

|    |                                                                                                                                                                                                                                                                                                |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  |                                                                       |  |                                                                     |  |      |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------|--|----------------------------------------------|--|--|--|--|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------|--|-----------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------|--|---------------------------------|--|--------------------------|------|-------------------------|--|-----------------|--|-----------------------------------------------------------------------|--|---------------------------------------------------------------------|--|------|
| 96 | Page 1 of 3                                                                                                                                                                                                                                                                                    |  | <input type="checkbox"/> Fatal |  | New Jersey Police Crash Investigation Report |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  | <input checked="" type="checkbox"/> Reportable                                                                                                                                                                                                                                                 |  | <input type="checkbox"/> Non-Reportable                                                                                                                                    |  | <input type="checkbox"/> Change Report                                              |  | 118a                                                |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  |                                                                       |  |                                                                     |  |      |
| 05 | 1. Case Number<br>2019-00073991                                                                                                                                                                                                                                                                |  |                                |  |                                              |  |  |  |  |  | 10. Crash Occurred On: JACK MARTIN BLVD                                                                                                                                    |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  | 11. Speed Limit<br>40                               |  | 12. Route No. 540                                                                                              |  | 13. Milepost                    |  | 04                       |      |                         |  |                 |  |                                                                       |  |                                                                     |  |      |
| 01 | 2. Police Dept. of<br>Brick Police                                                                                                                                                                                                                                                             |  |                                |  |                                              |  |  |  |  |  | Code<br>01                                                                                                                                                                 |  | Road Name<br>Dir                                                                                                            |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  | 02                       |      |                         |  |                 |  |                                                                       |  |                                                                     |  |      |
| 01 | 3. Station/Precinct                                                                                                                                                                                                                                                                            |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  | <input checked="" type="checkbox"/> At Intersection with<br><input type="checkbox"/> Feet<br><input type="checkbox"/> Miles |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  | <input type="checkbox"/> N <input type="checkbox"/> E<br><input type="checkbox"/> S <input type="checkbox"/> W |  | of: ALBERT CUCCI DR             |  | 18. Speed Limit<br>-     | 119a |                         |  |                 |  |                                                                       |  |                                                                     |  |      |
| 05 | 4. Date of Crash<br>mm dd yy<br>1 1 2 1 1 9                                                                                                                                                                                                                                                    |  |                                |  |                                              |  |  |  |  |  | 5. Day of Week<br>Su M Tu W<br>F Sa                                                                                                                                        |  | 6. Time (use 2400 hrs.)<br>1 5 4 0                                                                                          |  | 7. Municipality Code<br>1 5 0 6                                                                                                                                                                                                                                                                |  | 8. Total Killed<br>-                                                                                                                                                       |  | 9. Total Injured<br>-                                                               |  | 19. Ramp                                            |  | 17. Cross Road Name/Route No.                                                                                  |  | 21. Latitude                    |  | 20. Route Name/Route No. |      | 22. Longitude           |  | 25              |  |                                                                       |  |                                                                     |  |      |
| 01 | 23. Veh. #<br>01                                                                                                                                                                                                                                                                               |  |                                |  |                                              |  |  |  |  |  | 24. Policy No.<br>4422311979                                                                                                                                               |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  | 25. NJ Ins. Code<br>100                             |  | 53. Veh. #<br>02                                                                                               |  | 54. Policy No.<br>PCA0100720097 |  |                          |      |                         |  |                 |  |                                                                       |  | 55. NJ Ins. Code<br>287                                             |  | 119b |
| 02 | 26. Driver's First Name<br>THOMAS                                                                                                                                                                                                                                                              |  |                                |  |                                              |  |  |  |  |  | Initial<br>J                                                                                                                                                               |  | Last Name<br>MCEVILLY                                                                                                       |  | 29. Sex<br>M                                                                                                                                                                                                                                                                                   |  | 56. Driver's First Name<br>JOSE                                                                                                                                            |  | Initial<br>A                                                                        |  | Last Name<br>HUERTA-RAMIREZ                         |  | 59. Sex<br>M                                                                                                   |  |                                 |  |                          |      |                         |  | 120a            |  |                                                                       |  |                                                                     |  |      |
