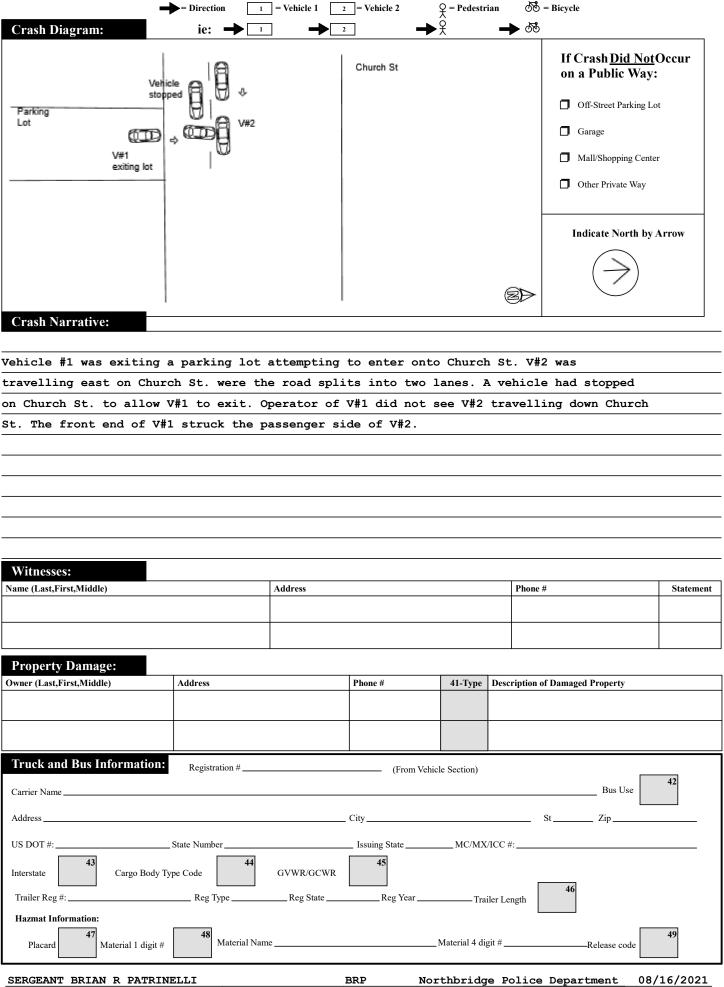
08/16/2021 1424 NORTE AT INTERSECTIO	IBRIDGE	Iotor Vehi Police F LOCAL	Report			mber hicles	Nun Inju	ired 1	Speed Latitud Longitu	le ude	25	MBTA Police Campus Pol Other:			
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Please Select One Value 11 #	Occupants Hit/Run	Moped	Crash R	on out T	D# (	21	_ 1	2 [	<u> </u>			`		1	
of the Following:	HII/Kuli													_	
	_ DOB/Age	Reg #_	2ZA964				Reg	g Type	PAI	<u></u>	R	eg State MA	21	_	12
Sex <b>F</b> Lic. Class D Lic. Rest	rictions CDL_ Endors	Veh Ye	ar <b>2014</b>	V	eh Ma	ke <u>J</u>	EEP	/CH	RYS	LEF	<b>R</b> Veh	Config. 1	21	_	
Operator MARCHANT, COURT			MARCHA	NT,	DO	ORE	EN	<b>A</b>			Mi	ddle			
Address 14 E HARTFORD A	VE														
City <b>UXBRIDGE</b> State <b>M</b>	<b>IA</b> Zip 01569	City <b>_X</b>	ORTHBR	[DG	E			_ Stat	e <b>MA</b>	z	ip <b>01</b>	L534-1	025		
Insurance Company MAIN STREET	AMERICA PR	ROTE Vehicle	Action Prior to O	Crash		4	22	Da	maged	Area	Code:		27		
Vehicle Travel Direction: S E W	Responding to Emergency	? <b>2</b> Event 5	Sequence 1	23 2	23	23	23								
Citation # (If Issued)		Most H	Harmful Event	1	24						lt-	30			
Viol. 1: Ch/Sec/Sub Vio	1. 2: Ch/Sec/Sub	Driver	Contributing Cod	le	4	25	25			Г			32	1	13
Viol. 3: Ch/Sec/Sub Vio	l. 4: Ch/Sec/Sub	Driver	Distracted by	0	26				•	ı	ene?	22			
					34 Seat	35 Safety	36 Airbag	37 Eiect	38 Tran	39 Injury	40 Transp.			1	
Name (Last First Middle)			DOB/Age	Sex	Pos.	System	Status	Code	Code	Status	Code	Medical Fa	cility	1	
Operator	See At	bove		$\triangle$	1	1	4	U	-	10	1			-	
Please Select One Volicle 22 #	Occupants Non Mot	pariet A. Type	15 Action	16	ocatio	,	17	Conditi	on	18	Ь,	Hit/Pun	Monad	1	
of the Following:	1 11011-11101	J1											Морси	-	
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City <b>PLAINVILLE</b> State M	<b>IA</b> Zip <u>02762</u>	City <b>_E</b>	PLAINVII	LLE	Г		22							1	
Insurance Company METROPOLITA	N PROPERTY	<b>AND</b> Vehicle		_							Code:		27		
Vehicle Travel Direction: N S W	Responding to Emergency	? <b>2</b> Event S	Sequence 1	23 7	4	23	23					29			
Citation # (If Issued)		Most F	Iarmful Event	1				BA			lt:	30			
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Viol. 3: Ch/Sec/Sub Vio	l. 4: Ch/Sec/Sub	Driver	Distracted by	0	26			To	wed fro	om sce		2 33			
•	•		DOB/Age	Sex	34 Seat Pos.	35 Safety System	36 Airbag Status	37 Eject Code	38 Trap Code	39 Injury Status	40 Transp. Code	Medical Fac	cility		
Operator/Non-Motorist	See Ab			X	_	1	4		0	10	1		-	1	
ROBERT MCAVOY	31 FOREST ST WHITINSVILLE, MA 0158	88-2203			3	1	4	0	0	8	2	MILFORD HOS	PITAL		
1			1											1	
