

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																						
04	1 Case Number				17-65863										11 Speed Limit		45		0166		-		118a																																																		
97	2 Police Dept of				Code		TOMS RIVER POLICE DEPT 01										10 Crash Occurred On:		ROUTE 166		Dir		118b																																																		
02	3 Station/Precinct				Code		DISTRICT 1										☒ At Intersection With		Road Name		Dir		12 Route No.	Suffix		13 Milepost	18 Speed Limit	03																																													
98	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19 Ramp		17 Cross Road Name		20 Route/Name		21 Latitude		22 Longitude		02																																																
01	11/23/17				THURSDAY		1205		1507		--		--		-		-		-		-		-		25																																																
99	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				119a																																																
100a	1				AOJ2384528174076				370				2				030019426C71013				823				01																																																
100b	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				☐ Hit & Run				119b																																																
04	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				121a																																												
02	VERONICAV				F				GILDOR				-				F				KEVIN				M				CASTLE				01																																								
01	27 Number & Street				11 SCHOOL STREET APT 10				57 Number & Street				139 BEACHWOOD BLVD				59 Sex				M				-				121b																																												
103	28 City				CLINTON				NJ				08809				58 City				BEACHWOOD				NJ				08722				-																																								
104	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				122																																				
2	01				D				-				-				NJ				04				D				-				NJ				01																																				
105	32 Driver's License Number				G43157666657591				33 DOB				07/08/1959				34 Expires				08				19				62 Driver's License Number				C07784337404974				63 DOB				04/11/1997				64 Expires				01				19				123																
03	35 Owner's First Name				Initial				Last Name				65 Owner's First Name				Initial				Last Name				66 Number & Street				139 BEACHWOOD BLVD				67 City				BEACHWOOD				NJ				08722				124																								
106	☐ Same As Driver				IGNACIO				M				GAJETE				JR				☐ Same As Driver				KEVIN				M				CASTLE				-				03																																
107	36 Number & Street				713 MANCHESTER AVENUE				66 Number & Street				139 BEACHWOOD BLVD				67 City				BEACHWOOD				NJ				08722				68 Make				69 Model				70 Color				71 Year				72 Plate No.				73 State				125																
108	37 City				MANCHESTER				NJ				08759				68 Make				LINC				TWC				GY				2004				U74E2D				NJ				126a																												
01	38 Make				TOYO				VEN				GY				2011				G61FHH				NJ				43 State				68 Make				LINC				TWC				GY				2004				U74E2D				NJ				26												
109	44 VIN				4T3BA38B6BU024338				45 Expires				08				18				74 VIN				1LNHM83WX4Y648311				75 Expires				01				18				126b																																
01	46 Vehicle Removed To				-				76 Vehicle Removed To				ACCURATE TOWING				☐ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☐ Driven				☒ Towed Disabled				☐ Towed Disabled & Impounded				126c																																
111	☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded				126d																																				
112	47 Authority				☐ Owner				☒ Driver				☐ Police				77 Authority				☐ Owner				☒ Driver				☐ Police				79 Hazardous Material				☒ None				☐ On Board				☐ Spill				126e																								
113	48 Alcohol/Drug Test				Given: ☒ No				☐ Yes				☐ Refused				Type: ☐ Breath				☐ Blood				☐ Urine				Results: 0. - %				☐ Pending				Hazard Class				Placard No.				26																												
114	49 Hazardous Material				☒ None				☐ On Board				☐ Spill				78 Alcohol/Drug Test				Given: ☒ No				☐ Yes				☐ Refused				Type: ☐ Breath				☐ Blood				☐ Urine				Results: 0. - %				☐ Pending				Hazard Class				Placard No.				127a												
115	50 Carrier No.				☐ USDOT				☐ MC/MX				☐ None				51 GVWR/GCWR				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				80 Carrier No.				☐ USDOT				☐ MC/MX				☐ None				81 GVWR/GCWR				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				127b								
01	52 Motor Carrier or Government Entity				-				82 Motor Carrier or Government Entity				-				Number & Street				-				City				-				State				-				Zip				-				127c																								
116	135 Damage To Other Property				☐ Yes (If Yes, describe)				☒ No				136 Charge				-				137 Summons. No.				-				138 Charge				-				139 Summons. No.				-				127d																												
117	140 Charge				-				141 Summons. No.				-				142 Charge				-				143 Summons. No.				-				144 Charge				-				145 Summons. No.				-				127e																								
03	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death				128																
A	01				01				01				-				58				F				-				-				-				11				04				-				-				VERONICAV				F				GILDOR				-				129				
B	02				01				01				-				20				M				-				-				-				11				04				-				-				KEVIN				M				CASTLE				-				130				
C	03				01				01				-				20				M				-				-				-				11				04				-				-				139 BEACHWOOD BLVD				BEACHWOOD				NJ				08722				-				131
D	04				01				01				-				20				M				-				-				-				11				04				-				-				139 BEACHWOOD BLVD				BEACHWOOD				NJ				08722				-				132

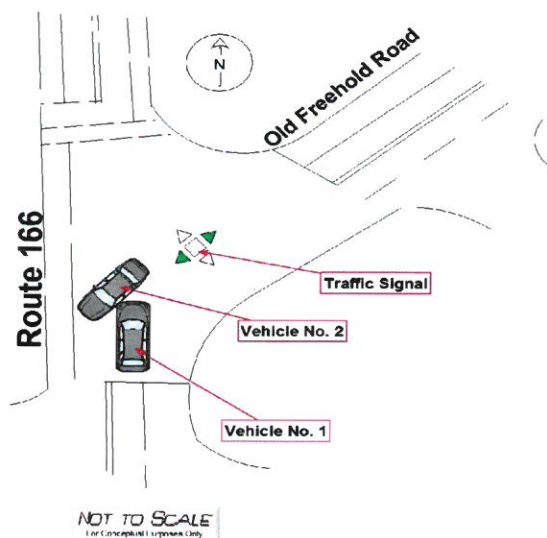
New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE D1** Code: **01**
 Station: **DISTRICT 1** Case No: **17-65863**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 was making a left turn from Old Freehold Rd to travel southbound on Rt 166, in the intersection of Rt 166 and Old Freehold Rd. The traffic signal for the above mentioned intersection was a green traffic signal for Old Freehold Rd, and a red traffic signal for Rt 166. V1 was travelling northbound on Rt 166 approaching the above mentioned intersection. D1 advised that she did not realize the traffic signal was red, and thought it was green. She also advised that she did not see V2 in the intersection. As a result, D1 continued through the intersection and impacted V2. This caused damage to both vehicles.

All occupants did not have any complaint of pain and refused medical attention.

V2 was towed from the scene by Accurate Towing due to the damage it sustained.

146 Officer's Signature

MOSCHELLA, F.

147 Badge #

0369

148 Reviewer

TJD

Badge #

295

149 Case Status

☐ Pending ☒ Complete

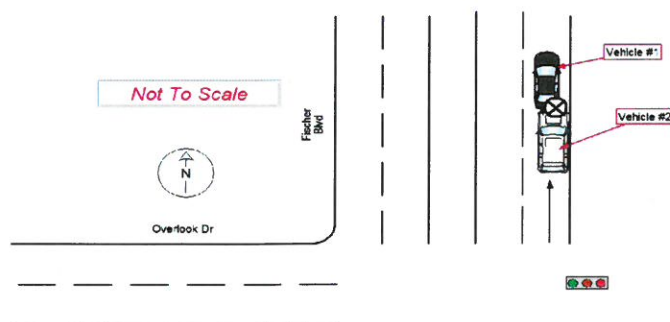
96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																		
04	1 Case Number				10 Crash Occurred On: FISCHER BLVD										11 Speed Limit		N 45		0549		-		118a																																																																														
97	17-66420				25 NJ Ins. Code										945								118b																																																																														
01	2 Police Dept of				Code		☐ At Intersection With										Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		119a																																																																								
98	TOMS RIVER POLICE DEPT 01						☒ Feet										☒ N		E of:		OVERLOOK DR				25				119b																																																																								
01	3 Station/Precinct						☐ Miles										☐ S		W		19		To		17 Cross Road Name		☐ NB		☐ EB		119a																																																																						
99	DISTRICT 1						☐ 14										15		16		21 Latitude		20 Route/Name		22 Longitude		☐ SB		☐ WB		119b																																																																						
05	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)				7 Municipality Code		8 Total Killed		9 Total Injured												120a																																																																										
100a	11/26/17				SUNDAY		1054				1507		--		--												120a																																																																										
01	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code								120b																																																																								
100b	1				9341358410				945				2																120b																																																																								
101	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☒ Hit & Run				☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☒ Hit & Run				121a																																																												
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex														121a																																																																				
102	FRANCES				-		BEAUCHEA		F						HIT & RUN				-														121a																																																																				
01	27 Number & Street				37 NAUTILUS DRIVE								57 Number & Street																				121b																																																																				
103	28 City				State				Zip				58 City				State				Zip												121b																																																																				
104	BRICK				NJ				08723																								121b																																																																				
2	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes				DL Class		Restrictions		Endorsements		61 State										122																																																																				
105	06				D						NJ																						122																																																																				
01	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires												123																																																																				
106	B20582670052336				02/06/1933				12				19																								123																																																																
107	35 Owner's First Name				Initial		Last Name		65 Owner's First Name		Initial		Last Name																		124																																																																						
02	☐ Same As Driver				FRANCES				-		BEAUCHEA		-		☒ Same As Driver				-				-		HIT & RUN		-										124																																																																
108	36 Number & Street				37 NAUTILUS DRIVE								66 Number & Street																				125																																																																				
02																																	125																																																																				
109	37 City				State				Zip				67 City				State				Zip												126a																																																																				
01	BRICK				NJ				08723																								126a																																																																				
110	38 Make				39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make				69 Model		70 Color		71 Year		72 Plate No.		73 State		26																																																																								
04	HUND				ELN		BK		2016		R10GDE		NJ																126b																																																																								
111	44 VIN				45 Expires				74 VIN				75 Expires																				126c																																																																				
01	KMHDH4AHXGU513342				12				19																												126c																																																																
112	46 Vehicle Removed To				76 Vehicle Removed To																																126d																																																																
00	☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded												126d																																																																				
113	☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded																				126e																																																																				
114	47 Authority				☒ Owner				☐ Driver				☐ Police				77 Authority				☒ Owner				☐ Driver				☐ Police				26																																																																				
115	48 Alcohol/Drug Test				49 Hazardous Material				78 Alcohol/Drug Test				79 Hazardous Material																				127a																																																																				
116	Given: ☒ No ☐ Yes ☐ Refused				☐ None ☐ On Board ☐ Spill				Given: ☐ No ☐ Yes ☐ Refused				☐ None ☐ On Board ☐ Spill																				127b																																																																				
117	Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine																				127b																																																																				
118	Results: 0. - % ☐ Pending				Hazard Class				Placard No.				Results: 0. - % ☐ Pending				Hazard Class				Placard No.												127c																																																																				
01	50 Carrier No.				51 GVWR/GCWR				80 Carrier No.				81 GVWR/GCWR																				127d																																																																				
117	☐ USDOT				☐ Weight <= 10,000 lbs				☐ USDOT				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs												127e																																																																				
01	☐ MC/MX				☐ Weight >= 26,001 lbs				☐ MC/MX				☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs																127e																																																																				
119	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity																												128																																																																				
120	Number & Street				Number & Street																																129																																																																
121	City				State				Zip				City				State				Zip												130																																																																				
122																																	130																																																																				
123	135 Damage To Other Property				☐ Yes (If Yes, describe)				☐ No																												131																																																																
124																																					131																																																																
125	Oper.				136 Charge				137 Summons. No.				Oper.				138 Charge				139 Summons. No.												132																																																																				
126																																	132																																																																				
127	Oper.				140 Charge				141 Summons. No.				Oper.				142 Charge				143 Summons. No.												133																																																																				
128																																	133																																																																				
129	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death								134																																								
130	01				01				01				-				84				F				-				-				01				11				04				-				-				FRANCES								BEAUCHEA								134																																
131																																																					37 NAUTILUS DRIVE								BRICK								NJ								08723								-								-								134
132																																																																									134																												
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135																																																																									135																												

New Jersey Police
Crash Investigation ReportPolice Dept: **TOMS RIVER POLICE D** Code: **01**
Station: **DISTRICT 1** Case No: **17-66420**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle #1 was making a left turn from Overlook Dr on to Fischer Blvd. Northbound. Driver #1 stated that a white SUV struck her vehicle from behind while driving North on Fischer Blvd. Damage to vehicle #1 was located on the rear passenger's side fender, rear passenger's side bumper as well as the trunk. A search of the area was conducted and the SUV which was also involved was unable to be located. The driver of Vehicle #1 stated the suspect vehicle was a white colored SUV driven by a Hispanic male, who stopped to see if she was okay after the collision. No injuries were reported at the scene.

146 Officer's Signature

TALTY, D.

147 Badge #

0429

148 Reviewer

RJB

Badge #

313

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 3		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report				
05	1 Case Number				17-66540										11 Speed Limit		-		-		118a		
97	2 Police Dept of				Code		01										10 Crash Occurred On:		453 LAKEHURST RD		-		118b
98	TOMS RIVER TWP				01												☐ At Intersection With		Road Name		Dir		119a
01	3 Station/Precinct																☐ Feet		☐ N		E of: -		119b
99	DISTRICT ONE																☐ Miles		☐ S		W		119c
09	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude		119d				
100a	11/27/17				MONDAY		0821		1507		--		--		39.961180		-74.218360		120a				
01	23 Veh #				24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code						120b				
100b	1				F795979-4		426		-		-		-						01				
04	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				120c		
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		121a				
101	ROSE				J		CRAIG		-		-				-		-		121b				
01	27 Number & Street										57 Number & Street								121c				
102	1052B BUCKINGHAM DR										-								121d				
103	28 City				State		Zip		58 City				State		Zip				122				
01	MANCHESTER				NJ		08759		-				-		-				02				
104	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		122				
1	02				D		-		-		NJ		-		-		-		02				
105	32 Driver's License Number				33 DOB		34 Expires		62 Driver's License Number		63 DOB		64 Expires						123				
11	C71556717162312				12/16/1931		04 18		-				-		-		-		123				
106	35 Owner's First Name				Initial		Last Name		65 Owner's First Name				Initial		Last Name				124				
-	Same As Driver				ROSE				J				CRAIG				-				124		
107	36 Number & Street								66 Number & Street										125				
-	1052B BUCKINGHAM DR								-										11				
108	37 City				State		Zip		67 City				State		Zip				125				
01	MANCHESTER				NJ		08759		-				-		-				126a				
109	38 Make				39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		126b				
-	TOYO				COR		RD		2010		ZEG88M		NJ		-		-		56				
110	44 VIN				45 Expires				74 VIN				75 Expires						126c				
01	2T1BU4EE6AC262010				09 18				-				-		-		-		61				
111	46 Vehicle Removed To								76 Vehicle Removed To										126d				
-	-								-										126d				
112	☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☒ Driven				☐ Towed Disabled				126e		
-	☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded								126e		
113	47 Authority				☐ Owner		☒ Driver		☐ Police		77 Authority				☐ Owner		☒ Driver		127a				
-	48 Alcohol/Drug Test				Given: ☒ No		☐ Yes		☐ Refused		78 Alcohol/Drug Test				Given: ☒ No		☐ Yes		127a				
114	Type: ☐ Breath				☐ Blood				☐ Urine				Type: ☐ Breath				☐ Blood				127b		
115	Results: 0. - %				☐ Pending				Hazard Class				Placard No.		Results: 0. - %				☐ Pending				127c
03	50 Carrier No.				☐ USDOT		☐ MC/MX		51 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		80 Carrier No.		☐ USDOT		☐ MC/MX		127d
117	-				-		-		-		-		-		-		-		127d				
-	52 Motor Carrier or Government Entity				-				82 Motor Carrier or Government Entity				-						127e				
-	Number & Street								Number & Street										127e				
-	-								-										128				
116	City				State		Zip		City				State		Zip				128				
-	-				-		-		-				-		-				61				
135	Damage To Other Property				☒ Yes (If Yes, describe)		☐ No														129		
-	MAILBOX TO 453 LAKEHURST RD [GOODSKIN LLC. (KUFLIK)]																				01		
118	136 Charge				137 Summons. No.		138 Charge		139 Summons. No.		140 Charge				141 Summons. No.		142 Charge		143 Summons. No.		130		
-	-				-		-		-		-				-		-		-		02		
119	-				-		-		-				-		-		-		-		131		
120	-				-		-		-				-		-		-		-		132		
121	-				-		-		-				-		-		-		-		133		
122	-				-		-		-				-		-		-		-		03		
123	-				-		-		-				-		-		-		-		134		
124	-				-		-		-				-		-		-		-		134		
125	-				-		-		-				-		-		-		-		134		
126	-				-		-		-				-		-		-		-		134		
127	-				-		-		-				-		-		-		-		134		
128	-				-		-		-				-		-		-		-		134		
129	-				-		-		-				-		-		-		-		134		
130	-				-		-		-				-		-		-		-		134		
131	-				-		-		-				-		-		-		-		134		
132	-				-		-		-				-		-		-		-		134		
133	-				-		-		-				-		-		-		-		134		
134	-				-		-		-				-		-		-		-		134		
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New Jersey Police
Crash Investigation ReportPolice Dept: TOMS RIVER TWP Code: 01Station: DISTRICT ONE Case No: 17-66540

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

SEE DIAGRAM PAGE

145 Crash Description/Narrative

Driver #1 indicated she was turning right off of Lakehurst Rd into the driveway of 453 Lakehurst Rd. and turned too sharply. Her vehicle struck the mailbox belonging to 453 Lakehurst Rd and the curb. Veh #1 sustained damage to the right front quarter. No injuries were reported at the scene.

