

|      |                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |      |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------|
| 96   | <input type="checkbox"/> Fatal <b>New Jersey Police Crash Investigation Report</b> <input checked="" type="checkbox"/> Reportable <input type="checkbox"/> Non-Reportable <input type="checkbox"/> Change Report |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 118a |
| 05   |                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 09   |
| 97   | 1. Case Number 23055818                                                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 118b |
| 01   | 2. Police Dept. of Franklin Township Police Department/Somerset Co. Code 01                                                                                                                                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |      |
| 98   | 3. Station/Precinct FTPD                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 119a |
| 01   | 4. Date of Crash 09/22/2023 5. Day of Week Friday 6. Time (use 2400 hrs.) 1744 7. Municipality Code 1808 8. Total Killed 0 9. Total Injured 0                                                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 25   |
| 99   | 10. Crash Occurred On: ROUTE 514 E Dir 11. Speed Limit 40 12. Route No. 514 13. Milepost 45 18. Speed Limit 45                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 119b |
| 05   | 14. 15. 16. 17. Cross Road Name/Route No. ELIZABETH AVE 19. To: 20. Route Name/Route No. 40.499123 21. Latitude 22. Longitude -74.551495                                                                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 120a |
| 100a | 23. Veh. # 01 24. Policy No. 958823453 25. NJ Ins. Code 134 53. Veh. # 02 54. Policy No. 943589306 55. NJ Ins. Code 134                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 01   |
| 100b | 26. Driver's First Name Initial Last Name RAJU K PATEL 29. Sex M 56. Driver's First Name Initial Last Name ROSEANN E WAGNER 59. Sex F                                                                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 121a |
| 04   | 27. Number & Street 7 SUNFLOWER RD 28. City SOMERSET NJ 08873 57. Number & Street 41 CORNEILIUS WAY 58. City SOMERSET NJ 08873                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 121b |
| 101  | 30. Eyes 01 DL Class D Restrictions Endorsements 31. State NJ 60. Eyes 04 DL Class D Restrictions Endorsements 61. State NJ                                                                                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 122  |
| 01   | 32. Driver's License Number P07956387203647 33. DOB 03/03/1964 34. Expires 03/03/2024 62. Driver's License Number W01506716553534 63. DOB 03/23/1953 64. Expires 03/23/2026                                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 01   |
| 105  | 35. Owner's First Name Initial Last Name RAJU K PATEL 65. Owner's First Name Initial Last Name GEORGE M WAGNER                                                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 07   |
| 01   | 36. Number & Street 7 SUNFLOWER RD 66. Number & Street 41 CORNEILIUS WAY                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 124  |
| 106  | 37. City SOMERSET NJ 08873 67. City SOMERSET NJ 08873                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 04   |
| -    | 38. Make LEXUS 39. Model ES 40. Color RD 41. Year 2004 42. Plate No. N17AKX 43. State NJ 68. Make TOYOTA 69. Model RAV4 70. Color WT 71. Year 2018 72. Plate No. G56KRP 73. State NJ                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 125  |
| 107  | 44. VIN JTHBA30G645041440 45. Expires 01/31/2024 74. VIN JTMDJREV2JD226252 75. Expires 11/23/2023                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 04   |
| 108  | 46. Vehicle Removed to: 76. Vehicle Removed to:                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 26   |
| 01   | 47. Authority 48. Alcohol Drug Test Given: 49. Hazardous Material 77. Authority 78. Alcohol Drug Test Given: 79. Hazardous Material                                                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 26   |
| 109  | 50. Carrier No. 51. GVWR/GCWR (trucks & buses only) 80. Carrier No. 81. GVWR/GCWR (trucks & buses only)                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 26   |
| 04   | 52. Motor Carrier or Government Entity 82. Motor Carrier or Government Entity                                                                                                                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126a |
| 110  | Number & Street 129                                                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126b |
| 01   | City State Zip 130                                                                                                                                                                                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126c |
| 111  | Level of Autonomy 131                                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126d |
| 112  | 132                                                                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126e |
| 113  | 133                                                                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126f |
| 114  | 134                                                                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126g |
| -    | 135. Damage to Other Property 136. Charge 137. Summons No. 138. Charge 139. Summons No.                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126h |
| 115  | 140. Charge 141. Summons No. 142. Charge 143. Summons No.                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126i |
| 116  | Names & Addresses of Occupants If Deceased, Date & Time of Death                                                                                                                                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126j |
| 117  | RAJU K PATEL 7 SUNFLOWER RD SOMERSET NJ 08873                                                                                                                                                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126k |
| 04   | ROSEANN E WAGNER 41 CORNEILIUS WAY SOMERSET NJ 08873                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126l |
| 04   |                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126m |
|      |                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 126n |

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

144. Crash Diagram

145. Crash Description/Narrative

INVEST: D2 was driving straight on Amwell Rd when D1 struck V1 from the rear while V2 was stopping in traffic.

D2 Advised while stopping in traffic she was struck from the rear by V1.

D1 Advised while driving straight on Amwell Rd, V2 came to a sudden stop. D1 advised he was unable to causing him to collide in the rear of V2.

Investigation reveals D1 was driving to closely to V2

|                          |              |               |         |                                                                               |
|--------------------------|--------------|---------------|---------|-------------------------------------------------------------------------------|
| 146. Officer's Signature | 147. Badge # | 148. Reviewer | Badge # | 149. Case Status                                                              |
| Sabur, Rashid            | 257          | Raics, James  | 177     | <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |

**New Jersey Police Crash Investigation Report  
Motor Vehicle Crash Diagram**

Police Dept: Franklin Township Police Department/Somerset Co. Code: 01

Station: FTPD Case No: 23055818

144. Crash Diagram (NOT TO SCALE)