	Operator MARCHANT , COURT Last  Address 14 E HARTFORD A  City UXBRIDGE State M  Insurance Company MAIN STREET  Vehicle Travel Direction: S E W  Citation # (If Issued) Viol. 1: Ch/Sec/Sub Vio  Please fill out for operator  Name (Last First Middle)  Operator  Please Select One of the Following: Vehicle 22 #  License # St State M  Lic. Class D 19 19 Lic. Rest  Operator HEBERT , JOSHUA  Last Find Address 8 VALERIE DR  City PLAINVILLE State M  Insurance Company METROPOLITA  Vehicle Travel Direction: N S W  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub Vio  Viol. 3: Ch/Sec/Sub Vio	Operator MARCHANT , COURTNEY L  Last	Operator MARCHANT , COURTNEY L  Last MA Zip 01569 City Middle  Address 14 E HARTFORD AVE  State MA Zip 01569 City Non-Motorist A  Vehicle Travel Direction: SEW Responding to Emergency? Event SC Citation # (If Issued)  Viol. 1: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub Driver  Please Select One of the Following:  Vehicle 22 #Occupants Non-Motorist A  Operator See Above  Please Fill out for operator and all occupants involved  License # St DOB/Age Reg#  Sex M Lie. Class 19 19 19 Lie. Restrictions 20 CDL Endorsement  Operator HEBERT , JOSHUA D Middle  Address 8 VALERIE DR  City PLAINVILLE State MA Zip 02762 City Insurance Company METROPOLITAN PROPERTY AND Vehicle Travel Direction: N S W Responding to Emergency? Event Science # State MA Zip 02762 Event Science # State MA Zip 02762 City Insurance Company METROPOLITAN PROPERTY AND Vehicle Travel Direction: N S W Responding to Emergency? Event Science # State MA Zip 02762 Event Science # State MA Zip 02762 City Endorsement Oventice Travel Direction: N S W Responding to Emergency? Event Science # State MA Zip 02762 Eve	Operator MARCHANT , COURTNEY L  Address 14 E HARTFORD AVE  City UXBRIDGE State MA Zip 01569  Insurance Company MAIN STREET AMERICA PROTE  Vehicle Travel Direction: SEW Responding to Emergency? 2  Citation # (If Issued) Viol. 2: Ch/Sec/Sub  Please fill out for operator and all occupants involved  Name (Last First Middle)  Please fill out for operator and all occupants involved  Non-Motorist A Type 15  Action DOB/Age  Operator  Please Select One of the Following: See Above  Please fill out for operator and all occupants involved  Name (Last First Middle)  Operator  Please Select One of the Following: See Above  Please Select One o	Operator MARCHANT, COURTNEY L  Middle Address 14 E HARTFORD AVE  City UXBRIDGE  State MA Zip 01569  Insurance Company MAIN STREET AMERICA PROTE  Vehicle Travel Direction: SEW Responding to Emergency? 2  Citation # (If Issued)  Please Fill out for operator and all occupants involved  Name (Last First Middle)  Please # St DOB/Age  See Above  Please fill out for operator and all occupants involved  Non-Motorist A  Owner HEBERT, JOSHUA  Address 8 VALERIE DR  City PLAINVILLE  State MA Zip 01569  City NORTHBRIDG  Vehicle Action Prior to Crash  Vehicle Action Prior to Crash  Driver Contributing Code  Driver Distracted by 0  Please # St DOB/Age  See Above  Please # St DOB/Age  See Above  Reg # 38B457  Veh Year 2001  Vehicle Action Prior to Crash  Address 8 VALERIE DR  City PLAINVILLE  State MA Zip 02762  Insurance Company METROPOLITAN PROPERTY AND  Vehicle Action Prior to Crash  Vehicle Action Prior to Crash  Vehicle Action Prior to Crash  Address 8 VALERIE DR  City PLAINVILLE  State MA Zip 02762  Citation # (If Issued)  Vehicle Action Prior to Crash  Vehicle Travel Direction: N S W Responding to Emergency? 