

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-041374**

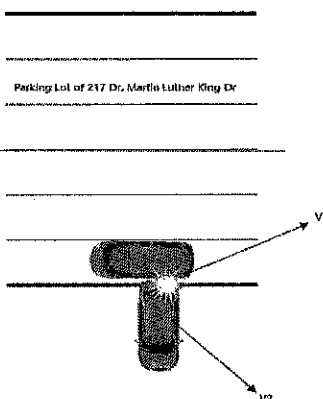
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

The owner of V1 stated that yesterday morning (May 22, 2022), she noticed an indent and white marks on the left rear side of her door. The owner explained that she went to the manager and got video surveillance of the incident.

The surveillance showed that a vehicle backed into her rear driver-side door and then took off at approximately 03:35. I was unable to determine what type of vehicle or the registration plates. Video was added to the incident.

146 Officer's Signature

TOWNSEND T

147 Badge #

403

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

05	1 Case Number 22-041654		10 Crash Occurred On: 456 CHESTNUT ST		11 Speed Limit 15		118a	
97	2 Police Dept of LAKEWOOD TOWNSHIP F01		Code		12 Route No.		118b	
98	3 Station/Precinct		At Intersection With		Suffix		13 Milepost	
01	4 Date of Crash mm dd yy 05/24/22		5 Day Of Week TUESDAY		6 Time (use 2400 hrs) 1017		7 Municipality Code 1514	
99	8 Total Killed ---		9 Total Injured ---		21 Latitude 40.051104		22 Longitude -74.201202	
09	23 Veh # 1		24 Policy No. 6091349370		25 NJ Ins. Code 100		53 Veh # 2	
100a	26 Driver's First Name Initial Last Name		29 Sex		56 Driver's First Name Initial Last Name		59 Sex	
01	27 Number & Street		57 Number & Street		58 City		State Zip	
02	30 Eyes		DL Class		Restrictions		Endorsements	
01	31 State		60 Eyes		DL Class		Restrictions	
103	32 Driver's License Number		33 DOB mm dd yyyy		34 Expires mm yy		62 Driver's License Number	
01	35 Owner's First Name Initial Last Name		65 Owner's First Name Initial Last Name		63 DOB mm dd yyyy		64 Expires mm yy	
2	36 Number & Street 542 CROWS MILL RD		66 Number & Street		67 City		State Zip	
105	37 City FORDS		68 Make		69 Model		70 Color	
06	38 Make HOND		39 Model CIV		40 Color GRY		41 Year 2015	
106	42 Plate No. T22PJF		43 State NJ		71 Year		72 Plate No.	
107	44 VIN 19XFB2F76FE214642		45 Expires 12 22		73 State		74 VIN	
108	46 Vehicle Removed To		76 Vehicle Removed To		75 Expires		77 Authority	
01	47 Authority ☒ Owner ☐ Driver ☐ Police		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		79 Hazardous Material Given: ☒ None ☐ On Board ☐ Spill Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		80 Carrier No. ☐ USDOT ☐ MC/MX	
109	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.		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		82 Motor Carrier or Government Entity	
110	50 Carrier No. ☐ USDOT ☒ None ☐ MC/MX		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		83 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		136 Charge	
111	52 Motor Carrier or Government Entity		84 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		137 Summons. No.		138 Charge	
112	53 Motor Carrier or Government Entity		85 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		139 Summons. No.		140 Charge	
113	54 Motor Carrier or Government Entity		86 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		141 Summons. No.		142 Charge	
114	55 Motor Carrier or Government Entity		87 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		143 Summons. No.		144 Charge	
115	56 Motor Carrier or Government Entity		88 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		145 Summons. No.		146 Charge	
116	57 Motor Carrier or Government Entity		89 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		147 Summons. No.		148 Charge	
117	58 Motor Carrier or Government Entity		90 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		149 Summons. No.		150 Charge	
118	59 Motor Carrier or Government Entity		91 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		151 Summons. No.		152 Charge	
119	60 Motor Carrier or Government Entity		92 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		153 Summons. No.		154 Charge	
120	61 Motor Carrier or Government Entity		93 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		155 Summons. No.		156 Charge	
121	62 Motor Carrier or Government Entity		94 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		157 Summons. No.		158 Charge	
122	63 Motor Carrier or Government Entity		95 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		159 Summons. No.		160 Charge	
123	64 Motor Carrier or Government Entity		96 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		161 Summons. No.		162 Charge	
124	65 Motor Carrier or Government Entity		97 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		163 Summons. No.		164 Charge	
125	66 Motor Carrier or Government Entity		98 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		165 Summons. No.		166 Charge	
126	67 Motor Carrier or Government Entity		99 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		167 Summons. No.		168 Charge	
127	68 Motor Carrier or Government Entity		100 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		169 Summons. No.		170 Charge	
128	69 Motor Carrier or Government Entity		101 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		171 Summons. No.		172 Charge	
129	70 Motor Carrier or Government Entity		102 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		173 Summons. No.		174 Charge	
130	71 Motor Carrier or Government Entity		103 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		175 Summons. No.		176 Charge	
131	72 Motor Carrier or Government Entity		104 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		177 Summons. No.		178 Charge	
132	73 Motor Carrier or Government Entity		105 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		179 Summons. No.		180 Charge	
133	74 Motor Carrier or Government Entity		106 Damage To Other Property <					

**New Jersey Police
Crash Investigation Report**

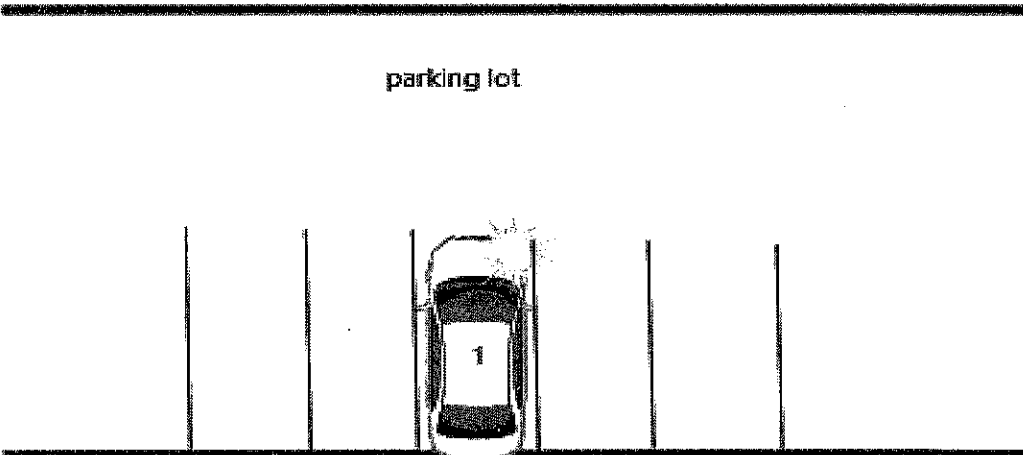
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-041654**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

parking lot



145 Crash Description/Narrative

Vehicle #1 was parked in a parking space in the parking lot of 456 Chestnut facing North. Vehicle #1 was struck by an unknown vehicle which then fled the area. Witness Christina Meseroll stated that a Blue Lexus truck with a white male driver was backing into the space next to vehicle #1, struck vehicle #1 then fled the area. The registration that the witness gave did not match the vehicle that she described. Hit and run follow up form was completed and submitted.

146 Officer's Signature

PRZEWOZNIK J

147 Badge #

308

148 Reviewer

EM

Badge #

288

149 Case Status

☒ Pending
 ☐ Complete

[illegible]

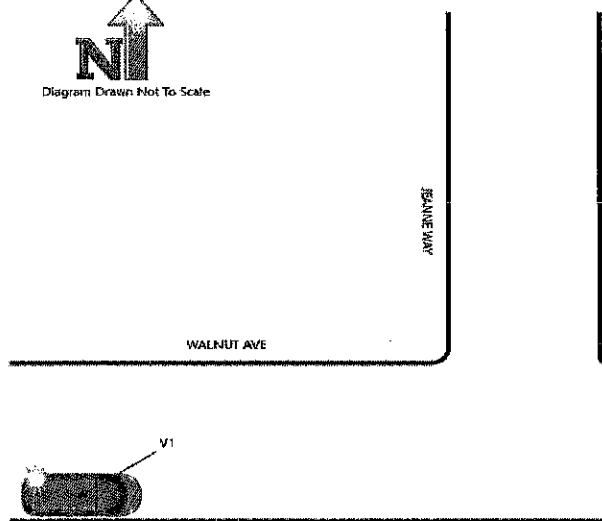
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-041698**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The reporting party stated she parked V1 on the right side of Walnut Avenue, facing east, approximately 100 feet west of Jeanne Way at 0930 hours on 05/23/2022. She stated she returned to the vehicle on the same date at 1600 hours and observed damage to the driver rear quarter panel and taillight. The reporting party stated she waited a day to file a police report due to their being no suspect vehicle information and her needing to pick up her child.

I personally observed damage to the driver rear quarter panel and taillight of V1. I did not observe any noticeable paint transfer. No surveillance cameras were observed in the area the crash was said to have taken place. There are no known suspects at this time.

146 Officer's Signature

MEYER JR R

147 Badge #

401

148 Reviewer

CM

Badge #

332

149 Case Status

☒ Pending ☐ Complete

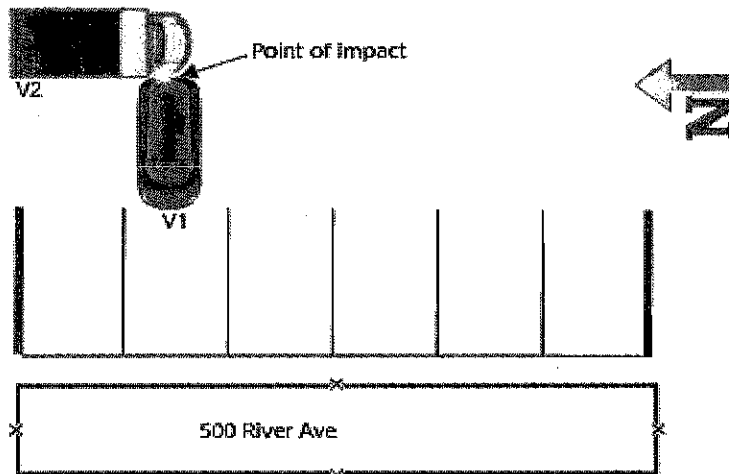
05	1 Case Number 22-041706		10 Crash Occurred On: 500 RIVER AVE		11 Speed Limit		12 Route No.		Suffix		13 Milepost		18 Speed Limit		10										
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		Code		☐ At Intersection With		Road Name		Dir		19		20		101b										
01	3 Station/Precinct				☐ Feet		☐ N ☐ E of:				☐ NB ☐ EB		☐ SB ☐ WB		00										
99					☐ Miles		☐ S ☐ W								119a										
09	4 Date of Crash mm dd yy 05/24/22		5 Day Of Week TUESDAY		6 Time (use 2400 hrs) 1508		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		21 Latitude 40.076017		22 Longitude -74.218246		25								
100a																	119b								
01	23 Veh # 1		24 Policy No.		25 NJ Ins. Code		53 Veh # 2		54 Policy No. 4495462		55 NJ Ins. Code 220						00								
04																	120b								
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run						☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										00								
02	26 Driver's First Name Initial Last Name		29 Sex		56 Driver's First Name Initial Last Name		59 Sex										121a								
102																	121b								
01	27 Number & Street				57 Number & Street												-								
103																	-								
01	28 City		State Zip		58 City		State Zip										-								
104																	-								
2	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		122						
105											61 State								123						
08	32 Driver's License Number		33 DOB mm dd yyyy		34 Expires mm yy		62 Driver's License Number		63 DOB mm dd yyyy		64 Expires mm yy								10						
106	35 Owner's First Name Initial Last Name		36 Number & Street		37 City		State Zip		65 Owner's First Name Initial Last Name		66 Number & Street 590 PARK AVE; 1D		67 City LAKEWOOD		State Zip NJ 08701				11						
-	☐ Same As Driver								☐ Same As Driver										11a						
107																			124						
01	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make ISU		69 Model NPR		70 Color WHI		71 Year 2018		72 Plate No. XGZY60		73 State NJ		28
20																									126a
110	44 VIN		45 Expires		74 VIN 54DC4W1B4JS804209		75 Expires 09 22																		126b
00	46 Vehicle Removed To		47 Authority ☐ Owner ☒ Driver ☐ Police		48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		49 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.		76 Vehicle Removed To		77 Authority ☐ Owner ☒ Driver ☐ Police		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		79 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.		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		83		126c
111																									126d
02	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☐ Left At Scene ☐ Towed Impounded						☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ Left At Scene ☐ Towed Impounded														126e
112																									126f
00	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		53		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		83										28
113																									

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-041706**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 struck vehicle 2 while backing out of a parking space in the parking lot of 500 River Ave.

Two employees that worked for 1-800- GotJunk stated that their company truck (vehicle 2) was struck by vehicle 1. They stated that the driver of vehicle 1 was a white female driving a black minivan and told them that she had somewhere to be and fled the scene. Site manager of the day-care was unsuccessful on providing video evidence of vehicle 2.

Based on witnesses statements I determine that driver of vehicle 1 is at fault due to backing unsafely.

146 Officer's Signature

CARRINGTON K

147 Badge #

431

148 Reviewer

CM

Badge #

332

149 Case Status

☒ Pending ☐ Complete

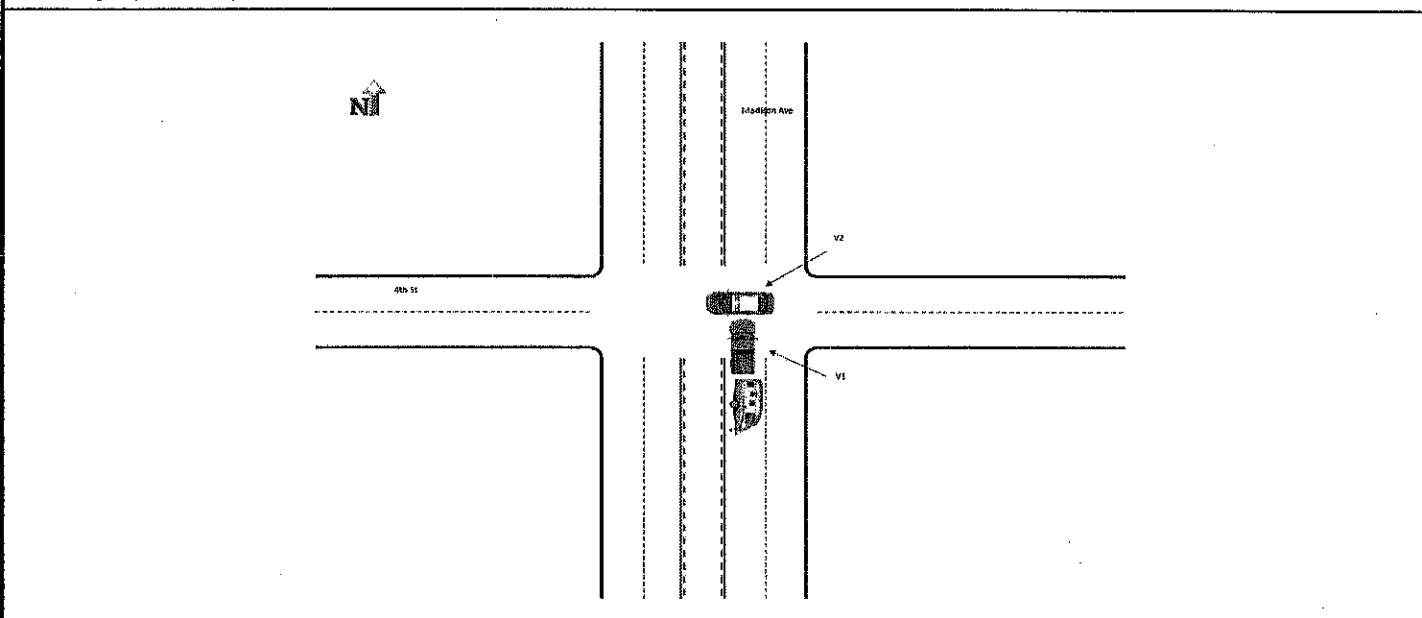
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-041848**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V#1, a Lakewood Township Police vehicle bearing NJ Registration 20598MG was at the light waiting on 4th St to make a left turn onto Madison Ave. **V#2**, a Ford 350 Pickup truck bearing NJ Registration XGKP92 was traveling north on Madison Avenue in the left lane while pulling a trailer. As **V#2** approached the intersection with 4th St. **V#1** pulled into the intersection resulting in **V#2** striking **V#1**. No injuries were reported at the scene but **D#1** went to Monmouth Medical Center Southern Campus to be checked out as a precaution. Vehicle #1 had airbag deployment and was disabled in the roadway. It was towed by ACME Towing. Vehicle #2 was unregistered, impounded and towed by ACME Towing.

D#1 stated that he was sitting at the red light on 4th St for awhile waiting to make a left turn onto Madison Ave going south. He thought the light changed and started pulling out when Vehicle #2 struck him. **D#1** stated **V#2** was travelling north on Madison Avenue. **D#1** stated he thought the light changed but after the crash he thinks the light didn't change.

D#2 stated he was travelling north on Madison Avenue. **V#1** pulled out in front of him from 4th St resulting in the crash. **D#2** stated he had the green light and **V#1** went through a red light. **D#2** stated that **V#1** didn't have any emergency lights on at the time of the crash.

A witness, Joshua Novoseller was driving northbound on Madison Avenue in the right lane behind **V#2** at the time of the crash. Joshua stated that **V#2** was travelling north on Madison Ave and had the green light while approaching the intersection with 4th St. **V#1**, the police car made a left turn from 4th St on a red light causing the crash.

Vehicle #1 is a Lakewood Township Police Vehicle #4344. It is self insured through the Ocean County Municipal Joint Insurance Fund with ID 05-87.

146 Officer's Signature

YOUNG M

147 Badge #

329

148 Reviewer

SA

Badge #

263

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-041848**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
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144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Trailer Information:**Dave's Landscaping and Lawn Care LLC****2021 CMT CM8 Trailer white in color. It was bearing NJ Registration TXF91S, which is valid 02-2025.****VIN: 5A3C820D4ML002091**

Driver #2 was issued two summons for being an unlicensed driver and unregistered vehicle. The owner of Dave's Landscaping and Lawn Care responded to the scene and took possession of the trailer.

I responded to 401 Madison Avenue and was able to look at the security cameras. One of the cameras points towards the intersection but does not show the point of impact and is unclear. I viewed the video and it shows Vehicle #2 travelling north on Madison Avenue and Vehicle #1 travelling west on 4th St after crash occurred. The video appears to skip at the point of impact and shows both vehicles turning onto 4th Street from Madison Ave. Vehicle #1 did not have any emergency lights on prior to the crash. The video is attached to the call. Pictures of the vehicles and the crash scene were taken and attached to the call.

After conducting an investigation and speaking with all parties involved it was determined that Vehicle #1 went through the red light as Vehicle #2 was going through the intersection. Driver #1 is at fault for the crash.

146 Officer's Signature

YOUNG M

147 Badge #

329

148 Reviewer

SA

Badge #

263

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																					
05	1 Case Number				22-041895										118a		03																																																							
97	2 Police Dept of				Code		10 Crash Occurred On: MONMOUTH AVE										11 Speed Limit		35		118b		-																																																	
01	3 Station/Preinct				-		☒ At Intersection With Road Name Dir										12 Route No.		Suffix		13 Milepost		18 Speed Limit																																																	
01	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)										7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude																																															
07	05/25/22				WEDNESDAY		1009										1514		--		2		40.094562		-74.210564																																															
100a	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01																																															
04	1				939945840				054				2				7901717310				945				120b																																															
01	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				☐ NB				☐ EB																																															
02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				59 Sex																																											
01	JACOB				-				ROTTENBERG				-				M				SHIMSHON				-				BAKST				-		M																																					
01	27 Number & Street				9 SONCINO PL				57 Number & Street				321 EAST 5TH STREET				121a				-																																																			
01	28 City				State				Zip				58 City				State				Zip				121b																																															
01	LAKEWOOD				NJ				08701				LAKEWOOD				NJ				08701				-																																															
2	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State																																			
02	02				D				-				-				NJ				02				D				-				-				NJ																																			
03	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires				122				01																																											
03	R67793810012832				12/18/1983				12				24				B02287080010922				10/18/1992				10				23				-																																							
06	35 Owner's First Name				Initial				Last Name				65 Owner's First Name				Initial				Last Name				124				03																																											
-	☒ Same As Driver				JACOB				-				ROTTENBERG				-				☒ Same As Driver				SHIMSHON				-				BAKST				-																																			
07	36 Number & Street				9 SONCINO PL				66 Number & Street				321 EAST 5TH STREET				125				-																																																			
01	37 City				State				Zip				67 City				State				Zip				126a																																															
01	LAKEWOOD				NJ				08701				LAKEWOOD				NJ				08701				26																																															
01	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				68 Make				69 Model				70 Color				71 Year				72 Plate No.				73 State																											
01	LINC				AVI				BK				2020				T77LSP				NJ				68				HOND				CIV				BK				2007				B82PXX				NJ																							
01	44 VIN				45 Expires				74 VIN				75 Expires				126b				-																																																			
01	5LM5J7XC6LGL01887				08				23				2HGFA16517H315512				05				23				126c																																															
01	46 Vehicle Removed To				YITZ TOWING				76 Vehicle Removed To				FREEDOM TOWING & RECOVERY				126d				-																																																			
112	☐ Driven				☒ Towed Disabled				☐ Towed Disabled & Impounded				☐ Driven				☒ Towed Disabled				☐ Towed Disabled & Impounded				126e																																															
-	☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded				26																																																							
113	47 Authority				☐ Owner				☒ Driver				☐ Police				77 Authority				☐ Owner				☐ Driver				☒ Police				127a																																							
114	48 Alcohol/Drug Test				Given: ☒ No				☐ Yes				☐ Refused				49 Hazardous Material				Given: ☒ No				☐ Yes				☐ Refused				79 Hazardous Material				Given: ☒ No				☐ Yes				☐ Refused																											
115	Type: ☐ Breath				☐ Blood				☐ Urine				Type: ☐ Breath				☐ Blood				☐ Urine				Type: ☐ Breath				☐ Blood				☐ Urine				127b																																			
116	Results: 0. - %				☐ Pending				Hazard Class				Placard No.				Results: 0. - %				☐ Pending				Hazard Class				Placard No.				127c																																							
03	50 Carrier No.				☐ USDOT				☒ None				51 GVWR/GCWR				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				80 Carrier No.				☐ USDOT				☒ None				81 GVWR/GCWR				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs																			
117	☐ MC/MX				52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity				127d		-																																																									
02	Number & Street				City				State				Zip				127e		-																																																					
-	135 Damage To Other Property				☐ Yes (If Yes, describe)				☒ No				128		-																																																									
-	136 Charge				137 Summons. No.				138 Charge				139 Summons. No.				129		-																																																					
01	39:4-81				293801				NO STATUTE				-				130		-																																																					
-	140 Charge				141 Summons. No.				142 Charge				143 Summons. No.				131		05																																																					
-	NO STATUTE				-				NO STATUTE				-				132		04																																																					
-	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death																			
A	01				01				01				05				38				M				-				-				-				11				04				-				-				JACOB				-				ROTTENBERG				-							
B	02				01				01				03				29				M				02				04				02				11				11				02				6502				SHIMSHON				-				BAKST				-							
C	02				03				01				03				22				M				12				08				02				11				11				02				6502				DOV				-				GOLD				-							
D	02				03				01				03				22				M				12				08				02				11				11				02				6502				319 E 5TH ST				LAKEWOOD				NJ				08701				-			

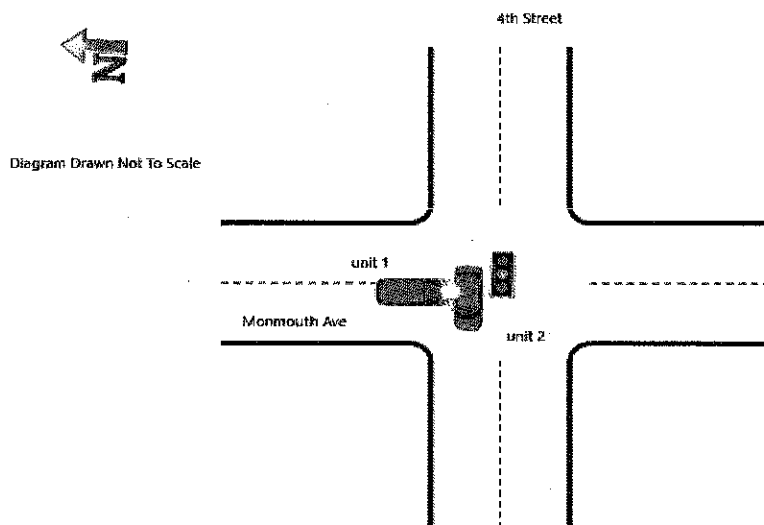
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-041895**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle one states that he was traveling south on Monmouth Ave, and did not stop at the red light at the intersection of 4th Street. He also states that vehicle two had a green light. Once in the intersection he struck vehicle two.

The driver of vehicle two states that he was traveling east on 4th street, and upon entering the intersection of Monmouth Ave he was struck by vehicle one. He states he does not remember if he had a green light.

The driver of vehicle one is found at fault for not obeying the red traffic signal and striking vehicle two.

146 Officer's Signature

MATTHEWS J

147 Badge #

830

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

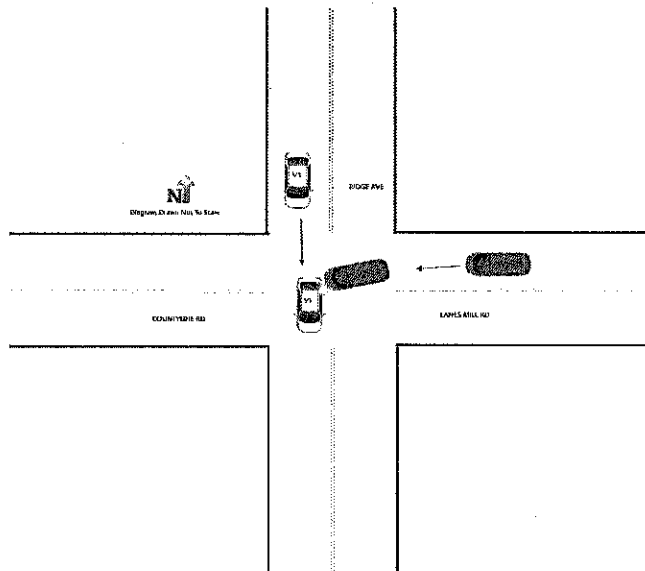
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
Station: _____ Case No: 22-041982

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL E F I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	
	2	05	01	05	6	F	-	-	-	11	04	-	-	CHLOE - BORODIN 125 CORBIN CT LAKEWOOD NJ 08701
	2	06	01	05	11M	M	-	-	-	06	06	-	-	BRYCE - BORODIN 125 CORBIN CT LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was travelling South on Ridge Avenue going straight ahead. Vehicle #2 was travelling West on Lanes Mill Road and was making a left turn onto Ridge Avenue. As Vehicle #1 was crossing the intersection, Vehicle #2 made a left turn in front of Vehicle #1 causing the crash. Vehicle #1 sustained dents and scratches to the rear driver side quarter panel and rear driver tire. Vehicle #2 sustained scratches and cracks to the front driver side fender with front airbag deployment. Both vehicles towed by AAA.

Driver 1 stated he going straight on Ridge Avenue. As he was crossing the intersection, Vehicle #2 made a left turn in front of him causing the crash.

Driver 2 stated he was on Lanes Mill Road and was making a left turn onto Ridge. He believed there was enough gap to make a left turn.

My investigation finds Vehicle #2 to be at fault for failing to yield right of way.

146 Officer's Signature

MCAVOY M

147 Badge #

354

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-041990**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale

ROUTE 70 WEST



145 Crash Description/Narrative

DRIVER OF V1 STATED SHE WAS TRAVELLING WEST ON ROUTE 70 IN THE RIGHT LANE AND THAT THE SUN GOT INTO HER EYES AND V1 COLLIDED WITH V2.

DRIVER OF V2 STATED SHE WAS STOPPED IN TRAFFIC WHEN V1 COLLIDED WITH V2.

BASED ON THE DAMAGE TO BOTH VEHICLE AND DRIVER STATEMENTS I DETERMINED THAT DRIVER 1 WAS AT FAULT.

146 Officer's Signature

MCKEE M

147 Badge #

320

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

05	1 Case Number 22-042101		10 Crash Occurred On: E COUNTY LINE RD										11 Speed Limit 40		04		
97															118a		
01	2 Police Dept of LAKEWOOD TOWNSHIP		Code 01		3 Station/Precinct										118b		
98															119a		
01															119b		
99															120a		
05	4 Date of Crash mm dd yy 05/26/22		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 0759		7 Municipality Code 1514		8 Total Killed --		9 Total Injured 1		21 Latitude 40.101679		22 Longitude -74.171577		120b
100a																	121a
01	23 Veh # 1		24 Policy No. 952772437				25 NJ Ins. Code 413		53 Veh # 2		54 Policy No. 4240-19-20-98				55 NJ Ins. Code 148		121b
100b																	122
04																	123
101																	124
02	26 Driver's First Name ROSARIO		Initial -		Last Name VASQUEZRAFAEL		29 Sex F		56 Driver's First Name JACQUELIN		Initial F		Last Name SUAREZ-RUIZ		59 Sex F		125
102																	126a
01	27 Number & Street 267 NORTH ST		57 Number & Street 111 MIDSTREAMS RD												126b		
103															126c		
01	28 City MIDDLETOWN		State NY		Zip 10940		58 City BRICK		State NJ		Zip 08724				127a		
104															127b		
2															127c		
	30 Eyes 2		DL Class -		Restrictions -		Endorsements -		31 State NY		60 Eyes 2		DL Class D		Restrictions -		127d
105																	127e
07	32 Driver's License Number 127706220		33 DOB mm dd yyyy 09/02/1980		34 Expires mm yy 09 25		62 Driver's License Number S90093826659982		63 DOB mm dd yyyy 09/21/1998		64 Expires mm yy 09 23						128
	35 Owner's First Name ROSARIO		Initial -		Last Name VASQUEZRAFAEL		65 Owner's First Name MARTA		Initial L		Last Name RUIZ-HERNANDEZ						129
106																	130
-	36 Number & Street 267 NORTH ST		66 Number & Street 111 MIDSTREAMS ROAD												131		
107															132		
-	37 City MIDDLETOWN		State NY		Zip 10940		67 City BRICK		State NJ		Zip 08724						133
04																	134
109	38 Make JEEP		39 Model PAT		40 Color -		41 Year 2011		42 Plate No. KRC8800		43 State NY		68 Make TOYT		69 Model RAV		135
04													70 Color GRY		71 Year 2007		136
110	44 VIN 1J4NF1GB3BD101671		45 Expires 10 23				74 VIN JTMBD33V475066229		75 Expires 09 22								137
01	46 Vehicle Removed To		76 Vehicle Removed To												138		
112															139		
-	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded												140		
	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded												141		
113	47 Authority ☐ Owner ☒ Driver ☐ Police		77 Authority ☐ Owner ☒ Driver ☐ Police												142		
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.		143
115																	144
116	50 Carrier No. ☐ USDOT ☐ MC/MX		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☐ MC/MX		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		145
01																	146
117	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity												147		
04																	

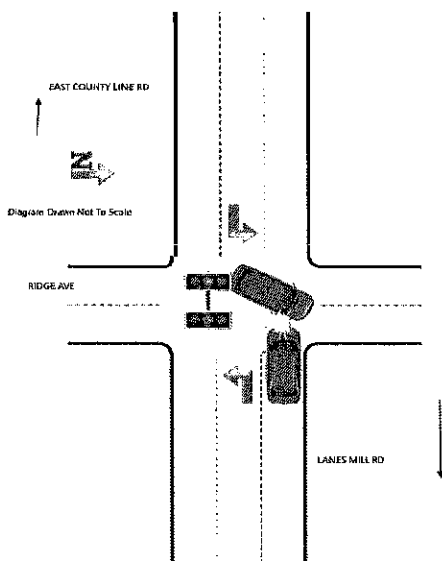
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-042101**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that she was stopped in traffic in the middle of the intersection of East County Line Road and Ridge Avenue and that the traffic light was turning yellow. She stated that she was stopped awaiting to make a left turn onto Ridge Avenue from East County Line Road and that other cars started to honk at her to go. She began to turn and collided with vehicle 2 who was traveling West on Lanes Mill Road crossing the intersection towards East County Line Road. Driver 1 stated that vehicle 2 was traveling fast.

Driver 2 stated that she was traveling West on Lanes Mill and crossing the intersection as the light turned yellow and was struck by vehicle 1 who made a left turn in front of her. Driver complained of head pain but declined medical attention. Collision was caused due to driver 1 not yielding right of way by turning left thus colliding with vehicle 2.

146 Officer's Signature

VEGA E

147 Badge #

311

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

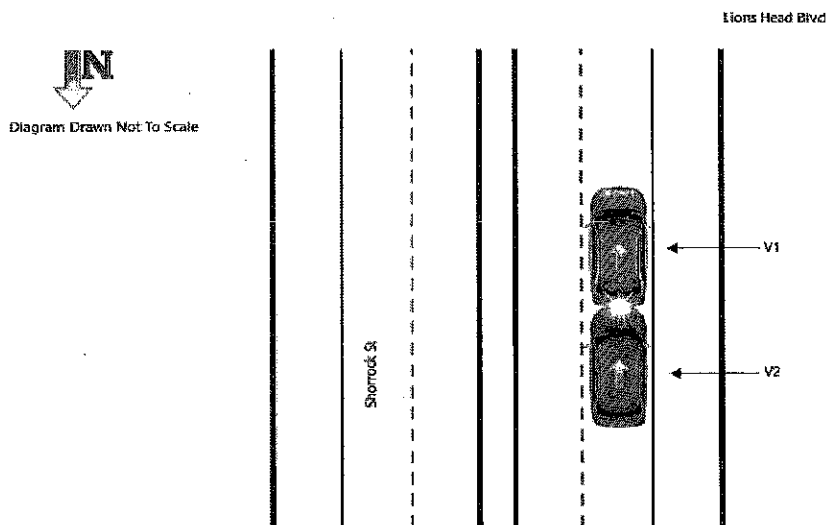
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-042182**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was traveling south on Shorrock St (right lane) and slowing down in traffic, when he was crashed into from behind by vehicle 2.

Driver of vehicle 2 stated she was traveling south on Shorrock St behind vehicle 1. Driver of vehicle 2 stated vehicle 1 stopped, but she was unable to do so, which resulted in her crashing into the rear of vehicle 1.

As a result of my investigation, I, Ptl. Livingston #373 determined the driver of vehicle 2 is at fault for this crash. Driver of vehicle 2 was following too closely to vehicle 1.

Driver of vehicle 1 had a complaint of pain in his back. He did refuse medical treatment at the scene of this crash.

146 Officer's Signature

LIVINGSTON M

147 Badge #

373

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

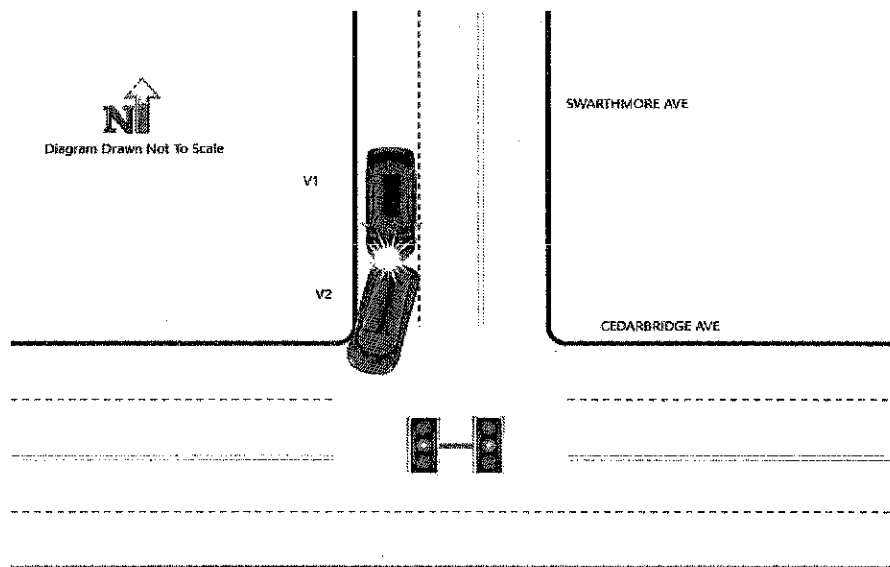
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-042208**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLES ONE AND TWO WERE TRAVELING SOUTH ON SWARTHMORE AVENUE NEARING THE INTERSECTION WITH CEDARBRIDGE AVENUE. DRIVER TWO STATED HE STOPPED HIS VEHICLE TWO AT THE RED TRAFFIC SIGNAL WHEN VEHICLE ONE STRUCK THE REAR OF HIS VEHICLE. DRIVER ONE STATED SHE WAS APPROACHING THE TRAFFIC SIGNAL FOR CEDARBRIDGE AVENUE LOOKING EAST AND SAW NO TRAFFIC WAS COMING. SHE STATED SHE BELIEVED VEHICLE TWO WAS GOING TO GO AND SHE CONTINUED TO GO STRAIGHT BEFORE STRIKING THE REAR OF VEHICLE TWO.

DUE TO MY INVESTIGATION I FOUND DRIVER ONE TO BE AT FAULT FOR FOLLOWING TOO CLOSELY. NO INJURIES WERE REPORTED AT THE SCENE. NO SUMMONS WERE ISSUED.

