

05	1 Case Number 2017-12346	10 Crash Occurred On: EMMONS DRIVE	11 Speed Limit 25	118a
01	2 Police Dept of WEST WINDSOR POLICE	Code 01	12 Route No. 25	118b
01	3 Station/Precinct 2017-12346	14 <input checked="" type="checkbox"/> Feet	15 <input type="checkbox"/> Miles	04
07	4 Date of Crash 06/16/17	5 Day Of Week FRIDAY	6 Time (use 2400 hrs) 1701	119a
01	7 Municipality Code 1113	8 Total Killed --	9 Total Injured --	119b

100b	23 Veh # 1	24 Policy No. 02306 71 15R 7101 8	25 NJ Ins. Code *	53 Veh # 2	54 Policy No. WFCCA00567-00	55 NJ Ins. Code 053	01	
02	26 Driver's First Name Initial Last Name ALEXANDER A TALBOT			29 Sex M	56 Driver's First Name Initial Last Name DAVID P WEISE			59 Sex M
01	27 Number & Street 173 HAROLEANS ST			57 Number & Street 15 BENTLEY AVE				121a
01	28 City HARAHAN			State LA	Zip 70123	58 City MERCERVILLE		State NJ
2	30 Eyes 02			DL Class E	Restrictions 1	Endorsements -	31 State LA	60 Eyes 05
	32 Driver's License Number 010038755			33 DOB 12/18/1990	34 Expires 12	35	62 Driver's License Number W23021567703705	63 DOB 03/18/1970

106	35 Owner's First Name Initial Last Name <input checked="" type="checkbox"/> Same As Driver ALEXANDER A TALBOT			65 Owner's First Name Initial Last Name <input type="checkbox"/> Same As Driver A 1 LIMOUSINE - INC				124
07	36 Number & Street 173 HAROLEANS ST			66 Number & Street 2 EMMONS DRIVE				04
01	37 City HARAHAN			State LA	Zip 70123	67 City PRINCETON		State NJ
09	38 Make HONDA	39 Model CIVIC	40 Color RD	41 Year 2014	42 Plate No. XV089	43 State LA	68 Make CADILLAC	69 Model XTS
01	44 VIN 2HGFB2F5XEH503056			45 Expires 03	46	74 VIN 2G61U5S39G9116636	75 Expires 10	76

02	46 Vehicle Removed To GROVERS MILL TOWING			76 Vehicle Removed To -				122
06	47 Authority <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Driver <input type="checkbox"/> Police			77 Authority <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police				03
01	48 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine Results: 0. - % <input type="checkbox"/> Pending			49 Hazardous Material <input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine Results: 0. - % <input type="checkbox"/> Pending				123
04	50 Carrier No. <input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None <input type="checkbox"/> MC/MX			51 GVWR/GCWR <input type="checkbox"/> Weight <= 10,000 lbs <input type="checkbox"/> Weight 10,001-26,000 lbs <input type="checkbox"/> Weight >= 26,001 lbs				123

02	52 Motor Carrier or Government Entity -			82 Motor Carrier or Government Entity -				124
04	53 Number & Street -			83 Number & Street -				04
	54 City -			State -	Zip -	84 City -		State -
06	135 Damage To Other Property <input type="checkbox"/> Yes (If Yes, describe) <input checked="" type="checkbox"/> No							125
01	136 Charge 39:4-97	137 Summons. No. 026538	138 Charge 2	139 Summons. No. -	126			
04	140 Charge -	141 Summons. No. -	142 Charge -	143 Summons. No. -	126b			

83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death			
A	1	01	01	-	26	M	-	-	11	04	-	-	V1	-	-	-
B	2	01	01	-	47	M	-	-	11	04	-	-	V2	-	-	-
C																
D																

