEIGER - 41 BLUE JAY WAY LAKEWOOD NJ 08701 - -
C	02	03	01	05	15	F	-	-	-	11	04	-	-	MINDY - SHENKER - 41 BLUE JAY WAY LAKEWOOD NJ 08701 - -
D														

New Jersey Police Crash Investigation Report

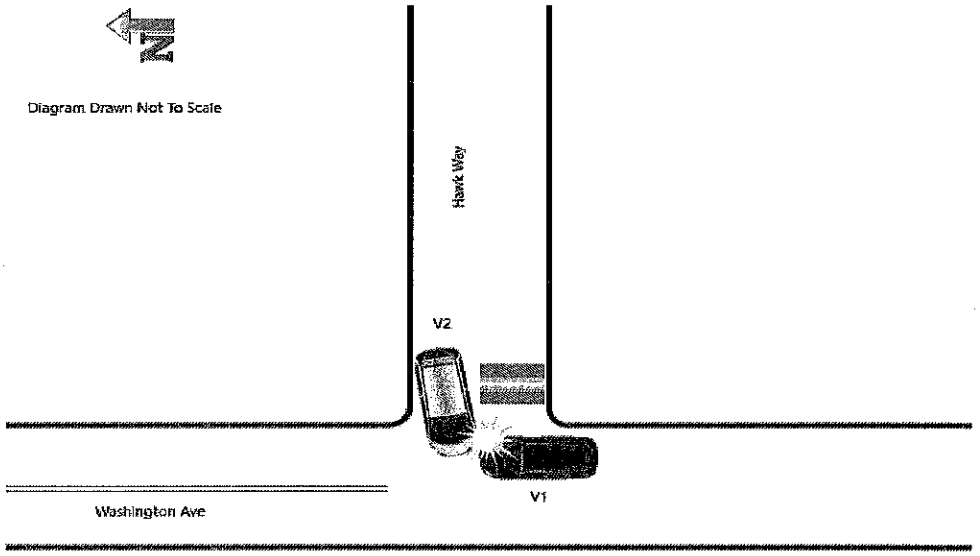
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033645

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that she was heading north on Washington Ave when she stopped to let driver 2 make a left hand turn onto Washington Ave. She stated driver 2 did not look left when turning and struck the front right side of vehicle 1 while turning.

Driver 2 stated that she was waiting to make a left hand turn to head south on Washington Ave. She stated that both north bound and south bound traffic had stopped so that she could make a left hand turn onto Washington Ave. When she started to turn vehicle 1 had passed the stopped north bound traffic on the left side and had struck vehicle 2 on the front left bumper.

After my investigation i determined driver 2 to be at fault for turning into oncoming traffic and striking vehicle 1.

Vehicle 1 sustained moderate damage the the right side of the front bumper. Vehicle 2 had sustained moderate damage to the left side of the front bumper.

Driver 1 was issued a summons for driving an unregistered vehicle (39:3-4) and had updated her registration online on scene.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAMACHO L	828	DIBIASE	286	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-033331
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1843
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	WHISPERING PINES LN
At Intersection With	☐
Feet	☒
Miles	☐
100	
N ☒ E of:	SQUANKUM RD
S ☐ W	
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
16 Speed Limit	40
17 Cross Road Name	-
19 Ramp To ☐ From ☐	-
NB ☐ EB ☐ SB ☐ WB ☐	
20 Route/Name	-
21 Latitude	40.107020
22 Longitude	-74.203500

Vehicle 1

23 Veh #	1
24 Policy No.	CAA4510175
25 NJ Ins. Code	177
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run	
26 Driver's First Name / Initial / Last Name	JONATHAN - SANTOS
29 Sex	M
27 Number & Street	509 1ST AVE
28 City / State / Zip	ELIZABETH NJ 07206
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / NJ
32 Driver's License Number	S04904090008992
33 DOB mm dd yyyy	08/13/1999
34 Expires mm yy	08 23
35 Owner's First Name / Initial / Last Name	☐ Same As Driver AMAZON - LOGISTICS INC -
36 Number & Street	410 TERRY AVENUE NORTH
37 City / State / Zip	SEATTLE WA 98109
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	01 / RAM / PRO / 3 / 2020 / XKNL28 / NJ
44 VIN	3C6URVJG0LE132209
45 Expires	08 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class - Placard No. -
50 Carrier No.	☒ USDOT 2881058 ☐ None ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	954442495
55 NJ Ins. Code	134
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	- - -
59 Sex	-
57 Number & Street	-
58 City / State / Zip	- / - / -
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	- / - / - / - / -
62 Driver's License Number	-
63 DOB mm dd yyyy	-
64 Expires mm yy	- -
65 Owner's First Name / Initial / Last Name	☐ Same As Driver YESHAYA - JESSURUN -
66 Number & Street	48 WHISPERING PINES LN
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HOND / ACC / BGE / 2018 / F69PNF / NJ
74 VIN	1HGCV1F16JA093818
75 Expires	01 23
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class - Placard No. -
80 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
-	136	-	-	138	139 -
-	140	-	-	142	143 -

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	22	M	-	-	-	11	04	-	-	JONATHAN - SANTOS - 509 1ST AVE ELIZABETH NJ 07206 - -
B														
C														
D														

New Jersey Police Crash Investigation Report

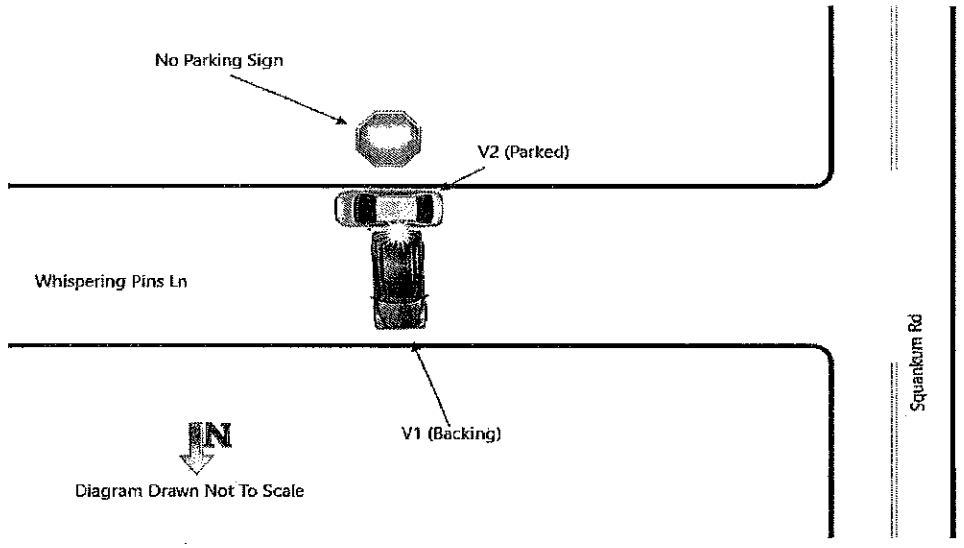
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033331

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated, he was backing up attempting to turn around. He stated, while backing he possibly bumped into the driver side of vehicle 2 with the step equipped on the rear of the enclosed van. Vehicle 1 did not suffer any damage. No injuries reported. It should be noted, driver 1 was unsure if he made contact with vehicle 2 while backing.

The owner of vehicle 2 was unable to specify what damage was caused during the incident due to the extensive amount of previous damage along the side of his vehicle. He pointed out scratches and dents that appeared new but was unable to determine if they were pre existing. In addition, vehicle 2 was moved to stop being parked in a prohibited zone.

As a result of my investigation, I, Patrolman Connor Woods #418 determined both drivers at fault for the collision. Driver 1 is at fault for unsafe backing and the owner of vehicle 2 is at fault for improper parking.

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-033288
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	1195 STATE HWY 70 W; LAKE
At Intersection With / Road Name / Dir	-
Feet / Miles	-
N E S W of:	-
11 Speed Limit	15
12 Route No. / Suffix / 13 Milepost	- - -
18 Speed Limit	-
19 Ramp To / From:	-
17 Cross Road Name	
NB EB SB WB	
20 Route/Name	
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1533
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.054410
22 Longitude	-74.180160

Vehicle 1

23 Veh #	1
24 Policy No.	000-5788-339-1
25 NJ Ins. Code	038
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	STACI - LAUBAUSKAS
29 Sex	F
27 Number & Street	520 AZALEA DR
28 City / State / Zip	BRICK NJ 08724
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	BR D - - NJ
32 Driver's License Number / 33 DOB mm dd yyyy / 34 Expires mm yy	L08657206155932 05/19/1993 05 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver STACI - LAUBAUSKAS
36 Number & Street	520 AZALEA DR
37 City / State / Zip	BRICK NJ 08724
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD 150 WHI 2001 H71PHK NJ
44 VIN / 45 Expires	1FTZX17211KB49121 11 22
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	605689029 206 1
55 NJ Ins. Code	884
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	MIGUEL A HERNANDEZ
59 Sex	M
57 Number & Street	160 JAMES ST BLDG 2 APT 7
58 City / State / Zip	TOMS RIVER NJ 08753
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 A - - NJ
62 Driver's License Number / 63 DOB mm dd yyyy / 64 Expires mm yy	H27185476111662 11/06/1966 11 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver MIGUEL A HERNANDEZ
66 Number & Street	160 JAMES ST BLDG 2 APT 7
67 City / State / Zip	TOMS RIVER NJ 08753
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT SIE BGE 2004 U79PVX NJ
74 VIN / 75 Expires	5TDZA23C74S131659 04 23
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	28	F	-	-	-	11	04	-	-	STACI - LAUBAUSKAS - 520 AZALEA DR BRICK NJ 08724
B	2	01	01	05	55	M	-	-	-	11	04	-	-	MIGUEL A HERNANDEZ - 160 JAMES ST BLDG 2 AI TOMS RIVER NJ 08753
C														
D														

New Jersey Police Crash Investigation Report

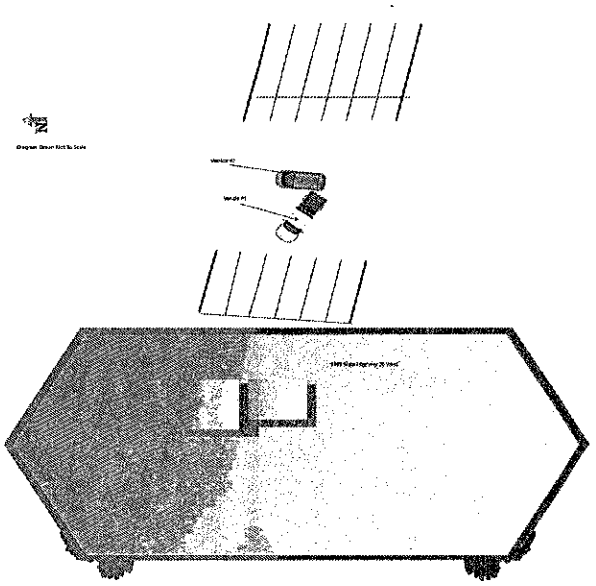
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033288

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle #1 stated she was backing out of the parking space in front of 1195 State Highway 70 West. She further reported that Vehicle #2 sped quickly behind her and crashed into the rear of her vehicle.

The driver of Vehicle #2 stated he was traveling slowly in the parking lot of 1195 State Highway 70 West. He further reported that Vehicle#1 quickly backed into his vehicle.

I observed minor paint transfer marks on the rear passenger tail light area on Vehicle #1 and paint transfer marks on the rear driver side area on Vehicle #2.

There were no reported injuries.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DUNPHEY C	357	KCM	335	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-032892
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/24/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	1357
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	1143 E COUNTY LINE RD
At Intersection With	
Road Name	
Dir	-
11 Speed Limit	-
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	-
Feet	
Miles	5
N E S W of:	-
19 Ramp To From:	
17 Cross Road Name	
20 Route/Name	-
NB EB SB WB	
21 Latitude	40.102590
22 Longitude	-74.173140

Vehicle 1

23 Veh #	1
24 Policy No.	1304804F2430B
25 NJ Ins. Code	962
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	ALEX
Initial	J
Last Name	MATEOROJAS -
29 Sex	M
27 Number & Street	228 GOVERNORS RD
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	01
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	M07970197107041
33 DOB (mm dd yyyy)	07/15/2004
34 Expires (mm yy)	07 25
35 Owner's Same As Driver	☐
First Name	PABLO
Initial	-
Last Name	TERREROSLAZARO -
36 Number & Street	228 GOVERNORS RD
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	NISS
39 Model	ALT
40 Color	WHI
41 Year	2015
42 Plate No.	G17NUV
43 State	NJ
44 VIN	1N4AL3AP4FN306726
45 Expires	05 22
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City	
State	
Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	HPA00002634782
55 NJ Ins. Code	017
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	MARCELA
Initial	N
Last Name	FLORESDE-CESAR -
59 Sex	F
57 Number & Street	295 SAWMILL ROAD
58 City	BRICK
State	NJ
Zip	08724
60 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	F55435177551632
63 DOB (mm dd yyyy)	01/16/1963
64 Expires (mm yy)	01 26
65 Owner's Same As Driver	☐
First Name	MIGUEL
Initial	A
Last Name	CESAR-RAZO -
66 Number & Street	295 SAWMILL ROAD
67 City	BRICK
State	NJ
Zip	08724
68 Make	HOND
69 Model	ACC
70 Color	BGE
71 Year	2003
72 Plate No.	T36MBE
73 State	NJ
74 VIN	1HGCM56383A041606
75 Expires	12 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City	
State	
Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	17	M	-	-	-	11	04	-	-	ALEX J MATEOROJAS - 228 GOVERNORS RD LAKEWOOD NJ 08701
B	2	01	01	05	59	F	-	-	-	11	04	-	-	MARCELA N FLORESDE-CESAR - 295 SAWMILL ROAD BRICK NJ 08724
C														
D														

New Jersey Police Crash Investigation Report

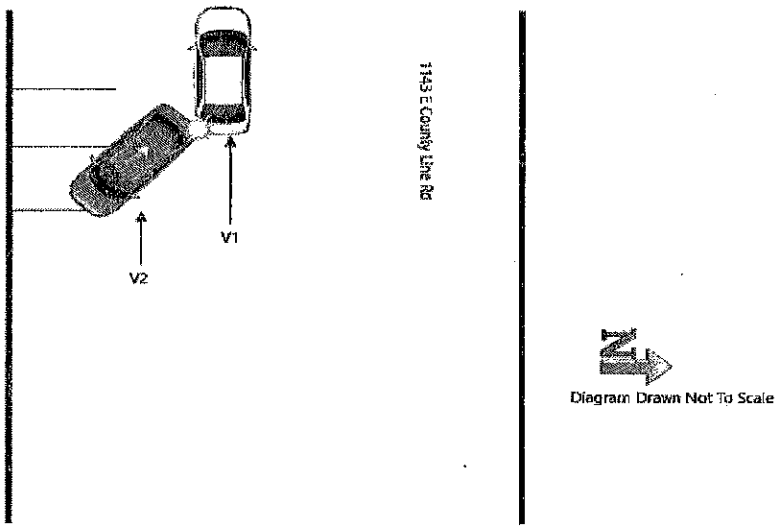
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-032892

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was stopped in traffic in the parking lot of 1143 E County Line Rd. While he was stopped, driver of vehicle 1 stated vehicle 2 backed into his vehicle.

Driver of vehicle 2 stated she was backing out of a parking space in the parking lot of 1143 E County Line Rd. Driver of vehicle 2 stated she did not see vehicle 1 behind her and as a result, she backed into vehicle 1.

As a result of my investigation, I, Ptl. Livingston #373 determined driver of vehicle 2 is at fault for this crash. Driver of vehicle 2 backed up unsafely.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
LIVINGSTON M	373	EM	288	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-033971
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	--
10 Crash Occurred On:	E COUNTY LINE RD
At Intersection With / Road Name	
Dir	
11 Speed Limit	40
12 Route No.	RT 526
Suffix	
13 Milepost	
18 Speed Limit	30
☒ Feet ☐ Miles	40
☐ N ☐ E ☐ S ☒ W of:	SQUANKUM RD
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1819
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.10520
22 Longitude	-74.20519

Vehicle 1

23 Veh #	1
24 Policy No.	EMAU133178
25 NJ Ins. Code	187
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MARCOS A MONTANOFRANCO -
29 Sex	M
27 Number & Street	7 SPRING TER APT 7
28 City / State / Zip	FREEHOLD NJ 07728
30 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
31 State	NJ
32 Driver's License Number	M64385176103852
33 DOB mm dd yyyy	03/05/1985
34 Expires mm yy	03 26
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - EMGEE CONTRACTI-
36 Number & Street	1540 NEWPORT DR
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	CHEV / EXP - EX / WHI / 2011 / XGBY59 / NJ
44 VIN	1GCWGFCA6B1175962
45 Expires	01 23
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	939 420 308
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	MIRIAM S GRUNER -
59 Sex	F
57 Number & Street	35 12TH ST
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements	4 / D / - / -
61 State	NJ
62 Driver's License Number	G76685588251874
63 DOB mm dd yyyy	01/06/1987
64 Expires mm yy	01 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver MIRIAM S GRUNER -
66 Number & Street	35 12TH ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / VEN / BLU / 2013 / T21DGV / NJ
74 VIN	4T3ZA3BB1DU072251
75 Expires	07 22
76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	37	M	-	-	-	11	04	-	-	MARCOS A MONTANOFRANCO - / 7 SPRING TER APT 7 FREEHOLD NJ 07728
B	2	01	01	05	35	F	-	-	-	11	04	-	-	MIRIAM S GRUNER - / 35 12TH ST LAKEWOOD NJ 08701
C	2	04	01	05	5	M	-	-	-	11	05	-	-	YITCHOK - GRUNER - / 35 12TH ST LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

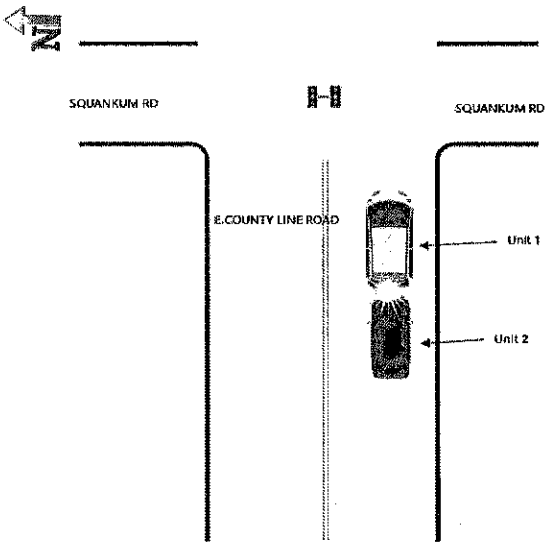
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: -- Case No: 22-033971

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS STOPPED AT THE TRAFFIC LIGHT OF E.COUNTY LINE ROAD/SQUANKUM ROAD FACING EAST ON E. COUNTY LINE ROAD, WHEN HE WAS STRUCK FROM BEHIND BY VEHICLE #2 WHICH WAS TRAVELING EAST ON E. COUNTY LINE ROAD. DRIVER #2 STATED THAT SHE WAS STOPPED AND HER FOOT LET OFF ON THE BRAKES A LITTLE AND SLIGHTLY STRUCK VEHICLE #1 FROM BEHIND. NO INJURIES REPORTED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RIVERA F	294	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-033924
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	MADISON AVE
At Intersection With	
Road Name	
Dir	
11 Speed Limit	40
12 Route No.	0009
Suffix	-
13 Milepost	-
18 Speed Limit	25
☒ Feet ☐ Miles	100
☒ N ☐ E ☐ S ☐ W of:	N LAKE DR
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1453
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.08971
22 Longitude	-74.21624

Vehicle 1

23 Veh #	1
24 Policy No.	4523095950
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	PHYLLIS I WALKOWICZ -
29 Sex	F
27 Number & Street	2257 MASSACHUSETTS AVE #202
28 City / State / Zip	TOMS RIVER NJ 08755
30 Eyes / DL Class / Restrictions / Endorsements	4 / D / - / -
31 State	NJ
32 Driver's License Number	W02876296952434
33 DOB mm dd yyyy	02/28/1943
34 Expires mm yy	02 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver PHYLLIS I WALKOWICZ -
36 Number & Street	2257 MASSACHUSETTS AVE #202
37 City / State / Zip	TOMS RIVER NJ 08755
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD / FUS / MAR / 2012 / 8234HG / NJ
44 VIN	3FAHP0HA8CR255193
45 Expires	01 23
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	6031666024
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	RIVKA - HARTMAN -
59 Sex	F
57 Number & Street	5 TREESIDE LN
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
61 State	NJ
62 Driver's License Number	H06946580061002
63 DOB mm dd yyyy	11/16/2000
64 Expires mm yy	11 25
65 Owner's First Name / Initial / Last Name	☐ Same As Driver MEIR S SALEM -
66 Number & Street	4 FILLMORE AVE
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / CAM / GRY / 2017 / Y23NAL / NJ
74 VIN	4T1BF1FK1HU309692
75 Expires	11 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	79	F	-	-	-	11	04	-	-	PHYLLIS I WALKOWICZ - 2257 MASSACHUSETTS A TOMS RIVER NJ 08755
B	2	01	01	05	21	F	-	-	-	11	04	-	-	RIVKA - HARTMAN - 5 TREESIDE LN LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

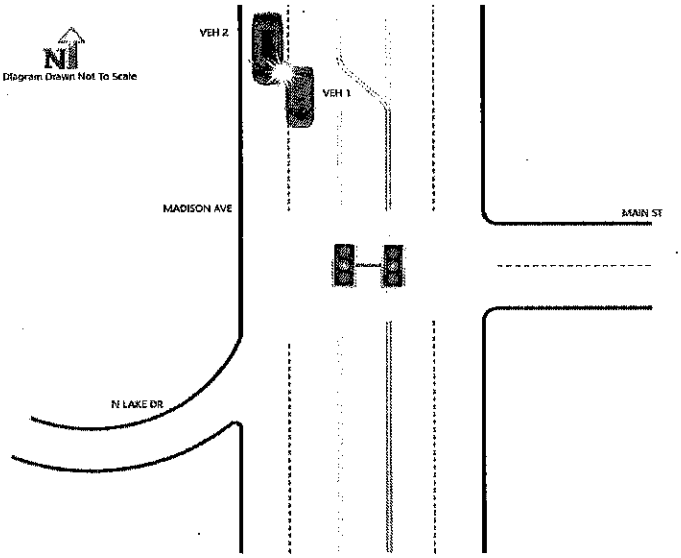
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033924

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLES ONE AND TWO WERE TRAVELING SOUTH ON MADISON AVENUE. VEHICLE ONE WAS IN THE LEFT LANE. VEHICLE TWO WAS IN THE RIGHT LANE. VEHICLE ONE ATTEMPTED TO CHANGE LANES INTO THE RIGHT LANE AND STRUCK VEHICLE TWO IN THE PROCESS. DRIVER ONE STATED SHE DID NOT SEE VEHICLE TWO PRIOR TO CHANGING LANES. DRIVER TWO STATED SHE TRAVELING SOUTH IN THE RIGHT LANE WHEN VEHICLE ONE ATTEMPTED TO CHANGE INTO HER LANE AND SIDE SWIPED HER VEHICLE.

DUE TO MY INVESTIGATION I FOUND DRIVER ONE TO BE AT FAULT FOR IMPROPER LANE CHANGE. NO INJURIES WERE REPORTED AT THE SCENE. NO SUMMONS WERE ISSUED.

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

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-033582
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	HOPE CHAPEL RD
☐ At Intersection With	
Road Name	
Dir	
11 Speed Limit	40
12 Route No.	
Suffix	
13 Milepost	
18 Speed Limit	25
☒ Feet ☐ Miles	100
☒ N ☐ E ☐ S ☐ W of:	SETON CIRCLE
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1008
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.10478
22 Longitude	-74.24408

Vehicle 1

23 Veh #	1
24 Policy No.	PAA80002098131
25 NJ Ins. Code	963
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	LEIGHANNE N ORDNER -
29 Sex	F
27 Number & Street	11 HARLEY RD
28 City / State / Zip	TOMS RIVER NJ 08755
30 Eyes / DL Class / Restrictions / Endorsements	05 / D / - / -
31 State	NJ
32 Driver's License Number	O72784537561945
33 DOB mm dd yyyy	11/19/1994
34 Expires mm yy	12 21
35 Owner's Same As Driver	☐
First Name / Initial / Last Name	JAMES M SWEENEY -
36 Number & Street	11 HARLEY RD
37 City / State / Zip	TOMS RIVER NJ 08755
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	NISS / ALT / WHI / 2017 / U39JKY / NJ
44 VIN	1N4AL3AP2HC164598
45 Expires	11 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	4361-42-97-58
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	JUDITH - SUSSKIND -
59 Sex	F
57 Number & Street	2 HEKEL RD
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements	2 / - / - / -
61 State	NJ
62 Driver's License Number	S94574176553932
63 DOB mm dd yyyy	03/05/1993
64 Expires mm yy	03 26
65 Owner's Same As Driver	☐
First Name / Initial / Last Name	JUDITH - SUSSKIND -
66 Number & Street	2 HEKEL RD
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / SIE / BRZ / 2019 / S42LGR / NJ
74 VIN	5TDKZ3DC1KS970511
75 Expires	05 23
76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	27	F	-	-	-	11	04	-	-	LEIGHANNE N ORDNER - 11 HARLEY RD TOMS RIVER NJ 08755
B	02	01	01	05	29	F	-	-	-	11	04	-	-	JUDITH - SUSSKIND - 2 HEKEL RD LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

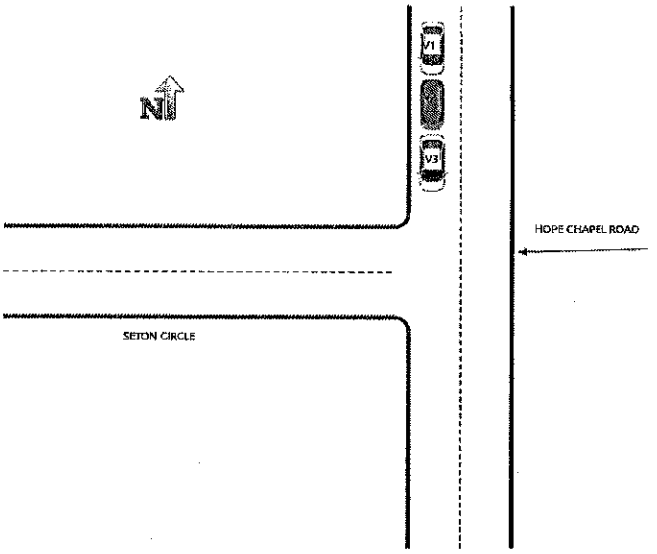
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033582

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V1 STATED THAT THE PERSON IN FRONT OF HER STOPPED SHORT, AND SHE COULD NOT STOP IN TIME. DRIVER OF V2 STATED THAT SHE WAS SOUTHBOUND ON HOPE CHAPEL ROAD, SHE STOPPED AND WAS HIT FROM BEHIND THAT CAUSED HER TO STRIKE THE VEHICLE IN FRONT OF HER, A WHITE KIA, NEWER MODEL, IT HAD THE NEW KIA EMBLEM. THE DRIVER OF THE KIA LEFT PRIOR TO POLICE ARRIVAL, ACCORDING TO DRIVER 2 THE KIA HAD NO DAMAGE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
YOUMANS R	250	MY	329	☒ Pending ☐ Complete

PAGE 3 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☒ Non-Reportable ☐ Change Report

1 Case Number	22-033582
2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1008
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	HOPE CHAPEL RD (Road Name)
At Intersection With	
☒ Feet / ☐ Miles	100
☒ N ☐ E ☐ S ☐ W of:	SETON CIRCLE
11 Speed Limit	40
12 Route No. / Suffix / 13 Milepost	
16 Speed Limit	25
17 Cross Road Name	
18 Ramp ☐ To ☐ From:	
19 ☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	40.10478
22 Longitude	-74.24408

Vehicle 1

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

Vehicle 2

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

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

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

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

96	05
97	-
98	01
99	05
100a	01
100b	04
101	02
102	01
103	05
104	3
105	01
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	03
117	-
118a	25
118b	-
119a	-
119b	-
120a	01
120b	-
121a	-
121b	-
122	08
123	-
124	03
125	-
126a	26
126b	-
126c	-
126d	-
126e	26
127a	-
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	-
132	-
133	01
134	01

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

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

1 Case Number: 22-032102
2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01
3 Station/Precinct:
10 Crash Occurred On: LANES MILL RD (Road Name)
11 Speed Limit: 40
12 Route No.: CR 548 — Suffix — 13 Milepost
18 Speed Limit: 40
☐ At Intersection With
14: 100 — 15: ☒ Feet ☐ Miles — 16: ☒ N ☐ E ☐ S ☐ W of: OCEAN AVE (17 Cross Road Name)
19 Ramp: ☐ To ☐ From: -
☐ NB ☐ EB ☐ SB ☐ WB
20 Route/Name
4 Date of Crash (mm dd yy): 04/22/22
5 Day Of Week: FRIDAY
6 Time (use 2400 hrs): 1647
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: 1
21 Latitude: 40.081770
22 Longitude: -74.157640

	Vehicle 1	Vehicle 2
Veh # (23 / 53)	1	2
Policy No. (24 / 54)	919229486	951592706
NJ Ins. Code (25 / 55)	135	134
Type	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name (26 / 56)	MICHELLE J USI -	ERIC A ANDERSON JR JR
Sex (29 / 59)	F	M
Number & Street (27 / 57)	1407 SOUTH ST	310 JOE PARKER RD # C
City / State / Zip (28 / 58)	LAKEWOOD NJ 08701	LAKEWOOD NJ 08701
Eyes (30 / 60)	02	02
DL Class	D	D
Restrictions	-	-
Endorsements	-	-
State (31 / 61)	NJ	NJ
Driver's License Number (32 / 62)	U80325447162982	A58742326104902
DOB (33 / 63)	12/16/1998	04/17/1990
Expires mm yy (34 / 64)	12 24	04 26
Owner (35 / 65)	☐ Same As Driver — MICHELLE J USI -	☐ Same As Driver — ERIC A ANDERSON JR JR
Number & Street (36 / 66)	1407 SOUTH ST	310 JOE PARKER RD # C
City / State / Zip (37 / 67)	LAKEWOOD NJ 08701	LAKEWOOD NJ 08701
Make (38 / 68)	NISS	CHRY
Model (39 / 69)	VER	TC
Color (40 / 70)	WHI	GRY
Year (41 / 71)	2020	2012
Plate No. (42 / 72)	K34MNY	A53KPP
State (43 / 73)	NJ	NJ
VIN (44 / 74)	3N1CN8FV8LL810597	2C4RC1BG7CR293386
Expires (45 / 75)	06 24	11 22
Vehicle Removed To (46 / 76)	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
Authority (47 / 77)	☐ Owner ☒ Driver ☐ Police	☐ Owner ☒ Driver ☐ Police
Alcohol/Drug Test (48 / 78)	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
Hazardous Material (49 / 79)	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
Carrier No. (50 / 80)	☐ USDOT ☒ None ☐ MC/MX	☐ USDOT ☒ None ☐ MC/MX
GVWR/GCWR (51 / 81)	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity (52 / 82)	-	-
Number & Street	-	-
City / State / Zip	- - -	- - -

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

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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
V1	39:4-97	1514-A-293476	-		-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	23	F	-	-	-	11	04	-	-	MICHELLE J USI - 1407 SOUTH ST LAKEWOOD NJ 08701
B	V2	01	01	04	32	M	06	08	01	11	04	-	-	ERIC A ANDERSON JR JR 310 JOE PARKER RD # C LAKEWOOD NJ 08701
C	V2	04	01	05	3	M	-	-	-	05	05	-	-	NOAH - ANDERSON - 310 JOE PARKER RD # C LAKEWOOD NJ 08701
D	V2	06	01	05	2	M	-	-	-	05	05	-	-	NASIH - ANDERSON - 310 JOE PARKER RD # C LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

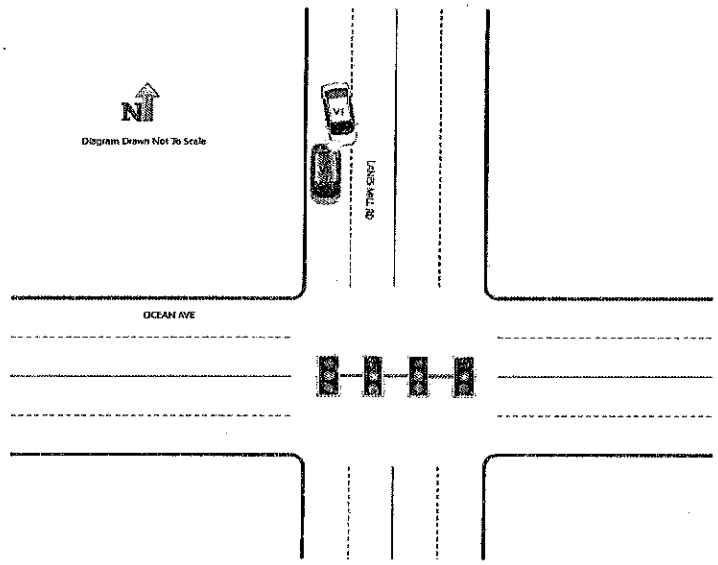
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-032102

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V2 stated he was stopped in traffic when he was struck at the 7 o'clock by V1. Driver of V2 stated he had complaint of pain to his lower back and subsequently refused medical assistance at this time. Driver of V2 stated he will be going to Ocean Medical Center later in the day.

Driver of V1 stated she had started to fall asleep while she was operating her vehicle which caused her to strike V2.

The result of the investigation revealed that Driver of V1 was at fault due to her becoming tired while operating her vehicle which caused her to strike V2. It should be noted Driver of V1 did not show any indicators of impairment but was transported to her residence by police due to her being tired.

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032295
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/22/22
5 Day Of Week	FRIDAY
6 Time (use 2400 hrs)	2335
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	CROSS ST
At Intersection With	☐
Road Name	CROSS ST
Dir	-
11 Speed Limit	45
12 Route No.	0626
Suffix	-
13 Milepost	-
18 Speed Limit	25
☒ Feet ☐ Miles	300
☐ N ☒ E ☐ S ☐ W of:	MAPLEHURST AVE
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.078820
22 Longitude	-74.253680

Vehicle 1

23 Veh #	1
24 Policy No.	5173-D09-30B-001
25 NJ Ins. Code	122
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	AZARPASHA
Initial	-
Last Name	HUSEYNLI
29 Sex	M
27 Number & Street	405 PROSPERITY COURT
28 City	TOMS RIVER
State	NJ
Zip	08755
30 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	H94330710007942
33 DOB (mm dd yyyy)	07/28/1994
34 Expires (mm yy)	07 24
35 Owner's First Name	AZARPASHA
Initial	-
Last Name	HUSEYNLI
☒ Same As Driver	
36 Number & Street	405 PROSPERITY COURT
37 City	TOMS RIVER
State	NJ
Zip	08755
38 Make	JEEP
39 Model	GCH - GR
40 Color	BLU
41 Year	2014
42 Plate No.	X27PUF
43 State	NJ
44 VIN	1C4RJFBG9EC269251
45 Expires	03 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

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

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	27	M	-	-	-	11	04	-	-	AZARPASHA - HUSEYNLI - 405 PROSPERITY COURT TOMS RIVER NJ 08755
B	V1	03	01	05	26	F	-	-	-	11	04	-	-	SAFURA - HUSEYNLI - 405 PROSPERITY CT TOMS RIVER NJ 08755
C	V1	04	01	05	08M	M	-	-	-	06	06	99	-	DANIEL - HUSEYNLI - 405 PROSPERITY CT TOMS RIVER NJ 08755
D														

New Jersey Police Crash Investigation Report

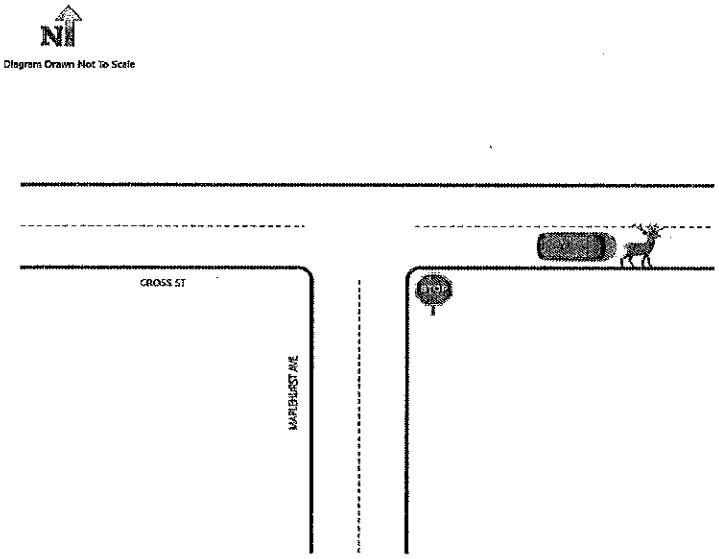
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032295

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

THE DRIVER OF V1 STATED THAT HE WAS TRAVELING EASTBOUND ON CROSS ST. WHILE TRAVELING EASTBOUND, A DEER CAME OUT OF THE NEARBY WOODS AND STRUCK THE FRONT OF V1. DEER WAS LOCATED AND DECEASED FROM THE IMPACT.

NO INJURIES WERE REPORTED ON SCENE.

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032300
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	CROSS ST
Road Name	
Dir	-
11 Speed Limit	45
12 Route No.	0626
Suffix	-
13 Milepost	-
18 Speed Limit	25
☐ At Intersection With	
☒ Feet ☐ Miles	300
☐ N ☒ E ☐ S ☐ W of:	MAPLEHURST AVE
17 Cross Road Name	
19 ☐ To Ramp ☐ From:	-
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/22/22
5 Day Of Week	FRIDAY
6 Time (use 2400 hrs)	2354
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.078820
22 Longitude	-74.253680

Vehicle 1

23 Veh #	1
24 Policy No.	4602-55-22-02
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	JOHN
Initial	D
Last Name	CETIN
29 Sex	M
27 Number & Street	33 CAMBRIDGE CT
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	C28534076407012
33 DOB mm dd yyyy	07/10/2001
34 Expires mm yy	07 23
35 Owner's ☐ Same As Driver	☐
First Name	ATILA
Initial	-
Last Name	CETIN
36 Number & Street	33 CAMBRIDGE DR
37 City	JACKSON
State	NJ
Zip	08527
38 Make	NISS
39 Model	ALT
40 Color	WHI
41 Year	2013
42 Plate No.	S41MPP
43 State	NJ
44 VIN	1N4BL3AP0DC135387
45 Expires	07 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority ☒ Owner ☐ Driver ☐ Police	
48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending	
49 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class - Placard No. -	
50 Carrier No. ☐ USDOT - ☒ None ☐ MC/MX -	
51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

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

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	20	M	-	-	-	11	04	-	-	JOHN D CETIN 33 CAMBRIDGE CT LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

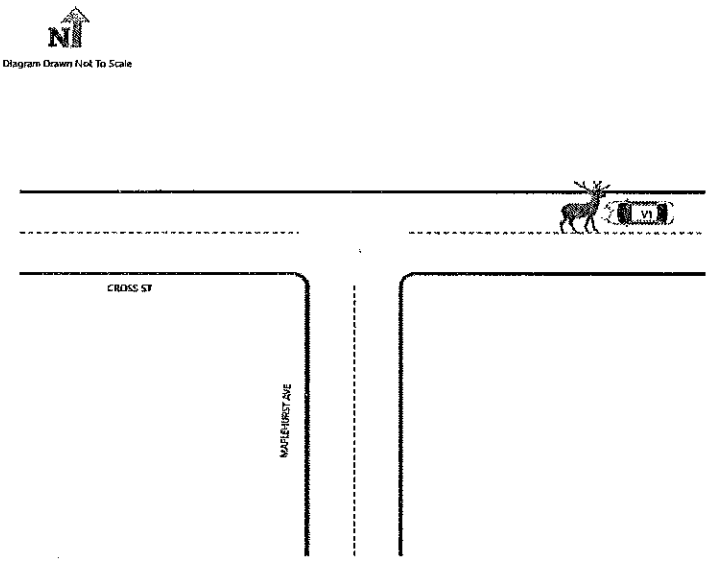
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032300

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

THE DRIVER OF V1 STATED HE WAS TRAVELING WESTBOUND ON CROSS ST. WHILE TRAVELING WESTBOUND, A DEER CAME OUT OF THE NEARBY WOODS AND STRUCK THE FRONT OF V1. DEER WAS DECEASED ON SCENE.

NO INJURIES WERE REPORTED ON SCENE.

