

Local Road Accident Reduction Program – 2014

Borough of Naugatuck

Rubber Avenue, Hoadley Street and Melbourne Street

Combined Intersections

Description of the Location

The proposed project is located at the combined intersections of Hoadley Street and Melbourne Avenue at Rubber Avenue. Rubber Avenue is classified as a urban collector that intersects with Hoadley Street and Melbourne Avenue, which are both local streets. Rubber Avenue is a conduit for traffic travelling to and from the center of town, providing access to Naugatuck High School and a shopping center, Mount View Plaza. Rubber Avenue is also the main route for residential traffic generated from western Naugatuck accessing the highway, Route 8. The combined intersections have been signalized for many years due to the complexities and need for traffic control that are present at both intersections.

Accident History

The combined intersections of Hoadley Street and Melbourne Avenue at Rubber Avenue has been the site of numerous accidents over the years, due in part to the combination of the two intersections in close proximity with each other. The intersection traffic signals are over 35 years old and do not have loops or vehicle control. Also there are no pedestrian controls or signalization. The location causes frequent traffic congestion problems during peak traffic periods. Please refer to Attachment A for accident history and a collision diagram for the location. Please see Attachment D for the accident reports.

Project History

The Borough of Naugatuck applied for this project through the Central Naugatuck Council of Governments for the 2011 solicitation for the Local Road Accident Reduction Program. The Borough of Naugatuck's project was approved March of 2012 (See Attachment E). The Borough of Naugatuck withdrew the project from consideration based on the Department of Transportation's project cost estimate exceeding the 2011 maximum funding levels. Currently, the project estimate is below the \$500,000 maximum funding level. The Borough of Naugatuck has a capital projects referendum scheduled in November of 2014 that includes funding for this project.

Traffic Volumes

The average daily traffic (ADT) West of Route 63 in 2012 was 14600; in 2009 was 13,400 in 2006 was 14,200; in 2003 was 14,300 Data was provided by the State of Connecticut Department of Transportation, Bureau of Policy and Planning – Inventory and Data.

Proposed Improvements and Conceptual Plans

Due to the frequency and regularity of accidents occurring and the age of the traffic signal equipment at the combined intersections of Hoadley Street and Melbourne Avenue at Rubber Avenue, the Police Department in conjunction with the Public Works Department and the Engineering Department has placed this site at the top of the list for proposed improvements. In addition, the intersections do not comply with current AASHTO standards for signalization or ancillary improvements.

The Borough of Naugatuck Engineering Department proposes upgrading the combined intersections with a new signal, cross walks, new sidewalks and pedestrian signal boxes. The project cost is estimated at \$425,631. Please refer to Attachment B for a detailed preliminary itemized cost estimate for the project. Please see Attachment C for the conceptual signalization plan.

Attachment A

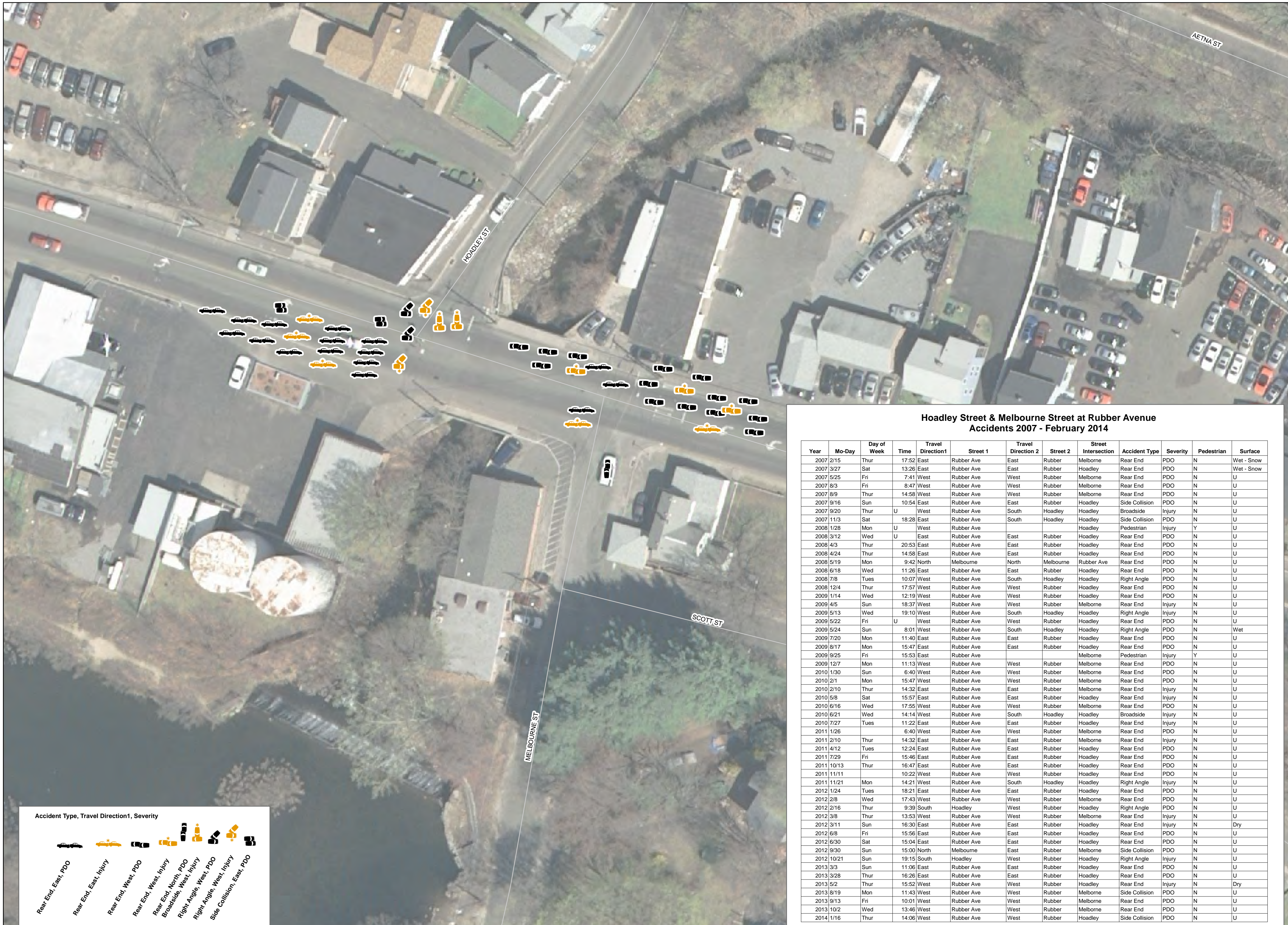
Collision Diagram and Accident History

Rubber Avenue - Melbourne Avenue - Hoadley Street Accident Summary

Year	Mo-Day	Day of Week	Time	ID	Travel Direction1	Street 1	Travel Direction 2	Street 2	Street Intersection	Accident Type	Severity	Pedestrian	Surface
2007	2/15	Thur	17:52	2	East	Rubber Ave	East	Rubber	Melborne	Rear End	PDO	N	Wet - Snow
2007	3/27	Sat	13:26	1	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	Wet - Snow
2007	6/25	Mon	7:41	3	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2007	8/3	Fri	8:47	4	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2007	8/9	Thur	14:58	5	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2007	9/16	Sun	10:54	6	East	Rubber Ave	East	Rubber	Hoadley	Side Collision	PDO	N	U
2007	9/20	Thur	U	7	West	Rubber Ave	South	Hoadley	Hoadley	Broadside	Injury	N	U
2007	11/3	Sat	18:28	8	East	Rubber Ave	South	Hoadley	Hoadley	Side Collision	PDO	N	U
2008	1/28	Mon	U	9	West	Rubber Ave			Hoadley	Pedestrian	Injury	Y	U
2008	3/12	Wed	U	10	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	4/3	Thur	20:53	11	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	4/24	Thur	14:58	12	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	5/19	Mon	9:42	13	North	Melbourne	North	Melbourn	Rubber Ave	Rear End	PDO	N	U
2008	6/18	Wed	11:26	14	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	7/8	Tues	10:07	15	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	PDO	N	U
2008	12/4	Thur	17:57	16	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2009	1/14	Wed	12:19	17	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2009	4/5	Sun	18:37	18	West	Rubber Ave	West	Rubber	Melborne	Rear End	Injury	N	U
2009	5/13	Wed	19:10	19	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	Injury	N	U
2009	5/22	Fri	U	20	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2009	5/24	Sun	8:01	25	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	PDO	N	Wet
2009	7/20	Mon	11:40	21	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2009	8/17	Mon	15:47	22	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2009	9/25	Fri	15:53	23	East	Rubber Ave			Melborne	Pedestrian	Injury	Y	U
2009	12/7	Mon	11:13	24	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	1/30	Sun	6:40	31	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	2/1	Mon	15:47	26	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	2/10	Thur	14:32	32	East	Rubber Ave	East	Rubber	Melborne	Rear End	Injury	N	U
2010	5/8	Sat	15:57	27	East	Rubber Ave	East	Rubber	Hoadley	Rear End	Injury	N	U
2010	6/16	Wed	17:55	28	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	6/21	Wed	14:14	29	West	Rubber Ave	South	Hoadley	Hoadley	Broadside	Injury	N	U
2010	7/27	Tues	11:22	30	East	Rubber Ave	East	Rubber	Hoadley	Rear End	Injury	N	U
2011	1/26		6:40	69	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2011	2/10	Thur	14:32	70	East	Rubber Ave	East	Rubber	Melborne	Rear End	Injury	N	U
2011	4/12	Tues	12:24	71	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2011	7/29	Fri	15:46	72	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U

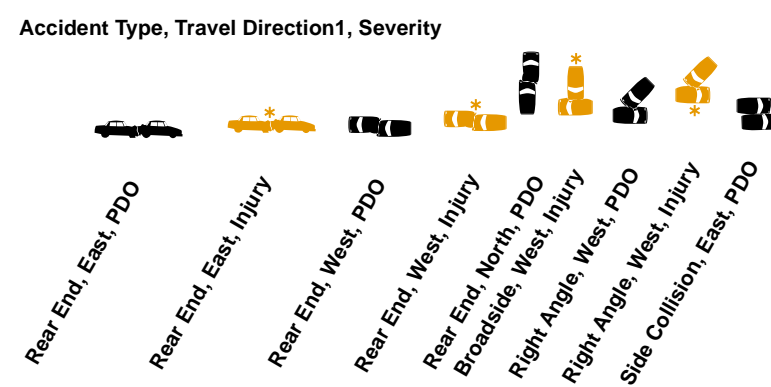
Rubber Avenue - Melbourne Avenue - Hoadley Street Accident Summary

2011	10/13	Thur	16:47	68	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2011	11/11		10:22	67	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2011	11/21	Mon	14:21	66	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	Injury	N	U
2012	1/24	Tues	18:21	65	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2012	2/8	Wed	17:43	64	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2012	2/16	Thur	9:39	50	South	Hoadley	West	Rubber	Hoadley	Right Angle	PDO	N	U
2012	3/8	Thur	13:53	51	West	Rubber Ave	West	Rubber	Melborne	Rear End	Injury	N	U
2012	3/11	Sun	16:30	52	East	Rubber Ave	East	Rubber	Hoadley	Rear End	Injury	N	Dry
2012	6/8	Fri	15:56	53	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2012	6/30	Sat	15:04	54	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2012	9/30	Sun	15:00	56	North	Melbourne	East	Rubber	Melborne	Side Collision	PDO	N	U
2012	10/21	Sun	19:15	55	South	Hoadley	West	Rubber	Hoadley	Right Angle	Injury	N	U
2013	3/3	Sun	11:06	57	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2013	3/28	Thur	16:26	58	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2013	5/2	Thur	15:52	59	West	Rubber Ave	West	Rubber	Hoadley	Rear End	Injury	N	Dry
2013	8/19	Mon	11:43	60	West	Rubber Ave	West	Rubber	Melborne	Side Collision	PDO	N	U
2013	9/13	Fri	10:01	61	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2013	10/2	Wed	13:46	62	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2014	1/16	Thur	14:06	63	West	Rubber Ave	West	Rubber	Hoadley	Side Collision	PDO	N	U



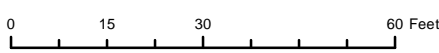
**Hoadley Street & Melbourne Street at Rubber Avenue
Accidents 2007 - February 2014**

Year	Mo-Day	Day of Week	Time	Travel Direction1	Street 1	Travel Direction 2	Street 2	Street Intersection	Accident Type	Severity	Pedestrian	Surface
2007	2/15	Thur	17:52	East	Rubber Ave	East	Rubber	Melborne	Rear End	PDO	N	Wet - Snow
2007	3/27	Sat	13:26	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2007	5/25	Fri	7:41	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2007	8/3	Fri	8:47	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2007	8/9	Thur	14:58	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2007	9/16	Sun	10:54	East	Rubber Ave	East	Rubber	Hoadley	Side Collision	PDO	N	U
2007	9/20	Thur	U	West	Rubber Ave	South	Hoadley	Hoadley	Broadside	Injury	N	U
2007	11/3	Sat	18:28	East	Rubber Ave	South	Hoadley	Hoadley	Side Collision	PDO	N	U
2008	1/28	Mon	U	West	Rubber Ave			Hoadley	Pedestrian	Injury	Y	U
2008	3/12	Wed	U	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	4/3	Thur	20:53	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	4/24	Thur	14:58	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	5/19	Mon	9:42	North	Melbourne	North	Melbourne	Rubber Ave	Rear End	PDO	N	U
2008	6/18	Wed	11:26	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2008	7/8	Tues	10:07	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	PDO	N	U
2008	12/4	Thur	17:57	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2009	1/14	Wed	12:19	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2009	4/5	Sun	18:37	West	Rubber Ave	West	Rubber	Melborne	Rear End	Injury	N	U
2009	5/13	Wed	19:10	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	Injury	N	U
2009	5/22	Fri	U	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2009	5/24	Sun	8:01	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	PDO	N	Wet
2009	7/20	Mon	11:40	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2009	8/17	Mon	15:47	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2009	9/25	Fri	15:53	East	Rubber Ave			Melborne	Pedestrian	Injury	Y	U
2009	12/7	Mon	11:13	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	1/30	Sun	6:40	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	2/1	Mon	15:47	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	2/10	Thur	14:32	East	Rubber Ave	East	Rubber	Melborne	Rear End	Injury	N	U
2010	5/8	Sat	15:57	East	Rubber Ave	East	Rubber	Hoadley	Rear End	Injury	N	U
2010	6/16	Wed	17:55	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2010	6/21	Wed	14:14	West	Rubber Ave	South	Hoadley	Hoadley	Broadside	Injury	N	U
2010	7/27	Tues	11:22	East	Rubber Ave	East	Rubber	Hoadley	Rear End	Injury	N	U
2011	1/26	Mon	6:40	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2011	2/10	Thur	14:32	East	Rubber Ave	East	Rubber	Melborne	Rear End	Injury	N	U
2011	4/12	Tues	12:24	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2011	7/29	Fri	15:46	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2011	10/13	Thur	16:47	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2011	11/11		10:22	West	Rubber Ave	West	Rubber	Hoadley	Rear End	PDO	N	U
2011	11/21	Mon	14:21	West	Rubber Ave	South	Hoadley	Hoadley	Right Angle	Injury	N	U
2012	1/24	Tues	18:21	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2012	2/8	Wed	17:43	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2012	2/16	Thur	9:39	South	Hoadley	West	Rubber	Hoadley	Right Angle	PDO	N	U
2012	3/8	Thur	13:53	West	Rubber Ave	West	Rubber	Melborne	Rear End	Injury	N	U
2012	3/11	Sun	16:30	East	Rubber Ave	East	Rubber	Hoadley	Rear End	Injury	N	Dry
2012	6/8	Fri	15:56	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2012	6/30	Sat	15:04	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2012	9/30	Sun	15:00	North	Melbourne	East	Rubber	Melborne	Side Collision	PDO	N	U
2012	10/21	Sun	19:15	South	Hoadley	West	Rubber	Hoadley	Right Angle	Injury	N	U
2013	3/3	Sun	11:06	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2013	3/28	Thur	16:26	East	Rubber Ave	East	Rubber	Hoadley	Rear End	PDO	N	U
2013	5/2	Thur	15:52	West	Rubber Ave	West	Rubber	Hoadley	Rear End	Injury	N	Dry
2013	8/19	Mon	11:43	West	Rubber Ave	West	Rubber	Melborne	Side Collision	PDO	N	U
2013	9/13	Fri	10:01	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2013	10/2	Wed	13:46	West	Rubber Ave	West	Rubber	Melborne	Rear End	PDO	N	U
2014	1/16	Thur	14:06	West	Rubber Ave	West	Rubber	Hoadley	Side Collision	PDO	N	U



**Borough of Naugatuck
Collision Diagram - Hoadley Street & Melbourne Street at Rubber Avenue**

The spatial information on this map is not a survey and is subject to any changes an actual land survey discloses.



Attachment B

Department of Transportation 2011 Construction Cost Estimate

Location: Rubber Avenue
Town: Naugatuck
Date: September 2011

Department Estimate				
Item	Unit	Unit Price	Quantity	Cost
Cut bituminous concrete pavement	LF	\$4.00	700	\$2,800
concrete curbing	LF	\$32.00	600	\$19,200
Concrete sidewalk	SF	\$12.50	3000	\$37,500
Concrete sidewalk ramp	SF	\$17.00	225	\$3,825
Concrete driveway apron	SF	\$10.00	1000	\$10,000
Bituminous concrete driveway (commercial)	SY	\$40.00	280	\$11,200
Bituminous concrete driveway	SY	\$36.00	110	\$3,960
New Town Signal	EA	\$200,000.00	1	\$200,000
Removal and/or relocation of traffic signal equipment	LS	\$2,000.00	1	\$2,000
Removal of existing signing	LS	\$500.00	1	\$500
Sign face - sheet aluminum (Type III reflective sheeting)	SF	\$65.00	60	\$3,900
4" white type 1 epoxy resin pavement marking	LF	\$1.25	400	\$500
4" yellow type 1 epoxy resin pavement markings	LF	\$1.50	600	\$900
12" white type 1 epoxy resin pavement markings	LF	\$1.25	100	\$125
Epoxy resin pavement markings, symbols & legend	SF	\$4.00	200	\$800
Removal of pavement markings	SF	\$1.85	200	\$370
Construction signs Type III - reflective sheeting	SF	\$20.00	100	\$2,000
Type "c" catch basin top	EA	\$700.00	1	\$700

Construction Items		\$278,280
	Total	\$278,280

Mobilization	7.50%	\$20,871
Maint. & Prot. of Traffic	4.00%	\$11,131
Construction Staking	0.00%	\$0
Clearing & Grubbing		\$0
Traffic Person		\$5,000
	Total	\$37,002

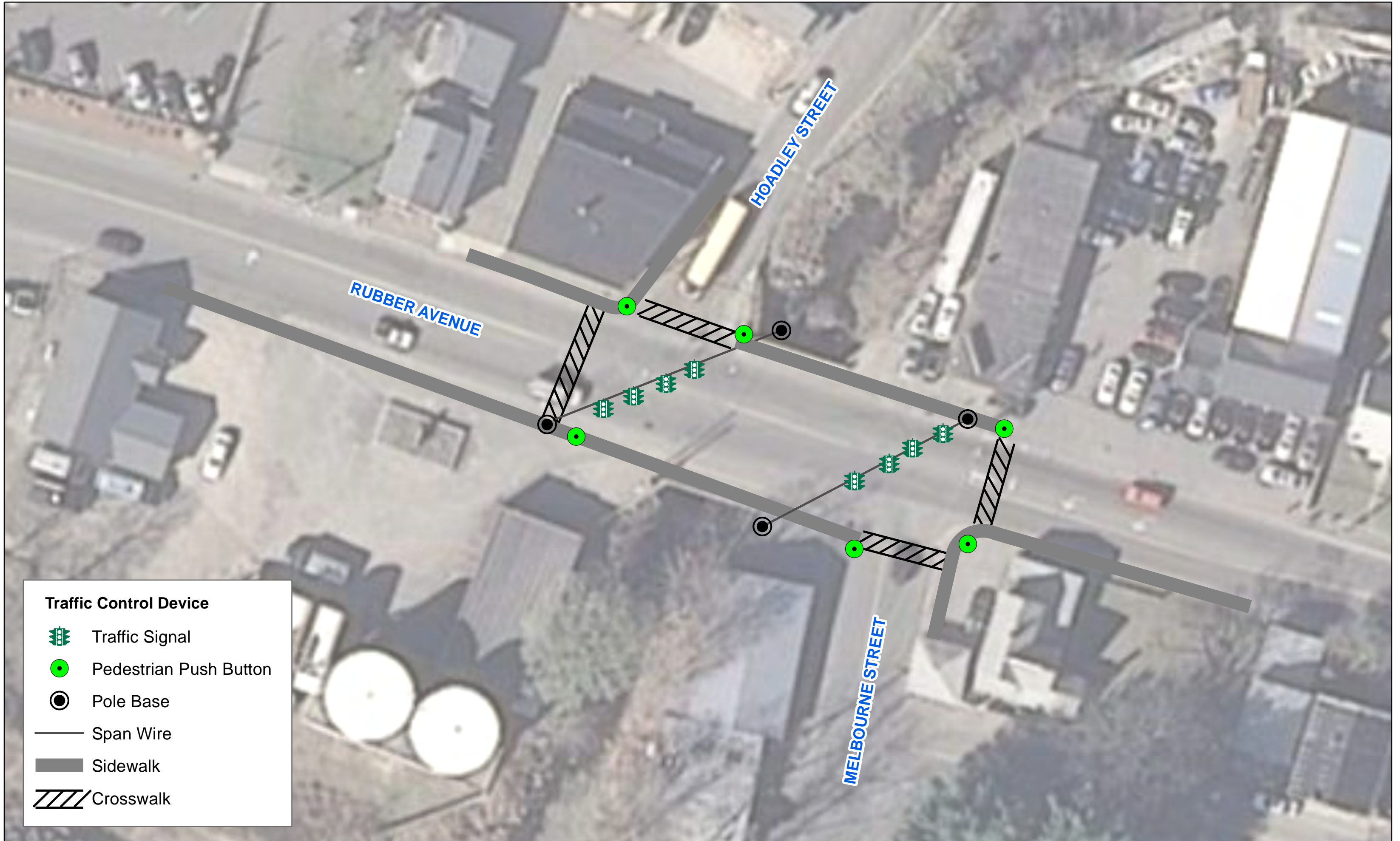
Total Contract Items		\$315,282
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Contingencies	10.00%	\$31,528
Incidentals	25.00%	\$78,821







Total Construction Cost		\$425,631
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Attachment D

Conceptual Signalization Plan.



Traffic Control Device

-  Traffic Signal
-  Pedestrian Push Button
-  Pole Base
-  Span Wire
-  Sidewalk
-  Crosswalk



Borough of Naugatuck - Concept Plan
Hoadley Street & Melbourne Street at Rubber Avenue Signalization Improvements
 Revised July 11, 2014

The spatial information on this map is not a survey and is subject to any changes an actual land survey discloses.

Attachment D
Accident Reports

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94



GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

DATE OF ACCIDENT: **Thu, Feb 15, 2007** MILITARY TIME: **17:52** ACCIDENT SEVERITY: Fatal Injury PDO VEHs INVOLVED # **2** PAGE # **1** of **2** POLICE CASE NO **07-3676**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Melbourne Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
1. Measure Distance _____ F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Plasky Robert** OPER #2 or PEDESTRIAN (Last, First, MI): **Obar Caroline**

ADDRESS (Street No & Name): **18 Williams Drive** PROPER LIC CLASS: Y-N Y **357 Bioski Road** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP: **Prospect CT 06704** SEX: M-F M **Middlebury CT 06438** SEX: M-F F

OPER LICENSE NO STATE DATE OF BIRTH: **216001520 CT 09/17/70** OPER LICENSE NO STATE DATE OF BIRTH: **105016951 CT 10/14/67**

OWNER (Last, First, MI - Enter same, if owner is operator): **PLasky Robert** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Obar Caroline**

ADDRESS (Street No & Name): **18 Williams Drive** ADDRESS (Street No & Name): **357 Bioski Road**

CITY or TOWN STATE ZIP BODY TYPE: **Prospect CT 06704 SUV** CITY or TOWN STATE ZIP BODY TYPE: **Middlebury CT 06438 SUV**

REGISTRATION NO STATE VEH YEAR & MAKE: **52C322 CT 2004 CHEVROLET** REGISTRATION NO STATE VEH YEAR & MAKE: **THEFUZ CT 2005 CHEVROLET**

VEH ID NO (VIN): **1GNDT13S842264791** VEH ID NO (VIN): **1GNDT13SX52293372**

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____ SOURCE of CARRIER NAME: _____ US DOT # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____ GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: V _____ HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): **14-218a*** SUBJ of ACTION: O _____ STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: _____

AUTOMOBILE INS CO.-NAME.-POLICY#: **CT Life and Casualty #1117855** AUTOMOBILE INS CO.-NAME.-POLICY#: **Allstate #9 19 056603 12/05**

PARTS of VEHICLE DAMAGED: **front drivers bumper and grill** PARTS of VEHICLE DAMAGED: **rear passanger bumper**

VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N

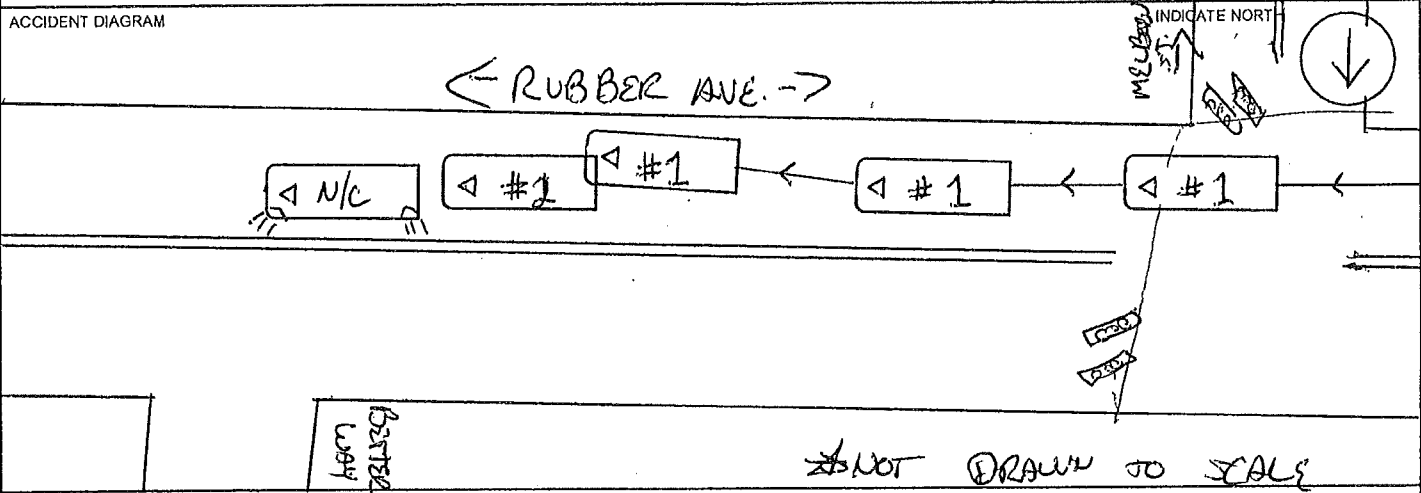
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J 12
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K 12
AA 11
AA 12
AA 23
AA 24

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14
3
09
21
22
2
21
22
1
02
2
2
2
2
AA 21
AA 22
AA 23
AA 24

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
1	1	N 01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1
2	2	N 01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1
3							
4							
5							
6							
7							

ALL INVOLVED PERSONS



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling on Rubber Avenue Traffic Unit # 2 Traveling on Rubber Avenue

Op.#1 states - That he was traveling east on Rubber Ave. through the intersection of Melborne St. Op.#1 states that while traveling through this intersection Veh.#2 stopped in front of him due to on coming traffic passing. Op.#1 stated that he applied his brakes but due to the snow on the roadway he slid into the rear passenger bumper of Veh.#2. Op.#1 stated that he tried to avoid striking Veh.#2 by turning to the right but was unable to do so. Veh.#1 suffered moderate damage to its front drivers bumper and grill.

Op.#2 states- That she was traveling east on Rubber Ave. Op.#2 stated that there was a vehicle in front of her waiting to make a left hand turn into Better Way Auto Sales so she was stopped behind this vehicle. Op.#2 stated that she observed in her rearview mirror Veh.#1 coming up fast. Op.#2 stated that she let off her brake and moves as far as she could forward before getting struck by Veh.#1 in the rear end. Veh.#2 suffered minor damage to its passenger side rear bumper.

This Officer states- That there were no reported injuries nor did either vehicle have to be towed. Rubber Ave. and Melborne St. is a busy well lit intersection. The roadway in this area was still slippery with snow and slush from a recent winter storm. Digital Photographs of the scene were taken. Sworn written statements were gathered by Op.#1 and Op.#2. Op.#1 was issued a verbal warning for **Traveling Unreasonably Fast for Conditions in violation of C.G.S.14-218a***.

1 DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER: Ptl. Peter Bosco PL17

POLICE AGENCY ID: Naugatuck PD

REPORT DATE: 2/18/2007

CASE STATUS: C - Open / C - Closed

SUPERVISOR: Sgt. Brian Newman S8

[Handwritten signature and initials]

Sgt. Strickland

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 Rev. 5/04



GPS READINGS: Latitude: _____ Time _____ Longitude: _____

R09
A 8
B 3
C 1

FOR DOT USE ONLY

DATE of ACCIDENT: **Sat, Mar 17, 2007** MILITARY TIME: **13:26** ACCIDENT SEVERITY: Fatal Injury PDO VEHs INVOLVED # **2** PAGE # **1** of **2** POLICE CASE NO **07-6479**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
 1. Measure Distance _____ F - Feet _____ T - Tenths of Mile _____ N - North _____ M - Meters _____ S - South _____ K - Kilometers _____ E - East _____ W - West _____
 Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI) **Bowser William C** OPER #2 or PEDESTRIAN (Last, First, MI) **Scanlon Jeff**

ADDRESS (Street No & Name) **49 Barn Finch Circle** PROPER LIC CLASS Y-N Y ADDRESS (Street No & Name) **240 Cherry Street** PROPER LIC CLASS Y-N Y

CITY or TOWN STATE ZIP **Naugatuck CT 06770** SEX M-F M CITY or TOWN STATE ZIP **Naugatuck CT 06770** SEX M-F M

OPER LICENSE NO STATE DATE OF BIRTH **231019765 Ct 11/20/38** OPER LICENSE NO STATE DATE OF BIRTH **186817510 Ct 06/14/78**

OWNER (Last, First, MI - Enter same, if owner is operator) **Bowser William C** OWNER'S (Last, First, MI - Enter same, if owner is operator) **Scanlon Jeff**

ADDRESS (Street No & Name) **49 Barn Finch Circle** ADDRESS (Street No & Name) **240 Cherry Street**

CITY or TOWN STATE ZIP BODY TYPE **Naugatuck CT 06770 4 Door** CITY or TOWN STATE ZIP BODY TYPE **Naugatuck CT 06770 SUV**

REGISTRATION NO STATE VEH YEAR & MAKE **467GRO CT 2001 BUICK** REGISTRATION NO STATE VEH YEAR & MAKE **957UTL CT 2001 JEEP**

VEH ID NO (VIN) **1G4CU541014236574** VEH ID NO (VIN) **1J4GW48S31C535621**

CARRIER _____ CARRIER _____

CARRIER ADDRESS (Street, City or Town, State, Zip) _____ CARRIER ADDRESS (Street, City or Town, State, Zip) _____

SOURCE of CARRIER NAME _____ US DOT # _____ SOURCE of CARRIER NAME _____ US DOT # _____
 SF - Shipping Papers/Trip Manifest IC, MC # _____
 D - Driver _____
 S - Side of Vehicle _____

GROSS VEH WEIGHT _____ HAZARDOUS MATERIAL PLACARD _____ GROSS VEH WEIGHT _____ HAZARDOUS MATERIAL PLACARD _____
 Required Y-N N 4 Digit# _____
 Displayed Y-N N 1 Digit# _____

HAZARDOUS CARGO _____ ENFORCEMENT ACTION TAKEN _____ HAZARDOUS CARGO _____ ENFORCEMENT ACTION TAKEN _____
 Released Y-N N N None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S) _____ SUBJ of ACTION _____ STATUTE or ORDINANCE NO(S) _____ SUBJ of ACTION _____
 O - Operator - C - Carrier OW - Owner - P - Pedestrian

AUTOMOBILE INS CO - NAME - POLICY# **Hartford Ins Co. - Pol#55phe996984-227801** AUTOMOBILE INS CO - NAME - POLICY# **Travelers - Pol#980739244-101-1**

PARTS of VEHICLE DAMAGED **Hood and Grill** PARTS of VEHICLE DAMAGED **None Visible**

VEHICLE TOWED TO _____ TOWED DUE TO DAMAGE Y-N N VEHICLE TOWED TO _____ TOWED DUE TO DAMAGE Y-N N

02
4
35

J
J

U
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K

K
Y
Z

AA
AA
AA
AA

D 1
E 1
F 4

G 2
H 02
I 1
J 35

J
J

U
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V 1
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K
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AA
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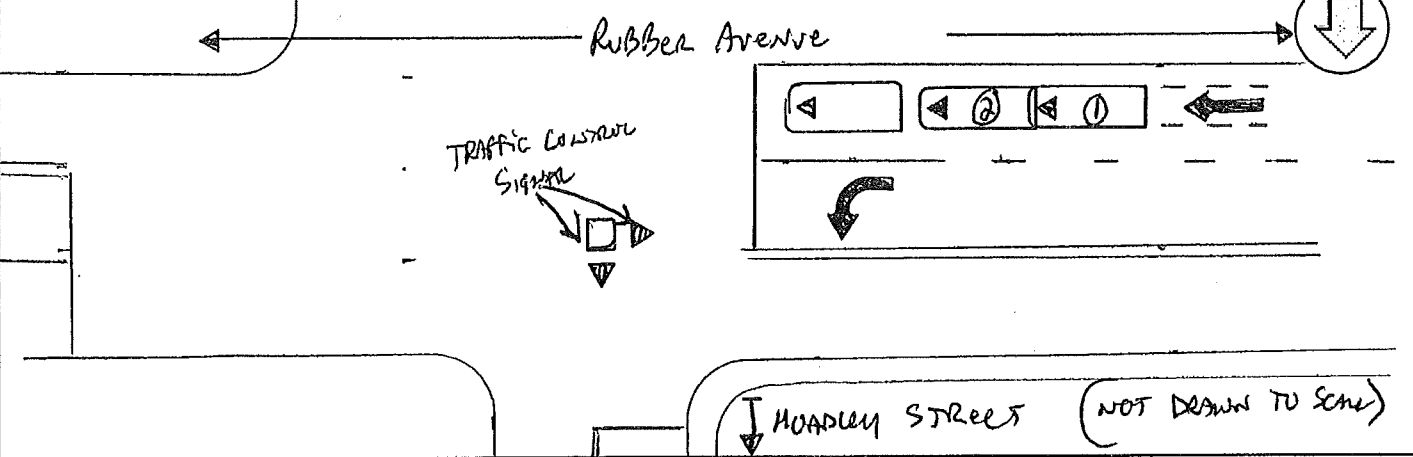
	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q	
	L	M	N					
1	1	N	01		4	2	1	1
2	2	N	01		4	2	1	2
3								3
4								4
5								5
6								6
7								7

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

INDICATE NORTH



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

That on 03/17/07 at approx: 13:29 hrs, this writer was dispatched to Rubber Avenue and Hoadley Street on a reported minor MVA with no injury.

Upon arrival, this writer asked all involved about injury. (No Injuries were reported). This writer then asked what had occurred.

Oper #1: told this writer that he was traveling on Rubber Avenue (eastbd) when he approached the red light at Rubber Avenue / Hoadley Street. Oper #1 said he saw Veh #2 was stopped ahead of him. Oper #1 said the light turned green and as he was looking at the light, he realized that Veh #2 was still stopped. Oper#1 said he hit the brakes but then hit the back of veh #2.

Oper #2: told this writer that he was stopped at the red light at Rubber Avenue and Hoadley Street when his vehicle was hit from behind by Veh #1. Oper #2 satted that the light had turned green just prior to his vehicle being hit from behind.

Weather: Clear

Roadway Surface: Wet with snowy patches

Vehicular Traffic: Moderate

Non alcohol related incident

DAMAGE PROPERTY OF POT. INV. VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	N/a		
	NAME and ADDRESS of PROPERTY OWNER	N/a		
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	N/a		
	NAME and ADDRESS of PROPERTY OWNER	N/a		
RANK and SIGNATURE of INVESTIGATING OFFICER	POLICE AGENCY ID	REPORT DATE	CASE STATUS	SUPERVISOR
Ptl. <i>[Signature]</i> #09	Naugatuck PD	3/17/2007	<input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	Sgt. Raymond Savoy S1

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT: Mon, Jun 25, 2007; MILITARY TIME: 07:41; ACCIDENT SEVERITY: Fatal, Injury, PDO, X; VEHS INVOLVED #: 2; PAGE #: 1 of 2; POLICE CASE NO: 07-15863

CITY or TOWN: Naugatuck; TOWN CODE: 088; ACCIDENT OCCURRED ON: Rubber Avenue at Melbourne Street

IF NOT AT INTERSECTION: 2. Direction; 3. Give nearest intersecting street, town line or mile marker of

TRAFFIC UNIT # 1: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle; TRAFFIC UNIT # 2: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Marino Charlene A; OPER #2 or PEDESTRIAN (Last, First, MI): Lange Peter

ADDRESS (Street No & Name): 153 Gorman Street; 111 Mallane Lane Apt 19a

CITY or TOWN STATE ZIP: Naugatuck CT 06770; Naugatuck CT 06770

OPER LICENSE NO STATE DATE of BIRTH: 186941355 CT 06/15/78; 081983124 CT 08/03/39

OWNER (Last, First, MI - Enter same, if owner is operator): Chuckta Dorlores; Lange Peter

ADDRESS (Street No & Name): 53 Conrad Street; 111 Mallane Lane

CITY or TOWN STATE ZIP BODY TYPE: Naugatuck CT 06770 4 Door; Naugatuck CT 06770 4 Door

REGISTRATION NO STATE VEH YEAR & MAKE: 623SVK CT 1993 SATURN; 781KWM CT 2003 NISSAN

VEH ID NO (VIN): 1G8ZK5571PZ269063; 3N1CB51D23L789526

CARRIER; CARRIER ADDRESS (Street, City or Town, State, Zip)

SOURCE of CARRIER NAME: SP - Shipping Papers/Trip Manifest; D - Driver; S - Side of Vehicle

GROSS VEH WEIGHT; HAZARDOUS MATERIAL PLACARD: Required Y-N; Displayed Y-N

HAZARDOUS CARGO; ENFORCEMENT ACTION TAKEN: N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): 14-240; SUBJ of ACTION: O - Operator - C - Carrier, OW - Owner - P - Pedestrian

AUTOMOBILE INS CO - NAME - POLICY#: Allstate #0254526660202; Liberty Mutual #A0221235035701

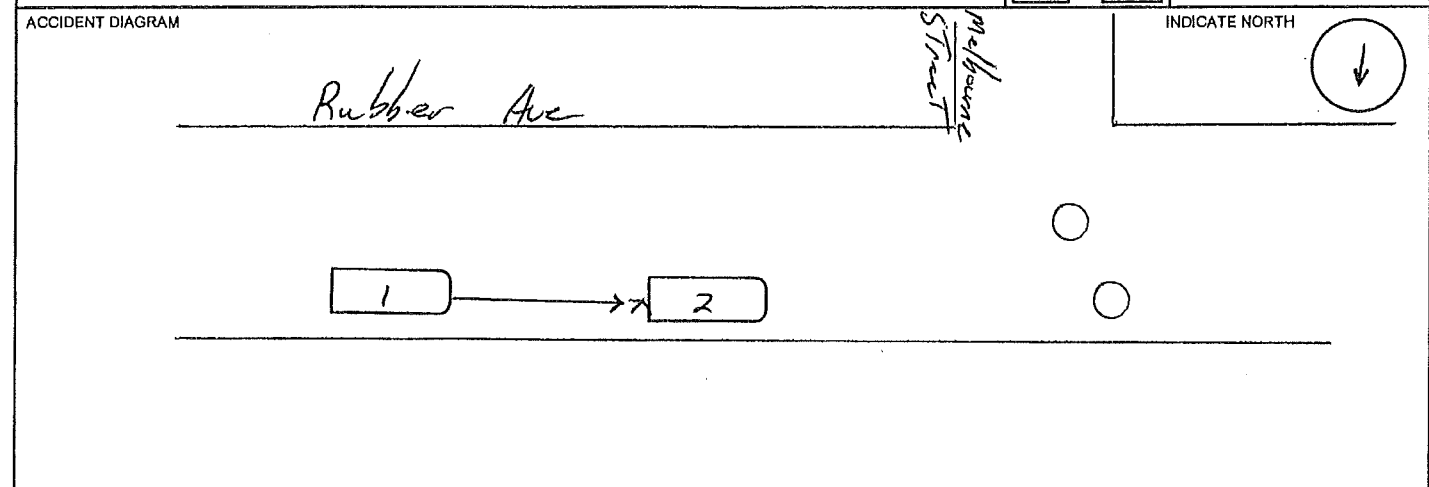
PARTS of VEHICLE DAMAGED: Front Bumper; Rear Bumper

VEHICLE TOWED TO: TOWED DUE TO DAMAGE Y-N N

Table with columns L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON, DOB, O, P, Q. Includes names Marino Charlene A and Lange Peter.

02, 1, 01, 11, 12, U, K, X, Y, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AP, AQ, AR, AS, AT, AU, AV, AW, AX, AY, AZ

09, 1, 1, 1, 1, 4, 2, 02, 2, 35, 21, 22, 2, 21, 22, 1, 08, 21, 22, 23, 24, ALL INVOLVED PERSONS



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling **W** on Rubber Avenue Traffic Unit # 2 Travelling **W** on Rubber Avenue

Operator of **Vehicle #1** stated that she did not notice **Vehicle #2** stopping in front of her and the front of her vehicle Struck the rear of **Vehicle #2** causing very little damage. There were no reported or observed injuries.

Operator of **Vehicle #2** stated that he was stopping for a red light when his vehicle was struck.

Operator of **Vehicle #1** was given a Verbal Warning for Following too Close.

DAMAGE PROPERTY OR VEHICLES IF FOR RED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>[Signature]</i> Ptl. James Hennessey PL01	POLICE AGENCY ID Naugatuck PD	REPORT DATE 6/27/2007	CASE STATUS <input checked="" type="checkbox"/> C - Closed <input type="checkbox"/> O - Open	SUPERVISOR <i>[Signature]</i> Lt. Jeremiah Scully Lt1
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3

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

R 09

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT Fri, Aug 3, 2007	MILITARY TIME 0847	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 07-19229
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Melbourne Street
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IF NOT AT INTERSECTION

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers

2. Direction

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
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OPER #1 or PEDESTRIAN (Last, First, MI) Rulsil Jill	OPER #2 or PEDESTRIAN (Last, First, MI) Sounanthanam Somchine
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ADDRESS (Street No & Name) 85 Morning Dove Road	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 107 Warm Earth Road	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> F
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OPER LICENSE NO 117279939	STATE CT	DATE OF BIRTH 11/04/77	OPER LICENSE NO 044873444	STATE CT	DATE OF BIRTH 04/14/65
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OWNER (Last, First, MI - Enter same, if owner is operator) Rulsil Jill	OWNER'S (Last, First, MI - Enter same, if owner is operator) Sounanthanam Somchine
--	--

ADDRESS (Street No & Name) 85 Morning Dove Road	ADDRESS (Street No & Name) 1062 May Street
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CITY or TOWN STATE ZIP Naugatuck CT 06770	BODY TYPE Station	CITY or TOWN STATE ZIP Naugatuck CT 06770	BODY TYPE Station
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REGISTRATION NO 338MSP	STATE CT	VEH YEAR & MAKE 2003 MAZDA	REGISTRATION NO 994TNM	STATE CT	VEH YEAR & MAKE 2005 HONDA
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VEH ID NO (VIN) JM3LW28A630370071	VEH ID NO (VIN) 5FRNL383495B406987
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input checked="" type="checkbox"/> N Displayed Y-N <input checked="" type="checkbox"/> N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input checked="" type="checkbox"/> N Displayed Y-N <input checked="" type="checkbox"/> N
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HAZARDOUS CARGO Released Y-N <input checked="" type="checkbox"/> N	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input checked="" type="checkbox"/> N	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S) None	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian
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AUTOMOBILE INS CO.-NAME.-POLICY# Allstate / 025334900 11/03	AUTOMOBILE INS CO.-NAME.-POLICY# Geico / 4019 90 1885
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PARTS of VEHICLE DAMAGED Front End - Bumper	PARTS of VEHICLE DAMAGED Rear End - Bumper
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VEHICLE TOWED TO Not	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N	VEHICLE TOWED TO None	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q
1	1	N	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				4	2	1
2	2	N	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				4	2	1
3	1	N	Rulsil	Tyler	85 Morning Dove Rd. Naugatuck, CT 06770	05/09/03	4	3	1
4	2	N	Sounanthanam	Marina	1062 may St Naugatuck, CT 06770	05/24/00	4	3	1
5	2	N	Sounanthanam	Tyler	1062 may St Naugatuck, CT 06770	09/29/96	4	3	1
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7									

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31
21
22
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K
V
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8
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09
AA
AA
AA

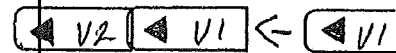
ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

HOBBY ST

INDICATE NORTH



RUBBER AVE

MELBOURNE ST

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Avenue

Traffic Unit # 2 Traveling W on Rubber Avenue

On 8/3/07 at 8:49 AM, I was dispatched to a minor two vehicle collision on Rubber Ave. at Melbourne St..

Upon arrival, I spoke with the occupants and operators of both vehicles who advised they were not injured and no injuries were observed by this officer.

I spoke with the operator of V1, Ms. Jill Ruisi who stated that she was traveling west on Rubber Ave. approaching a red light at the intersection of Melbourne St. and noticed the car in front of her had stopped for the light. Ms. Ruisi advised that she began to brake, but that she was unable to stop fully before striking the back of the vehicle in front of her. Ms. Ruisi advised that she did not know if something was wrong with her brakes and they were checked by this officer. I noticed that the brakes appeared to be working, however it was noticed that when applied the pedal was "grabbing" low.

I then spoke with the operator of V2, Ms. Somchine Sounanthanam who stated that she was stopped at a red traffic light traveling west on Rubber Ave. at Melbourne St.. Ms. Sounanthanam stated that while stopped at the light her vehicle was struck from behind by V1

I observed that the two vehicles suffered the following damage as a result of the collision: V1 suffered minor damage in the form of scrapes and scuff marks on its front fender. V2 suffered minor damage in the form of dents and scrapes its rear bumper. Both vehicles were able to be driven from the scene, however the operator of V1 decided to park her car in a private parking area to have it inspected and or repaired.

Based on the above statements and observations made on scene, I determined that V1 was at fault and issued Ms. Ruisi a written warning for "Following Too Closely" (GS 14-240).

No further action was taken.

DAMAGE TO PROPERTY OF OTHER VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Bryan Cammarata PL29	POLICE AGENCY ID Naugatuck PD	REPORT DATE 8/4/2007	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Raymond Savoy S1
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Handwritten signature and initials at the bottom left of the page.

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 Rev. 5/94



GPS READINGS: Latitude: _____ Time _____ Longitude: _____

09
A 1
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J 31
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M 2
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O 2
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Q 1
R 1
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T 1
U 1
V 1
W 1
X 1
Y 1
Z 1
AA 1
AB 1
AC 1
AD 1
AE 1

DATE OF ACCIDENT: **Thu, Aug 9, 2007** MILITARY TIME: **14:58** ACCIDENT SEVERITY: Fatal Injury PDO VEH INVOLVED #: **2** PAGE #: **1** of **2** POLICE CASE NO: **07-19826**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Melbourne Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____

1. Measure Distance _____ F - Feet _____ T - Tenths of Mile _____ M - Meters _____ K - Kilometers _____ N - North _____ S - South _____ E - East _____ W - West _____

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Douty Earl** OPER #2 or PEDESTRIAN (Last, First, MI): **Santos Josephine**

ADDRESS (Street No & Name): **200 Beacon Valley Road** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): **55 Park Avenue** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP: **Beacon Falls CT 06770** SEX: M-F M CITY or TOWN STATE ZIP: **Naugatuck CT 06770** SEX: M-F F

OPER LICENSE NO STATE DATE OF BIRTH: **240226285 CT 12/10/36** OPER LICENSE NO STATE DATE OF BIRTH: **164574707 CT 04/04/64**

OWNER (Last, First, MI - Enter same, if owner is operator): **Douty Earl** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Santos Josephine**

ADDRESS (Street No & Name): **200 Beacon Valley Road** ADDRESS (Street No & Name): **55 Park Avenue**

CITY or TOWN STATE ZIP BODY TYPE: **Beacon Falls CT 06770 4 Door** CITY or TOWN STATE ZIP BODY TYPE: **Naugatuck CT 06770 4 Door**

REGISTRATION NO STATE VEH YEAR & MAKE: **KK585 CT 1999 DODGE** REGISTRATION NO STATE VEH YEAR & MAKE: **168PTM CT 1997 HONDA**

VEH ID NO (VIN): **2B3HD56J4XH505678** VEH ID NO (VIN): **1HGCD5653VA065462**

CARRIER: _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARBO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): **N/A** SUBJ of ACTION: **/** STATUTE or ORDINANCE NO(S): **14-240a** SUBJ of ACTION: **O**

AUTOMOBILE INS CO--NAME--POLICY#: **Safeco -- #X5155259** AUTOMOBILE INS CO--NAME--POLICY#: **Middlesex Mutual -- #AU0008015641**

PARTS of VEHICLE DAMAGED: **Rear Bumper** PARTS of VEHICLE DAMAGED: **Front Bumper**

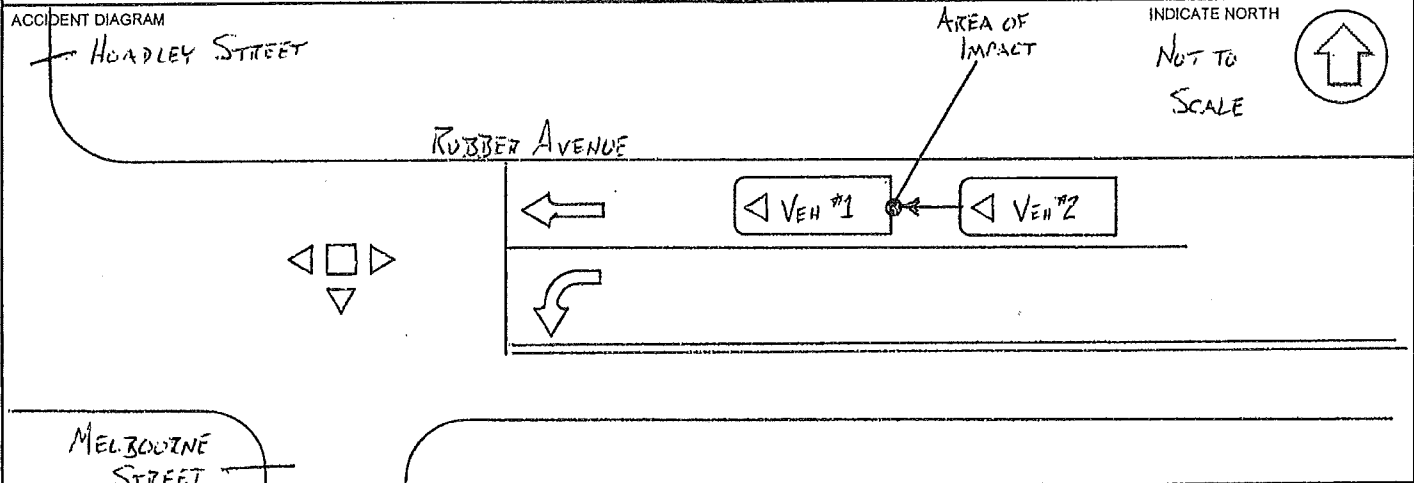
VEHICLE TOWED TO: **N/A** TOWED DUE TO DAMAGE: Y-N N VEHICLE TOWED TO: **N/A** TOWED DUE TO DAMAGE: Y-N N

02
2
31
/1
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/11
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X
Y
AA
AA
AA
AA

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
1	1	N 01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1
2	2	N 01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1
3							
4							
5							
6							
7							

ALL INVOLVED PERSONS



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Travelling W on Rubber Avenue Traffic Unit # 2 Travelling W on Rubber Avenue

Operator #1 stated he was stopped for traffic at the West bound traffic signal on Rubber Avenue. Operator #1 stated Vehicle #2, which was behind him, drove into the rear of his vehicle when the light turned green. Operator #1 stated both vehicles were pulled to the side of the road. Operator #1 stated there was minor damage to his vehicle. Operator #1 stated he was not injured. Operator #1 gave me the following sworn, written statement: *"I'm stopped at traffic light about 3 deep the light changed and the car behind me hit me when the light changed. She can't find insurance card I called the police."*

Operator #2 stated she was stopped for traffic at the West bound traffic signal on Rubber Avenue. Operator #2 stated Vehicle #1, which was directly in front of her vehicle, started to move forward when the light turned green, but then it stopped. Operator #2 stated the front of her vehicle collided with the rear of Vehicle #1. Operator #2 stated both vehicles pulled to the side of the road. Operator #2 stated there was minor damage to her vehicle's front bumper. Operator #2 stated she was not injured. Operator #2 gave me the following sworn, written statement: *"I was stopped at the light. Traffic began to move then suddenly stopped and I hit the car in front of me."*

Officer: Upon my arrival I saw both vehicles moved to the right side of the road. I saw no skid marks. I saw broken amber glass which matched the damage to Vehicle #2. The damage to the vehicles was consistent with the type of collision described by both operators. Photographs were taken of the scene and both vehicles. Based on the above facts and circumstances Operator #2 was found to be at fault, and issued a written warning, for Following Too Closely in violation of Connecticut General Statute #14-240a.

End of Report.