127	127d	127e	128	129	130	131	132	133	134
01	06	04	06	04	11	12	01	06	04

New Jersey Police
Crash Investigation Report

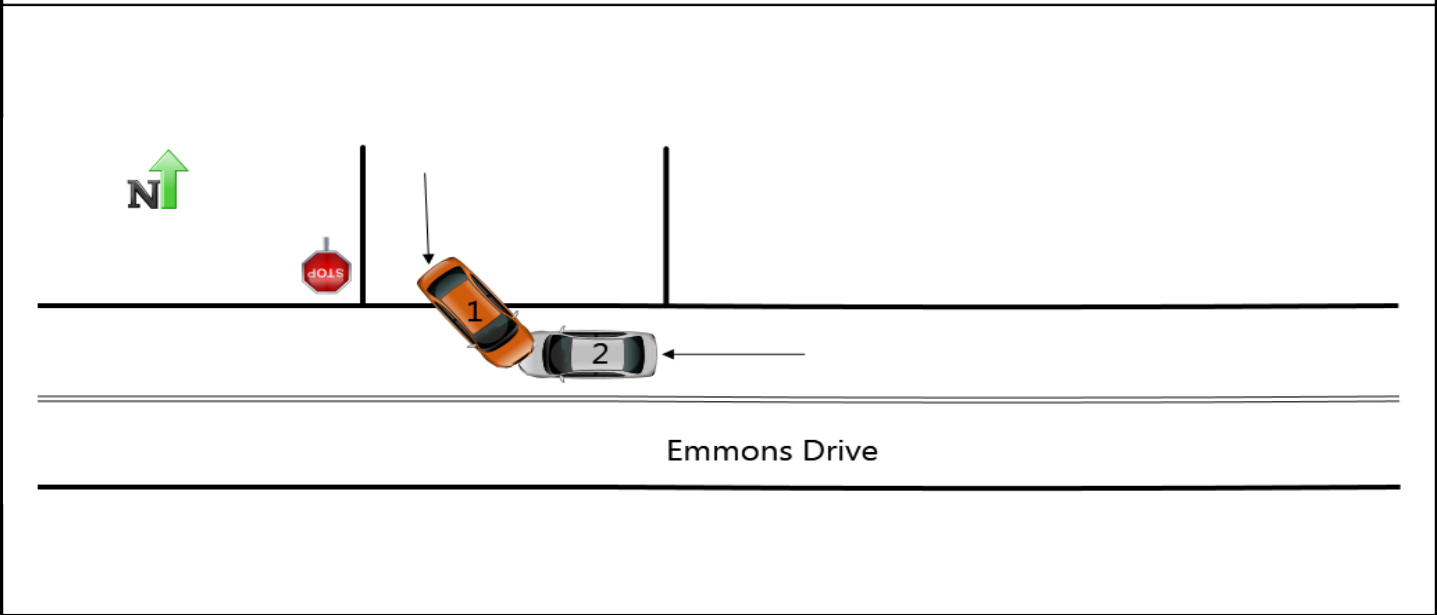
Police Dept: **WEST WINDSOR POLIC** Code: **01**

Station: **2017-12346** Case No: **2017-12346**

(Refer to vehicle by number)

	Veh	Pos	Eject	Phys	Age	Sex	Loc	Type	Ref	Equip	Equip	Bag	Hosp	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	Occ	In/On		Cond			Inj	Inj	Med	Avail	Used	Dept	Code	
A L L I F I N V O L U N T A R Y	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

#25 - USAA Insurance 1(800)531-USAA

**Witness: Steven Cohen 1(732)642-4550
15 A James Buchanan Dr. Monroe, NJ 08831**

Steven Cohen was walking east on the sidewalk across from the crash. He observed V1 not stop and enter into the roadway. V1 then crashed into V2.

**Damage V1 - Heavy - Front left corner and engine damage.
V2 - Heavy - Front right corner damage.**

D1 related that he stopped and looked both ways. He was looking right when he pulled out to turn left towards Rt 1. D2 had to be speeding. D1 related that D2 pushed the vehicle all the way around to the right into the curb. D2 related that he was heading to Wheeler Way when suddenly he was crashed into.

There were no complaints of pain or injury. Both vehicles were found in their final resting position. V1 was exiting from the Princeton Commerce Center south bound. V2 was traveling west on Emmons Drive. V1 pulled out in front of and into V2. V1 then spun clockwise and crashed into the right hand curb with the front right corner. D1 is at fault for the crash. Summon #026538 was issued to D1 for Careless Driving. D2 was given a Subpoena to Testify. V1 was towed by Grovers Mill Towing and V2 was driven into the nearby parking lot for A 1 Limo.