2  Event Sequence  1 23  Most Harmful Event  1 Driver Contributing Code  Driver Distracted by 0  Please fill out for operator/non-motorist and all occupants involved  Please fill out for operator/non-motorist and all occupants involved  Driver Distracted by 0  Please fill out for operator/non-motorist and all occupants involved	Operator MARCHANT , COURTNEY L  Item  Address 14 E HARTFORD AVE  City UXBRIDGE State MA Zip 01569  Insurance Company MAIN STREET AMERICA PROTE  Vehicle Travel Direction: SEW Responding to Emergency? 2  Citation # (If Issued)  Please fill out for operator and all occupants involved  Name (Last First Middle)  Address 8 VALERIE DR  City PLAINVILLE State MA Zip 02762  Insurance Company METROPOLITAN PROPERTY AND  Vehicle Travel Direction: NEW Responding to Emergency? 2  Citation # (If Issued)  Owner MARCHANT , Do Address 1983 HILL S  City NORTHBRIDGE  Vehicle Action Prior to Crash  Vehicle Action Prior to Crash  Vehicle Action Prior to Crash  Address DoB/Age  Reg # 8AB457  Veh Year 2001 Veh Ma  Owner HEBERT , TARI  Address B VALERIE DR  City PLAINVILLE State MA Zip 02762  Insurance Company METROPOLITAN PROPERTY AND  Vehicle Travel Direction: NEW Responding to Emergency? 2  Citation # (If Issued)  Viol. 2: Ch/Sec/Sub  Viol. 2: Ch/Sec/Sub  Driver Contributing Code  1 23 23  Most Harmful Event  1 24  Owner HEBERT , TARI  Address B VALERIE DR  City PLAINVILLE  State MA Zip 02762  Driver Contributing Code  1 24  Driver Contributing Code  2 26  Driver Distracted by 0 26	Operator MARCHANT , COURTNEY L  Middle  Address 14 E HARTFORD AVE  City UXBRIDGE State MA Zip 01569  Insurance Company MAIN STREET AMERICA PROTE  Vehicle Travel Direction: SEW Responding to Emergency? 2  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub Driver Distracted by O  Please fill out for operator and all occupants involved  Address DOB/Age Sex No. System  Operator  Please Select One of the Following:  St. DOB/Age Sex No. System  Operator HEBERT , JOSHUA D  Operator HEBERT , JOSHUA D  Operator HEBERT , JOSHUA D  City PLAINVILLE State MA Zip 02762  Insurance Company METROPOLITAN PROPERTY AND  Vehicle Travel Direction: N S W Responding to Emergency? 2  Endorsement  Owner HEBERT , TARA J  Address 8 VALERIE DR  City PLAINVILLE State MA Zip 02762  Insurance Company METROPOLITAN PROPERTY AND  Vehicle Travel Direction: N S W Responding to Emergency? 2  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub Driver Distracted by Operator Involved Address S VALERIE DR  City PLAINVILLE State MA Zip 02762  Insurance Company METROPOLITAN PROPERTY AND  Vehicle Travel Direction: N S W Responding to Emergency? 2  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub Driver Distracted by Operator Involved Invol	Operator MARCHANT , COURTNEY L  Institute of the Followings  Please elect One of the Followings  Operator  Please Selvet One of the Followings  Operator  Operator  Owner MARCHANT , DOREEN  Address 14 E HARTFORD AVE  City UXBRIDGE	Operator MARCHANT , COURTNEY I Modele Address 14 E HARTFORD AVE City UXBRIDGE State MA Zip 01569 Insurance Company MAIN STREET AMERICA PROTE Vehicle Travel Direction: SEW Responding to Emergency? 