146 Officer's Signature

SOLOMON A

147 Badge #

380

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

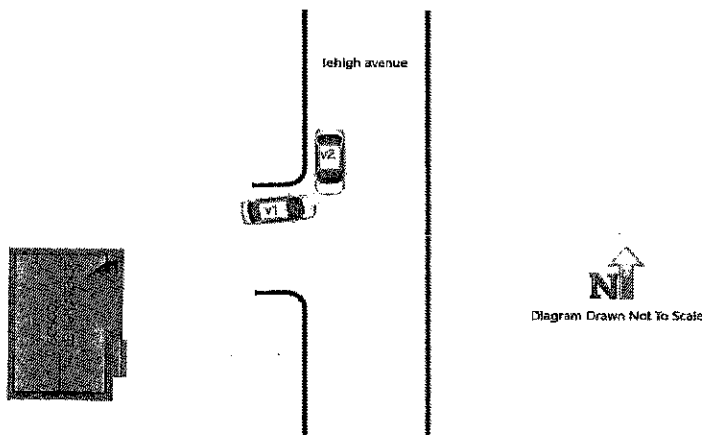
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-043469

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was exiting the school at 140 Lehigh Avenue to make a left when she didn't see vehicle 2 travelling south on Lehigh before entering the roadway when she struck vehicle 2 on the passenger side front quarter panel and bumper.

Driver of vehicle 2 stated she was travelling south on Lehigh Avenue when driver of vehicle 1 exited the school at 140 Lehigh avenue and entered the roadway striking the passenger side front bumper and quarter panel of her vehicle.

Based on statements from involved parties and my observations at the scene and damage to the vehicles, I have determined that vehicle 1 is at fault due to failure to yield right of way to vehicles and driver inattention.

Neither driver has received a summons and driver of vehicle 2 stated she has complaint of chest pain.

146 Officer's Signature

DELVALLE M

147 Badge #

293

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																																				
05	1 Case Number 22-043486										10 Crash Occurred On: E.KENNEDY BLVD										11 Speed Limit 30		0006		118a																																																																																																																														
01	2 Police Dept of LAKEWOOD TOWNSHIP #01										Code										12 Route No.		Suffix		13 Milepost 25	18 Speed Limit	04																																																																																																																												
01	3 Station/Precinct										☒ At Intersection With Road Name Dir										19 To		17 Cross Road Name		☐ NB ☐ EB		119a																																																																																																																												
05	4 Date of Crash mm dd yy 05/31/22 TUESDAY										5 Day Of Week										6 Time (use 2400 hrs) 1521		7 Municipality Code 1514		8 Total Killed		9 Total Injured		119b																																																																																																																										
01	23 Veh # 1										24 Policy No. 608221478 206 1										25 NJ Ins. Code 884		53 Veh # 2		54 Policy No. WFCAL0000000610-01		55 NJ Ins. Code 132		120a																																																																																																																										
04	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																120b																																																																																																																												
02	26 Driver's First Name ESTHER										Initial Last Name - SCHWINDER										29 Sex F		56 Driver's First Name NADIA		Initial Last Name I ODA		59 Sex F		121a																																																																																																																										
01	27 Number & Street 6 PRIME LN										57 Number & Street 100 MINNISINK DR																121b																																																																																																																												
01	28 City LAKEWOOD										State Zip NJ 08701										58 City MATAWAN		State Zip NJ 07747				01																																																																																																																												
2	30 Eyes 06										DL Class D										Restrictions										Endorsements										31 State NJ										60 Eyes 02										DL Class C										Restrictions										Endorsements										61 State NJ										122																																																		
03	32 Driver's License Number S15792390053856										33 DOB mm dd yyyy 03/28/1985										34 Expires mm yy 03 26										62 Driver's License Number O17845766957552										63 DOB mm dd yyyy 07/03/1955										64 Expires mm yy 07 25										123																																																																																										
06	35 Owner's First Name ESTHER										Initial Last Name - SCHWINDER										65 Owner's First Name Z & S TRANS										Initial Last Name -																				124																																																																																																				
07	36 Number & Street 6 PRIME LN										66 Number & Street 14 3B WINDING WOOD DR																																								03																																																																																																				
01	37 City LAKEWOOD										State Zip NJ 08701										67 City SAYREVILLE										State Zip NJ 08872																				03																																																																																																				
01	38 Make HOND										39 Model ODY										40 Color WHI										41 Year 2021										42 Plate No. U67NEJ										43 State NJ										68 Make TOYT										69 Model SIE										70 Color BLU										71 Year 2010										72 Plate No. S2X411										73 State NJ										26																														
01	44 VIN 5FNRL6H82MB032161										45 Expires 01 24										74 VIN 5TDKK4CC4AS312885										75 Expires 03 23																				126c																																																																																																				
01	46 Vehicle Removed To										76 Vehicle Removed To																																								126d																																																																																																				
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☐ Left At Scene ☐ Towed Impounded																														126e																																																																																																				
113	47 Authority ☒ Owner ☐ Driver ☐ Police										77 Authority ☐ Owner ☒ Driver ☐ Police																																								26																																																																																																				
114	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										49 Hazardous Material ☒ None ☐ On Board ☐ Spill										78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										79 Hazardous Material ☒ None ☐ On Board ☐ Spill																				26																																																																																																				
115	Type: ☐ Breath ☐ Blood ☐ Urine										Hazard Class										Placard No.										Type: ☐ Breath ☐ Blood ☐ Urine										Hazard Class										Placard No.										127c																																																																																										
116	Results: 0. - % ☐ Pending																				Results: 0. - % ☐ Pending																														127d																																																																																																				
02	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs																				127e																																																																																																				
03	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity																																								26																																																																																																				
	Number & Street										Number & Street																																								128																																																																																																				
	City										State Zip										City										State Zip																				129																																																																																																				
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																																																		09																																																																																																				
	Oper. 136 Charge										137 Summons. No.										Oper. 138 Charge										139 Summons. No.										132																																																																																																														
	Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										143 Summons. No.										03																																																																																																														
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A	1										01										01										05										37										F										-										-										-										11										04										-										-										ESTHER - SCHWINDER										-										
B	2										01										01										05										66										F										-										-										-										11										04										-										-										NADIA I ODA										-										
C	2										04										01										05										13										M										-										-										-										11										04										-										-										JOHN - WARD										-										
D	2										05										01										05										13										M										-										-										-										11										04										-										-										BRYAN - RAMOS										-										
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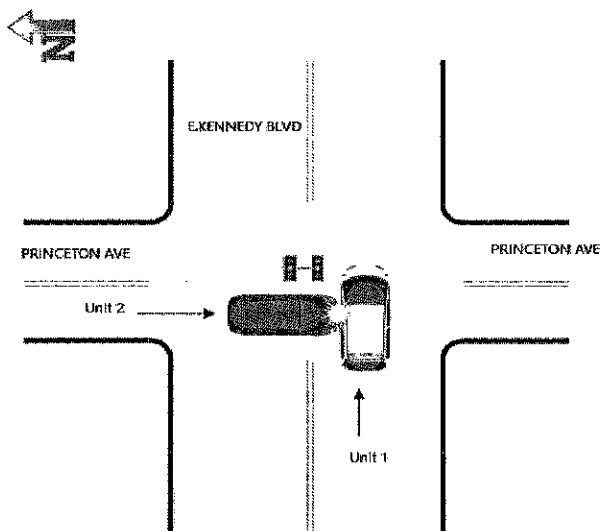
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **--** Case No: **22-043486**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT SHE WAS TRAVELING EAST ON E.KENNEDY BOULEVARD APPROACHING THE TRAFFIC LIGHT OF E.KENNEDY BOULEVARD/ PRINCETON AVENUE, WHEN VEHICLE #2 DROVE THROUGH THE RED LIGHT TRAVELING SOUTH ON PRINCETON AVENUE CAUSING BOTH VEHICLES TO COLLIDE. DRIVER #1 ALSO STATED THAT SHE HAD THE GREEN LIGHT WHEN ENTERING THE INTERSECTION. DRIVER #2 STATED THAT SHE WAS TRAVELING SOUTH ON PRINCETON AVENUE, WHEN VEHICLE #1 DROVE THROUGH THE RED LIGHT CAUSING A COLLISION BETWEEN VEHICLE #1 AND VEHICLE #2. DRIVER #2 ALSO STATED THAT SHE HAD THE GREEN LIGHT WHEN ENTERING THE INTERSECTION. NO INJURIES REPORTED.

BASED ON TWO CONFLICTED STORIES FROM BOTH DRIVERS AND NO WITNESSES, I MADE A DETERMINATION THAT BOTH DRIVERS WERE AT FAULT.

146 Officer's Signature

RIVERA F

147 Badge #

294

148 Reviewer

KCM

Badge #

335

149 Case Status

☐ Pending☒ Complete

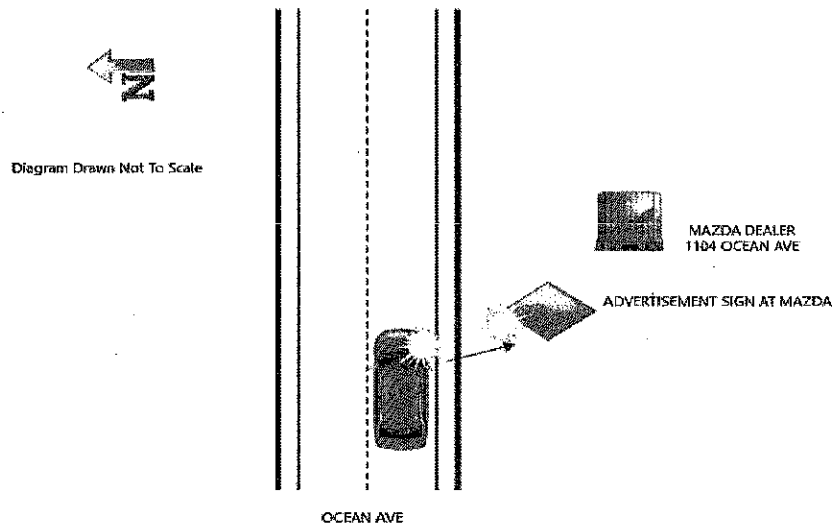
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-043506**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that he just left Midas Auto at 6689 Route 9 N Howell, NJ 07731 for a tire repair to the front right tire. Driver 1 stated that while traveling East on Ocean Avenue, the same tire that Midas repaired, fell off while driving and struck an advertisement sign at the Mazda Dealership at 1104 Ocean Avenue. Vehicle 1 also sustained damage when the tire fell off. Driver 1 has no fault in the crash as the lug nuts to the tire that fell off appeared to have not been properly secured which caused the tire to fall off and roll away. No injuries reported. Driver 1 was advised to contact Midas and advised of complaint procedures.

146 Officer's Signature

VEGA E

147 Badge #

311

148 Reviewer

KCM

Badge #

335

149 Case Status

☐ Pending☒ Complete

05	1 Case Number	22-043509										118a																								
97	2 Police Dept of	LAKEWOOD TOWNSHIP P01										25																								
01	3 Station/Precinct	-										118b																								
98	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		10 Crash Occurred On: E COUNTY LINE RD		11 Speed Limit		12 Route No.		13 Milepost		14 Speed Limit		118c												
01	05/31/22	TUESDAY		1728		1514		--		1		-		-		40		0526		-		-		25												
00a	23 Veh #	24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code		56 Driver's First Name		57 Number & Street		58 City		59 Sex		60 Eyes		61 State		119a												
04	1	-		-		2		1250902180		945		MARCOS		380 JOE PARKER RD APT E		LAKEWOOD		M		02		NJ		04												
01	26 Driver's First Name	Initial Last Name		29 Sex		56 Driver's First Name		Initial Last Name		59 Sex		57 Number & Street		58 City		59 Sex		60 Eyes		61 State		62 Driver's License Number		63 DOB		64 Expires		119b								
01	AVRAHAM	- LUBLIN		M		MARCOS		- PERALTALUNA		M		310 7TH ST		LAKEWOOD		NJ		02		NJ		321292484		11/13/1972		11 26		04								
01	30 Eyes	DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State		62 Driver's License Number		63 DOB		64 Expires		120a										
2	-	-		-		-		IS		02		D		-		-		NJ		P26465170006882		06/13/1988		06 25		01										
03	32 Driver's License Number	33 DOB		34 Expires		62 Driver's License Number		63 DOB		64 Expires		35 Owner's First Name		Initial Last Name		65 Owner's First Name		Initial Last Name		66 Number & Street		67 City		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		120b
03	321292484	11/13/1972		11 26		P26465170006882		06/13/1988		06 25		THE HERTZ CORPO		-		JUDAH		D STEIN		250 CAREY ST		LAKEWOOD		TOYT		SNA		GRY		2011		G29FMA		NJ		121a
06	35 Owner's First Name	Initial Last Name		65 Owner's First Name		Initial Last Name		36 Number & Street		66 Number & Street		37 City		State Zip		67 City		State Zip		38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		44 VIN		45 Expires		121b
01	PO BOX 24130	OK 73134		OK 73134		LAKEWOOD		NJ 08701		LAKEWOOD		NJ 08701		NISS		ROGUE		WHI		2019		62BLEX		FL		JN8AT2MV2KW392514		06 22		5TDZK3DCXBS105300		06 23		04		
02	46 Vehicle Removed To	47 Authority		48 Alcohol/Drug Test		49 Hazardous Material		78 Alcohol/Drug Test		79 Hazardous Material		50 Carrier No.		51 GVWR/GCWR		80 Carrier No.		81 GVWR/GCWR		52 Motor Carrier or Government Entity		53 Veh #		54 Policy No.		55 NJ Ins. Code		56 Driver's First Name		57 Number & Street		58 City		59 Sex		122
02	-	Owner		Given: No Yes Refused		None On Board Spill		Given: No Yes Refused		None On Board Spill		USDOT		Weight <= 10,000 lbs		USDOT		Weight <= 10,000 lbs		-		-		-		-		-		-		-		01		
01	-	Driver		Type: Breath Blood Urine		Hazard Class Placard No.		Type: Breath Blood Urine		Hazard Class Placard No.		MC/MX		Weight >= 26,001 lbs		MC/MX		Weight >= 26,001 lbs		Number & Street		City		State		Zip		135 Damage To Other Property		136 Charge		137 Summons. No.		123		
01	-	Police		Results: 0. - % Pending		Hazard Class Placard No.		Results: 0. - % Pending		Hazard Class Placard No.		-		-		-		-		-		-		-		-		-		-		-		03		
02	-	Owner		Results: 0. - % Pending		Hazard Class Placard No.		Results: 0. - % Pending		Hazard Class Placard No.		-		-		-		-		-		-		-		-		-		-		-		124		
01	-	Driver		Results: 0. - % Pending		Hazard Class Placard No.		Results: 0. - % Pending		Hazard Class Placard No.		-		-		-		-		-		-		-		-		-		-		-		04		
01	-	Police		Results: 0. - % Pending		Hazard Class Placard No.		Results: 0. - % Pending		Hazard Class Placard No.		-		-		-		-		-		-		-		-		-		-		-		125		
02	-	Owner		Results: 0. - % Pending		Hazard Class Placard No.		Results: 0. - % Pending		Hazard Class Placard No.		-		-		-		-		-		-		-		-		-		-		-		04		
01	-	Driver		Results: 0. - % Pending		Hazard Class Placard No.		Results: 0. - % Pending		Hazard Class Placard No.																										

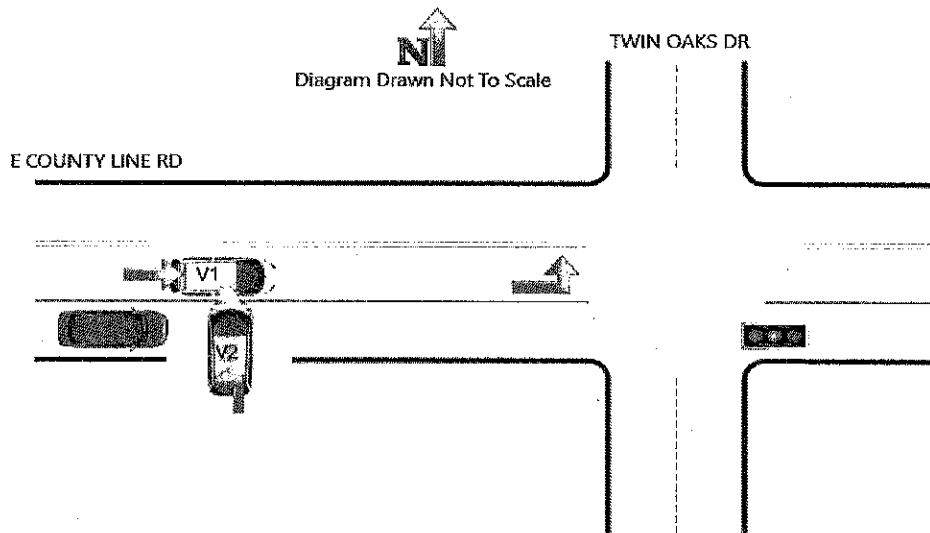
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-043509**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	01	01	01	05	49	M	-	-	-	11	04	-	-	AVRAHAM - LUBLIN 310 7TH ST LAKEWOOD NJ 08701 - -
	01	03	01	04	44	M	08	08	01	11	04	-	-	GADY - BETER UNKNOWN - - - -
	02	01	01	05	33	M	-	-	-	11	04	-	-	MARCOS - PERALTALUNA 380 JOE PARKER RD APT LAKEWOOD NJ 08701 - -

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

**** Boxes 24 and 25 left blank due to a policy number or company code not being present on rental car paperwork. Florida Automobile Liability Identification Card. Financial Responsibility Self-Insured Holder. Certificate No. 4644. Effective 9/15/2021. The Hertz Corporation, Hertz Vehicles LLC. ****

Driver 1 stated he was traveling east on E County Line Road prior to the crash. He stated that as he approached the intersection of Twin Oaks Drive, vehicle 2 suddenly made a left turn in front of him from a driveway on the south side of E County Line Rd. He stated that there was a vehicle that had stopped in the roadway which was blocking vehicle 2 behind it. Driver 1 stated that vehicle 2 entered his lane of travel and struck the passenger side of his vehicle as he was driving straight. Driver 1 was not injured. Damage to vehicle 1 was moderate but functional.

Driver 2 stated he was stopped in the driveway of 812 E Cty Line Rd after making a delivery and was attempting to make a left turn from this driveway on to E Cty line Road. He stated that a vehicle that was in the most southern lane of travel had come to a stop to allow him to enter the roadway and turn so he began accelerating. He added that he could not see vehicle 1 coming in the 'left turn only' lane and struck the side of vehicle 1 as he began encroaching into the lane of travel. Driver 2 was not injured. Damage to vehicle 2 was minor.

As a result of my investigation, driver 2 was found at fault for failing to yield to a vehicle. End.

146 Officer's Signature
BURKHARDT J

147 Badge #
384

148 Reviewer
CM

Badge #
332

149 Case Status
☐ Pending ☒ Complete

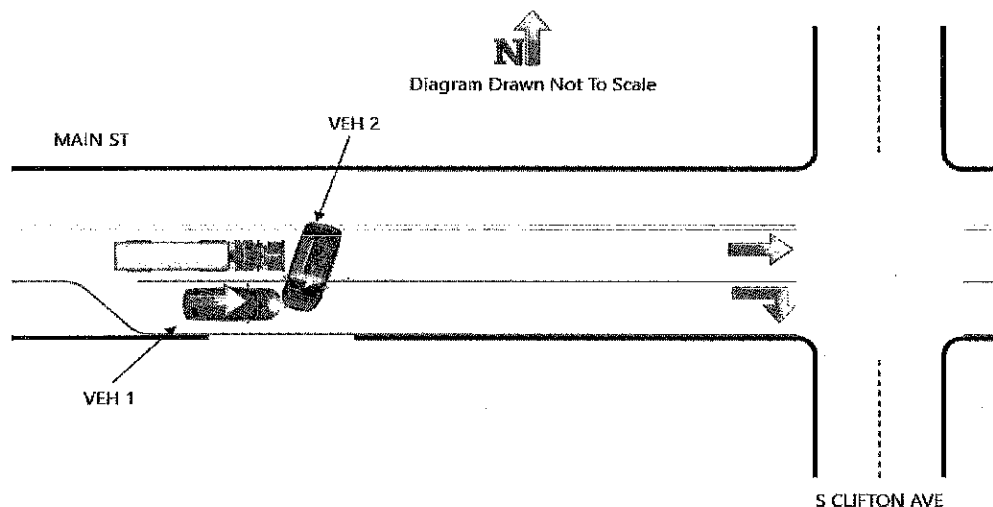
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-043527**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated she was traveling east on Main Street prior to the crash. She explained that she had just entered the 'right turn only' lane on the south side of the roadway and was continuing to the traffic light when vehicle 2 suddenly made a left turn in front of her from behind a tractor trailer that was stopped in traffic facing east in the left lane of east bound travel. She explained that she did not have ample time to stop and ultimately crashed into the front right of vehicle 2. Driver 1 was not injured. Damage to vehicle 1 was minor.

Driver 2 stated he was stopped in traffic facing west on Main Street just west of the intersection of South Clifton Ave and was waiting to make a left turn into a parking lot of the south side of Main Street. He explained that there was a tractor trailer stopped in traffic facing east in the center of the roadway and he was unable to see if there was any other vehicles attempting to go around the trailer. He stated that he began accelerating due to not seeing any oncoming vehicles but was struck by vehicle 1, which was traveling east in the 'right turn only' lane. Driver 2 was not injured. Damage to vehicle 2 was minor.

As a result of my investigation, driver 2 was found at fault for failing to yield to a vehicle. End.

146 Officer's Signature

BURKHARDT J

147 Badge #

384

148 Reviewer

CM

Badge #

332

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 3		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																													
05	1 Case Number 22-038836										10 Crash Occurred On: MASSACHUSETTS AVE										11 Speed Limit 35		118a		17																																																																																																																							
01	2 Police Dept of LAKEWOOD TOWNSHIP R01										Code										12 Route No.		Suffix		13 Milepost		118b		29																																																																																																																			
07	3 Station/Precinct -										100										14		15		16		119a		-																																																																																																																			
07	4 Date of Crash 05/15/22										5 Day Of Week SUNDAY										6 Time (use 2400 hrs) 0147										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										21 Latitude 40.069640										22 Longitude -74.227802										119b		-																																																													
100a	23 Veh # 1										24 Policy No. -										25 NJ Ins. Code -										53 Veh # 2										54 Policy No. -										55 NJ Ins. Code -										120a		02																																																																																	
01	☐ Parked										☐ Ped										☐ Pedalcyclist										☐ Resp To Emergency										☐ Hit & Run										☒ Parked										☐ Ped										☐ Pedalcyclist										☐ Resp To Emergency										☐ Hit & Run										120b		-																																									
02	26 Driver's First Name FRANCISCO										Initial -										Last Name ROSALES										29 Sex M										56 Driver's First Name -										Initial -										Last Name -										59 Sex -										121a		-																																																													
02	27 Number & Street 1052 CENTRAL AVE										State NJ										Zip 08701										57 Number & Street -										State -										Zip -										121b		-																																																																																	
04	28 City LAKEWOOD										State NJ										Zip 08701										58 City -										State -										Zip -										122		01																																																																																	
2	30 Eyes BR										DL Class -										Restrictions -										Endorsements -										31 State -										60 Eyes -										DL Class -										Restrictions -										Endorsements -										61 State -										123		10																																									
105	32 Driver's License Number -										33 DOB 09/10/1992										34 Expires -										62 Driver's License Number -										63 DOB -										64 Expires -										124		04																																																																																	
01	35 Owner's First Name EDDIEL										Initial -										Last Name LIANOS-CRUZ										65 Owner's First Name RENE										Initial -										Last Name ALVARADO										125		04																																																																																	
106	36 Number & Street 215 CENTER ST										State NJ										Zip 08701										66 Number & Street 110 E HARVARD ST										State NJ										Zip 08701										126a		28																																																																																	
04	37 City LAKEWOOD										State NJ										Zip 08701										67 City LAKEWOOD										State NJ										Zip 08701										126b		-																																																																																	
05	38 Make NISS										39 Model MUR										40 Color BLK										41 Year 2004										42 Plate No. P95LFB										43 State NJ										68 Make TOYT										69 Model TUN										70 Color GRY										71 Year 2010										72 Plate No. L54GRT										73 State NJ										126c		-																					
110	44 VIN JN8AZ08W14W334242										45 Expires 04 20										74 VIN 5TFUM5F10AX012239										75 Expires 05 22										126d		-																																																																																																					
01	46 Vehicle Removed To BARINA'S AUTOMOTIVE										☐ Driven										☐ Towed Disabled										☐ Towed Disabled & Impounded										☐ Driven										☐ Towed Disabled										☐ Towed Disabled & Impounded										126e		28																																																																							
112	☐ Left At Scene										☒ Towed Impounded										☐ Left At Scene										☐ Towed Impounded										☐ Owner										☐ Driver										☒ Police										127a		26																																																																							
113	47 Authority -										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.										77 Authority -										78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. % ☐ Pending										79 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.										127b		-																																																																																	
114	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-25,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127c		26																																																																																																					
01	52 Motor Carrier or Government Entity -										82 Motor Carrier or Government Entity -										Number & Street -										City -										State -										Zip -										127d		-																																																																																	
117	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No										136 Charge 1 39:4-50										137 Summons. No. 289260										138 Charge 1 39:3-10										139 Summons. No. 293891										127e		28																																																																																											
01	140 Charge 1 39:4-50.2										141 Summons. No. 293892										142 Charge 1 39:3-29										143 Summons. No. 293894										128		01																																																																																																					
01	83										84										85										86										87										88										89										90										91										92										93										94										95										Names & Addresses of Occupants - If Deceased, Date & Time of Death										129		07	
A	1 01 01 05 29 M - - - 11 04 - -										FRANCISCO - ROSALES										1052 CENTRAL AVE LAKEWOOD NJ 08701 -										130		01																																																																																																															
B	1 03 01 05 29 M - - - 11 04 - -										JOSE A FUENTEZ										244 2ND ST; APT 3 LAKEWOOD NJ 08701 -										131		07																																																																																																															
C																																																																																																																									132		04																					
D																																																																																																																																			133		02											

96	PAGE 2 OF 3		☐ Fatal		New Jersey Police Crash Investigation Report		☒ Reportable		☐ Non-Reportable		☐ Change Report		
05	1 Case Number 22-038836				10 Crash Occurred On: MASSACHUSETTS AVE				11 Speed Limit 35				118a
01	2 Police Dept of LAKEWOOD TOWNSHIP F01				12 Route No. Suffix 13 Milepost 35				18 Speed Limit 35				118b
07	3 Station/Precinct 100				14 15 16				17 Cross Road Name PROSPECT ST.				119a
07	4 Date of Crash mm dd yy 05/15/22				5 Day Of Week SUNDAY				6 Time (use 2400 hrs) 0147				119b
01	7 Municipality Code 1514				8 Total Killed --				9 Total Injured --				120a
100b	23 Veh #				24 Policy No.				25 NJ Ins. Code				120b
05	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run				☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run								
02	26 Driver's First Name Initial Last Name				29 Sex				56 Driver's First Name Initial Last Name				121a
02	27 Number & Street				57 Number & Street								121b
04	28 City State Zip				58 City State Zip								
2	30 Eyes DL Class Restrictions Endorsements 31 State				60 Eyes DL Class Restrictions Endorsements 61 State								122
105	32 Driver's License Number				33 DOB mm dd yyyy				34 Expires mm yy				123
01	35 Owner's First Name Initial Last Name				65 Owner's First Name Initial Last Name								
106	☐ Same As Driver				☐ Same As Driver								124
107	36 Number & Street				66 Number & Street								125
108	37 City State Zip				67 City State Zip								126a
109	38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State				68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State								126b
110	44 VIN 45 Expires				74 VIN 75 Expires								126c
111	46 Vehicle Removed To				76 Vehicle Removed To								126d
112	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded								126e
113	47 Authority ☐ Owner ☐ Driver ☐ Police				77 Authority ☐ Owner ☐ Driver ☐ Police								127a
114	48 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused				49 Hazardous Material ☐ None ☐ On Board ☐ Spill				78 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused				127b
115	Type: ☐ Breath ☐ Blood ☐ Urine				Results: 0. % ☐ Pending				Type: ☐ Breath ☐ Blood ☐ Urine				127c
116	Results: 0. % ☐ Pending				Hazard Class Placard No.				Results: 0. % ☐ Pending				127d
117	50 Carrier No. ☐ USDOT ☐ MC/MX				51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				80 Carrier No. ☐ USDOT ☐ MC/MX				127e
	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity								128
	Number & Street				Number & Street								28
	City State Zip				City State Zip								129
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No												131
	136 Charge 137 Summons. No.				138 Charge 139 Summons. No.								132
	1 39:3-4 293893				1 39:4-97.3 293895								133
	140 Charge 141 Summons. No.				142 Charge 143 Summons. No.								134
	1 39:6B-2 293897												
	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													

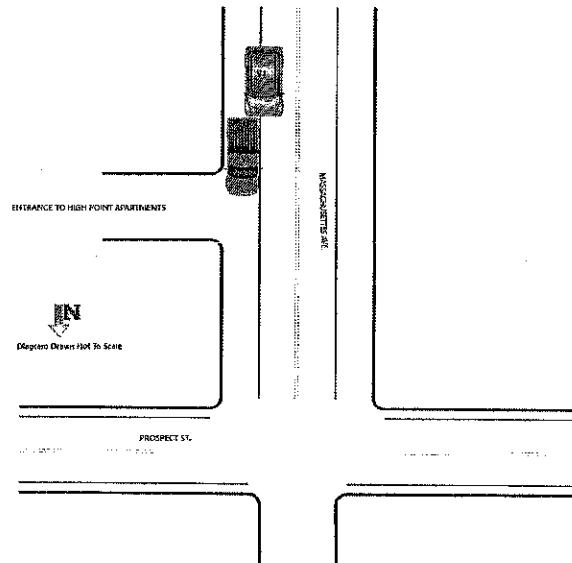
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-038836**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling North on Massachusetts Ave. towards Prospect St. Vehicle 2 was parked on the shoulder at the driveway entrance to the High Point Apartments Complex. Vehicle 1 rear ended Vehicle 2.

The driver of Vehicle 1 stated that at first he was not the driver and that the driver left the scene. He eventually admitted to driving after his wallet was located on the driver seat. He continued to state that the reason he crashed was because he was looking at his cell phone.

Further investigation concluded that the Driver of Vehicle 1 was under the influence of an alcoholic beverage. Standard Field Sobriety tests were performed and he was placed under arrest for 39:4-50 (DUI) Vehicle 1 was towed as per Johns Law. Vehicle 2 was left at the scene. Contact for the owner of Vehicle 2 was attempted but was never successfully made.

146 Officer's Signature

DEBARTOLOMEIS D

147 Badge #

406

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending ☒ Complete

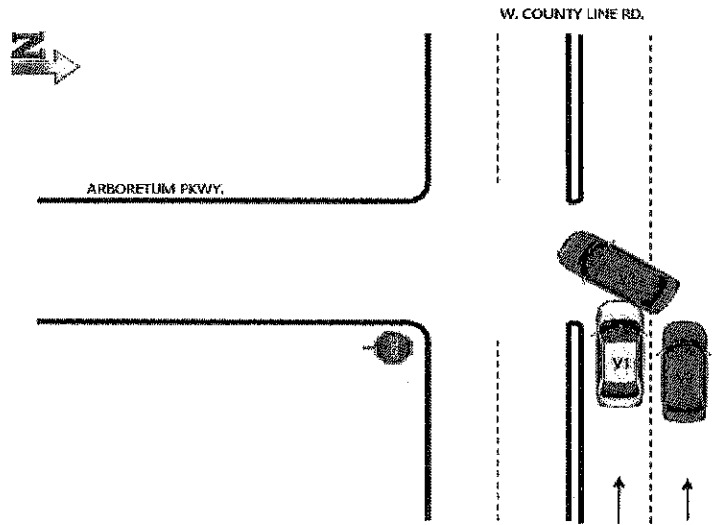
**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-041980**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED SHE WAS IN THE LEFT LANE ON W. COUNTY LINE ROAD TRAVELING WEST WHEN VEHICLE 2 WHICH WAS TRAVELING IN THE SAME DIRECTION, MADE A UNSAFE LEFT TURN FROM THE RIGHT LANE AND STRUCK VEHICLE 1.

DRIVER OF VEHICLE 2 STATED "I THOUGHT I WAS GONNA TO MISS THE STREET SO I MADE A LEFT INTO THE LEFT LANE."

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

146 Officer's Signature

SEUNATH K

147 Badge #

284

148 Reviewer

CM

Badge #

332

149 Case Status

☐ Pending ☒ Complete

**FLXIBLE TRANSIT
&
NOVA 06**

1	SHOSHANA	NOSHOFFER
2	MORDECHAI	GOODMAN
3	MEIR	GOODMAN
4	GITTY	FISHER
5	MAZEL	PAPALOW
6		
7		
8		
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10		
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			DOOR		
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11	12		33	34	
13	14		35	36	
15	16		37	38	
17	18		39	40	
19	20		41	42	
21	22		43	44	
45	46	47	48	49	

					DOOR		
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2					22		
3					23		
4					24		
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11	12				32		33
13	14				DOOR		
15	16				34		
17	18				35		
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39	40	41	42	43			

		DOOR	
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6		42	
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18		49	50
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34			60
35	36	61	62
63	64	65	66

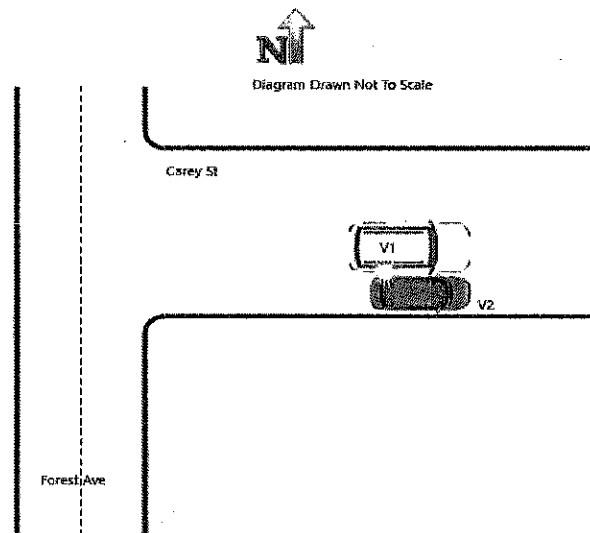
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-042977**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 was traveling Eastbound on Carey St and crashed into vehicle 2 which was parked on Carey St.

Driver 1 stated she was traveling Eastbound on Carey St when she moved over to the right due to a vehicle approaching in the opposite direction. As she moved over to the right, she crashed into vehicle 2 which was legally parked on Carey St. It should be noted that there are multiple cars parked on both sides of the street and the street is very narrow.

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

146 Officer's Signature
GARRETSON C

147 Badge #
391

148 Reviewer
MY

Badge #
329

149 Case Status
☐ Pending ☒ Complete

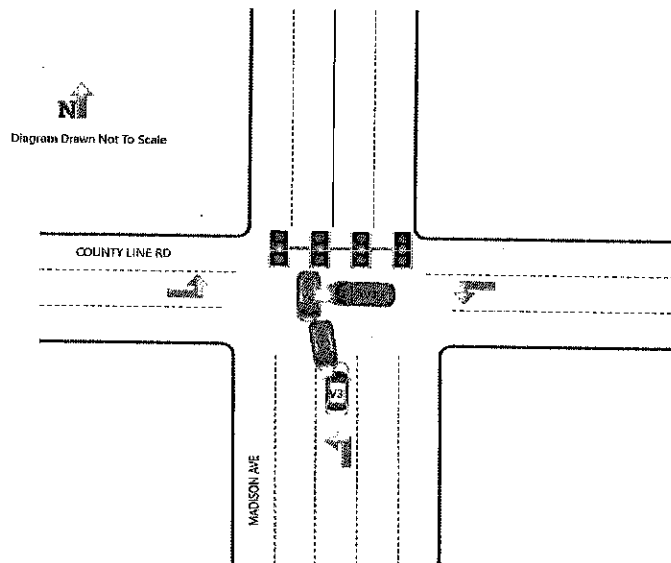
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-043265**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V3 stated she was waiting for a green left turn arrow to make a left while facing north bound on Madison Ave when she was then struck at the 11 o'clock by V2 who was struck by V1.

Driver of V2 stated she was traveling south on Madison Ave and had a green light to proceed through while crossing the intersection of Madison Ave and County Line Road. Driver of V2 then advised that she was struck by V1 at the 9 o'clock which resulted in her being pushed into V3.

Driver of V1 stated she was attempting to make a left turn onto Madison Ave from County Line Road she stated she idled in the intersection until it was safe to make left turn. During this time Driver of V1 stated the light had turned red and when she attempted to make a left turn which resulted in her striking V2. at the 9 o'clock.

The result of the investigation revealed Driver of V1 was at fault due to traveling through a red light which resulted in her striking V2 which then was pushed into V3. All parties reported no injuries at this time.