146 Officer's Signature

FRANK LATORRE

147 Badge #

568

148 Reviewer

BAL

Badge #

467

149 Case Status

Pending Complete

05	1 Case Number 2018-1691		10 Crash Occurred On: WHEELER WAY - 11 Speed Limit 35										57												
01	2 Police Dept of WEST WINDSOR POLICE 01		<input type="checkbox"/> At Intersection With Road Name Dir 12 Route No. Suffix 13 Milepost 18 Speed Limit <input checked="" type="checkbox"/> Feet <input checked="" type="checkbox"/> N <input type="checkbox"/> E of: EMMONS DR. 35 <input type="checkbox"/> Miles <input type="checkbox"/> S <input type="checkbox"/> W 19 Ramp <input type="checkbox"/> To 17 Cross Road Name <input type="checkbox"/> NB <input type="checkbox"/> EB <input type="checkbox"/> 14 15 16 17 18 <input type="checkbox"/> SB <input type="checkbox"/> WB										118b												
07	3 Station/Precinct 2018-1691		4 Date of Crash mm dd yy 01/18/18 5 Day Of Week THURSDAY 6 Time (use 2400 hrs) 1833 7 Municipality Code 1113 8 Total Killed -- 9 Total Injured -- 21 Latitude -- 22 Longitude --										119a												
01	23 Veh # 1 24 Policy No. A0J-238-021361-40 7 7		25 NJ Ins. Code 370		53 Veh # -		54 Policy No. -		55 NJ Ins. Code -		01														
02	<input type="checkbox"/> Parked <input type="checkbox"/> Ped <input type="checkbox"/> Pedalcyclist <input type="checkbox"/> Resp To Emergency <input type="checkbox"/> Hit & Run 26 Driver's First Name Initial Last Name BRIELLE B HICINBOTHEN 29 Sex F 56 Driver's First Name Initial Last Name - - - 59 Sex -										120b														
01	27 Number & Street 168 NORTH HAMILTON AVE.										121a														
1	28 City HAMILTON State NJ Zip 08619					58 City - State - Zip -					121b														
02	30 Eyes 02 DL Class D Restrictions 1 Endorsements -		31 State NJ		60 Eyes - DL Class - Restrictions - Endorsements -		61 State -				01														
12	32 Driver's License Number H40950976260822			33 DOB mm dd yyyy 10/21/1982		34 Expires mm yy 10 19		62 Driver's License Number -			63 DOB mm dd yyyy - - -		64 Expires mm yy - - -		123										
04	35 Owner's First Name Initial Last Name BRIELLE B HICINBOTHEN					65 Owner's First Name Initial Last Name - - -					124														
04	36 Number & Street 168 NORTH HAMILTON AVE.					66 Number & Street -					04														
04	37 City HAMILTON State NJ Zip 08619					67 City - State - Zip -					125														
09	38 Make KIA		39 Model SOUL		40 Color SL		41 Year 12		42 Plate No. YNP27D		43 State NJ		68 Make -		69 Model -		70 Color -		71 Year -		72 Plate No. -		73 State -		24
01	44 VIN KNDJT2A69C7464345				45 Expires 01 19		74 VIN -				75 Expires - -		126b												
03	46 Vehicle Removed To -					76 Vehicle Removed To -					126c														
03	<input checked="" type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded <input type="checkbox"/> Left At Scene <input type="checkbox"/> Towed Impounded					<input type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded <input type="checkbox"/> Left At Scene <input type="checkbox"/> Towed Impounded					126d														
03	47 Authority <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Driver <input type="checkbox"/> Police					77 Authority <input type="checkbox"/> Owner <input type="checkbox"/> Driver <input type="checkbox"/> Police					126e														
03	48 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		49 Hazardous Material <input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill			78 Alcohol/Drug Test Given: <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused		79 Hazardous Material <input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill			127a														
03	Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine			Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine		Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine			127b														
03	Results: 0. - % <input type="checkbox"/> Pending		Hazard Class - Placard No. -			Results: 0. - % <input type="checkbox"/> Pending		Hazard Class - Placard No. -			127c														
03	50 Carrier No. <input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None		51 GVWR/GCWR <input type="checkbox"/> Weight <= 10,000 lbs			80 Carrier No. <input type="checkbox"/> USDOT <input checked="" type="checkbox"/> None		81 GVWR/GCWR <input type="checkbox"/> Weight <= 10,000 lbs			127d														
03	<input type="checkbox"/> MC/MX -		<input type="checkbox"/> Weight 10,001-26,000 lbs			<input type="checkbox"/> MC/MX -		<input type="checkbox"/> Weight 10,001-26,000 lbs			127e														
03	<input type="checkbox"/> Weight >= 26,001 lbs		<input type="checkbox"/> Weight >= 26,001 lbs			<input type="checkbox"/> Weight >= 26,001 lbs		<input type="checkbox"/> Weight >= 26,001 lbs			127f														
01	52 Motor Carrier or Government Entity -					82 Motor Carrier or Government Entity -					128														
01	Number & Street -					Number & Street -					24														
01	City -		State -		Zip -		City -		State -		Zip -		11												
01	135 Damage To Other Property <input type="checkbox"/> Yes (If Yes, describe) <input checked="" type="checkbox"/> No											11													
01	136 Charge -		137 Summons. No. -		138 Charge -		139 Summons. No. -						131												
01	140 Charge -		141 Summons. No. -		142 Charge -		143 Summons. No. -						132												

