



Commonwealth of Massachusetts

Massachusetts State Police
Motor Vehicle CRASH Report

2009-0C5-001389

Review Required

State Police Sturbridge
Trooper Wolanski, Richard

4/27/09 6:10 PM

Vehicles: 1
Injured: 1
Speed Limit: 40

RT 20, rte 20 west ramp to rte 395 south, AUBURN, MA

Light: 1 - Daylight
Weather:
Traffic Ctrl: 1 - No controls
Ctrl Function:
Road Surface: 1 - Dry
InterSection: 5 - On Ramp
Trafficway: 3 - Two-way, divided, positive
School Bus: No
Work Zone: No
Collision: 1 - Single Vehicle Crash
1st Harmful: Guardrail
1st Harmful Location: 3 - Roadside

Table with vehicle details: Vehicle # 1, Reg # 102464, MA 38 1995, Volvo 850, Towed. Includes insurance info, action prior, event sequences, and a diagram of the vehicle with damage areas 1, 2, 3, 4, 5, 6, 7, 8 marked.

Owner: Veh # 1

OLEARY, LOUISE S

MA
Sex:
Lic State:
Restrictions:
CDL END:
Citation/Charge(s)

Seat Position:
Safety System:
Airbag Status:
Airbag Switch:
Eject Code:
Trap Code:
Injury Status:
Transported:

Driver: Veh # 1

BRUNELLE, VICTORIA L

4 FREMONT STREET

OXFORD, MA 01540

Female

Lic State:
Restrictions:
CDL END:
Citation/Charge(s)

Seat Position: 1 - Front seat - left seat (or)
Safety System: 0 - None used
Airbag Status: 4 - Not Deployed
Airbag Switch: 99 - Unknown
Eject Code: 0 - Not ejected
Trap Code: 0 - Not trapped
Injury Status: 3 - Non-incapacitating (non-fatal)
Transported: 2 - EMS

Property Damage

GUARDRAIL - 8 ft of end section at bottom of ramp

change later

Witness

Officer Name
Trooper Wolanski, Richard

Signature

3203

ID# Station
3203 State Police Sturbridge

Date
04/29/2009



Commonwealth of Massachusetts
 Massachusetts State Police
 Motor Vehicle CRASH Report

2009-0C5-001389
 Review Required

State Police Sturbridge
 Trooper Wolanski, Richard

4/27/09 6:10 PM

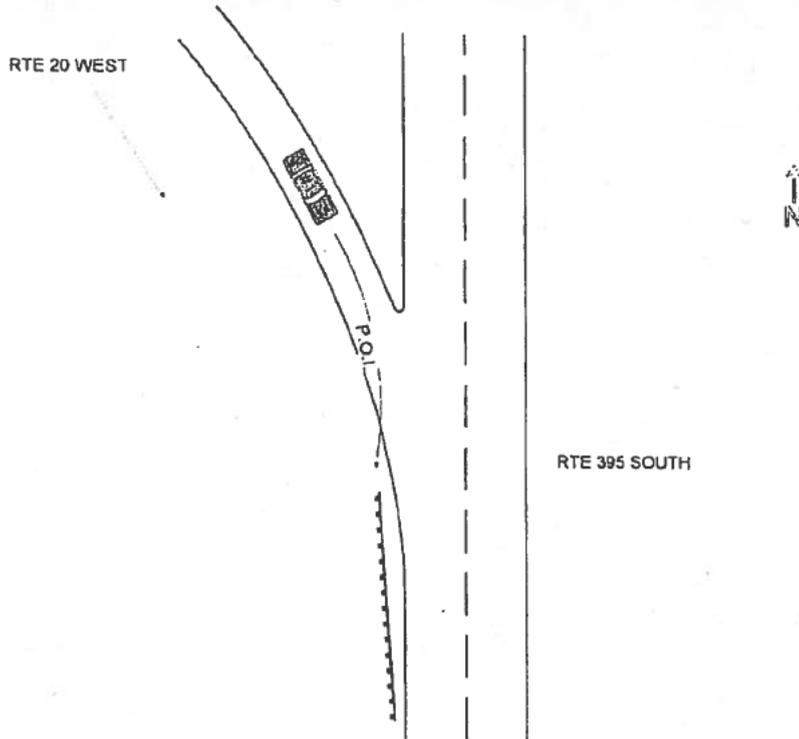
Vehicles: 1 # Injured: 1
 Speed Limit: 40

RT 20, rte 20 west ramp to rte 395 south , AUBURN, MA

Narrative

1.MV #1 traveling from Route 20 west in Auburn on the on ramp to Route 395 south. Operator of MV #1 lost control of vehicle prior to entering traffic on Rte 395. MV #1 struck the guardrail head-on. MV #1 sustained significant front end damage. The vehicle was towed from the scene by Fuller's Auto. The operator of MV #1 complained of knee pain and low blood sugar. She stated she was not wearing her seatbelt. Operator was examined by Auburn EMS, who gave her blood sugar at 25. Operator was transported by Auburn EMS to Memorial Hospital in Worcester. The passenger, a 2 year old female, was transported by the operator's mother.