INVESTIGATOR'S REPORT
 IN POLICE VEHICLES

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>[Signature]</i> Ptl. Derek Vostlinak PL37	POLICE AGENCY ID Naugatuck PD	REPORT DATE 8/12/2007	CASE STATUS <input checked="" type="checkbox"/> C - Closed <input type="checkbox"/> O - Open	SUPERVISOR <i>[Signature]</i> Sgt. Steven Hunt S6
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude: _____
Time Longitude: _____



FOR DOT USE ONLY

DATE of ACCIDENT Sun, Sep 16, 2007	MILITARY TIME 10:54	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 07-23112
--	-------------------------------	---	-----------------------------	--------------------------------	-----------------------------------

CITY of TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
----------------------------------	------------------------	---

IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance F - Feet T - Tenths of Mile N - North S - South
 M - Meters E - East W - West
 Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Perreira Victor	OPER #2 or PEDESTRIAN (Last, First, MI) Ferraiolo Patricia
---	--

ADDRESS (Street No & Name) 35 High Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> N	ADDRESS (Street No & Name) 53 Walnut Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	---	---

CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> F
---	--	---	--

OPER LICENSE NO STATE DATE of BIRTH 04/28/63	OPER LICENSE NO STATE DATE of BIRTH 024477404 CT 02/27/61
--	---

OWNER (Last, First, MI - Enter same, if owner is operator) Perreira Victor	OWNER'S (Last, First, MI - Enter same, if owner is operator) Ferraiolo Patricia
--	---

ADDRESS (Street No & Name) 35 High Street	ADDRESS (Street No & Name) 53 Walnut Street
---	---

CITY or TOWN STATE ZIP Naugatuck CT 06770	BODY TYPE 4 Door	CITY or TOWN STATE ZIP Naugatuck CT 06770	BODY TYPE Station
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REGISTRATION NO STATE VEH YEAR & MAKE 540TER CT 1991 ACURA	REGISTRATION NO STATE VEH YEAR & MAKE 852UWM CT 1994 FORD
--	---

VEH ID NO (VIN) JH4KA766MC004459	VEH ID NO (VIN) 1FMCU24X7RUD45175
--	---

CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
---	-----------------------	---	-----------------------

GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN A - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-213b 14-36(a) 14-236	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO - NAME - POLICY# NONE	AUTOMOBILE INS CO - NAME - POLICY# Infinity #106-600007426001
---	---

PARTS of VEHICLE DAMAGED Left Side	PARTS of VEHICLE DAMAGED Right Front
--	--

VEHICLE TOWED TO Sibby's Automotive	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>
---	--	------------------	---

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q		
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	3	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	3	1	2
3									3
4									4
5									5
6									6
7									7

02
1
10

- 11
- 12

0
- 11
- 12

1
4
4

AA
- 11
- 12
- 13
- 14

ALL INVOLVED PERSONS

04
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 1
J 09

21 -
22 -

U
21 -
22 -

V 1
W 07

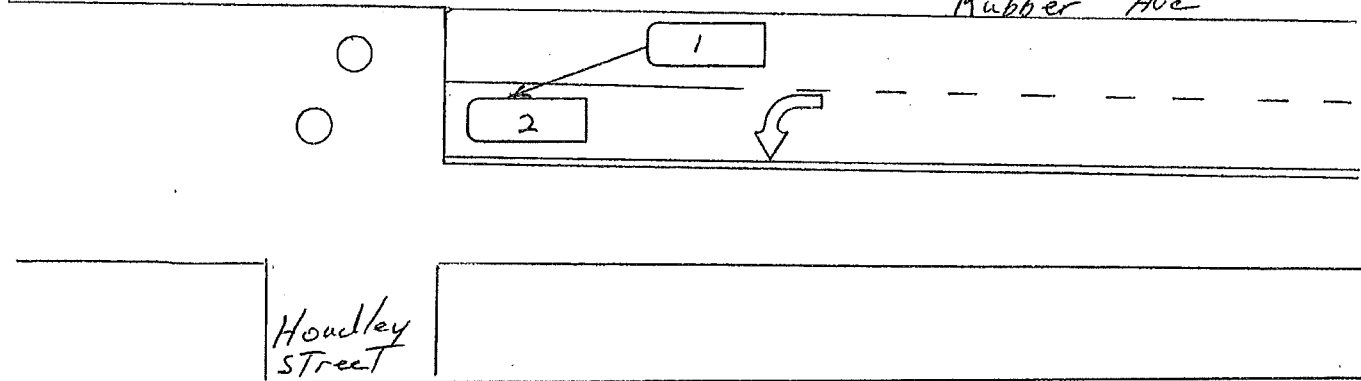
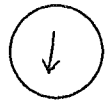
X
21 -
22 -

AA
21 -
22 -
23 -
24 -

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

INDICATE NORTH



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator of **Vehicle #2** stated that she was stopped in a left turn only lane for a red light when her vehicle was struck by **Vehicle #1** on the right side.

Operator of **Vehicle #1** stated that he wanted to make a left turn but was in the wrong lane and did not see **Vehicle #2** on his left and he does not know what happened.

Operator of **Vehicle #1** had a Uruguay Identification but no United States or correct International Drivers License and stated that he had been in the US for three years. This Vehicle was registered to this operator but he could find no valid insurance paperwork. This operator was given Summons #MB 473938 for No Insurance, No License and Improper Lane Change with a court date of 9/27/07.

Damage to both vehicles was minor and there were no reported or observed injuries. **Vehicle #1** was towed by Sibby's.

DAMAGE PROPERTY OCCURRED IN INVOLVED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. James Hennessey PL01	POLICE AGENCY ID Naugatuck PD	REPORT DATE 9/17/2007	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Raymond Savoy S1
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Thu, Sep 20, 2007	MILITARY TIME	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 07-23496
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
----------------------------------	------------------------	---

IF NOT AT INTERSECTION

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers

2. Direction N - North S - South E - East W - West

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Marino Eileen	OPER #2 or PEDESTRIAN (Last, First, MI) Kenzlzerski Barbara
---	---

ADDRESS (Street No & Name) 16 Goss St.	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 53 Conrad Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
--	---	---	---

CITY or TOWN STATE ZIP Waterbury CT 06706	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> F
---	--	---	--

OPER LICENSE NO STATE DATE OF BIRTH 190939670 CT 07/05/20	OPER LICENSE NO STATE DATE OF BIRTH 131646276 CT 01/21/44
---	---

OWNER (Last, First, MI - Enter same, if owner is operator) Marino Eileen	OWNER'S (Last, First, MI - Enter same, if owner is operator) Kenzlzerski Barbara
--	--

ADDRESS (Street No & Name) 16 Goss St.	ADDRESS (Street No & Name) 53 Conrad Street
--	---

CITY or TOWN STATE ZIP BODY TYPE Waterbury CT 06706 4 Door	CITY or TOWN STATE ZIP BODY TYPE Naugatuck CT 06770 4 Door
--	--

REGISTRATION NO STATE VEH YEAR & MAKE 442WFC CT 88 DODGE	REGISTRATION NO STATE VEH YEAR & MAKE 763TPD CT 94 PONTIAC
--	--

VEH ID NO (VIN) 1B3BD46D7JF121509	VEH ID NO (VIN) 1G2NE55M2RM538211
---	---

CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME SP - Shipping Papers/Trib Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trib Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit Displayed Y-N <input type="checkbox"/> 1 Digit	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit Displayed Y-N <input type="checkbox"/> 1 Digit
------------------------------	---	------------------------------	---

HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> V - Verbal Warning N - None, A - Arrest, W - Written Warning	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> / N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-299	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S) /	SUBJ of ACTION <input type="checkbox"/> / O - Operator - C-Carrier OW-Owner - P-Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# AIG #4835933	AUTOMOBILE INS CO-NAME-POLICY# Trumbull Ins. #55PHK138714-366903
---	--

PARTS of VEHICLE DAMAGED Front bumper	PARTS of VEHICLE DAMAGED Driver side door
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VEHICLE TOWED TO /	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N	VEHICLE TOWED TO /	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N
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L M N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
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1 1 N 01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	3	1	1
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2 2 C 01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	3	1	2
----------	---	--	---	---	---	---

3						3
---	--	--	--	--	--	---

4						4
---	--	--	--	--	--	---

5						5
---	--	--	--	--	--	---

6						6
---	--	--	--	--	--	---

7						7
---	--	--	--	--	--	---

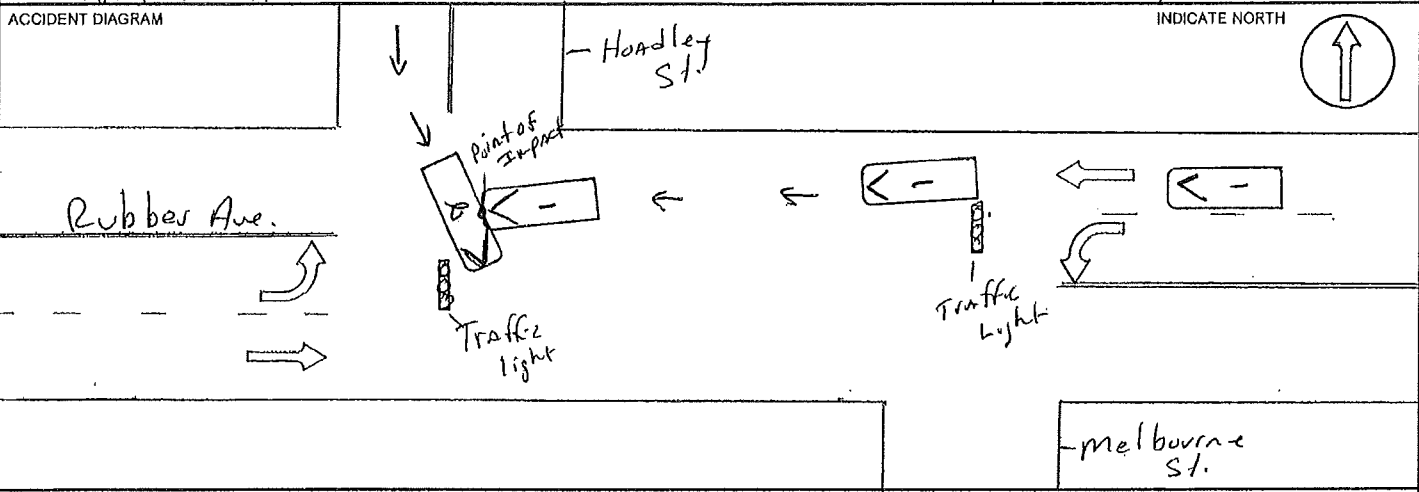
ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

R 08
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 2
J 21
K 21
L 21
M 1
N 03
O 2
P 2
Q 2
R 2
S 2
T 2
U 2
V 1
W 03
X 2
Y 2
Z 2
AA 21
AB 22
AC 23
AD 24

ACCIDENT DIAGRAM

INDICATE NORTH



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling S on Hoadley Street

Traffic Unit # 2 Travelling W on Rubber Avenue

Operator #1 stated she was traveling west on Rubber Ave. She stated she was rushing to get her sick cat to the Veterinarian on Rubber Ave. when she struck vehicle #2 which was traveling south from Hoadley St. in the intersection of Rubber Ave. and Hoadley St. Operator #1 stated she did not know if she had a red light or a green light.

Operator #2 stated she was traveling south from Hoadley St. attempting to make a left going east on Rubber Ave. when vehicle #1 struck her in the intersection. Operator #2 stated she had a green light.

Officer states the contributing factor applies to Operator #1 for 14-299 Failure To Obey Traffic Signal, due to the fact that she did not know if her light was green or red. Operator #2 was transported to the Hospital by EMS for possible injuries due to the accident. No other injuries were reported.

DAMAGE PROPERTY CURB/BIKE IN VOL VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Alan Crosswalk PL24	POLICE AGENCY ID Naugatuck PD	REPORT DATE 9/28/2007	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O-Open <input type="checkbox"/> C-Closed	SUPERVISOR Sgt. Raymond Savoy S1
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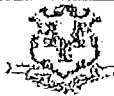
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#24

[Handwritten signature]

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude: _____
Time Longitude: _____



FOR DOT USE ONLY

DATE of ACCIDENT Sat, Nov 3, 2007	MILITARY TIME 1828	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 07-27784
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
----------------------------------	------------------------	---

IF NOT AT INTERSECTION

1. Measure Distance _____

2. Direction _____

3. Give nearest intersecting street, town line or mile marker of _____

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Pollock Brandi	OPER #2 or PEDESTRIAN (Last, First, MI) Buchanan Patricia
--	---

ADDRESS (Street No & Name) 23 Village Circle	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 19 Dayton Road	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
--	---	---	---

CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> F
---	--	---	--

OPER LICENSE NO 028398208	STATE CT	DATE of BIRTH 02/26/91	OPER LICENSE NO 163016346	STATE CT	DATE of BIRTH 04/02/52
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OWNER (Last, First, MI - Enter same, if owner is operator) Pollock Michael	OWNER'S (Last, First, MI - Enter same, if owner is operator) Buchanan Patricia
--	--

ADDRESS (Street No & Name) 23 Village Circle	ADDRESS (Street No & Name) 19 Dayton Road
--	---

CITY or TOWN STATE ZIP Naugatuck CT 06770	BODY TYPE 4 Door	CITY or TOWN STATE ZIP Naugatuck CT 06770	BODY TYPE SUV
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REGISTRATION NO DEVOMA	STATE CT	VEH YEAR & MAKE 2007 CADILLAC	REGISTRATION NO 671-FBK	STATE CT	VEH YEAR & MAKE 2003 SUBARU
----------------------------------	--------------------	---	-----------------------------------	--------------------	---------------------------------------

VEH ID NO (VIN) 1G6DM57T970128687	VEH ID NO (VIN) JF1SG65653H721107
---	---

CARRIER	*CARRIER*
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CARRIER ADDRESS(Street, City or Town, State, Zip)*	*CARRIER ADDRESS*(Street, City or Town, State, Zip)*
--	--

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
---	-----------------------	---	-----------------------

GROSS VEH WEIGHT Relaxed #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Relaxed #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
-------------------------------	---	-------------------------------	---

HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-230(a)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
--	---	----------------------------	---

AUTOMOBILE INS CO.-NAME.-POLICY# Nationwide 51 06 D 961135	AUTOMOBILE INS CO.-NAME.-POLICY# United Service Auto Ins. 001805778U
--	--

PARTS of VEHICLE DAMAGED Front Dnd, Drivers Side	PARTS of VEHICLE DAMAGED Drivers Side
--	---

VEHICLE TOWED TO AT Transmissions	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Y	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>
---	--	------------------	---

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

	L M N			NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
	1	2	3					
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1
3	2	N	03	Monem Shay 78 Fox Run Rd	08/28/91	4	2	1
4								
6								
6								
7								

8

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

INDICATE NORTH



8

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling S on Hoadley Street

Traffic Unit # 2 Traveling E on Rubber Avenue

OP#1: Brandi Pollock stated that she was traveling south on Hoadley St. Pollock stated that the traffic light was green at the bottom the hill and she tried to take a right hand turn onto Rubber Ave. Pollock stated that she took the turn to wide and struck another vehicle that was stopped at the red traffic light on Rubber Ave.

OP#2: Patricia Buchanan stated that she was traveling east on Rubber Ave. Buchanan stated that she got into the left hand turn lane at the intersection of Rubber Ave. and Hoadley St. and stopped at the red traffic light. Buchanan stated that a vehicle came off of Hoadley St. and took the turn to wide. Buchanan stated that the vehicle that came off of Hoadley St. struck her vehicle in the drivers side.

Officer: Upon arrival both vehicles were still in the position of final rest. All parties involved in the accident stated that they were not injured. Through my investigation, I determined that OP#1 was at fault for this accident. OP#1 was issued a written warning for Failure to Drive Right (14-230(a)).

No further action.

DM MACHICHO PROPERTY
CURRENTLY
IF YOU WED VEHICLES

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER

POLICE AGENCY ID

REPORT DATE

CASE STATUS

SUPERVISOR

Ptl. Ronald Pugliese PL28

Naugatuck PD

11/6/2007

C

O - Open
C - Closed

Lt. Robert Allen Lt4

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 Rev. 5/94

GPS READINGS: Latitude: _____ Time: _____ Longitude: _____

FOR DOT USE ONLY

DATE OF ACCIDENT: **Mon, Jan 28, 2008** MILITARY TIME: _____ ACCIDENT SEVERITY: Fatal Injury PDO VEHs INVOLVED #: **1** PAGE #: **1** of **2** POLICE CASE NO: **08-2555**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

IF NOT AT INTERSECTION: 2. Direction: _____ 3. Give nearest intersecting street, town line or mile marker of: _____

1. Measure Distance: _____ F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Savochkina Natalia** OPER #2 or PEDESTRIAN (Last, First, MI): **Pedestrian Li, Lijuan**

ADDRESS (Street No & Name): **1081 New Haven Road** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): **151 Andrew Ave Apt 93** PROPER LIC CLASS: Y-N

CITY or TOWN STATE ZIP: **Naugatuck CT 06770** SEX: M-F F CITY or TOWN STATE ZIP: **Naugatuck CT 06770** SEX: M-F

OPER LICENSE NO: **108449178** STATE: **CT** DATE OF BIRTH: **10/16/57** OPER LICENSE NO: _____ STATE: _____ DATE OF BIRTH: _____

OWNER (Last, First, MI - Enter same, if owner is operator): **Falstein Yury** OWNER'S (Last, First, MI - Enter same, if owner is operator): _____

ADDRESS (Street No & Name): **1081 New Haven Road** ADDRESS (Street No & Name): _____

CITY or TOWN STATE ZIP BODY TYPE: **Naugatuck CT 06770 4 Door** CITY or TOWN STATE ZIP BODY TYPE: _____

REGISTRATION NO STATE VEH YEAR & MAKE: **641-UNR CT 2003 CHEVROLET** REGISTRATION NO STATE VEH YEAR & MAKE: _____

VEH ID NO (VIN): **1G1ND52J03M741865** VEH ID NO (VIN): _____

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____ SOURCE of CARRIER NAME: _____ US DOT # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): **14-299** SUBJ of ACTION: **O** STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: _____

AUTOMOBILE INS CO--NAME--POLICY#: **Progressive # 919082853 03/07** AUTOMOBILE INS CO--NAME--POLICY#: _____

PARTS of VEHICLE DAMAGED: **None** PARTS of VEHICLE DAMAGED: _____

VEHICLE TOWED TO: **N/A** TOWED DUE TO DAMAGE: Y-N VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N

ALL INVOLVED PERSONS

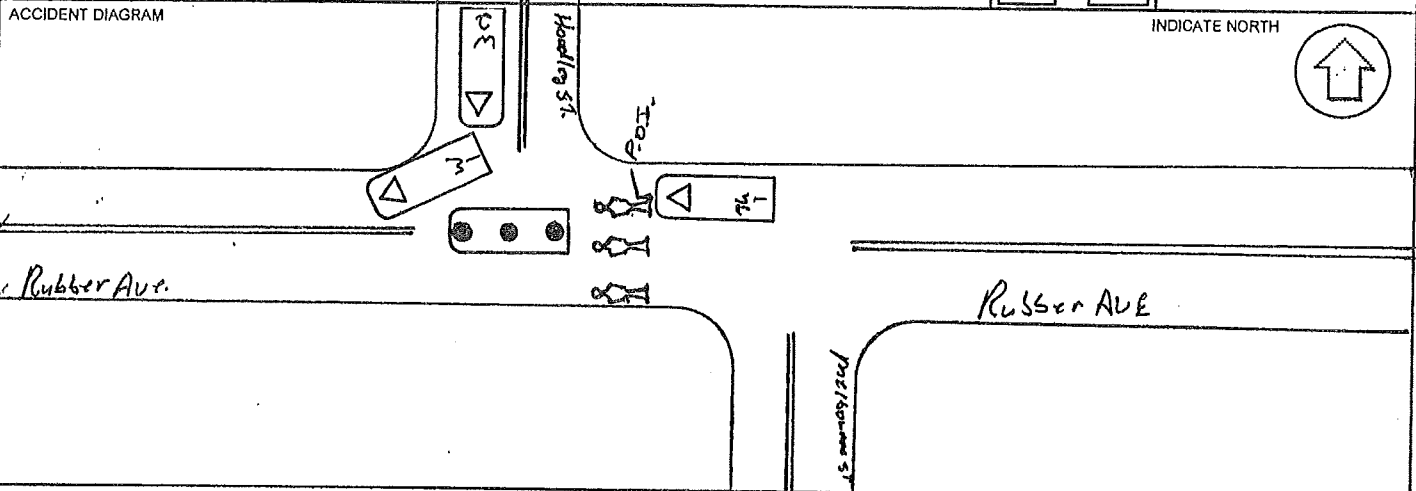
L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q	
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		1	2	1
2				TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				2
3	P	B	/	Li Lijuan 151 Andrew Ave 93 Naugatuck CT	10/24/45	/	3	1
4	W	N	/	Anderson Heather 103 Morning Mist Rd	06/30/87	/	3	1
5	W	N	/	Santopietro Robert 20 George St	04/12/64	/	3	1
6	W	N	/	Duda Desirea 112 Forest St Naugatuck	07/14/87	/	3	1
7								7

R13
A1
B1
C3
D1
E2
F4
G2
H2
I2
J21
J22
K2
K21
K22
L1
M03
N2
N21
N22
O2
O21
O22
P2
P21
P22
Q2
Q21
Q22
R2
R21
R22
S2
S21
S22
T2
T21
T22
U2
U21
U22
V2
V21
V22
W2
W21
W22
X2
X21
X22
Y2
Y21
Y22
Z2
Z21
Z22

02
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/1

ACCIDENT DIAGRAM

INDICATE NORTH



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
Traffic Unit # 1 Traveling W on Rubber Avenue Traffic Unit # 2 Traveling on

On 01/28/2008 I was dispatched to the intersection of Rubber Ave. and Hoadley St. for a Pedestrian struck by a Motor Vehicle. Upon my arrival Naugatuck E.M.S. was tending to Pedestrian Lijuan Li. I observed a Gray Chevy Malibu (CT REG 641-UNR) stopped in the middle of the intersection with a female operator identified through CT D/L # 108449178 as Natalia Savochkina. I attempted to speak with Natalia in regards to the accident, but Natalia does not speak English. Natalia then called her husband Yury Fainstein, who is in Russia. I spoke with Yury and asked if Natalia had any injuries that required any medical attention. Yury stated no and Natalia refused medical attention. I then asked Yury to ask Natalia what had happened in the accident. I handed the phone back to Natalia and went to speak with Lijuan. I attempted to speak with Lijuan, but she also did not speak English, only Chinese. Lijuan appeared to be in pain grabbing her Lower Right Leg. At this time Lijuan was then transported to Waterbury Hospital for further evaluation. I then returned to Natalia and asked her for her phone. Natalia had hung up the Phone with Yury and at this time I had not contact with him. I then spoke with Witness # 1 Heather Anderson. Heather stated to me that she was stopped at the light on Hoadley St. and Rubber Ave. facing South. Heather stated that her light had turned green and she attempted to take a right hand turn, when she observed the Malibu running through the Red Light and Striking Lijuan. Heather's statement was confirmed by her passenger Desirea Duda. Both statements were sworn and are attached to this report. I then spoke with Robert and Kelly Santopietro. Both Robert and Kelly stated that Natalia had ran the Red Light and Struck Lijuan who was crossing the road way. A sworn written statement was taken and attached to this report. Due to the evidence on scene and Witness statements I find Operator # 1 Natalia Savochkina at fault for the accident. Natalia was then issued and infraction for violating C.G.S. 14-299 " Failure to Obey Traffic Signal." No further action taken.

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
NAME and ADDRESS of PROPERTY OWNER
2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER
Pt. Robert O'Donnell PL30
POLICE AGENCY ID
Naugatuck PD
REPORT DATE
1/30/2008
CASE STATUS
 C - Open
 C - Closed
SUPERVISOR
Sgt. Steven Hunt S4

Sgt. Steven Hunt

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94



GPS READINGS: Latitude:
Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT: **Wed, Mar 12, 2008** MILITARY TIME: _____ ACCIDENT SEVERITY: Fatal Injury PDO VEHs INVOLVED #: **2** PAGE #: **1** of **2** POLICE CASE NO: **08-6253**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Headley Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
1. Measure Distance: F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Wrigley Joseph** OPER #2 or PEDESTRIAN (Last, First, MI): **Otoole Brian**

ADDRESS (Street No & Name): **3 Idlview rd** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): **333 Scott rd** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP SEX: **Naugatuck CT 06770** SEX: M CITY or TOWN STATE ZIP SEX: **Terryville CT** SEX: M

OPER LICENSE NO STATE DATE of BIRTH: **117284213 CT 11/05/61** OPER LICENSE NO STATE DATE of BIRTH: **166203575 CT 04/17/68**

OWNER (Last, First, MI - Enter same, if owner is operator): **Wrigley Joseph** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Otoole Brian**

ADDRESS (Street No & Name): **3 Idlview rd** ADDRESS (Street No & Name): **333 Scott rd**

CITY or TOWN STATE ZIP BODY TYPE: **Naugatuck CT 06770** BODY TYPE: **SUV** CITY or TOWN STATE ZIP BODY TYPE: **terryville CT** BODY TYPE: **SUV**

REGISTRATION NO STATE VEH YEAR & MAKE: **917WAD CT 1988 CHEVROLET** REGISTRATION NO STATE VEH YEAR & MAKE: **854VAK CT 1998 JEEP**

VEH ID NO (VIN): **1GNCT1823J0178961** VEH ID NO (VIN): **1J4G25859WC315369**

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City of Town, State, Zip): _____ CARRIER ADDRESS (Street, City of Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____ ICC, MC # _____ SOURCE of CARRIER NAME: _____ US DOT # _____ ICC, MC # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____ GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____ HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): **14-299** SUBJ of ACTION: O - Operator - C - Carrier OW - Owner - P - Pedestrian STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: O - Operator - C - Carrier OW - Owner - P - Pedestrian

AUTOMOBILE INS CO--NAME--POLICY#: **Nationwide Insurance #5106E059282** AUTOMOBILE INS CO--NAME--POLICY#: **Liberty Mutual #A06218123731408**

PARTS of VEHICLE DAMAGED: **front bumper and front grill** PARTS of VEHICLE DAMAGED: **scuffs to rear bumper**

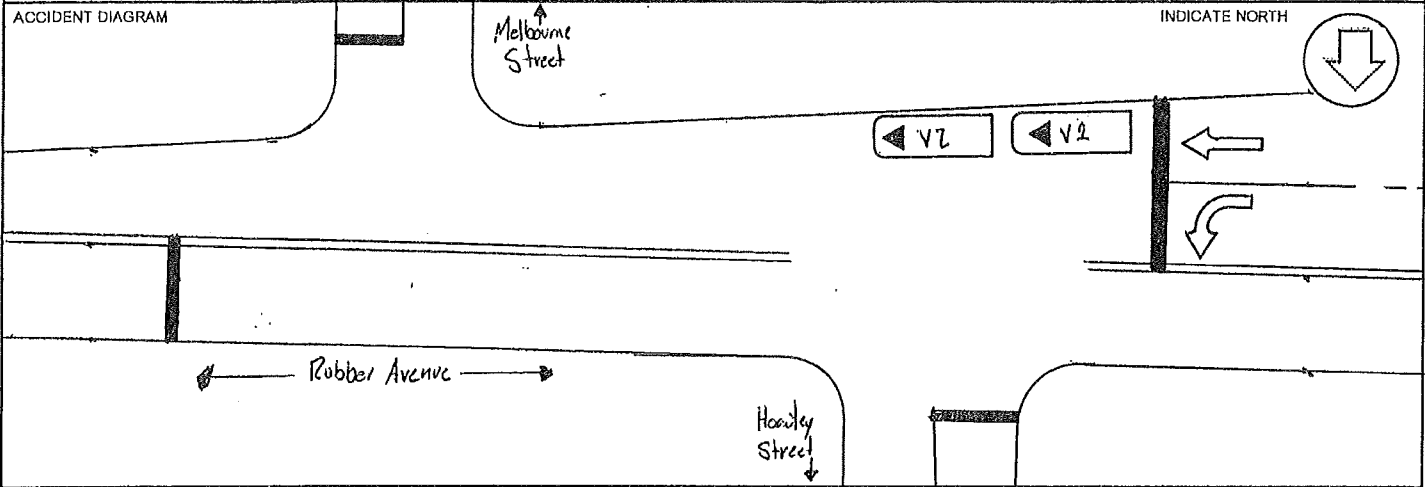
VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N N VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N N

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q
1	1	N	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				4	3	1
2	2	N	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				4	3	1
3	2	N	Kane	MElanie	179 Platts mill Rd, Naugatuck		4	3	1
4									
5									
6									
7									

10



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Traveling E on Rubber Avenue Traffic Unit # 2 Traveling E on Rubber Avenue

On March 12, 2008 at 00:11 hours Officer Tavares reported that a bystander stopped him and reported a motor vehicle collision on Rubber Avenue by Hoadley.

Upon my arrival I could see vehicle one and vehicle two facing east bound on Rubber Avenue at the intersection of Rubber Avenue and Hoadley Street. I spoke with the operators and the passengers and confirmed no injuries.

I first spoke with Operator 2. Operator 2 said he was stopped at the red traffic signal located at the intersection of Rubber Avenue and Hoadley Street when he was hit behind a vehicle that was also stopped at the traffic signal behind him. Operator 2 said the traffic signal was yet to turn green for Rubber Avenue traffic. A passenger was identified in the front passenger seat.

After speaking with Operator 2, I spoke with Operator 1. Operator 1 said he was stopped for the red traffic signal located at the intersection of Rubber Avenue and Hoadley Street. Operator 1 said he was behind Vehicle 2 at the red traffic signal when he saw the green arrow illuminate for traffic turning left onto Hoadley Street. Operator 1 said he started to go when he rear ended Vehicle 2 which was still stopped at the traffic signal.

Based upon the collision type and the statements of Operator 1, he is found at fault for the collision for failing to obey the traffic control signal. Vehicle 1 suffered moderate damage to the front bumper and grill of the vehicle. This portion of Vehicle 1 struck a tow hitch on Vehicle 2 causing the damage. Vehicle 2 suffered only some scuffing to the rear plastic bumper. Neither vehicle needed to be towed from the scene.

DAMAGE PROPERTY OF POLICED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Derek Poundstone PL31	POLICE AGENCY ID Naugatuck PD	REPORT DATE 3/12/2008	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Lt. Gregory Dean Lt5
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT



FORM PR-1 Rev. 5/94

GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

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I 2
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J 22
K 21
K 22
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P 2
Q 2
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U 2
V 2
W 2
X 2
Y 2
Z 2
AA 21
AA 22
AA 23
AA 24

DATE OF ACCIDENT Thu, Apr 3, 2008	MILITARY TIME 20:53	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 3	PAGE # 2 of 3	POLICE CASE NO 08-8251
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION

1. Measure Distance _____
 F - Feet
 T - Tenths of Mile
 M - Meters
 K - Kilometers

2. Direction _____

3. Give nearest intersecting street, town line or mile marker of _____

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 3 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 4 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Saffloti Michele	OPER #2 or PEDESTRIAN (Last, First, MI)
--	---

ADDRESS (Street No & Name) 29 Longwood Drive	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name)	PROPER LIC CLASS Y-N <input type="checkbox"/>
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CITY or TOWN Naugatuck CT 06770	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN	STATE	ZIP	SEX M-F
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OPER LICENSE NO 124106413	STATE CT	DATE OF BIRTH 12/12/61	OPER LICENSE NO	STATE	DATE OF BIRTH
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OWNER (Last, First, MI - Enter same, if owner is operator) Saffloti Michele	OWNER'S (Last, First, MI - Enter same, if owner is operator)
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ADDRESS (Street No & Name) 29 Longwood Drive	ADDRESS (Street No & Name)
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CITY or TOWN Naugatuck CT 06770	STATE CT	ZIP 06770	BODY TYPE SUV	CITY or TOWN	STATE	ZIP	BODY TYPE
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REGISTRATION NO 893BSH	STATE CT	VEH YEAR & MAKE 2005 HYUNDAI	REGISTRATION NO	STATE	VEH YEAR & MAKE
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VEH ID NO (VIN) KM8SC13E65U894126	VEH ID NO (VIN)
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARDS Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARDS Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO - NAME - POLICY# Allstate 91930970606/01	AUTOMOBILE INS CO - NAME - POLICY#
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PARTS of VEHICLE DAMAGED rear bumper	PARTS of VEHICLE DAMAGED
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VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON				DOB	O	P	Q
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1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				9	2	1	1
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2				TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2							2
---	--	--	--	---	--	--	--	--	--	--	---

3	1	N	03	Brown	Brianna	29 Longwood Naug 723-9809	01/12/93	9	2	1	3
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4											4
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5											5
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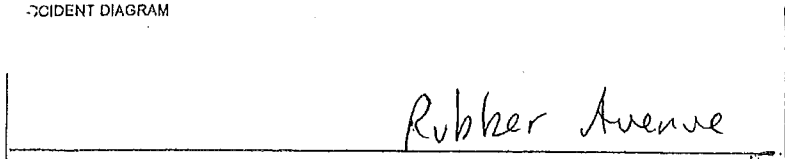
6											6
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7											7
---	--	--	--	--	--	--	--	--	--	--	---

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AA 12

ALL INVOLVED PERSONS

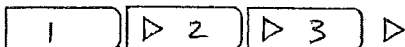
ACCIDENT DIAGRAM



Hoadley Street

Rubber Avenue

INDICATE NORTH



Not to Scale

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 3 Traveling E on Rubber Avenue

Traffic Unit # 4 Traveling on

Operator #1- Stated she was traveling east on Rubber Avenue. Stated she looked up and noticed that Vehicle #2 had stopped in front of her. Stated she could not stop in time to avoid a collision with Vehicle #2. Stated there was damage to the front bumper of her vehicle. Stated she was not injured.

Operator #2- Stated he was traveling east on Rubber Avenue and stopped for a red light at the intersection with Hoadley Street. Stated Vehicle #1 collided into the back of his vehicle. Stated he subsequently was pushed forward and his vehicle collided into Vehicle # 3, which was in front of him. Stated there was damage to the front and rear bumpers of his vehicle. Stated he was not injured. The two passengers of Vehicle #2 repeated the same statement as Operator #2. Both stated they were not injured.

Operator #- State she was traveling east on Rubber Avenue and stopped at a red light at the intersection with Hoadley Street. Stated Vehicle #2 collided into the back of her vehicle. Stated there was damage to the rear bumper of her vehicle. Stated she was not injured. The passenger of Vehicle #3 repeated the same statement as Operator #3. The passenger stated she was not injured.

Officer- I observed damage to the front bumper of Vehicle #1, damage to the front and rear bumper of Vehicle #2, and damage to the rear bumper of Vehicle #3. After investigating the scene and the statements of all parties involved, it was determined that Operator #1 was at fault for the accident. Operator #1 was issued a written warning for Following Too Closely (14-240). There were no injuries and none of the vehicles were towed.

DAMAGE PROPERTY COLLISION IN VOL VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
RANK and SIGNATURE of INVESTIGATING OFFICER	
PH Robert Byrne PL37	
POLICE AGENCY ID	Naugatuck PD
REPORT DATE	4/5/2008
CASE STATUS	<input type="checkbox"/> O - Open <input checked="" type="checkbox"/> C - Closed
SUPERVISOR	
Sgt. Brian Newman S5	

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Thu, Apr 24, 2008	MILITARY TIME 1458	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 08-10222
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION

1. Measure Distance _____

2. Direction _____

3. Give nearest intersecting street, town line or mile marker of _____

F - Feet N - North
T - Tenths of Mile S - South
M - Meters E - East
K - Kilometers W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Ballantyne Dorothy	OPER #2 or PEDESTRIAN (Last, First, MI) Holman Timothy
--	--

ADDRESS (Street No & Name) 2 North Main Street Apt 317	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 48 Elm Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
--	---	--	---

CITY or TOWN Beacon Falls CT	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN Ansonia CT 06401	STATE CT	ZIP 06401	SEX M-F <input checked="" type="checkbox"/> M
--	--------------------	---------------------	--	---	--------------------	---------------------	--

OPER LICENSE NO 218348266	STATE CT	DATE OF BIRTH 09/03/70	OPER LICENSE NO 167413136	STATE CT	DATE OF BIRTH 04/01/82
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OWNER (Last, First, MI - Enter same, if owner is operator) Precl Simon	OWNER'S (Last, First, MI - Enter same, if owner is operator) Holman Timothy
--	---

ADDRESS (Street No & Name) 205 Pansy Road	ADDRESS (Street No & Name) 48 Elm Street
---	--

CITY or TOWN Fairfield CT 06770	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN Ansonia CT 06401	STATE CT	ZIP 06401	BODY TYPE 4 Door
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REGISTRATION NO 281UWR	STATE CT	VEH YEAR & MAKE 1997 NISSAN	REGISTRATION NO 884WMW	STATE CT	VEH YEAR & MAKE 1992 HONDA
----------------------------------	--------------------	---------------------------------------	----------------------------------	--------------------	--------------------------------------

VEH ID NO (VIN) 1N4BU31DXVC125344	VEH ID NO (VIN) 1HGCB7651NA037063
---	---

'CARRIER'	'CARRIER'
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'CARRIER ADDRESS' (Street, City or Town, State, Zip)	'CARRIER ADDRESS' (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Paper or Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Paper or Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# State farm #270676-019-09	AUTOMOBILE INS CO-NAME-POLICY# American Int'l Pacific #AIG7519030
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PARTS of VEHICLE DAMAGED rear	PARTS of VEHICLE DAMAGED front
---	--

VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N
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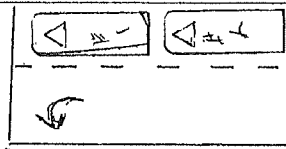
ALL INVOLVED PERSONS	L M N			NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q	ALL INVOLVED PERSONS
	1	2	3						
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1	2
3									3
4									4
5									5
6									6
7									7

09
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AY 1
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12

ACCIDENT DIAGRAM

INDICATE NORTH



← Rubber Avenue →

Hoadley Street

Not to Scale

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling E on Rubber Avenue

Traffic Unit # 2 Travelling E on Rubber Avenue

UNIT#1-stated she was at the intersection of Rubber Avenue and Hoadley Street facing east when she was rear ended by Unit#2. Operator stated the light was red and that is why she was stopped. Operator was uninjured.

UNIT#2-stated he was at the intersection of Rubber Avenue and Hoadley Street facing east behind Unit#1 when his foot slipped off the brake pedal and rolled into Unit#2. Operator said he was stopped at the time when his foot had slipped. Operator was uninjured.

OFFICER-upon arrival both vehicles had already moved off the roadway to a nearby parking lot. Based on the statements from both involved I verbally warned the Operator of Unit#2 for C.G.S. 14-240 Following Too Closely.

Both vehicles had very minor damage.

DAMAGE TO PROPERTY CURRENTLY IF NOT VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Paul Markette PL2	POLICE AGENCY ID Naugatuck PD	REPORT DATE 4/24/2008	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Raymond Savoy
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT



FORM PR-1 Rev. 5/94

R 1
A 1
B 1
C 1

GPS READINGS: Latitude: _____ Time: _____ Longitude: _____

FOR DOT USE ONLY

DATE OF ACCIDENT: **Mon, May 19, 2008** MILITARY TIME: **09:42** ACCIDENT SEVERITY: Fatal Injury PDO VEHs INVOLVED #: **2** PAGE #: **1** of **2** POLICE CASE NO: **08-12522**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Melbourne Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____

1. Measure Distance _____ F - Feet T - Tenths of Miles M - Meters K - Kilometers N - North S - South E - East W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Augustine Anne** OPER #2 or PEDESTRIAN (Last, First, MI): **Moriarty Theresa**

ADDRESS (Street No & Name): **356 Scott Street** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): **356 Scott Street** PROPER LIC CLASS: Y-N Y

CITY or TOWN: **Naugatuck CT 06770** STATE: **CT** ZIP: _____ SEX: M-F F CITY or TOWN: **Naugatuck CT 06770** STATE: **CT** ZIP: _____ SEX: M-F F

OPER LICENSE NO: **072867224** STATE: **CT** DATE OF BIRTH: **07/26/55** OPER LICENSE NO: **183184024** STATE: **CT** DATE OF BIRTH: **06/05/56**

OWNER (Last, First, MI - Enter same, if owner is operator): **Alexium Leasing** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Moriarty Theresa**

ADDRESS (Street No & Name): **Box 241340** ADDRESS (Street No & Name): **356 Scott Street**

CITY or TOWN: **LittleRock AR** STATE: **AR** ZIP: _____ BODY TYPE: **4 Door** CITY or TOWN: **Naugatuck CT 06770** STATE: **CT** ZIP: _____ BODY TYPE: **4 Door**

REGISTRATION NO: **373UWD** STATE: **CT** VEH YEAR & MAKE: **2006 SUZUKI** REGISTRATION NO: **135UUG** STATE: **CT** VEH YEAR & MAKE: **1999 CHEVROLET**

VEH ID NO (VIN): **JS3TD944X64104307** VEH ID NO (VIN): **1Y1SK5288XZ424935**

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____ SOURCE of CARRIER NAME: _____ US DOT # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____ GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____ HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): **14-243(b)** SUBJ of ACTION: O - Operator - C - Carrier OW - Owner - P - Pedestrian STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: _____

AUTOMOBILE INS CO - NAME - POLICY#: **State Farm #02 9826-C10-07** AUTOMOBILE INS CO - NAME - POLICY#: **State Farm #29 0906-F19-07**

PARTS of VEHICLE DAMAGED: **rear bumper** PARTS of VEHICLE DAMAGED: **front bumper and hood**

VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N

02
1
27

J 11
J 12

U 1
K 11
K 12

X 1
Y 1
Z 1
AA 11
AA 12

D 1
E 1
F 4

G 2
H 02
I 3
J 31

J 21
J 22

U 2
K 21
K 22

V 1
W 30

X 2
Y 2
Z 2

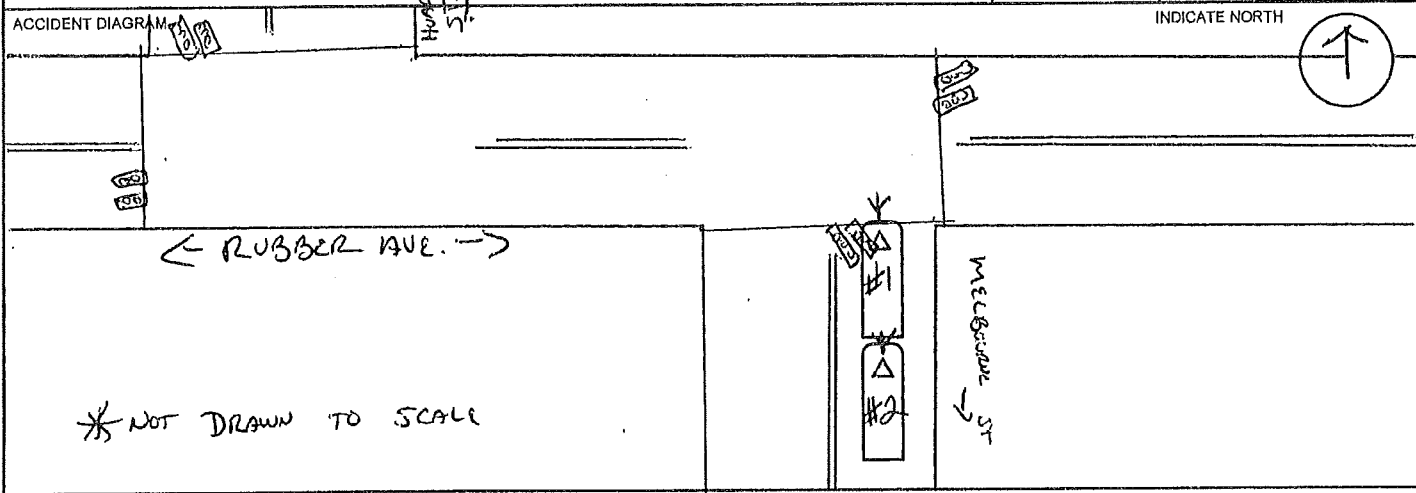
AA 21
AA 22
AA 23
AA 24

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q				
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				4	2	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				4	2	1	2
3											3
4											4
5											5
6											6
7											7

13



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling N on Melbourne Street Traffic Unit # 2 Traveling N on Melbourne Street

Op.#1 stated that she had stopped for the red traffic light facing north on Melbourne St. at its intersection with Rubber Ave. Op.#1 stated that she looked in her rear view mirror and did not see anyone so she began to back her vehicle up. Op.#1 stated that as she began to back up she struck Veh.#2 that was parked behind her. Veh.#1 suffered minor damage to its rear bumper.

Op.#2 stated that she was stopped for a red traffic light facing north on Melbourne St. at its intersection with Rubber Ave. Op.#2 stated that she was stopped behind Veh.#1. Op.#2 stated that all of a sudden Veh.#1 began to back up and struck the front bumper of Veh.#2. Veh.#2 suffered minor damage to its front bumper and hood.

This Officer states that there were no reported injuries nor did either have to be towed from the scene. the weather on this date was overcast and the road surface was free of debris. Op.#1 was issued an infraction for Unsafe Backing in violation of C.G.S.14-243(b).

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>Ptl. Peter Bosco</i> #16	POLICE AGENCY ID Naugatuck PD	REPORT DATE 5/21/2008	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR <i>Lt. Joshua Bernegger</i> Lt4
--	----------------------------------	--------------------------	--	---

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT



FORM PR-1 Rev. 5/94

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Wed, Jun 18, 2008	MILITARY TIME 11:26	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 08-15616
--	-------------------------------	---	-----------------------------	--------------------------------	-----------------------------------

CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
----------------------------------	------------------------	---

IF NOT AT INTERSECTION

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West

2. Direction

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Hadden Caroline	OPER #2 or PEDESTRIAN (Last, First, MI) Ackharath Manichanh
---	---

ADDRESS (Street No & Name) 14 Kerski Dr	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 67 Olive Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	--	---

CITY or TOWN STATE ZIP Oxford CT 06478	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> F
--	--	---	--

OPER LICENSE NO 074323850	STATE CT	DATE OF BIRTH 07/09/63	OPER LICENSE NO 026569220	STATE CT	DATE OF BIRTH 02/06/61
-------------------------------------	--------------------	----------------------------------	-------------------------------------	--------------------	----------------------------------

OWNER (Last, First, MI - Enter same, if owner is operator) Hadden Caroline	OWNER'S (Last, First, MI - Enter same, if owner is operator) Ackharath Manichanh
--	--

ADDRESS (Street No & Name) 14 Kerski Dr	ADDRESS (Street No & Name) 67 Olive Street
---	--

CITY or TOWN STATE ZIP Oxford CT	BODY TYPE 2 Door	CITY or TOWN STATE ZIP Naugatuck CT	BODY TYPE 4 Door
--	----------------------------	---	----------------------------

REGISTRATION NO 312ASU	STATE CT	VEH YEAR & MAKE 1993 CHEVROLET	REGISTRATION NO 397JUG	STATE CT	VEH YEAR & MAKE 2001 MITSUBISHI
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VEH ID NO (VIN) 2CNBJ18UXP6933789	VEH ID NO (VIN) 4A3AA46H41E011946
---	---

CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME <input type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> D - Driver <input type="checkbox"/> S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME <input type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> D - Driver <input type="checkbox"/> S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 1 Digit #	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 1 Digit #
------------------------------	---	------------------------------	---

HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> V N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N N - None, A - Arrest, W - Written Warning, V - Verbal Warning
--	---	--	---

STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian
---	---	----------------------------	--

AUTOMOBILE INS CO-NAME-POLICY# Family #0605P131901	AUTOMOBILE INS CO-NAME-POLICY# Nationwide #5106D992263
--	--

PARTS of VEHICLE DAMAGED Front	PARTS of VEHICLE DAMAGED Rear
--	---

VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N
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ALL INVOLVED PERSONS

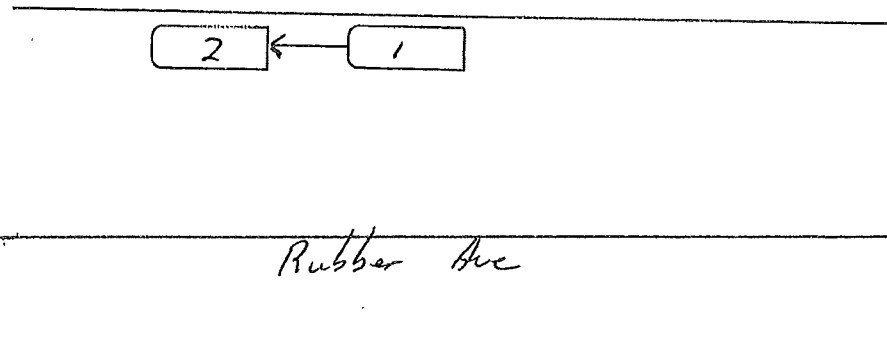
	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q	
	L	M	N					
1	1	N			4	3	1	1
2	2	N			4	3	1	2
3								3
4								4
5								5
6								6
7								7

ALL INVOLVED PERSONS

14

ACCIDENT DIAGRAM

INDICATE NORTH



14

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator of Vehicle #2 stated that she was stopped at the red light at Hoadley and Rubber Avenue when Vehicle #1 struck her vehicle from the rear causing minor damage.

Operator of Vehicle #1 stated that she did not notice Vehicle #2 slowing and vehicles made contact. There were no reported or observed injuries and damage to both vehicles was very minor.

Operator of Vehicle #1 was found at fault and she was given a Verbal warning for Following Too Close.

DAMAGE TO PROPERTY OR VEHICLES IF INVOLVED

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER
Ptl. James Hennessey #101

POLICE AGENCY ID
Naugatuck PD

REPORT DATE
6/27/2008

CASE STATUS
 C O - Open
C - Closed

SUPERVISOR
Sgt. Bryan Cammarata S6

[Handwritten signature]

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 Rev. 5/04

GPS READINGS: Latitude: _____ Time: _____ Longitude: _____ FOR DOT USE ONLY

DATE OF ACCIDENT: **Tue, Jul 8, 2008** MILITARY TIME: **1007** ACCIDENT SEVERITY: Fatal Injury PDO VEH INVOLVED #: **2** PAGE #: **1** of **2** POLICE CASE NO: **08-17380**

CITY OF TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
 1. Measure Distance: F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
 Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 of PEDESTRIAN (Last, First, MI): **Moruska Marsha** OPER #2 of PEDESTRIAN (Last, First, MI): **Merritt Beulah**

ADDRESS (Street No & Name): **15 Charles St.** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): **1013 Weid Dr.** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP SEX: **Naugatuck CT 06770** SEX: **F** CITY or TOWN STATE ZIP SEX: **Naugatuck CT 06770** SEX: **M**

OPER LICENSE NO STATE DATE OF BIRTH: **220581841 CT 10/09/22** OPER LICENSE NO STATE DATE OF BIRTH: **127547222 CT 12/01/35**

OWNER (Last, First, MI - Enter same, if owner is operator): **Moruska Marsha** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Merritt Beulah**

ADDRESS (Street No & Name): **15 Charles St.** ADDRESS (Street No & Name): **1013 Weid Dr.**

CITY or TOWN STATE ZIP BODY TYPE: **Naugatuck CT 06770** BODY TYPE: **2 Door** CITY or TOWN STATE ZIP BODY TYPE: **Naugatuck CT 06770** BODY TYPE: **Station**

REGISTRATION NO STATE VEH YEAR & MAKE: **634-JUV CT 1987 BUICK** REGISTRATION NO STATE VEH YEAR & MAKE: **08C-A59 CT 1994 FORD**

VEH ID NO (VIN): **1G4GJ11Y1HP411153** VEH ID NO (VIN): **1FALP5846RA221418**

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # ICC, MC # _____ SOURCE of CARRIER NAME: _____ US DOT # ICC, MC # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____ GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: **W** (None, A - Arrest, W - Written Warning, V - Verbal Warning) HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): **14-299** SUBJ of ACTION: **OW** (O - Operator - C - Carrier, OW - Owner - P - Pedestrian) STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: _____

AUTOMOBILE INS CO.-NAME.-POLICY#: **The Standard Fire Ins. Co. 975781050 101 1** AUTOMOBILE INS CO.-NAME.-POLICY#: **Farmers 80 16454 96 60**

PARTS of VEHICLE DAMAGED: **Front end** PARTS of VEHICLE DAMAGED: **Left front**

VEHICLE TOWED TO: **AT Transmissions** TOWED DUE TO DAMAGE: Y-N Y VEHICLE TOWED TO: **AT Transmissions** TOWED DUE TO DAMAGE: Y-N Y

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q		
			TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2							
1	1	N	01				4	3	1	1	
2	2	N	01				4	2	1	2	
3	2	N	03	Janz	Anna	53 Conrad St. Naugatuck		4	2	1	3
4											4
5											5
6											6
7											7

02
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AA
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AA
AA

R03
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 1
J
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AA
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AA

15

ACCIDENT DIAGRAM

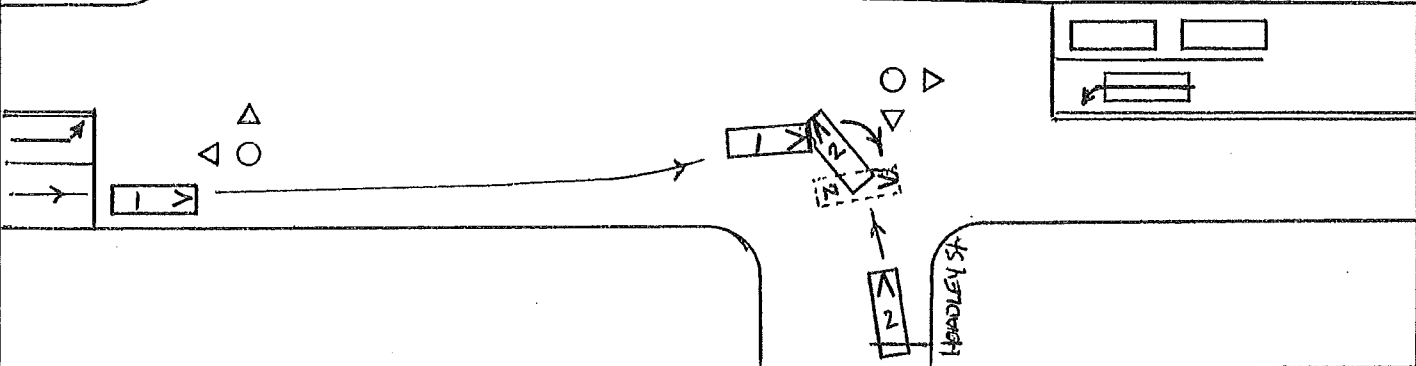
NOT TO SCALE

BENNIE'S CLEANERS

INDICATE NORTH



RUBBER AVE



15

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling **W** on Rubber Avenue

Traffic Unit # 2 Traveling **S** on off of Hoadley St to E on Rubber Av

OP#1 said that she was traveling West on Rubber Ave. Op#1 said that has she got to the traffic light at the intersection of Melbourne St., the light was green. Op#1 said she was continuing West on Rubber Ave.

OP#2 said that she was the first car in line on Hoadley St., at the intersection of Rubber Ave., waiting for the traffic light to turn green. Op#2 said that when the traffic light turned green, she proceeded into the intersection and had started her turn to head East on Rubber Ave. Op#2 said the Rubber Ave. traffic heading East bound was stopped at the stop line. Op#2 said she was struck in the left front of her car by veh#1.

Officer: This officer states that although a bias party, the passenger of veh#2 concurs that the light was green for the operator of veh#2 as they proceeded into the intersection of Rubber Ave.

The damage to both cars also coincided with the story of how the car met in the intersection, with veh#1 striking veh#2 in the left front. Both cars were towed by A&T Transmission due to their damage.

All persons involved were looked over by EMS. No one complained of injuries that required any transport to a hospital.

Op#1 was issued a written warning for **Failure to Obey a S.T.C.S.**, 14-299.