| 01 | 27. Number & Street<br>316 SHAWNEE DR                                                                                                                                                                                                                                                          |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  | 57. Number & Street<br>419 MILFORD MILL RD                                                                                                                                 |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 01              |  |                                                                       |  |                                                                     |  |      |
| 01 | 28. City<br>BRICK TOWNSHIP                                                                                                                                                                                                                                                                     |  |                                |  |                                              |  |  |  |  |  | State<br>NJ                                                                                                                                                                |  | Zip<br>08724                                                                                                                |  |                                                                                                                                                                                                                                                                                                |  | 58. City<br>PIKESVILLE                                                                                                                                                     |  | State<br>MD                                                                         |  | Zip<br>21208                                        |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 121a            |  |                                                                       |  |                                                                     |  |      |
| 02 | 30. Eyes<br>0 4                                                                                                                                                                                                                                                                                |  |                                |  |                                              |  |  |  |  |  | DL Class<br>D                                                                                                                                                              |  | Restrictions<br>0                                                                                                           |  | Endorsements<br>-                                                                                                                                                                                                                                                                              |  | 31. State<br>NJ                                                                                                                                                            |  | 60. Eyes<br>0 2                                                                     |  | DL Class<br>D                                       |  | Restrictions<br>0                                                                                              |  | Endorsements<br>-               |  | 61. State<br>MD          |      |                         |  | 121b            |  |                                                                       |  |                                                                     |  |      |
| 03 | 32. Driver's License Number<br>M 1 2 2 4 7 4 0 7 1                                                                                                                                                                                                                                             |  |                                |  |                                              |  |  |  |  |  | 33. DOB<br>mm dd yy<br>0 4 0 2 8 5                                                                                                                                         |  | 34. Expires<br>mm yy<br>0 4 2 3                                                                                             |  | 62. Driver's License Number<br>H 6 3 6 4 4 0 0 6 7                                                                                                                                                                                                                                             |  | 63. DOB<br>mm dd yy<br>1 1 1 5 8 5                                                                                                                                         |  | 64. Expires<br>mm yy<br>1 1 2 3                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      | 122                     |  |                 |  |                                                                       |  |                                                                     |  |      |
|    | 35. Owner's First Name<br>THOMAS J MCEVILLY                                                                                                                                                                                                                                                    |  |                                |  |                                              |  |  |  |  |  | Initial<br>J                                                                                                                                                               |  | Last Name<br>MCEVILLY                                                                                                       |  |                                                                                                                                                                                                                                                                                                |  | 65. Owner's First Name<br>SUPREME LAWN SYSTEMS                                                                                                                             |  | Initial<br>S                                                                        |  | Last Name<br>LAWN SYSTEMS                           |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 02              |  |                                                                       |  |                                                                     |  |      |
|    | 36. Number & Street<br>316 SHAWNEE DR                                                                                                                                                                                                                                                          |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  | 66. Number & Street<br>641 N LAKE DR                                                                                                                                       |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 123             |  |                                                                       |  |                                                                     |  |      |
| 01 | 37. City<br>BRICK TOWNSHIP                                                                                                                                                                                                                                                                     |  |                                |  |                                              |  |  |  |  |  | State<br>NJ                                                                                                                                                                |  | Zip<br>08724                                                                                                                |  |                                                                                                                                                                                                                                                                                                |  | 67. City<br>Lakewood Township                                                                                                                                              |  | State<br>NJ                                                                         |  | Zip<br>08701                                        |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 01              |  |                                                                       |  |                                                                     |  |      |
| 03 | 38. Make<br>Infiniti                                                                                                                                                                                                                                                                           |  |                                |  |                                              |  |  |  |  |  | 39. Model<br>G35                                                                                                                                                           |  | 40. Color<br>BL                                                                                                             |  | 41. Year<br>2004                                                                                                                                                                                                                                                                               |  | 42. Plate No.<br>X64ALN                                                                                                                                                    |  | 43. State<br>NJ                                                                     |  | 68. Make<br>Ford                                    |  | 69. Model<br>Econoline                                                                                         |  | 70. Color<br>WT                 |  | 71. Year<br>2015         |      | 72. Plate No.<br>XDVN12 |  | 73. State<br>NJ |  | 124                                                                   |  |                                                                     |  |      |