146 Officer's Signature

BARTOSHEK, D.

147 Badge #

0316

148 Reviewer

PS

Badge #

1294

149 Case Status

☐ Pending ☒ Complete

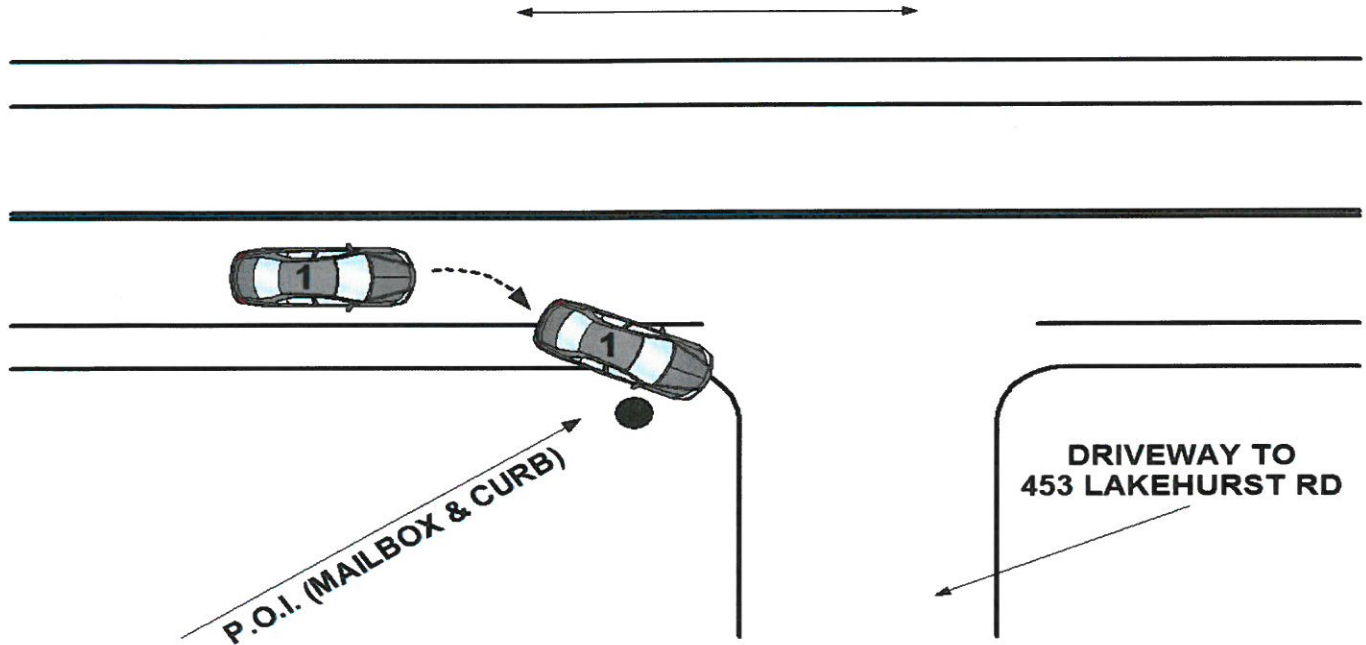
New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER TWP** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66540**

144 Crash Diagram (NOT TO SCALE)



LAKEHURST RD



Not To Scale

BARTOSHEK, D.

Officer's Signature

0316

Badge Number

96	PAGE 1 OF 3		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number 17-66544		10 Crash Occurred On: HERFLICKER BLVD		11 Speed Limit 25		118a 02	
01	2 Police Dept of TOMS RIVER TWP		Code 01		12 Route No. Suffix 13 Milepost 25		118b -	
01	3 Station/Precinct DISTRICT ONE		14 15 16		17 Cross Road Name IRONS ST		119a 25	
05	4 Date of Crash mm dd yy 11/27/17		5 Day Of Week MONDAY		6 Time (use 2400 hrs) 0853		119b -	
01	7 Municipality Code 1507		8 Total Killed --		9 Total Injured --		120a -	
100a	21 Latitude 39.951930		22 Longitude -74.201190				120b -	
04	23 Veh # 1		24 Policy No. 139 054 879		25 NJ Ins. Code 012		121a 01	
02	26 Driver's First Name AGNES		Initial Last Name D VIGGIANO		29 Sex F		121b -	
01	27 Number & Street 26 E BAYBERRY WAY		28 City LAVALLETTE		State Zip NJ 08735			
01	30 Eyes 05		DL Class D		Restrictions -			
2	31 State NJ		Endorsements -		60 Eyes 02		122 01	
105	32 Driver's License Number V42370136456525		33 DOB mm dd yyyy 06/10/1952		34 Expires mm yy 12 19		123 02	
02	35 Owner's First Name AGNES		Initial Last Name D VIGGIANO		36 Number & Street 26 E BAYBERRY WAY			
106	37 City LAVALLETTE		State Zip NJ 08735		65 Owner's First Name CHARLES		124 04	
107	38 Make HUND		39 Model SFE		40 Color GN		125 04	
108	41 Year 2015		42 Plate No. DENISE2		43 State NJ		126a 26	
01	44 VIN 5XYZDLB5FG282139		45 Expires 10 18		66 Number & Street 5 HARBORAGE AVENUE		126b -	
01	46 Vehicle Removed To -		47 Authority Owner Driver Police X Driver		67 City BAYVILLE		126c -	
112	48 Alcohol/Drug Test Given: X No Yes Refused Type: Breath Blood Urine Results: 0. - % Pending		49 Hazardous Material None On Board Spill Hazard Class Placard No.		68 Make PONT		126d -	
113	50 Carrier No. USDOT MC/MX		51 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		69 Model FBD		126e -	
03	52 Motor Carrier or Government Entity -		53 VIN 2G2FS22KXY2168421		70 Color RD		127 26	
03	54 Year 2000		55 Plate No. A57FSN		71 Year 2000		127a 26	
114	56 Number & Street 26 E BAYBERRY WAY		57 City LAVALLETTE		72 Plate No. A57FSN		127b -	
115	58 State NJ		59 Zip 08735		73 State NJ		127c -	
116	60 Eyes 02		DL Class D		Restrictions -		127d -	
03	61 State NJ		Endorsements -		74 VIN 2G2FS22KXY2168421		127e 26	
117	62 Driver's License Number S59321106554002		63 DOB mm dd yyyy 04/04/2000		64 Expires mm yy 04 21		128 26	
03	65 Owner's First Name CHARLES		Initial Last Name E SNIDER		66 Number & Street 5 HARBORAGE AVENUE		129 01	
03	67 City BAYVILLE		State Zip NJ 08721		68 Make PONT		130 01	
03	69 Model FBD		70 Color RD		71 Year 2000		131 11	
03	72 Plate No. A57FSN		73 State NJ		74 VIN 2G2FS22KXY2168421		132 11	
03	75 Expires 09 18		76 Vehicle Removed To FREEDOM TOWING, TOMS RIVER, NJ		77 Authority Owner Driver Police X Police		133 03	
03	78 Alcohol/Drug Test Given: X No Yes Refused Type: Breath Blood Urine Results: 0. - % Pending		79 Hazardous Material None On Board Spill Hazard Class Placard No.		80 Carrier No. USDOT MC/MX		134 04	
03	81 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		82 Motor Carrier or Government Entity -		83 84 85 86 87 88 89 90 91 92 93 94 95			
03	83 84 85 86 87 88 89 90 91 92 93 94 95		84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death			
03	84 85 86 87 88 89 90 91 92 93 94 95		85 86 87 88 89 90 91 92 93 94 95		AGNES D VIGGIANO			
03	84 85 86 87 88 89 90 91 92 93 94 95		86 87 88 89 90 91 92 93 94 95		26 E BAYBERRY WAY LAVALLETTE NJ 08735			
03	84 85 86 87 88 89 90 91 92 93 94 95		87 88 89 90 91 92 93 94 95		CARLIE E SNIDER			
03	84 85 86 87 88 89 90 91 92 93 94 95		88 89 90 91 92 93 94 95		5 HARBORAGE AVE BAYVILLE NJ 08721			
03	84 85 86 87 88 89 90 91 92 93 94 95		89 90 91 92 93 94 95					
03	84 85 86 87 88 89 90 91 92 93 94 95		90 91 92 93 94 95					
03	84 85 86 87 88 89 90 91 92 93 94 95		91 92 93 94 95					
03	84 85 86 87 88 89 90 91 92 93 94 95		92 93 94 95					
03	84 85 86 87 88 89 90 91 92 93 94 95		93 94 95					
03	84 85 86 87 88 89 90 91 92 93 94 95		94 95					
03	84 85 86 87 88 89 90 91 92 93 94 95		95					

**New Jersey Police
Crash Investigation Report**

Police Dept: **TOMS RIVER TWP** Code: **01**
 Station: **DISTRICT ONE** Case No: **17-66544**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

SEE DIAGRAM PAGE

145 Crash Description/Narrative

Driver #1 indicated she was traveling south on Irons St in the left lane approaching Herflicker Blvd. She intended to travel straight through the intersection but failed to realize the left turn lane is for left turn only. As she entered the intersection, her vehicle contacted veh #2.

Driver #2 indicated she was traveling south on Irons St in the right lane approaching Herflicker Blvd. She intended to turn left onto Herflicker Blvd in the outside left turn lane. As she entered the intersection, veh #1 traveling to her left, continued straight, contacting her vehicle.

Veh #1 sustained damage to the right front quarter. Veh #2 sustained damage to the left front quarter and tire / axle assembly. No injuries were reported at the scene.

Based upon this investigation, Driver #1 operated her vehicle without due caution or circumspection disregarding the marked turning course resulting in the above described / illustrated collision.

146 Officer's Signature

BARTOSHEK, D.

147 Badge #

0316

148 Reviewer

PS

Badge #

1294

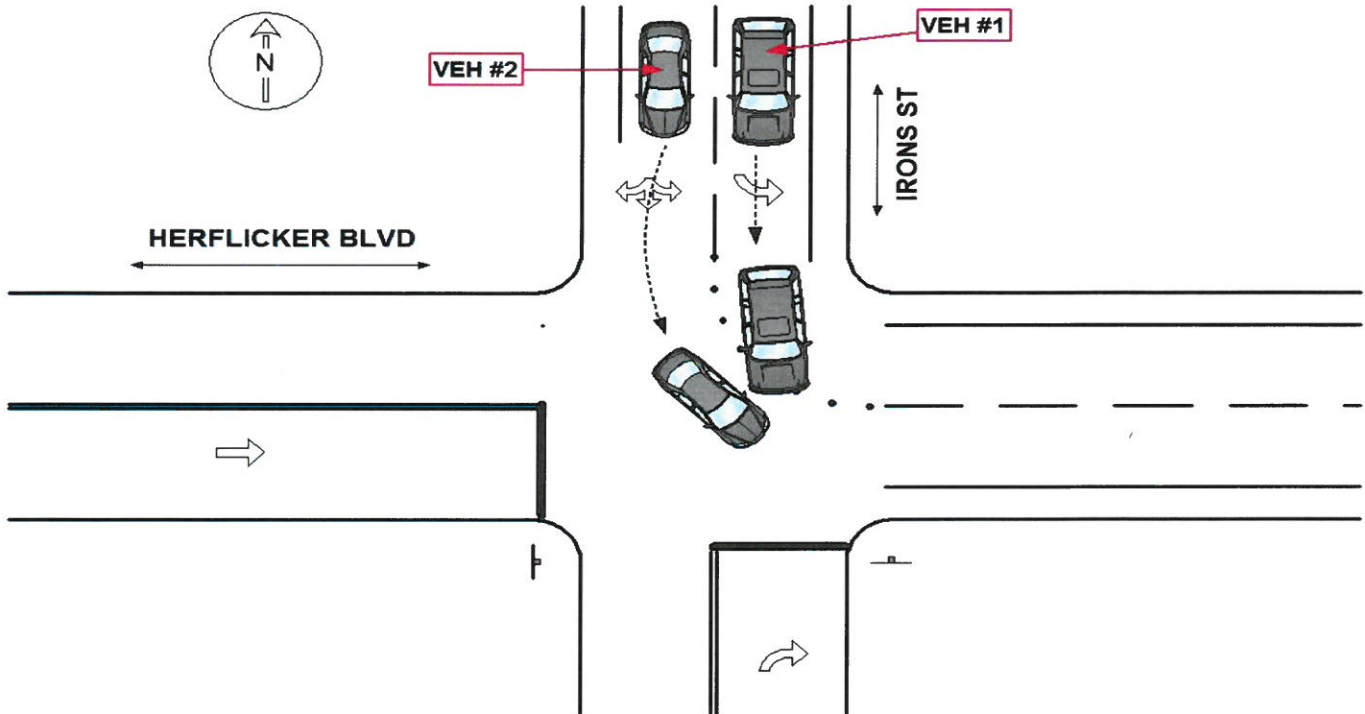
149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER TWP** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66544**

1.44 Crash Diagram (NOT TO SCALE)



Not To Scale

BARTOSHEK, D.

Officer's Signature

0316

Badge Number

-

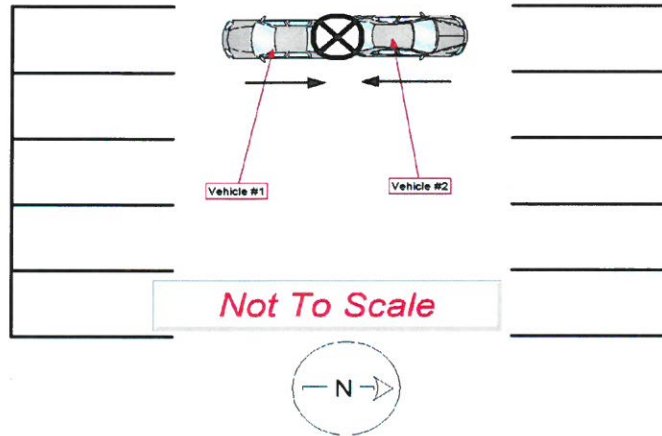
New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**Station: **DISTRICT 1** Case No: **17-66547**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was parked facing South in the parking lot and Vehicle #2 was parked in the next parking row behind vehicle #1 facing North. Both vehicle reversed out of their parking spaces at the same time and a minor collision ensued with the rear of both vehicles. There was no damage observed to vehicle #1 and minor scratches and dents to vehicle #2.

146 Officer's Signature

TALTY, D.