DAMAGE TO PROPERTY OCCURRED IF YOU AND VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER	POLICE AGENCY ID	REPORT DATE	CASE STATUS	SUPERVISOR
Det. Raymond Walsh PL11	Naugatuck PD	7/8/2008	<input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	Sgt. Randy Ireland S8

Det. R. Walsh #11

[Signature]

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 Rev. 5/94



GPS READINGS: Latitude: _____ Time: _____ Longitude: _____

09
A 2
B 2
C 5

DATE of ACCIDENT: **Thu, Dec 4, 2008** MILITARY TIME: **17:57** ACCIDENT SEVERITY: Fatal Injury PDO VEHES INVOLVED #: **4** PAGE #: **1** of **4** POLICE CASE NO: **08-30968**

D 1

CITY or TOWN: **Naugatuck** TWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

E 1
F 4

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
1. Measure Distance _____ F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

G 2

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

H 02
I 3

OPER #1 or PEDESTRIAN (Last, First, MI): **Harnick Brian** OPER #2 or PEDESTRIAN (Last, First, MI): **Charboneau Jennifer A**

J 31

ADDRESS (Street No & Name): **25 Park St Apt 305** PROPER LIC CLASS: Y-N Y **933 Rubber Avenue Apt 7h** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP: **Adams MA** SEX: M-F M **Naugatuck CT 06770** SEX: M-F F

OPER LICENSE NO: **s40879366** STATE: **MA** DATE OF BIRTH: **06/01/73** OPER LICENSE NO: **177929014** STATE: **CT** DATE OF BIRTH: **05/14/86**

OWNER (Last, First, MI - Enter same, if owner is operator): **Ransome Angela** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Charboneau Jennifer A**

ADDRESS (Street No & Name): **582 Oxford rd.** ADDRESS (Street No & Name): **933 Rubber Avenue**

CITY or TOWN STATE ZIP BODY TYPE: **Oxford CT 06478** Station **Naugatuck CT 06770** 4 Door

REGISTRATION NO STATE VEH YEAR & MAKE: **773WJF CT 2005 ISUZU** **899WSF CT 1995 DODGE**

VEH ID NO (VIN): **4NUDT13S952702815** **1B3HD56F4SF548584**

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____ SOURCE of CARRIER NAME: _____ US DOT # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____ GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: **A** N - None, A - Arrest, W - Written Warning, V - Verbal Warning HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: **N** N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): **14-240** SUBJ of ACTION: **O** O - Operator - C - Carrier, OW - Owner - P - Pedestrian STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: _____

AUTOMOBILE INS CO - NAME - POLICY#: **Geico #4084-41-88-56** AUTOMOBILE INS CO - NAME - POLICY#: **Liberty Mutual #A02-212-083374**

PARTS of VEHICLE DAMAGED: **Front end - minor** PARTS of VEHICLE DAMAGED: **Rear end - moderate**

VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB				O	P	Q
				4	2	1	1			
1	1	N	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1							
2	2	N	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2							
3	1	N	Harper Carson Lee 582 Oxford Rd. Oxford, CT	07	31	98	4	2	1	3
4	2	N	Roberts Collin 933 Rubber Ave. #7H Naugatuck, CT	10	09	03	4	2	1	4
5										
6										
7										

ALL INVOLVED PERSONS

02
1
01

11

12

11

12

X

V

V

AA 11

AA 12

AA 21

AA 22

AA 23

AA 24

ALL INVOLVED PERSONS

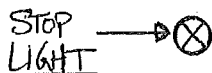
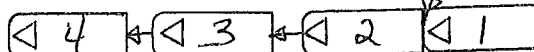
ACCIDENT DIAGRAM

HOADLEY STREET

INDICATE NORTH



P.O.I.



RUBBER AVENUE

MAP NOT TO SCALE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Avenue

Traffic Unit # 2 Traveling W on Rubber Avenue

Vehicle #1 was traveling Westbound on Rubber Avenue approaching the Hoadley Street intersection. Vehicles #2, #3, and #4 were stopped on W/B Rubber Avenue at the Hoadley Street intersection for a red traffic light. Vehicle #1 struck Vehicle #2 in the rear end causing Vehicle #2 to strike Vehicle #3 in the rear end causing Vehicle #3 to strike Vehicle #4 in the rear end. No reported injuries.

Operator #1 stated that he was traveling on Rubber Avenue to bring his girlfriend's child to swim practice and misjudged the distance to stop for the traffic in front of him. He said that he saw the red light but simply did not give himself enough time to stop. He stated that he struck Vehicle #2 in the rear end while braking.

Operator #2 stated that she was stopped at the red light at the Rubber Avenue/Hoadley Street intersection behind Vehicle #3 and felt her vehicle get struck from the rear.

Operator #3 stated that she was stopped at the red light at the Rubber Avenue/Hoadley Street intersection behind Vehicle #4 and felt her vehicle get struck from the rear.

Operator #4 stated that she was stopped at the red light at the Rubber Avenue/Hoadley Street intersection behind another vehicle and felt her vehicle get struck from the rear.

I observed no distinguishable skid marks leading up to the final point of rest of Vehicle #1. I observed minor damage to the front end of Vehicle #1, moderate damage to the rear end of Vehicle #2, and minor damage the rear ends of Vehicle #3 and Vehicle #4. All vehicles were driven from the scene.

This collision was caused by Operator #1 following too close. Operator #1 was issued Infraction #N646825-1 for Following Too Close (CGS Section 14-240).

DAMAGE TO PROPERTY CURRENTLY IN POLICE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Daniel Nofck PL44 	POLICE AGENCY ID Naugatuck PD	REPORT DATE 12/5/2008	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Brian Newman S5
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94



GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

DATE of ACCIDENT: **Thu, Dec 4, 2008** MILITARY TIME: **17:57** ACCIDENT SEVERITY: Fatal Injury PDO VEHs INVOLVED #: **4** PAGE #: **3** of **4** POLICE CASE NO: **08-30968**

CITY or TOWN: **Naugatuck** TWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
1. Measure Distance: _____ F - Feet _____ T - Tenths of Mile _____ M - Meters _____ N - North _____ S - South _____ E - East _____ K - Kilometers _____ W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 3 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 4 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Mislow Kathryn V** OPER #2 or PEDESTRIAN (Last, First, MI): **Wnek Susan A**

ADDRESS (Street No & Name): **29 City Brook Road** PROPER LIC CLASS: Y-N Y **80 Schwink Dr** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP: **Naugatuck CT 06770** SEX: M-F F **Meriden CT** SEX: M-F

OPER LICENSE NO STATE DATE OF BIRTH: **078431497 CT 07/27/91** **134118918 CT 01/02/62**

OWNER (Last, First, MI - Enter same, if owner is operator): **Mislow Sr Albert P** **Wnek Peter A**

ADDRESS (Street No & Name): **29 City Brook Road** **80 Schwink Dr**

CITY or TOWN STATE ZIP BODY TYPE: **Naugatuck CT 06770 Panel or** **Meriden CT 4 Door**

REGISTRATION NO STATE VEH YEAR & MAKE: **133RYV CT 1998 DODGE** **203RUH CT 1998 FORD**

VEH ID NO (VIN): **2B4GP24R7WR513370** **1FAPP13P0WW191029**

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____ SOURCE of CARRIER NAME: _____ US DOT # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____ GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____ HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: _____ STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: _____

AUTOMOBILE INS CO--NAME--POLICY#: **Travelers #979583529101 1** **General Casualty #MA3412439**

PARTS of VEHICLE DAMAGED: **Rear end - Minor** **Rear end - Minor**

VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N _____ TOWED DUE TO DAMAGE: Y-N

02
3
31

11
12

11
12

11
12

11
12
24

ALL INVOLVED PERSONS

	L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1
3								
4								
5								
6								
7								

R09
A 2
B 2
C 5
D 1
E 1
F 4
G 2
H 02
I 3
J 31
K 21
L 23
M 21
N 23
O 21
P 23
Q 21
R 23
S 21
T 23
U 21
V 23
W 21
X 23
Y 21
Z 23
AA 21
AB 23
AC 21
AD 23
AE 21
AF 23

ALL INVOLVED PERSONS

16

ACCIDENT DIAGRAM

INDICATE NORTH



16

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 3 Traveling W on Rubber Avenue

Traffic Unit # 4 Travelling W on Rubber Avenue

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER

Pt. Daniel Norck PL44

POLICE AGENCY ID

Naugatuck PD

REPORT DATE

12/5/2008

CASE STATUS

C

O - Open
 C - Closed

SUPERVISOR

Sgt. Brian Newman S5

DAMAGE PROPERTY
CURB/BIKE
IN FOOTED VEHICLES

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: Wed, Jan 14, 2009; MILITARY TIME: 12:19; ACCIDENT SEVERITY: Fatal, Injury, PDO; VEH INVOLVED #: 3; PAGE #: 1 of 4; POLICE CASE NO: 09-1015

CITY or TOWN: Naugatuck; TWN CODE: 088; ACCIDENT OCCURRED ON: Rubber Avenue at Hoadley St

IF NOT AT INTERSECTION: 1. Measure Distance: 100; 2. Direction: E; 3. Give nearest intersecting street, town line or mile marker of: Hoadley St

TRAFFIC UNIT # 1: V - Vehicle; OPER #1: Valentino Louis; ADDRESS: 22 Hill Street; CITY: Naugatuck CT 06770; OPER LICENSE NO: 107448254; OWNER: Valentino Louis

TRAFFIC UNIT # 2: V - Vehicle; OPER #2: Nierintz Edward; ADDRESS: 11 New Street; CITY: Naugatuck CT 06770; OPER LICENSE NO: 013081758; OWNER: Nierintz Edward

OPER #1 or PEDESTRIAN (Last, First, MI): Valentino Louis; OPER #2 or PEDESTRIAN (Last, First, MI): Nierintz Edward

ADDRESS (Street No & Name): 22 Hill Street; PROPER LIC CLASS: Y-N Y

ADDRESS (Street No & Name): 11 New Street; PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP: Naugatuck CT 06770; SEX: M-F M

CITY or TOWN STATE ZIP: Naugatuck CT 06770; SEX: M-F M

OPER LICENSE NO: 107448254; STATE: CT; DATE OF BIRTH: 10/19/83

OPER LICENSE NO: 013081758; STATE: CT; DATE OF BIRTH: 01/24/57

OWNER'S (Last, First, MI - Enter same, if owner is operator): Valentino Louis; Nierintz Edward

ADDRESS (Street No & Name): 22 Hill Street; 11 New Street

CITY or TOWN STATE ZIP: Naugatuck CT; BODY TYPE: 4 Door; Station

REGISTRATION NO STATE VEH YEAR & MAKE: 806WBJ CT 2002 HONDA; 573SEU CT 01 KIA

VEH ID NO (VIN): 1HGCG66812A0826618; KNDJA723X15696498

CARRIER: (Diagonal line through field)

CARRIER ADDRESS (Street, City or Town, State, Zip): (Diagonal line through field)

SOURCE of CARRIER NAME: (Diagonal line through field)

GROSS VEH WEIGHT: (Diagonal line through field)

HAZARDOUS MATERIAL PLACARD: (Diagonal line through field)

HAZARDOUS ARPD: Released Y-N; ENFORCEMENT ACTION TAKEN: W

HAZARDOUS ARPD: Released Y-N; ENFORCEMENT ACTION TAKEN: N

STATUTE or ORDINANCE NO(S): 14-96e; SUBJ of ACTION: O

STATUTE or ORDINANCE NO(S):; SUBJ of ACTION: O

AUTOMOBILE INS CO-NAME-POLICY#: Nationwide Prop 51E031554

AUTOMOBILE INS CO-NAME-POLICY#: Allstate 919645273

PARTS of VEHICLE DAMAGED: Rear End; Front End & Rear End

VEHICLE TOWED TO: Sibby's Automotive; TOWED DUE TO DAMAGE: Y-N Y

VEHICLE TOWED TO:; TOWED DUE TO DAMAGE: Y-N N

ALL INVOLVED PERSONS

Table with columns for L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON, DOB, O, P, Q. Includes entries for Traffic Unit #1 Operator (Valentino Louis) and Traffic Unit #2 Operator (Nierintz Edward).

ALL INVOLVED PERSONS

02, 3, 35

J, J

U, K, K

X, Y

AA, AA, AA, AA

09, A 1, B 1, C 1, D 1, E 1, F 4, G 2, H 02, I 1, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AP, AQ, AR, AS, AT, AU, AV, AW, AX, AY, AZ, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BO, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, CR, CS, CT, CU, CV, CW, CX, CY, CZ, DA, DB, DC, DD, DE, DF, DG, DH, DI, DJ, DK, DL, DM, DN, DO, DP, DQ, DR, DS, DT, DU, DV, DW, DX, DY, DZ, EA, EB, EC, ED, EE, EF, EG, EH, EI, EJ, EK, EL, EM, EN, EO, EP, EQ, ER, ES, ET, EU, EV, EW, EX, EY, EZ, FA, FB, FC, FD, FE, FF, FG, FH, FI, FJ, FK, FL, FM, FN, FO, FP, FQ, FR, FS, FT, FU, FV, FW, FX, FY, FZ, GA, GB, GC, GD, GE, GF, GG, GH, GI, GJ, GK, GL, GM, GN, GO, GP, GQ, GR, GS, GT, GU, GV, GW, GX, GY, GZ, HA, HB, HC, HD, HE, HF, HG, HH, HI, HJ, HK, HL, HM, HN, HO, HP, HQ, HR, HS, HT, HU, HV, HW, HX, HY, HZ, IA, IB, IC, ID, IE, IF, IG, IH, II, IJ, IK, IL, IM, IN, IO, IP, IQ, IR, IS, IT, IU, IV, IW, IX, IY, IZ, JA, JB, JC, JD, JE, JF, JG, JH, JI, JJ, JK, JL, JM, JN, JO, JP, JQ, JR, JS, JT, JU, JV, JW, JX, JY, JZ, KA, KB, KC, KD, KE, KF, KG, KH, KI, KJ, KK, KL, KM, KN, KO, KP, KQ, KR, KS, KT, KU, KV, KW, KX, KY, KZ, LA, LB, LC, LD, LE, LF, LG, LH, LI, LJ, LK, LL, LM, LN, LO, LP, LQ, LR, LS, LT, LU, LV, LW, LX, LY, LZ, MA, MB, MC, MD, ME, MF, MG, MH, MI, MJ, MK, ML, MM, MN, MO, MP, MQ, MR, MS, MT, MU, MV, MW, MX, MY, MZ, NA, NB, NC, ND, NE, NF, NG, NH, NI, NJ, NK, NL, NM, NN, NO, NP, NQ, NR, NS, NT, NU, NV, NW, NX, NY, NZ, OA, OB, OC, OD, OE, OF, OG, OH, OI, OJ, OK, OL, OM, ON, OO, OP, OQ, OR, OS, OT, OU, OV, OW, OX, OY, OZ, PA, PB, PC, PD, PE, PF, PG, PH, PI, PJ, PK, PL, PM, PN, PO, PP, PQ, PR, PS, PT, PU, PV, PW, PX, PY, PZ, QA, QB, QC, QD, QE, QF, QG, QH, QI, QJ, QK, QL, QM, QN, QO, QP, QQ, QR, QS, QT, QU, QV, QW, QX, QY, QZ, RA, RB, RC, RD, RE, RF, RG, RH, RI, RJ, RK, RL, RM, RN, RO, RP, RQ, RR, RS, RT, RU, RV, RW, RX, RY, RZ, SA, SB, SC, SD, SE, SF, SG, SH, SI, SJ, SK, SL, SM, SN, SO, SP, SQ, SR, SS, ST, SU, SV, SW, SX, SY, SZ, TA, TB, TC, TD, TE, TF, TG, TH, TI, TJ, TK, TL, TM, TN, TO, TP, TQ, TR, TS, TT, TU, TV, TW, TX, TY, TZ, UA, UB, UC, UD, UE, UF, UG, UH, UI, UJ, UK, UL, UM, UN, UO, UP, UQ, UR, US, UT, UY, UZ, VA, VB, VC, VD, VE, VF, VG, VH, VI, VJ, VK, VL, VM, VN, VO, VP, VQ, VR, VS, VT, VU, VV, VW, VX, VY, VZ, WA, WB, WC, WD, WE, WF, WG, WH, WI, WJ, WK, WL, WM, WN, WO, WP, WQ, WR, WS, WT, WU, WV, WX, WY, WZ, XA, XB, XC, XD, XE, XF, XG, XH, XI, XJ, XK, XL, XM, XN, XO, XP, XQ, XR, XS, XT, XU, XV, XW, XX, XY, XZ, YA, YB, YC, YD, YE, YF, YG, YH, YI, YJ, YK, YL, YM, YN, YO, YP, YQ, YR, YS, YT, YU, YV, YW, YX, YY, YZ, ZA, ZB, ZC, ZD, ZE, ZF, ZG, ZH, ZI, ZJ, ZK, ZL, ZM, ZN, ZO, ZP, ZQ, ZR, ZS, ZT, ZU, ZV, ZW, ZX, ZY, ZZ

17

DRAWING Not To Scale

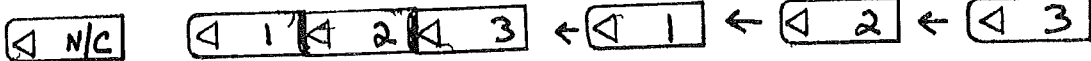
ACCIDENT DIAGRAM

INDICATE NORTH



17

Hoadley St



RUBBER AVE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Avenue

Traffic Unit # 2 Traveling W on Rubber Avenue

Operator #1 stated he was traveling west on Rubber Ave and was approaching the intersection of Rubber Ave and Hoadley St. Operator #1 was behind a non contact vehicle which had stopped on Rubber Ave to let a vehicle turn left from Rubber Ave onto Hoadley St. Operator #1 stated when he stopped behind the non contact vehicle he was rear ended by Operator #2 who was traveling behind him.

Operator #2 stated he was traveling west on Rubber Ave and was behind Operator #1. Operator #2 stated that Operator #1 stopped in the roadway and did not have working brake lights. Operator #2 stated he could not stop in time striking Operator #1 in the rear bumper. Operator #2 stated he was then struck in the rear by Operator #3 who was traveling behind him causing damage to his rear bumper and smashing out his rear window.

Operator #3 stated she was traveling west on Rubber Ave and was behind Operator #2. Operator #3 stated Operator #2 had stopped and she could not stop in time striking the rear of his vehicle.

Operator #1 was issued a written warning for Failing to have working brake lights (14-96e). I had Operator #1 step on the brake pedal and the brake lights were not operable. Operator #2 and Operator #3 both were a contributing factor for following to close. No enforcement action taken on Operator's #1 and 2

DAMAGE PROPERTY OR VEHICLES

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER

PII David Bell PL 14

POLICE AGENCY ID

Naugatuck PD

REPORT DATE

1/18/2009

CASE STATUS

C D - Open C - Closed

SUPERVISOR

Sgt. Laura Harrison S3

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94



GPS READINGS: Latitude: Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: Wed, Jan 14, 2009; MILITARY TIME; ACCIDENT SEVERITY: Fatal, Injury, PDO; VEHs INVOLVED #: 3; PAGE #: 3 of 4; POLICE CASE NO: 09-1015

CITY or TOWN: Naugatuck; TWN CODE: 088; ACCIDENT OCCURRED ON: Rubber Avenue at

IF NOT AT INTERSECTION: 2. Direction; 3. Give nearest intersecting street, town line or mile marker of

TRAFFIC UNIT # 3: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle; TRAFFIC UNIT # 4: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Rodgers Danielle; OPER #2 or PEDESTRIAN (Last, First, MI)

ADDRESS (Street No & Name): 48 Mulberry Street; PROPER LIC CLASS: Y-N

CITY or TOWN: Naugatuck CT 06770; STATE: CT; ZIP: 06770; SEX: M-F

OPER LICENSE NO: 168504735; STATE: CT; DATE OF BIRTH: 04/01/92

OWNER (Last, First, MI - Enter same, if owner is operator): Rodgers John; OWNER'S (Last, First, MI - Enter same, if owner is operator)

ADDRESS (Street No & Name): 48 Mulberry Street

CITY or TOWN: Naugatuck CT 06770; STATE: CT; ZIP: 06770; BODY TYPE: Station

REGISTRATION NO: 522XEA; STATE: CT; VEH YEAR & MAKE: 98 FORD

VEH ID NO (VIN): 1FMYU24ESWUC31966

CARRIER; CARRIER ADDRESS (Street, City or Town, State, Zip)

SOURCE of CARRIER NAME; SP - Shipping Papers/Trip Manifest; D - Driver; S - Side of Vehicle

GROSS VEH WEIGHT; HAZARDOUS MATERIAL PLACARD

HAZARDOUS CARGO; ENFORCEMENT ACTION TAKEN

STATUTE or ORDINANCE NO(S); SUBJ of ACTION

AUTOMOBILE INS CO-NAME-POLICY#: Gelco 4132-05-07-35

PARTS of VEHICLE DAMAGED: Front End

VEHICLE TOWED TO; TOWED DUE TO DAMAGE

NAME and ADDRESS of EACH INVOLVED PERSON

TRAFFIC UNIT # OPERATOR # PEDESTRIAN #1

TRAFFIC UNIT # OPERATOR # PEDESTRIAN #2

DOB; O; P; Q

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

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ALL INVOLVED PERSONS

Vertical column of checkboxes and numbers on the right side of the form.

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1 5

T

J

J

U

K

K

X

Y

Y

AA

AA

AA

AA

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AA

AA

AA

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ACCIDENT DIAGRAM

INDICATE NORTH



17

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 3 Travelling W on Rubber Avenue

Traffic Unit # 4 Travelling on

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

DAMAGE PROPERTY
CURRENTLY
IF POLICE VEHICLES

RANK and SIGNATURE of INVESTIGATING OFFICER

Ptl. David Relly PL14

POLICE AGENCY ID

Naugatuck PD

REPORT DATE

1/18/2009

CASE STATUS

O - Open
 C - Closed

SUPERVISOR

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude: _____
Time Longitude: _____



FOR DOT USE ONLY

DATE of ACCIDENT Sun, Apr 5, 2009	MILITARY TIME 1837	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 09-7483
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at _____
----------------------------------	------------------------	---

IF NOT AT INTERSECTION

1. Measure Distance **75** F - Feet T - Tenths of Mile M - Meters K - Kilometers

2. Direction E - East W - West

3. Give nearest intersecting street, town line or mile marker of
Melbourne Street

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
--	--

OPER #1 or PEDESTRIAN (Last, First, MI) Butler Paul	OPER #2 or PEDESTRIAN (Last, First, MI) Wellington Wendy
---	--

ADDRESS (Street No & Name) 12 Pinewood Crossing North	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 162 Bluebird Drive	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN STATE ZIP Naugatuck CT 06770	SEX M-F <input checked="" type="checkbox"/> M
---	--	---	--

OPER LICENSE NO 198061109	STATE CT	DATE of BIRTH 07/15/88	OPER LICENSE NO 013545160	STATE CT	DATE of BIRTH 01/04/61
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OWNER (Last, First, MI - Enter same, if owner is operator) Nieves Omaida	OWNER'S (Last, First, MI - Enter same, if owner is operator) Chase Auto Finance Corp
--	--

ADDRESS (Street No & Name) 1 Union AVE	ADDRESS (Street No & Name) Box 901098
--	---

CITY or TOWN STATE ZIP New Haven CT	BODY TYPE	CITY or TOWN STATE ZIP Fort Worth TX	BODY TYPE
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REGISTRATION NO 90VAE	STATE CT	VEH YEAR & MAKE 1998 NISSAN	REGISTRATION NO 657WZH	STATE CT	VEH YEAR & MAKE 2008 SUBARU
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VEH ID NO (VIN) JN1CA21D2WT533436	VEH ID NO (VIN) JF1GH61608H824290
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
---	-----------------------	---	-----------------------

GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> V - Verbal Warning N - None, A - Arrest, W - Written Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-240(a)	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW - Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C-Carrier OW - Owner - P-Pedestrian
--	---	----------------------------	---

AUTOMOBILE INS CO-NAME-POLICY# Nationwide 031255	AUTOMOBILE INS CO-NAME-POLICY# Geico 4115349377
--	---

PARTS of VEHICLE DAMAGED Front Bumper	PARTS of VEHICLE DAMAGED None observed
---	--

VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N
------------------	--	------------------	--

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q		
			1	2	3					4	
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1			9	2	1	1	
2	2	C	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2			9	2	1	2	
3	2	N	03	Wellington	Tyler	162 Bluebird Drive Naugatuck Ct, 06708	06/09/91	9	2	1	3
4											4
6											6
6											6
7											7

02
2
01

J 11
J 12

U 1
K 11
K 12

X 1
Y 1
Z 1

AA 11
AA 12

ALL INVOLVED PERSONS

R 09
A 1
B 1
C 1
D 1
E 0
F 4
G 2
H 2
I 2
J 1
K 35

J 21
J 22

U 2
K 21
K 22

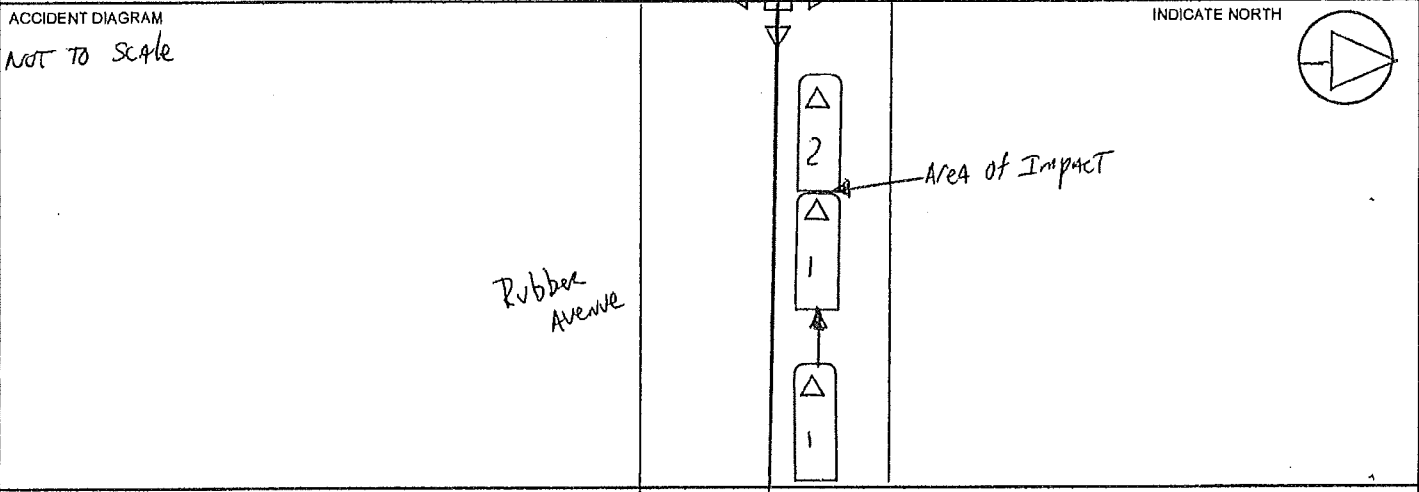
V 1
W 08

X 2
Y 2
Z 2

AA 21
AA 22
AA 23
AA 24

ALL INVOLVED PERSONS

14



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Travelling W on Rubber Avenue Traffic Unit # 2 Travelling W on Rubber Avenue

This was a two vehicle rear end type collision that occurred on Rubber Avenue, just east of its intersection with Melbourne Street. At the time of the collision, the weather was clear. Operator #1 and passenger to Vehicle #2 were not injured. Operator #2 claimed of non evident injuries. She refused further medical evaluation by Naugatuck Paramedics.

Operator #1 explained that he was traveling east on Rubber Avenue approaching the intersection with Melbourne Street. He did not realize that traffic had stopped for the traffic control signal when he collided with the rear bumper of Vehicle #2.

Operator #2 explained that she was stopped eastbound on Rubber Avenue at its intersection with Melbourne Street in a line of stopped traffic for a traffic control signal. While stopped, Vehicle #1 collided with her rear bumper.

Operator #1 was found to have caused the collision as he failed to leave a safe following/stopping distance between his vehicle and the rear bumper of Vehicle #2. He was issued a verbal warning for Following Too Close in violation of C.G.S. 14-240(a).

No further action taken.

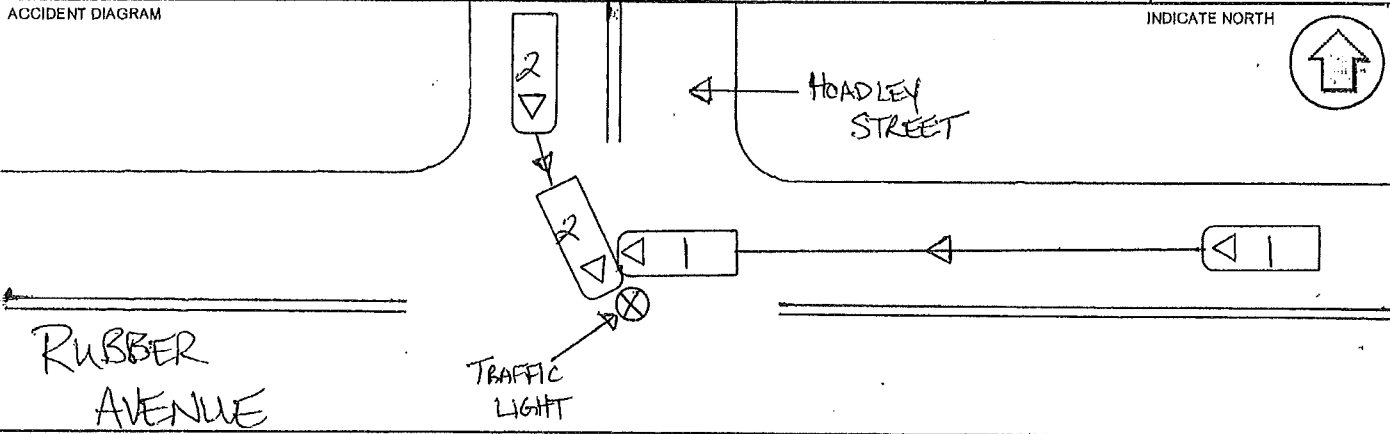
DA MICHIGIO PROPRIETARI OCORRENTE IN POLICED VEHICULOS	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>[Signature]</i> Ptl. Jonathan Slavin PL41	POLICE AGENCY ID Naugatuck PD	REPORT DATE 4/8/2009	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR <i>[Signature]</i> Sgt. Brian Newman S5
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18

ACCIDENT DIAGRAM

INDICATE NORTH



MAP NOT TO SCALE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Avenue

Traffic Unit # 2 Traveling S on Hoadley Street

Vehicle #1 was traveling Westbound on Rubber Avenue approaching the Hoadley Street intersection. Vehicle #2 was traveling Southbound on Hoadley Street at the same intersection. Vehicle #1 struck Vehicle #2 in the intersection. The intersection in question is controlled by a four-way traffic light.

Operator #1 stated that she was driving on Rubber Avenue and was trying to "make the light." She stated that she thought it was yellow but then saw it turn red before she proceeded under it. Operator #1 stated numerous times on scene, "It's all my fault," and "I went through the red light." Operator #1 stated that she never saw Vehicle #2 coming from her left until she hit it in the front end. Operator #1 also stated that she did not have a driver's license and that she was driving her mother's car, which was uninsured. A computer check confirmed that Operator #1 did not have a driver's license (CT ID card only) and she failed to produce a valid insurance card.

Operator #2 stated that she was the first vehicle in a line of cars stopped at the red light on Hoadley Street and, when it turned green, began to make a left turn onto Eastbound Rubber Avenue. She stated that about halfway through her turn she was struck by Vehicle #1 in the front left end.

A witness to the collision, Lynn Herbert (DOB 09/26/1958), made herself known on scene and stated that she was two cars behind Vehicle #2 and that Vehicle #1 ran the red light. I obtained the following sworn, written statement from Herbert later that day at her residence, **"I was stopped at light 2 cars behind the front car @ Hoadley St. and Rubber Ave. Our light turned green and the red car that was stopped on the line waited a few seconds to make a left turn - as one car was proceeding to continue after light changed finished passing. The red car then proceeded to make a left turn onto Rubber Ave. I noticed a gray SUV flying up Rubber Ave. and smash into the red car already into their left turn - no brakes, just a great big smash."**

DAMAGE TO PROPERTY OR DAMAGE TO PERSONS OR VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Daniel Norek PL 42 	POLICE AGENCY ID Naugatuck PD	REPORT DATE 5/15/2009	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Bryan Cammarata S6
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19

**NAUGATUCK POLICE DEPARTMENT
CONTINUATION OF INVESTIGATION REPORT**

CASE NUMBER 09-10875	INCIDENT TYPE MV Accident	
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Operator #1 complained of pain all over and was transported to Waterbury Hospital via the Naugatuck Ambulance. Operator #2 complained of neck and back pain and her daughter/backseat passenger, Kaysa Morelli, stated that she was not hurt. Both parties in Vehicle #2 were transported to Waterbury Hospital via the Naugatuck Ambulance.

Both vehicles were towed from the scene by A.T. Transmissions of Naugatuck, CT. Sgt. Cammarata photographed the scene, and The Naugatuck Fire Department was dispatched to the scene for a fluid spill.

This collision was caused by Operator #1 failing to obey the red traffic light at the intersection. Operator #1 was issued Misdemeanor Summons #MB755844 charging her with Operating without Insurance (CGS Section 14-213b), Operating without a License (CGS Section 14-36(a)), and Failure to Obey a Traffic Signal (CGS Section 14-299). Operator #1 is scheduled to appear at Waterbury Superior Court (GA#4) on 05/28/09.

SUPERVISOR'S SIGNATURE Sgt. Bryan Cammarata S6	INVESTIGATOR'S SIGNATURE Ptl. Daniel Norck #142	PAGE NUMBER 3 OF 3
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Sgt. B. Cammarata (Signature) **S6** (Initials)

Daniel Norck (Signature) #142 (ID)

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94

GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

DATE of ACCIDENT: **Fri, May 22, 2009** MILITARY TIME: _____ ACCIDENT SEVERITY: Fatal Injury **Property Damage** VEH INVOLVED #: **3** PAGE #: **1** of **3** POLICE CASE NO: **09-11922**

CITY or TOWN: **Naugatuck** TWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
1. Measure Distance: F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Stockton Brian** OPER #2 or PEDESTRIAN (Last, First, MI): **Campbell Brandy**

ADDRESS (Street No & Name): **160 Holly Street** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): **294 Collidge Ave** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP: **Waterbury CT** SEX: M-F M CITY or TOWN STATE ZIP: **Woonsocket RI** SEX: M-F F

OPER LICENSE NO: **244715507** STATE: **CT** DATE of BIRTH: **12/29/44** OPER LICENSE NO: **9472433** STATE: **RI** DATE of BIRTH: **09/22/78**

OWNER (Last, First, MI - Enter same, if owner is operator): **Stockton Brian** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Campbell Brandy**

ADDRESS (Street No & Name): **160 Holly Street** ADDRESS (Street No & Name): **294 Collidge Ave**

CITY or TOWN STATE ZIP: **Waterbury CT** BODY TYPE: **2 Door** CITY or TOWN STATE ZIP: **Woonsocket RI** BODY TYPE: **4 Door**

REGISTRATION NO STATE VEH YEAR & MAKE: **BUZMAN CT 1990 CHEVROLET** REGISTRATION NO STATE VEH YEAR & MAKE: **NO. 845265 RI 2008 NISSAN**

VEH ID NO (VIN): **1G1YY238XL5111325** VEH ID NO (VIN): **1N4AL21E28N472769**

CARRIER: _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: SP - Shipping Papers/Trip Manifest US DOT # ICC, MC # D - Driver S - Side of Vehicle

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: Required Y-N Displayed Y-N 4-Digit # _____ 1-Digit # _____

HAZARDOUS CARGO: Released Y-N ENFORCEMENT ACTION TAKEN: V N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): **Following To Closely** SUBJ of ACTION: O O - Operator - C - Carrier, OW - Owner - P - Pedestrian

AUTOMOBILE INS CO - NAME - POLICY#: **The Hartford #55PHJ426767-335101** AUTOMOBILE INS CO - NAME - POLICY#: **Amica #990838-20UJ**

PARTS of VEHICLE DAMAGED: **Minor Front Bumper** PARTS of VEHICLE DAMAGED: **Minor Front and Rear Bumper**

VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N N

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q	
1	1	N	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1	1
2	2	N	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1	2
3								3
4								4
5								5
6								6
7								7

ALL INVOLVED PERSONS

02
1
01
/11
/12

/1
/11
/12

/1
/1
/1

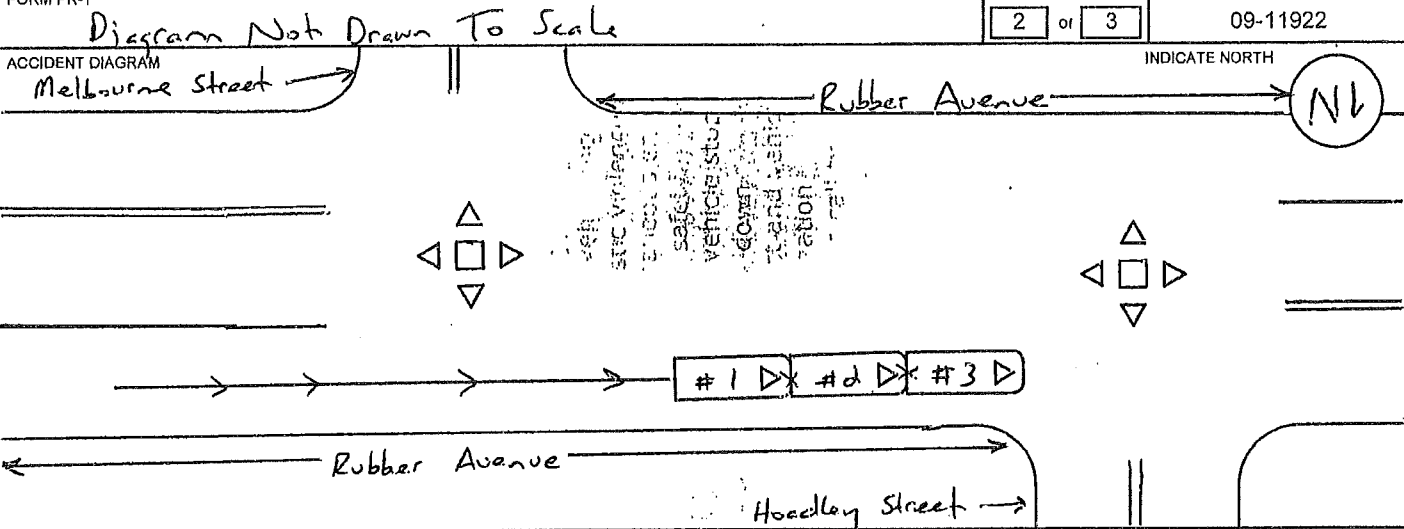
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/1
/1

R09
A 1
B 1
C 1
D 1
E 1
F 3
G 2
H 02
I 1
J 01
J 21 /
J 22 /
U 2 /
K 21 /
K 22 /
V 1
W 10
X 2 /
Y 2 /
Z 2 /
AA 21 /
AA 22 /
AA 23 /
AA 24 /

20

ACCIDENT DIAGRAM

INDICATE NORTH



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Avenue

Traffic Unit # 2 Traveling W on Rubber Avenue

Vehicle #1: Op.#1 stated he was traveling West on Rubber Avenue in his 1990 Chevrolet Corvette bearing CT Registration BUZMAN. Op.#1 stated as he proceeded through the intersection of Rubber Avenue and Hoadley Street vehicles in front of him began to slow down. Op.#1 stated his foot slipped off the brake and hit the gas pedal and he rear ended Veh.#2. Op.#2 stated Veh.#2 then rear ended Veh.#3. Op.#1 stated he did not need medical assistance. Veh.#1 had minor damage to the front bumper.

Vehicle #2: Op.#2 stated she was traveling West on Rubber Avenue in her 2008 Nissan Altima bearing RI Registration 815-265. Op.#2 stated as she proceeded through the intersection of Rubber Avenue and Hoadley Street traffic began to slow in front of her. Op.#2 stated this is when she was rear ended by Veh.#1, which pushed her vehicle into Veh.#3. Op.#2 stated she did not need medical assistance. Veh.#2 had minor damage to the front and rear bumper.

Vehicle #3: Op.#3 stated he was traveling West on Rubber Avenue in his 2003 Mitsubishi Outlander bearing CT Registration 478-XAY. Op.#3 stated as he proceeded through the intersection of Rubber Avenue and Hoadley Street traffic began to slow in front of him. Op.#3 stated this is when he was rear ended by Veh.#2. Op.#3 stated he did not need medical assistance. Veh.#3 had minor damage to the rear bumper.

Officer: I observed minor scratches on the vehicles involved in the accident. All parties refused medical treatment. I advised all parties involved that I would complete an accident report. Op.#1 was issued a verbal warning for Following To Closely in violation of C.G.S. 14-240.

No further action was taken by this officer.

DAMAGE TO PROPERTY OR TO OTHER VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER

Ptl. Kevin Zainc PL 31

POLICE AGENCY ID

Naugatuck PD

REPORT DATE

5/23/2009

CASE STATUS

C O - Open C - Closed

SUPERVISOR

Sgt. Bryan Cammarata S6

PL 31

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94



GPS-READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT Fri, May 22, 2009	MILITARY TIME	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 3	PAGE # 3 of 3	POLICE CASE NO 09-11922
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers

2. Direction

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 3 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 4 <input type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
--	---

OPER #1 or PEDESTRIAN (Last, First, MI) Flemming Kenneth	OPER #2 or PEDESTRIAN (Last, First, MI)
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ADDRESS (Street No & Name) 412 Quinn Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name)	PROPER LIC CLASS Y-N <input type="checkbox"/>
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CITY or TOWN Naugatuck CT 06770	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN	STATE	ZIP	SEX M-F
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OPER LICENSE NO 027007058	STATE CT	DATE of BIRTH 02/14/78	OPER LICENSE NO	STATE	DATE of BIRTH
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OWNER (Last, First, MI - Enter same, if owner is operator) Flemming Kenneth	OWNER'S (Last, First, MI - Enter same, if owner is operator)
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ADDRESS (Street No & Name) 412 Quinn Street	ADDRESS (Street No & Name)
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CITY or TOWN Naugatuck CT 06770	STATE CT	ZIP 06770	BODY TYPE SUV	CITY or TOWN	STATE	ZIP	BODY TYPE
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REGISTRATION NO 478XAY	STATE CT	VEH YEAR & MAKE 2003 MITSUBISHI	REGISTRATION NO	STATE	VEH YEAR & MAKE
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VEH ID NO (VIN) JA4LZ31G43U101260	VEH ID NO (VIN)
---	-----------------

CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME <input type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> D - Driver <input type="checkbox"/> S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME <input type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> D - Driver <input type="checkbox"/> S - Side of Vehicle	US DOT # ICC, MC #
--	-----------------------	--	-----------------------

GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 1 Digit #	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 1 Digit #
------------------------------	---	------------------------------	---

HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C - Carrier <input type="checkbox"/> OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C - Carrier <input type="checkbox"/> OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO - NAME - POLICY # Travelers #9803369751011	AUTOMOBILE INS CO - NAME - POLICY #
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PARTS of VEHICLE DAMAGED Minor Rear Bumper	PARTS of VEHICLE DAMAGED
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VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> N	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q	ALL INVOLVED PERSONS
1	3	N	01					1
								2
								3
								4
								5
								6
								7

09
A 1
B 1
C 1
D 1
E 1
F 3
G 2
H 2 /
I 2 /
J 21 /
K 22 /
L 21 /
M 22 /
N 1
O 10
P 2 /
Q 2 /
R 2 /
S 2 /
T 2 /
U 21 /
V 22 /
W 1
X 10
Y 2 /
Z 2 /
AA 21 /
AB 22 /
AC 23 /
AD 24 /

20

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94



GPS READINGS: Latitude:
Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: **Mon, Jul 20, 2009** MILITARY TIME: **11:40** ACCIDENT SEVERITY: Fatal Injury PDO VEH INVOLVED #: **2** PAGE #: **1** of **2** POLICE CASE NO: **09-17536**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

IF NOT AT INTERSECTION: 2. Direction 3. Give nearest intersecting street, town line or mile marker of
1. Measure Distance: F - Feet T - Tenths of Mile M - Meters K - Kilometers
N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Gliford Arthur** OPER #2 or PEDESTRIAN (Last, First, MI): **Colantuono Danielle**

ADDRESS (Street No & Name): **1347 Rubber Avenue** PROPER LIC CLASS: Y-N Y **62 Pleasant Avenue** PROPER LIC CLASS: Y-N Y

CITY or TOWN STATE ZIP: **Naugatuck CT 06770** SEX: M-F M **Naugatuck CT 06770** SEX: M-F F

OPER LICENSE NO STATE DATE of BIRTH: **171142399 CT 05/22/40** OPER LICENSE NO STATE DATE of BIRTH: **136353297 CT 01/09/74**

OWNER (Last, First, MI - Enter same, if owner is operator): **Gliford Arthur** OWNER'S (Last, First, MI - Enter same, if owner is operator): **DCFS Trust**

ADDRESS (Street No & Name): **1347 Rubber Avenue** ADDRESS (Street No & Name): **2050 Roanoke Rd**

CITY or TOWN STATE ZIP BODY TYPE: **Naugatuck CT 06770 Pickup** CITY or TOWN STATE ZIP BODY TYPE: **West Lake TX 76262 SUV**

REGISTRATION NO STATE VEH YEAR & MAKE: **75413 CT 1983 CHEVROLET** REGISTRATION NO STATE VEH YEAR & MAKE: **721TKA CT 2007 JEEP**

VEH ID NO (VIN): **2GCCC14D7D1167330** VEH ID NO (VIN): **1J8HG48K47C609203**

CARRIER: [Dotted] CARRIER ADDRESS (Street, City of Town, State, Zip): [Dotted]

SOURCE of CARRIER NAME: [Dotted] US DOT # ICC, MC #: [Dotted]

GROSS VEH WEIGHT: [Dotted] HAZARDOUS MATERIAL PLACARD: [Dotted]

HAZARDOUS CARGO: [Dotted] ENFORCEMENT ACTION TAKEN: [Dotted]

STATUTE or ORDINANCE NO(S): [Dotted] SUBJ of ACTION: [Dotted]

AUTOMOBILE INS CO-NAME-POLICY#: **Liberty Mutual / #A02-212-369317029** AUTOMOBILE INS CO-NAME-POLICY#: **Allstate / #02516406201/11**

PARTS of VEHICLE DAMAGED: **Front end** PARTS of VEHICLE DAMAGED: **Rear end**

VEHICLE TOWED TO: [Dotted] TOWED DUE TO DAMAGE: Y-N N

ALL INVOLVED PERSONS

	L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q	
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				4	2	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				4	2	1	2
3	2	N	04	Colantuono	Luc	62 Pleasant Avenue	08/23/07	5	2	1	3
4	2	N	05	Colantuono	Jacen	62 Pleasant Avenue	05/20/03	5	2	1	4
5	2	N	07	Colantuono	Brandon	62 Pleasant Avenue	07/04/01	4	2	1	5
6											6
7											7

ALL INVOLVED PERSONS

R09
A 1
B 1
C 1
D 1
E 0
F 4
G 2
H02
I 2 1
J01
J 21 -
J 22 -

U 2 -
K 21 -
K 22 -
V 1
W08

X 2 -
Y 2 -
Z 2 -

AA 21 -
AA 22 -
AA 24 -

21

ACCIDENT DIAGRAM

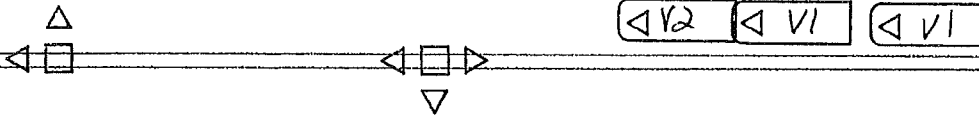
Melbourne Street

Rubber Avenue

INDICATE NORTH



21



Hoadley Street

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling E on Rubber Avenue

Traffic Unit # 2 Travelling E on Rubber Avenue

On 7/20/09 at 11:41 hrs, I was dispatched to Rubber Avenue and Hoadley Street for a motor vehicle collision.

Upon arrival, both vehicles were moved out of the roadway and were in the Thurston's Oil parking lot. I spoke to all parties involved who stated they were not injured.

I spoke to Operator #1 Arthur Gliford. Mr. Gliford states he was stopped at the traffic light at Rubber Avenue and Hoadley Street when the light turned green and the vehicles in front of him started to go. Mr. Gliford states some papers fell off his dashboard and when he went to pick the papers up, he struck Vehicle #2 which was in front of him.

I spoke to Operator #2 Danielle Colantuono. Ms. Colantuono states she was stopped for the traffic light at Rubber Avenue and Hoadley Street. Ms. Colantuono states the traffic light turned green and vehicles in front of her began to go and before she could go to travel east on Rubber Avenue, she was struck by Vehicle #1 in the rear of her vehicle.

Vehicle #1 had damage to the front bumper and grill. Vehicle #2 had damage to the rear bumper and rear door.

Based upon my observations and statements made, I find fault to Operator #1 Arthur Gliford. There was no enforcement action taken by this officer.

DAMAGE TO PROPERTY OR TO VEHICLES INVOLVED	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Thomas Grant PL27	POLICE AGENCY ID Naugatuck PD	REPORT DATE 7/20/2009	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Laura Harrison 93
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[Handwritten signature and initials]

[Handwritten signature]

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

FOR DOT USE ONLY

GPS READINGS: Latitude:

Time Longitude:

DATE OF ACCIDENT: Mon, Aug 17, 2009; MILITARY TIME: 15:47; ACCIDENT SEVERITY: Fatal, Injury, PDO (X); VEHs INVOLVED #: 3; PAGE #: 1 of 3; POLICE CASE NO: 09-20144

CITY or TOWN: Naugatuck; TOWN CODE: 088; ACCIDENT OCCURRED ON: Rubber Avenue at

IF NOT AT INTERSECTION: 1. Measure Distance: 300; 2. Direction: W; 3. Give nearest intersecting street, town line or mile marker of: Headley Street

TRAFFIC UNIT # 1: V (Vehicle); TRAFFIC UNIT # 2: V (Vehicle)

OPER #1 or PEDESTRIAN (Last, First, MI): Godwin James; OPER #2 or PEDESTRIAN (Last, First, MI): Latina Grace

ADDRESS (Street No & Name): 151 Andrew Avenue; PROPER LIC CLASS: Y; ADDRESS (Street No & Name): 26 Orchard Terrace; PROPER LIC CLASS: Y

CITY or TOWN: Naugatuck; STATE: CT; ZIP: 06770; SEX: M; CITY or TOWN: Naugatuck; STATE: CT; ZIP: 06770; SEX: F

OPER LICENSE NO: G350458891320; STATE: FL; DATE OF BIRTH: 04/12/89; OPER LICENSE NO: 206424938; STATE: CT; DATE OF BIRTH: 08/15/68

OWNER (Last, First, MI - Enter same, if owner is operator): Lam Chenh Van; OWNER'S (Last, First, MI - Enter same, if owner is operator): Latina Grace

ADDRESS (Street No & Name): 13960 Mars Avenue; ADDRESS (Street No & Name): 26 Orchard Terrace

CITY or TOWN: Bayoulatat; STATE: AL; ZIP: 36509; BODY TYPE: 4 Door; CITY or TOWN: Naugatuck; STATE: CT; ZIP: 06770; BODY TYPE: Coupe

REGISTRATION NO: 2B9104Y; STATE: AL; VEH YEAR & MAKE: 2000 CADILLA Seville; REGISTRATION NO: 573KNE; STATE: CT; VEH YEAR & MAKE: 2007 CHEVR Cobalt

VEH ID NO (VIN): 1G6KS54Y4YU146540; VEH ID NO (VIN): 1G1AK18F777203958

CARRIER: [Dotted area]; CARRIER: [Dotted area]

CARRIER ADDRESS (Street, City or Town, State, Zip): [Dotted area]; CARRIER ADDRESS (Street, City or Town, State, Zip): [Dotted area]

SOURCE OF CARRIER NAME: [Dotted area]; SOURCE OF CARRIER NAME: [Dotted area]

GROSS VEH WEIGHT: [Dotted area]; HAZARDOUS MATERIAL PLACARD: [Dotted area]; GROSS VEH WEIGHT: [Dotted area]; HAZARDOUS MATERIAL PLACARD: [Dotted area]

HAZARDOUS CARGO: Released Y-N; ENFORCEMENT ACTION TAKEN: A; HAZARDOUS CARGO: Released Y-N; ENFORCEMENT ACTION TAKEN: W

STATUTE or ORDINANCE NO(S): 14-240; SUBJ of ACTION: O; STATUTE or ORDINANCE NO(S): 14-240; SUBJ of ACTION: O

AUTOMOBILE INS CO-NAME-POLICY#: Geico 0376411302; AUTOMOBILE INS CO-NAME-POLICY#: Geico 4163955612

PARTS of VEHICLE DAMAGED: Front bumper; PARTS of VEHICLE DAMAGED: Front and rear bumper

VEHICLE TOWED TO: A.T. Transmissions; TOWED DUE TO DAMAGE: Y-N No; VEHICLE TOWED TO: N/A; TOWED DUE TO DAMAGE: Y-N No

02H, 3S, 35T

J11, J12

J11, J12

X1, Y1, Z1

AA11, AA12, AA13, AA14

ALL INVOLVED PERSONS

R09, A1, B1, C1

D1, E1, F4

G2, H202, I3, J35

J21, J22

V2, K21, K22, V1, W08

X2, Y2, Z2

AA21, AA22, AA23, AA24

ALL INVOLVED PERSONS

Handwritten mark

Table with columns: L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON, DOB, O, P, Q. Rows 1-7.

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude:
Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: **Mon, Aug 17, 2009** MILITARY TIME: ACCIDENT SEVERITY: Fatal Injury PDO VEH INVOLVED #: **2** of **3** PAGE #: **2** of **3** POLICE CASE NO: **09-20144**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at

IF NOT AT INTERSECTION: 2. Direction 3. Give nearest intersecting street, town line or mile marker of
1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 3 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 4 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Unknown** OPER #2 or PEDESTRIAN (Last, First, MI):

ADDRESS (Street No & Name) PROPER LIC CLASS Y-N ADDRESS (Street No & Name) PROPER LIC CLASS Y-N

CITY or TOWN STATE ZIP SEX M-F

OPER LICENSE NO STATE DATE OF BIRTH OPER LICENSE NO STATE DATE OF BIRTH

OWNER (Last, First, MI - Enter same, if owner is operator) OWNER'S (Last, First, MI - Enter same, if owner is operator)

ADDRESS (Street No & Name) ADDRESS (Street No & Name)

CITY or TOWN STATE ZIP BODY TYPE **Sport /** CITY or TOWN STATE ZIP BODY TYPE

REGISTRATION NO STATE VEH YEAR & MAKE **Unknown Unknown** REGISTRATION NO STATE VEH YEAR & MAKE

VEH ID NO (VIN) **Unknown** VEH ID NO (VIN)

CARRIER CARRIER

CARRIER ADDRESS (Street, City or Town, State, Zip) CARRIER ADDRESS (Street, City or Town, State, Zip)

SOURCE OF CARRIER NAME SP - Shipping Papers/Trip Manifest US DOT # ICC, MC # D - Driver S - Side of Vehicle

GROSS VEH WEIGHT HAZARDOUS MATERIAL PLACARD Required Y-N 4 Digit# Displayed Y-N 1 Digit#

HAZARDOUS CARGO ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S) **N/A** SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian

AUTOMOBILE INS CO - NAME - POLICY# **Unknown** AUTOMOBILE INS CO - NAME - POLICY# **Unknown**

PARTS of VEHICLE DAMAGED **Unknown** PARTS of VEHICLE DAMAGED

VEHICLE TOWED TO TOWED DUE TO DAMAGE Y-N VEHICLE TOWED TO TOWED DUE TO DAMAGE Y-N

15^H
3^S
35^I
/ J¹¹
/ J¹²
/ U¹⁸
/ K¹¹
/ K¹²

R 09
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 2
I 2
J 21
J 22
U 2
K 21
K 22
V 1
W 08

22

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
1			TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				
2			TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				
3							
4							
5							
6							
7							

EVENT DIAGRAM

NOT TO SCALE

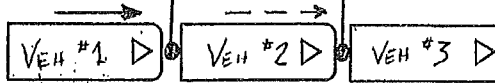
PRIMARY AREA OF IMPACT

SECONDARY AREA OF IMPACT

INDICATE NORTH



22



RUBBER AVENUE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling N E S W on Rubber Avenue

Traffic Unit # 2 Travelling N E S W on Rubber Avenue

Operator #1 stated he was stopped East bound on Rubber Avenue, at the intersection with Loadley Street, for traffic at the red light. Operator #1 stated his foot slipped off the brake pedal and the front of his vehicle collided with the rear of Vehicle #2. Operator #1 stated he was not injured.

