

| Page <u>1</u> of <u>3</u> <input type="checkbox"/> Fatal <b>New Jersey Police Crash Investigation Report</b> <input type="checkbox"/> Reportable <input checked="" type="checkbox"/> Non-Reportable <input type="checkbox"/> Change Report |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------|-------------------------------|------------------|
| 96<br><b>01</b>                                                                                                                                                                                                                            | 1 Case Number<br><b>2016-00030491</b>                                                                                                                          | 10 Crash Occurred On: <b>70</b>                                                                           | 11 Speed Limit<br><b>W 5 0</b>                    | 12 Route No. <b>7 0</b>                                                                                                                                        | 13 Milepost                      | 18 Speed Limit<br><b>3 5</b>                                                          | 118a<br><b>02</b>             |                  |
| 97<br><b>01</b>                                                                                                                                                                                                                            | 2 Police Dept of<br><b>Brick Township</b>                                                                                                                      | At Intersection with<br><input type="checkbox"/> Feet <input checked="" type="checkbox"/> E of: <b>88</b> |                                                   | 17 Cross Road Name                                                                                                                                             |                                  | 118b<br><b>09</b>                                                                     |                               |                  |
| 98<br><b>01</b>                                                                                                                                                                                                                            | 3 Station/Precinct                                                                                                                                             | 200.00                                                                                                    | 14 15                                             | 16                                                                                                                                                             | 19 To: 20 Route/Name             | 119a<br><b>25</b>                                                                     |                               |                  |
| 99<br><b>02</b>                                                                                                                                                                                                                            | 4 Date of Crash<br><b>0 5   1 7   1 6</b>                                                                                                                      | 5 Day of Week<br><b>Su</b>                                                                                | 6 Time (use 2400 hrs)<br><b>1 7 4 2</b>           | 7 Municipality Code<br><b>1506</b>                                                                                                                             | 8 Total Killed                   | 9 Total Injured                                                                       | 119b<br><b>---</b>            |                  |
| 100<br><b>01</b>                                                                                                                                                                                                                           | 23 Veh No                                                                                                                                                      | 24 Policy No.<br><b>PHPK1414200</b>                                                                       | 25 Ins Code<br><b>280</b>                         | 53 Veh No                                                                                                                                                      | 54 Policy No.<br><b>F1853068</b> | 55 Ins Code<br><b>426</b>                                                             | 120<br><b>01</b>              |                  |
| 101<br><b>02</b>                                                                                                                                                                                                                           | 26 Driver's First Name<br><b>Crispinu K Wegulo</b>                                                                                                             | 29 Sex<br><b>M</b>                                                                                        | 56 Driver's First Name<br><b>Susan Turkmen</b>    | 59 Sex                                                                                                                                                         |                                  |                                                                                       | 121<br><b>01</b>              |                  |
| 102<br><b>02</b>                                                                                                                                                                                                                           | 27 Number and Street<br><b>35 David DR</b>                                                                                                                     | 30 Eyes<br><b>Black</b>                                                                                   | 57 Number and Street<br><b>611 Dave Marion RD</b> | 60 Eyes                                                                                                                                                        |                                  |                                                                                       |                               |                  |
| 103<br><b>02</b>                                                                                                                                                                                                                           | 28 City<br><b>Barnegat</b>                                                                                                                                     | State<br><b>NJ</b>                                                                                        | Zip<br><b>08005-</b>                              | 58 City<br><b>Toms River</b>                                                                                                                                   | State<br><b>NJ</b>               | Zip<br><b>08753-</b>                                                                  |                               |                  |
| 104<br><b>02</b>                                                                                                                                                                                                                           | 31 State<br><b>NJ</b>                                                                                                                                          | 32 Drivers License No<br><b>W2 235   1 2 4 7 2   1 2 7 9 1</b>                                            | 33 DOB<br><b>12   14   79</b>                     | 34 Expires<br><b>07   16</b>                                                                                                                                   | 61 State<br><b>NJ</b>            | 62 Drivers License No<br><b>T 9 3 7 7   7 2 7 0 0   5 6 5 3 4</b>                     | 63 DOB<br><b>06   05   53</b> |                  |
| 105<br><b>01</b>                                                                                                                                                                                                                           | 35 Owner's First Name<br><b>Miller Auto Leasing</b>                                                                                                            | 65 Owner's First Name<br><b>Susan Turkmen</b>                                                             |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               | 122<br><b>00</b> |
| 106<br><b>---</b>                                                                                                                                                                                                                          | 36 Number and Street<br><b>1592 38</b>                                                                                                                         | 66 Number and Street<br><b>611 Dave Marion RD</b>                                                         |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               | 123<br><b>00</b> |
| 107<br><b>---</b>                                                                                                                                                                                                                          | 37 City<br><b>Lumberton</b>                                                                                                                                    | State<br><b>NJ</b>                                                                                        | Zip<br><b>08048-</b>                              | 67 City<br><b>Toms River</b>                                                                                                                                   | State<br><b>NJ</b>               | Zip<br><b>08753-</b>                                                                  | 124<br><b>07</b>              |                  |
| 108<br><b>01</b>                                                                                                                                                                                                                           | 38 Make<br><b>DODGE</b>                                                                                                                                        | 39 Model<br><b>Caravan</b>                                                                                | 40 Color<br><b>Green</b>                          | 41 Year<br><b>2013</b>                                                                                                                                         | 42 Plate No.<br><b>NF35295</b>   | 43 State<br><b>NJ</b>                                                                 | 68 Make<br><b>VOLVO</b>       |                  |
| 109<br><b>04</b>                                                                                                                                                                                                                           | 44 VIN<br><b>2C4RDGBG8DR765838</b>                                                                                                                             | 45 Expires<br><b>06   16</b>                                                                              | 74 VIN<br><b>YV1672NJ8A2533685</b>                | 75 Expires<br><b>04   17</b>                                                                                                                                   |                                  |                                                                                       |                               | 125<br><b>08</b> |
| 110<br><b>02</b>                                                                                                                                                                                                                           | 46 Vehicle Removed To<br><b>Driven Away</b>                                                                                                                    | 47 Authority<br><input checked="" type="checkbox"/> Driver                                                | 76 Vehicle Removed To<br><b>Driven Away</b>       | 77 Authority<br><input checked="" type="checkbox"/> Driver                                                                                                     |                                  |                                                                                       |                               | 126<br><b>04</b> |
| 111<br><b>01</b>                                                                                                                                                                                                                           | 48 Alcohol/Drug Test<br>Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused                            | 134 Crash Diagram (NOT TO SCALE)                                                                          |                                                   | 78 Alcohol/Drug Test<br>Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused                            |                                  | 127<br><b>04</b>                                                                      |                               |                  |