2 Event Sequence 1 23 23 23 23 23 25 Viol. 1: CluSee/Sub Viol. 2: Ch/See/Sub Driver Contributing Code Driver Contributing Code Driver Distracted by D	Operator MARCHANT , COURTNEY I Address 14 E HARTFORD AVE  City UXBRIDGE  State MA Zip 01569  Insurance Company MAIN STREET AMERICA PROTE  Vehicle Travel Direction: S E W Responding to Emergency? 2  Citation # (If Issued)  Please fill out for operator and all occupants involved Name (Lae First Middle)  Please fill out for operator and all occupants involved Address 8 VALERIE DR  City PLAINVILLE  State MA Zip 02762  Insurance Company METROPOLITAN PROPERTY AND  Vehicle Travel Direction: S E W Responding to Emergency? 2  Citation # (If Issued)  Please fill out for operator and all occupants involved Address 8 VALERIE DR  City PLAINVILLE  State MA Zip 02762  Citation # (If Issued)  Please fill out for operator and soccupants involved Address 8 VALERIE DR  City PLAINVILLE  State MA Zip 02762  Citation # (If Issued)  Please fill out for operator in a state of the feedback in the feedback	Operator MARCHANT COURTNEY L  Last MACHANT COURTNEY L  Last Last Last Last Prival  Address 1983 HILL ST  City NORTHRIDGE  State MA Zip O1569  License M County MAIN STREET AMERICA PROTE  Vehicle Travel Direction: S E W  Responding to Emergency? 2  License M County MAIN STREET AMERICA PROTE  Please fill out for operator and all occupants involved  Address 1983 HILL ST  License M County MAIN STREET AMERICA PROTE  Please fill out for operator and all occupants involved  Address Driver Contributing Code 2 28 25  Driver Contributing Code 3 32 33 33  Driver Contributing Code 3 32 33 32  Driver Contributing Code 3 32 32 32  Driver Contributing Code 4 32 32 32  Driver Contributing Code 5	Operator MARCHANT , COURTNEY I.  Address 14 E HARTFORD AVE  City UXBRIDGE	Operator MARCHANT, COURTNEY I Address 14 E HARTFORD AVE  City UXBRIDGE  State MA Zip 01569 Insurance Company MAIN STREET AMERICA PROTE  Webside Travel Direction: SE W  Responding to Emergency? 2  Citation # (If Issued)  Viol. 1: Ch/Sec/Sub  Viol. 2: Ch/Sec/Sub  Driver Contributing Code  Please fill out for operator and all occupants involved  Address 8 VALERIE DR  Sex M Lic. Class B 99 Ib. is. Restrictions  City PLAINVILLE  State MA Zip 01534-1  Tost Status:  Tost Status:	Doperator MARCHANT	Operator MARCHANT , COURTNEY L  South MARCHANT , DOREEN A  Address 14 E HARTFORD AVE  City UXBRIDGE State MA Zip 01569 Insurance Company MAIN STREET AMERICA PROTE  Vehicle Action Prior to Crash  Viol. 1: Chi Secvisub Viol. 2: Chi Secvisub Driver Contributing Code 4 25 25 Susp. Alcohol: 33 Susp. Drug: 32 Tower from secure: 2 3 3 3 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3



Police Officer Name (Please Print)

Signature

ID/Badge #

Department Precinct/Barracks

Date