| 01 | 44. VIN<br>J N K C V 5 4 E 4 4 M 8 2 0 0 2 9                                                                                                                                                                                                                                                   |  |                                |  |                                              |  |  |  |  |  | 45. Expires<br>01/20                                                                                                                                                       |  |                                                                                                                             |  | 74. VIN<br>1 F T Y R 2 C M X F K A 9 9 6 5 3                                                                                                                                                                                                                                                   |  | 75. Expires<br>05/20                                                                                                                                                       |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 08              |  |                                                                       |  |                                                                     |  |      |
| 02 | 46. Vehicle Removed to:<br>Surfside Collision                                                                                                                                                                                                                                                  |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  | 76. Vehicle Removed to:                                                                                                                                                    |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 125             |  |                                                                       |  |                                                                     |  |      |
|    | <input type="checkbox"/> Driven<br><input type="checkbox"/> Left at Scene                                                                                                                                                                                                                      |  |                                |  |                                              |  |  |  |  |  | <input checked="" type="checkbox"/> Towed Disabled<br><input type="checkbox"/> Towed Impounded                                                                             |  | <input type="checkbox"/> Towed Disabled & Impounded                                                                         |  |                                                                                                                                                                                                                                                                                                |  | <input checked="" type="checkbox"/> Driven<br><input type="checkbox"/> Left at Scene                                                                                       |  | <input type="checkbox"/> Towed Disabled<br><input type="checkbox"/> Towed Impounded |  | <input type="checkbox"/> Towed Disabled & Impounded |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 04              |  |                                                                       |  |                                                                     |  |      |
|    | 47. Authority<br><input type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police                                                                                                                                                                     |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  | 77. Authority<br><input type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police                                                                                                                                                                     |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 126a            |  |                                                                       |  |                                                                     |  |      |
|    | 48. Alcohol Drug Test<br>Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused<br>Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine<br>Results: 0.00% <input type="checkbox"/> Pending |  |                                |  |                                              |  |  |  |  |  | 49. Hazardous Material<br><input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill<br>Hazard Class<br>Placard No.         |  |                                                                                                                             |  | 78. Alcohol Drug Test<br>Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused<br>Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine<br>Results: 0.00% <input type="checkbox"/> Pending |  | 79. Hazardous Material<br><input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill<br>Hazard Class<br>Placard No.         |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  |                                                                       |  | 26                                                                  |  |      |
| 01 | 50. Carrier No.<br><input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None                                                                                                                                                                                                     |  |                                |  |                                              |  |  |  |  |  | 51. GVWR / GCWR (trucks & buses only)<br><input type="checkbox"/> ≤ 10,000 lbs.<br><input type="checkbox"/> 10,001 - 26,000 lbs.<br><input type="checkbox"/> ≥ 26,001 lbs. |  |                                                                                                                             |  | 80. Carrier No.<br><input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None                                                                                                                                                                                                     |  | 81. GVWR / GCWR (trucks & buses only)<br><input type="checkbox"/> ≤ 10,000 lbs.<br><input type="checkbox"/> 10,001 - 26,000 lbs.<br><input type="checkbox"/> ≥ 26,001 lbs. |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  | 126b                                                                  |  |                                                                     |  |      |
| 01 | 52. Motor Carrier or Government Entity                                                                                                                                                                                                                                                         |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  | 82. Motor Carrier or Government Entity                                                                                                                                                                                                                                                         |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  | 126c                                                                  |  |                                                                     |  |      |
|    | Number & Street                                                                                                                                                                                                                                                                                |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  | Number & Street                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 126d            |  |                                                                       |  |                                                                     |  |      |
|    | City                                                                                                                                                                                                                                                                                           |  |                                |  |                                              |  |  |  |  |  | State                                                                                                                                                                      |  | Zip                                                                                                                         |  | City                                                                                                                                                                                                                                                                                           |  | State                                                                                                                                                                      |  | Zip                                                                                 |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 126e            |  |                                                                       |  |                                                                     |  |      |