| 112<br><b>08</b>                                                                                                                                                                                                                           | Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine                                                            |                                                                                                           |                                                   | Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine                                                            |                                  | 128a<br><b>26</b>                                                                     |                               |                  |
| 113<br><b>---</b>                                                                                                                                                                                                                          | Results: 0.____% <input type="checkbox"/> Pending                                                                                                              |                                                                                                           |                                                   | Results: 0.____% <input type="checkbox"/> Pending                                                                                                              |                                  | 128b<br><b>---</b>                                                                    |                               |                  |
| 114<br><b>03</b>                                                                                                                                                                                                                           | 49 Hazardous Material<br>On Board <input type="checkbox"/> Spill <input type="checkbox"/>                                                                      |                                                                                                           |                                                   | 79 Hazardous Material<br>On Board <input type="checkbox"/> Spill <input type="checkbox"/>                                                                      |                                  | 128c<br><b>---</b>                                                                    |                               |                  |
| 115<br><b>---</b>                                                                                                                                                                                                                          | 50 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *                                                                                 |                                                                                                           |                                                   | 80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> Other *                                                                                 |                                  | 128d<br><b>---</b>                                                                    |                               |                  |
| 116<br><b>04</b>                                                                                                                                                                                                                           | 51 Commercial Vehicle Weight<br><input type="checkbox"/> ≤ 10,000 lbs<br><input type="checkbox"/> 10,001 - 26,000 lbs<br><input type="checkbox"/> ≥ 26,001 lbs |                                                                                                           |                                                   | 81 Commercial Vehicle Weight<br><input type="checkbox"/> ≤ 10,000 lbs<br><input type="checkbox"/> 10,001 - 26,000 lbs<br><input type="checkbox"/> ≥ 26,001 lbs |                                  | 129a<br><b>26</b>                                                                     |                               |                  |
| 117<br><b>04</b>                                                                                                                                                                                                                           | 52 Carrier name                                                                                                                                                |                                                                                                           |                                                   | 82 Carrier name                                                                                                                                                |                                  | 129b<br><b>---</b>                                                                    |                               |                  |
| 136 Damage To Other Property <b>None</b>                                                                                                                                                                                                   |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |
| Oper. <b>1</b>                                                                                                                                                                                                                             |                                                                                                                                                                | 137 Charge <input type="checkbox"/> Multiple Charges                                                      |                                                   | 138 Summons No.                                                                                                                                                |                                  | Oper. <b>2</b>                                                                        |                               |                  |
| 141 Officer's Signature<br><b>Nicole Borden</b>                                                                                                                                                                                            |                                                                                                                                                                | 142 Badge No.<br><b>274</b>                                                                               |                                                   | 143 Reviewed By    Badge No.                                                                                                                                   |                                  | 144 Case Status<br><input type="checkbox"/> Pending <input type="checkbox"/> Complete |                               |                  |
| 83                                                                                                                                                                                                                                         |                                                                                                                                                                | 84                                                                                                        | 85                                                | 86                                                                                                                                                             | 87                               | 88                                                                                    | 89                            |                  |
| A                                                                                                                                                                                                                                          |                                                                                                                                                                | <b>1</b>                                                                                                  | <b>01</b>                                         | <b>01</b>                                                                                                                                                      | <b>--</b>                        | <b>37</b>                                                                             | <b>M</b>                      |                  |
| B                                                                                                                                                                                                                                          |                                                                                                                                                                | <b>1</b>                                                                                                  | <b>04</b>                                         | <b>01</b>                                                                                                                                                      | <b>--</b>                        | <b>48</b>                                                                             | <b>M</b>                      |                  |
| C                                                                                                                                                                                                                                          |                                                                                                                                                                | <b>1</b>                                                                                                  | <b>06</b>                                         | <b>01</b>                                                                                                                                                      | <b>--</b>                        | <b>25</b>                                                                             | <b>M</b>                      |                  |
| D                                                                                                                                                                                                                                          |                                                                                                                                                                | <b>2</b>                                                                                                  | <b>01</b>                                         | <b>01</b>                                                                                                                                                      | <b>--</b>                        | <b>63</b>                                                                             | <b>F</b>                      |                  |
| E                                                                                                                                                                                                                                          |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |
| Names & Addresses of Occupants - If Deceased, Date & Time of Death                                                                                                                                                                         |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |
| Crispinu K Wegulo<br>35 David DR<br>Barnegat, NJ 08005-                                                                                                                                                                                    |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |
| Salvatore Finnica<br>1200 70 102<br>Brick, NJ 08724-                                                                                                                                                                                       |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |
| Austin McCoy<br>1200 70 107<br>Brick, NJ 08724-                                                                                                                                                                                            |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |
| Susan Turkmen<br>611 Dave Marion RD<br>Toms River, NJ 08753-                                                                                                                                                                               |                                                                                                                                                                |                                                                                                           |                                                   |                                                                                                                                                                |                                  |                                                                                       |                               |                  |

