

|                                                                                                          |                              |    |                                                                                                             |    |                                              |    |    |    |               |    |    |    |                                  |                  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
|----------------------------------------------------------------------------------------------------------|------------------------------|----|-------------------------------------------------------------------------------------------------------------|----|----------------------------------------------|----|----|----|---------------|----|----|----|----------------------------------|------------------|-----------------------------------------------------------------|--|-----------------------------------------|--|----------------------------------------|--|-------------------|--|---------------------|--|-------------------------------------------------------------------------------------------------------------|------|-----------------|--|--------------|--|-------------------------------------------|--|--------------|--|---------------------|--|----------|--|-------|--|---------|--|-----|--|--|--|--|--|--|--|--|--|----------|--|------|--|--|--|--|--|--|--|--|--|----------|--|-----|--|---------|--|------|--|--------------|--|--------|--|----------|--|----|--|-----|
| 96                                                                                                       | Page 1 of 3                  |    | Fatal                                                                                                       |    | New Jersey Police Crash Investigation Report |    |    |    |               |    |    |    |                                  |                  | <input checked="" type="checkbox"/> Reportable                  |  | <input type="checkbox"/> Non-Reportable |  | <input type="checkbox"/> Change Report |  |                   |  |                     |  |                                                                                                             |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 05                                                                                                       | 1 Case Number                |    | 2015-00073818                                                                                               |    |                                              |    |    |    |               |    |    |    | 10 Crash Occurred On:            |                  | Olden ST                                                        |  | N                                       |  | 3                                      |  | 5                 |  | 118a                |  |                                                                                                             |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | 2 Police Dept of             |    | Brick Township                                                                                              |    |                                              |    |    |    |               |    |    |    | Code                             |                  | 01                                                              |  | 12 Route No.                            |  | Suffix                                 |  | 13 Milepost       |  | 02                  |  |                                                                                                             |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 07                                                                                                       | 3 Station/Precinct           |    | Brick Police                                                                                                |    |                                              |    |    |    |               |    |    |    | 400.00                           |                  | <input checked="" type="checkbox"/> Feet                        |  | <input type="checkbox"/> N              |  | <input type="checkbox"/> E             |  | of: Rt.88         |  | 04                  |  |                                                                                                             |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 05                                                                                                       | 4 Date of Crash              |    | mm                                                                                                          |    | dd                                           |    | yy |    | 5 Day of Week |    | Su |    | M                                |                  | Tu                                                              |  | W                                       |  | Th                                     |  | F                 |  | Sa                  |  | 119a                                                                                                        |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | 1                            |    | 2                                                                                                           |    | 0                                            |    | 7  |    | 1             |    | 5  |    | 6 Time (use 2400 hrs)            |                  | 1                                                               |  | 8                                       |  | 5                                      |  | 8                 |  | 7 Municipality Code |  | 1506                                                                                                        |      | 119b            |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 02                                                                                                       | 23 Veh No                    |    | 24 Policy No.                                                                                               |    | F474772-1                                    |    |    |    |               |    |    |    |                                  |                  | 25 Ins Code                                                     |  | 426                                     |  | 53 Veh No                              |  | 54 Policy No.     |  | 01209 34 19C 7101 5 |  |                                                                                                             |      |                 |  |              |  |                                           |  | 55 Ins Code  |  | 823                 |  | 120      |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | 26 Driver's First Name       |    | THERESA M HOLLER                                                                                            |    |                                              |    |    |    |               |    |    |    | 29 Sex                           |                  | F                                                               |  | 56 Driver's First Name                  |  | REBECCA E ROE                          |  |                   |  |                     |  |                                                                                                             |      |                 |  | 59 Sex       |  |                                           |  | 01           |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | 27 Number and Street         |    | 569 ALABAMA AVE                                                                                             |    |                                              |    |    |    |               |    |    |    | 30 Eyes                          |                  | Hazel                                                           |  | 57 Number and Street                    |  | 118 DAYBREAK CIR                       |  |                   |  |                     |  |                                                                                                             |      |                 |  | 60 Eyes      |  |                                           |  | 01           |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 02                                                                                                       | 28 City                      |    | BRICK                                                                                                       |    |                                              |    |    |    |               |    |    |    | State                            |                  | NJ                                                              |  | Zip                                     |  | 08724                                  |  | 58 City           |  | BRICK               |  |                                                                                                             |      |                 |  |              |  |                                           |  | State        |  | NJ                  |  | Zip      |  | 08724 |  | 121     |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 05                                                                                                       | 31 State                     |    | NJ                                                                                                          |    |                                              |    |    |    |               |    |    |    | 32 Drivers License No            |                  | H6271 73974 62615                                               |  |                                         |  |                                        |  |                   |  |                     |  | 33 DOB                                                                                                      |      | mm              |  | dd           |  | yy                                        |  | 12           |  | 15                  |  | 61       |  | 02    |  | 19      |  | 122 |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 05                                                                                                       | 35 Owner's First Name        |    | THERESA M HOLLER                                                                                            |    |                                              |    |    |    |               |    |    |    | 65 Owner's First Name            |                  | Tracie Roe                                                      |  |                                         |  |                                        |  |                   |  |                     |  | 63 DOB                                                                                                      |      | mm              |  | dd           |  | yy                                        |  | 07           |  | 27                  |  | 89       |  | 09    |  | 18      |  | --  |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 02                                                                                                       | 36 Number and Street         |    | 569 ALABAMA AVE                                                                                             |    |                                              |    |    |    |               |    |    |    | 66 Number and Street             |                  | 118 DAYBREAK CIR                                                |  |                                         |  |                                        |  |                   |  |                     |  | 64 DOB                                                                                                      |      | mm              |  | dd           |  | yy                                        |  | 07           |  | 27                  |  | 89       |  | 09    |  | 18      |  | 123 |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 02                                                                                                       | 37 City                      |    | BRICK                                                                                                       |    |                                              |    |    |    |               |    |    |    | State                            |                  | NJ                                                              |  | Zip                                     |  | 08724                                  |  | 67 City           |  | BRICK               |  |                                                                                                             |      |                 |  |              |  |                                           |  | State        |  | NJ                  |  | Zip      |  | 08724 |  | 124     |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 02                                                                                                       | 38 Make                      |    | TOYOTA                                                                                                      |    |                                              |    |    |    |               |    |    |    | 39 Model                         |                  | Sienna (van)                                                    |  |                                         |  |                                        |  |                   |  |                     |  | 40 Color                                                                                                    |      | Silver          |  | 41 Year      |  | 2005                                      |  | 42 Plate No. |  | SWD27E              |  | 43 State |  | NJ    |  | 68 Make |  | KIA |  |  |  |  |  |  |  |  |  | 69 Model |  | Soul |  |  |  |  |  |  |  |  |  | 70 Color |  | Red |  | 71 Year |  | 2011 |  | 72 Plate No. |  | J11ELB |  | 73 State |  | NJ |  | 125 |
| 01                                                                                                       | 44 VIN                       |    | 5TDZA23C15S364809                                                                                           |    |                                              |    |    |    |               |    |    |    | 45 Expires                       |                  | 08                                                              |  | 16                                      |  | 74 VIN                                 |  | KNDJT2A27B7233021 |  |                     |  |                                                                                                             |      |                 |  |              |  | 75 Expires                                |  | 07           |  | 16                  |  | 01       |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | 46 Vehicle Removed To        |    | Driven Away                                                                                                 |    |                                              |    |    |    |               |    |    |    | 47 Authority                     |                  | <input checked="" type="checkbox"/> Owner                       |  | 76 Vehicle Removed To                   |  | Driven Away                            |  |                   |  |                     |  |                                                                                                             |      |                 |  | 77 Authority |  | <input checked="" type="checkbox"/> Owner |  | 08           |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | 48 Alcohol/Drug Test         |    | Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused |    |                                              |    |    |    |               |    |    |    | 134 Crash Diagram (NOT TO SCALE) |                  | 78 Alcohol/Drug Test                                            |  |                                         |  |                                        |  |                   |  |                     |  | Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused |      |                 |  |              |  |                                           |  |              |  | 03                  |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | Type:                        |    | <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine               |    |                                              |    |    |    |               |    |    |    | Indicate North                   |                  | Type:                                                           |  |                                         |  |                                        |  |                   |  |                     |  | <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine               |      |                 |  |              |  |                                           |  |              |  | 26                  |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| ---                                                                                                      | Results:                     |    | 0.00%                                                                                                       |    |                                              |    |    |    |               |    |    |    | Pending                          |                  | Results:                                                        |  |                                         |  |                                        |  |                   |  |                     |  | 0.00%                                                                                                       |      |                 |  |              |  |                                           |  |              |  | Pending             |  | ---      |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| ---                                                                                                      | 49 Hazardous Material        |    | On Board <input type="checkbox"/> Spill <input type="checkbox"/>                                            |    |                                              |    |    |    |               |    |    |    | Name or Placard No.              |                  | 79 Hazardous Material                                           |  |                                         |  |                                        |  |                   |  |                     |  | On Board <input type="checkbox"/> Spill <input type="checkbox"/>                                            |      |                 |  |              |  |                                           |  |              |  | Name or Placard No. |  | ---      |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| ---                                                                                                      | 50 Carrier No.               |    | <input type="checkbox"/> USDOT <input type="checkbox"/> Other *                                             |    |                                              |    |    |    |               |    |    |    | 80 Carrier No.                   |                  | <input type="checkbox"/> USDOT <input type="checkbox"/> Other * |  |                                         |  |                                        |  |                   |  |                     |  | ---                                                                                                         |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 04                                                                                                       | 51 Commercial Vehicle Weight |    | <input type="checkbox"/> ≤ 10,000 lbs                                                                       |    |                                              |    |    |    |               |    |    |    | 81 Commercial Vehicle Weight     |                  | <input type="checkbox"/> ≤ 10,000 lbs                           |  |                                         |  |                                        |  |                   |  |                     |  | 129a                                                                                                        |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 01                                                                                                       | 52 Carrier name              |    |                                                                                                             |    |                                              |    |    |    |               |    |    |    | 82 Carrier name                  |                  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  | 129b                                                                                                        |      |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 136 Damage To Other Property None.                                                                       |                              |    |                                                                                                             |    |                                              |    |    |    |               |    |    |    |                                  |                  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 129c |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| Oper. 1 137 Charge Multiple Charges 138 Summons No. 2 139 Charge Multiple Charges 140 Summons No.        |                              |    |                                                                                                             |    |                                              |    |    |    |               |    |    |    |                                  |                  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 129d |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| 141 Officer's Signature Charles Kelly 142 Badge No. 241 143 Reviewed By 144 Case Status Pending Complete |                              |    |                                                                                                             |    |                                              |    |    |    |               |    |    |    |                                  |                  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 130  |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| Names & Addresses of Occupants - If Deceased, Date & Time of Death                                       |                              |    |                                                                                                             |    |                                              |    |    |    |               |    |    |    |                                  |                  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 131  |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| A                                                                                                        | 83                           | 84 | 85                                                                                                          | 86 | 87                                           | 88 | 89 | 90 | 91            | 92 | 93 | 94 | 95                               | THERESA M HOLLER |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 132  |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| B                                                                                                        | 1                            | 01 | 01                                                                                                          | -- | 53                                           | F  | -- | -- | --            | 09 | 04 | -- | --                               | 569 ALABAMA AVE  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 133  |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| C                                                                                                        | 1                            | 03 | 01                                                                                                          | -- | 17                                           | F  | -- | -- | --            | 09 | 04 | -- | --                               | BRICK, NJ 08724  |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 11   |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| D                                                                                                        | 2                            | 01 | 01                                                                                                          | -- | 26                                           | F  | -- | -- | --            | 09 | 04 | -- | --                               | REBECCA E ROE    |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             | 11   |                 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |
| E                                                                                                        |                              |    |                                                                                                             |    |                                              |    |    |    |               |    |    |    |                                  | 118 DAYBREAK CIR |                                                                 |  |                                         |  |                                        |  |                   |  |                     |  |                                                                                                             |      | BRICK, NJ 08724 |  |              |  |                                           |  |              |  |                     |  |          |  |       |  |         |  |     |  |  |  |  |  |  |  |  |  |          |  |      |  |  |  |  |  |  |  |  |  |          |  |     |  |         |  |      |  |              |  |        |  |          |  |    |  |     |

## New Jersey Police Crash Investigation Report

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

## Motor Vehicle Crash Description

Station: **Brick Police**Case No: **2015-00073818**

(Refer to vehicle by number)

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

## 135 Crash Description

Vehicle 1 was exiting the parking lot of Home Depot and making a left turn to Olden St. Vehicle 2 was traveling straight on Olden St. The crash occurred when vehicle 2 impacted vehicle 1 as it was turning. The vehicles were moved prior to my arrival and no injuries were reported.

The driver of vehicle 1 stated she was inching out to make the left turn and did not see vehicle 2. The driver of vehicle 2 stated she was going straight when vehicle 1 turned in front of her. The driver of vehicle 2 stated she swerved in an attempt to avoid the crash.

On scene I observed damage to the left middle of vehicle 1, and the left upper front of vehicle 2.

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Diagram

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

Station: Brick Police

Case No: 2015-00073818

Olden St.



Entrance to Home Depot