Crash Diagram



Officer Name: Trooper Wolanski, Richard Signature: [Signature] Date: 04/29/2009
 Station: 3203 State Police Sturbridge



13-B3-066

Commonwealth of Massachusetts

Date of Crash 03/07/2013	Time of Crash 08:33 PM	City/Town WESTMINSTER	Motor Vehicle Crash Police Report Bartlett Consolidated LLC	Number Vehicles 1	Number Injured	Speed Limit 55 Latitude 42.3346 Longitude -71.7712	PW201307100127 Police Type 1
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AT INTERSECTION :		LOCATION :	NOT AT INTERSECTION :	
Route #	Direction	Name of Roadway/Street	Route #	Direction
			2	E
Route #	Direction	Name of Roadway/Street	Address #	Name of Roadway/Street
			0.00	90.8
			Feet	Feet
			of	of
				or
				Exit Number
			Feet	of
				Route #
				Intersecting Roadway/Street
				MEDIAN SIDE GUARDRAIL END CAP
				Landmark

Please Select One of the

Vehicle 1 # Occupants Non-Motorist Type Action Location Condition Hit/Run Moped

License # [Redacted] MA DOB/Age [Redacted] Reg # [Redacted] Reg Type PAN Reg State MA

Sex F Lic. Class D Lic. Restrictions [Redacted] CDL Endorsement C

Operator [Redacted] (Last / First / Middle)

Address [Redacted]

City N ANDOVER State MA Zip 01845

Insurance Company COMMERCE INSURANCE

Vehicle Travel Direction: E Responding to Emergency? 2

Reg # [Redacted] Reg Type PAN Reg State MA

Veh Year 1999 Veh Make TOYOTA Veh Config. 1

Owner [Redacted] (Last / First / Middle)

Address [Redacted]

City [Redacted] State MA Zip [Redacted]

Vehicle Action Prior to Crash 1 Damaged Area Code: 1 2 8

Event Sequence 24 Test Status:

Most Harmful Event 24 Type of Test:

Driver Contributing Code 7 BAC Test Result:

Susp. Alcohol: Susp. Drug:

Driver Distracted by: Towed from scene?

Please fill out for operator and all occupants involved		DOB/Age	Sex	Seat Pos.	Safety System	Airbag Status	Eject Code	Trip Code	Inquiry Status	Transp. Code	Medical Facility
Operator	Address See Above	[Redacted]	F	1	1	4	0	D	5	1	

90.7

Crash Information			
Light Conditions :	5	Trafficway Description :	3
Weather Conditions :	4	School Bus Related :	2
Traffic Control Device Type :	1	Work Zone Related :	2
Traffic Device Functioning Code :		Manner of Collision :	1
Road Surface :	3	First Harmful Event Location :	2
Roadway Intersection Type :	1	First Harmful Event :	24
Road Contributing Circumstances:			

Crash Diagram:

See Attached

Crash Narrative:

1. I, TROOPER ROBERT A. JOHNSON #2872 WAS DISPATCHED TO A 1 CAR CRASH INTO A GUARDRAIL ON ROUTE 2 EB IN WESTMINSTER. UPON ARRIVAL, THE OPERATOR STATED SHE WAS TRAVELING ON ROUTE 2 EB WHEN SHE LOST CONTROL OF HER VEHICLE AND ENTERED THE MEDIAN HITTING A GUARDRAIL END CAP HEAD ON. THE VEHICLE WAS STILL WEDGED INTO THE GUARDRAIL HEAD ON WHEN I ARRIVED. THE OPERATOR WAS ISSUED A MASSACHUSETTS UNIFORM CITATION [REDACTED] FOR DRIVING AT A SPEED GREATER THAN REASONABLE FOR ROAD CONDITIONS. WESTMINSTER GARAGE WAS CONTACTED AND TOWED THE VEHICLE, WITH THE OPERATOR, BACK TO THEIR GARAGE. 2. I RESPECTFULLY REQUEST THIS CASE BE CLOSED. RESPECTFULLY SUBMITTED, ROBERT A. JOHNSON #2872 TROOPER, MASS. STATE POLICE, SP ATHOL. VEHICLE: [REDACTED] 1999 TOYOTA OPERATOR: [REDACTED]

Witnesses

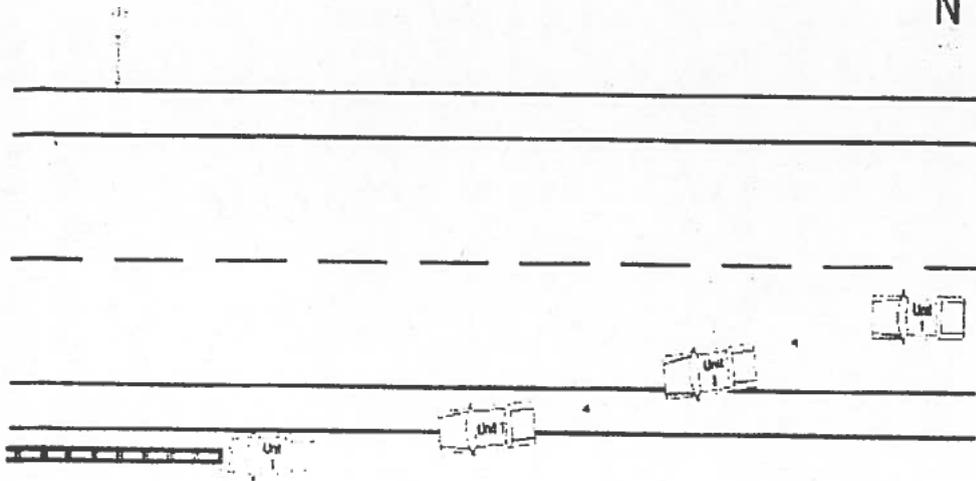
Name (Last, First, Middle)	Address	Phone #	Statement

Property Damage:

Owner (Last, First, Middle)	Address	Phone #	Type	Description of Damaged Property
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION	10 PARK PLAZA, SUITE 4160 BOSTON, MA 02116		1	GUARDRAIL

JOHNSON ROBERT A	2872	STATE POLICE
Police Officer Name	Id/Badge #	Police Agency Name

N



15000000
File



SCOPE OF WORK TO BE PERFORMED TO REPAIR INSURED DAMAGE TO HIGHWAY APPURTENANCES

PART ONE:

Install: XX

Deliver: _____

Accident Location: Westminster

Route/Mile Marker: Rte 2 E @ mm 90.7

Town/District: Sterling D-3

Describe in detail all work to be performed:

1 ET 2000 Extruded Head

1 Anchor Panel

1 HBA Post

1 Cable Assembly

1 Hardware Parts Kit

1 P-9 Post and 4" x 8" Red Reflector

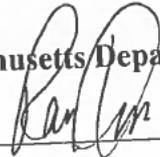
Name of Insured: _____

Insurance Co.: Safety

Type of Appurtenance: Guardrail

Date of Accident: 3-7-2013

Massachusetts Department of Transportation:


(Signature)

Ray Tannar
(Name)

CE-III
(Title)

978-422-6786
(Phone)

4/22/2013
(Date of Inspection & Preparation of Scope of Work)

All work shall be performed to the satisfaction of the Chief Engineer of the Department and shall otherwise conform to applicable provisions of the current official edition of the Standard Specifications for Highways and Bridges and supplemental specifications.



ent of Transportation.