Operator #2 stated she was stopped East bound on Rubber Avenue, at the intersection with Loadley Street, for traffic at the red light. Operator #2 stated her vehicle was struck from behind by Vehicle #1. Operator #2 stated the front of her vehicle then collided with the rear of Vehicle #3. Operator #2 stated she was close to Vehicle #3 prior to the collision and her vehicle was not pushed very far. Operator #2 stated Vehicle #3 was a large utility truck which drove away after the collision. Operator #2 stated the operator of Vehicle #3 may not have realized the vehicle was struck. Operator #2 stated she was not injured.

Operator #3 was not identified.

Officer: Upon my arrival I saw Vehicle #1 had minor damage to the front bumper. I saw Vehicle #2 had minor damage to the front and rear bumpers. Vehicle #3 was unidentified and could not be located. The damage was consistent with the type of collision described by both operators.

There was no evidence of skidding on the roadway. The collision between Vehicle #1 and Vehicle #2 was determined to be a low speed impact.

Based on the above facts and circumstances I found Operator #1 to be the primary contributing factor in the collision. Operator #1 was issued an infraction (P261426-3) for Following Too Close {CGS #14-240}. Operator #2 was also found to be at fault, and issued a written warning, for Following Too Close {CGS #14-240}.

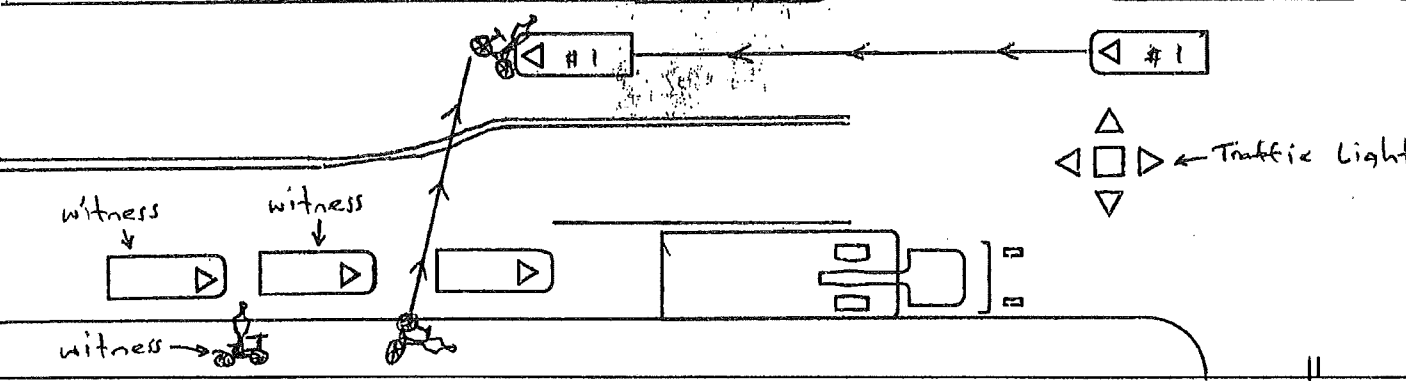
No further action. End of report.

DAMAGE TO PROPERTY OR DAMAGE TO PERSONS OR DAMAGE TO VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Derek Vostinak PL32	POLICE AGENCY ID Naugatuck Police	REPORT DATE 8/25/2009	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Bryan Cammarata S6
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Lt. Robert Allen 43

Diagram Not Drawn To Scale
 ACCIDENT DIAGRAM INDICATE NORTH (NW)



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Travelling E on Rubber Avenue Traffic Unit # 2 Travelling on _____

On 09/25/2009 at approximately 15:53 hours Officer Norck and I were dispatched to Rubber Avenue near Melbourne Street for an accident involving a vehicle and a pedestrian. Dispatch stated the pedestrian suffered injuries.

Upon arrival I spoke with the pedestrian, Nicholas Dumschott D.O.B. 08/18/1993. Dumschott advised me he is sixteen years old and he was riding his bicycle across the street when he was struck by a vehicle. Dumschott was currently being treated by EMS for his injuries. I was also advised that Dumschott's mother was on her way to the scene. Dumschott was laying on the ground complaining of pain to his right leg. I observed that Dumschott had several abrasions to his right leg.

I then spoke with a witness, Phyllis Dros D.O.B. 08/02/1962. Dros gave the following Sworn Written Statement. "The kid came off the sidewalk & cut across traffic + was hit by the silver car. Kid + bike flew up in the air. Kid landed on the sidewalk + his bike + sneaker landed near the 25mph sign. Im a nurse so I stopped." Statement attached.

I spoke with a second witness, Leonard Williams D.O.B. 12/09/1979. Williams gave the following Sworn Written Statement. "I Leonard Williams was heading up Rubber Ave. toward Melbourne St. I seen the kid down the hill a little way when I was driving up. The light was red and just turned green. I started to accelerate when the kid past in front of my car. I slammed on the brake quick the kid past and crossed the street on his bike. He didn't stop by time he seen the silver Nissan it was to late for the driver and the kid and the impact happened. I stopped when I seen the kid in the air imediately. To render my services if needed." Statement attached.

DAMAGE PROPERTY CURB/STREET IN FOOTED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Kevin Zaine PL31	POLICE AGENCY ID Naugatuck Police	REPORT DATE 9/28/2009	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Bryan Cammarata S6
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(Handwritten signatures and initials: PL31, Sgt. B. Cammarata)

23

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

R 09

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

A 1

B 1

C 1

24

DATE OF ACCIDENT: Mon, Dec 7, 2009; MILITARY TIME: 11:13; ACCIDENT SEVERITY: Fatal, Injury, PDO; VEHS INVOLVED #: 2; PAGE #: 1 of 2; POLICE CASE NO: 09-29640

D 1

E 1

F 4

G 2

H 202

I 3

J 31

CITY or TOWN: Naugatuck; TOWN CODE: 088; ACCIDENT OCCURRED ON: Rubber Avenue at Melbourne Street

IF NOT AT INTERSECTION: 2. Direction; 3. Give nearest intersecting street, town line or mile marker of

TRAFFIC UNIT # 1: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle; TRAFFIC UNIT # 2: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Mejia - Soriano Leuri; OPER #2 or PEDESTRIAN (Last, First, MI): Boiteux Rachelle

ADDRESS (Street No & Name): 54 West North St; 142 Alexander Ave; PROPER LIC CLASS: Y

CITY or TOWN: Stamford; STATE: CT; ZIP: 06605; SEX: M; CITY or TOWN: Waterbury; STATE: CT; ZIP: 06708; SEX: F

OPER LICENSE NO: 028280043; STATE: CT; DATE OF BIRTH: 02/02/89; OPER LICENSE NO: 097984958; STATE: CT; DATE OF BIRTH: 09/19/87

OWNER (Last, First, MI - Enter same, if owner is operator): Chaves Bakery; Boiteux Rachelle

ADDRESS (Street No & Name): 1365 State St; 142 Alexander Ave

CITY or TOWN: Bridgeport; STATE: CT; ZIP: 06605; BODY TYPE: Box Truck; CITY or TOWN: Waterbury; STATE: CT; ZIP: 06708; BODY TYPE: 4 Door

REGISTRATION NO: K29185; STATE: CT; VEH YEAR & MAKE: 1998 ISUZU NPR; REGISTRATION NO: 460WZD; STATE: CT; VEH YEAR & MAKE: 2001 CHEVR CAVALIER

VEH ID NO (VIN): JALB4B1K8W7004563; VEH ID NO (VIN): 1G1JF52T817396414

CARRIER: (Blank); CARRIER: (Blank)

CARRIER ADDRESS (Street, City or Town, State, Zip): (Blank); CARRIER ADDRESS (Street, City or Town, State, Zip): (Blank)

SOURCE OF CARRIER NAME: SP - Shipping Papers/Trip Manifest, D - Driver, S - Side of Vehicle; US DOT #, ICC, MC #

GROSS VEH WEIGHT, RATING #, HAZARDOUS MATERIAL PLACARD: Required Y-N, 4 Digit #, Displayed Y-N, 1 Digit #

HAZARDOUS CARGO, ENFORCEMENT ACTION TAKEN: Released Y-N, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): 14-240; SUBJ of ACTION: O - Operator - C-Carrier, OW-Owner - P-Pedestrian

AUTOMOBILE INS CO - NAME - POLICY#: Hartford Ins. Co. 02UUNAB1364; Esurance Ins. Co. PACT 003055713

PARTS of VEHICLE DAMAGED: Front nose; Rear end

VEHICLE TOWED TO: N/A; TOWED DUE TO DAMAGE: Y-N

Table with columns: L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON, TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1, TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2, DOB, O, P, Q

D 1

E 1

F 4

G 2

H 202

I 3

J 31

J 21 X

J 22 X

U 2 X

K 21 X

K 22 X

V 1

W 08

X 2 X

Y 2 X

Z 2 X

AA 21 X

AA 22 X

AA 23 X

AA 24 X

ALL INVOLVED PERSONS

15 H

4 S

35 T

X 11

X 12

X 13

X 14

X 15

X 16

X 17

X 18

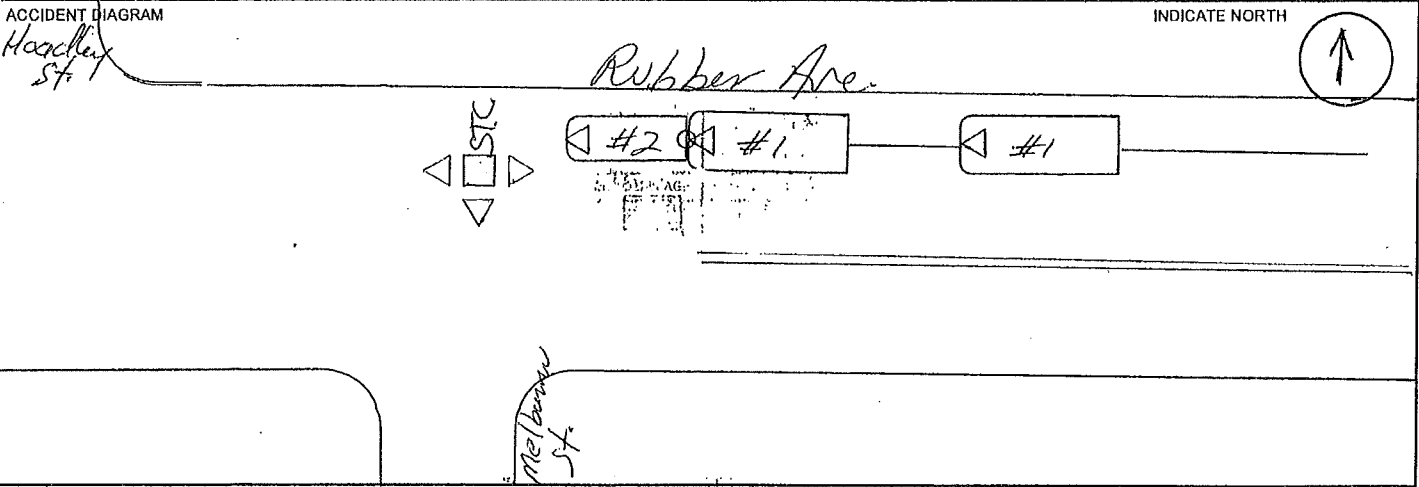
X 19

X 20

X 21

X 22

ALL INVOLVED PERSONS



DIRECTION OF TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Ave. Traffic Unit # 2 Traveling W on Rubber Ave.

OPERATOR #1: The operator of vehicle #1 said he was approaching a traffic light on Rubber Ave, and it was yellow then turned red. The operator of vehicle #1 said the vehicle in front of him stopped at the light when he thought the vehicle was going to keep going. The operator of vehicle #1 said that he could not stop, and he hit this vehicle from the rear.

OPERATOR #2: The operator of vehicle #2 said that she was traveling west on Rubber Ave. when she saw the traffic light at Rubber Avenue and Melbourne turn yellow so she stopped for this light. The operator of vehicle #2 said that seconds after she stopped at this light she was struck from behind.

My investigation disclosed that the operator of vehicle #1 was in violation of 14-240, Failure to drive a reasonable distance apart. I issued the operator of vehicle #1 a written warning for said statute. Both vehicles were driven from the scene. No injuries were reported at the scene.

DAMAGE TO PROPERTY OF OTHER VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	NONE
	NAME and ADDRESS of PROPERTY OWNER	NONE
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	NONE
	NAME and ADDRESS of PROPERTY OWNER	NONE

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Carmine Fidanza PL4	POLICE AGENCY ID Naugatuck Police	REPORT DATE 12/8/2009	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Bryan Cammarata S6
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[Signature] #4

[Signature]

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 5/94



FOR DOT USE ONLY

GPS READINGS: Latitude: _____ Time _____ Longitude: _____

DATE of ACCIDENT: **Sun, May 24, 2009** MILITARY TIME: **08:01** ACCIDENT SEVERITY: Fatal Injury PDO VEHs INVOLVED #: **2** PAGE #: **1** of **2** POLICE CASE NO: **09-12126**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Hoadley Street** at **Rubber Avenue**

IF NOT AT INTERSECTION 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
 1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers
 Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI) **Castoire Damaris** OPER #2 or PEDESTRIAN (Last, First, MI) **Lennon Jeremy D**

ADDRESS (Street No & Name) **45 Curtiss Street** PROPER LIC CLASS Y-N Y **84 Birch Lane** PROPER LIC CLASS Y-N Y

CITY or TOWN STATE ZIP **Naugatuck CT 06770** SEX M-F F **Naugatuck CT** SEX M-F M

OPER LICENSE NO STATE DATE of BIRTH **027702044 CT 02/09/69** OPER LICENSE NO STATE DATE of BIRTH **026629103 CT 02/03/77**

OWNER (Last, First, MI - Enter same, if owner is operator) **Castoire Damaris** OWNER'S (Last, First, MI - Enter same, if owner is operator) **Lennon Jeremy D**

ADDRESS (Street No & Name) **45 Curtiss Street** ADDRESS (Street No & Name) **84 Birch Lane**

CITY or TOWN STATE ZIP BODY TYPE **Naugatuck CT 4 Door** CITY or TOWN STATE ZIP BODY TYPE **Naugatuck CT Pickup**

REGISTRATION NO STATE VEH YEAR & MAKE **855ull CT 2003 TOYOTA** REGISTRATION NO STATE VEH YEAR & MAKE **2cd420 CT 1998 FORD**

VEH ID NO (VIN) **4T1BE32K13U656629** VEH ID NO (VIN) **1FTPF27L9WNB08380**

CARRIER _____ CARRIER _____

CARRIER ADDRESS (Street, City or Town, State, Zip) _____ CARRIER ADDRESS (Street, City or Town, State, Zip) _____

SOURCE of CARRIER NAME _____ US DOT # _____ SOURCE of CARRIER NAME _____ US DOT # _____

GROSS VEH WEIGHT HAZARDOUS MATERIAL PLACARD _____ GROSS VEH WEIGHT HAZARDOUS MATERIAL PLACARD _____

HAZARDOUS CARGO ENFORCEMENT ACTION TAKEN _____ HAZARDOUS CARGO ENFORCEMENT ACTION TAKEN _____

STATUTE or ORDINANCE NO(S) SUBJ of ACTION _____ STATUTE or ORDINANCE NO(S) SUBJ of ACTION _____

AUTOMOBILE INS CO-NAME-POLICY# **Progressive #17432597-2** AUTOMOBILE INS CO-NAME-POLICY# **Travelers #978915323**

PARTS of VEHICLE DAMAGED **Front Right** PARTS of VEHICLE DAMAGED **Front Left**

VEHICLE TOWED TO TOWED DUE TO DAMAGE **Sibby's Automotive Y-N Y** VEHICLE TOWED TO TOWED DUE TO DAMAGE _____ Y-N

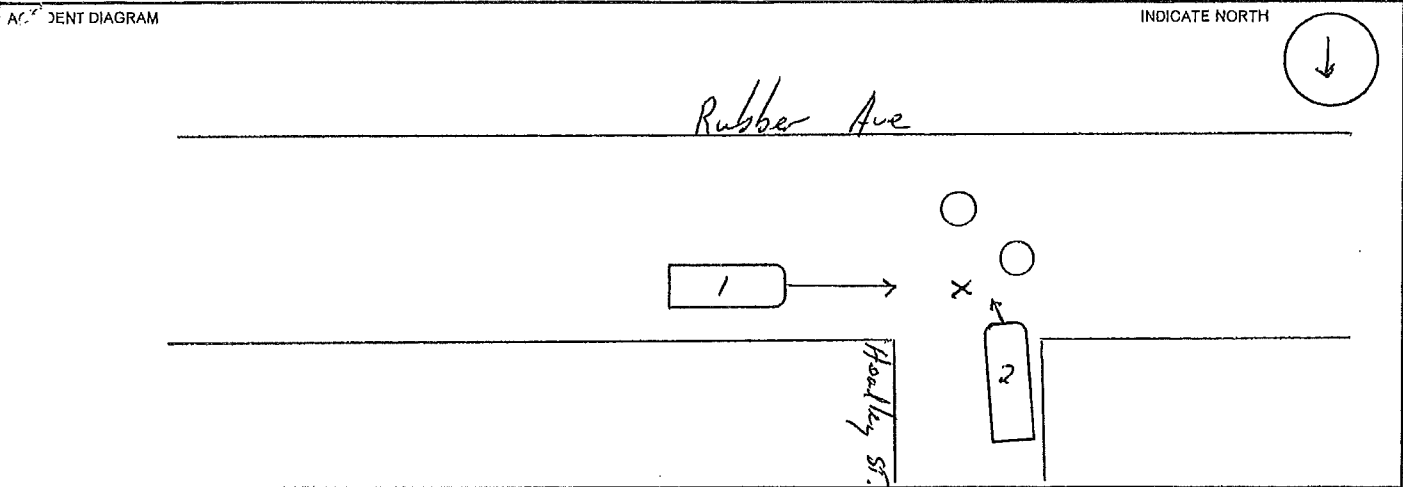
ALL INVOLVED PERSONS IN TRUCK

ALL INVOLVED PERSONS

	L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON		DOB	O	P	Q	
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1			4	3	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2			4	3	1	2
3	2	N	03	Lennon	Briana	12/22/00	4	3	1	3
4										4
5										5
6										6
7										7

03
2
2
1
1
1
4
2
02
1
09
21
22
2
21
22
1
03
2
2
2
2
21
22
23
24

25



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Travelling W on Rubber Avenue Traffic Unit # 2 Travelling S on Hoadley Street

Operator of Vehicle #1 stated that while driving up Rubber Avenue to pick up her sister she looked up and saw the red light but could not stop due to wet pavement and that her vehicle slid into Vehicle #2 which was coming out of Hoadley Street.

Operator of Vehicle #2 stated that he had a green light and was just pulling out of Hoadley Street when he saw Vehicle #1 coming at a high rate of speed. This operator stated that he stopped and tried to get out of the way but that Vehicle #1 hit his vehicle in the front left. Neither the operator of passenger in Vehicle #2 were injured. Vehicle #2 had moderate damage and was later driven from the scene.

Operator of Vehicle #1 stated that she was not injured. Vehicle #1 had to be towed from the scene due to the damage on the front right. This operator was cited for the accident and she was given Infraction #P261594-3 for State Traffic Control Violation (Red Light).

DAMAGE TO PROPERTY OR VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	
	NAME and ADDRESS of PROPERTY OWNER	
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	
	NAME and ADDRESS of PROPERTY OWNER	

RANK and SIGNATURE of INVESTIGATING OFFICER <i>[Signature]</i> Ptl. James Hennessey PL01	POLICE AGENCY ID Naugatuck PD	REPORT DATE 5/24/2009	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O O - Open C - Closed	SUPERVISOR <i>[Signature]</i> Sgt. Laura Harrison S3
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



LONGITUDES: Latitude: _____

Longitude: _____

FOR DOT USE ONLY

R 09
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 3
J 21 /
J 22 /
K 21 /
K 22 /
L 1
M 08

26

DATE OF ACCIDENT Mon, Feb 1, 2010	MILITARY TIME 15:47	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 10-2729
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Melbourne Street
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IF NOT AT INTERSECTION

1. Measure Distance _____

2. Direction _____

3. Give nearest intersecting street, town line or mile marker of _____

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Sheridan-Regan Elizabeth	OPER #2 or PEDESTRIAN (Last, First, MI) Santos-Salazar Carlos
--	---

ADDRESS (Street No & Name) 675 Millville Avenue	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 17 Wooster Ave	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	---	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN Waterbury	STATE CT	ZIP 06708	SEX M-F <input checked="" type="checkbox"/> M
----------------------------------	--------------------	---------------------	--	----------------------------------	--------------------	---------------------	--

OPER LICENSE NO 052967813	STATE CT	DATE OF BIRTH 05/16/63	OPER LICENSE NO 087451808	STATE CT	DATE OF BIRTH 08/02/79
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OWNER (Last, First, MI - Enter same, if owner is operator) Sheridan Elizabeth	OWNER'S (Last, First, MI - Enter same, if owner is operator) Marcel's Automotive
---	--

ADDRESS (Street No & Name) 675 Millville Avenue	ADDRESS (Street No & Name) 1000 Chase Pkwy
---	--

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN Waterbury	STATE CT	ZIP 06708	BODY TYPE WRECKER
----------------------------------	--------------------	---------------------	----------------------------	----------------------------------	--------------------	---------------------	-----------------------------

REGISTRATION NO 186REF	STATE CT	VEH YEAR & MAKE 2001 HYUNDA SONATA	REGISTRATION NO 52	STATE CT	VEH YEAR & MAKE 2008 INTL 4000 SER
----------------------------------	--------------------	--	------------------------------	--------------------	--

VEH ID NO (VIN) KMHWF25S21A397751	VEH ID NO (VIN) 3HTJTSKM18N689835
---	---

CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME <input type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> D - Driver <input type="checkbox"/> S - Side of Vehicle	US DOT # ICC, MC # _____	SOURCE of CARRIER NAME <input type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> D - Driver <input type="checkbox"/> S - Side of Vehicle	US DOT # ICC, MC # _____
--	-----------------------------	--	-----------------------------

GROSS VEH WEIGHT Rating # _____	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# _____ Displayed Y-N <input type="checkbox"/> 1 Digit# _____	GROSS VEH WEIGHT Rating # _____	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# _____ Displayed Y-N <input type="checkbox"/> 1 Digit# _____
------------------------------------	---	------------------------------------	---

HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning <input checked="" type="checkbox"/> W	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning <input checked="" type="checkbox"/> N
--	--	--	--

STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S) N/A	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian
---	---	--	---

AUTOMOBILE INS CO--NAME--POLICY# Unitrin Direct 1046409	AUTOMOBILE INS CO--NAME--POLICY# Navigators PY09PKG014212-00
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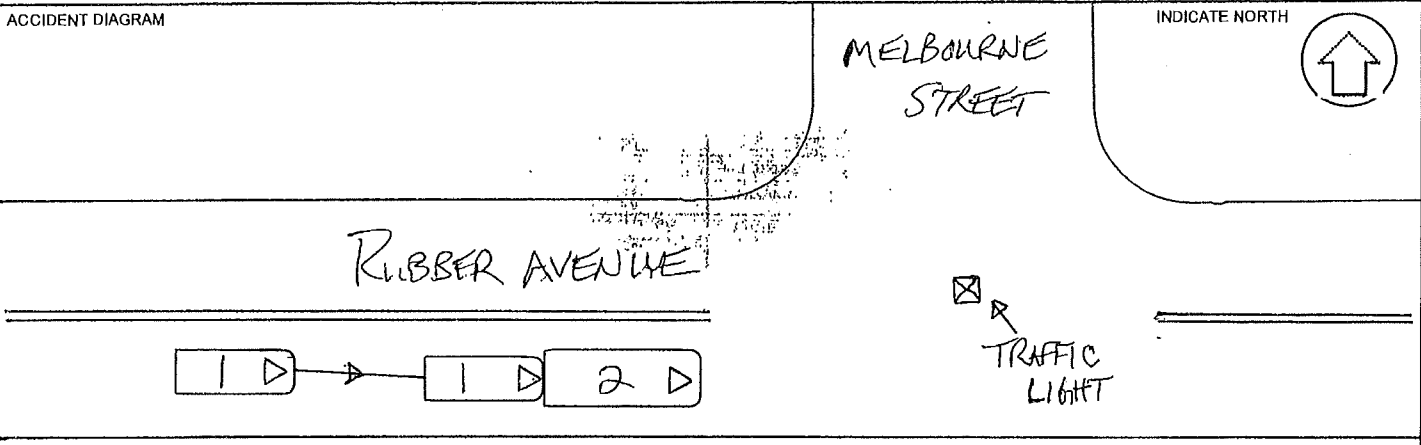
PARTS of VEHICLE DAMAGED Front end - severe	PARTS of VEHICLE DAMAGED Rear end - minor
---	---

VEHICLE TOWED TO A.T. Transmissions	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/> /
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ALL INVOLVED PERSONS

	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q	
	L	M	N					
1	1	N	01		4	2	1	1
2	2	N	01		4	2	1	2
3								3
4								4
5								5
6								6
7								7

ALL INVOLVED PERSONS



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling W on Rubber Avenue Traffic Unit # 2 Travelling W on Rubber Avenue

Vehicle #1 was stopped behind Vehicle #2 on Rubber Avenue at a red traffic signal at the Melbourne Street intersection. Vehicle #1 moved forward and struck the rear end of Vehicle #2. No reported injuries.

Operator #1 stated that she was stopped behind Vehicle #2 and thought the light turned green and that Vehicle #2 was moving forward, so she began to drive forward and struck Vehicle #2.

Operator #2 stated that he was waiting at the red light and was struck in the rear end by Vehicle #1.

Vehicle #1 suffered severe damage to the front end and was towed from the scene by A.T. Transmissions of Naugatuck, CT. I observed several minor scratches to the rear metal tow bar of Vehicle #2 (flatbed wrecker) but was unable to determine if the damage was old or new.

This collision was caused by Operator #1 failing to drive a reasonable distance apart from Vehicle #2 and she was issued a written warning for CGS Section 14-240 - Failure To Drive A Reasonable Distance Apart.

DAMAGE PROPERTY CURB/IN IF YOU'RE HERE	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE			
	NAME and ADDRESS of PROPERTY OWNER			
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE			
	NAME and ADDRESS of PROPERTY OWNER			
RANK and SIGNATURE of INVESTIGATING OFFICER		POLICE AGENCY ID	REPORT DATE	CASE STATUS
Ptl. Daniel Norck PL39 #139 		Naugatuck Police	2/1/2010	<input checked="" type="radio"/> C <input type="radio"/> O - Open <input type="radio"/> C - Closed
		SUPERVISOR		
		Lt. Robert Alh LT3 		

26

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



FOR DOT USE ONLY

R 09

A 1

B 1

C 1

32

GPS READINGS: Latitude:

Time Longitude:

DATE of ACCIDENT Sat, May 8, 2010	MILITARY TIME 15:57	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 3	PAGE # 1 of 3	POLICE CASE NO 10-10664
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance F - Feet
T - Tenths of Mile
M - Meters
K - Kilometers N - North
S - South
E - East
W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Padilla Victor	OPER #2 or PEDESTRIAN (Last, First, MI) Breton Roger
--	--

ADDRESS (Street No & Name) 607 Millville Avenue	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 24 Rockland Ave	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	--	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Waterbury	STATE CT	ZIP 06708	SEX M-F <input checked="" type="checkbox"/> M
----------------------------------	--------------------	---------------------	--	----------------------------------	--------------------	---------------------	--

OPER LICENSE NO 068494890	STATE CT	DATE of BIRTH 06/09/91	OPER LICENSE NO 053400698	STATE CT	DATE of BIRTH 06/28/59
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OWNER (Last, First, MI - Enter same, if owner is operator) Padilla Victor	OWNER'S (Last, First, MI - Enter same, if owner is operator) Breton Roger
---	---

ADDRESS (Street No & Name) 607 Millville Avenue	ADDRESS (Street No & Name) 24 Rockland Ave
---	--

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN Waterbury	STATE CT	ZIP 06708	BODY TYPE 4 Door
----------------------------------	--------------------	---------------------	----------------------------	----------------------------------	--------------------	---------------------	----------------------------

REGISTRATION NO 108XYU	STATE CT	VEH YEAR & MAKE 2000 PONTIA GRAND AM	REGISTRATION NO 361SWZ	STATE CT	VEH YEAR & MAKE 1994 GEO PRISM
----------------------------------	--------------------	--	----------------------------------	--------------------	--

VEH ID NO (VIN) 1Y1SK5382RZ022023	VEH ID NO (VIN) 1Y1SK5382RZ022023
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
---	-----------------------	---	-----------------------

GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
---------------------------------	--	---------------------------------	--

STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW - Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C-Carrier OW - Owner - P-Pedestrian
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AUTOMOBILE INS CO--NAME--POLICY# Allstate 919425776	AUTOMOBILE INS CO--NAME--POLICY# Trumbull Ins
---	---

PARTS of VEHICLE DAMAGED Front Bumper	PARTS of VEHICLE DAMAGED Front & Rear Bumper
---	--

VEHICLE TOWED TO Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO Y-N <input checked="" type="checkbox"/> No
--	--

	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q					
	L	M	N									
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1								
2	2	C	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2								
3	1	N	03	Tarrello	Kara	41 Bingham Street Naugatuck, CT		07/29/94	9	2	1	3
4	1	N	06	Santos	Brandon	20 Diamond Steet Naugatuck, CT		10/29/94	9	2	1	4
5												
6												
7												

02H
1S
01I

X11
X12

XW
X11
X12

X1
X2
Z1
Z2

AA11
AA12
AA13
AA14

ALL INVOLVED PERSONS IN TRIP

D 1

E 1

F 4

G 2

H 02

I 3

J 31

J 21 X

J 22 X

U 2 X

K 21 X

K 22 X

V 1

W 08

X 2

Y 2

Z 2

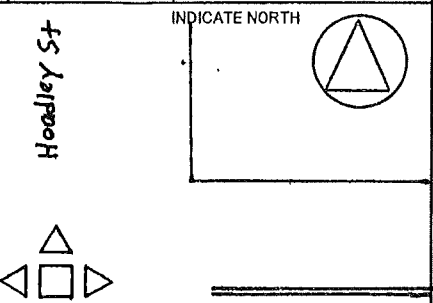
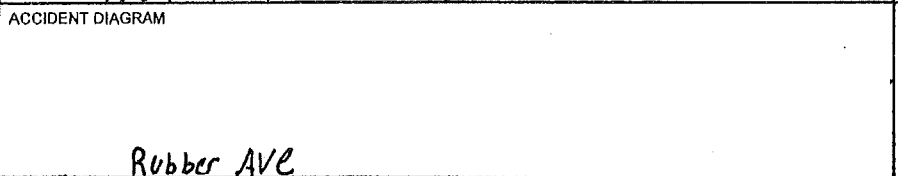
AA 21

AA 22

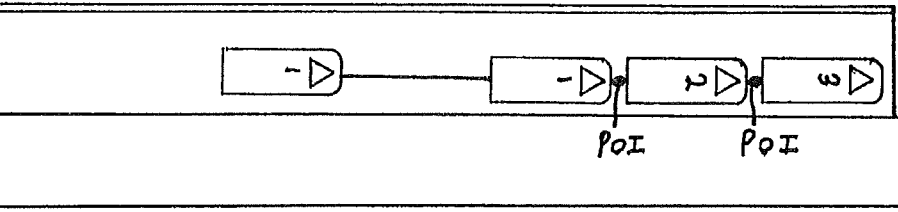
AA 23

AA 24

ALL INVOLVED PERSONS



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DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Traveling E on Rubber Ave Traffic Unit # 2 Traveling E on Rubber Ave

Operator 1: Operator 1 stated he was traveling East bound on Rubber Avenue. Operator 1 stated he did not notice traffic was at a stand still for the traffic light, because he looked to the side of the road way for a moment. Operator 1 stated the front bumper collided with the rear bumper of vehicle 2.

Operator 2: Operator 2 stated he was facing East bound on Rubber avenue, at a stand still waiting for the traffic signal to change from red to green. Operator 2 stated the front bumper of vehicle 1 collided with the rear bumper of his vehicle. Operator 2 stated the impact caused the front bumper of his vehicle to collide with the rear bumper of vehicle 3.

Operator 3: Operator 3 stated he was facing East bound on Rubber avenue, at a stand still waiting for the traffic signal to change from red to green. Operator 3 stated the front bumper of vehicle 2 collided with the rear bumper of his vehicle.

Officer: Upon my arrival, operators 1 and 3 stated they did not receive any injuries. Operator 2 stated he received an injury to his neck, from the impact of the collision. Operator 2 was treated and later transported to Waterbury Hospital via Naugatuck EMS. I received consistent statements from all three operators. I did not observe major damage to any of the three vehicles. Through my investigation, I found operator 1 at fault for violating C.G.S 14-240. I issued and explained an infraction to operator 1.

No further action.

DAMAGE TO PROPERTY OR VEHICLES IF YOU SEE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>Marc Robinson</i> Ptl. Marc Robinson PL40	POLICE AGENCY ID Naugatuck Police	REPORT DATE 5/16/2010	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR <i>[Signature]</i>
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[Signature] 40

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Sat, May 8, 2010	MILITARY TIME 15:57	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 3	PAGE # 3 of 3	POLICE CASE NO 10-10664
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION

1. Measure Distance F - Feet
T - Tenths of Mile
M - Meters
K - Kilometers

2. Direction N - North
S - South
E - East
W - West

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 3 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 4 <input type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	--

OPER #1 or PEDESTRIAN (Last, First, MI) Butwell Nicholas	OPER #2 or PEDESTRIAN (Last, First, MI)
--	---

ADDRESS (Street No & Name) 824 Rubber Avenue	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name)	PROPER LIC CLASS Y-N <input type="checkbox"/>
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN	STATE	ZIP	SEX M-F <input type="checkbox"/>
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OPER LICENSE NO 057911655	STATE CT	DATE of BIRTH 05/06/87	OPER LICENSE NO	STATE	DATE of BIRTH
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OWNER (Last, First, MI - Enter same, if owner is operator) Butwell Nicholas	OWNER'S (Last, First, MI - Enter same, if owner is operator)
---	--

ADDRESS (Street No & Name) 824 Rubber Avenue	ADDRESS (Street No & Name)
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN	STATE	ZIP	BODY TYPE
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REGISTRATION NO 431XPN	STATE CT	VEH YEAR & MAKE 1995 FORD CROWN	REGISTRATION NO	STATE	VEH YEAR & MAKE
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VEH ID NO (VIN) 2FALP74W7SX124843	VEH ID NO (VIN)
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'CARRIER'	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 1 Digit #	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 1 Digit #
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HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO - NAME - POLICY# USAA General 02330 88 83G	AUTOMOBILE INS CO - NAME - POLICY#
--	------------------------------------

PARTS of VEHICLE DAMAGED Rear Bumper	PARTS of VEHICLE DAMAGED
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VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>
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	L M N			NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		9	2	1
2				TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				
3	1	N	03	Faust Amanda 194 Myrtle Street Naugatuck, CT	11/18/89	9	2	1
4								
5								
6								
7								

02^H
3⁹
31^I
X^J
X^J
X^K
X^K
X^L
Y^L
Z^L
AA^L
AA^L
AA^L
AA^L

R 09
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 2
I 2
J 21
J 22
K 21
K 22
L 1
W 08
X 2
Y 2
Z 2
AA 21
AA 22
AA 23
AA 24

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ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



R09

A 1

B 1

C 1

D 1

E 1

F 4

G 2

H 202

I 3

J 31

K 2 X

L 2 X

M 2 X

N 1

O 8

P 2 X

Q 2 X

R 2 X

S 2 X

T 2 X

U 2 X

V 1

W 08

X 2

Y 2

Z 2

AA 21

AA 22

AA 23

AA 24

AA 25

AA 26

AA 27

AA 28

AA 29

AA 30

AA 31

AA 32

AA 33

AA 34

AA 35

AA 36

AA 37

AA 38

AA 39

AA 40

AA 41

AA 42

AA 43

AA 44

AA 45

AA 46

AA 47

AA 48

AA 49

AA 50

GPS READINGS: Latitude: Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: Wed, Jun 16, 2010 MILITARY TIME: 17:55 ACCIDENT SEVERITY: Fatal Injury PDO VEH INVOLVED #: 2 PAGE #: 1 or 2 POLICE CASE NO: 10-14246

CITY or TOWN: Naugatuck TOWN CODE: 088 ACCIDENT OCCURRED ON: Rubber Avenue at Melbourne Street

IF NOT AT INTERSECTION: 2. Direction 3. Give nearest intersecting street, town line or mile marker of

TRAFFIC UNIT # 1: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Santos Joseph OPER #2 or PEDESTRIAN (Last, First, MI): Pucci Richard

ADDRESS (Street No & Name): 133 Wedgewood Drive PROPER LIC CLASS: Y-N Y CITY or TOWN: Naugatuck STATE: CT ZIP: 06770 SEX: M-F M

OPER LICENSE NO: 227987350 STATE: CT DATE OF BIRTH: 10/20/86 OPER LICENSE NO: 026457172 STATE: CT DATE OF BIRTH: 02/20/71

OWNER (Last, First, MI - Enter same, if owner is operator): Santos Joseph OWNER'S (Last, First, MI - Enter same, if owner is operator): Pucci Richard

ADDRESS (Street No & Name): 133 Wedgewood Drive ADDRESS (Street No & Name): 211 Wedgewood Drive

CITY or TOWN: Naugatuck STATE: CT ZIP: 06770 BODY TYPE: 4 Door CITY or TOWN: Naugatuck STATE: CT ZIP: 06770 BODY TYPE: Station

REGISTRATION NO: 458WDS STATE: CT VEH YEAR & MAKE: 1999 ACURA RL REGISTRATION NO: 309XVA STATE: CT VEH YEAR & MAKE: 2009 TOYOT MATRIX

VEH ID NO (VIN): JH4KA9655XC011385 VEH ID NO (VIN): 2T1LE40E49C010812

CARRIER: CARRIER: CARRIER ADDRESS (Street, City or Town, State, Zip): CARRIER ADDRESS (Street, City or Town, State, Zip):

SOURCE of CARRIER NAME: SOURCE of CARRIER NAME: SP - Shipping Papers/Trip Manifest US DOT # ICC, MC # D - Driver S - Side of Vehicle

GROSS VEH WEIGHT: HAZARDOUS MATERIAL PLACARD: Required Y-N 4 Digit# Displayed Y-N 1 Digit#

HAZARDOUS CARGO: ENFORCEMENT ACTION TAKEN: Released Y-N V N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): 14-240 SUBJ of ACTION: OW O-Operator - C-Carrier OW-Owner - P-Pedestrian

AUTOMOBILE INS CO-NAME-POLICY#: Hanover Ins- ASE 8702818 AUTOMOBILE INS CO-NAME-POLICY#: Allstate- 9 19 842955

PARTS of VEHICLE DAMAGED: Front Bumper PARTS of VEHICLE DAMAGED: Rear Bumper

VEHICLE TOWED TO: TOWED DUE TO DAMAGE: Y-N No

ALL INVOLVED PERSONS: L M N NAME and ADDRESS of EACH INVOLVED PERSON DOB O P Q

1 1 N 01 TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1 9 2 1 1

2 2 N 01 TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2 9 2 1 2

3 4 6 6 7

02 1 01

X11 X12

X11 X12

X11 X12

AA 11 AA 12 AA 13 AA 14

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

28

Not to Scale

2 of 2

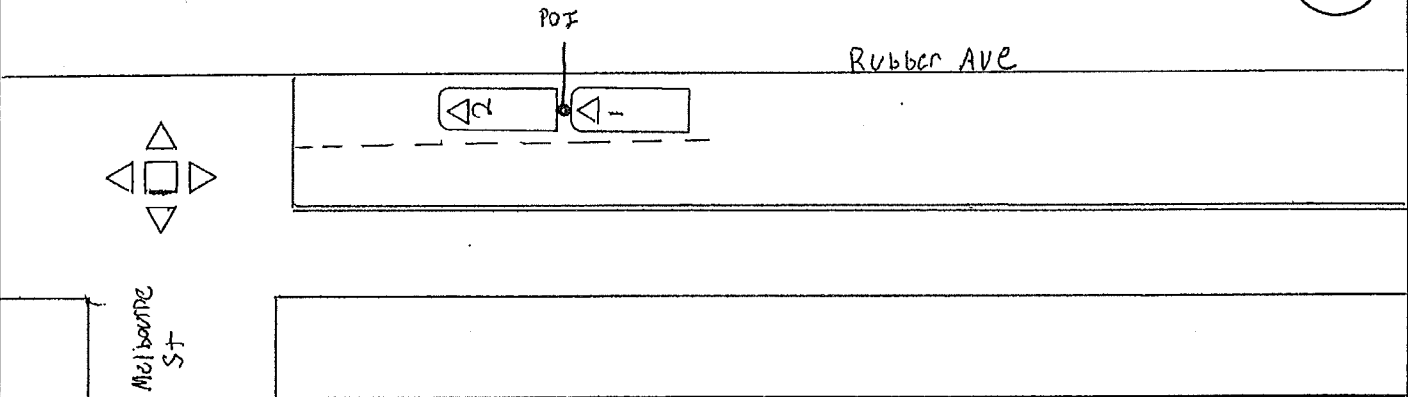
10-14246

ACCIDENT DIAGRAM

INDICATE NORTH



28



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling W on Rubber Ave

Traffic Unit # 2 Travelling W on Rubber Ave

Operator 1: Operator 1 stated he was stopped facing West bound on Rubber Ave for the traffic light at the intersection of Melbourne Street. Operator 1 stated the traffic light turned green so he began to accelerate. Operator 1 stated he was unaware Vehicle 2 had not yet moved forward. Operator 1 stated he looked in his rear view mirror of a moment before his front bumper collided with the rear bumper of Vehicle 2.

Operator 2: Operator 2 stated he was stopped facing West bound on Rubber Ave for the traffic light at the intersection of Melbourne Street. Operator 2 stated as he was waiting to the traffic ahead to move for the green light, the front bumper of Vehicle 1 collided with the rear bumper of his Vehicle.

Officer: Upon my arrival, I asked all parties if anyone had received any injuries. Both operators stated "No". I received the necessary paper work from both Operators. I did not observe any visible damage on either vehicle. Thorough my investigation I found Operator 1 at fault for violating C.G.S 14-240 "Following Too Closely". I issued a verbal warning to Operator 1.

No further action.

DAMAGE TO PROPERTY CURRENTLY IN POLICE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Marc Robinson PL40	POLICE AGENCY ID Naugatuck Police	REPORT DATE 6/16/2010	CASE STATUS <input checked="" type="checkbox"/> C O - Open C - Closed	SUPERVISOR Sgt. Randy Ireland S6
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[Handwritten signature] 40

[Handwritten signature]

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude: _____
Time: _____ Longitude: _____



FOR DOT USE ONLY

DATE of ACCIDENT Wed, Jul 21, 2010	MILITARY TIME 14:14	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 10-17302
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley St.
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IF NOT AT INTERSECTION

2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____

1. Measure Distance _____

F - Feet
T - Tenths of Mile
M - Meters
K - Kilometers

N - North
S - South
E - East
W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Felix Fernanda	OPER #2 or PEDESTRIAN (Last, First, MI) Boutot Emily
--	--

ADDRESS (Street No & Name) 135 Pines Bridge Rd.	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 208 Spencer Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	---	---

CITY or TOWN Beacon Falls	STATE CT	ZIP 06403	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F
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OPER LICENSE NO 116533942	STATE CT	DATE of BIRTH 11/15/75	OPER LICENSE NO 194966592	STATE CT	DATE of BIRTH 09/04/63
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OWNER (Last, First, MI - Enter same, if owner is operator) Felix Fernanda	OWNER'S (Last, First, MI - Enter same, if owner is operator) Boutot Emily
---	---

ADDRESS (Street No & Name) 135 Pines Bridge Rd.	ADDRESS (Street No & Name) 208 Spencer Street
---	---

CITY or TOWN Beacon Falls	STATE CT	ZIP 06403	BODY TYPE	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE
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REGISTRATION NO 711GKS	STATE CT	VEH YEAR & MAKE 1997 VOLKSW JETTA	REGISTRATION NO 761PNZ	STATE CT	VEH YEAR & MAKE 1998 NISSAN MAXIMA
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VEH ID NO (VIN) 3VWSB81H1VM060991	VEH ID NO (VIN) JN1CA21D7WM916346
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O-Operator - C-Carrier OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O-Operator - C-Carrier OW-Owner - P-Pedestrian
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AUTOMOBILE INS CO--NAME--POLICY# Massachusettes Homeland	AUTOMOBILE INS CO--NAME--POLICY# IDS Property
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PARTS of VEHICLE DAMAGED Passenger Side	PARTS of VEHICLE DAMAGED Front End
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VEHICLE TOWED TO _____	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q
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ALL INVOLVED PERSONS	1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1			4	2	1	1	
	2	2	C	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2			4	2	1	2	
	3	2	N	04	Boutot	Madeline	208 Spencer St., Naugatuck	05/16/00	4	2	1	3
	4	2	N	06	Blanchard	Kathryn	212 Spencer St., Naugatuck	09/13/99	4	2	1	4
	5											5
	6											6
	7											7

ALL INVOLVED PERSONS

02
1
01

11
12

11
12

X
Y
Z

AA
AA
AA
AA

R08
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 202
I 1
J 09

J 21
J 22

V
K 21
K 22
W

X
Y
Z

AA
AA
AA
AA

29

ACCIDENT DIAGRAM

INDICATE NORTH



HOADLEY ST

RUBBER AVE.

Op.#1

Op.#1

Op.#1

*NOT DRAWN TO SCALE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling W on Rubber Ave.

Traffic Unit # 2 Travelling S on Hoadley St.

Op.#1 stated that she was traveling west on Rubber Ave. Op.#1 stated that as she had stopped for the red traffic light at the intersection of Rubber Ave. and Melborne St. Op.#1 stated that her traffic light turned green and she began to travel west on Rubber Ave. Op.#1 stated that as she began to clear the intersection she observed Veh.#2 traveling south on Hoadley St. Op.#1 stated that Veh.#2 was traveling at a high rate of speed. Op.#1 stated that Veh.#2 failed to stop for the stop light and struck Veh.#1 in its passenger side causing heavy damage. Op.#1 stated that she was traveling the speed limit and had the green light.

Op.#2 stated that she was stopped facing south on Hoadley St. at its intersection with Rubber Ave. Op.#2 stated that her light then turned green. Op.#2 stated that she was going to continue through this intersection to make a left onto Rubber Ave. Op.#2 stated that as she entered this intersection Veh.#1 was in her path. Op.#2 stated that she then struck Veh.#1 in its passenger side causing moderate damage to the front end of Veh.#2. Both juvenile passengers of Veh.#2 agreed upon Op.#2's side of the incident.

This Officer states that the weather on this date was clear and the road surface was free from the elements and debris. Observation of the traffic light was conducted after the scene was clear and the traffic light appeared to be cycling properly. There were no witnesses to the crash and a delay in the completion of this report was made to see if any would come forward. Op.#2 was transported to an area hospital for the complaint of neck and back pain. Veh.#1 was towed from the scene due to damage. Due to conflicting statements and the lack of a witness no enforcement action was taken. No other action at this time pending further information.

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER

PII, Peter Bosca PL11

POLICE AGENCY ID

Naugatuck Police

REPORT DATE

8/1/2010

CASE STATUS

Open
 Closed

SUPERVISOR

Sgt. Bryan Cammarata S5

29

[Handwritten signature] #1

[Handwritten signature] Sgt. B. Cammarata S5

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



FOR DOT USE ONLY

GPS READINGS Latitude:

Time Longitude:

DATE of ACCIDENT Tue, Jul 27, 2010	MILITARY TIME 11:22	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 10-20275
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION

1. Measure Distance _____

2. Direction _____

3. Give nearest intersecting street, town line or mile marker of _____

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Mejia Victor	OPER #2 or PEDESTRIAN (Last, First, MI) Butwell John
--	--

ADDRESS (Street No & Name) 144 Willow St	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 33 Neumann Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
--	---	--	---

CITY or TOWN Waterbury	STATE CT	ZIP	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Naugatuck	STATE CT	ZIP	SEX M-F <input checked="" type="checkbox"/> M
----------------------------------	--------------------	-----	--	----------------------------------	--------------------	-----	--

OPER LICENSE NO 198309974	STATE CT	DATE of BIRTH 07/26/90	OPER LICENSE NO 111522787	STATE CT	DATE of BIRTH 11/29/39
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OWNER (Last, First, MI - Enter same, if owner is operator) Bernard Jason	OWNER'S (Last, First, MI - Enter same, if owner is operator) Butwell John
--	---

ADDRESS (Street No & Name) 116 Fairway Dr	ADDRESS (Street No & Name) 33 Neumann Street
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CITY or TOWN Wethersfield	STATE CT	ZIP	BODY TYPE Sport /	CITY or TOWN Naugatuck	STATE CT	ZIP	BODY TYPE Station
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REGISTRATION NO 375WBC	STATE CT	VEH YEAR & MAKE 1997 NISSAN Pathfinder	REGISTRATION NO 282XLO	STATE CT	VEH YEAR & MAKE 2001 FORD Focus
----------------------------------	--------------------	--	----------------------------------	--------------------	---

VEH ID NO (VIN) JN8AR05Y3VW150301	VEH ID NO (VIN) 1FAFP36341W242545
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO - NAME - POLICY# Gelco 2012208290	2012208290	AUTOMOBILE INS CO - NAME - POLICY# Progressive 554990618	554990618
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PARTS of VEHICLE DAMAGED Front Bumper	PARTS of VEHICLE DAMAGED Rear bumper
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VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N
------------------	----------------------------	------------------	----------------------------

L	M	N	O	P	Q	NAME and ADDRESS of EACH INVOLVED PERSON			
						1	2	3	4
1	1	N	01			TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1			
2	2	C	01			TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2			
3									
4									
5									
6									
7									

02H
4 S
35 T
/ J 11
/ J 12
/ W 11
/ K 11
/ K 12
7 X
2 Y
/ Z 1
AA 09
AA 12
AA 13
AA 14

R09
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 3
J 31
J 21 /
J 22 /
U 2 /
K 21 /
K 22 /
V 1
W 08
X 7
Y 2
Z 7
AA 09
AA 21
AA 22
AA 23
AA 24

30

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

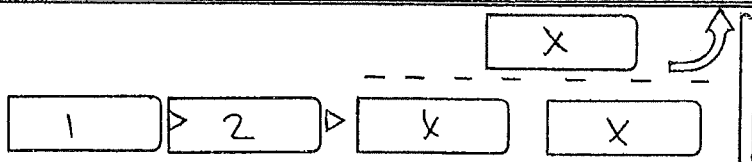
ACCIDENT DIAGRAM

INDICATE NORTH

Hoadley Street



30



Rubber Avenue

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator #1- Stated he was traveling east on Rubber Avenue approaching the red light at the intersection with Hoadley Street. Stated he slowed, but his vehicle would not stop due to "bucking". Stated he thought something was faulty with the clutch. Stated he collided into the rear of Vehicle #2. Stated he was not injured. Stated there was damage to the front bumper of the vehicle.

Operator #2- Stated he was traveling east on Rubber Avenue, and he was stopped for a red light at the intersection with Hoadley Street. Stated Vehicle #1 collided into the rear of his vehicle. Stated there was damage to the rear bumper of his vehicle. Stated his back hurt, but that he did not want medical treatment.

Officer- Observed damage to the front bumper of vehicle #1 and to the rear bumper of vehicle #2. Based on the statements and the scene investigation, Operator #1 was found at fault for the accident and was issued a verbal warning for Following Too Closely. Neither vehicle was towed.

DAMAGE REPORT ON COLLIDED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Robert Byrne PL32	POLICE AGENCY ID Naugatuck Police	REPORT DATE 9/7/2010	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Brian Newman S4
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LT. Robert [Signature] LT3

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 Rev. 01/01

GPS READINGS: Latitude: Time Longitude: FOR DOT USE ONLY

DATE OF ACCIDENT: Thu, Feb 16, 2012 MILITARY TIME: 09:39 ACCIDENT SEVERITY: Fatal [] Injury [] PDO [X] VEH INVOLVED #: 2 PAGE #: 1 of 3 POLICE CASE NO: 12-4319

CITY or TOWN: Naugatuck TOWN CODE: 088 ACCIDENT OCCURRED ON: Rubber Avenue at Hoadley Street

IF NOT AT INTERSECTION: 2. Direction 3. Give nearest intersecting street, town line or mile marker of 1. Measure Distance [] F - Feet T - Tenths of Mile M - Meters K - Kilometers [] N - North S - South E - East W - West Accident Occurred: [] On Private Property [] Parking Lot

TRAFFIC UNIT # 1 [V] V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 [V] V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Young Maureen OPER #2 or PEDESTRIAN (Last, First, MI): Maitland Tewfik

ADDRESS (Street No & Name): 315 North Hoadley Street PROPER LIC CLASS: Y-N [Y] ADDRESS (Street No & Name): 70 Marlin Drive PROPER LIC CLASS: Y-N [Y]

CITY or TOWN: Naugatuck STATE: CT ZIP: 06770 SEX: M-F [F] CITY or TOWN: Norwalk STATE: CT ZIP: 06854 SEX: M-F [M]

OPER LICENSE NO: 104727393 STATE: CT DATE OF BIRTH: 10/12/57 OPER LICENSE NO: 163575702 STATE: CT DATE OF BIRTH: 04/04/58

OWNER (Last, First, MI - Enter same, if owner is operator): Young Maureen OWNER'S (Last, First, MI - Enter same, if owner is operator): Maitland Tewfik

ADDRESS (Street No & Name): 315 North Hoadley Street ADDRESS (Street No & Name): 70 Marlin Drive

CITY or TOWN: Naugatuck STATE: CT ZIP: 06770 BODY TYPE: 4 Door CITY or TOWN: Norwalk STATE: CT ZIP: 06854 BODY TYPE: Van

REGISTRATION NO: 649TTE STATE: CT VEH YEAR & MAKE: 05 HONDA ACCORD REGISTRATION NO: 377YJV STATE: CT VEH YEAR & MAKE: 02 NISSAN QUEST

VEH ID NO (VIN): 1HGCM55445A127878 VEH ID NO (VIN): 4N22N16T92D818755

CARRIER: CARRIER: CARRIER ADDRESS (Street, City or Town, State, Zip): CARRIER ADDRESS (Street, City or Town, State, Zip):

SOURCE OF CARRIER NAME: SOURCE OF CARRIER NAME: SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle US DOT # ICC, MC #

GROSS VEH WEIGHT: HAZARDOUS MATERIAL PLACARD: Required Y-N [] 4 Digit# [] Displayed Y-N [] 1 Digit# []

HAZARDOUS CARGO: ENFORCEMENT ACTION TAKEN: Released Y-N [] N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): N/A SUBJ of ACTION: O - Operator - C-Carrier OW-Owner - P-Pedestrian

AUTOMOBILE INS CO-NAME-POLICY#: Allstate 019609299 AUTOMOBILE INS CO-NAME-POLICY#: Geico 4052783455

PARTS of VEHICLE DAMAGED: Left rear 1/4 panel and LR tire PARTS of VEHICLE DAMAGED: Left front bumper and headlight

VEHICLE TOWED TO: N/A TOWED DUE TO DAMAGE: Y-N [No] VEHICLE TOWED TO: N/A TOWED DUE TO DAMAGE: Y-N [No]

NAME and ADDRESS of EACH INVOLVED PERSON: DOB O P Q

Table with 4 columns: L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON. Row 1: 1, 1, N, 01. Row 2: 2, 2, N, 01.

