96 05 | ☐ Fatal | **New Jersey Police Crash Investigation Report** | ☒ Reportable ☐ Non-Reportable ☐ Change Report | 118a 00

97 01 | 1. Case Number: 2025-36404 | 10. Crash Occurred On: AVENUE C | N | 11. Speed Limit: 25 | 12. Route No. | Suffix | 13. Milepost | 118b -

98 01 | 2. Police Dept. of: Bayonne Police Department | Code: 01 | ☐ At Intersection with ☒ Feet ☐ Miles | 108.0 | ☒ N ☐ E ☐ S ☐ W | of: W. 51ST ST | 18. Speed Limit: 25 | 119a 25

99 07 | 3. Station/Precinct: Bayonne | 19. Ramp ☐ To: ☐ From: | 17. Cross Road Name/Route No. | ☐ NB ☐ EB ☐ SB ☐ WB | 119b -

100a 01 | 4. Date of Crash: 05/17/2025 | 5. Day of Week: Saturday | 6. Time (use 2400 hrs.): 1030 | 7. Municipality Code: 0901 | 8. Total Killed: 0 | 9. Total Injured: 0 | 21. Latitude: 40.684740 | 20. Route Name/Route No. | 22. Longitude: -74.103864 | 120a 00

100b 04 | **Vehicle 1** | 23. Veh. #: 01 | 24. Policy No.: Unknown | 25. NJ Ins. Code: UNK | ☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp. to Emergency ☒ Hit & Run | 120b -

101 02 | 26. Driver's First Name: 00 | Initial | Last Name: 00 | 29. Sex: U | 121a

102 01 | 27. Number & Street: 00 | 121b

103 01 | 28. City: 00 | State | Zip

104 2 | 30. Eyes | DL Class: 00 | Restrictions | Endorsements | 31. State

105 06 | 32. Driver's License Number | 33. DOB | 34. Expires

106 - | 35. Owner's First Name | Initial | Last Name | ☐ Same as Driver: 00 00

107 02 | 36. Number & Street: 00

108 00 | 37. City: 00 | State | Zip

109 03 | 38. Make | 39. Model | 40. Color: WT | 41. Year | 42. Plate No. | 43. State

110 00 | 44. VIN | 45. Expires

111 02 | 46. Vehicle Removed to:

112 00 | ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left at Scene ☐ Towed Impounded

113 01 | 47. Authority: ☐ Owner ☐ Driver ☐ Police

114 - | 48. Alcohol Drug Test: Given: ☒ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: % ☐ Pending

115 03 | 49. Hazardous Material: ☐ None ☐ On Board ☐ Spill | Hazard Class | Placard No.

116 00 | 50. Carrier No.: ☐ USDOT ☐ None | ☐ MC/MX

117 - | 51. GVWR/GCWR (trucks & buses only): ☐ ≤ 10,000 lbs. ☐ 10,001 - 26,000 lbs. ☐ ≥ 26,001 lbs.

52. Motor Carrier or Government Entity | Number & Street | City | State | Zip

Level of Autonomy | 150 - AVAILABLE ☐0 ☐1 ☐2 ☐3 ☐4 ☐5 ☒ Unknown | 151 - ENGAGED ☐0 ☐1 ☐2 ☐3 ☐4 ☐5 ☒ Unknown

Vehicle 2 | 53. Veh. #: 02 | 54. Policy No.: Certificate No.20 | 55. NJ Ins. Code: 000 | ☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp. to Emergency ☐ Hit & Run | 120b -

121a | 56. Driver's First Name | Initial | Last Name | 59. Sex

121b | 57. Number & Street

58. City | State | Zip

122 00 | 60. Eyes | DL Class | Restrictions | Endorsements | 61. State

123 10 | 62. Driver's License Number | 63. DOB | 64. Expires

124 11 | 65. Owner's First Name | Initial | Last Name | ☐ Same as Driver: Public Service Electric and Gas (PSE&G)

125 11 | 66. Number & Street: 80 Park Plaza M/C 406

126a 28 | 67. City: Newark | State: NJ | Zip: 07101

126b - | 68. Make: FORD | 69. Model: Transit | 70. Color: WT | 71. Year: 2017 | 72. Plate No.: XGDS59 | 73. State: NJ

126c - | 74. VIN: 1FTBW2CMXHKB34788 | 75. Expires

126d - | 76. Vehicle Removed to:

126e 28 | ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left at Scene ☐ Towed Impounded

127a - | 77. Authority: ☒ Owner ☐ Driver ☐ Police

127b - | 78. Alcohol Drug Test: Given: ☐ No ☐ Yes ☐ Refused | Type: ☐ Breath ☐ Blood ☐ Urine | Results: % ☐ Pending

127c - | 79. Hazardous Material: ☒ None ☐ On Board ☐ Spill | Hazard Class | Placard No.

127d - | 80. Carrier No.: ☐ USDOT ☐ None | ☐ MC/MX

127e 28 | 81. GVWR/GCWR (trucks & buses only): ☒ ≤ 10,000 lbs. ☐ 10,001 - 26,000 lbs. ☐ ≥ 26,001 lbs.