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

PAGE 1 OF 4 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032344
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	145 COUNTRY CLUB DR
☐ At Intersection With	Road Name
☐ Feet ☐ N ☐ E of:	Dir
☐ Miles ☐ S ☐ W	11 Speed Limit: 10
12 Route No.	Suffix
13 Milepost	16 Speed Limit
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	20 Route/Name
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/23/22
5 Day Of Week	SATURDAY
6 Time (use 2400 hrs)	0155
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.10881
22 Longitude	-74.24212

Vehicle 1

23 Veh #	1
24 Policy No.	G01 1524333 00
25 NJ Ins. Code	392
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MARIAH A CREADLE
29 Sex	F
27 Number & Street	26 JAMES ST. APT C-9
28 City / State / Zip	TOMS RIVER NJ 08753
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	2 / D / - / - / NJ
32 Driver's License Number	C72795196152932
33 DOB mm dd yyyy	02/18/1993
34 Expires mm yy	02 26
35 Owner's First Name / Initial / Last Name	☐ Same As Driver DALE J DABNEY JR
36 Number & Street	12 COLGATE DR
37 City / State / Zip	TOMS RIVER NJ 08757
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	HOND / ACC / SIL / 2022 / K15PLH / NJ
44 VIN	1HGCV1F40NA011016
45 Expires	12 24
46 Vehicle Removed To	FREEDOM TOWING & RECOVERY
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	939 862 162
55 NJ Ins. Code	054
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	- - -
59 Sex	-
57 Number & Street	-
58 City / State / Zip	- - -
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	- / - / - / - / -
62 Driver's License Number	-
63 DOB mm dd yyyy	-
64 Expires mm yy	- -
65 Owner's First Name / Initial / Last Name	☐ Same As Driver DAKOTA C NERON
66 Number & Street	221 CEDAR SWAMP ROAD
67 City / State / Zip	JACKSON NJ 08527
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	RAM / 250 / WHI / 2014 / G45NKV / NJ
74 VIN	3C6UR5CL2EG280430
75 Expires	03 23
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

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

PAGE 2 OF 4 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032344
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	145 COUNTRY CLUB DR
☐ At Intersection With	
Road Name	
☐ Feet ☐ Miles	
☐ N ☐ E ☐ S ☐ W of:	
11 Speed Limit	10
Dir	
12 Route No.	
Suffix	
13 Milepost	
18 Speed Limit	
14	
15	
16	
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash mm dd yy	04/23/22
5 Day Of Week	SATURDAY
6 Time (use 2400 hrs)	0155
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.10881
22 Longitude	-74.24212

Vehicle 1

23 Veh #	3
24 Policy No.	930124839
25 NJ Ins. Code	134
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name / 29 Sex	
27 Number & Street	
28 City / State / Zip	
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	
32 Driver's License Number / 33 DOB mm dd yyyy / 34 Expires mm yy	
35 Owner's First Name / Initial / Last Name	☐ Same As Driver: ANDREW G KOREN
36 Number & Street	837 DONEGAL COURT
37 City / State / Zip	TOMS RIVER / NJ / 08753
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	JEEP / GRA / WHI / 2014 / B99HYF / NJ
44 VIN / 45 Expires	1C4RJFBG1EC567597 / 07 22
46 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

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

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	34	F	-	-	01	11	04	-	-	ASHLEY - BURKE - 23 REDHOOK BAY DR TOMS RIVER NJ 08757
B	V1	03	01	05	33	M	-	-	01	11	04	-	-	DALE J DABNEY JR 12 COLGATE DR TOMS RIVER NJ 08757
C														
D														

New Jersey Police
Crash Investigation Report

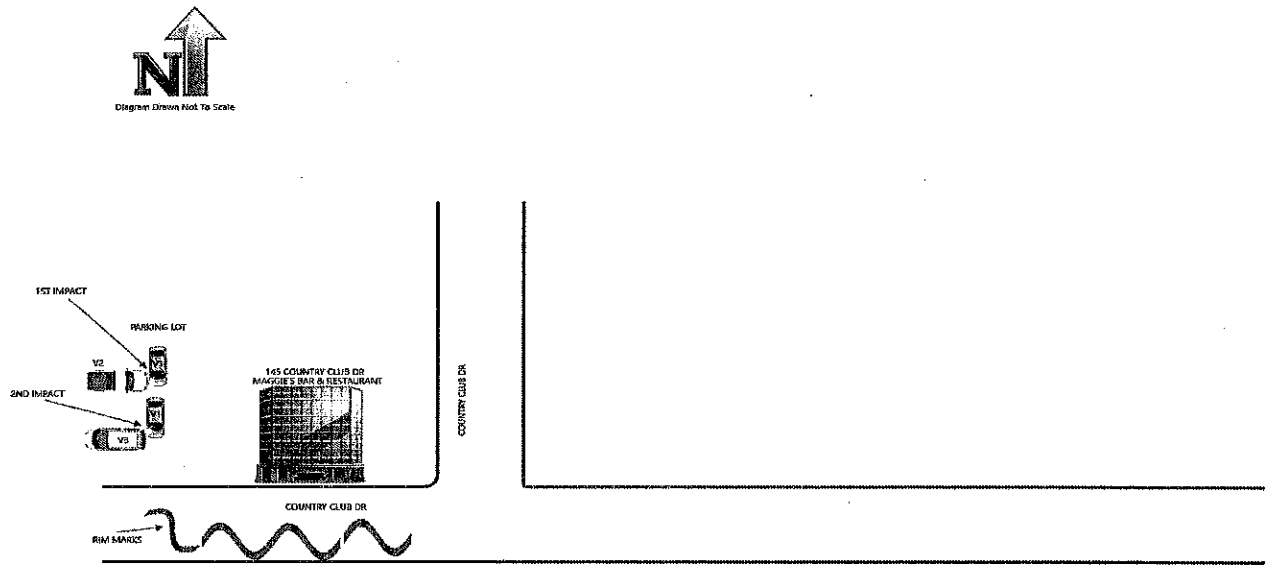
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-032344

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V1 STATED SHE WAS LEAVING 145 COUNTRY CLUB DR AND ANOTHER VEHICLE DROVE AROUND V1 WHILE SIDE SWIPING IT. DRIVER OR PASSENGER OF V1 COULD NOT GIVE A DESCRIPTION OF THE VEHICLE THAT THEY STATED SIDE SWIPED THEIR VEHICLE OR IN WHAT DIRECTION IT APPARENTLY FLED TOWARDS TO. V1 WAS LATER FOUND IN THE AREA OF SOUTH LAKE DR & HOPE CHAPEL RD BY OTHER RESPONDING UNITS. V1 SUSTAINED A BLOWN TIRE AND DAMAGED RIM AT THE 2:00 POSITION. THERE WERE MARKS THAT WERE FOUND FROM THE MAGGIE'S PARKING LOT THAT LED ALL THE WAY DOWN COUNTRY CLUB DR AND ONTO HOPE CHAPEL RD TOWARDS SOUTH LAKE DR WHICH WAS THE ENDING LOCATION OF V1. V1 DRIVER DID NOT SHOW ANY SIGNS OF IMPAIRMENT, BUT THE PASSENGER OF V1 DID SHOW SIGNS OF BEING IMPAIRED WHILE SPEAKING TO HIM. V1 DRIVER INSISTED THAT SHE WAS DRIVING THE VEHICLE AND THAT NO ONE ELSE AND AT NO OTHER TIME WAS ANYONE ELSE OPERATING V1.

OWNER OF V2 STATED THAT HE AND A FRIEND WERE SITTING ON THE THE CAB OF HIS VEHICLE IN THE PARKING LOT OF MAGGIE'S. V2 OWNER SAID THAT WHILE THEY WERE SITTING ON THE CAB, HE SUDDENLY FELT THAT HIS VEHICLE MAY HAVE BEEN STRUCK BY ANOTHER VEHICLE. V2 OWNER DESCRIBED THE SUSPECT VEHICLE AS A SILVER OR LIGHT BLUE HONDA, WHICH INITIALLY MATCHES THE DESCRIPTION OF V1. V2 SUSTAINED VERY MINOR DAMAGE

AN EMPLOYEE, WHO REGULARLY OPERATES V3, CAME OUT DUE TO BEING INFORMED THAT HER VEHICLE MAY HAVE BEEN STRUCK BY THE SUSPECT VEHICLE. THE EMPLOYEE SHOWED ME MINOR DAMAGE ON V3 AT THE 5:00 POSTION WHICH WAS NOT THERE PRIOR TO ARRIVAL AT HER WORK PLACE. THE EMPLOYEE DID NOT WITNESS THE CRASH AND OTHER STAFF

***CONTINUE ON TO NARRATIVE PAGE 2...**

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MAHECHA J	390	LNJ	322	☐ Pending ☒ Complete

New Jersey Police
Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-032344

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

***CONTIUNED FROM NARRATIVE PAGE 1...**

FROM THE BAR INFORMED ME THAT THERE WAS NO VIDEO SURVEILLANCE ON THE PROPERTY.

BASED ON THE STATEMENTS FROM ALL PARTIES PRESENT AT EACH SCENE, AND EVIDENCE OBSERVED FROM THE BAR'S PARKING LOT TO THE ENDING LOCATION OF WHICH V1 WAS FOUND, I FIND V1 AT FAULT FOR THE CRASH. NO INJURIES WERE REPORTED OR OBSERVED AT EITHER SCENE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MAHECHA J	390	LNJ	322	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032394
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/23/22
5 Day Of Week	SATURDAY
6 Time (use 2400 hrs)	0658
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	SHORROCK ST
At Intersection With	☐
Road Name	
Dir	-
11 Speed Limit	40
12 Route No.	-
Suffix	-
13 Milepost	-
☒ Feet / ☐ Miles	100
☐ N ☐ E ☒ S ☐ W of:	DUMBARTON DR
14	15
16	
17 Cross Road Name	-
18 Speed Limit	25
19 Ramp ☐ To ☐ From	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.03585
22 Longitude	-74.15955

Vehicle 1

23 Veh #	1
24 Policy No.	952279879
25 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	ZAREN
Initial	-
Last Name	BASANOW
29 Sex	M
27 Number & Street	40A PHEASANT STREET
28 City	MANCHESTER
State	NJ
Zip	08759
30 Eyes	2
DL Class	B
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	B07247920010682
33 DOB (mm dd yyyy)	10/12/1968
34 Expires (mm yy)	10 25
35 Owner's First Name	ZAREN
Initial	-
Last Name	BASANOW
☐ Same As Driver	
36 Number & Street	40A PHEASANT STREET
37 City	MANCHESTER
State	NJ
Zip	08759
38 Make	FORD
39 Model	EXP
40 Color	4
41 Year	2003
42 Plate No.	E43PDY
43 State	NJ
44 VIN	1FMDU73K63UC47480
45 Expires	09 22
46 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

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

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

DAMAGE TO A FENCE BETWEEN SHORROCK ST AND ARIZONA DR.

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	53	M	-	-	-	11	04	-	-	ZAREN - BASANOW - 40A PHEASANT STREET MANCHESTER NJ 08759
B														
C														
D														

New Jersey Police Crash Investigation Report

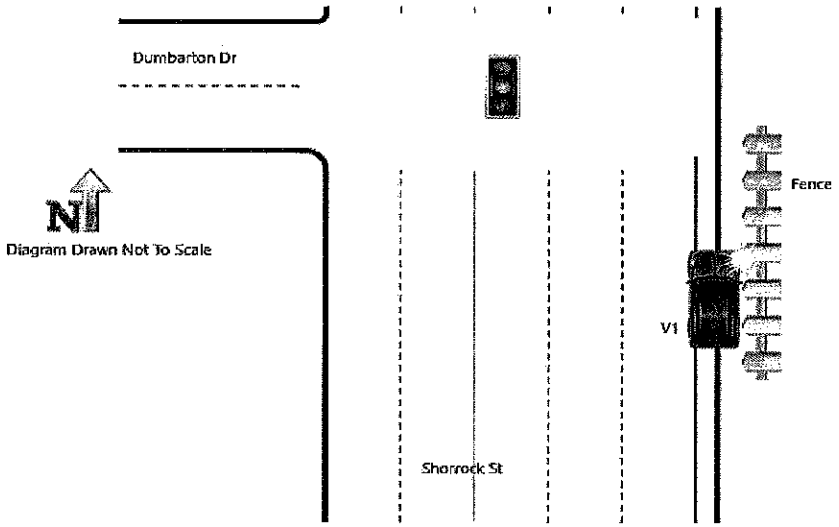
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032394

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling Northbound on Shorrock St, had an unknown mechanical failure, ran off the road to the right, and crashed into a fence.

Driver 1 stated he was traveling Northbound on Shorrock St when he heard a loud pop. His vehicle then veered of the right and he could not control the vehicle. This caused him to run off the road to the right and crash into a fence.

Driver 1 did not report any injuries and vehicle 1 sustained major damage and was disabled.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GARRETSON C	391	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032400
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	MADISON AVENUE -
11 Speed Limit	45
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	35
☒ At Intersection With	W. KENNEDY BLVD.
Road Name	
Dir	
☐ Feet ☐ Miles	☐ N ☐ E ☐ S ☐ W of:
14	15
16	
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	-
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/23/22
5 Day Of Week	SATURDAY
6 Time (use 2400 hrs)	0743
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	2
21 Latitude	40.10693
22 Longitude	-74.21948

Vehicle 1

23 Veh #	1
24 Policy No.	41TRDCA000053-01
25 NJ Ins. Code	120
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	TAQUANAH
Initial	I
Last Name	BOONE -
29 Sex	F
27 Number & Street	450 MADISON AVE
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	B65037326955982
33 DOB mm dd yyyy	05/16/1998
34 Expires mm yy	05 26
35 Owner's First Name Initial Last Name	☐ Same As Driver - - ALTERNATIVE REN -
36 Number & Street	592 HIGHWAY 70 WEST
37 City	BRICK
State	NJ
Zip	08724
38 Make	HOND
39 Model	CIV
40 Color	1
41 Year	2018
42 Plate No.	K14MBA
43 State	NJ
44 VIN	SHHFK7H69JU410495
45 Expires	01 23
46 Vehicle Removed To	TILTON'S AUTO BODY
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	F690713-3
55 NJ Ins. Code	426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	JOSEPH
Initial	M
Last Name	PALMIERI -
59 Sex	M
57 Number & Street	1423 TANGLEWOOD LN
58 City	LAKEWOOD
State	NJ
Zip	08701
60 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	P03104107402842
63 DOB mm dd yyyy	02/22/1984
64 Expires mm yy	02 26
65 Owner's First Name Initial Last Name	☐ Same As Driver JOSEPHINE - PALMIERI -
66 Number & Street	1423 TANGLEWOOD LN
67 City	LAKEWOOD
State	NJ
Zip	08701
68 Make	CHEV
69 Model	SIL
70 Color	4
71 Year	2009
72 Plate No.	L77GDY
73 State	NJ
74 VIN	1GBHK44659E153867
75 Expires	01 23
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	02	23	F	08	07	02	11	00	02	6502	TAQUANAH I BOONE - 450 MADISON AVE LAKEWOOD NJ 08701
B	01	03	01	04	23	M	01	02	02	11	00	02	6502	DEMARQUAV K HUNTER - 10 MAPLEWOOD TER LAKEWOOD NJ 08701
C	02	01	01	05	38	M	-	-	-	11	00	-	-	JOSEPH M PALMIERI - 1423 TANGLEWOOD LN LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

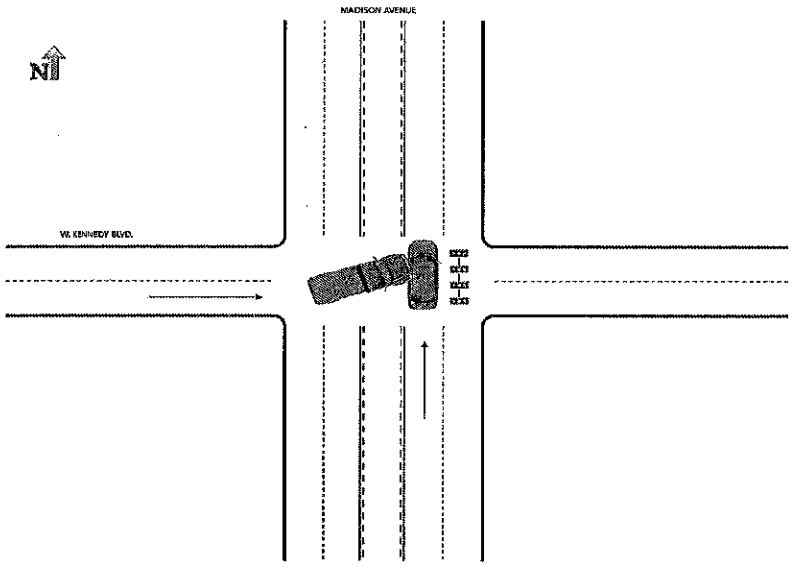
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-032400

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED SHE WAS TRAVELING NORTH ON MADISON AVENUE WHEN VEHICLE 2 WENT THROUGH A RED TRAFFIC LIGHT AT THE INTERSECTON WITH W. KENNEDY BLVD. BEFORE CRASHING INTO VEHICLE 1.

DRIVER OF VEHICLE 2 STATED HE WAS TRAVELING EAST ON W. KENNEDY BLVD. AND WHILE ATTEMPTING TO MAKE A LEFT TURN ONTO MADISON AVENUE HE CRASHED INTO VEHICLE 1. DRIVER 2 ALSO STATED "I DON'T KNOW WHAT COLOR THE TRAFFIC LIGHT WAS."

THIS INVESTIGATION DETERMINED THAT THE DRIVER OF VEHICLE 2 FAILED TO STOP AT A RED TRAFFIC LIGHT.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SEUNATH K	284	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032560
2 Police Dept of	LAKEWOOD PD
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	STATE HWY 70 E
At Intersection With	
Road Name	
Dir	E
11 Speed Limit	50
12 Route No.	0070
Suffix	-
13 Milepost	-
18 Speed Limit	45
☒ Feet / ☐ Miles	50
☐ N ☐ E / ☐ S ☒ W of:	SHORROCK ST
19 Ramp ☐ To / ☐ From:	-
17 Cross Road Name	
☐ NB ☐ EB / ☐ SB ☐ WB	25
4 Date of Crash (mm dd yy)	04/23/22
5 Day Of Week	SATURDAY
6 Time (use 2400 hrs)	1753
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.055560
22 Longitude	-74.161010

Vehicle 1

23 Veh #	1
24 Policy No.	HPA00002744142
25 NJ Ins. Code	411
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	CLAIRE / E / HAVILAND -
29 Sex	F
27 Number & Street	1647 TILFORD BLVD
28 City / State / Zip	BRICK / NJ / 08724
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / NJ
32 Driver's License Number / 33 DOB (mm dd yyyy) / 34 Expires (mm yy)	H09171266554992 / 04/16/1999 / 04 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver / GRACE / W / HAVILAND -
36 Number & Street	1647 TILFORD BLVD
37 City / State / Zip	BRICK / NJ / 08724
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	CHEV / MAL - MA / TN / 2000 / K80MCK / NJ
44 VIN / 45 Expires	1G1ND52J7Y6285326 / 12 22
46 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	F10384217-5
55 NJ Ins. Code	426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	LAUREN / K / GUEST -
59 Sex	F
57 Number & Street	64 ROCHESTER DRIVE
58 City / State / Zip	BRICK / NJ / 08723
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 / D / - / - / NJ
62 Driver's License Number / 63 DOB (mm dd yyyy) / 64 Expires (mm yy)	G91204437252952 / 02/24/1995 / 02 25
65 Owner's First Name / Initial / Last Name	☒ Same As Driver / LAUREN / K / GUEST -
66 Number & Street	64 ROCHESTER DRIVE
67 City / State / Zip	BRICK / NJ / 08723
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	JEEP / LIB / WHI / 2009 / VIB1N / NJ
74 VIN / 75 Expires	1J8GN28K39W513960 / 08 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	23	F	-	-	-	11	04	-	-	CLAIRE E HAVILAND - / 1647 TILFORD BLVD BRICK NJ 08724
B	02	01	01	05	27	F	-	-	-	11	04	-	-	LAUREN K GUEST - / 64 ROCHESTER DRIVE BRICK NJ 08723
C														
D														

New Jersey Police Crash Investigation Report

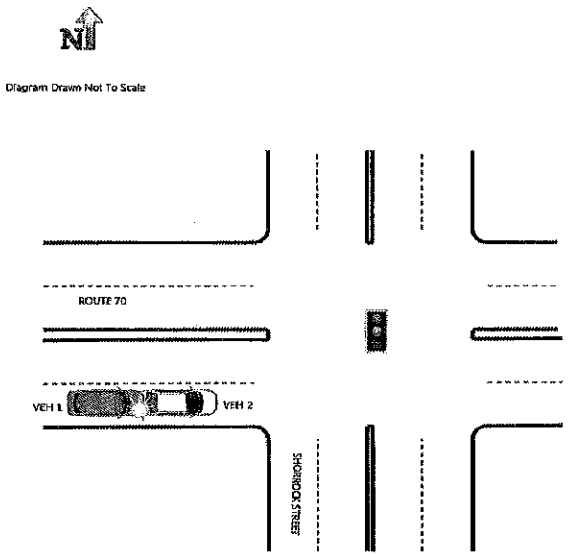
Police Dept: LAKEWOOD PD Code: 01

Station: - Case No: 22-032560

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was traveling East on Rt 70 approaching the intersection with Shorrock Street. She stated vehicle 2 was stopped at the red light in front of her and she did not stop in time. Due to this, she crashed into the rear of vehicle 2.

Driver of vehicle 2 stated she was stopped in the east bound lane of Rt 70 at the traffic light with Shorrock Street. She stated as she was stopped in traffic, vehicle 1 crashed into the rear of her vehicle.

Vehicle 1 sustained moderate damage to the front hood of the vehicle and was left in the parking lot of 1900 Rt 70 to await roadside assistance. Vehicle 2 sustained minor damage to the rear bumper and was driven from the scene. No injuries were reported at the scene.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VADINO, L	419	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032988
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/24/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	2032
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	ARLINGTON AVE (Road Name) - (Dir)
11 Speed Limit	25
12 Route No. / Suffix / 13 Milepost	- / - / -
18 Speed Limit	25
At Intersection With	ELM ST
Feet / Miles	5 Feet
N ☐ E ☐ S ☒ W of:	S of ELM ST
17 Cross Road Name	
19 Ramp ☐ To ☐ From	
NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	40.082970
22 Longitude	-74.208320

Vehicle 1

23 Veh #	1
24 Policy No.	110 1559 E060 30D
25 NJ Ins. Code	962
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	EDUARDO - HERNANDEZ-RAMIR
29 Sex	M
27 Number & Street	113 ALRINGTON AVE
28 City / State / Zip	LAKEWOOD / NJ / 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / I / - / - / NJ
32 Driver's License Number	H27181920007012
33 DOB (mm dd yyyy)	07/13/2001
34 Expires (mm yy)	07 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ADRIAN - DELAROSA
36 Number & Street	40 GOLDWEBER AVE
37 City / State / Zip	JACKSON / NJ / 08527
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	CHRY / 300 / BLK / 2006 / W75PHK / NJ
44 VIN	2C3KA43R16H221493
45 Expires	12 22
46 Vehicle Removed To	TILTON'S AUTO BODY
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine	
Results: 0. - % ☐ Pending	
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class / Placard No.	
50 Carrier No.	☐ USDOT ☒ None
☐ MC/MX	
51 GVWR/GCWR	☒ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs	
☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

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

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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:3-10	292604			
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	20	M	-	-	-	11	04	-	-	EDUARDO - HERNANDEZ-RAMIREZ - 113 ALRINGTON AVE LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

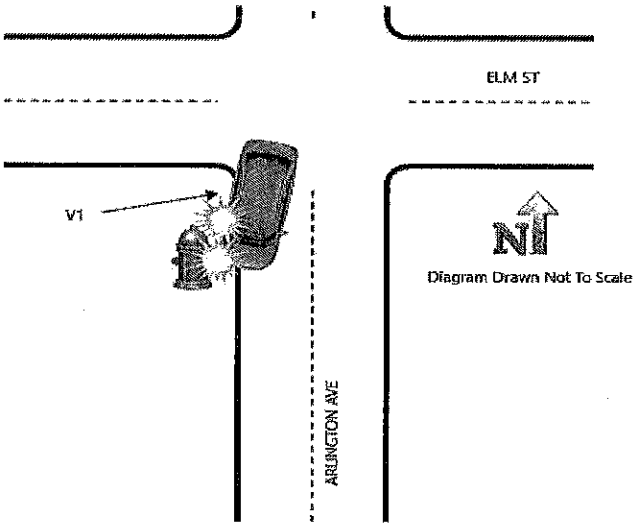
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032988

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle one stated he was traveling south on Arlington Ave. While driving, he began using cell phone to change songs. While using his phone, his vehicle veered right, struck the curb, ultimately hitting a fire hydrant.

As a result of my investigation, I determined driver of vehicle one to at fault due to using a cell phone while operating a motor vehicle.

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032903
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	1ST STREET
Road Name	
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	25
☐ At Intersection With	
☒ Feet / ☐ Miles	1000
☐ N ☐ E / ☐ S ☒ W	of: LEXINGTON AVENUE
19 Ramp ☐ To / ☐ From:	-
17 Cross Road Name	-
20 Route/Name	-
☐ NB ☐ EB / ☐ SB ☐ WB	
4 Date of Crash (mm dd yy)	04/24/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	1441
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.091410
22 Longitude	-74.211990

Vehicle 1

23 Veh #	1
24 Policy No.	939368953
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MIRIAM - LEVIN -
29 Sex	F
27 Number & Street	470 MANETTA AVE
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / NJ
32 Driver's License Number	L29305580053032
33 DOB (mm dd yyyy)	03/29/2003
34 Expires (mm yy)	03 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver YEHOSHUA Y LEVIN -
36 Number & Street	470 MANETTA AVE
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / COR / SIL / 2010 / K97LXR / NJ
44 VIN	1NXBU4EE8AZ215270
45 Expires	11 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: - Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	G01131948901
55 NJ Ins. Code	392
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	JORGE C GUZMAN MORALES -
59 Sex	M
57 Number & Street	1048 DOVER ST
58 City / State / Zip	TOMS RIVER NJ 08753
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 / D / - / - / NJ
62 Driver's License Number	G95214106302658
63 DOB (mm dd yyyy)	02/25/1965
64 Expires (mm yy)	02 25
65 Owner's First Name / Initial / Last Name	☐ Same As Driver JORGE C GUZMAN MORALES -
66 Number & Street	1048 DOVER ST
67 City / State / Zip	TOMS RIVER NJ 08753
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	CHRY / T / WHI / 2008 / R84PDV / NJ
74 VIN	2A8HR54P08R740767
75 Expires	09 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: - Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	-	-	-	-	-
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	19	F	-	-	-	11	04	-	-	MIRIAM - LEVIN - 470 MANETTA AVE LAKEWOOD NJ 08701
B	02	01	01	05	57	M	-	-	-	11	04	-	-	JORGE C GUZMAN MORALES - 1048 DOVER ST TOMS RIVER NJ 08753
C														
D														

New Jersey Police Crash Investigation Report

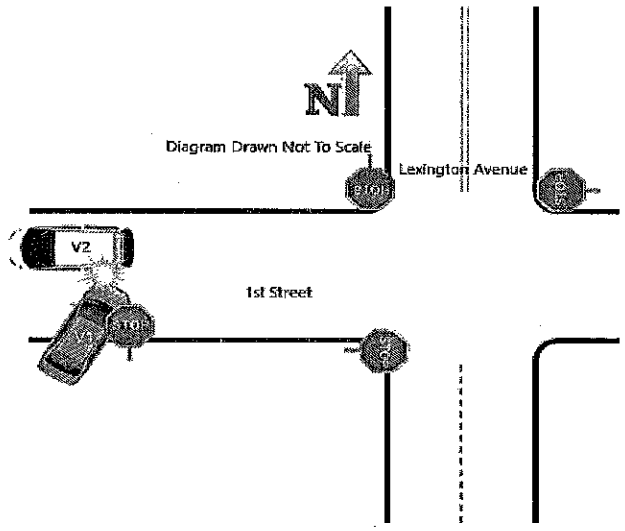
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032903

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated she was pulling out of a parking lot, making a right onto 1st street. She looked both way and pulled out. She didn't see vehicle 2 until she crashed into it. Vehicle 1 sustained damage to the driver side front fender and bumper.

Driver 2 stated he was driving west on 1st Street when vehicle 2 pulled out of the parking lot and crashed into him. Vehicle 2 sustained damage to the driver side rear door area.

No injuries were reported.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MANDELBAUM, J	420	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-031619		
2 Police Dept of	LAKEWOOD TOWNSHIP P	Code	01
3 Station/Precinct			
4 Date of Crash (mm dd yy)	04/21/22		
5 Day Of Week	THURSDAY		
6 Time (use 2400 hrs)	1414		
7 Municipality Code	1514		
8 Total Killed	--		
9 Total Injured	--		
10 Crash Occurred On:	NEW HAMPSHIRE AVE		
☒ At Intersection With	Road Name	Dir	
☐ Feet ☐ Miles	☐ N ☐ E ☐ S ☐ W of:	CHESTNUT ST	
11 Speed Limit	45		
12 Route No. / Suffix / 13 Milepost			
18 Speed Limit	25		
19 Ramp ☐ To ☐ From:	17 Cross Road Name		
20 Route/Name			
☐ NB ☐ EB ☐ SB ☐ WB			
21 Latitude	40.05170		
22 Longitude	-74.19647		

Vehicle 1

23 Veh #	1
24 Policy No.	AOJ2317829404027
25 NJ Ins. Code	370
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MOHAMAD - MAHMUD -
29 Sex	M
27 Number & Street	20 VANCOUVER RD
28 City / State / Zip	MORGANVILLE NJ 07751
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	2 / D / - / - / NJ
32 Driver's License Number	M01685600010972
33 DOB (mm dd yyyy)	10/16/1997
34 Expires (mm yy)	10 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - FREEHOLD FORD II -
36 Number & Street	3572 ROUTE 9
37 City / State / Zip	FREEHOLD NJ 07728
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD / S7E / WHI / 2015 / XDTX34 / NJ
44 VIN	NM0LS7EX8F1209105
45 Expires	03 23
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	4563474909
55 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	RICARDO - BARRIOSHERNANDE -
59 Sex	M
57 Number & Street	214 E 5TH ST
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	2 / D / - / - / NJ
62 Driver's License Number	B06696550002832
63 DOB (mm dd yyyy)	02/07/1983
64 Expires (mm yy)	02 25
65 Owner's First Name / Initial / Last Name	☐ Same As Driver RICARDO - BARRIOSHERNAND -
66 Number & Street	214 E 5TH ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	BUIC / ENC / BLK / 2011 / LEZB17 / NJ
74 VIN	5GAKRBED2BJ355014
75 Expires	03 23
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	24	M	-	-	-	11	04	-	-	MOHAMAD - MAHMUD - 20 VANCOUVER RD MORGANVILLE NJ 07751
B	02	01	01	05	39	M	-	-	-	11	04	-	-	RICARDO - BARRIOSHERNANDEZ - 214 E 5TH ST LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

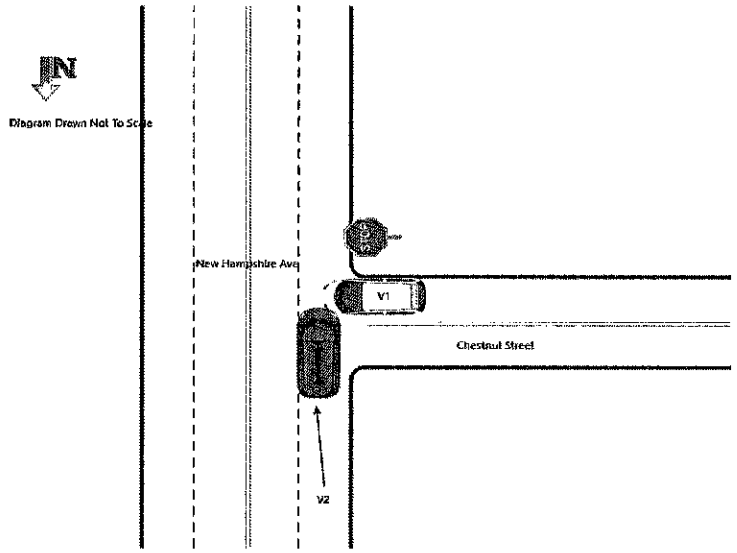
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-031619

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle 1 stated that he was on Chestnut Street attempting to make a left turn on to New Hampshire Ave. Driver 1 stated that some traffic stopped to allow him to turn but he did not see vehicle 2 and crashed into the front of vehicle 2. There were no injuries reported or observed to the occupant of vehicle 1. Vehicle 1 sustained what appeared to be slight to moderated damage to the front of the vehicle and was driven from the scene.

The driver of vehicle 2 stated that he was traveling south bound on New Hampshire Ave when vehicle 1 turned in front of him crashing into the front of his vehicle. There were no injuries reported or observed to the occupant of vehicle 2. Vehicle 2 sustained what appeared to be slight to moderate damage to the front of the vehicle and was driven from the scene.

Based on driver statements I find driver 1 at fault of the crash for failure to obey stop sign.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MOONEY JR M	330	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-027826
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash mm dd yy	04/12/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1225
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	CEDARBRIDGE AVENUE -
At Intersection With Road Name	
Dir	
11 Speed Limit	40
12 Route No.	0528
Suffix	-
13 Milepost	-
14 500 Feet / 15 Miles	
N ☐ E ☐ S ☒ W of:	ARLINGTON AVE
16	
17 Cross Road Name	
18 Speed Limit	25
19 Ramp ☐ To ☐ From:	-
20 Route/Name	
NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.085290
22 Longitude	-74.207920

Vehicle 1

23 Veh #	1
24 Policy No.	939625367
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	COOKIE M BETESH -
29 Sex	F
27 Number & Street	64 PONDEROSA DR
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / NJ
32 Driver's License Number	B28501367460902
33 DOB mm dd yyyy	10/08/1990
34 Expires mm yy	10 23
35 Owner's First Name / Initial / Last Name	☐ Same As Driver MORRIS M BETESH -
36 Number & Street	64 PONDEROSA DR
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	CHRY / TNC / BLK / 2012 / W30JSG / NJ
44 VIN	2C4RC1CG2CR338894
45 Expires	02 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority ☐ Owner ☐ Driver ☐ Police	
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	
49 Hazardous Material: ☐ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	
50 Carrier No.: ☐ USDOT - ☒ None; ☐ MC/MX -	
51 GVWR/GCWR: ☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	4328608643
55 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	JOSHUA - LEVENBERG -
59 Sex	M
57 Number & Street	3115 OTTAWA AVE S
58 City / State / Zip	MINNEAPOLIS MN 55416
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	- / D / - / - / MN
62 Driver's License Number	N104166513505
63 DOB mm dd yyyy	04/22/2002
64 Expires mm yy	04 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver SUSAN - LEVENBERG -
66 Number & Street	124 ST NICHOLAS AVE
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	MITS / OUT / BLK / 2021 / E12NNU / NJ
74 VIN	JA4ARUAU1MU003081
75 Expires	03 23
76 Vehicle Removed To	MOISHY'S TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority ☐ Owner ☒ Driver ☐ Police	
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	
80 Carrier No.: ☐ USDOT - ☒ None; ☐ MC/MX -	
81 GVWR/GCWR: ☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs	
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-	0.0.0.0	-	-	0.0.0.0	-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-	0.0.0.0	-	-	0.0.0.0	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	31	F	-	-	-	11	04	-	-	COOKIE M BETESH - 64 PONDEROSA DR LAKEWOOD NJ 08701 - -
B	V1	04	01	05	04M	F	-	-	-	06	06	-	-	RUTH - BETESH - 64 PONDEROSA DR LAKEWOOD NJ 08701 - -
C	V1	06	01	05	2	F	-	-	-	05	05	-	-	CHANA - BETESH - 64 PONDEROSA DR LAKEWOOD NJ 08701 - -
D	V1	07	01	05	5	F	-	-	-	07	07	-	-	STEPHANIE - BETESH - 64 PONDEROSA DR LAKEWOOD NJ 08701 - -

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

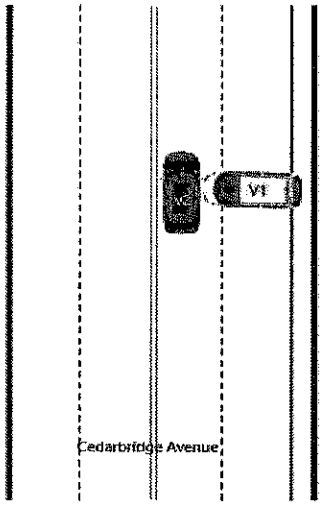
Station: - Case No: 22-027826

(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	
E	V1	09	01	05	10	F	-	-	-	11	04	-	-	SHERYL - BETESH - 64 PONDEROSA DR LAKEWOOD NJ 08701 - -
F	V2	01	01	05	19	M	-	-	-	11	04	-	-	JOSHUA - LEVENBERG - 3115 OTTAWA AVE S MINNEAPOLIS MN 55416 - -
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



N

Diagram Drawn Not To Scale

145 Crash Description/Narrative

Vehicle 1 was facing Westbound on Cedarbridge Avenue. Driver 1 stated that she was exiting the shopping plaza and stopped at the stop sign. Driver 1 said she decided to make a left turn onto Cedarbridge Avenue when she saw V2 traveling on the left lane and collided with it.

Vehicle 2 was traveling Northbound on Cedarbridge. Avenue. Driver 2 said that he was traveling in the left lane when he saw V1 collide with his car from the right side.

Investigation revealed that Vehicle 1 was facing Westbound, and Vehicle 2 traveled northbound on Cedarbridge Avenue. V1 failed to yield the right of way to V2 when exiting the shopping plaza. No injuries were reported.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CUZCO-BENITES W	407	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033651
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	FINCHLEY BLVD
11 Speed Limit	25
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	50
☐ At Intersection With / Road Name	
Dir	
☒ Feet / ☐ Miles	200
☐ N ☐ E ☐ S ☒ W of:	RIVER AVE
19 ☐ To / ☐ From Ramp	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash mm dd yy	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1545
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	1
21 Latitude	40.06047
22 Longitude	-74.21964

Vehicle 1

23 Veh #	1
24 Policy No.	BA2997BD
25 NJ Ins. Code	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	LUCSON - PIERRE -
29 Sex	M
27 Number & Street	1000 1HALF 3RD AVE APT 714
28 City / State / Zip	ASBURY PARK NJ 07712
30 Eyes / DL Class / Restrictions / Endorsements	2 / B / - / -
31 State	NJ
32 Driver's License Number	P41924920011692
33 DOB mm dd yyyy	11/10/1969
34 Expires mm yy	11 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - JAYS BUS SERVICE -
36 Number & Street	672 CROSS ST
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	THO / BUS / YEL / 2016 / F821S1 / NJ
44 VIN	4UZABRDU9GCGT5290
45 Expires	03 23
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☒ USDOT 1926134 ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☒ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	JAY'S BUS SERVICE
Number & Street	672 CROSS ST
City / State / Zip	LAKEWOOD NJ 08701

Vehicle 2

53 Veh #	2
54 Policy No.	41TRDCA000056-01
55 NJ Ins. Code	120
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	DEREK J SLATER -
59 Sex	M
57 Number & Street	28 N. MAIN ST. APT 8
58 City / State / Zip	NEW EGYPT NJ 08533
60 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
61 State	NJ
62 Driver's License Number	S51131647107832
63 DOB mm dd yyyy	07/16/1983
64 Expires mm yy	07 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver INC - JUST FOUR WHEEL -
66 Number & Street	324 E WHITE HORSE PIKE
67 City / State / Zip	GALLOWAY NJ 08205
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	FORD / TRA / BLK / 2019 / XHKF21 / NJ
74 VIN	1FTYR2CM6KKA15919
75 Expires	01 23
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☐ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	JUST FOR WHEELS INC
Number & Street	342 E. WHITE HORSE PIKE
City / State / Zip	GALLOWAY NJ 08205

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	52	M	-	-	-	11	04	-	-	LUCSON - PIERRE - 1000 1HALF 3RD AVE AF ASBURY PARK NJ 07712
B	02	01	01	04	38	M	-	-	-	11	01	-	-	DEREK J SLATER - 28 N. MAIN ST. APT 8 NEW EGYPT NJ 08533
C														
D														

New Jersey Police Crash Investigation Report

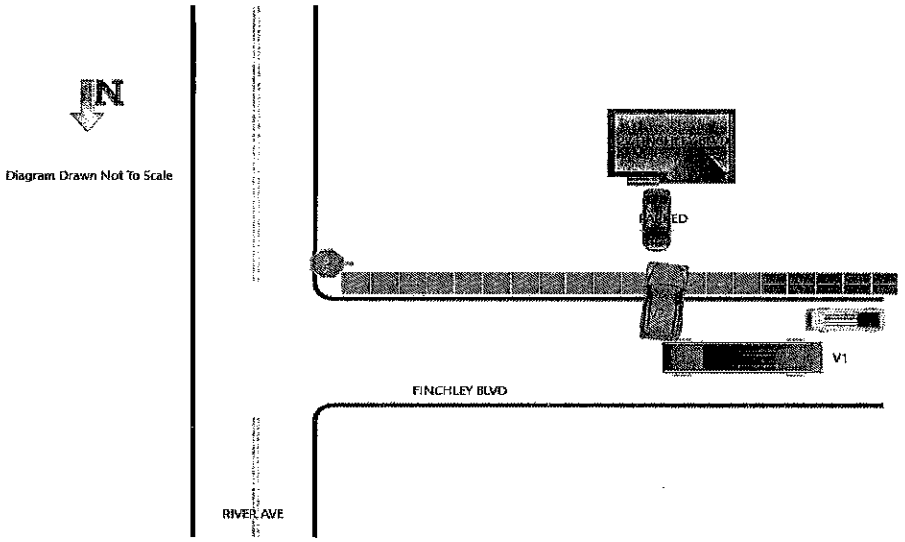
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033651

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 is insured by Central Insurers Group 1360 North Atherton St. State College, PA 16803.

Finchley Blvd. has no lane markings and vehicles are allowed to park along both sides of the street making it difficult for two vehicles traveling in opposite directions to pass during times of heavy traffic volume.

The driver of vehicle #1 reported that he asked the operator of vehicle #2 why he parked the way he did and asked him to move his vehicle further into the driveway so he could safely pass. The driver of vehicle #1 continued to travel down the roadway and was almost completely passed vehicle #2 when the driver side rear of the bus struck vehicle #2.

The operator of vehicle #2 reported that he had traveled West on Finchley Blvd. and as he approached his delivery destination of 22 Finchley Blvd. there was a small school bus approaching in the opposite direction. He reported that the driver of that bus motioned him to go but he indicated that he had to pull into 22 Finchley Blvd. and allowed the bus to pass him. At time vehicle #1 was reportedly behind him down the block stopping and dropping off children.

The operator of vehicle #2 reported that he entered the driveway and began making his delivery. The driver of vehicle #1 then pulled up and began exchanging words with him. He was asked to move his vehicle and tried to explain that he did not want to hit the vehicle that was parked in the driveway. He then proceeded to enter the driver seat of the vehicle to pull it forward when vehicle #1 struck his vehicle. It was unclear if the operator was still seated in the drivers seat of the vehicle or attempting to exit the vehicle when it was struck. He did complain of pain in his back but refused medical attention at the scene.

Vehicle #1 had minor scratches to the rear driver side of the rear bumper. Vehicle #2 sustained scratches to the passenger side of the rear bumper.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
KOWALESKI S	319	CM	332	☐ Pending ☒ Complete

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTION

Police Agency LAKEWOOD TOWNSHIP POLICE DEPT.
Station _____ Case No. 22-033651

1.	SHIMER	LEBER
2.	ABRAHAM	NEWMAN
3.	DAVID	HAIM
4.	YAKIM	NEWHOUSE
5.		
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46.		
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52.		
53.		
54.		