Table with 4 columns: DOB, O, P, Q. Row 1: 4, 2, 1, 1. Row 2: 4, 2, 1, 2.

Table with 4 columns: DOB, O, P, Q. Row 3: 3, 3, 3, 3. Row 4: 4, 4, 4, 4. Row 5: 5, 5, 5, 5. Row 6: 6, 6, 6, 6. Row 7: 7, 7, 7, 7.

Table with 4 columns: DOB, O, P, Q. Row 7: 7, 7, 7, 7.

Table with 4 columns: DOB, O, P, Q. Row 8: 8, 8, 8, 8.

Vertical list of checkboxes on the left margin: 02, 1, 09, /11, /12, /13, /14, /15, /16, /17, /18, /19, /20, /21, /22, /23, /24, /25, /26, /27, /28, /29, /30, /31, /32, /33, /34, /35, /36, /37, /38, /39, /40, /41, /42, /43, /44, /45, /46, /47, /48, /49, /50, /51, /52, /53, /54, /55, /56, /57, /58, /59, /60.

Vertical list of checkboxes on the right margin: R03, A1, B1, C1, D1, E1, F4, G2, H202, I21, J21, K21, L21, M21, N21, O21, P21, Q21, R21, S21, T21, U21, V21, W21, X21, Y21, Z21, AA21, AB21, AC21, AD21, AE21, AF21, AG21, AH21, AI21, AJ21, AK21, AL21, AM21, AN21, AO21, AP21, AQ21, AR21, AS21, AT21, AU21, AV21, AW21, AX21, AY21, AZ21, BA21, BB21, BC21, BD21, BE21, BF21, BG21, BH21, BI21, BJ21, BK21, BL21, BM21, BN21, BO21, BP21, BQ21, BR21, BS21, BT21, BU21, BV21, BW21, BX21, BY21, BZ21, CA21, CB21, CC21, CD21, CE21, CF21, CG21, CH21, CI21, CJ21, CK21, CL21, CM21, CN21, CO21, CP21, CQ21, CR21, CS21, CT21, CU21, CV21, CW21, CX21, CY21, CZ21, DA21, DB21, DC21, DD21, DE21, DF21, DG21, DH21, DI21, DJ21, DK21, DL21, DM21, DN21, DO21, DP21, DQ21, DR21, DS21, DT21, DU21, DV21, DW21, DX21, DY21, DZ21, EA21, EB21, EC21, ED21, EE21, EF21, EG21, EH21, EI21, EJ21, EK21, EL21, EM21, EN21, EO21, EP21, EQ21, ER21, ES21, ET21, EU21, EV21, EW21, EX21, EY21, EZ21, FA21, FB21, FC21, FD21, FE21, FF21, FG21, FH21, FI21, FJ21, FK21, FL21, FM21, FN21, FO21, FP21, FQ21, FR21, FS21, FT21, FU21, FV21, FW21, FX21, FY21, FZ21, GA21, GB21, GC21, GD21, GE21, GF21, GG21, GH21, GI21, GJ21, GK21, GL21, GM21, GN21, GO21, GP21, GQ21, GR21, GS21, GT21, GU21, GV21, GW21, GX21, GY21, GZ21, HA21, HB21, HC21, HD21, HE21, HF21, HG21, HH21, HI21, HJ21, HK21, HL21, HM21, HN21, HO21, HP21, HQ21, HR21, HS21, HT21, HU21, HV21, HW21, HX21, HY21, HZ21, IA21, IB21, IC21, ID21, IE21, IF21, IG21, IH21, II21, IJ21, IK21, IL21, IM21, IN21, IO21, IP21, IQ21, IR21, IS21, IT21, IU21, IV21, IW21, IX21, IY21, IZ21, JA21, JB21, JC21, JD21, JE21, JF21, JG21, JH21, JI21, JJ21, JK21, JL21, JM21, JN21, JO21, JP21, JQ21, JR21, JS21, JT21, JU21, JV21, JW21, JX21, JY21, JZ21, KA21, KB21, KC21, KD21, KE21, KF21, KG21, KH21, KI21, KJ21, KK21, KL21, KM21, KN21, KO21, KP21, KQ21, KR21, KS21, KT21, KU21, KV21, KW21, KX21, KY21, KZ21, LA21, LB21, LC21, LD21, LE21, LF21, LG21, LH21, LI21, LJ21, LK21, LL21, LM21, LN21, LO21, LP21, LQ21, LR21, LS21, LT21, LU21, LV21, LW21, LX21, LY21, LZ21, MA21, MB21, MC21, MD21, ME21, MF21, MG21, MH21, MI21, MJ21, MK21, ML21, MM21, MN21, MO21, MP21, MQ21, MR21, MS21, MT21, MU21, MV21, MW21, MX21, MY21, MZ21, NA21, NB21, NC21, ND21, NE21, NF21, NG21, NH21, NI21, NJ21, NK21, NL21, NM21, NN21, NO21, NP21, NQ21, NR21, NS21, NT21, NU21, NV21, NW21, NX21, NY21, NZ21, OA21, OB21, OC21, OD21, OE21, OF21, OG21, OH21, OI21, OJ21, OK21, OL21, OM21, ON21, OO21, OP21, OQ21, OR21, OS21, OT21, OU21, OV21, OW21, OX21, OY21, OZ21, PA21, PB21, PC21, PD21, PE21, PF21, PG21, PH21, PI21, PJ21, PK21, PL21, PM21, PN21, PO21, PP21, PQ21, PR21, PS21, PT21, PU21, PV21, PW21, PX21, PY21, PZ21, QA21, QB21, QC21, QD21, QE21, QF21, QG21, QH21, QI21, QJ21, QK21, QL21, QM21, QN21, QO21, QP21, QQ21, QR21, QS21, QT21, QU21, QV21, QW21, QX21, QY21, QZ21, RA21, RB21, RC21, RD21, RE21, RF21, RG21, RH21, RI21, RJ21, RK21, RL21, RM21, RN21, RO21, RP21, RQ21, RR21, RS21, RT21, RU21, RV21, RW21, RX21, RY21, RZ21, SA21, SB21, SC21, SD21, SE21, SF21, SG21, SH21, SI21, SJ21, SK21, SL21, SM21, SN21, SO21, SP21, SQ21, SR21, SS21, ST21, SU21, SV21, SW21, SX21, SY21, SZ21, TA21, TB21, TC21, TD21, TE21, TF21, TG21, TH21, TI21, TJ21, TK21, TL21, TM21, TN21, TO21, TP21, TQ21, TR21, TS21, TT21, TU21, TV21, TW21, TX21, TY21, TZ21, UA21, UB21, UC21, UD21, UE21, UF21, UG21, UH21, UI21, UJ21, UK21, UL21, UM21, UN21, UO21, UP21, UQ21, UR21, US21, UT21, UV21, UW21, UX21, UY21, UZ21, VA21, VB21, VC21, VD21, VE21, VF21, VG21, VH21, VI21, VJ21, VK21, VL21, VM21, VN21, VO21, VP21, VQ21, VR21, VS21, VT21, VU21, VV21, VW21, VX21, VY21, VZ21, WA21, WB21, WC21, WD21, WE21, WF21, WG21, WH21, WI21, WJ21, WK21, WL21, WM21, WN21, WO21, WP21, WQ21, WR21, WS21, WT21, WU21, WV21, WX21, WY21, WZ21, XA21, XB21, XC21, XD21, XE21, XF21, XG21, XH21, XI21, XJ21, XK21, XL21, XM21, XN21, XO21, XP21, XQ21, XR21, XS21, XT21, XU21, XV21, XW21, XX21, XY21, XZ21, YA21, YB21, YC21, YD21, YE21, YF21, YG21, YH21, YI21, YJ21, YK21, YL21, YM21, YN21, YO21, YP21, YQ21, YR21, YS21, YT21, YU21, YV21, YW21, YX21, YY21, YZ21, ZA21, ZB21, ZC21, ZD21, ZE21, ZF21, ZG21, ZH21, ZI21, ZJ21, ZK21, ZL21, ZM21, ZN21, ZO21, ZP21, ZQ21, ZR21, ZS21, ZT21, ZU21, ZV21, ZW21, ZX21, ZY21, ZZ21.

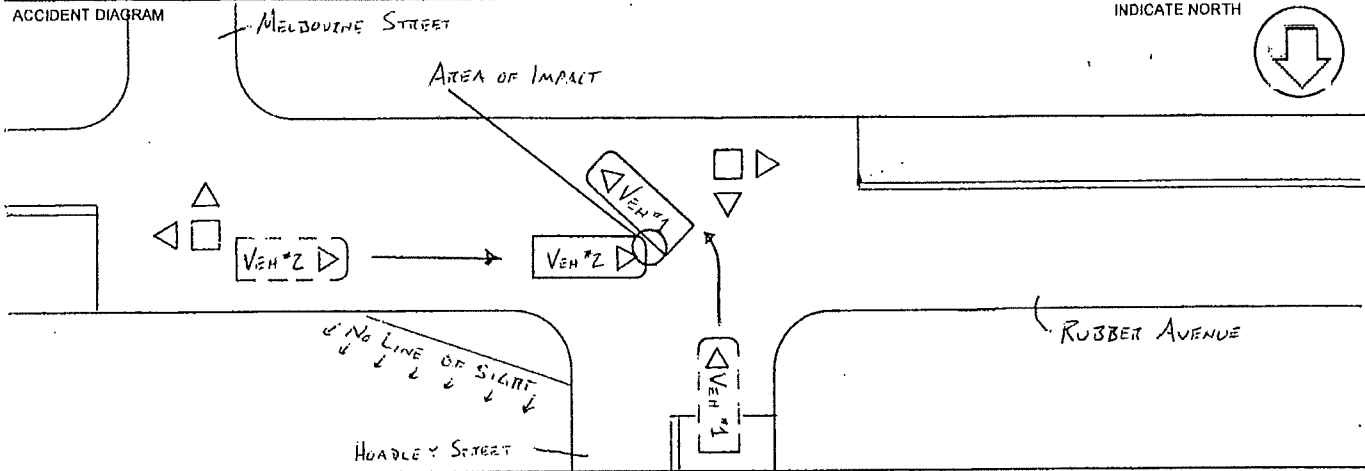
ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

Handwritten notes: #20, #50

ACCIDENT DIAGRAM

INDICATE NORTH



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling S on Hoadley Street

Traffic Unit # 2 Traveling W on Rubber Avenue

Operator #1 stated she was stopped South bound on Hoadley Street, at the intersection with Rubber Avenue, for a red light. Operator #1 stated when her light turned green she entered the intersection and began to make a left turn, East onto Rubber Avenue. Operator #1 stated she never saw Vehicle #2 coming. Operator #1 stated her vehicle was struck in the left rear, causing her vehicle to spin. Operator #1 stated she moved her vehicle to the side of the roadway after the collision. Operator #1 stated she was not injured.

Operator #2 stated he was traveling West on Rubber Avenue approaching the intersection with Melbourne Street. Operator #2 stated he had a green light. Operator #2 stated he entered the intersection. Operator #2 stated as he approached the intersection with Hoadley Street, Vehicle #1 suddenly entered his path of travel. Operator #2 stated he was unable to take any evasive action and his vehicle collided with Vehicle #1. Operator #2 stated he moved his vehicle to the side of the roadway. Operator #2 stated he was not injured.

Officer: Upon my arrival I saw both vehicles had been moved. I saw a large debris field in the intersection of Rubber Avenue and Hoadley Street. I saw moderate damage to the left rear quarter panel and left rear tire of Vehicle #1. I saw moderate damage to the front bumper and left head light of Vehicle #2. Photographs were taken of the damaged vehicles.

The stop bar for West bound traffic on Rubber Avenue is about 150 feet East of the intersection with Hoadley Street. There is no line of sight for traffic on Hoadley Street for Rubber Avenue. There is about a 2 second delay from the Rubber Avenue signal turning red until the Hoadley Street signal turns green. The clearly posted speed limit on Rubber Avenue is 25 mph. The traffic light was found to be in proper working order.

Based on my experience monitoring this intersection I know that a vehicle west bound on Rubber Avenue that fails to obey the traffic signal will be in the intersection at the time Hoadley Street gets a

DAMAGE PROPERTY OF OTHER VEHICLES IF NOT RED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Derek Vostinak PL24	POLICE AGENCY ID Naugatuck Police	REPORT DATE 2/19/2012	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Randy Ireland S5
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NAUGATUCK POLICE DEPARTMENT
CONTINUATION OF INVESTIGATION REPORT

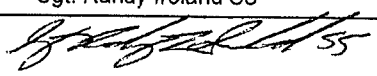

CASE NUMBER 12-4319	INCIDENT TYPE MV Accident	
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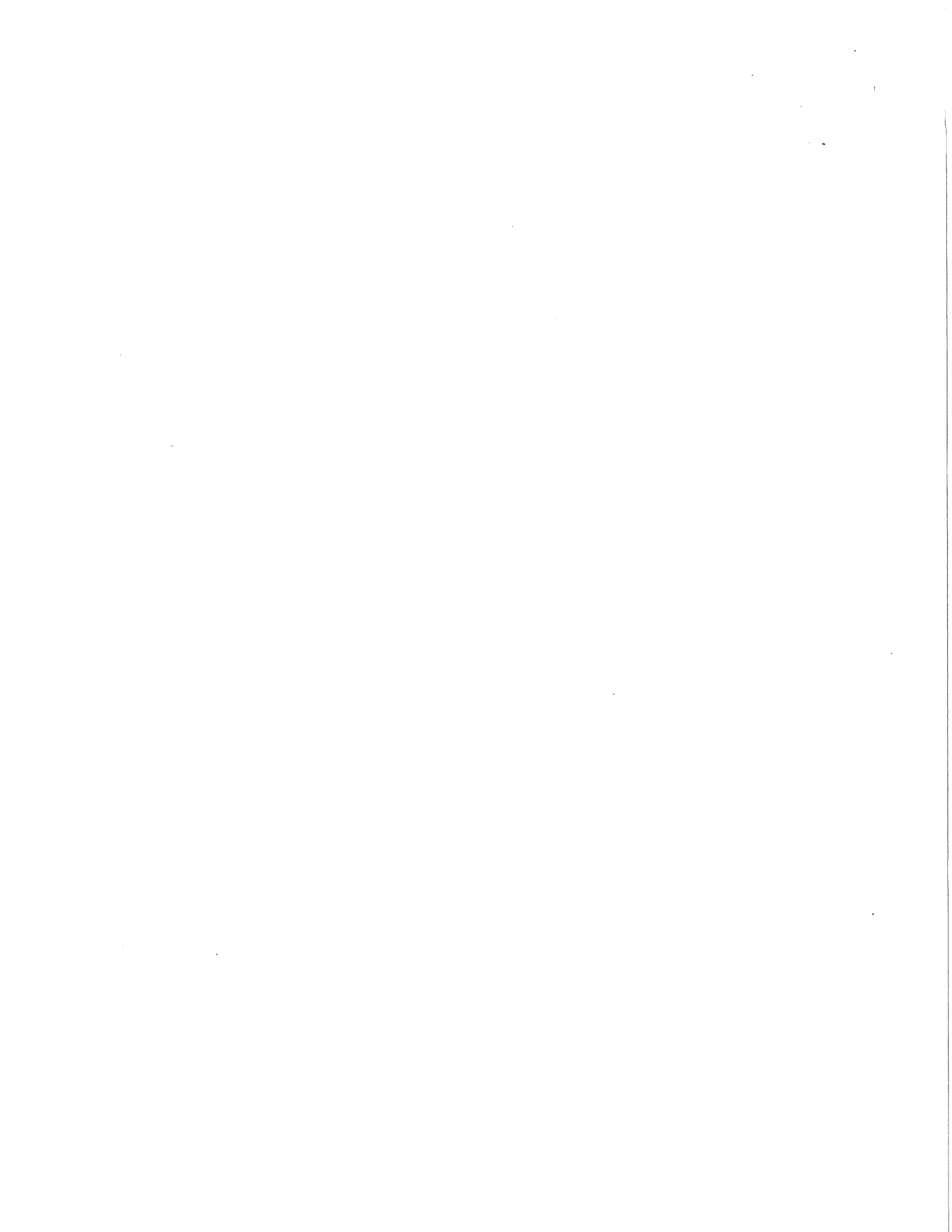
green light. This is supported by the fact that a vehicle traveling 25 mph will take about 4 seconds to travel 150 feet.

A NCIC check of Operator #2 showed his license to be suspended as of 9/21/2011.

Therefore, based on the above facts and circumstances Operator #2 was found to be at fault, and issued a misdemeanor summons (MC040111), for Failure to Obey Traffic Control Signal {CGS 14-299} and Operating With a Suspended License {CGS 14-215a}.

-----End of Report-----

SUPERVISOR'S SIGNATURE Sgt. Randy Ireland S5 	INVESTIGATOR'S SIGNATURE  Ptl. Derek Vostinak P124	PAGE NUMBER 3 OF 3
--	--	-----------------------



CONNECTICUT UNIFORM POLICE ACCIDENT REPORT



FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Thu, Mar 8, 2012	MILITARY TIME 13:53	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 12-6201
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Melbourne Street
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IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker-of

1. Measure Distance F - Feet T - Tenths of Mile N - North S - South
 M - Meters E - East W - West
 Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI)
Matos Allison

OPER #2 or PEDESTRIAN (Last, First, MI)
Cantillon Bernard

ADDRESS (Street No & Name) 1224 New Haven Road	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 34 Townline Rd	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN Wolcott	STATE CT	ZIP 06716	SEX M-F <input checked="" type="checkbox"/> F
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OPER LICENSE NO 108240210	STATE CT	DATE OF BIRTH 10/09/89	OPER LICENSE NO 071438292	STATE CT	DATE OF BIRTH 07/17/43
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OWNER (Last, First, MI - Enter same, if owner is operator)
Matos Allison

OWNER'S (Last, First, MI - Enter same, if owner is operator)
Allstate Tire LLC

ADDRESS (Street No & Name) 1224 New Haven Road	ADDRESS (Street No & Name) 31 Nutmeg Valley rd
--	--

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN Wolcott	STATE CT	ZIP 06716	BODY TYPE Box Truck
----------------------------------	--------------------	---------------------	----------------------------	--------------------------------	--------------------	---------------------	-------------------------------

REGISTRATION NO 912YWD	STATE CT	VEH YEAR & MAKE 1999 TOYOTA COROLLA	REGISTRATION NO K59368	STATE CT	VEH YEAR & MAKE 1995 FORD F-SUPER
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VEH ID NO (VIN)
2T1BR12E3XC201131

VEH ID NO (VIN)
1FDLF47F8SEA77844

CARRIER

CARRIER

CARRIER ADDRESS (Street, City or Town, State, Zip)

CARRIER ADDRESS (Street, City or Town, State, Zip)

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN W N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION O O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# Progressive #27730259-0	AUTOMOBILE INS CO-NAME-POLICY# PLYMOUTH ROCK PRC00001002309
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PARTS of VEHICLE DAMAGED MAJOR FRONT END DAMAGE	PARTS of VEHICLE DAMAGED MINOR REAR BUMPER
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VEHICLE TOWED TO Sibby's Automotive	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
---	--	--------------------------------	---

	L M N			NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
	1	2	3					
1	1	C	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		1	2	1
2	2	B	03	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1
3	1	B	01	Meagher Jessica 28 Brennan Street, Naugatuck, ct 06770		1	2	1
4	2	N	03	Meyer Burton 134 Colorado Avenue, Torrington, CT 06790		4	2	1
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6								
7								

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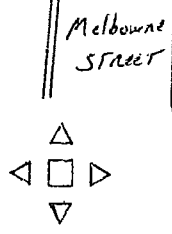
51

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

NOT TO SCALE



INDICATE NORTH



RUBBER AVENUE

P.O.I = Point of Impact

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling W on Rubber Avenue

Traffic Unit # 2 Travelling W on Rubber Avenue

Vehicle #1: Operator #1 stated she was trying travel west on Rubber Avenue when she was behind a large box truck. Operator #1 stated she started to accelerate when Vehicle #2 stopped abruptly. Operator #1 stated she couldn't stop in time. Operator #1 stated her vehicle then struck Vehicle #2 making her vehicle front end go under the steel bumper of Vehicle #2. Operator #2 had one passenger in the vehicle at the time of the accident. Operator #1 and Passenger #1 were not wearing safety belts at the time of the accident. Operator #1 sustained an injury to her knee and no other obvious injuries. Passenger #1 stated she sustained injuries to her face and head with other leg injuries. Passenger #1 stated she was putting on makeup at the time of the accident.

Vehicle #2: Operator #2 stated he was trying to drive west also on Rubber Avenue. Operator #2 stated he had to stop due to traffic. Operator #2 stated he was then struck in the rear of his vehicle by Vehicle #1. Operator #2 stated he felt a slight jolt and that was all. Operator #2 stated he had one passenger in the vehicle at the time of the incident. Operator #1 stated he felt stiff in his back due to the accident and past injury. Passenger #2 complained of no injuries.

Officer: I saw the damage to both vehicles as follows: Vehicle #1 sustained heavy damage to the front end of the vehicle. Vehicle #2 sustained minor scratches to the rear steel bumper. Damage was digitally photographed at the scene. EMS was called to the scene for injuries and all parties refused transport. Naugatuck Fire was called for fluids in the roadway. Based on the facts and circumstances, Operator #1 was found at fault for the accident. Operator #1 was issued Written Warning at the scene for violation of Following to Closely in accordance with CT Statute #14-240a. Vehicle #1 was towed by Sibby's Auto for its damage. Nothing Follows.

DAMAGE PROPERTY CLERK IF YOU SEE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>Pt. Bryan Coney PL 22</i>	POLICE AGENCY ID Naugatuck Police	REPORT DATE 3/11/2012	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Randy Ireland S5 <i>[Signature]</i>
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude: Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: Sun, Mar 11, 2012 MILITARY TIME: 16:30 ACCIDENT SEVERITY: Fatal [] Injury [X] PDO [] VEH INVOLVED #: 2 PAGE #: 1 of 3 POLICE CASE NO: 12-6498

CITY or TOWN: Naugatuck TOWN CODE: 088 ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): Rubber Avenue at Hoadley Street

IF NOT AT INTERSECTION: 2. Direction 3. Give nearest intersecting street, town line or mile marker of 1. Measure Distance: F - Feet, T - Tenths of Mile, M - Meters, K - Kilometers. Accident Occurred: [] On Private Property [] Parking Lot

TRAFFIC UNIT # 1: [V] V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2: [V] V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Rodorigo Jeremy OPER #2 or PEDESTRIAN (Last, First, MI): Byam Patricia

ADDRESS (Street No & Name): 140 Burton Road PROPER LIC CLASS: Y-N [Y] ADDRESS (Street No & Name): 67 Rustling Reed Road PROPER LIC CLASS: Y-N [Y]

CITY or TOWN: Beacon Falls STATE: CT ZIP: 06403 SEX: M-F [M] CITY or TOWN: Naugatuck STATE: CT ZIP: 06770 SEX: M-F [F]

OPER LICENSE NO: 014840718 STATE: CT DATE OF BIRTH: 01/06/69 OPER LICENSE NO: 044827188 STATE: CT DATE OF BIRTH: 04/30/57

OWNER (Last, First, MI - Enter same, if owner is operator): Rodorigo Shannon Byam Patricia

ADDRESS (Street No & Name): 140 Burton Road ADDRESS (Street No & Name): 67 Rustling Reed Road

CITY or TOWN: Beacon Falls STATE: CT ZIP: 06770 BODY TYPE: Util CITY or TOWN: Naugatuck STATE: CT ZIP: 06770 BODY TYPE: Util

REGISTRATION NO: 287WDL STATE: CT VEH YEAR & MAKE: 05 CHEVRO Trailblazer REGISTRATION NO: 167WDL STATE: CT VEH YEAR & MAKE: 04 LEXUS GX470

VEH ID NO (VIN): 1GNDT13S552271523 VEH ID NO (VIN): JTJBT20X640063504

CARRIER: [] CARRIER: []

CARRIER ADDRESS (Street, City or Town, State, Zip): [] CARRIER ADDRESS (Street, City or Town, State, Zip): []

SOURCE OF CARRIER NAME: [] SP - Shipping Papers/Trip Manifest, D - Driver, S - Side of Vehicle US DOT # [] ICC, MC # [] SOURCE OF CARRIER NAME: [] SP - Shipping Papers/Trip Manifest, D - Driver, S - Side of Vehicle US DOT # [] ICC, MC # []

GROSS VEH WEIGHT: [] HAZARDOUS MATERIAL PLACARD: Required Y-N [], Displayed Y-N [] GROSS VEH WEIGHT: [] HAZARDOUS MATERIAL PLACARD: Required Y-N [], Displayed Y-N []

HAZARDOUS CARGO: Released Y-N [] ENFORCEMENT ACTION TAKEN: [V] N - None, A - Arrest, W - Written Warning, V - Verbal Warning HAZARDOUS CARGO: Released Y-N [] ENFORCEMENT ACTION TAKEN: [V] N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): 14-240 SUBJ of ACTION: [O] O - Operator - C-Carrier, OW-Owner - P-Pedestrian STATUTE or ORDINANCE NO(S): 14-100a(c)(1) SUBJ of ACTION: [O] O - Operator - C-Carrier, OW-Owner - P-Pedestrian

AUTOMOBILE INS CO-NAME-POLICY#: Central Mutual Insurance Co 4325384 AUTOMOBILE INS CO-NAME-POLICY#: USAA 011501567U

PARTS OF VEHICLE DAMAGED: Front Bumper PARTS OF VEHICLE DAMAGED: Rear Bumper

VEHICLE TOWED TO: N/A TOWED DUE TO DAMAGE: Y-N [No] VEHICLE TOWED TO: Sibby's Automotive TOWED DUE TO DAMAGE: Y-N [No]

14H, 1S, 52T, XJ, XJ2, XJ1, XJ2, X11, X12, AA11, AA12, AA13, AA14, ALL INVOLVED PERSONS

R09, A1, B1, C1, D1, E1, F4, G2, H214, I2, J35, J21X, J22X, U2, K21X, K22X, V1, W08, X2, Y2, Z2, AA21, AA22, AA23, AA24, ALL INVOLVED PERSONS

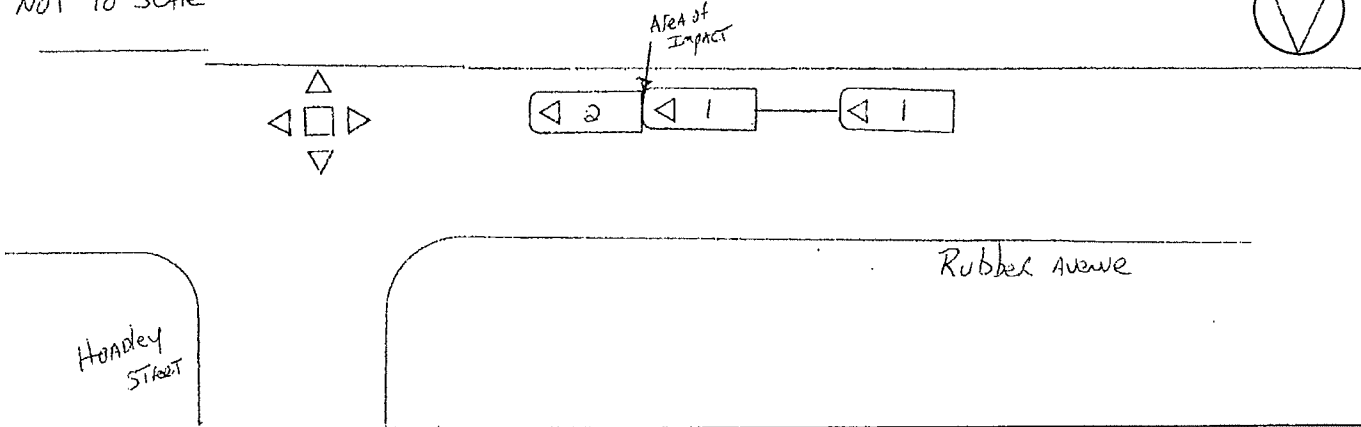
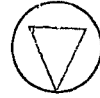
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Table with 7 rows and 8 columns: L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON, TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1, TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2, DOB, O, P, Q. Includes names like Spencer-Young, Spencer, Wilson and addresses like 63 Ivy Street New Haven CT.

ACCIDENT DIAGRAM

NOT TO SCALE

INDICATE NORTH



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

This was a two vehicle rear end type collision that occurred on Rubber Avenue at its intersection with Hoadley Street. There were no witnesses to the collision. At the time of the collision, the weather was clear and the roadway surface was dry. All of the occupants of Vehicle #2 were transported to Waterbury Hospital for claims of non evident injuries.

Operator #1 explained that he was traveling east on Rubber Avenue approaching its intersection with Hoadley Street in a line of stopped traffic. He took his eyes off the roadway for a brief moment when his front bumper collided with the rear bumper of Vehicle #2. He perceived that the traffic light turned green and that Vehicle #2 had vacated the space in front of him before he took his eyes off the roadway.

Operator #2 explained that she was stopped eastbound on Rubber Avenue at its intersection with Hoadley Street in a line of stopped traffic for a red traffic control signal. While stopped, Vehicle #1 collided with her rear bumper.

There was minor damage observed on both Vehicle #1 and Vehicle #2 and no skid marks on the roadway which confirmed a low impact collision. The front bumper of Vehicle #1 and the rear bumper of Vehicle #2 was photographed.

The collision investigation revealed that Operator #1 failed to leave a safe following/stopping distance between his front bumper and the rear bumper of Vehicle #2 while traveling east on Rubber Avenue. Operator #1 was given a verbal warning for Following Too Closely in violation of C.G.S 14-240(a) Operator #2 was given a verbal warning for Failure to Secure in Seat Safety Belt in violation

DAMAGE TO PROPERTY OR VEHICLES OF OTHER VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

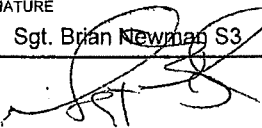
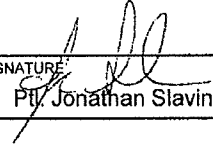
RANK and SIGNATURE of INVESTIGATING OFFICER <i>[Signature]</i> Ptl. Jonathan Slavin PL33	POLICE AGENCY ID Naugatuck Police	REPORT DATE 3/11/2012	CASE STATUS C <small>O - Open C - Closed</small>	SUPERVISOR <i>[Signature]</i> Sgt. Brian Newman S3
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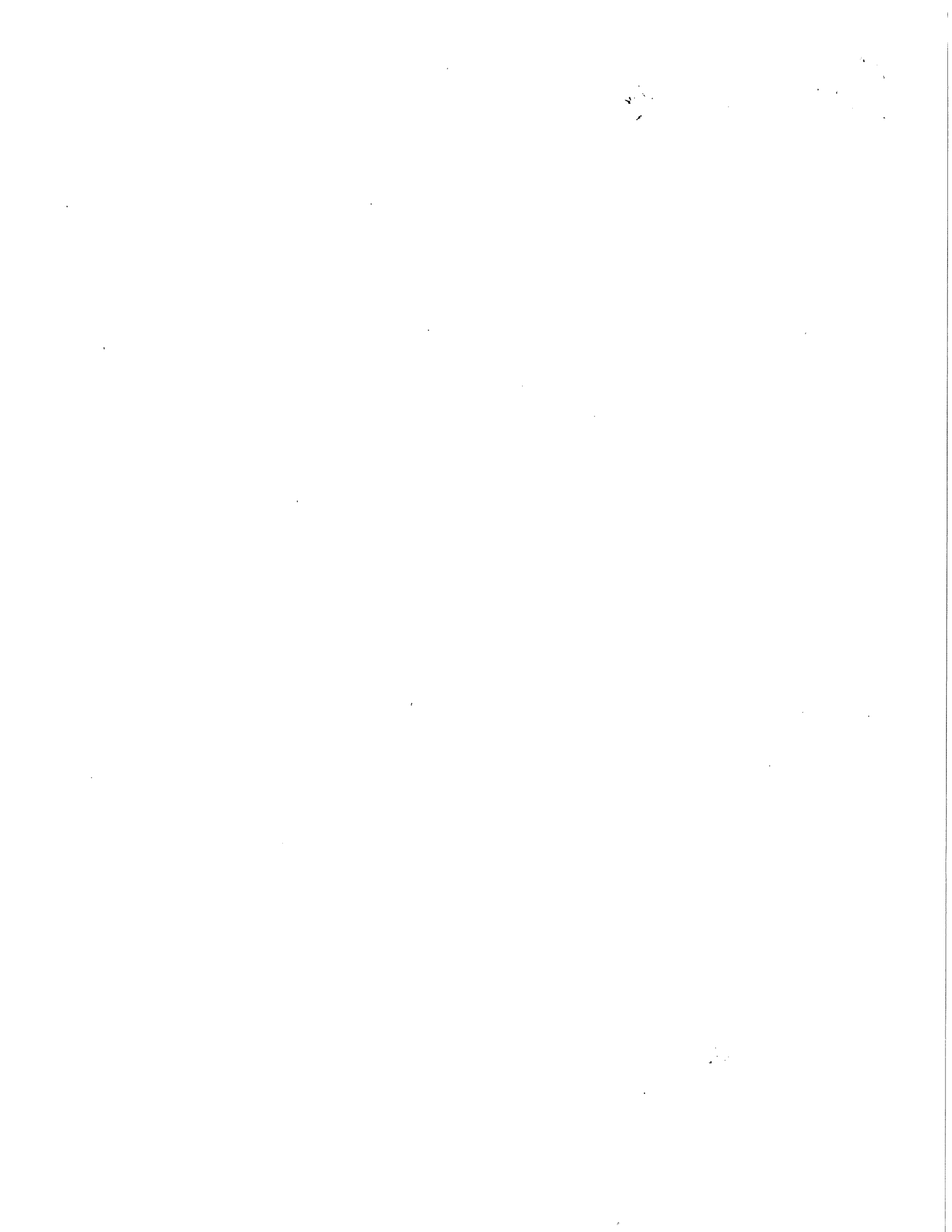
NAUGATUCK POLICE DEPARTMENT
CONTINUATION OF INVESTIGATION REPORT

CASE NUMBER 12-6498	INCIDENT TYPE MV Accident	
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of C.G.S. 14-100a(c)(1). Vehicle #2 was towed by Sibby's Garage due to the driver being transported to the hospital.

No further action taken

SUPERVISOR'S SIGNATURE  Sgt. Brian Newman S3	INVESTIGATOR'S SIGNATURE  Pti. Jonathan Slavin PI33	PAGE NUMBER 3 OF 3
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude: _____ Time: _____ Longitude: _____

FOR DOT USE ONLY

DATE OF ACCIDENT: **Fri, Jun 8, 2012** MILITARY TIME: **15:56** ACCIDENT SEVERITY: Fatal Injury PDO VEHS INVOLVED #: **2** PAGE #: **1** of 2 POLICE CASE NO: **12-14620**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Hoadley Street**

IF NOT AT INTERSECTION: 1. Measure Distance: **10** [F] 2. Direction: [W] 3. Give nearest intersecting street, town line or mile marker of: **Hoadley Street**

TRAFFIC UNIT # 1: [V] V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2: [V] V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Joseph Jonathan** OPER #2 or PEDESTRIAN (Last, First, MI): **Carneiro Ana**

ADDRESS (Street No & Name): **71 Oak Street** PROPER LIC CLASS: Y-N [Y] ADDRESS (Street No & Name): **48 Spencer Street** PROPER LIC CLASS: Y-N [Y]

CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** SEX: M-F [M] CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** SEX: M-F [F]

OPER LICENSE NO: **188749809** STATE: **CT** DATE of BIRTH: **06/07/94** OPER LICENSE NO: **017285504** STATE: **CT** DATE of BIRTH: **01/18/59**

OWNER (Last, First, MI - Enter same, if owner is operator): **Joseph Nereida** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Carneiro Ana**

ADDRESS (Street No & Name): **71 Oak Street** ADDRESS (Street No & Name): **48 Spencer Street**

CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** BODY TYPE: **4 Door** CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** BODY TYPE: **4 Door**

REGISTRATION NO: **444WWM** STATE: **CT** VEH YEAR & MAKE: **2005 NISSAN SENTRA** REGISTRATION NO: **314UJW** STATE: **CT** VEH YEAR & MAKE: **2003 AUDI A4**

VEH ID NO (VIN): **3N1CB51D05L523750** VEH ID NO (VIN): **WAULT68E63A285273**

CARRIER: [Diagonal line] CARRIER ADDRESS (Street, City or Town, State, Zip): [Diagonal line]

SOURCE of CARRIER NAME: [Diagonal line] SOURCE of CARRIER NAME: [Diagonal line]

GROSS VEH WEIGHT: [Diagonal line] HAZARDOUS MATERIAL PLACARD: [Diagonal line]

HAZARDOUS CARGO: Released Y-N [] ENFORCEMENT ACTION TAKEN: [V] HAZARDOUS CARGO: Released Y-N [] ENFORCEMENT ACTION TAKEN: [N]

STATUTE or ORDINANCE NO(S): **14-240** SUBJ of ACTION: [O] STATUTE or ORDINANCE NO(S): [] SUBJ of ACTION: []

AUTOMOBILE INS CO-NAME-POLICY#: **Allstate 9198862430507 91988624305/07** AUTOMOBILE INS CO-NAME-POLICY#: **Geico 4055993820 4055993820**

PARTS of VEHICLE DAMAGED: **minor front** PARTS of VEHICLE DAMAGED: **minor rear**

VEHICLE TOWED TO: [] TOWED DUE TO DAMAGE: Y-N [No] VEHICLE TOWED TO: [] TOWED DUE TO DAMAGE: Y-N [No]

ALL INVOLVED PERSONS	NAME and ADDRESS of EACH INVOLVED PERSON				DOB	O	P	Q			
	L	M	N								
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				4	2	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				4	2	1	2
3	1	N	03	Ruiz	Maria	71 Oak Street	12/31/61	4	2	1	3
4											4
5											5
6											6
7											7

09
A 1
B 1
C 1
D 1
E 0
F 4
G 2
H 2
I 3
J 31
K 21
L 22
M 1
N 08
O 09
P 22
Q 23
R 24

53

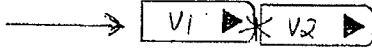
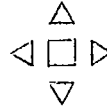
ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

Hoadley Street

Not Drawn to Scale

INDICATE NORTH



Rubber Avenue

POI

Melbourne St

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator #1 stated he was traveling East on Rubber Avenue as he approached the intersection and traffic light at Hoadley Street. Op #1 stated he thought the light was green and was unable to stop in time when he realized it was red. Op #1 stated he struck the rear of vehicle #2. Op #1 stated his passenger and him were not injured. I observed minor damage to the front of vehicle #1.

Operator #2 stated she was traveling East on Rubber Avenue and was stopped at the red light at the intersection of Hoadley Street. Op #2 stated she was stopped and next thing she knew she was struck from behind. Op #2 stated she was not injured. I observed minor damage to the rear of vehicle #2.

Based on statements and vehicular damage I find OP #1 at fault for the accident. Op #1 was issued a verbal warning for following to close in violation of C.G.S. 14-240

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER
Pt. Matthew DaSilva PL30

POLICE AGENCY ID
Naugatuck Police

REPORT DATE
6/8/2012

CASE STATUS
C - Open
C - Closed

SUPERVISOR
Sgt. Brian Newman S3

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



09
1
1
1
1
4
2
02
3
35

54

GPS READINGS: Latitude: _____ Time _____ Longitude: _____ FOR DOT USE ONLY

DATE of ACCIDENT: Sat, Jun 30, 2012 MILITARY TIME: 15:04 ACCIDENT SEVERITY: Fatal Injury PDO VEHS INVOLVED #: 2 PAGE #: 1 of 2 POLICE CASE NO: 12-16372

CITY or TOWN: Naugatuck TOWN CODE: 088 ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): Rubber Avenue at Hoadley Street

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
1. Measure Distance: F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Santos Demetris OPER #2 or PEDESTRIAN (Last, First, MI): Bacher Albert

ADDRESS (Street No & Name): 455 Platt Street PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): 20 West Ave PROPER LIC CLASS: Y-N Y

CITY or TOWN: Bridgeport STATE: CT ZIP: 06606 SEX: M-F M CITY or TOWN: Norwalk STATE: CT ZIP: 06854 SEX: M-F M

OPER LICENSE NO: 084467081 STATE: CT DATE OF BIRTH: 08/29/63 OPER LICENSE NO: 046775623 STATE: CT DATE OF BIRTH: 04/19/39

OWNER (Last, First, MI - Enter same, if owner is operator): Santos Demetris OWNER'S (Last, First, MI - Enter same, if owner is operator): Bacher Albert

ADDRESS (Street No & Name): 455 Platt Street ADDRESS (Street No & Name): 20 West Ave

CITY or TOWN: Bridgeport STATE: CT ZIP: 06606 BODY TYPE: Coupe CITY or TOWN: Norwalk STATE: CT ZIP: Station BODY TYPE: Station

REGISTRATION NO: 169YFY STATE: CT VEH YEAR & MAKE: 1999 MERCED CLK320 REGISTRATION NO: 789YVE STATE: CT VEH YEAR & MAKE: 2008 TOYOT RAV4

VEH ID NO (VIN): WDBLJ65G1XF062533 VEH ID NO (VIN): JTMBD33VX86084391

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ SOURCE of CARRIER NAME: _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____

STATUTE or ORDINANCE NO(S): N/A SUBJ of ACTION: / STATUTE or ORDINANCE NO(S): 14-243(a) SUBJ of ACTION: O

AUTOMOBILE INS CO-NAME-POLICY#: Geico 4195958923 AUTOMOBILE INS CO-NAME-POLICY#: Progressive 276197671

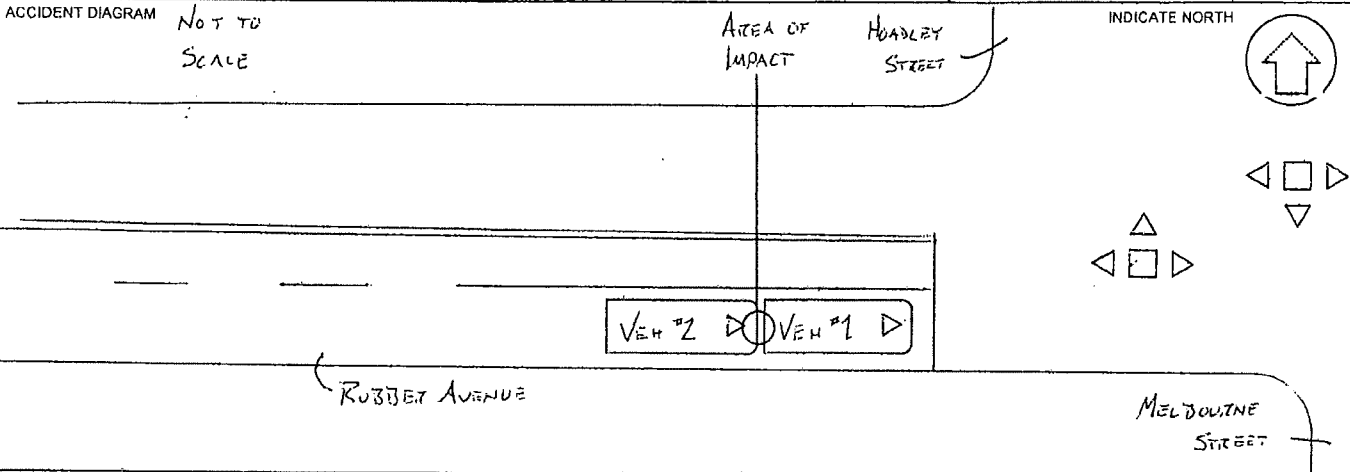
PARTS of VEHICLE DAMAGED: Rear Bumper PARTS of VEHICLE DAMAGED: Front Bumper

VEHICLE TOWED TO: N/A TOWED DUE TO DAMAGE: Y-N No VEHICLE TOWED TO: N/A TOWED DUE TO DAMAGE: Y-N No

L	M	N	O	P	Q	NAME and ADDRESS of EACH INVOLVED PERSON				DOB	O	P	Q	
						1	2	3	4					
1	1	N	01			TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1					4	2	1	1
2	2	N	01			TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2					4	2	1	2
3	1	N	03			Santos	Tyshon	455 Platt Street, Bridgeport, CT		10/05/90	4	2	1	3
4	2	N	03			Low	Bee	20 West Avenue, 3K, Norwalk, CT		04/10/57	4	2	1	4
5														5
6														6
7														7

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator #1 stated he was stopped East bound on Rubber Avenue at the intersection with Hoadley Street for a red light. Operator #1 stated his vehicle was struck from behind by Vehicle #2. Operator #1 stated he moved his vehicle to the right side of the roadway. Operator #1 stated he was not injured.

Operator #2 stated he was stopped East bound on Rubber Avenue at the intersection with Hoadley Street. Operator #2 stated he was using his GPS when his vehicle rolled forward and collided with the rear of Vehicle #1. Operator #2 stated he moved his vehicle to the right side of the roadway. Operator #2 stated he was not injured.

Passenger #1 stated he was not injured.

Passenger #2 stated she was not injured.

Officer: Upon my arrival I saw both vehicles moved to the right of the roadway. I saw minor damage to the rear bumper of Vehicle #1. I saw minor damage to the front bumper of Vehicle #2. The damage was consistent with the type of collision described by both operators.

Based on the above facts and circumstances Operator #2 was found to be at fault, and issued a verbal warning, for Unsafe Movement of a Stopped Vehicle {CGS 14-243(a)}.

No further action. End of report.

DAMAGE PROPERTY IN POLICE VEHICLES

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER
Ptl. Derek Vostinak PL24

POLICE AGENCY ID
Naugatuck Police

REPORT DATE
6/30/2012

CASE STATUS
 C - Open
 C - Closed

SUPERVISOR
Sgt. Peter Bosco S7

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:
Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: Sun, Oct 21, 2012
MILITARY TIME: 19:15
ACCIDENT SEVERITY: Fatal, Injury X, PDO
VEHS INVOLVED #: 3
PAGE #: 1 of 5
POLICE CASE NO: 12-27147

CITY or TOWN: Naugatuck
TWN CODE: 088
ACCIDENT OCCURRED ON: Rubber Avenue at Hoadley Street

IF NOT AT INTERSECTION: 2. Direction, 3. Give nearest intersecting street, town line or mile marker of

TRAFFIC UNIT # 1: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
TRAFFIC UNIT # 2: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Mahoney Ryan
OPER #2 or PEDESTRIAN (Last, First, MI): Kamarouski Pavel

ADDRESS (Street No & Name): 98 Olive Street, 658 Field Street
PROPER LIC CLASS: Y-N Y

CITY or TOWN, STATE, ZIP, SEX: Naugatuck, CT, 06770, M

OPER LICENSE NO, STATE, DATE OF BIRTH: 088666315, CT, 08/12/93; K56266081363, IL, 12/22/81

OWNER (Last, First, MI - Enter same, if owner is operator): Mahoney Randall, Shantuk Mikalai

ADDRESS (Street No & Name): 98 Olive Street, 806 Riverside Drive

CITY or TOWN, STATE, ZIP, BODY TYPE: Naugatuck, CT, 06770, 4 Door; Orange, CT, 06477, Van

REGISTRATION NO, STATE, VEH YEAR & MAKE: 503XXF, CT, 2006 NISSAN SENTRA; 4158CE, CT, 2004 GMC G2500

VEH ID NO (VIN): 3N1CB51D66L507215, 1GTGG29V941154887

CARRIER

CARRIER ADDRESS (Street, City or Town, State, Zip)

SOURCE of CARRIER NAME: SP - Shipping Papers/Trip Manifest, D - Driver, S - Side of Vehicle

GROSS VEH WEIGHT, HAZARDOUS MATERIAL PLACARD: Required Y-N, Displayed Y-N

HAZARDOUS CARGO, ENFORCEMENT ACTION TAKEN: Released Y-N, A

STATUTE or ORDINANCE NO(S), SUBJ of ACTION: 14-299, O

AUTOMOBILE INS CO-NAME-POLICY#: Safeco Insurance, K2166375; Geico, 4056926498

PARTS of VEHICLE DAMAGED: Heavy driver-side and front passenger side; Heavy front end

VEHICLE TOWED TO, TOWED DUE TO DAMAGE: Sibby's Automotive, Y-N Yes

Table with columns for L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON, TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1, TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2, DOB, O, P, Q. Rows include Khat, Craft, Matt, Pech, Dwyer.

Vertical stamp area on the right side of the form, containing alphanumeric characters and numbers (e.g., 03, 1, 2, 3, 1, 1, 4, 2, 02, 09, 21, 22, 1, 03, 21, 22, 23, 24).

55

Vertical stamp area on the left side of the form, containing alphanumeric characters and numbers (e.g., 02, 11, 12, 11, 12, 11, 12, 11, 12, 11, 12).

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

Melbourne Street

Thurston Ct

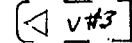
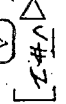
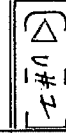
INDICATE NORTH



Rubber Avenue

Rubber Avenue

Hoadley Street



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling S on Hoadley Street

Traffic Unit # 2 Traveling W on Rubber Avenue

On 10/21/2012 at 19:15 hours, Officer McAllister, Officer Sulek, and I were dispatched to the intersection of Rubber Avenue and Hoadley Street for a motor vehicle collision.

Upon my arrival, I was met by Operator #1, Ryan Mahoney (DOB 08/12/1993) and his two passengers, Zachery Craft (DOB 09/10/1996) and Marcus Matt (DOB 07/03/1993). I observed that Mahoney had a laceration of the left side of his head and Craft had a laceration to the back of his head. Both lacerations had blood around the area but the bleeding had stopped prior to my arrival. Matt had an injury to his left pointer finger.

I was then met by Operator #2, Pavel Kamarouski (DOB 12/22/19981). Kamarouski stated he was not injured. I was then met by Operator #3, Rolanda Khat (DOB 04/05/1984) and his passenger, Johnny Pech (DOB 03/09/1991). Khat stated he had pain to his chest and left shoulder. Pech stated he had pain to his chest and right shoulder.

EMS arrived a short time later and began treating the passengers. Mahoney, Craft, Khat, and Pech were all transported to St. Mary's Hospital for further evaluations. Kamarouski and Matt refused to be treated and refused to be transported to the hospital.

Mahoney stated he was traveling south on Hoadley Street when he approached the red traffic signal at the intersection of Hoadley Street and Rubber Avenue. Mahoney stated he was inching his vehicle forward towards Rubber Avenue as he waited for the traffic light to turn green. Mahoney stated when the traffic light turned green, he accelerated into the intersection. Mahoney stated he then saw Vehicle #2 traveling on Rubber Avenue towards his vehicle. Mahoney stated he attempted

DAMAGE TO PROPERTY OF OTHER VEHICLES

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

/

NAME and ADDRESS of PROPERTY OWNER

/

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

/

NAME and ADDRESS of PROPERTY OWNER

/

RANK and SIGNATURE of INVESTIGATING OFFICER

Pt. Andre Mouton PL38

POLICE AGENCY ID

Naugatuck Police

REPORT DATE

10/22/2012

CASE STATUS

C O - Open
 C - Closed

SUPERVISOR

Sgt. Peter Bosco S7

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

DATE of ACCIDENT Sun, Oct 21, 2012	MILITARY TIME 19:15	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 3	PAGE # 3 of 5	POLICE CASE NO 12-27147
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
----------------------------------	------------------------	--

IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of _____

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 3 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 4 <input type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
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OPER #1 or PEDESTRIAN (Last, First, MI) Khat Rolanda	OPER #2 or PEDESTRIAN (Last, First, MI)
--	---

ADDRESS (Street No & Name) 9 Locust Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name)	PROPER LIC CLASS Y-N <input type="checkbox"/>
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CITY or TOWN Danbury	STATE CT	ZIP 06810	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN	STATE	ZIP	SEX M-F <input type="checkbox"/>
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OPER LICENSE NO 167798907	STATE CT	DATE of BIRTH 04/05/86	OPER LICENSE NO	STATE	DATE of BIRTH
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OWNER (Last, First, MI - Enter same, if owner is operator) Bun Kamsay	OWNER'S (Last, First, MI - Enter same, if owner is operator)
---	--

ADDRESS (Street No & Name) 15882 Ryan Dr	ADDRESS (Street No & Name)
--	----------------------------

CITY or TOWN Holland	STATE MI	ZIP 49424	BODY TYPE 2 Door	CITY or TOWN	STATE	ZIP	BODY TYPE
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REGISTRATION NO 3KQR99	STATE MI	VEH YEAR & MAKE 1997 NISSAN	REGISTRATION NO	STATE	VEH YEAR & MAKE
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VEH ID NO (VIN) JN1AS44D6VW101246	VEH ID NO (VIN)
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CARRIER	CARRIER
---------	---------

CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

BOUOE of CARRIER NAME SP - Shipping Papers/Trip Manifest O - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest O - Driver S - Side of Vehicle	US DOT # ICC, MC #
--	-----------------------	---	-----------------------

GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# Displayed Y-N <input type="checkbox"/> 1 Digit#	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# Displayed Y-N <input type="checkbox"/> 1 Digit#
------------------------------	---	------------------------------	---

HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning A	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
--	---	--	---

STATUTE or ORDINANCE NO(S) 14-12(a)*	SUBJ of ACTION O O - Operator - C-Carrier OW - Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C-Carrier OW - Owner - P-Pedestrian
--	---	----------------------------	---

AUTOMOBILE INS CO-NAME-POLICY# Pioneer State Mutual PA00115891	AUTOMOBILE INS CO-NAME-POLICY#
--	--------------------------------

PARTS of VEHICLE DAMAGED Heavy front end	PARTS of VEHICLE DAMAGED
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VEHICLE TOWED TO Sibby's Automotive	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>
---	--	------------------	---

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON				DOB	O	P	Q
---	---	---	--	--	--	--	-----	---	---	---

1			TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1							
2			TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2							

3	W	N	/	Martinez	Christian	16 Hoadley Street Naugatuck, CT	06/24/91	/	3	1
---	---	---	---	----------	-----------	---------------------------------	----------	---	---	---

4	/	/	/	/	/	/	/	/	/	4
---	---	---	---	---	---	---	---	---	---	---

5	/	/	/	/	/	/	/	/	/	5
---	---	---	---	---	---	---	---	---	---	---

6	/	/	/	/	/	/	/	/	/	6
---	---	---	---	---	---	---	---	---	---	---

7	/	/	/	/	/	/	/	/	/	7
---	---	---	---	---	---	---	---	---	---	---

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

INDICATE NORTH

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 3 Traveling on Rubber Avenue

Traffic Unit # 4 Traveling on _____

to avoid the collision by turning slightly to the right. Mahoney stated Vehicle #2 collided with the driver-side doors causing his vehicle to spin out of control and then colliding with Vehicle #3 which was traveling on Rubber Avenue in the opposite direction of Vehicle #2.