147 Badge #

0429

148 Reviewer

PS

Badge #

1294

149 Case Status

☐ Pending☒ Complete

PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										Reportable		Non-Reportable		Change Report			
1 Case Number		10 Crash Occurred On: 130 W WATER ST; US POST OI-										11 Speed Limit		M		10					
2 Police Dept of		Code		At Intersection With Road Name Dir										12 Route No.		Suffix		13 Milepost		18 Speed Limit	
3 Station/Precinct		-										19 To		17 Cross Road Name		NB		EB			
DISTRICT ONE		-										From		SB		WB		25			
4 Date of Crash		5 Day Of Week		6 Time		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude		119b					
11/27/17		MONDAY		1028		1507		--		--		39.952690		-74.201510		120a					
23 Veh #		24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code		120b		120c		120d					
1		914199457		135		2		AIO1310891		058		120b		120c		120d					
26 Driver's First Name		Initial		Last Name		29 Sex		56 Driver's First Name		Initial		Last Name		59 Sex		121a					
GARRETT		J		CRESPI		M		ECCELSA		-		DEROBERTIS		F		121a					
27 Number & Street		57 Number & Street		121b		121c		121d		121e		121f		121g		121h					
1072 LUCY LA		233 BENTHOOK RD		121b		121c		121d		121e		121f		121g		121h					
28 City		State		Zip		58 City		State		Zip		122		123		124					
TOMS RIVER		NJ		08753		TOMS RIVER		NJ		-		122		123		124					
30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements					
02		-		-		-		NJ		02		D		-		NJ					
32 Driver's License Number		33 DOB		34 Expires		62 Driver's License Number		63 DOB		64 Expires		122		123		124					
C73562737111392		11/17/1939		-		D27291870062682		12/28/1968		02 18		122		123		124					
35 Owner's		First Name		Initial		Last Name		65 Owner's		First Name		Initial		Last Name		125					
Same As Driver		SERGIO		-		DEROBERTIS		Same As Driver		SERGIO		-		DEROBERTIS		125					
36 Number & Street		66 Number & Street		125		126		127		128		129		130		131					
233 BENTHOOK RD		233 BENTHOOK RD		125		126		127		128		129		130		131					
37 City		State		Zip		67 City		State		Zip		126a		126b		126c					
TOMS RIVER		NJ		-		TOMS RIVER		NJ		-		126a		126b		126c					
38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color					
TOYO		COR		SL		2017		H66HGT		NJ		TOYO		COR		SL					
44 VIN		45 Expires		74 VIN		75 Expires		126d		126e		126f		126g		126h					
2T1BURHE8HC790456		11 20		2T1BURHE8HC790456		11 20		126d		126e		126f		126g		126h					
46 Vehicle Removed To		76 Vehicle Removed To		126d		126e		126f		126g		126h		126i		126j					
Driven		Towed Disabled		Towed Disabled & Impounded		Driven		Towed Disabled		Towed Disabled & Impounded		126d		126e		126f					
Left At Scene		Towed Impounded		77 Authority		78 Authority		79 Authority		80 Authority		126d		126e		126f					
Owner		Driver		Police		Owner		Driver		Police		126d		126e		126f					
48 Alcohol/Drug Test		49 Hazardous Material		78 Alcohol/Drug Test		79 Hazardous Material		80 Alcohol/Drug Test		81 Hazardous Material		126d		126e		126f					
Given: No		Yes		Refused		None		On Board		Spill		126d		126e		126f					
Type: Breath		Blood		Urine		Type: Breath		Blood		Urine		126d		126e		126f					
Results: 0. %		Pending		Hazard Class		Placard No.		Results: 0. %		Pending		Hazard Class		Placard No.		126d					
50 Carrier No.		51 GVWR/GCWR		80 Carrier No.		81 GVWR/GCWR		82 Carrier No.		83 GVWR/GCWR		126d		126e		126f					
USDOT		Weight <= 10,000 lbs		Weight 10,001-26,000 lbs		Weight >= 26,001 lbs		USDOT		Weight <= 10,000 lbs		Weight 10,001-26,000 lbs		Weight >= 26,001 lbs							

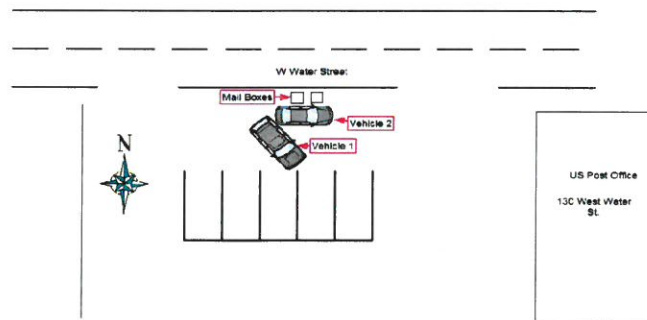
**New Jersey Police
Crash Investigation Report**

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
 Station: **DISTRICT ONE** Case No: **17-66554**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 2 states she was stopped in traffic in the lane of travel in the USPS parking lot placing mail into the parking lot outgoing mail box. Vehicle 1 backed from an opposing parking space and struck the right rear bumper of vehicle 2 causing minor damage.

Driver 1 states he was in a parking space backing into the lane of travel, did not see the vehicle stopped behind him and struck the rear right bumper of vehicle 2 with the left rear side of vehicle 1 causing minor damage.

No reported injuries

#391

146 Officer's Signature

PARENTE, R

147 Badge #

0391

148 Reviewer

RSS

Badge #

309

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 3		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																										
05	1 Case Number				10 Crash Occurred On: LOMELL LN										11 Speed Limit		35				118a																																																																																																								
01	2 Police Dept of				Code		12 Route No.										Suffix		13 Milepost		18 Speed Limit		118b																																																																																																						
01	TOMS RIVER TWP				01																		119a																																																																																																						
01	3 Station/Precinct				20										19		17 Cross Road Name		INDIAN HEAD RD (CR 571)		NB		25																																																																																																						
05	4 Date of Crash				5 Day Of Week		6 Time		7 Municipality		8 Total		9 Total		21 Latitude		22 Longitude		119b																																																																																																										
100a	11/27/17				MONDAY		1044		1507		--		1		39.956680		-74.197350		-																																																																																																										
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02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				59 Sex				121a																																																																																												
01	TESSA				J				JONES				-				F				KATIE				M				MARVIN				-				F				01																																																																																				
01	27 Number & Street				9 SECOND STREET										57 Number & Street										609 ANCHOR AVE																				121b																																																																																
01	28 City				State				Zip				58 City				State				Zip														-																																																																																										
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105	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires														123																																																																																										
01	J63947347155982				05/13/1998				05				19				M07144287452794				02/12/1979				01				20				12																																																																																												
106	35 Owner's				First Name				Initial				Last Name				65 Owner's				First Name				Initial				Last Name														124																																																																																		
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01	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				68 Make				69 Model				70 Color				71 Year				72 Plate No.				73 State				126b																																																																												
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114	48 Alcohol/Drug Test				Given: ☒ No										☐ Yes				☐ Refused				78 Alcohol/Drug Test										Given: ☒ No										☐ Yes				☐ Refused				79 Hazardous Material										☐ None										☐ On Board				☐ Spill				127b																																														
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115	Type: ☐ Breath				☐ Blood				☐ Urine				Type: ☐ Breath										☐ Blood				☐ Urine																																				-																																																														
116	Results: 0. - %				☐ Pending				Hazard Class										Placard No.				Results: 0. - %										☐ Pending				Hazard Class										Placard No.														127c																																																																
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117	50 Carrier No.				☐ USDOT										☐ None				51 GVWR/GCWR										☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										80 Carrier No.										☐ USDOT										☐ None				81 GVWR/GCWR										☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										127d		
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**New Jersey Police
Crash Investigation Report**

Police Dept: **TOMS RIVER TWP** Code: **01**
 Station: **DISTRICT ONE** Case No: **17-66559**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

SEE DIAGRAM PAGE

145 Crash Description/Narrative

Driver #1 indicated she was merging from Lomell Ln onto CR 571 eastbound behind veh #2. As she was checking for oncoming traffic she assumed veh #2 had proceeded. As she began to proceed, her vehicle struck the rear of veh #2.

Driver #2 indicated she was stopped at the end of the ramp waiting to merge onto CR 571 eastbound from Lomell Ln when veh #1 struck her vehicle's rear bumper.

Veh #1 sustained minor damage to the right front bumper. Veh #2 sustained minor damage to the rear bumper. Driver #2 reported possibly experiencing neck pain but refused medical treatment / transport at the scene.

146 Officer's Signature

BARTOSHEK, D.

147 Badge #

0316

148 Reviewer

RSS

Badge #

309

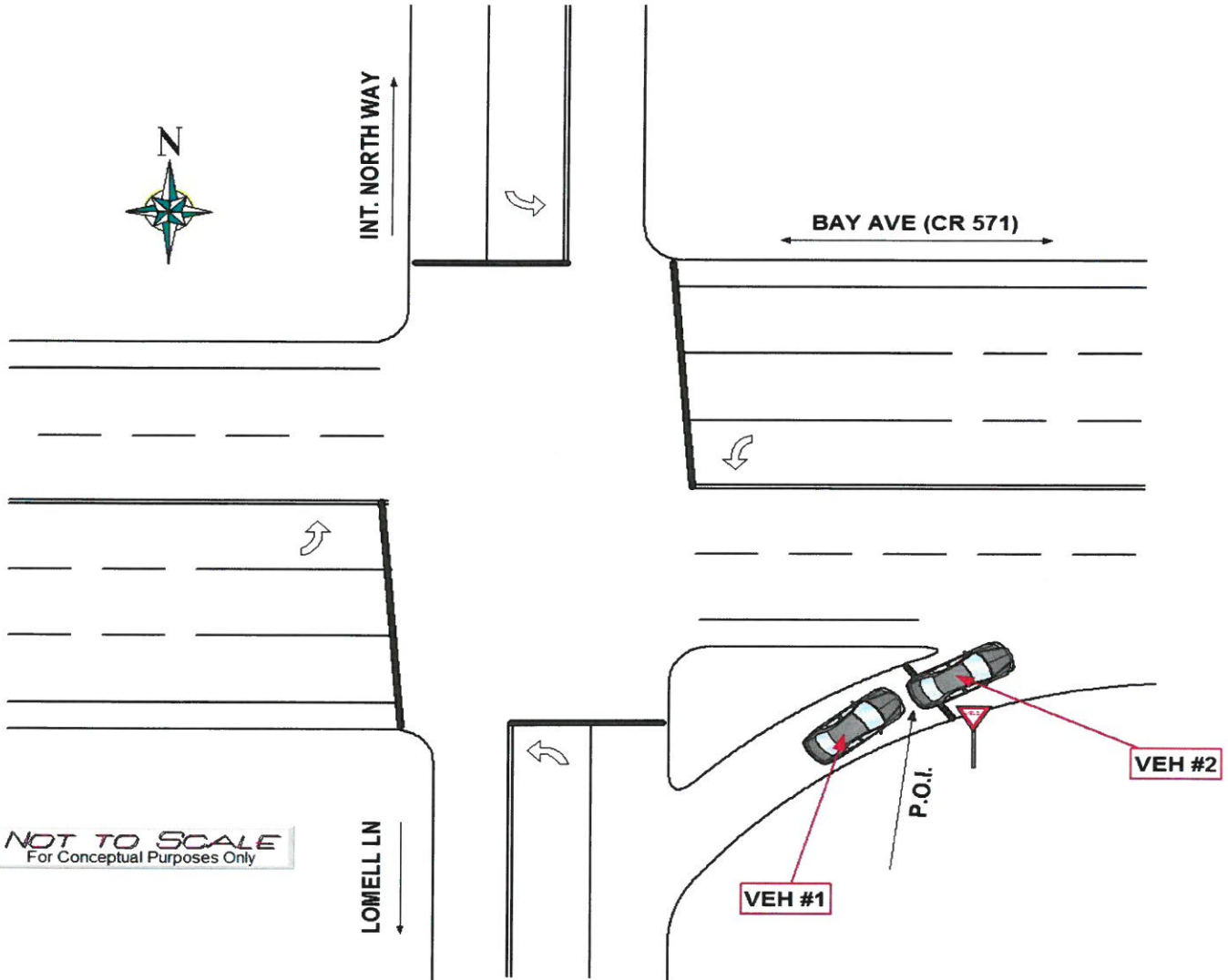
149 Case Status

☐ Pending☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER TWP** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66559**

144 Crash Diagram (NOT TO SCALE)



BARTOSHEK, D.

Officer's Signature

0316

Badge Number

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

1 Case Number	17-66565										10 Crash Occurred On: 2302 RTE 37 E; WAWA AT 37EE										11 Speed Limit										118a																																																																																																																																																																																																																	
2 Police Dept of	TOMS RIVER POLICE DEPT 01										Code										12 Route No.										Suffix										13 Milepost										18 Speed Limit										118b																																																																																																																																																																																			
3 Station/Precinct	DISTRICT ONE										14										15										16										17 Cross Road Name										19										20 Route/Name										22 Longitude										25																																																																																																																																																															
4 Date of Crash	11/27/17										5 Day Of Week										MONDAY										6 Time (use 2400 hrs)										1108										7 Municipality Code										1507										8 Total Killed										9 Total Injured										21 Latitude										22 Longitude										25																																																																																																																																	
23 Veh #	1										24 Policy No.										109862968										25 NJ Ins. Code										012										53 Veh #										2										54 Policy No.										107024255										55 NJ Ins. Code										217										01																																																																																																																																	
26 Driver's First Name	SOPHI										Initial										J										Last Name										CAMPBELL										29 Sex										F										56 Driver's First Name										Initial										-										Last Name										-										59 Sex										-										01																																																																																																			
27 Number & Street	224 FISCHER BLVD										28 City										TOMS RIVER										State										NJ										Zip										-										57 Number & Street										58 City										TOMS RIVER										State										NJ										Zip										-										121b																																																																																																			
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32 Driver's License Number	C03687197162944										33 DOB										12/30/1994										34 Expires										12										19										62 Driver's License Number										-										63 DOB										-										64 Expires										-										-										123																																																																																																													
35 Owner's First Name	KATHRYN										Initial										E										Last Name										CAMPBELL										-										65 Owner's First Name										WILLIAM										Initial										-										Last Name										DILLON										-										124																																																																																																													
36 Number & Street	224 FISCHER BLVD										37 City										TOMS RIVER										State										NJ										Zip										-										66 Number & Street										3 MINTURN RD										67 City										TOMS RIVER										State										NJ										Zip										08753										125																																																																																									
38 Make	JEEP										39 Model										WRG										40 Color										WT										41 Year										2001										42 Plate No.										J21EJB										43 State										NJ										68 Make										CHRY										69 Model										SEB										70 Color										BL										71 Year										2002										72 Plate No.										RPN29L										73 State										NJ										126a									
44 VIN	1J4FA59S61P338708										45 Expires										07										18										74 VIN										1C3EL46X22N287425										75 Expires										09										18										126b																																																																																																																																																					
46 Vehicle Removed To	-										47 Authority										Owner										Driver										Police										77 Authority										Owner										Driver										Police										78 Alcohol/Drug Test										Given: No										Yes										Refused										79 Hazardous Material										None										On Board										Spill										126c																																																																					
48 Alcohol/Drug Test	Given: No										Yes										Refused										Type: Breath										Blood										Urine										Results: 0. - %										Pending										Hazard Class										Placard No.										126d																																																																																																																																											
50 Carrier No.	USDOT										-										MC/MX										-										51 GVWR/GCWR										Weight <= 10,000 lbs										Weight 10,001-26,000 lbs										Weight >= 26,001 lbs										80 Carrier No.										USDOT										-										MC/MX										-										81 GVWR/GCWR										Weight <= 10,000 lbs										Weight 10,001-26,000 lbs										Weight >= 26,001 lbs										126e																																																																					
52 Motor Carrier or Government Entity	-										53 Motor Carrier or Government Entity										-										Number & Street										-										City										-										State										-										Zip										-										127a																																																																																																																																	
135 Damage To Other Property	Yes (If Yes, describe)										No										136 Charge										-										137 Summons. No.										-										138 Charge										-										139 Summons. No.										-										127b																																																																																																																																											
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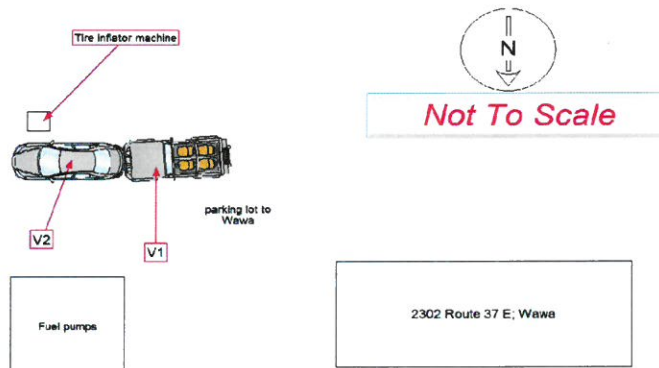
New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE D** Code: **01**
 Station: **DISTRICT ONE** Case No: **17-66565**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 was parked (engine not running) or occupied in the south east part of the parking lot by the tire inflator machine. Owner of V2 was currently outside his vehicle filling/checking his tire pressures utilizing Wawa's tire inflator machine. V1 was traveling east bound in the Wawa parking lot (2302 Route 37 E) when it could not stop and ran into the rear of V2 causing the collision. Driver of V1 stated she pulled into the above listed establishment to get gas, however, stated her car "felt funny." She disclosed that she put it in park, then reverse, at the pumps and had a hard time stopping or starting so she did not get fuel. She started to drive east bound in the parking lot trying to make wide turning motions to slow the vehicle down as she advised she could not stop. She stated it sounded like a wheel locked up and she ran into the back of the other vehicle. I inspected the scene which had a skid mark approximately 10 feet in length from the left front wheel. I also checked the hydraulic braking system, which seemed to have a low brake pedal. I also noticed some new brake fluid drops below her vehicle as it sat, waiting for AAA to come and remove it. No injuries were reported on scene. V2 endured moderate damage to its rear bumper, trunk, and right rear tail lens. V1 only suffered minor damage to its front aftermarket bumper.

