

Commonwealth of Massachusetts

Motor Vehicle Crash Police Report

Date of Crash \_\_\_\_\_ Time of Crash \_\_\_\_\_ City/Town \_\_\_\_\_

Number Vehicles \_\_\_\_\_ Number Injured \_\_\_\_\_

Speed Limit \_\_\_\_\_ Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

State Police  Local Police  MBTA Police  Other: \_\_\_\_\_

AT INTERSECTION:

LOCATION

NOT AT INTERSECTION:

1 Route# \_\_\_\_\_ Direction \_\_\_\_\_ Name of Roadway/Street \_\_\_\_\_ At \_\_\_\_\_

Route# \_\_\_\_\_ Direction \_\_\_\_\_ Name of Intersecting Roadway/Street \_\_\_\_\_ Also at Intersection with \_\_\_\_\_

2 Route# \_\_\_\_\_ Direction \_\_\_\_\_ Name of Intersecting Roadway/Street \_\_\_\_\_

3 Please Select One of the Following:  Vehicle 1 # Occupants \_\_\_\_\_  Hit/Run \_\_\_\_\_  Moped \_\_\_\_\_

**Location**

Accident details recorded include date and time of crash, city/town, the number of vehicles involved and number of people injured in the accident. In addition, officers record whether an accident has occurred at an intersection, including the name of the closest landmark or intersecting street.

4 License # \_\_\_\_\_ St \_\_\_\_\_ DOB/Age \_\_\_\_\_ Reg # \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_

Sex \_\_\_\_\_ Lic. Class \_\_\_\_\_ Lic. Restrictions \_\_\_\_\_ CDL Endorsement \_\_\_\_\_

Operator \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

5 Vehicle Travel Direction:  N  S  E  W Responding to Emergency? \_\_\_\_\_

6 Violation 1: Ch \_\_\_\_\_ Sec \_\_\_\_\_ Violation 2: Ch \_\_\_\_\_ Sec \_\_\_\_\_

Violation 3: Ch \_\_\_\_\_ Sec \_\_\_\_\_ Violation 4: Ch \_\_\_\_\_ Sec \_\_\_\_\_

**Vehicle and Driver Information**

Information for all drivers and occupants involved in the accident are recorded, including the following: driver contact information, license number, vehicle make, vehicle registration number, and insurance carrier information.

The investigating officer also records each vehicle's travel direction, location of damage on vehicle, the sequence of events leading to the accident, driver contribution levels and (if applicable) citations issued at the accident scene.

7 Please Select One of the Following:  Vehicle 2 # Occupants \_\_\_\_\_  Non-Motorist A Type \_\_\_\_\_ Action \_\_\_\_\_ Location \_\_\_\_\_ Condition \_\_\_\_\_  Hit/Run \_\_\_\_\_  Moped \_\_\_\_\_

8 License # \_\_\_\_\_ St \_\_\_\_\_ DOB/Age \_\_\_\_\_ Reg # \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_

Sex \_\_\_\_\_ Lic. Class \_\_\_\_\_ Lic. Restrictions \_\_\_\_\_ CDL Endorsement \_\_\_\_\_

Operator \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

9 Vehicle Travel Direction:  N  S  E  W Responding to Emergency? \_\_\_\_\_

10 Violation 1: Ch \_\_\_\_\_ Sec \_\_\_\_\_ Violation 2: Ch \_\_\_\_\_ Sec \_\_\_\_\_

11 Violation 3: Ch \_\_\_\_\_ Sec \_\_\_\_\_ Violation 4: Ch \_\_\_\_\_ Sec \_\_\_\_\_

**Crash Diagram**

Law enforcement officials draw a pictorial diagram of the accident scene, including vehicle direction and relative distance to intersections and fixed objects.

Crash Narrative:

12 \_\_\_\_\_

13 \_\_\_\_\_

14 \_\_\_\_\_

15 \_\_\_\_\_

16 \_\_\_\_\_

17 \_\_\_\_\_

18 \_\_\_\_\_

19 \_\_\_\_\_

20 \_\_\_\_\_

21 \_\_\_\_\_

22 \_\_\_\_\_

23 \_\_\_\_\_

24 \_\_\_\_\_

25 \_\_\_\_\_

**Crash Narrative**

The officer describes how and why the accident occurred, including details that may reveal if a driver was under the influence of drugs or alcohol, distracted by a cell phone or driving recklessly moments before the accident.

Witnesses:

26 Name (Last, First, Middle) \_\_\_\_\_ Address \_\_\_\_\_

27 \_\_\_\_\_

28 \_\_\_\_\_

29 \_\_\_\_\_

30 \_\_\_\_\_

31 \_\_\_\_\_

32 \_\_\_\_\_

33 \_\_\_\_\_

**Witnesses**

Police officers record contact information for witnesses, including whether they've made an official statement to law enforcement officials.

Property Damage:

34 Owner (Last, First, Middle) \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

35 \_\_\_\_\_

36 \_\_\_\_\_

**Property Damage**

If property damage was reported at the scene of the accident, the owner's contact information and a description of damaged property is included in the accident report.

Truck and Bus Information:

37 Registration # \_\_\_\_\_ (From Vehicle Sec \_\_\_\_\_)

38 Carrier Name \_\_\_\_\_

39 Address \_\_\_\_\_ City \_\_\_\_\_

40 US DOT # \_\_\_\_\_ State Number \_\_\_\_\_ Issuing State \_\_\_\_\_

41 Cargo Body Type Code \_\_\_\_\_ Gross Vehicle Weight \_\_\_\_\_

42 Trailer Reg # \_\_\_\_\_ Reg Type \_\_\_\_\_ Reg State \_\_\_\_\_ Reg Year \_\_\_\_\_

43 Hazmat Information:

44 Placard \_\_\_\_\_ Material 1 digit # \_\_\_\_\_ Material Name \_\_\_\_\_

**Truck and Bus Information**

If a truck or bus was involved in the accident, details regarding the vehicle are recorded here. This included registration number, vehicle weight and body type, driver credentials and contact information for the vehicle's carrier.

Police Officer Name (Please Print) \_\_\_\_\_ Signature \_\_\_\_\_ ID/Badge # \_\_\_\_\_ Department \_\_\_\_\_

CDP1 11-2400

If you or a loved one was in a car accident in Boston, Springfield, Worcester, or elsewhere in Massachusetts, contact the **Law Offices of Mark E. Salomone** right away.

**Call 1-800-WIN-WIN-1** for a free consultation.