Craft stated Mahoney approached the traffic signal at the intersection of Hoadley Street and Rubber Avenue. Craft stated the traffic signal turned green and Mahoney entered the intersection. Craft stated Vehicle #2 then collided with Vehicle #1.

Matt stated he could not remember what had happened.

Kamarouski stated he was traveling west on Rubber Avenue. Kamarouski stated the traffic signal at the intersection of Rubber Avenue and Melbourne Street was green so he continued west on Rubber Avenue. Kamarouski stated when he approached the intersection of Rubber Avenue and Hoadley Street, Vehicle #1 entered the intersection in front of his vehicle from Hoadley Street. Kamarouski stated he attempted to stop to avoid the collision but he could not. Kamarouski stated the front of his vehicle collided with the driver-side doors of Vehicle #1. Kamarouski stated Vehicle #1 then collided with Vehicle #3 which was traveling east on Rubber Avenue.

Khat stated he was traveling east on Rubber Avenue. Khat stated when he approached the traffic signal at the intersection of Rubber Avenue and Hoadley Street the traffic signal was green so he continued east on Rubber Avenue. Khat stated he then observed Vehicle #1 enter the intersection from Hoadley Street in front of Vehicle #2 causing the collision between Vehicle #1 and Vehicle #2. Khat stated Vehicle #2 then collided with his vehicle. Khat stated he attempted to stop to avoid a

DAMAGE PROPERTY OF COMMERCIAL OR SCHOOL VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	/
	NAME and ADDRESS of PROPERTY OWNER
	/
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	/
	NAME and ADDRESS of PROPERTY OWNER
	/

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Andre Montela PL38 <i>[Signature]</i>	POLICE AGENCY ID Naugatuck Police	REPORT DATE 10/22/2012	CASE STATUS <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR <i>[Signature]</i>
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**NAUGATUCK POLICE DEPARTMENT
CONTINUATION OF INVESTIGATION REPORT**

CASE NUMBER 12-27147	INCIDENT TYPE MV Accident	
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second collision but Vehicle #1 collided with his vehicle.

I then spoke with Witness #1, David Dwyer (DOB 03/12/1952). Dwyer stated he was traveling west on Rubber Avenue when he observed Vehicle #1 entered onto Rubber Avenue from Hoadley Street. Dwyer stated Vehicle #1 appeared to be heading straight into the Thustons Oil parking lot. Dwyer stated due to Vehicle #1 entering Rubber Avenue in front of Vehicle #2, who was traveling west on Rubber Avenue, Vehicle #2 collided with Vehicle #1. Dwyer stated Vehicle #1 then collided with Vehicle #3 which was traveling east on Rubber Avenue. Dwyer stated he did not know what color light the traffic signal in the west bound lane on Rubber Avenue was displaying.

Witness #2, Christian Martinez (DOB 06/24/1991), stated he was standing outside is residence on 16 Hoadley Street when he saw Vehicle #1 travel past him. Martinez stated Vehicle #1 had a red light at the intersection of Hoadley Street and Rubber Avenue. Martinez stated Vehicle #1 continued into the intersection with the red light and was then hit by Vehicle #2.

Vehicle #1 sustained heavy damage to the driver-side doors. The front of Vehicle #2 collided with the center of the driver-side of Vehicle #1. Vehicle #2 sustained heavy front end damage. Vehicle #3 also sustained heavy front end damage. Photographs of the accident scene, the damaged vehicles, and the apparently injuries of the passengers were taken.

I also observed two skid marks in the west bound traveling lane at the intersection for Rubber Avenue and Hoadley Street caused by Vehicle #2 attempting to stop. I also observed two skid marks in the east bound traveling lane at the intersection for Rubber Avenue and Hoadley Street caused by Vehicle #3 attempting to stop.

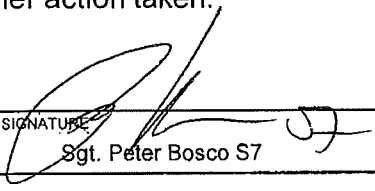

Due to the statements provided and the location of the impact on Vehicle #1 from Vehicle #2, I find Operator #1, Ryan Mahoney (DOB 08/12/1993) at fault for the collision for failing to stop at the traffic signal. Mahoney was issued and explained an infraction for violation of C.G.S. 14-301 "Failure to Obey Traffic Signal"

Vehicle #2 showed an expired registration since 08/26/2012. Kamarouski was issued and explained an infraction for violation of C.G.S. 14-12(a)* "Operating an Unregistered Motor Vehicle".

Vehicle #3 showed an expired registration since 08/01/2012. Khat was issued and explained an infraction for violation of C.G.S. 14-12(a)* "Operating an Unregistered Motor Vehicle".

All three vehicles were towed by Sibby's Auto to their facility.

No further action taken.

SUPERVISOR'S SIGNATURE  Sgt. Peter Bosco S7	INVESTIGATOR'S SIGNATURE  Ptl. Andre Moutela PI38	PAGE NUMBER 5 OF 5
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Sun, Sep 30, 2012	MILITARY TIME 15:00	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of	POLICE CASE NO 12-25205
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Melbourne
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IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance F - Feet T - Tenths of Mile N - North
 M - Meters S - South
 K - Kilometers E - East
 W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input type="checkbox"/> V <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input type="checkbox"/> V <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
--	--

OPER #1 or PEDESTRIAN (Last, First, MI) Scavone Robert	OPER #2 or PEDESTRIAN (Last, First, MI) Ayotte Kenneth
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ADDRESS (Street No & Name) 18 Rockwell Avenue	PROPER LIC CLASS Y-N <input type="checkbox"/>	ADDRESS (Street No & Name) 4 Briarwood Circle	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/>
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M
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OPER LICENSE NO 068234293	STATE CT	DATE OF BIRTH 03/06/89	OPER LICENSE NO 121907886	STATE CT	DATE OF BIRTH 12/01/47
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OWNER (Last, First, MI - Enter same, if owner is operator) Scavone Robert	OWNER'S (Last, First, MI - Enter same, if owner is operator) Ayotte Kenneth
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ADDRESS (Street No & Name) 18 Rockwell Avenue	ADDRESS (Street No & Name) 4 Briarwood Circle
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Sedan	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Sedan
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REGISTRATION NO 893UYM	STATE CT	VEH YEAR & MAKE 95 HONDA CIVIC	REGISTRATION NO 779GAE	STATE CT	VEH YEAR & MAKE 07 SUBARU LEGACY
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VEH ID NO (VIN) 1HGEG8544SL032254	VEH ID NO (VIN) 45313L616377206548
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE OF CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE OF CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-224B	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S) /	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# 21ST CENTURY	AUTOMOBILE INS CO-NAME-POLICY# 9653290
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PARTS of VEHICLE DAMAGED Left rear wheel well and Left rear tire	PARTS of VEHICLE DAMAGED Front Left Bumper
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q	ALL INVOLVED PERSONS	
			1	2	3						4
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				9	4	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				4	2	1	2
3	W	N	01	Oraziotti	Ryki	195 Andrew Ave, naugatuck	07/21/82	4	3	1	3
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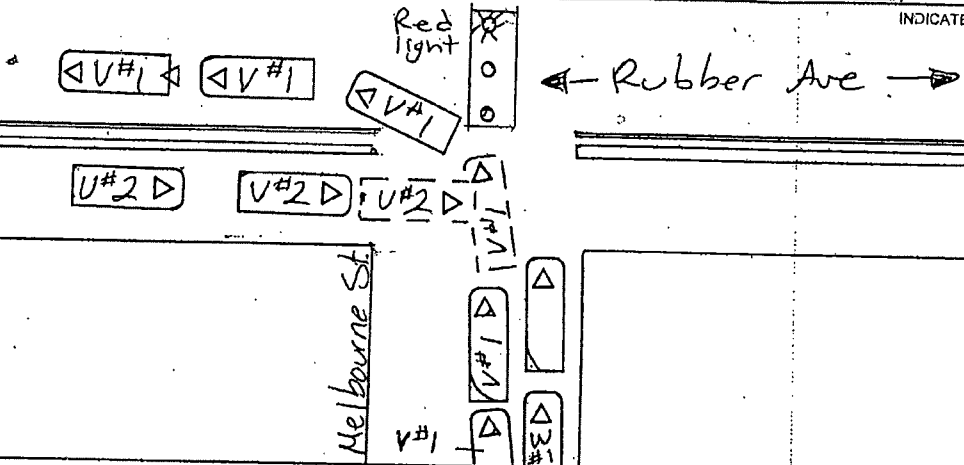
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FORM PR-1

PAGE # 2 of 1 POLICE CASE NO 12-26205

INDICATE NORTH 

ACCIDENT DIAGRAM



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

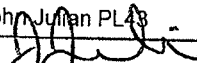
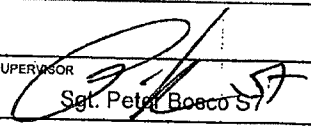
Traffic Unit # 1 Traveling on North on Melbourne Traffic Unit # 2 Traveling on Rubber Ave

Operator # 2 stated he was traveling East on Rubber Avenue and was approaching the intersection at Melbourne Street. Operator # 2 stated he had a green light and proceeded through. Operator # 2 stated he saw a red and black Honda Civic come through the intersection and turned in front of him. Operator # 2 stated the operator of the Civic hit the front of his car and did not stop. Operator # 2 stated the Civic kept traveling West on Rubber Avenue. There was visible damage to the front left bumper of vehicle # 2.

Witness stated she was two cars back from the red light at Melbourne Street and Rubber Avenue. Witness stated she saw a red and black Honda Civic go past her on the left and through the red light. Witness stated the Civic hit Operator # 2 in the front of Operator # 2's vehicle. Witness stated the Civic never stopped and continued to travel West on Rubber Avenue. Witness stated when her light turned green she proceeded to follow the Civic but could not keep up because the Civic was traveling at a very high rate of speed. Witness stated she returned back to the scene to wait for the police.

Officer. Upon arrival I asked all parties involved if there were any injuries. All parties stated "NO" and refused medical treatment. I then asked all parties involved for all there proper paperwork which was provided. After speaking to all parties involved, and observing the damage to Operator # 2's vehicle and it's position, Operator # 1 was determined to be at fault. Operator # 1 was an evading motor vehicle and Operator # 2 was not at fault.

Case is presently being investigated.

DAMAGE TO PROPERTY CURRENTLY IN POLICE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	unknown
	NAME and ADDRESS of PROPERTY OWNER	unknown
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE	Front End, left side bumper
	NAME and ADDRESS of PROPERTY OWNER	Kenneth Ayotte 4 Briarwood Circle, Naugatuck Conn, 06770
RANK and SIGNATURE of INVESTIGATING OFFICER		POLICE AGENCY ID
Ptl. John Julian PL43 		Naugatuck Police
REPORT DATE		CASE STATUS
9/30/2012		<input checked="" type="radio"/> Open <input type="radio"/> Closed
SUPERVISOR		
Sgt. Peter Bosco 		

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:
Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT: Sun, Mar 3, 2013
MILITARY TIME: 11:06
ACCIDENT SEVERITY: Fatal, Injury, PDO, X
VEHS INVOLVED #: 2
PAGE #: 1 of 2
POLICE CASE NO: 13-5949

CITY or TOWN: Naugatuck
TWN CODE: 088
ACCIDENT OCCURRED ON: Rubber Avenue
at: Hoadley Street

IF NOT AT INTERSECTION: 2. Direction: Hoadley Street
3. Give nearest intersecting street, town line or mile marker of:
1. Measure Distance: 50 F
Accident Occurred: On Private Property, Parking Lot

TRAFFIC UNIT # 1: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
TRAFFIC UNIT # 2: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): Martin Jaime
OPER #2 or PEDESTRIAN (Last, First, MI): Correa Carlos

ADDRESS (Street No & Name): 14 George Street, 51 Walnut Street
PROPER LIC CLASS: Y, Y

CITY or TOWN: Naugatuck, Waterbury
STATE: CT, CT
ZIP: 06770, 06702
SEX: F, M

OPER LICENSE NO: 137211929, 184509155
STATE: CT, CT
DATE OF BIRTH: 11/26/82, 06/07/64

OWNER (Last, First, MI - Enter same, if owner is operator): Martin Jaime, Correa Carlos

ADDRESS (Street No & Name): 14 George Street, 51 Walnut Street

CITY or TOWN: Naugatuck, Waterbury
STATE: CT, CT
ZIP: 06770, 06702
BODY TYPE: Station, Station

REGISTRATION NO: 752YRY, 530G0
STATE: CT, CT
VEH YEAR & MAKE: 2002 FORD ESCAPE, 1997 FORD EPT

VEH ID NO (VIN): 1FMCU041X2KA26905, 1FMEU18W3VLC20520

CARRIER: (Blank)

CARRIER ADDRESS (Street, City or Town, State, Zip): (Blank)

SOURCE of CARRIER NAME: SP - Shipping Papers/Trip Manifest, D - Driver, S - Side of Vehicle

GROSS VEH WEIGHT: (Blank)
HAZARDOUS MATERIAL PLACARD: Required Y-N, Displayed Y-N

HAZARDOUS CARGO: Released Y-N
ENFORCEMENT ACTION TAKEN: A, N, W, V

STATUTE or ORDINANCE NO(S): 14-240
SUBJ of ACTION: O - Operator - C-Carrier, OW-Owner - P-Pedestrian

AUTOMOBILE INS CO-NAME-POLICY#: Infinity Premier 106630017904001, North American Under 600475168903

PARTS of VEHICLE DAMAGED: Front, Rear

VEHICLE TOWED TO: N/A
TOWED DUE TO DAMAGE: Y-N

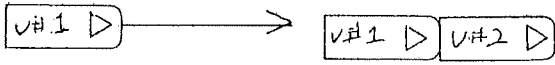
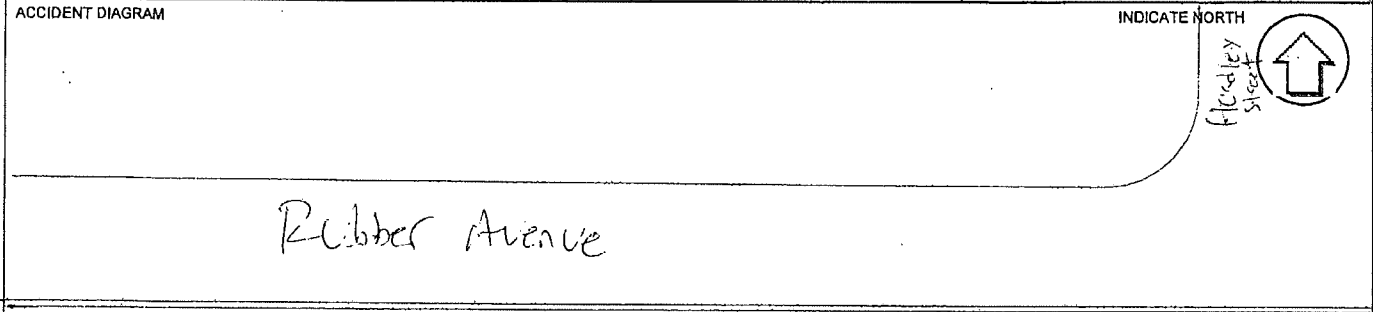
Table with columns: L, M, N, NAME and ADDRESS of EACH INVOLVED PERSON, DOB, O, P, Q. Includes entries for Martin Jaime, Correa Carlos, and Droz Wayne.

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

09, 1, 1, 1, 1, 1, 2, 3, 31, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50

57



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Travelling E on Rubber Avenue Traffic Unit # 2 Travelling E on Rubber Avenue

Operator #1: Stated she was slowing down for the red light and went to reach for her drink. Operator #1 stated she reached for her drink and her foot slipped off the break. Operator #1 stated her vehicle then struck the rear of Vehicle #2.

Operator #2: Stated he was stopped for the red light on Rubber Avenue @ Hoadley Street. Operator #2 stated all of the sudden Vehicle #1 struck his vehicle from behind.

Passenger Veh#2: Stated they were stopped at the red light and then all of the sudden his seat belt locked. Passenger Veh#2 stated he looked back and noticed Vehicle #1 had struck their vehicle from behind.

Officer: Upon arrival, I observed minor front end damage to Vehicle #1 and minor rear end damage to Vehicle #2. I also observed pieces of rust from the bumper of Vehicle #2 in the roadway a few feet back from where the vehicles pulled off the road after the accident. Medical personnel were dispatched, all parties refused treatment and stated they were not injured. All parties stated they were wearing their seat belts.

Both operator statements are consistent with the damage I observed.

Operator #1 was issued an infraction for 14-240 "Failure to Travel a Reasonable Distance Apart".

DAMAGE TO MOTOR VEHICLES OR OTHER PROPERTY	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>Anthony Mistrretta</i> Det. Anthony Mistrretta-PL41	POLICE AGENCY ID Naugatuck Police	REPORT DATE 3/4/2013	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Lt. Steven Hunt Lt2
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St. Hunt

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Thu, Mar 28, 2013	MILITARY TIME 16:26	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 1	PAGE # 1 of 2	POLICE CASE NO 13-8361
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CITY OR TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Headley Stret
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IF NOT AT INTERSECTION

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers

2. Direction N - North S - South E - East W - West

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
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OPER #1 or PEDESTRIAN (Last, First, MI) Pelliccia Susan	OPER #2 or PEDESTRIAN (Last, First, MI) Lopes Joao
---	--

ADDRESS (Street No & Name) 48 Tawny Thrush Road	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 712 High Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M
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OPER LICENSE NO 191591562	STATE CT	DATE OF BIRTH 07/26/44	OPER LICENSE NO 097818334	STATE CT	DATE OF BIRTH 09/13/85
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OWNER (Last, First, MI - Enter same, if owner is operator) Pelliccia Susan	OWNER'S (Last, First, MI - Enter same, if owner is operator) Lopes Joao
--	---

ADDRESS (Street No & Name) 48 Tawny Thrush Road	ADDRESS (Street No & Name) 712 High Street
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Sedan	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 2 Door
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REGISTRATION NO 926TZB	STATE CT	VEH YEAR & MAKE 2005 HYUNDA SANTA FE	REGISTRATION NO 143XOF	STATE CT	VEH YEAR & MAKE 2006 VOLKS GTI
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VEH ID NO (VIN) KM8SC73E15U879004	VEH ID NO (VIN) 9BWDE61JX64003847
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> V N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> N N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-240(a)	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S) /	SUBJ of ACTION <input type="checkbox"/> / O-Operator - C-Carrier OW-Owner - P-Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# The Hanover American	AUTOMOBILE INS CO-NAME-POLICY# Progressive 65857572-2
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PARTS of VEHICLE DAMAGED Front Bumper	PARTS of VEHICLE DAMAGED Rear Bumper
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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NAME and ADDRESS of EACH INVOLVED PERSON	OOB	O	P	Q
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1	1	N	01	1
2	2	N	01	2

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AA22/
AA23/
AA24/

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

58

Not To Scale

2 of 2

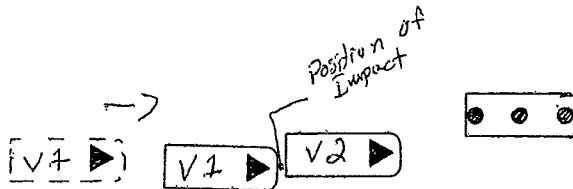
13-8361

ACCIDENT DIAGRAM

INDICATE NORTH



Hadley Street



Rubber Avenue

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator 1 Stated she was traveling east on Rubber Avenue. Operator 1 stated the traffic light turned red and she came to a complete stop behind Vehicle 2. Operator 1 stated she thought the light turned green and she accelerated. Operator 1 stated she then collided into Vehicle 2's rear bumper with Vehicle 1's front bumper. Operator 1 stated she was wearing her seat belt and sustained no injuries.

Operator 2 Stated he was traveling east on Rubber Avenue. Operator 2 stated the traffic light turned red and he came to a complete stop. Operator 2 stated the light was still red and he was struck in his rear bumper by Vehicle 1. Operator 2 stated he was wearing his seat belt and sustained no injuries.

Officer Upon my arrival both vehicles were located in the position of impact. Vehicle 1 had consistent damage and had paint transfer located on the front bumper. Vehicle 2 had consistent damage and had paint transfer located on the rear bumper. Operator 1 stated she collided with vehicle 2. Operator 1 stated she knew it was her fault for colliding with vehicle 2. Operator 2 was cited at fault for the accident and was issued a Verbal Warning for CGS: 14-240(a) Following Too Closely.

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER

Matthew Sulek PL39

POLICE AGENCY ID

Naugatuck Police

REPORT DATE

3/28/2013

CASE STATUS

C
O - Open
C - Closed

SUPERVISOR

Peter Bosco S6

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Thu, May 2, 2013	MILITARY TIME 1552:00	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 13-11749
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers

2. Direction N - North S - South E - East W - West

3. Give nearest intersecting street, town line or mile marker of _____

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Dickinson James	OPER #2 or PEDESTRIAN (Last, First, MI) Aresta Agostinho
---	--

ADDRESS (Street No & Name) 80 Linda Court	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 9155 36th Way	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Pinellas Park	STATE FL	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M
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OPER LICENSE NO 096116599	STATE CT	DATE OF BIRTH 09/05/71	OPER LICENSE NO A623004350150	STATE FL	DATE OF BIRTH 01/15/35
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OWNER (Last, First, MI - Enter same, if owner is operator) Dickinson James	OWNER'S (Last, First, MI - Enter same, if owner is operator) Aresta Agostinho
--	---

ADDRESS (Street No & Name) 80 Linda Court	ADDRESS (Street No & Name) 369 King Street
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Van	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Pickup
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REGISTRATION NO 435L7	STATE CT	VEH YEAR & MAKE 2002 DODGE CARAVAN	REGISTRATION NO 6CB536	STATE CT	VEH YEAR & MAKE 2001 FORD F150
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VEH ID NO (VIN) 2B4GP44372R753472	VEH ID NO (VIN) 2FTRX18L01CA86640
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE OF CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE OF CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> Digits Displayed Y-N <input type="checkbox"/> Digits	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> Digits Displayed Y-N <input type="checkbox"/> Digits
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HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN A N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION O O-Operator-C-Carrier OW-Owner-P-Pedestrian	STATUTE or ORDINANCE NO(S) none	SUBJ of ACTION / O-Operator-C-Carrier OW-Owner-P-Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# ESURANCE INSURANCE PACT-003675913	AUTOMOBILE INS CO-NAME-POLICY# Middlesex Mutual AU0008131344-0
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PARTS OF VEHICLE DAMAGED FRONT END	PARTS OF VEHICLE DAMAGED REAR BUMPER
--	--

VEHICLE TOWED TO Sibby's Automotive	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes	VEHICLE TOWED TO n/a	TOWED DUE TO DAMAGE Y-N <input type="checkbox"/>
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
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1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1	4	2	1	1
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2	2	B	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2	4	2	1	2
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AA 23
AA 24

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ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

FORM PR-1	PAGE #	2 of 2	POLICE CASE NO	13-11749
ACCIDENT DIAGRAM <i>NOT TO SCALE</i>			INDICATE NORTH	
DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West) Traffic Unit # 1 Traveling <input checked="" type="checkbox"/> W on RUBBER AVENUE Traffic Unit # 2 Traveling <input checked="" type="checkbox"/> W on RUBBER AVENUE				

This was a two vehicle rear-end collision that occurred at the intersection of Rubber Avenue and Hoadley Street. There were no known witnesses to the collision. At the time of the collision the weather condition was clear and the roadway surface was dry.

Operator #1 explained that he was traveling westbound on Rubber Avenue, when he saw that Vehicle #2 was stopped. Operator #1 stated that when he began to apply his brakes he blacked out and his front bumper collided with Vehicle #2.

Operator #2 explained that he was stopped westbound on Rubber Avenue in a line of stopped traffic. While stopped, Vehicle #1 collided into the rear bumper of his vehicle.

Operator #1 was evaluated by EMS and signed a medical transport refusal. Operator #2 complained of back pain and was taken to Saint Mary's Hospital. Vehicle #1's front bumper was dented, the hood was dented in and there were fluids leaking from the vehicle. Vehicle #2 had minor scratches and paint transfer to the rear bumper. Operator #1 was found to be at fault, and issued an infraction (R807790 -5), for Failure to Drive a Reasonable Distance Apart {CGS 14-240}.

The Fire Department was called to clean up vehicle fluids accordingly.

Vehicle #1 was towed by Sibby's Automotive.

No further action.

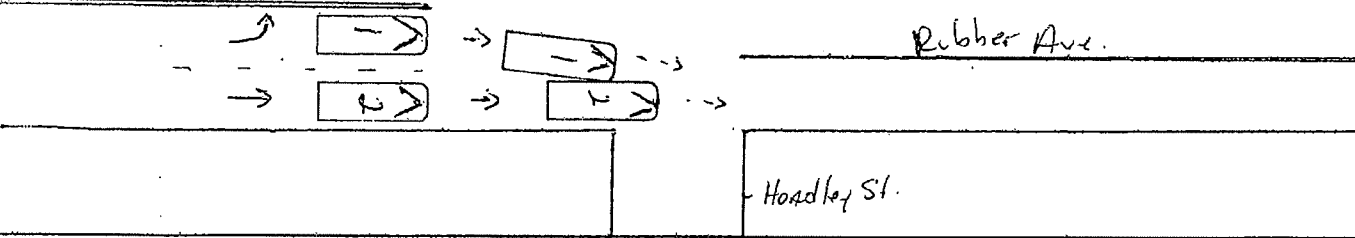
DAMAGE INCURRED TO VEHICLES OR TO OTHER PROPERTY	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE			
	NAME and ADDRESS of PROPERTY OWNER			
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE			
	NAME and ADDRESS of PROPERTY OWNER			
RANK and SIGNATURE of INVESTIGATING OFFICER	POLICE AGENCY ID	REPORT DATE	CASE STATUS	SUPERVISOR
<i>[Signature]</i> Ptl. Alexja Castro PL42	Naugatuck Police	5/2/2013	<input checked="" type="checkbox"/> C O - Open C - Closed	<i>[Signature]</i> Cgt. Peter Bosco S6

ACCIDENT DIAGRAM

INDICATE NORTH



Melbourne St.



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on On Rubber Ave.

Traffic Unit # 2 Traveling W on On Rubber Ave.

Operator #1 stated she was traveling west on Rubber ave. and was stopped at the traffic light at Rubber Ave. and Melbourne St. She stated the light turned green and she proceeded west on Rubber Ave. She stated the next thing she knew she had struck Vehicle #2 which must have also been traveling west. She stated she does not remember what happened.

Operator #2 stated he was traveling west on Rubber Ave. and was stopped at the traffic light at the intersection of Rubber Ave. and Melbourne St. He stated he was in the right lane which has a west bound arrow, and Vehicle #2 was to his left in the left lane with a left arrow only to head south on Melbourne. He stated the light turned green and he proceeded straight (west) and was then struck by Vehicle #1 which also went straight and tried to cut in to his lane. He stated the front passenger quarter panel of Vehicle #1 struck the driver side door and rear quarter panel of his vehicle.

Officer states the contributing factor applies to Operator #1 for C.G.S. 14-236(1) Failure To Drive In Proper Lane, and C.G.S. 14-243(a) Unsafe Movement From Stopped Position. Operator #1 was issued a verbal warning. No injuries were reported.

Table with 2 columns: Description of Property Damage and Name and Address of Property Owner.

Table with 5 columns: Rank and Signature of Investigating Officer, Police Agency ID, Report Date, Case Status, Supervisor.

Handwritten signature of Ptl. Alan Crosswait PL6

Handwritten signature of Lt. Steven Hunt Lt2

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

DATE OF ACCIDENT Fri, Sep 13, 2013	MILITARY TIME 10:01	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 13-25661
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Melbourne Street
----------------------------------	------------------------	--

IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
--	--

OPER #1 or PEDESTRIAN (Last, First, MI) Wells Khari	OPER #2 or PEDESTRIAN (Last, First, MI) Cosme Sanchez
---	---

ADDRESS (Street No & Name) 933 Rubber Avenue 4P	PROPER LIC CLASS Y-N <input type="checkbox"/>	ADDRESS (Street No & Name) 2362 Topaz Trl.	PROPER LIC CLASS Y-N <input type="checkbox"/>
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN Kissimmee	STATE FL	ZIP 34743	SEX M-F <input checked="" type="checkbox"/> M
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OPER LICENSE NO 037683198	STATE CT	DATE OF BIRTH 03/14/85	OPER LICENSE NO S522104703490	STATE FL	DATE OF BIRTH 09/29/70
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OWNER (Last, First, MI - Enter same, if owner is operator) Wells Barbara	OWNER'S (Last, First, MI - Enter same, if owner is operator) EGP Transport
--	--

ADDRESS (Street No & Name) 1104 Memory Lane	ADDRESS (Street No & Name) 12630 Chelmsford Court
---	---

CITY or TOWN Monroe	STATE NC	ZIP 28112	BODY TYPE 4 Door	CITY or TOWN Orlando	STATE FL	ZIP 32837	BODY TYPE Tractor
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REGISTRATION NO YZE5956	STATE NC	VEH YEAR & MAKE 2006 CHEVRO IMPALA	REGISTRATION NO F5858I	STATE FL	VEH YEAR & MAKE 1997 PTRB
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VEH ID NO (VIN) 2G1WT58K269133483	VEH ID NO (VIN) 1NP5DB9X3VN441307
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CARRIER EGP Auto Transport Inc
--

CARRIER ADDRESS (Street, City or Town, State, Zip) 12630 Chelmsford Ct Orlando, Florida 32837

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest <input type="checkbox"/> D - Driver <input type="checkbox"/> S - Side of Vehicle <input type="checkbox"/>	US DOT # ICC, MC #	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> Displayed Y-N <input type="checkbox"/>	GROSS VEH WEIGHT Rating # 8000	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> Displayed Y-N <input type="checkbox"/>
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HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> V - Verbal Warning
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STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O-Operator -C-Carrier OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S) Unsafe Backing 14-243(a)	SUBJ of ACTION <input checked="" type="checkbox"/> O-Operator -C-Carrier OW-Owner - P-Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# Nationwide Mutual Insurance 6132M757815	AUTOMOBILE INS CO-NAME-POLICY# Castle Point 239-437-6444
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PARTS of VEHICLE DAMAGED Front Bumper	PARTS of VEHICLE DAMAGED Minor Scratches
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
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1	1	N	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1	4	3	1	1
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2	2	N	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2	4	3	1	2
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3	1	N	Wells Danisha 933 Rubber Avenue 4j	09/04/86	4	3	1
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7							7
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ALL INVOLVED PERSONS

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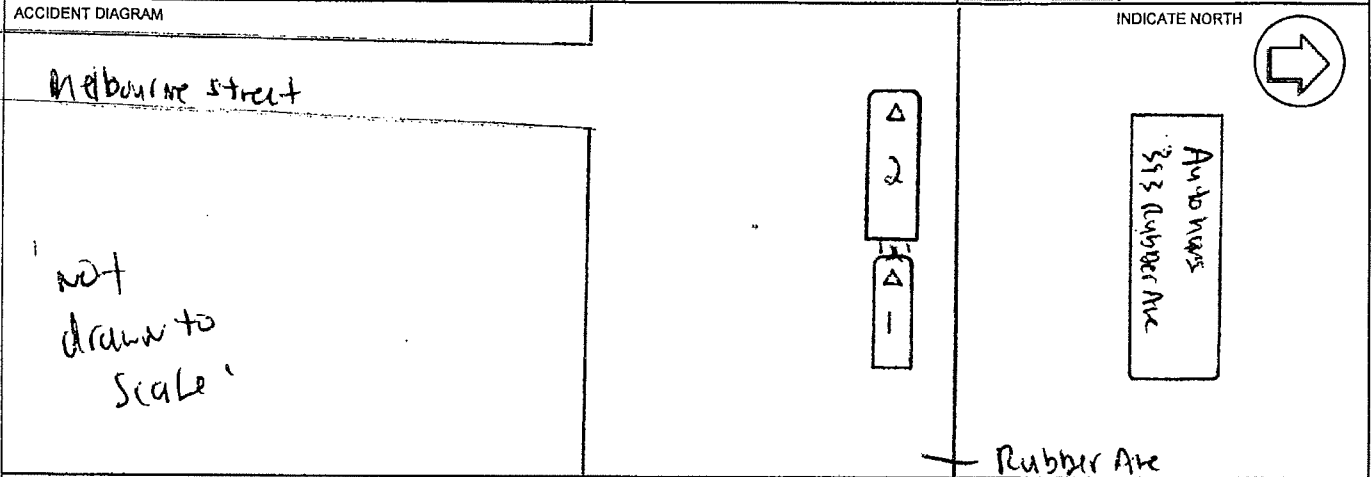
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ALL INVOLVED PERSONS

6



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Avenue Traffic Unit # 2 Traveling E on Rubber Avenue

On 09/13/13 at 10:01 hours, I was dispatched to a motor vehicle accident on Rubber Avenue by Melbourne Street.

Upon my arrival, I asked both operators and passenger if they were okay and needed medical attention. All stated they were fine and didn't need medical attention.

Operator #1 stated she was traveling West on Rubber Avenue. Operator #1 stated when she stopped on Rubber Avenue there was a large Car Carrier in front of her. Operator #1 stated they were in front on Autohaus Inc. 393 Rubber Avenue. Operator #1 stated the large Car Carrier then started backing up. Operator #1 stated she then put her vehicle in reverse because the large Car Carrier was going to hit her vehicle. Operator #1 stated as she was driving in reverse the large Car Carrier struck her front bumper causing damage to it. Operator #1 also mentioned that when she was backing up she think she struck a white car that was behind her. I looked at the rear bumper to vehicle #1 and didn't see damage to it. Also the vehicle that was behind her vehicle had already left the scene.

Operator #2 stated he parked the Car Carrier he was driving in front of Autohaus Inc. because he was delivering cars to Autohaus. Operator #2 stated he needed to back up to get out of the intersection. Operator #2 stated he didn't see any vehicles behind his vehicle and started backing up going East. Operator #2 stated this is when he struck vehicle #1 in the front bumper. Vehicle #2 didn't have any visible damage to it.

Conclusion- That after speaking to both operators and investigating this accident, I gave a verbal warning to Operator #2 for Unsafe Backing 14-243(a). Nothing further.

DA MACHIO PROPERTY OTHER THAN IN POL AND VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>T/O Marcus Jacoboski PL4</i>	POLICE AGENCY ID Naugatuck Police	REPORT DATE 9/16/2013	CASE STATUS <u>C</u> - Open - Closed	SUPERVISOR <i>Sgt. Mark Pettinocchi S2</i>
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T.O. Macoski PL4 #4

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



R 09
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GPS READINGS: Latitude:
Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: **Wed, Oct 2, 2013** MILITARY TIME: **13:46** ACCIDENT SEVERITY: Fatal Injury PDO VEH INVOLVED #: **2** PAGE #: **1** of 2 POLICE CASE NO: **13-27486**

CITY or TOWN: **Naugatuck** TOWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue** at **Melbourne Street**

IF NOT AT INTERSECTION: 2. Direction 3. Give nearest intersecting street, town line or mile marker of
1. Measure Distance F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Cavallaro Gary** OPER #2 or PEDESTRIAN (Last, First, MI):

ADDRESS (Street No & Name): **169 Gorman Street** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): PROPER LIC CLASS: Y-N

CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** SEX: M-F M CITY or TOWN: STATE: ZIP: SEX: M-F

OPER LICENSE NO: **093380970** STATE: **CT** DATE of BIRTH: **09/10/59** OPER LICENSE NO: STATE: DATE of BIRTH:

OWNER (Last, First, MI - Enter same, if owner is operator): **Cavallaro Gary** OWNER'S (Last, First, MI - Enter same, if owner is operator):

ADDRESS (Street No & Name): **169 Gorman Street** ADDRESS (Street No & Name):

CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** BODY TYPE: **Sport /** CITY or TOWN: STATE: ZIP: BODY TYPE:

REGISTRATION NO: **722-ZYC** STATE: **CT** VEH YEAR & MAKE: **JEEP LIBERTY** REGISTRATION NO: STATE: VEH YEAR & MAKE:

VEH ID NO (VIN): **IJ4GW58S51C536629** VEH ID NO (VIN):

CARRIER: CARRIER:

CARRIER ADDRESS (Street, City or Town, State, Zip): CARRIER ADDRESS (Street, City or Town, State, Zip):

SOURCE of CARRIER NAME: SP - Shipping Papers/Trip Manifest US DOT # ICC, MC # D - Driver S - Side of Vehicle SOURCE of CARRIER NAME: SP - Shipping Papers/Trip Manifest US DOT # ICC, MC # D - Driver S - Side of Vehicle

GROSS VEH WEIGHT: Rating # HAZARDOUS MATERIAL PLACARD: Required Y-N 4 Digit# Displayed Y-N 1 Digit# GROSS VEH WEIGHT: Rating # HAZARDOUS MATERIAL PLACARD: Required Y-N 4 Digit# Displayed Y-N 1 Digit#

HAZARDOUS CARGO: Released Y-N ENFORCEMENT ACTION TAKEN: N - None, A - Arrest, W - Written Warning, V - Verbal Warning HAZARDOUS CARGO: Released Y-N ENFORCEMENT ACTION TAKEN: N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): SUBJ of ACTION: O - Operator - C - Carrier OW - Owner - P - Pedestrian STATUTE or ORDINANCE NO(S): SUBJ of ACTION: O - Operator - C - Carrier OW - Owner - P - Pedestrian

AUTOMOBILE INS CO - NAME - POLICY#: **Nationwide 5106e206892 5106E206892** AUTOMOBILE INS CO - NAME - POLICY#:

PARTS of VEHICLE DAMAGED: **Entire front end** PARTS of VEHICLE DAMAGED:

VEHICLE TOWED TO: **N/A** TOWED DUE TO DAMAGE: Y-N No VEHICLE TOWED TO: TOWED DUE TO DAMAGE: Y-N

L M N NAME and ADDRESS of EACH INVOLVED PERSON DOB O P Q

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
1	1	N 01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1
2			TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				
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7							

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J 12

K 11

K 12

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AA 11

AA 12

AA 13

AA 14

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

FORM PR-1		PAGE # 2 of 2		POLICE CASE NO 13-27486	
ACCIDENT DIAGRAM <div style="text-align: center; font-size: 2em;">Rubber Ave.</div>			INDICATE NORTH 		
			<i>Melbourne Street</i> <div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 10px;">GC</div> <div style="margin-right: 10px;">▶</div> <div style="border: 1px solid black; border-radius: 50%; padding: 5px; margin-right: 10px;">○</div> <div>Traffic Light</div> </div>		
DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West) Traffic Unit # 1 Traveling <input checked="" type="checkbox"/> W on Rubber Avenue Traffic Unit # 2 Traveling <input type="checkbox"/> on <i>Hampden St</i>					
<p>On October 2, 2013 I responded to a motor vehicle accident at the intersection of Rubber Avenue and Melbourne Street. I spoke with Gary Cavallaro who stated he was stopped at the red light in his 2001 Tan Jeep Cherokee bearing CT registration 722-ZYC. Gary stated he was behind a dump truck that had no license plate on the vehicle. Gary stated the light turned green and the truck started to move forward. Gary stated the truck suddenly stopped and his vehicle struck the dump truck causing the front of his vehicle to go underneath the truck. Gary stated the operator of the truck exited his vehicle, looked at Gary's vehicle and told Gary he was okay. The operator then went back to the truck, got in and started to drive off. Gary stated he was yelling for the driver to stop but he continued down Rubber Avenue. Gary stated the operator of the truck was a small framed Hispanic looking male. Gary stated he did not get his name or any of his information. Gary stated he did not see what kind, or color the truck was. There was moderate damage to the entire front end of Gary's vehicle. Gary was able to drive the vehicle back to his residence. There was no witness or individuals I could speak to about the other driver or the truck. Gary refused medical treatment. Gary provided all valid documents as requested.</p> <p>No further action taken at this time..</p>					
DAMAGE PROPERTY OF OTHER VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE				
	NAME and ADDRESS of PROPERTY OWNER				
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE				
	NAME and ADDRESS of PROPERTY OWNER				
RANK and SIGNATURE of INVESTIGATING OFFICER <i>[Signature]</i> Ptl. John Julian PL35		POLICE AGENCY ID Naugatuck Police	REPORT DATE 10/3/2013	CASE STATUS <input checked="" type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR <i>[Signature]</i> Sgt. Derek Vostinak ST

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT Thu, Jan 16, 2014	MILITARY TIME 14:06	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 14-1361
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at
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IF NOT AT INTERSECTION	2. Direction W	3. Give nearest intersecting street, town line or mile marker of Hoadley Street
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TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
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OPER #1 or PEDESTRIAN (Last, First, MI) Lopez Melissa	OPER #2 or PEDESTRIAN (Last, First, MI) Guarente Linda
---	--

ADDRESS (Street No & Name) 58 Highland Avenue	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 290 Tawny Thrush Road	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	--	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> Fema	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> Fema
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OPER LICENSE NO 187203576	STATE	DATE of BIRTH 06/18/80	OPER LICENSE NO 014824946	STATE	DATE of BIRTH 01/27/63
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OWNER (Last, First, MI - Enter same, if owner is operator) Miranda Marco	OWNER'S (Last, First, MI - Enter same, if owner is operator) STA of Connecticut
--	---

ADDRESS (Street No & Name) 29 salem street	ADDRESS (Street No & Name) 5 Shelter Rock Ste
--	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Station	CITY or TOWN Danbury	STATE CT	ZIP 06810	BODY TYPE Bus
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REGISTRATION NO 862ZXU	STATE CT	VEH YEAR & MAKE 2008 FORD ESCAPE	REGISTRATION NO 74A81	STATE CT	VEH YEAR & MAKE 2008 Thoma 051MS
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VEH ID NO (VIN) 2FMDK49C68BB24408	VEH ID NO (VIN) 1FD4E45P48DB45493
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CARRIER	CARRIER
CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# Displayed Y-N <input type="checkbox"/> 1 Digit#	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# Displayed Y-N <input type="checkbox"/> 1 Digit#
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HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN A N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-234	SUBJ of ACTION O O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# Geico 4230-20-68-82	4230-20-68-82	AUTOMOBILE INS CO-NAME-POLICY# National Interstate Ins	STA0000001-08
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PARTS of VEHICLE DAMAGED passenger side mirror	PARTS of VEHICLE DAMAGED external stop sign
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VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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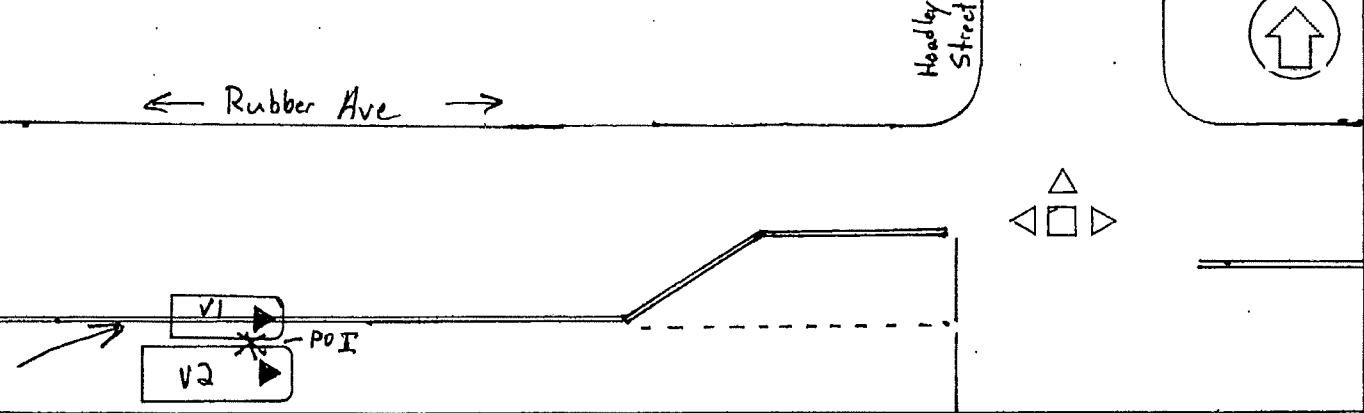
	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q				
	L	M	N								
1	1	N	01								
2	2	N	01								
3	2	N	11	DiCorpo	Carol	380 Church Street Naugatuck	05/16/44	4	2	1	3
4	2	N	11	Theil	Joe	290 High St Naugatuck	05/02/99	4	2	1	4
5	2	N	11	Hiney	Andrew	115 Warm Earth Rd Naugatuck	07/02/99	4	2	1	5
6	2	N	11	June	Edgar	85 Warm Earth Rd Naugatuck	04/18/96	4	2	1	5
7	2	N	11	Demko	Kyle	7 Morning Dove rd Naugatuck	12/29/99	4	2	1	7

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

63

ACCIDENT DIAGRAM



NOT DRAWN TO SCALE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator #2 stated she was stopped for traffic while traveling East on Rubber Avenue. Op #2 stated she was approximately 500 feet from the Hoadley Street intersection in front of Subway (444 Rubber Ave) when vehicle #1 began to pass her on the left. Op #2 stated her bus stop sign was not displayed. Op #2 stated traffic was heavy all around and vehicle #1's passenger side view mirror scraped against the bus. Op #2 stated she and her passengers were not injured. I observed a minor scratch to the bus's external stop sign.

Operator #1 was located at her residence in the area. Op #1 stated she did not stay on scene because there was no damage and did not think she had to. Op #1 stated she went around the left side of the bus to access the left turn lane at Hoadley Street. Op #1 stated she was not injured. I observed a minor scuff to the passenger side mirror.

The bus company did not wish to pursue evading charges due to the minor damage. Based on statements I find Op #1 at fault for the accident. The location where Op #1 attempted to pass was only one lane and was a solid line not permitting passing. Op #1 was issued an infraction for passing in a no passing zone in violation of C.G.S. 14-234.

DAMAGE TO PROPERTY IN POLICE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <i>Matthew DaSilva</i> Pt. Matthew DaSilva PL19	POLICE AGENCY ID Naugatuck Police	REPORT DATE 1/21/2014	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR <i>Mark Pettinocchi</i> Sgt. Mark Pettinocchi S2
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Sgt. Pettinocchi 93

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

DATE OF ACCIDENT: **Wed, Feb 8, 2012** MILITARY TIME: **17:43** ACCIDENT SEVERITY: Fatal Injury PDO VEH INVOLVED #: **2** PAGE #: **1 of 2** POLICE CASE NO: **12-3632**

CITY or TOWN: **Naugatuck** TWN CODE: **088** ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): **Rubber Avenue at Melbourn Street**

IF NOT AT INTERSECTION: 2. Direction _____ 3. Give nearest intersecting street, town line or mile marker of _____
1. Measure Distance _____ F - Feet T - Tenths of Mile M - Meters K - Kilometers N - North S - South E - East W - West
Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle TRAFFIC UNIT # 2 V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

OPER #1 or PEDESTRIAN (Last, First, MI): **Dasilva Mattheu** OPER #2 or PEDESTRIAN (Last, First, MI): **Tribanas Manuel**

ADDRESS (Street No & Name): **124 Andrew Avenue** PROPER LIC CLASS: Y-N Y ADDRESS (Street No & Name): **55 Deepwood Road** PROPER LIC CLASS: Y-N N

CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** SEX: M-F M CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** SEX: M-F M

OPER LICENSE NO: **198769463** STATE: **CT** DATE OF BIRTH: **07/22/94** OPER LICENSE NO: **206231585** STATE: **CT** DATE OF BIRTH: **08/25/70**

OWNER (Last, First, MI - Enter same, if owner is operator): **Dasilva Mattheu** OWNER'S (Last, First, MI - Enter same, if owner is operator): **Tribanas Manuel**

ADDRESS (Street No & Name): **124 Andrew Avenue** ADDRESS (Street No & Name): **55 Deepwood Road**

CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** BODY TYPE: **Station** CITY or TOWN: **Naugatuck** STATE: **CT** ZIP: **06770** BODY TYPE: **Pickup**

REGISTRATION NO: **676HXV** STATE: **CT** VEH YEAR & MAKE: **2001 KIA SPORTAGE** REGISTRATION NO: **8C6243** STATE: **CT** VEH YEAR & MAKE: **2003 CHEVR SILVERADO**

VEH ID NO (VIN): **KNDJA723X15070367** VEH ID NO (VIN): **1GCEK19T83E164638**

CARRIER: _____ CARRIER: _____

CARRIER ADDRESS (Street, City or Town, State, Zip): _____ CARRIER ADDRESS (Street, City or Town, State, Zip): _____

SOURCE of CARRIER NAME: _____ US DOT # _____ SOURCE of CARRIER NAME: _____ US DOT # _____
SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle ICC, MC # _____

GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____ GROSS VEH WEIGHT: _____ HAZARDOUS MATERIAL PLACARD: _____
Rating # _____ Required Y-N _____ 4 Digit# _____ Displayed Y-N _____ 1 Digit# _____

HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____ HAZARDOUS CARGO: _____ ENFORCEMENT ACTION TAKEN: _____
Released Y-N _____ V N - None, A - Arrest, W - Written Warning, V - Verbal Warning

STATUTE or ORDINANCE NO(S): **14-240** SUBJ of ACTION: O Operator - C-Carrier OW-Owner - P-Pedestrian STATUTE or ORDINANCE NO(S): _____ SUBJ of ACTION: O Operator - C-Carrier OW-Owner - P-Pedestrian

AUTOMOBILE INS CO-NAME-POLICY#: **Safeco Insurance Company of K2050621** AUTOMOBILE INS CO-NAME-POLICY#: **Arbella Insurance Group ALT0004821**

PARTS of VEHICLE DAMAGED: **Minor Front End** PARTS of VEHICLE DAMAGED: **Minor Rear End**

VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N No VEHICLE TOWED TO: _____ TOWED DUE TO DAMAGE: Y-N No

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21
K
22
V
1
W
08
AA
21
AA
22
AA
23
AA
24

64

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q		
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	2	1	2
3									3
4									4
5									5
6									6
7									7

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

ACCIDENT DIAGRAM

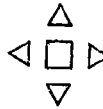
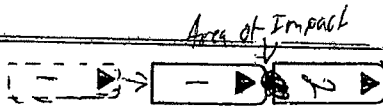
Not to scale

INDICATE NORTH



Melbourne St.

Rubber Avenue



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling W on Rubber Ave

Traffic Unit # 2 Traveling W on Rubber Ave

Operator 1 stated he was stopped behind vehicle 2 at the intersection of Rubber Avenue and Melbourne Street. Operator 1 stated he saw the light turn green and moved his vehicle forward. Operator 1 stated he didn't realize Vehicle 2 had not started moving. Operator 1 stated he was wearing his seat belt and was uninjured.

Operator 2 stated he was stopped at the red light at the intersection of Rubber Avenue and Melbourne Street. Operator 2 stated saw a green arrow light turn on for the other lane and felt Vehicle 1 bump into his vehicle. Operator 2 stated he was wearing his seat belt and was uninjured.

Officer: Upon my arrival both vehicles had moved out of the roadway due to a heavy amount of traffic. Vehicle 1 had minor damage to the front bumper and vehicle 2 had minor damage to the rear bumper. Based upon the damage being consistent with the Operators statements, Operator 1 was found at fault. Operator 1 was issued a verbal warning for Following too Close in violation of CGS 14-240.

DAMAGE TO PROPERTY OR VEHICLES IN POLICED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Michael Wawzyniak PL36	POLICE AGENCY ID Naugatuck Police	REPORT DATE 2/9/2012	CASE STATUS <input checked="" type="checkbox"/> C - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Brian Newman S3
--	--------------------------------------	-------------------------	--	------------------------------------

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT



FORM PR-1 Rev. 01/01

R 09

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT: Tue, Jan 24, 2012
 MILITARY TIME: 18:21
 ACCIDENT SEVERITY: Fatal Injury PDO
 VEHS INVOLVED #: 2
 PAGE #: 1 of 2
 POLICE CASE NO: 12-2268

CITY or TOWN: Naugatuck
 TOWN CODE: 088
 ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #): Rubber Avenue at

IF NOT AT INTERSECTION: 2. Direction: 3. Give nearest intersecting street, town line or mile marker of: Hoadley Street
 1. Measure Distance: 100 F
 F - Feet, T - Tenths of Mile, M - Meters, K - Kilometers
 W - West, N - North, S - South, E - East, W - West
 Accident Occurred: On Private Property Perking Lot

02

TRAFFIC UNIT # 1: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
 TRAFFIC UNIT # 2: V - Vehicle, P - Pedestrian, N - Non-contact Vehicle

2

OPER #1 or PEDESTRIAN (Last, First, MI): Acosta Michelle
 OPER #2 or PEDESTRIAN (Last, First, MI): Arumugam Dominic

35

ADDRESS (Street No & Name): 53 Spring Street
 PROPER LIC CLASS: Y-N Y
 ADDRESS (Street No & Name): 28 Goodsell St
 PROPER LIC CLASS: Y-N Y

CITY or TOWN: Naugatuck, CT 06770, SEX: M-F F
 CITY or TOWN: Bridgeport, CT 06604, SEX: M-F M

11

OPER LICENSE NO: 217593792, CT, DATE OF BIRTH: 09/06/84
 OPER LICENSE NO: 096122077, CT, DATE OF BIRTH: 09/16/69

12

OWNER (Last, First, MI - Enter same, if owner is operator): Acosta Michelle
 OWNER'S (Last, First, MI - Enter same, if owner is operator): Arumugam Dominic

14

ADDRESS (Street No & Name): 53 Spring Street
 ADDRESS (Street No & Name): 28 Goodsell St

11

CITY or TOWN: Naugatuck, CT 06770, BODY TYPE: 4 Door
 CITY or TOWN: Bridgeport, CT 06604, BODY TYPE: Sport /

12

REGISTRATION NO: 599XWG, CT, VEH YEAR & MAKE: 2000 LINCOLN LS
 REGISTRATION NO: 438WDB, CT, VEH YEAR & MAKE: 2002 MITSUBI MONTERO

VEH ID NO (VIN): 1LNHM87AXYY889807
 VEH ID NO (VIN): 1LNHM87AXYY889807

CARRIER: [Patterned area]
 CARRIER ADDRESS (Street, City or Town, State, Zip): [Patterned area]

SOURCE of CARRIER NAME: [Patterned area]
 SOURCE of CARRIER NAME: [Patterned area]

GROSS VEH WEIGHT: [Patterned area]
 GROSS VEH WEIGHT: [Patterned area]

HAZARDOUS MATERIAL PLACARD: [Patterned area]
 HAZARDOUS MATERIAL PLACARD: [Patterned area]

HAZARDOUS CARGO: [Patterned area]
 HAZARDOUS CARGO: [Patterned area]

STATUTE or ORDINANCE NO(S): 14-240 and 14-215a
 STATUTE or ORDINANCE NO(S): N/A

AUTOMOBILE INS CO-NAME-POLICY#: Progressive 660251542
 AUTOMOBILE INS CO-NAME-POLICY#: Nationwide 5106E148079

PARTS of VEHICLE DAMAGED: Front End
 PARTS of VEHICLE DAMAGED: Rear Bumper

VEHICLE TOWED TO: Owner's Residence, TOWED DUE TO DAMAGE: Yes
 VEHICLE TOWED TO: N/A, TOWED DUE TO DAMAGE: No

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q		
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1			4	2	1	1	
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2			4	2	1	2	
3	1	N	06	Acosta	Isabella	53 Spring St., Naugatuck, CT	12/27/06	4	3	1	3
4	1	N	05	Perez	Alexis	53 Spring St., Naugatuck, CT	08/21/11	5	3	1	4
5	1	N	04	Acosta	Sammy	53 Spring St., Naugatuck, CT	12/20/04	4	3	1	5
6	2	N	03	Arumugam	Zachary	28 Goodsell St., Bridgeport, CT	12/08/99	4	2	1	6
7											7

ALL INVOLVED PERSONS

65

ACCIDENT DIAGRAM

Not to
SCALE

INDICATE NORTH



RUBBER AVENUE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Operator #1 stated she was traveling East on Rubber Avenue approaching the intersection with Hoadley Street. Operator #1 stated East bound traffic was stopped. Operator #1 stated as she was slowing, her foot slipped off the brake pedal and onto the gas pedal. Operator #1 stated she tried to swerve to the left to avoid Vehicle #2. Operator #1 stated the front of her vehicle collided with the rear of Vehicle #2. Operator #1 stated she did not move her vehicle after the crash. Operator #1 stated she was not injured. Operator #1 stated her three (3) juvenile passengers were not injured.