146 Officer's Signature

RIHACEK, A

147 Badge #

421

148 Reviewer

CM

Badge #

332

149 Case Status

☐ Pending☒ Complete

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTIONPolice Agency **LAKEWOOD TOWNSHIP POLICE DEPT.**Station - Case No. **22-043408**

1. **RACHELLIE** **WEISS**
2. **RIKKI** **BENNETT**
3. **MINDY** **PEVLSTEIN**
4. **SHAINDY** **BENNETT**
5. **CHAYA** **NUSSBAUM**
6. **ROCHEL** **BRAFMAN**
7. **CHAYA** **PERISTEIN**
8. **ETTY** **WILBELM**
9. **NECHAMA** **DACHOWITZ**
10. **LEAH** **ORATZ**
11. _____
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54. _____

SCHOOL BUS
(full size)

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

MINIBUS

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

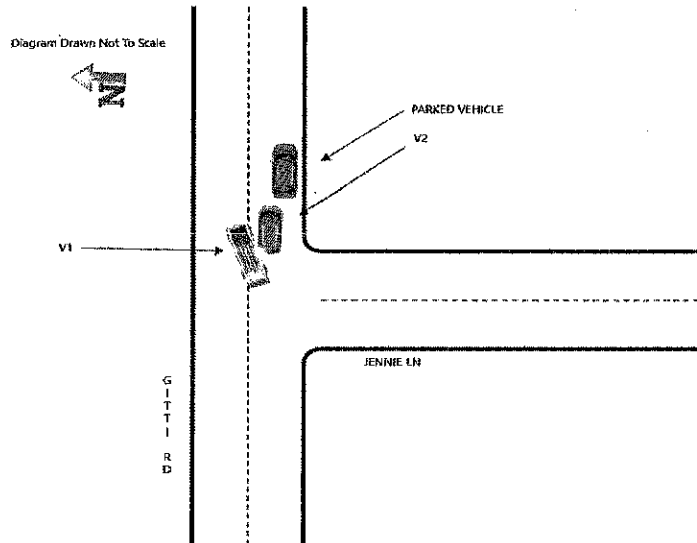
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-043408**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 said he was making a left turn onto Jennie Ln. from Gitti Rd. As he was making the turn his bus struck the rear of V2.

Driver of V2 said she was traveling East on Gitti Rd, when her vehicle was struck by V1 (which was making a left turn).

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

Insurance Info for V1: **CENTRAL INSURERS GROUP**
1360 NORTH ATHERTON STREET
STATE COLLEGE PA 16803

Policy #: **BA 2997BD**

Company # **23787**

146 Officer's Signature

CARABALLO A

147 Badge #

298

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2	Fatal	New Jersey Police Crash Investigation Report										Reportable	Non-Reportable	Change Report														
05	1 Case Number	22-043410										11	Speed Limit	35	118a	04													
97	2 Police Dept of	LAKEWOOD TOWNSHIP F01										10	Crash Occurred On:	CLIFTON AVENUE			118b	-											
01	3 Station/Precinct	1000										12	Route No.	MAIN ST			119a	25											
98	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		16		119b	-												
07	05/31/22	TUESDAY		0852		1514		2		40.090059		-74.214225		25		119b	-												
100a	23 Veh #	24 Policy No.										25	NJ Ins. Code	53 Veh #			54	Policy No.	55	NJ Ins. Code	01								
04	1	4478011564										148		2			8497846	096		01									
101	26 Driver's First Name	Initial Last Name										29	Sex	56 Driver's First Name			Initial Last Name			59	Sex	121a	01						
02	CHAIM	M LEVINGER										-	M	EDITH			Y PEREZ			-	F	121b	-						
102	27 Number & Street	1035 E 12TH ST										28 City			223 LOIS LN APT A			State Zip			NJ 08701			122	03				
01	BROOKLYN	NY 11230										LAKEWOOD			NJ 08701			123			01								
104	30 Eyes	DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State		122		03							
2	02	-		-		-		NY		02		D		-		-		NJ		123		01							
105	32 Driver's License Number	33 DOB										34 Expires		62 Driver's License Number		63 DOB		64 Expires		124		04							
03	943418782	04/30/1970										04 27		P26781898858552		08/24/1955		08 24		125		04							
106	35 Owner's First Name	Initial Last Name										65 Owner's First Name		Initial Last Name		126a		26											
-	HADASSAH	T BROWN-LEVINGER										EDITH		Y PEREZ		126b		-											
107	36 Number & Street	115 S LAKE DR										223 LOIS LN APT A		126c		-													
108	37 City	State Zip										67 City		State Zip		126d		-											
01	LAKEWOOD	NJ 08701										LAKEWOOD		NJ 08701		126e		26											
109	38 Make	39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		127a	26				
01	TOYT	COR		3		2006		X91NWX		NJ		TOYT		COR		SIL		2000		B34JUP		NJ		127b	26				
110	44 VIN	45 Expires										74 VIN		75 Expires		127c		-											
01	2T1BR30E96C562134	06 22										2T1BR12E4YC358796		03 23		127d		-											
111	46 Vehicle Removed To	76 Vehicle Removed To										YITZY'S TOWING		127e		-													
01	-	77 Authority										78 Alcohol/Drug Test		79 Hazardous Material		127f		-											
112	02	78 Alcohol/Drug Test										79 Hazardous Material		127g		-													
113	47 Authority	78 Alcohol/Drug Test										79 Hazardous Material		127h		-													
114	48 Alcohol/Drug Test	78 Alcohol/Drug Test										79 Hazardous Material		127i		-													
115	49 Hazardous Material	78 Alcohol/Drug Test										79 Hazardous Material		127j		-													
116	50 Carrier No.	51 GVWR/GCWR										80 Carrier No.		81 GVWR/GCWR		127k		-											
01	USDOT	Weight <= 10,000 lbs										USDOT		Weight <= 10,000 lbs		127l		-											
117	MC/MX	Weight 10,001-26,000 lbs										MC/MX		Weight 10,001-26,000 lbs		127m		-											
03	-	Weight >= 26,001 lbs										-		Weight >= 26,001 lbs		127n		-											
118	52 Motor Carrier or Government Entity	82 Motor Carrier or Government Entity										-		127o		-													
119	Number & Street	Number & Street										-		127p		-													
120	City	State Zip										City		State Zip		127q		-											
121	135 Damage To Other Property	Yes (If Yes, describe) No										-		127r		-													
122	Oper.	136 Charge										137 Summons. No.		Oper.		138 Charge										139 Summons. No.		127s	-
123	0.0.0.0	-										-		0.0.0.0		-										-		127t	-
124	Oper.	140 Charge										141 Summons. No.		Oper.		142 Charge										143 Summons. No.		127u	-
125	0.0.0.0	-										-		0.0.0.0		-										-		127v	-
126	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										127w	-				
127	V1	01	01	05	52	M	-	-	-	11	04	02	-	CHAIM M LEVINGER 1035 E 12TH ST BROOKLYN NY 11230										127x	-				
128	V2	01	01	04	66	F	11	08	01	11	04	-	-	EDITH Y PEREZ 223 LOIS LN APT A LAKEWOOD NJ 08701										127y	-				
129	V2	03	01	04	41	F	01	08	02	11	04	99	6502	JET - GONZALES PAREDES 240 9TH ST; APT. B LAKEWOOD NJ 08701										127z	-				
130																								127aa	-				

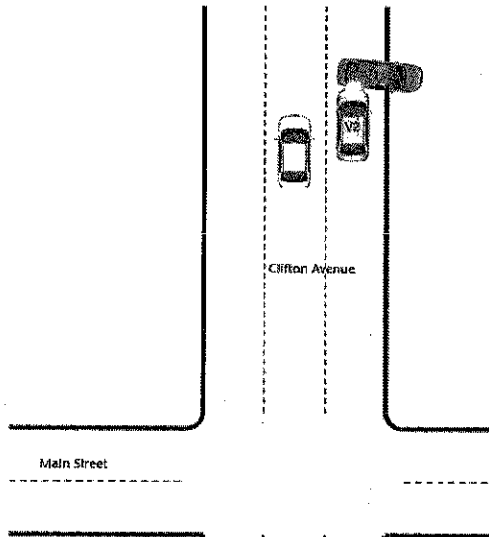
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-043410**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling Northbound on Clifton Avenue. Driver 1 said he was waiting to make a left turn into a parking lot. He observed that the car on the left lane stopped and signaled him to turn. Driver 1 explained that V2 was speeding in the right lane as he made the left turn and collided with his car.

Vehicle 2 was traveling Southbound on Clifton Avenue. Driver 2 said that she was traveling southbound when V1 made a quick left turn, and she was unable to stop and collide with V1. The passenger was transported to Kim

Investigation revealed Vehicle 1 was traveling Northbound on Clifton Avenue, and Vehicle 2 was traveling Southbound on Clifton Avenue. V1 failed to yield the right of way to V2, causing the collision.

146 Officer's Signature

CUZCO-BENITES W

147 Badge #

407

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending
 ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		22-043418		10 Crash Occurred On: HOPE CHAPEL ROAD		11 Speed Limit 45
01	2 Police Dept of		LAKEWOOD TOWNSHIP F01		12 Route No. 0639		13 Milepost 25
01	3 Station/Precinct		100		14 15 16		18 Speed Limit
05	4 Date of Crash		05/31/22		5 Day Of Week TUESDAY		6 Time (use 2400 hrs) 0931
01	7 Municipality Code		1514		8 Total Killed		9 Total Injured 1
00a	23 Veh #		24 Policy No. 5129J000591		25 NJ Ins. Code 917		53 Veh # 2
04	26 Driver's First Name		SARAH		27 Number & Street		56 Driver's First Name
01	28 City		JACKSON		29 Sex F		57 Number & Street
01	30 Eyes		4		31 State NJ		58 City
01	32 Driver's License Number		J93366910060954		33 DOB 10/08/1995		59 Sex M
01	34 Expires		10 25		35 Owner's First Name		60 Eyes
01	36 Number & Street		42 GEORGIAN BLVD		37 City		61 State NJ
01	38 Make		TOYT		39 Model COR		62 Driver's License Number
01	39 Model		COR		40 Color 4		63 DOB
01	40 Color		4		41 Year 2016		64 Expires
01	41 Year		2016		42 Plate No. N77MHK		65 Owner's First Name
01	42 Plate No.		N77MHK		43 State NJ		66 Number & Street
01	43 State		NJ		44 VIN		67 City
01	44 VIN		2T1BURHE2GC631110		45 Expires 03 23		68 Make
01	46 Vehicle Removed To		47 Authority		48 Alcohol/Drug Test		69 Model
01	47 Authority		Owner Driver Police		49 Hazardous Material		70 Color
01	48 Alcohol/Drug Test		Given: No Yes Refused		50 Carrier No.		71 Year
01	49 Hazardous Material		Type: Breath Blood Urine		51 GVWR/GCWR		72 Plate No.
01	50 Carrier No.		Results: 0 % Pending		52 Motor Carrier or Government Entity		73 State
01	51 GVWR/GCWR		Hazard Class Placard No.		53 Motor Carrier or Government Entity		74 VIN
01	52 Motor Carrier or Government Entity		Weight <= 10,000 lbs		54 Motor Carrier or Government Entity		75 Expires
01	53 Motor Carrier or Government Entity		Weight 10,001-26,000 lbs		55 Motor Carrier or Government Entity		76 Vehicle Removed To
01	54 Motor Carrier or Government Entity		Weight >= 26,001 lbs		56 Motor Carrier or Government Entity		77 Authority
01	55 Motor Carrier or Government Entity		Number & Street		57 Motor Carrier or Government Entity		78 Alcohol/Drug Test
01	56 Motor Carrier or Government Entity		City		58 Motor Carrier or Government Entity		79 Hazardous Material
01	57 Motor Carrier or Government Entity		State		59 Motor Carrier or Government Entity		80 Carrier No.
01	58 Motor Carrier or Government Entity		Zip		60 Motor Carrier or Government Entity		81 GVWR/GCWR
01	59 Motor Carrier or Government Entity		135 Damage To Other Property		61 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity
01	60 Motor Carrier or Government Entity		Yes (If Yes, describe) No		62 Motor Carrier or Government Entity		83 GVWR/GCWR
01	61 Motor Carrier or Government Entity		Oper. 136 Charge		63 Motor Carrier or Government Entity		84 GVWR/GCWR
01	62 Motor Carrier or Government Entity		Oper. 140 Charge		64 Motor Carrier or Government Entity		85 GVWR/GCWR
01	63 Motor Carrier or Government Entity		137 Summons. No.		65 Motor Carrier or Government Entity		86 GVWR/GCWR
01	64 Motor Carrier or Government Entity		141 Summons. No.		66 Motor Carrier or Government Entity		87 GVWR/GCWR
01	65 Motor Carrier or Government Entity		Oper. 138 Charge		67 Motor Carrier or Government Entity		88 GVWR/GCWR
01	66 Motor Carrier or Government Entity		Oper. 142 Charge		68 Motor Carrier or Government Entity		89 GVWR/GCWR
01	67 Motor Carrier or Government Entity		139 Summons. No.		69 Motor Carrier or Government Entity		90 GVWR/GCWR
01	68 Motor Carrier or Government Entity		143 Summons. No.		70 Motor Carrier or Government Entity		91 GVWR/GCWR
01	69 Motor Carrier or Government Entity		Names & Addresses of Occupants - If Deceased, Date & Time of Death		71 Motor Carrier or Government Entity		92 GVWR/GCWR
01	70 Motor Carrier or Government Entity		SARAH - JURAVEL		72 Motor Carrier or Government Entity		93 GVWR/GCWR
01	71 Motor Carrier or Government Entity		42 GEORGIAN BLVD JACKSON NJ 08527		73 Motor Carrier or Government Entity		94 GVWR/GCWR
01	72 Motor Carrier or Government Entity		ARYEH L SOROTZKIN		74 Motor Carrier or Government Entity		95 GVWR/GCWR
01	73 Motor Carrier or Government Entity		108 SOUTHFIELD DR LAKEWOOD NJ 08701		75 Motor Carrier or Government Entity		
01	74 Motor Carrier or Government Entity				76 Motor Carrier or Government Entity		
01	75 Motor Carrier or Government Entity				77 Motor Carrier or Government Entity		
01	76 Motor Carrier or Government Entity				78 Motor Carrier or Government Entity		

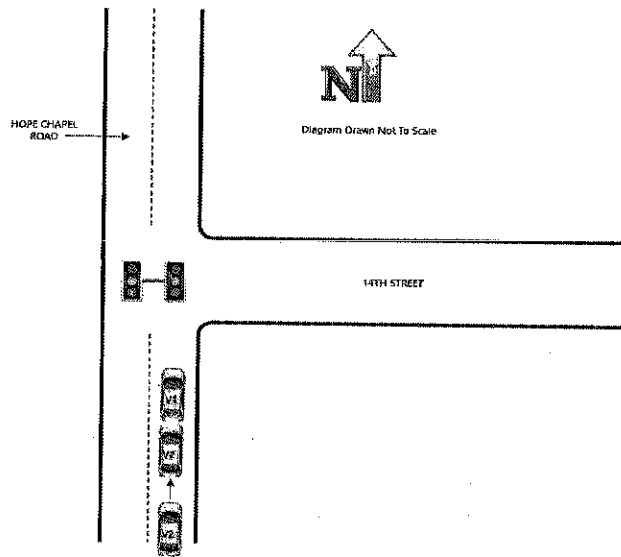
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-043418**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated she was stopped in traffic facing North on Hope Chapel Road just before 14th street when vehicle #2 collided with the rear of her vehicle. Vehicle #1 sustained moderate damage to the center rear and was able to be driven from the scene. Upon arrival on scene, I asked driver #1 if she was injured and she said no. When I was clearing this collision, driver #1 now stated she had pain in her left knee and her nose. She was asked if she wanted an ambulance and she said no.

Driver #2 stated he was traveling North on Hope Chapel Road and became distracted and he collided with vehicle #1, which was stopped in traffic directly in front of him. Vehicle #2 sustained moderate damage to the center front, but was able to be driven from the scene. Driver #2 stated he was not injured.

Based on statements made by both drivers, damage to the vehicles and my observations, I determined that driver #2 is at fault due to driver inattention/following too closely.

No summons issued.

146 Officer's Signature

CAVALLO M

147 Badge #

337

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

Form with multiple sections for accident details, vehicle information, driver details, and witness information. Includes checkboxes for report status and various fields for names, addresses, and dates.

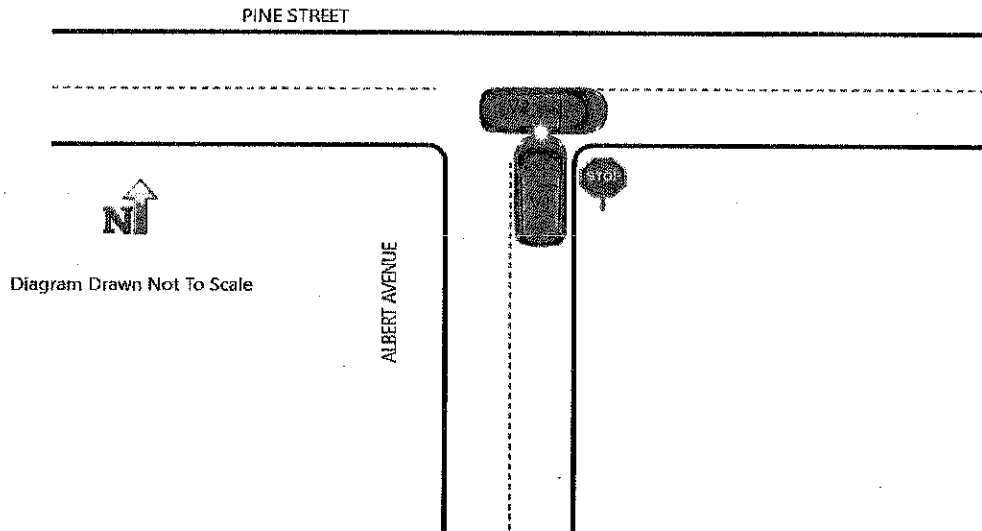
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-043429**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D1 STATED SHE WAS STOP AT THE STOP SIGN ON ALBERT AVENUE AT THE INTERSECTION OF PINE STREET ATTEMPTING TO MAKE A LEFT HAND TURN. D1 ADVISED ME THAT SHE NOTICED THAT V2 HAD THEIR RIGHT BLINKER ON, TO WHICH SHE THOUGHT THEY WERE MAKING A RIGHT HAND TURN ONTO ALBERT AVENUE. D1 ADVISED ME SHE PROCEEDED TO MAKE A LEFT HAND TURN ONTO PINE STREET, WHEN SHE STRUCK V2 WITH THE FRONT END OF VEHICLE 1.

D2 STATED SHE WAS TRAVELING EAST BOUND ON PINE STREET APPROACHING THE INTERSECTION OF ALBERT AVENUE. D2 ADVISED ME SHE SIGNALLED HER RIGHT BLINKER TO MAKE A RIGHT HAND TURN IN TO THE PARKING LOT OF THE SCHOOL JUST WEST OF ALBERT AVENUE. D2 STATED WHEN SHE WAS IN THE INTERSECTION, V1 STRUCK HER ON THE PASSENGER SIDE OF HER VEHICLE.

UPON DOING MY INVESTIGATION, I PUT V1 AT FAULT FOR FAILING TO OBEY THE STOP SIGN.

146 Officer's Signature

HOURIGAN D

147 Badge #

429

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending
 ☒ Complete

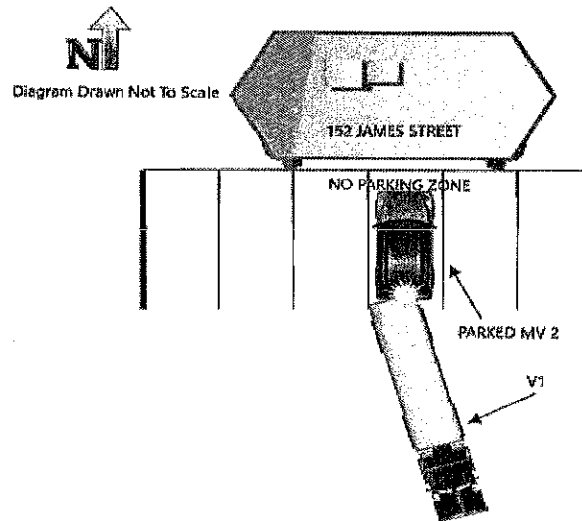
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-043658**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle 1 stated he was backing up in the parking lot of 152 James Street when his vehicle made contact with the parked Motor Vehicle 2. The passenger of vehicle 1 stated a unidentified male that was no longer on scene was assisting them by giving directions ultimately causing the crash.

Vehicle 2 was parked in a "No Parking Zone" posted on the outside wall of the business.

Upon my investigation, I can conclude that the driver of vehicle 1 is at fault for the crash with vehicle 2's contributing circumstances of being parked in a no parking zone.

Vehicle 1
Policy #: 133-750393-2
SELF INSURED BY
Crum & Forster Indemnity Company
Fairmont Ins. Brokers Ltd.
1600 60th Street, Brooklyn NY 11204
COMPANY # NOT PROVIDED

146 Officer's Signature

VEGA B

147 Badge #

428

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																												
05	1 Case Number 22-043665										10 Crash Occurred On: MONMOUTH AVE										11 Speed Limit 30		118a		25																																																																																																																						
97	2 Police Dept of LAKEWOOD TOWNSHIP F 01										Code														118b		-																																																																																																																				
98	3 Station/Precinct										☒ At Intersection With										Road Name 6TH ST		12 Route No.		Suffix		13 Milepost 25		18 Speed Limit																																																																																																																		
01											☐ Feet										☐ N ☐ E of										119a		04																																																																																																														
99											☐ Miles										☐ S ☐ W												119b		-																																																																																																												
07	4 Date of Crash 06/01/22										5 Day Of Week WEDNESDAY										6 Time (use 2400 hrs) 0949										7 Municipality Code 1514										8 Total Killed --										9 Total Injured 1										21 Latitude 40.096557										22 Longitude -74.210937										119c		-																																																												
100a																																																																							120a		01																																																																						
01	23 Veh # 1										24 Policy No. 4580-34-26-67										25 NJ Ins. Code 148										53 Veh # 2										54 Policy No. 4621-78-10-06										55 NJ Ins. Code 100										120b		-																																																																																
100b	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																				☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																				121a		01																																																																																																				
02	26 Driver's First Name RAFAEL										Initial D										Last Name LAPIDOT										29 Sex M										56 Driver's First Name ANSELMO										Initial -										Last Name MARTINEZ-PITA										59 Sex M										121b		-																																																												
102	27 Number & Street 328 DEWEY AVE																				57 Number & Street 720 NEW HAMPSHIRE AVE																				122		03																																																																																																				
103	28 City LAKEWOOD										State NJ										Zip 08701										58 City LAKEWOOD										State NJ										Zip 08701										123		01																																																																																
104	30 Eyes 2										DL Class D										Restrictions -										Endorsements -										31 State NJ										60 Eyes 2										DL Class D										Restrictions -										Endorsements -										61 State NJ										124		08																																								
105	32 Driver's License Number L05156386402852										33 DOB 02/22/1985										34 Expires 07/21										62 Driver's License Number M06910520003012										63 DOB 03/24/2001										64 Expires 03/26										125		04																																																																																
106	35 Owner's First Name RAFAEL										Initial D										Last Name LAPIDOT										65 Owner's First Name ANSELMO										Initial -										Last Name MARTINEZ-PITA										126a		26																																																																																
107	36 Number & Street 328 DEWEY AVE																				66 Number & Street 720 NEW HAMPSHIRE AVE																				126b		-																																																																																																				
108	37 City LAKEWOOD										State NJ										Zip 08701										67 City LAKEWOOD										State NJ										Zip 08701										126c		-																																																																																
109	38 Make TOYT										39 Model AVA										40 Color BLK										41 Year 2003										42 Plate No. M72DFA										43 State NJ										68 Make HOND										69 Model CIV										70 Color WHI										71 Year 2017										72 Plate No. N29LDH										73 State NJ										126d		-																				
110	44 VIN 4T1BF28B53U305205										45 Expires 05/22										74 VIN SHHFK7H57HU421576										75 Expires 03/23										126e		-																																																																																																				
111	46 Vehicle Removed To TILTON'S AUTO BODY										☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										126f		-																																																																																																														
112	☐ Left At Scene ☒ Towed Impounded																				☐ Left At Scene ☐ Towed Impounded																				126g		-																																																																																																				
113	47 Authority ☐ Owner ☐ Driver ☒ Police																				77 Authority ☐ Owner ☒ Driver ☐ Police																				126h		26																																																																																																				
114	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										49 Hazardous Material ☒ None ☐ On Board ☐ Spill										78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										79 Hazardous Material ☒ None ☐ On Board ☐ Spill										126i		26																																																																																																				
115	Type: ☐ Breath ☐ Blood ☐ Urine																				Type: ☐ Breath ☐ Blood ☐ Urine																				126j		-																																																																																																				
116	Results: 0. - % ☐ Pending										Hazard Class										Placard No.										Results: 0. - % ☐ Pending										Hazard Class										Placard No.										126k		-																																																																																
03	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										126l		-																																																																																																				
117	☐ MC/MX																				☐ MC/MX																				126m		-																																																																																																				
01	52 Motor Carrier or Government Entity																				82 Motor Carrier or Government Entity																				126n		26																																																																																																				
	Number & Street																				Number & Street																				126o		11																																																																																																				
	City										State										Zip										City										State										Zip										126p		11																																																																																
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																																								126q		03																																																																																																				
	Oper. 136 Charge 1 39:3-4										137 Summons. No. 293359										Oper. 138 Charge										139 Summons. No.										126r		03																																																																																																				
	Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										143 Summons. No.										126s		02																																																																																																				
	83										84										85										86										87										88										89										90										91										92										93										94										95										Names & Addresses of Occupants - If Deceased, Date & Time of Death										126t		03
A	1 01 01 05 37 M - - - 11 04 - -										RAFAEL D LAPIDOT 328 DEWEY AVE LAKEWOOD NJ 08701										-		126u		-																																																																																																																						
B	2 01 01 05 21 M - - - 11 04 - -										ANSELMO - MARTINEZ-PITA 720 NEW HAMPSHIRE A\ LAKEWOOD NJ 08701										-		126v		-																																																																																																																						
C	2 02 01 04 21 M 06 08 01 11 04 - -										LUISJOEL - MARTINEZ-PITA 720 NEW HAMPSHIRE A\ LAKEWOOD NJ 08701										-		126w		-																																																																																																																						
D																																									126x		-																																																																																																				

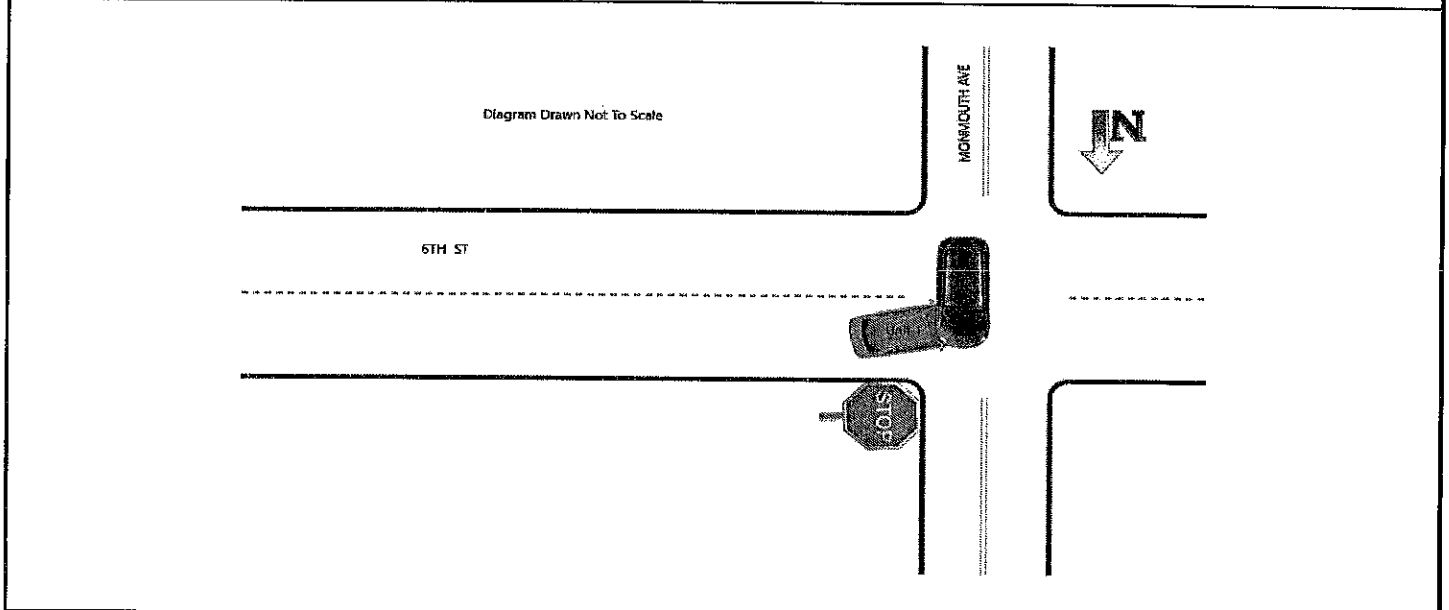
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-043665**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED HE WAS AT THE INTERSECTION OF 6TH ST & MONMOUTH AVE WHEN A TRUCK LET HIM GO, AND VEHICLE 2 WENT AROUND THE TRUCK AND STRUCK HIS VEHICLE.

DRIVER OF VEHICLE 2 STATED HE WAS BEHIND A TRUCK HEADING NORTH ON MONMOUTH AVE WHEN VEHICLE 1 ENTERED THE INTERSECTION AND STRUCK HIS VEHICLE.

WITNESS STATED HE WAS HEADING NORTH ON MONMOUTH AVE WHEN VEHICLE 2 WENT AROUND A TRUCK.

146 Officer's Signature

VEGA E S

147 Badge #

348

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending
 ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																												
05	1 Case Number 22-043670										10 Crash Occurred On: CEDARBRIDGE AVE										11 Speed Limit 40		118a		09																																						
97	2 Police Dept of Code LAKEWOOD TOWNSHIP F01										At Intersection With Road Name Dir MARTIN LUTHER KING										12 Route No. Suffix 13 Milepost 30		118b		-																																						
01	3 Station/Preinct -										20 14 15 16 Feet N E of S W Miles										19 To 17 Cross Road Name Ramp From: NB EB SB WB		119a		25																																						
99	4 Date of Crash mm dd yy 06/01/22										5 Day Of Week WEDNESDAY										6 Time (use 2400 hrs) 7 Municipality Code 8 Total Killed 9 Total Injured 1010 1514 -- --										21 Latitude 22 Longitude 40.086258 -74.210359		119b		-																												
100a	23 Veh # 1										24 Policy No. 939 604 845										25 NJ Ins. Code 054										53 Veh # 2		54 Policy No. 4504 51 95 31										55 NJ Ins. Code 148										01										
100b	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																														120b		-																				
02	26 Driver's First Name Initial Last Name ELI - KIPPER										29 Sex M										56 Driver's First Name Initial Last Name ODALIS - SALTO										59 Sex F										121a		01																				
102	27 Number & Street 41 ROCKEFELLER DRIVE										57 Number & Street 61 MOBILE LANE																														121b		-																				
103	28 City LAKEWOOD										State Zip NJ 08701										58 City TOMS RIVER										State Zip NJ 08755																																
104	30 Eyes DL Class Restrictions Endorsements 31 State 2 D - - NJ										60 Eyes DL Class Restrictions Endorsements 61 State 2 D - - NJ																														122		01																				
105	32 Driver's License Number K45722050012862										33 DOB mm dd yyyy 12/16/1986										34 Expires mm yy 12 22										62 Driver's License Number S03236020051992										63 DOB mm dd yyyy 01/12/1999										64 Expires mm yy 01 25										123		08
106	35 Owner's First Name Initial Last Name ☐ Same As Driver ELI - KIPPER										65 Owner's First Name Initial Last Name ☐ Same As Driver OSCAR - PADILLA																														124		04																				
107	36 Number & Street 41 ROCKEFELLER DRIVE										66 Number & Street 61 MOBILE LANE																														125		04																				
108	37 City LAKEWOOD										State Zip NJ 08701										67 City TOMS RIVER										State Zip NJ 08755										126a		26																				
109	38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State TOYT SIE GRY 2011 H64EPK NJ										68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State HOND CRV SIL 2015 C51FTZ NJ																														126b		-																				
110	44 VIN 5TDKK3DC9BS099720										45 Expires 08 22										74 VIN 5J6RM4H9XFL085100										75 Expires 09 22										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	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		26																				
115	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-25,000 lbs ☐ Weight >= 25,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-25,000 lbs ☐ Weight >= 25,001 lbs										127b		-																				
116	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity																														127c		26																				
117	Number & Street										Number & Street																														127d		-																				
04	City State Zip										City State Zip																														127e		26																				
04	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																														127f		11																														
	Oper. 136 Charge 137 Summons. No.										Oper. 138 Charge 139 Summons. No.																														131		06																				
	Oper. 140 Charge 141 Summons. No.										Oper. 142 Charge 143 Summons. No.																														132		06																				
	83 84 85 86 87 88 89 90 91 92 93 94 95										Names & Addresses of Occupants - If Deceased, Date & Time of Death																														133		03																				
A	1 01 01 05 35 M - - - 11 04 - -										ELI - KIPPER 41 ROCKEFELLER DRIVE LAKEWOOD NJ 08701																														134		03																				
B	2 01 01 05 23 F - - - 11 04 - -										ODALIS - SALTO 61 MOBILE LANE TOMS RIVER NJ 08755																																																				
C																																																															
D																																																															

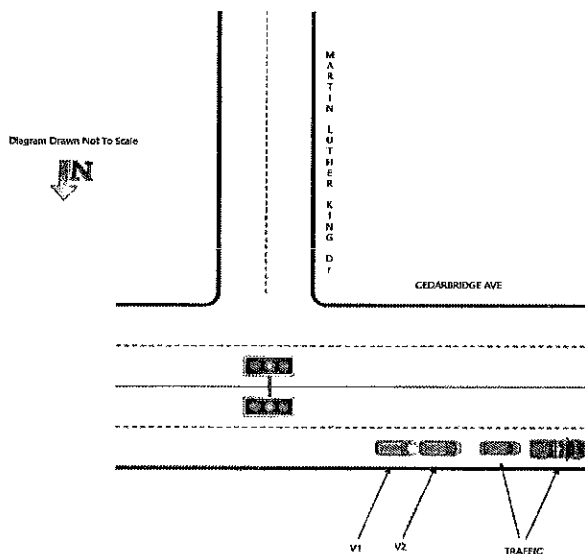
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-043670**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 said he was traveling West on Cedarbridge Ave in stop and go traffic. Traffic started to go, so he went. V2 which was in front of him stopped and he could not in time and struck V2.