_____ (Insurance Co.)

_____ (Phone)

_____ (Date)

Commonwealth of Massachusetts

PW201311200116

Date of Crash 04/05/2013	Time of Crash 05:14 PM	City/Town WESTFORD	Motor Vehicle Crash Police Report Total Highway Services, I	Number Vehicles 1	Number Injured 0	Speed Limit 65 Latitude 42.5662 Longitude -71.4295	Police Type 1
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AT INTERSECTION :	< LOCATION >	NOT AT INTERSECTION :
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Route # _____ Direction _____ Name of Roadway/Street _____	Route # 495 Direction N Address # _____ Name of Roadway/Street _____
Route # _____ Direction _____ Name of Roadway/Street _____	_____ Feet _____ of _____ Mile Marker _____ or _____ 32 Exit Number _____
Route # _____ Direction _____ Name of Roadway/Street _____	_____ Feet _____ of _____ Route # _____ UNKNOWN Intersecting Roadway/Street _____
Route # _____ Direction _____ Name of Roadway/Street _____	_____ Feet _____ of _____ Landmark _____

Please Select One of the	Vehicle 1 # Occupants _____	Non-Motorist _____ Type _____ Action _____ Location _____ Condition _____	Hit/Run _____	Moped _____
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License # _____ St MA DOB/Age _____	Reg # _____ Reg Type PAN Reg State MA
Sex M Lic. Class D Lic. Restrictions _____ CDL _____ Endorsement _____	Veh Year 2001 Veh Make TOYOTA Veh Config. 1
Operator _____	Owner _____ (Last / First / Middle)
Address _____	Address _____
City N CHELMSFORD State MA Zip 01863	City N CHELMSFORD State MA Zip 01863
Insurance Company CITIZENS INSURANCE	Vehicle Action Prior to Crash 2 Damaged Area Code: 2
Vehicle Travel Direction: N Responding to Emergency? 2	Event Sequence 24 Test Status: _____
Citation # (if Issued) _____	Most Harmful Event 24 Type of Test: _____
Viol. 1: 720CMR906-B Viol. 2: 89-4A	Driver Contributing Code 5 BAC Test Result: _____
Viol. 3: _____ Viol. 4: _____	Susp. Alcohol: _____ Susp. Drug: _____
	Driver Distracted by: _____ Towed from scene? _____

Please fill out for operator and all occupants involved		DOB/Age	Sex	Seat Pos.	Safety System	Airbag Status	Eject Code	Trap Code	Inquiry Status	Transp. Code	Medical Facility
Name (Last First Middle)	Address										
Operator	See Above										
			M	1	1	4	0	0	5	1	

Crash Information :

Light Conditions :	1	Trafficway Description :	3
Weather Conditions :	1	School Bus Related :	2
Traffic Control Device Type :	1	Work Zone Related :	2
Traffic Device Functioning Code :		Manner of Collision :	1
Road Surface :	1	First Harmful Event Location :	1
Roadway Intersection Type :	1	First Harmful Event :	24
Road Contributing Circumstances:			

Crash Diagram :

See Attached

Crash Narrative :

ON FRIDAY, APRIL 5, 2013, I, TROOPER KATHRYN TIEZZI #3725, WAS OPERATING FULLY MARKED CRUISER #1475 OUT OF THE CONCORD STATE POLICE BARRACKS, A-3. AT APPROXIMATELY 1714 HOURS I WAS DISPATCHED TO A ONE VEHICLE CRASH THAT OCCURRED IN THE LEFT LANE OF ROUTE 495 NORTH, SOUTH OF EXIT 32 WITHIN THE TOWN OF WESTFORD. ROUTE 495 IS A PUBLIC WAY, OWNED AND MAINTAINED BY THE COMMONWEALTH. ON THIS DATE THE WEATHER WAS CLEAR AND THE ROADWAYS WERE DRY. VEHICLE 1 WAS TRAVELING IN THE LEFT TRAVEL LANE WHEN HE HAD TO FIRMLY APPLY HIS BRAKES DUE TO TRAFFIC. THE VEHICLE THEN SWERVED TO THE LEFT AND STRUCK THE END OF THE GUARDRAIL. NO PARTIES WERE INJURED IN THE CRASH. THE OWNER/OPERATOR OF VEHICLE 1 WAS ISSUED THE FOLLOWING CIVIL CITATION: [REDACTED] - FOLLOWING TOO CLOSE -C89 S4A - MARKED LANES VIOLATION THE VEHICLE WAS TOWED BY STUART&APOS;S TOWING. AN INVENTORY WAS CONDUCTED. NO WITNESSES TO THE CRASH CAME FORWARD. THIS REPORT IS A SUMMARY OF THE EVENTS. END OF REPORT. VEHICLE: MA [REDACTED] TOYOTA OPERATOR: [REDACTED] VIOLATION CODE 1: 720CMR906-B CITATION NUMBER: [REDACTED] VIOLATION CODE 2: 89-4A

Witnesses:

Name (Last, First, Middle)	Address	Phone #	Statement

Property Damage :

Owner (Last, First, Middle)	Address	Phone #	Type	Description of Damaged Property
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION	10 PARK PLAZA, SUITE 4160 BOSTON, MA 02116		1	END OF GUARDRAIL, LEFT SIDE OF 495N, S OF EXIT 32

MARCOTTE KATHRYN A

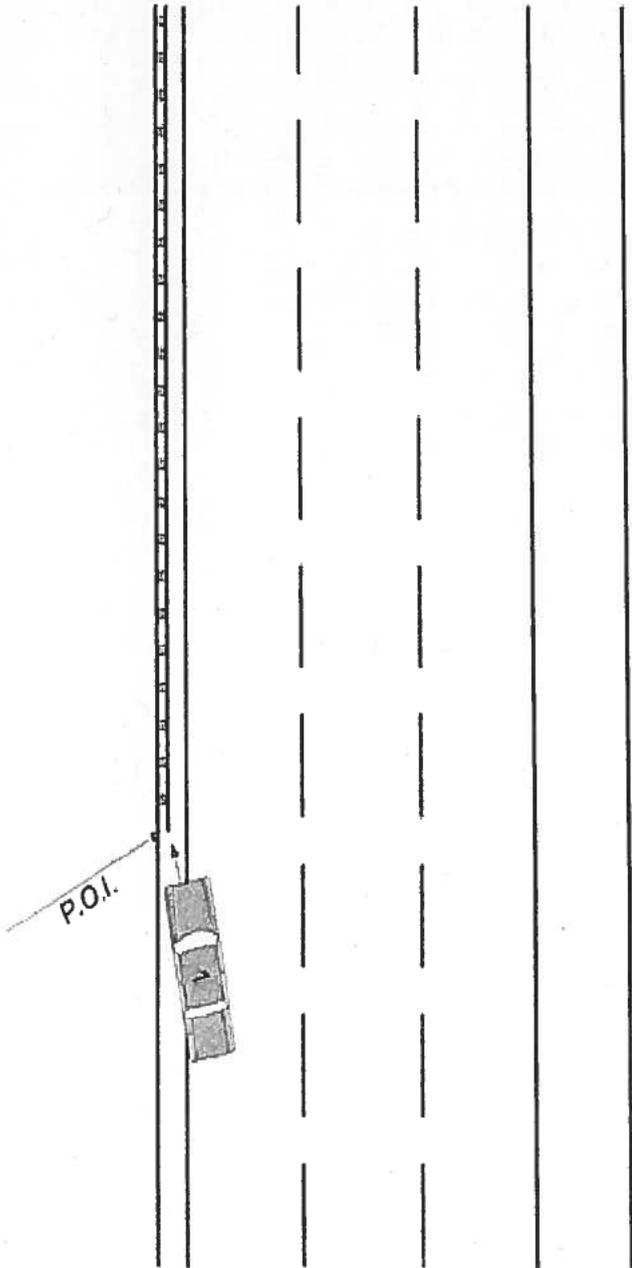
Police Officer Name

3725

Id/Badge #

STATE POLICE

Police Agency Name



NOT TO SCALE

Route 495 North
South of Exit 32
Westford, Massachusetts



Commonwealth of Massachusetts

PW201326300209

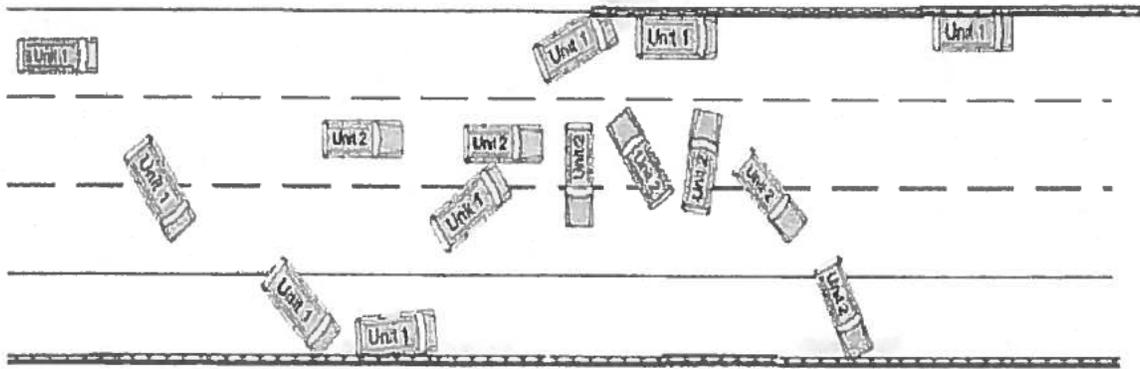
Date of Crash 09/02/2013	Time of Crash 10:15 PM	City/Town HAVERHILL	Motor Vehicle Crash Police Report Total Highway Services, I	Number Vehicles 2	Number Injured 1	Speed Limit 65	Latitude 42.77611	Longitude -71.0769	Police Type 1
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AT INTERSECTION :			< LOCATION >	NOT AT INTERSECTION :		
Route #	Direction	Name of Roadway/Street	Route #	Direction	Address #	Name of Roadway/Street
			495	S		
Route #	Direction	Name of Roadway/Street	0.00	Feet	of	112
						Mile Marker
Route #	Direction	Name of Roadway/Street				or
						Exit Number
Route #	Direction	Name of Roadway/Street				UNKNOWN
						Intersecting Roadway/Street
Route #	Direction	Name of Roadway/Street				Landmark