Operator #2 stated he was stopped East bound on Rubber Avenue for traffic at the intersection with Hoadley Street. Operator #2 stated his vehicle was struck from behind by Vehicle #1. Operator #2 stated he did not move his vehicle after the crash. Operator #2 stated neither he nor his juvenile passenger were injured.

Officer: Upon my arrival I saw both vehicles in their positions of final rest. Both vehicles were facing East in the East bound lane. Vehicle #1 had heavy front end damage. Vehicle #2 had moderate damage to the left rear bumper. The vehicles' positions and damage were consistent with the type of collision described by both operators.

A check of Operator #1's license showed it to be suspended as of 10/26/2011.

Based on the above facts and circumstances Operator #1 was found to be at fault, and issued a misdemeanor summons (MC023569), for Following Too Close {CGS 14-240} and Operating Under Suspension {CGS 14-215a}.

-----End of Report-----

DAMAGE REPORT FOR POLICE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE			
	NAME and ADDRESS of PROPERTY OWNER			
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE			
	NAME and ADDRESS of PROPERTY OWNER			
RANK and SIGNATURE of INVESTIGATING OFFICER	POLICE AGENCY ID	REPORT DATE	CASE STATUS	SUPERVISOR
Ptl. Derek Vostinak PL24	Naugatuck Police	1/25/2012	<input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	Sgt. Brian Newman S3

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Mon, Nov 21, 2011	MILITARY TIME 14:21	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO <input type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 4	POLICE CASE NO 11-30304
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Headley Street
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IF NOT AT INTERSECTION

1. Measure Distance F - Feet
T - Tenths of Mile
M - Meters
K - Kilometers

2. Direction N - North
S - South
E - East
W - West

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
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OPER #1 or PEDESTRIAN (Last, First, MI) Atwood Michael	OPER #2 or PEDESTRIAN (Last, First, MI) Card Charles
--	--

ADDRESS (Street No & Name) 224 Water Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 8 Pond street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	--	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M
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OPER LICENSE NO 206967195	STATE CT	DATE OF BIRTH 08/12/78	OPER LICENSE NO 186693573	STATE CT	DATE OF BIRTH 06/11/74
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OWNER (Last, First, MI - Enter same, if owner is operator) A Better Way Wholesale	OWNER'S (Last, First, MI - Enter same, if owner is operator) Cabana Catherine
---	---

ADDRESS (Street No & Name) 423 Rubber Avenue	ADDRESS (Street No & Name) 99 Galpin Street
--	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Station	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door
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REGISTRATION NO DS907	STATE CT	VEH YEAR & MAKE 10 SUBARU Tribeca	REGISTRATION NO 455SHX	STATE CT	VEH YEAR & MAKE 2001 CHEVR CAVALIER
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VEH ID NO (VIN) 4S4WX9GD2A4401817	VEH ID NO (VIN) 1G1JF52T617263134
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Tip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Tip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# Displayed Y-N <input type="checkbox"/> 1 Digit#	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit# Displayed Y-N <input type="checkbox"/> 1 Digit#
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HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning <input checked="" type="checkbox"/> V	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning <input checked="" type="checkbox"/> V
--	---	--	---

STATUTE or ORDINANCE NO(S) 14-299	SUBJ of ACTION O - Operator - C-Carrier OW - Owner - P-Pedestrian <input checked="" type="checkbox"/> O	STATUTE or ORDINANCE NO(S) 14-246a	SUBJ of ACTION O - Operator - C-Carrier OW - Owner - P-Pedestrian <input checked="" type="checkbox"/> O
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AUTOMOBILE INS CO-NAME-POLICY# Utica National Insurance CPP4191287	AUTOMOBILE INS CO-NAME-POLICY# Nationwide 5106D850371
--	---

PARTS of VEHICLE DAMAGED right rear door and quarter panel	PARTS of VEHICLE DAMAGED front bumper and light
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q		
			1	2	3					4	
1	1	C	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1			9	3	1	1	
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2			9	3	1	2	
3	1	C	03	Roberts	John	423 Rubber Ave., Naugatuck, CT	10/23/66	9	3	1	3
4	2	N	03	Dowsett	Thomas	240 Spring St., Naugatuck, CT	03/17/84	9	3	1	4
5	W	/	01	Bouchard	Kimberly	357 High St., Naugatuck, CT	11/19/65	/	/	/	5
6	W	/	03	Bouchard	Keith	357 High St., Naugatuck, CT	03/02/68	/	/	/	6
7	W	/	01	Cardella	Robin	110 Park Ave., Naugatuck, CT	05/03/65	/	/	/	7

02
1
01

11
12

11
12

X
Y
Z

AA
AA
AA
AA

ALL INVOLVED PERSONS

R 03
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 2
J 21
K 21
L 22
M 2
N 05

AA
AA
AA
AA

ALL INVOLVED PERSONS

66

NAUGATUCK POLICE DEPARTMENT

PR-1 SUPPLEMENTAL REPORT FOR INVOLVED PERSONS

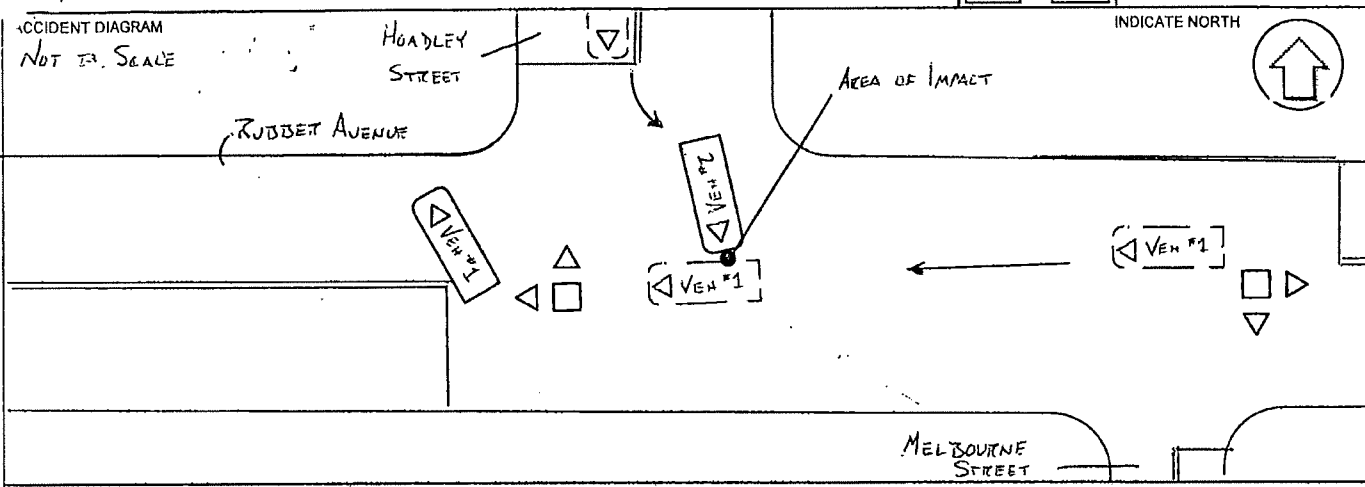
POLICE CASE NO 11-30304

	NAME AND ADDRESS OF EACH INVOLVED PERSON			DOB	O	P	Q				
	L	M	N						Last	First	Address
8	W	/	01	Marfia	Anthony	229 Cherry St., Naugatuck, CT	06/10/94	/	/	/	8
9											9
10											10
11											11
12											12
13											13
14											14
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47											47
48											48
49											49

ALL INVOLVED PERSONS

ALL INVOLVED PERSONS

RANK and SIGNATURE of INVESTIGATING OFFICER <i>[Signature]</i> Ptl. Derek Vostinak PL27	POLICE AGENCY ID Spring St	REPORT DATE 11/24/11	PAGE NUMBER 2 OF 4	SUPERVISOR <i>[Signature]</i>
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DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Traveling **W** on Rubber Avenue Traffic Unit # 2 Traveling **S** on Hoadley Street

Operator #1 stated he was traveling West on Rubber Avenue approaching the intersection with Hoadley Street. Operator #1 stated he had a green light and proceeded through the intersection. Operator #1 stated as he approached Hoadley Street he saw Vehicle #2 "flying" toward him from the left. Operator #1 stated he was not able to take any evasive action. Operator #1 stated Vehicle #2 collided with the right side of his vehicle, causing him to spin to the right. Operator #1 stated he had pain in his lower back. Operator #1 was transported to Waterbury Hospital by EMS.

Operator #2 stated he was stopped South bound on Hoadley Street for a red light. Operator #2 stated his light turned green and he entered the intersection with Rubber Avenue intending to make a left turn (East bound). Operator #2 stated Vehicle #1 came "out of nowhere" and he collided with Vehicle #1. Operator #2 stated he was not injured.

Passenger #1 stated he had some neck and back pain. Passenger #1 refused EMS treatment.

Passenger #2 stated he was not injured.

Witness #1 stated she was traveling West on Rubber Avenue approaching the intersection with Hoadley Street. Witness #1 stated she had a green signal. Witness #1 stated she saw Vehicle #1 was behind her as she went through the intersection. Witness #1 gave the following sworn, written statement: "I was driving on Rubber Ave (towards Stop & Shop). I went through the green light. A red SUV followed me through the light. As I looked into my rearview mirror, I saw a small gray/gold colored car hit the SUV and watched it spin around. The car that followed the red SUV swerved around the two car accident and proceeded down Rubber Ave. I pulled over to see if everyone was ok. My husband [Witness #2] was a passenger in my car."

Witness #2 stated he was the passenger in Witness #1's vehicle. Witness #2 stated their light was green.

Witness #3 gave the following sworn, written statement: "I [Witness #3] was directly behind the

DAMAGE TO PROPERTY OF OTHER VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER: Ptl. Derek Vostinak PL27
 POLICE AGENCY ID: Naugatuck Police
 REPORT DATE: 11/24/2011
 CASE STATUS: **C** (O - Open, C - Closed)
 SUPERVISOR: Lt. Gregory Dean Lt4

**NAUGATUCK POLICE DEPARTMENT
CONTINUATION OF INVESTIGATION REPORT**

CASE NUMBER 11-30304	INCIDENT TYPE MV Accident	
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car on Hoadley St. The light turned green and the car in front of me proceeded to take a left (his blinker was on) when a car coming up Rubber Ave hit him. This is a very dangerous area and I've seen this happen my times to where the light turns green and theres almost an accident there is not enough time spaced between light changes and length of road."

Witness #4 gave the following sworn, written statement: "I was operating the vehicle behind the victim of the crash. He had a green light and proceeded through the intersection and out of nowhere a vehicle came flying through the intersection and hit the car. The opposing vehicle had a red light and should have been stopped behind the line and the man in front of me had the right of way. We were on Hoadley St."

Officer: Upon my arrival I saw both vehicles in their positions of final rest. Vehicle #1 was west of the intersection, facing North in the west bound lane. Vehicle #2 was in the intersection facing south in the west bound lane. I saw Vehicle #1 had moderate damage (a large dent with paint transfer) to the right rear door and quarter panel. I saw Vehicle #2 had moderate damage to the front bumper and headlight (the front bumper was torn off of Vehicle #2).

The positions and damage to the vehicles was consistent with the type of collision described by operators, passengers, and witnesses.

Photographs were taken of the scene and damaged vehicles.

The posted speed limit on Rubber Avenue is 25 mph. The stop line for west bound traffic on Rubber Avenue is about 100 feet east of the intersection with Hoadley Street. The stop line for south bound traffic on Hoadley Street is about 25 feet north of the intersection with Rubber Avenue.

The timing of the light is such that if a west bound vehicle travels through the yellow signal, Hoadley Street will have a green signal while the west bound vehicle is still in the intersection. While Witness #1 had a green signal, it is not probable that Vehicle #1 had a green signal.

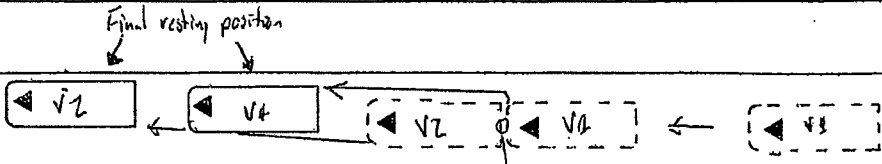
Based on the above facts and circumstances Operator #1 was found to be at fault, and issued a verbal warning, for Failure to Obey a Traffic Control Signal {CGS 14-299}. Operator #2 was found to be at fault, and issued a verbal warning, for Failure to Grant the Right of Way at a Junction {CGS 14-246(a)}.

-----End of Report-----

SUPERVISOR'S SIGNATURE Lt. Gregory Dean Lt4	INVESTIGATOR'S SIGNATURE Pt. Derek Vostiak PI27	PAGE NUMBER 4 OF 4
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ACCIDENT DIAGRAM INDICATE NORTH 

- Not Drawn To Scale -



← Rubber Avenue →

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Traveling W on Rubber Avenue Traffic Unit # 2 Traveling W on Rubber Avenue

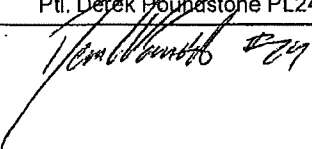
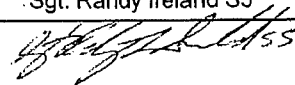
On November 11, 2011 at 10:22 AM I was dispatched to Rubber Avenue near Hoadley Street for a report of a motor vehicle collision.

Upon my arrival I could see both Vehicle 1 and Vehicle 2 pulled over on the west bound shoulder of Rubber Avenue approximately 200 feet west of Hoadley Street. I first spoke with Operator 1 about the incident. Operator 1 said he was traveling west bound on Rubber Avenue. Operator 1 said he took his eyes off the road for a second for an unknown reason and when he looked back, Vehicle 2 was stopped in front of him. Operator 1 said he tried to stop by applying his breaks but he still ended up striking the rear end of vehicle 2. Operator 1 said he was not on his cell phone, he was wearing his seat belt an he didn't wish to go to the hospital despite a laceration to his forehead that was bleeding. Naugatuck EMS signed a refusal for treatment.

I next spoke with Operator 2 who said he was traveling west bound on Rubber Avenue when he slowed down for turning traffic. Operator 2 said when he slowed down, he was forcefully struck in the rear end of his vehicle by Vehicle 1. Operator 2 said his neck was sore as he was also seen by Naugatuck EMS and refused treatment.

Both vehicle's were towed due to damage. Operator 1 is found at fault for the collision for following too closely in violation of Connecticut General Statute 14-240. No further action at this time.

TO LOCATE PROPERTY OF INVOLVED VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER <u>Pt. Derek Poundstone PL24</u> 	POLICE AGENCY ID Naugatuck Police	REPORT DATE 11/22/2011	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O C - Closed O - Open	SUPERVISOR Sgt. Randy Ireland S5 
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Thu, Oct 13, 2011	MILITARY TIME 16:47	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 11-26415
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
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IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance F - Feet
T - Tenths of Mile
M - Meters
K - Kilometers N - North
S - South
E - East
W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
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OPER #1 or PEDESTRIAN (Last, First, MI) Garrett Dorsey	OPER #2 or PEDESTRIAN (Last, First, MI) Ungrady Holly
--	---

ADDRESS (Street No & Name) 198 Cherry Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 1081 New Haven Road #4G	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F
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OPER LICENSE NO 108786052	STATE CT	DATE of BIRTH 10/11/91	OPER LICENSE NO 238439298	STATE CT	DATE of BIRTH 11/06/66
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OWNER (Last, First, MI - Enter same, if owner is operator) Garrett Dorsey	OWNER'S (Last, First, MI - Enter same, if owner is operator) Ungrady Holly
---	--

ADDRESS (Street No & Name) 198 Cherry Street	ADDRESS (Street No & Name) 1081 New Haven Road #4G
--	--

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door
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REGISTRATION NO 567YRY	STATE CT	VEH YEAR & MAKE 1996 OLDSMO CIERA	REGISTRATION NO 537YXF	STATE CT	VEH YEAR & MAKE 2011 HYUND SONATA
----------------------------------	--------------------	---	----------------------------------	--------------------	---

VEH ID NO (VIN) 1G3AJ55M3T6382679	VEH ID NO (VIN) 5NPEB4ACXBH072054
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME BP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME BP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 4 Digit #	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N <input type="checkbox"/> 4 Digit # Displayed Y-N <input type="checkbox"/> 4 Digit #
------------------------------	---	------------------------------	---

HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> W - Written Warning, V - Verbal Warning N - None, A - Arrest	HAZARDOUS CARGO Released Y-N <input type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning
--	---	--	---

STATUTE or ORDINANCE NO(S) 14-240	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C-Carrier OW - Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S) N/A	SUBJ of ACTION <input checked="" type="checkbox"/> I - Operator - C-Carrier OW - Owner - P-Pedestrian
---	---	--	---

AUTOMOBILE INS CO-NAME-POLICY# Liberty Mutual A02-218-493162-4008	AUTOMOBILE INS CO-NAME-POLICY# Hartford 31PH207742-802258
---	---

PARTS of VEHICLE DAMAGED Front bumper - minor	PARTS of VEHICLE DAMAGED Rear bumper - minor
---	--

VEHICLE TOWED TO _____ TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/>	VEHICLE TOWED TO _____ TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/>
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ALL INVOLVED PERSONS

	L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				4	2	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				4	2	1
3	1	N	03	Thomas	Elijah	800 Country Club Rd. Waterbury, CT	12/09/91	4	2	1
4	2	N	03	Ungrady	Sophia	1081 New Haven Rd. #4G Naugatuck, CT	08/08/99	4	2	1
5										
6										
7										

R 09
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 3
J 231
J 21 /
J 22 /
U 2 /
K 21 /
K 22 /
V 1
W 08
X 2
Y 2
Z 2
AA 21
AA 22
AA 23
AA 24

ALL INVOLVED PERSONS

Handwritten signature

ACCIDENT DIAGRAM

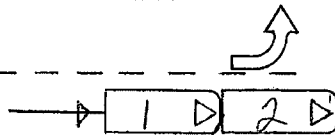
HOADLEY STREET

INDICATE NORTH



RUBBER AVENUE

TRAFFIC LIGHT



P.O.I.

MAP NOT TO SCALE

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Avenue

Traffic Unit # 2 Traveling E on Rubber Avenue

Vehicle #1 was stopped at a red traffic light behind Vehicle #2, Eastbound on Rubber Avenue at the Hoadley Street intersection. Vehicle #1 struck Vehicle #2 in the rear bumper. No reported injuries.

Operator #1 stated he was stopped at the traffic light and when it turned green, he went forward and struck Vehicle #2 in the rear bumper. Operator #1 stated he did not know Vehicle #2 had not moved forward yet.

Operator #2 stated she was stopped at the light and Vehicle #1 struck her vehicle from the rear as the light turned green.

Vehicle #1 suffered minor damage to the front bumper and Vehicle #2 suffered minor damage to the rear bumper. Both vehicles were driven from the scene.

This collision was caused by Operator #1 failing to drive a reasonable distance apart from Vehicle #2. Operator #1 was issued a written warning for CGS Section 14-240.

DAMAGE PROPERTY
CHECKED
IF FOR THE VEHICLE

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER

Ptl. Daniel Norck PL37

POLICE AGENCY ID

Naugatuck Police

REPORT DATE

10/17/2011

CASE STATUS

C

O - Open
 C - Closed

SUPERVISOR

Sgt. Paul Sully

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT



FORM PR-1 Rev. 01/01

GPS READINGS: Latitude:
Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT	MILITARY TIME 06:40	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 11-2133
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Melbourne Street
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IF NOT AT INTERSECTION

1. Measure Distance F - Feet
T - Tenths of Mile
M - Meters
K - Kilometers

2. Direction N - North
S - South
E - East
W - West

3. Give nearest intersecting street, town line or mile marker of

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Cretella Anthony	OPER #2 or PEDESTRIAN (Last, First, MI) Yaworski Margaret
--	---

ADDRESS (Street No & Name) 396 Scott Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 44 Brittany Lane	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
---	---	---	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F
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OPER LICENSE NO 208747054	STATE CT	DATE of BIRTH 08/23/94	OPER LICENSE NO 116669386	STATE CT	DATE of BIRTH 11/03/57
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OWNER (Last, First, MI - Enter same, if owner is operator) Cretella Joanne	OWNER'S (Last, First, MI - Enter same, if owner is operator) Yaworski Margaret
--	--

ADDRESS (Street No & Name) 396 Scott Street	ADDRESS (Street No & Name) 44 Brittany Lane
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Pickup	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 2 Door
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REGISTRATION NO 39CV66	STATE CT	VEH YEAR & MAKE 2006 CHEVRO 2500	REGISTRATION NO 828TXW	STATE CT	VEH YEAR & MAKE 2003 MITSUBI ECLIPSE
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VEH ID NO (VIN) 1GCHK24U36E161105	VEH ID NO (VIN) 4A3AC44G23E128691
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
---------------------------------	--	---------------------------------	--

STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO - NAME - POLICY# Allstate 02525339301/13	AUTOMOBILE INS CO - NAME - POLICY# Allstate 91981785208/18
--	--

PARTS of VEHICLE DAMAGED no damage	PARTS of VEHICLE DAMAGED driver side rear quarter
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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L	M	N	DOB	O	P	Q
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1	1	N	01	4	2	1	1
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2	2	N	01	4	2	1	2
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3							3
---	--	--	--	--	--	--	---

4							4
---	--	--	--	--	--	--	---

5							5
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6							6
---	--	--	--	--	--	--	---

7							7
---	--	--	--	--	--	--	---

02
2
35

11
12

11
12

11
12
13
14

ALL INVOLVED PERSONS

09
1
3
1
1
4
2
02
3
33

21
22

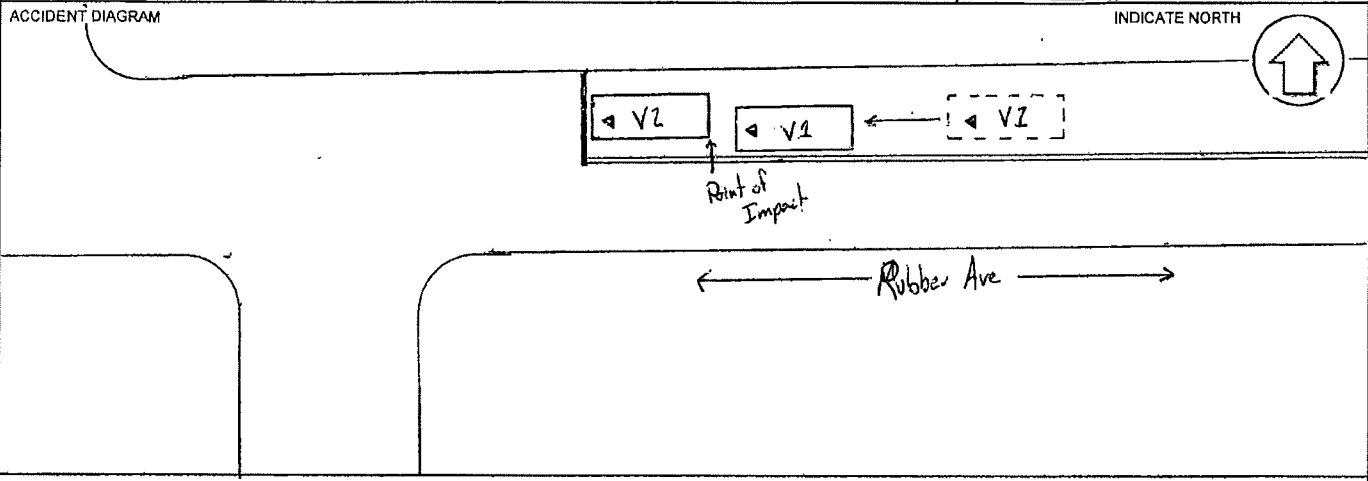
21
22
1
08

2
2

21
22
23
24

ALL INVOLVED PERSONS

69



DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)
 Traffic Unit # 1 Traveling W on Rubber Avenue Traffic Unit # 2 Traveling W on Rubber Avenue

On January 26, 2011 at approximately 06:40 hours I was dispatched to Rubber Avenue at Melbourne Street for a report of a motor vehicle collision.

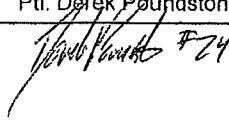
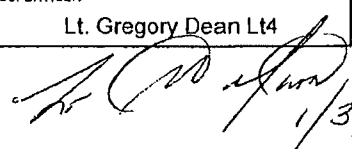
Upon my arrival, I could see Vehicle 1 and Vehicle 2 facing west bound in the travel portion of Rubber Avenue at the intersection of Rubber Avenue and Melbourne Street. Vehicle 2 was stopped at the stop light for the traffic signal located at this intersection and Vehicle 1 was directly behind Vehicle 2. It should be noted Vehicle 2 was a pickup truck with a large plow attachment on the front of the vehicle. Upon speaking with both Operator 1 and Operator 2, I asked them if they were injured. Both parties said they were not injured. I could see Vehicle 2 had moderate damage to the driver side rear bumper. The bumper was cracked and a small portion of the bumper was hanging down below the rear tire. Vehicle 1 had no damage to the plow area that made contact with the rear of Vehicle 2.

Operator 2 said she was traveling west bound on Rubber Avenue when she stopped at the red traffic signal located at the intersection of Rubber Avenue and Melbourne Street. Operator 2 said when she stopped, the rear of her vehicle was struck by Vehicle 1.

Operator 1 said he was traveling west bound on Rubber Avenue behind Vehicle 2 when suddenly he noticed Vehicle 2 stopping for the red traffic signal. Operator 1 said he wasn't aware Vehicle 2 was stopping until it was too late for him to stop without causing a collision.

Operator 1 was found at fault for the collision and was issued a verbal warning for following to close in violation of Connecticut General Statute 14-240.

DAMAGE PROPERTY OF OTHER VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Pt. Derek Poundstone PL24 	POLICE AGENCY ID Naugatuck Police	REPORT DATE 1/30/2011	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O O - Open C - Closed	SUPERVISOR Lt. Gregory Dean Lt4  1/31/11
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CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE of ACCIDENT Thu, Feb 10, 2011	MILITARY TIME 14:32	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 11-3734
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Melbourne Street
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IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance F - Feet T - Tenths of Mile N - North S - South M - Meters E - East K - Kilometers W - West

Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
---	---

OPER #1 or PEDESTRIAN (Last, First, MI) Granahan Paul	OPER #2 or PEDESTRIAN (Last, First, MI) Sousa Jqao
---	--

ADDRESS (Street No & Name) 166 Meadow Court	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 53 Conrad Street 25B	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M
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OPER LICENSE NO	STATE	DATE OF BIRTH 02/04/59	OPER LICENSE NO 216451719	STATE CT	DATE OF BIRTH 09/24/32
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OWNER (Last, First, MI - Enter same, if owner is operator) Better Way	OWNER'S (Last, First, MI - Enter same, if owner is operator) Sousa Joao
---	---

ADDRESS (Street No & Name) Rubber Avenue	ADDRESS (Street No & Name) 53 Conrad Street
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door
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REGISTRATION NO DHA907	STATE CT	VEH YEAR & MAKE 05 CHRYSL 300	REGISTRATION NO 250GXW	STATE CT	VEH YEAR & MAKE 2002 SATUR SL2
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VEH ID NO (VIN) 2C3AJY3R75H589381	VEH ID NO (VIN) 1G8ZK527X2Z216598
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME <input checked="" type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> O - Driver <input type="checkbox"/> S - Side of Vehicle	<input checked="" type="checkbox"/> US DOT # <input type="checkbox"/> ICC, MC #	SOURCE of CARRIER NAME <input checked="" type="checkbox"/> SP - Shipping Papers/Trip Manifest <input type="checkbox"/> O - Driver <input type="checkbox"/> S - Side of Vehicle	<input checked="" type="checkbox"/> US DOT # <input type="checkbox"/> ICC, MC #
---	--	---	--

GROSS VEH WEIGHT Rating # <input checked="" type="checkbox"/>	HAZARDOUS MATERIAL PLACARD Required Y-N <input checked="" type="checkbox"/> 4 Digit# <input checked="" type="checkbox"/> Displayed Y-N <input checked="" type="checkbox"/> 1 Digit# <input checked="" type="checkbox"/>	GROSS VEH WEIGHT Rating # <input checked="" type="checkbox"/>	HAZARDOUS MATERIAL PLACARD Required Y-N <input checked="" type="checkbox"/> 4 Digit# <input checked="" type="checkbox"/> Displayed Y-N <input checked="" type="checkbox"/> 1 Digit# <input checked="" type="checkbox"/>
--	---	--	---

HAZARDOUS CARGO Released Y-N <input checked="" type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N <input checked="" type="checkbox"/>	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> V - Verbal Warning, N - None, A - Arrest, W - Written Warning
---	---	---	---

STATUTE or ORDINANCE NO(S) None	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S) Following to Close	SUBJ of ACTION <input checked="" type="checkbox"/> O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# UTCA Nation # CPP4191287	CPP1911287	AUTOMOBILE INS CO-NAME-POLICY# Trumbell Ins #	55PHJ95111135195
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PARTS of VEHICLE DAMAGED Back Bumper, Trunk	PARTS of VEHICLE DAMAGED Front Bumper
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO Sibby's Automotive	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes
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02^H
2^S
01^T
X^J
X^J
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X^K
X^K
X^V
W^O
X^X
X^X
X^X
X^X
X^{AA}
X^{AA}
X^{AA}
X^{AA}

R⁰⁹
A¹
B¹
C
D¹
E¹
F⁴
G²
H²
I²
J²¹
J²²
K²¹
K²¹
V²
W⁰⁸
X²
X²
X²
X²
X²¹
X²¹
X²¹
X²¹

70

ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q		
								1	2
1	1	C	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1		4	2	1	1
2	2	N	01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2		4	1	1	2
3									3
4									4
5									5
6									6
7									7

ALL INVOLVED PERSONS

FORM PR-1		PAGE # 2 of 2	POLICE CASE NO 11-3734
ACCIDENT DIAGRAM <i>* Diagram not to scale</i> 		INDICATE NORTH 	
= Traffic Light Rubber Ave			
DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)			
Traffic Unit # 1 Traveling <input checked="" type="checkbox"/> E on Rubber Ave		Traffic Unit # 2 Traveling <input checked="" type="checkbox"/> E on Rubber Ave	
<p>On 2/10/11 at approximately 14:52 hours, I was dispatched to Rubber Ave at Melbourne Court for a motor vehicle accident.</p> <p>Operator #1 stated he was traveling east on Rubber Ave. Operator #1 stated he stopped at the red light on Rubber Ave at Melbourne Court. Operator #1 stated when the light turned green he proceed through the light and the intersection. Operator #1 stated as he passed the intersection the vehicle in front of him stopped suddenly and Operator #1 then stopped. Operator #1 stated when he stopped, Operator #2's vehicle hit his vehicle on the back bumper.</p> <p>Operator #1 claimed neck and back pain. EMS was dispatched and attended to Operator #1. Operator #1 was then transported to Waterbury Hospital for further evaluation and treatment. Damages to Operator #1's vehicle was to the back bumper and trunk.</p> <p>Operator #2 stated he was traveling east on Rubber Ave at Melbourne Court. Operator #2 stated he stopped at the red light , and then procceded through the intersection at the green light and Operator #1's vehicle was in front of him. Operator #2 stated as they proceeded through the intersection, Operator #1's vehicle stopped quickly. Operator #2 stated he stepped on the brake pedal, but his foot slipped off and he hit the gas peddle and hit Operator #1's vehicle.</p> <p>Operator #2 claimed no injuries and refused medical attention. Damages to Operator #2's vehicle was to the front bumper and both front airbags were deployed.</p> <p>I am finding fault with Operator #2 for C.G.S 14-240 Following to Close. A verbal warning was given. No further action taken.</p>			
DAMAGE TO PROPERTY OF POLICE VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE		
	None		
	NAME and ADDRESS of PROPERTY OWNER		
	None		
DAMAGE TO PROPERTY OF POLICE VEHICLES	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE		
	None		
	NAME and ADDRESS of PROPERTY OWNER		
	None		
RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. Danielle Parady PL32	POLICE AGENCY ID Naugatuck Police	REPORT DATE 2/11/2011	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> D - Open <input type="checkbox"/> C - Closed
			SUPERVISOR Sgt. Bart Deeley S7

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude: _____
Time Longitude: _____

FOR DOT USE ONLY

DATE OF ACCIDENT Tue, Apr 12, 2011	MILITARY TIME 12:24	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 2	PAGE # 1 of 2	POLICE CASE NO 11-8979
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CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at Hoadley Street
----------------------------------	------------------------	--

IF NOT AT INTERSECTION: 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance: _____
 F - Feet
 T - Tenths of Mile
 M - Meters
 K - Kilometers

N - North
 S - South
 E - East
 W - West

Accident Occurred: On Private Property Parking Lot

02
3
31
/11
/12

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
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OPER #1 or PEDESTRIAN (Last, First, MI) Pinto Antonio	OPER #2 or PEDESTRIAN (Last, First, MI)
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ADDRESS (Street No & Name) 191 Gorman Street	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name)	PROPER LIC CLASS Y-N <input type="checkbox"/>
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> M	CITY or TOWN	STATE	ZIP	SEX M-F <input checked="" type="checkbox"/> M
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OPER LICENSE NO 011946172	STATE CT	DATE OF BIRTH 01/10/49	OPER LICENSE NO	STATE	DATE OF BIRTH
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OWNER (Last, First, MI - Enter same, if owner is operator) Pinto Antonio	OWNER'S (Last, First, MI - Enter same, if owner is operator)
--	--

ADDRESS (Street No & Name) 191 Gorman Street	ADDRESS (Street No & Name)
--	----------------------------

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Station	CITY or TOWN	STATE	ZIP	BODY TYPE Station
----------------------------------	--------------------	---------------------	-----------------------------	--------------	-------	-----	-----------------------------

REGISTRATION NO 494SWL	STATE CT	VEH YEAR & MAKE 2002 SUBARU Forester	REGISTRATION NO 373	STATE CT	VEH YEAR & MAKE
----------------------------------	--------------------	--	-------------------------------	--------------------	-----------------

VEH ID NO (VIN) JF1SF63562G724826	VEH ID NO (VIN)
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
--	--

SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input checked="" type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) N/A	SUBJ of ACTION <input checked="" type="checkbox"/> O-operator - C-Carrier <input type="checkbox"/> OW-Owner - P-Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION <input type="checkbox"/> O-operator - C-Carrier <input type="checkbox"/> OW-Owner - P-Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# Allstate 919391323	AUTOMOBILE INS CO-NAME-POLICY#
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PARTS of VEHICLE DAMAGED Rear Bumper	PARTS of VEHICLE DAMAGED
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VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No	VEHICLE TOWED TO N/A	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> No
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ALL INVOLVED PERSONS

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON			DOB	O	P	Q		
1	1	N	01	TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1			4	2	1	1	
2	2		01	TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2			9	4	1	2	
3	W	/	01	Zappone	Patricia	247 New Haven Rd., Prospect, CT	09/13/50	/	/	/	3
4	W	/	01	Shaker	Marisa	873 South St., Middlebury, CT	03/16/74	/	/	/	4
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6											6
7											7

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ACCIDENT DIAGRAM

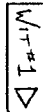
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AREA OF IMPACT

HOADLEY STREET



RUBBER AVENUE



VEH #2

VEH #2 X VEH #1

MELBOURNE ST

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Travelling E on Rubber Avenue

Traffic Unit # 2 Travelling E on Rubber Avenue

Operator #1 stated he was stopped East bound on Rubber Avenue at the intersection with Hoadley Street. Operator #1 stated he was in the right lane to go straight. Operator #1 stated his vehicle was struck from behind by Vehicle #2. Operator #1 stated his vehicle was pushed into the middle of the intersection. Operator #1 stated Vehicle #2 fled North on Hoadley Street. Operator #1 stated he moved his vehicle out of the intersection. Operator #1 stated he was not injured.

Witness #1 stated she was stopped South bound on Hoadley Street at the intersection with Rubber Avenue. Witness #1 stated she saw Vehicle #2 collide with the rear of Vehicle #1, pushing Vehicle #1 into the intersection. Witness #1 stated Vehicle #2 then fled North on Hoadley Street. Witness #1 stated Vehicle #2 illegally passed a vehicle as it fled up Hoadley Street.

Witness #2 stated she was traveling East on Rubber Avenue directly behind Vehicle #2. Witness #1 stated she saw Vehicle #2 collide with the rear of Vehicle #1, pushing Vehicle #1 into the intersection. Witness #2 stated she saw Vehicle #2 fail to stop and drive North onto Hoadley Street.

Officer: Upon my arrival I saw Vehicle #1 parked on the right side of the South bound lane of Rubber Avenue, East of Melbourne Street. I saw minor damage to the rear bumper of Vehicle #1. I did not see any debris in the roadway from the collision.

Based on witness statements, Vehicle #2 was found to be at fault for the collision. See incident report 11-8979 for details regarding the Evading Responsibility investigation.

-----End of Report-----

DAMAGE TO PROPERTY OR VEHICLES INVOLVED

1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE

NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of REPORTING OFFICER

Pt. Derek Vostinak PL27

POLICE AGENCY ID

Naugatuck Police

REPORT DATE

4/15/2011

CASE STATUS

C O - Open C - Closed

SUPERVISOR

Lt. Gregory Dean Lt4

[Handwritten signature]

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT

FORM PR-1 Rev. 01/01



GPS READINGS: Latitude:

Time Longitude:

FOR DOT USE ONLY

DATE OF ACCIDENT Fri July 29, 2011	MILITARY TIME 15:46	ACCIDENT SEVERITY Fatal <input type="checkbox"/> Injury <input type="checkbox"/> PDO <input checked="" type="checkbox"/>	VEHS INVOLVED # 3	PAGE # 1 of 4	POLICE CASE NO 11-18455
--	-------------------------------	---	-----------------------------	-------------------------	-----------------------------------

CITY or TOWN Naugatuck	TWN CODE 088	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street, Name or Route #) Rubber Avenue at
----------------------------------	------------------------	---

IF NOT AT INTERSECTION 2. Direction 3. Give nearest intersecting street, town line or mile marker of

1. Measure Distance **E** **T** **E** **F** - Feet
M - Meters **K** - Kilometers **S** - South **E** - East **W** - West

Accident Occurred: On Private Property Parking Lot

Hoadley Street

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> V V - Vehicle, P - Pedestrian, N - Non-contact Vehicle	TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> V V - Vehicle, P - Pedestrian, N - Non-contact Vehicle
--	--

OPER #1 or PEDESTRIAN (Last, First, MI) Lubanda Maryann	OPER #2 or PEDESTRIAN (Last, First, MI) Oconner Danielle
---	--

ADDRESS (Street No & Name) 39 Sharon Avenue	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y	ADDRESS (Street No & Name) 60 Mango Circle	PROPER LIC CLASS Y-N <input checked="" type="checkbox"/> Y
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CITY or TOWN Naugatuck	STATE CT	ZIP 06770	SEX M-F <input checked="" type="checkbox"/> F	CITY or TOWN Watertown	STATE CT	ZIP 06779	SEX M-F <input checked="" type="checkbox"/> F
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OPER LICENSE NO 157521898	STATE CT	DATE OF BIRTH 03/22/84	OPER LICENSE NO 118470651	STATE CT	DATE OF BIRTH 11/23/91
-------------------------------------	--------------------	----------------------------------	-------------------------------------	--------------------	----------------------------------

OWNER (Last, First, MI - Enter same, if owner is operator) Lubanda Maryann	OWNER'S (Last, First, MI - Enter same, if owner is operator) Rotella Sharon
--	---

ADDRESS (Street No & Name) 39 Sharon Avenue	ADDRESS (Street No & Name) 11 Vidich Lane
---	---

CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE 4 Door	CITY or TOWN Naugatuck	STATE CT	ZIP 06770	BODY TYPE Station
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REGISTRATION NO 308XWG	STATE CT	VEH YEAR & MAKE 1995 LEXUS ES300	REGISTRATION NO 185XDC	STATE CT	VEH YEAR & MAKE 2006 CHRYS PT CRUSIER
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VEH ID NO (VIN) JT8GK13T9S0123303	VEH ID NO (VIN) 3A4FY58B76T256860
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CARRIER	CARRIER
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CARRIER ADDRESS (Street, City or Town, State, Zip)	CARRIER ADDRESS (Street, City or Town, State, Zip)
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SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #	SOURCE of CARRIER NAME SP - Shipping Papers/Trip Manifest D - Driver S - Side of Vehicle	US DOT # ICC, MC #
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GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N	GROSS VEH WEIGHT Rating #	HAZARDOUS MATERIAL PLACARD Required Y-N Displayed Y-N
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HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning	HAZARDOUS CARGO Released Y-N	ENFORCEMENT ACTION TAKEN N - None, A - Arrest, W - Written Warning, V - Verbal Warning
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STATUTE or ORDINANCE NO(S) 14-240 (VW)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian	STATUTE or ORDINANCE NO(S)	SUBJ of ACTION O - Operator - C - Carrier OW - Owner - P - Pedestrian
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AUTOMOBILE INS CO-NAME-POLICY# Progressive 58083509-7	AUTOMOBILE INS CO-NAME-POLICY# Safeco K2022542
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PARTS of VEHICLE DAMAGED Front-End	PARTS of VEHICLE DAMAGED Front+Rear End
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VEHICLE TOWED TO Private Tow	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes	VEHICLE TOWED TO Sibby's Automotive	TOWED DUE TO DAMAGE Y-N <input checked="" type="checkbox"/> Yes
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NAME and ADDRESS of EACH INVOLVED PERSON

L	M	N	NAME and ADDRESS of EACH INVOLVED PERSON	DOB	O	P	Q
1			TRAFFIC UNIT #1 OPERATOR or PEDESTRIAN #1				1
2			TRAFFIC UNIT #2 OPERATOR or PEDESTRIAN #2				2

3	1	N	01	Lubanda Maryann	39 Sharon Ave. Naugatuck, Ct.	03/22/84	4	1	1	3
4	1	N	01	Gunthrop Jordan	39 Sharon Ave. Naugatuck, Ct.	03/22/84	5	2	1	4
5	2	N	01	Oconner Danielle	80 Mango Cir. Watertown, Ct.	11/23/91	4	1	1	5
6	2	N	01	Trushin Alex	627 Millville Ave. Naugatuck, Ct.	03/30/90	4	1	1	6
7	3	N	01	Swartz Ronald	4510 Burr Hollow Rd. Campbell, NY, 14821	08/31/61	4	2	1	7

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ALL INVOLVED PERSONS

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ALL INVOLVED PERSONS

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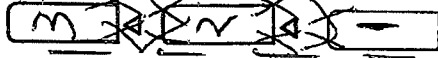
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ACCIDENT DIAGRAM

INDICATE NORTH



RUBBER AVE



751 RUBBER AVE

Academy St.

DIRECTION of TRAVEL of EACH TRAFFIC UNIT (N - North, S - South, E - East, W - West)

Traffic Unit # 1 Traveling E on Rubber Ave.

Traffic Unit # 2 Traveling E on Rubber Ave.

Operator of vehicle one said she was traveling in the east bound lane on Rubber Ave. and hit vehicle two in the rear bumper when the vehicle stopped suddenly. Operator of vehicle one said she was not injured and Juvenile passenger appeared to be fine.

Operator of vehicle two said she was traveling in the east bound lane on Rubber Ave. and slowed down for vehicle in front of her that had stopped suddenly. Operator of vehicle two said she was hit from behind and pushed into the vehicle in front of her. Operator of vehicle two said she was not injured. Passenger in vehicle two said he was not injured.

Operator of vehicle three said he was traveling in the east bound lane on Rubber Ave. and had to stop suddenly because the vehicle in front of him had slowed down to make a left hand turn into a Business on Rubber Ave. and he was hit from behind. Operator of vehicle three said he was not injured.

I observed no visible sign of anybody being injured, but observed that operator in vehicle one, and two were shaken up. EMS was dispatched and treated all parties, and all refused to be transported to Hospital for treatment and signed refusal to be treated.

I observed heavy damage on vehicle one, and two. I gave a verbal warning to the operator of vehicle one for following to close 14-240.

DAMAGE TO PROPERTY OR VEHICLES	1. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER
	2. DESCRIBE the NATURE and EXTENT of PROPERTY DAMAGE
	NAME and ADDRESS of PROPERTY OWNER

RANK and SIGNATURE of INVESTIGATING OFFICER Ptl. James Cegielski PL4	POLICE AGENCY ID Naugatuck Police	REPORT DATE 7/29/2011	CASE STATUS <input checked="" type="checkbox"/> C <input type="checkbox"/> O - Open <input type="checkbox"/> C - Closed	SUPERVISOR Sgt. Brian Newman S3
---	--------------------------------------	--------------------------	---	------------------------------------

PTCA for bike #4

Attachment E

DOT 2012 Correspondence



STATE OF CONNECTICUT
DEPARTMENT OF TRANSPORTATION

2800 BERLIN TURNPIKE, P.O. BOX 317546
NEWINGTON, CONNECTICUT 06131-7546
Phone: (860) 594-3189



March 1, 2012



Mr. Peter Dorpalen, Director
Council of Governments of the
Central Naugatuck Valley
60 North Main Street, Third Floor
Waterbury, CT 06702-1403

Dear Mr. Dorpalen:

Subject: Rubber Avenue at Hoadley Street and
Melbourne Street
Town of Naugatuck

The subject location was reviewed by the Department of Transportation's (Department) Division of Traffic Engineering and Division of Highway Design for inclusion in this year's Local Road Accident Reduction Program. The Town proposes to replace the existing traffic control signal with a new full-actuated traffic control signal with mast arms. The improvement also includes new concrete sidewalks with pedestrian ramps and new pavement markings. The existing intersection control is a span mounted pre-timed traffic signal. The proposed improvement at the intersection of Rubber Avenue at Hoadley Street and Melbourne Street in the Town of Naugatuck can be recommended for endorsement. There are however, a number of items the Town should consider.

The Town is proposing to use mast arms for the new design. This could be an issue based on the location of existing utility poles, combined with inadequate location for post installation that would provide for far side signal heads. Sidewalks, where they currently exist, are mostly bituminous concrete, and some areas of the intersection lack clearly defined sidewalks because they blend into both commercial and residential driveways. The intersection also lacks any compliance with the Americans with Disabilities Act (ADA), including sidewalk ramps, pedestrian push buttons, and sidewalk widths that would accommodate handicapped individuals. The construction of concrete sidewalks would also require some minor drainage modifications due to the location of a type "c-1" catch basin at the intersection.

The existing pavement is in poor condition and shows signs of distress. There are existing drainage structures within the intersections but they appear to be old and could use upgrading. The new traffic signal system would require installation of loop detectors within the existing pavement. Given the poor existing pavement conditions, the installation of loop detectors could be difficult. The Department would not support installing loop detectors and other signal equipment if the Town plans to mill and overlay the intersection in the foreseeable future.

The Town's cost estimate for the proposed improvement is approximately \$310,600. A cursory review of the Town's estimate shows that mobilization and maintenance and protection of traffic percentages are low and the incidental percentage is 5% higher than the Department's guidelines suggest. The cost for state review should be removed from the estimate because the cost is already included in the incidentals. Also, the proposed quantity of concrete sidewalk is very high and should be reduced. An estimate prepared by the Department's Highway Design Section indicates that the total cost of this improvement is more likely to be closer to \$425,600. A copy of the detailed estimate is enclosed. The Department's estimate is approximately \$115,000 more than the Town's estimate due to underestimating the cost of a new traffic signal and the omission of concrete curbing and bituminous concrete driveway reconstruction. The Department's \$425,600 total estimate includes \$315,300 for construction costs, \$31,500 (10 percent) for contingencies, and \$78,800 (25 percent) for incidental costs which includes \$31,500 (10 percent) for incidentals to construction by state forces.

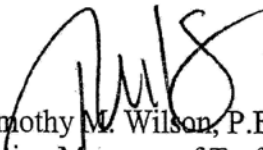
The projected cost of the proposed project is considerably more than the \$375,000 maximum currently allowed under the guidelines for participation in this program. To reduce costs, the Town could possibly decrease the amount of concrete sidewalk proposed and reset some of the existing concrete curbing instead of installing new concrete curbing. The Town should also evaluate the pavement structure to determine what improvements are necessary prior to installation of new traffic signal equipment.

Please advise the Department by March 30, 2012 if the Town would like to proceed with this improvement under the Local Road Accident Reduction Program. Once the Department is informed of the Town's intention to proceed with this improvement, the Department will prepare a Recommended Project Memorandum requesting funding for this project. The approval of funding will be subject to the availability of funds. Under the current program the Town would be responsible for all costs associated with the design of this project, any costs associated with the acquisition of rights-of-way, 10 percent of the contract costs up to \$375,000, and any construction costs exceeding the maximum funding level (\$375,000) of this program. In addition, the Town would be responsible for 10 percent of the cost for the review of plans and processing of the agreement (Preliminary Engineering) by state forces, up to a maximum of \$2,500.

Please be advised that in the 2012 solicitation for local road safety projects the funding level will be increased to \$500,000 from the current \$375,000. The Town has the option to resubmit this project under the 2012 solicitation. The Town would need to submit updated accident records, cost estimates, etc. The Department would conduct the Benefit/Cost (B/C) evaluation of this project along with the other submitted projects. The projects that appear to be cost effective will be entered onto a "Local Road Hazard Elimination List" in priority order of B/C ratio. The current B/C ratio of this project is 1.15, based on a construction cost of \$425,600. There is no guarantee that, with such a low B/C ratio, this project would be selected for funding in the future if projects with higher B/C ratios are submitted.

You may contact Mr. Jasvinder S. Florah, at (860) 594-2763, if you have questions concerning this matter.

Very truly yours,



Timothy M. Wilson, P.E.
Acting Manager of Traffic Engineering
Bureau of Engineering and Construction

Enclosure



STATE OF CONNECTICUT

DEPARTMENT OF TRANSPORTATION

2800 BERLIN TURNPIKE, P.O. BOX 317546
NEWINGTON, CONNECTICUT 06131-7546



Phone: (860) 594-2788

April 6, 2015

Mr. Richard T. Dunne
Executive Director
Naugatuck Valley Council of Governments
49 Leavenworth Street, Suite 303
Waterbury, CT 06702

Dear Mr. Dunne:

Subject: Rubber Avenue at North Hoadley Street and Melbourne Street - Town of Naugatuck
County Road - Town of Wolcott

The subject locations were reviewed by the Department of Transportation's (Department) Division of Traffic Engineering and Division of Highway Design for inclusion in this year's Local Road Accident Reduction Program.

The proposed improvement at the intersection of Rubber Avenue at North Hoadley Street and Melbourne Street in the town of Naugatuck qualifies and has been selected for funding. The Town included the original estimate (\$425,631) by the Department as submitted under the 2011-2012 application. The estimate was reviewed and updated for inflation costs to 2016 costs. The Department's revised estimate is \$618,046.

The total cost of \$618,046 includes \$457,812 for construction, \$45,781 (10%) for contingencies, and \$114,453 (25%) for incidentals. The incidental costs include \$45,781 (10%) for incidentals to construction by state forces.

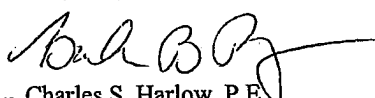
The Town is responsible for all costs associated with the design of this improvement, any costs associated with the acquisition of rights-of-way, and 10 percent of the total contract cost.

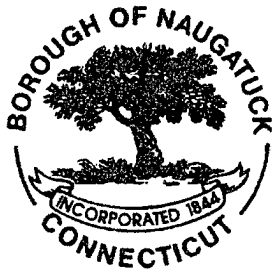
The Department will prepare a Recommended Project Memorandum requesting funding for this improvement. The approval of funding will be subject to the availability of funds. The Department's Division of Highway Design, Local Roads Unit will administer the project. Questions with regard to estimated project costs, design, agreements, submittal of plans, etc., should be directed to Mr. Hugh H. Hayward, Principal Engineer, Local Road Unit, at (860) 594-3219.

The proposed improvement on County Road in the town of Wolcott will not be recommended for endorsement due to a b/c ratio of less than 1.00. The Town provided a summary listing of 14 crashes. Out of these 14 crashes only 5 were within the project limits and involved property damage only crashes. A b/c ratio of 0.25 was computed for this improvement. Therefore, this proposed improvement will not be recommended for funding under the Local Road Accident Reduction Program.

You may contact Mr. Jasvinder Florah, at (860) 594-2763, if you have any further questions concerning this matter.

Very truly yours,


Charles S. Harlow, P.E.
Manager of Traffic Engineering
Bureau of Engineering and Construction



BOROUGH OF NAUGATUCK

ENGINEERING DEPARTMENT

229 CHURCH STREET
NAUGATUCK, CT 06770-4145
203 / 720-7006
FAX 203 / 720-7041

Design Statement
For
Intersection Improvements for
The Hoadley Street/Melbourne Street
Intersection with Rubber Avenue
Naugatuck, Connecticut

The Borough of Naugatuck has applied for a grant from the State of Connecticut under the Local Road Accident Prevention Program – 2014 for the combined Hoadley Street/Melbourne Street intersection with Rubber Avenue. This combined intersection presents a unique and complex traffic flow situation for Rubber Avenue and the intersecting streets of Hoadley Street and Melbourne Street.

The goal of the project is to provide upgraded signal equipment and associated traffic improvements to provide a safe environment for pedestrians, prevention of vehicular accidents to the extent possible, improved traffic flow and optimum access for bordering properties

Due to the intersection offset of Hoadley Street and Melbourne Street with Rubber Avenue and an included bridge over Long Meadow Pond Brook, the combined intersection requires additional signal improvements to enhance traffic safety and circulation through the intersection.

Signal improvements to be incorporated in the project include:

- Dilemma zone detection for the main road Rubber Avenue;
- Emergency vehicle pre-emption for Rubber Avenue;
- New mast arm assemblies and 12" signal heads for increased visibility;
- Traffic signal back-plates for increased visibility;
- Traffic loops for signal control;
- Pedestrian signals including push button controls, countdown indicators and painted crosswalks;
- New sidewalks with ADA compliant ramps;
- Controlled vehicle entrance aprons for existing properties adjacent to the project.

**Kickoff Meeting
Local Road Accident Reduction Program (LRARP)
Town of Naugatuck
Report of Meeting**

Date: August 3, 2015

Time: 10:00 am

Place: Town Hall Naugatuck 4th Floor

Attendees: Tony Servidone - CTDOT
Jim Stewart - Town
Wayne Zirolli - Town
Town Police Officer - Town

Transactions & Determinations

Introductions were made and a general overview of the LRARP. Including but not limited to the following.

The proposed project is the traffic signal reconstruction Rubber Ave at N. Hoadley and Melbourne Streets include sidewalk construction and crosswalk improvements

Since the LRARP program is 90% federally funded, awarded projects must satisfy Federal Highway Administration (FHWA) requirements for reimbursement.