128 28 | 82. Motor Carrier or Government Entity: Public Serviced Electric and Gas (PSE&G)

129 00 | Number & Street: 80 Park Plaza M/C 406

130 00 | City: Newark | State: NJ | Zip: 07101

131 07 | Level of Autonomy | 152 - AVAILABLE ☒0 ☐1 ☐2 ☐3 ☐4 ☐5 ☐ Unknown | 153 - ENGAGED ☒0 ☐1 ☐2 ☐3 ☐4 ☐5 ☐ Unknown

132 07 | 135. Damage to Other Property ☐ Yes (If Yes, describe) ☒ No

133 00

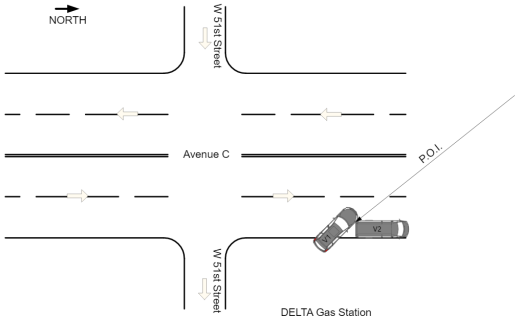
134 02

Oper.	136. Charge	137. Summons No.	Oper.	138. Charge	139. Summons No.
Oper.	140. Charge	141. Summons No.	Oper.	142. Charge	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	01	01	01	00		U	00	00		00	00	00		00 00 00 00
B														
C														
D														

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

144. Crash Diagram



145. Crash Description/Narrative

Vehicle 1 was the hit and run vehicle.

Driver of Vehicle 2 stated he came outside and observed a plastic piece from the back left bumper of the vehicle taken off. He stated he was flagged down by an employee of the delta gas station who stated a vehicle cut through the gas station, and when exiting clipped his vehicle.

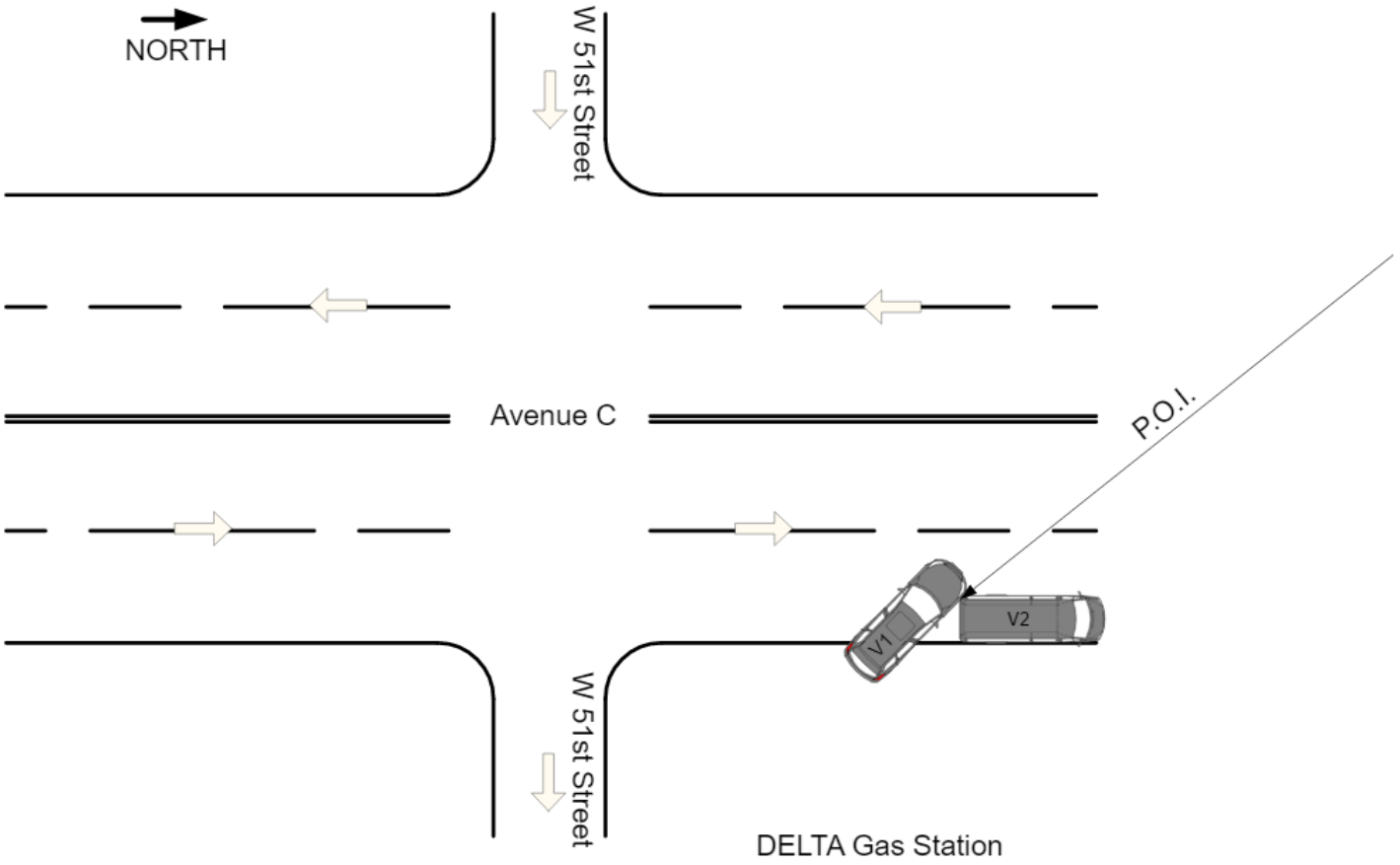
Other Descriptions

01 - Unknown - Field 25
02 - PSE&G Self-Insured/ Certificate No.20 - Field 55

146. Officer's Signature	147. Badge #	148. Reviewer	Badge #	149. Case Status
HOJNACKI, JOSEPH	0065	LOBUE, JOHN	0099	☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report Motor Vehicle Crash Diagram	Police Dept: Bayonne Police Department Code: 01 Station: Bayonne Case No: 2025-36404

144. Crash Diagram (NOT TO SCALE)



HOJNACKI, JOSEPH
Officer's Signature

0065
Badge Number

NJTR-1B (Rev. 01/17)