|    | 135. Damage to Other Property <input type="checkbox"/> Yes (If Yes, describe) <input checked="" type="checkbox"/> No                                                                                                                                                                           |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  | 127a                                                                  |  |                                                                     |  |      |
|    | Oper. 136. Charge                                                                                                                                                                                                                                                                              |  |                                |  |                                              |  |  |  |  |  | 137. Summons No.                                                                                                                                                           |  | Oper. 138. Charge                                                                                                           |  | 139. Summons No.                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 127b            |  |                                                                       |  |                                                                     |  |      |
|    | Oper. 140. Charge                                                                                                                                                                                                                                                                              |  |                                |  |                                              |  |  |  |  |  | 141. Summons No.                                                                                                                                                           |  | Oper. 142. Charge                                                                                                           |  | 143. Summons No.                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  | 127c            |  |                                                                       |  |                                                                     |  |      |
|    | 83                                                                                                                                                                                                                                                                                             |  |                                |  |                                              |  |  |  |  |  | 84                                                                                                                                                                         |  | 85                                                                                                                          |  | 86                                                                                                                                                                                                                                                                                             |  | 87                                                                                                                                                                         |  | 88                                                                                  |  | 89                                                  |  | 90                                                                                                             |  | 91                              |  | 92                       |      | 93                      |  | 94              |  | 95                                                                    |  | Names & Addresses of Occupants<br>If Deceased, Date & Time of Death |  | 127d |
| A  | 01                                                                                                                                                                                                                                                                                             |  |                                |  |                                              |  |  |  |  |  | 01                                                                                                                                                                         |  | 01                                                                                                                          |  | -                                                                                                                                                                                                                                                                                              |  | 34                                                                                                                                                                         |  | M                                                                                   |  | -                                                   |  | -                                                                                                              |  | 11                              |  | 11                       |      | 04                      |  | -               |  | THOMAS JOSEPH MCEVILLY<br>316 SHAWNEE DR BRICK TOWNSHIP NJ 08724      |  | 127e                                                                |  |      |
| B  | 02                                                                                                                                                                                                                                                                                             |  |                                |  |                                              |  |  |  |  |  | 01                                                                                                                                                                         |  | 01                                                                                                                          |  | -                                                                                                                                                                                                                                                                                              |  | 34                                                                                                                                                                         |  | M                                                                                   |  | -                                                   |  | -                                                                                                              |  | 11                              |  | 04                       |      | -                       |  | -               |  | JOSE ANDRES HUERTA-RAMIREZ<br>419 MILFORD MILL RD PIKESVILLE MD 21208 |  | 127f                                                                |  |      |
| C  |                                                                                                                                                                                                                                                                                                |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  |                                                                       |  | 128                                                                 |  |      |
| D  |                                                                                                                                                                                                                                                                                                |  |                                |  |                                              |  |  |  |  |  |                                                                                                                                                                            |  |                                                                                                                             |  |                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                            |  |                                                                                     |  |                                                     |  |                                                                                                                |  |                                 |  |                          |      |                         |  |                 |  |                                                                       |  | 129                                                                 |  |      |