01	Names & Addresses of Occupants - If Deceased, Date & Time of Death										133				
A	83	84	85	86	87	88	89	90	91	92	93	94	95	DRIVER 01	03
B	01	01	01	-	35	F	-	-	-	11	04	-	-	-	134
C															134
D															134

New Jersey Police
Crash Investigation Report

Police Dept: **WEST WINDSOR POLIC** Code: **01**

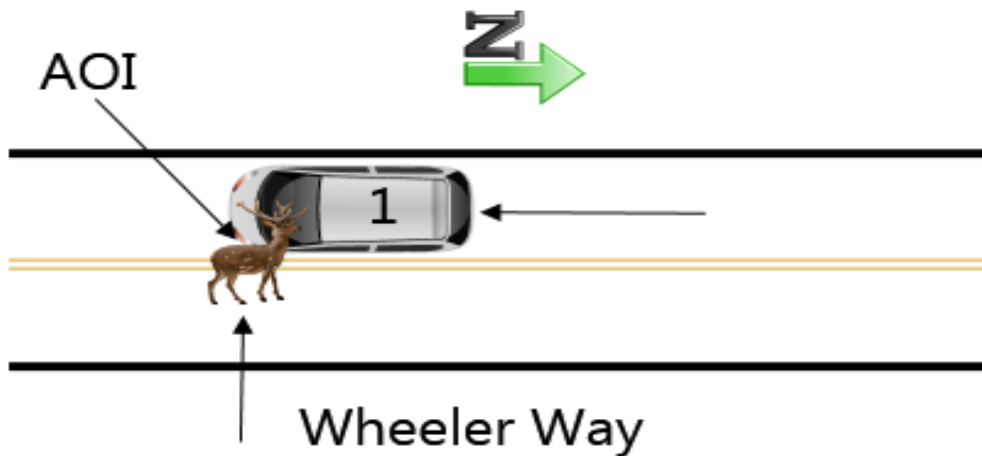
Station: **2018-1691**

Case No: **2018-1691**

(Refer to vehicle by number)

A L L I N V O L V E E D J	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 01 related that she was traveling southbound on Wheeler Way when a deer darted into the roadway from her left. She stated that she was unable to avoid the deer.

Damage: V01- moderate damage to driver's side fender and front bumper

On scene investigation: After receiving Driver 01's statement along with on scene observations, it was determined that Driver 01 was unable to avoid the deer. No injuries were observed or reported.