SCHOOL BUS
(full size)

● DRIVER				DOOR →	
1	2	3		4	5
6	7	8		9	10
11	12	13		14	15
16	17	18		19	20
21	22	23		24	25
26	27	28		29	30
31	32	33		34	35
36	37	38		39	40
41	42	43		44	45
46	47	48		49	50
51	52			53	54

MINIBUS

● DRIVER			DOOR →	
1	2		3	4
5	6		7	8
9	10		11	12
13	14		15	16

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033697
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1847
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	CROSS STREET
At Intersection With	☐
Road Name	CROSS STREET
Dir	-
11 Speed Limit	45
12 Route No.	-
Suffix	-
13 Milepost	-
14 Feet	☒
15 Miles	☐
16 N ☐ E ☐ S ☒ W	W
of:	RIVER AVE
18 Speed Limit	50
19 Ramp To ☐ From: ☐	-
17 Cross Road Name	-
20 Route/Name	-
NB ☐ EB ☐ SB ☐ WB ☐	04
21 Latitude	40.054310
22 Longitude	-74.220650

Vehicle 1

23 Veh #	1
24 Policy No.	2006283285
25 NJ Ins. Code	233
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	RACHEL I SHINFELD -
29 Sex	F
27 Number & Street	1070 TIMES SQUARE BLVD
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	BL / D / - / - / NJ
32 Driver's License Number	S34776376955844
33 DOB (mm dd yyyy)	05/05/1984
34 Expires (mm yy)	05 23
35 Owner's First Name / Initial / Last Name	☐ Same As Driver MORDECHAY D SHINFELD -
36 Number & Street	1070 TIMESQUARE BLVD
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD / T35 / WHI / 2015 / X10GNX / NJ
44 VIN	1FBZX2YM2FKA50910
45 Expires	05 22
46 Vehicle Removed To	MOSHE'S TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class - Placard No. -
50 Carrier No.	☐ USDOT - ☐ None ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	956608780
55 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	THOMAS A SMITH -
59 Sex	M
57 Number & Street	322 DALLAS DRIVE
58 City / State / Zip	TOMS RIVER NJ 08753
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	BR / D / - / - / NJ
62 Driver's License Number	S57787406107022
63 DOB (mm dd yyyy)	07/13/2002
64 Expires (mm yy)	07 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver THOMAS A SMITH -
66 Number & Street	322 DALLAS DRIVE
67 City / State / Zip	TOMS RIVER NJ 08753
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	FORD / STY / GRN / 1996 / N51PTK / NJ
74 VIN	1FTEF14N2TLC06293
75 Expires	03 23
76 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class - Placard No. -
80 Carrier No.	☐ USDOT - ☐ None ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	37	F	-	-	-	11	04	-	-	RACHEL I SHINFELD - 1070 TIMES SQUARE BL\LAKEWOOD NJ 08701 - -
B	01	01	01	05	19	M	-	-	-	11	04	-	-	THOMAS A SMITH - 322 DALLAS DRIVE TOMS RIVER NJ 08753 - -
C														
D														

New Jersey Police Crash Investigation Report

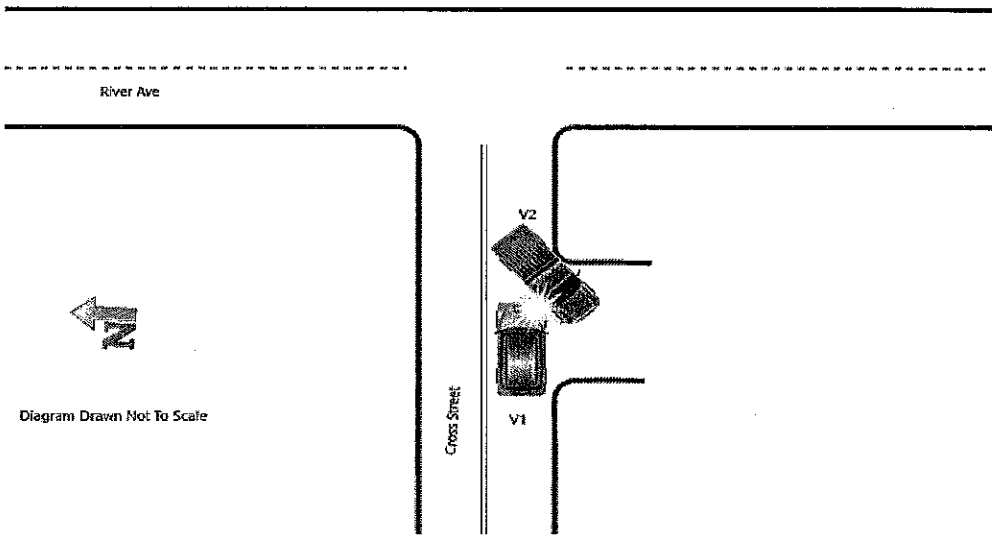
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033697

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that she was traveling east on Cross Street when vehicle 2 turned left in front of her causing her to strike vehicle 2 on the passenger side .

Driver 2 stated that he was traveling west on Cross Street and attempted to make a left hand turn and was struck by vehicle 1 on the passenger side.

Vehicle 1 sustained disabling damage to the front right side of the vehicle. Vehicle 2 sustained disabling damage to the passenger door and the passenger side bed of the truck. Vehicle 1 was towed by Moshe's towing. Vehicle 2 was left at scene awaiting a private tow. There were no reported injuries on scene.

After my investigation I determined driver 2 to be at fault for not yielding to oncoming traffic and attempting to turn in front of vehicle 1 causing the collision.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAMACHO L	828	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Code	Field	Value
96: 05	1 Case Number	22-033730
97: 01	2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
98: 07	3 Station/Precinct	
99: 07	4 Date of Crash (mm dd yy)	04/26/22
100a: 01	5 Day Of Week	TUESDAY
	6 Time (use 2400 hrs)	2155
	7 Municipality Code	1514
	8 Total Killed	--
	9 Total Injured	--
	10 Crash Occurred On	THIRD STREET
	Dir	W
	11 Speed Limit	25
	12 Route No. / Suffix / 13 Milepost	
	☐ At Intersection With	
	14	250 ☒ Feet ☐ Miles
	15/16	☐ N ☒ E ☐ S ☐ W of:
	17 Cross Road Name	LEXINGTON AVENUE
	18 Speed Limit	25
	19 Ramp	☐ To ☐ From:
	20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
	21 Latitude / 22 Longitude	

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

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

Field	Vehicle 1	Vehicle 2
Veh #	1	2
Policy No.	4463810467	939872213
NJ Ins. Code	100	054
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name	MOSHE - DREW -	DAVID M FEINROTH -
Sex	M	M
Number & Street	1520 ARBORETUM PKWY	950 PARK TERRACE
City / State / Zip	LAKEWOOD NJ 08701	LAKEWOOD NJ 08701
Eyes	4	4
DL Class	D	D
Restrictions	-	-
Endorsements	-	-
State	NJ	NJ
Driver's License Number	D73655670008724	F22891560005614
DOB	08/01/1972	05/15/1961
Expires (mm yy)	08 21	05 20
Owner's Name	☐ Same As Driver MOSHE - DREW -	☐ Same As Driver DAVID M FEINROTH -
Owner Number & Street	1520 ARBORETUM PKWY	950 PARK TERRACE
Owner City / State / Zip	LAKEWOOD NJ 08701	LAKEWOOD NJ 08701
Make	TOYT	TOYT
Model	HIG	CAM
Color	BLK	4
Year	2019	2016
Plate No.	V72MKG	YSS84Z
State	NJ	NJ
VIN	5TDJZRFH7KS628553	4T1BF1FK3GU135199
Expires	03 23	03 23
Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority	☒ Owner ☐ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending
Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
Carrier No.	☐ USDOT ☐ MC/MX ☒ None	☐ USDOT ☐ MC/MX ☒ None
GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity		
Number & Street		
City / State / Zip		

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

NO DAMAGE TO OTHER PROPERTY.

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	49	M	-	-	01	11	04	-	-	MOSHE - DREW - 1520 ARBORETUM PKWY LAKEWOOD NJ 08701
B	2	01	01	05	60	M	-	-	01	11	04	-	-	DAVID M FEINROTH - 950 PARK TERRACE LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

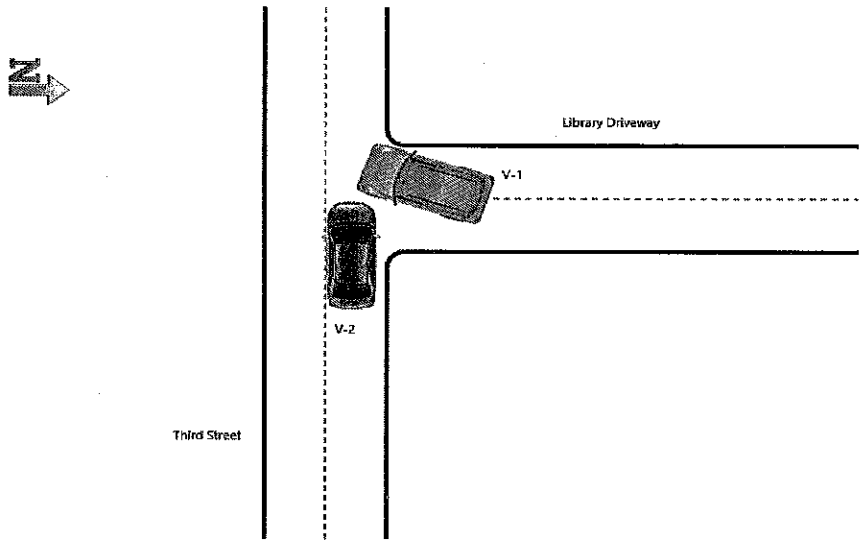
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033730

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver and registered owner of vehicle #1 stated he was exiting the parking lot of the Lakewood Library on Third Street. He stated attempting to exit the parking lot, a vehicle traveling West on Third Street crashed into the front drivers side bumper. Driver and registered owner of vehicle #2 stated he was traveling West on Third Street. He stated while in transit, he did not see the vehicle exiting the library parking lot. Driver of vehicle stated he thought he ran over or crashed into a piece of furniture in the roadway. Drivers of both vehicles stated they were not injured in the crash and declined medical attention. Both vehicles were driven from crash scene by the registered owners.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
HUNTER W	333	SGT. M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033334
2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1852
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	NEW HAMPSHIRE AVE
☒ At Intersection With / Road Name	PINEHURST DR
☐ Feet ☐ N ☐ E of: / ☐ Miles ☐ S ☐ W	
11 Speed Limit	40
12 Route No.	0623
Suffix	
13 Milepost	
14	
15	
16	
17 Cross Road Name	
18 Speed Limit	25
19 Ramp ☐ To ☐ From:	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	
22 Longitude	

Vehicle 1

23 Veh #	1
24 Policy No.	951290802
25 NJ Ins. Code	135
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name /	MARCUS A KELLERMAN -
29 Sex	M
27 Number & Street	564 CRANMORE DR
28 City / State / Zip	BRICK NJ 08723
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	2 / D / - / - / NJ
32 Driver's License Number / 33 DOB (mm dd yyyy) / 34 Expires (mm yy)	K23955176112002 / 12/15/2000 / 12 23
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ANTHONY R KELLERMAN -
36 Number & Street	564 CRANMORE DR
37 City / State / Zip	BRICK NJ 08723
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	VOLK / JET - JE / GRY / 2014 / H41MMG / NJ
44 VIN / 45 Expires	3VW2K7AJ6EM296310 / 03 22
46 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☒ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	60288530043
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name /	CHAIM I ICKOVITZ -
59 Sex	M
57 Number & Street	1573 E 21ST ST
58 City / State / Zip	BROOKLYN NY 11210
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	2 / D / - / - / NY
62 Driver's License Number / 63 DOB (mm dd yyyy) / 64 Expires (mm yy)	584353227 / 01/14/1994 / 01 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver CHAIM I ICKOVITZ -
66 Number & Street	1573 E 21ST ST
67 City / State / Zip	BROOKLYN NY 11210
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HOND / ACC / GRY / 2007 / DEB0571 / FL
74 VIN / 75 Expires	1HGCM72327A000010 / 05 22
76 Vehicle Removed To	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	21	M	-	-	-	11	04	-	-	MARCUS A KELLERMAN - 564 CRANMORE DR BRICK NJ 08723
B	02	01	01	05	28	M	-	-	-	11	04	-	-	CHAIM I ICKOVITZ - 1573 E 21ST ST BROOKLYN NY 11210
C														
D														

New Jersey Police Crash Investigation Report

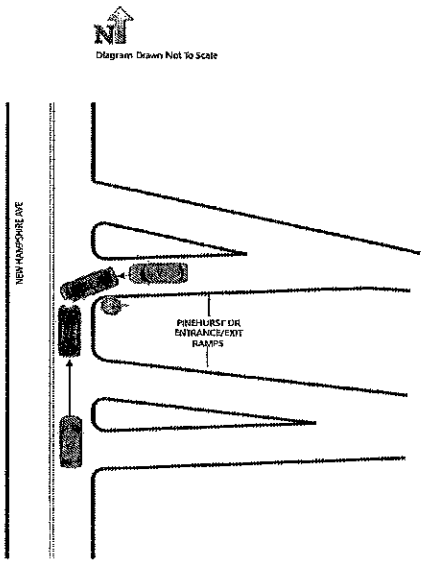
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033334

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated he was stopped on Pinehurst Dr at New Hampshire Ave. D1 stated he believed it was clear and began to make a left onto New Hampshire Ave. D1 stated V2 was traveling very fast and collided with the front of his vehicle.

Driver of V2 stated he was traveling North on New Hampshire Ave. D2 stated he was going slow due to the New Hampshire traffic signal just turning green. D2 stated V1 turned left in front of him and they collided.

I determined V1 was at fault but with other contributing circumstances. V1 had to yield to the right of way of V2 but there is heavy traffic in the area. Further, based on the amount of damage to both vehicles and V1 pulling out from a complete stop, V2 had to be traveling at a high rate of speed. I made this determination based on statements from both drivers, the location/severity of damage to both vehicles and my observations of the crash scene.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MICALLEF E	366	CM	332	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033336
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	911 E COUNTY LINE RD
At Intersection With / Road Name	-
Dir	-
11 Speed Limit	-
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	-
Feet / Miles	-
N ☐ E ☐ S ☐ W of:	-
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
NB ☐ EB ☐ SB ☐ WB	02
20 Route/Name	-
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1854
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.105290
22 Longitude	-74.198940

Vehicle 1

23 Veh #	1
24 Policy No.	6065037886
25 NJ Ins. Code	639
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	ABRAHAM - PERKOWSKI
29 Sex	M
27 Number & Street	13 CHARLOTTE DR
28 City / State / Zip	SPRING VALLEY NY 10977
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	05 / - / - / - / NY
32 Driver's License Number	276083247
33 DOB (mm dd yyyy)	03/01/2004
34 Expires (mm yy)	03 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver MALKA D PERKOWSKI -
36 Number & Street	13 CHARLOTTE DR SPRING
37 City / State / Zip	VALLEY NY 10977
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	NISS / SEN / - / 2021 / KLX2444 / NY
44 VIN	3N1AB8CV1MY259728
45 Expires	05 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	4334199815
55 NJ Ins. Code	639
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	MICHAEL A ZEHNWIRTH -
59 Sex	M
57 Number & Street	624 APOLLO RD
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 / A / - / - / NJ
62 Driver's License Number	Z22445446104952
63 DOB (mm dd yyyy)	04/20/1995
64 Expires (mm yy)	03 21
65 Owner's First Name / Initial / Last Name	☐ Same As Driver JOSEPH - ZEHNWIRTH -
66 Number & Street	18 WESTSIDE AVE 201 SPRING
67 City / State / Zip	VALLEY NY 10977
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / CAM / - / 2017 / JRV6678 / NY
74 VIN	4T1BF1FK5HU716379
75 Expires	06 22
76 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
02	39:3-10	1514 A 292960	-		-
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	18	M	-	-	-	11	04	-	-	ABRAHAM - PERKOWSKI - 13 CHARLOTTE DR SPRING VALLEY NY 10977 - -
B	02	01	01	05	27	M	-	-	-	11	04	-	-	MICHAEL A ZEHNWIRTH - 624 APOLLO RD LAKEWOOD NJ 08701 - -
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033336

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

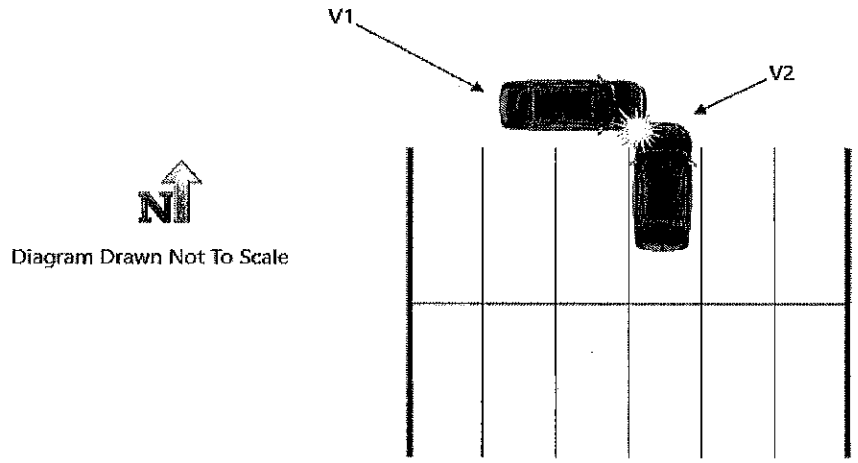


Diagram Drawn Not To Scale

911 E County Line Rd (Parking Lot)

145 Crash Description/Narrative

Driver 1 stated, he was traveling east through the parking lot of 911 E County Line Rd and was struck by vehicle 2 that pulled in front of his vehicle from a parking spot. The damage was to the passenger side front end. No injuries reported.

Driver 2 stated, he was "inching" out of a parking spot and was unable to see if vehicles were coming due to another parked vehicle blocking his view. He stated, while "inching" out he was struck by vehicle 1. The damage was primarily to the driver side front end. No injuries reported.

As a result of my investigation, I, Patrolman Connor Woods #418 determined driver 2 at fault due to entering vehicle 1's lane of travel and causing the collision.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WOODS, C	418	CM	332	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033373
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	2140
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	S CLIFTON AVE
At Intersection With	☐
Road Name	-
Dir	-
11 Speed Limit	35
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	45
☒ Feet ☐ Miles	100
☐N ☐E ☒S ☐W of:	MAIN ST
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.090060
22 Longitude	-74.214220

Vehicle 1

23 Veh #	1
24 Policy No.	AOD-T31-878850-4023
25 NJ Ins. Code	183
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	CHAYIM
Initial	B
Last Name	GOODMAN
29 Sex	M
27 Number & Street	PO BOX 1550
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	G64721226202702
33 DOB (mm dd yyyy)	02/16/1970
34 Expires (mm yy)	02 25
35 Owner's First Name	CHAYIM
Initial	B
Last Name	GOODMAN
☐ Same As Driver	
36 Number & Street	PO BOX 1550
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	DODG
39 Model	AXT
40 Color	SIL
41 Year	2014
42 Plate No.	L47PRD
43 State	NJ
44 VIN	1C3CDZCBXEN174448
45 Expires	01 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	610750698 2061
55 NJ Ins. Code	884
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	ESTHER
Initial	F
Last Name	RABINOWITZ
59 Sex	F
57 Number & Street	18 5TH ST
58 City	LAKEWOOD
State	NJ
Zip	08701
60 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	R00142396652972
63 DOB (mm dd yyyy)	02/15/1997
64 Expires (mm yy)	02 23
65 Owner's First Name	MENACHEM
Initial	M
Last Name	RABINOWITZ
☐ Same As Driver	
66 Number & Street	18 5TH ST
67 City	LAKEWOOD
State	NJ
Zip	08701
68 Make	TOYT
69 Model	SIE
70 Color	SIL
71 Year	2011
72 Plate No.	J20PHK
73 State	NJ
74 VIN	5TDKK3DC5BS075169
75 Expires	11 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	52	M	-	-	-	11	04	-	-	CHAYIM B GOODMAN - PO BOX 1550 LAKEWOOD NJ 08701
B	V2	01	01	05	25	F	-	-	-	11	04	99	5202	ESTHER F RABINOWITZ - 18 5TH ST LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

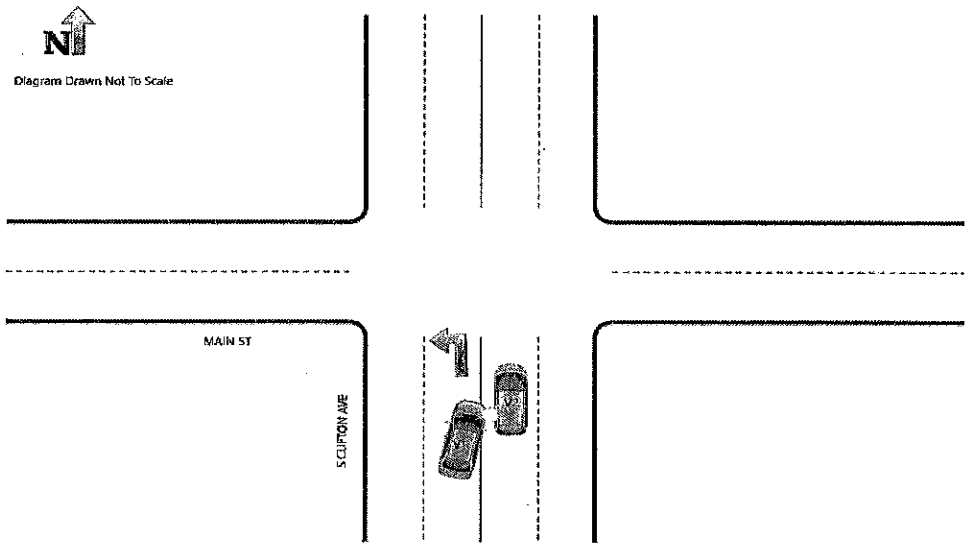
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033373

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

THE DRIVER OF V1 STATED HE WAS TRAVELING NORTHBOUND ON S CLIFTON AVE IN THE LEFT TURN LANE. HE STATED THAT HE HAD HIS TURN SIGNAL ON TO SWITCH LANES. AS HE ATTEMPTED TO SWITCH LANES, HE CRASHED INTO V2 WHO WAS TRAVELING NORTHBOUND ON S CLIFTON AVE IN THE CENTER LANE TO CONTINUE NORTH ON CLIFTON AVE.

THE DRIVER OF V2 STATED SHE WAS TRAVELING NORTHBOUND ON S CLIFTON AVE. AS SHE WAS TRAVELING NORTHBOUND, SHE WAS STRUCK BY V1 WHO WAS ATTEMPTING TO SWITCH INTO HER LANE.

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

NO INJURIES WERE REPORTED ON SCENE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VILLALBA, M	425	SGT. M. LORENC	316	☐ Pending ☒ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-033537
2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	0728
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	S LAKE DR
11 Speed Limit	25
At Intersection With	☐
14 / 15 / 16	300 ☒ Feet ☐ Miles; ☐ N ☒ E ☐ S ☐ W of: CARASALJO DR
17 Cross Road Name	CARASALJO DR
18 Speed Limit	25
19 Ramp	☐ To ☐ From:
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.094900
22 Longitude	-74.236190

Field	Vehicle 1	Vehicle 2
Veh #	1	2
Policy No.	0990001528	HPA00002755211
NJ Ins. Code	-	017
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
Driver's First Name / Initial / Last Name	OKTAY - BANILOV -	RICHADO E DILLON -
Sex	M	M
Number & Street	7 SALVATORE DR	113 SAWMILL RD
City / State / Zip	LAKEWOOD NJ 08701	BRICK NJ 08724
Eyes	02	02
DL Class	D	D
Restrictions	-	-
Endorsements	-	-
State	NJ	NJ
Driver's License Number	B04336020004642	D43746556510702
DOB	04/30/1964	10/26/1970
Expires (mm yy)	04 23	10 23
Owner's First Name / Initial / Last Name	☐ Same As Driver - - MAJOR KEY MOTOR -	☐ Same As Driver RICHADO E DILLON -
Owner Number & Street	2620 W CUMBERLAND ST	113 SAWMILL RD
Owner City / State / Zip	LEBANON PA 17042	BRICK NJ 08724
Make	CHEV	NISS
Model	TRA	ALT
Color	-	BLK
Year	2014	2014
Plate No.	K40517K	K93NWX
State	PA	NJ
VIN	1GNKRGKD6EJ115122	1N4AL3AP2EN241065
Expires	04 22	06 22
Vehicle Removed To	TILTON'S AUTO BODY	TILTON'S AUTO BODY
Removal	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
Authority	☐ Owner ☒ Driver ☐ Police	☒ Owner ☐ Driver ☐ Police
Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
Carrier No.	☐ USDOT ☐ MC/MX ☒ None	☐ USDOT ☐ MC/MX ☒ None
GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
Motor Carrier or Government Entity		
Number & Street		
City / State / Zip		

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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
			2	39:4-82	1514A292881
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	-	57	M	-	-	-	11	04	-	-	OKTAY - BANILOV - 7 SALVATORE DR LAKEWOOD NJ 08701
B	2	01	01	-	51	M	-	-	-	11	04	-	-	RICHADO E DILLON - 113 SAWMILL RD BRICK NJ 08724
C	3	01	01	-	43	F	-	-	-	11	04	-	-	JENY F ESPEJOLUIN - 5 KIMBALL RD LAKEWOOD NJ 08701
D														

Left margin codes:

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

Right margin codes:

Code	Value
118a	25
118b	-
119a	14
119b	-
120a	01
120b	-
121a	01
121b	-
122	01
123	01
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	08
127b	26
127c	26
127d	-
127e	-
128	26
129	08
130	08
131	11
132	11
133	04
134	04

PAGE 2 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033537
2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
3 Station/Precinct	
10 Crash Occurred On:	S LAKE DR
At Intersection With / Road Name / Dir	
☒ Feet ☐ Miles	300
☐ N ☒ E ☐ S ☐ W of:	CARASALJO DR
11 Speed Limit	25
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	25
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash (mm dd yy)	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	0728
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.094900
22 Longitude	-74.236190

Vehicle 1

23 Veh #	3
24 Policy No.	HPA00002742334
25 NJ Ins. Code	411
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JENY / F / ESPEJOLUIN
29 Sex	F
27 Number & Street	5 KIMBALL RD
28 City / State / Zip	LAKEWOOD / NJ / 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / DZ / - / - / NJ
32 Driver's License Number	E80533956656782
33 DOB (mm dd yyyy)	06/23/1978
34 Expires (mm yy)	06 / 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver / JOSE / L / VARGASSANCHEZ
36 Number & Street	5 KIMBALL RD
37 City / State / Zip	LAKEWOOD / NJ / 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	HOND / CR / ONG / 2010 / L89PNM / NJ
44 VIN	5J6RE4H73AL099585
45 Expires	01 / 23
46 Vehicle Removed To	TILTON'S AUTO BODY
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

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

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

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

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

96	05
97	01
98	01
99	07
100a	01
100b	04
101	02
102	01
103	01
104	3
105	05
106	-
107	-
108	01
109	-
110	01
111	-
112	-
113	-
114	-
115	-
116	04
117	-
118a	25
118b	-
119a	-
119b	-
120a	01
120b	-
121a	-
121b	-
122	01
123	-
124	04
125	-
126a	26
126b	-
126c	-
126d	-
126e	26
127a	-
127b	-
127c	-
127d	-
127e	-
128	26
129	11
130	11
131	-
132	-
133	04
134	-

New Jersey Police
Crash Investigation Report

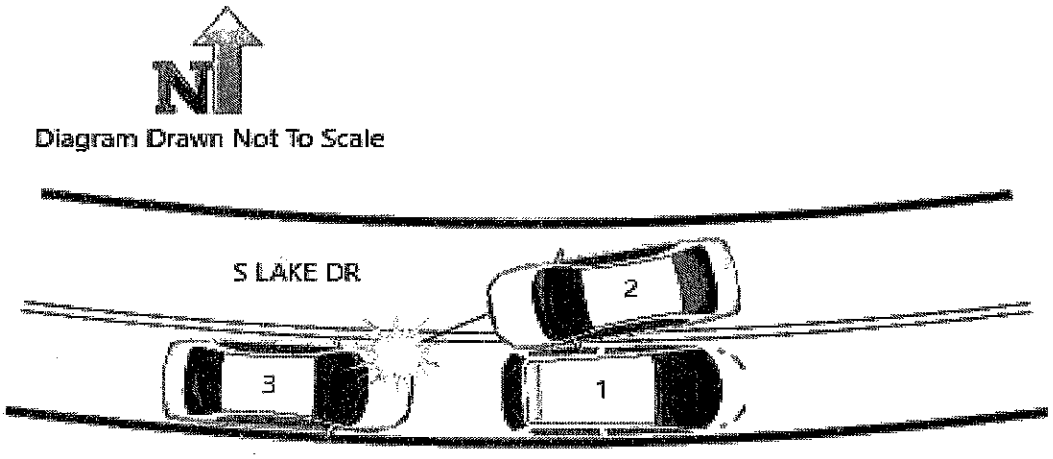
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033537

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was traveling West on S Lake Dr East of Carasaljo Dr. Vehicle #2 was traveling East on S Lake Dr at the East of Carasaljo Dr. Vehicle #3 was traveling West on S Lake Dr behind vehicle #1. Vehicle #2 crossed the center double yellow line, struck vehicle #1 then struck vehicle #3. Driver #1 stated that he was driving straight and vehicle #2 came into his lane and struck his vehicle. Driver #2 stated that his steering wheel locked as he was negotiating the curve and he could not avoid hitting vehicle #1. Driver #3 stated that she was driving behind vehicle #1 and vehicle #2 struck vehicle #1 then struck her vehicle. Driver #2 failed to keep right causing the crash.

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033562
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	198 NEW HAMPSHIRE AVE
At Intersection With / Road Name	
Feet / Miles	-
N E S W of:	-
Dir	-
11 Speed Limit	10
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	-
19 Ramp To / From:	-
17 Cross Road Name	-
NB EB SB WB	
20 Route/Name	-
4 Date of Crash (mm dd yy)	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	0903
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.08576
22 Longitude	-74.17676

Vehicle 1

23 Veh #	1
24 Policy No.	SELF INSURED 05-87
25 NJ Ins. Code	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	DAVID F MCCLENDON 4TH
29 Sex	M
27 Number & Street	462 NAUTILUS DR
28 City / State / Zip	MANAHAWKIN NJ 08050
30 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
31 State	NJ
32 Driver's License Number	M11571566610992
33 DOB (mm dd yyyy)	10/31/1999
34 Expires (mm yy)	10 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver LAKEWOOD - LAKEWOOD TOWN
36 Number & Street	231 THIRD STREET
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	MACK / LR6 / WHI / 2020 / 34163MG / NJ
44 VIN	1M2LR2GC7LM003341
45 Expires	12 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☒ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	941071998
55 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	LUIS R CRUZGARCIA -
59 Sex	M
57 Number & Street	414A BRICK BLVD
58 City / State / Zip	BRICK NJ 08723
60 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
61 State	NJ
62 Driver's License Number	C76914947910882
63 DOB (mm dd yyyy)	10/26/1988
64 Expires (mm yy)	10 25
65 Owner's First Name / Initial / Last Name	☒ Same As Driver LUIS R CRUZGARCIA -
66 Number & Street	414A BRICK BLVD
67 City / State / Zip	BRICK NJ 08723
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	FORD / FUS / WHI / 2018 / B62PLT / NJ
74 VIN	3FA6P0HD6JR251139
75 Expires	11 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	22	M	-	-	-	11	04	-	-	DAVID F MCCLENDON 4TH 462 NAUTILUS DR MANAHAWKIN NJ 08050
B	02	01	01	05	33	M	-	-	-	11	04	-	-	LUIS R CRUZGARCIA - 414A BRICK BLVD BRICK NJ 08723
C														
D														

New Jersey Police Crash Investigation Report	Police Dept: LAKEWOOD TOWNSHIP Code: 01 Station: - Case No: 22-033562

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

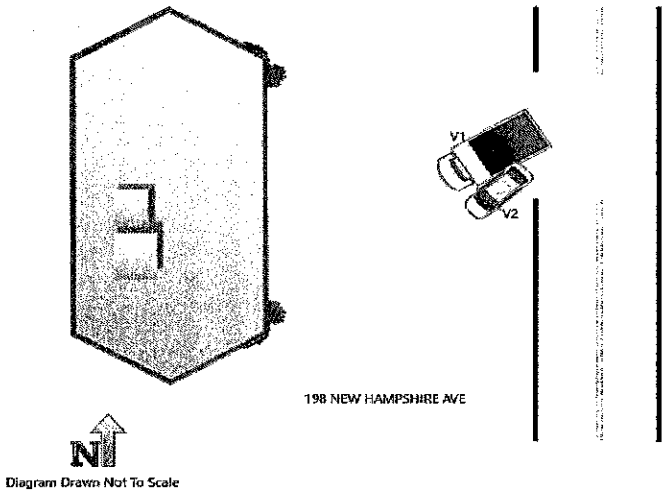


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver 1, David McClendon 4th was operating a 2020 Mack LR6, NJ 341-63MG. Mr. McClendon 4th stated he was making a left turn from New Hampshire Avenue into the parking lot of 198 New Hampshire Avenue. Due to his vehicle size he needed to make a wide turn in order to enter the portion of the parking lot he needed to. While he was turning the vehicle behind him also began to make a left turn. While the vehicle behind him was turning it drove along the left side of his vehicle causing a collision to occur at the entrance to the parking lot.

Driver 2, Luis Cruz-Garcia was operating a 2018 ford Fusion, NJ B62-PLT. Mr. Cruz-Garcia stated he was traveling behind vehicle 1 on New Hampshire Avenue. Vehicle 1 began to make a left turn into the parking lot of 198 New Hampshire Avenue and he did the same. His vehicle went along the left side of vehicle 1 and vehicle 1 turned into his vehicle.

Driver 2 was determined to be at fault for improper turning. End of report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
PEDERSON JON	305	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

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

1 Case Number: 22-033568
2 Police Dept of: LAKEWOOD TOWNSHIP P — Code: 01
3 Station/Precinct:
4 Date of Crash (mm dd yy): 04/26/22
5 Day Of Week: TUESDAY
6 Time (use 2400 hrs): 0926
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: CEDARBRIDGE AVENUE (Road Name)
11 Speed Limit: 50
12 Route No.: 0528 — Dir — Suffix
13 Milepost
☐ At Intersection With
14: 25 ☒ Feet ☐ Miles (15)
16: ☐ N ☐ E ☐ S ☒ W of: NEW HAMPSHIRE AVENUE
17 Cross Road Name
18 Speed Limit: 50
19 Ramp ☐ To ☐ From:
20 Route/Name ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude: 40.07580
22 Longitude: -74.18446

Vehicle 1

23 Veh #: 1
24 Policy No.: PANJ-008395366
25 NJ Ins. Code: 071
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: BRIANNA — Initial: J — Last Name: MCRONALD -
29 Sex: F
27 Number & Street: 223 ARIZONA DR
28 City: BRICK — State: NJ — Zip: 08723
30 Eyes: 4 — DL Class: D — Restrictions: - — Endorsements: -
31 State: NJ
32 Driver's License Number: M17440967151044
33 DOB (mm dd yyyy): 01/16/2004
34 Expires (mm yy): 01 25
35 Owner's First Name: ☐ Same As Driver — DENISE — Initial: J — Last Name: MCRONALD -
36 Number & Street: 223 ARIZONA DRIVE
37 City: BRICK — State: NJ — Zip: 08723
38 Make: TOYT
39 Model: CAM
40 Color: 4
41 Year: 2006
42 Plate No.: R67LXP
43 State: NJ
44 VIN: 4T1BE32K96U152043
45 Expires: 10 22
46 Vehicle Removed To:
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.
50 Carrier No.: ☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity:
Number & Street:
City: — State: — Zip:

Vehicle 2

53 Veh #: 2
54 Policy No.: A0J-231-264549-70-20
55 NJ Ins. Code: 183
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
56 Driver's First Name: CARL — Initial: - — Last Name: LANGER -
59 Sex: M
57 Number & Street: 157 HOLLYWOOD AVE
58 City: LAKEWOOD — State: NJ — Zip: 08701
60 Eyes: 2 — DL Class: D — Restrictions: - — Endorsements: -
61 State: NJ
62 Driver's License Number: L04221100001712
63 DOB (mm dd yyyy): 01/08/1971
64 Expires (mm yy): 01 25
65 Owner's First Name: ☐ Same As Driver — CARL — Initial: - — Last Name: LANGER -
66 Number & Street: 157 HOLLYWOOD AVE
67 City: LAKEWOOD — State: NJ — Zip: 08701
68 Make: TOYT
69 Model: SIE
70 Color: 3
71 Year: 2016
72 Plate No.: V73PGU
73 State: NJ
74 VIN: 5TDYK3DC7GS722141
75 Expires: 11 22
76 Vehicle Removed To:
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority: ☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused — Type: ☐ Breath ☐ Blood ☐ Urine — Results: 0. - % ☐ Pending
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill — Hazard Class — Placard No.
80 Carrier No.: ☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR: ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity:
Number & Street:
City: — State: — Zip:

Code	Value
118a	25
118b	-
119a	09
119b	29
120a	01
120b	-
121a	01
121b	-
122	08
123	01
124	03
125	03
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	06
130	06
131	12
132	12
133	02
134	03

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

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	18	F	-	-	-	11	04	-	-	BRIANNA J MCRONALD - 223 ARIZONA DR BRICK NJ 08723
B	02	01	01	05	51	M	-	-	-	11	04	-	-	CARL - LANGER - 157 HOLLYWOOD AVE LAKEWOOD NJ 08701
C	02	02	01	05	12	M	-	-	-	11	04	-	-	NATHAN - LANGER - 157 HOLLYWOOD AVE LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

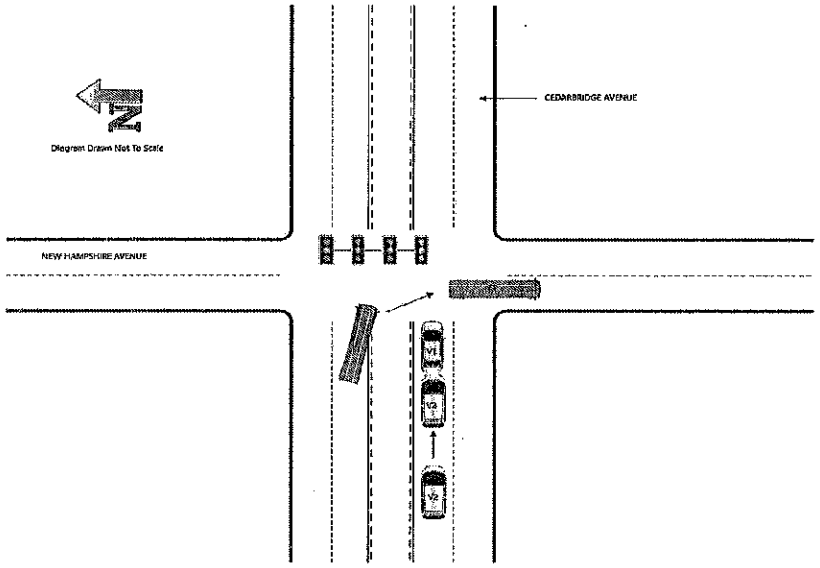
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033568

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated she was stopped in traffic facing East on Cedarbridge Avenue. Driver #1 stated she started to proceed forward and noticed a fire truck with lights and sirens activated proceeding through the intersection so she stopped to yield to the fire truck and Vehicle #2 rear-ended her vehicle. Vehicle #1 sustained minor damage and was able to be driven from the scene.

Driver #2 stated he was stopped in traffic facing East on Cedarbridge Avenue and began to proceed forward with traffic when Vehicle #1 stopped to yield to a fire truck and the center front of his vehicle collided with the rear of Vehicle #1. Vehicle #2 sustained moderate damage and was able to be driven from the scene.

Based on statements from both drivers, damage to the vehicles and my observations on scene, I determined Driver #2 to be at fault for following too closely to Vehicle #1.

No injuries reported and no summonses issued.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAVALLO M	337	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☐ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number: 22-033608	10 Crash Occurred On: SHORROCK ST	N	11 Speed Limit: 50
2 Police Dept of: LAKEWOOD TOWNSHIP P	Code: 01	☐ At Intersection With	Road Name
3 Station/Precinct: -		☒ Feet 20 ☐ Miles	☒ N ☐ E ☐ S ☐ W of: -
		19 Ramp: ☐ To ☒ From	17 Cross Road Name: LIONSHEAD WOODS BLVD
			20 Route/Name

12 Route No.: 0066 Suffix: - 13 Milepost: - 18 Speed Limit: -

☒ NB ☐ EB ☐ SB ☐ WB

4 Date of Crash (mm dd yy)	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured	21 Latitude	22 Longitude
04/26/22	TUESDAY	1201	1514	--	--	40.04081	-74.16045

Vehicle 1

23 Veh #	24 Policy No.	25 NJ Ins. Code
1	SELF INSURED	

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

26 Driver's First Name	Initial	Last Name	29 Sex
WILLIAM	R	EDWARDS -	M

27 Number & Street	28 City	State	Zip
9 TILTON AVE	S. TOMS RIVER	NJ	08757

30 Eyes	DL Class	Restrictions	Endorsements	31 State
6	D	-	-	NJ

32 Driver's License Number	33 DOB (mm dd yyyy)	34 Expires (mm yy)
E18787857902776	02/06/1977	02 26

35 Owner's First Name: OCEAN Initial: - Last Name: OCEAN COUNTY OF - ☐ Same As Driver

36 Number & Street	37 City	State	Zip
PO BOX 2191	TOMS RIVER	NJ	08754

38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State
BLUE	A3R	WHI	2008	OP9217	NJ

44 VIN	45 Expires
1BABGBKA08F247530	03 23

46 Vehicle Removed To

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

47 Authority: ☐ Owner ☒ Driver ☐ Police

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

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

50 Carrier No.: ☐ USDOT ☐ None; ☒ MC/MX 54420

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

52 Motor Carrier or Government Entity: OCEAN COUNTY

Number & Street: PO BOX 2191

City: TOMS RIVER State: NJ Zip: 07754

Vehicle 2

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

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

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

57 Number & Street	58 City	State	Zip
-	-	-	-

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

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

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

66 Number & Street	67 City	State	Zip
-	-	-	-

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

74 VIN	75 Expires
-	- -

76 Vehicle Removed To

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

77 Authority: ☐ Owner ☐ Driver ☐ Police

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

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

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

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

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - State: - Zip: -

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

OCEAN COUNTY NO U-TURN SIGN, SIGN # 038767

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	45	M	-	-	-	11	04	-	-	WILLIAM R EDWARDS - 9 TILTON AVE S. TOMS RIVER NJ 08757
B														
C														
D														

BUS SEATING ARRANGEMENT

1			
2			
3	CARL	ORPORT	-
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6	HARRIET	GELLIS	-
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16			
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19			
20			
21			
22			
23			
24	RALPH	RODRIGUEZ	-
25			
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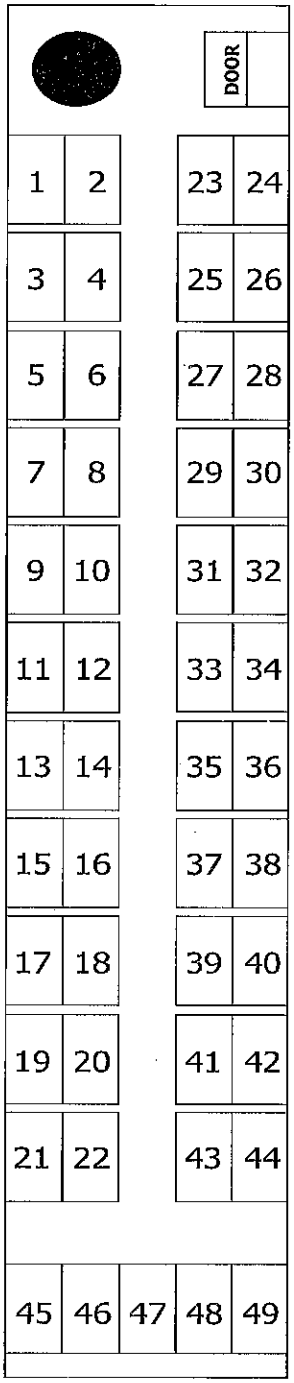
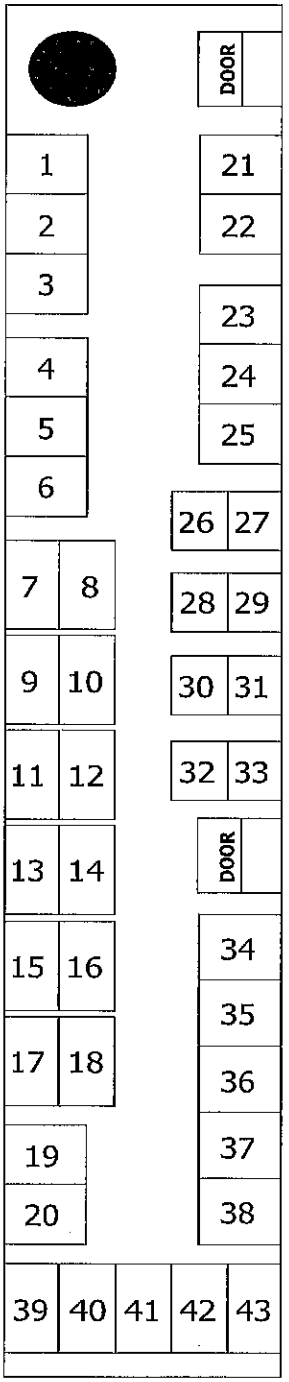
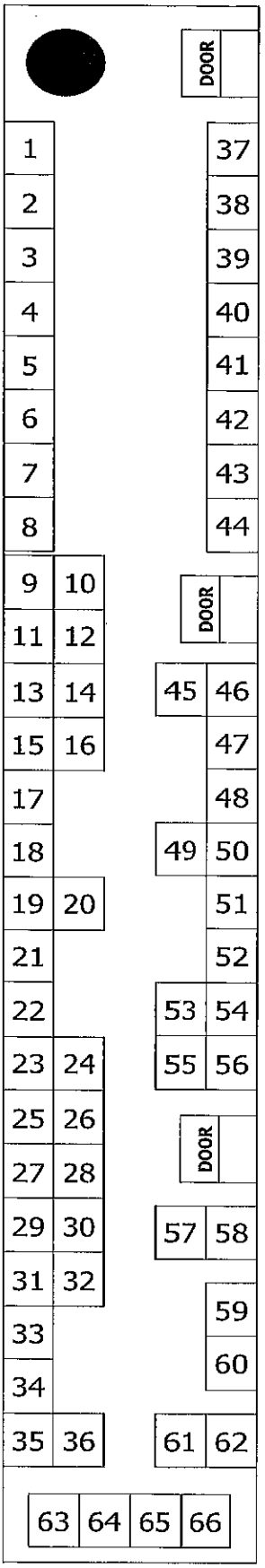
MCI-9, EAGLE & FLXIBLE



FLXIBLE TRANSIT & NOVA 06



VOLVO ARTIC



Rear

Police Agency LAKEWOOD TOWNSHIP POLICE DEPT.