146 Officer's Signature
BEYERLE, R.

147 Badge #
0409

148 Reviewer
RSS

Badge #
309

149 Case Status
☐ Pending ☒ Complete

96 PAGE 1 OF 3 Fatal New Jersey Police Crash Investigation Report Reportable Non-Reportable Change Report

01 1 Case Number 17-66590 10 Crash Occurred On: HOOPER AVE (CR 549) 11 Speed Limit 35 08

01 2 Police Dept of Code 01 12 Route No. 0549 13 Milepost 18 Speed Limit 35 118b

01 3 Station/Precinct DISTRICT ONE 14 15 16 17 Cross Road Name SILVER BAY RD 19 20 Route/Name 21 Latitude 22 Longitude 25

05 4 Date of Crash mm dd yy 11/27/17 5 Day Of Week MONDAY 6 Time (use 2400 hrs) 1343 7 Municipality Code 1507 8 Total Killed -- 9 Total Injured -- 119b

100a 23 Veh # 1 24 Policy No. 109 136 892 25 NJ Ins. Code 012 53 Veh # 2 54 Policy No. IL51 V0001190 55 NJ Ins. Code 013 120a

04 26 Driver's First Name Initial Last Name 29 Sex 56 Driver's First Name Initial Last Name 59 Sex 01

02 DONALD R GALLAGHER SR M DAVID M KALDENBERGER - M 121a

01 27 Number & Street 1936 TEAKWOOD ROAD 57 Number & Street 445 SCHINDLER DR 121b

01 28 City TOMS RIVER NJ 08753 58 City BRICK NJ 08723

2 30 Eyes 05 DL Class D Restrictions - Endorsements - 31 State NJ 60 Eyes 02 DL Class D Restrictions - Endorsements - 61 State NJ 122

105 32 Driver's License Number G02901737901445 33 DOB mm dd yyyy 01/19/1944 34 Expires mm yy 02 18 62 Driver's License Number K02541567411842 63 DOB mm dd yyyy 11/22/1984 64 Expires mm yy 11 21 123

02 35 Owner's First Name Initial Last Name 65 Owner's First Name Initial Last Name 124

- DONALD R GALLAGHER SR SDB PACKAGE - & DELIVERY CRP - 04

107 36 Number & Street 1936 TEAKWOOD ROAD 66 Number & Street 292 BIRCH BARK DR 125

108 37 City TOMS RIVER NJ 08753 67 City BRICK NJ 08723 126a

109 38 Make CHEV 39 Model IMP 40 Color WT 41 Year 2012 42 Plate No. HZ3043 43 State NJ 68 Make FRE 69 Model T55 70 Color WT 71 Year 2017 72 Plate No. XDUC57 73 State NJ 126b

110 44 VIN 2G1WG5E35C1296477 45 Expires 05 18 74 VIN 4UZAC3EA9HCJB1792 75 Expires 09 18 126c

111 46 Vehicle Removed To - 76 Vehicle Removed To - 126d

112 47 Authority 48 Alcohol/Drug Test 49 Hazardous Material 77 Authority 78 Alcohol/Drug Test 79 Hazardous Material 126e

- 48 Given: X No Yes Refused 49 None On Board Spill 77 Given: X No Yes Refused 78 None On Board Spill 127a

115 03 Type: Breath Blood Urine 49 Hazard Class Placard No. 78 Type: Breath Blood Urine 79 Hazard Class Placard No. 127b

116 03 Results: 0, - % Pending 49 Hazard Class Placard No. 78 Results: 0, - % Pending 79 Hazard Class Placard No. 127c

117 50 Carrier No. 51 GVWR/GCWR 80 Carrier No. 81 GVWR/GCWR 127d

03 USDOT MC/MX Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs 80 USDOT 265752 MC/MX Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs 127e

52 Motor Carrier or Government Entity SDB PACKAGE & DELIVERY (FEDEX GROUND) 128

Number & Street City State Zip City State Zip 129

135 Damage To Other Property Yes (If Yes, describe) No 130

Oper. 136 Charge 137 Summons. No. Oper. 138 Charge 139 Summons. No. 08

Oper. 140 Charge 141 Summons. No. Oper. 142 Charge 143 Summons. No. 02

83 84 85 86 87 88 89 90 91 92 93 94 95 Names & Addresses of Occupants - If Deceased, Date & Time of Death 134

A 01 01 01 - 73 M - - - 11 04 - - DONALD R GALLAGHER SR 1936 TEAKWOOD ROAD TOMS RIVER NJ 08753 - 08

B 02 01 01 - 33 M - - - 11 04 - - DAVID M KALDENBERGER 445 SCHINDLER DR BRICK NJ 08723 - 133

C - - - - - - - - - - - - - - - 134

D - - - - - - - - - - - - - - - - 02

**New Jersey Police
Crash Investigation Report**

Police Dept: **TOMS RIVER TWP** Code: **01**
 Station: **DISTRICT ONE** Case No: **17-66590**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

SEE DIAGRAM PAGE

145 Crash Description/Narrative

Driver #1 indicated he was traveling west on Silver Bay Rd and intended to turn left onto CR 549 southbound. He said he was in the inside left turn lane. As traffic began to proceed he negotiated the turn too wide contacting veh #2.

Driver #2 indicated he was was traveling west on Silver Bay Rd and intended to turn left onto CR 549 southbound. He said he was in the center left turn lane and parallel to veh #1 with veh #1 to his left. Driver #2 stated he was very familiar with the intersection and the tendency of drivers to turn wide. That is the reason he utilizes the outside lane to create space. As he was into the turn, veh #1 contacted the left rear corner of his vehicle.

Veh #1 sustained damage to the right front quarter panel, head light assembly and bumper. Veh #2 sustained minor damage to the left rear corner. No injuries were reported at the scene.

146 Officer's Signature

BARTOSHEK, D.

147 Badge #

0316

148 Reviewer

RJB

Badge #

313

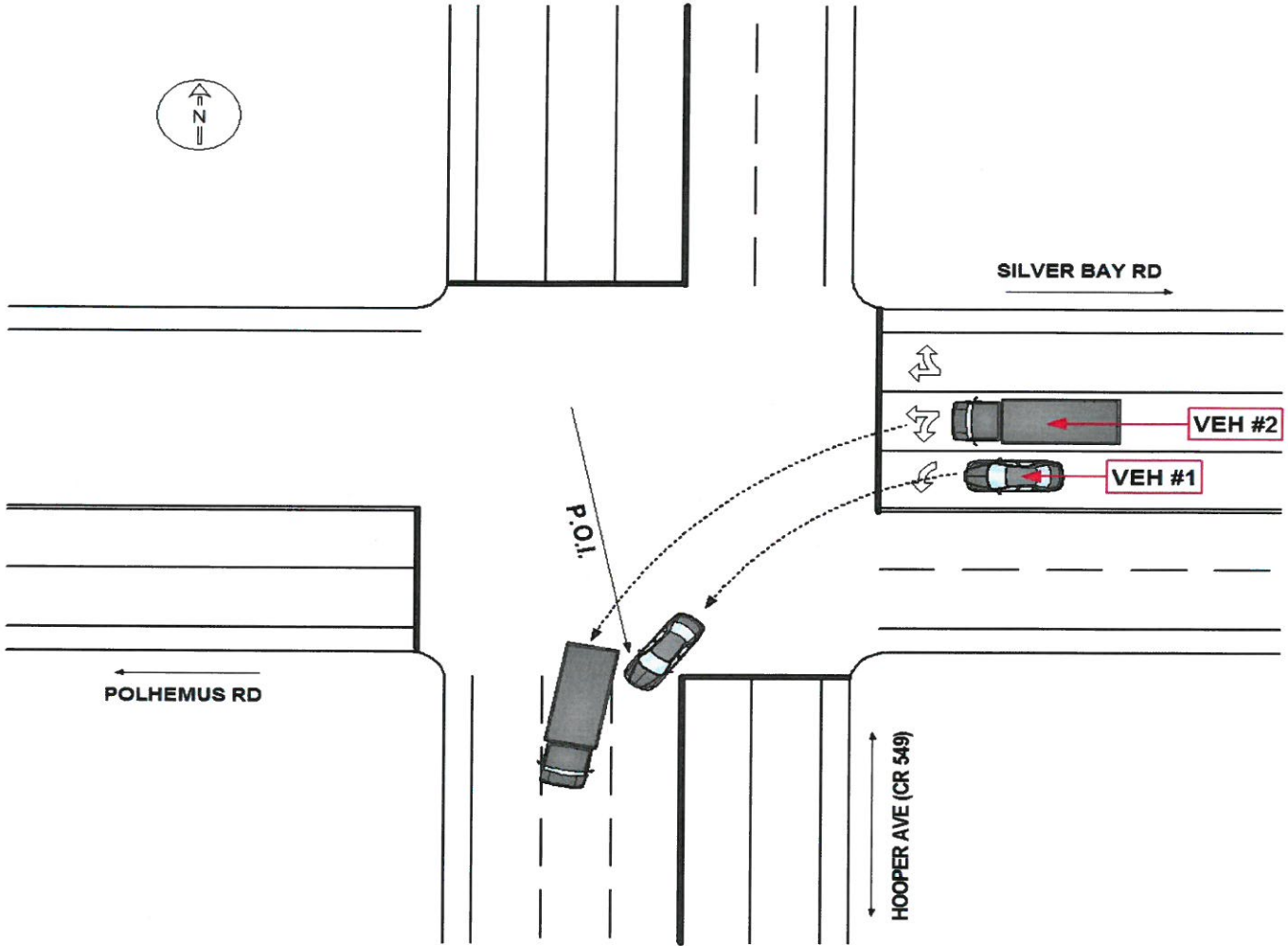
149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER TWP** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66590**

144 Crash Diagram (NOT TO SCALE)



Not To Scale

BARTOSHEK, D.

Officer's Signature

0316

Badge Number

96	PAGE 1 OF 4		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																																																										
05	1 Case Number 17-66606										10 Crash Occurred On: LAKEWOOD RD										11 Speed Limit 50		0009		118a		09																																																																																																																																																		
01	2 Police Dept of TOMS RIVER POLICE DEPT 01										Code										12 Route No.		Suffix		13 Milepost		118b		-																																																																																																																																																
01	3 Station/Precinct DISTRICT ONE										14 75										15		16		17 Cross Road Name CLAYTON AVE		18 Speed Limit 25		119a		25																																																																																																																																														
02	4 Date of Crash 11/27/17										5 Day Of Week MONDAY										6 Time (use 2400 hrs) 1501										7 Municipality Code 1507										8 Total Killed --										9 Total Injured 2										21 Latitude 40.003490										22 Longitude -74.213640										119b		-																																																																																										
04	23 Veh # 1										24 Policy No. 8442989										25 NJ Ins. Code *										53 Veh # 2										54 Policy No. HPA00002556718										55 NJ Ins. Code 017										120a		01																																																																																																														
02	☐ Parked										☐ Ped										☐ Pedalcyclist										☐ Resp To Emergency										☐ Hit & Run										☐ Parked										☐ Ped										☐ Pedalcyclist										☐ Resp To Emergency										☐ Hit & Run										120b		-																																																																						
01	26 Driver's First Name NICOLETTE										Initial D										Last Name GONZALEZ										29 Sex F										56 Driver's First Name ORYSIA										Initial I										Last Name CHYMER										59 Sex F										121a		01																																																																																										
01	27 Number & Street 307 BARBADOS DR N										State NJ										Zip 08757										57 Number & Street 720 NOCTURN WAY										58 City TOMS RIVER										State NJ										Zip 08755										121b		-																																																																																																				
03	28 City TOMS RIVER										State NJ										Zip 08757										58 City TOMS RIVER										State NJ										Zip 08755																																																																																																																										
	30 Eyes 02										DL Class D										Restrictions -										Endorsements -										31 State NJ										60 Eyes 02										DL Class D										Restrictions -										Endorsements -										61 State NJ										122		01																																																																						
01	32 Driver's License Number G64595916462912										33 DOB 12/24/1991										34 Expires 01 18										62 Driver's License Number C37196096952642										63 DOB 02/05/1964										64 Expires 07 20										123		08																																																																																																														
02	☒ Same As Driver										NICOLETTE										D										GONZALEZ										☒ Same As Driver										ORYSIA										I										CHYMER										-										124		-																																																																																
02	36 Number & Street 307 BARBADOS DR N										State NJ										Zip 08757										66 Number & Street 720 NOCTURN WAY										67 City TOMS RIVER										State NJ										Zip 08755										125		-																																																																																																				
01	37 City TOMS RIVER										State NJ										Zip 08757										67 City TOMS RIVER										State NJ										Zip 08755										126a		26																																																																																																														
01	38 Make HOND										39 Model CIV										40 Color RD										41 Year 2007										42 Plate No. L89FYR										43 State NJ										68 Make LEXU										69 Model ES3										70 Color BK										71 Year 2002										72 Plate No. S76JLG										73 State NJ										126b		-																																																		
01	44 VIN 2HGFA16547H501075										45 Expires 10 18										74 VIN JTHBF30G125032014										75 Expires 11 18										126c		-																																																																																																																																		
01	46 Vehicle Removed To ACCURATE TOWING										☐ Driven										☒ Towed Disabled										☐ Towed Disabled & Impounded										76 Vehicle Removed To ACCURATE TOWING										☐ Driven										☒ Towed Disabled										☐ Towed Disabled & Impounded										126d		-																																																																																										
	☐ Left At Scene										☐ Towed Impounded										☐ Left At Scene										☐ Towed Impounded										77 Authority Police										☐ Owner										☐ Driver										☒ Police										126e		26																																																																																										
	48 Alcohol/Drug Test Given: ☒ No										☐ Yes										☐ Refused										49 Hazardous Material ☐ None										☐ On Board										☐ Spill										78 Alcohol/Drug Test Given: ☒ No										☐ Yes										☐ Refused										79 Hazardous Material ☐ None										☐ On Board										☐ Spill										127a		26																																																		
	Type: ☐ Breath										☐ Blood										☐ Urine										Results: 0. - %										☐ Pending										Hazard Class										Placard No.										Type: ☐ Breath										☐ Blood										☐ Urine										Results: 0. - %										☐ Pending										Hazard Class										Placard No.										127b		26																														
01	50 Carrier No. ☐ USDOT										☐ MC/MX										51 GVWR/GCWR ☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT										☐ MC/MX										81 GVWR/GCWR ☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										127c		-																																																																						
01	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										127d										-																																																																																																																																														
	Number & Street										City										State										Zip										127e										26																																																																																																																										
	135 Damage To Other Property										☐ Yes (If Yes, describe)										☒ No										128										06																																																																																																																																				
	Oper. 136 Charge 01 39:4-97										137 Summons. No. E17 010807										Oper. 138 Charge										139 Summons. No.										129		12																																																																																																																																		
	Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										143 Summons. No.										130		04																																																																																																																																		
	83										84										85										86										87										88										89										90										91										92										93										94										95										Names & Addresses of Occupants - If Deceased, Date & Time of Death										131		04																														
A	01										01										01										-										25										F										-										-										-										11										04										-										-										NICOLETTE										D										GONZALEZ										-										132		-
B	02										01										01										04										53										F										04										08										01										11										04										-										-										ORYSIA										I										CHYMER										-										133		-
C	03										01										01										04										32										M										06										08										01										11										04										-										-										BLAKE										C										RAUB										-										134		-
D	03										03										01										-										29										M										-										-										-										11										04										-										-										KYLE										J										KIRMS										-										135		-
	442 GEORGIA TAVERN R HOWELL										NJ										07731																																																																																																																																																								