Driver of V2 said she was stopped in traffic on Cedarbridge Ave when her 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
CARABALLO A

147 Badge #
298

148 Reviewer
DTWORKOSKI

Badge #
249

149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 3		Fatal		New Jersey Police Crash Investigation Report										Reportable		Non-Reportable		Change Report																					
05	1 Case Number		22-043711		10 Crash Occurred On: RIVER AVENUE										11 Speed Limit		45		0009		118a																			
97	2 Police Dept of		LAKEWOOD TOWNSHIP P 01		12 Route No.										13 Milepost		18 Speed Limit		35		09																			
01	3 Station/Precinct		-		14 60										15		16		17 Cross Road Name		25																			
98	4 Date of Crash		06/01/22		5 Day Of Week		WEDNESDAY		6 Time (use 2400 hrs)		1250		7 Municipality Code		1514		8 Total Killed		2		119a																			
01	9 Total Injured		2		21 Latitude		40.054305		22 Longitude		-74.220654		19 Ramp		20 Route/Name		23		119b																					
100a	23 Veh #		1		24 Policy No.		-		25 NJ Ins. Code		-		53 Veh #		54 Policy No.		55 NJ Ins. Code		01																					
04	26 Driver's First Name		PINCHAS		Initial		-		Last Name		KRYSCHEK		29 Sex		M		56 Driver's First Name		RINA		120a																			
01	27 Number & Street		93 LAWRENCE AVE		State		NJ		Zip		08701		57 Number & Street		901 PARK TER		State		NJ		120b																			
01	28 City		LAKEWOOD		State		NJ		Zip		08701		58 City		LAKEWOOD		State		NJ		121a																			
100b	30 Eyes		04		DL Class		-		Restrictions		-		Endorsements		-		31 State		NY		121b																			
04	32 Driver's License Number		999388465		33 DOB		06/05/2002		34 Expires		06		25		62 Driver's License Number		M02336570054002		63 DOB		04/14/2000		122																	
01	35 Owner's First Name		ASHER		Initial		Y		Last Name		BENISH		-		65 Owner's First Name		CHAIM		Initial		O		123																	
106	36 Number & Street		5913 20TH AVE		State		NY		Zip		11204		66 Number & Street		901 PARK TER		State		NJ		Zip		124																	
01	37 City		BROOKLYN		State		NY		Zip		11204		67 City		LAKEWOOD		State		NJ		Zip		125																	
107	38 Make		FORD		39 Model		EPD		40 Color		-		41 Year		2020		42 Plate No.		KHH1777		43 State		126a																	
01	44 VIN		1FMJU1MTXLEA13019		45 Expires		01		23		74 VIN		5TDKK3DC6BS014249		75 Expires		01		23		126b																			
01	46 Vehicle Removed To		HERSHEY'S		47 Authority		Owner		Driver		Police		76 Vehicle Removed To		HERSHEY'S		77 Authority		Owner		Driver		126c																	
111	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		126d			
112	49 Hazardous Material		None		On Board		Spill		Hazard Class		Placard No.		79 Hazardous Material		None		On Board		Spill		Hazard Class		Placard No.		126e															
113	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		126f							
01	52 Motor Carrier or Government Entity		-		Number & Street		-		City		-		State		-		Zip		-		82 Motor Carrier or Government Entity		-		Number & Street		-		City		-		State		-		Zip		127a	
114	135 Damage To Other Property		Yes (If Yes, describe)		No		-		136 Charge		137 Summons. No.		138 Charge		139 Summons. No.		140 Charge		141 Summons. No.		142 Charge		143 Summons. No.		144 Charge		145 Summons. No.		146 Charge		147 Summons. No.		148 Charge		149 Summons. No.		127b			
115	83		84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		-		-		-		-		127c			
116	V1		01		01		05		19		M		-		-		-		11		04		-		-		PINCHAS		-		KRYSCHEK		-		-		127d			
01	V2		01		01		05		22		F		-		-		-		11		04		-		-		RINA		-		MALAMUD		-		-		127e			
01	V3		01		01		05		68		F		-		-		-		11		04		-		-		BARBARA		E		WYNN		-		-		127f			
01	V3		04		01		05		37		F		-		-		-		11		04		-		-		VORAZOLIA		-		HALL		-		-		127g			
01	V3		04		01		05		37		F		-		-		-		11		04		-		-		30 AMHERST ST		LAKEWOOD		NJ		08701		-		127h			

001	1 Case Number 22-043711		10 Crash Occurred On: RIVER AVENUE		11 Speed Limit 45		0009		12 Route No.		13 Milepost		18 Speed Limit 35		118a
01	2 Police Dept of LAKEWOOD TOWNSHIP		Code 01		At Intersection With		Dir		17 Cross Road Name CROSS STREET		19 Ramp		20 Route/Name		118b
98	3 Station/Precinct				60		Feet		N E of		16		21 Latitude 40.054305		119a
01	4 Date of Crash mm dd yy 06/01/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1250		7 Municipality Code 1514		8 Total Killed --		9 Total Injured 2		22 Longitude -74.220654		119b
02	23 Veh # 3		24 Policy No. 14911678		25 NJ Ins. Code 135		53 Veh #		54 Policy No.		55 NJ Ins. Code				120a
04	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run								120b
02	26 Driver's First Name BARBARA		Initial E		Last Name WYNN		29 Sex F		56 Driver's First Name		Initial		Last Name		121a
01	27 Number & Street 30 AMHERST ST						57 Number & Street								121b
01	28 City LAKEWOOD		State NJ		Zip 08701		58 City		State		Zip				122
3	30 Eyes 02		DL Class D		Restrictions		Endorsements		31 State NJ		60 Eyes		DL Class		123
01	32 Driver's License Number W96690736558532		33 DOB mm dd yyyy 08/21/1953		34 Expires mm yy 08 25		62 Driver's License Number		63 DOB mm dd yyyy		64 Expires mm yy				124
06	35 Owner's First Name BARBARA		Initial E		Last Name WYNN		65 Owner's First Name		Initial		Last Name				125
01	36 Number & Street 30 AMHERST ST						66 Number & Street								126a
01	37 City LAKEWOOD		State NJ		Zip 08701		67 City		State		Zip				126b
09	38 Make KIA		39 Model SPO		40 Color BLU		41 Year 2020		42 Plate No. H77MKL		43 State NJ		68 Make		126c
01	44 VIN KNDPM3AC2L7790670		45 Expires 05 24				74 VIN		75 Expires						126d
02	46 Vehicle Removed To						76 Vehicle Removed To								126e
02	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded						☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded								127a
01	47 Authority ☒ Owner ☐ Driver ☐ Police						77 Authority ☐ Owner ☐ Driver ☐ Police								127b
01	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending						78 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending								127c
01	50 Carrier No. ☐ USDOT ☐ MC/MX						80 Carrier No. ☐ USDOT ☐ MC/MX								127d
01	51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs						81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs								127e
01	52 Motor Carrier or Government Entity						82 Motor Carrier or Government Entity								128
01	Number & Street						Number & Street								129
01	City		State		Zip		City		State		Zip				130
01	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No														131
01	Oper. 136 Charge						Oper. 136 Charge								132
01	Oper. 140 Charge						Oper. 142 Charge								133
01	Oper. 141 Charge						Oper. 143 Charge								134
01	Oper. 144 Charge						Oper. 145 Charge								135
01	Oper. 146 Charge						Oper. 147 Charge								136
01	Oper. 148 Charge						Oper. 149 Charge								137
01	Oper. 150 Charge						Oper. 151 Charge								138
01	Oper. 152 Charge						Oper. 153 Charge								139
01	Oper. 154 Charge						Oper. 155 Charge								140
01	Oper. 156 Charge														

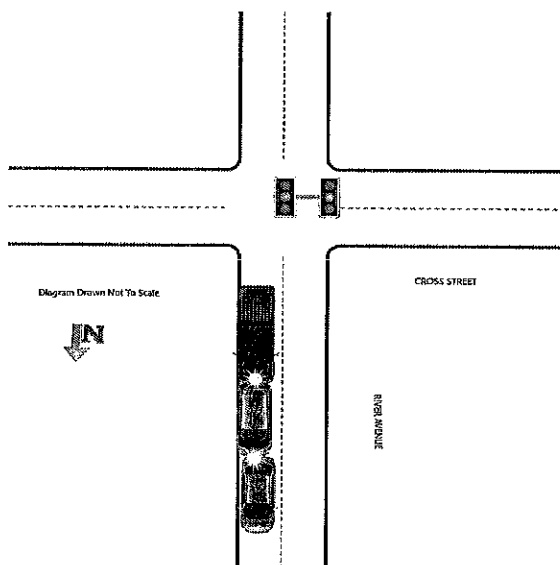
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-043711**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E I D	83	84	85	86	87	88	89	90	91	92	93	94	95	
	V3	03	01	04	63	M	07	08	02	11	04	-	-	GREGORY G HALL 1043 OGDEN AVEUNE BRONX NY 10452
	V3	06	01	04	30	F	01	08	02	11	04	-	-	GENENVA - HALL 30 AMHERST ST LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D3 STATED THAT SHE WAS TRAVELING SOUTH BOUND ON RIVER AVENUE, WHEN SHE NOTICED THE VEHICLE IN FRONT OF HER WITH THEIR LEFT BLINKER ON TURNING INTO 1166 RIVER AVENUE. D3 ADVISED ME SHE CAME TO A COMPLETE STOP DUE TO THE VEHICLE INFRONT OF HER STOPPING TO MAKE A LEFT TURN, WHEN SHE WAS STRUCK IN REAR BY V2.

D2 STATED THAT SHE WAS TRAVELING SOUTH BOUND ON RIVER AVENUE, WHEN SHE NOTICED V3 COMING TO A COMPLETE STOP, DUE TO THE VEHICLE IN FRONT OF THEM TURNING LEFT INTO 1166 RIVER AVENUE. D2 ADVISED ME THAT SHE CAME TO A COMPLETE STOP, WHEN SHE WAS STRUCK IN THE REAR BY V1, CAUSING HER TO STRIKE V3 WITH HER FRONT END OF HER VEHICLE.

D1 STATED THAT HE WAS TRAVELING SOUTH BOUND ON RIVER AVENUE, WHEN HE NOTICED V2 COMING TO A COMPLETE STOP. D1 ADVISED ME THAT HE ATTEMPTED TO COME TO A COMPLETE STOP, WHEN HE STRUCK THE REAR OF V2, WHICH CAUSED THEM TO STRIKE V3.

UPON DOING MY INVESTIGATION, I PUT V1 AT FAULT FOR FOLLOWING TO CLOSE, WHICH CAUSED HIM TO BE UNABLE TO COME TO A COMPLETE CAUSING THE CRASH TO OCCUR.

V1 INSURANCE NEW YORK POLICY NUMBER 6631J109915, CODE 382, ADDRESS 19 DUKE PLACE STATEN ISLAND NEW YORK 10314

146 Officer's Signature

HOURIGAN D

147 Badge #

429

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

05	1 Case Number 22-043716		10 Crash Occurred On: MAIN STREET		11 Speed Limit 25		118a																	
97	2 Police Dept of		At Intersection With		Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		02							
01	LAKEWOOD TOWNSHIP 01		☒ Feet		☐ N ☐ E of: LEXINGTON AVENUE												118b							
98	3 Station/Precinct		☐ Miles		☐ S ☐ W		19 Ramp		To From:		17 Cross Road Name		☐ NB ☐ EB		☐ SB ☐ WB		25							
01	4 Date of Crash mm dd yy 06/01/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1327		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		21 Latitude 40.090208		22 Longitude -74.211786		119a							
02	23 Veh # 1		24 Policy No. F275638-5		25 NJ Ins. Code 426		53 Veh # 2		54 Policy No. 939 779 565		55 NJ Ins. Code 054						25							
100a	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										119b							
01	26 Driver's First Name HUGUE		Initial -		Last Name OSIAS		29 Sex M		56 Driver's First Name RIVKA		Initial -		Last Name KLEIN		59 Sex F		119a							
02	27 Number & Street 1703 LEXINGTON AVE APT 3								57 Number & Street 2 YEREK DR								25							
100b	28 City LAKEWOOD		State NJ		Zip 08701		58 City LAKEWOOD		State NJ		Zip 08701						119b							
04	30 Eyes 1		DL Class D		Restrictions -		Endorsements -		31 State NJ		60 Eyes 6		DL Class A		Restrictions -		Endorsements -		61 State NJ					
01	32 Driver's License Number 080323470001691		33 DOB mm dd yyyy 01/27/1969		34 Expires mm yy 01 25		62 Driver's License Number K53506580053786		63 DOB mm dd yyyy 03/09/1978		64 Expires mm yy 03 25						122							
100c	35 Owner's First Name HUGUE		Initial -		Last Name OSIAS		65 Owner's First Name ISRAEL		Initial M		Last Name KLEIN						123							
03	36 Number & Street 1703 LEXINGTON AVE APT 3						66 Number & Street 2 YEREK DR										124							
100d	37 City LAKEWOOD		State NJ		Zip 08701		67 City LAKEWOOD		State NJ		Zip 08701						08							
01	38 Make TOYT		39 Model RAV		40 Color WHI		41 Year 2016		42 Plate No. L22PEX		43 State NJ		68 Make TOYT		69 Model SIE		70 Color 4		71 Year 2015		72 Plate No. A84KLT		73 State NJ	
100e	44 VIN 2T3BFREV3GW422964		45 Expires 10 22				74 VIN 5TDKK3DC1FS565999		75 Expires 09 22								126a							
01	46 Vehicle Removed To						76 Vehicle Removed To										126b							
110	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded						☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										126c							
01	☐ Left At Scene ☐ Towed Impounded						☒ Left At Scene ☐ Towed Impounded										126d							
111	47 Authority ☒ Owner ☐ Driver ☐ Police						77 Authority ☐ Owner ☐ Driver ☒ Police										126e							
112	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							
03	50 Carrier No. ☐ USDOT ☐ MC/MX		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				80 Carrier No. ☐ USDOT ☐ MC/MX		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs								127b							
04	52 Motor Carrier or Government Entity						82 Motor Carrier or Government Entity										127c							
113	Number & Street						Number & Street										127d							
114	City		State		Zip		City		State		Zip						127e							
115	135 Damage To Other Property ☐ Yes (																							

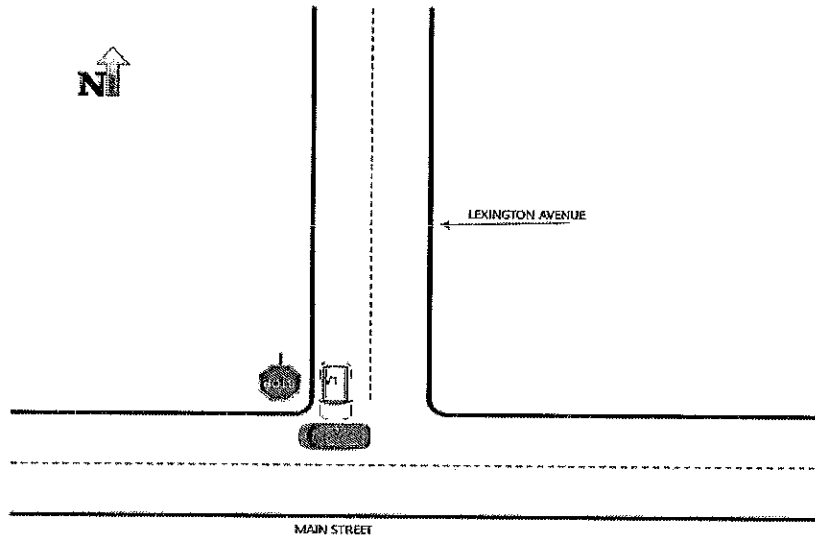
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-043716**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF V1 STATED THAT HE WAS ATTEMPTING TO MAKE A RIGHT TURN, A VEHICLE STOPPED TO LET HIM GO BUT THE VAN(V2) CAME AND HIT HIM. DRIVER OF V2 STATED THAT SHE WAS DRIVING ON ROUTE 88(MAIN STREET) AND THE CAR TURNED AND HIT HER. V2 HAD THE RIGHT OF THE WAY AT TIME OF THE CRASH.

146 Officer's Signature

YOUMANS R

147 Badge #

250

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

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

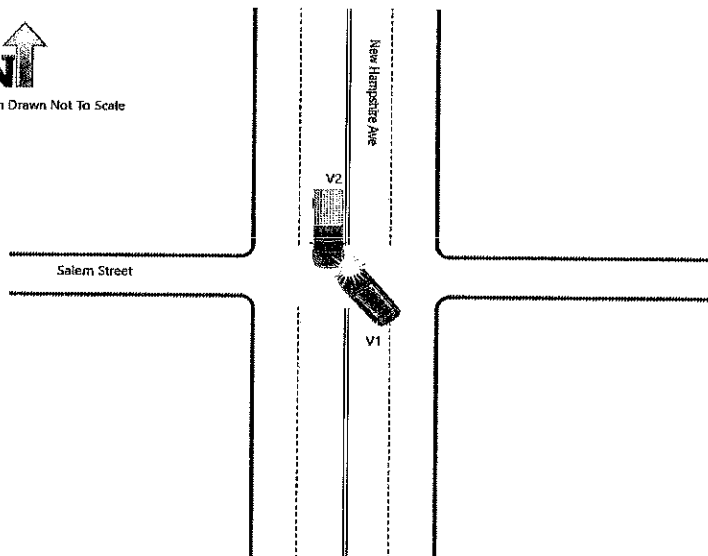
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-043743**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated she was attempting to turn west onto Salem Street when oncoming south bound traffic on New Hampshire Ave had stopped to let her make her turn. As she began turning Vehicle 2 was traveling south bound and did not stop and struck Vehicle 1.

Driver 2 stated he was traveling south bound on New Hampshire Ave when Vehicle 1 had turned left on New Hampshire Ave to head west onto Salem Street. He stated he was unable to stop and struck Vehicle 2.

After my investigation I determined Driver 1 to be at fault for not yielding right of way to oncoming traffic causing the collision.

Driver 1 had a complaint of pain in her wrist and refused medical treatment. Driver 2 had complaints on pain in his knee and was transported via ambulance to Monmouth Medical Center Southern Campus for treatment. Vehicle 1 sustained disabling damage to the front end of the vehicle. Vehicle 2 sustained disabling damage to the front of of the vehicle. Vehicle 1 was towed by Moshe's towing. Vehicle 2 was towed by Tilton's auto body.

Driver 1 was issued one summons by mail for careless driving (39:4-97).

End of report.

146 Officer's Signature

CAMACHO L

147 Badge #

430

148 Reviewer

CM

Badge #

332

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**

Station: - Case No: 22-043745

(Refer to vehicle by number)

[illegible]

144 Crash Diagram (NOT TO SCALE)

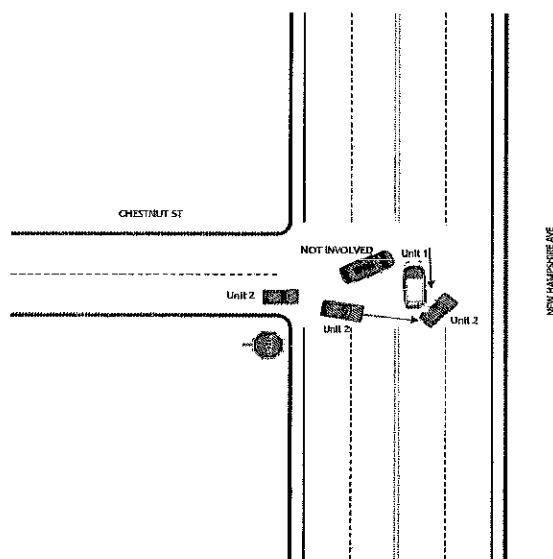


Diagram Drawn Not To Scale

145 Crash Description/Narrative

D1 OF V1 STATED TO ME THAT WHILE IN TRAFFIC ON NEW HAMPSHIRE AVE NEAR CHESTNUT ST SHE WAS STUCK IN TRAFFIC DUE TO ANOTHER VEHICLE ENTERING THE ROADWAY IN FRONT OF HER. VEHICLE THAT WAS ENTERING THE ROADWAY FROM CHESTNUT ST WAS PARTIALLY BLOCKING V1'S LANE OF TRAVEL. AS A RESULT V1 BACKED HER VEHICLE UP IN ORDER TO YIELD TO THE VEHICLE THAT WAS ENTERING THE ROADWAY WHILE V2 WAS ENTERING THE ROADWAY FROM CHESTNUT ST ON TO NEW HAMPSHIRE AVE BEHIND V1 CAUSING V1 TO BACK IN TO V2. D2 OF V2 STATED TO ME THAT SHE WAS MERGING ON TO NEW HAMPSHIRE AVE FROM CHESTNUT ST BEHIND V1. AS A RESULT OF V1 BACKING HER VEHICLE UP, V2 WAS STRUCK BY V1. IT SHOULD BE NOTED THAT THE INTERSECTION OF NEW HAMPSHIRE AVE AND CHESTNUT ST IS A PAINTED (DO NOT BLOCK) INTERSECTION AND IS FREQUENT TO HEAVY MERGING TRAFFIC WHICH IS USUALLY ALLEVIATED BY DRIVERS COMMUNICATED WITH ONE ANOTHER. NO INJURIES WERE REPORTED. I FOUND D1 OF V1 AT FAULT DUE TO THE FACT THAT SHE BACKED HER VEHICLE UP IN TRAFFIC.

146 Officer's Signature
ZAVALNYUK T

147 Badge #
359148 Reviewer
CM

Badge #
332

149 Case Status
☐ Pending ☒ Complete

PAGE 2 OF 4		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		10 Crash Occurred On:		11 Speed Limit	
97	22-043747		PINE ST		35	
01	2 Police Dept of		At Intersection With		12 Route No.	
98	LAKEWOOD TOWNSHIP		Dir		13 Milepost	
01	3 Station/Precinct		14 100		18 Speed Limit	
99			15 14		25	
07	4 Date of Crash		6 Time		7 Municipality	
100a	06/01/22		(use 2400 hrs) 1600		1514	
01	5 Day Of Week		8 Total Killed		9 Total Injured	
100b	WEDNESDAY		1		40.078095	
04	23 Veh #		24 Policy No.		25 NJ Ins. Code	
101	3		4466-48-94-75		639	
02	26 Driver's First Name		27 Number & Street		28 City	
102	MARTIN		1465 40TH ST		BROOKLYN	
01	29 Sex		30 Eyes		31 State	
103	M		04		NY	
01	32 Driver's License Number		33 DOB		34 Expires	
104	507264923		02/21/1964		02 26	
3	35 Owner's First Name		36 Number & Street		37 City	
105	MARTIN		1465 40TH ST		BROOKLYN	
02	38 Make		39 Model		40 Color	
106	CHRY		PACIFICA		BLK	
01	41 Year		42 Plate No.		43 State	
107	2020		HLC3085		NY	
01	44 VIN		45 Expires		46 Vehicle Removed To	
108	2C4RC1BG1LR105252		12 22			
01	47 Authority		48 Alcohol/Drug Test		49 Hazardous Material	
109	Owner		Given: No Yes Refused		None On Board Spill	
02	Driver		Type: Breath Blood Urine		Hazard Class Placard No.	
110	Police		Results: 0 % Pending			
111	50 Carrier No.		51 GVWR/GCWR		52 Motor Carrier or Government Entity	
112	USDOT		Weight <= 10,000 lbs			
113	MC/MX		Weight 10,001-26,000 lbs			
114			Weight >= 26,001 lbs			
115	53 Veh #		54 Policy No.		55 NJ Ins. Code	
116	-		-		-	
117	56 Driver's First Name		57 Number & Street		58 City	
118a	-		-		-	
118b	59 Sex		60 Eyes		61 State	
119a	-		-		-	
119b	-		-		-	
120a	-		-		-	
120b	-		-		-	
121a	-		-		-	
121b	-		-		-	
122	-		-		-	
07	-		-		-	
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	-		-		-	
83	84		85		Names & Addresses of Occupants - If Deceased, Date & Time of Death	
86	87		88			
89	90		91			
92	93		94			
95	96		97			
98	99		00			
01	02		03			
04	05		06			
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44	45		46			
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53	54		55			
56	57		58			
59	60		61			
62	63		64			
65	66		67			
68	69		70			

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-043747**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

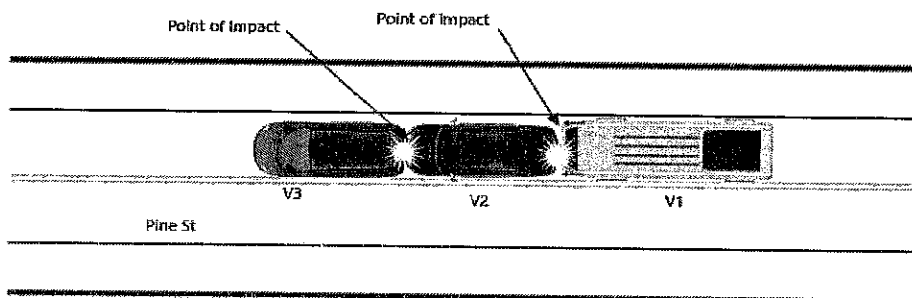


Diagram Drawn Not To Scale



145 Crash Description/Narrative

V1 was traveling east bound on Pine St when it rear-ended V2 causing V2 to rear-end V3.

Driver of V1 stated that she was traveling east bound on Pine St when she rear-ended V2. She stated that it looked like V2 was in motion going straight when she realized that V2 was slowing down and she did not have enough time to come to a complete stop causing her to collide with V2.

Driver of V2 stated he traveling east bound on Pine St preparing to slowdown due to V3 slowing down when he was rear-ended by V1; eventually causing his vehicle to rear-end V3.

Driver of V3 stated he was slowing down on Pine St traveling east bound when he was rear-ended by V2.

Based on drivers statements I determine that driver of V1 was at fault due to following too closely.

Driver of V2 was transported to Monmouth Medical Center - Southern Campus to get treated for back pain.

***V2 insurance: (PA) Omni Insurance Company, 2018 Powers Ferry Road suite 400, Atlanta GA 30339.**

146 Officer's Signature

CARRINGTON K

147 Badge #

431

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending
 ☒ Complete

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTIONPolice Agency **LAKEWOOD TOWNSHIP POLICE DEPT.**Station " " Case No. **22-043747**

1.	CHINNY	FERISIO	
2.	ROCHELA	SELENGOT	
3.	ADINA	ROSENGARTEN	
4.	MALKA	SELENGOT	
5.	CHAYLA	LAMENT	
6.	VICHNA	ROSENGARTEN	
7.	LEAH	GRADMAN	
8.	KAYLA	GRADMAN	
9.	ESTER	GROSS	
10.	NECHMA	GROSS	
11.	MALKY	ROSENGARTEN	
12.	DEVORAH	FENDEL	
13.	MALKY	FENDEL	
14.	MECHANEE	FURMAN	
15.	GITTY	JACOBOVICS	
16.	CHANA	JACOBOVICS	M
17.	GITTY	SELENGOT	
18.	BRACHA	FELDMAN	
19.	RAISEH	FELDMAN	
20.	RACHEL	FELDMAN	
21.	DECONAH	KELLER	
22.	TZIPA	KELLER	
23.	RIVKA	STREGOSKY	
24.	DREBIN	STREGOSKY	
25.	ESTI	STREGOSKY	
26.	LEAH	PAM	
27.	ROCHEL	PAM	
28.	SARA	PAM	
29.	NECHANA	RIBIAT	
30.	SURIE	RIBIAT	
31.	ESTIE	RIBIAT	
32.	YEHUDIS	RIBIAT	
33.	CHENIE	RIBIAT	
34.	BRACHE	CZITTES	
35.	SARALA	CZITTES	
36.	CHENALA	CZITTES	
37.	NECHALA	MIRI	
38.	DEVORAH	MIRI	
39.	SARALA	MIRI	
40.			
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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

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
02	1 Case Number		22-043761		10 Crash Occurred On: BLVD OF AMERICAS		11 Speed Limit 40	
01	2 Police Dept of		LAKEWOOD TOWNSHIP #01		At Intersection With Road Name Dir		12 Route No. Suffix 13 Milepost 18 Speed Limit 35	
01	3 Station/Precinct				Feet ☒ N ☐ E of: STADIUM WAY		19 To 17 Cross Road Name	
07	4 Date of Crash		06/01/22		6 Time (use 2400 hrs) 1743		7 Municipality Code 1514	
01	5 Day Of Week		WEDNESDAY		8 Total Killed --		9 Total Injured 1	
04	23 Veh #		1		24 Policy No. 4396-86-69-58		25 NJ Ins. Code 148	
02	26 Driver's First Name		ADINA		27 Number & Street		28 City	
01	29 Sex		F		30 Eyes		31 State	
01	32 Driver's License Number		H61190100059026		33 DOB		34 Expires	
03	35 Owner's First Name		ZVI		36 Number & Street		37 City	
01	38 Make		TOYT		39 Model		40 Color	
01	41 Year		2000		42 Plate No.		43 State	
01	44 VIN		4T1BF28B5YU089329		45 Expires		46 Vehicle Removed To	
01	47 Authority		MOSHES TOWING		48 Alcohol/Drug Test		49 Hazardous Material	
03	50 Carrier No.				51 GVWR/GCWR		52 Motor Carrier or Government Entity	
04	53 Veh #		2		54 Policy No. 939335941		55 NJ Ins. Code 054	
02	56 Driver's First Name		MOSHE		57 Number & Street		58 City	
01	59 Sex		M		60 Eyes		61 State	
03	62 Driver's License Number		S81885670002825		63 DOB		64 Expires	
01	65 Owner's First Name		MOSHE		66 Number & Street		67 City	
04	68 Make		ACUR		69 Model		70 Color	
01	71 Year		2020		72 Plate No.		73 State	
01	74 VIN		5J8YD4H08LL015904		75 Expires		76 Vehicle Removed To	
01	77 Authority		HESHYS TOWING		78 Alcohol/Drug Test		79 Hazardous Material	
03	80 Carrier No.				81 GVWR/GCWR		82 Motor Carrier or Government Entity	
04	83				84		85	
01	86				87		88	
01	89				90		91	
01	92				93		94	
01	95				96		97	
01	98				99		100	
01	101				102		103	
01	104				105		106	
01	107				108		109	
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01	125				126		127	
01	128				129		130	
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01	137				138		139	
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01	143				144		145	
01	146				147		148	
01	149				150		151	
01	152				153		154	
01	155				156		157	
01	158				159		160	
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01	164				165		166	
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01	464				465		466	
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01	470				471		472	
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01	482				483		484	
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01	662				663		664	
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01	680				681		682	
01	683				684		685	
01	686				687		688	
01	689				690		691	
01	692				693		694	
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01	701				702		703	
01	704				705		706	
01	707				708		709	

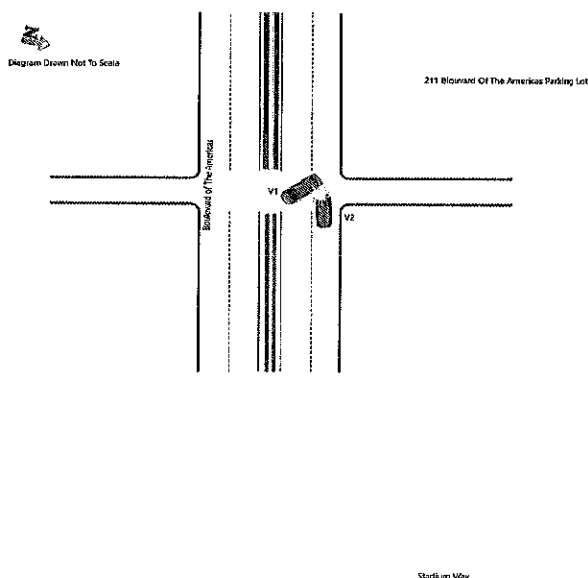
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-043761**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that she was attempting to make a left turn to out of the parking lot of 211 Boulevard Of The Americas. She did not see Vehicle 2 traveling west bound on Boulevard OF The Americas and pulled out in front of him when she was struck on the rear driver side door.

Driver 2 stated he was traveling west on Boulevard Of The Americas when Vehicle 1 attempted to make a left turn and pulled out in front of him causing the crash.

After my investigation I determined Driver 1 to be at fault for not yielding right of way to oncoming traffic and pulling out in front of Vehicle 2 causing the collision.

Driver 2 stated he had pain in his thumb and refused medical treatment. Vehicle 1 sustained disabling damage to the rear driver side door and quarter panel and was towed by Moshe's Towing. Vehicle 2 sustained disabling damage to the front end of the vehicle and was towed by Heshy's Towing.

End of report.

146 Officer's Signature

CAMACHO L

147 Badge #

430

148 Reviewer

CM

Badge #

332

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number		10 Crash Occurred On: 9TH ST		11 Speed Limit
97	22-043762				
01	2 Police Dept of		At Intersection With		12 Route No.
98	LAKEWOOD TOWNSHIP F01		Road Name		Suffix
01	3 Station/Precinct		Dir		13 Milepost
99			14		18 Speed Limit
00a	4 Date of Crash		5 Day Of Week		19
01	06/01/22		WEDNESDAY		To
100b	6 Time (use 2400 hrs)		7 Municipality Code		17 Cross Road Name
04	1801		1514		From
101	8 Total Killed		9 Total Injured		21 Latitude
02					22 Longitude
102	23 Veh #		24 Policy No.		25 NJ Ins. Code
04	1		6043232476		
103	26 Driver's First Name		27 Sex		53 Veh #
01	ANDREW		M		54 Policy No.
05	28 City		29 State		55 NJ Ins. Code
104	BALTIMORE		MD		148
2	30 Eyes		31 State		56 Driver's First Name
105	-		MD		NAFTALI
03	32 Driver's License Number		33 DOB		57 Number & Street
106	R152067497765		10/04/1998		121 LEONARD ST
107	34 Expires		35 Owner's First Name		58 City
01	27		ELIYAHU		LAKEWOOD
108	36 Number & Street		37 City		59 Sex
109	2809 BANE BERRY CT		BALTIMORE		M
110	38 Make		39 Model		60 Eyes
01	KIA		FORTE		2
111	40 Color		41 Year		61 State
01	4		2021		NJ
112	42 Plate No.		43 State		62 Driver's License Number
01	7ER1198		MD		T28215778807912
113	44 VIN		45 Expires		63 DOB
01	3KPF34AD3ME292055		06 23		07/07/1991
114	46 Vehicle Removed To		47 Authority		64 Expires
115	48 Alcohol/Drug Test		49 Hazardous Material		07
116	50 Carrier No.		51 GVWR/GCWR		24
03	52 Motor Carrier or Government Entity		53 GVWR/GCWR		65 Owner's First Name
117	54 Motor Carrier or Government Entity		55 GVWR/GCWR		Initial
02	56 Motor Carrier or Government Entity		57 GVWR/GCWR		Last Name
118	58 Motor Carrier or Government Entity		59 GVWR/GCWR		NAFTALI
119	60 Motor Carrier or Government Entity		61 GVWR/GCWR		Y
120	62 Motor Carrier or Government Entity		63 GVWR/GCWR		TESSLER
121	64 Motor Carrier or Government Entity		65 GVWR/GCWR		-
122	66 Motor Carrier or Government Entity		67 GVWR/GCWR		66 Number & Street
123	68 Motor Carrier or Government Entity		69 GVWR/GCWR		121 LEONARD ST
124	69 Motor Carrier or Government Entity		70 GVWR/GCWR		67 City
125	70 Motor Carrier or Government Entity		71 GVWR/GCWR		LAKEWOOD
126	71 Motor Carrier or Government Entity		72 GVWR/GCWR		State
127	72 Motor Carrier or Government Entity		73 GVWR/GCWR		NJ
128	73 Motor Carrier or Government Entity		74 GVWR/GCWR		Zip
129	74 Motor Carrier or Government Entity		75 GVWR/GCWR		08701
130	75 Motor Carrier or Government Entity		76 GVWR/GCWR		68 Make
131	76 Motor Carrier or Government Entity		77 GVWR/GCWR		TOYT
132	77 Motor Carrier or Government Entity		78 GVWR/GCWR		69 Model
133	78 Motor Carrier or Government Entity		79 GVWR/GCWR		CAM
134	79 Motor Carrier or Government Entity		80 GVWR/GCWR		70 Color
02	80 Motor Carrier or Government Entity		81 GVWR/GCWR		1
	81 Motor Carrier or Government Entity		82 GVWR/GCWR		71 Year
	82 Motor Carrier or Government Entity		83 GVWR/GCWR		2012
	83 Motor Carrier or Government Entity		84 GVWR/GCWR		72 Plate No.
	84 Motor Carrier or Government Entity		85 GVWR/GCWR		P96FVW
	85 Motor Carrier or Government Entity		86 GVWR/GCWR		73 State
	86 Motor Carrier or Government Entity		87 GVWR/GCWR		NJ
	87 Motor Carrier or Government Entity		88 GVWR/GCWR		74 VIN
	88 Motor Carrier or Government Entity		89 GVWR/GCWR		4T1BF1FK7CU149746
	89 Motor Carrier or Government Entity		90 GVWR/GCWR		75 Expires
	90 Motor Carrier or Government Entity		91 GVWR/GCWR		09 22
	91 Motor Carrier or Government Entity		92 GVWR/GCWR		76 Vehicle Removed To
	92 Motor Carrier or Government Entity		93 GVWR/GCWR		77 Authority
	93 Motor Carrier or Government Entity		94 GVWR/GCWR		Owner
	94 Motor Carrier or Government Entity		95 GVWR/GCWR		Driver
	95 Motor Carrier or Government Entity		96 GVWR/GCWR		Police
	96 Motor Carrier or Government Entity		97 GVWR/GCWR		78 Alcohol/Drug Test
	97 Motor Carrier or Government Entity		98 GVWR/GCWR		Given: No Yes Refused
	98 Motor Carrier or Government Entity		99 GVWR/GCWR		Type: Breath Blood Urine
	99 Motor Carrier or Government Entity		00 GVWR/GCWR		Results: 0. - % Pending
	00 Motor Carrier or Government Entity		01 GVWR/GCWR		Hazard Class
	01 Motor Carrier or Government Entity		02 GVWR/GCWR		Placard No.
	02 Motor Carrier or Government Entity		03 GVWR/GCWR		80 Carrier No.
	03 Motor Carrier or Government Entity		04 GVWR/GCWR		USDOT
	04 Motor Carrier or Government Entity		05 GVWR/GCWR		MC/MX
	05 Motor Carrier or Government Entity		06 GVWR/GCWR		None
	06 Motor Carrier or Government Entity		07 GVWR/GCWR		Weight <= 10,000 lbs
	07 Motor Carrier or Government Entity		08 GVWR/GCWR		Weight 10,001-26,000 lbs
	08 Motor Carrier or Government Entity		09 GVWR/GCWR		Weight >= 26,001 lbs

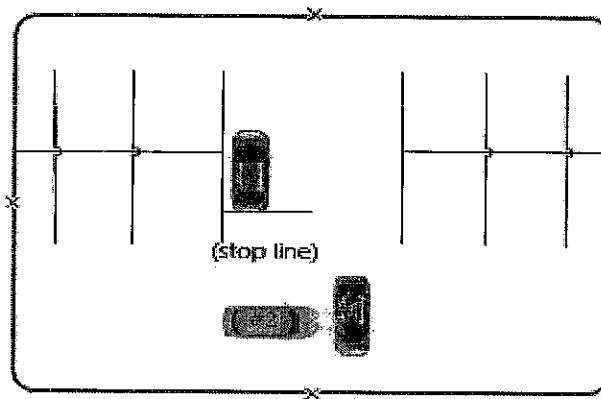
New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-043762**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

Clifton Ave & 9th St Municipal Parking Lot



145 Crash Description/Narrative

The driver of Vehicle 1 was traveling south through the parking lot when he stopped at the designated stopping point (no stop sign). After checking to ensure it was safe to proceed, Vehicle 1 continued south and crashed into Vehicle 2 who was traveling east through the parking lot. The driver of Vehicle 1 stated that his view was obstructed by an improperly parked vehicle, which there was, but Vehicle 1 still proceeded into Vehicle 2's lane of travel.

The driver of Vehicle 2 was traveling east in the parking lot when Vehicle 1 crossed in front of his lane of travel and caused the crash. Based on my observations and speaking with the parties involved, I determined that Vehicle 1, although had an obstructed view, entered into Vehicle 2's lane of travel who had the right of way and caused the crash.