New Jersey Police Crash Investigation Report

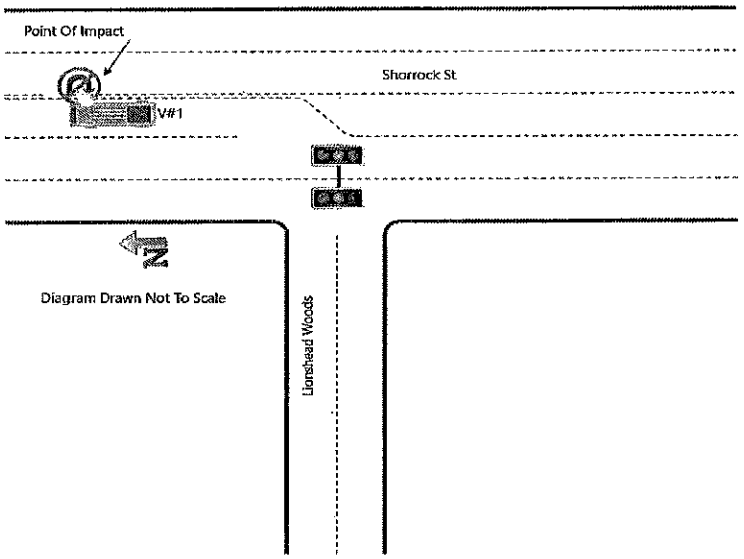
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033608

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 is self insured # JIF 30-09 732-929-2109.

Driver Was exiting Lionshead Woods and made a left turn on to Shorrock Street and as he was merging he struck a "NO U-turn sign. No reported injuries at this time.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MERRILL D	323	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033629
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	OCEAN AVE
Road Name	
Dir	-
11 Speed Limit	35
12 Route No.	0088
Suffix	-
13 Milepost	-
118a	25
118b	-
☐ At Intersection With	
☒ Feet	40
☐ Miles	
☐ N ☐ E ☐ S ☒ W of:	NATURES WAY
18 Speed Limit	25
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
119a	09
119b	-
4 Date of Crash mm dd yy	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1345
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	1
21 Latitude	40.08781
22 Longitude	-74.18170
120a	01
120b	-

Vehicle 1

23 Veh #	1
24 Policy No.	939742445
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	ELISHEVA
Initial	-
Last Name	EISEN
29 Sex	F
27 Number & Street	210 CAREY ST
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	5
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	E46432110056915
33 DOB mm dd yyyy	06/11/1991
34 Expires mm yy	06 26
35 Owner's First Name	SHLOMO
Initial	-
Last Name	EISEN
☐ Same As Driver	
36 Number & Street	210 CAREY ST
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	HOND
39 Model	ODY
40 Color	BLK
41 Year	2022
42 Plate No.	E83PBN
43 State	NJ
44 VIN	5FNRL6H8XNB038727
45 Expires	08 24
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
50 Carrier No.	☐ USDOT - ☒ None
	☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	6032677913
55 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	MIGUEL
Initial	A
Last Name	GARCIA
59 Sex	M
57 Number & Street	508 MASSACHUSETTS AVE; 7
58 City	LAKEWOOD
State	NJ
Zip	08701
60 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	G05545476103052
63 DOB mm dd yyyy	03/18/2005
64 Expires mm yy	03 26
65 Owner's First Name	ALE
Initial	A
Last Name	PELAEZ-ABRAHAM
☐ Same As Driver	
66 Number & Street	256 LOIS LN
67 City	LAKEWOOD
State	NJ
Zip	08701
68 Make	INFI
69 Model	G37
70 Color	BGE
71 Year	2011
72 Plate No.	J30PNV
73 State	NJ
74 VIN	JN1CV6AR0BM410018
75 Expires	02 23
76 Vehicle Removed To	TILTON'S AUTO BODY
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
80 Carrier No.	☐ USDOT - ☒ None
	☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	30	F	-	-	-	11	04	-	-	ELISHEVA - EISEN - 210 CAREY ST LAKEWOOD NJ 08701
B	01	05	01	03	05	M	02	05	01	05	05	-	-	AMOS EISEN 210 CAREY ST LAKEWOOD NJ 08701
C	02	01	01	05	17	M	-	-	-	11	04	-	-	MIGUEL A GARCIA - 508 MASSACHUSETTS AV LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033629

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

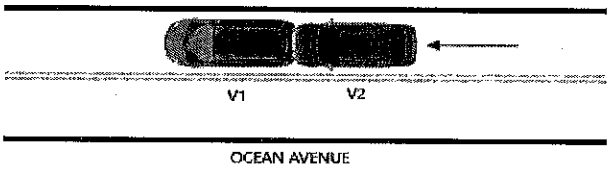


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver 1, Elisheva Eisen was operating a 2022 Honda Odyssey, NJ E83-PBN. Mrs. Eisen stated she was stopping in traffic traveling west on Ocean Avenue just past Nature's Way when the rear of her vehicle was struck by the front of the vehicle traveling behind her.

Driver 2, Miguel Garcia was operating a 2011 Infinity G37x, NJ J30-PNV. Mr. Garcia stated he was traveling west on Ocean Avenue behind vehicle 1 when traffic began to slow down. He was unable to slow his vehicle in time and struck the rear of vehicle 1.

Driver 2 was determined to be at fault for following too closely. End of report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
J. PEDERSON	305	MY	329	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-033634
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On (Road Name)	CROSS ST
Dir	-
11 Speed Limit	45
12 Route No.	-
Suffix	-
13 Milepost	-
☐ At Intersection With	
14	200 ☒ Feet ☐ Miles
16	☐ N ☐ E ☐ S ☒ W of:
17 Cross Road Name	NEIMAN RD
18 Speed Limit	35
19 Ramp	☐ To ☐ From: -
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
4 Date of Crash (mm dd yy)	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1412
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.076070
22 Longitude	-74.250620

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

Right margin codes: 118a: 25; 118b: -; 119a: 02; 119b: -; 120a: 01; 120b: 01; 121a: 01; 121b: 01; 122: 08; 123: 01; 124: 04; 125: 04; 126a: 26; 126b: -; 126c: -; 126d: -; 126e: 26; 127a: 26; 127b: -; 127c: -; 127d: -; 127e: 26; 128: 26; 129: 06; 130: 06; 131: 12; 132: 12; 133: 04; 134: 04

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	939152839	54 Policy No.	4162794343
25 NJ Ins. Code	054	55 NJ Ins. Code	148
Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	NECHAMA - KRAKAUER -	56 Driver's First Name / Initial / Last Name	DAVID - KOVACS -
29 Sex	F	59 Sex	M
27 Number & Street	15 DANIELLE CT	57 Number & Street	1613 WATERS EDGE DR
28 City / State / Zip	JACKSON NJ 08527	58 City / State / Zip	TOMS RIVER NJ 08753
30 Eyes	02	60 Eyes	02
DL Class	D	DL Class	D
Restrictions	-	Restrictions	-
Endorsements	-	Endorsements	-
31 State	NJ	61 State	NJ
32 Driver's License Number	K71625840061852	62 Driver's License Number	K68421560006822
33 DOB	11/27/1985	63 DOB	06/15/1982
34 Expires (mm yy)	11 24	64 Expires (mm yy)	06 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver NECHAMA - KRAKAUER -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver SARAH R ANTONELLI-KOVAC -
36 Number & Street	15 DANIELLE CT	66 Number & Street	1613 WATERS EDGE DR
37 City / State / Zip	JACKSON NJ 08527	67 City / State / Zip	TOMS RIVER NJ 08753
38 Make	TOYT	68 Make	TOYT
39 Model	RAV	69 Model	CAM
40 Color	GRY	70 Color	GRN
41 Year	2019	71 Year	2002
42 Plate No.	J87LSK	72 Plate No.	N23LYV
43 State	NJ	73 State	NJ
44 VIN	2T3A1RFVXKC025206	74 VIN	4T1BE32K62U632003
45 Expires	08 22	75 Expires	11 22
46 Vehicle Removed To	AAA	76 Vehicle Removed To	TILTON'S AUTO BODY
Removal	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	Removal	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending	78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity	
Number & Street		Number & Street	
City / State / Zip		City / State / Zip	

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

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	36	F	-	-	-	11	04	-	-	NECHAMA - KRAKAUER - 15 DANIELLE CT JACKSON NJ 08527
B	01	04	01	-	02M	M	-	-	-	06	06	-	-	MEIR - KRAKAUER - 15 DANIELLE CT JACKSON NJ 08527
C	02	01	01	-	39	M	-	-	-	11	11	01	-	DAVID - KOVACS - 1613 WATERS EDGE DR TOMS RIVER NJ 08753
D														

New Jersey Police Crash Investigation Report

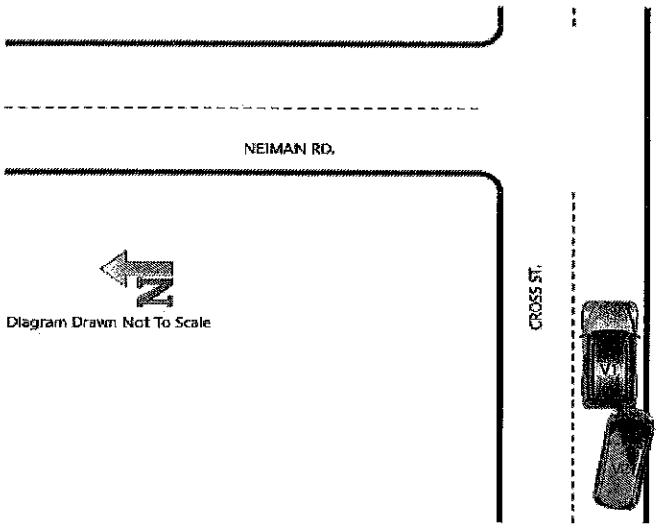
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033634

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated that she was stopped in stop and go traffic facing east on Cross St. when she was struck in the rear by V2. Driver of V2 stated that he was going straight on Cross St. Driver of V2 further stated that he does not know what happened and that all of a sudden, he ended up striking V1 in the rear.

In conclusion to my investigation, I determined that the driver of V2 was at fault for driver inattention.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
BROOKS D	351	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033291
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	NEW HAMPSHIRE AVE
Road Name	
Dir	-
11 Speed Limit	50
12 Route No.	0623
Suffix	-
13 Milepost	-
18 Speed Limit	45
☐ At Intersection With	
☒ Feet ☐ Miles	500
☒ N ☐ E ☐ S ☐ W of:	PINE STREET
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1545
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.068540
22 Longitude	-74.189430

Vehicle 1

23 Veh #	1
24 Policy No.	950572930
25 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	JOEL
Initial	G
Last Name	GOWE
Suffix	-
29 Sex	M
27 Number & Street	320 CORBIN CT
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	G68774056708802
33 DOB mm dd yyyy	08/26/1980
34 Expires mm yy	08 26
35 Owner's First Name	KAYONE
Initial	K
Last Name	TAYLOR
Suffix	-
☐ Same As Driver	
36 Number & Street	320 CORBIN CT
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	BMW
39 Model	435
40 Color	BLK
41 Year	2016
42 Plate No.	S75NWK
43 State	NJ
44 VIN	WBA3R5C58GK373208
45 Expires	07 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: - Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	4610-12-99-69
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	RUS
Initial	M
Last Name	HIRSCH
Suffix	-
59 Sex	F
57 Number & Street	1261 RIDGE AVE
58 City	LAKEWOOD
State	NJ
Zip	08701
60 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	H46166807461022
63 DOB mm dd yyyy	11/24/2002
64 Expires mm yy	11 25
65 Owner's First Name	BRIAN
Initial	S
Last Name	HIRSCH
Suffix	-
☐ Same As Driver	
66 Number & Street	1261 RIDGE AVE
67 City	LAKEWOOD
State	NJ
Zip	08701
68 Make	SUBA
69 Model	IMP - IM
70 Color	GRY
71 Year	2013
72 Plate No.	K48NJE
73 State	NJ
74 VIN	JF1GJAC60DH008761
75 Expires	01 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: - Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	-	41	M	-	-	-	11	04	-	-	JOEL G GOWE - 320 CORBIN CT LAKEWOOD NJ 08701 - -
B	02	01	01	-	19	F	-	-	-	11	04	-	-	RUS M HIRSCH - 1261 RIDGE AVE LAKEWOOD NJ 08701 - -
C	02	03	01	-	12	F	-	-	-	11	04	-	-	CHANA - HIRSCH - 1261 RIDGE AVE LAKEWOOD NJ 08701 - -
D														

New Jersey Police Crash Investigation Report

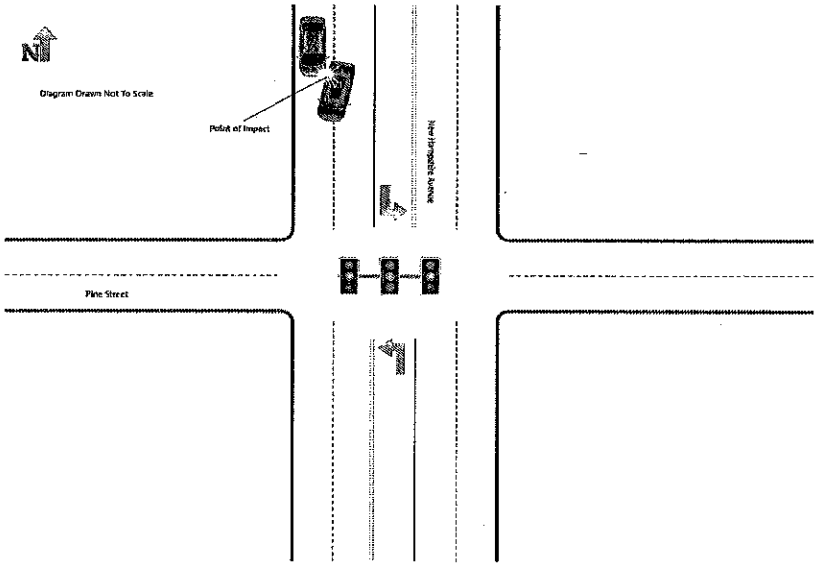
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033291

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated he was traveling south on New Hampshire Avenue in the left lane of travel. He was approaching Pine Street when a bus in front of him was stopped blocking traffic. He stated he was merging right when V2, who was traveling behind him, sped up from behind him tried passing him on the right and crashed into the passenger side of his vehicle.

Driver of V2 stated she was traveling south on New Hampshire Avenue in the right lane of travel. As she was approaching Pine Street, V1 suddenly changed lanes crashing into her vehicle.

Driver of V1 is at fault for the crash for improper lane change.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CONRAD M	389	KCM	335	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033330
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	MADISON AVE
Road Name	
Dir	-
11 Speed Limit	35
12 Route No.	0009
Suffix	-
13 Milepost	-
18 Speed Limit	30
☐ At Intersection With	
☒ Feet ☐ Miles	100
☒ N ☐ E ☐ S ☐ W of:	N LAKE DR
14	15
16	
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1841
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.089710
22 Longitude	-74.216240

Vehicle 1

23 Veh #	1
24 Policy No.	AOJ-231-724769-45 1 1
25 NJ Ins. Code	370
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	ROBERTO - CHAVEZ
29 Sex	M
27 Number & Street	1912 E VATERANS HIGHWAY
28 City / State / Zip	JACKSON NJ 08527
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	- / - / - / - / -
32 Driver's License Number	-
33 DOB mm dd yyyy	01/08/1980
34 Expires mm yy	- -
35 Owner's First Name / Initial / Last Name	☐ Same As Driver RAMON A ESPINOSA -
36 Number & Street	425 SUCCESS LN
37 City / State / Zip	TOMS RIVER NJ 08755
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	LINC / NAV - NA / SIL / 2004 / V79CVH / NJ
44 VIN	5LMFU28R84LJ04780
45 Expires	01 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	939 719 310
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	JOSHUA M FINKEL -
59 Sex	M
57 Number & Street	48 W SPRUCE ST
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 / D / - / - / NJ
62 Driver's License Number	F45034117406992
63 DOB mm dd yyyy	06/02/1999
64 Expires mm yy	06 22
65 Owner's First Name / Initial / Last Name	☐ Same As Driver AVROHOM Y FINKEL -
66 Number & Street	48 W SPRUCE ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HOND / ODY / SIL / 2019 / L65PRD / NJ
74 VIN	5FNRL6H72KB039633
75 Expires	01 23
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:3-10	1514-A-292620	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	42	M	-	-	-	11	04	-	-	ROBERTO - CHAVEZ - 1912 E VATERANS HIGH JACKSON NJ 08527 - -
B	01	03	01	05	31	M	-	-	-	11	04	-	-	PEDRO - CHAVEZ - 1912 E VETERANS HWY JACKSON NJ 08527 - -
C	02	01	01	05	22	M	-	-	-	11	04	-	-	JOSHUA M FINKEL - 48 W SPRUCE ST LAKEWOOD NJ 08701 - -
D	02	03	01	05	10	M	-	-	-	11	04	-	-	YEHUDA - FINKEL - 48 W SPRUCE ST LAKEWOOD NJ 08701 - -

New Jersey Police Crash Investigation Report

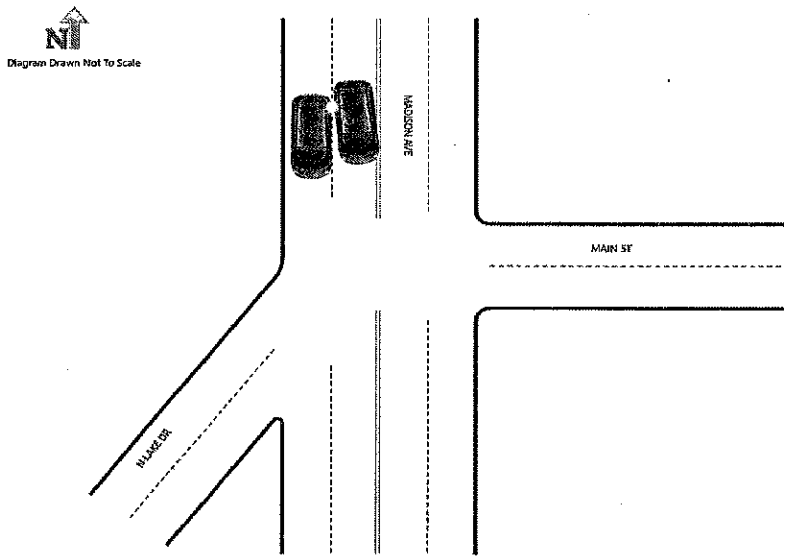
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033330

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver's 1 and 2 were traveling south bound on Madison Avenue. Driver 1 then switched lanes on Madison Avenue. While he was switching lanes he struck the rear driver side of with his rear passenger side tire.

Driver 1 stated he was just switching lanes and thinks because his tires stick out a bit past the fender his tire rubbed vehicle 2.

Driver 2 stated he was just traveling south bound when vehicle 1 struck him.

My investigation determined that driver 1 is at fault for improper lane change. Driver 1 was also issued a summons for unlicensed driving. A licensed driver came and picked the vehicle up.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WEAVER G	397	CM	332	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032879
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	219 MAIN ST
Road Name	-
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	-
☐ At Intersection With	-
☐ Feet / ☐ Miles	-
☐ N ☐ E / ☐ S ☐ W of:	-
19 Ramp ☐ To / ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB / ☐ SB ☐ WB	
20 Route/Name	-
4 Date of Crash mm dd yy	04/24/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	1243
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.09021
22 Longitude	-74.21179

Vehicle 1

23 Veh #	1
24 Policy No.	4586071740
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MIRIAM - ABISHOUR -
29 Sex	F
27 Number & Street	341 RIDGE AVE
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	5 / D / - / - / NJ
32 Driver's License Number	A10465580054035
33 DOB mm dd yyyy	04/01/2003
34 Expires mm yy	04 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver FRAYDEL S ABISHOUR -
36 Number & Street	341 RIDGE AVE
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	HOND / ACC / WHI / 2020 / Y90PSZ / NJ
44 VIN	1HGCV1F16LA130529
45 Expires	03 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	PANJ-6647443
55 NJ Ins. Code	071
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	ISIAIS - TLACZANI COYOTL -
59 Sex	M
57 Number & Street	3554 73RD ST FL 2ND
58 City / State / Zip	JACKSON HTS NY 11372
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	2 / - / - / - / NY
62 Driver's License Number	438577028
63 DOB mm dd yyyy	07/06/1976
64 Expires mm yy	07 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver FRANCISCO J SORIANO-VILLA -
66 Number & Street	5 PINEHURST DR RAMP
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	DODG / DAK / BLU / 2001 / R23MCK / NJ
74 VIN	1B7GG2AN41S142213
75 Expires	01 23
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
-		-	-		-
-		-	-		-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	19	F	-	-	-	11	04	-	-	MIRIAM - ABISHOUR - 341 RIDGE AVE LAKEWOOD NJ 08701
B	V1	01	01	05	17	F	-	-	-	11	04	-	-	TOVA - ABISHOUR - 341 RIDGE AVE LAKEWOOD NJ 08701
C	V2	01	01	05	45	M	-	-	-	11	04	-	-	ISIAIS - TLACZANI COYOTL - 3554 73RD ST FL 2ND JACKSON HTS NY 11372
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032879

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

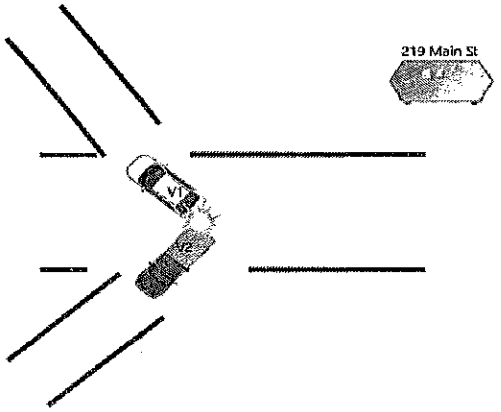


Diagram Drawn Not To Scale

145 Crash Description/Narrative

The driver of V1 stated she was backing out of a parking spot located at 219 Main St. Driver of V1 stated she was clear from traffic, and as she was backing out, she saw V2 backing out of his spot at the time same time. The driver of V1 braked her vehicle and honked the horn to stop V2 but ultimately collided.

The driver of V2 was also backing out of his parking spot on 219 Main St. Driver of V2 stated he was reversing and saw V1 was not stopping. The driver of V2 said he stopped to prevent the crash but V1 kept reversing.

There was a local by stander who saw the crash named Chaim Bowetk. Phone number 347-446-4115, who stated he saw the impact, but did not give a statement during my investigation. As I tried making contact with the caller via phone he did not answer the call.

V1 sustained moderate rear end damage.
V2 sustained minor rear end damage.

No injuries were reported at the time of the crash.

End report

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
RODRIGUEZ, B	424	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033169
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	RIVER AVE
Road Name	
Dir	-
11 Speed Limit	40
12 Route No.	0009
Suffix	
13 Milepost	
18 Speed Limit	40
☒ At Intersection With	CHESTNUT ST
☐ Feet ☐ Miles	☐ N ☐ E ☐ S ☐ W of:
14	15
16	
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0801
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.05342
22 Longitude	-74.22083

Vehicle 1

23 Veh #	1
24 Policy No.	4487-96-45-30
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	MARYELLEN
Initial	F
Last Name	MIGNANO
29 Sex	F
27 Number & Street	332 ALDOUS STREET
28 City	TOMS RIVER
State	NJ
Zip	08755
30 Eyes	2
DL Class	-
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	M42575276658812
33 DOB mm dd yyyy	08/16/1981
34 Expires mm yy	08 22
35 Owner's First Name	STEPHEN
Initial	A
Last Name	MIGNANO
☐ Same As Driver	
36 Number & Street	332 ALDOUS ST
37 City	TOMS RIVER
State	NJ
Zip	08755
38 Make	CHEV
39 Model	TRA
40 Color	BLK
41 Year	2020
42 Plate No.	K97NBJ
43 State	NJ
44 VIN	1GNEVHKW4LJ326154
45 Expires	11 23
46 Vehicle Removed To	TILTON'S AUTO BODY
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
	Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	927993341
55 NJ Ins. Code	135
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	JUAN
Initial	-
Last Name	MALDONADO
59 Sex	M
57 Number & Street	780 RIVER AVE APT 1
58 City	LAKEWOOD
State	NJ
Zip	08701
60 Eyes	-
DL Class	-
Restrictions	-
Endorsements	-
61 State	-
62 Driver's License Number	-
63 DOB mm dd yyyy	03/08/1957
64 Expires mm yy	- -
65 Owner's First Name	JESSICA
Initial	Y
Last Name	MALDONADO
☐ Same As Driver	
66 Number & Street	431 HEMLOCK LANE
67 City	MANCHESTER
State	NJ
Zip	08759
68 Make	GMC
69 Model	ACA
70 Color	WHI
71 Year	2009
72 Plate No.	F63LZU
73 State	NJ
74 VIN	1GKER23D09J219333
75 Expires	11 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
	Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
	136 Charge	137 Summons. No.	2	138 Charge: 39:3-10	139 Summons. No.: 1514A292128
	140 Charge	141 Summons. No.		142 Charge	143 Summons. No.

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	40	F	-	-	-	11	04	-	-	MARYELLEN F MIGNANO - 332 ALDOUS STREET TOMS RIVER NJ 08755
B	2	01	01	05	65	M	-	-	-	11	04	-	-	JUAN - MALDONADO - 780 RIVER AVE APT 1 LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

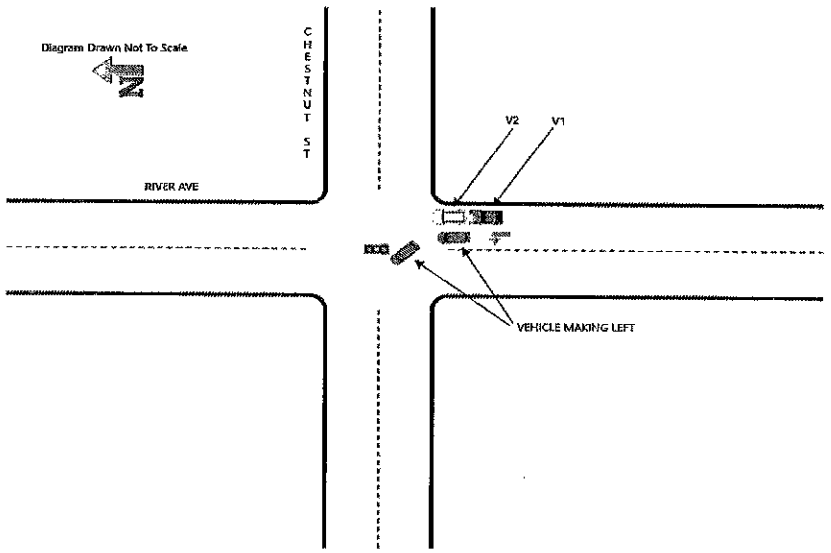
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033169

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 said she was facing Northbound on River Ave behind V2 (which was stopped at the traffic light). She observed that the vehicle on her left started to go, she she started to go and struck V1 in the rear of the vehicle. The vehicle to her left had a left turn arrow.

Driver of V2 said he was stopped at the traffic light on River Ave when his vehicle was struck from behind by V1.

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

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CARABALLO A	298	EM	288	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033197
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	OBERLIN AVE S
Road Name	
Dir	-
11 Speed Limit	40
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	25
☐ At Intersection With	
☒ Feet / ☐ Miles	780
☐ N ☐ E ☒ S ☐ W of:	SYRACUSE CT
17 Cross Road Name	
19 ☐ To / ☐ From Ramp	-
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0951
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.07211
22 Longitude	-74.18257

Vehicle 1

23 Veh #	1
24 Policy No.	939 887 197
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	SHIMA
Initial	-
Last Name	COOPER
29 Sex	F
27 Number & Street	14 DANIELLE CT
28 City	JACKSON
State	NJ
Zip	08527
30 Eyes	6
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	C65067080059946
33 DOB (mm dd yyyy)	09/20/1994
34 Expires (mm yy)	09 23
35 Owner's First Name	BINYOMIN
Initial	-
Last Name	COOPER
☐ Same As Driver	
36 Number & Street	206 WILLIAMSBURG LN
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	HOND
39 Model	ODY
40 Color	BRO
41 Year	2016
42 Plate No.	D80MTY
43 State	NJ
44 VIN	5FNRL5H67GB115601
45 Expires	08 22
46 Vehicle Removed To	HESHYS
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine	
Results: 0. - % ☐ Pending	
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	
Placard No.	-
50 Carrier No.	☐ USDOT - ☒ None
☐ MC/MX -	
51 GVWR/GCWR	☐ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs	
☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	AU9045762
55 NJ Ins. Code	213
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	WILLIAM
Initial	J
Last Name	JONES
59 Sex	M
57 Number & Street	9 PARKERS POINT BLVD
58 City	FORKED RIVER
State	NJ
Zip	08731
60 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	J63947857103682
63 DOB (mm dd yyyy)	03/04/1968
64 Expires (mm yy)	03 25
65 Owner's First Name	-
Initial	-
Last Name	SEWER RAT TRENC -
☐ Same As Driver	
66 Number & Street	1001 HOPEWELL AVE
67 City	OCEAN
State	NJ
Zip	07712
68 Make	FORD
69 Model	F15
70 Color	WHI
71 Year	2018
72 Plate No.	XKTE37
73 State	NJ
74 VIN	1FTFW1RG1JFD60522
75 Expires	11 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine	
Results: 0. - % ☐ Pending	
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	
Placard No.	-
80 Carrier No.	☐ USDOT - ☒ None
☐ MC/MX -	
81 GVWR/GCWR	☐ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs	
☐ Weight >= 26,001 lbs	
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	27	F	-	-	-	11	04	-	-	SHIMA - COOPER - 14 DANIELLE CT JACKSON NJ 08527
B	02	01	01	05	54	M	-	-	-	11	04	-	-	WILLIAM J JONES - 9 PARKERS POINT BLVD FORKED RIVER NJ 08731
C														
D														

New Jersey Police Crash Investigation Report

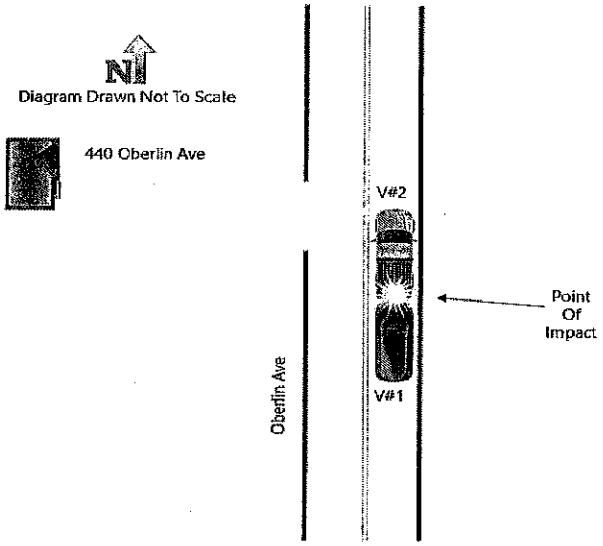
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033197

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Both drivers were traveling North on Oberlin Avenue South. Driver #2 was stopped waiting to make a left in to 440 Oberlin Avenue South when he was struck from behind by driver #1.

Driver #1 said that she attempted to stop but didn't in time and collided with Vehicle #2. Driver #1was transported to Brick hospital because she is pregnant and wanted to be checked out. No reported injuries at this time.

Driver #1 was found to be at fault the crash.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MERRILL D	323	EM	288	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033198
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	CENTRAL AVE
11 Speed Limit	40
0527 - -	12 Route No. Suffix 13 Milepost
☒ At Intersection With	DAVIS RD
18 Speed Limit	25
☐ Feet ☐ Miles	☐ N ☐ E ☐ S ☐ W of:
19 Ramp ☐ To ☐ From:	17 Cross Road Name: -
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0955
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.087360
22 Longitude	-74.220950

Vehicle 1

23 Veh #	1
24 Policy No.	6101-88-78-72
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MATANEL - DAHAN
29 Sex	M
27 Number & Street	419 CEDARBRIDGE AVE APT 409
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements	- - - -
31 State	IS
32 Driver's License Number	205915671
33 DOB mm dd yyyy	06/04/1995
34 Expires mm yy	05 30
35 Owner's First Name / Initial / Last Name	☐ Same As Driver ISRAEL A KUGIELSKY -
36 Number & Street	419 CEDAR BRIDGE AVE 409
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	LINC NAV 1 2022 306373D MI
44 VIN / 45 Expires	5LMJJ3LT0NEL01587 05 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	939169526
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	JOSEPH H BLUM -
59 Sex	M
57 Number & Street	9 POPLAR STREET
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements	2 D - -
61 State	NJ
62 Driver's License Number	B56474106801982
63 DOB mm dd yyyy	01/23/1998
64 Expires mm yy	01 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver GARY M BLUM -
66 Number & Street	9 POPLAR ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	NISS PAT SIL 2011 W19BSW NJ
74 VIN / 75 Expires	5N1AR1NB5BC628613 12 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	26	M	-	-	-	11	04	-	-	MATANEL - DAHAN - 419 CEDARBRIDGE AVE LAKEWOOD NJ 08701
B	01	06	01	05	36	F	-	-	-	11	04	-	-	LEAH - STEINBERG - 14 PEACH TREE CT LAKEWOOD NJ 08701
C	02	01	01	05	24	M	-	-	-	11	04	-	-	JOSEPH H BLUM - 9 POPLAR STREET LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

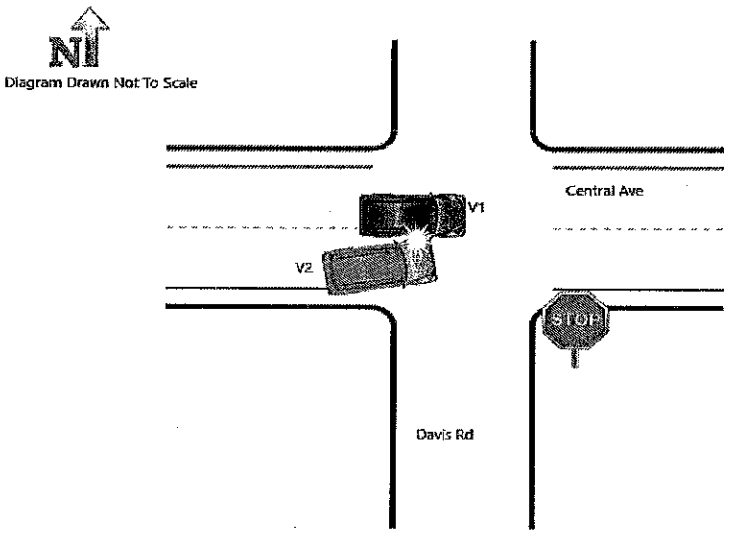
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033198

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 and vehicle 2 crashed in the intersection of Central Ave and Davis Rd

Driver 1 stated this began as a road rage incident. He turned onto Central ave and driver 2 was not happy with him. He then said that he was attempting to travel Eastbound on Central Ave but driver 2 was preventing him from doing this. Driver 2 then stopped his vehicle in the intersection of Central And Davis and would not let Driver 1 go forward. After three minutes Driver 1 attempted to pass vehicle 2 on the left. As he was doing this, Driver 1 said driver 2 deliberately turned to the left which caused the crash. Driver 1 also did not believe that the damage to vehicle 2 was caused by the crash due to there being minor damage to his vehicle.

Driver 2 stated he was traveling Eastbound on Central Ave in heavy traffic. He was in stop and go traffic when Driver 1 attempted to pass him. While attempting this pass, vehicle 1 crashed into vehicle.

There were no reported injuries on scene. Vehicle 1 sustained minor damage to the back passenger side and vehicle 2 sustained minor damage to the front driver side right above the wheel well.

Based on conflicting statements and the lack of any eyewitnesses or camera footage, I was unable to determine who was at fault.

Vehicle 1 was a temporary registration of C7625875. Driver 1 said he was waiting for the new plates to come in from Michigan. 306373D is the registration as per the vehicles VIN number.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GARRETSON C	391	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033232
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1111
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	E PARK AVE
At Intersection With	
Road Name	
Dir	-
11 Speed Limit	35
12 Route No.	-
Suffix	-
13 Milepost	-
☒ Feet ☐ Miles	200
☒ N ☐ E ☐ S ☐ W of:	E HARVARD ST
18 Speed Limit	35
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	-
21 Latitude	40.10408
22 Longitude	-74.20200

Vehicle 1

23 Veh #	1
24 Policy No.	4036508754
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	MENACHEM
Initial	N
Last Name	APTER
29 Sex	M
27 Number & Street	41 E 8TH ST
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	02
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	A71155397507982
33 DOB (mm dd yyyy)	07/16/1998
34 Expires (mm yy)	07 25
35 Owner's First Name	MIRIAM
Initial	-
Last Name	APTER
☐ Same As Driver	
36 Number & Street	41 E 8 ST
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	HOND
39 Model	ACC
40 Color	BLK
41 Year	2012
42 Plate No.	R50NLT
43 State	NJ
44 VIN	1HGCP2F38CA056435
45 Expires	03 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	5129J018318
55 NJ Ins. Code	917
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	RAFAEL
Initial	-
Last Name	SILBER
59 Sex	M
57 Number & Street	1244 41ST ST
58 City	BROOKLYN
State	NY
Zip	11218
60 Eyes	02
DL Class	-
Restrictions	-
Endorsements	-
61 State	NY
62 Driver's License Number	213042079
63 DOB (mm dd yyyy)	12/12/1996
64 Expires (mm yy)	12 25
65 Owner's First Name	SHIMON
Initial	I
Last Name	YAKOBOVITCH
☐ Same As Driver	
66 Number & Street	48 WHISPERING PINES LN
67 City	LAKEWOOD
State	NJ
Zip	08701
68 Make	TOYT
69 Model	SIE
70 Color	BLK
71 Year	2021
72 Plate No.	F92NDT
73 State	NJ
74 VIN	5TDJRKEC8MS005975
75 Expires	11 23
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1	136 Charge	137 Summons. No.	1	138 Charge	139 Summons. No.
2	140 Charge	141 Summons. No.	2	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	-	23	M	-	-	-	11	04	-	-	MENACHEM N APTER - 41 E 8TH ST LAKEWOOD NJ 08701
B	02	01	01	-	25	M	-	-	-	11	04	-	-	RAFAEL - SILBER - 1244 41ST ST BROOKLYN NY 11218
C														
D														

New Jersey Police Crash Investigation Report

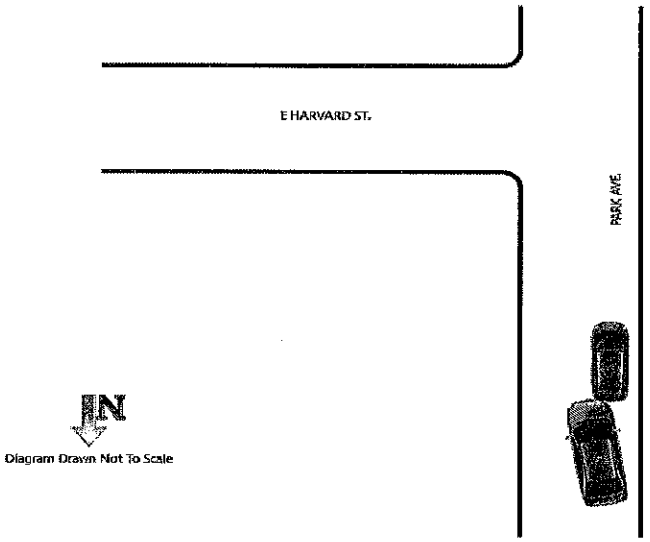
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033232

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated that he was traveling south on Park Ave. Driver of V1 further stated that while he was driving, he proceeded to come to a complete stop to let someone out of his vehicle. Driver of V1 stated that once the person got out of the vehicle, he was struck in the rear by V2. Driver of V2 stated that he was traveling directly behind V1 when V1 came to an abrupt stop. Driver of V2 further stated that at that time, he got too close to V1 and ultimately ended up striking V1 in the rear.