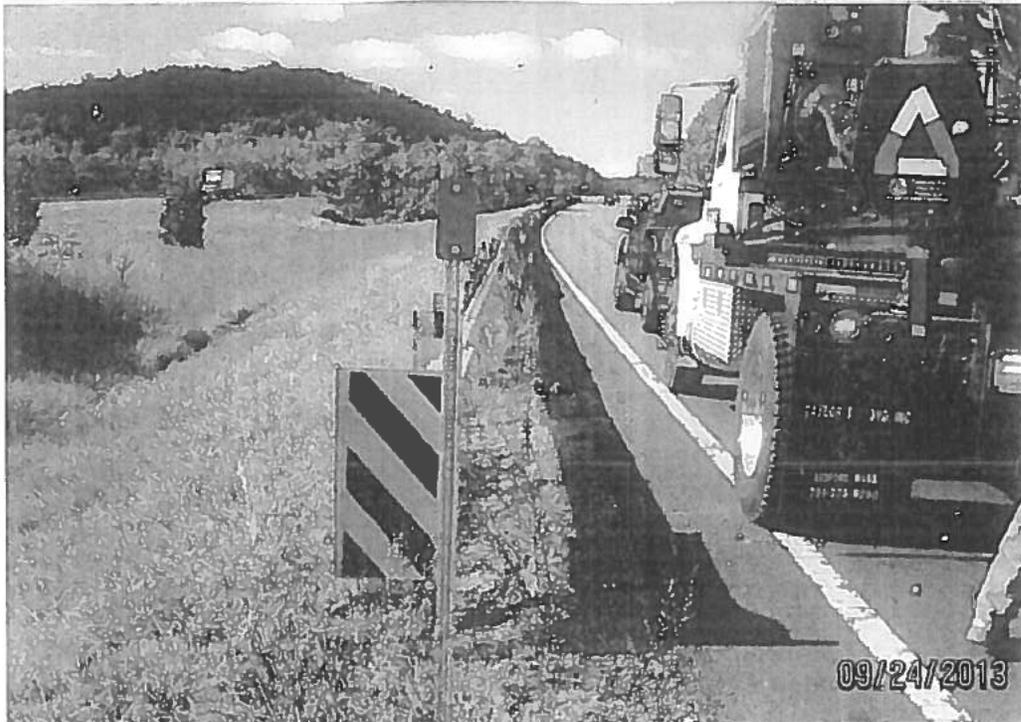
Please Select One of the		Vehicle 1	# Occupants	Non-Motorist	Type	Action	Location	Condition	Hit/Run	Moped
License #	St	MA	DOB/Age	1988	Reg #	Reg Type	PAN	Reg State	MA	
Sex	Lic. Class	Lic. Restrictions	CDL	Endorsement	Veh Year	Veh Make	CHEVROLET	Veh Config.	2	
Operator	[Redacted]			Owner	[Redacted]			LUIS		
Address	[Redacted]			Address	[Redacted]					
City	HAVERHILL	State	MA	Zip	01830	City	FEEDING HILLS	State	MA	Zip
										01030
Insurance Company	ARBELLA MUTUAL INS			Vehicle Action Prior to Crash	1	Damaged Area Code:	1 3 7			
Vehicle Travel Direction:	S	Responding to Emergency ?	2	Event Sequence	24 1 24	Test Status:				
Citation # (If Issued)	[Redacted]			Most Harmful Event	24	Type of Test:				
Viol. 1:	89-4A	Viol. 2:		Driver Contributing Code	9	BAC Test Result:				
Viol. 3:		Viol. 4:		Driver Distracted by:		Towed from scene ?				

Please fill out for operator and all occupants involved												
Name (Last First Middle)	Address	DOB/Age	Sex	Seat Pos.	Safety System	Airbag Status	Eject Code	Trap Code	Inquiry Status	Transp. Code	Medical Facility	
Operator	See Above	1988		1	1	4	0	0	3	2	MERRIMACK VALLEY HOSP	

Please Select One of the		Vehicle 1	# Occupants	Non-Motorist	Type	Action	Location	Condition	Hit/Run	Moped
License #	St	MA	DOB/Age	1960	Reg #	Reg Type	PAN	Reg State	MA	
Sex	Lic. Class	Lic. Restrictions	CDL	Endorsement	Veh Year	Veh Make	TOYOTA	Veh Config.	2	
Operator	[Redacted]			Owner	[Redacted]					
Address	[Redacted]			Address	[Redacted]					
City	HAVERHILL	State	MA	Zip	01830	City	HAVERHILL	State	MA	Zip
										01830
Insurance Company	METROPOLITAN PROP			Vehicle Action Prior to Crash	1	Damaged Area Code:	1 3			
Vehicle Travel Direction:	S	Responding to Emergency ?	2	Event Sequence	1 24	Test Status:				
Citation # (If Issued)	[Redacted]			Most Harmful Event	1	Type of Test:				
Viol. 1:		Viol. 2:		Driver Contributing Code	1	BAC Test Result:				
Viol. 3:		Viol. 4:		Driver Distracted by:		Towed from scene ?				



Haverhill
2202





Commonwealth of Massachusetts

Massachusetts State Police
Motor Vehicle CRASH Report

2013-0C4-002956

State Police Leominster
Trooper McLaine, Phillip

9/20/13 12:10 PM

Vehicles: 1
Injured: 0
Speed Limit: 25

RT 110 & CONCORD TURNPIKE, Ramp to 2E, HARVARD, MA

Light: 1 - Daylight
Weather: 1 - Clear
Traffic Ctrl: 1 - No controls
Ctrl Function: Yes
Road Surface: 1 - Dry
InterSection: 5 - On Ramp
Trafficway:
School Bus: No
Work Zone: No
Collision: 1 - Single Vehicle Crash
1st Harmful: Guardrail
1st Harmful Location: 3 - Roadside

Table with vehicle details: Vehicle# 1, Reg# 2WAV60, MA PAN 2001, Hyundai SONATA. Includes insurance info, action prior, most harmful, event sequences, travel direction, driver contributing factors, and a diagram of a car with numbered points 1-8.