Box #99: Municipal parking lot
V1 NAIC #:41491

146 Officer's Signature

NICKERSON, K

147 Badge #

378

148 Reviewer

CM

Badge #

332

149 Case Status

☐ Pending ☒ Complete

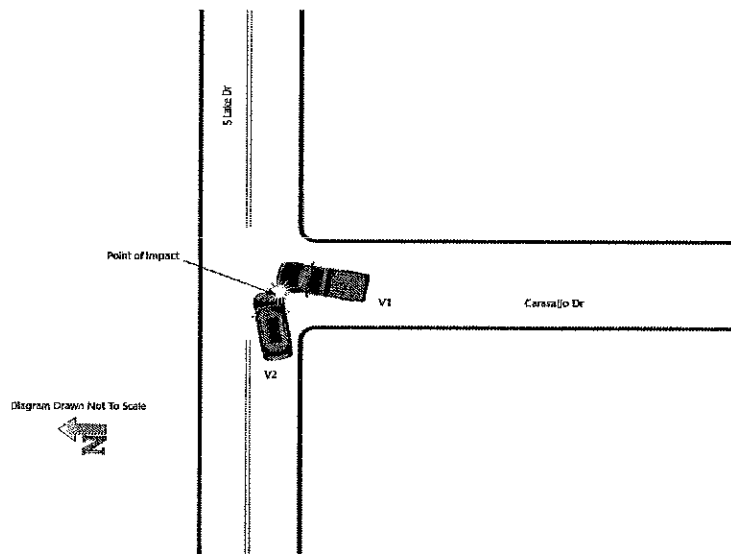
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-043774**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 was traveling east bound on S. lake Dr when it struck V1 on the front left fender.

Driver of v1 stated that he was traveling east bound on S. Lake Dr; as he approached the intersection of S. Lake Dr & Carasaljo Dr he attempted to make a U-turn when his vehicle was struck on the front left fender.

Driver of v2 stated that he was traveling east bound on S. Lake D-r when he struck v1 on the left front fender. He stated that v1 made a sharp U-turn and he did not have time to avoid the vehicle resulting in him colliding with v1.

Based on drivers statements I determine driver of v1 is at fault due to making an improper u-turn at the intersection.

146 Officer's Signature

CARRINGTON K

147 Badge #

431

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

03	1 Case Number	22-043794	10 Crash Occurred On: CROSS ST	11 Speed Limit	45	118a
01	2 Police Dept of	Code	☒ At Intersection With	Road Name	Dir	04
98	LAKEWOOD TOWNSHIP	01	☐ Feet	☐ N ☐ E of: PROSPECT ST	12 Route No.	118b
07	3 Station/Precinct		☐ Miles	☐ S ☐ W	19 Ramp	119a
05	4 Date of Crash	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	25
100a	mm dd yy				9 Total Injured	119b
01	06/01/22	WEDNESDAY	2123	1514	--	
04	23 Veh #	24 Policy No.	25 NJ Ins. Code	53 Veh #	54 Policy No.	01
101	1	107 0566-D25-30A	962	2	4504-94-23-45	120a
02	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run			☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		120b
102	26 Driver's First Name	Initial	Last Name	56 Driver's First Name	Initial	Last Name
02	ISAAC	N	SOCHACZEWSKI	AVRAHAM	Y	MARGOLIS
103	27 Number & Street			57 Number & Street		
02	10 CHARDONNAY CT			36 TOVA DR		01
104	28 City	State	Zip	58 City	State	Zip
2	LAKEWOOD	NJ	08701	LAKEWOOD	NJ	08701
105	30 Eyes	DL Class	Restrictions	Endorsements	31 State	
03	6	D	-	-	NJ	122
106	32 Driver's License Number	33 DOB	34 Expires	62 Driver's License Number	63 DOB	64 Expires
-	S60403707508866	mm dd yyyy	mm yy	M05880718809782	mm dd yyyy	mm yy
107	35 Owner's First Name	Initial	Last Name	65 Owner's First Name	Initial	Last Name
-	ISAAC	N	SOCHACZEWSKI	AVRAHAM	Y	MARGOLIS
108	36 Number & Street			66 Number & Street		
01	10 CHARDONNAY CT			36 TOVA DR		04
109	37 City	State	Zip	67 City	State	Zip
01	LAKEWOOD	NJ	08701	LAKEWOOD	NJ	08701
110	38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State
01	NISS	SEN - SE	BLK	2019	A68PUH	NJ
111	44 VIN	45 Expires		74 VIN	75 Expires	
01	3N1AB7AP6KL604194	03	23	5TDKK3DC4ES434726	07	23
112	46 Vehicle Removed To			76 Vehicle Removed To		
-	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded			☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		
113	☒ Left At Scene ☐ Towed Impounded			☒ Left At Scene ☐ Towed Impounded		
114	47 Authority			77 Authority		
-	☐ Owner ☒ Driver ☐ Police			☐ Owner ☐ Driver ☐ Police		
115	48 Alcohol/Drug Test			78 Alcohol/Drug Test		
-	Given: ☒ No ☐ Yes ☐ Refused			Given: ☒ No ☐ Yes ☐ Refused		
116	Type: ☐ Breath ☐ Blood ☐ Urine			Type: ☐ Breath ☐ Blood ☐ Urine		
03	Results: 0. - % ☐ Pending			Results: 0. - % ☐ Pending		
117	50 Carrier No.			80 Carrier No.		
04	☐ USDOT ☒ None			☐ USDOT ☒ None		
	☐ MC/MX ☐			☐ MC/MX ☐		
	51 GVWR/GCWR			81 GVWR/GCWR		
	☒ Weight <= 10,000 lbs			☒ Weight <= 10,000 lbs		
	☐ Weight 10,001-26,000 lbs			☐ Weight 10,001-26,000 lbs		
	☐ Weight >= 26,001 lbs			☐ Weight >= 26,001 lbs		
	52 Motor Carrier or Government Entity			82 Motor Carrier or Government Entity		
	Number & Street			Number & Street		
	City	State	Zip	City	State	Zip
	135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No				
	Oper.	136 Charge	137 Summons. No.	Oper.	138 Charge	139 Summons. No.
	1	39:4-97	292665	2		
	Oper.	140 Charge	141 Summons. No.	Oper.	142 Charge	143 Summons. No.
A	83	84	85	86	87	88
	1	01	01	05	35	M
B	2	01	01	03	43	M
C						
D						
	Names & Addresses of Occupants - If Deceased, Date & Time of Death					
	ISAAC N SOCHACZEWSKI					
	10 CHARDONNAY CT LAKEWOOD NJ 08701					
	AVRAHAM Y MARGOLIS					
	36 TOVA DR LAKEWOOD NJ 08701					

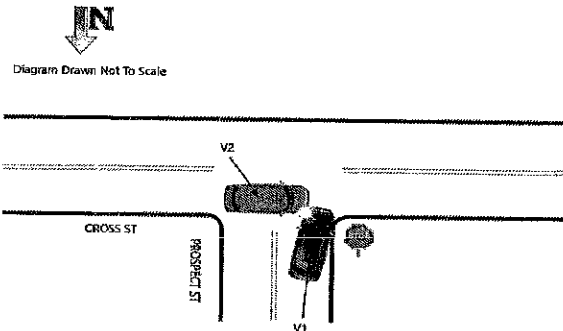
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-043794**

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 was traveling west bound on Cross St approaching the intersection of Cross St and Prospect St. V1 was stopped at a stop sign on Prospect St at the intersection of Prospect St and Cross St waiting to turn right onto Cross St. As V2 reached the intersection with the intent to travel through it, V1 drove out onto Cross St directly in front of V2. The front bumper of V2 struck the driver's side front corner of V1 causing visible damage to both vehicles.

146 Officer's Signature

MACERINO J

147 Badge #

326

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending☒ Complete

PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report	
05	1 Case Number		22-036372		10 Crash Occurred On: RIVER AVE		11 Speed Limit 45		12 Route No.		Suffix		13 Milepost		18 Speed Limit 25		118a		
97	2 Police Dept of LAKEWOOD TOWNSHIP		Code 01		☐ At Intersection With		Road Name HADASSAH		Dir		17 Cross Road Name		19 To		20 Route/Name		118b		
01	3 Station/Precinct		10		☒ Feet		☐ N ☐ E of: 16		19 Ramp		21 Latitude		22 Longitude		NB ☐ EB ☐ SB ☐ WB		119a		
01	4 Date of Crash 05/06/22		5 Day Of Week FRIDAY		6 Time (use 2400 hrs) 1153		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		40.067766		-74.218413		119b		
02	23 Veh # P1		24 Policy No.		25 NJ Ins. Code		53 Veh # 2		54 Policy No. 939 524 279		55 NJ Ins. Code 054						120a		
04	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										120b		
02	26 Driver's First Name YEHUDA		Initial - Last Name ALON		29 Sex M		56 Driver's First Name DANIEL		Initial A Last Name WEINBERGER		59 Sex M						121a		
02	27 Number & Street 512 FOREST AVE APT A-4		State NJ Zip 08701				57 Number & Street 172 HADASSAH LN		State NJ Zip 08701								121b		
02	28 City LAKEWOOD						58 City LAKEWOOD										-		
1	30 Eyes 2		DL Class D		Restrictions -		Endorsements -		61 State NJ								122		
05	32 Driver's License Number A55257890004962		33 DOB 04/03/1996		34 Expires 12/23		62 Driver's License Number W22801536102782		63 DOB 02/06/1978		64 Expires 02/23						123		
07	35 Owner's First Name		Initial Last Name				65 Owner's First Name DANIEL		Initial A Last Name WEINBERGER								124		
106	☐ Same As Driver						☐ Same As Driver										125		
107	36 Number & Street						66 Number & Street 172 HADASSAH LN										126a		
108	37 City		State Zip				67 City LAKEWOOD		State NJ Zip 08701								126b		
109	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make TOYT		69 Model HIG		70 Color SIL		
01	44 VIN		45 Expires				74 VIN 5TDGZRBH6NS575767		75 Expires 04/25				71 Year 2022		72 Plate No. E42PWG		73 State NJ		
110	46 Vehicle Removed To						76 Vehicle Removed To										126c		
111	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded						☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										126d		
112	☐ Left At Scene ☐ Towed Impounded						☐ Left At Scene ☐ Towed Impounded										126e		
113	47 Authority		☐ Owner ☐ Driver ☐ Police				77 Authority		☐ Owner ☐ Driver ☐ Police								127a		
114	48 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused		49 Hazardous Material		78 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused		79 Hazardous Material		☐ None ☐ On Board ☐ Spill				127b		
115	Type: ☐ Breath ☐ Blood ☐ Urine				Hazard Class		Type: ☐ Breath ☐ Blood ☐ Urine				Hazard Class		Placard No.				127c		
116	Results: 0. % ☐ Pending				Placard No.		Results: 0. % ☐ Pending				Placard No.						127d		
01	50 Carrier No.		☐ USDOT ☒ None		51 GVWR/GCWR		80 Carrier No.		☐ USDOT ☒ None		81 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		127e		
04	☐ MC/MX				☐ Weight >= 26,001 lbs		☐ MC/MX				☐ Weight >= 26,001 lbs						128		
	52 Motor Carrier or Government Entity						82 Motor Carrier or Government Entity										129		
	Number & Street						Number & Street										130		
	City		State Zip				City		State Zip								131		
	135 Damage To Other Property		☐ Yes (If Yes, describe) ☐ No														132		
	Oper. 136 Charge		137 Summons. No.		Oper. 138 Charge		139 Summons. No.										133		
	Open. 140 Charge		141 Summons. No.		Oper. 142 Charge		143 Summons. No.										134		
	83		84		85		86		87		88		89		90		135		
A																			

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-036372**

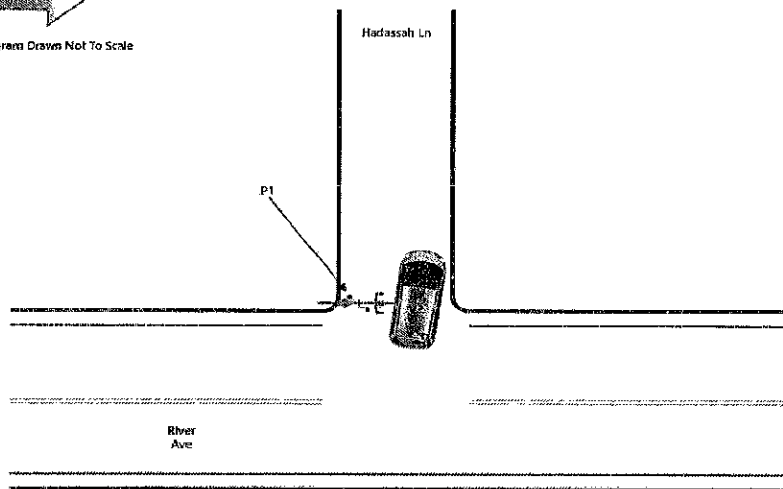
(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

P1 was operating an electric scooter north bound on the south bound shoulder of River Ave and drove the scooter into the side of vehicle 2. There were no injuries reported or observed.

The driver of vehicle 2 was traveling north bound on River Ave. making a left turn onto Hadassah Ln west bound when P1 drove into the side of 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 of the vehicle.

Based on driver statements I find P1 at fault of the crash for operating the scooter on the wrong side of the road.

146 Officer's Signature

MOONEY JR M

147 Badge #

330

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number		22-036403		10 Crash Occurred On: JAMES ST		11 Speed Limit 35	
01	2 Police Dept of		LAKEWOOD TOWNSHIP F01		12 Route No. 13 Milepost		18 Speed Limit 25	
01	3 Station/Precinct				14 At Intersection With		15 Feet	
05	4 Date of Crash		05/06/22		5 Day of Week		FRIDAY	
01	6 Time (use 2400 hrs)		1425		7 Municipality Code		1514	
01	8 Total Killed		--		9 Total Injured		--	
01	21 Latitude		40.079689		22 Longitude		-74.220761	
04	23 Veh #		1		24 Policy No.		6068-92-44-86	
01	25 NJ Ins. Code		148		53 Veh #		2	
01	54 Policy No.		6060-33-48-41		55 NJ Ins. Code		100	
02	26 Driver's First Name		YOSEPH		27 Sex		M	
02	56 Driver's First Name		TALEYA		57 Sex		F	
02	27 Number & Street		34 CAPITAL LN		57 Number & Street		2 ISABELLA DR	
02	28 City		LAKEWOOD		58 City		LAKEWOOD	
02	29 State		NJ		59 State		NJ	
02	30 Zip		08701		60 Zip		08701	
02	31 State		NY		61 State		NJ	
07	32 Driver's License Number		824485438		62 Driver's License Number		H62577326451002	
07	33 DOB		01/20/1993		63 DOB		01/04/2000	
07	34 Expires		01		64 Expires		01	
07	35 Owner's First Name		YOSEPH		65 Owner's First Name		TALEYA	
07	36 Number & Street		34 CAPITAL LN		66 Number & Street		2 ISABELLA DR	
07	37 City		LAKEWOOD		67 City		LAKEWOOD	
07	38 Make		TOYT		68 Make		HOND	
07	39 Model		SIE		69 Model		ACC - AC	
07	40 Color		GRY		70 Color		WHI	
07	41 Year		2017		71 Year		2016	
07	42 Plate No.		B72PVN		72 Plate No.		X45LYZ	
07	43 State		NJ		73 State		NJ	
07	44 VIN		5TDKZ3DC9HS839237		74 VIN		1HGCR2F78GA214212	
07	45 Expires		04		75 Expires		11	
07	46 Vehicle Removed To		MOSHY'S		76 Vehicle Removed To		MOSHY'S	
07	47 Authority		Owner		77 Authority		Owner	
07	48 Alcohol/Drug Test		Given: No		78 Alcohol/Drug Test		Given: No	
07	49 Hazardous Material		None		79 Hazardous Material		None	
07	50 Carrier No.		USDOT		80 Carrier No.		USDOT	
07	51 GVWR/GCWR		Weight <= 10,000 lbs		81 GVWR/GCWR		Weight <= 10,000 lbs	
07	52 Motor Carrier or Government Entity		No		82 Motor Carrier or Government Entity		No	
07	53 Number & Street		34 CAPITAL LN		83 Number & Street		34 CAPITAL LN	
07	54 City		LAKEWOOD		84 City		LAKEWOOD	
07	55 State		NJ		85 State		NJ	
07	56 Zip		08701		86 Zip		08701	
07	57 Damage To Other Property		No		87 Damage To Other Property		No	
07	58 Operator		136 Charge		88 Operator		138 Charge	
07	59 Summons No.		137 Summons No.		89 Operator		139 Summons No.	
07	60 Operator		140 Charge		90 Operator		142 Charge	
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07	213 Summons No.		422 Summons No.		243 Operator		423 Charge	
07	214 Operator		423 Charge		244 Operator		424 Charge	
07	215 Summons No.		424 Summons No.		245 Operator		425 Charge	
07	216 Operator		425 Charge		246 Operator		426 Charge	
07	217 Summons No.		426 Summons No.					

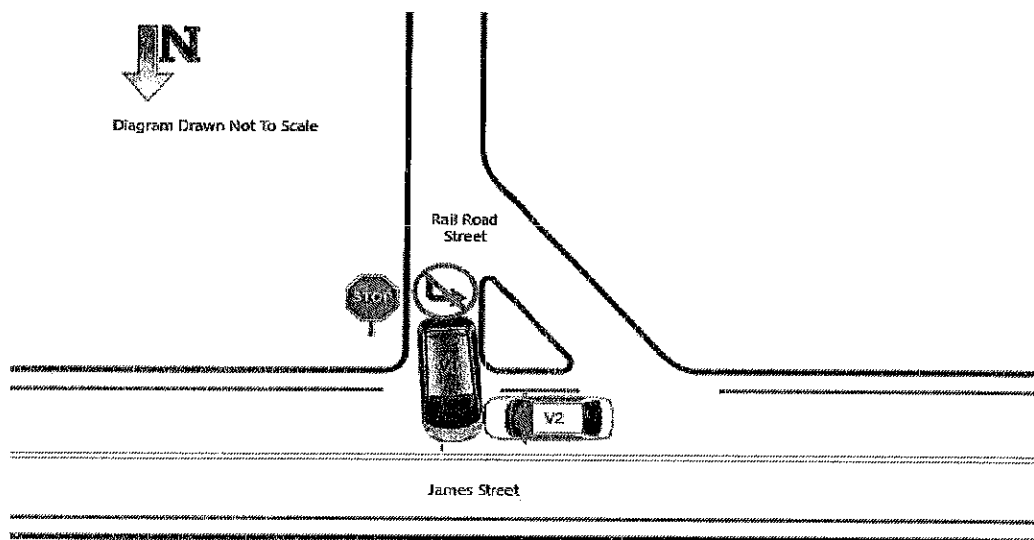
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-036403**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle 1 stated that he was stopped at the intersection of Rail Road Street and James Street attempting to make a left turn on to James Street, 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 disabling damage and was towed by a private tow company.

The driver of vehicle 2 stated that she was traveling east bound on James Street when vehicle 1 pulled out in front of her causing the crash. There were no injuries reported or observed to the occupant of vehicle 2. Vehicle 2 sustained what appeared to be moderate damage to the front end and was towed by a private tow company.

Based on driver statements I find driver 1 at fault of the crash for improper left turn and failure to yield the right of way to vehicle 2.

146 Officer's Signature

MOONEY JR M

147 Badge #

330

148 Reviewer

WB

Badge #

306

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 3		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																													
97	1 Case Number				10 Crash Occurred On: HOPE CHAPEL RD										11 Speed Limit		12 Route No.		13 Milepost		118a																																											
01	22-043550														30		0639				25																																											
98	2 Police Dept of				10 Crash Occurred On: HOPE CHAPEL RD										11 Speed Limit		12 Route No.		13 Milepost		118b																																											
07	LAKEWOOD TOWNSHIP #01														30		0639				-																																											
99	3 Station/Precinct				10 Crash Occurred On: HOPE CHAPEL RD										11 Speed Limit		12 Route No.		13 Milepost		119a																																											
05	---														30		0639				25																																											
100a	4 Date of Crash				5 Day Of Week				6 Time (use 2400 hrs)				7 Municipality Code				8 Total Killed				9 Total Injured				21 Latitude				22 Longitude				119b																															
01	05/31/22				TUESDAY				2141				1514				--				1				40.104775				-74.244076				-																															
100b	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				120a																																							
04	1				92032922CU				141				2				4100-54-90-23				639				01																																							
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run				☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																				120b																																							
02	26 Driver's First Name				Initial Last Name				29 Sex				56 Driver's First Name				Initial Last Name				59 Sex				121a																																							
01	ALEXANDER				J MOLLINEA				-				M				MOSHE				-				CHAZON				01																																			
103	27 Number & Street				State Zip				57 Number & Street				State Zip				58 City				State Zip				121b																																							
01	11 SAWGRASS ST				NJ 08527				25 ROOSEVELT CT				NY 10314				STATEN ISLAND				NY 10314				01																																							
104	28 City				State Zip				58 City				State Zip				59 Sex				State Zip																																											
3	JACKSON				NJ 08527				STATEN ISLAND				NY 10314																																																			
105	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State				122																							
01	4				D				-				-				NJ				2				-				-				NY				08																											
106	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires				123																																							
01	M62770197102054				02/12/2005				02 26				672935436				03/30/2000				03 30				08																																							
107	35 Owner's First Name				Initial Last Name				65 Owner's First Name				Initial Last Name				124																																															
-	☐ Same As Driver				STEPHANIE L LEVINE				☐ Same As Driver				YANIV - CHAZON				-				03																																											
108	36 Number & Street				State Zip				66 Number & Street				State Zip				125																																															
01	11 CANTERBURY DRIVE				NJ 07728				25 ROOSEVELT CT STATEN ISLAND				NY 10314				03																																															
109	37 City				State Zip				67 City				State Zip				126a																																															
04	FREEHOLD				NJ 07728				ISLAND				NY 10314				26																																															
110	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				68 Make				69 Model				70 Color				71 Year				72 Plate No.				73 State				126b															
01	BMW				3				BLK				2018				M60PRL				NJ				KIA				FRT				GRY				2020				JPR7567				NY																			
111	44 VIN				45 Expires				74 VIN				75 Expires				126c																																															
01	WBA8D9C57JA615706				01 23				3KPF24AD3LE144361				03 24																																																			
112	46 Vehicle Removed To				76 Vehicle Removed To				126d																																																							
-	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				☒ Left At Scene ☐ Towed Impounded				☐ Towed Disabled & Impounded				126e																																															
113	47 Authority				77 Authority				126f																																																							
-	☐ Owner ☒ Driver ☐ Police				☐ Owner ☒ Driver ☐ Police				26																																																							
114	48 Alcohol/Drug Test				49 Hazardous Material				78 Alcohol/Drug Test				79 Hazardous Material				127a																																															
-	Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill				Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill				26																																															
115	Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				26																																															
116	Results: 0. - % ☐ Pending				Hazard Class Placard No.				Results: 0. - % ☐ Pending				Hazard Class Placard No.				127c																																															
03	50 Carrier No.				51 GVWR/GCWR				80 Carrier No.				81 GVWR/GCWR				127d																																															
03	☐ USDOT ☐ MC/MX				☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				☐ USDOT ☐ MC/MX				☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				127e																																															
117	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity				128																																																							
118	Number & Street				Number & Street				129																																																							
119	City				City				130																																																							
120	State				State				131																																																							
121	Zip				Zip				132																																																							
122	135 Damage To Other Property				☐ Yes (If Yes, describe) ☒ No				133																																																							
123	Oper. 136 Charge				137 Summons. No.				Oper. 138 Charge				139 Summons. No.				12																																															
124	Oper. 140 Charge				141 Summons. No.				Oper. 142 Charge				143 Summons. No.				02																																															
125	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death				03							
A	1				01				01				05				17				M				-				-				-				11				04				-				-				ALEXANDER J MOLLINEA				-							
B	2				01				01				05				22				M				-				-				-				11				04				-				-				MOSHE - CHAZON				-							
C	2				03				01				03				20				F				01				08				01				11				04				-				-				LIBA - ALFIE				-							
D																																																									3 LUCERNE DR LAKEWOOD NJ 08701							

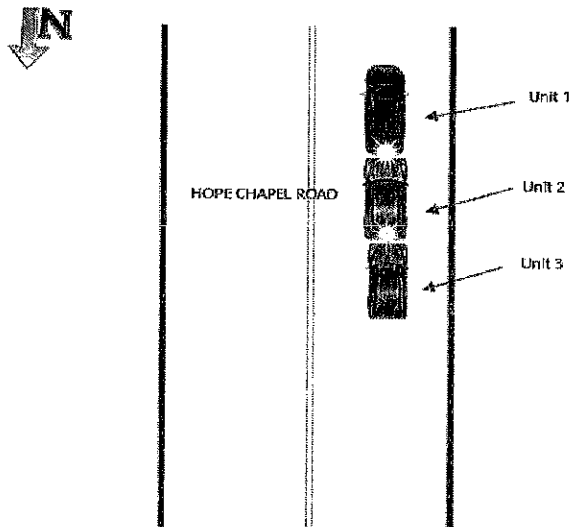
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **--** Case No: **22-043550**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	3	06	01	05	16	F	-	-	-	11	04	-	-	RUTI BERGER 11 ROCKBRIDGE RD LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS STOPPED IN TRAFFIC ON HOPE CHAPEL ROAD FACING SOUTH, WHEN VEHICLE #2 STRUCK VEHICLE #1 FROM BEHIND. DRIVER #2 STATED THAT HE WAS ALSO STOPPED IN TRAFFIC, WHEN VEHICLE #3 TRAVELING SOUTH ON HOPE ROAD STRUCK VEHICLE #2 FROM BEHIND CAUSING VEHICLE #2 TO STRIKE VEHICLE #1 FROM BEHIND. DRIVER #3 STATED THAT HE WAS UNABLE TO SEE DUE TO A VEHICLE TRAVELING NORTH ON HOPE CHAPEL ROAD WITH THEIR HIGH BEAMS CAUSING VEHICLE #3 TO STRIKE VEHICLE #2 AND VEHICLE #2 STRIKING VEHICLE #1. PASSENGER FROM VEHICLE #2 COMPLAINED OF SHOULDER AND HEAD PAIN BUT REFUSED FURTHER TREATMENT.

146 Officer's Signature

RIVERA F

147 Badge #

294

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending
 ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number		22-043915		10 Crash Occurred On: BENNINGTON LN		11 Speed Limit 25	118a 25
97	2 Police Dept of		LAKEWOOD TOWNSHIP		12 Route No.		13 Milepost 25	118b -
01	3 Station/Precinct		01		14 At Intersection With		15 Road Name	118c -
98	4 Date of Crash		06/02/22		16 Time (use 2400 hrs)		17 Municipality Code	118d 16
01	5 Day Of Week		THURSDAY		18 Total Killed		19 Total Injured	118e -
99	6 Time		0904		7 Municipality Code		8 Total Killed	118f -
07	9 Total Injured		--		10 Latitude		11 Longitude	118g -
100a	12 Route/Name		MONTICELLO LN		13 Cross Road Name		14 NB	118h -
01	15 From		40.052134		16 To		17 SB	118i -
100b	18 From		-74.228713		19 NB		20 EB	118j -
04	21 Latitude		40.052134		22 Longitude		23 WB	118k -
101	24 Policy No.		648807653		25 NJ Ins. Code		26 Hit & Run	118l -
101b	27 Number & Street		1114 E 24TH ST		28 City		29 State	118m -
02	30 Eyes		02		31 State		32 Zip	118n -
101c	33 Driver's License Number		976838717		34 DOB		35 Expires	118o -
102	36 Number & Street		18 BUTLER BLVD		37 City		38 State	118p -
01	39 Model		SON		40 Color		41 Year	118q -
103	42 Plate No.		U45PTM		43 State		44 VIN	118r -
05	45 Expires		02		46 Vehicle Removed To		47 Authority	118s -
104	48 Alcohol/Drug Test		Given: No		49 Hazardous Material		50 Carrier No.	118t -
2	51 GVWR/GCWR		None		52 Motor Carrier or Government Entity		53 GVWR/GCWR	118u -
105	54 VIN		5NPEH4J22NH140339		55 GVWR/GCWR		56 GVWR/GCWR	118v -
03	57 GVWR/GCWR		None		58 GVWR/GCWR		59 GVWR/GCWR	118w -
106	60 GVWR/GCWR		None		61 GVWR/GCWR		62 GVWR/GCWR	118x -
107	63 GVWR/GCWR		None		64 GVWR/GCWR		65 GVWR/GCWR	118y -
108	66 GVWR/GCWR		None		67 GVWR/GCWR		68 GVWR/GCWR	118z -
01	69 GVWR/GCWR		None		70 GVWR/GCWR		71 GVWR/GCWR	119a -
109	72 GVWR/GCWR		None		73 GVWR/GCWR		74 GVWR/GCWR	119b -
110	75 GVWR/GCWR		None		76 GVWR/GCWR		77 GVWR/GCWR	119c -
02	78 GVWR/GCWR		None		79 GVWR/GCWR		80 GVWR/GCWR	119d -
01	81 GVWR/GCWR		None		82 GVWR/GCWR		83 GVWR/GCWR	119e -
111	84 GVWR/GCWR		None		85 GVWR/GCWR		86 GVWR/GCWR	119f -
112	87 GVWR/GCWR		None		88 GVWR/GCWR		89 GVWR/GCWR	119g -
113	90 GVWR/GCWR		None		91 GVWR/GCWR		92 GVWR/GCWR	119h -
114	93 GVWR/GCWR		None		94 GVWR/GCWR		95 GVWR/GCWR	119i -
115	96 GVWR/GCWR		None		97 GVWR/GCWR		98 GVWR/GCWR	119j -
116	99 GVWR/GCWR		None		100 GVWR/GCWR		101 GVWR/GCWR	119k -
117	102 GVWR/GCWR		None		103 GVWR/GCWR		104 GVWR/GCWR	119l -
04	105 GVWR/GCWR		None		106 GVWR/GCWR		107 GVWR/GCWR	119m -
135 Damage To Other Property								119n -
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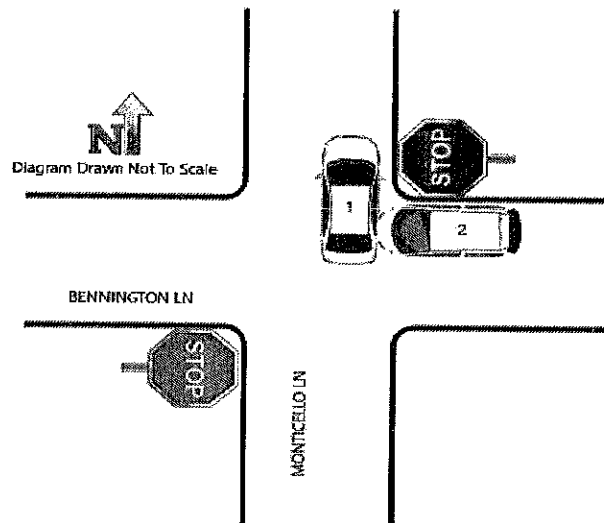
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-043915

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was traveling North on Monticello Ln at the intersection with Bennington Ln. Vehicle #2 was traveling West on Bennington Ln at the intersection with Monticello Ln. Vehicle #2 had a stop sign. The vehicles collided in the intersection. Driver #1 stated that vehicle #2 did not stop at the stop sign. Driver #2 stated that he had stopped at the stop sign but he did not see vehicle #1 because it was moving fast. Driver #1 failed to obey the stop or yield at the stop sign causing the crash.

146 Officer's Signature

PRZEWOZNIK J

147 Badge #

308

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

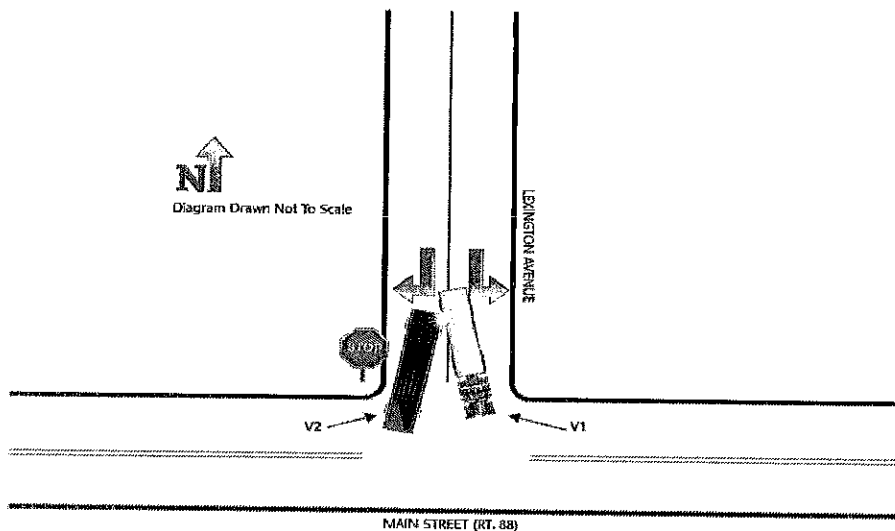
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-043917**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle 1 stated he was attempting to make a wide left turn in the direction of east onto Main Street when his vehicle made contact with vehicle 2.

The driver of vehicle 2 stated he was already in the process of turning west onto Main Street when he observed vehicle 1 in his rear-view mirror attempting to make a wide turn ultimately making contact with his vehicle.

Upon my investigation, I can conclude that the driver of vehicle 1 is at fault for failing to yield to the right of way of vehicle 2.

NO INJURIES REPORTED AT THE SCENE.

Vehicle 2*

**SELF INSURED
NJ TRANSIT BUS OPERATIONS
ONE PENN PLAZA EAST, NEWARK NJ 07105**

146 Officer's Signature

VEGA B

147 Badge #

428

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

BUS SEATING ARRANGEMENT

**MCI-9, EAGLE
&
FLXIBLE**

**FLXIBLE TRANSIT
&
NOVA 06**

VOLVO ARTIC

1	LEILANI	SOTO
2	PETER	SAVAGE
3	APRIL	BARNES
4	FRANCO	MARTINES
5	JP	DEVITO
6	ANTHONY	MACCARACKA
7		
8		
9		
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				DOOR
1	2	23	24	
3	4	25	26	
5	6	27	28	
7	8	29	30	
9	10	31	32	
11	12	33	34	
13	14	35	36	
15	16	37	38	
17	18	39	40	
19	20	41	42	
21	22	43	44	
45	46	47	48	49

				DOOR
1		21		
2		22		
3		23		
4		24		
5		25		
6		26	27	
7	8	28	29	
9	10	30	31	
11	12	32	33	
13	14	DOOR		
15	16	34		
17	18	35		
19	20	36		
21		37		
22		38		
39	40	41	42	43

				DOOR
1			37	
2			38	
3			39	
4			40	
5			41	
6			42	
7			43	
8			44	
9	10			DOOR
11	12			
13	14		45	46
15	16		47	
17			48	
18			49	50
19	20		51	
21			52	
22			53	54
23	24		55	56
25	26			DOOR
27	28			
29	30		57	58
31	32			
33			59	
34			60	
35	36		61	62
63	64	65	66	

Rear

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report		☒ Reportable		☐ Non-Reportable		☐ Change Report		
05	1 Case Number				10 Crash Occurred On:				11 Speed Limit				118a
97	22-043932				NEW HAMPSHIRE AVE				50				00
01	2 Police Dept of				At Intersection With				Dir				118b
98	LAKEWOOD TOWNSHIP F01				☐ Feet				STATE HWY 70				00
01	3 Station/Predinct				☒ Miles				17 Cross Road Name				119a
99					☒ S								00
05	4 Date of Crash				5 Day Of Week				6 Time				119b
100a	06/02/22				THURSDAY				1043				00
01					7 Municipality Code				8 Total Killed				120a
					1514				--				01
100b	23 Veh #				24 Policy No.				25 NJ Ins. Code				01
04	1				6082232092061				010				01
101	☐ Parked				☐ Ped				☐ Pedalcyclist				01
02	26 Driver's First Name				Initial				Last Name				121a
102	SHIRLEY				S				ARYEH				01
01	27 Number & Street				29 Sex				56 Driver's First Name				121b
103	1709 SYMPHONY LANE				F				JOSE				01
01	28 City				State				57 Number & Street				121b
104	TOMS RIVER				NJ				314 LIVINGSTON ST APT 3				01
2	30 Eyes				DL Class				Restrictions				122
	2				D				-				01
105	32 Driver's License Number				33 DOB				34 Expires				123
01	A77057088255902				05/03/1990				05 25				01
	35 Owner's First Name				Initial				Last Name				124
106	YEHONATTA				D				ARYEH				04
107	36 Number & Street				66 Number & Street				314 LIVINGSTON ST APT 3				125
108	37 City				State				Zip				04
01	TOMS RIVER				NJ				08755				126a
109	38 Make				39 Model				40 Color				126b
03	TOYT				SIE				1				26
110	44 VIN				45 Expires				74 VIN				126c
01	5TDYRKEC9MS051801				07 25				1FBSS3BL38DB37347				126d
111	46 Vehicle Removed To				76 Vehicle Removed To				75 Expires				126e
02	ALL STATE TOWING				☒ Driven				☐ Towed Disabled				127a
112	☐ Left At Scene				☐ Towed Impounded				☐ Towed Disabled & Impounded				127b
113	47 Authority				77 Authority				☒ Owner				127c
114	☒ Owner				☐ Driver				☐ Police				127d
115	48 Alcohol/Drug Test				78 Alcohol/Drug Test				79 Hazardous Material				127e
116	Given: ☒ No				Given: ☒ No				☒ None				26
03	Type: ☐ Breath				Type: ☐ Breath				☐ On Board				127b
117	Results: 0. - %				Results: 0. - %				☐ Spill				127c
03	50 Carrier No.				51 GVWR/GCWR				80 Carrier No.				127d
	☐ USDOT				☒ Weight <= 10,000 lbs				☐ USDOT				127e
	☐ MC/MX				☐ Weight 10,001-26,000 lbs				☐ MC/MX				26
					☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs				128
	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity								129
	Number & Street				Number & Street								01
	City				State				Zip				130
													12
	135 Damage To Other Property				☐ Yes (If Yes, describe)				☒ No				07
	Oper.				136 Charge				137 Summons. No.				132
													07
	Oper.				140 Charge				141 Summons. No.				133
													04
	Oper.				142 Charge				143 Summons. No.				134
													02
	83				84				85				Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	01				01				05				SHIRLEY S ARYEH
B	01				05				05				1709 SYMPHONY LANE TOMS RIVER NJ 08755
C	01				01				05				ZECHARIA ARYEH
D	01				01				05				1709 SYMPHONY LANE TOMS RIVER NJ 08755
	01				01				05				JOSE F RODRIQUEZ
	01				01				05				314 LIVINGSTON ST APT ELIZABETH NJ 07206

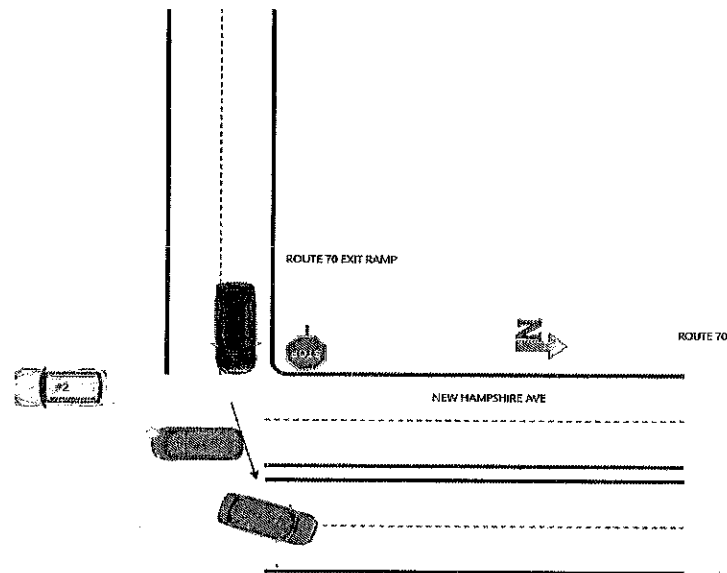
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-043932**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated she was traveling south on New Hampshire Ave in the left lane and noticed a red car stopped in the middle of the road and then she hit a white van in front of her. She believes the white van swerved in to her lane from the right lane. Driver #2 stated he was traveling south on New Hampshire Ave in the right lane and a red vehicle was making a left to head north on New Hampshire Ave but had to wait for traffic so was stopped in his lane of travel. He swerved right around the back of the red vehicle and avoided hitting it but Veh #2 struck him from behind. Both recollections could have happened and based on the damage to Veh #2, Veh #1 could have been behind his. The diagram depicts the resting point of vehicles involved. No witnesses could provide pertinent information of the crash and the red vehicle continued on it way and was not on scene at time of the crash.