In conclusion to my investigation, I determined that the driver of V2 was at fault for following too closely.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
BROOKS D	351	EM	288	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033253
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1223
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	CROSS ST -
11 Speed Limit	40
Dir	-
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	25
☐ At Intersection With	
Road Name	
☒ Feet ☐ Miles	500
☐ N ☐ E ☐ S ☒ W of:	NEIMAN RD
14	15
16	
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	-
20 Route/Name	
21 Latitude	40.076070
22 Longitude	-74.250620
☐ NB ☐ EB ☐ SB ☐ WB	

Vehicle 1

23 Veh #	1
24 Policy No.	6085-46-05-06
25 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	AVRAHAM
Initial	-
Last Name	WALLACH -
29 Sex	M
27 Number & Street	329 MILLER RD
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	2
DL Class	I
Restrictions	-
Endorsements	-
31 State	NY
32 Driver's License Number	291200114
33 DOB (mm dd yyyy)	07/01/2002
34 Expires (mm yy)	07 24
35 Owner's First Name	AVRAHAM
Initial	-
Last Name	WALLACH -
☐ Same As Driver	
36 Number & Street	329 MILLER RD
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	JAGU
39 Model	STY
40 Color	4
41 Year	2004
42 Plate No.	A13PJT
43 State	NJ
44 VIN	SAJEA01U14HM98187
45 Expires	12 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	A0118634001
55 NJ Ins. Code	480
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	NISSIM
Initial	-
Last Name	SALEM -
59 Sex	M
57 Number & Street	1148 THORNBURY LN;A
58 City	MANCHESTER
State	NJ
Zip	08759
60 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	S02655940009482
63 DOB (mm dd yyyy)	09/12/1948
64 Expires (mm yy)	09 25
65 Owner's First Name	-
Initial	-
Last Name	ICAR AUTO SALES -
☐ Same As Driver	
66 Number & Street	6771 US HWY 9
67 City	HOWELL
State	NJ
Zip	07731
68 Make	TOYT
69 Model	SNA
70 Color	
71 Year	2015
72 Plate No.	*
73 State	NJ
74 VIN	5TDKK3DC0FS589453
75 Expires	03 23
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	19	M	-	-	-	11	04	-	-	AVRAHAM - WALLACH - 329 MILLER RD LAKEWOOD NJ 08701
B	02	01	01	05	73	M	-	-	-	11	04	-	-	NISSIM - SALEM - 1148 THORNBURY LN;A MANCHESTER NJ 08759
C														
D														

New Jersey Police Crash Investigation Report

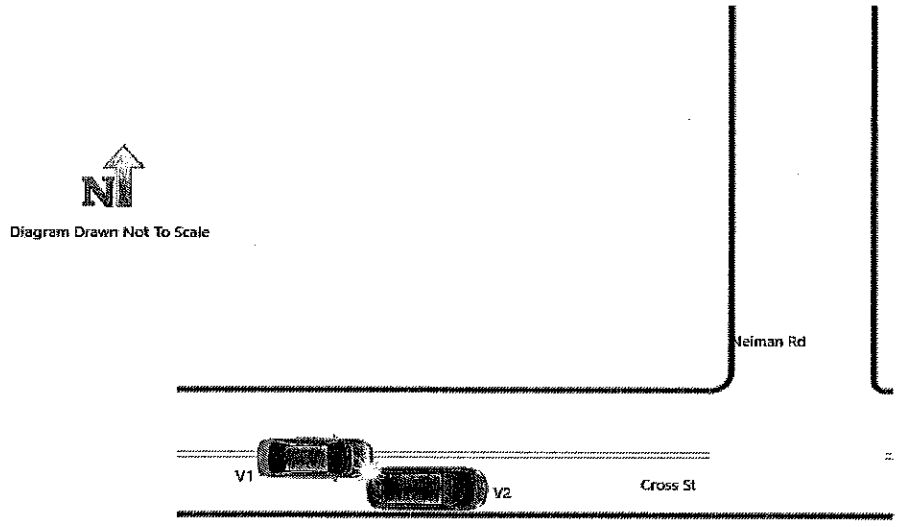
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033253

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling Eastbound on Cross St and crashed into the rear of vehicle 2.

Driver 1 stated he was traveling Eastbound on Cross St when he realized he was too close to vehicle 2. He slammed on his brakes but was unable to stop in time. He swerved into oncoming traffic but was unable to avoid the crash. He also stated he needed to replace his brakes.

Driver 2 stated he was traveling Eastbound on Cross St when vehicle 1 crashed into the real of his vehicle.

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

Vehicle 1 had a New Jersey dealer Registration of 67DLZ.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GARRETSON C	391	PA	325	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033270
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1412
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	MASSACHUSETTS AVE
Road Name	-
Dir	11 Speed Limit 35
12 Route No.	-
Suffix	-
13 Milepost	-
14	-
15	☐ Feet ☐ Miles
16	☒ At Intersection With ☐ N ☐ E ☐ S ☐ W of:
	PROSPECT ST
18 Speed Limit	35
19 Ramp	☐ To ☐ From: -
17 Cross Road Name	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.073330
22 Longitude	-74.227230

Vehicle 1

23 Veh #	1
24 Policy No.	92062922VB
25 NJ Ins. Code	141
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	YISROEL
Initial	-
Last Name	GORDON
29 Sex	M
27 Number & Street	1429 TANGLEWOOD LN
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	G65767900010722
33 DOB mm dd yyyy	10/06/1972
34 Expires mm	10
yy	24
35 Owner's	☐ Same As Driver
First Name	YISROEL
Initial	-
Last Name	GORDON
36 Number & Street	1429 TANGLEWOOD LN
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	TOYT
39 Model	SIE
40 Color	GRY
41 Year	2013
42 Plate No.	A11CVK
43 State	NJ
44 VIN	5TDKK3DC8DS322445
45 Expires	12 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	000-6422-371-2
55 NJ Ins. Code	038
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	ORYANAH
Initial	N
Last Name	EVANS
59 Sex	F
57 Number & Street	800 LAUREL ST
58 City	LAKEHURST
State	NJ
Zip	08733
60 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	E95296097553012
63 DOB mm dd yyyy	03/06/2001
64 Expires mm	03
yy	24
65 Owner's	☐ Same As Driver
First Name	ORYANAH
Initial	N
Last Name	EVANS
66 Number & Street	800 LAUREL ST
67 City	LAKEHURST
State	NJ
Zip	08733
68 Make	DODG
69 Model	NEO
70 Color	BGE
71 Year	2003
72 Plate No.	W85PRD
73 State	NJ
74 VIN	1B3ES56C43D101393
75 Expires	02 23
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	49	M	-	-	-	11	04	-	-	YISROEL - GORDON - 1429 TANGLEWOOD LN LAKEWOOD NJ 08701
B	02	01	01	05	21	F	-	-	-	11	04	-	-	ORYANAH N EVANS - 800 LAUREL ST LAKEHURST NJ 08733
C	02	04	01	05	2	F	-	-	-	05	05	-	-	MALAYAH - EVANS-GONZALES - 204 CEDARBRIDGE AVE; LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

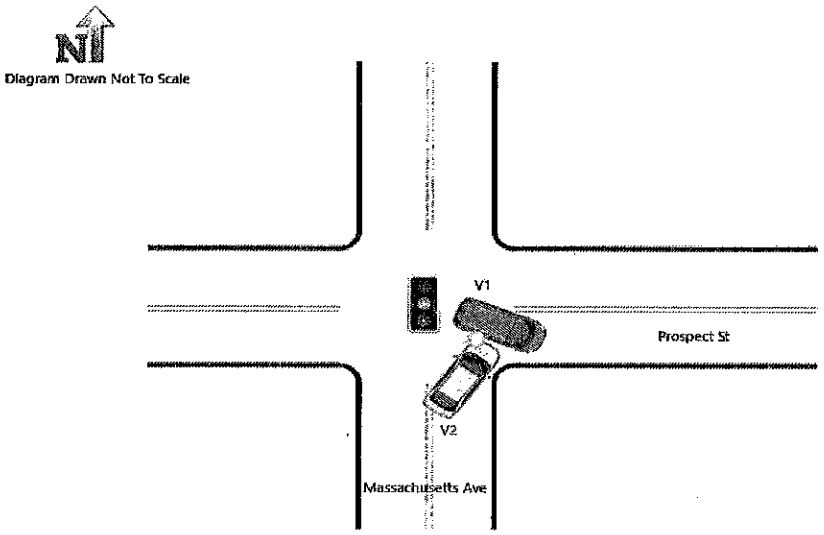
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033270

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 attempted to make a left turn onto Prospect St and crashed into vehicle 2 which was attempting to make a right turn onto Prospect St.

Driver 1 stated he had already made a left turn onto Prospect St when driver 2 attempted to make a right hand turn onto Prospect St. Vehicle 2 then crashed into the back right of vehicle 1.

Driver 2 stated she was attempting to make a right turn onto Prospect St. While she was turning she observed vehicle 1 attempt to make a left turn onto Prospect St. Vehicle 1 then crashed into the front left bumper of her vehicle.

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

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

The traffic signal at the intersection flashes red for Massachusetts Ave and yellow for Prospect St.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
GARRETSON C	391	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033274
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	TWIN OAKS DR
At Intersection With	
Road Name	
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	40
☒ Feet ☐ Miles	200
☒ N ☐ E ☐ S ☐ W of:	E KENNEDY RD
14	15
16	
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1436
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.107170
22 Longitude	-74.197970

Vehicle 1

23 Veh #	1
24 Policy No.	4264-90-15-23
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JOSEPH - SCHORR -
29 Sex	M
27 Number & Street	1201 TWIN OAKS DR
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	05 / A / - / - / NJ
32 Driver's License Number	S15064100010885
33 DOB mm dd yyyy	10/21/1988
34 Expires mm yy	10 23
35 Owner's First Name / Initial / Last Name	☐ Same As Driver JOSEPH - SCHORR -
36 Number & Street	1201 TWIN OAKS DR
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / CAM / TN / 1997 / V20KEJ / NJ
44 VIN	4T1BG22K3VU110843
45 Expires	07 22
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	AOJ-231-783430-40 1 B
55 NJ Ins. Code	370
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	RACHELLE - KOGEL -
59 Sex	F
57 Number & Street	18 GRASSMERE ST
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	05 / D / - / - / NJ
62 Driver's License Number	K61436370062805
63 DOB mm dd yyyy	12/15/1980
64 Expires mm yy	12 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver ZEV - KOGEL -
66 Number & Street	18 GRASSMERE ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / SIE / BLK / 2017 / V47ANW / NJ
74 VIN	5TDKZ3DC2HS859457
75 Expires	02 23
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	33	M	-	-	-	11	04	-	-	JOSEPH - SCHORR - 1201 TWIN OAKS DR LAKEWOOD NJ 08701
B	02	01	01	05	41	F	-	-	-	11	04	-	-	RACHELLE - KOGEL - 18 GRASSMERE ST LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033274

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

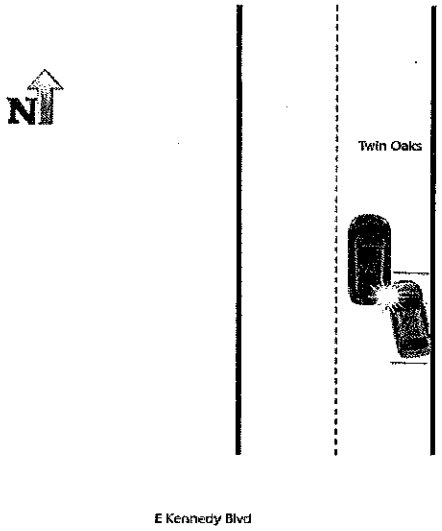


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver of vehicle one stated that he was exiting his parking space when he crashed into veh2. He stated that he did not notice veh2.

Driver of vehicle two stated that she was driving north on Twin Oaks when she was hit by veh1.

No medical attention needed.

Both vehicles sustained moderate damage.

I find veh1 at fault for the crash.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SMITH D	411	KCM	335	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033166
2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	0757
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	123 E KENNEDY BLVD
At Intersection With / Road Name / Dir	
Feet / Miles / N E S W of:	
11 Speed Limit	10
12 Route No. / Suffix / 13 Milepost / 18 Speed Limit	
17 Cross Road Name	
19 Ramp To / From	
20 Route/Name	
21 Latitude	40.10730
22 Longitude	-74.21482

Vehicle 1

23 Veh #	1
24 Policy No.	000-6438-704-2
25 NJ Ins. Code	038
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name / 29 Sex	COURTNEY / D / ROBERSON / - / F
27 Number & Street	125 EAST KENNEDY BLVD APT15
28 City / State / Zip	LAKEWOOD / NJ / 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	2 / D / - / - / NJ
32 Driver's License Number	R60171416459932
33 DOB (mm dd yyyy)	09/27/1993
34 Expires (mm yy)	09 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver / COURTNEY / D / ROBERSON / -
36 Number & Street	125 EAST KENNEDY BLVD APT15
37 City / State / Zip	LAKEWOOD / NJ / 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	CHEV / CBT - CO / WHI / 2010 / H18NDE / NJ
44 VIN / 45 Expires	1G1AB5F5XA7108495 / 01 23
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	*
55 NJ Ins. Code	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name / 59 Sex	VIKTORIA / - / OREHOVSZKI / - / F
57 Number & Street	145 E KENNEDY BLVD APT 1
58 City / State / Zip	LAKEWOOD / NJ / 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	2 / D / - / - / NJ
62 Driver's License Number	O73217690055922
63 DOB (mm dd yyyy)	05/09/1992
64 Expires (mm yy)	05 26
65 Owner's First Name / Initial / Last Name	☐ Same As Driver / VIKTORIA / - / OREHOVSZKI / -
66 Number & Street	145 E KENNEDY BLVD APT 1
67 City / State / Zip	LAKEWOOD / NJ / 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	MAZD / MX3 / 1 / 2006 / QSYC37 / FL
74 VIN / 75 Expires	1YVHP80D665M63928 / 05 23
76 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	28	F	-	-	-	11	04	-	-	COURTNEY D ROBERSON - 125 EAST KENNEDY BLVI LAKEWOOD NJ 08701
B	2	01	01	05	29	F	-	-	-	11	04	-	-	VIKTORIA - OREHOVSZKI - 145 E KENNEDY BLVD AF LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

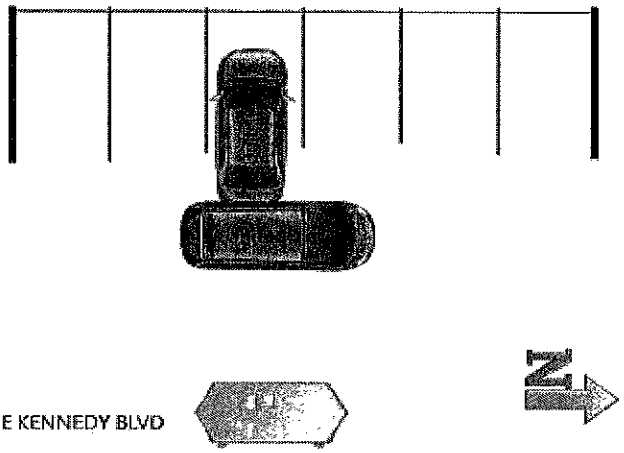
Station: _____ Case No: 22-033166

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

Diagram Drawn Not To Scale



145 Crash Description/Narrative

***VEHICLE 2'S INSURANCE INFO: PEAK PROPERTY AND CASUALTY INSURANCE CORPORATION POLICY#11406911978-01974 NAIC#18139 1-800-874-4453**

DRIVER OF VEHICLE 1 STATED SHE WAS BACKING FROM A PARKING SPOT AND DID NOT NOTICE VEHICLE 2 WHILE SHE WAS BACKING HER VEHICLE.

DRIVER OF VEHICLE 2 STATED SHE WAS GOING STRAIGHT IN THE PARKING LOT OF 123 E KENNEDY BLVD WHEN VEHICLE 1 BACKED INTO HER VEHICLE.

NO INJURIES REPORTED ON SCENE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VEGA E S	348	EM	288	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-027571
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	1900 STATE HWY 70; HOME D
11 Speed Limit	50
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	50
At Intersection With / Road Name / Dir	SHORROCK ST
☒ Feet ☐ Miles	200
☐ N ☐ E ☐ S ☒ W of:	
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash (mm dd yy)	04/11/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	2115
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.05471
22 Longitude	-74.16372

Vehicle 1

23 Veh #	1
24 Policy No.	193180221
25 NJ Ins. Code	170
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JARED T WORMAN -
29 Sex	M
27 Number & Street	97 LAKELAND DRIVE
28 City / State / Zip	BRICK NJ 08723
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	2 / D / - / - / NJ
32 Driver's License Number	W66133878303012
33 DOB (mm dd yyyy)	03/01/2001
34 Expires (mm yy)	03 26
35 Owner's First Name / Initial / Last Name	☐ Same As Driver DIONNE D WORMAN -
36 Number & Street	111 JIB CIRCLE
37 City / State / Zip	BRICK NJ 08724
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	INFI / G37 / BLK / 2013 / A14MBF / NJ
44 VIN	JN1CV6AP6DM714147
45 Expires	10 22
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	1157287F2603J
55 NJ Ins. Code	962
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	JOSHUA M SEJUELA -
59 Sex	M
57 Number & Street	123 SPRUCE MILL LN
58 City / State / Zip	SCOTCH PLAINS NJ 07076
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	6 / I / - / - / NJ
62 Driver's License Number	S23284117412056
63 DOB (mm dd yyyy)	12/06/2005
64 Expires (mm yy)	09 99
65 Owner's First Name / Initial / Last Name	☐ Same As Driver IDELFONSO - SEJUELA -
66 Number & Street	151 BALDWIN ST
67 City / State / Zip	BLOOMFIELD NJ 07003
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	RAM / 150 / WHI / 2015 / P72MTS / NJ
74 VIN	1C6RR7YT4FS785468
75 Expires	08 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01			02		
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	16	M	-	-	-	11	04	-	-	JOSHUA M SEJUELA - 123 SPRUCE MILL LN SCOTCH PLAINS NJ 07076
B	01	02	01	05	52	M	-	-	-	11	04	-	-	IDELFONSO - SEJUELA - 151 BALDWIN ST BLOOMFIELD NJ 07003
C	02	01	01	05	21	M	-	-	-	11	04	-	-	JARED T WORMAN - 97 LAKELAND DRIVE BRICK NJ 08723
D														

New Jersey Police Crash Investigation Report

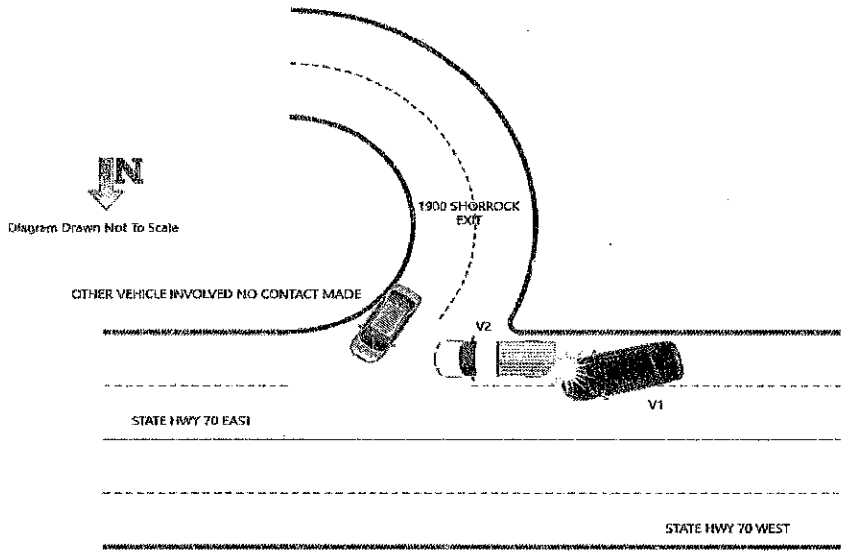
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-027571

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1: Stated that he was traveling East on Rt70 when V2 abruptly stopped in front of him. The driver of V1 stated that he tried to avoid the crash by braking and steering his car in to the next lane but he struck the rear of V2. The driver of V1 stated that prior to the crash he observed a vehicle pull out of 1900 Shorrock St in to the lane of travel on Rt 70. The driver of V1 stated that the other vehicle was the reason V2 had to abruptly slam on his breaks. The driver of V1 stated that he was not injured and he left the scene in his vehicle.

V2: Stated that he was traveling East on Rt70 when a vehicle darted out from 1900 Shorrock St in to the his lane of travel. The driver of V2 stated that he slammed on his brakes to avoid crashing in to that vehicle. The driver of V2 stated that while braking he was struck in the rear of his vehicle by V1. When asked the driver of V2 stated that his vehicle never came in to contact with the other vehicle. The driver of V2 and his passenger were not injured and both left the scene in their vehicle.

The third party involved identified as Alter Yoffe stated that he was pulling out of 1900 Shorrock St when V1 switched lanes and stopped. When asked Mr. Yoffe stated that there was no contact between his or any vehicles involved in this crash.

Through my brief investigation I can not determine fault as there are other contributing factors to this crash.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DANCEY R	360	SGT. M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032025
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	STATE HWY 70 W
At Intersection With / Road Name	
Dir	
11 Speed Limit	50
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	25
☒ Feet / ☐ Miles	150
☐ N ☒ E ☐ S ☐ W of:	VERMONT AVE
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash mm dd yy	04/22/22
5 Day Of Week	FRIDAY
6 Time (use 2400 hrs)	1412
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.04868
22 Longitude	-74.20939

Vehicle 1

23 Veh #	1
24 Policy No.	BAS58528667
25 NJ Ins. Code	011
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	SCOTT W ANDERSON -
29 Sex	M
27 Number & Street	1281 NEWARK AVE.
28 City / State / Zip	WHITING NJ 08759
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	4 / B / - / - / NJ
32 Driver's License Number / 33 DOB / 34 Expires	A58746948606664 / 06/29/1966 / 06 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - DOVER EXCAVATIN -
36 Number & Street	1746 LAKEWOOD RD
37 City / State / Zip	TOMS RIVER NJ 08755
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	WEST / - / RD / 2004 / XDUC62 / NJ
44 VIN / 45 Expires	2FZMAZCV84AM18832 / 09 22
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☒ USDOT 3076744 ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☒ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	949010060
55 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	VINCENT - NASUTA -
59 Sex	M
57 Number & Street	27 EAGLE RIDGE CIR
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	2 / D / - / - / NJ
62 Driver's License Number / 63 DOB / 64 Expires	N07827690002442 / 02/15/1944 / 02 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver VINCENT - NASUTA -
66 Number & Street	27 EAGLE RIDGE CIR
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	CHEV / VET / RD / 2019 / VETVET / NJ
74 VIN / 75 Expires	1G1YD2D72K5102358 / 05 22
76 Vehicle Removed To	TILTON'S AUTO BODY
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	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	55	M	-	-	-	11	04	-	-	SCOTT W ANDERSON - 1281 NEWARK AVE. WHITING NJ 08759
B	01	03	01	05	50	M	-	-	-	11	04	-	-	GEORGE L DUTCHER - 71 ARCHER AVE S BAYVILLE NJ 08721
C	02	01	01	05	78	M	-	-	-	11	04	-	-	VINCENT - NASUTA - 27 EAGLE RIDGE CIR LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

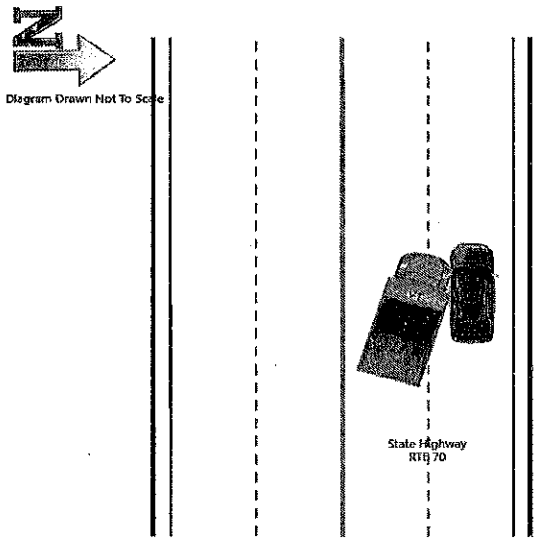
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-032025

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The Driver of vehicle 1 stated that he was traveling west bound on Rte 70 when he attempted to change lanes. Driver 1 stated that vehicle 2 was in his blind spot, he could not see vehicle 2, and crashed into the side of vehicle 2. There were no injuries reported or observed to the occupants of vehicle 1. Vehicle 1 sustained what appeared to be minor damage to the passenger side of the vehicle and was driven from the scene.

The driver of vehicle 2 stated that he was traveling west bound on Rte 70 when vehicle 1 side swiped his vehicle. There were no injuries reported or observed to the occupant of vehicle 2. Vehicle 2 sustained what appeared to be moderate damage to the driver side and was towed by Tilton's Auto Body.

Based on driver statements I find driver 1 at fault of the crash for driver inattention.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MOONEY JR M	330	EM	288	☐ Pending ☒ Complete

 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-033995
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	2028
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	CEDARBRIDGE AVE
11 Speed Limit	50
12 Route No.	0528
13 Milepost	
14	100
15	☐ At Intersection With ☒ Feet ☐ Miles
16	☐ N ☒ E ☐ S ☐ W of:
17 Cross Road Name	GARDEN STATE PARKWAY N
18 Speed Limit	55
19 Ramp	☐ To ☐ From:
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	40.06558
22 Longitude	-74.16199

Left margin codes: 96: 05; 97: 01; 98: 07; 99: 05; 100a: 01; 100b: 04; 101: 02; 102: 01; 103: 01; 104: 1; 105: 12; 106: -; 107: -; 108: 01; 109: -; 110: 01; 111: -; 112: -; 113: -; 114: -; 115: -; 116: 02; 117: -

Right margin codes: 118a: 57; 118b: -; 119a: -; 119b: -; 120a: 01; 120b: -; 121a: -; 121b: -; 122: 01; 123: -; 124: 04; 125: -; 126a: 24; 126b: -; 126c: -; 126d: -; 126e: 24; 127a: -; 127b: -; 127c: -; 127d: -; 127e: -; 128: ; 129: 11; 130: 11; 131: -; 132: -; 133: 03; 134: -

Vehicle 1

Field	Value
23 Veh #	1
24 Policy No.	947392567
25 NJ Ins. Code	134
	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name / Initial / Last Name	IOANNIS K PSARADAKIS -
29 Sex	M
27 Number & Street	316 NORTHROP ROAD
28 City / State / Zip	BRICK NJ 08723
30 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	P80073647208012
33 DOB	08/16/2001
34 Expires (mm yy)	08 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver IOANNIS K PSARADAKIS -
36 Number & Street	316 NORTHROP ROAD
37 City / State / Zip	BRICK NJ 08723
38 Make	BMW
39 Model	4
40 Color	WHI
41 Year	2016
42 Plate No.	X46NRW
43 State	NJ
44 VIN	WBA3N9C50GK249064
45 Expires	03 23
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

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

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

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1		N/A			

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	20	M	-	-	-	11	04	-	-	IOANNIS K PSARADAKIS - 316 NORTHROP ROAD BRICK NJ 08723
B														
C														
D														

New Jersey Police Crash Investigation Report

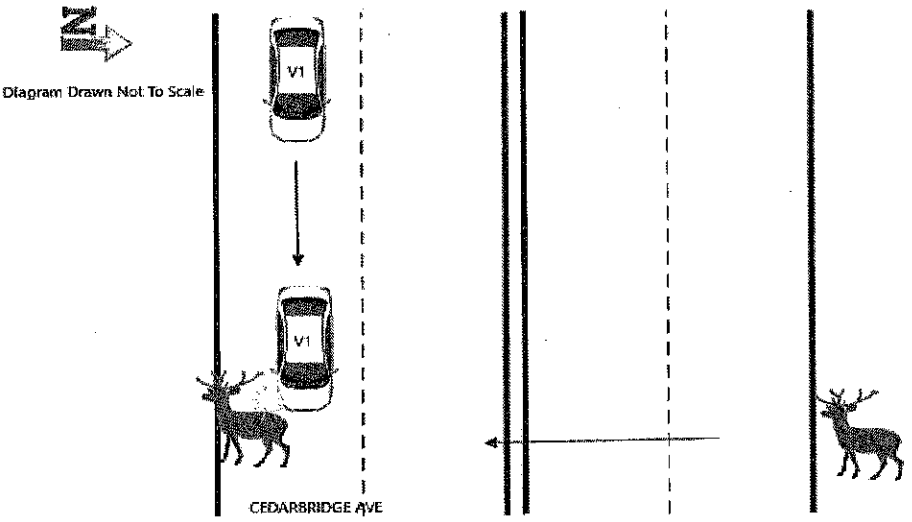
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033995

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was travelling East on Cedarbridge Avenue in the right lane going straight ahead. While in transit, a deer darted out into the roadway from the North side of Cedarbridge to the South side of the road. Driver 1 was unable to avoid the deer and it struck the front passenger side of his vehicle. Vehicle #1 sustained cracks to the front passenger side headlight along with scratches and dents to the hood of the vehicle. Vehicle #1 also sustained dents to the front passenger side quarter panel. There was no reports of injuries.

Driver 1 stated he was travelling straight ahead on Cedarbridge Avenue in the right lane. As he was in transit, a deer ran into his lane of travel and he was unable to avoid the crash.

A witness remained on scene after the deer was struck. They stated they were driving behind Vehicle #1 and observe the deer bounce off the front passenger side of Vehicle #1. (Phone number not provided).

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MCAVOY M	354	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034003
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	CEDARBRIDGE AVE
Road Name	
Dir	-
11 Speed Limit	45
12 Route No.	0528
Suffix	-
13 Milepost	-
10 Speed Limit	35
☐ At Intersection With	
☒ Feet ☐ Miles	50
☐ N ☐ E ☐ S ☒ W of:	MARTIN LUTHER KING DR
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	-
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	-
22 Longitude	-
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	2139
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--

Vehicle 1

23 Veh #	1
24 Policy No.	4331-90-54-24
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	ELI - GLEIBERMAN -
29 Sex	M
27 Number & Street	411 8TH ST
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements	5 / D / - / -
31 State	NJ
32 Driver's License Number	G52322050005915
33 DOB (mm dd yyyy)	05/22/1991
34 Expires (mm yy)	05 24
35 Owner's First Name / Initial / Last Name	☒ Same As Driver ELI - GLEIBERMAN -
36 Number & Street	411 8TH ST
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / CAM / GLD / 2010 / P83EWC / NJ
44 VIN	4T1BF3EK5AU093087
45 Expires	12 22
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: - Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	939864845
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	RICHARD - WITTENBURG -
59 Sex	M
57 Number & Street	530 BUTTONWOOD DRIVE
58 City / State / Zip	JACKSON NJ 08527
60 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
61 State	NJ
62 Driver's License Number	W47176550012682
63 DOB (mm dd yyyy)	12/05/1968
64 Expires (mm yy)	05 18
65 Owner's First Name / Initial / Last Name	☒ Same As Driver RICHARD - WITTENBURG -
66 Number & Street	530 BUTTONWOOD DRIVE
67 City / State / Zip	JACKSON NJ 08527
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	RAM / RAM / RD / 2016 / N57LSS / NJ
74 VIN	1C6RR7HT2GS418697
75 Expires	09 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class: - Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	30	M	-	-	-	11	04	-	-	ELI - GLEIBERMAN - 411 8TH ST LAKEWOOD NJ 08701
B	V2	01	01	05	53	M	-	-	-	11	04	-	-	RICHARD - WITTENBURG - 530 BUTTONWOOD DRIV JACKSON NJ 08527
C														
D														

New Jersey Police Crash Investigation Report

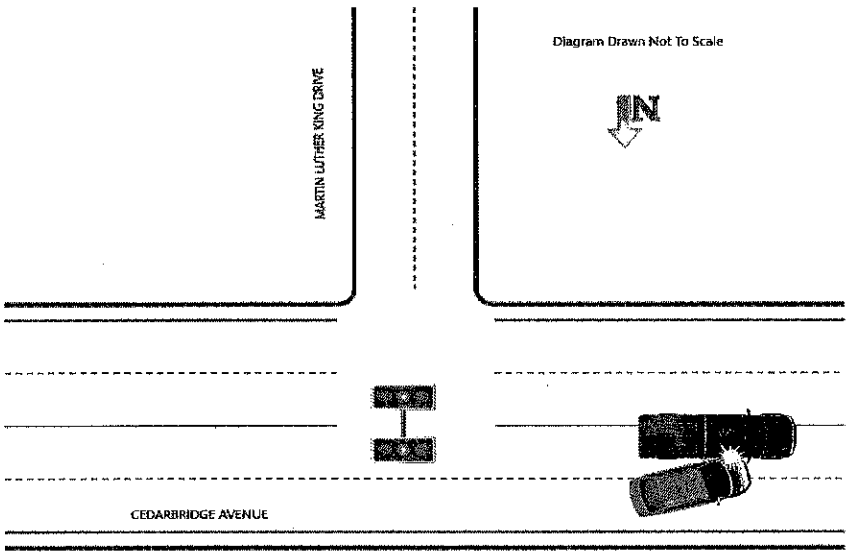
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-034003

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 2 ADVISED ME THAT HE WAS STOPPED AT THE TRAFFIC LIGHT ON CEDARBRIDGE AVENUE AND MARTIN LUTHER KING DRIVE. UPON THE TRAFFIC LIGHT TURNING GREEN, HE ADVISED ME THAT HE CONTINUED TRAVELING WEST BOUND IN THE LEFT LANE ON CEDARBRIDGE AVENUE, WHEN VEHICLE 1 PROCEEDED TURN INTO THE LEFT LANE FROM THE RIGHT LANE MAKING CONTRACT WITH THE PASSENGER SIDE DOOR OF HIS VEHICLE.

DRIVER OF VEHICLE 1 ADVISED ME THAT HE WAS STOPPED AT THE TRAFFIC LIGHT ON CEDARBRIDGE AVENUE AT THE INTERSECTION OF MARTIN LUTHER KING DRIVE, BEHIND A VEHICLE IN THE RIGHT LANE. UPON THE TRAFFIC LIGHT TURNING GREEN, HE ADVISED ME THAT HE CONTINUED TRAVELING WEST BOUND IN THE RIGHT LANE ON CEDARBRIDGE AVENUE. D1 STATED THAT THE VEHICLE HE WAS DRIVING BEHIND PROCEEDED TO PUT HIS RIGHT BLINKER ON TO TURN INTO THE PARKING LOT OF 105 CEDARBRIDGE AVENUE. AT THIS TIME, HE PROCEEDED TO PUT HIS LEFT TURNING SIGNAL ON INDICATING THAT HE WAS SWITCHING LANES. WHEN SWITCHING LANES HE MADE CONTRACT WITH V2 ON THE DRIVER SIDE QUARTER PANEL OF HIS VEHICLE.

UPON DOING MY INVESTAGATION I PUT VEHILCE 1 AT FAULT FOR FAILING TO THE RIGHT OF WAY OF ON COMING TRAFFIC WHEN TRYING TO SWITCH LANES.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
HOURIGAN D	429	SGT. M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033950
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	W COUNTY LINE RD
At Intersection With	☐
Road Name	
Dir	
11 Speed Limit	45
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	35
☒ Feet ☐ Miles	500
☐N ☐E ☐S ☒W of:	HOPE CHAPEL ROAD
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	
☐NB ☐EB ☐SB ☐WB	
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1645
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.11096
22 Longitude	-74.24017

Vehicle 1

23 Veh #	1
24 Policy No.	939690999
25 NJ Ins. Code	054
☐Parked ☐Ped ☐Pedalcyclist ☐Resp To Emergency ☐Hit & Run	
26 Driver's First Name / Initial / Last Name	DONALD - VANARSDALE -
29 Sex	M
27 Number & Street	5 HICKORY HILL ROAD
28 City / State / Zip	JACKSON NJ 08527
30 Eyes / DL Class / Restrictions / Endorsements	5 / D / - / -
31 State	NJ
32 Driver's License Number	V03811730003655
33 DOB (mm dd yyyy)	03/28/1965
34 Expires (mm yy)	03 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver GINA L SKOLKIN -
36 Number & Street	5 HICKORY HILL RD
37 City / State / Zip	JACKSON NJ 08527
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / TAC / SIL / 2022 / H27PJY / NJ
44 VIN	3TMDZ5BN8NM124454
45 Expires	01 26
46 Vehicle Removed To	☒Driven ☐Towed Disabled ☐Towed Disabled & Impounded ☐Left At Scene ☐Towed Impounded
47 Authority	☒Owner ☐Driver ☐Police
48 Alcohol/Drug Test	Given: ☒No ☐Yes ☐Refused Type: ☐Breath ☐Blood ☐Urine Results: 0.- % ☐Pending
49 Hazardous Material	☒None ☐On Board ☐Spill Hazard Class Placard No.
50 Carrier No.	☐USDOT ☐MC/MX ☒None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	4383-06-44-92
55 NJ Ins. Code	100
☐Parked ☐Ped ☐Pedalcyclist ☐Resp To Emergency ☐Hit & Run	
56 Driver's First Name / Initial / Last Name	PINCHUS Z MENDLOWITZ -
59 Sex	M
57 Number & Street	40 BATES RD
58 City / State / Zip	JACKSON NJ 08527
60 Eyes / DL Class / Restrictions / Endorsements	4 / D / - / -
61 State	NJ
62 Driver's License Number	M25156308901904
63 DOB (mm dd yyyy)	01/17/1990
64 Expires (mm yy)	01 26
65 Owner's First Name / Initial / Last Name	☐ Same As Driver PINCHUS Z MENDLOWITZ -
66 Number & Street	40 BATES RD
67 City / State / Zip	JACKSON NJ 08527
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / CAM / GRY / 2011 / V24FGC / NJ
74 VIN	4T1BF3EK7BU655699
75 Expires	04 23
76 Vehicle Removed To	☒Driven ☐Towed Disabled ☐Towed Disabled & Impounded ☐Left At Scene ☐Towed Impounded
77 Authority	☒Owner ☐Driver ☐Police
78 Alcohol/Drug Test	Given: ☒No ☐Yes ☐Refused Type: ☐Breath ☐Blood ☐Urine Results: 0.- % ☐Pending
79 Hazardous Material	☒None ☐On Board ☐Spill Hazard Class Placard No.
80 Carrier No.	☐USDOT ☐MC/MX ☒None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	57	M	-	-	-	11	04	-	-	DONALD - VANARSDALE - 5 HICKORY HILL ROAD JACKSON NJ 08527
B	02	01	01	05	32	M	-	-	-	11	04	-	-	PINCHUS Z MENDLOWITZ - 40 BATES RD JACKSON NJ 08527
C														
D														

New Jersey Police Crash Investigation Report

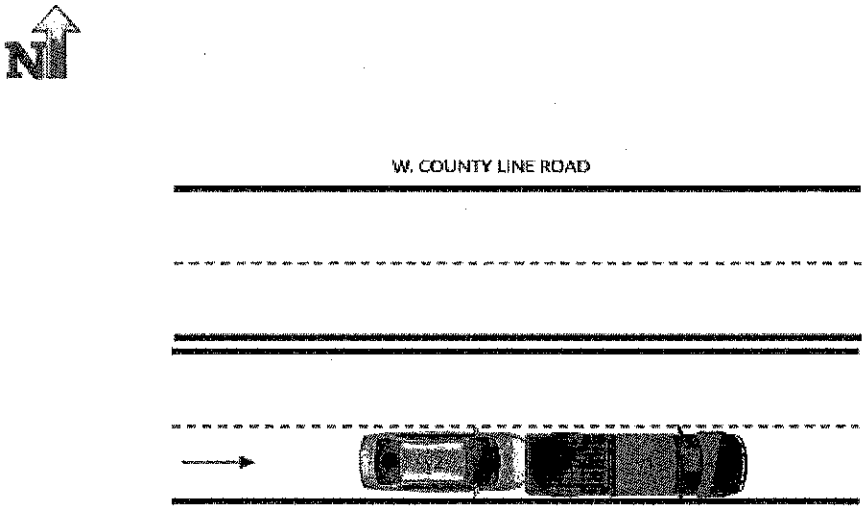
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033950

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED HE WAS STOPPED IN TRAFFIC ON W. COUNTY LINE ROAD FACING EAST WITH A RIGHT BLINKER ON WHEN HE WAS STRUCK IN THE REAR BY VEHICLE 2.

DRIVER OF VEHICLE 2 STATED "I TOOK MY EYES OFF THE ROAD... I LOOKED DOWN TO PICK SOMETHING UP" BEFORE CRASHING INTO THE REAR OF VEHICLE 1.