PAGE 2 OF 4		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number 17-66606		10 Crash Occurred On: LAKEWOOD RD		11 Speed Limit N 50
97	2 Police Dept of TOMS RIVER POLICE DEPT 01		12 Route No. 0009		13 Milepost 25
01	3 Station/Precinct DISTRICT ONE		14 75		15 15
98	4 Date of Crash 11/27/17		5 Day Of Week MONDAY		6 Time 1501
01	7 Municipality Code 1507		8 Total Killed --		9 Total Injured 2
99	23 Veh # 3		24 Policy No. 8293821		25 NJ Ins. Code 096
02	26 Driver's First Name BLAKE		27 Number & Street 40 MAIN ST		28 City KEANSBURG
100a	29 Sex M		30 Eyes 04		31 State NJ
01	32 Driver's License Number R08640936311854		33 DOB 11/06/1985		34 Expires 07 20
100b	35 Owner's First Name BLAKE		36 Number & Street 40 MAIN ST		37 City KEANSBURG
04	38 Make DODG		39 Model PRM		40 Color WT
101	41 Year 2004		42 Plate No. Y80GWG		43 State NJ
02	44 VIN 1D7HU18D54J114523		45 Expires 08 18		46 Vehicle Removed To -
102	47 Authority Owner		48 Alcohol/Drug Test No		49 Hazardous Material None
01	50 Carrier No. USDOT		51 GVWR/GCWR Weight <= 10,000 lbs		52 Motor Carrier or Government Entity -
103	53 Veh # -		54 Policy No. -		55 NJ Ins. Code -
04	56 Driver's First Name -		57 Number & Street -		58 City -
104	59 Sex -		60 Eyes -		61 State -
01	62 Driver's License Number -		63 DOB -		64 Expires -
105	65 Owner's First Name -		66 Number & Street -		67 City -
02	68 Make -		69 Model -		70 Color -
106	71 Year -		72 Plate No. -		73 State -
05	74 VIN -		75 Expires -		76 Vehicle Removed To -
107	77 Authority Owner		78 Alcohol/Drug Test No		79 Hazardous Material None
01	80 Carrier No. USDOT		81 GVWR/GCWR Weight <= 10,000 lbs		82 Motor Carrier or Government Entity -
108	83		84		85
04	86		87		88
109	89		90		91
01	92		93		94
110	95		96		97
02	98		99		100
111	101		102		103
05	104		105		106
112	107		108		109
01	110		111		112
113	113		114		115
04	116		117		118
114	119		120		121
01	122		123		124
115	125		126		127
02	128		129		130
116	131		132		133
05	134		135		136
117	137		138		139
01	140		141		142
118	143		144		145
04	146		147		148
119	149		150		151
01	152		153		154
120	155		156		157
02	158		159		160
121	161		162		163
05	164		165		166
122	167		168		169
01	170		171		172
123	173		174		175
02	176		177		178
124	179		180		181
05	182		183		184
125	185		186		187
01	188		189		190
126	191		192		193
02	194		195		196
127	197		198		199
05	200		201		202
128	203		204		205
01	206		207		208
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02	212		213		214
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05	218		219		220
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01	224		225		226
132	227		228		229
02	230		231		232
133	233		234		235
05	236		237		238
134	239		240		241
01	242		243		244
135	245		246		247
02	248		249		250
136	251		252		253
05	254		255		256
137	257		258		259
01	260		261		262
138	263		264		265
02					

New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE D** Code: **01**
 Station: **DISTRICT ONE** Case No: **17-66606**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

See Diagram Page

145 Crash Description/Narrative

Vehicles 1, 2, 3 were all traveling north on Lakewood Rd (Route 9), with Vehicle 3 in front, followed by Vehicle 2, and Vehicle 1 in the rear, at the time of the incident. Driver 3 explained that he was stopped due to an uninvolved vehicle in front of him attempting to make a left turn onto Clayton Ave. As he was stopped, he was suddenly struck from behind by Vehicle 2. Driver 2 stated that she observed Vehicle 3 stop, and so she also stopped, accordingly. As she was stopped, she was struck from behind by Vehicle 1, which pushed her into the rear of Vehicle 3. Driver 1 stated that she observed both vehicles appear to stop suddenly in front of her, and so she attempted to stop, and then go around Vehicle 2, in order to avoid a collision. However, she was unsuccessful, and struck the rear of Vehicle 2. Driver 1 denied using her cell phone at the time of the crash.

This collision caused heavy front end damage to both Vehicle 1 and Vehicle 2, and moderate denting damage to the rear of Vehicle 3. As a result, Vehicles 1 and 2 were removed from the scene by Accurate Towing.

Driver 2 had a complaint of pain to her neck, as a result of the collision. Also, Driver 3 had a complaint of pain to his lower back, as well. Both refused medical attention at the scene, however.

Based on this investigation, Driver 1 was issued a summons for 39:4-97.

Note: Vehicle 1 is insured by Good 2 Go Auto Insurance (no company code found on insurance card). Phone number 877-599-1291.

Nothing further.

Ptl. E. Spiecker #384

146 Officer's Signature

SPEICKER, E.

147 Badge #

0384

148 Reviewer

SA

Badge #

273

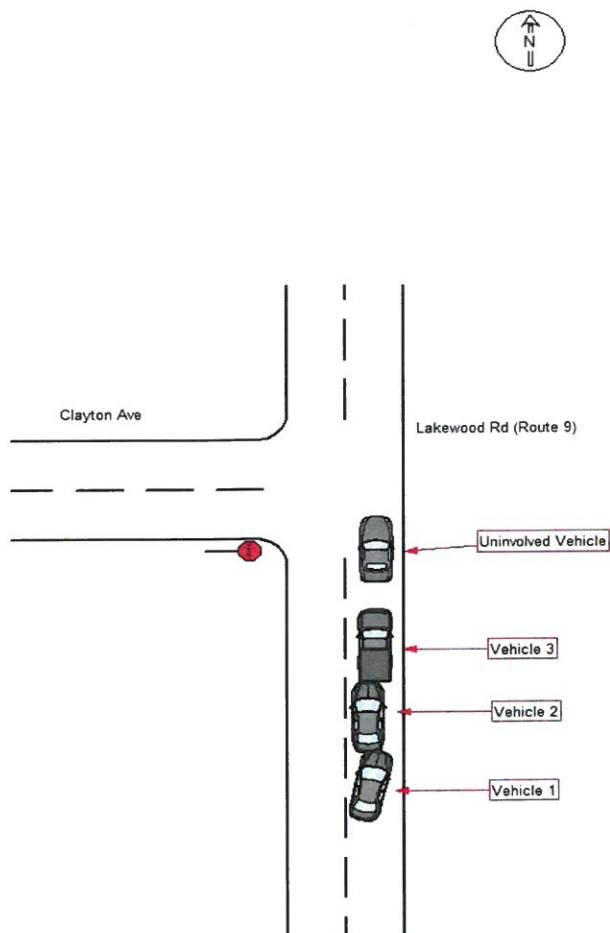
149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE D** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66606**

144 Crash Diagram (NOT TO SCALE)



Not To Scale

SPIECKER, E.

Officer's Signature

0384

Badge Number

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☐ Reportable ☒ Non-Reportable ☐ Change Report														
05	1 Case Number				10 Crash Occurred On: 1235 RTE 166; PARKING LOT										11 Speed Limit		118a												
97	17-66607																10												
01	2 Police Dept of				Code		At Intersection With Road Name Dir										12 Route No. Suffix 13 Milepost 18 Speed Limit		118b										
98	TOMS RIVER POLICE DEPT 01																		-										
01	3 Station/Precinct						14 15 16										19 To 17 Cross Road Name		119a										
99	DISTRICT ONE																		25										
09	4 Date of Crash				5 Day of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		20 Route/Name		119b												
100a	11/27/17				MONDAY		1441		1507		--		--		21 Latitude 22 Longitude		-												
01															39.985180 -74.210240		120a												
100b	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01				
04	1				SELF INSURED JIF 30-09								2												120b				
101																									-				
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex		121a								
102	ANTHONY				W		GRANBERG		- M												00								
01	27 Number & Street				57 Number & Street										121b														
103	464 EASTERN BLVD																												
01	28 City				State		Zip		58 City				State		Zip														
104	BAYVILLE				NJ		08721																						
2	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes				DL Class		Restrictions		Endorsements		61 State		122				
105	04				D						NJ																13		
08	32 Driver's License Number				33 DOB		34 Expires		62 Driver's License Number				63 DOB		64 Expires		123												
106	G71700538610664				10/14/1966		10 20										01												
107	35 Owner's First Name				Initial		Last Name		65 Owner's First Name				Initial		Last Name		124												
-							OCEAN COUNTY OF -										-												
108	36 Number & Street				66 Number & Street										125														
03	PO BOX 2191																												
109	37 City				State		Zip		67 City				State		Zip		01												
01	TOMS RIVER				NJ		08754										126a												
01	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		26				
110	FORD		ECO		BL		2003		J471CG		NJ														126b				
03	44 VIN				45 Expires		74 VIN				75 Expires		126c																
111	1FTNS24233HA47407				12 20								01																
00	46 Vehicle Removed To				76 Vehicle Removed To										126d														
112															01														
-	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded				☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										126e														
113	☐ Left At Scene ☐ Towed Impounded				☐ Left At Scene ☐ Towed Impounded										26														
00	47 Authority				☐ Owner ☒ Driver ☐ Police		77 Authority		☐ Owner ☒ Driver ☐ Police		127a																		
114	48 Alcohol/Drug Test				49 Hazardous Material										78 Alcohol/Drug Test				79 Hazardous Material				26						
-	Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill										Given: ☒ No ☐ Yes ☐ Refused				☐ None ☐ On Board ☐ Spill				127b						
115	Type: ☐ Breath ☐ Blood ☐ Urine														Type: ☐ Breath ☐ Blood ☐ Urine								-						
-	Results: 0. - % ☐ Pending				Hazard Class Placard No.										Results: 0. - % ☐ Pending				Hazard Class Placard No.				127c						
04	50 Carrier No.				51 GVWR/GCWR										80 Carrier No.				81 GVWR/GCWR										127d
117	☐ USDOT ☐ None				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										☐ USDOT ☐ None				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127e
01	☐ MC/MX														☐ MC/MX														26
	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity										128														
	Number & Street				Number & Street										129														
	City				State		Zip		City				State		Zip		130												
																	06												
	135 Damage To Other Property				☐ Yes (If Yes, describe) ☒ No										131														
															03														
	Oper. 136 Charge				137 Summons. No.				Oper. 138 Charge				139 Summons. No.				03												
																	133												
	Oper. 140 Charge				141 Summons. No.				Oper. 142 Charge				143 Summons. No.				02												
																	134												
					Names & Addresses of Occupants - If Deceased, Date & Time of Death										00														
A	01 01 01 - 51 M - - - 11 04 - -				ANTHONY W GRANBERG										-														
B	01 03 - - 48 F - - - 11 04 - -				464 EASTERN BLVD BAYVILLE NJ 08721 -										-														
C					KAROLINE H CIMINO										-														
D					304 HERITAGE DR BRICK NJ 08723 -										-														

New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
 Station: **DISTRICT ONE** Case No: **17-66607**

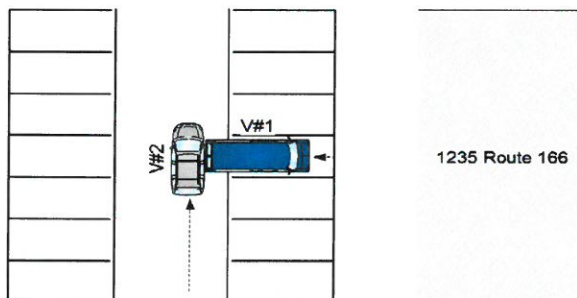
(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



1235 Route 166
Parking Lot



Not To Scale

145 Crash Description/Narrative

Driver #1 reported that Vehicle #1 was parked in a marked parking space in front of the Comic Relief store. Driver #1 related that he started to back Vehicle #1 out of its parking space and crashed into Vehicle #2 that was traveling north in the parking lot. Driver #1 described Vehicle #2 as a silver minivan with out of state license plates and the driver as a thin, black male, approximately 30 years of age. Driver #1 indicated that Driver #2 did not care about the damage to the passenger side of his minivan because it already had prior damage throughout the side. Driver #1 indicated that he and Driver #2 mutually agreed not to contact police for a crash report and Driver #2 left the scene. Driver #1 was then advised to contact police and make a report after making contact with his Ocean County Supervisor. No surveillance cameras were observed in the area.

146 Officer's Signature
FALLANO, S.

147 Badge #
0403

148 Reviewer
RJB

Badge #
313

149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 3		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																				
05	1 Case Number				17-66610										11 Speed Limit		25		118a		13																		
97	2 Police Dept of				Code		TOMS RIVER POLICE DEF 01										10 Crash Occurred On:		IRON KETTLE RD		118b		-																
98	3 Station/Precinct						300										☐ At Intersection With		Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		119a		-						
01	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude		119b		10																		
100a	11/27/17				MONDAY		1508		1507		--		--		39.95242		-74.12038		119b		-																		
01	23 Veh #				24 Policy No.		25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code		120a		-	120b		-																			
04	1				4324-14-31-40		100		2		909304452		012		120a		-	120b		-																			
101	☒ Parked				☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run						121a		01																				
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex		121b		-																
01	-				-		-		-		GEORGIOS				-		TSARNAS		M		121b		-																
102	27 Number & Street								57 Number & Street												122		10																
01	-								108 LAUREL AVE												123		13																
103	28 City				State		Zip		58 City				State		Zip						124		-																
104	-				-		-		TOMS RIVER				NJ		-						125		-																
2	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes				DL Class		Restrictions		Endorsements		61 State				126a		26										
105	-				-		-		-		-		02				D		-		-		NJ				126b		-										
06	32 Driver's License Number				33 DOB		mm dd yyyy		34 Expires		mm yy		62 Driver's License Number				63 DOB		mm dd yyyy		64 Expires		mm yy				126c		-										
106	-				-		-		-		-		T80072780010502				10/14/1950		09		16				126d		-												
107	35 Owner's First Name				Initial		Last Name		65 Owner's First Name		Initial		Last Name						126e		-																		
108	☐ Same As Driver				NOREEN		P		DEVINCENZO		-		☐ Same As Driver				GEORGIOS		-		TSARNAS		-		127a		28												
109	36 Number & Street								66 Number & Street										127b		-																		
01	544 IRON KETTLE RD								108 LAUREL AVE										127c		-																		
110	37 City				State		Zip		67 City				State		Zip						127d		-																
02	TOMS RIVER				NJ		-		TOMS RIVER				NJ		-						127e		-																
111	38 Make				39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make				69 Model		70 Color		71 Year		72 Plate No.		73 State		128		28								
01	TOYO				COR		TN		2001		B21CAU		NJ		FORD				ECO		WT		2010		E91BPC		NJ		129		02								
112	44 VIN								45 Expires						74 VIN																130		02						
01	2T1BR12E51C507707								05		18		1FTNE2EW2ADA21944																		131		06						
113	46 Vehicle Removed To								76 Vehicle Removed To																						132		17						
114	☐ Driven				☐ Towed Disabled		☐ Towed Disabled & Impounded		☒ Left At Scene		☐ Towed Impounded		☒ Driven				☐ Towed Disabled		☐ Towed Disabled & Impounded		☐ Left At Scene		☐ Towed Impounded						133		02								
115	47 Authority				☒ Owner		☐ Driver		☐ Police		77 Authority				☒ Owner		☐ Driver		☐ Police										134		01								
116	48 Alcohol/Drug Test				Given: ☒ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0, - % ☐ Pending		Hazard Class		Placard No.		78 Alcohol/Drug Test				Given: ☒ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0, - % ☐ Pending		Hazard Class		Placard No.						135		06				
03	49 Hazardous Material				☐ None ☐ On Board ☐ Spill						79 Hazardous Material				☒ None ☐ On Board ☐ Spill																136		17						
117	50 Carrier No.				☐ USDOT		☐ None		51 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		80 Carrier No.				☐ USDOT		☐ None		81 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		137		02				
04	52 Motor Carrier or Government Entity				-				82 Motor Carrier or Government Entity		-																						138		01				
118	Number & Street								Number & Street																								139		02				
119	City				State		Zip		City				State		Zip																		140		01				
120	-				-		-		-				-		-																		141		01				
121	135 Damage To Other Property				☐ Yes (If Yes, describe)		☒ No																														142		01
122	Oper.				136 Charge				137 Summons. No.				Oper.		138 Charge				139 Summons. No.												143		01						
123	-				-				-				-		-				-												144		01						
124	Oper.				140 Charge				141 Summons. No.				Oper.		142 Charge				143 Summons. No.												145		01						
125	-				-				-				-		-				-												146		01						
126	83				84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		147		01						
127	2				01		01		-		67		M		-		-		-		04		04		-		-		GEORGIOS - TSARNAS		148		01						
128	108 LAUREL AVE								TOMS RIVER				NJ		-																		149		01				
129																																	150		01				
130																																	151		01				
131																																	152		01				
132																																	153		01				
133																																	154		01				
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162																																	183		01				
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164																																	185		01				
165																																	186		01				
166																																	187		01				
167																																	188		01				
168																																	189		01				
169																																	190		01				
170																																	191		01				
171																																	192		01				
172																																	193		01				
173																																	194		01				
174																																	195		01				
175																																	196		01				
176																																	197		01				
177																																	198		01				
178																																							

New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**Station: **-** Case No: **17-66610**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Vehicle #1 was parked facing the wrong way in front of 542 Iron Kettle Road. Vehicle #2 was backing out of the driveway of 545 Iron Kettle Road. Vehicle #2 struck Vehicle #1 causing minor damage over the front passenger side wheel well.