146 Officer's Signature

PREBISH J

147 Badge #

275

148 Reviewer

DTWORKOSKI

Badge #

249

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		22-043953		10 Crash Occurred On:		RIDGE AVENUE		118a
01	2 Police Dept of		LAKEWOOD TOWNSHIP		11 Speed Limit		45		25
01	3 Station/Precinct		F01		12 Route No.		50		118b
05	4 Date of Crash		06/02/22		13 Milepost		50		119a
01	5 Day Of Week		THURSDAY		14		15		04
01	6 Time (use 2400 hrs)		1223		16		17		06
01	7 Municipality Code		1514		18		19		01
01	8 Total Killed		--		20 Route/Name		-74.171577		120a
01	9 Total Injured		--		21 Latitude		40.101679		120b
01	23 Veh #		1		24 Policy No.		GOAU297844		01
01	25 NJ Ins. Code		187		26 Driver's First Name		AGUSTIN		121a
01	27 Number & Street		113 EASY ST		28 City		HOWELL		121b
01	29 Sex		M		30 Eyes		1		01
01	31 State		NJ		32 Driver's License Number		X60460140008791		02
01	33 DOB		08/30/1979		34 Expires		08 25		122
01	35 Owner's First Name		GOLDEN FLUFF INC		36 Number & Street		118 MONMOUTH AVE		02
01	37 City		LAKEWOOD		38 Make		HINO		123
01	39 Model		L6		39 Model		L6		124
01	40 Color		WHI		41 Year		2021		03
01	42 Plate No.		XJUG90		43 State		NJ		125
01	44 VIN		5PVNJ8AV6M5T50866		45 Expires		01 23		126
01	46 Vehicle Removed To		118 MONMOUTH AVE		47 Authority		Driver		126a
01	48 Alcohol/Drug Test		Given: No		49 Hazardous Material		None		126b
01	49 Hazardous Material		None		50 Carrier No.		None		126c
01	50 Carrier No.		None		51 GVWR/GCWR		Weight <= 10,000 lbs		126d
01	51 GVWR/GCWR		Weight <= 10,000 lbs		52 Motor Carrier or Government Entity		GOLDEN FLUFF INC		126e
01	52 Motor Carrier or Government Entity		GOLDEN FLUFF INC		53 Driver's First Name		DOV		26
01	53 Driver's First Name		DOV		54 Policy No.		CLAU273395		127a
01	54 Policy No.		CLAU273395		55 NJ Ins. Code		187		127b
01	55 NJ Ins. Code		187		56 Owner's First Name		LC		127c
01	56 Owner's First Name		LC		57 Number & Street		8 SOBRISCO ST		127d
01	57 Number & Street		8 SOBRISCO ST		58 City		AIRMONT		127e
01	58 City		AIRMONT		59 State		NY		26
01	59 State		NY		60 Eyes		6		128
01	60 Eyes		6		61 State		NY		129
01	61 State		NY		62 Driver's License Number		364475186		130
01	62 Driver's License Number		364475186		63 DOB		12/17/1998		131
01	63 DOB		12/17/1998		64 Expires		12 29		132
01	64 Expires		12 29		65 Owner's First Name		CLEAR CUT GLASS I		133
01	65 Owner's First Name		CLEAR CUT GLASS I		66 Number & Street		1525 PROSPECT ST		134
01	66 Number & Street		1525 PROSPECT ST		67 City		LAKEWOOD		03
01	67 City		LAKEWOOD		68 Make		RAM		135
01	68 Make		RAM		69 Model		150		136
01	69 Model		150		70 Color		GRY		137
01	70 Color		GRY		71 Year		2021		138
01	71 Year		2021		72 Plate No.		XKGB57		139
01	72 Plate No.		XKGB57		73 State		NJ		140
01	73 State		NJ		74 VIN		1C6SRFBT2MN539440		03
01	74 VIN		1C6SRFBT2MN539440		75 Expires		12 22		141
01	75 Expires		12 22		76 Vehicle Removed To		1525 PROSPECT ST		142
01	76 Vehicle Removed To		1525 PROSPECT ST		77 Authority		Driver		143
01	77 Authority		Driver		78 Alcohol/Drug Test		Given: No		144
01	78 Alcohol/Drug Test		Given: No		79 Hazardous Material		None		145
01	79 Hazardous Material		None		80 Carrier No.		None		146
01	80 Carrier No.		None		81 GVWR/GCWR		Weight <= 10,000 lbs		147
01	81 GVWR/GCWR		Weight <= 10,000 lbs		82 Motor Carrier or Government Entity		CLEAR CUT GLASS		148
01	82 Motor Carrier or Government Entity		CLEAR CUT GLASS		83 Number & Street		118 MONMOUTH AVE		149
01	83 Number & Street		118 MONMOUTH AVE		84 City		LAKEWOOD		150
01	84 City		LAKEWOOD		85 State		NJ		151
01	85 State		NJ		86 Zip		08701		152
01	86 Zip		08701		87 Damage To Other Property		Yes (If Yes, describe)		153
01	87 Damage To Other Property		Yes (If Yes, describe)		88 Charge		136 Charge		154
01	88 Charge		136 Charge		89 Summons No.		137 Summons No.		155
01	89 Summons No.		137 Summons No.		90 Charge		140 Charge		156
01	90 Charge		140 Charge		91 Summons No.		141 Summons No.		157
01	91 Summons No.		141 Summons No.		92 Charge		142 Charge		158
01	92 Charge		142 Charge		93 Summons No.		143 Summons No.		159
01	93 Summons No.		143 Summons No.		94 Charge		144 Charge		160
01	94 Charge		144 Charge		95 Summons No.		145 Summons No.		161
01	95 Summons No.		145 Summons No.		96 Charge		146 Charge		162
01	96 Charge		146 Charge		97 Summons No.		147 Summons No.		163
01	97 Summons No.		147 Summons No.		98 Charge		148 Charge		164
01	98 Charge		148 Charge		99 Summons No.		149 Summons No.		165
01	99 Summons No.		149 Summons No.		100 Charge		150 Charge		166
01	100 Charge		150 Charge		101 Summons No.		151 Summons No.		167
01	101 Summons No.		151 Summons No.		102 Charge		152 Charge		168
01	102 Charge		152 Charge		103 Summons No.		153 Summons No.		169
01	103 Summons No.		153 Summons No.		104 Charge		154 Charge		170
01	104 Charge		154 Charge		105 Summons No.		155 Summons No.		171
01	105 Summons No.		155 Summons No.		106 Charge		156 Charge		172
01	106 Charge		156 Charge		107 Summons No.		157 Summons No.		173
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01	133 Summons No.		183 Summons No.		134 Charge		184 Charge		200
01	134 Charge		184 Charge		135 Summons No.		185 Summons No.		201
01	135 Summons No.		185 Summons No.		136 Charge		186 Charge		202
01	136 Charge		186 Charge		137 Summons No.		187 Summons No.		203
01	137 Summons No.		187 Summons No.		138 Charge		188 Charge		204
01	138 Charge		188 Charge		139 Summons No.		189 Summons No.		205
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01	148 Charge		198 Charge		149 Summons No.		199 Summons No.		215
01	149 Summons No.		199 Summons No.		150 Charge		200 Charge		216
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01	151 Summons No.		201 Summons No.		152 Charge		202 Charge		218
01	152 Charge		202 Charge		153 Summons No.		203 Summons No.		219
01	153 Summons No.		203 Summons No.		154 Charge		204 Charge		220
01	154 Charge		204 Charge		155 Summons No.		205 Summons No.		221
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01	156 Charge		206 Charge		157 Summons No.		207 Summons No.		223
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01	158 Charge		208 Charge		159 Summons No.		209 Summons No.		225
01	159 Summons No.		209 Summons No.		160 Charge		210 Charge		226
01	160 Charge		210 Charge		161 Summons No.		211 Summons No.		227
01	161 Summons No.		211 Summons No.		162 Charge		212 Charge		228
01	162 Charge		212 Charge		163 Summons No.		213 Summons No.		229
01	163 Summons No.		213 Summons No.		164 Charge		214 Charge		230
01	164 Charge		214 Charge		165 Summons No.		215 Summons No.		231
01	165 Summons No.		215 Summons No.		166 Charge		216 Charge		232
01	166 Charge		216 Charge		167 Summons No.		217 Summons No.		233
01	167 Summons No.		217 Summons No.		168 Charge		218 Charge		234
01	168 Charge		218 Charge		169 Summons No.		219 Summons No.		235
01	169 Summons No.		219 Summons No.		170 Charge		220 Charge		236
01	170 Charge		220 Charge		171 Summons No.		221 Summons No.		237
01	171 Summons No.		221 Summons No.		172 Charge		222 Charge		238
01	172 Charge		222 Charge		173 Summons No.		223 Summons No.		239
01	173 Summons No.		223 Summons No.		174 Charge		224 Charge		240
01	174 Charge		224 Charge		175 Summons No.		225 Summons No.		241
01	175 Summons No.		225 Summons No.		176 Charge		226 Charge		242
01	176 Charge		226 Charge		177 Summons No.		227 Summons No.		243
01	177 Summons No.		227 Summons No.		178 Charge		228 Charge		244
01	178 Charge		228 Charge		179 Summons No.		229 Summons No.		245
01	179 Summons No.		229 Summons No.		180 Charge		230 Charge		246
01	180 Charge		230 Charge		181 Summons No.		231 Summons No.		247
01	181 Summons No.		231 Summons No.		182 Charge		232 Charge		248
01	182 Charge		232 Charge		183 Summons No.		233 Summons No.		249
01	183 Summons No.		233 Summons No.		184 Charge		234 Charge		250
01	184 Charge		234 Charge		185 Summons No.		235 Summons No.		251
01	185 Summons No.		235 Summons No.		186 Charge		236 Charge		252
01	186 Charge		236 Charge		187 Summons No.		237 Summons No.		253
01	187 Summons No.		237 Summons No.		188 Charge		238 Charge		254
01	188 Charge		238 Charge		189 Summons No.		239 Summons No.		255
01	189 Summons No.		239 Summons No.		190 Charge		240 Charge		256
01	190 Charge		240 Charge		191 Summons No.		241 Summons No.		257
01	191 Summons No.		241 Summons No.		192 Charge		242 Charge		258
01	192 Charge		242 Charge		193 Summons No.		243 Summons No.		259
01	193 Summons No.		243 Summons No.		194 Charge		244 Charge		260
01	194 Charge		244 Charge		195 Summons No.		245 Summons No.		261
01	195 Summons No.		245 Summons No.		196 Charge		246 Charge		262
01	196 Charge		246 Charge		197 Summons No.		247 Summons No.		263
01	197 Summons No.		247 Summons No.		198 Charge		248 Charge		264
01	198 Charge		248 Charge		199 Summons No.		249 Summons No.		265
01	199 Summons No.		249 Summons No.		200 Charge		250 Charge		266
01	200 Charge		250 Charge		201 Summons No.		251 Summons No.		267
01									

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-043953**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
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144 Crash Diagram (NOT TO SCALE)

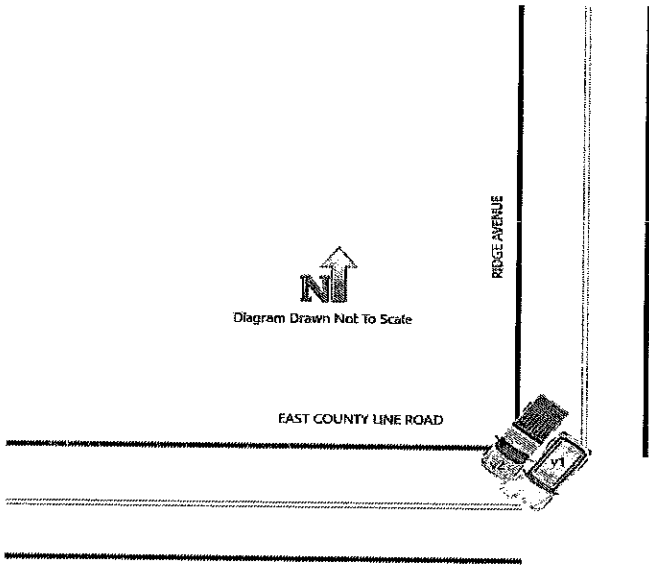


Diagram Drawn Not To Scale

145 Crash Description/Narrative

Driver of vehicle 1 stated he was stopped at the red light on Ridge Avenue southbound at the intersection of E. County Line Road as he attempted to make a right turn onto E. County Line Road with the right blinker activated when he struck vehicle 2 on the drivers side front quarter panel as vehicle 2 was attempting to make a right turn along side of him.

Driver of vehicle 2 stated there were cars stopped at the light on Ridge Avenue southbound when he drove to the right of those vehicles in an attempt to make a right turn onto E. County Line Road when vehicle 1 suddenly made a right turn along with him striking his vehicle on the drivers side front quarter panel.

Based on statements from involved parties and my observations at the scene and damage to the vehicles, I determined that vehicle 2 is at fault due to failure to yield to vehicles and improper passing.

No summonses were issued and no injuries were reported at this time.

146 Officer's Signature

DELVALLE M

147 Badge #

293

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending
 ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																							
01	1 Case Number 22-043978										10 Crash Occurred On: STATE HIGHWAY 70										11 Speed Limit W 50		0070		118a																																																																																																	
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										Code										12 Route No.		Suffix		13 Milepost		118b																																																																																															
01	3 Station/Precinct										14 At Intersection With										Road Name		Dir		18 Speed Limit		02																																																																																															
02	4 Date of Crash 06/02/22										5 Day Of Week THURSDAY										6 Time (use 2400 hrs) 1433										7 Municipality Code 1514										8 Total Killed										9 Total Injured										21 Latitude 40.048675										22 Longitude -74.209389										119a																																									
04	23 Veh # 1										24 Policy No. 02873643-1										25 NJ Ins. Code 135										53 Veh # 2										54 Policy No. 8726593										55 NJ Ins. Code 096										120a																																																													
02	26 Driver's First Name SCOTT										Initial L										Last Name REED										29 Sex M										56 Driver's First Name JOHNNY										Initial E										Last Name LAMPKIN JR										59 Sex M										120b																																									
01	27 Number & Street 2036 LAMPLIGHTER DR										28 City TOMS RIVER										State NJ										Zip 08753										57 Number & Street 489 MONMOUTH AVE										58 City BRICK										State NJ										Zip 08723										121a																																									
01	30 Eyes 02										DL Class D										Restrictions										Endorsements										31 State NJ										60 Eyes 02										DL Class D										Restrictions										Endorsements										61 State NJ										121b																					
03	32 Driver's License Number R21636947308672										33 DOB 08/05/1967										34 Expires 08 23										62 Driver's License Number L03704076501942										63 DOB 01/09/1994										64 Expires 01 23										122																																																													
06	35 Owner's First Name -										Initial -										Last Name DOUBLE R TREE SE -										65 Owner's First Name JOHNNY										Initial E										Last Name LAMPKIN JR										66 Owner's First Name -										Initial -										Last Name -										123																															
07	36 Number & Street 282 RED CEDAR DRIVE										37 City BRICK										State NJ										Zip 08723										67 Number & Street 489 MONMOUTH AVE										68 City BRICK										State NJ										Zip 08723										124																																									
01	38 Make GMC										39 Model TOP										40 Color WHI										41 Year 1996										42 Plate No. XFTE97										43 State NJ										68 Make LEXU										69 Model ES3										70 Color BLU										71 Year 2003										72 Plate No. Y80JDH										73 State NJ										125	
02	44 VIN 1GDM7H1J1TJ512394										45 Expires 02 23										74 VIN JTHBF30G030138176										75 Expires 08 22										126a																																																																																	
01	46 Vehicle Removed To -										47 Authority Owner										48 Alcohol/Drug Test Given: No										49 Hazardous Material None										76 Vehicle Removed To LEROY'S EAZY TOWING										77 Authority Owner										78 Alcohol/Drug Test Given: No										79 Hazardous Material None										126b																																									
03	50 Carrier No. USDOT 3395321										51 GVWR/GCWR Weight <= 10,000 lbs										80 Carrier No. USDOT										81 GVWR/GCWR Weight <= 10,000 lbs										126c																																																																																	
03	52 Motor Carrier or Government Entity -										53 GVWR/GCWR Weight 10,001-26,000 lbs										82 Motor Carrier or Government Entity -										54 GVWR/GCWR Weight >= 26,001 lbs										126d																																																																																	
03	55 Damage To Other Property Yes (If Yes, describe)										56 Damage To Other Property No										57 Damage To Other Property -										58 Damage To Other Property -										126e																																																																																	
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03	86 Damage To Other Property -										104 Damage To Other Property -										105 Damage To Other Property -										106 Damage To Other Property -										107 Damage To Other Property -										108 Damage To Other Property -										126q																																																													
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03	152 Damage To Other Property -										434 Damage To Other Property -										435 Damage To Other																																																																																																					

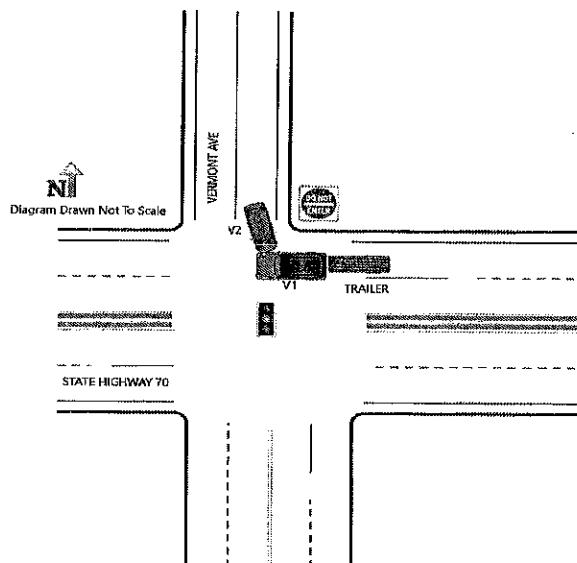
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-043978**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling west on State Highway 70 in the slow lane. He entered the intersection of Vermont Ave when V2 drove south into the intersection. V1 and V2 collided. The driver of V1 stated the traffic signal was green in his favor. V1 was pulling a trailer bearing NJ registration TVJ94V. The trailer also collided with V2.

The driver of V2 stated he was traveling south on Vermont Ave. The traffic signal was green and he was starting to turn left onto State Highway 70 when V1 entered the intersection. V1 and V2 collided.

A witness, Blake Duva, stated he was traveling west on State Highway 70. He was directly behind V1. He stated a vehicle cut V1 off. The driver of V1 stated down the driver of the vehicle that cut him off. When V1 was approximately three car lengths away from the intersection, the traffic signal turned red. V1 continued through the red signal and collided with V2 when V2 entered the intersection.

Camera footage from Wawa located at 135 State Highway 70 captured the incident and showed V1 go through the red signal. The footage was put into property.

Based on my investigation, V1 caused the crash by not stopping at the red traffic signal.

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

[illegible]

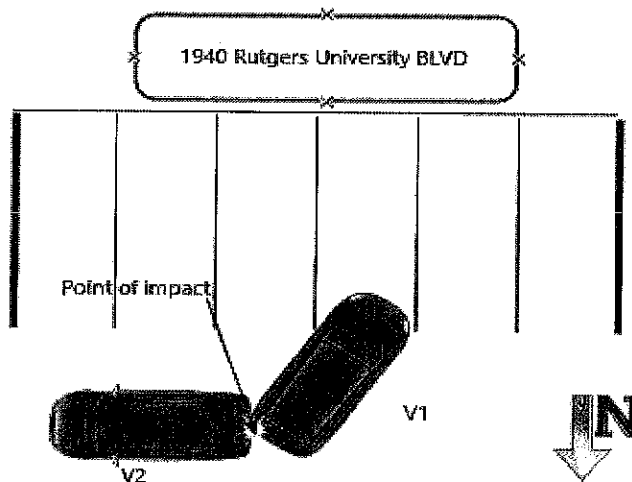
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-043979**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 struck V2 while backing out of a parking spot at 1940 Rutgers University Blvd.

Driver of v1 stated that he was backing out of a parking spot at 1940 Rutgers University Blvd when he struck v2. He stated that he did not see v2 parked behind him.

Female occupant of v2 stated that while the vehicle was parked v1 was backing out of a parking spot and struck the vehicle on the rear bumper. V2 was not parked properly in a parking spot due to the fact it was waiting to pick up employee at 1940 Rutgers University Blvd. Driver of v1 stated that the parking lot is usually crowded during business hours.

Based on driver and witness statements I determine driver of v1 to be at fault due to unsafe backing.

146 Officer's Signature

CARRINGTON K

147 Badge #

431

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number		22-044000		10 Crash Occurred On: BRADHURST AVE		11 Speed Limit 25	
01	2 Police Dept of		LAKEWOOD TOWNSHIP F01		12 Route No.		13 Milepost	
02	3 Station/Precinct				14 480		15	
07	4 Date of Crash		06/02/22		5 Day Of Week		THURSDAY	
01	6 Time (use 2400 hrs)		1553		7 Municipality Code		1514	
04	23 Veh #		1		24 Policy No.		115 3489-F11-30B	
02	26 Driver's First Name		DOV		27 Number & Street		221 HUDSON ST	
01	28 City		LAKEWOOD		29 State		NJ	
04	30 Eyes		02		31 State		NJ	
08	32 Driver's License Number		Z01701806912832		33 DOB		12/13/1983	
06	35 Owner's First Name		ELIYAHU		36 Number & Street		426 5TH ST	
02	37 City		LAKEWOOD		38 Make		FORD	
04	39 Model		TRA		40 Color		WHI	
01	41 Year		2018		42 Plate No.		M74MYT	
04	43 State		NJ		44 VIN		1FBZ2Y6GJKA91110	
01	45 Expires		12 22		46 Vehicle Removed To			
04	47 Authority		Owner		48 Alcohol/Drug Test		Given: No	
04	49 Hazardous Material		None		50 Carrier No.		None	
04	51 GVWR/GCWR		Weight <= 10,000 lbs		52 Motor Carrier or Government Entity			
04	53 Veh #		2		54 Policy No.		TCA00002033192	
02	56 Driver's First Name		KALMAN		57 Number & Street		25 PROVIDENCE AVE	
01	58 City		LAKEWOOD		59 State		NJ	
04	60 Eyes		04		61 State		NJ	
08	62 Driver's License Number		G62234246112884		63 DOB		12/21/1988	
06	65 Owner's First Name		KALMAN		66 Number & Street		25 PROVIDENCE AVE	
02	67 City		LAKEWOOD		68 Make		MAZD	
04	69 Model		CX9		70 Color		BLK	
01	71 Year		2021		72 Plate No.		D81PDZ	
04	73 State		NJ		74 VIN		JM3TCBEY9M0536053	
01	75 Expires		09 24		76 Vehicle Removed To			
04	77 Authority		Owner		78 Alcohol/Drug Test		Given: No	
04	79 Hazardous Material		None		80 Carrier No.		None	
04	81 GVWR/GCWR		Weight <= 10,000 lbs		82 Motor Carrier or Government Entity			
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New Jersey Police Crash Investigation Report

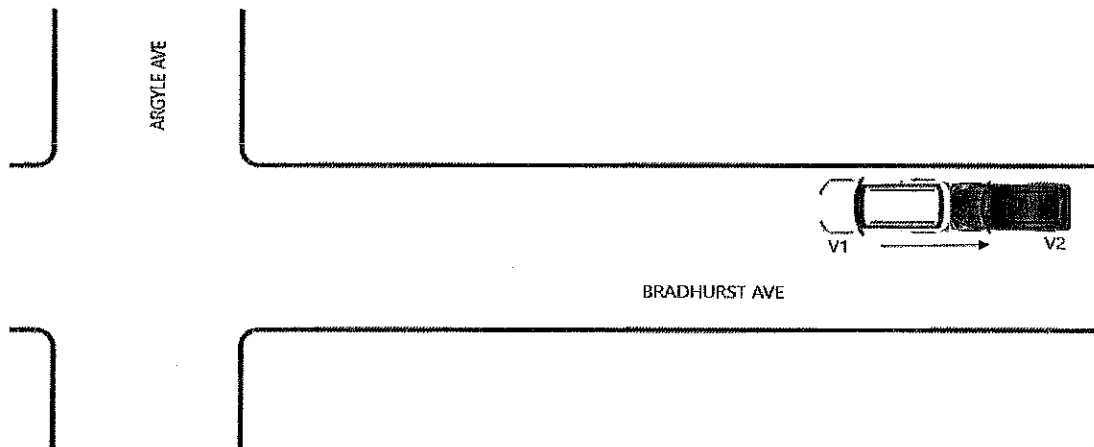
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-044000**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	02	01	01	05	33	M	-	-	-	11	04	-	-	KALMAN A GOLDBERG 25 PROVIDENCE AVE LAKEWOOD NJ 08701
	02	04	01	05	02	F	-	-	-	06	06	-	-	ROCHEL - GOLDBERG 25 PROVIDENCE AVE LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)


 Diagram Drawn Not To Scale



145 Crash Description/Narrative

The driver of V1 stated he was dropping a child off but missed the residence on Bradhurst Ave. V1 backed up but did not observe V2 behind him. V1 collided with V2.

The driver of V2 stated he was traveling west on Bradhurst Ave. He observed V1 in front of him and stopped. V1 started backing up. V2 activated his horn but V1 did not stop. V1 collided with V2.

Based on my investigation, V1 caused the crash by backing into V2.

The driver of V1 did not have any further information about the passengers. The passengers were gone prior to my arrival.

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

05	1 Case Number 22-044022		10 Crash Occurred On: MUNI P LOT CLIFTON AVE 9S - 15										118a								
01	2 Police Dept of LAKEWOOD TOWNSHIP P01		Code		11 Speed Limit 25										118b						
01	3 Station/Precinct --		12 Route No. Suffix 13 Milepost 18 Speed Limit -- -- -- --										119a								
07	4 Date of Crash 06/02/22		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 1714		7 Municipality Code 1514		8 Total Killed --		9 Total Injured 1		21 Latitude 40.099945		22 Longitude -74.216091		119b				
04	23 Veh # 1		24 Policy No. 30824352				25 NJ Ins. Code 134		53 Veh # 2		54 Policy No. 939877793				55 NJ Ins. Code 054		120a				
02	26 Driver's First Name GRIGORY		Initial L		Last Name BASS		29 Sex M		56 Driver's First Name ABRAHAM		Initial -		Last Name FRIED		59 Sex M		120b				
02	27 Number & Street 502 7TH ST		28 City LAKEWOOD										State NJ		Zip 08701		121a				
05	30 Eyes 02		DL Class -		Restrictions -		Endorsements -		31 State NJ		60 Eyes 05		DL Class D		Restrictions -		Endorsements -		121b		
03	32 Driver's License Number B07633057312842		33 DOB mm dd yyyy 12/07/1984		34 Expires mm yy 12 23		62 Driver's License Number F73970050001845		63 DOB mm dd yyyy 01/30/1984		64 Expires mm yy 01 24		65 Owner's First Name GRIGORY		Initial L		Last Name BASS		122		
08	35 Owner's First Name GRIGORY		Initial L		Last Name BASS		65 Owner's First Name ABRAHAM		Initial -		Last Name FRIED		36 Number & Street 502 7TH ST		37 City LAKEWOOD		State NJ		123		
08	38 Make YAMA		39 Model XVS		40 Color RD		41 Year 2007		42 Plate No. 3HPL5		43 State NJ		66 Number & Street 6 EDEN CT		67 City LAKEWOOD		State NJ		124		
01	44 VIN JYAVM01E77A099310		45 Expires 07 23		74 VIN 1HGCM66545A023422		75 Expires 02 23		46 Vehicle Removed To ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☒ Left At Scene ☐ Towed Impounded		76 Vehicle Removed To ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		47 Authority ☒ Owner ☐ Driver ☐ Police		77 Authority ☒ Owner ☐ Driver ☐ Police		48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		125
01	50 Carrier No. ☐ USDOT ☒ None		51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		79 Hazardous Material Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending		80 Carrier No. ☐ USDOT ☒ None		81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity		53 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		54 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		55 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		126a
01	56 Operator 02		57 Charge 39:4-97		58 Summons No. A293398		59 Operator 02		60 Charge 140		61 Summons No. 141		62 Operator 02		63 Charge 142		64 Summons No. 143		126b		
01	65 Operator 02		66 Charge 140		67 Summons No. 141		68 Operator 02		69 Charge 142		70 Summons No. 143		71 Operator 02		72 Charge 142		73 Summons No. 143		126c		
01	65 Operator 02		66 Charge 140		67 Summons No. 141		68 Operator 02		69 Charge 142		70 Summons No. 143		71 Operator 02		72 Charge 142		73 Summons No. 143		126d		
01	65 Operator 02		66 Charge 140		67 Summons No. 141		68 Operator 02		69 Charge 142		70 Summons No. 143		71 Operator 02		72 Charge 142		73 Summons No. 143		126e		
01	65 Operator 02		66 Charge 140		67 Summons No. 141		68 Operator 02		69 Charge 142		70 Summons No. 143		71 Operator 02		72 Charge 142		73 Summons No. 143		126f		
01	65 Operator 02		66 Charge 140		67 Summons No. 141		68 Operator 02		69 Charge 142		70 Summons No. 143		71 Operator 02		72 Charge 142		73 Summons No. 143		126g		
01	65 Operator 02		66 Charge 140		67 Summons No. 141		68 Operator 02		69 Charge 142		70 Summons No. 143		71 Operator 02		72 Charge 1						

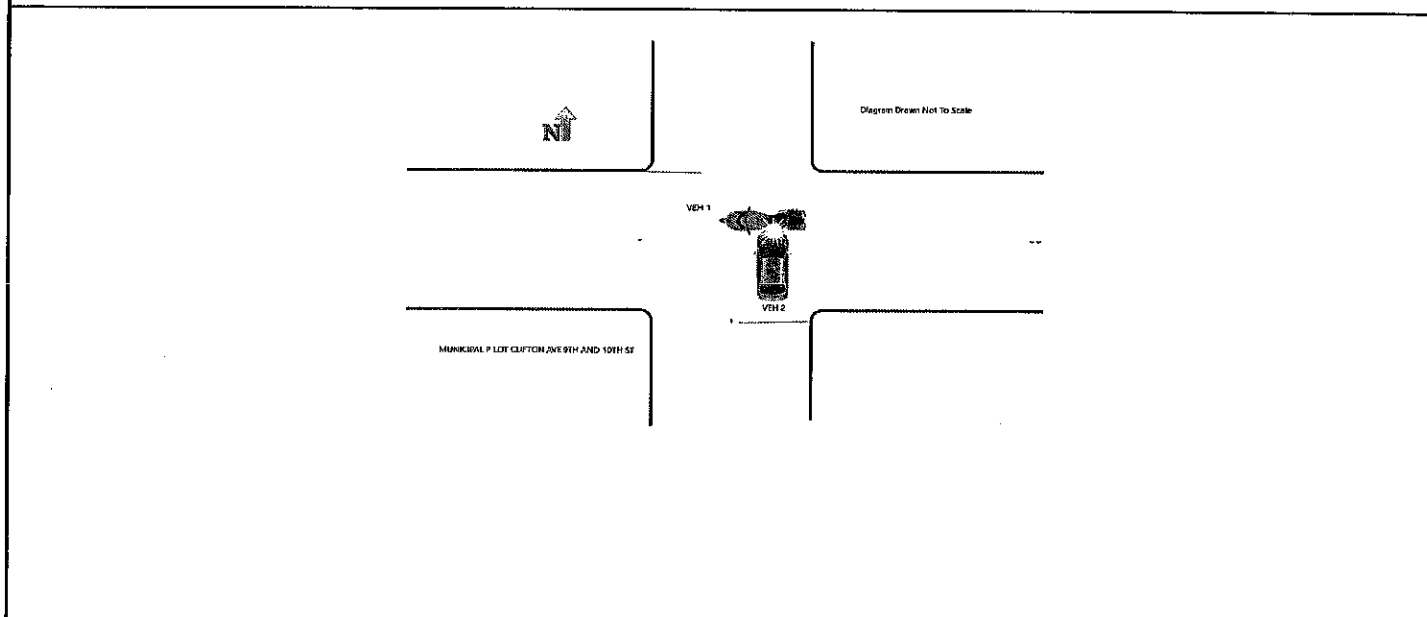
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **---** Case No: **22-044022**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEH 1 STATED HE WAS TRAVELING WEST IN THE MUNICIPAL PARKING LOT AT LOCATED AT CLIFTON AVENUE BETWEEN 10TH AND 9TH STREET, WHEN VEH 2 HIT HIS VEHICLE, CAUSING HIM TO FALL OFF HIS MOTORCYCLE AND SUFFER A FOOT INJURY.

DRIVER OF VEH 2 STATED HE WAS TRAVELING NORTH IN THE MUNICIPAL PARKING LOT LOCATED ON CLIFTON AVENUE BETWEEN 10TH AND 9TH STREET, WHEN DRIVER 1 CAME SPEEDING THROUGH ON HIS MOTORCYCLE THE PARKING LOT CAUSING HIM TO HIT VEH 1.

UPON MY INVESTIGATION I DETERMINED DRIVER 2 AT FAULT FOR THE CRASH. DRIVER 2 WHEN TRAVELING THROUGH THE PARKING LOT HAD A MARKED LINE IN THE STREET WHERE HE WOULD NEED TO STOP AT AND MAKE SURE THE ROADWAY WAS CLEAR PRIOR TO TRAVELING STRAIGHT. DRIVER 2 FAILED TO YIELD TO THE RIGHT OF WAY OF VEH 1 IN THE PARKING LOT.

DRIVER 1 WAS TRANSPORTED BY HATLOZAH TO JERSEY SHORE MEDICAL CENTER FOR WHAT THEY BELIEVE IS A FRACTURED FOOT FROM THE CRASH. I ISSUED A SUMMONS TO DRIVER 2 FOR CARELESS DRIVING.

