96	Pag		of Fatal New Jersey Police Crash Invest										stigati	on R	epor			ortable	Nor	n-Repor	table	Cha	nge Report	118a
97	1. Case	Number					10. Cras Occurre									11. Sp	eed Limit							118b
98	2. Police Dept. of Code						2 500110		Interse	ection		l Name	12. Route No. Suffix 13. Milepost Dir 12. Route No. Suffix 13. Milepost 18. Speed Limi									t 119a		
30	3. Station/Precinct       4. Date of Crash mm       5. Day of Week Su       M       yy       Su       M       Tu							[	_N _s'	E of:									•	119a				
99							14 15 16							19 Rar	). □T np □F	Fo: 17 From:	. Cross R	load Nam	ne/Route	No.			]NB □EB ]SB □WE	
100a							6. Time (use 2400 hrs.) 7. Municipality Code Killed						9. Total Injured 21. Latitude 20 Route Name/Route No. 22. Longitude									120a		
100b	23. Veh.	# 24. P	olicy No.		Th F	Sa				25	. NJ Ins	s. Code	53. Veh. #	# 54. P	olicy No	0.					•	55.	NJ Ins. Code	120b
101		□Pa	-			odolovliv	,+	Doop to l	Emora			it ? Dup			-			ladalavlia	,+	Doon to	Emorao			
101	26. Drive			Ped	Initi	edalcylis al Li	ast Name	Resp. to I	Emerge	ency		it & Run 29. Sex	Parked         Ped         Pedalcylist         Resp. to Emergency         Hit & Run           56. Driver's First Name         Initial         Last Name         59. Sex											121a
102	27. Num	ber & St	reet										57. Number & Street											121b
103	28. City State Zip																							
104									State		Zip		58. City								State	Zi	p	
	30. Eyes DL Class Restrictions							31. Sta	te	60. Eyes		DL Cla	ass	Res	trictions		End	orsement	ts 6'	1. State	122			
105	32. Driver's License Number					33. DOB 34. Expires						62. Drive	r'e Licer	neo Nur	mbor			63	DOB		6/	4. Expires	123	
105	32. Drive	I S LICEI		Dei	I			nm dd	l y		mm	yy J	02. Drive	I S LICEI		IIIDei	I				dd yy		mm yy	
	35. Own	er's First		Initial	Last			65. Owne	er's Firs	 t Name			Initial	Last	t Name				- 104					
106	Same as Driver										□ Same Driver	as										124		
107	36. Number & Street											66. Num		reet									125	
108	37. City State Zip											67. City								State	Zi	p	126a	
109	38. Make	<u></u>	00	1	40	Color 41	Voor 4	o No		13 State	68. Make		10	9. Mode	2	70	Color	1 Voor	72. Plate	No	e 126b			
109	SO. IVIAKE	;	39	. Model		40.	C0101  41		z. Plau	e NO.		43. State	oo. waxe	•	0	9. MOUE	-1	70.		i. rear	72. Plate	INO.	73.518	1200
110	44. VIN							I			45. E	xpires	74. VIN										75. Expires	126c
111	46. Vehicle Removed to:									76. Vehicle Removed to:									126d					
112																						126e		
	_	Driven     Towed Disabled     Towed Disabled & Impounded     Left at Scene     Towed Impounded										ed	Driven     Towed Disabled     Towed Disabled     Towed Disabled     Towed Impounded									407-		
113	47. Auth		r		or			Doligo					77. Authority Owner Driver Police									127a		
114	Owner         Driver         Police           48. Alcohol Drug Test         49. Hazardous M								laterial				78. Alcohol Drug Test 79. Hazardous Material									127b		
115	Given: No Yes Refused None Type: Breath Blood Urine								None On Board Spill						Given: No Yes Refused None On Board Spill Type: Breath Blood Urine								Spill	127c
116	Results	s: <b>0.</b>	%	Pe	ending		Hazar	rd Class		Pla	acard N	lo.	Results: 0. % Pending Hazard Class Placard No.									127d		
	50. Carri			VR / GCV 0,000 lbs.	buses	only)	80. Carrier No.         81. GVWR / GCWR (trucks & buses on           □USDOT         □None								uses only)									
117	USDOT None						10,001 - 26,000 lbs. ∏≥ 26,001 lbs.						☐10,001 - 26,000 lbs.           ☐MC/MX         ☐ 26,001 lbs.									127e		
	52. Moto			<u> </u>						82. Motor Carrier or Government Entity									128					
	Number	& Street											Number & Street										129	
																							130	
	City State Zip										City State Zip													
	135. Dar	135. Damage to Other Property Yes (If Yes, describe)																				131		
																		132						
	Oper 136 Charge								Summ	ons No	Oper. 138. Charge								139. S	133				
	Oper. 136. Charge						137. Summons No.																	
	Oper.	140. (	Charge				141. Summons No.						Oper. 142. Charge								143. S	134		
	83 84 85 86 87				87	88 89 90 91 92 93						94 95 Names & Addresses of Occupants If Deceased, Date & Time of Death												
	A A												IT Deceased, Date & Time of Death							1				
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	New Jersey Police         Case Number           Crash Investigation Report         Case Number																		Page of					
Crasn investigation Report           83         84         85         86         87         88         89         90         91         92													95		ddresses of Occupants , Date & Time of Death									
_																								
E																								
F																								
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н																								
1																								
J																								
144. Crash Diagram																								
Show NORTH by Arrow (Not to Scale)																								
$ \langle$		<b>)</b>																						
145.	Crash	Descri	ption/N	arrative	;																			
	Officer's	 Signature								1	47. Bad	ge #	148. Revi	ewer				Badg	e #	149. Ca	se Status			
																			Pe	nding	]Comp	lete		