

96	PAGE 1 OF 3		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
01	1 Case Number		10 Crash Occurred On: ROUTE 70		11 Speed Limit W 50		118a 02	
97	17-67526		At Intersection With Road Name Dir		12 Route No. 0070		118b	
01	2 Police Dept of		☐ Feet ☐ N ☒ E of: MASSACHUSETTS AVENUE		13 Milepost 40		09	
98	TOMS RIVER POLICE DEPT 01		☐ Miles ☐ S ☐ W		17 Cross Road Name		119a	
06	3 Station/Precinct		14 30		19 Ramp To From: -		25	
99			15 1705		20 Route/Name		119b	
02	4 Date of Crash mm dd yy		5 Day Of Week FRIDAY		21 Latitude		-	
100a	12/01/17		6 Time (use 2400 hrs) 1705		22 Longitude		-	
01			7 Municipality Code 1507		8 Total Killed --		120a	
100b			9 Total Injured 1				01	
04	23 Veh # 1		24 Policy No. F647312-8		25 NJ Ins. Code 426		120b	
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		53 Veh # 2		54 Policy No. NC10043014		-	
02					55 NJ Ins. Code 946		121a	
102	26 Driver's First Name Initial Last Name		29 Sex		56 Driver's First Name Initial Last Name		59 Sex	
01	JOANNE E HAMILTON -		F		NICOLE H ROSS -		F	
103	27 Number & Street				57 Number & Street		121b	
01	24 FLORIAN CT				369 GABLE CIRCLE		-	
104	28 City		State Zip		58 City		State Zip	
2	MANCHESTER NJ 08759				MANCHESTER NJ 08759			
105	30 Eyes DL Class Restrictions Endorsements		31 State		60 Eyes DL Class Restrictions Endorsements		61 State	
01	04 D - - NJ				02 D - - NJ		122	
106	32 Driver's License Number		33 DOB mm dd yyyy		62 Driver's License Number		63 DOB mm dd yyyy	
01	H03534026557414		07/18/1941		R67265916852912		02/06/1991	
107	34 Expires mm yy		05 20		64 Expires mm yy		05 20	
108	35 Owner's First Name Initial Last Name		65 Owner's First Name Initial Last Name					
-	☐ Same As Driver JOHN P HAMILTON -		☒ Same As Driver NICOLE H ROSS -					
109	36 Number & Street		66 Number & Street					
-	24 FLORIAN CT		369 GABLE CIRCLE					
110	37 City		State Zip		67 City		State Zip	
01	MANCHESTER NJ 08759				MANCHESTER NJ 08759			
111	38 Make		39 Model		68 Make		69 Model	
01	NISSA		ALT		BMW		528	
112	40 Color		41 Year		70 Color		71 Year	
01	GN		2006		WT		2013	
113	42 Plate No.		43 State		72 Plate No.		73 State	
01	UXU95A NJ				A61GTL NJ			
114	44 VIN		45 Expires		74 VIN		75 Expires	
01	1N4AL11EX6N415422		07 18		WBAXH5C58DD111094		05 18	
115	46 Vehicle Removed To		76 Vehicle Removed To					
01	-		-					
116	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded					
-	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded					
117	47 Authority		77 Authority					
-	☐ Owner ☒ Driver ☐ Police		☒ Owner ☐ Driver ☐ Police					
118	48 Alcohol/Drug Test		78 Alcohol/Drug Test					
01	Given: ☒ No ☐ Yes ☐ Refused		Given: ☒ No ☐ Yes ☐ Refused					
-	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine					
119	Results: 0, - % ☐ Pending		Results: 0, - % ☐ Pending					
04	50 Carrier No.		79 Hazardous Material					
04	☐ USDOT ☒ None		☒ None ☐ On Board ☐ Spill					
120	51 GVWR/GCWR		80 Carrier No.					
-	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		☐ USDOT ☒ None					
121	52 Motor Carrier or Government Entity		81 GVWR/GCWR					
-	-		☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs					
122	Number & Street		82 Motor Carrier or Government Entity					
-	-		-					
123	City		Number & Street					
-	-		-					
124	State		City					
-	-		-					
125	Zip		State					
-	-		-					
126	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		137 Summons. No.		139 Summons. No.			
01	-		1507E17010967		-			
127	Oper. 136 Charge		Oper. 140 Charge		Oper. 142 Charge		133	
01	39:4-97		-		-		02	
128	138 Charge		141 Summons. No.		143 Summons. No.		134	
-	-		-		-		02	
129	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death					
130	A 1 01 - - 76 F - - - 11 04 - -		JOANNE E HAMILTON		-			
131	B 2 01 - 04 26 F 06 08 01 11 04 - -		24 FLORIAN CT MANCHESTER NJ 08759 -		-			
132	C		NICOLE H ROSS		-			
133	D		369 GABLE CIRCLE MANCHESTER NJ 08759 -		-			
134								