146 Officer's Signature

CLARKE N

147 Badge #

334

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2										New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report									
1 Case Number 22-044030										10 Crash Occurred On: MADISON AVE										11 Speed Limit 40									
2 Police Dept of LAKEWOOD TOWNSHIP										3 Station/Precinct 01										12 Route No. 0009									
4 Date of Crash 06/02/22										5 Day Of Week THURSDAY										6 Time (use 2400 hrs) 1803									
7 Municipality Code 1514										8 Total Killed --										9 Total Injured --									
23 Veh # 1										24 Policy No. 957801398										25 NJ Ins. Code 134									
26 Driver's First Name KRISTINA										27 Number & Street 7 KINGS CT										28 City LAKEWOOD									
29 Sex F										30 Eyes 02										31 State NJ									
32 Driver's License Number M06524376160012										33 DOB 10/30/2001										34 Expires 10/22									
35 Owner's First Name KRISTINA										36 Number & Street 7 KINGS CT										37 City LAKEWOOD									
38 Make LEXU										39 Model ES										40 Color GRN									
41 Year 2003										42 Plate No. J60NWX										43 State NJ									
44 VIN JTHBF30G530144605										45 Expires 06/23										46 Vehicle Removed To -									
47 Authority Owner										48 Alcohol/Drug Test Given: No										49 Hazardous Material None									
50 Carrier No. -										51 GVWR/GCWR Weight <= 10,000 lbs										52 Motor Carrier or Government Entity -									
53 Veh # 2										54 Policy No. 939632274										55 NJ Ins. Code 054									
56 Driver's First Name MOSHE										57 Number & Street 120 HEARTH COURT EAST										58 City LAKEWOOD									
59 Sex M										60 Eyes 02										61 State NJ									
62 Driver's License Number K42975670009712										63 DOB 09/29/1971										64 Expires 09/24									
65 Owner's First Name MOSHE										66 Number & Street 120 HEARTH COURT EAST										67 City LAKEWOOD									
68 Make TOYT										69 Model SIE										70 Color SIL									
71 Year 2017										72 Plate No. NLZ68J										73 State NJ									
74 VIN 5TDKZ3DC1HS833139										75 Expires 11/22										76 Vehicle Removed To -									
77 Authority Owner										78 Alcohol/Drug Test Given: No										79 Hazardous Material None									
80 Carrier No. -										81 GVWR/GCWR Weight <= 10,000 lbs										82 Motor Carrier or Government Entity -									
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New Jersey Police Crash Investigation Report

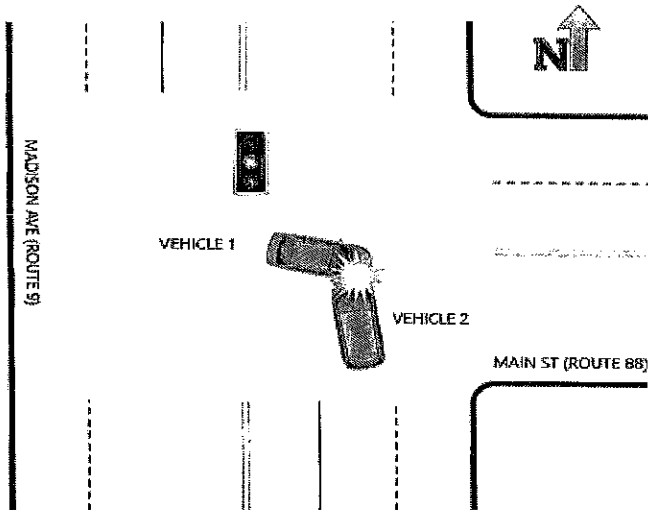
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-044030**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

Diagram Drawn Not To Scale



145 Crash Description/Narrative

Driver of Vehicle 1 stated she was conducting a left turn onto Main St while travelling south on Madison Ave (Route 9) when she struck Vehicle 2, which was travelling north on Madison Ave (Route 9). Driver of Vehicle 2 stated the same sequence of events occurred as driver of Vehicle 1. Both vehicles had a green traffic signal at the intersection of Main St and Madison Ave.

Vehicle 1 sustained damages consisting of denting and scratching to the front passenger bumper area, as well damage to the front passenger tire and undercarriage. Vehicle 2 sustained damages consisting of denting and scratching to the front passenger side bumper area, as well as denting to the front driver side bumper area and damage to the undercarriage.

From my investigation, I concluded that driver of Vehicle 1 was at fault for failing to yield to Vehicle 2.

146 Officer's Signature

SEEHAUSEN, K

147 Badge #

416

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number		10 Crash Occurred On: RIVER AVE		11 Speed Limit 45
97	22-044031		11 At Intersection With Road Name		12 Route No. 0009
01	2 Police Dept of LAKEWOOD TOWNSHIP		13 Suffix		13 Milepost 25
98	Code 01		14 Feet		14 Speed Limit 25
01	3 Station/Precinct		15 N E of		15 S W of
99	-		16 To 17 Cross Road Name		16 NB EB
02	4 Date of Crash 06/02/22		5 Day Of Week THURSDAY		17 From: -
100a	6 Time (use 2400 hrs) 1803		7 Municipality Code 1514		18 SB WB
01	8 Total Killed		9 Total Injured		19 20 Route/Name
100b	23 Veh # 1		24 Policy No. 4587-11-93-81		21 Latitude 40.061187
04	25 NJ Ins. Code 148		53 Veh # 2		22 Longitude -74.219516
101	26 Driver's First Name NECHAMA		54 Policy No. 4611-21-21-82		55 NJ Ins. Code 148
02	27 Number & Street 3 NEW YORK AVE		56 Driver's First Name DOV		57 Sex M
102	28 City LAKEWOOD		57 Number & Street 946 MORRIS AVE		58 City
02	29 State NJ		58 City LAKEWOOD		59 State NJ
104	30 Zip 08701		59 State NJ		60 Zip 08701
2	31 State NJ		60 Eyes 02		61 DL Class D
105	32 Driver's License Number K52345840058704		62 Driver's License Number L68811800007852		63 DOB 07/05/1985
03	33 DOB 08/03/1970		63 DOB 07/05/1985		64 Expres 07
106	34 Expires 08		64 Expres 07		65 State 25
-	35 Owner's First Name NECHAMA		65 Owner's First Name DOV		66 State
107	36 Number & Street 3 NEW YORK AVE		66 Number & Street 946 MORRIS AVE		67 City
-	37 City LAKEWOOD		67 City LAKEWOOD		68 State NJ
04	38 Make NISS		68 Make TOYT		69 Model CAM
109	39 Model ROG		69 Model CAM		70 Color SIL
01	40 Color BLU		70 Color SIL		71 Year 2016
110	41 Year 2019		71 Year 2016		72 Plate No. W25HUY
01	42 Plate No. S29LJZ		72 Plate No. W25HUY		73 State NJ
111	43 State NJ		73 State NJ		74 VIN
-	44 VIN JN1BJ1CR4KW326800		74 VIN 4T1BF1FK9GU194726		75 Expires
01	45 Expires 07		75 Expires 05		76 State 23
112	46 Vehicle Removed To HESHEYS TOWING		76 Vehicle Removed To MOISHYS TOWING		77 Authority
-	47 Authority		77 Authority		78 Alcohol/Drug Test
113	48 Alcohol/Drug Test		78 Alcohol/Drug Test		79 Hazardous Material
114	49 Hazardous Material		79 Hazardous Material		80 Carrier No.
115	50 Carrier No.		80 Carrier No.		81 GVWR/GCWR
01	51 GVWR/GCWR		81 GVWR/GCWR		82 Motor Carrier or Government Entity
117	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity		83 Number & Street
04	53 Number & Street		83 Number & Street		84 City
-	54 City		84 City		85 State
135	55 State		85 State		86 Zip
-	56 Zip		86 Zip		87 Damage To Other Property
136	57 Damage To Other Property		87 Damage To Other Property		88 Yes (If Yes, describe)
-	88 Yes (If Yes, describe)		88 Yes (If Yes, describe)		89 No
137	89 No		89 No		90 Oper.
138	90 Oper.		90 Oper.		91 Charge
139	91 Charge		91 Charge		92 Summons. No.
140	92 Summons. No.		92 Summons. No.		93 Oper.
141	93 Oper.		93 Oper.		94 Charge
142	94 Charge		94 Charge		95 Summons. No.
143	95 Summons. No.		95 Summons. No.		96 Oper.
144	96 Oper.		96 Oper.		97 Charge
145	97 Charge		97 Charge		98 Summons. No.
146	98 Summons. No.		98 Summons. No.		99 Oper.
147	99 Oper.		99 Oper.		100 Charge
148	100 Charge		100 Charge		101 Summons. No.
149	101 Summons. No.		101 Summons. No.		102 Oper.
150	102 Oper.		102 Oper.		103 Charge
151	103 Charge		103 Charge		104 Summons. No.
152	104 Summons. No.		104 Summons. No.		105 Oper.
153	105 Oper.		105 Oper.		106 Charge
154	106 Charge		106 Charge		107 Summons. No.
155	107 Summons. No.		107 Summons. No.		108 Oper.
156	108 Oper.		108 Oper.		109 Charge
157	109 Charge		109 Charge		110 Summons. No.
158	110 Summons. No.		110 Summons. No.		111 Oper.
159	111 Oper.		111 Oper.		112 Charge
160	112 Charge		112 Charge		113 Summons. No.
161	113 Summons. No.		113 Summons. No.		114 Oper.
162	114 Oper.		114 Oper.		115 Charge
163	115 Charge		115 Charge		116 Summons. No.
164	116 Summons. No.		116 Summons. No.		117 Oper.
165	117 Oper.		117 Oper.		118 Charge
166	118 Charge		118 Charge		119 Summons. No.
167	119 Summons. No.		119 Summons. No.		120 Oper.
168	120 Oper.		120 Oper.		121 Charge
169	121 Charge		121 Charge		122 Summons. No.
170	122 Summons. No.		122 Summons. No.		123 Oper.
171	123 Oper.		123 Oper.		124 Charge
172					

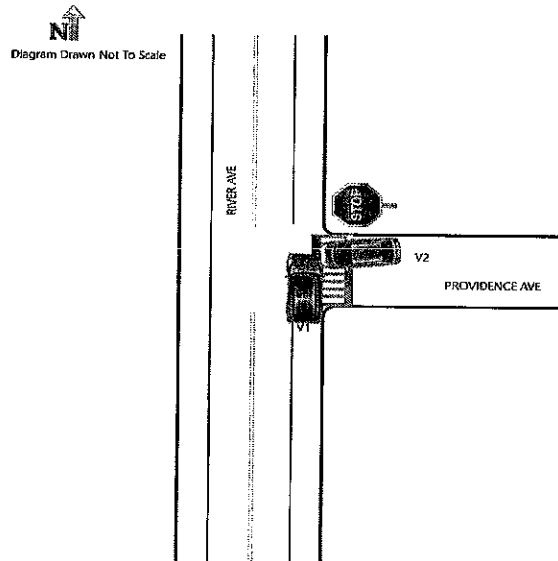
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-044031**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated she was shaken up from the crash and could not recall what happened.

The driver of V2 stated he was on Providence Ave traveling west. He was stopped at the stop sign attempting to turn left onto River Ave. He inched past the stop line but not past the crosswalk in an attempt to get a better view of traffic. He observed V1 travel north, enter the shoulder, and collide with V2.

Based on my investigation, V1 caused the crash by driving on the shoulder and striking V2.

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		22-044037		10 Crash Occurred On: MADISON AVE		118a
01	2 Police Dept of		LAKEWOOD TOWNSHIP E01		11 Speed Limit 40		25
01	3 Station/Precinct		---		12 Route No. 0009		118b
02	4 Date of Crash		06/02/22		13 Milepost 25		119a
02	5 Day Of Week		THURSDAY		14		72
01	6 Time (use 2400 hrs)		1839		15		119b
01	7 Municipality Code		1514		16		120a
01	8 Total Killed		---		17 Cross Road Name		01
01	9 Total Injured		1		18 Speed Limit		120b
04	23 Veh #		1		19 To		121a
04	24 Policy No.		940669646		20 Route/Name		01
01	25 NJ Ins. Code		134		22 Longitude		121b
02	26 Driver's First Name		DALJIT		23		122
02	27 Number & Street		10114 113TH ST		24		01
02	28 City		S RICHMOND HL		25		123
01	29 Sex		M		26		124
01	30 Eyes		01		27		04
01	31 State		NY		28		04
01	32 Driver's License Number		645192847		29		22
01	33 DOB		04/25/1973		30		126a
01	34 Expires		04 29		31		126b
01	35 Owner's First Name		DALJIT		32		126c
01	36 Number & Street		10114 113TH ST		33		126d
01	37 City		S RICHMOND HL		34		126e
01	38 Make		HOND		35		22
01	39 Model		CIV		36		127a
01	40 Color		BLK		37		26
01	41 Year		2010		38		127b
01	42 Plate No.		J72LVR		39		127c
01	43 State		NJ		40		127d
01	44 VIN		2HGF1B87AH507457		41		127e
01	45 Expires		09 20		42		26
01	46 Vehicle Removed To		TILTON'S AUTO BODY		43		128
01	47 Authority		Police		44		26
01	48 Alcohol/Drug Test		Given: No		45		129
01	49 Hazardous Material		None		46		12
01	50 Carrier No.		None		47		12
01	51 GVWR/GCWR		Weight <= 10,000 lbs		48		99
01	52 Motor Carrier or Government Entity		No		49		99
01	53 Veh #		P1		50		132
01	54 Policy No.		---		51		99
01	55 NJ Ins. Code		---		52		03
01	56 Driver's First Name		YITZCHOK		53		134
01	57 Number & Street		1015 FOREST AVE		54		99
01	58 City		LAKEWOOD		55		
01	59 Sex		M		56		
01	60 Eyes		---		57		
01	61 State		NJ		58		
01	62 Driver's License Number		---		59		
01	63 DOB		10/12/2007		60		
01	64 Expires		---		61		
01	65 Owner's First Name		---		62		
01	66 Number & Street		---		63		
01	67 City		---		64		
01	68 Make		---		65		
01	69 Model		---		66		
01	70 Color		---		67		
01	71 Year		---		68		
01	72 Plate No.		---		69		
01	73 State		---		70		
01	74 VIN		---		71		
01	75 Expires		---		72		
01	76 Vehicle Removed To		---		73		
01	77 Authority		---		74		
01	78 Alcohol/Drug Test		Given: No		75		
01	79 Hazardous Material		None		76		
01	80 Carrier No.		None		77		
01	81 GVWR/GCWR		Weight <= 10,000 lbs		78		
01	82 Motor Carrier or Government Entity		No		79		
01	83		---		80		
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01	85		---		82		
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01							

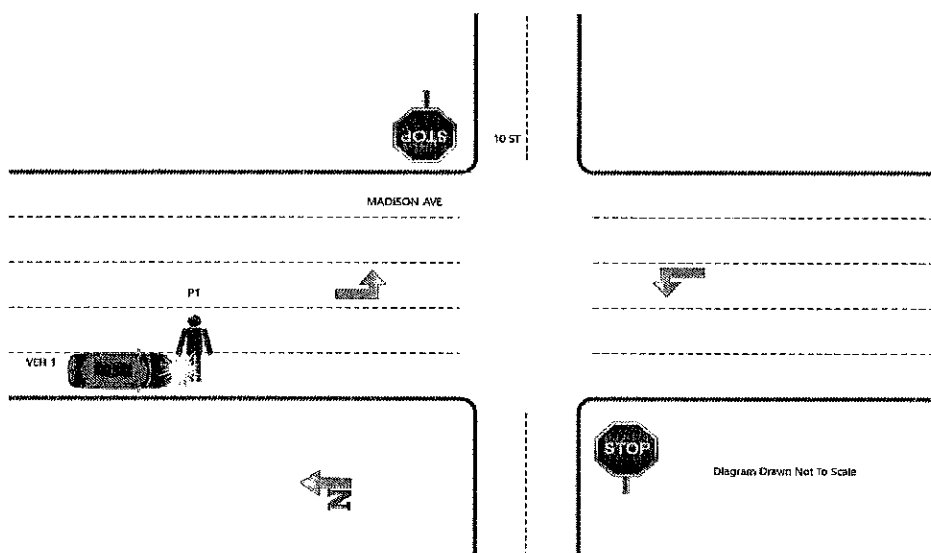
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **--** Case No: **22-044037**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEH 1 STATED HE WAS TRAVELING SOUTH ON MADISON AVENUE IN THE RIGHT LANE OF TRAFFIC. HE SAID WHILE TRAVELING HE HIT A PEDESTRIAN THAT WAS CROSSING THE STREET NOT AT THE INTERSECTION.

WITNESS TO THE CRASH, FRANK RAU, STATED HE WAS TRAVELING SOUTH ON MADISON AVENUE IN THE LEFT LANE OF TRAFFIC WHEN HE SAW THE PEDESTRAIN TRYING TO CROSS THE STREET. HE SAID HE STOPPED IN TRAFFIC FOR HIM, BUT VEH 1 THAT WAS IN THE RIGHT LANE DID NOT SEE THE PEDESTRAIN AND HIT HIM.

UPON MY INVESTIGATION I DETERMINED THE PEDESTRIAN AT FAULT FOR THE CRASH DUE TO HIM NOT CROSSING AT THE MARKED CROSS WALK. I IMPOUNDED VEH 1 THAT WAS UNREGISTERED. I ISSUED DRIVER 1 A SUMMONS FOR UNREGISTERED VEHICLE.

HATZOLAH RESPONDED TO THE SCENE AND SAID THE PEDESTRIAN SUFFERED A SMALL LACERATION TO THE HEAD AND AFTER A THOROUGH CHECK THERE APPEARED TO BE NO LIFE THREATENING INJURIES. THE PEDESTRIAN WAS A JUVENILE AND HIS MOTHER RESPONDED TO THE CRASH SCENE. HATZOLAH TRANSPORTED THE PEDESTRIAN AND HIS MOTHER TO JERSEY SHORE MEDICAL CENTER.

WITNESS AND MOTHER'S INFORMATION IS ADDED TO INVOLVEMENTS.

146 Officer's Signature

CLARKE N

147 Badge #

334

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

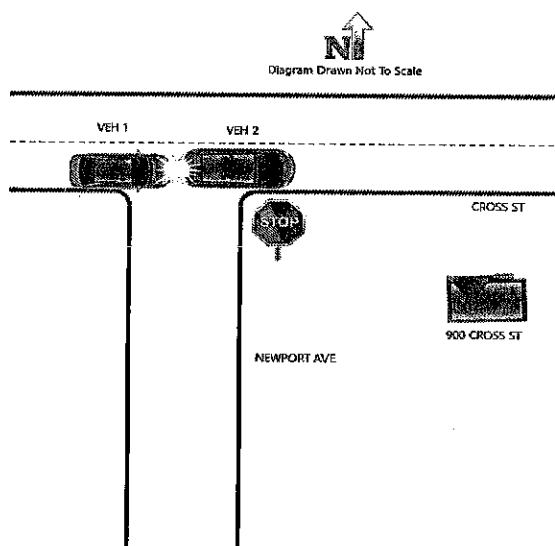
96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report				
05	1 Case Number		22-044042		10 Crash Occurred On: CROSS ST		11 Speed Limit 40		118a
01	2 Police Dept of		LAKEWOOD TOWNSHIP E 01		12 Route No. 0626		13 Milepost 25		09
01	3 Station/Precinct				14 At Intersection With		15 Road Name NEWPORT AVE		118b
05	4 Date of Crash		06/02/22		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 1855		119a
01	7 Municipality Code		1514		8 Total Killed		9 Total Injured		25
100a	21 Latitude		40.074466		22 Longitude		-74.249724		119b
04	23 Veh #		1		24 Policy No.		SEE NARRATIVE		120a
02	26 Driver's First Name		CHAIM		27 Number & Street		591 UNION RD		01
02	28 City		SPRING VALLEY		29 Sex		M		120b
02	30 Eyes		2		31 State		NY		121a
02	32 Driver's License Number		768051037		33 DOB		06/01/2000		01
01	34 Expires		06		35 Owner's First Name		ELIHU		121b
01	36 Number & Street		23 GREENRIDGE WAY SPRING		37 City		VALLEY		122
01	38 Make		TOYT		39 Model		CAM		07
01	40 Color		GRY		41 Year		2000		123
01	42 Plate No.		KUX4667		43 State		NY		07
01	44 VIN		JT2BG22K2Y0506903		45 Expires		04 24		124
01	46 Vehicle Removed To				47 Authority		Owner		04
01	48 Alcohol/Drug Test		Given: No		49 Hazardous Material		None		04
01	50 Carrier No.		None		51 GVWR/GCWR		Weight <= 10,000 lbs		125
01	52 Motor Carrier or Government Entity				53 Veh #		2		04
01	54 Policy No.		945200303		55 Driver's First Name		SIMON		126a
01	56 Number & Street		11 SIENA DR		57 City		JACKSON		26
01	58 Make		ACUR		59 Model		MDX		126b
01	60 Color		WHI		61 Year		2020		126c
01	62 Plate No.		Z74NEC		63 State		NJ		126d
01	64 VIN		5J8YD4H33LL049890		65 DOB		08/27/1995		126e
01	66 Expires		12 23		67 Owner's First Name		SIMON		26
01	68 Vehicle Removed To				69 Authority		Owner		26
01	69 Alcohol/Drug Test		Given: No		70 Hazardous Material		None		127a
01	70 Carrier No.		None		71 GVWR/GCWR		Weight <= 10,000 lbs		127b
01	72 Motor Carrier or Government Entity				73 Veh #		2		127c
01	74 Policy No.		945200303		75 Driver's First Name		SIMON		127d
01	76 Number & Street		11 SIENA DR		77 City		JACKSON		127e
01	78 Make		ACUR		79 Model		MDX		26
01	80 Color		WHI		81 Year		2020		128
01	82 Plate No.		Z74NEC		83 State		NJ		129
01	84 VIN		5J8YD4H33LL049890		85 DOB		08/27/1995		130
01	86 Expires		12 23		87 Owner's First Name		SIMON		131
01	88 Vehicle Removed To				89 Authority		Owner		06
01	89 Alcohol/Drug Test		Given: No		90 Hazardous Material		None		132
01	90 Carrier No.		None		91 GVWR/GCWR		Weight <= 10,000 lbs		06
01	92 Motor Carrier or Government Entity				93 Veh #		2		133
01	94 Policy No.		945200303		95 Driver's First Name		SIMON		04
01	96 Number & Street		11 SIENA DR		97 City		JACKSON		134
01	98 Make		ACUR		99 Model		MDX		03
01	100 Color		WHI		101 Year		2020		
01	102 Plate No.		Z74NEC		103 State		NJ		
01	104 VIN		5J8YD4H33LL049890		105 DOB		08/27/1995		
01	106 Expires		12 23		107 Owner's First Name		SIMON		
01	108 Vehicle Removed To				109 Authority		Owner		
01	109 Alcohol/Drug Test		Given: No		110 Hazardous Material		None		
01	110 Carrier No.		None		111 GVWR/GCWR		Weight <= 10,000 lbs		
01	112 Motor Carrier or Government Entity				113 Veh #		2		
01	114 Policy No.		945200303		115 Driver's First Name		SIMON		
01	116 Number & Street		11 SIENA DR		117 City		JACKSON		
01	118 Make		ACUR		119 Model		MDX		
01	120 Color		WHI		121 Year		2020		
01	122 Plate No.		Z74NEC		123 State		NJ		
01	124 VIN		5J8YD4H33LL049890		125 DOB		08/27/1995		
01	126 Expires		12 23		127 Owner's First Name		SIMON		
01	128 Vehicle Removed To				129 Authority		Owner		
01	129 Alcohol/Drug Test		Given: No		130 Hazardous Material		None		
01	130 Carrier No.		None		131 GVWR/GCWR		Weight <= 10,000 lbs		
01	132 Motor Carrier or Government Entity				133 Veh #		2		
01	134 Policy No.		945200303		135 Driver's First Name		SIMON		
01	136 Number & Street		11 SIENA DR		137 City		JACKSON		
01	138 Make		ACUR		139 Model		MDX		
01	140 Color		WHI		141 Year		2020		
01	142 Plate No.		Z74NEC		143 State		NJ		
01	144 VIN		5J8YD4H33LL049890		145 DOB		08/27/1995		
01	146 Expires		12 23		147 Owner's First Name		SIMON		
01	148 Vehicle Removed To				149 Authority		Owner		
01	149 Alcohol/Drug Test		Given: No		150 Hazardous Material		None		
01	150 Carrier No.		None		151 GVWR/GCWR		Weight <= 10,000 lbs		
01	152 Motor Carrier or Government Entity				153 Veh #		2		
01	154 Policy No.		945200303		155 Driver's First Name		SIMON		
01	156 Number & Street		11 SIENA DR		157 City		JACKSON		
01	158 Make		ACUR		159 Model		MDX		
01	160 Color		WHI		161 Year		2020		
01	162 Plate No.		Z74NEC		163 State		NJ		
01	164 VIN		5J8YD4H33LL049890		165 DOB		08/27/1995		
01	166 Expires		12 23		167 Owner's First Name		SIMON		
01	168 Vehicle Removed To				169 Authority		Owner		
01	169 Alcohol/Drug Test		Given: No		170 Hazardous Material		None		
01	170 Carrier No.		None		171 GVWR/GCWR		Weight <= 10,000 lbs		
01	172 Motor Carrier or Government Entity				173 Veh #		2		
01	174 Policy No.		945200303		175 Driver's First Name		SIMON		
01	176 Number & Street		11 SIENA DR		177 City		JACKSON		
01	178 Make		ACUR		179 Model		MDX		
01	180 Color		WHI		181 Year		2020		
01	182 Plate No.		Z74NEC		183 State		NJ		
01	184 VIN		5J8YD4H33LL049890		185 DOB		08/27/1995		
01	186 Expires		12 23		187 Owner's First Name		SIMON		
01	188 Vehicle Removed To				189 Authority		Owner		
01	189 Alcohol/Drug Test		Given: No		190 Hazardous Material		None		
01	190 Carrier No.		None		191 GVWR/GCWR		Weight <= 10,000 lbs		
01	192 Motor Carrier or Government Entity				193 Veh #		2		
01	194 Policy No.		945200303		195 Driver's First Name		SIMON		
01	196 Number & Street		11 SIENA DR		197 City		JACKSON		
01	198 Make		ACUR		199 Model		MDX		
01	200 Color		WHI		201 Year		2020		
01	202 Plate No.		Z74NEC		203 State		NJ		
01	204 VIN		5J8YD4H33LL049890		205 DOB		08/27/1995		
01	206 Expires		12 23		207 Owner's First Name		SIMON		
01	208 Vehicle Removed To				209 Authority		Owner		
01	209 Alcohol/Drug Test		Given: No		210 Hazardous Material		None		
01	210 Carrier No.		None		211 GVWR/GCWR		Weight <= 10,000 lbs		
01	212 Motor Carrier or Government Entity				213 Veh #		2		
01	214 Policy No.		945200303		215 Driver's First Name		SIMON		
01	216 Number & Street		11 SIENA DR		217 City		JACKSON		
01	218 Make		ACUR		219 Model		MDX		
01	220 Color		WHI		221 Year		2020		
01	222 Plate No.		Z74NEC		223 State		NJ		
01	224 VIN		5J8YD4H33LL049890		225 DOB		08/27/1995		
01	226 Expires		12 23		227 Owner's First Name		SIMON		
01	228 Vehicle Removed To				229 Authority		Owner		
01	229 Alcohol/Drug Test		Given: No		230 Hazardous Material		None		
01	230 Carrier No.		None		231 GVWR/GCWR		Weight <= 10,000 lbs		
01	232 Motor Carrier or Government Entity				233 Veh #		2		
01	234 Policy No.		945200303		235 Driver's First Name		SIMON		
01	236 Number & Street		11 SIENA DR		237 City		JACKSON		
01	238 Make		ACUR		239 Model		MDX		
01	240 Color		WHI		241 Year		2020		
01	242 Plate No.		Z74NEC		243 State		NJ		
01	244 VIN		5J8YD4H33LL049890		245 DOB		08/27/1995		
01	246 Expires		12 23		247 Owner's First Name		SIMON		
01	248 Vehicle Removed To				249 Authority		Owner		
01	249 Alcohol/Drug Test		Given: No		250 Hazardous Material		None		
01	250 Carrier No.		None		251 GVWR/GCWR		Weight <= 10,000 lbs		
01	252 Motor Carrier or Government Entity				253 Veh #		2		
01	254 Policy No.		945200303		255 Driver's First Name		SIMON		
01	256 Number & Street		11 SIENA DR		257 City		JACKSON		
01	258 Make		ACUR		259 Model		MDX		
01	260 Color		WHI		261 Year		2020		
01	262 Plate No.		Z74NEC		263 State		NJ		
01	264 VIN		5J8YD4H33LL049890		265 DOB		08/27/1995		
01	266 Expires		12 23		267 Owner's First Name		SIMON		
01	268 Vehicle Removed To				269 Authority		Owner		
01	269 Alcohol/Drug Test		Given: No		270 Hazardous Material		None		
01	270 Carrier No.		None		271 GVWR/GCWR		Weight <= 10,000 lbs		
01	272 Motor Carrier or Government Entity				273 Veh #		2		
01	274 Policy No.		945200303		275 Driver's First Name		SIMON		
01	276 Number & Street		11 SIENA DR		277 City		JACKSON		
01	278 Make		ACUR		279 Model		MDX		
01	280 Color		WHI		281 Year		2020		
01	282 Plate No.		Z74NEC		283 State		NJ		
01	284 VIN		5J8YD4H33LL049890		285 DOB		08/27/1995		
01	286 Expires		12 23		287 Owner's First Name		SIMON		
01	288 Vehicle Removed To				289 Authority		Owner		
01	289 Alcohol/Drug Test		Given: No		290 Hazardous Material		None		
01	290 Carrier No.		None		291 GVWR/GCWR		Weight <= 10,000 lbs		
01	292 Motor Carrier or Government Entity				293 Veh #		2		
01	294 Policy No.		945200303		295 Driver's First Name		SIMON		
01	296 Number & Street		11 SIENA DR		297 City		JACKSON		
01	298 Make		ACUR		299 Model		MDX		
01	300 Color		WHI		301 Year		2020		
01	302 Plate No.		Z74NEC		303 State		NJ		
01	304 VIN		5J8YD4H33LL049890		305 DOB		08/27/1995		
01	306 Expires		12 23		307 Owner's First Name		SIMON		
01	308 Vehicle Removed To				309 Authority		Owner		
01	309 Alcohol/Drug Test		Given: No		310 Hazardous Material		None		
01	310 Carrier No.		None		311 GVWR/GCWR		Weight <= 10,000 lbs		
01	312 Motor Carrier or Government Entity				313 Veh #		2		
01	314 Policy No.		945200303		315 Driver's First Name		SIMON		
01	316 Number & Street		11 SIENA DR		317 City		JACKSON		
01	318 Make		ACUR		319 Model		MDX		
01	320 Color		WHI		321 Year		2020		
01	322 Plate No.		Z74NEC		323 State		NJ		
01	324 VIN		5J8YD4H33LL049890		325 DOB		08/27/1995		
01	326 Expires		12 23		327 Owner's First Name		SIMON		
01	328 Vehicle Removed To				329 Authority		Owner		
01	329 Alcohol/Drug Test		Given: No		330 Hazardous Material		None		
01	330 Carrier No.		None		331 GVWR/GCWR		Weight <= 10,000 lbs		
01	332 Motor Carrier or Government Entity				333 Veh #		2		
01	334 Policy No.		945200303		335 Driver's First Name		SIMON		
01	336 Number & Street		11 SIENA DR		337 City		JACKSON		
01	338 Make		ACUR		339 Model		MDX		
01	340 Color		WHI		341 Year		2020		
01	342 Plate No.		Z74NEC		343 State		NJ		
01	344 VIN		5J8YD4H33LL049890		345 DOB		08/27/1995		
01	346 Expires		12 23		347 Owner's First Name		SIMON		
01	348 Vehicle Removed To				349 Authority		Owner		
01	349 Alcohol/Drug Test		Given: No		350 Hazardous Material		None		
01	350 Carrier No.		None		351 GVWR/GCWR		Weight <= 10,000 lbs		
01									

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-044042

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

NEW YORK STATE INSURANCE CARD. NATIONWIDE GENERAL INSURANCE COMPANY. POLICY NUMBER 6631J 158338 EXPIRATION 6-21-2022. PHONE NUMBER 1-800-421-3535.

VEHICLES ONE AND TWO WERE TRAVELING EAST ON CROSS STREET. VEHICLE TWO BEGAN SLOWING DOWN FOR TRAFFIC. VEHICLE ONE ATTEMPTED TO SLOW BUT SLID ON THE WET ROADWAY CONDITIONS AND STRUCK THE REAR OF VEHICLE TWO. DRIVER ONE STATED HE ATTEMPTED TO STOP BUT CONTINUED TO SLIDE DUE TO THE RAIN AND THE WET ROAD. DRIVER TWO STATED HE WAS SLOWING DUE TO TRAFFIC WHEN HIS VEHICLE WAS STRUCK BY VEHICLE ONE.

DUE TO MY INVESTIGATION I FOUND DRIVER ONE TO BE AT FAULT FOR FOLLOWING TOO CLOSELY. NO INJURIES WERE REPORTED AT THE SCENE. NO SUMMONS WERE ISSUED.

146 Officer's Signature

SOLOMON A

147 Badge #

380

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending☒ Complete

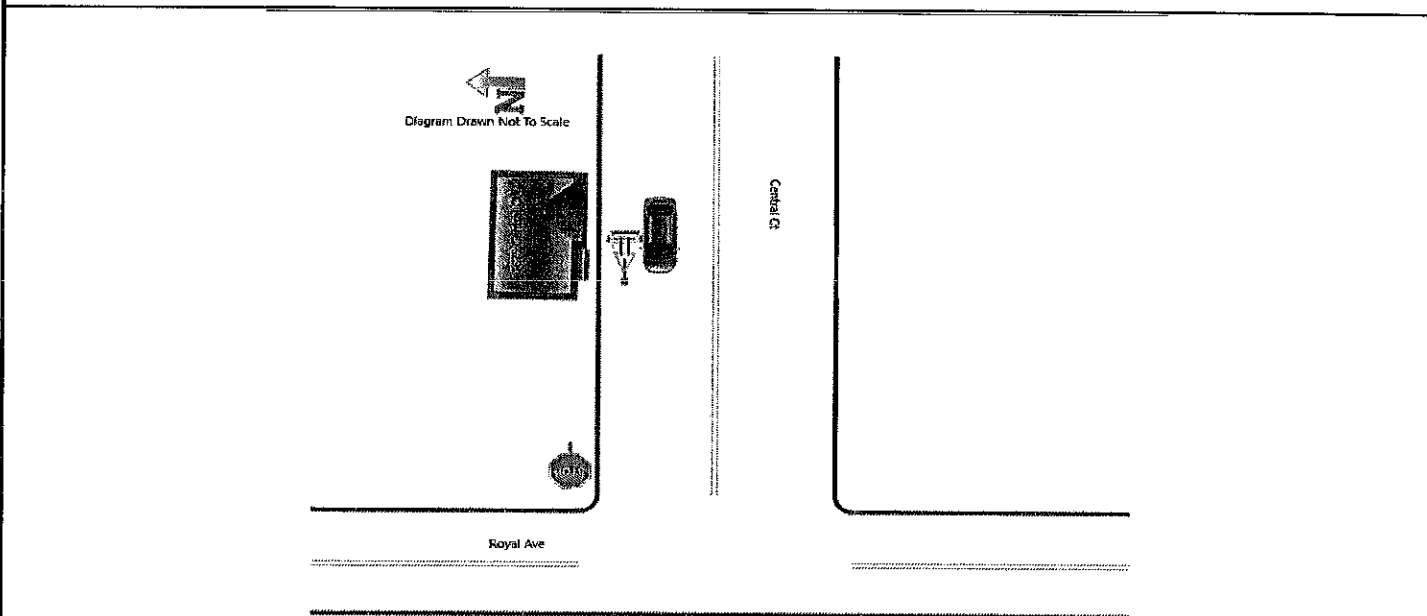
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number	22-044045		11 Speed Limit	
97	2 Police Dept of	LAKEWOOD TOWNSHIP		12 Route No.	
01	3 Station/Precinct	01		13 Milepost	
98	4 Date of Crash	06/02/22		14	
01	5 Day Of Week	THURSDAY		15	
99	6 Time (use 2400 hrs)	1907		16	
07	7 Municipality Code	1514		17 Cross Road Name	
100a	8 Total Killed	--		18 Speed Limit	
01	9 Total Injured	--		25	
100b	10 Crash Occurred On:	CENTRAL CT		20 Route/Name	
04	11 At Intersection With	ROYAL AVE		22 Longitude	
101	12 Feet	N E of		21 Latitude	
02	13 Miles	S W		23 Vehicle #	
102	14 Date of Crash	06/02/22		24 Policy No.	
04	15 Day Of Week	THURSDAY		25 NJ Ins. Code	
103	16 Time (use 2400 hrs)	1907		26 Driver's First Name	
02	17 Municipality Code	1514		27 Number & Street	
104	18 Total Killed	--		28 City	
01	19 Total Injured	--		29 State	
105	20 Crash Occurred On:	CENTRAL CT		30 Eyes	
04	21 At Intersection With	ROYAL AVE		31 State	
106	22 Feet	N E of		32 Driver's License Number	
02	23 Miles	S W		33 DOB	
107	24 Date of Crash	06/02/22		34 Expires	
04	25 Day Of Week	THURSDAY		35 Owner's First Name	
108	26 Time (use 2400 hrs)	1907		36 Number & Street	
01	27 Municipality Code	1514		37 City	
109	28 Total Killed	--		38 Make	
01	29 Total Injured	--		39 Model	
110	30 Crash Occurred On:	CENTRAL CT		40 Color	
04	31 At Intersection With	ROYAL AVE		41 Year	
111	32 Feet	N E of		42 Plate No.	
02	33 Miles	S W		43 State	
112	34 Date of Crash	06/02/22		44 VIN	
04	35 Day Of Week	THURSDAY		45 Expires	
113	36 Time (use 2400 hrs)	1907		46 Vehicle Removed To	
01	37 Municipality Code	1514		47 Authority	
114	38 Total Killed	--		48 Alcohol/Drug Test	
01	39 Total Injured	--		49 Hazardous Material	
115	40 Crash Occurred On:	CENTRAL CT		50 Carrier No.	
04	41 At Intersection With	ROYAL AVE		51 GVWR/GCWR	
116	42 Feet	N E of		52 Motor Carrier or Government Entity	
02	43 Miles	S W		53 Number & Street	
117	44 Date of Crash	06/02/22		54 City	
04	45 Day Of Week	THURSDAY		55 State	
118	46 Time (use 2400 hrs)	1907		56 Damage To Other Property	
01	47 Municipality Code	1514		57 Yes (If Yes, describe)	
119	48 Total Killed	--		58 No	
01	49 Total Injured	--		59	
120	50 Crash Occurred On:	CENTRAL CT		60	
04	51 At Intersection With	ROYAL AVE		61	
121	52 Feet	N E of		62	
02	53 Miles	S W		63	
122	54 Date of Crash	06/02/22		64	
04	55 Day Of Week	THURSDAY		65	
123	56 Time (use 2400 hrs)	1907		66	
01	57 Municipality Code	1514		67	
124	58 Total Killed	--		68	
01	59 Total Injured	--		69	
125	60 Crash Occurred On:	CENTRAL CT		70	
04	61 At Intersection With	ROYAL AVE		71	
126	62 Feet	N E of		72	
02	63 Miles	S W		73	
127	64 Date of Crash	06/02/22		74	
04	65 Day Of Week	THURSDAY		75	
128	66 Time (use 2400 hrs)	1907		76	
01	67 Municipality Code	1514		77	
129	68 Total Killed	--		78	
01	69 Total Injured	--		79	
130	70 Crash Occurred On:	CENTRAL CT		80	
04	71 At Intersection With	ROYAL AVE		81	
131	72 Feet	N E of		82	
02	73 Miles	S W		83	
132	74 Date of Crash	06/02/22		84	
04	75 Day Of Week	THURSDAY		85	
133	76 Time (use 2400 hrs)	1907		86	
01	77 Municipality Code	1514		87	
134	78 Total Killed	--		88	
01	79 Total Injured	--		89	
135	80 Crash Occurred On:	CENTRAL CT		90	
04	81 At Intersection With	ROYAL AVE		91	
136	82 Feet	N E of		92	
02	83 Miles	S W		93	
137	84 Date of Crash	06/02/22		94	
04	85 Day Of Week	THURSDAY		95	
138	86 Time (use 2400 hrs)	1907		96	
01	87 Municipality Code	1514		97	
139	88 Total Killed	--		98	
01	89 Total Injured	--		99	
140	90 Crash Occurred On:	CENTRAL CT		100	
04	91 At Intersection With	ROYAL AVE		1	

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-044045

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 was travelling westbound on Central Ct passing by 1675 Central Ct. He reported as he was driving, he passed by a parked trailer and side swiped a piece of the trailer.

