

96	05	Page 1 of 2		Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																				
97	01	1 Case Number		10 Crash Occurred On: HERBERTSVILLE RD		11 Speed Limit W 3 5		12 Route No.		13 Milepost		18 Speed Limit		118a		25																																																																																																					
98	01	2 Police Dept of Point Pleasant		Code 1524		☒ At Intersection with		Road Name		Dir		17 Cross Road Name		118b																																																																																																							
99	05	3 Station/Precinct PATROL				☐ Feet		☐ N ☐ E		of: BARTON AVE		☐ NB ☐ EB		119a		03																																																																																																					
100	01	4 Date of Crash 09/17/14		5 Day of Week Su M Tu W Th F Sa		6 Time (usa 2400 hrs) 1511		7 Municipality Code 1524		8 Total Killed		9 Total Injured		119b																																																																																																							
101	02	23 Veh No 01		25 Ins Code 411		53 Veh No		54 Policy No		55 Ins Code 054		☐ Parked ☐ Ped ☐ Pedalcyclist		120		01																																																																																																					
102	01	26 Driver's First Name		Last Name		29 Sex F		56 Driver's First Name		Last Name		59 Sex F		121		01																																																																																																					
103	01	27 Number and Street		30 Eyes 04		57 Number and Street		60 Eyes 04						122																																																																																																							
104	02	28 City POINT PLEASANT		State NJ		58 City POINT PLEASANT		State NJ						123																																																																																																							
105	03	31 State NJ		32 Driver's License No		33 DOB mm dd yy		34 Expires mm yy 01/17		61 State NJ		62 Driver's License No		63 DOB mm dd yy		64 Expires mm yy 01/17																																																																																																					
106		35 Owner's First Name		Initial		Last Name		65 Owner's First Name		Initial		Last Name		124		01																																																																																																					
107		☒ Same As Driver						☐ Same As Driver						125		01																																																																																																					
108	01	36 Number and Street		37 City POINT PLEASANT		State NJ		66 Number and Street		67 City POINT PLEASANT		State NJ		126		11																																																																																																					
109	04	38 Make TOYOTA		39 Model CAM		40 Color SILVER		41 Year 2005		42 Plate No		43 State NJ		68 Make NISSAN		69 Model ROG																																																																																																					
110	01	44 VIN 4T1BE32K45U		45 Expires 08/15		74 VIN JN8AS5MV8AW		75 Expires 03/15						127		08																																																																																																					
111	01	46 Vehicle Removed To ☐ Driven ☐ Left at Scene ☒ Towed		47 ☐ Impound ☒ Disabled		76 Vehicle Removed To ☐ Driven ☐ Left at Scene ☒ Towed		77 ☐ Impound ☒ Disabled						128a		26																																																																																																					
112		48 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused		78 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused						128b																																																																																																							
113		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0. - % ☐ Pending		79 Hazardous Material		Name or Placard No.						128c																																																																																																							
114		49 Hazardous Material		On Spill Board		80 Carrier No. ☐ USDOT ☐ Other *		81 Commercial Vehicle Weight		☐ < 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ > 26,001 lbs		82 Carrier name		128d																																																																																																							
115		50 Carrier No. ☐ USDOT ☐ Other *		51 Commercial Vehicle Weight		52 Carrier name		135 Crash Description						129a		26																																																																																																					
116	04													129b																																																																																																							
117	01													129c																																																																																																							
The operator of vehicle one stated that she was travelling west on [redacted] Road approaching the intersection with [redacted]. The operator of vehicle one stated that as she approached the intersection she observed a vehicle travelling north on [redacted] drive through the stop sign and pull in front of her vehicle. The operator of vehicle one stated that she did not have enough time to apply her brakes and the front bumper of her vehicle struck the																																																																																																																					
136 Damage to Other Property																																																																																																																					
Oper. 137 Charge ☐ Multiple Charges 138 Summons No. Oper. 02 139 Charge ☐ Multiple Charges 140 Summons No.																																																																																																																					
141 Officer's Signature (OFFICER Nicholas C Rossi) 142 Badge No. 0505 143 Reviewed By 0106 144 Case Status ☐ Pending ☒ Complete																																																																																																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th>83</th> <th>84</th> <th>85</th> <th>86</th> <th>87</th> <th>88</th> <th>89</th> <th>90</th> <th>91</th> <th>92</th> <th>93</th> <th>94</th> <th>95</th> <th colspan="2">Names & Addresses of Occupants - If Deceased, Date & Time of Death</th> </tr> </thead> <tbody> <tr> <td>A</td> <td>01</td> <td>01</td> <td>01</td> <td>04</td> <td></td> <td></td> <td></td> <td>05</td> <td>05</td> <td>02</td> <td>09</td> <td>04</td> <td>-</td> <td>6505</td> <td colspan="2">POINT PLEASANT NJ [redacted]</td> </tr> <tr> <td>B</td> <td>02</td> <td>01</td> <td>01</td> <td>04</td> <td></td> <td></td> <td></td> <td>01</td> <td>08</td> <td>01</td> <td>09</td> <td>09</td> <td>02</td> <td>-</td> <td colspan="2">POINT PLEASANT NJ [redacted]</td> </tr> <tr> <td>C</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td colspan="2"></td> </tr> <tr> <td>D</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td colspan="2"></td> </tr> <tr> <td>E</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td colspan="2"></td> </tr> </tbody> </table>																		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				05	05	02	09	04	-	6505	POINT PLEASANT NJ [redacted]		B	02	01	01	04				01	08	01	09	09	02	-	POINT PLEASANT NJ [redacted]		C	-	-	-	-	-	-	-	-	-	-	-	-	-	-			D	-	-	-	-	-	-	-	-	-	-	-	-	-	-			E	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
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New Jersey Police Crash Investigation Report

Police Dept: Point PleasantCode: 1524

Motor Vehicle Crash Description

Station: PATROLCase No: [REDACTED]

(Refer to vehicle by number)

	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	
A														
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L														
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135 Crash Description

center passenger's side of vehicle 2. The operator of vehicle 1 stated that she was wearing her seatbelt at the time of the accident, and was not on her cell phone.

The operator of vehicle 2 stated that she was travelling north on [REDACTED] approaching the intersection of [REDACTED]. The operator of vehicle 2 stated that she did not see the stop sign on [REDACTED] and entered into the intersection without slowing or stopping. The operator of vehicle 2 stated that upon entering the intersection the front bumper of vehicle 1 collided with the center passenger's side of her vehicle. The operator of vehicle 2 stated that she was wearing her seatbelt at the time of the accident, and was not on her cell phone.

Upon my investigation, I found the operator of vehicle 2 to be at fault.

P.O. Nicholas Rossi #0505

(OFFICER Nicholas C Rossi)

0505

To protect the privacy of individuals, NHTSA does not make medical records available to the public without authorization. For this reason, documents falling into this category have not been included in this complaint record.