146 Officer's Signature
FRANK ZICHA

147 Badge #
596

148 Reviewer
BAL

Badge #
467

149 Case Status
 Pending Complete

05	1 Case Number 2018-3846		10 Crash Occurred On: EMMONS DR		11 Speed Limit 25		118a
97	2 Police Dept of WEST WINDSOR POLICE 01		Code 01		12 Route No. 12 Suffix 13 Milepost 18 Speed Limit 25		118b
01	3 Station/Precinct 2018-3846		<input type="checkbox"/> At Intersection With <input type="checkbox"/> Feet <input checked="" type="checkbox"/> Miles		Road Name WHEELER WAY Dir of: <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W 19 Ramp <input type="checkbox"/> To <input type="checkbox"/> From: 17 Cross Road Name <input type="checkbox"/> NB <input type="checkbox"/> EB <input type="checkbox"/> SB <input type="checkbox"/> WB		119a
07	4 Date of Crash mm dd yy 02/09/18		5 Day Of Week FRIDAY		6 Time (use 2400 hrs) 2152		119b
100a	7 Municipality Code 1113		8 Total Killed --		9 Total Injured --		119c
01	21 Latitude		22 Longitude				120a

100b	23 Veh # 1	24 Policy No. F844391-3	25 NJ Ins. Code 426	53 Veh #	54 Policy No.	55 NJ Ins. Code	120b
04	<input type="checkbox"/> Parked <input type="checkbox"/> Ped <input type="checkbox"/> Pedalcyclist <input type="checkbox"/> Resp To Emergency <input type="checkbox"/> Hit & Run						

02	26 Driver's First Name ANNIE	Initial I	Last Name HEARD	29 Sex F	56 Driver's First Name	Initial	Last Name	59 Sex	121a
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01	27 Number & Street 250 JOHN ST				57 Number & Street				121b
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103	28 City PRINCETON				58 City				121c
104	State Zip NJ 08542				State Zip				122

1	30 Eyes 02	DL Class D	Restrictions	Endorsements	31 State NJ	60 Eyes	DL Class	Restrictions	Endorsements	61 State	122
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105	32 Driver's License Number H20360516953672			33 DOB mm dd yyyy 03/27/1967		34 Expires mm yy 05 20		62 Driver's License Number			63 DOB mm dd yyyy		64 Expires mm yy		123
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106	35 Owner's First Name ANNIE				Initial I				Last Name HEARD				56 Owner's First Name				Initial				Last Name				124
-	<input checked="" type="checkbox"/> Same As Driver								<input type="checkbox"/> Same As Driver												125				

107	36 Number & Street 250 JOHN ST				66 Number & Street				125
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108	37 City PRINCETON				67 City				126a
109	State Zip NJ 08542				State Zip				126b

109	38 Make HYUNDAI	39 Model SONATA	40 Color WT	41 Year 2013	42 Plate No. JKJ81X	43 State NJ	68 Make	69 Model	70 Color	71 Year	72 Plate No.	73 State	126c
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110	44 VIN 5NPEB4AC1DH583364				45 Expires 09 18		74 VIN				75 Expires		126d
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111	46 Vehicle Removed To												76 Vehicle Removed To												126e
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112	<input checked="" type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded <input type="checkbox"/> Left At Scene <input type="checkbox"/> Towed Impounded												<input type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded <input type="checkbox"/> Left At Scene <input type="checkbox"/> Towed Impounded												126e
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113	47 Authority <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Driver <input type="checkbox"/> Police				77 Authority <input type="checkbox"/> Owner <input type="checkbox"/> Driver <input type="checkbox"/> Police				127a
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114	48 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused				49 Hazardous Material <input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill				78 Alcohol/Drug Test Given: <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused				79 Hazardous Material <input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill				127b
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115	Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine				Hazard Class				Placard No.				Results: 0. - % <input type="checkbox"/> Pending				127c
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116	50 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> MC/MX				51 GVWR/GCWR <input type="checkbox"/> Weight <= 10,000 lbs <input type="checkbox"/> Weight 10,001-26,000 lbs <input type="checkbox"/> Weight >= 26,001 lbs				80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> MC/MX				81 GVWR/GCWR <input type="checkbox"/> Weight <= 10,000 lbs <input type="checkbox"/> Weight 10,001-26,000 lbs <input type="checkbox"/> Weight >= 26,001 lbs				127d
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117	52 Motor Carrier or Government Entity												82 Motor Carrier or Government Entity												127e
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118	Number & Street												Number & Street												128
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119	City				State				Zip				City				State				Zip				129
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120	135 Damage To Other Property <input type="checkbox"/> Yes (If Yes, describe) <input type="checkbox"/> No																								130
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121	Oper. 136 Charge												137 Summons. No.												Oper. 138 Charge												139 Summons. No.												131
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122	Oper. 140 Charge												141 Summons. No.												Oper. 142 Charge												143 Summons. No.												132
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123	Oper. 144 Charge												145 Summons. No.												Oper. 146 Charge												147 Summons. No.												133
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124	Names & Addresses of Occupants - If Deceased, Date & Time of Death																								134
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A	01	01	01	-	50	F	-	-	-	11	04	-	-	DRIVER #01										-	-	-	-	-	-	-
B	01	03	01	-	19	F	-	-	-	11	04	-	-	SUMAIYYA										-	STEPHENS				-	
C	01	04	01	-	52	M	-	-	-	04	04	-	-	KYLE										-	STEPHENS				-	
D	01	06	01	-	20	M	-	-	-	04	04	-	-	JAHJ										-	NORMAN				-	