## New Jersey Police Crash Investigation Report

Police Dept: \_\_\_\_\_ Code: **01-Municipal Police**

## Motor Vehicle Crash Description

Station: \_\_\_\_\_ Case No: **2016-00030491**

(Refer to vehicle by number)

|   | Veh<br>Occ | Pos<br>In/On | Eject | Phys<br>Cond | Age | Sex | Loc<br>Inj | Type<br>Inj | Ref<br>Med | Equip<br>Avail | Equip<br>Used | Bag<br>Depl | Hosp<br>Code | Names & Addresses of Occupants - If Deceased, Date & Time of Death |
|---|------------|--------------|-------|--------------|-----|-----|------------|-------------|------------|----------------|---------------|-------------|--------------|--------------------------------------------------------------------|
| A | 83         | 84           | 85    | 86           | 87  | 88  | 89         | 90          | 91         | 92             | 93            | 94          | 95           |                                                                    |
| B |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |
| C |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |
| D |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |
| E |            |              |       |              |     |     |            |             |            |                |               |             |              |                                                                    |

## 135 Crash Description

Vehicle #1 was traveling behind Vehicle #2 on Rt 70 Westbound, in the area of Rt. 88. Approximately 200 feet East of the intersection of Rt 88, Vehicle #2 stopped in the roadway due to traffic ahead of her. Vehicle #1 was unable to come to complete stop and struck the rear bumper of vehicle #2 with the front bumper of vehicle #1.

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Diagram

Police Dept: \_\_\_\_\_ Code: **01-Municipal Police**

Station: \_\_\_\_\_ Case No: **2016-00030491**