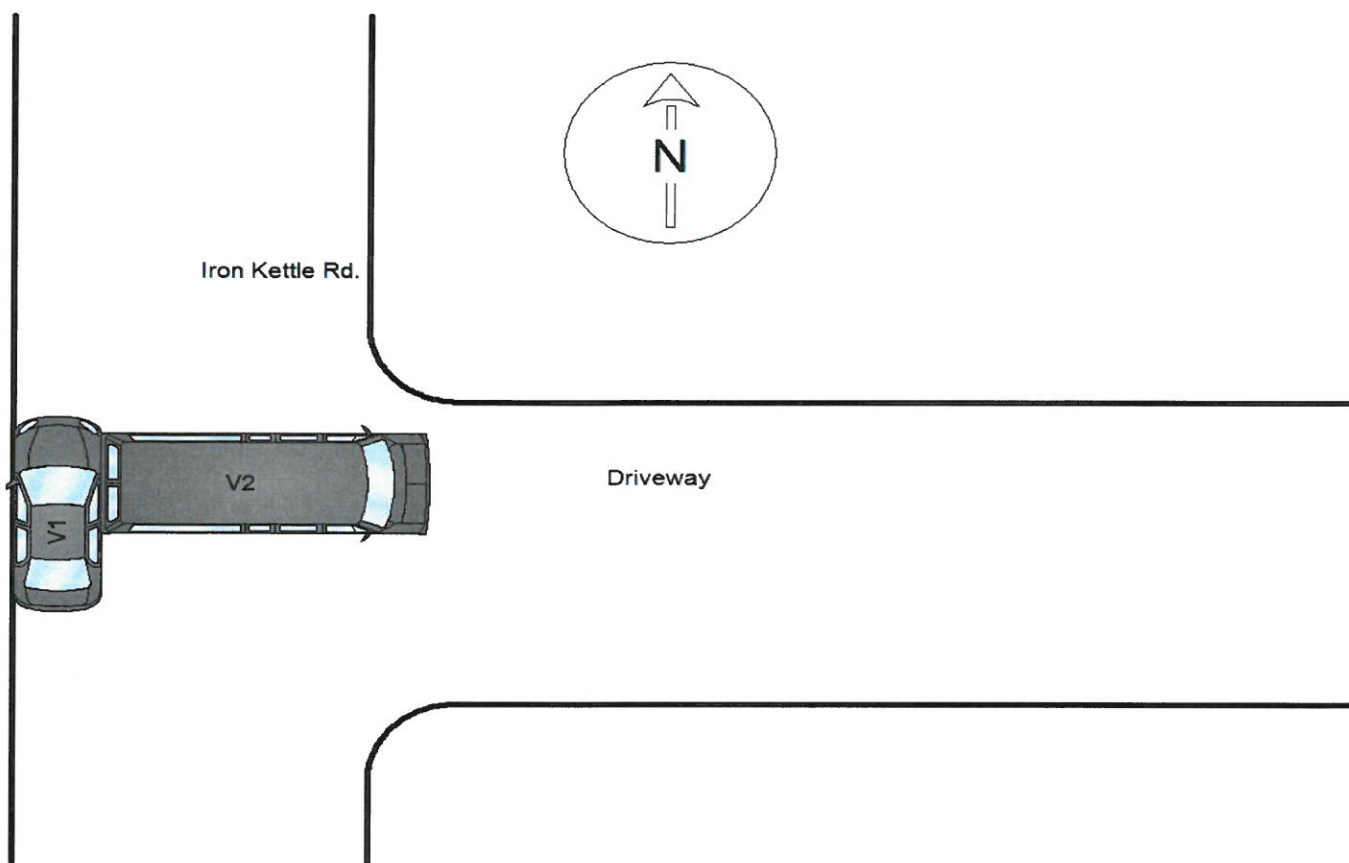
It should be noted Driver Vehicle #2 initially denied striking Vehicle #2. However, a witness residing at 546 Iron Kettle Road flagged down this officer. The witness's account corroborated the information this officer obtained during the course of the crash investigation. The witness's information is attached with this report.

146 Officer's Signature
MALONY, T.147 Badge #
0359148 Reviewer
SABadge #
273149 Case Status
☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
Station: **-** Case No: **17-66610**

144 Crash Diagram (NOT TO SCALE)



MALONY, T.

Officer's Signature

0359

Badge Number

96	PAGE 1 OF 4		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
01	1 Case Number		10 Crash Occurred On:		11 Speed Limit		118a	
97	17-66618		ROUTE 37		W 50		09	
-	2 Police Dept of		At Intersection With		Road Name		118b	
98	TOMS RIVER POLICE DEPT 01		☐ Feet		Dir		02	
01	3 Station/Precinct		☒ E of:		GARDEN STATE PARKWAY RAMP		119a	
99			☐ S		12 Route No.		09	
02	4 Date of Crash		☐ Miles		17 Cross Road Name		119b	
100a	11/27/17		14 15		20 Route/Name		02	
01	MONDAY		6 Time (use 2400 hrs)		22 Longitude		120a	
			7 Municipality Code		00.000000		02	
100b	23 Veh #		8 Total Killed		21 Latitude		120b	
04	1		9 Total Injured		00.000000		05	
101	24 Policy No.		25 NJ Ins. Code		53 Veh #		121a	
02	908840847		134		2		01	
102	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run				☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		121b	
01	26 Driver's First Name		29 Sex		56 Driver's First Name		122	
103	STEPHANIE L ASCOUGH		F		AARON - SALINAS		01	
104	27 Number & Street		57 Number & Street		59 Sex		123	
3	1915 PARKSIDE DR		20 FOREST VALLEY DRIVE		M		01	
	28 City		58 City				124	
	FORKED RIVER		TOMS RIVER				04	
	NJ 08731		NJ 08755				125	
	30 Eyes		60 Eyes				126a	
	04 D		02 D				26	
105	32 Driver's License Number		62 Driver's License Number				126b	
01	A80147227359854		S02790000001962				26	
	33 DOB		63 DOB				126c	
	09/27/1985		01/08/1996				126d	
	34 Expires		64 Expires				126e	
	09 18		09 17				26	
106	35 Owner's First Name		65 Owner's First Name				127a	
-	THOMAS A ASCOUGH		AARON - SALINAS				26	
107	36 Number & Street		66 Number & Street				127b	
-	1915 PARKSIDE DR		20 FOREST VALLEY DRIVE				127c	
	37 City		67 City				127d	
04	FORKED RIVER		TOMS RIVER				127e	
	NJ 08731		NJ 08755				26	
109	38 Make		68 Make				128	
01	KIA		LINC				26	
110	39 Model		69 Model				129	
01	SOR		LS				12	
	40 Color		70 Color				06	
	GY		SL				131	
	41 Year		71 Year				132	
	2015		2005				12	
	42 Plate No.		72 Plate No.				133	
	PLYOGA NJ		V95GYY NJ				03	
	43 State		73 State				134	
	NJ		NJ				04	
	44 VIN		74 VIN					
	5XYKW4A77FG613326		1LNHM86S15Y628328					
	45 Expires		75 Expires					
	06 18		08 18					
111	46 Vehicle Removed To		76 Vehicle Removed To					
01	-		FREEDOM TOWING					
	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded					
	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded					
113	47 Authority		77 Authority					
-	☐ Owner ☒ Driver ☐ Police		☒ Owner ☐ Driver ☐ Police					
114	48 Alcohol/Drug Test		78 Alcohol/Drug Test					
	Given: ☒ No ☐ Yes ☐ Refused		Given: ☒ No ☐ Yes ☐ Refused					
	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine					
	Results: 0, - % ☐ Pending		Results: 0, - % ☐ Pending					
116	50 Carrier No.		80 Carrier No.					
04	☐ USDOT ☒ None		☐ USDOT ☒ None					
04	☐ MC/MX ☐ None		☐ MC/MX ☐ None					
	51 GVWR/GCWR		81 GVWR/GCWR					
	☐ Weight <= 10,000 lbs		☐ Weight <= 10,000 lbs					
	☐ Weight 10,001-26,000 lbs		☐ Weight 10,001-26,000 lbs					
	☐ Weight >= 26,001 lbs		☐ Weight >= 26,001 lbs					
	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity					
	-		-					
	Number & Street		Number & Street					
	-		-					
	City		City					
	-		-					
	State		State					
	-		-					
	Zip		Zip					
	-		-					
	135 Damage To Other Property							
	☐ Yes (If Yes, describe) ☒ No							
	-							
	Oper. 136 Charge		Oper. 138 Charge					
	1 39:4-97		2 39:4-97					
	137 Summons. No.		139 Summons. No.					
	E17-010809		E17-10810					
	Oper. 140 Charge		Oper. 142 Charge					
	3 -		-					
	141 Summons. No.		143 Summons. No.					
	-		-					
	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death					
A	1 01 01 - 32 F - - - 11 04 - -		STEPHANIE L ASCOUGH					
B	1 04 01 - 1 F - - - 06 06 - -		1915 PARKSIDE DR FORKED RIVER NJ 08731					
C	2 01 01 - 21 M - - - 11 04 01 -		CAMERON - ASCOUGH					
D	3 01 01 - 17 M - - - 11 04 - -		1915 PARKSIDE DRIVE FORKED RIVER NJ 08731					
			AARON - SALINAS					
			20 FOREST VALLEY DRIV TOMS RIVER NJ 08755					
			JOHN B TRULAND					
			1779 WOODSIDE RD FORKED RIVER NJ 08731					

96	PAGE 2 OF 4		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report		
01	1 Case Number				10 Crash Occurred On: ROUTE 37										11 Speed Limit		12 Route No.		13 Milepost		118a
97	17-66618				W 50										0037		-		-		25
-	2 Police Dept of				Code										18 Speed Limit		25		-		118b
98	TOMS RIVER POLICE DEPT				01										19 To		17 Cross Road Name		20 Route/Name		119a
01	3 Station/Precinct				150										16		17		18		-
99	4 Date of Crash				5 Day Of Week				6 Time (use 2400 hrs)				7 Municipality Code				8 Total Killed				119b
02	11/27/17				MONDAY				1537				1507				--				-
100a	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				120a
01	3				Y145963D1330Z				962				-				-				01
100b	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				120b
04	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				121a
02	JOHN				B				TRULAND				-				M				-
101	27 Number & Street				28 City				State				Zip				57 Number & Street				121b
01	1779 WOODSIDE RD				FORKED RIVER				NJ				08731				-				-
102	30 Eyes				DL Class				Restrictions				Endorsements				31 State				122
01	06				D				-				-				NJ				07
103	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				123
01	T76584076202006				02/11/2000				02				21				-				-
104	35 Owner's First Name				Initial				Last Name				65 Owner's First Name				Initial				124
-	SUSAN				-				TRULAND				-				-				04
105	36 Number & Street				37 City				State				Zip				66 Number & Street				125
01	1779 WOODSIDE RD				FORKED RIVER				NJ				08731				-				-
106	38 Make				39 Model				40 Color				41 Year				42 Plate No.				126a
-	CHEV				SLV				GY				2003				BB30GW				26
107	44 VIN				45 Expires				74 VIN				75 Expires				76 VIN				126b
01	2GCEK19T131138366				01				18				-				-				-
108	46 Vehicle Removed To				47 Authority				48 Alcohol/Drug Test				49 Hazardous Material				77 Authority				126c
-	-				☒ Driver				☐ Owner				☐ Police				Given: ☒ No				-
109	☐ Left At Scene				☐ Towed Disabled				☐ Towed Disabled & Impounded				☐ None				☐ On Board				126d
110	☐ Towed Impounded				☐ Breath				☐ Blood				☐ Urine				☐ None				-
111	Results: 0, - %				☐ Pending				Hazard Class				Placard No.				Results: 0, - %				126e
112	50 Carrier No.				51 GVWR/GCWR				52 Motor Carrier or Government Entity				80 Carrier No.				81 GVWR/GCWR				126f
04	☐ USDOT				☒ None				☐ Weight <= 10,000 lbs				☐ USDOT				☒ None				-
113	☐ MC/MX				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				☐ MC/MX				☐ Weight >= 26,001 lbs				-
114	Number & Street				City				State				Zip				Number & Street				127a
115	City				State				Zip				City				State				127b
116	135 Damage To Other Property				☐ Yes (If Yes, describe)				☐ No				136 Charge				137 Summons. No.				127c
117	Oper.				138 Charge				139 Summons. No.				Oper.				140 Charge				127d
118	-				-				-				-				-				127e
119	Oper.				141 Summons. No.				142 Charge				Oper.				143 Summons. No.				127f
120	-				-				-				-				-				01
121	83				84				85				86				87				128
122	88				89				90				91				92				26
123	93				94				95				96				97				06
124	98				99				100				101				102				17
125	103				104				105				106				107				131
126	108				109				110				111				112				-
127	113				114				115				116				117				132
128	118				119				120				121				122				133
129	123				124				125				126				127				01
130	128				129				130				131				132				134
131	133				134				135				136				137				-
132	138				139				140				141				142				-
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193	443				444				445				446				447				-
194	448				449				450				451				452				-
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196	458				459				460				461				462				-
197	463				464				465				466				467				-
198	468				469				470				471				472				-
199	473				474				475				476				477				-
200	478				479				480				481				482				-
201	483				484				485				486				487				-
202	488				489				490				491				492				-
203	493				494				495				496				497				-
204	498				499				500				501				502				-
205	503				504				505				506				507				-
206	508				509				510				511				512				-
207	513				514				515				516				517				-
208	518				519				520				521				522				-
209	523				524				525				526				527				-
210	528				529				530				531				532				-
211	533				534				535				536				537				-
212	538				539				540				541				542				-
213	543				544				545				546				547				-
214	548				549				550				551				552				-
215	553				554				555				556				557				-
216	558				559				560				561				562				-
217	563				564				565				566				567				-
218	568				569				570				571				572				-
219	573				574				575				576				577				-
220	578				579				580				581				582				-
221	583				584				585				586				587				-
222	588				589				590				591				592				-
223	593				594				595				596				597				-
224	598				599				600				601				602				-
225	603				604				605				606				607				-
226	608				609				610				611				612				-
227	613				614				615				616				617				-
228	618				619				620				621				622				-
229	623				624				625				626				627				-
230	628				629				630				631				632				-
231	633				634				635				636				637				-
232	638				639				640				641				642				-
233	643				644				645				646				647				-
234	648				649				650				651				652				-
235	653				654				655				656				657				-
236	658				659				660				661				662				-
237	663				664				665				666				667				-
238	668				669				670				671				672				-
239	673				674				675				676				677				-
240	678				679				680				681				682				-
241	683				684				685				686				687				-
242	688				689				690				691				692				-
243	693				694				695				696				697				-
244	698				699				700				701				702				-
245	703				704</																

New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE D** Code: **01**
 Station: **-** Case No: **17-66618**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Driver #3 reported he was slowing in traffic on Rt. 37 westbound prior to the GSP south ramp when without warning vehicle #1 contacted his rear bumper. He reported no visible damage to his vehicle and explained he was almost completely stopped prior to the collision. He advised he did not brake erratically.

Driver #1 reported she was behind vehicle #3 when she began braking normal at first then very forcefully after calculating that she would not have enough time to avoid a collision. She explained that she did not have enough time or distance to avoid a collision and made contact with the rear of vehicle #3. She advised speed was not an issue for her nor vehicle #3 and did not state that vehicle #3 made any erratic braking maneuvers. She stated that moments later vehicle #2 rear ended her without warning.

Driver #2 stated he was operating his vehicle behind vehicle #1 and "was too close" to it lacking the time or distance to avoid a collision. He explained that vehicle #1 did not perform any erratic braking movements that he observed and re-iterated that he was driving too close behind her. He then stated that he did not remember what led to the crash.

While on scene I observed no skid marks inductive of aggressive braking by any vehicle and no witnesses came forward. All parties refused medical attention and driver #3 stated he did not observe any damage to his vehicle. End of report.

146 Officer's Signature

KOWALCZYK, K.