Owner: Veh # 1

RUENHECK, KEITH DAVID

DOB: [Redacted] MA
Sex: [Redacted]
Lic Num: [Redacted]
Lic State: [Redacted]
Restrictions:
CDL END:

Seat Position:
Safety System:
Airbag Status:
Airbag Switch:
Eject Code:
Trap Code:
Injury Status:
Transported:
MedicalFac.

Citation/Charge(s)

Driver: Veh # 1

[Redacted]
HARVARD MA 01451
DOB: [Redacted]
Sex: Male
Lic Num: [Redacted]
Lic State: MA
Restrictions:
CDL END:

Seat Position: 1 - Front seat - left seat (or
Safety System: 1 - Shoulder and lap belt
Airbag Status: 4 - Not Deployed
Airbag Switch: 99 - Unknown
Eject Code: 0 - Not ejected
Trap Code: 0 - Not trapped
Injury Status: 5 - No Injury
Transported: 1 - Not transported
MedicalFac.

Citation/Charge(s)

Citation: R3455179; 89-4A MARKED LANES VIOLATION

Property Damage

Guardrail crash attenuator, 1-2 panels
Massachusetts Department of Transportation 10 Park Plaza, Suite 4160 Boston, MA 02116

Officer Name: Trooper McLaine, Phillip
Signature:
ID#: 3152
Station: State Police
Date: 10/10/2013
CRA-65



Commonwealth of Massachusetts

Massachusetts State Police
Motor Vehicle CRASH Report

2013-0C4-002956

State Police Leominster
Trooper McLaine, Phillip

9/20/13 12:10 PM

Vehicles:
1

Injured: 0
Speed Limit: 25

RT 110 & CONCORD TURNPIKE, Ramp to 2E, HARVARD, MA

Not an Official Copy

Printed by :

2304

On 10/10/2013 @ 10:22 hrs

Officer Name

Signature

ID#

Station

Date

Trooper McLaine, Phillip

3152

State Police

10/10/2013

CRA-65



Commonwealth of Massachusetts

Massachusetts State Police
Motor Vehicle CRASH Report

2013-0C4-002956

State Police Leominster
Trooper McLaine, Phillip

9/20/13 12:10 PM

Vehicles: 1

Injured: 0
Speed Limit: 25

RT 110 & CONCORD TURNPIKE, Ramp to 2E, HARVARD, MA

Narrative

By Trooper Phillip L McLaine 3152

On 20 September 2013 at approximately 1210 hours I, Trooper Phillip L. McLaine ID #3152, was dispatched to a single vehicle crash on the ramp from Routes 110/111 to Route 2 east bound (a public way). Harvard Police had an officer on scene. There was no personal injury but EMS was being requested for precautionary evaluation of the driver. Harvard Police was directing traffic around the road hazard. The desk officer was advised by Harvard Police that a tow would be needed. Quality Towing was dispatched to provide the tow service.

I arrived on scene and parked my cruiser to alert traffic entering the ramp of the hazard on the roadway. I exited the cruiser and approached the operator of the motor vehicle. The party had a family member on scene assisting him. I asked for a license and registration. I asked the operator what happened. He told me that he had looked down to adjust his radio and crashed into the guardrail. I provided the operator with a crash data statement form and requested that he provide me with a written record of the crash event.

Vehicle 1 was a Hyundai Sonata issued Massachusetts passenger registration [redacted]. The operator was identified as [redacted] DOB [redacted] 1994. A registry query indicated that the vehicle was registered and insured and Mr. [redacted] held a valid license.

Mr. [redacted] was issued Massachusetts Uniform Citation [redacted] for violation of Chapter 89 Section 4 - Failure to stay in Marked Lanes.

EMS evaluated Mr. [redacted] and he signed a refusal for treatment. The desk officer at Leominster State Police Barracks was asked to notify Mass Highway of the damaged guardrail end and evaluate if immediate repairs were required. Mr. [redacted] was issued his citation in hand. The vehicle was removed from the public way. The scene was cleared without further incident.

End of report.

Trooper Phillip L McLaine #3152

Trooper Phillip L McLaine #3152

Officer Name Signature ID# Station Date
Trooper McLaine, Phillip 3152 State Police 10/10/2013 CRA-65



Commonwealth of Massachusetts

Massachusetts State Police Motor Vehicle CRASH Report

2013-0C4-002956

State Police Leominster
Trooper McLaine, Phillip

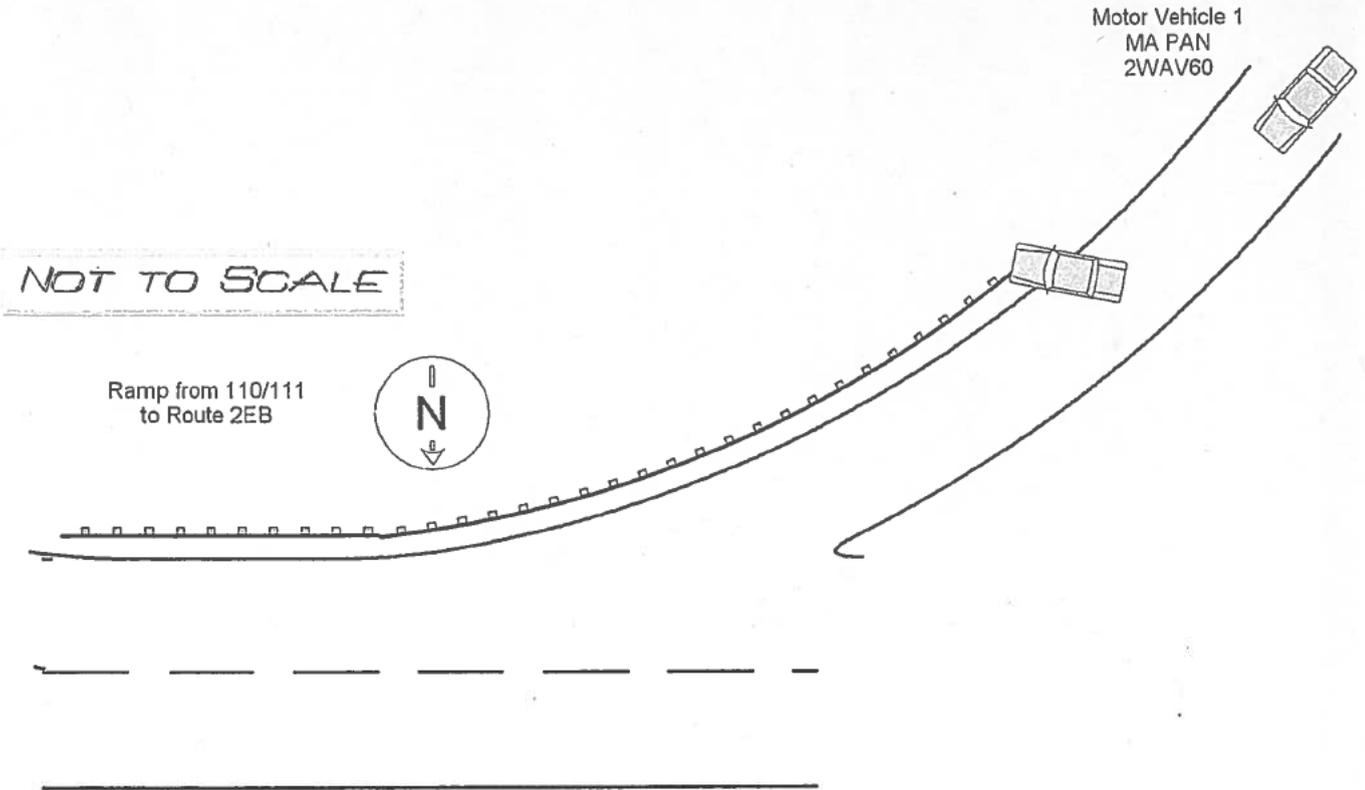
9/20/13 12:10 PM

Vehicles:
1

Injured: 0
Speed Limit: 25

RT 110 & CONCORD TURNPIKE, Ramp to 2E, HARVARD, MA

Crash Diagram



Officer Name
Trooper McLaine, Phillip

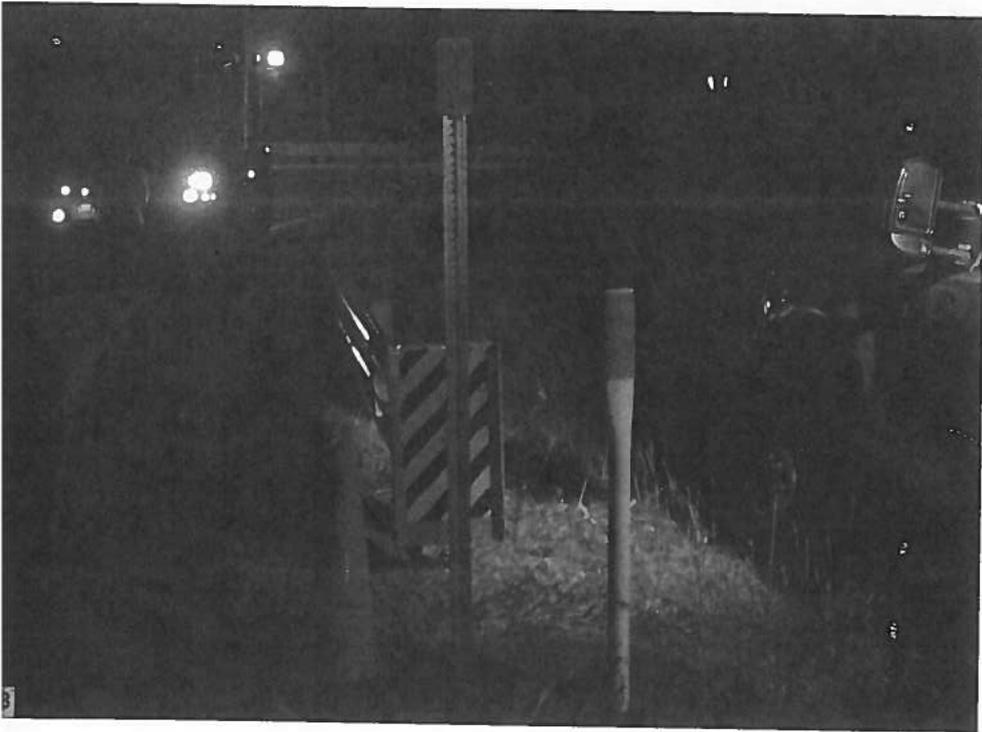
Signature

ID#
3152

Station
State Police

Date
10/10/2013

CRA-65





Commonwealth of Massachusetts

Massachusetts State Police
Motor Vehicle CRASH Report

2013-0A6-007217

State Police Danvers
Trooper Vorias, Anthony

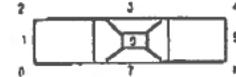
10/30/13 12:36 PM

Vehicles: 1 # Injured: 0
Speed Limit: 25

RT 1 '8 North, North of Grant Circle, GLOUCESTER, MA

Light:	1 - Daylight	Trafficway:	3 - Two-way, divided, positive
Weather:	3 - Rain	School Bus:	No
Traffic Ctrl:	1 - No controls	Work Zone:	No
Ctrl Function:		Collision:	1 - Single Vehicle Crash
Road Surface:	2 - Wet	1st Harmful:	Guardrail
InterSection:	7 - Traffic circle	1st Harmful Location:	4 - Shoulder - Paved

Vehicle#	1	Reg#	543VJ5	MA	PAN	1999	Ford	LGTCON	Towed
Insurance Co:	COMMERCE INSURANCE			Action Prior:	1 - Travelling Straight ahead				
Veh Config:	2 - Light truck (Van, mini-van, pick-up, SUV)			Most Harmful:	Guardrail				
Hi/Run:	No			Event Seq. 1:	24 - Guardrail				
Moped:	No			Event Seq. 2:					
Travel Direction:	N			Event Seq. 3:					
Respond Emerg:	No			Event Seq. 4:					
Driver Contributing:	1 - No Improper Driving			Under/Override:	99 - Unknown			Damaged Area(s)	8
Tow Company:	Tally's Auto			Tow Reason:	Crash			Damage > \$1000	Yes



Owner: Veh # 1

DOB: [Redacted]
 Sex: [Redacted]
 Lic Num: [Redacted]
 Lic State: MA
 Restrictions:
 CDL END:

Seat Position:
 Safety System:
 Airbag Status:
 Airbag Switch:
 Eject Code:
 Trap Code:
 Injury Status:
 Transported:
 MedicalFac:

Citation/Charge(s)

Driver: Veh # 1

GLOUCESTER MA 01930
 DOB: [Redacted]
 Sex: [Redacted]
 Lic Num: [Redacted]
 Lic State: MA
 Restrictions:
 CDL END:

Seat Position: 1 - Front seat left seat (or
 Safety System: 1 - Shoulder and lap belt
 Airbag Status: 4 - Not Deployed
 Airbag Switch: 99 - Unknown
 Eject Code: 0 - Not ejected
 Trap Code: 0 - Not trapped
 Injury Status: 5 - No Injury
 Transported: 1 - Not transported
 MedicalFac:

Citation/Charge(s)

Property Damage

guardrail end treatment
 Massachusetts Department of Transportation 10 Park Plaza, Suite 4160 Boston, MA 02118

Officer Name
 Trooper Vorias, Anthony

Signature

ID# Station
 2798 State Police Danvers

Date
 11/06/2013

CRA-66



Commonwealth of Massachusetts

Massachusetts State Police
Motor Vehicle CRASH Report

2013-0A6-007217

State Police Danvers	10/30/13 12:36 PM	# Vehicles:	# Injured: 0
Trooper Vorias, Anthony		1	Speed Limit: 25
RT 1: 8 North, North of Grant Circle, GLOUCESTER, MA			

Narrative
By Trooper Anthony D Vorias 2796

Opr veh spun out on wet roadway and struck guardrail. No injuries. Mass Hwy does emergency repair on end treatment of damaged guardrail.

Trooper Anthony D Vorias #2796

Trooper Anthony D Vorias #2796

Officer Name
Trooper Vorias, Anthony

Signature

ID# Station
2796 State Police Danvers

Date
11/05/2013

CRA-55



Commonwealth of Massachusetts
Massachusetts State Police
Motor Vehicle CRASH Report

2013-0A6-007217

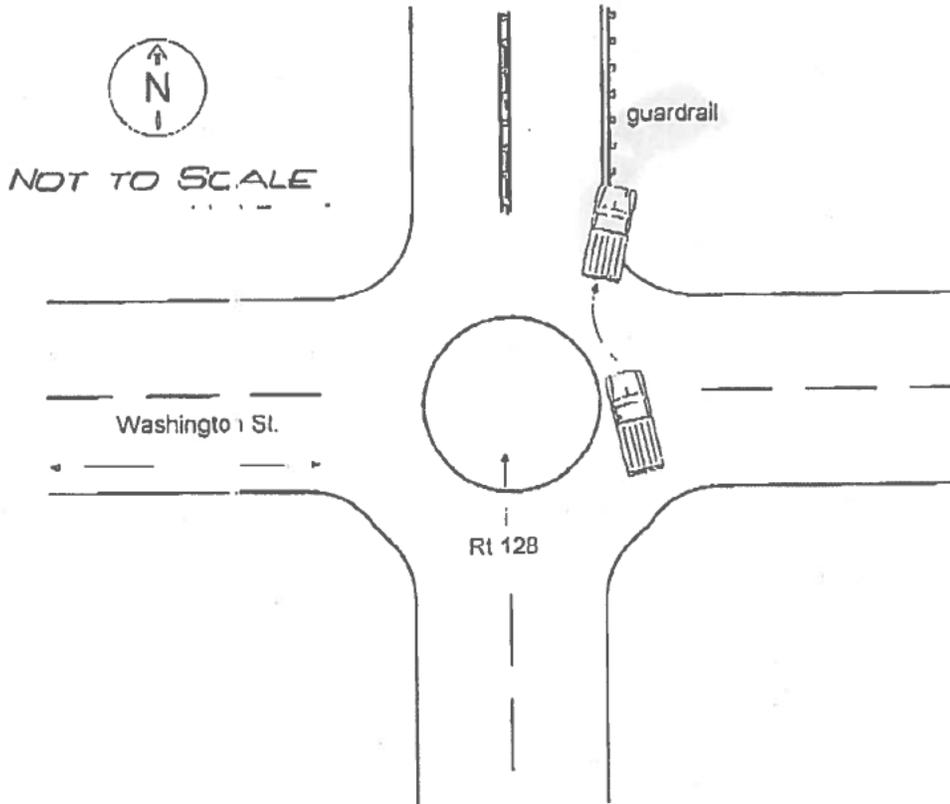
State Police Danvers
Trooper Vorlas, Anthony

10/30/13 12:36 PM

Vehicles: 1
Injured: 0
Speed Limit: 25

RT 128 North, North of Grant Circle, GLOUCESTER, MA

Crash Diagram



Officer Name
Trooper Vorlas, Anthony

Signature

IP# Station Date
2706 State Police Danvers 11/05/2013

CRA-66

Gloucester
2248