New Jersey Police
Crash Investigation Report

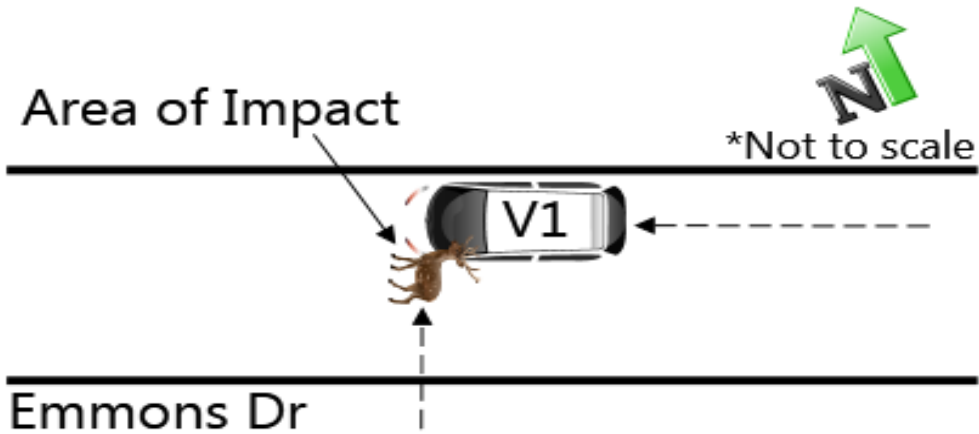
Police Dept: **WEST WINDSOR POLIC** Code: **01**

Station: **2018-3846** Case No: **2018-3846**

(Refer to vehicle by number)

A L L I N V O L V E D J	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Damage to V1 - Moderate/functional damage to front driver side quarter panel and bumper including dents and a headlight out. It should be noted that there was deer fur and feces stuck to the vehicle in the area of the damage.

Driver #01 related that she was traveling west on Emmons drive on her way to MarketFair. Suddenly a deer ran directly into the roadway from her left side. She was unable to avoid the deer.

Based upon the driver statement and the physical evidence at the scene, no fault was determined. There was a deer which ran directly into the roadway causing an unavoidable hazard. It should be noted that there was deer fur and feces stuck to the vehicle in the area of the damage. Upon my arrival there was a deer laying in the street near the area of impact. The deer ran off through the business complex. No injuries were reported or observed at the scene.