147 Badge #

0387

148 Reviewer

DJR

Badge #

0339

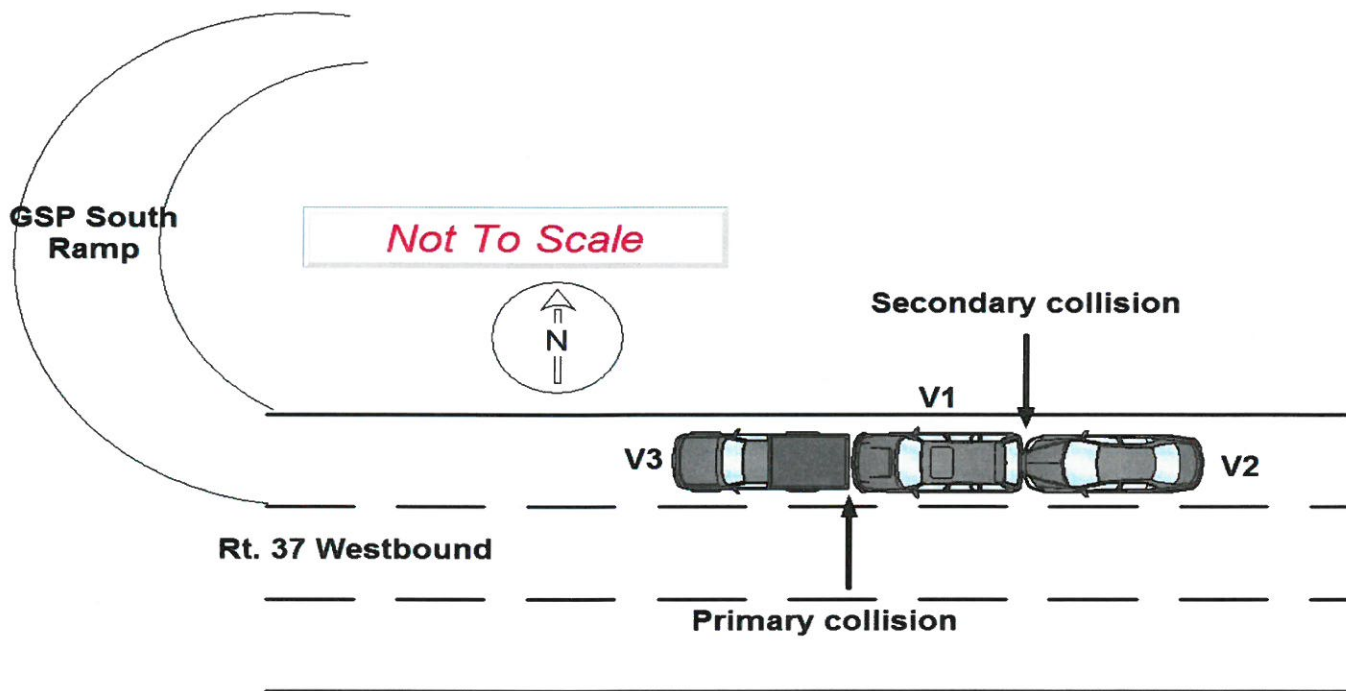
149 Case Status

☐ Pending☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
Station: **-** Case No: **17-66618**

144 Crash Diagram (NOT TO SCALE)



KOWALCZYK, K.

Officer's Signature

0387

Badge Number

96	PAGE 1 OF 3		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report															
05	1 Case Number				17-66632										118a		03																	
97	2 Police Dept of				Code		TOMS RIVER POLICE DEPT 01										118b		-															
01	3 Station/Precinct				Code		DISTRICT ONE										119a		25															
03	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude		119b		-													
100a	11/27/17				MONDAY		1619		1507		--		--		39.972860		-74.199590		120a		-													
01	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01									
100b	1				4062 62 54 23				148				2				F970438-8				426				120b		-							
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex		121a				01									
101	ANITA				-		HOLLAND		F		JOAN				A		TOTH		F		121b				-									
01	27 Number & Street				625 RADNOR AVE										57 Number & Street				1521 LONGBOAT AVE										121b		-			
102	28 City				State		Zip		58 City				State		Zip		122				01													
103	PINE BEACH				NJ		08741		BEACHWOOD				NJ		08722		122				01													
01	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes				DL Class		Restrictions		Endorsements		61 State		122		01							
2	05				D		-		-		NJ		04				D		-		-		NJ		122		01							
105	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires				123		01							
03	H62680450056425				06/18/1942				08 19				T67624026157424				07/27/1942				08 21				123		01							
106	35 Owner's First Name				Initial		Last Name		65 Owner's First Name				Initial		Last Name		124				03													
-	HENRY				J		HOLLAND		JR				JOAN				A		TOTH		124				03									
107	36 Number & Street				625 RADNOR AVE										66 Number & Street				1521 LONGBOAT AVE										125		-			
108	37 City				State		Zip		67 City				State		Zip		126a				26													
01	PINE BEACH				NJ		08741		BEACHWOOD				NJ		08722		126b				-													
09	38 Make				39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		126b		-					
01	SUBU				FOR		BL		2017		B47GYH		NJ		TOYO		CAM		SL		2003		LBS65F		NJ		126b		-					
110	44 VIN				45 Expires				74 VIN				75 Expires				126c				-													
01	JF2SJABC0HH425803				08 20				4T1BF32K43U566324				01 19				126c				-													
111	46 Vehicle Removed To				-										76 Vehicle Removed To				-										126d		-			
01	☒ Driven				☐ Towed Disabled		☐ Towed Disabled & Impounded		☒ Driven				☐ Towed Disabled		☐ Towed Disabled & Impounded		126e				-													
-	☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded				126e				-													
113	47 Authority				☐ Owner		☒ Driver		☐ Police		77 Authority				☐ Owner		☒ Driver		☐ Police		127a				26									
114	48 Alcohol/Drug Test				Given: ☒ No		☐ Yes		☐ Refused		49 Hazardous Material		Given: ☒ No		☐ Yes		☐ Refused		79 Hazardous Material		Given: ☒ No		☐ Yes		☐ Refused		127b		26					
-	Type: ☐ Breath				☐ Blood		☐ Urine		-		Type: ☐ Breath		☐ Blood		☐ Urine		-		Type: ☐ Breath		☐ Blood		☐ Urine		-		127b		-					
115	Results: 0. - %				☐ Pending		Hazard Class		Placard No.		Results: 0. - %		☐ Pending		Hazard Class		Placard No.		Results: 0. - %		☐ Pending		Hazard Class		Placard No.		127c		-					
04	50 Carrier No.				☐ USDOT		☐ MC/MX		51 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		80 Carrier No.		☐ USDOT		☐ MC/MX		81 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		127d		-	
01	-				-		-		-		-		-		-		-		-		-		-		-		-		127e		-			
117	52 Motor Carrier or Government Entity				-										82 Motor Carrier or Government Entity				-										128		26			
118	Number & Street				-										Number & Street				-										129		12			
119	City				State		Zip		City				State		Zip		130				12													
120	135 Damage To Other Property				☐ Yes (If Yes, describe)		☒ No		131				02																					
121	Oper.				136 Charge		137 Summons. No.		Oper.		138 Charge		139 Summons. No.		122		02																	
122	-				-		-		-		-		-		-		123		02															
123	Oper.				140 Charge		141 Summons. No.		Oper.		142 Charge		143 Summons. No.		124		02																	
124	-				-		-		-		-		-		-		125		02															
125	83				84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		126			
A	01				01		01		-		75		F		-		-		-		11		04		-		-		ANITA		- HOLLAND		-	
B	02				01		01		-		75		F		-		-		-		11		04		-		-		JOAN		A TOTH		-	
C	02				03		01		-		21		M		-		-		-		11		04		-		-		MARC		D SHAMES		-	
D	-				-		-		-		-		-		-		-		-		-		-		-		-		1521 LONGBOAT AVE		BEACHWOOD		NJ 08722 -	

**New Jersey Police
Crash Investigation Report**

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**Station: **DISTRICT ONE** Case No: **17-66632**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

SEE DIAGRAM PAGE

145 Crash Description/Narrative

Driver #1 indicated she was traveling west on Chestnut St and intended to turn left onto Old Freehold Rd southbound. She stated she stopped for the red light. She then thought it had turned green and began to proceed. In fact the signal did not yet turn green. As she entered the intersection, her vehicle struck veh #2 traveling north on Old Freehold Rd.

Driver #2 indicated she was traveling north on Old Freehold Rd. As she was entering the intersection with Chestnut St., veh #1 entered the intersection from the east, striking her vehicle.

Witness #1, Ocean County Sheriff's Officer Joseph Chester, Jr. indicated he was stopped on Chestnut St. westbound when he observed veh #1 enter the intersection under a red traffic signal, striking veh #2.

Veh #1 sustained damage to the right front corner. Veh #2 sustained damage to the right front quarter panel and passenger side door. No injuries were reported at the scene.

146 Officer's Signature

BARTOSHEK, D.

147 Badge #

0316

148 Reviewer

SA

Badge #

273

149 Case Status

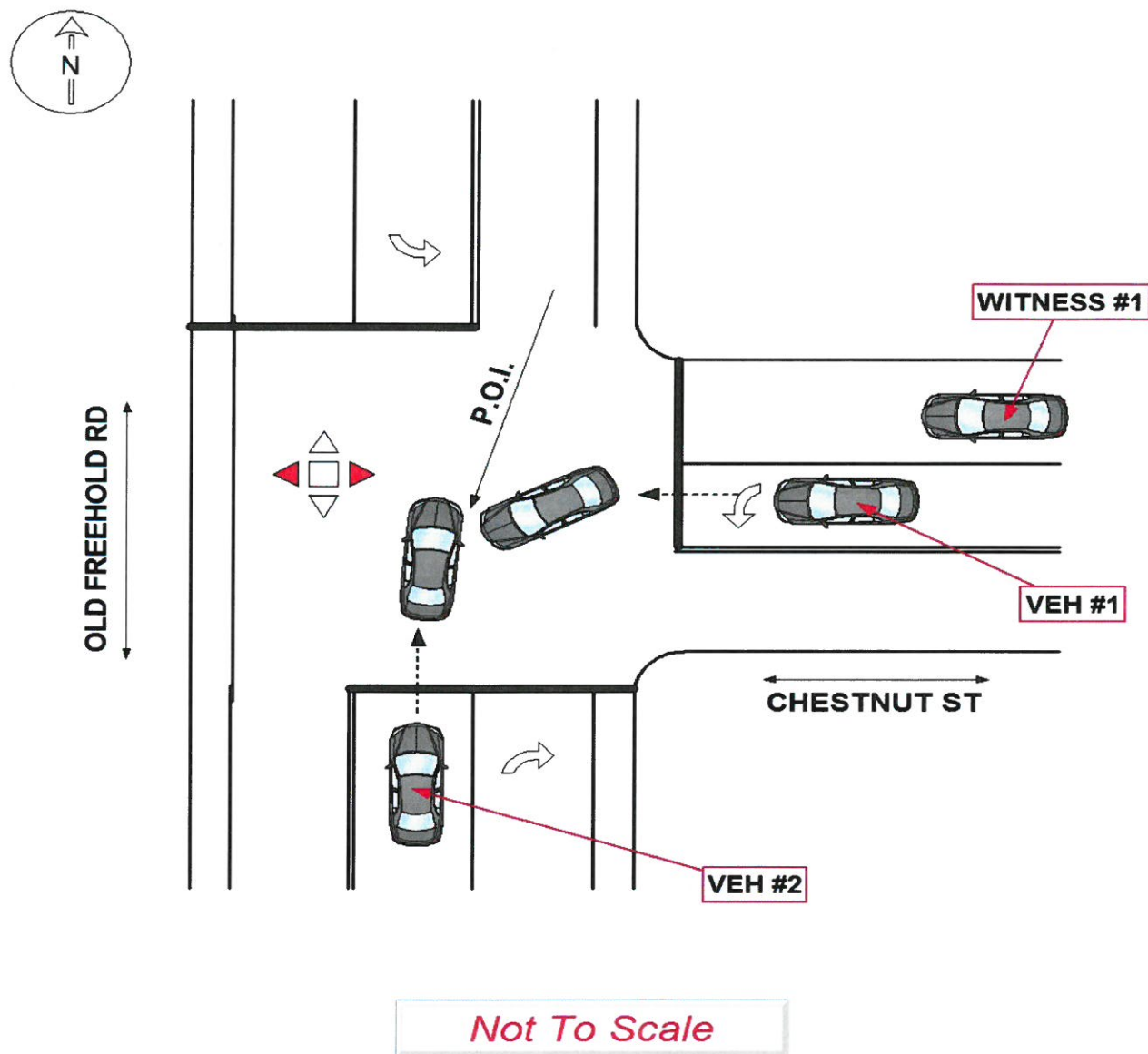
☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66632**

144 Crash Diagram (NOT TO SCALE)



BARTOSHEK, D.

Officer's Signature

0316

Badge Number

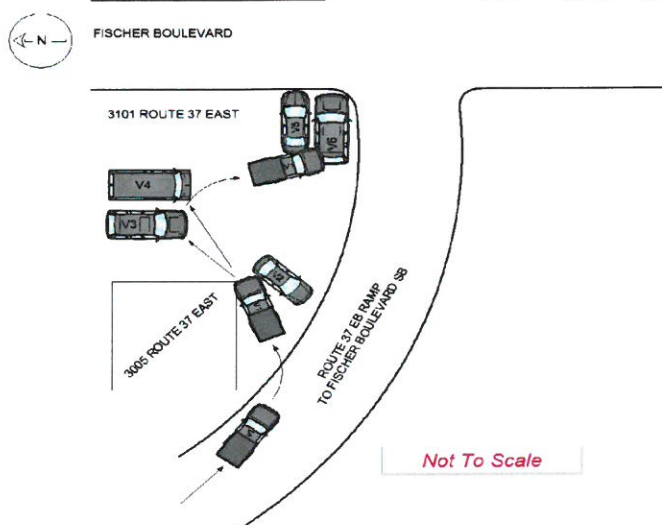
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New Jersey Police
Crash Investigation ReportPolice Dept: **TOMS RIVER POLICE DEPT** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66647**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated while traveling on the Route 37 ramp from Route 37 EB onto Fischer Boulevard SB, his foot slipped off from the brake pedal. At that time, driver #1 took evasive action and swerved to the left. Driver #1 then struck a well point, a fence, and five parked cars located in the parking lot of Bay Shore Motors/3101 Route 37 East. No reported injuries.

***NOTE= Driver #1 indicated that he had just come from the car wash. He believed that possibly armor-all on his brake pedal was the reason that his foot slipped off from the pedal.**

146 Officer's Signature

NATER, M.

147 Badge #

0336

148 Reviewer

DJR

Badge #

0339

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 3		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																							
97	1 Case Number				10 Crash Occurred On: HOOPER AVE										S		11 Speed Limit 45		0549		-		-		02																	
98	2 Police Dept of				Code		☐ At Intersection With Road Name										Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit		118b															
06	TOMS RIVER POLICE DEPT 01						☒ Feet										☒ N		☐ E		of: RT 37E				50		-		118b													
99	3 Station/Precinct						☐ Miles										☐ S		☐ W		19 Ramp		To		17 Cross Road Name				119a													
05	DIST ONE						14										15		16										25													
100a	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)				7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude				22 Longitude						25															
01	11/27/17				MONDAY		1749				1507		--		--		39.963990				-74.187540						25															
100b	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code						-		120b													
04	1				6008088242061				884				2				RSF9320123				*								01													
101	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				01	
02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				59 Sex				121a									
01	BILLIE				-				CHOJNACKI				-				F				BARBARA				-				OROURKE				-				F				01	
103	27 Number & Street																57 Number & Street																121b									
01	513 BAY BLVD																20 N.BINNACLE DR																01									
104	28 City				State				Zip				58 City				State				Zip										122											
2	BAYVILLE				NJ				08721				LITTLE EGG HARB				NJ				08087										06											
105	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State				123	
01	04				D				-				-				NJ				06				D				-				-				NJ				08	
106	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires										124											
-	C35870930062704				12/17/1970				08 20				075920730056546				06/18/1954				09 21										03											
107	35 Owner's				First Name				Initial				Last Name				65 Owner's				First Name				Initial				Last Name				125									
-	☐ Same As Driver				BILLIE				-				CHOJNACKI				-				☐ Same As Driver				-				SHORE RENTALS INC				126a									
108	36 Number & Street																66 Number & Street																126b									
01	513 BAY BLVD																1300 HWY 34																-									
109	37 City				State				Zip				67 City				State				Zip										127a											
01	BAYVILLE				NJ				08721				MATAWAN				NJ				07747										26											
110	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State										127b											
01	SUBU				LEG				WT				2013				WH636K				NJ										127c											
111	44 VIN												45 Expires				74 VIN																127d									
01	4S3BMC66D3035543												07 18				5NPDH4AE7GH793824																127e									
112	46 Vehicle Removed To												76 Vehicle Removed To																				128									
-	☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded										129											
113	☐ Left At Scene				☐ Towed Impounded								☐ Left At Scene				☐ Towed Impounded																130									
114	47 Authority				☒ Owner				☐ Driver				☐ Police				77 Authority				☐ Owner				☒ Driver				☐ Police				131									
-	48 Alcohol/Drug Test				Given: ☒ No				☐ Yes				☐ Refused																													

New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**Station: **DIST ONE** Case No: **17-66657**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Box 55- Empire Fire and Marine Insurance Co 1400 American lane Schaumburg IL 60196 800-868-1235

Driver of vehicle #2 states she was stopped in traffic in the center lane on Hooper Ave south bound. While stopped she stated she was struck from behind by vehicle #1 causing minor damage to her bumper. Driver of vehicle #1 stated she did indeed collide with vehicle #2 after being distracted. no damage to vehicle #1 was observed.