THIS INVESTIGATION DETERMINED THAT THE DRIVER OF VEHICLE 2 WAS NOT PAYING ATTENTION AND FAILED TO STOP IN TRAFFIC.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SEUNATH K	284	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033960
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1727
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	RIVER AVENUE (Road Name)
Dir	-
11 Speed Limit	45
12 Route No.	0009
Suffix	-
13 Milepost	-
14	-
15	☐ Feet ☐ Miles
16	☐ N ☐ E ☐ S ☐ W
☒ At Intersection With	FORD AVENUE
18 Speed Limit	25
19 Ramp	☐ To ☐ From
17 Cross Road Name	-
20 Route/Name	☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	4616482727
25 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	ELAINE
Initial	-
Last Name	VESHNEFSKY -
29 Sex	F
27 Number & Street	102 ELMHURST BLVD
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	6
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	V28042000058956
33 DOB (mm dd yyyy)	08/14/1995
34 Expires (mm yy)	08 22
35 Owner's First Name	DOVID
Initial	-
Last Name	VESHNEFSKY -
☐ Same As Driver	
36 Number & Street	29 FREEDOM DR
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	TOYT
39 Model	CAM
40 Color	SIL
41 Year	2011
42 Plate No.	R83NWX
43 State	NJ
44 VIN	4T4BF3EK3BR165167
45 Expires	06 23
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
	Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	951206232
55 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	ARYEH
Initial	L
Last Name	GOLDBERGER -
59 Sex	M
57 Number & Street	5 ALBANY AVE
58 City	JACKSON
State	NJ
Zip	08527
60 Eyes	4
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	G62230627303984
63 DOB (mm dd yyyy)	03/20/1998
64 Expires (mm yy)	03 23
65 Owner's First Name	ARYEH
Initial	L
Last Name	GOLDBERGER -
☐ Same As Driver	
66 Number & Street	5 ALBANY AVE
67 City	JACKSON
State	NJ
Zip	08527
68 Make	NISS
69 Model	ROG
70 Color	BLU
71 Year	2018
72 Plate No.	N41PGV
73 State	NJ
74 VIN	5N1AT2MV1JC837140
75 Expires	11 22
76 Vehicle Removed To	MOISHY'S
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
	Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☒ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	26	F	-	-	-	11	04	-	-	ELAINE - VESHNEFSKY - 102 ELMHURST BLVD LAKEWOOD NJ 08701
B	V2	01	01	05	24	M	-	-	-	11	04	-	-	ARYEH L GOLDBERGER - 5 ALBANY AVE JACKSON NJ 08527
C														
D														

New Jersey Police Crash Investigation Report

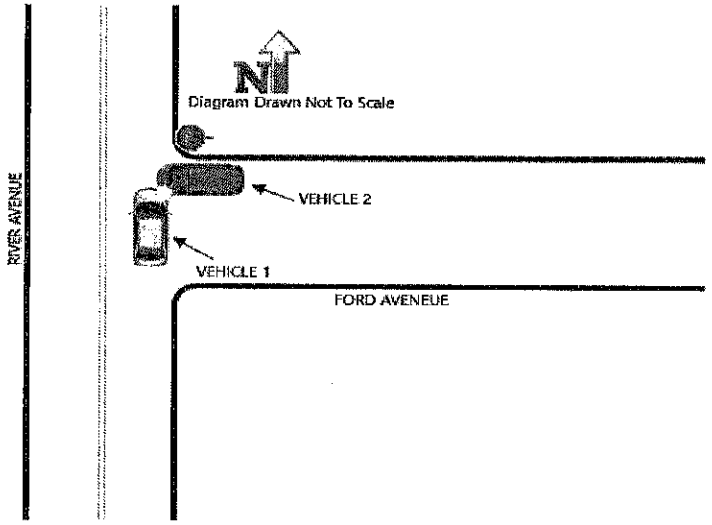
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033960

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 stated she was travelling north on river avenue when Vehicle 2 pulled out making contact with her vehicle.

The driver of Vehicle 2 stated he was at the stop sign of the intersection of River Avenue and Ford Avenue, when he attempted to travel west in the direction towards Finchley Boulevard Vehicle 1 made contact with his vehicle.

Upon my investigation, I can conclude that the driver of Vehicle 2 is at fault for the crash because he failed yield to oncoming vehicles that had the right of way.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VEGA B	428	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033963
2 Police Dept of	LAKEWOOD POLICE
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	NEW HAMPSHIRE AVE
At Intersection With	☐
Road Name	NEW HAMPSHIRE AVE
Dir	-
11 Speed Limit	50
12 Route No.	0623
Suffix	-
13 Milepost	-
18 Speed Limit	50
☒ Feet / ☐ Miles	250
☐ N ☐ E ☒ S ☐ W of:	STATE HWY 70 E
14	250
15	
16	
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	-
21 Latitude	-
22 Longitude	-
4 Date of Crash mm dd yy	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1740
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--

Vehicle 1

23 Veh #	1
24 Policy No.	4626-94-52-18
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	SHLOMO - BARRISH
29 Sex	M
27 Number & Street	4 COURTNEY RD
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements	04 / D / - / -
31 State	NJ
32 Driver's License Number	B06707090006924
33 DOB mm dd yyyy	06/11/1992
34 Expires mm yy	06 26
35 Owner's First Name / Initial / Last Name	☒ Same As Driver SHLOMO - BARRISH
36 Number & Street	4 COURTNEY RD
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	LEXU / ES3 / BLK / 2016 / R85MHG / NJ
44 VIN	58ABK1GG7GU010186
45 Expires	03 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	954331686
55 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	MARILYN - HUERTERO
59 Sex	F
57 Number & Street	36 ERICA RD
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements	01 / D / - / -
61 State	NJ
62 Driver's License Number	H91195190062881
63 DOB mm dd yyyy	12/03/1988
64 Expires mm yy	12 25
65 Owner's First Name / Initial / Last Name	☒ Same As Driver MARILYN - HUERTERO
66 Number & Street	36 ERICA RD
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	FORD / EXP / RD / 2004 / L65PKU / NJ
74 VIN	1FMZU73K44UB01103
75 Expires	12 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	Charge	Summons No.	Oper.	Charge	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	29	M	-	-	-	11	04	-	-	SHLOMO - BARRISH - 4 COURTNEY RD LAKEWOOD NJ 08701 - -
B	01	04	01	05	6	F	-	-	-	11	04	-	-	CHAYA - BARRISH - 4 COURTNEY RD LAKEWOOD NJ 08701 - -
C	02	01	01	05	33	F	-	-	-	11	04	-	-	MARILYN - HUERTERO - 36 ERICA RD LAKEWOOD NJ 08701 - -
D														

New Jersey Police Crash Investigation Report

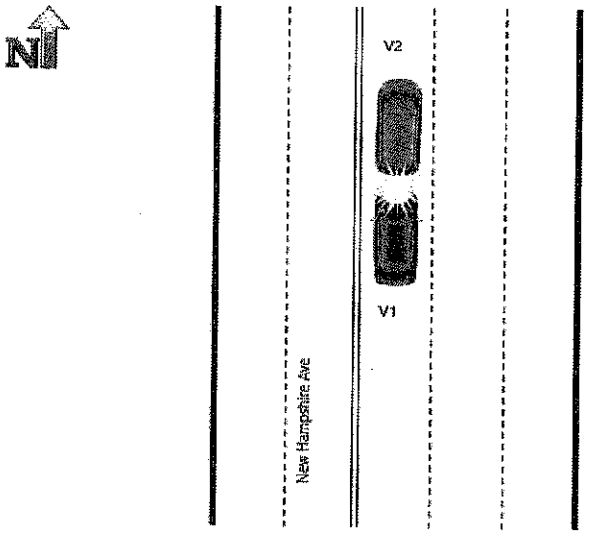
Police Dept: **LAKEWOOD POLICE** Code: **01**

Station: - Case No: **22-033963**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that he was traveling north bound on New Hampshire Ave when vehicle 2 had braked suddenly causing him to strike vehicle 2 in the rear.

Driver 2 stated that she was stopped in traffic traveling north bound on New Hampshire Ave when she was struck by vehicle one in the rear.

After my investigation I determined Driver 1 to be at fault for following too closely and striking vehicle 2 in the rear.

There were no reported injuries on scene. Vehicle 1 sustained moderate damage to the front bumper. Vehicle 2 sustained minor damage to the rear bumper.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAMACHO L	**828**	**E. MIICK**	**307**	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033619
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	LAURELWOOD AVE
☒ At Intersection With	BRITTANY CT
☐ Feet ☐ N ☐ E of: ☐ Miles ☐ S ☐ W	
11 Speed Limit	25
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	25
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash mm dd yy	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1252
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.10716
22 Longitude	-74.22811

Vehicle 1

23 Veh #	1
24 Policy No.	4591-22-32-03
25 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	FRAIDA S ZUPNICK
29 Sex	F
27 Number & Street	607 W KENNEDY BLVD
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	- / - / - / - / NJ
32 Driver's License Number	Z93222678252974
33 DOB mm dd yyyy	02/25/1997
34 Expires mm yy	02 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver BINYOMIN B WILLMAN
36 Number & Street	607 W KENNEDY BLVD
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / CAM / TN / 2015 / G32LGL / NJ
44 VIN	4T1BF1FK4FU089364
45 Expires	05 23
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	PA236239000
55 NJ Ins. Code	184
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	DINAH - INGBER
59 Sex	F
57 Number & Street	39 BUCHANAN ST
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	4 / A / - / - / NJ
62 Driver's License Number	I59141690058844
63 DOB mm dd yyyy	08/29/1984
64 Expires mm yy	08 25
65 Owner's First Name / Initial / Last Name	☐ Same As Driver SIMCHA - INGBER
66 Number & Street	39 BUCHANAN ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	MERZ / GLS / BLK / 2020 / U99MNP / NJ
74 VIN	4JGFF5KE1LA142463
75 Expires	06 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	25	F	-	-	-	11	04	-	-	FRAIDA S ZUPNICK - 607 W KENNEDY BLVD LAKEWOOD NJ 08701
B	02	01	01	05	37	F	-	-	-	11	04	-	-	DINAH - INGBER - 39 BUCHANAN ST LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

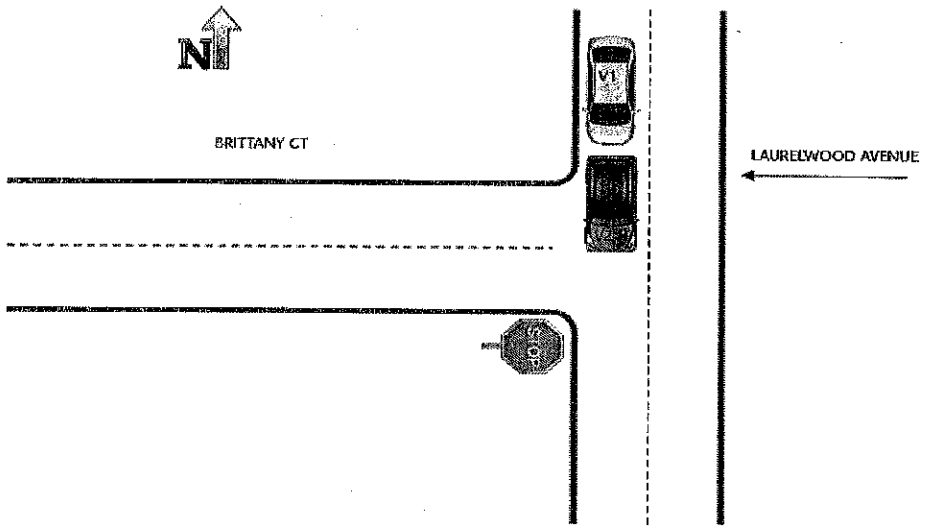
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033619

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V1 STATED THAT SHE TRIED TO STOP, BUT COULD NOT STOP IN TIME. DRIVER OF V2 STATED THAT SHE WAS STOPPED AT A RED LIGHT AND WAS HIT FROM BEHIND.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
YOUMANS R	250	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033708
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	1950
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	MASSACHUSETTS AVE
At Intersection With	☐
Road Name	MASSACHUSETTS AVE
Dir	-
11 Speed Limit	40
12 Route No.	-
Suffix	-
13 Milepost	-
18 Speed Limit	40
☒ Feet	☐ Miles
1000	
☐ N ☒ E ☐ S ☐ W of:	PROPSECT STREET
14	15
16	
17 Cross Road Name	-
19 Ramp ☐ To ☐ From:	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.073330
22 Longitude	-74.227230

Vehicle 1

23 Veh #	1
24 Policy No.	HPA00002671741
25 NJ Ins. Code	411
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	JOSE
Initial	-
Last Name	LOPEZ-QUIROZ
29 Sex	M
27 Number & Street	360 JOE PARKER RD # B
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	-
DL Class	-
Restrictions	-
Endorsements	-
31 State	-
32 Driver's License Number	-
33 DOB (mm dd yyyy)	05/07/1997
34 Expires (mm yy)	- -
35 Owner's Same As Driver	☐
First Name	JUAN
Initial	C
Last Name	HERNANDEZSORIA -
36 Number & Street	458 BREWERS BRIDGE ROAD
37 City	JACKSON
State	NJ
Zip	08527
38 Make	CADI
39 Model	CTS
40 Color	WHI
41 Year	2011
42 Plate No.	Z71NTD
43 State	NJ
44 VIN	1G6DJ1ED2B0152996
45 Expires	05 22
46 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☒ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
50 Carrier No.	☐ USDOT - ☐ None
	☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	4T1BF1FK2FU014341
55 NJ Ins. Code	189
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	JOEL
Initial	-
Last Name	ADERET -
59 Sex	M
57 Number & Street	910 HEARTHSTONE DR
58 City	LAKEWOOD
State	NJ
Zip	08701
60 Eyes	GR
DL Class	A
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	A18214050011836
63 DOB (mm dd yyyy)	11/29/1983
64 Expires (mm yy)	11 23
65 Owner's Same As Driver	☐
First Name	JOEL
Initial	-
Last Name	ADERET -
66 Number & Street	910 HEARTHSTONE DR
67 City	LAKEWOOD
State	NJ
Zip	08701
68 Make	TOYT
69 Model	CAM
70 Color	SIL
71 Year	2015
72 Plate No.	WDZ45V
73 State	NJ
74 VIN	4T1BF1FK2FU014341
75 Expires	08 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
80 Carrier No.	☐ USDOT - ☐ None
	☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
01	39:3-10	292716	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
-		-	-		-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	24	M	-	-	-	11	04	-	-	JOSE - LOPEZ-QUIROZ - 360 JOE PARKER RD # B LAKEWOOD NJ 08701 - -
B	01	03	01	05	44	F	-	-	-	11	04	-	-	ESTHER - SORIANO - 360 JOE PARKER RD # B LAKEWOOD NJ 08701 - -
C	02	01	01	05	38	M	-	-	-	11	04	-	-	JOEL - ADERET - 910 HEARTHSTONE DR LAKEWOOD NJ 08701 - -
D														

New Jersey Police Crash Investigation Report

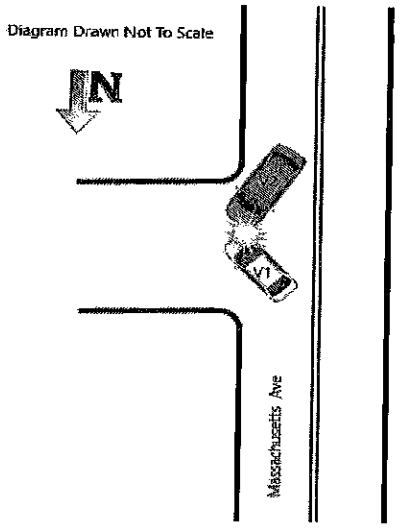
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033708

(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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 states that he was traveling south bound on Massachusetts Ave and attempted to make a left hand turn into the High Point apartment complex when he was struck on the right side of the front bumper and passenger side wheel.

Driver 2 states that he was traveling north bound on Massachusetts Ave and attempted to make a right hand turn into the High Point apartment complex when he was struck on the left side of the front bumper.

After my investigation I determined driver 1 to be at fault for not yielding to oncoming traffic and attempting to turn in front of vehicle 2 causing the collision.

There were no reported injuries on scene. Vehicle 1 sustained minor damage to the left side of the front bumper. Vehicle 2 sustained minor damage to the right side of the front bumper. Driver 1 was issued a summons for driving without a driver's license (39:3-10A). Vehicle 1 was left on scene to later be picked up by a licensed driver.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CAMACHO L	828	E. MIICK	307	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033842
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	0815
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	NEW HAMPSHIRE AVE
At Intersection With	☐
Road Name	NEW HAMPSHIRE AVE
Dir	-
11 Speed Limit	40
12 Route No.	-
Suffix	-
13 Milepost	-
14 Feet	250
15 Miles	☐
16 N ☐ E ☐ S ☒ W	S
of:	RIDGE AVE
18 Speed Limit	35
19 Ramp	☐ To ☐ From
17 Cross Road Name	-
NB ☐ EB ☐ SB ☐ WB	☐
20 Route/Name	-
21 Latitude	40.09957
22 Longitude	-74.17654

Vehicle 1

23 Veh #	1
24 Policy No.	939875952
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	ORSHIN
Initial	J
Last Name	WILLIAMS
29 Sex	M
27 Number & Street	105 COLONIAL DR
28 City	BRICK
State	NJ
Zip	08724
30 Eyes	2
DL Class	A
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	W43656087108892
33 DOB (mm dd yyyy)	08/20/1989
34 Expires (mm yy)	08 23
35 Owner's	☐ Same As Driver
First Name	ORSHIN
Initial	J
Last Name	WILLIAMS
36 Number & Street	105 COLONIAL DR
37 City	PCA BRICK
State	NJ
Zip	08724
38 Make	VOLK
39 Model	PAS - PA
40 Color	4
41 Year	2008
42 Plate No.	Z67PJS
43 State	NJ
44 VIN	WVWEK73C58E197860
45 Expires	12 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine	
Results: 0. - % ☐ Pending	
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
50 Carrier No.	☐ USDOT - ☒ None
☐ MC/MX -	
51 GVWR/GCWR	☒ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs	
☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	UNINSURED
55 NJ Ins. Code	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	JUAN
Initial	A
Last Name	LUNA
59 Sex	M
57 Number & Street	380 JOE PARKER RD; E
58 City	LAKEWOOD
State	NJ
Zip	08701
60 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	L92554156108002
63 DOB (mm dd yyyy)	08/12/2000
64 Expires (mm yy)	08 24
65 Owner's	☒ Same As Driver
First Name	JUAN
Initial	A
Last Name	LUNA
66 Number & Street	380 JOE PARKER RD; E
67 City	LAKEWOOD
State	NJ
Zip	08701
68 Make	DODG
69 Model	STA
70 Color	GRY
71 Year	2004
72 Plate No.	Z24NBY
73 State	NJ
74 VIN	1B3EL46X94N212933
75 Expires	12 21
76 Vehicle Removed To	TILTON'S AUTO BODY
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☒ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine	
Results: 0. - % ☐ Pending	
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
80 Carrier No.	☐ USDOT - ☒ None
☐ MC/MX -	
81 GVWR/GCWR	☒ Weight <= 10,000 lbs
☐ Weight 10,001-26,000 lbs	
☐ Weight >= 26,001 lbs	
82 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

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

-

Oper.	136 Charge	137 Summons. No.
2	39:3-4	292532
Oper.	140 Charge	141 Summons. No.

Oper.	138 Charge	139 Summons. No.
	39:6B-2	292533
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	32	M	-	-	-	11	04	-	-	ORSHIN J WILLIAMS - 105 COLONIAL DR BRICK NJ 08724
B	02	01	01	05	21	M	-	-	-	11	04	-	-	JUAN A LUNA - 380 JOE PARKER RD; E LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033842

(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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)

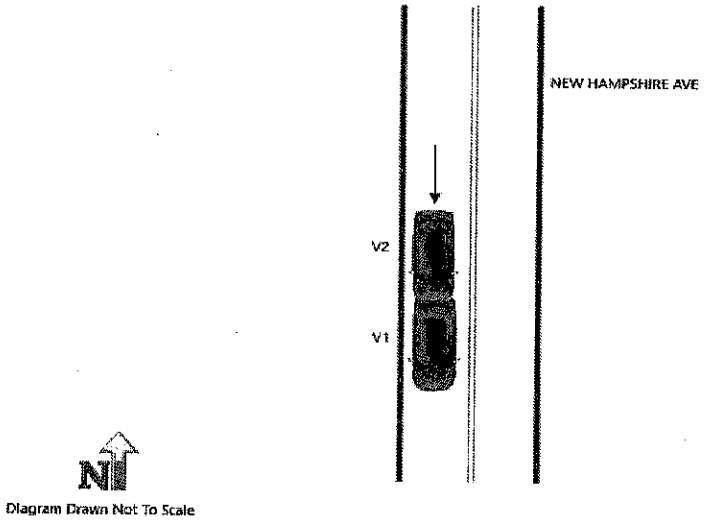


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver 1, Orshin Williams was operating a 2008 Volkswagen Passat, NJ Z67-PJS. Mr. Williams stated he was traveling south on New Hampshire Avenue just south of Ridge Avenue. He was traveling slow in moderate traffic when the rear of his vehicle was struck by the front of the vehicle traveling behind him.

Driver 2, Juan Luna was operating a 2004 Dodge Stratus, NJ Z24-NBY. Mr. Luna stated he was traveling south on New Hampshire Avenue just south of Ridge Avenue when a vehicle traveling in the opposite direction appeared to be driving partially in his lane coming towards him. He swerved his vehicle to the right to avoid a collision with the vehicle coming north in his lane. After passing by that vehicle he didn't realize traffic ahead of him had slowed down. He was unable to slow his vehicle in time and struck the rear of vehicle 1. End of report.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
PEDERSON JON	305	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033846
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	0838
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	OBERLIN AVE S (Road Name)
Dir	
11 Speed Limit	40
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	50
☒ At Intersection With	CEDARBRIDGE AVE
☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of:	
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.073720
22 Longitude	-74.179350

Vehicle 1

23 Veh #	1
24 Policy No.	1224377F0730B
25 NJ Ins. Code	896
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MARIA A GONZALEZCEBALLO -
29 Sex	F
27 Number & Street	416 CENTRAL AVE
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / NJ
32 Driver's License Number	G64595196162802
33 DOB (mm dd yyyy)	12/06/1980
34 Expires (mm yy)	12 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver MARIA A GONZALEZCEBALLC -
36 Number & Street	416 CENTRAL AVE
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	CHEV / BLA / WHI / 2002 / W43PJS / NJ
44 VIN	1GNDS13S722376790
45 Expires	12 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	4032397715
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	MIRIAM - GELBHAUER -
59 Sex	F
57 Number & Street	126 POWDERHORN DR
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	06 / D / - / - / NJ
62 Driver's License Number	G23545580052036
63 DOB (mm dd yyyy)	02/26/2003
64 Expires (mm yy)	02 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver SUSAN M GELBHAUER -
66 Number & Street	126 POWDERHORN DR
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / COR / GRY / 2016 / L62MVV / NJ
74 VIN	2T1BURHE9GC666405
75 Expires	09 22
76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	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	-	41	F	-	-	-	11	04	-	-	MARIA A GONZALEZCEBALLO - 416 CENTRAL AVE LAKEWOOD NJ 08701
B	2	01	01	-	19	F	-	-	-	11	04	-	-	MIRIAM - GELBHAUER - 126 POWDERHORN DR LAKEWOOD NJ 08701
C	1	03	01	-	48	F	-	-	-	11	04	-	-	MARIBEL - SOTOBAUTISTA - 319 CENTRAL AVE LAKEWOOD NJ 08701
D														

New Jersey Police Crash Investigation Report

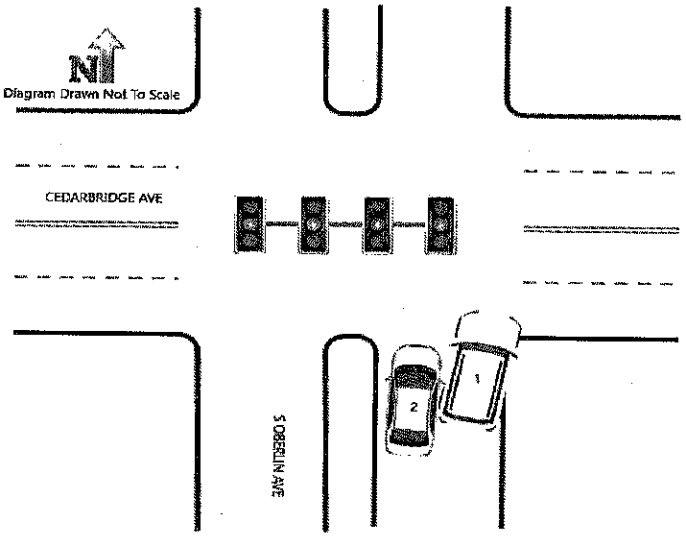
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033846

(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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was traveling North on Oberlin Ave S at the intersection with Cedarbridge Ave stopped in traffic waiting to make a right turn on red. Vehicle #2 was traveling North on Oberlin Ave S behind vehicle #1. vehicle #2 then pulled to the left side of vehicle #1 and sideswiped vehicle #1 while attempting to make a right turn onto Cedarbridge Ave. Driver #1 stated that she was stopped in traffic waiting to make a right turn on red and vehicle #2 came up and sideswiped her vehicle. Driver #2 stated that vehicle #1 started to turn, and she thought vehicle #1 had made it's turn but then she realized that vehicle #1 had stopped. Driver #2 was following too closely causing the crash.

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033854
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	0930
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	CEDARBRIDGE AVE
At Intersection With	☐
Road Name	CEDARBRIDGE AVE
Dir	-
11 Speed Limit	40
12 Route No.	
Suffix	
13 Milepost	
18 Speed Limit	30
☒ Feet / ☐ Miles	20
☐ N ☒ E ☐ S ☐ W of:	AVENUE OF THE STATES
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	40.07822
22 Longitude	-74.19055

Vehicle 1

23 Veh #	1
24 Policy No.	
25 NJ Ins. Code	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JOSE / A / PONCE MARTINEZ -
29 Sex	M
27 Number & Street	176 WOODLAKE MANOR DR
28 City / State / Zip	LAKEWOOD / NJ / 08701
30 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
31 State	-
32 Driver's License Number	-
33 DOB (mm dd yyyy)	09/23/2001
34 Expires (mm yy)	- -
35 Owner's First Name / Initial / Last Name	☐ Same As Driver / ALBINO MUNOZ - MENA -
36 Number & Street	25332 BEE TREE RD
37 City / State / Zip	HENDERSON / MD -
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	LINC / ZEP / BLK / 6 / 2EK7707 / MD
44 VIN	3LNHM261B6R664196
45 Expires	12 31
46 Vehicle Removed To	
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☐ Driver ☒ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	A02-238-726925-00 21
55 NJ Ins. Code	182
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	YAFFA / - / FRANKEN -
59 Sex	F
57 Number & Street	40 E. 9TH STREET
58 City / State / Zip	LAKEWOOD / NJ / 08701
60 Eyes / DL Class / Restrictions / Endorsements	2 / A / - / -
61 State	NJ
62 Driver's License Number	F71917890056712
63 DOB (mm dd yyyy)	06/16/1971
64 Expires (mm yy)	06 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver / PHILIP - FRANKEN -
66 Number & Street	40 E. 9TH STREET
67 City / State / Zip	LAKEWOOD / NJ / 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / HIG / WHI / 2021 / E96NLH / NJ
74 VIN	5TDGZRBHXMS095858
75 Expires	03 24
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1	39:3-10	1514A292129			
	140 Charge	141 Summons No.		142 Charge	143 Summons No.

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	20	M	-	-	-	11	04	-	-	JOSE A PONCE MARTINEZ - 176 WOODLAKE MANOR LAKEWOOD NJ 08701
B	2	01	01	05	50	F	-	-	-	11	04	-	-	YAFFA - FRANKEN - 40 E. 9TH STREET LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

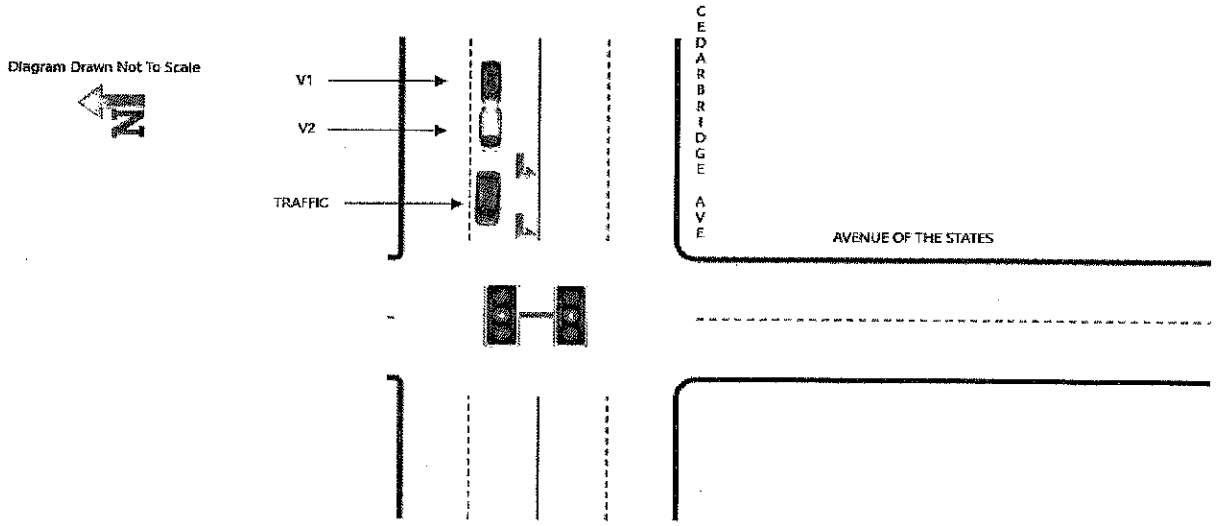
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033854

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 said he was traveling on Cedarbridge Ave going West, when V2 stopped in front of him. He tried to stop but could not stop in time and struck V2.

Driver of V2 said she was traveling West on Cedarbridge Ave, traffic was stopping for the traffic light (intersection of Avenue of the States). So she started to stop and her vehicle was struck from behind by V1.

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

V1 Insurance Info.: Progressive
ACG SERVICES LLC 1-443-559-8780
1015 Old Eastern Ave
Essex MD 21221

Policy # 943360003

NAIC # 32786

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CARABALLO A	298	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033892
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	HOPE CHAPEL RD
Road Name	
Dir	N
11 Speed Limit	45
12 Route No.	
Suffix	
13 Milepost	
18 Speed Limit	25
☒ At Intersection With	
☐ Feet ☐ Miles	☐ N ☐ E ☐ S ☐ W of: CLEARSTREAM ROAD
14	15
16	
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1202
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.09983
22 Longitude	-74.25196

Vehicle 1

23 Veh #	1
24 Policy No.	2007044309
25 NJ Ins. Code	233
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	SARAH R METZGER -
29 Sex	F
27 Number & Street	5 JESSICA CT
28 City / State / Zip	JACKSON NJ 08527
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	2 / D / - / - / NJ
32 Driver's License Number	M28926917962852
33 DOB mm dd yyyy	12/27/1985
34 Expires mm yy	12 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver NOAH M METZGER -
36 Number & Street	21 FERN ST
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / SIE / SIL / 2014 / X63JHE / NJ
44 VIN	5TDKK3DC8ES504079
45 Expires	10 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	4316-97-61-43
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	WAYNE R WAGNER -
59 Sex	M
57 Number & Street	1622 MONMOUTH AVE; 17
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	2 / D / - / - / NJ
62 Driver's License Number	W01507797907692
63 DOB mm dd yyyy	07/13/1969
64 Expires mm yy	07 22
65 Owner's First Name / Initial / Last Name	☐ Same As Driver WAYNE R WAGNER -
66 Number & Street	1622 MONMOUTH AVE; 17
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	MAZD / TRI / WHI / 2002 / N60NZY / NJ
74 VIN	4F2YU08152KM40291
75 Expires	08 22
76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1		-	2		-
	140 Charge	141 Summons No.		142 Charge	143 Summons No.

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	36	F	-	-	-	11	04	-	-	SARAH R METZGER - 5 JESSICA CT JACKSON NJ 08527
B	2	01	01	05	52	M	-	-	-	11	04	-	-	WAYNE R WAGNER - 1622 MONMOUTH AVE; 1 LAKEWOOD NJ 08701
C	3	01	01	05	60	M	-	-	-	11	04	-	-	KEITH L JUSTICE - 2129 7TH AVE TOMS RIVER NJ 08757
D														

PAGE 2 OF 3 ☐ Fatal **New Jersey Police Crash Investigation Report** ☒ Reportable ☐ Non-Reportable ☐ Change Report

96: 05

1 Case Number: 22-033892

97: 01

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

98: 01

3 Station/Precinct:

99: 05

4 Date of Crash (mm dd yy): 04/27/22

100a: 01

5 Day Of Week: WEDNESDAY

6 Time (use 2400 hrs): 1202

7 Municipality Code: 1514

8 Total Killed: --

9 Total Injured: --

10 Crash Occurred On: HOPE CHAPEL RD | N | 11 Speed Limit: 45

☒ At Intersection With Road Name | Dir | 12 Route No. | Suffix | 13 Milepost | 18 Speed Limit: 25

☐ Feet ☐ N ☐ E of: CLEARSTREAM ROAD

☐ Miles ☐ S ☐ W

14 15 16

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

21 Latitude: 40.09983 | 22 Longitude: -74.25196

118a: 02 | 118b | 119a: - | 119b: - | 120a: 01 | 120b: 01 | 121a: - | 121b: -

100b: 04

23 Veh #: 3

24 Policy No.: TOWCA000015 01 *

25 NJ Ins. Code: -

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

101: 02

53 Veh #: -

54 Policy No.: -

55 NJ Ins. Code: -

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

102: 01

26 Driver's First Name: KEITH | Initial: L | Last Name: JUSTICE | 29 Sex: M

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

103: 01

27 Number & Street: 2129 7TH AVE

57 Number & Street: -

104: 3

28 City: TOMS RIVER | State: NJ | Zip: 08757

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

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

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

122: 01

105: 01

32 Driver's License Number: J94644297301624

33 DOB (mm dd yyyy): 01/22/1962

34 Expires (mm yy): 01 | 23

62 Driver's License Number: - | 63 DOB: - | 64 Expires: - | 123: -

106: -

35 Owner's First Name: - | Initial: - | Last Name: C H AUTOS

☐ Same As Driver

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

☐ Same As Driver

107: -

36 Number & Street: 107 EAST COMMODORE

66 Number & Street: -

124: 04 | 125: -

108: 29

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

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

126a: 26

109: -

38 Make: FREI | 39 Model: M21 | 40 Color: 1 | 41 Year: 2018 | 42 Plate No.: XGHE45 | 43 State: NJ

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

126b: -

110: 02

44 VIN: 3ALACWFC3JDJJ9528 | 45 Expires: 08 | 22

74 VIN: - | 75 Expires: - | 126c: -

111: -

46 Vehicle Removed To

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

76 Vehicle Removed To: -

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

126d: -

112: 16

113: -

47 Authority: ☐ Owner ☒ Driver ☐ Police

77 Authority: ☐ Owner ☐ Driver ☐ Police

126e: 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.: -

127a: -

115: -

127b: -

116: 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

127c: -

117: -

127d: -

127e: -

52 Motor Carrier or Government Entity

Number & Street

City | State | Zip

82 Motor Carrier or Government Entity: -

Number & Street: -

City: - | State: - | Zip: -

128: 26 | 129: 12 | 130: 12

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

131: -

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
3		-			
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.

132: - | 133: 02 | 134: -

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

New Jersey Police Crash Investigation Report

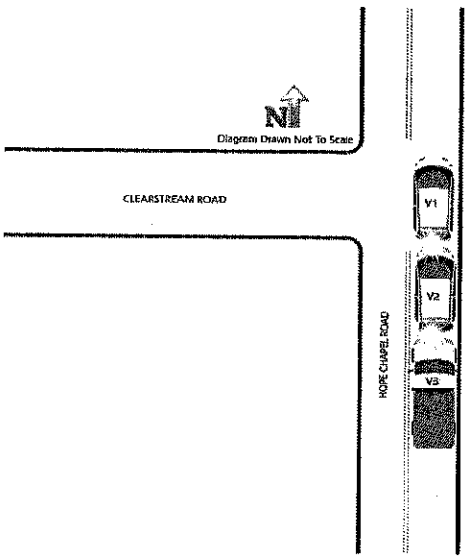
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033892

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED SHE WAS STOPPED IN TRAFFIC ON HOPE CHAPEL ROAD NORTHBOUND WHEN HER VEHICLE WAS STRUCK BY VEHICLE 2 IN THE REAR BUMPER.

DRIVER OF VEHICLE 2 STATED HE WAS STOPPED BEHIND VEHICLE 1 NORTHBOUND WHEN HIS VEHICLE WAS STRUCK IN THE REAR BUMPER BY VEHICLE 3 WHICH CAUSED HIM TO STRIKE VEHICLE 1 IN THE REAR BUMPER.

DRIVER OF VEHICLE 3 STATED HE WAS TRAVELLING NORTHBOUND ON HOPE CHAPEL ROAD WHEN HE SAW VEHICLES STOPPED UP THE ROAD. DRIVER OF VEHICLE 3 STATED HE BELIEVED HE HAD PLENTY OF TIME TO STOP TO AVOID A COLLISSION HOWEVER HE STRUCK VEHICLE 2 IN THE REAR BUMPER.

BASED ON STATEMENTS FROM INVOLVED PARTIES AND MY OBSERVATIONS AT THE SCENE AND DAMAGE TO THE VEHICLES, I DETERMINED THAT VEHICLE 3 IS AT FAULT DUE TO DRIVER INATTENTION.

NO SUMMONSES WERE ISSUED AND NO INJURIES WERE REPORTED.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
DELVALLE M	293	EM	288	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033904
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	STATE HWY 70
Road Name	
Dir	E
11 Speed Limit	50
12 Route No.	0070
Suffix	
13 Milepost	
18 Speed Limit	20
☐ At Intersection With	
☒ Feet	600
☐ Miles	
☐ N ☐ E ☐ S ☒ W of:	BUCKINGHAM DR
17 Cross Road Name	
19 Ramp ☐ To ☐ From:	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1254
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.05283
22 Longitude	-74.18002

Vehicle 1

23 Veh #	1
24 Policy No.	BAA57269560
25 NJ Ins. Code	895
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	ELIYAHU - KITAY
29 Sex	M
27 Number & Street	1260 COX CRO RD
28 City / State / Zip	TOMS RIVER NJ 08755
30 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
31 State	NJ
32 Driver's License Number	K46892120006822
33 DOB mm dd yyyy	06/07/1982
34 Expires mm yy	06 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - ELIS ELECTRICAL L -
36 Number & Street	646 CROSS ST UNIT 21B
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	CHEV / SIL / WHI / 2015 / B76GUC / NJ
44 VIN	1GC1KVE84FF139421
45 Expires	07 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	2007741012
55 NJ Ins. Code	223
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	ELIZABETH - FRIEDMAN -
59 Sex	F
57 Number & Street	5022 17TH AVE APT 2
58 City / State / Zip	BROOKLYN NY 11204
60 Eyes / DL Class / Restrictions / Endorsements	3 / D / - / -
61 State	NY
62 Driver's License Number	908349941
63 DOB mm dd yyyy	01/16/1995
64 Expires mm yy	01 19
65 Owner's First Name / Initial / Last Name	☐ Same As Driver YAKOV Z FRIEDMAN -
66 Number & Street	33 IMPERIAL PL
67 City / State / Zip	JACKSON NJ 08527
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	CHEV / TRA / BLK / 2020 / M15LMU / NJ
74 VIN	1GNEVFKW3LJ175344
75 Expires	12 22
76 Vehicle Removed To	BARINA'S AUTOMOTIVE ☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	39	M	-	-	-	11	04	-	-	ELIYAHU - KITAY - 1260 COX CRO RD TOMS RIVER NJ 08755
B	02	01	01	05	27	F	-	-	-	11	04	-	-	ELIZABETH - FRIEDMAN - 5022 17TH AVE APT 2 BROOKLYN NY 11204
C														
D														

New Jersey Police Crash Investigation Report

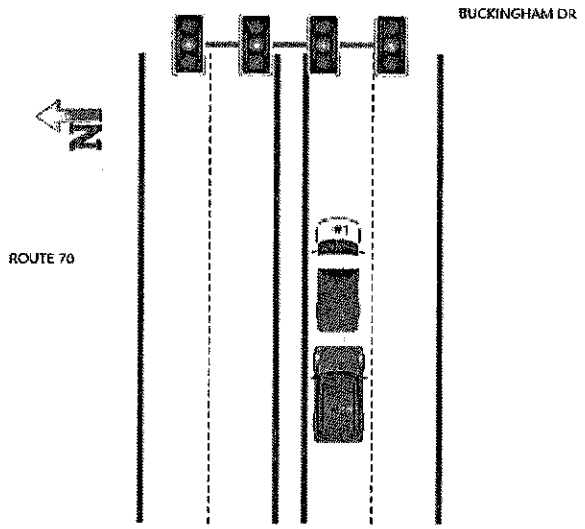
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033904

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated he was in stop and go traffic when Veh #2 struck him from behind.

Driver #2 stated she was behind Veh #1 and was in stop and go traffic and could not stop in time.