The trailer was parked in front of the residence house at 1675 Central Ct. The owner heard a loud noise from his residence and came outside to observe driver of vehicle 1 near his trailer. He added that there was minor damage to his trailer and a piece of vehicle 1 was sitting near the trailer on the ground.

After my investigation, I determined that driver of vehicle 1 is at fault for the accident. Vehicle 1 sustained minor damage to the passenger side area near the front door. The trailer sustained minor damage to area near the tire. There were no injuries reported at the scene of the crash. Vehicle 1 was able to drive off as the trailer remained on scene.

There is video footage from the synagogue from across the street. Spoke to the owner of the building, he stated that he is attempting to obtain the footage and send it to my work email; which has not been received as of this writing.

Trailer Registration: NJ / TJF78V

VIN: 1S9E03229A1489023

Expires: 03/2023

Owner:

Edward Conner
1675 Central Ct
Lakewood, NJ 08701

146 Officer's Signature

AMOROSO, A

147 Badge #

415

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

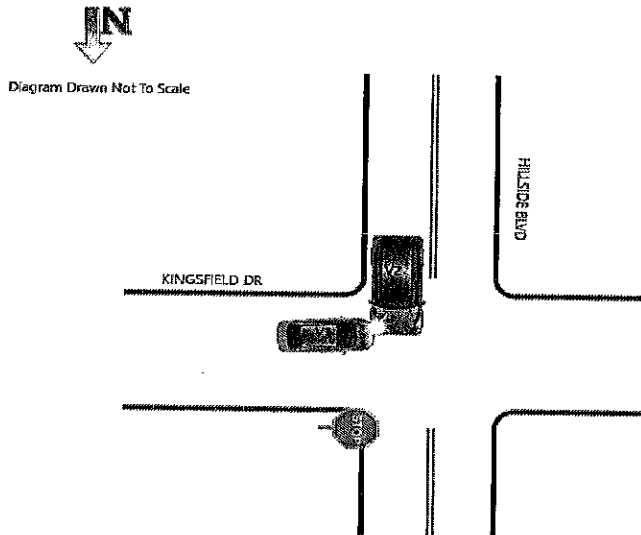
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-044049**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated she was at a stop sign on Kingsfield Dr and thought she was clear to make left turn onto Hillside Blvd. Driver 1 stated when she pulled forward to make a left, she crashed into V2.

Driver 2 stated he was headed North on Hillside Blvd when V1 suddenly crashed into his vehicle.

Upon my arrival, I spoke with both parties involved in this accident. Driver 1 is at fault for failure to yield the right of way to V2. No injuries reported. Moderate damage to both vehicles.

146 Officer's Signature

GIANOULIS J

147 Badge #

410

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending
 ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		20 Crash Occurred On: MARC DR		11 Speed Limit 25		118a
01	2 Police Dept of		At Intersection With Road Name Dir		12 Route No. Suffix 13 Milepost		04
98	LAKEWOOD TOWNSHIP F01		N E of: NED DR		18 Speed Limit 25		118b
07	3 Station/Precinct		Feet Miles		19 To From: 17 Cross Road Name		16
99			S W		20 Route/Name 22 Longitude		119a
07	4 Date of Crash mm dd yy		6 Time (use 2400 hrs)		9 Total Killed Injured		25
100a	06/02/22 THURSDAY		2018 1514		40.072513 -74.210680		119b
01	23 Veh #		24 Policy No.		25 NJ Ins. Code		120a
100b	1		943295367		135		01
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run				120b
02	26 Driver's First Name Initial Last Name		29 Sex		56 Driver's First Name Initial Last Name		121a
102	YITZCHOK S GRADMAN		M		BENZION - RIEGLER		01
02	27 Number & Street				57 Number & Street		121b
103	112 EAST 5TH STREET				65 GITI RD		
05	28 City		State Zip		58 City		
104	LAKEWOOD NJ 08701				LAKEWOOD NJ 08701		
2	30 Eyes		31 State		60 Eyes		122
105	02 D 1		NJ		02 D 1		02
03	32 Driver's License Number		33 DOB mm dd yyyy		62 Driver's License Number		123
106	G71407908211972		11/20/1997 11 24		R41620840008892 08/07/1989 08 23		01
35	Owner's First Name Initial Last Name		65 Owner's First Name Initial Last Name				124
107	YITZCHOK S GRADMAN		BENZION - RIEGLER				08
36	Number & Street		66 Number & Street				125
108	112 EAST 5TH STREET		65 GITI RD				11
01	37 City		State Zip		67 City		126a
109	LAKEWOOD NJ 08701				LAKEWOOD NJ 08701		26
01	38 Make		40 Color		68 Make		126b
110	CAM		GRY 2017		TOYT SIE		
01	44 VIN		42 Plate No.		70 Color		126c
111	4T1BF1FK7HU753207		X10NBW NJ		GRN 2010 R39FKC NJ		
01	46 Vehicle Removed To		45 Expires		74 VIN		127a
112	HESHYS TOWING		12 22		5TDKK4CC4AS320761		26
47	Authority		76 Vehicle Removed To		75 Expires		127b
113	☒ Owner ☐ Driver ☐ Police		MOISHYS TOWING		05 23		56
114	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded		77 Authority				05
115	☐ Left At Scene ☐ Towed Impounded		☒ Owner ☐ Driver ☐ Police				60
48	Alcohol/Drug Test		78 Alcohol/Drug Test		79 Hazardous Material		26
116	Given: ☒ No ☐ Yes ☐ Refused		Given: ☒ No ☐ Yes ☐ Refused		☒ None ☐ On Board ☐ Spill		127c
04	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine				127d
117	Results: 0. % ☐ Pending		Results: 0. % ☐ Pending				127e
03	50 Carrier No.		51 GVWR/GCWR		80 Carrier No.		26
118	☐ USDOT ☐ MC/MX		☒ None ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		☐ USDOT ☐ MC/MX ☒ None ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		128
52	Motor Carrier or Government Entity		82 Motor Carrier or Government Entity				01
119	Number & Street		Number & Street				130
120	City		City				131
121	State		State				132
122	Zip		Zip				133
123	135 Damage To Other Property		☐ Yes (If Yes, describe) ☒ No				134
124	Oper. 136 Charge		137 Summons. No.		Oper. 138 Charge		04
125	Oper. 140 Charge		141 Summons. No.		Oper. 142 Charge		
126							
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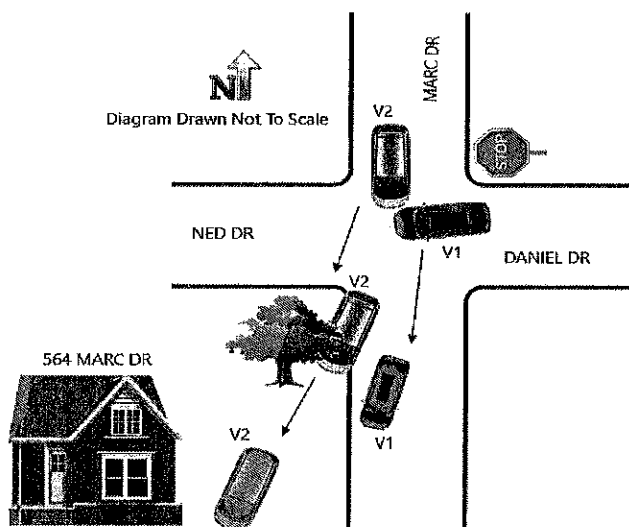
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-044056**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling west on Daniel Dr. He was attempting to make a right turn onto Marc Dr. He entered too far into the intersection. He observed V2 traveling south on Marc Dr and realized a collision was going to take place. He tried to turn left but could not avoid the collision. V1 collided with V2.

The driver of V2 stated he was traveling south on Marc Dr when he observed V1 enter the intersection with Ned Dr. V2 was unable to avoid a collision with V1. The collision caused V2 to strike the curb, leave the roadway, strike a tree on the property of 564 Marc Dr, and travel on the lawn of the same property.

Based on my investigation, V1 caused the crash by failing to yield to the right of way of V2.

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**

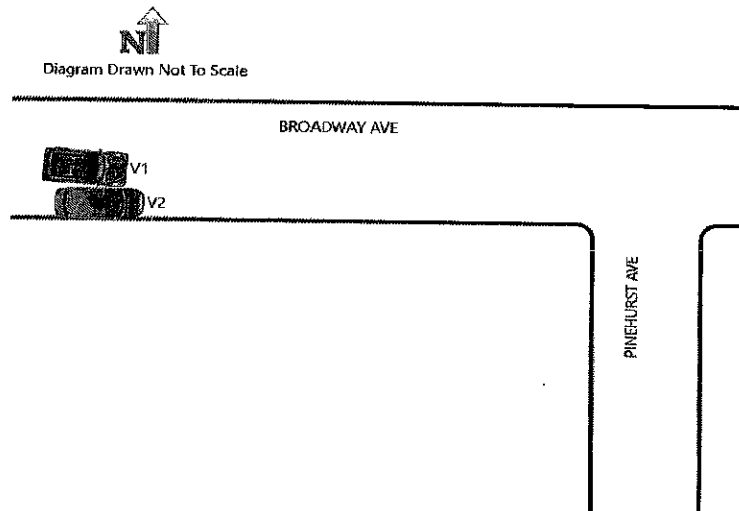
Station: -

Case No: **22-044063**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling east on Broadway Ave. He observed a vehicle traveling west. Due to vehicles parking on both sides of the road, the roadway was narrow. V1 pumped his brakes to avoid a collision with the westbound vehicle. While doing so, V1 struck V2.

V2 was parked legally on Broadway Ave when V1 collided with it.

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

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

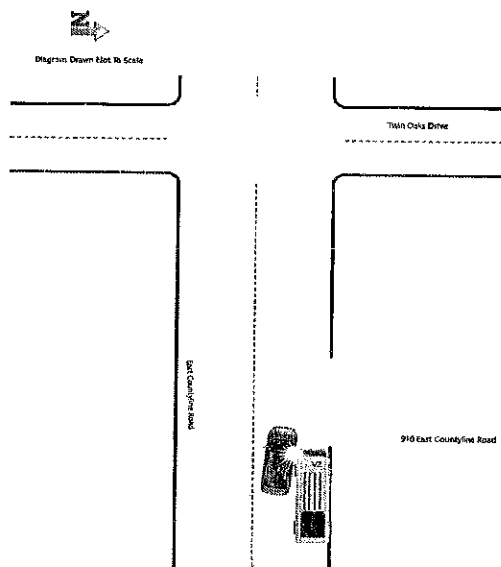
01	02-042354	2 Police Dept of	Code	10 Crash Occurred On: E COUNTY LINE RD	11 Speed Limit: 45	12 Route No.	Suffix	13 Milepost	18 Speed Limit	25		
01	LAKEWOOD TOWNSHIP	01		At Intersection With	Road Name	Dir				118a		
01	3 Station/Precinct			☐ Feet	☐ N ☒ E of: TWIN OAKS DR				25	118b		
05	4 Date of Crash mm dd yy	5 Day Of Week	6 Time (use 2400 hrs)	7 Municipality Code	8 Total Killed	9 Total Injured	19 Ramp	20 Route/Name	22 Longitude	02		
01	05/27/22	FRIDAY	0837	1514	--	--		40.104842	-74.199951	09		
04	23 Veh #	24 Policy No.	25 NJ Ins. Code	53 Veh #	54 Policy No.	55 NJ Ins. Code				01		
01	1	939878739	054	2	BA6315BJ	153				120b		
02	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run			☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						-		
01	26 Driver's First Name	Initial	Last Name	29 Sex	56 Driver's First Name	Initial	Last Name	59 Sex		121a		
01	CECILIA	-	QUINTERO-SANCHEZ	F	JAMES	M	LOUIS	M		01		
01	27 Number & Street				57 Number & Street					121b		
01	1763 LANES MILL RD				1130 HECK AVE APT 56					-		
01	28 City	State	Zip		58 City	State	Zip					
02	LAKEWOOD	NJ	08701		NEPTUNE	NJ	07753					
02	30 Eyes	DL Class	Restrictions	Endorsements	31 State	60 Eyes	DL Class	Restrictions	Endorsements	61 State		
02	-	-	-	-	-	1	B	-	-	NJ		
02	32 Driver's License Number	33 DOB mm dd yyyy	34 Expires mm yy		62 Driver's License Number	63 DOB mm dd yyyy	64 Expires mm yy					
02	-	11/22/1974	-	-	L68023837406901	06/18/1990	06	26		01		
06	35 Owner's First Name	Initial	Last Name		65 Owner's First Name	Initial	Last Name					
06	☐ Same As Driver	ELOY	-	TORRES	☐ Same As Driver	SEMAN	-	SEMAN-TOV INC	-	124		
07	36 Number & Street				66 Number & Street					04		
07	1763 LANES MILL RD				10 TRUAX ST					125		
01	37 City	State	Zip		67 City	State	Zip			04		
01	LAKEWOOD	NJ	08701		ELBERON	NJ	07740			126a		
31	38 Make	39 Model	40 Color	41 Year	42 Plate No.	43 State	68 Make	69 Model	70 Color	71 Year	72 Plate No.	73 State
31	DODG	NEO	WHI	2005	F89PPY	NJ	IC	CE	YEL	2018	K217S1	NJ
01	44 VIN	45 Expires			74 VIN	75 Expires						
01	1B3ES26C15D161942	01	23		4DRBUC8PXJB244272	07	22					
03	46 Vehicle Removed To				76 Vehicle Removed To							
03	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded							
03	☐ Left At Scene ☐ Towed Impounded				☐ Left At Scene ☐ Towed Impounded							
01	47 Authority				77 Authority							
01	☒ Owner ☐ Driver ☐ Police				☐ Owner ☒ Driver ☐ Police							
01	48 Alcohol/Drug Test				78 Alcohol/Drug Test							
01	Given: ☒ No ☐ Yes ☐ Refused				Given: ☒ No ☐ Yes ☐ Refused							
01	Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine							
02	Results: 0. - % ☐ Pending				Results: 0. - % ☐ Pending							
04	50 Carrier No.				80 Carrier No.							
04	☐ USDOT ☒ None				☒ USDOT 1149194 ☐ None							
04	☐ MC/MX				☐ MC/MX 728724							
04	51 GVWR/GCWR				81 GVWR/GCWR							
04	☐ Weight <= 10,000 lbs				☐ Weight <= 10,000 lbs							
04	☐ Weight 10,001-26,000 lbs				☐ Weight 10,001-26,000 lbs							
04	☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs							
04	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity							
04					SEMAN-TOV INC							
04	Number & Street				Number & Street							

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-042354**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was traveling West on East Countyline Road. Driver of vehicle 1 stated while driving her car something did not feel right. Driver of vehicle 1 attempted to make a right turn into the parking lot of 910 East Countyline Road. Vehicle 1 was struck by vehicle 2 while attempting to make a right turn into 910 East Countyline Road. Vehicle 1 had moderate damage to the front passenger side door. Driver of vehicle 1 had no complaint of pain. Driver of vehicle 1 does not have a drivers license and A license driver arrived on scene to retrieve vehicle 1.

Driver of vehicle 2 stated he was traveling West on East Countyline Road. Driver of vehicle 2 stated vehicle 1 was driving close to the yellow center lines in the road. Driver of vehicle 2 stated he was making a right turn into the parking lot of 910 East Countyline Road when vehicle 1 attempted to make a right turn into 910 East Countyline Road striking the front driver side of vehicle 2. Vehicle 2 had minor front driver side damage. Driver of vehicle 1 had no complaint of pain.

Driver of vehicle 1 was issued a summons for being unlicensed 39:3-10

146 Officer's Signature

ORTIZ, K

147 Badge #

377

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number		22-043737		10 Crash Occurred On: 1ST ST		11 Speed Limit 25	
97	2 Police Dept of		LAKEWOOD TOWNSHIP F01		12 Route No. 12		13 Milepost 25	
98	3 Station/Precinct				14 Date of Crash mm dd yy 06/01/22		15 Day Of Week WEDNESDAY	
01	4 Date of Crash mm dd yy		06/01/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1510	
99	7 Municipality Code		1514		8 Total Killed		9 Total Injured	
07	10 Crash Occurred On: 1ST ST		11 Speed Limit 25		12 Route No. 12		13 Milepost 25	
100a	14 Date of Crash mm dd yy		06/01/22		15 Day Of Week WEDNESDAY		16 Time (use 2400 hrs) 1510	
01	17 Municipality Code		1514		18 Total Killed		19 Total Injured	
100b	20 Crash Occurred On: 1ST ST		21 Speed Limit 25		22 Route No. 12		23 Milepost 25	
04	24 Policy No. 5129J 007473		25 NJ Ins. Code 917		26 Driver's First Name SHIMON		27 Number & Street 114 LEONARD ST	
101	28 City LAKEWOOD		29 State NJ		30 Zip 08701		31 Eyes 02	
02	32 Driver's License Number S44067080008982		33 DOB mm dd yyyy 08/18/1998		34 Expires mm yy 08/23		35 Owner's First Name SHIMON	
01	36 Number & Street 114 LEONARD ST		37 City LAKEWOOD		38 State NJ		39 Zip 08701	
103	40 Color GRY		41 Year 2012		42 Plate No. G83LMJ		43 State NJ	
01	44 VIN 4T1BF1FK5CU101047		45 Expires mm yy 07/22		46 Vehicle Removed To		47 Authority Owner	
105	48 Alcohol/Drug Test Given: No		49 Hazardous Material None		50 Carrier No. USDOT		51 GVWR/GCWR Weight <= 10,000 lbs	
03	52 Motor Carrier or Government Entity		53 Damage To Other Property No		54 Summons No. 137		55 Charge 136	
106	56 Driver's First Name IRMA		57 Number & Street 39 SAMI DRIVE		58 City HOWELL		59 State NJ	
107	60 Eyes 02		61 DL Class I		62 Driver's License Number B25413670051782		63 DOB mm dd yyyy 01/14/1978	
108	64 Expires mm yy 08/23		65 Owner's First Name HECTOR		66 Number & Street 1492 LAKEWOOD RD		67 City TOMS RIVER	
109	68 Make HUMM		69 Model H		70 Color WHI		71 Year 2009	
110	72 Plate No. C37NBX		73 State NJ		74 VIN 5GTEN13E298101066		75 Expires mm yy 01/23	
111	76 Vehicle Removed To		77 Authority Owner		78 Alcohol/Drug Test Given: No		79 Hazardous Material None	
112	80 Carrier No. USDOT		81 GVWR/GCWR Weight <= 10,000 lbs		82 Motor Carrier or Government Entity		83 Damage To Other Property No	
113	84 Summons No. 138		85 Charge 137		86 Summons No. 141		87 Charge 140	
114	88 Summons No. 142		89 Charge 143		90 Summons No. 144		91 Charge 145	
115	92 Summons No. 146		93 Charge 147		94 Summons No. 148		95 Charge 149	
116	96 Summons No. 149		97 Charge 150		98 Summons No. 151		99 Charge 152	
117	100 Summons No. 153		101 Charge 154		102 Summons No. 155		103 Charge 156	
118	104 Summons No. 157		105 Charge 158		106 Summons No. 159		107 Charge 159	
119	108 Summons No. 160		109 Charge 160		110 Summons No. 161		111 Charge 161	
120	112 Summons No. 162		113 Charge 162		114 Summons No. 163		115 Charge 163	
121	116 Summons No. 164		117 Charge 164		118 Summons No. 165		119 Charge 165	
122	120 Summons No. 166		121 Charge 166		122 Summons No. 167		123 Charge 167	
123	124 Summons No. 168		125 Charge 168		126 Summons No. 169		127 Charge 169	
124	128 Summons No. 170		129 Charge 170		130 Summons No. 171		131 Charge 171	
125	132 Summons No. 172		133 Charge 172		134 Summons No. 173		135 Charge 173	
126	136 Summons No. 174		137 Charge 174		138 Summons No. 175		139 Charge 175	
127	140 Summons No. 176		141 Charge 176		142 Summons No. 177		143 Charge 177	
128	144 Summons No. 178		145 Charge 178		146 Summons No. 179		147 Charge 179	
129	148 Summons No. 180		149 Charge 180		150 Summons No. 181		151 Charge 181	
130	152 Summons No. 182		153 Charge 182		154 Summons No. 183		155 Charge 183	
131	156 Summons No. 184		157 Charge 184		158 Summons No. 185		159 Charge 185	
132	160 Summons No. 186		161 Charge 186		162 Summons No. 187		163 Charge 187	
133	164 Summons No. 188		165 Charge 188		166 Summons No. 189		167 Charge 189	
134	168 Summons No. 190		169 Charge 190		170 Summons No. 191		171 Charge 191	
135	172 Summons No. 192		173 Charge 192		174 Summons No. 193		175 Charge 193	
136	176 Summons No. 194		177 Charge 194		178 Summons No. 195		179 Charge 195	
137	180 Summons No. 196		181 Charge 196		182 Summons No. 197		183 Charge 197	
138	184 Summons No. 198		185 Charge 198		186 Summons No. 199		187 Charge 199	
139	188							

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-043737**

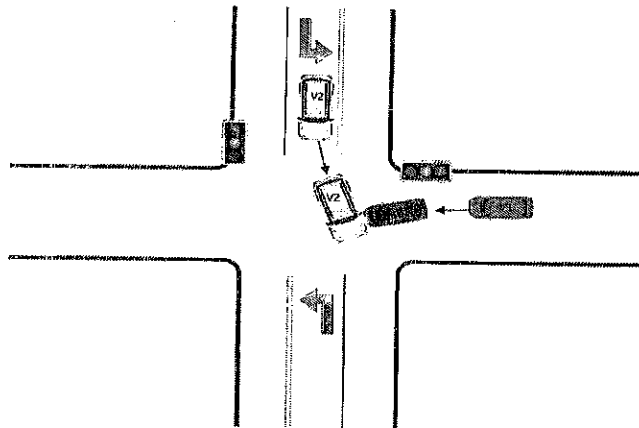
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not to Scale



145 Crash Description/Narrative

Driver of V1 stated he was stopped on 1st St attempting to turn left onto Clifton Ave. D1 stated there was heavy traffic and he was slowly moving forward into the lane when V2 collided with his vehicle.

Driver of V2 stated she was traveling South on Clifton Ave, making a left onto 1st St. D1 stated D2 ignored the red flashing signal and collided with her vehicle.

I determined V1 was at fault for the crash. V1 had a flashing red signal while V2 had a flashing yellow signal. D1 did not wait for traffic to be clear before entering the intersection and caused the crash.

D2 had an ID only license with no expiration listed and was not issued. The vehicle was left on scene awaiting a licensed driver to remove it.

146 Officer's Signature

MICALLEF E

147 Badge #

366

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 3 ☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report																																																																			
05	1 Case Number 22-043773										10 Crash Occurred On: SQUANKUM RD										11 Speed Limit 30		12 Route No. 0547		13 Milepost		18 Speed Limit 25																																																					
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										Code 01										☐ At Intersection With Road Name Dir										19 To 17 Cross Road Name										☐ NB ☐ EB																																							
02	3 Station/Precinct ---										☒ Feet ☐ N ☐ E of: E. 11TH ST										☐ S ☐ W										20 Route/Name										☐ SB ☐ WB																																							
05	4 Date of Crash mm dd yy 06/01/22										5 Day Of Week WEDNESDAY										6 Time (use 2400 hrs) 1905										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										21 Latitude 40.101690										22 Longitude -74.207995									
100a	23 Veh # 1										24 Policy No. 084 1871-D13-30B										25 NJ Ins. Code 896										53 Veh # 2										54 Policy No. 4372-05-54-93										55 NJ Ins. Code 148																													
04	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																																																																					
02	26 Driver's First Name Initial Last Name REYES - GONZALEZ										29 Sex M										56 Driver's First Name Initial Last Name - -										59 Sex -																																																	
01	27 Number & Street 56 5TH STREET										57 Number & Street -																																																																					
01	28 City State Zip LONG BRANCH NJ 07740										58 City State Zip - -																																																																					
104	30 Eyes DL Class Restrictions Endorsements 31 State - - - - -										60 Eyes DL Class Restrictions Endorsements 61 State - - - - -																																																																					
105	32 Driver's License Number 33 DOB mm dd yyyy 34 Expires mm yy - 01/06/1979 - -										62 Driver's License Number 63 DOB mm dd yyyy 64 Expires mm yy - - - - -																																																																					
06	35 Owner's First Name Initial Last Name ☐ Same As Driver GUERLINE - GUTIERREZ -										65 Owner's First Name Initial Last Name ☐ Same As Driver RAIZY - GESTETNER -																																																																					
106	36 Number & Street 1577 DEE ROAD										66 Number & Street 915 EAST END AVE																																																																					
01	37 City State Zip FORKED RIVER NJ 08731										67 City State Zip LAKEWOOD NJ 08701																																																																					
109	38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State 01 CHEV EXP - EX WHI 2004 XCWU42 NJ										68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State TOYT CAM GRY 2018 T80LLJ NJ																																																																					
110	44 VIN 1GCHG39U541194630										45 Expires 04 23										74 VIN 4T1B11HK2JU510051										75 Expires 06 23																																																	
01	46 Vehicle Removed To TILTON'S AUTO BODY										76 Vehicle Removed To -																																																																					
112	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded										☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded																																																																					
-	☐ Left At Scene ☐ Towed Impounded										☒ Left At Scene ☐ Towed Impounded																																																																					
113	47 Authority ☐ Owner ☒ Driver ☐ Police										77 Authority ☒ Owner ☐ Driver ☐ Police																																																																					
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.																																																	
03	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																																																	
01	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 317 SQUANKUM RD (CABLEVISION ELECTRICAL BOX)																																																																															
	Oper. 136 Charge 1 39:3-10										137 Summons. No. A-294002										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 43 M - - - 11 04 - -										REYES - GONZALEZ 56 5TH STREET LONG BRANCH NJ 07740																																																																					
B	2 - - - - - - - - - - - - - -																																																																															
C																																																																																
D																																																																																

96	PAGE 2 OF 3		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number		10 Crash Occurred On: SQUANKUM RD		11 Speed Limit 30	
01	2 Police Dept of LAKEWOOD TOWNSHIP #01		12 Route No. 0547		13 Milepost 25	
02	3 Station/Preinct		14 At Intersection With		15 Road Name E. 11TH ST	
05	4 Date of Crash 06/01/22		5 Day Of Week WEDNESDAY		6 Time (use 2400 hrs) 1905	
01	7 Municipality Code 1514		8 Total Killed		9 Total Injured	
00a	23 Veh # 3		24 Policy No. 608089222 206 1		25 NJ Ins. Code 884	
04	26 Driver's First Name DAVID		27 Number & Street 63 WATERVIEW DR		28 City LAKEWOOD	
01	29 Sex M		30 Eyes 2		31 State NJ	
03	32 Driver's License Number F02931560007962		33 DOB 07/25/1996		34 Expires 07 25	
06	35 Owner's First Name DAVID		36 Number & Street 63 WATERVIEW DR		37 City LAKEWOOD	
01	38 Make TOYT		39 Model HIG		40 Color BLU	
09	41 Year 2020		42 Plate No. P82NJA		43 State NJ	
10	44 VIN 5TDBZRBH1LS040207		45 Expires 12 23		46 Vehicle Removed To	
01	47 Authority Owner		48 Alcohol/Drug Test		49 Hazardous Material	
11	50 Carrier No.		51 GVWR/GCWR		52 Motor Carrier or Government Entity	
12	53 VIN		54 VIN		55 VIN	
13	56 Driver's First Name		57 Number & Street		58 City	
14	59 Sex		60 Eyes		61 State	
15	62 Driver's License Number		63 DOB		64 Expires	
16	65 Owner's First Name		66 Number & Street		67 City	
17	68 Make		69 Model		70 Color	
18	71 Year		72 Plate No.		73 State	
19	74 VIN		75 Expires		76 Vehicle Removed To	
20	77 Authority		78 Alcohol/Drug Test		79 Hazardous Material	
21	80 Carrier No.		81 GVWR/GCWR		82 Motor Carrier or Government Entity	
22	83		84		85	
23	86		87		88	
24	89		90		91	
25	92		93		94	
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264	809		810		811	
265	812		813		814	
266	815					

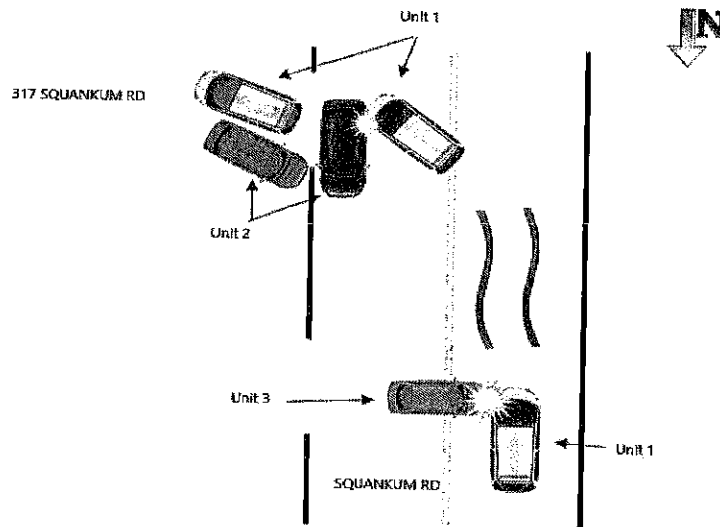
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **--** Case No: **22-043773**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS TRAVELING SOUTH ON SQUANKUM ROAD, WHEN VEHICLE #3 PULLED OUT FROM A DRIVEWAY AND STRUCK VEHICLE #1 CAUSING DRIVER #1 TO LOSE CONTROL AND SWERVED TO THE LEFT, STRIKING VEHICLE #2 WHICH WAS PARKED ALONG THE CURB. DRIVER #3 STATED THAT HE PULLED OUT FROM A DRIVEWAY AND COLLIDED WITH VEHICLE #1 WHICH WAS TRAVELING SOUTH ON SQUANKUM ROAD . NO INJURIES REPORTED

146 Officer's Signature

RIVERA F

147 Badge #

294

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending
 ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number		10 Crash Occurred On: E COUNTY LINE RD		11 Speed Limit 40
97	22-043791		12 Route No. 0526		18 Speed Limit 25
01	2 Police Dept of LAKEWOOD TOWNSHIP		13 Milepost		19 To
98	Code 01		14		20 Route/Name
07	3 Station/Princt		15		21 Latitude
99	--		16		22 Longitude
05	4 Date of Crash 06/01/22		5 Day Of Week WEDNESDAY		23 Veh # 1
100a	6 Time (use 2400 hrs) 2102		7 Municipality Code 1514		24 Policy No. 951299437
01	8 Total Killed		9 Total Injured 1		25 NJ Ins. Code 134
100b	23 Veh # 1		24 Policy No. 951299437		25 NJ Ins. Code 134
04	26 Driver's First Name ROBERTO		27 Number & Street 99 HARVARD ST		28 City LAKEWOOD
101	29 Sex M		30 Eyes BR		31 State NJ
02	32 Driver's License Number		33 DOB 05/04/1992		34 Expires 08/22
102	35 Owner's First Name MISRAIN		36 Number & Street 99 HARVARD ST		37 City LAKEWOOD
02	38 Make CHRY		39 Model TOW		40 Color GRN
103	41 Year 2006		42 Plate No. J43PBB		43 State NJ
02	44 VIN 2A4GP54L56R858228		45 Expires 08/22		46 Vehicle Removed To
104	47 Authority		48 Alcohol/Drug Test		49 Hazardous Material
1	50 Carrier No.		51 GVWR/GCWR		52 Motor Carrier or Government Entity
105	53 Veh #		54 Policy No.		55 NJ Ins. Code
14	56 Driver's First Name AURUMY		57 Number & Street 9 DAVOS PL		58 City LAKEWOOD
106	59 Sex M		60 Eyes		61 State NJ
-	62 Driver's License Number		63 DOB 12/26/2007		64 Expires
107	65 Owner's First Name		66 Number & Street		67 City
01	68 Make		69 Model		70 Color
13	71 Year		72 Plate No.		73 State
110	74 VIN		75 Expires		76 Vehicle Removed To
01	77 Authority		78 Alcohol/Drug Test		79 Hazardous Material
112	80 Carrier No.		81 GVWR/GCWR		82 Motor Carrier or Government Entity
-	83		84		85
113	86		87		88
114	89		90		91
115	92		93		94
116	95		96		97
02	98		99		100
117	101		102		103
01	104		105		106
135 Damage To Other Property					
136 Charge					
137 Summons. No.					
138 Charge					
139 Summons. No.					
140 Charge					
141 Summons. No.					
142 Charge					
143 Summons. No.					
Names & Addresses of Occupants - If Deceased, Date & Time of Death					
ROBERTO A VENTURA RODRIGUEZ					
99 HARVARD ST LAKEWOOD NJ 08701					
AURUMY WEINGARTEM					
9 DAVOS PL LAKEWOOD NJ 08701					

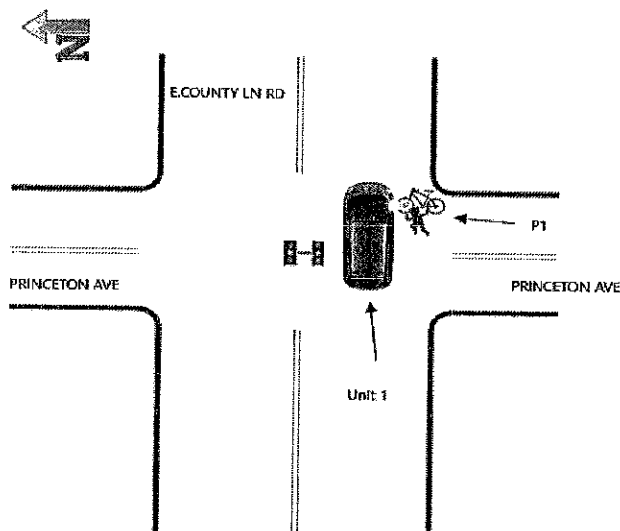
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **--** Case No: **22-043791**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS TRAVELING EAST ON E. COUNTY LINE ROAD APPROACHING THE TRAFFIC LIGHT OF E. COUNTY LINE ROAD/PRINCETON AVENUE, WHEN THE PEDALCYCLIST ATTEMPTED TO RIDE ACROSS TRAVELING NORTH ON PRINCETON AVENUE, CAUSING VEHICLE #1 TO STRIKE THE PEDALCYCLIST. DRIVER #1 ALSO STATED THAT THE TRAFFIC LIGHT WAS GREEN AND IT APPEARED THAT THE PEDALCYCLIST ATTEMPTED TO STOP BUT SLID, DUE TO THE WET SURFACE. PEDALCYCLIST STATED THAT HE ATTEMPTED TO STOP BUT SLID AND COLLIDED WITH VEHICLE #1 WHICH WAS TRAVELING EAST ON E. COUNTY LINE ROAD. THE INITIAL IMPACT WAS ON THE FRONT RIGHT SIDE OF VEHICLE #1. PEDALCYCLIST WAS TRANSPORTED TO MONMOUTH MEDICAL CENTER FOR A LEG INJURY

WITNESS YITZCHOK DIAMANT, STATED THAT VEHICLE #1 WAS TRAVELING EAST ON E. COUNTY LINE ROAD, WHEN THE PEDALCYCLIST TRAVELING NORTH ON PRINCETON AVENUE ATTEMPTED TO STOP AND SLID CAUSING A COLLISION. WITNESS ALSO STATED THAT DRIVER #1 HAD THE GREEN LIGHT.

146 Officer's Signature

RIVERA F

147 Badge #

294

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete