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| 97  | 01  | 1 Case Number          |  | 2011-00065630                                                                                               |  |                                              |  |         |  |               |  |                   |  | 10 Crash Occurred On:            |  | Route 88                                                                                                                        |  | 11 Speed Limit                                                                                              |  | E 4 0                                  |  | 8 8            |  | 00                   |  |                              |  |                                                                                                                          |  |                                                                 |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 98  | 01  | 2 Police Dept of       |  | Brick PD                                                                                                    |  |                                              |  |         |  |               |  |                   |  | Code                             |  | 01                                                                                                                              |  | 12 Route No.                                                                                                |  | Suffix                                 |  | 13 Milepost    |  | 18 Speed Limit       |  | 51                           |  |                                                                                                                          |  |                                                                 |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 99  | 02  | 3 Station/Precinct     |  | ---                                                                                                         |  |                                              |  |         |  |               |  |                   |  | 500.00                           |  | <input checked="" type="checkbox"/> Feet                                                                                        |  | <input type="checkbox"/> Miles                                                                              |  | 14 15                                  |  | 16             |  | 17 Cross Road Name   |  | Brentwood DR                 |  | 00                                                                                                                       |  |                                                                 |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 100 | 05  | 4 Date of Crash        |  | mm                                                                                                          |  | dd                                           |  | yy      |  | 5 Day of Week |  | Su M Tu W Th F Sa |  | 6 Time (use 2400 hrs)            |  | 1 6 0 3                                                                                                                         |  | 7 Municipality Code                                                                                         |  | 1506                                   |  | 8 Total Killed |  | 9 Total Injured      |  | 02                           |  | 19 To: 20 Route/Name                                                                                                     |  | 21 Latitude                                                     |  | 22 Longitude                                                                                                                    |  | 119a 119b                                                                                                                         |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 101 | 02  | 23 Veh No              |  | 24 Policy No.                                                                                               |  | HPA0001152450                                |  |         |  |               |  |                   |  |                                  |  | 25 Ins Code                                                                                                                     |  | 411                                                                                                         |  | 53 Veh No                              |  | 54 Policy No.  |  | A02-238-649890-00 11 |  |                              |  |                                                                                                                          |  |                                                                 |  |                                                                                                                                 |  | 55 Ins Code                                                                                                                       |  | 182        |  | 120 121                                                                                                                  |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          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|                                                                                                                                                                                                                                 |  |  |  |                                                                                                                          |  |  |  |  |  |  |  |  |  |                 |  |                              |  |  |  |  |  |  |  |  |  |                                                                                                                          |  |  |  |  |  |  |  |  |  |                 |  |                              |  |  |  |  |  |  |  |  |  |                                                                                                                          |  |  |  |  |  |  |  |  |  |                 |  |                              |  |  |  |  |  |  |  |  |  |                                                                              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| 102 | 02  | 26 Driver's First Name |  | Quadirah I Booker                                                                                           |  |                                              |  |         |  |               |  |                   |  | 29 Sex                           |  | F                                                                                                                               |  | 56 Driver's First Name                                                                                      |  | Linda E Groh                           |  |                |  |                      |  |                              |  |                                                                                                                          |  | 59 Sex                                                          |  | F                                                                                                                               |  | 01                                                                                                                                |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 103 | 02  | 27 Number and Street   |  | 508 Massachusetts AVE                                                                                       |  |                                              |  |         |  |               |  |                   |  | 30 Eyes                          |  | 02                                                                                                                              |  | 57 Number and Street                                                                                        |  | 18 Cherry Tree CIR                     |  |                |  |                      |  |                              |  |                                                                                                                          |  | 60 Eyes                                                         |  | 05                                                                                                                              |  | 01                                                                                                                                |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 104 | 02  | 28 City                |  | Lakewood                                                                                                    |  |                                              |  |         |  |               |  |                   |  | State                            |  | New Jersey                                                                                                                      |  | Zip                                                                                                         |  | 08701-                                 |  | 58 City        |  | Howell               |  |                              |  |                                                                                                                          |  |                                                                 |  |                                                                                                                                 |  | State                                                                                                                             |  | New Jersey |  | Zip                                                                                                                      |  | 07731-                |  | 122 123                                                         |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |        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| 105 | 02  | 31 State               |  | 32 Drivers License No                                                                                       |  | NJ B6486 63569 54932                         |  |         |  |               |  |                   |  |                                  |  | 33 DOB mm dd yy                                                                                                                 |  | 04 25 93                                                                                                    |  | 34 Expires mm yy                       |  | 03 15          |  | 61 State             |  | 62 Drivers License No        |  | NJ G7528 47365 58685                                                                                                     |  |                                                                 |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  | 63 DOB mm dd yy                                                                                                          |  | 08 04 68              |  | 64 Expires mm yy                                                |  | 08 13      |  | 00    |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 106 | --- | 35 Owner's First Name  |  | Roxane Bettis                                                                                               |  |                                              |  |         |  |               |  |                   |  | 65 Owner's First Name            |  | Glenn G Groh                                                                                                                    |  |                                                                                                             |  |                                        |  |                |  |                      |  | 36 Number and Street         |  | 508 Massachusetts AVE                                                                                                    |  |                                                                 |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  | 66 Number and Street                                                                                                     |  | 18 Cherry Tree CIR    |  |                                                                 |  |            |  |       |  |                 |  | 124 125                                                                                                                                                                                                                                                                     |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 107 | --- | 37 City                |  | Lakewood                                                                                                    |  |                                              |  |         |  |               |  |                   |  | State                            |  | New Jersey                                                                                                                      |  | Zip                                                                                                         |  | 08701-                                 |  | 67 City        |  | Howell               |  |                              |  |                                                                                                                          |  |                                                                 |  |                                                                                                                                 |  | State                                                                                                                             |  | New Jersey |  | Zip                                                                                                                      |  | 07731-                |  | 01                                                              |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |        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| 108 | 01  | 38 Make                |  | 39 Model                                                                                                    |  | 40 Color                                     |  | 41 Year |  | 42 Plate No.  |  | 43 State          |  | NJ                               |  | 44 VIN                                                                                                                          |  | 1HGCM72525A023608                                                                                           |  |                                        |  |                |  |                      |  |                              |  | 45 Expires                                                                                                               |  | 05 12                                                           |  | 74 VIN                                                                                                                          |  | 2D4GP44L96R904016                                                                                                                 |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  | 75 Expires |  | 09 12 |  | 126 127         |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |        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| 109 | 01  | 46 Vehicle Removed To  |  | Sandies                                                                                                     |  |                                              |  |         |  |               |  |                   |  | 47 Authority                     |  | <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input checked="" type="checkbox"/> Police |  | 76 Vehicle Removed To                                                                                       |  | Andrew's                               |  |                |  |                      |  |                              |  |                                                                                                                          |  | 77 Authority                                                    |  | <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input checked="" type="checkbox"/> Police |  | 128a 128b 128c 128d 128e 128f 128g 128h 128i 128j 128k 128l 128m 128n 128o 128p 128q 128r 128s 128t 128u 128v 128w 128x 128y 128z |  |            |  |                                                                                                                          |  |                       |  |                                                                 |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  |  |  |  |  |                 |  |                              |  |            |  |                                           |  |  |  |  |  |                                                                                                                          |  |  |  |                 |  |                         |  |  |  |                 |  |                              |  |  |  |             |  |  |  |  |  |                                                                                                                          |  |  |  |               |  |     |  |  |  |                 |  |                              |  |  |  |                 |  |           |  |  |  |                                                                                                                          |  |  |  |  |  |                 |  |                                                                               |  |                 |  |                              |  |  |  |  |  |  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| 110 | 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 |  |                                        |  |                |  |                      |  |                              |  | 49 Hazardous Material                                                                                                    |  | Name or Placard No.                                             |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  |                                                                                                                          |  | 79 Hazardous Material |  | Name or Placard No.                                             |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  | 129a 129b 129c 129d 129e 129f 129g 129h 129i 129j 129k 129l 129m 129n 129o 129p 129q 129r 129s 129t 129u 129v 129w 129x 129y 129z |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 111 | 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               |  |                                        |  |                |  |                      |  |                              |  | 50 Carrier No.                                                                                                           |  | <input type="checkbox"/> USDOT <input type="checkbox"/> Other * |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  |                                                                                                                          |  | 80 Carrier No.        |  | <input type="checkbox"/> USDOT <input type="checkbox"/> Other * |  |            |  |       |  |                 |  |                                                                                                                                                                                                                                                                             |  | 130 131 132 133                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  |  |  |  |  |                 |  |                              |  |            |  |                                           |  |  |  |  |  |                                                                                                                          |  |  |  |                 |  |                         |  |  |  |                 |  |                              |  |  |  |             |  |  |  |  |  |                                                                                                                          |  |  |  |               |  |     |  |  |  |                 |  |                              |  |  |  |                 |  |           |  |  |  |                                                                                                                          |  |  |  |  |  |                 |  |                                                                               |  |                 |  |                              |  |  |  |  |  |  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| 112 | --- | Results:               |  | 0. ___ % <input type="checkbox"/> Pending                                                                   |  |                                              |  |         |  |               |  |                   |  | 51 Commercial Vehicle Weight     |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs        |  |                                                                                                             |  |                                        |  |                |  |                      |  | 81 Commercial Vehicle Weight |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |                                                                 |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  | 52 Carrier name                                                                                                          |  | 82 Carrier name       |  |                                                                 |  |            |  |       |  |                 |  | 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 |  |                                                                                                                                   |  |  |  |  |  |  |  |                                                                                                                          |  |                 |  |          |  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| 113 | --- | On Board               |  | <input type="checkbox"/> <input type="checkbox"/>                                                           |  |                                              |  |         |  |               |  |                   |  | See Attached Pages               |  | On Board                                                                                                                        |  | <input type="checkbox"/> <input type="checkbox"/>                                                           |  |                                        |  |                |  |                      |  |                              |  | See Attached Pages                                                                                                       |  | 136 Damage To Other Property                                    |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  |                                                                                                                          |  | None                  |  |                                                                 |  |            |  |       |  |                 |  | 137 Charge                                                                                                                                                                                                                                                                  |  | <input type="checkbox"/> Multiple Charges                                                                                         |  |  |  |  |  |  |  |                                                                                                                          |  | 138 Summons No. |  | T-120195 |  |  |  |  |  |                 |  |                              |  | 139 Charge |  | <input type="checkbox"/> Multiple Charges |  |  |  |  |  |                                                                                                                          |  |  |  | 140 Summons No. |  | 141 Officer's Signature |  |  |  |                 |  |                              |  |  |  | James Kelly |  |  |  |  |  |                                                                                                                          |  |  |  | 142 Badge No. |  | 233 |  |  |  |                 |  |                              |  |  |  | 143 Reviewed By |  | Badge No. |  |  |  |                                                                                                                          |  |  |  |  |  | 144 Case Status |  | <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |  |                 |  |                              |  |  |  |  |  | 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 |  |  |  |                                                                                                                          |  |  |  |  |  |  |  |  |  |                 |  |                              |  |  |  |  |  |  |  |  |  |                                                                                                                          |  |  |  |  |  |  |  |  |  |                 |  |                              |  |  |  |  |  |  |  |  |  |                                                                                                                          |  |  |  |  |  |  |  |  |  |                 |  |                              |  |  |  |  |  |  |  |  |  |                                                                                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| 114 | --- | 50 Carrier No.         |  | <input type="checkbox"/> USDOT <input type="checkbox"/> Other *                                             |  |                                              |  |         |  |               |  |                   |  | 51 Commercial Vehicle Weight     |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs        |  |                                                                                                             |  |                                        |  |                |  |                      |  | 52 Carrier name              |  | 53 Commercial Vehicle Weight                                                                                             |  |                                                                 |  |                                                                                                                                 |  |                                                                                                                                   |  |            |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |                       |  |                                                                 |  |            |  |       |  | 54 Carrier name |  | 55 Commercial Vehicle Weight                                                                                                                                                                                                                                                |  |                                                                                                                                   |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |                 |  |          |  |  |  |  |  | 56 Carrier name |  | 57 Commercial Vehicle Weight |  |            |  |                                           |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |                 |  |                         |  |  |  | 58 Carrier name |  | 59 Commercial Vehicle Weight |  |  |  |             |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |               |  |     |  |  |  | 60 Carrier name |  | 61 Commercial Vehicle Weight |  |  |  |                 |  |           |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |                 |  |                                                                               |  | 62 Carrier name |  | 63 Commercial Vehicle Weight |  |  |  |  |  |                                                                                                                                                                                                                                 |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 64 Carrier name |  | 65 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 66 Carrier name |  | 67 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 68 Carrier name |  | 69 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 70 Carrier name |  | 71 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 72 Carrier name |  | 73 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 74 Carrier name |  | 75 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 76 Carrier name |  | 77 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 78 Carrier name |  | 79 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 80 Carrier name |  | 81 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 82 Carrier name |  | 83 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 84 Carrier name |  | 85 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 86 Carrier name |  | 87 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 88 Carrier name |  | 89 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 90 Carrier name |  | 91 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 92 Carrier name |  | 93 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 94 Carrier name |  | 95 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 96 Carrier name |  | 97 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 98 Carrier name |  | 99 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 100 Carrier name |  | 101 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 102 Carrier name |  | 103 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 104 Carrier name |  | 105 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 106 Carrier name |  | 107 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 108 Carrier name |  | 109 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 110 Carrier name |  | 111 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 112 Carrier name |  | 113 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 114 Carrier name |  | 115 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 116 Carrier name |  | 117 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 118 Carrier name |  | 119 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 120 Carrier name |  | 121 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 122 Carrier name |  | 123 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 124 Carrier name |  | 125 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 126 Carrier name |  | 127 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 128 Carrier name |  | 129 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 130 Carrier name |  | 131 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 132 Carrier name |  | 133 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 134 Carrier name |  | 135 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 136 Carrier name |  | 137 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 138 Carrier name |  | 139 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 140 Carrier name |  | 141 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 142 Carrier name |  | 143 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 144 Carrier name |  | 145 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 146 Carrier name |  | 147 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 148 Carrier name |  | 149 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 150 Carrier name |  | 151 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 152 Carrier name |  | 153 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 154 Carrier name |  | 155 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 156 Carrier name |  | 157 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 158 Carrier name |  | 159 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 160 Carrier name |  | 161 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 162 Carrier name |  | 163 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 164 Carrier name |  | 165 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 166 Carrier name |  | 167 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 168 Carrier name |  | 169 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 170 Carrier name |  | 171 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 172 Carrier name |  | 173 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 174 Carrier name |  | 175 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 176 Carrier name |  | 177 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 178 Carrier name |  | 179 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 180 Carrier name |  | 181 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 182 Carrier name |  | 183 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 184 Carrier name |  | 185 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 186 Carrier name |  | 187 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 188 Carrier name |  | 189 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 190 Carrier name |  | 191 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 192 Carrier name |  | 193 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 194 Carrier name |  | 195 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 196 Carrier name |  | 197 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 198 Carrier name |  | 199 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 200 Carrier name |  | 201 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 202 Carrier name |  | 203 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 204 Carrier name |  | 205 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 206 Carrier name |  | 207 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 208 Carrier name |  | 209 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 210 Carrier name |  | 211 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 212 Carrier name |  | 213 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 214 Carrier name |  | 215 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 216 Carrier name |  | 217 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 218 Carrier name |  | 219 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 220 Carrier name |  | 221 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 222 Carrier name |  | 223 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 224 Carrier name |  | 225 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 226 Carrier name |  | 227 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 228 Carrier name |  | 229 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 230 Carrier name |  | 231 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 232 Carrier name |  | 233 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 234 Carrier name |  | 235 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 236 Carrier name |  | 237 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 238 Carrier name |  | 239 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 lbs <input type="checkbox"/> 10,001 - 26,000 lbs <input type="checkbox"/> ≥ 26,001 lbs |  |  |  |  |  |  |  |  |  | 240 Carrier name |  | 241 Commercial Vehicle Weight |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> ≤ 10,000 |  |  |  |  |  |  |  |  |  |

## New Jersey Police Crash Investigation Report

Police Dept: **Brick PD** Code: **01-Municipal Police**

## Motor Vehicle Crash Description

Station: **---** Case No: **2011-00065630**

(Refer to vehicle by number)

| ALL INVOLVED | G | Veh Occ | Pos In/On | Eject | Phys Cond | Age | Sex | Loc Inj | Type Inj | Ref Med | Equip Avail | Equip Used | Bag Depl | 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        |                                                                    |
|              | F |         |           |       |           |     |     |         |          |         |             |            |          |           |                                                                    |
|              | G |         |           |       |           |     |     |         |          |         |             |            |          |           |                                                                    |
|              | H |         |           |       |           |     |     |         |          |         |             |            |          |           |                                                                    |
|              | I |         |           |       |           |     |     |         |          |         |             |            |          |           |                                                                    |
|              | J |         |           |       |           |     |     |         |          |         |             |            |          |           |                                                                    |

## 135 Crash Description

Driver of Vehicle 1 states: Vehicle 1 was making a right turn from Highway 88 into the Olympic Gardens Parking Lot at 1451 Rt. 88. Vehicle 2 came up on her right and the front of Vehicle 2 crashed into the passenger side of Vehicle 1. Driver 1 states she was in the area to pick up her daughter at the Honey Tree Daycare across the street from Olympic Gardens, but she was not pulling into the school. She states she was turning into Olympic Gardens instead.

Driver of Vehicle 2 states: Vehicle 1 was stopped in the eastbound lane of Highway 88 with the left turn signal on, waiting for a break in oncoming traffic. Driver 2, thinking Vehicle 1 was stopped to turn left into the Honey Tree Daycare, attempted to pass Vehicle 1 on the right; the shoulder was clear and there was no other traffic in front of her. Vehicle 1 then suddenly turned right and Driver 2 stated it was too late to avoid crashing into Vehicle 1.

Fault was unable to be determined.

JamesKelly233

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Diagram

Police Dept: Brick PD

Code: 01-Municipal Police

Station: ---

Case No: 2011-00065630

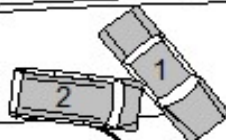
134 Crash Diagram (NOT TO SCALE)

○ Indicate  
North

1450 Rt. 88  
Honey Tree Daycare



Rt. 88



1451 Rt. 88  
Olympic Gardens

James

Kelly

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