| New Jersey Police<br>Crash Investigation Report |    |    |    |    |    |    |    |    |    |    |    | Case Number<br>2019-00073991 |    |                                                                                | Page 2 of 3 |  |
|-------------------------------------------------|----|----|----|----|----|----|----|----|----|----|----|------------------------------|----|--------------------------------------------------------------------------------|-------------|--|
|                                                 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94                           | 95 | Names & Addresses of Occupants<br><i>If Deceased, Date &amp; Time of Death</i> |             |  |
| E<br><br>F<br><br>G<br><br>H<br><br>I<br><br>J  |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
|                                                 |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
|                                                 |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
|                                                 |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
|                                                 |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |
|                                                 |    |    |    |    |    |    |    |    |    |    |    |                              |    |                                                                                |             |  |

144. Crash Diagram

Show NORTH by Arrow  
(Not to Scale)

SEE ATTACHED DIAGRAM

145. Crash Description/Narrative

Vehicle 2 was traveling north on Jack Martin Blvd. Vehicle 1 was on Albert Cucci Dr waiting to enter the roadway.

Vehicle 1 then pulled out in front of vehicle 2 causing a collision.

The driver of vehicle 1 advised he was on Albert Cucci Dr waiting to enter the roadway. Driver 1 further advised he must have pulled out too far into the roadway causing a collision with vehicle 2.

The driver of vehicle 2 advised he was traveling north on Jack Martin Blvd. Driver 2 advised vehicle 1 then pulled out directly in front of him causing a collision.

|                                            |                     |                                  |                |                                                                                                   |
|--------------------------------------------|---------------------|----------------------------------|----------------|---------------------------------------------------------------------------------------------------|
| 146. Officer's Signature<br>Chase S Carter | 147. Badge #<br>280 | 148. Reviewer<br>Charles P Kelly | Badge #<br>241 | 149. Case Status<br><input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |
|--------------------------------------------|---------------------|----------------------------------|----------------|---------------------------------------------------------------------------------------------------|

New Jersey Police Crash Investigation Report  
Motor Vehicle Crash Diagram

Police Dept: Brick Police

Code: 01

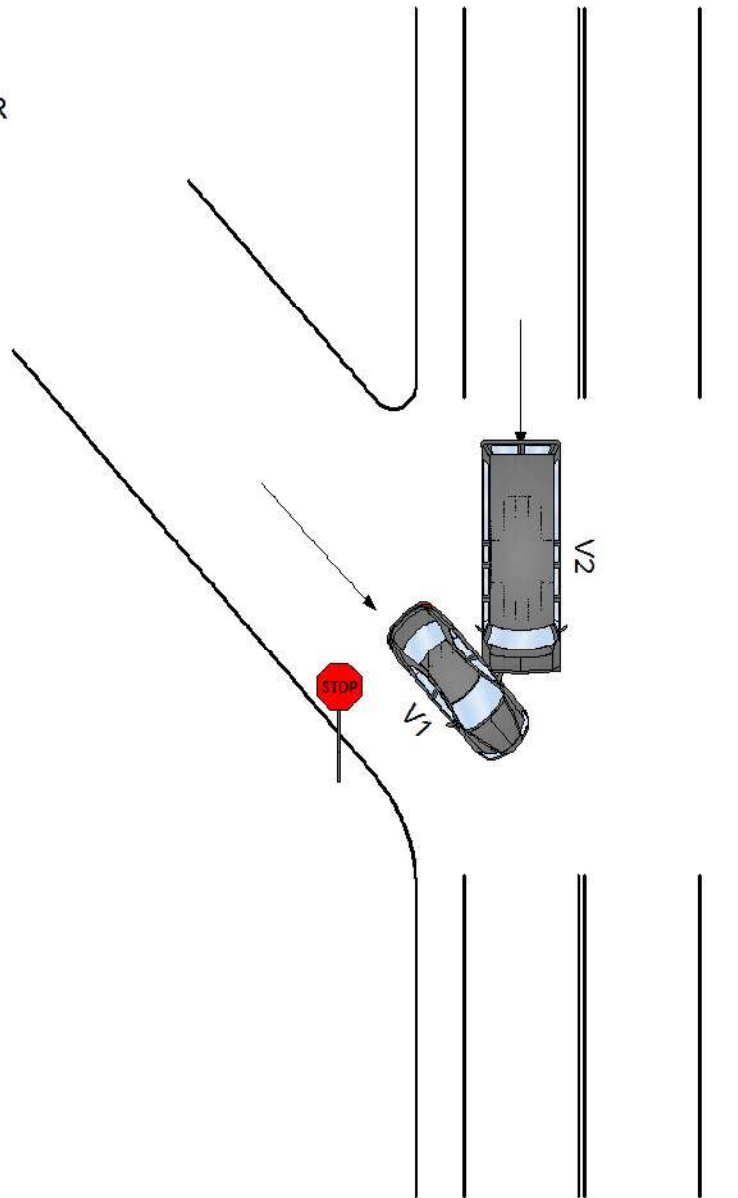
Station:     

Case No: 2019-00073991

144 Crash Diagram (NOT TO SCALE)

○ Indicate  
North

ALBERT CUCCI DR



JACK MARTIN BLVD  
CR 540

Chase S Carter

Officer's Signature

280

Badge Number