146 Officer's Signature
JAMES COLLINS

147 Badge #
595

148 Reviewer
BAL

Badge #
467

149 Case Status
 Pending Complete

96	PAGE 1 OF 2 <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																							
05	1 Case Number 2020-1875		10 Crash Occurred On: EMMONS DR.						11 Speed Limit 25		118a	04												
97	2 Police Dept of WEST WINDSOR POLICE		Code 01		<input checked="" type="checkbox"/> At Intersection With Road Name Dir WHEELER WAY						118b	-												
98	3 Station/Precinct 2020-1875		-		14 <input type="checkbox"/> Feet <input type="checkbox"/> Miles <input type="checkbox"/> N <input type="checkbox"/> E of: <input type="checkbox"/> S <input type="checkbox"/> W						119a	25												
01	4 Date of Crash 01/17/20		5 Day Of Week FRIDAY		6 Time (use 2400 hrs) 1219		7 Municipality Code 1113		8 Total Killed --		9 Total Injured 1		119b	-										
100a	23 Veh # 1		24 Policy No. F502434-4			25 NJ Ins. Code 426		53 Veh # 2		54 Policy No. 648823799			55 NJ Ins. Code 012		120a	01								
101	<input type="checkbox"/> Parked <input type="checkbox"/> Ped <input type="checkbox"/> Pedalcyclist <input type="checkbox"/> Resp To Emergency <input type="checkbox"/> Hit & Run										120b	-												
02	26 Driver's First Name Initial Last Name TOREY L KING				29 Sex F		56 Driver's First Name Initial Last Name PATRICK R MCGONIGLE				59 Sex M		121a	01										
01	27 Number & Street 1125 GENESEE ST.				57 Number & Street 3 FERRIS ST								121b	-										
103	28 City State Zip TRENTON NJ 08610				58 City State Zip SOUTH RIVER NJ 08882								122	01										
104	30 Eyes 02		DL Class D		Restrictions 1		Endorsements -		31 State NJ		60 Eyes 05		DL Class D		Restrictions -		Endorsements -		61 State NJ		122	01		
105	32 Driver's License Number K44867507351602				33 DOB 01/14/1960		34 Expires 10 21		62 Driver's License Number M12576177912955				63 DOB 12/21/1995		64 Expires 01 21		123	01						
106	<input checked="" type="checkbox"/> Same As Driver TOREY L KING				<input type="checkbox"/> Same As Driver HYDRAULIC HOSE - OC NJ LLC												124	08						
107	36 Number & Street 1125 GENESEE ST.				66 Number & Street 701 SPRINGFIELD RD S.												125	04						
108	37 City State Zip TRENTON NJ 08610				67 City State Zip KENILWORTH NJ 07033												126a	26						
109	38 Make TOYOTA		39 Model RAV4		40 Color RD		41 Year 2013		42 Plate No. Y90HNV		43 State NJ		68 Make FORD		69 Model TRANSIT CONWT		70 Color 2015		72 Plate No. XCUW33		73 State NJ		126b	-
110	44 VIN 2T3DFREV4DW076900				45 Expires 02 20		74 VIN 1FTNR2YG3FKA83350				75 Expires 07 20						126c	-						
111	46 Vehicle Removed To TOWED BY GROVERS				76 Vehicle Removed To DRIVEN AWAY												126d	-						
112	<input type="checkbox"/> Driven <input checked="" type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded				<input checked="" type="checkbox"/> Driven <input type="checkbox"/> Towed Disabled <input type="checkbox"/> Towed Disabled & Impounded												126e	-						
113	47 Authority <input type="checkbox"/> Owner <input type="checkbox"/> Driver <input checked="" type="checkbox"/> Police				77 Authority <input type="checkbox"/> Owner <input type="checkbox"/> Driver <input checked="" type="checkbox"/> Police												126f	26						
114	48 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused				49 Hazardous Material <input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill				78 Alcohol/Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused				79 Hazardous Material <input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill				127a	26						
115	Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine				Type: <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine												127b	-						
116	Results: 0. - % <input type="checkbox"/> Pending				Hazard Class Placard No.				Results: 0. - % <input type="checkbox"/> Pending				Hazard Class Placard No.				127c	-						
01	50 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> MC/MX				51 GVWR/GCWR <input type="checkbox"/> Weight <= 10,000 lbs <input type="checkbox"/> Weight 10,001-26,000 lbs <input type="checkbox"/> Weight >= 26,001 lbs				80 Carrier No. <input type="checkbox"/> USDOT <input type="checkbox"/> MC/MX				81 GVWR/GCWR <input type="checkbox"/> Weight <= 10,000 lbs <input type="checkbox"/> Weight 10,001-26,000 lbs <input type="checkbox"/> Weight >= 26,001 lbs				127d	-						
117	52 Motor Carrier or Government Entity -				82 Motor Carrier or Government Entity -												127e	26						
02	Number & Street -				Number & Street -												128	26						
	City State Zip - - -				City State Zip - - -												129	12						
	135 Damage To Other Property <input type="checkbox"/> Yes (If Yes, describe) <input checked="" type="checkbox"/> No																130	12						
																	131	03						
	Oper. 136 Charge 01 39:4-97				137 Summons. No. E20 000047				Oper. 138 Charge 02 NONE				139 Summons. No. -				132	03						
	Oper. 140 Charge -				141 Summons. No. -				Oper. 142 Charge -				143 Summons. No. -				133	04						
																	134	03						
	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 04 60 F 04 08 02 11 04 - 6105										DRIVER 1													
B	02 01 01 - 24 M - - - 11 04 - -										DRIVER 2													
C																								
D																								