146 Officer's Signature

BURKHARDT, P.

147 Badge #

0238

148 Reviewer

SA

Badge #

273

149 Case Status

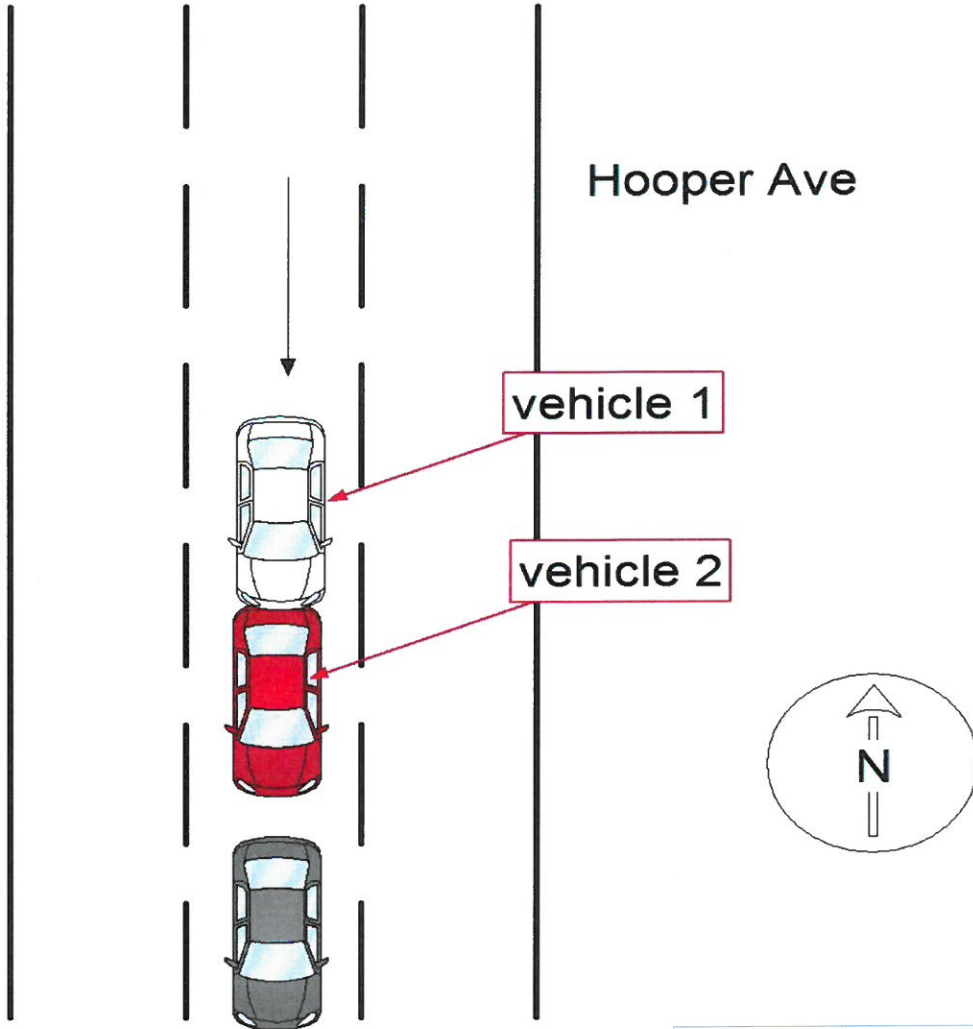
☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**

Station: **DIST ONE** Case No: **17-66657**

144 Crash Diagram (NOT TO SCALE)



Not To Scale

BURKHARDT, P.

Officer's Signature

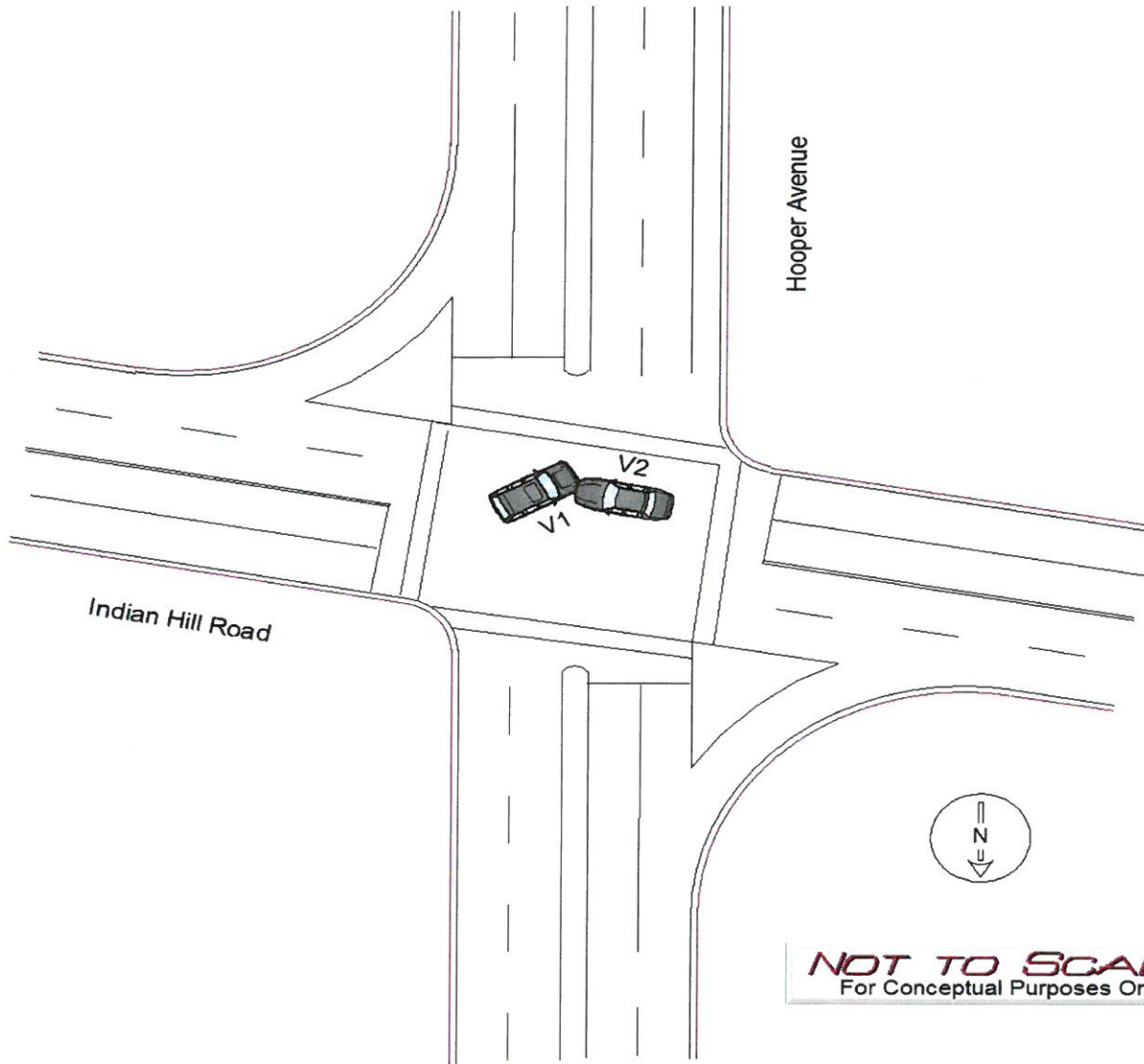
0238

Badge Number

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
Station: **PATROL** Case No: **17-66667**

144 Crash Diagram (NOT TO SCALE)



CAROLAN, J. PD

Officer's Signature

0426

Badge Number

**New Jersey Police
Crash Investigation Report**

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
 Station: **PATROL** Case No: **17-66667**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

SEE DIAGRAM PAGE

145 Crash Description/Narrative

Vehicle 1 was traveling north on Indian Hill Rd approaching the intersection of Hooper Ave with a steady green traffic signal. Vehicle 2 was traveling south on Indian Hill Rd approaching the intersection of Hooper Ave, also with a steady green traffic signal. Following the vehicle in front of her, Vehicle 1 attempted to negotiate a turn onto Hooper Ave south bound, causing it to collide with Vehicle 2, causing moderate damage to both vehicles.

Vehicle 1 was determined to be at fault for failure to yield to an oncoming motor vehicle.

**Ptl. J. Carolan #426
Toms River Police Department**

146 Officer's Signature

CAROLAN, J. PD

147 Badge #

0426

148 Reviewer

DJR

Badge #

0339

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 3		New Jersey Police Crash Investigation Report		☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																																																																																																																				
02	1 Case Number 17-66714										10 Crash Occurred On: HOOPER AVENUE										11 Speed Limit N 30										118a																																																																																																																																																																																													
97	2 Police Dept of TOMS RIVER POLICE DEPT 01										12 Route No. 13 Milepost - -										18 Speed Limit 25										118b																																																																																																																																																																																													
98	3 Station/Precinct DISTRICT ONE										14 15 16										19 20										119a																																																																																																																																																																																													
07	4 Date of Crash 11/28/17										5 Day Of Week TUESDAY										6 Time 0031										7 Municipality Code 1507										8 Total Killed --										9 Total Injured 1										21 Latitude 40.006120										22 Longitude -74.149140										119b																																																																																																																																											
05	23 Veh # 1										24 Policy No. 02730 97 51C 7101 9										25 NJ Ins. Code 823										53 Veh # -										54 Policy No. -										55 NJ Ins. Code -										01																																																																																																																																																															
100a	26 Driver's First Name GINA										27 Number & Street 585 FRANK APPELGATE RD.										28 City JACKSON										29 Sex F										56 Driver's First Name -										57 Number & Street -										58 City -										59 Sex -										120a																																																																																																																																											
02	30 Eyes 02										31 State NJ										60 Eyes -										61 State -										121a																																																																																																																																																																																			
01	32 Driver's License Number S27382887158592										33 DOB 08/15/1959										34 Expires 11 20										62 Driver's License Number -										63 DOB -										64 Expires -										121b																																																																																																																																																															
106	35 Owner's First Name MARK										36 Number & Street 585 FRANK APPELGATE ROAD										37 City JACKSON										38 Make KIA										39 Model FOR										40 Color BK										41 Year 2010										42 Plate No. M39CTK										43 State NJ										44 VIN KNAFU4A22A5288241										45 Expires 01 18										46 Vehicle Removed To FREEDOM TOWING										47 Authority Police										48 Alcohol/Drug Test No										49 Hazardous Material None										50 Carrier No. USDOT										51 GVWR/GCWR Weight <= 10,000 lbs										52 Motor Carrier or Government Entity -										53 Veh # -										54 Policy No. -										55 NJ Ins. Code -										56									
107	35 Owner's Last Name K WRIGHT										36 Number & Street 585 FRANK APPELGATE ROAD										37 City JACKSON										38 Make KIA										39 Model FOR										40 Color BK										41 Year 2010										42 Plate No. M39CTK										43 State NJ										44 VIN KNAFU4A22A5288241										45 Expires 01 18										46 Vehicle Removed To FREEDOM TOWING										47 Authority Police										48 Alcohol/Drug Test No										49 Hazardous Material None										50 Carrier No. USDOT										51 GVWR/GCWR Weight <= 10,000 lbs										52 Motor Carrier or Government Entity -										53 Veh # -										54 Policy No. -										55 NJ Ins. Code -										56									
108	35 Owner's Initial -										36 Number & Street 585 FRANK APPELGATE ROAD										37 City JACKSON										38 Make KIA										39 Model FOR										40 Color BK										41 Year 2010										42 Plate No. M39CTK										43 State NJ										44 VIN KNAFU4A22A5288241										45 Expires 01 18										46 Vehicle Removed To FREEDOM TOWING										47 Authority Police										48 Alcohol/Drug Test No										49 Hazardous Material None										50 Carrier No. USDOT										51 GVWR/GCWR Weight <= 10,000 lbs										52 Motor Carrier or Government Entity -										53 Veh # -										54 Policy No. -										55 NJ Ins. Code -										56									
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New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**Station: **DISTRICT ONE** Case No: **17-66714**

(Refer to vehicle by number)

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

144 Crash Diagram (NOT TO SCALE)

SEE DIAGRAM PAGE

145 Crash Description/Narrative

Driver #1 was traveling north on Hooper Avenue when a deer ran in the roadway just south of Schooner Drive. Driver #1 turned the wheel right to avoid the deer and struck the curb just before and just after Schooner Drive. Vehicle #1 then came to a rest in the right lane of Hooper Avenue northbound. Driver #1 complained of minor chest pain but refused medical treatment. Vehicle #1 was towed from the scene by Freedom towing.

146 Officer's Signature

APPLEBY, B.

147 Badge #

0401

148 Reviewer

TJD

Badge #

295

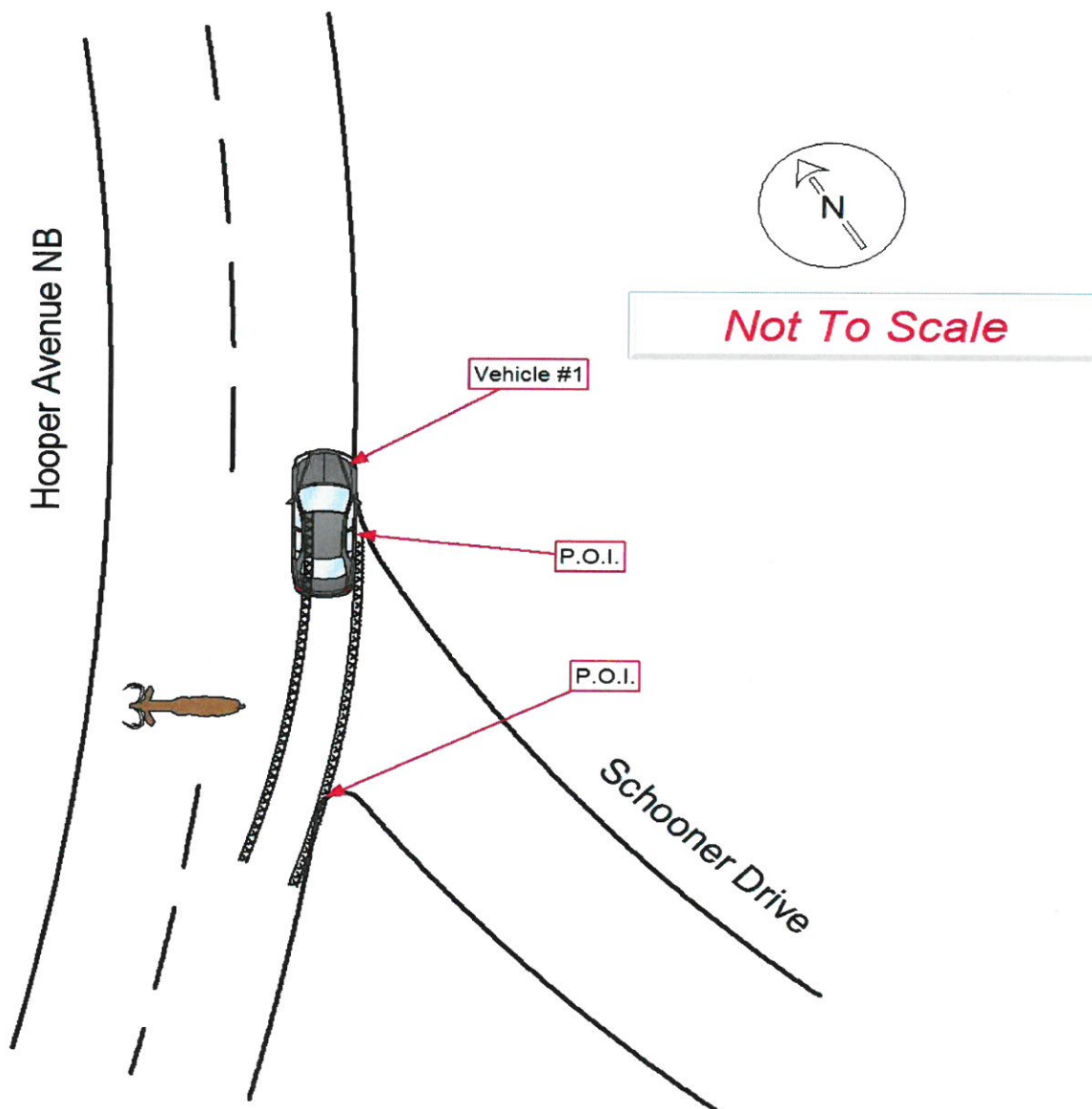
149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
Station: **DISTRICT ONE** Case No: **17-66714**

144 Crash Diagram (NOT TO SCALE)



APPLEBY, B.

Officer's Signature

0401

Badge Number