New Jersey Police Crash Investigation Report

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**Station: **-** Case No: **17-67526**

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

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

Driver #1 stated she was behind vehicle #2 on Route 70 near the intersection of Massachusetts Avenue. Driver #1 stated vehicle #1 rear-ended vehicle #2.

Driver #2 stated she was stopped in traffic at a red light on Route 70, westbound. Driver #2 stated vehicle #2 was rear-ended by vehicle #1. Driver #2 recalled hearing a loud noise from the impact.

Driver #1 is at fault for the motor vehicle accident.

146 Officer's Signature

MACDONALD, M.

147 Badge #

0366

148 Reviewer

CA

Badge #

266

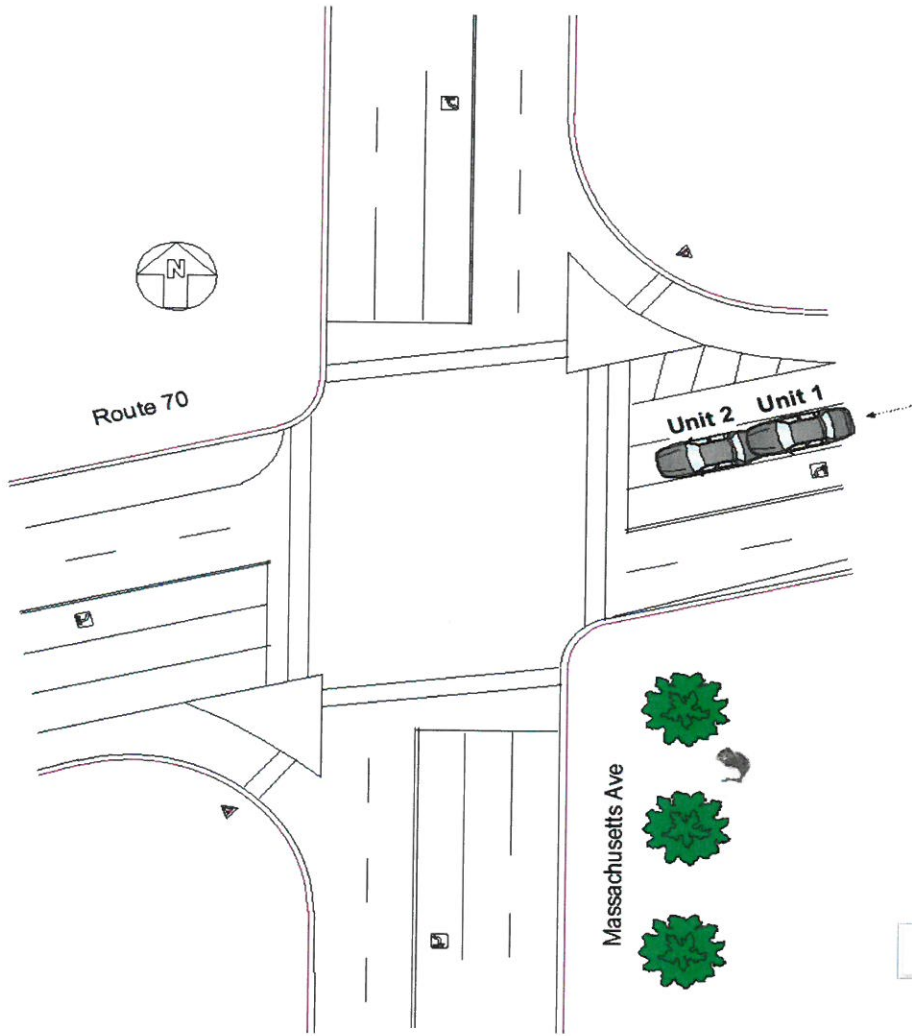
149 Case Status

☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept: **TOMS RIVER POLICE DEPT** Code: **01**
Station: **-** Case No: **17-67526**

144 Crash Diagram (NOT TO SCALE)



MACDONALD, M.

Officer's Signature

0366

Badge Number