This officers investigation finds Driver #2 at fault for the crash as she failed to maintain a safe stopping distance behind Veh #1.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
PREBISH J	275	EM	288	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033251
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1214
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	93 PROSPECT ST
At Intersection With	
Feet / Miles	-
N E S W of:	-
Road Name	-
Dir	-
11 Speed Limit	-
12 Route No.	-
Suffix	-
13 Milepost	-
14	-
15	-
16	-
17 Cross Road Name	-
18 Speed Limit	-
19 Ramp To / From:	-
20 Route/Name	-
NB EB SB WB	
21 Latitude	40.07440
22 Longitude	-74.22034

Vehicle 1

23 Veh #	1
24 Policy No.	IL56-V0025713
25 NJ Ins. Code	013
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	YISANDER A BATISTA-REYES -
29 Sex	M
27 Number & Street	35 JONES AVE
28 City / State / Zip	NEW BRUNSWICK NJ 08901
30 Eyes	2
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	B08197906112982
33 DOB (mm dd yyyy)	12/15/1998
34 Expires (mm yy)	12 23
35 Owner's First Name / Initial / Last Name	- - DND GROUND INC -
☐ Same As Driver	-
36 Number & Street	13 YELLOWSTONE DRIVE
37 City / State / Zip	OLD BRIDGE NJ 08857
38 Make	FORD
39 Model	F59
40 Color	WHI
41 Year	2021
42 Plate No.	XLRL11
43 State	NJ
44 VIN	1F65F5KNXM0A14975
45 Expires	03 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☒ USDOT 265752 ☐ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- - -

Vehicle 2

53 Veh #	2
54 Policy No.	MEPK10441200
55 NJ Ins. Code	145
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	- - -
59 Sex	-
57 Number & Street	-
58 City / State / Zip	- - -
60 Eyes	-
DL Class	-
Restrictions	-
Endorsements	-
61 State	-
62 Driver's License Number	-
63 DOB (mm dd yyyy)	-
64 Expires (mm yy)	- -
65 Owner's First Name / Initial / Last Name	- - CHAVEIRIM VOLUN-
☐ Same As Driver	-
66 Number & Street	139 CAROL ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make	CHEV
69 Model	TAH - TA
70 Color	WHI
71 Year	2019
72 Plate No.	NF39577
73 State	NJ
74 VIN	1GNSKFEC6KR397311
75 Expires	10 23
76 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- - -

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

-

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1	136	-	-	138	-
1	140	-	-	142	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	23	M	-	-	-	04	04	-	-	YISANDER A BATISTA-REYES - 35 JONES AVE NEW BRUNSWICI NJ 08901
B														
C														
D														

New Jersey Police Crash Investigation Report

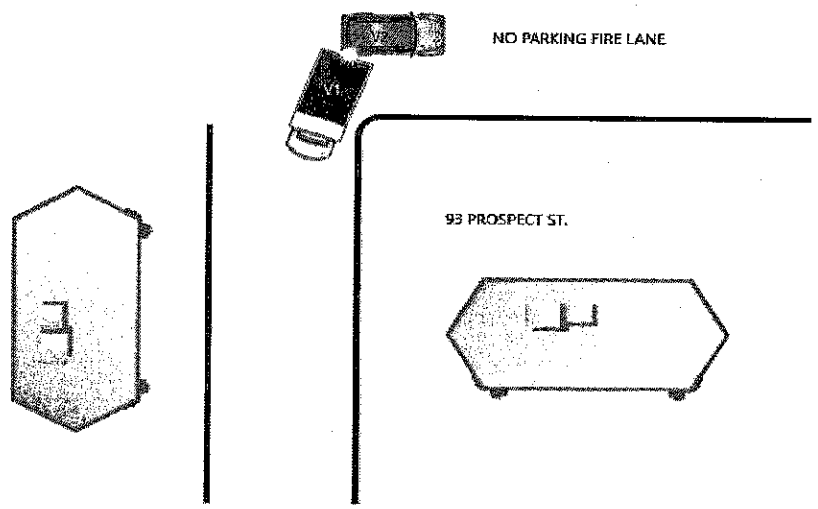
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033251

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated he was attempting to back his vehicle in the rear of 93 Prospect St. to make a delivery when he inadvertently struck vehicle #2 that was parked unoccupied. Vehicle #2 was parked in a marked No Parking Area Fire Lane when it was struck. No injuries were reported while on scene. -end-

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ALLEN W	287	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033719
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash mm dd yy	04/26/22
5 Day Of Week	TUESDAY
6 Time (use 2400 hrs)	2055
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	RIVER AVE
☐ At Intersection With	
Road Name	
Dir	
11 Speed Limit	50
12 Route No.	0009
Suffix	
13 Milepost	
18 Speed Limit	35
☒ Feet ☐ Miles	300
☒ N ☐ E ☐ S ☐ W of:	LOCUST ST
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	40.04800
22 Longitude	-74.22171

Vehicle 1

23 Veh #	1
24 Policy No.	939401056
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	SHLOMO - AGATSTEIN
29 Sex	M
27 Number & Street	169 LYNN CT
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	4 / D / - / - / NJ
32 Driver's License Number	A30647090011524
33 DOB mm dd yyyy	11/23/1952
34 Expires mm yy	11 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver JED S HERTZ RENTAL COI-
36 Number & Street	900 DURE MUS AV
37 City / State / Zip	NEWARK NJ 07101
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD / EPD / WHI / 2021 / KMA7607 / NY
44 VIN	1FMJK2AT4MEA39651
45 Expires	09 22
46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

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

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

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

	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	69	M	-	-	-	11	04	-	-	SHLOMO - AGATSTEIN - 169 LYNN CT LAKEWOOD NJ 08701
B														
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033719

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

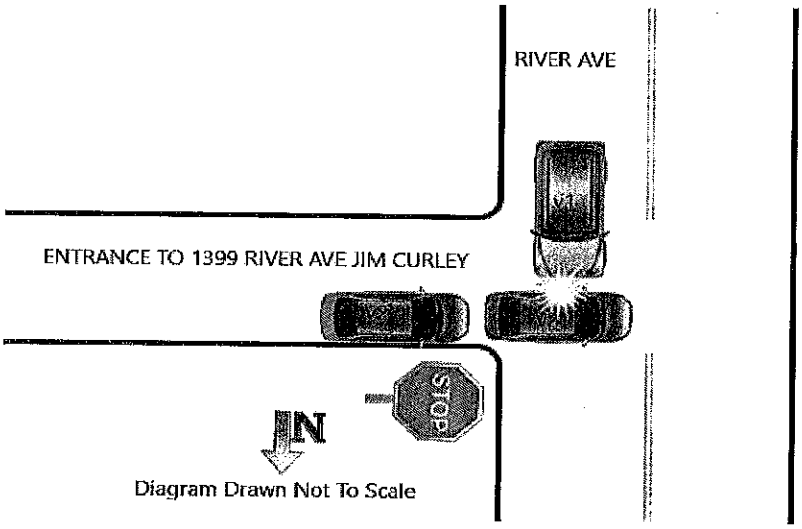


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver of vehicle 1 stated he was Northbound on River Ave. He stated as he was going forward, vehicle 2 turned left in front of him and crashed into his vehicle. He stated vehicle 2 was turning left from 1399 River Ave (Jim Curley) to go Southbound on River Ave. Driver 1 stated after the crashed vehicle 2 took off Southbound on River Ave towards route 70.

Vehicle 2 is described as a black impala no further information. 1399/1400 River Ave appeared to have cameras that may have caught the accident but I was unable to view the cameras due to the business being closed.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SORIANO J	352	E. MIICK	307	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
96	05
97	01
98	01
99	02
100a	01
100b	04
101	02
102	01
103	01
104	2
105	02
106	-
107	-
108	01
109	01
110	01
111	00
112	-
113	-
114	-
115	-
116	03
117	03

1 Case Number: 22-033841
2 Police Dept of: LAKEWOOD TOWNSHIP P Code: 01
3 Station/Precinct: -
4 Date of Crash (mm dd yy): 04/27/22
5 Day Of Week: WEDNESDAY
6 Time (use 2400 hrs): 0811
7 Municipality Code: 1514
8 Total Killed: --
9 Total Injured: --

10 Crash Occurred On: RIVER AVE - Road Name
11 Speed Limit: 40
12 Route No.: 0009 Suffix: - 13 Milepost: -
☒ At Intersection With ☐ Feet ☐ Miles — 14: - 15
☐ N ☐ E ☐ S ☐ W (16) of: W SPRUCE ST — 17 Cross Road Name
18 Speed Limit: 25
19 Ramp ☐ To ☐ From: -
20 Route/Name
☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude: 40.072350
22 Longitude: -74.21766

Field	Value
118a	25
118b	-
119a	06
119b	-
120a	01
120b	01
121a	00
121b	00
122	02
123	15
124	04
125	04
126a	26
126b	-
126c	-
126d	-
126e	26
127a	26
127b	-
127c	-
127d	-
127e	26
128	26
129	03
130	03
131	11
132	11
133	03
134	00

Vehicle 1

23 Veh #: 1
24 Policy No.: F123573-8
25 NJ Ins. Code: 426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run
26 Driver's First Name: PAUL Initial: M Last Name: KOSTOULAKOS -
29 Sex: M
27 Number & Street: 47 WINDERMERE ROAD
28 City: LINCROFT State: NJ Zip: 07738
30 Eyes: 2 DL Class: D Restrictions: - Endorsements: -
31 State: NJ
32 Driver's License Number: K67506197402762
33 DOB (mm dd yyyy): 02/24/1976
34 Expires (mm yy): 02 25
35 Owner's ☐ Same As Driver First Name: PAUL Initial: M Last Name: KOSTOULAKOS -
36 Number & Street: 47 WINDERMERE ROAD
37 City: LINCROFT State: NJ Zip: 07738
38 Make: AUDI
39 Model: A7
40 Color: WHI
41 Year: 2019
42 Plate No.: P37NDL
43 State: NJ
44 VIN: WAUU2AF27KN129902
45 Expires: 12 22
46 Vehicle Removed To: -
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority: ☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused
Type: ☐ Breath ☐ Blood ☐ Urine
Results: 0. - % ☐ Pending
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill
Hazard Class: - Placard No.: -
50 Carrier No.: ☐ USDOT - ☐ MC/MX - ☒ None
51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity: -
Number & Street: -
City: - State: - Zip: -

Vehicle 2

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

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

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

Oper.	140 Charge	141 Summons No.	Oper.	142 Charge	143 Summons No.
1		-	2		-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	46	M	-	-	-	11	04	-	-	PAUL M KOSTOULAKOS - 47 WINDERMERE ROAD LINCROFT NJ 07738
B														
C														
D														

New Jersey Police Crash Investigation Report

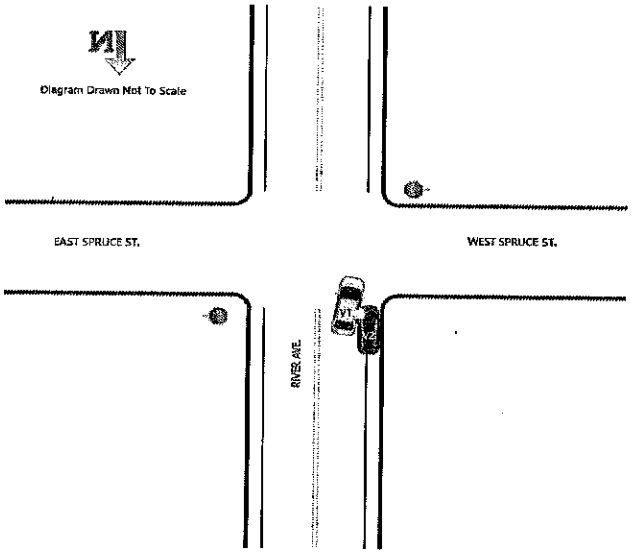
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033841

(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 E														
F														
G														
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated he was traveling southbound on River Ave., and attempted to make a right turn onto West Spruce St. but was side swiped by vehicle #2. Driver #1 stated vehicle #2 was passing his vehicle in the shoulder as he was making the right turn. Vehicle #2 could only be described as a dark colored mini van that fled the scene southbound on River Ave. No injuries were reported while on scene. -end-

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ALLEN W	287	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033903
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1246
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	OLD WHITESVILLE RD
At Intersection With	
Road Name	
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
☒ Feet / ☐ Miles	50
☐ N ☐ E ☒ S ☐ W of:	NEW EGYPT RD
18 Speed Limit	40
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
21 Latitude	40.08607
22 Longitude	-74.24867

Vehicle 1

23 Veh #	1
24 Policy No.	939 839 890
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	JUDY / S / GLUSTEIN
29 Sex	F
27 Number & Street	91 FLINTLOCK DR
28 City / State / Zip	LAKEWOOD / NJ / 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	5 / D / - / - / NJ
32 Driver's License Number	G56684188253705
33 DOB (mm dd yyyy)	03/06/1970
34 Expires (mm yy)	03 26
35 Owner's First Name / Initial / Last Name	☐ Same As Driver / AVRAHAM / D / GLUSTEIN
36 Number & Street	91 FLINTLOCK DRIVE
37 City / State / Zip	LAKEWOOD / NJ / 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / COA / SIL / 2005 / C13KZU / NJ
44 VIN	2T1BR32E75C407030
45 Expires	02 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	4548-05-72-66
55 NJ Ins. Code	148
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	YEHUDA / - / GOLDKRANTZ
59 Sex	M
57 Number & Street	8 PONDEROSA DR
58 City / State / Zip	LAKEWOOD / NJ / 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	4 / D / - / - / NJ
62 Driver's License Number	G62287890012024
63 DOB (mm dd yyyy)	12/27/2002
64 Expires (mm yy)	12 25
65 Owner's First Name / Initial / Last Name	☐ Same As Driver / SOL / B / GOLDKRANTZ
66 Number & Street	8 PONDEROSA DR
67 City / State / Zip	LAKEWOOD / NJ / 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HOND / ODY / BLK / 2020 / Z85MPP / NJ
74 VIN	5FNRL6H57LB062681
75 Expires	06 24
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	Charge	Summons No.
1		-
2		-
1		-
2		-

Occupants

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	52	F	-	-	-	11	04	-	-	JUDY S GLUSTEIN - 91 FLINTLOCK DR LAKEWOOD NJ 08701
B	V2	01	01	-	19	M	-	-	-	11	04	-	-	YEHUDA - GOLDKRANTZ - 8 PONDEROSA DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

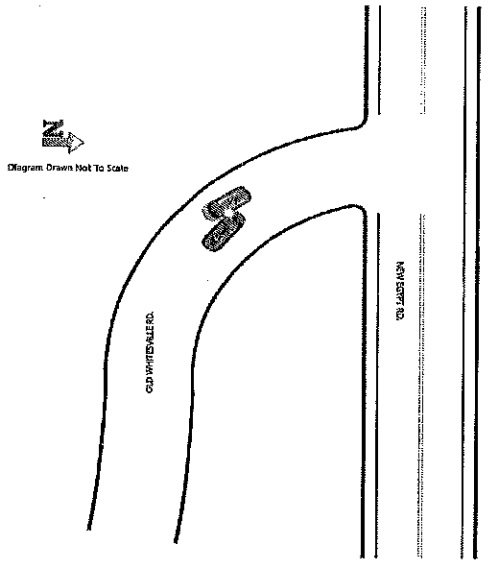
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033903

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated she was traveling southbound on Old Whitesville Rd. after making a right turn from New Egypt Rd. when her vehicle was struck by vehicle #2. Driver #1 stated she was keeping right in an attempt to avoid vehicle #2 that was traveling in the middle of the roadway, but was unsuccessful resulting in the collision. The driver of vehicle #2 stated he was traveling northbound on Old Whitesville Rd. when his vehicle collided with vehicle #1. No injuries were reported while on scene. -end-

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ALLEN W	287	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033933
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	--
10 Crash Occurred On:	NEW EGYPT RD
☒ At Intersection With	Road Name
Dir	-
11 Speed Limit	45
12 Route No.	0528
Suffix	
13 Milepost	
18 Speed Limit	25
☐ Feet ☐ Miles	--
☐ N ☐ E ☐ S ☐ W of:	GUDZ RD
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash mm dd yy	04/27/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1525
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	00.142670
22 Longitude	-00.376760

Vehicle 1

23 Veh #	1
24 Policy No.	0282843885
25 NJ Ins. Code	139
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	YAAKOV I MANY
29 Sex	M
27 Number & Street	168 HILLSIDE BLVD
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / NJ
32 Driver's License Number	M05027896904862
33 DOB mm dd yyyy	04/02/1986
34 Expires mm yy	04 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver LIAT E MANY
36 Number & Street	45 CABERNET DR
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	TOYT / SIE / 4 / 2014 / M41MYS / NJ
44 VIN	5TDJK3DC1ES091756
45 Expires	10 22
46 Vehicle Removed To	MOISHY'S TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	939946207
55 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	CHAYA T MOSKOWITZ
59 Sex	F
57 Number & Street	21 SUSSEX PLACE
58 City / State / Zip	JACKSON NJ 08527
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 / D / - / - / NJ
62 Driver's License Number	M67141228356932
63 DOB mm dd yyyy	06/22/1993
64 Expires mm yy	06 23
65 Owner's First Name / Initial / Last Name	☐ Same As Driver BARUCH B MOSKOWITZ
66 Number & Street	45 ASPEN CT
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HOND / ODY / SIL / 2021 / E71NKT / NJ
74 VIN	5FNRL6H50MB040975
75 Expires	03 24
76 Vehicle Removed To	HESHEY'S TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☒ None ☐ MC/MX
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

Oper.	Charge	Summons No.
02	39:4-97	A291600

Oper.	Charge	Summons No.

Occupants

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	36	M	-	-	-	11	04	-	-	YAAKOV I MANY - 168 HILLSIDE BLVD LAKEWOOD NJ 08701
B	02	01	01	05	28	F	-	-	-	11	11	02	-	CHAYA T MOSKOWITZ - 21 SUSSEX PLACE JACKSON NJ 08527
C	01	04	01	05	4	F	-	-	-	05	05	02	-	ETTY - WEBER - 7 KNIGHT DRIVE JACKSON NJ 08527
D	01	05	01	05	4	F	-	-	-	05	05	02	-	CHANIE - MATYAS - 56 EMPERIAL CT JACKSON NJ 08527

New Jersey Police Crash Investigation Report

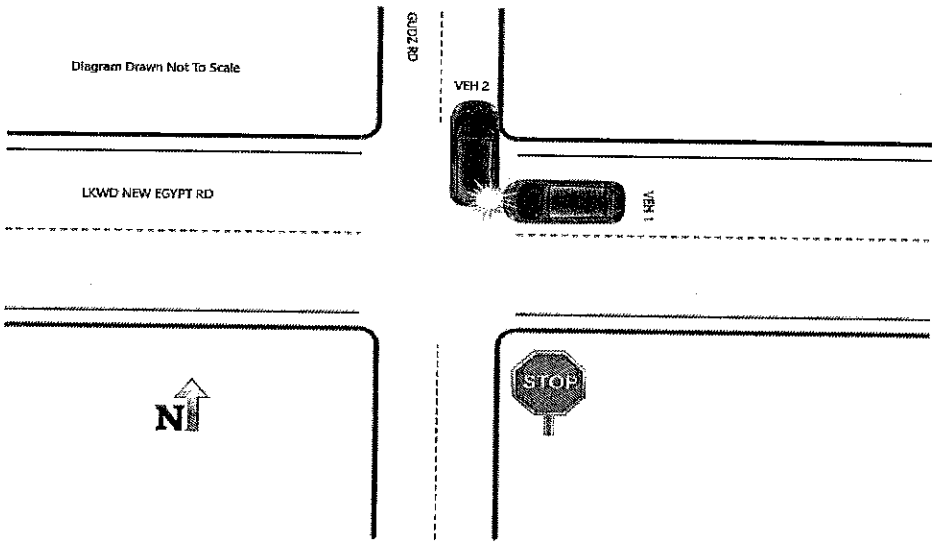
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: -- Case No: 22-033933

(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 E	01	07	01	05	5	F	-	-	-	05	05	-	-	RIVKY - STROH - 16 KNIGHT DRIVE JACKSON NJ 08527
F	01	08	01	05	3	F	-	-	-	05	05	-	-	LIBBY - STROH - 16 KNIGHT DRIVE JACKSON NJ 08527
G	02	04	01	05	5	M	-	-	-	05	05	02	-	MOSHE - ASZKNAZY - 4 SUSSEX PLACE JACKSON NJ 08527
H	02	05	01	05	6	M	-	-	-	05	05	02	-	JOSHUA - MOSKOVITZ - 21 SUSSEX PLACE JACKSON NJ 08527
I	02	06	01	05	10M	M	-	-	-	05	05	02	-	YONASON - MOSKOVITZ - 21 SUSSEX PLACE JACKSON NJ 08527
J	02	07	01	05	5	M	-	-	-	05	05	02	-	MOSHE - MOSKOVITZ - 21 SUSSEX PLACE JACKSON NJ 08527

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEH 1 STATED HE WAS TRAVELING WEST ON LAKEWOOD NEW EGYPT RD AND WHEN PASSING THE INTERSECTION OF GUDZ RD, HE HIT VEHICLE 2 THAT CAME DARTING ACROSS THE INTERSECTION.

DRIVER OF VEH 2 STATED SHE WAS TRAVELING NORTH ON WHITESVILLE RD AND STOPPED FOR THE STOP SIGN AT THE INTERSECTON OF LAKEWOOD NEW EGYPT RD. DRIVER 2 SAID THE DRIVER IN A VEHICLE THAT WAS WAITING IN THE LEFT TURN LANE (WESTBOUND) ON LAKEWOOD NEW EGYPT ROAD GAVE HER A HAND GESTER TO GO. DRIVER 2 SAID SHE PROCEEDED TO GO IN TRAFFIC AND DID NOT SEE VEHICLE 1 TRAVELING STRAIGHT, AND VEHICLE 1 HIT THE REAR OF HER CAR.

UPON MY INVESTIGATION I DETERMINED DRIVER 2 AT FAULT FOR THE CRASH. DRIVER 1 ALSO WANTED IT NOTED THAT HE BROKE HIS WATCH DURING THE CRASH.

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

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: -- Case No: 22-033933

(Refer to vehicle by number)

		Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
		83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	E	02	08	01	05	6	M	-	-	-	05	05	02	-	ELIMELECH - SILBER - 111 VALLEY ROAD JACKSON NJ 08527
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
CLARKE N	334	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034082
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	W SPRUCE ST
☐ At Intersection With	
Road Name	
Dir	
11 Speed Limit	25
12 Route No.	
Suffix	
13 Milepost	
☒ Feet ☐ Miles	100
☐ N ☐ E ☐ S ☒ W of:	RIVER AVE
18 Speed Limit	45
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	0420
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.07206
22 Longitude	-74.21826

Vehicle 1

23 Veh #	1
24 Policy No.	-
25 NJ Ins. Code	-
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	SAUL - PASKESZ
29 Sex	M
27 Number & Street	191 ROOSEVELT AVE
28 City / State / Zip	STATEN ISLAND NY 10314
30 Eyes / DL Class / Restrictions / Endorsements	4 / - / - / -
31 State	NY
32 Driver's License Number	298417553
33 DOB mm dd yyyy	10/21/2001
34 Expires mm yy	10 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver VEHICLES LLC - HERTZ -
36 Number & Street	900 DOREMUS AVE PT
37 City / State / Zip	NEWARK NJ 07114
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	BMW / 530 / WHI / 2019 / JJJ6969 / NY
44 VIN	WBAJA5C51KBX86496
45 Expires	09 22
46 Vehicle Removed To	BARINA'S AUTOMOTIVE
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

Vehicle 2

53 Veh #	2
54 Policy No.	4607-40-97-88
55 NJ Ins. Code	148
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	- - -
59 Sex	-
57 Number & Street	-
58 City / State / Zip	- - -
60 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
61 State	-
62 Driver's License Number	-
63 DOB mm dd yyyy	-
64 Expires mm yy	- -
65 Owner's First Name / Initial / Last Name	☐ Same As Driver JACOB I MELBER -
66 Number & Street	10A W SPRUCE ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	LEXU / ES3 / GRY / 2008 / P96LVR / NJ
74 VIN	JTHBJ46G682159993
75 Expires	09 22
76 Vehicle Removed To	
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class / Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	1	01	01	05	20	M	-	-	-	11	11	02	-	SAUL - PASKESZ - 191 ROOSEVELT AVE STATEN ISLAND NY 10314
B														
C														
D														

New Jersey Police Crash Investigation Report

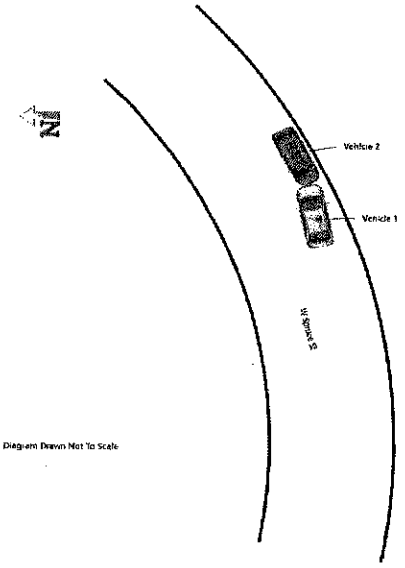
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-034082

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated he was travelling east on Spruce St. when he struck Vehicle 2 head on.

Driver 1 further stated that he allegedly "dozed off" and struck the parked car.

Vehicle 1 sustained disabling damage and was removed from the scene by Barina's Auto.

No injuries reported on scene.

Vehicle 2 was parked in front of the residence of 10 W. Spruce St.

Vehicle 1 Self Insured:
Hertz Vehicles LLC
900 Doremus Ave.
Newark, NJ 07114

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
PTL. D. UMLAUF	375	SGT. M. LORENC	316	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034119
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	LOIS LN
At Intersection With	
Road Name	
Dir	
11 Speed Limit	25
12 Route No.	
Suffix	
13 Milepost	
18 Speed Limit	30
☒ Feet ☐ Miles	700
☐ N ☒ E ☐ S ☐ W of:	MARTIN LUTHER KING DR
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	0931
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.08127
22 Longitude	-74.20960

Vehicle 1

23 Veh #	1
24 Policy No.	1103167581
25 NJ Ins. Code	426
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	PIRELLI
Initial	W
Last Name	SAMUEL
29 Sex	M
27 Number & Street	56 SUNSET AVE
28 City	OLD BRIDGE
State	NJ
Zip	08857
30 Eyes	2
DL Class	A
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	S03766308601982
33 DOB mm dd yyyy	01/20/1998
34 Expires mm yy	01 23
35 Owner's First Name / Initial / Last Name	S AND G PAVING
☐ Same As Driver	
36 Number & Street	7 PHEASANT LANE
37 City	MONROE TWP
State	NJ
Zip	08831
38 Make	VOLV
39 Model	VHD
40 Color	RD
41 Year	2020
42 Plate No.	XHXJ18
43 State	NJ
44 VIN	4V5KC9EH2LN238961
45 Expires	01 23
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	S & G PAVING
Number & Street	7 PHEASANT LN
City	MONROE TWP
State	NJ
Zip	08831

Vehicle 2

53 Veh #	2
54 Policy No.	648941763
55 NJ Ins. Code	012
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	-
59 Sex	-
57 Number & Street	-
58 City	-
State	-
Zip	-
60 Eyes	-
DL Class	-
Restrictions	-
Endorsements	-
61 State	-
62 Driver's License Number	-
63 DOB mm dd yyyy	-
64 Expires mm yy	- -
65 Owner's First Name / Initial / Last Name	A & R DRYWALL LL
☐ Same As Driver	
66 Number & Street	14 ROMANA LN
67 City	TOMS RIVER
State	NJ
Zip	08755
68 Make	NISS
69 Model	NVP
70 Color	4
71 Year	2012
72 Plate No.	XHRZ16
73 State	NJ
74 VIN	5BZAF0AA2CN200637
75 Expires	04 23
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.- % ☐ Pending
79 Hazardous Material	☐ None ☐ On Board ☐ Spill Hazard Class Placard No.
80 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City	
State	
Zip	

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	24	M	-	-	-	11	04	-	-	PIRELLI W SAMUEL - 56 SUNSET AVE OLD BRIDGE NJ 08857
B														
C														
D														

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-034119

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

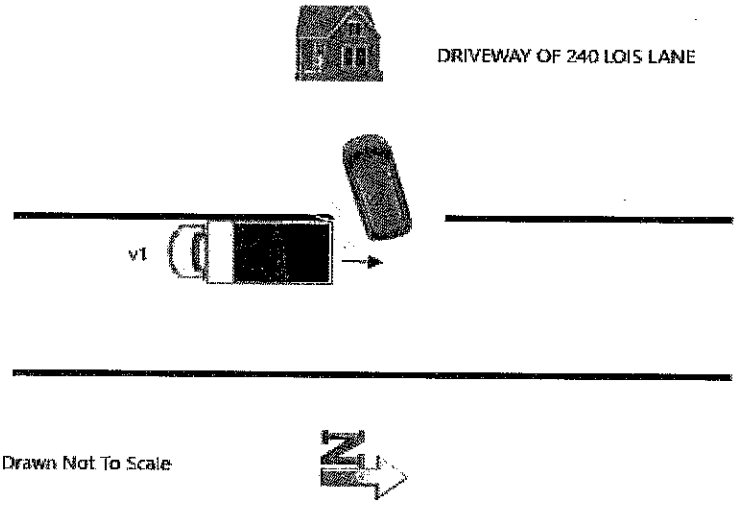


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver 1 was operating a Dump truck for a milling construction operation and stated that the road was closed and that Police left cones with signs overnight for no parking on the street due to construction. Driver 1 stated that the roadway was clear and he started backing up on West on Lois Lane and backed into a parked vehicle that was illegally parked half in the driveway and half on the street and curb. Driver 1 stated that he did not see vehicle 2 sneak into the driveway and portion of the road before backing up.
I did notice cones and signs stating No parking due to construction. However, I confirmed with Lakewood Police Traffic and Safety Division that the Police did not put up these cones and that they were put up by the Construction company. I also noticed no Police Officers working the Construction Road Closure.
After my observations, Both Driver 1 and Vehicle 2 share culpability for the crash. Driver 1 for backing unsafely and not paying attention to pedestrian or vehicle traffic behind him as he backed and vehicle 2 for being improperly parked. No injuries reported.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
VEGA E	311	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034143
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	CROSS ST
☒ At Intersection With	Road Name
☐ Feet ☐ Miles	-
☐ N ☐ E ☐ S ☐ W of:	MASSACHUSETTS AVE
11 Speed Limit	45
Dir	-
12 Route No.	0626
Suffix	-
13 Milepost	-
14	-
15	-
16	-
17 Cross Road Name	-
18 Speed Limit	45
19 Ramp ☐ To ☐ From:	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1147
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	1
21 Latitude	40.06029
22 Longitude	-74.22938

Vehicle 1

23 Veh #	1
24 Policy No.	939541882
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	AVRAHAM / B / GASS
29 Sex	M
27 Number & Street	2025 BROOKEWOOD DRIVE
28 City / State / Zip	TOMS RIVER / NJ / 08755
30 Eyes / DL Class / Restrictions / Endorsements	2 / D / - / -
31 State	NJ
32 Driver's License Number	G07630716211912
33 DOB mm dd yyyy	11/25/1991
34 Expires mm yy	11 22
35 Owner's First Name / Initial / Last Name	☐ Same As Driver AVRAHAM B GASS
36 Number & Street	2025 BROOKEWOOD DRIVE
37 City / State / Zip	TOMS RIVER / NJ / 08755
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	HOND / ODY / BLU / 2020 / Y87MRN / NJ
44 VIN	5FNRL6H56LB073980
45 Expires	08 24
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	
55 NJ Ins. Code	
☐ Parked ☐ Ped ☒ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	YECHIEL / - / REISCHER
59 Sex	M
57 Number & Street	969 CLAIRE DR
58 City / State / Zip	LAKEWOOD / NJ / 08701
60 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
61 State	-
62 Driver's License Number	-
63 DOB mm dd yyyy	09/28/2008
64 Expires mm yy	- -
65 Owner's First Name / Initial / Last Name	☐ Same As Driver
66 Number & Street	
67 City / State / Zip	
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	
74 VIN	
75 Expires	
76 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
1		-	2		-
1		-	2		-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	30	M	-	-	-	11	04	-	-	AVRAHAM B GASS - 2025 BROOKEWOOD DR TOMS RIVER NJ 08755
B	B1	01	-	03	13	M	02	04	02	01	01	-	6303	YECHIEL - REISCHER - 969 CLAIRE DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

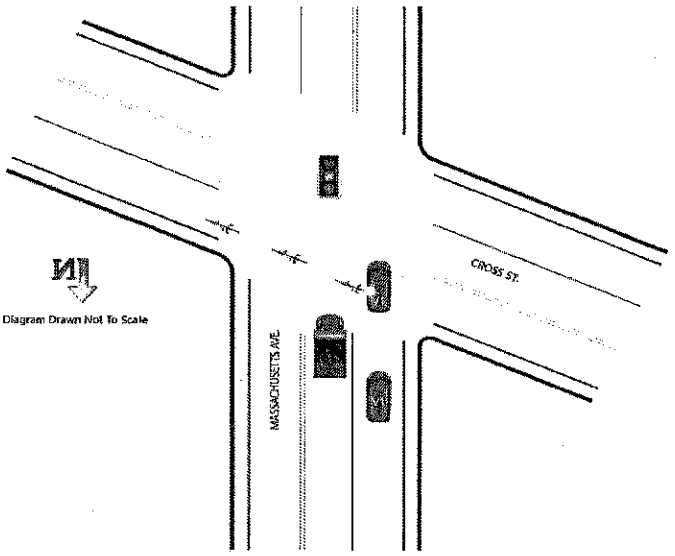
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-034143

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated he was traveling southbound on Massachusetts Ave. in the rightmost lane passing a stopped dump truck that was waiting to make a left turn onto Cross St. eastbound. Driver #1 explained he had the green traffic signal and proceeded through the intersection with Cross St., but was struck by a pedalcyclist. The pedalcyclist stated he was traveling on Cross St. westbound passing through the intersection with Massachusetts Ave. when he collided with vehicle #1. The pedalcyclist stated he had the green traffic signal at the intersection. The pedalcylist suffered bleeding and swelling near his mouth, and was transported to Jersey Shore University Medical Center via Hatzolah EMS. At this time I am unable to determine who is at fault for the collision, as both parties involved stated they had the green traffic signals and there were no witnesses to the crash that remained on scene. -end-

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ALLEN W	287	MY	329	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034188
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	STATE HWY 70 W
At Intersection With	
Road Name	
Dir	
11 Speed Limit	45
12 Route No.	0070
Suffix	
13 Milepost	
18 Speed Limit	45
☒ Feet ☐ Miles	200
☐N ☒E ☐S ☐W of:	AIRPORT RD
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1528
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	
21 Latitude	40.05340
22 Longitude	-74.17696

Vehicle 1

23 Veh #	1
24 Policy No.	6094368662061
25 NJ Ins. Code	884
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	YECHIEL
Initial	A
Last Name	BLEIER
29 Sex	M
27 Number & Street	1163 52ND ST APT 3
28 City	BROOKLYN
State	NY
Zip	11219
30 Eyes	6
DL Class	I
Restrictions	-
Endorsements	-
31 State	NY
32 Driver's License Number	511469615
33 DOB mm dd yyyy	01/06/1995
34 Expires mm yy	01 29
35 Owner's First Name	YECHIEL
Initial	A
Last Name	BLEIER
☐ Same As Driver	
36 Number & Street	1163 52ND ST APT 3
37 City	BROOKLYN
State	NY
Zip	11219
38 Make	TOYT
39 Model	CAM
40 Color	BLK
41 Year	2016
42 Plate No.	W43NWX
43 State	NJ
44 VIN	4T1BF1FK4GU249907
45 Expires	06 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
50 Carrier No.	☐ USDOT - ☒ None
	☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	K2GP216750
55 NJ Ins. Code	-
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name	ROGER
Initial	L
Last Name	EDWARDS
59 Sex	M
57 Number & Street	138 PORTER AVE APT 4
58 City	SEASIDE HEIGHT
State	NJ
Zip	08751
60 Eyes	4
DL Class	D
Restrictions	-
Endorsements	-
61 State	NJ
62 Driver's License Number	E18786647301844
63 DOB mm dd yyyy	01/31/1984
64 Expires mm yy	01 24
65 Owner's First Name	-
Initial	-
Last Name	-
☐ Same As Driver	
66 Number & Street	-
67 City	-
State	-
Zip	-
68 Make	FORD
69 Model	550
70 Color	BLK
71 Year	2019
72 Plate No.	XJBT13
73 State	NJ
74 VIN	1FDUF5GYXKEF90380
75 Expires	11 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill
Hazard Class	-
Placard No.	-
80 Carrier No.	☒ USDOT 1599591 ☐ None
	☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs
	☒ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	DIAMONDBACK TOWING
Number & Street	415 SPRINGFIELD AVE
City	PINE BEACH
State	NJ
Zip	08741

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	27	M	-	-	-	11	04	-	-	YECHIEL A BLEIER - 1163 52ND ST APT 3 BROOKLYN NY 11219
B	1	03	01	05	25	F	-	-	-	11	04	-	-	MIRIAM G ROSENBERG - 1425 KIMBERLY DR LAKEWOOD NJ 08701
C	2	01	01	05	38	M	-	-	-	11	04	-	-	ROGER L EDWARDS - 138 PORTER AVE APT 4 SEASIDE HEIGHT NJ 08751
D														

New Jersey Police Crash Investigation Report

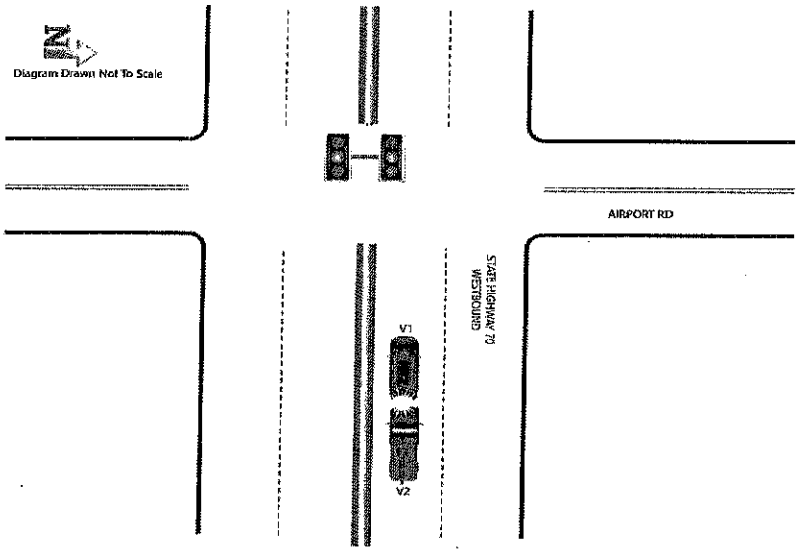
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-034188

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated he was stopped facing Westbound in the Left Lane on State Highway 70W. He stated he was stopped in traffic. Driver 1 stated while stopped Vehicle 2 collided into the rear of his Vehicle.

Driver 2 stated he was traveling Westbound on State Highway 70W behind Vehicle 1. He stated he was slowing down for stop and go traffic in front of him. Driver 2 stated while slowing down he collided into the rear of Vehicle 1.

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

Vehicle 2 Insurance Information
Nottingham Agency Inc.
169 North Main St.
Yardley,PA 19067
215-493-1996

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034197
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On:	RIVER AVE
Road Name	
Dir	
11 Speed Limit	50
12 Route No.	0009
Suffix	
13 Milepost	
18 Speed Limit	25
☐ At Intersection With	
☒ Feet / ☐ Miles	500
☐ N ☐ E of: ☒ S ☐ W	SPRUCE ST
19 Ramp ☐ To ☐ From:	
17 Cross Road Name	
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash mm dd yy	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1605
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.071850
22 Longitude	-74.217070

Vehicle 1

23 Veh #	1
24 Policy No.	ALA154651-25
25 NJ Ins. Code	263
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	LUIS E GONZALEZ-FERMIN -
29 Sex	M
27 Number & Street	431 BERRY ST
28 City / State / Zip	SOMERSET NJ 08873
30 Eyes / DL Class / Restrictions / Endorsements	02 / D / - / -
31 State	NJ
32 Driver's License Number	G64594940011922
33 DOB mm dd yyyy	11/06/1992
34 Expires mm yy	11 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver - - AMAZON LOGISTIC -
36 Number & Street	410 TERRY AVENUE NORTH
37 City / State / Zip	SEATTLE WA 98109
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD / TRA / GRY / 2021 / XLPB55 / NJ
44 VIN	1FDDF6P83MKA59595
45 Expires	12 22
46 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	AMAZON LOGISTIC
Number & Street	410 TERRY AVENUE NORTH
City / State / Zip	SEATTLE WA 98109

Vehicle 2

53 Veh #	2
54 Policy No.	AOJ2317080574011
55 NJ Ins. Code	370
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	CHANA - STURMAN -
59 Sex	F
57 Number & Street	123 FLINTLOCK DR
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements	02 / D / - / -
61 State	NJ
62 Driver's License Number	S84201200059022
63 DOB mm dd yyyy	09/03/2002
64 Expires mm yy	09 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver TOBY B STURMAN -
66 Number & Street	123 FLINTLOCK DR
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HYUN / SON / 4 / 2017 / A25PKY / NJ
74 VIN	5NPE24AA2HH447894
75 Expires	12 22
76 Vehicle Removed To	
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	
Number & Street	
City / State / Zip	

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

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

	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	29	M	-	-	-	11	04	-	-	LUIS E GONZALEZ-FERMIN - 431 BERRY ST SOMERSET NJ 08873
B	02	01	01	05	19	F	-	-	-	11	04	-	-	CHANA - STURMAN - 123 FLINTLOCK DR LAKEWOOD NJ 08701
C														
D														

New Jersey Police Crash Investigation Report

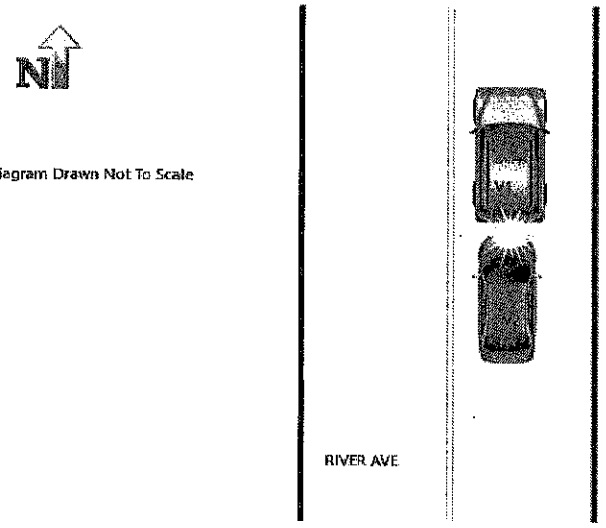
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-034197

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was Northbound on River Ave and was stopped in traffic. He stated while he was stopped vehicle 2 crashed into the rear of his vehicle.

Driver of vehicle 2 stated she was Northbound on River Ave and was behind vehicle 1. She stated vehicle 1 stopped short which caused her to stop short and she ended up crashing into the rear of vehicle 1. She stated she thought driver 1 said something was wrong with his vehicle and it was his fault but she was not sure.

In my investigation I find vehicle 2 at fault for this crash for driver inattention and following too closely as vehicle 2 needs to give herself enough room to stop safely.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SORIANO J	352	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034206
2 Police Dept of / Code	LAKEWOOD TOWNSHIP P / 01
3 Station/Precinct	-
10 Crash Occurred On:	CHESTNUT ST
11 Speed Limit	45
12 Route No. / Suffix / 13 Milepost	0040 - -
☒ At Intersection With / Road Name	NEW HAMPSHIRE AVE
Dir	-
18 Speed Limit	50
☐ Feet ☐ Miles / ☐ N ☐ E ☐ S ☐ W of:	-
19 Ramp ☐ To ☐ From:	-
17 Cross Road Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1652
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
20 Route/Name	-
21 Latitude	40.051700
22 Longitude	-74.196470

Vehicle 1

23 Veh #	1
24 Policy No.	4291-45-00-98
25 NJ Ins. Code	100
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	LUBERIS - LILIANE -
29 Sex	F
27 Number & Street	1170 MANOR DR
28 City / State / Zip	LAKEWOOD / NJ / 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / FL
32 Driver's License Number	L162520835030
33 DOB mm dd yyyy	01/03/1983
34 Expires mm yy	12 22
35 Owner's ☐ Same As Driver / First Name / Initial / Last Name	MAXI - JOSUE -
36 Number & Street	1170 MANOR DR
37 City / State / Zip	LAKEWOOD / NJ / 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	SUZI / GRA / SIL / 2011 / K25PPW / NJ
44 VIN / 45 Expires	JS3TD0D27B4102423 / 02 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority ☐ Owner ☒ Driver ☐ Police	
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending	
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	
50 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None	
51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	992001721 105 1
55 NJ Ins. Code	129
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	MAYER - BRODY -
59 Sex	M
57 Number & Street	25 BLOSSOM DR
58 City / State / Zip	LAKEWOOD / NJ / 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	04 / D / - / - / NJ
62 Driver's License Number	B75205360005764
63 DOB mm dd yyyy	05/07/1976
64 Expires mm yy	05 23
65 Owner's ☐ Same As Driver / First Name / Initial / Last Name	MAYER - BRODY -
66 Number & Street	25 BLOSSOM DR
67 City / State / Zip	LAKEWOOD / NJ / 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HYUN / KON / SIL / 2021 / V37NZH / NJ
74 VIN / 75 Expires	KM8K33AG3MU123010 / 07 24
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority ☒ Owner ☐ Driver ☐ Police	
78 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending	
79 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	
80 Carrier No.: ☐ USDOT ☐ MC/MX ☒ None	
81 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	39	F	-	-	-	11	04	-	-	LUBERIS - LILIANE - 1170 MANOR DR LAKEWOOD NJ 08701
B	02	01	01	05	45	M	-	-	-	11	04	-	-	MAYER - BRODY - 25 BLOSSOM DR LAKEWOOD NJ 08701
C	02	04	01	05	7	F	-	-	-	11	04	-	-	MALKA - BRODY 25 BLOSSOM DR LAKEWOOD NJ 08701
D	02	05	01	05	7	F	-	-	-	11	04	-	-	LEAH - BRODY 25 BLOSSOM DR LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

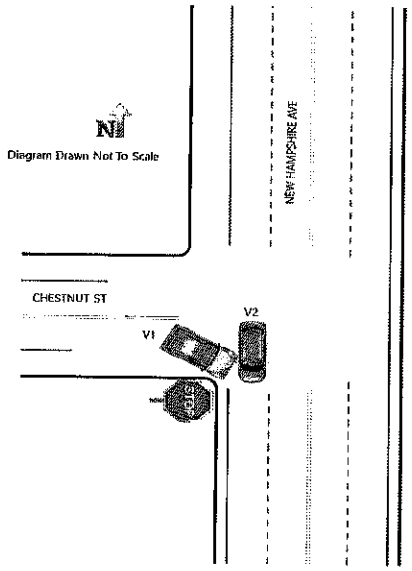
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-034206

(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	E														
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated she was traveling east on Chestnut St. She stopped at the stop sign then turned right onto New Hampshire Ave. She did not observe V2 traveling south on New Hampshire Ave. V1 and V2 collided.