New Jersey Police
Crash Investigation Report

Police Dept: **WEST WINDSOR POLIC** Code: **01**

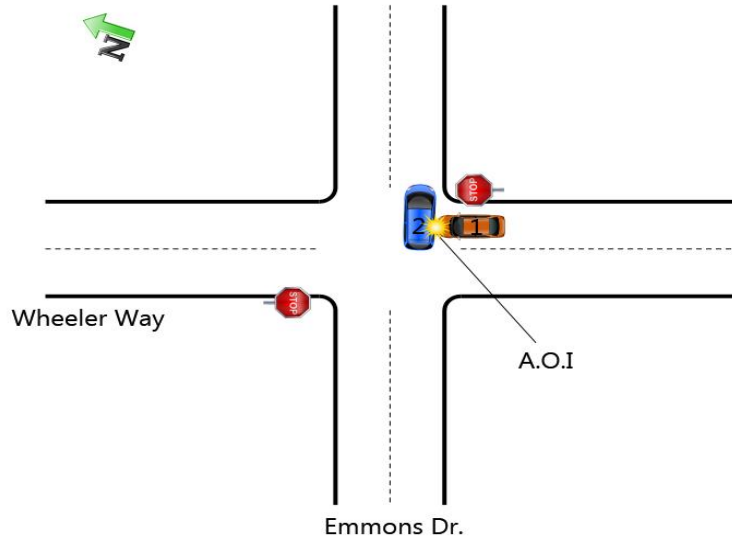
Station: **2020-1875**

Case No: **2020-1875**

(Refer to vehicle by number)

	Veh	Pos	Eject	Phys	Age	Sex	Loc	Type	Ref	Equip	Equip	Bag	Hosp	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	Occ	In/On		Cond			Inj	Inj	Med	Avail	Used	Dept	Code	
A L L I N V O L U N T A R Y	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 related: She was traveling north on Wheeler Way approaching the Emmons Dr. intersection. She stopped at the stop sign and thought it was a 4 way stop. Even though she saw Vehicle 2 approaching she proceeded through the intersection, subsequently striking Vehicle 2.

Driver 2 related: He was traveling east on Emmons Dr. approaching the Wheeler Way intersection when he saw Vehicle 1 run the stop sign on Wheeler Way and strike his vehicle.

Damage to Vehicle 1: Moderate damage to the front end inclusive of the bumper, grille, headlights, hood, quarter panels

Damage to Vehicle 2: Moderate damage to the passenger side inclusive of the front and rear doors.

Upon arrival both vehicles had moved from their original area of final rest. Investigation at the scene revealed while Vehicle 1 traveled north on Wheeler Way, approaching the Emmons Dr. intersection, Vehicle 2 was traveling east on Emmons Dr. Both Vehicle's 1 and 2 entered the intersection at the same time and subsequently Vehicle 1 struck Vehicle 2. Driver 1 was found at fault for the incident and was issued summon # for 39:4-97 (Careless Driving).

146 Officer's Signature
NATHAN CUOMO

147 Badge #
0082

148 Reviewer
BAL

Badge #
0067

149 Case Status
 Pending Complete