The driver of V2 stated he was traveling south on New Hampshire Ave in the right lane. He observed V1 turn right onto New Hampshire Ave from Chestnut St. V1 and V2 collided.

Based on my investigation, V1 caused the crash by not obeying the stop sign or yielding to the right of way of V2.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	JP	283	☐ Pending ☒ Complete

PAGE 1 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034212
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
10 Crash Occurred On:	NEW HAMPSHIRE AVE
At Intersection With	☐
Road Name	NEW HAMPSHIRE AVE
Dir	-
11 Speed Limit	50
12 Route No.	0623
Suffix	-
13 Milepost	-
14	380
☒ Feet ☐ Miles	☒ Feet
15	
☒ N ☐ E ☐ S ☐ W of:	☒ N
16	
17 Cross Road Name	LISA ROBYN CIR
18 Speed Limit	15
19 Ramp ☐ To ☐ From:	-
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
4 Date of Crash mm dd yy	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1712
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.053090
22 Longitude	-74.196250

Vehicle 1

23 Veh #	1
24 Policy No.	905939733
25 NJ Ins. Code	134
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	MIGUEL - MENDOZA-RAMOS
29 Sex	M
27 Number & Street	399 ROSE CT
28 City / State / Zip	LAKEWOOD NJ 08701
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	02 / D / - / - / NJ
32 Driver's License Number	M25165470007032
33 DOB mm dd yyyy	07/29/2003
34 Expires mm yy	07 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver SAMUEL - MENDOZAMORALES
36 Number & Street	271A OCEAN AVE
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	HOND / CIV / GRY / 2009 / E15PUH / NJ
44 VIN	2HGFA16959H519297
45 Expires	03 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	A02-238-432818-70 1 6
55 NJ Ins. Code	182
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	DORIS A TEALL
59 Sex	F
57 Number & Street	280 SO. SHORE DRIVE
58 City / State / Zip	TOMS RIVER NJ 08753
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	04 / D / - / - / NJ
62 Driver's License Number	T20241776152654
63 DOB mm dd yyyy	02/15/1965
64 Expires mm yy	02 24
65 Owner's First Name / Initial / Last Name	☐ Same As Driver DORIS A TEALL
66 Number & Street	280 SO. SHORE DRIVE
67 City / State / Zip	TOMS RIVER NJ 08753
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	BUIC / ENC / BRO / 2015 / U75KHN / NJ
74 VIN	KL4CJCSB9FB183870
75 Expires	07 22
76 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill Hazard Class Placard No.
80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

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

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	18	M	-	-	-	11	04	-	-	MIGUEL - MENDOZA-RAMOS - 399 ROSE CT LAKEWOOD NJ 08701
B	02	01	01	05	57	F	-	-	-	11	04	-	-	DORIS A TEALL - 280 SO. SHORE DRIVE TOMS RIVER NJ 08753
C	03	01	01	05	26	F	-	-	-	11	04	-	-	BATSHEVA B BRAVERMAN - 1441 S LIVONIA AVE LOS ANGELES CA 90035
D														

New Jersey Police Crash Investigation Report

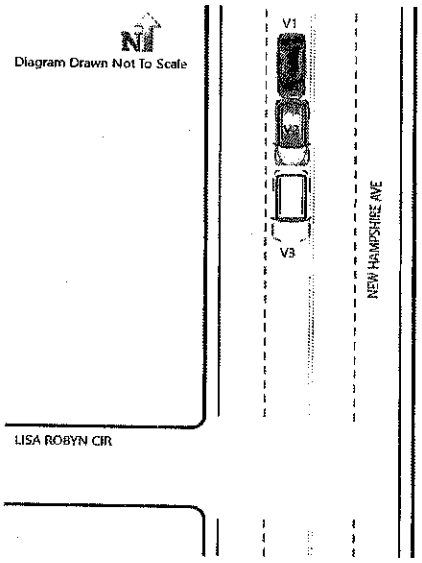
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-034212

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling south on New Hampshire Ave in the left lane. He stated traffic was heavy and he attempted to stop but did not stop in time. V1 collided with V2.

The driver of V2 stated she was traveling south on New Hampshire Ave in the left lane. She was moving slowly in traffic when V2 was struck from the rear by V1. The collision caused V2 to move forward and strike V3.

The driver of V3 stated she was traveling south on New Hampshire Ave in the left lane. She was stopped in traffic when she felt a collision from behind her. V2 collided with the rear of V3.

Based on my investigation, V1 caused the crash by striking the rear of V2 causing V2 to strike the rear of V3.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
WITTMANN V	346	JP	283	☐ Pending ☒ Complete

PAGE 3 OF 3 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034212
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	1712
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	NEW HAMPSHIRE AVE
At Intersection With Road Name	
☒ Feet ☐ Miles	380
☒ N ☐ E ☐ S ☐ W of:	LISA ROBYN CIR
11 Speed Limit	50
Dir	-
12 Route No.	0623
Suffix	-
13 Milepost	-
14	
15	
16	
17 Cross Road Name	
18 Speed Limit	15
19 Ramp ☐ To ☐ From	-
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.053090
22 Longitude	-74.196250

Vehicle 1

23 Veh #	3
24 Policy No.	939868004
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name	BATSHEVA
Initial	B
Last Name	BRAVERMAN -
29 Sex	F
27 Number & Street	1441 S LIVONIA AVE
28 City	LOS ANGELES
State	CA
Zip	90035
30 Eyes	05
DL Class	D
Restrictions	-
Endorsements	-
31 State	CA
32 Driver's License Number	F2751737
33 DOB (mm dd yyyy)	06/11/1995
34 Expires (mm yy)	06 25
35 Owner's First Name	JOHN
Initial	M
Last Name	BRAVERMAN -
☐ Same As Driver	
36 Number & Street	1581 KRIS CT
37 City	TOMS RIVER
State	NJ
Zip	08755
38 Make	INFI
39 Model	QX5
40 Color	WHI
41 Year	2019
42 Plate No.	H17NPD
43 State	NJ
44 VIN	3PCAJ5M14KF127484
45 Expires	05 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded	
☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused
	Type: ☐ Breath ☐ Blood ☐ Urine
	Results: 0. - % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill
	Hazard Class: Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs
	☐ Weight 10,001-26,000 lbs
	☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

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

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

-

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

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

96 05 | 97 01 | 98 01 | 99 05 | 100a 01 | 100b 04 | 101 02 | 102 01 | 103 01 | 104 3 | 105 01 | 106 - | 107 - | 108 04 | 109 - | 110 01 | 111 - | 112 - | 113 - | 114 - | 115 - | 116 03 | 117 - | 118a 25 | 118b - | 119a - | 119b - | 120a 01 | 120b - | 121a - | 121b - | 122 08 | 123 - | 124 04 | 125 - | 126a 26 | 126b - | 126c - | 126d - | 126e 26 | 127a - | 127b - | 127c - | 127d - | 127e - | 128 26 | 129 06 | 130 06 | 131 - | 132 - | 133 02 | 134 -

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-034290
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/28/22
5 Day Of Week	THURSDAY
6 Time (use 2400 hrs)	2258
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	MOUNTAIN VIEW DR (Road Name)
At Intersection With	
☒ Feet ☐ Miles	250
☐ N ☒ E ☐ S ☐ W of:	COLONIAL DR
11 Speed Limit	30
12 Route No. / Suffix / 13 Milepost	- / -
18 Speed Limit	30
19 Ramp ☐ To ☐ From	-
17 Cross Road Name	
20 Route/Name	
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	**
25 NJ Ins. Code	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	VICTOR - PEREZ-TOCHIHUITL
29 Sex	M
27 Number & Street	1516 WINDHAM LN
28 City / State / Zip	SILVER SPRING / MD / 20902
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	BR / D / - / - / MD
32 Driver's License Number	P623847003366
33 DOB (mm dd yyyy)	05/14/1990
34 Expires (mm yy)	05 25
35 Owner's First Name / Initial / Last Name	☐ Same As Driver / MODESTA - VASQUEZ RAMIREZ
36 Number & Street	509 W TILGHMAN ST
37 City / State / Zip	ALLENTOWN / PA / 18102
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD / - / BUR / 2003 / ZNX7826 / PA
44 VIN	1FBSS31S63HB99330
45 Expires	07 22
46 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	PAA 80002132246
55 NJ Ins. Code	963
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	-
59 Sex	-
57 Number & Street	-
58 City / State / Zip	-
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	- / - / - / - / -
62 Driver's License Number	-
63 DOB (mm dd yyyy)	-
64 Expires (mm yy)	-
65 Owner's First Name / Initial / Last Name	☐ Same As Driver / ISAAC - REICHMAN
66 Number & Street	318 PARK AVE
67 City / State / Zip	LAKEWOOD / NJ / 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	TOYT / SIE / SIL / 2015 / F88MLF / NJ
74 VIN	5TDKK3DC9FS561327
75 Expires	08 22
76 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded
77 Authority	☒ Owner ☐ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
80 Carrier No.	☐ USDOT ☐ None ☐ MC/MX
81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	-

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

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
-		-	-		-
-		-	-		-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	05	31	M	-	-	-	11	04	-	-	VICTOR - PEREZ-TOCHIHUITL - 1516 WINDHAM LN SILVER SPRING MD 20902
B														
C														
D														

New Jersey Police Crash Investigation Report

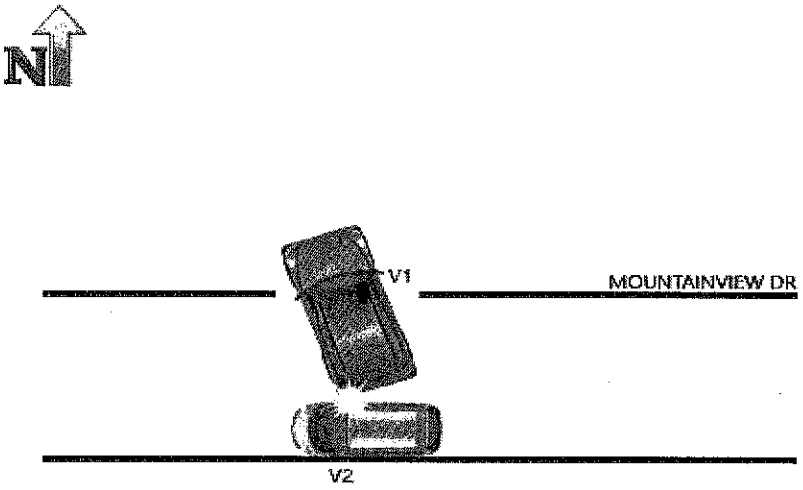
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-034290

(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	E														
	F														
	G														
	H														
	I														
	J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1, backing out of a driveway, made contact with parked Vehicle 2.

Owner of Vehicle 2 stated he observed damage to his parked Vehicle, specifically a dent on the front passenger side which disabled its use. Owner of Vehicle 2 did not know who struck his vehicle until a nearby neighbor advised it was a parked vehicle across the street.

Driver 1 stated he was backing out of his driveway and was unaware he made contact with Vehicle 2. Driver 1 admitted he was operating the vehicle at the time of the crash. There was no damage to Vehicle 1.

Vehicle 1 Insurance information (Pennsylvania):
Bristol West Insurance Company NAIC # 19658
Policy# G01 0255588 05
Exp. 05/24/2022

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
STEFANELLI E	364	LNJ	322	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-031300
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/20/22
5 Day Of Week	WEDNESDAY
6 Time (use 2400 hrs)	1745
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	70 PRESSBURG LN
☐ At Intersection With Road Name	
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
14 ☐ Feet ☐ Miles	-
15 ☐ N ☐ E ☐ S ☐ W of:	-
16	-
17 Cross Road Name	-
18 Speed Limit	-
19 Ramp ☐ To ☐ From:	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	905641304
25 NJ Ins. Code	134
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	- / - / -
29 Sex	-
27 Number & Street	-
28 City / State / Zip	- / - / -
30 Eyes / DL Class / Restrictions / Endorsements	- / - / - / -
31 State	-
32 Driver's License Number	-
33 DOB (mm dd yyyy)	-
34 Expires (mm yy)	- -
35 Owner's First Name / Initial / Last Name	☐ Same As Driver LUIS A AGUILAR
36 Number & Street	70 PRESSBURG LN
37 City / State / Zip	LAKEWOOD / NJ / 08701
38 Make	CHEV
39 Model	CAM - CA
40 Color	SIL
41 Year	2021
42 Plate No.	P39PHM
43 State	NJ
44 VIN	1G1FD1RS1M0140615
45 Expires	10 25
46 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
47 Authority: ☒ Owner ☐ Driver ☐ Police	
48 Alcohol/Drug Test: Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- % ☐ Pending	
49 Hazardous Material: ☒ None ☐ On Board ☐ Spill; Hazard Class - ; Placard No. -	
50 Carrier No.: ☐ USDOT - ☒ None ☐ MC/MX -	
51 GVWR/GCWR: ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

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

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

-

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

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

96	05
97	01
98	00
99	09
100a	99
100b	04
101	02
102	01
103	00
104	2
105	06
106	-
107	00
108	01
109	00
110	01
111	00
112	-
113	00
114	-
115	00
116	01
117	00
118a	25
118b	-
119a	00
119b	-
120a	-
120b	-
121a	00
121b	-
122	10
123	00
124	11
125	00
126a	26
126b	-
126c	-
126d	-
126e	26
127a	28
127b	00
127c	-
127d	-
127e	28
128	28
129	05
130	05
131	00
132	00
133	02
134	00

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-031300

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

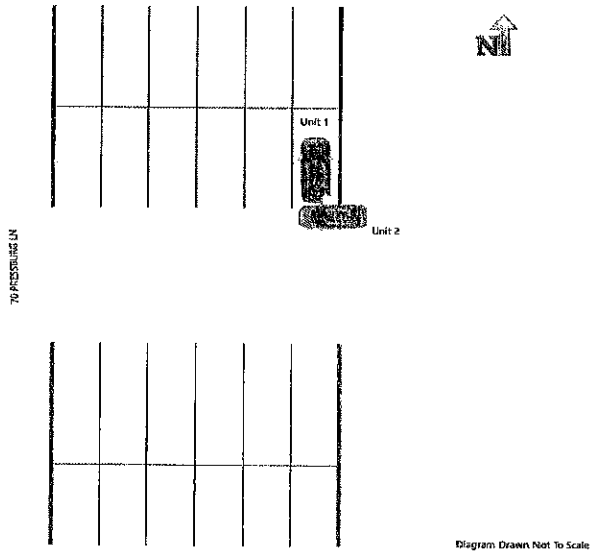


Diagram Drawn Not To Scale

145 Crash Description/Narrative

V1 WAS PARKED IN THE RESIDENTIAL LOT IN FRONT OF 70 PRESSBURG LN ADDRESS WHEN UNKNOWN VEHICLE CAUSED DAMAGE TO IT IN THE AREA OF THE REAR RIGHT SIDE BUMPER. UNKNOWN SUSPECT'S VEHICLE DESCRIPTION OR TIME OF THE CRASH. MINOR DAMAGE.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ZAVALNYUK T	359	KCM	335	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-032996
2 Police Dept of	LAKEWOOD TOWNSHIP F
Code	01
3 Station/Precinct	
4 Date of Crash (mm dd yy)	04/24/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	0300
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	49 LUCY RD
11 Speed Limit	25
☒ At Intersection With	
21 Latitude	40.04249
22 Longitude	-74.19573

Left margin codes: 96: 05; 97: 01; 98: 07; 99: 09; 100a: 01; 100b: 06; 101: 02; 102: 01; 103: 01; 104: 1; 105: 11; 106: -; 107: -; 108: 04; 109: -; 110: 01; 111: -; 112: -; 113: -; 114: -; 115: -; 116: 03; 117: -

Right margin codes: 118a: 02; 118b: -; 119a: -; 119b: -; 120a: 00; 120b: 00; 121a: -; 121b: -; 122: 01; 123: -; 124: 04; 125: -; 126a: 59; 126b: -; 126c: -; 126d: -; 126e: 59; 127a: -; 127b: -; 127c: -; 127d: -; 127e: -; 128: 59; 129: 00; 130: 00; 131: -; 132: -; 133: 00; 134: 00

Vehicle 1

Field	Value
23 Veh #	1
24 Policy No.	**
25 NJ Ins. Code	
☒ Hit & Run	
26 Driver's First Name / Initial / Last Name	
29 Sex	
27 Number & Street	
28 City / State / Zip	
30 Eyes / DL Class / Restrictions / Endorsements	
31 State	
32 Driver's License Number	
33 DOB	
34 Expires	
35 Owner's First Name / Initial / Last Name	☐ Same As Driver
36 Number & Street	
37 City / State / Zip	
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	
44 VIN / 45 Expires	
46 Vehicle Removed To	☒ Driven
47 Authority	☒ Driver
48 Alcohol/Drug Test	Given: ☒ No; Results: 0. - %
49 Hazardous Material	☒ None
50 Carrier No.	☒ None
51 GVWR/GCWR	
52 Motor Carrier or Government Entity	

Vehicle 2

Field	Value
53 Veh #	
54 Policy No.	
55 NJ Ins. Code	
56–82	(blank)

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

WHITE FENCE BY FRONT STEPS OF 49 LUCY RD

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

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

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

New Jersey Police Crash Investigation Report

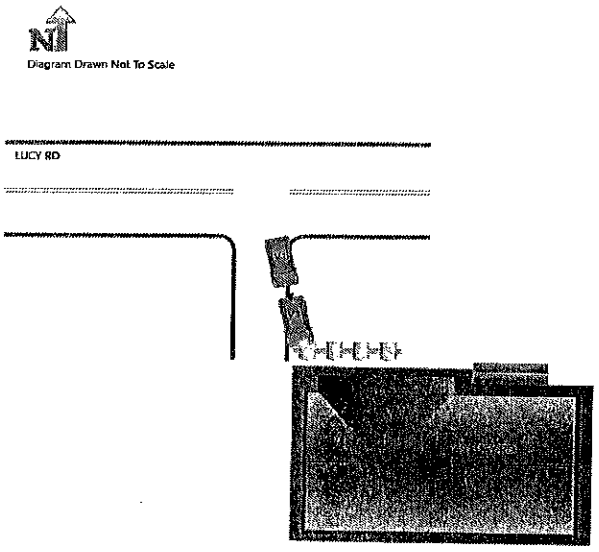
Police Dept: LAKEWOOD TOWNSHIF Code: 01

Station: _____ Case No: 22-032996

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Homeowner of 49 Lucy Rd reported a tenant named Carlos crashed into the white fence of their property. Homeowner did not have any further information about Carlos. She described his vehicle as an older model SUV and pointed out a Toyota 4Runner across the street as a similar-looking vehicle.

Suspect vehicle should have front end damage.

Homeowner reported D1 came home at approximately 0300 hours and crashed into a white fence attached to the front stairs of 49 Lucy Rd. D1 fled the scene and has not been seen since.

I did not speak to D1 and the homeowner had no other information for me to investigate further. They were advised to call if he returns. At the time of this report I did not know what part of the V1's front end or the extent of damage.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
MICALLEF E	366	CM	332	☒ Pending ☐ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032951
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/24/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	1800
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On	CLIFTON AVENUE
At Intersection With	☐
Road Name	
Dir	-
11 Speed Limit	25
12 Route No.	-
Suffix	-
13 Milepost	-
Feet	☒
Miles	☐
14	200
15	
N	☒
E	☐
S	☐
W	☐
of:	4TH STREET
16	
17 Cross Road Name	
18 Speed Limit	25
19 Ramp	To ☐ From: -
20 Route/Name	
NB ☐ EB ☐ SB ☐ WB ☐	
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	6087-15-66-72
25 NJ Ins. Code	148
Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run ☐	
26 Driver's First Name	YECHIEL
Initial	A
Last Name	FRANKEL
29 Sex	M
27 Number & Street	1494 TANGLEWOOD LN
28 City	LAKEWOOD
State	NJ
Zip	08701
30 Eyes	04
DL Class	D
Restrictions	-
Endorsements	-
31 State	NJ
32 Driver's License Number	F71917896108974
33 DOB (mm dd yyyy)	08/31/1997
34 Expires (mm yy)	08 23
35 Owner's First Name	MARTIN
Initial	J
Last Name	ZELMANOVITCH
Same As Driver	☐
36 Number & Street	5 JULE CT
37 City	LAKEWOOD
State	NJ
Zip	08701
38 Make	NISS
39 Model	SEN
40 Color	BLK
41 Year	2019
42 Plate No.	E81KVJ
43 State	NJ
44 VIN	3N1AB7AP9KY256216
45 Expires	11 22
46 Vehicle Removed To	-
Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐	
Left At Scene ☐ Towed Impounded ☐	
47 Authority	Owner ☐ Driver ☒ Police ☐
48 Alcohol/Drug Test	Given: No ☒ Yes ☐ Refused ☐
Type: Breath ☐ Blood ☐ Urine ☐	
Results: 0.- % Pending ☐	
49 Hazardous Material	None ☒ On Board ☐ Spill ☐
Hazard Class	
Placard No.	
50 Carrier No.	USDOT ☐ MC/MX ☐ None ☒
51 GVWR/GCWR	Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs ☐
52 Motor Carrier or Government Entity	-
Number & Street	-
City	-
State	-
Zip	-

Vehicle 2

53 Veh #	2
54 Policy No.	00
55 NJ Ins. Code	-
Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run ☒	
56 Driver's First Name	00
Initial	
Last Name	
59 Sex	U
57 Number & Street	00
58 City	00
State	-
Zip	00
60 Eyes	00
DL Class	00
Restrictions	00
Endorsements	00
61 State	-
62 Driver's License Number	00
63 DOB (mm dd yyyy)	00
64 Expires (mm yy)	00 00
65 Owner's First Name	00
Same As Driver	☐
66 Number & Street	00
67 City	00
State	-
Zip	00
68 Make	00
69 Model	00
70 Color	-
71 Year	00
72 Plate No.	00
73 State	-
74 VIN	00
75 Expires	00 00
76 Vehicle Removed To	-
Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐	
Left At Scene ☐ Towed Impounded ☐	
77 Authority	Owner ☐ Driver ☒ Police ☐
78 Alcohol/Drug Test	Given: No ☒ Yes ☐ Refused ☐
Type: Breath ☐ Blood ☐ Urine ☐	
Results: 0.- % Pending ☐	
79 Hazardous Material	None ☒ On Board ☐ Spill ☐
Hazard Class	
Placard No.	
80 Carrier No.	USDOT 00 ☐ MC/MX 00 ☐ None ☐
81 GVWR/GCWR	Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs ☐
82 Motor Carrier or Government Entity	00
Number & Street	00
City	00
State	-
Zip	00

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

-

Oper.	Charge	Summons No.	Oper.	Charge	Summons No.
-	136	-	-	138	-
-	140	-	-	142	-

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01	01	01	05	24	M	-	-	-	11	04	-	-	YECHIEL A FRANKEL - 1494 TANGLEWOOD LN LAKEWOOD NJ 08701 - -
B	02	01	00	-	00	U	00	00	00	00	00	-	-	00 - 00 00 00 - 00 - -
C														
D														

New Jersey Police Crash Investigation Report

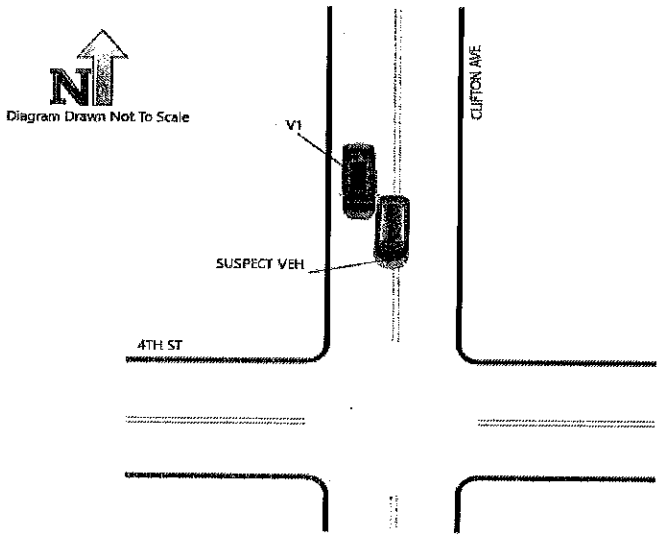
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032951

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling south on Clifton Avenue when he slowed down and signaled a turn left into the parking lot of 415 Clifton Avenue. The driver stated at this time, V2 passed him on his left and struck his vehicle. The driver of V2 described V2 as a newer Honda CRV, silver in color bearing NJ registration A13-KZP, driven by a middle aged white male.

I observed damage to the front driver fender of V1 with traces of grey paint. I checked the aforementioned New Jersey registration A13-KZP, which returns to a 2015 Honda CRV, grey in color. I searched the area for aforementioned vehicle with negative results. a former address of the registered owner was checked with negative results. An attempt to reach the registered owner telephonically went unanswered. The vehicle and its registered owner have been attached to this call. 415 Clifton Avenue may have surveillance cameras which captured this incident however the business was currently closed.

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

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-032913
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/24/22
5 Day Of Week	SUNDAY
6 Time (use 2400 hrs)	1513
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	MADISON AVE
☒ At Intersection With	E CTY LINE RD
☐ Feet / ☐ Miles	-
☐ N ☐ E ☐ S ☐ W of:	-
11 Speed Limit	45
12 Route No.	0009
Suffix	-
13 Milepost	-
14	-
15	-
16	-
17 Cross Road Name	-
18 Speed Limit	45
19 Ramp ☐ To ☐ From:	-
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	-
21 Latitude	-
22 Longitude	-

Vehicle 1

23 Veh #	1
24 Policy No.	939 813 752
25 NJ Ins. Code	054
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	YECHIEL A KLEIMAN
29 Sex	M
27 Number & Street	433 BRENTWOOD AVE
28 City / State / Zip	TOMS RIVER NJ 08755
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	06 / D / - / - / NJ
32 Driver's License Number	K52347896103906
33 DOB (mm dd yyyy)	03/17/1990
34 Expires (mm yy)	03 24
35 Owner's First Name / Initial / Last Name	☐ Same As Driver LORENZO P CUEVASCRUZ
36 Number & Street	179 E 4TH ST
37 City / State / Zip	LAKEWOOD NJ 08701
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	KIA / SED / SIL / 2006 / T77PFL / NJ
44 VIN	KNDMB233166081982
45 Expires	10 22
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	135 0226-D05-30A
55 NJ Ins. Code	962
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	LORENZO P CUEVASCRUZ
59 Sex	M
57 Number & Street	179 E 4TH ST
58 City / State / Zip	LAKEWOOD NJ 08701
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	02 / D / - / - / NJ
62 Driver's License Number	C91214847707742
63 DOB (mm dd yyyy)	07/21/1974
64 Expires (mm yy)	07 25
65 Owner's First Name / Initial / Last Name	☐ Same As Driver YECHIEL A KLEIMAN
66 Number & Street	433 BRENTWOOD AVE
67 City / State / Zip	TOMS RIVER NJ 08755
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	HOND / ODY / BLK / 2020 / B30MFW / NJ
74 VIN	5FNRL6H72LB027662
75 Expires	02 24
76 Vehicle Removed To	LEYBA TOWING
☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☒ Driver ☐ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0.- %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☐ Weight <= 10,000 lbs; ☐ Weight 10,001-26,000 lbs; ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
-		-	-		-
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	32	M	-	-	-	11	04	-	-	YECHIEL A KLEIMAN - 433 BRENTWOOD AVE TOMS RIVER NJ 08755 - -
B	01	03	01	05	28	F	-	-	-	11	04	-	-	SHOSHANA - ZLOTOWITZ - 3112 AVENUE K BROOKLYN NY 11210 - -
C	01	04	01	05	8	M	-	-	-	05	05	-	-	YITZCHOK - KLEIMAN - 433 BRENTWOOD AVE TOMS RIVER NJ 08755 - -
D	01	06	01	05	1	F	-	-	-	05	05	-	-	HADASSAH - KLEIMAN - 433 BRENTWOOD AVE TOMS RIVER NJ 08755 - -

New Jersey Police Crash Investigation Report

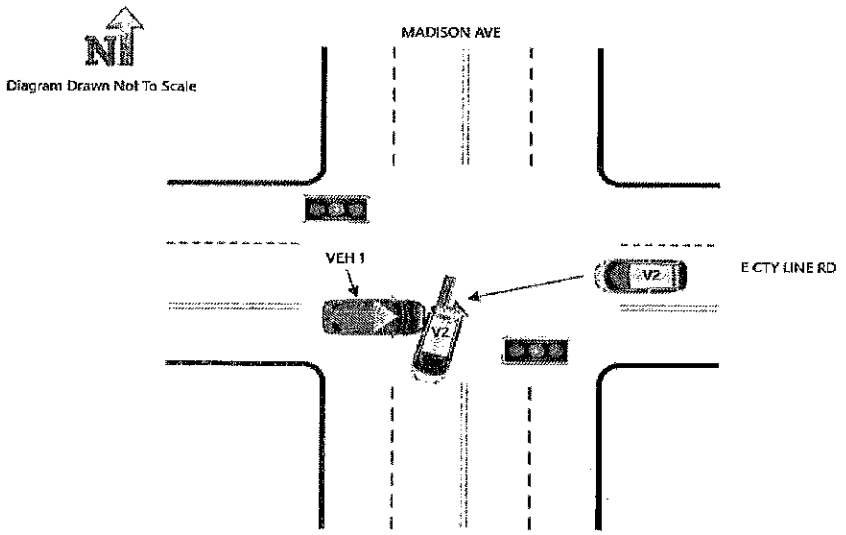
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-032913

(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 E	01	08	01	05	3	F	-	-	-	05	05	-	-	ATARA - KLEIMAN - 433 BRENTWOOD AVE TOMS RIVER NJ 08755 - -
F	01	09	01	05	6	M	-	-	-	05	05	-	-	YOSEF - KLEIMAN - 433 BRENTWOOD AVE TOMS RIVER NJ 08755 - -
G	02	01	01	05	47	M	-	-	-	11	04	-	-	LORENZO P CUEVASCRUZ - 179 E 4TH ST LAKEWOOD NJ 08701 - -
H														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated he was traveling east on W County Line prior to the crash. He explained that as he approached the intersection of Madison Ave, he observed that vehicle 2 was facing west in the middle of the intersection to waiting to turn left. He explained that the light turned yellow as he was about to enter the intersection and suddenly vehicle 2 made a left turn in front of him on to Madison Ave south. He stated that he was unable to avoid the crash and tried steering to the right to minimize damage. He stated the front of his vehicle ultimately struck the rear passenger side of vehicle 2. Driver 1 was not injured. Damage to vehicle 1 was moderate but functional.

Driver 2 stated he was facing west on E Cty Line Rd in the intersection with Madison Ave waiting to turn left prior to the crash. He explained that while waiting he observed that the traffic signal turned red so he began accelerating and began turning left. He added that vehicle 1, which was driving east on W Cty Line Rd, went through the red traffic signal and struck the rear passenger side of his vehicle. Driver 2 was not injured. Damage to vehicle 2 was disabling.

An independent witness stated he was directly behind vehicle 2 prior to the crash. He explained that the light was not red but instead yellow. He stated that vehicle 2 did not yield to vehicle 1, which was traveling east and had the right of way.

As a result of my investigation, driver 2 was found at fault for failure to yield to a vehicle. End.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
BURKHARDT J	384	DIBIASE	286	☐ Pending ☒ Complete

PAGE 1 OF 2 ☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	22-033251
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	-
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1214
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
10 Crash Occurred On:	93 PROSPECT ST
At Intersection With	
Road Name	
Dir	-
11 Speed Limit	-
12 Route No.	-
Suffix	-
13 Milepost	-
14 Feet	-
15 Miles	-
16 N ☐ E ☐ S ☐ W of:	-
17 Cross Road Name	-
18 Speed Limit	-
19 Ramp ☐ To ☐ From:	-
20 Route/Name	-
☐ NB ☐ EB ☐ SB ☐ WB	
21 Latitude	40.07440
22 Longitude	-74.22034

Vehicle 1

23 Veh #	1
24 Policy No.	IL56-V0025713
25 NJ Ins. Code	013
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
26 Driver's First Name / Initial / Last Name	YISANDER A BATISTA-REYES
29 Sex	M
27 Number & Street	35 JONES AVE
28 City / State / Zip	NEW BRUNSWICK NJ 08901
30 Eyes / DL Class / Restrictions / Endorsements / 31 State	2 / D / - / - / NJ
32 Driver's License Number	B08197906112982
33 DOB (mm dd yyyy)	12/15/1998
34 Expires (mm yy)	12 23
35 Owner's First Name / Initial / Last Name	Same As Driver - / - / DND GROUND INC -
36 Number & Street	13 YELLOWSTONE DRIVE
37 City / State / Zip	OLD BRIDGE NJ 08857
38 Make / 39 Model / 40 Color / 41 Year / 42 Plate No. / 43 State	FORD / F59 / WHI / 2021 / XLRL11 / NJ
44 VIN	1F65F5KNXM0A14975
45 Expires	03 23
46 Vehicle Removed To	-
☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded	
47 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
50 Carrier No.	☒ USDOT 265752 ☐ None; ☐ MC/MX -
51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☒ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Vehicle 2

53 Veh #	2
54 Policy No.	MEPK10441200
55 NJ Ins. Code	145
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	
56 Driver's First Name / Initial / Last Name	- / - / -
59 Sex	-
57 Number & Street	-
58 City / State / Zip	- / - / -
60 Eyes / DL Class / Restrictions / Endorsements / 61 State	- / - / - / - / -
62 Driver's License Number	-
63 DOB (mm dd yyyy)	-
64 Expires (mm yy)	- -
65 Owner's First Name / Initial / Last Name	Same As Driver - / - / CHAVEIRIM VOLUN -
66 Number & Street	139 CAROL ST
67 City / State / Zip	LAKEWOOD NJ 08701
68 Make / 69 Model / 70 Color / 71 Year / 72 Plate No. / 73 State	CHEV / TAH - TA / WHI / 2019 / NF39577 / NJ
74 VIN	1GNSKFEC6KR397311
75 Expires	10 23
76 Vehicle Removed To	-
☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	
77 Authority	☐ Owner ☐ Driver ☒ Police
78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - %; ☐ Pending
79 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class: -; Placard No.: -
80 Carrier No.	☐ USDOT - ☒ None; ☐ MC/MX -
81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
82 Motor Carrier or Government Entity	-
Number & Street	-
City / State / Zip	- / - / -

Damage & Charges

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

-

Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
1		-	-		-
Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
1		-	-		-

Occupants

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	V1	01	01	-	23	M	-	-	-	04	04	-	-	YISANDER A BATISTA-REYES - 35 JONES AVE NEW BRUNSWICK NJ 08901
B														
C														
D														

New Jersey Police Crash Investigation Report

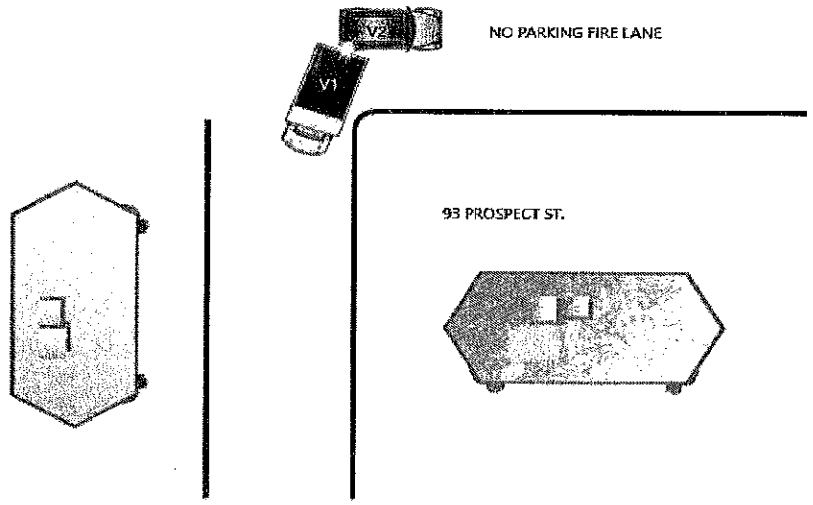
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: - Case No: 22-033251

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated he was attempting to back his vehicle in the rear of 93 Prospect St. to make a delivery when he inadvertently struck vehicle #2 that was parked unoccupied. Vehicle #2 was parked in a marked No Parking Area Fire Lane when it was struck. No injuries were reported while on scene. -end-

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
ALLEN W	287	MY	329	☐ Pending ☒ Complete

☐ Fatal

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

Field	Value
1 Case Number	22-033339
2 Police Dept of	LAKEWOOD TOWNSHIP P
Code	01
3 Station/Precinct	
10 Crash Occurred On	BRUCE ST
Road Name / Dir	
11 Speed Limit	15
12 Route No. / Suffix / 13 Milepost	
18 Speed Limit	15
☐ At Intersection With / ☒ Feet / ☐ Miles	10
14 / 15 / 16	☐ N ☒ E ☐ S ☐ W of: DEWEY AVE
17 Cross Road Name	DEWEY AVE
19 Ramp	☐ To ☐ From:
☐ NB ☐ EB ☐ SB ☐ WB	
20 Route/Name	
4 Date of Crash (mm dd yy)	04/25/22
5 Day Of Week	MONDAY
6 Time (use 2400 hrs)	1929
7 Municipality Code	1514
8 Total Killed	--
9 Total Injured	--
21 Latitude	40.091510
22 Longitude	-74.203870

Field	Vehicle 1	Field	Vehicle 2
23 Veh #	1	53 Veh #	2
24 Policy No.	4603-68-03-58	54 Policy No.	
25 NJ Ins. Code	100	55 NJ Ins. Code	
Status	☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run	Status	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run
26 Driver's First Name / Initial / Last Name	- - - -	56 Driver's First Name / Initial / Last Name	
29 Sex	-	59 Sex	
27 Number & Street	-	57 Number & Street	
28 City / State / Zip	- - -	58 City / State / Zip	
30 Eyes / DL Class / Restrictions / Endorsements	- - - -	60 Eyes / DL Class / Restrictions / Endorsements	
31 State	-	61 State	
32 Driver's License Number	-	62 Driver's License Number	
33 DOB (mm dd yyyy)	-	63 DOB (mm dd yyyy)	
34 Expires (mm yy)	- -	64 Expires (mm yy)	
35 Owner's First Name / Initial / Last Name	☐ Same As Driver YOSEF O KOHN -	65 Owner's First Name / Initial / Last Name	☐ Same As Driver
36 Number & Street	318 BRUCE ST	66 Number & Street	
37 City / State / Zip	LAKEWOOD NJ 08701	67 City / State / Zip	
38 Make	NISS	68 Make	
39 Model	ROG	69 Model	
40 Color	SIL	70 Color	
41 Year	2019	71 Year	
42 Plate No.	N85NRX	72 Plate No.	
43 State	NJ	73 State	
44 VIN	JN1BJ1CP5KW232987	74 VIN	
45 Expires	04 23	75 Expires	
46 Vehicle Removed To	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded	76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded
47 Authority	☒ Owner ☐ Driver ☐ Police	77 Authority	☐ Owner ☒ Driver ☐ Police
48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. - % ☐ Pending	78 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused; Type: ☐ Breath ☐ Blood ☐ Urine; Results: 0. % ☐ Pending
49 Hazardous Material	☒ None ☐ On Board ☐ Spill; Hazard Class; Placard No.	79 Hazardous Material	☐ None ☐ On Board ☐ Spill; Hazard Class; Placard No.
50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None	80 Carrier No.	☐ USDOT ☐ MC/MX ☐ None
51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs
52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity	
Number & Street		Number & Street	
City / State / Zip		City / State / Zip	

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

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

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

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

Left margin codes:

Code	Value
96	05
97	01
98	06
99	07
100a	01
100b	04
101	02
102	01
103	01
104	2
105	06
106	-
107	-
108	01
109	20
110	01
111	02
112	-
113	20
114	-
115	-
116	02
117	04

Right margin codes:

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

New Jersey Police Crash Investigation Report

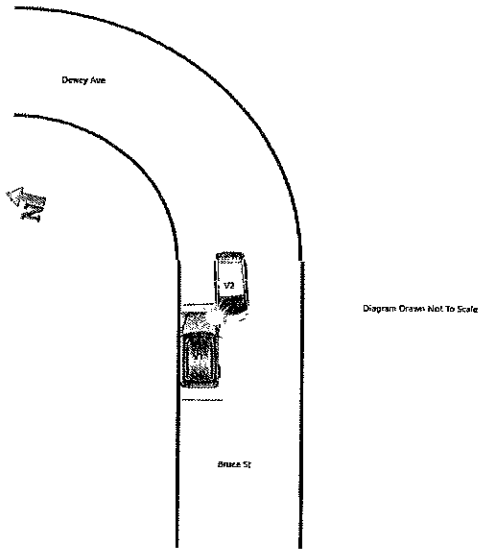
Police Dept: LAKEWOOD TOWNSHIP Code: 01

Station: _____ Case No: 22-033339

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Owner of vehicle one stated that his vehicle was parked legally on Bruce St. He was told by a neighbor that his vehicle was struck by a U-Haul van or small delivery truck. No further information given.

I was unable to locate a camera in the area. Area was searched, unable to locate U-Haul.

Veh1 sustained minor damage.

146 Officer's Signature	147 Badge #	148 Reviewer	Badge #	149 Case Status
SMITH D	411	CM	332	☐ Pending ☒ Complete