The project award of \$618,046, of which 457,812 is for construction as reviewed on the Award letter.

The Town is planning to hire a Consultant Engineer for Design (CE). Design cost is 100% Town responsibility. Town understands that if this CE is also to perform construction inspection, that they must be selected through a QBS process.

Town will hold a public involvement meeting after PD. Town will follow DOT informational guidelines

The Town will contract out the construction phase of project. Construction will be awarded by competitive bid.

The Town of Naugatuck will be responsible for advertising project.

The Town is most likely to contract out for construction inspection.

Private utilities will not be compensated for any work generated by the project.

There will be a screening for a DBE%

There may be an area which requires ROW for traffic signal cabinet on one corner. Town aware they are responsible to acquire any ROW.

Action item: Send QBS guidelines to Town.
Send pub. Info guidelines to Town.

STP-HAZARD ELIMINATION PROGRAM

The following outline is for projects with Federal participation under the STP-Hazard Elimination component of the Surface Transportation Program. These guidelines provide a brief overview of the program and its requirements.

1. PROJECT DESIGN

- A. ENVIRONMENTAL DOCUMENTS: The Department's Environmental Planning Division will initially review the proposed project for any possible permit requirements. The Municipality is responsible for applying for and obtaining all required permits.
- B. DESIGN STANDARDS: Municipalities may perform the design with in-house staff or contract a consultant to prepare the required plans, specifications, and estimates. Geometric design standards for roadways shall be in accordance with ConnDOT Highway Design Manual - Section 3-2.03 SPOT IMPROVEMENTS (NON FREEWAYS). The Manual of Uniform Traffic Control Devices is to be followed in the design of signs, signals, markings, and devices placed on or adjacent to a street. The Municipality has the option of using or referring to the Department's Form 816A or use Municipal specifications.
- The Municipality shall prepare a complete design, including, but not limited to, plans, specifications, quantities, and cost estimate (PS&E). The Municipality will be required to make, at a minimum, a preliminary design submission, semi-final design submission and final design submission for the Department's review, comments, and approval. The final PS&E must be completed within one year from the date the Municipality is notified to proceed with the project design.
- C. UTILITIES: The Municipality is responsible for notifying the utility companies of the need for readjustments or relocation of any utility as necessary. Preliminary Design Plans should be forwarded to the utility companies as soon as they are developed. A coordination meeting should be held with the utility companies to review the project schedule.
- D. PUBLIC INVOLVEMENT PROGRAM: The Municipality is required to conduct a public involvement program to ensure the public is aware of the proposed project and has an opportunity to express its view. At a minimum, the Municipality should hold a public informational meeting. (Copy of Public Involvement Program Guidelines is attached)
- E. RIGHTS OF WAY: The rights of way process should begin early in the project design to allow for sufficient time to acquire the necessary rights/properties by the advertising date. Close coordination with the Department's Office of Rights-of-Way is expected.

2. PROJECT SCHEDULE

It is imperative that the project schedule be adhered to. The Municipality shall provide written notification of any problems which may affect the schedule. Unjustified delays in meeting the schedule may result in cancellation of the project by the State.

3. PROJECT CONSTRUCTION

The Municipality is responsible for the construction phase

A. Contract Awarded by Competitive Bidding

The Municipality shall advertise for the project construction, award a contract, and provide inspection for the construction. The Department will formally authorize the Municipality to advertise for construction. The Municipality will be required to advertise and conduct bidding process in such a way as to ensure an opportunity for free, open, competitive bid proposals. The "Advertising Procedures for Construction Contracts Administered by Municipalities" is to be followed. The Department will formally authorize the Municipality to proceed with construction. The Municipality will be required to follow established Department construction management and record keeping practices.

B. Force Account Construction

The term force account shall mean the direct performance of highway construction work by a municipality by use of labor, equipment, materials, and supplies furnished by the municipality and used under the municipality's direct control.

When a municipality desires that construction work be undertaken by force account, it shall submit a request to the State identifying the kind of work to be performed; the estimated costs (**consisting of labor, equipment and materials**), the estimated Federal funds to be provided, and the reason or reasons that force account for such project is considered cost effective. (The term cost effective shall mean the efficient use of labor, equipment, materials and supplies to assure the lowest overall cost). Also, the Municipality must be so staffed and equipped as to perform such work satisfactorily and cost effectively.

The State will notify the municipality in writing of his/her determination.

It may be found cost effective for a municipality to undertake a federally financed highway construction project by force account when a situation exists in which the rights or responsibilities of the community at large are so affected as to require some special course of action, including situations where there is a lack of bids or the

bids received are unreasonable.

Note: The construction phase will be under the oversight of the Department's district Office. District personnel will visit the project site as often as necessary to review the construction progress and record keeping.

Qualifications of municipal personnel responsible for construction administration and inspection must be submitted to the Department for review and approval during the final design phase. District reviews qualifications.

4. PROGRAM FINANCING

A. PARTICIPATION RATIO:

- Preliminary Engineering by Municipality:
100% Municipal Funds
- Preliminary Engineering Services by State:
90% Federal, 10% Municipal funds
- Rights-of-Way: 100% Municipal funds
- Construction: 90% Federal, 10% Municipal funds
- Incidentals to construction by Municipality:
90% Federal, 10% Municipal funds
- Incidentals to construction by State:
90% Federal, 10% Municipal funds

Doing away with this. State will cover \$25K

~~Up to a max of \$2,500.00~~

Revise to just "soft" cap now

~~Currently up to \$500k "soft" cap~~

B. SPENDING/RATIO CAP:

Construction expenditures which exceed the project's funding level established by the program are determined to be non-participating and shall be funded 100% by the Municipality.

The combined expenditures for Incidentals which exceed 15% of the actual construction costs shall be funded 100% by the Municipality. N/A

GUIDE FOR THE DEVELOPMENT OF DESIGN PLANS

The intent of this document is to be a guide to the Municipalities for the development of Project Design Plans under the STP-Hazard Elimination Program.

A minimum of three design submissions are required for the Department's review: Preliminary Design, Semi-final Design, and Final Design. The Department will forward the review comments to the Municipality. The Municipality shall submit to the Department a resolution of all review comments prior to the next design submission. This will be done by indicating which comments have been incorporated into the design and which ones have not. Any comment that is not incorporated must be justified.

If the Municipality desires, a meeting can be held at the Department to review the comments.

PRELIMINARY DESIGN STAGE

The preliminary design submission shall consist of the following material:

(Number of copies required to be coordinated with the DOT Project Engineer)

1. Prints of all plans, profiles and typical sections
2. Hydraulics Report (if applicable)
3. Preliminary Cost Estimate
4. Preliminary Design Report

The information to be shown on the design plans, profiles, and typical sections are:

PLANS

1. Beginning and end of project (project limits)
2. Horizontal curvature - radii, PC's, PT's
3. Titles of all roadways, rivers and streams
4. Location of wetlands, streams, navigable waterways, etc.
5. All existing utilities
6. Any known historic areas

7. Locally sensitive areas
8. Open space
9. Special drainage provisions, location of sedimentation pools and major culverts
10. Existing and proposed drainage structures
11. Approximate slope limits
12. Lane arrangement on all roadways and legs of all intersections
13. Non-access lines, street lines, taking lines, property lines
14. Traffic control (existing and proposed)
15. Intersection sight distance and restrictive horizontal sight distance
16. Guide railing
17. Sidewalks and ramps
18. Stationing
19. Structures

PROFILES

1. Beginning and end of project
2. Vertical curvature - PVC, PVT, LVC
3. Percent Grade
4. Sight Distance
5. Existing ground line
6. Existing and proposed drainage structures
7. Stationing

TYPICAL SECTIONS

1. Number of lanes
2. Lane width, shoulder width, median width

3. Superelevation
4. Guide railing
5. Cross slope
6. Pavement depth, pavement composition
7. Curbing
8. Sideslopes
9. Sidewalks

The information to be contained in the preliminary design report is:

1. General description of the project - including roadway classification
2. Design Speed - maximum speed taking into account all elements including intersectional sight distance and sight line obstructions such as rail, fence, buildings, etc. The designer shall state that the stipulated design speed meets all applicable criteria.
3. Design traffic volume
4. Design standards used for project
5. List existing and proposed values for:
 - a. grade
 - b. superelevation
 - c. stopping sight distance
 - e. lane width
 - f. shoulder width
 - g. horizontal alignment
 - h. vertical alignment
6. Summarize Rights of Way impacts (property impacts, zoning, future development), Wetland impacts, Utility impacts
7. Drainage calculations
8. Justification for any proposed design which does not conform to standards.
9. Construction cost estimate

SEMI-FINAL DESIGN STAGE

The Town should not proceed with the Semi-final design until all the Department's Preliminary Design comments have been resolved. The Semi-final submission shall consist of the following material:

(Number of copies required to be coordinated with the DOT Project Engineer)

1. Plans - consisting of:
 - a. Title Sheet
 - b. Detailed Estimate Sheet
 - c. Typical Sections
 - d. Plan and Profile
 - e. Drainage Facilities
 - f. Traffic Control Plan
 - g. Standard Plans and Special Details
 - h. Cross Sections
2. Cost Estimate
3. Specifications and Special Provisions
4. Status of Required Permits and Rights of Way acquisition for the project.

FINAL DESIGN STAGE

The Final Design plans should incorporate the Department's comments from the semi-final submission.

(Number of copies required to be coordinated with the DOT Project Engineer)

The Final submission shall consist of:

1. Final Plans
2. Specifications and Special Provisions
3. Final Cost Estimate
4. Copies of all required permits
5. Copies of all property maps and documentation showing Rights of Way have been acquired.

After the Department's review of the Final Submission, the Department will inform the Municipality of any additional comments. The Municipality shall not advertise the project until a written authorization to do so is issued by the Department.

FEDERAL-AID HIGHWAY SAFETY IMPROVEMENT PROGRAM

Local Road Accident Reduction Program

In 1985 ConnDOT implemented an "Off System" Local Road Accident Reduction Program in accordance with revisions made to the Hazard Elimination Program in the 1982 Surface Transportation Act. As the title suggests, improvements funded under this program had to address problems on roadways off the federal highway system. The introduction of the Intermodal Surface Transportation Efficiency Act (ISTEA) of 1991 brought major changes to the federal highway system. Under ISTEA, the term "Off Systems" was dropped from the name of the program and the components of the program were revised. The implementation of the Transportation Equity Act for the 21st Century (TEA-21) initiated additional changes to allow the use of Federal safety funds on any public roadway. The Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU; Public Act 109-59) of 2005 established a new Highway Safety Improvement Program that was structured to make significant progress in reducing highway fatalities and serious injuries. States are required to develop Strategic Highway Safety Plans (SHSP) that involve a comprehensive, data driven approach to highway safety. As part of Connecticut's SHSP, the reduction of roadway departure accidents was established as an emphasis area.

The addition of town roads to this program introduced new jurisdictions that include Regional Planning Agencies (RPA) as well as cities and towns. Local officials and RPA's should be aware of the extensive analyses that ConnDOT requires of itself and will require of those submitting projects to ConnDOT. Participants in the process will be made aware that improvements made under this program will be limited to low-cost improvements that can be expected to eliminate or reduce the severity of a hazardous location or will address lane departure accidents on a systematic basis.

It will be the responsibility of the town and/or Regional Planning Agency to identify "local road high frequency accident locations" or roadway sections exhibiting significant lane

departure accident potential and recommend appropriate countermeasures for improvement. ConnDOT will have the responsibility of implementing the projects and administering the program to the extent funds are available. The following outlines the Planning, Implementation and Evaluation Components of the Program:

Planning Component

I. Traffic Records

The Department of Transportation has a computer record for injury and fatal accidents on town roads. The accidents are referenced to local roads by mileage and street intersections. That referencing, permits the accident location to be defined as either at a particular intersection or between two specific and adjacent intersections. Numerous characteristics of an accident (e.g. time of day, weather conditions, etc.) are made part of an accident's record. This information will be made available to local authorities on a town-wide basis (upon request) to assist them in identifying problem areas. This data can be grouped by location and identified by segments.

Several communities maintain manual or computer accident record systems. ConnDOT maintains Average Daily Traffic (ADT) computer files for some, but not all, town roads. Therefore, statistical reports involving the intersection, roadway characteristics, traffic volume and accidents (accident rates, exposure information) are available for State highways, but not town roads. ADT data that is available for various town roads can be obtained by contacting the Department's Office of Inventory, Planning and Data.

II. Identify "Problem" Locations

As previously noted, the town and/or RPA will have the responsibility of identifying "local road high frequency accident locations" or roadways exhibiting significant lane departure accident potential.

One goal of an identification process is to take an extensive mass of data and efficiently sort through it to obtain a list of locations or roadway sections that appear to have an abnormal accident history. The process utilized should identify promising candidates which would benefit the most from funds spent on improvements.

The most common techniques used are based upon:

1. Accident Number - locations with more than a predetermined number of accidents are classified as "high accident" locations.
2. Accident Severity - same as above, but fatal and injury accidents are given greater weight.
3. Accident Rate - accident numbers are divided by vehicle exposure (distance traveled and amount of traffic).
4. Number Rate - a combination of the number and rate techniques.
5. Number Quality Control - same as number technique but requires the number to be significantly above average.
6. Rate Quality Control - same as accident rate technique, but requires the rate to be significantly above average.

In addition, hazardous elements with accident potential such as fixed objects in or near the travel way, or curves experiencing run-off-the-road accidents, can be similarly identified.

It is recognized that the selection of an identification method depends upon the data base available, the statistical reports available, and skill level of the analyst. Note that this is merely a preliminary sort process and yields a list of candidate locations to be studied further. The fact that a location is included or excluded from the list does not necessarily mean it is hazardous or not. The next step more clearly defines the nature and extent of an accident problem, if any, at a given location.

construction costs, annual maintenance and operations costs), positive impacts, negative impacts and the service life of the improvement. It is important that these facets be realistically projected to avoid overly optimistic forecasts that could lead to the expenditure of resources and the advancement of some proposals that would ultimately not be approved for funding.

V. Select "Best" Solution

After weighing the facts assembled in the previous step, one alternative should be selected as the "best" solution; a solution that seems to be well worth the apparent cost. In some instances, all the potential solutions will appear to have a high costs and/or negative impact and the final determination may be that a reasonable solution is not feasible. The relative merit of a selected scheme is measured in greater depth during the succeeding step. The RPA and/or Town's Analyst must assess the cost of the proposal. Courses of action that result in high costs for paper work processing, in comparison to work accomplished, should be avoided. In the case of systematic improvements targeted to address roadway sections with significant lane departure accident potential, strategies should be uniformly applied over the entire study section. Some systematic countermeasures to consider include:

1. Improving curve signing and/or delineation.
2. Updating guide rail installations in areas of curvature to NCHRP 350 standards.
3. Adding pavement markings to previously unmarked roadways.
4. Increasing clear zones.

The Local Road Accident Reduction Program is intended to fund low to moderate cost improvements that will address spot hazards as well as roadside elements that have lane departure accident potential. In order that the limited funds available can be used efficiently on a statewide basis, high cost projects with low benefits in comparison to costs and should be funded through other programs.

the cost of the construction phase. A copy of all accident data should be retained by the town or Regional Planning Agency for future use during the Evaluation Component of the project.

Implementation Component

I. Priority Listing and Project Selection

Once the comprehensive reports are received by the Division of Traffic Engineering, the implementation component of the program will be jointly administered by Traffic Engineering and the Division of Consultant Design.

The reports will be reviewed for accuracy and completeness and a "cost effective" evaluation will be performed by the Division of Traffic Engineering. The economic analysis will employ the benefit/cost (B/C) procedure. There are a number of techniques that enable a comparison of project costs to project benefits. In order that any given group of projects may be compared to each other, one technique will be used for all projects. Anticipated project benefits will be quantified and the anticipated benefits compared to the projected costs.

Projects with high costs compared to benefits may be considered ineffective from a safety point of view and would then be returned to the originator for reconsideration of scope and source of funding. Projects that appear to be cost effective will be entered onto a "Local Road-Hazard Elimination List" in priority order of B/C ratio. Projects will be drawn from this list and initiated to the extent that funding is available within the Highway Safety Improvement Program.

II. Project Design and Construction

Established Department procedures, as outlined in our HES approved components, will be utilized for implementing the selected projects. A detailed description of each activity is contained in the Local Road Accident Reduction Program Component Flow Chart and Activity

Assignment and the responsibilities of each office are noted. However, the following is a brief narrative of those activities:

The Division of Traffic Engineering will select the projects for implementation and prepare the necessary Recommended Project Memorandum (RPM) for construction. The Division of Consultant Design will then administer the project once it has been initiated. All costs associated with design and rights of way will be the responsibility of the town or city. The Division of Consultant Design will initiate the necessary agreement(s), act as liaison with the town and the Division of Traffic Engineering and other affected Department units, arrange for Plans, Specifications & Estimates (PS&E) approval and ensure that the Department's Capital Project Financing Office obtains authorization for construction from the Federal Highway Administration (FHWA).

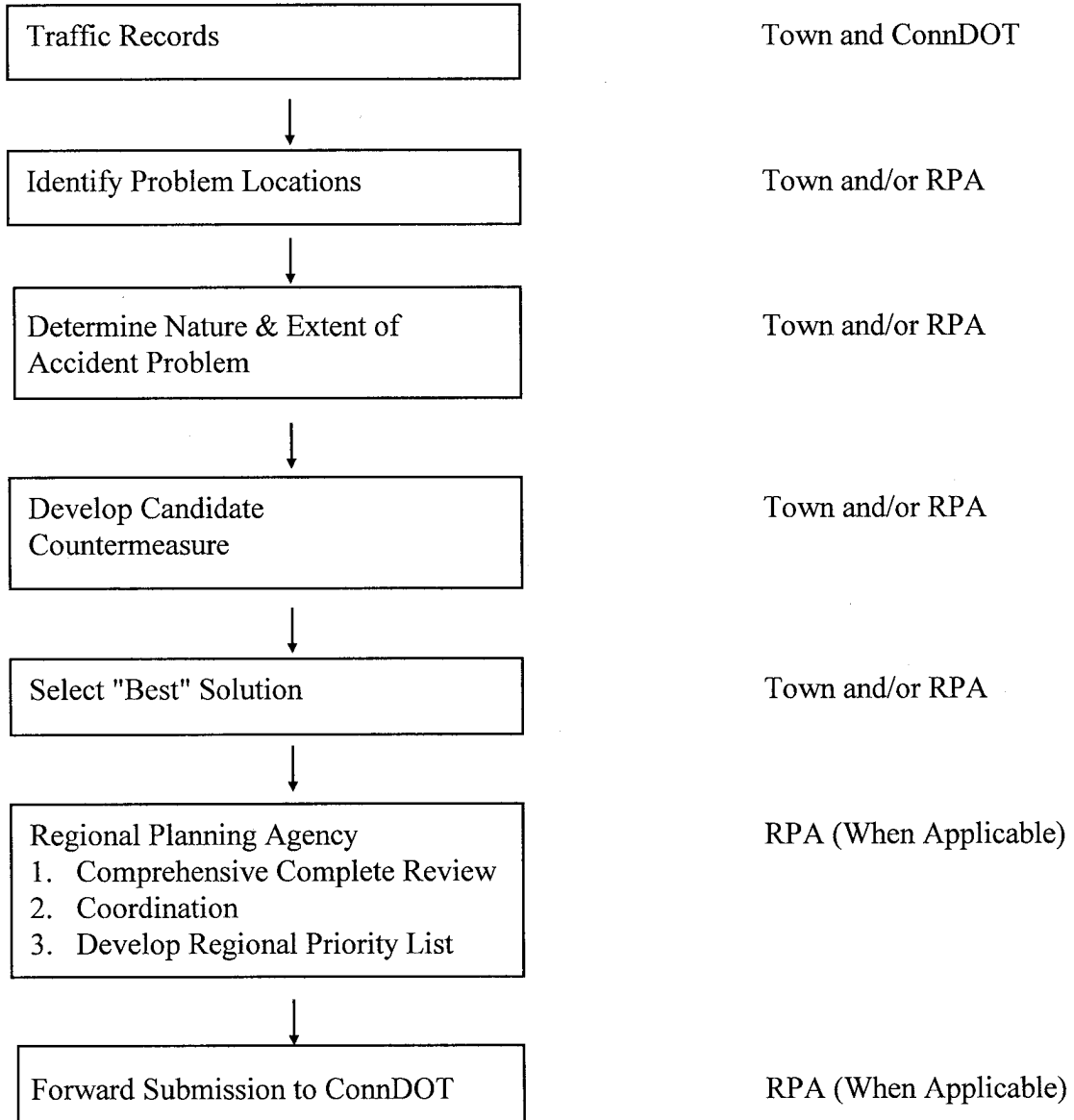
The town will have the option of constructing the project with its own town forces or advertise the construction phase through its own advertising procedures in conformance with FHWA regulations. The construction phase of the project will be jointly administered by the Division of Consultant Design and the Office of Construction, who will utilize other Department offices as required. The involvement by each office will depend largely on the method of construction the town chooses to pursue. Upon completion of construction, the project will be closed out by the appropriate administering office and the Division of Traffic Engineering will be advised of construction completion.

Evaluation Component

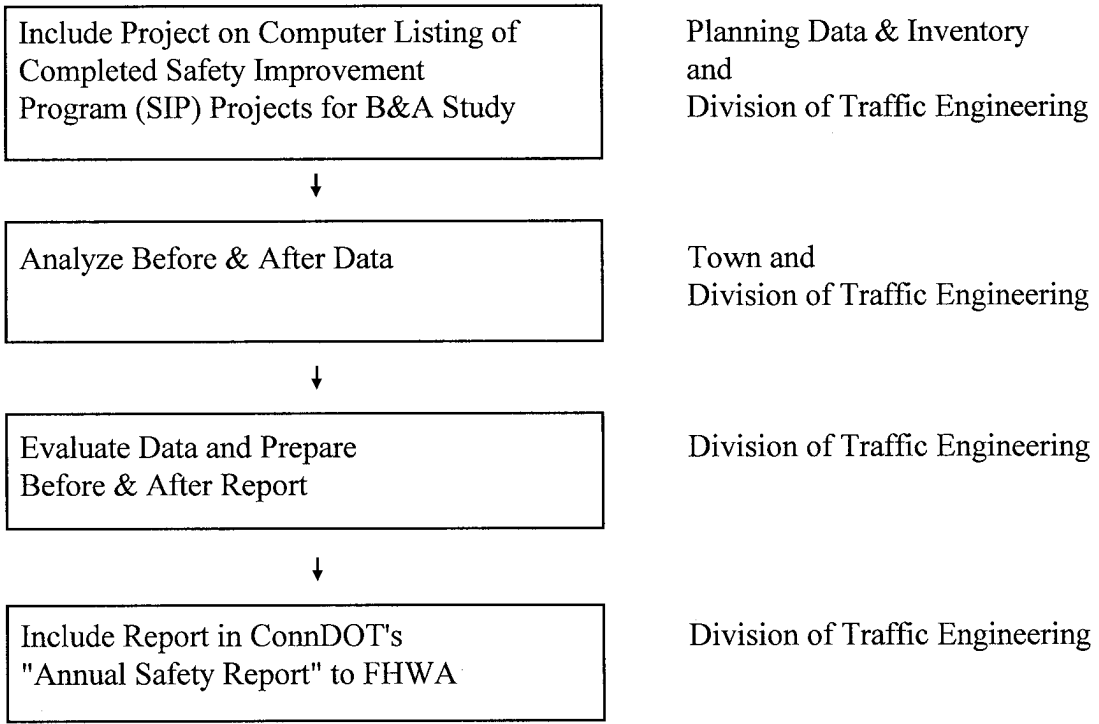
Projects implemented under this program are added to ConnDOT's computer index file of safety improvement projects. Additional information is obtained and added to this index file so that when the project is completed and two years of "after" accident data becomes available, a statistical report can be prepared. All "before and after" evaluations and reports will be accomplished by the Division of Traffic Engineering. The Department's existing computer program will be utilized to evaluate a town road project. Accident data will not be adjusted for

LOCAL ROAD ACCIDENT REDUCTION PROGRAM
COMPONENT FLOW CHART AND ACTIVITY ASSIGNMENT

PLANNING COMPONENT



EVALUATION COMPONENT



**CONSULTANT SELECTION, NEGOTIATION AND CONTRACT MONITORING
PROCEDURES
FOR MUNICIPALLY-ADMINISTERED PROJECTS
Revised December 2011**

The Qualifications Based Selection (“QBS”) process is intended to promote open competition by advertising, ranking, selecting, and negotiating contracts based on demonstrated competence and qualifications for the type of engineering, design-related and construction inspection services being procured by the town or city (“Municipality”) for a project administered by the Municipality in accordance with an agreement with the State of Connecticut Department of Transportation (“Department”).

The QBS process to be used by the Municipality consists of the following steps:

1. Solicitation

The Municipality shall solicit, in conformance with federal law and regulations, including but not limited to, 40 U.S.C. § 1101-1104 (“Brooks Act”), 23 U.S.C. § 112, and 23 C.F.R. part 172, the qualifications of prospective consultants to perform services on a Municipally-administered project (“Project”), using at least one of the following methods:

- i. **Publication:** The Municipality shall prepare a Legal Notice by customizing only the indicated fields on the form attached hereto (entitled “Legal Notice Template”) and shall have the Legal Notice published in at least one (1) newspaper having substantial Connecticut circulation and at least one (1) trade publication, professional magazine or newsletter. When possible, the Legal Notice shall also be posted on the Municipality’s website. With respect to any other modifications the Municipality makes to the Legal Notice Template, the Municipality must obtain prior approval from the Department.
- ii. **Publication and Direct Notification:** The Municipality shall prepare a Legal Notice by customizing only the indicated fields on the form attached hereto (entitled “Legal Notice Template”) and shall insert the Legal Notice in at least one (1) newspaper having substantial Connecticut circulation. When possible, the Legal Notice shall also be posted on the Municipality’s website. **In addition**, the Municipality shall prepare a Notification Letter by customizing only the indicated fields on the form attached hereto (entitled “Notification for Letter of Interest Template”) and shall mail the Notification Letter to consulting firms prequalified by the Department. The list of prequalified firms is prepared annually by the Department and available from the Department’s website at www.ct.gov/dot. The Municipality must mail the Notification Letter to ALL prequalified consultant firms listed under the category of services most appropriate for the Project. With respect to any other modifications the Municipality makes to the Legal Notice Template and Notification Letter Template, the Municipality must obtain prior approval from the Department.

The Municipality shall obtain approval of its selected method of solicitation from the Department. Prior to publishing the Legal Notice and mailing the Notification Letter (as applicable), the Municipality shall obtain approval of those documents from the Department.

Each Project shall be reviewed by the Department's Screening Committee which assigns the appropriate Disadvantaged Business Enterprise (DBE) goal, Small Business Enterprise (SBE) goal or Small Business Participation Pilot Program (SBPPP) goal. The Municipality shall include the goal assigned for the Project in the Legal Notice and the Notification Letters, as applicable.

The deadline for prospective consultants or consultant firms to submit the requested information in response to the Legal Notice or Notification Letter shall be a minimum of thirty (30) days after the publication date of the Legal Notice or the postmark date of the Notification Letter, as applicable. This deadline should be noted in the Legal Notice or the Notification Letter, as applicable.

Solicitation Process – Actions and Approvals Summary:

- The Municipality selects a solicitation method
- The Department approves the solicitation method
- The Municipality prepares draft Legal Notice and/or Notification Letter
- The Department reviews and approves draft Legal Notice and/or Notification Letter prior to publication/mailing by Municipality

2. Selection

The Municipality shall establish a Consultant Selection Panel ("Panel") having three (3) or four (4) members, one of which must be designated Chairperson by the Municipality. All members of the Panel shall be Municipal officials or employees. At least one (1) member of the Panel shall be the Town/City Engineer, the Director of Public Works or other Municipal official or employee with considerable engineering, technical or other relevant specialized experience that possesses substantial knowledge about the Project. The member of the Panel designated as the Chairperson shall be the individual authorized to sign on behalf of the Municipality the agreement with the Department with respect to its administration of the Project and the agreement with the consultant for performance of services for the Project, or his/her designated representative. The names and titles of Panel members shall be provided to the Department for approval prior to the first official meeting of the Panel.

The Panel shall give fair and impartial consideration to all responses received within the specified time period from prospective consultants. The Municipality must confirm that the responding consultants are registered with the Secretary of the State of Connecticut, the State of Connecticut Board of Examiners for Professional Engineers and Land Surveyors, and any other applicable State of Connecticut licensing board.

Using the attached "Letter of Interest Rating Form" and "Letter of Interest Rating Summary Form" as samples, the Municipality shall develop individual and summary Letter of

Interest Rating Forms to be approved by the Department. Using the approved individual Letter of Interest Rating Form, each Panel member shall independently rate all consultant firms that have responded in accordance with the requirements advertised. The total score from each Panel member for each consultant firm evaluated shall be entered on the approved Letter of Interest Summary Form. The completed summary and individual Letter of Interest Rating Forms are then furnished to the Chairperson, who shall review and establish the five (5) top-ranked firms (the “short list”). The Panel shall request that each of those five (5) firms on the short list attend a personal interview with the Panel. All remaining firms shall be notified that they have not been selected for a personal interview. If five (5) or less consultant firms submit responses, the Panel shall interview all firms that have responded in accordance with the requirements advertised. The Municipality must receive approval of its short list from the Department prior to notifying firms and the scheduling of interviews.

Using the attached “Interview Rating Form” and “Interview Rating Summary Form” as samples, the Municipality shall develop individual and summary Interview Rating Forms and a list of proposed interview questions to be approved by the Department prior to scheduling interviews. The interview questions and related selection materials shall NOT be given out to prospective consultant firms or other outside parties in advance of the interviews.

During (or immediately following) each interview, each Panel member shall independently evaluate and rate each consultant firm using the approved individual Interview Rating Form. Subsequent to the completion of each consultant firm’s interview, the Panel members may discuss their observations, and each individual Panel member may enter and adjust their rating only on their own individual Interview Rating Form based on these discussions.

The total score from each Panel member for each consultant firm interviewed shall be entered on the approved Interview Rating Summary Form by one member of the Panel. The completed summary and all individual Interview Rating Forms are then furnished to the Chairperson. The Chairperson shall make the final selection from the list of all interviewed consultant firms submitted by the Panel. In the process of making the final selection of the most qualified consultant for a specific Project, the Chairperson shall utilize the evaluation criteria set forth in the Interview Rating Form. The Chairperson may request additional information from other sources or individuals that he or she deems appropriate (e.g., the Chairperson may contact references of the consultant firms) to assist in the final selection. All additional information requested and received shall be documented by the Chairperson. Should the Chairperson select a firm other than the top-rated firm following the interviews, the rationale for his/her selection shall be fully documented and should not violate the QBS requirements.

The Municipality shall not request, accept or consider any information relative to fees, costs, pay rates, etc. from any consultant firm or give preference to locally-based consultant firms in the evaluation, ranking, interview or selection of any consultant firm.

Once the Municipality has made its final selection, all of the interview rating materials along with any additional information reviewed by the Municipality for all of the interviewed firms shall be submitted to the Department for review. The Municipality must receive written

approval of its final selection from the Department prior to notifying the selected firm, the scheduling of the assignment meeting and the commencement of fee negotiations with respect to the Project. The Municipality shall prepare a written notification to the selected firm advising that the firm has been selected. The Municipality shall also prepare written notification to all other interviewed firms that the firm was not selected, but that it may be contacted should the fee negotiations with the selected firm not be successfully completed.

Selection Process – Actions and Approvals Summary:

- The Municipality establishes Consultant Selection Panel
- The Department reviews and approves Consultant Selection Panel
- The Municipality develops Letter of Interest Rating Forms
- The Department reviews and approves Letter of Interest Rating Forms
- The Municipality reviews responses received and prepares a Short List
- The Department reviews and approves the Short List
- The Municipality develops proposed interview questions and Interview Rating Forms
- The Department reviews and approves interview questions and Interview Rating Forms
- The Municipality notifies all responding firms of their status, conducts interviews of short-listed firms, and makes final consultant selection
- The Department reviews and approves (**in writing**) final consultant selection
- The Municipality notifies (**in writing**) all interviewed firms of their status

3. Assignment Meeting

After the Department's approval of the Municipality's consultant selection process, an assignment meeting will be arranged by the Municipality, at which all parties (i.e., Department, Municipality and selected firm) will discuss the scope of work, schedule and fee proposal format.

Following the assignment meeting, the selected firm shall draft a detailed scope of services and list of line item tasks which may be used as the basis for fee negotiations. The selected firm shall submit these drafted items to the Municipality for review and approval. The Municipality shall submit the proposed final scope of services to the Department for approval. Upon approval, both the Municipality and the selected firm shall then concurrently and independently prepare man-hour/fee proposals and submit them to the Negotiations Committee established by the Municipality in accordance with Section 4, "Negotiations."

Assignment Meeting Process – Actions and Approvals Summary:

- The Municipality conducts an assignment meeting
- The selected firm drafts a scope of services and submits it to the Municipality
- The Municipality reviews the scope of services
- The Department approves the scope of services
- The Municipality and selected firm prepare man-hour/fee proposals and submit them to the Negotiations Committee

4. Negotiations

The Municipality shall establish a Negotiations Committee (“Committee”) to perform the fee negotiations phase. The Committee should have three (3) or four (4) members, including at least two (2) individuals from the Consultant Selection Panel. All members of the Committee shall be Municipal officials or employees. At least one (1) member of the Committee shall be the Town/City Engineer, the Director of Public Works, or other Municipal official or employee with considerable engineering, technical or other relevant specialized experience that possesses substantial knowledge about the Project.

It is imperative that fee negotiations be a fair and open process. This means that if the Committee is unable to successfully negotiate a contract with the selected firm at a price that the Committee determines to be fair, competitive and reasonable, negotiations with that firm shall, with prior Department approval, be formally terminated. The Municipality shall then select the next highest-ranked firm from the interview process and submit all of that firm’s information to the Department for review and approval; the procedures set forth in Section 3 and this Section 4 shall again be followed.

The Committee shall comply with the requirements of Agreement Bulletin 91-3, Pre-Award Auditing of Consultant (copy attached).

Once the Committee successfully negotiates a fee with the selected firm (“Consultant”), the following must be submitted to the Department for review and approval:

1. Consultant’s fee proposal
2. Municipality’s fee proposal
3. Negotiated fee

Upon receipt of the Department’s written approval of the negotiated fee with the Consultant, the Municipality shall send a written notification to all other interviewed firms that they were not selected.

Negotiations Process – Actions and Approvals Summary:

- The Municipality establishes Negotiations Committee
- The Negotiations Committee negotiates a fee with the selected firm
- The Department reviews and approves (**in writing**) the negotiated fee
- The Municipality notifies all other interviewed firms (**in writing**) of their status

5. Agreements

Upon agreement of the fee, the Municipality shall enter into an agreement with the Consultant (“Consultant Agreement”). The Municipality shall draft the Consultant Agreement using agreement language and format provided by the Department and shall submit the draft to the Department for review and approval.

All Consultant Agreements are subject to the Department’s contracting requirements, including but not limited to insurance and audit requirements, and, if there is federal participation in funding for the Project, all applicable federal contracting requirements.

The Municipality must receive written approval from the Department for any Consultant Agreement, and any supplemental agreements thereto, prior to signature by the Municipality or the Consultant.

The Consultant Agreement must be fully executed before the commencement of any activities on the Project.

With respect to the agreement between the Municipality and the Department for the Project, a supplemental agreement and/or Project Authorization Letter (“PAL”), as applicable, between the parties may be required if the actual negotiated fee exceeds the amount of reimbursement specified in the original agreement and/or PAL, as applicable, and the Department has approved the increase in fees.

All costs incurred by the Municipality for advertising, consultant selection and fee negotiations are non-reimbursable under the agreement and/or PAL, as applicable, between the Department and the Municipality for the Project.

Agreement Process – Actions and Approvals Summary:

- The Municipality prepares a draft Consultant Agreement
- The Department reviews draft Consultant Agreement and issues **written** approval prior to signature by the Municipality or the Consultant.

6. Contract Monitoring

The “Consultant Administration and Project Development Manual,” Connecticut Department of Transportation (September 2008), as may be revised, outlines the procedures and contract monitoring provisions that are employed for Department-administered projects and that the Municipality must likewise employ for its Consultant Agreements entered into for Municipally-administered Projects.

Consultant performance evaluations should be conducted by the Municipality on a semi-annual basis, using a form acceptable to the Department. A sample copy of the *Consultant Performance Evaluation Rating Form* is attached. The rating sheets should be completed by the Municipality and submitted to the Department every January and July, provided that the Consultant was actively working on a Project during the rating period.

A final Consultant performance evaluation for the Preliminary Engineering phase of the Project should be prepared by an appropriate Municipal official prior to the advertisement of the contract for the construction phase of the Project. Upon completion, Consultant performance evaluations for the Preliminary Engineering phase are to be submitted to:

Principal Engineer
Division of Highway Design – Local Roads
Connecticut Department of Transportation
2800 Berlin Turnpike
P.O. Box 317546
Newington, Connecticut 06131

A Consultant performance evaluation for the Construction Inspection phase shall be prepared in accordance with the procedure set forth in the Office of Construction’s latest edition of the “Municipality Manual” – Consultant and Contractor Evaluations.

By agreement, the responsibility for settling all contractual and administrative issues with the Consultant rests solely with the Municipality, not the Department.

Contract Monitoring Process – Actions and Approvals Summary:

- The Municipality conducts Consultant performance evaluations and provides copies of the ratings to the Department

7. Confidentiality

The Panel and Committee shall maintain all rating information as confidential until execution of a Consultant Agreement. Any participating consultant firms wishing to discuss, in general terms, their initial submittals or their interview presentation may do so through the

Municipality's Chief Elected Official. Panel or Committee members shall not meet jointly or as a whole to discuss their evaluations with any consultant firm.

8. Revisions

The procedures and documents referenced in this Consultant Selection, Negotiation And Contract Monitoring Procedures For Municipally-Administered Projects are subject to revision by the Department, and, as may be applicable, the Federal Highway Administration. With respect to a particular Project, the Municipality shall comply with the version in effect at the time the Municipality commences the QBS process for the consultant services required on the Project.

LEGAL NOTICE TEMPLATE

LEGAL NOTICE: The Town/City of [redacted] is seeking to engage the services of a Consulting Engineering firm to provide engineering services for the preparation of contract plans and documents for the following transportation project:

State Project No. [redacted] - Project Title [redacted]
{Project description}

The Consulting Engineering firm selected may also be required to provide survey, prepare environmental documents and perform construction inspection. The projected construction cost is expected to be in the range of \$ [redacted].

Firms responding to this request should be of adequate size and sufficiently staffed to perform the assignment described above.

The Consulting Engineering firm will be evaluated and selected based on design and technical competence, the capacity and capability to perform the work within the time allotted, past record of performance, and knowledge of Federal, State, and Municipal procedures, appropriately weighted in descending order of importance.

The design fee will be negotiated on a Lump Sum basis.

{Choose the appropriate paragraph from the following three and delete the two that do not apply regarding DBE/SBE/SBPPP assignments}

For a DBE Goal:

The Disadvantaged Business Enterprise (DBE) sub consultant goal will be no less than [redacted] percent ([redacted] %) of the original agreement value.

For an SBE Goal:

Under Connecticut General Statute § 4a-60g, Connecticut has an established and on-going commitment to providing equal opportunity to Connecticut small (SBE) and minority owned business enterprises (MBE) to contract as a contractor for the Connecticut's purchased goods and services. You are advised that there is a [redacted] percent ([redacted] %) small business sub consultant goal that applies to this assignment. Within the letter of interest narrative, you must include the designated certified Small Business Enterprise (SBE) sub consultant(s) which you plan to use. (The SBE sub consultants must be currently certified by the Department of Administrative Services). All firms are advised that the prime consultant must perform the major part of the work with employees of the firm. Sub consultants may be used to comply with (SBE) requirements or perform specialized work. Joint venturing assignments will not be allowed.

For an SBPPP Assignment:

The Consulting Engineering firm selected for this project must meet the requirements of the Small Business Participation Pilot Program (SBPPP).

To be eligible to participate in the SBPPP, firms must be currently certified as one of the following: a Connecticut Department of Transportation certified Disadvantaged Business Enterprise (DBE), a Connecticut Department of Administrative Services (DAS) certified Small/Minority Business Enterprise (SBE/MBE), or certified under one of the United States Small Business Administration's Programs; (8(a) firm; Small Disadvantaged Business(SDB); HUB Zone; US SBA Loan recipient (Loan Note documentation required).

The selected firm must meet all Municipal, State, and Federal affirmative action and equal employment opportunity practices.

A letter of interest, together with general information on the firm and proposed sub consultants, the firm's brochure, current Federal Form SF330, experience of the firms, and resumes of key personnel shall be addressed to: {Town/City contact} {address}. Additionally, all interested firms must submit a detailed statement including the organizational structure under which the firm proposes to conduct business. Proposed sub consultants should be clearly identified. The relationship to any "parent" firm or subsidiary firm, with any of the parties concerned, must be clearly defined.

Personnel in responsible charge of the projects will be required to possess and maintain a valid Connecticut Professional Engineer's License. All letters of interest must be postmarked by a U.S. Post Office (if mailed) or brought to {location}, at the above address (if hand delivered) no later than {time} on {date}. Responses received or postmarked after this date will not be considered.

NOTIFICATION FOR LETTER OF INTEREST TEMPLATE

{Date}

Ladies/Gentlemen:

Subject: **Request for Letter of Interest**
State Project No. _____
Federal-aid Project No. _____
Project Title _____
Town/City of _____

Your firm is one of the firms that have been pre-qualified for this calendar year by the Connecticut Department of Transportation to provide {type of services appropriate for project} services.

The {Town/City of _____} is seeking to engage the services of a Consulting Engineering firm to perform design services for {project title and limits}. The improvements will include {brief description of the project elements}.

Successful applicants to this request may be required to provide survey, prepare environmental documents and perform construction inspection. Additionally, firms responding to this request should be of adequate size and sufficiently staffed to perform the assignment described above.

If your firm desires to be considered for this assignment, your submittal should consist of a letter of interest, together with general information on the firm and proposed sub consultants, the firm's brochure, current Federal Form SF330, experience of the firms, and resumes of key personnel. Additionally, all interested firms must submit a detailed statement including the organizational structure under which the firm proposes to conduct business. Proposed sub consultants should be clearly identified. The relationship to any "parent" firm or subsidiary firm, with any of the parties concerned, must be clearly defined. {Number of copies} of the submittal must be postmarked by {date} (if mailed) or brought to {Town/City contact} at the address below (if hand delivered) no later than {time} of that date. Responses received or postmarked after this date will not be considered.

Your firm will be evaluated and selected based on design and technical competence, the capacity and capability to perform the work within the time allotted, past record of performance, and knowledge of Federal, State, and Municipal procedures, appropriately weighted in descending order of importance. The selected firm must meet all Municipal, State, and Federal affirmative action and equal employment opportunity practices.

{Choose the appropriate paragraph from the following three and delete the two that do not apply regarding DBE/SBE/SBPPP assignments}

For a DBE goal:

You are advised that there is a _____ percent (____%) disadvantaged business sub consultant goal that applies to this assignment. Within the letter of interest narrative, you must include the designated certified Disadvantaged Business Enterprise (DBE) sub consultant(s) which you plan to use. (The DBE sub consultants must be currently certified by the Department). All firms are advised that the prime consultant must perform the major part of the work with employees of the firm. Sub consultants may be

used to comply with (DBE) requirements or perform specialized work. Joint venturing assignments will not be allowed.

For an SBE goal:

Under Connecticut General Statute § 4a-60g, Connecticut has an established and on-going commitment to providing equal opportunity to Connecticut small (SBE) and minority owned business enterprises (MBE) to contract as a contractor for the Connecticut's purchased goods and services. You are advised that there is a _____ percent (____%) small business sub consultant goal that applies to this assignment. Within the letter of interest narrative, you must include the designated certified Small Business Enterprise (SBE) sub consultant(s) which you plan to use. (The SBE sub consultants must be currently certified by the Department of Administrative Services). All firms are advised that the prime consultant must perform the major part of the work with employees of the firm. Sub consultants may be used to comply with (SBE) requirements or perform specialized work. Joint venturing assignments will not be allowed.

For an SBPPP assignment:

You are advised that the Consulting Engineering firm selected for this project must meet the requirements of the Small Business Participation Pilot Program (SBPPP). To be eligible to participate in the SBPPP, firms must be currently certified as one of the following: a Connecticut Department of Transportation certified Disadvantaged Business Enterprise (DBE), a Connecticut Department of Administrative Services (DAS) certified Small/Minority Business Enterprise (SBE/MBE), or certified under one of the United States Small Business Administration's Programs; (8(a) firm; Small Disadvantaged Business(SDB); HUB Zone; US SBA Loan recipient (Loan Note documentation required).

Prior to the negotiation process, the selected firm will be required to have a Connecticut Department of Transportation-approved audit and affirmative action plan, as well as current corporate registration with the Secretary of State (partnerships excluded). The selected firm will also be required to maintain professional liability insurance coverage from a firm licensed to do business in the State of Connecticut. Proof of coverage must be submitted prior to the start of the negotiations process.

Circumstances may require the rescheduling or cancellation of projects. Should this action be necessary, the {Town/City} would be under no obligation to provide supplementary work.

All letters of interest shall be addressed to:

{Town/City, contact}
{Address}.

Please be advised that firms must also be pre-qualified in the particular year a shortlist is finalized and/or a selection is made.

Very truly yours,
{Purchasing agent}
{Title}

LETTER OF INTEREST RATING FORM

STATE PROJECT NO. _____

FEDERAL PROJECT NO. _____

PROJECT DESCRIPTION: _____

NAME OF FIRM: _____

CRITERIA	MAXIMUM POINTS	POINT RATING
Specialized Design and Technical Competence	40	_____
Capacity and the Capability to perform the work within the time allotted	30	_____
Past Record of Performance on Contracts with the Town and other Clients with respect to such factors as control of costs, quality of work, and cooperation with the client.	20	_____
Knowledge of Federal, State and Municipal Procedures	10	_____
TOTAL	100	_____

PREPARED BY: _____

Printed Name of Panel Member

SIGNATURE OF PANEL MEMBER: _____ Date: _____

LETTER OF INTEREST RATING SUMMARY FORM

STATE PROJECT NO. _____

FEDERAL PROJECT NO. _____

PROJECT DESCRIPTION: _____

CONSULTANT FIRM	INDIVIDUAL PANEL MEMBER POINT RATINGS				TOTAL POINTS
	(1)	(2)	(3)	(4)	
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____

SUMMARY PREPARED BY: _____
 Printed Name of Consultant Selection Panel Member

SIGNATURE OF PREPARER: _____ DATE: _____

REVIEWED/APPROVED BY: _____ DATE: _____
 Signature of Chairperson
 Consultant Selection Panel

PRINTED NAME OF CHAIRPERSON: _____

INTERVIEW RATING FORM

STATE PROJECT NO. _____

FEDERAL PROJECT NO. _____

PROJECT DESCRIPTION: _____

NAME OF LEAD FIRM: _____

LOCATION OF OFFICE: _____

NAME OF SUB-CONSULTANT FIRM: _____
(If applicable)

QUESTION	MAXIMUM POINTS*	POINT RATING
1.		_____
2.		_____
3.		_____
4.		_____
5.		_____
6.		_____
7.		_____
TOTAL	100	_____

PREPARED BY: _____
Printed Name of Panel Member

SIGNATURE OF PANEL MEMBER: _____ Date: _____

Note: Maximum point values for each question to be appropriately weighted based on critical project design elements and number of questions.

INTERVIEW RATING SUMMARY FORM

STATE PROJECT NO. _____

FEDERAL PROJECT NO. _____

PROJECT DESCRIPTION: _____

CONSULTANT FIRM	INDIVIDUAL PANEL MEMBER POINT RATINGS				TOTAL POINTS
	(1)	(2)	(3)	(4)	
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____

SUMMARY PREPARED BY: _____
Printed Name of Consultant Selection Panel Member

SIGNATURE OF PREPARER: _____ DATE: _____

CONSULTANT FIRM SELECTED: _____

REVIEWED/APPROVED BY: _____ DATE: _____
Signature of Chairperson
Consultant Selection Panel

PRINTED NAME OF CHAIRPERSON: _____

CONSULTANT PERFORMANCE EVALUATION

STATE PROJECT NO. _____

FEDERAL PROJECT NO. _____

PROJECT DESCRIPTION: _____

FIRM NAME: _____

Numerical Scale: 0-20

Excellent	20	Acceptable	11-8
Very Good	19-16	Poor	7-4
Good	15-12	Unacceptable	3-0

Rating Period: (circle one)

January 1 – June 30
July 1 – December 31

Criteria	Point Rating
Firms Operations (Chain of Command)	_____
Technical (Ability & Knowledge)	_____
Procedural (Operations & Knowledge)	_____
Continual Supervision (Internal & External)	_____
Quantity of Work (Schedule – time- days)	_____
Quality of Work (Numerical Rating Scale)	_____
Extra Work Claims (Errors or Omissions)	_____
Financial Items (Const. Order – Est. - Billings)	_____
Cooperation (Direct & Indirect)	_____
Average Rating	_____

Evaluated by: _____
TOWN/CITY ENGINEER OR PROJECT MANAGER

Accepted by: _____
FIRST ELECTED OFFICIAL OR TOWN /CITY MANAGER

STATE OF CONNECTICUT

DEPARTMENT OF TRANSPORTATION

July 15, 1991

AGREEMENT BULLETIN NO. 91-3

TO: ALL CONCERNED

FROM: Thomas J. Perrone *TJP*
Director of Documents Processing
Bureau of Administration

Re: PRE-AWARD AUDITING OF CONSULTANTS

The Negotiations Committee will request a pre-award audit to be performed of all consultants and subconsultants involved with proposed projects with the Department, that meet the following criteria:

1. An audit evaluation prior to the negotiation of proposals for which the total costs exceed, or are expected to exceed, \$250,000.
2. Audit evaluations of proposals of less than \$250,000 where a valid need exists, such as:
 - (a) Inadequate knowledge concerning the prospective consultant's/subconsultant's accounting policies, cost systems, or substantially changed methods or levels of operation;
 - (b) Previous unfavorable experience indicating doubtful reliability of the prospective consultant's/subconsultant's estimating, accounting, or purchasing methods.
3. The pre-award audit will be performed in accordance with CFR Title 23 and CFR Title 48 Chapter 1, Federal Acquisition Regulation, Subparts 31.0, 31.1 and 31.2, and Office of Policy and Management's General Letter No. 80-5 dated May 28, 1980 (and subsequent revisions).

This Agreement Bulletin No. 91-3 supersedes Agreement Bulletin No. 84-2 previously dated March 28, 1984.

Please disseminate this information to all those persons having a need to know.

Valerie C. Joyner/nam

5 1
Director Of Documents Processing

List #2

PUBLIC INVOLVEMENT PROGRAM GUIDELINES

It is the Department's policy to keep persons informed and involved when projects are undertaken. This will be accomplished through a public involvement program conducted by the Municipality.

The public involvement program was begun prior to application for Federal funding. It is continued with a Public Informational Meeting after the completion of the Preliminary Design plans. The public must be informed of the meeting by (1) issuing news releases and/or newspaper display advertisement, and (2) conducting a formal mailing to parties affected by the project.

News Release and/or Newspaper Display Advertisement

The Municipality is requested to issue a news release and/or a newspaper display advertisement based on the attached samples and have them published in local newspapers having a substantial circulation in the project area. It is recommended that the news release and/or display advertisement be published twice: **once approximately ten days prior to the public informational meeting, and again approximately two days before the meeting.** Attached is a list of area legislators and agencies that should also be sent a copy of the news release or display advertisement to inform them of the project. **A draft of the news release and/or display advertisement is to be forwarded for review prior to being sent.**

Please forward written verification that the news release and/or display advertisement were published in area newspapers and sent to all others on the list. **In accordance with Federal Title XI requirements, please also email a copy of the public notice to dot.publicmeetings@ct.gov and taffy.womack@ct.gov.**

To ensure that minority, low income and Limited English Proficient individuals have an opportunity to fully participate in the public process, targeted engagement efforts should be made as part of your public outreach efforts. Please refer to the maps located on CTDOT's website at: <http://www.ct.gov/dot/cwp/view.asp?A=3529&Q=305564> to determine if there are impacted populations that could be affected by the project or activity.

Meetings should be held in venues which are ADA accessible. Meeting notices should state that the facility is ADA accessible and that individuals needing language assistance may request services by contacting (your designated contact person in the Department).

AND

Formal Mailing

The Municipality is also requested to perform the formal mailing. Attached is a sample letter which can be used to assist the Municipality in conducting the mailing. **A draft of the letter is to be forwarded for review prior to being sent.**

To fulfill the intent of the Department's public involvement program, the letter is to be sent, at a minimum, to each affected abutting property owner in the project area and each of the local agencies, commissions, etc., on the attached list. Also, the Municipality should send a copy of the

letter to any area agency, commission, public advisory group, etc. that may be interested in the project. **It is recommended that the formal mailing be performed approximately one week in advance of the public informational meeting.**

The Municipality is to verify in writing that the formal mailing is done, as required by State policy, and provide a list of names and addresses of each abutting property owner and others that are mailed the letter.

Conclusion

It is suggested that a post meeting, two week comment period be allowed to provide an additional opportunity for written comments to the municipality. After the public informational meeting, the Municipality must notify ConnDOT in writing of the results of the meeting. **The Municipality's position with regard to the continuation of the design must also be expressed in the letter (see sample letter).**

SAMPLE NEWS RELEASE

(CITY or TOWN name), CONNECTICUT - the (CITY or TOWN) of (City or Town name) has a project for the (brief project description). Preliminary design has been completed and the project is slated for construction under the Surface Transportation Program administered by the Connecticut Department of Transportation.

It is the (City or Town)'s and the State's policy to keep persons informed and involved when such projects are undertaken. It is important that the community share its concerns to assist in the project's development. The (City or Town) will conduct an informational meeting on (date, time, and place).

It is planned to (brief description of project).

Based upon a preliminary assessment, the construction cost will be approximately \$ (Dollar amount).

The Federal Highway Administration will provide 80% of the construction cost with the (City or Town) providing 20%.

Anyone interested in obtaining further information or providing input may do so by contacting (Name of designated City or Town official).

SAMPLE DISPLAY AD

**You are invited to a
PUBLIC INFORMATION MEETING**

**PROJECT NO. {000-000}
{PROJECT TITLE}**

TO BE HELD (DATE, TIME, LOCATION)

Residents, business owners, commuters, and other interested individuals are encouraged to take advantage of this opportunity to discuss this project in the **{Municipality}**

**PLEASE JOIN US ON
(DATE)**

NEWS RELEASE/DISPLAY ADVERTISEMENT DISTRIBUTION

Hon. Richard Blumenthal
U.S. Senator
90 State House Square
10th Floor
Hartford, CT 06103

Hon. Christopher Murphy
U.S. Senator
One Constitution Plaza
7th Floor
Hartford, Ct. 06103

(Your U.S. Representative)

(Your State Senator)

(Your State Representatives)

(Your Regional Planning Agency or
Council of Governments)

U.S. Army Corps of Engineers
Concord Park
696 Virginia Road
Concord, MA 01742-2718

Ms. Lisa R. Coverdale
State Conservationist
U.S. Department of Agriculture
Natural Resources Conservation Service
344 Merrow Road, Suite A
Tolland, CT 06084-3917

U.S. Dept. of Interior, Office of the Secretary
Office of Environmental Policy and Compliance
Northeast Region
15 State Street
Suite 400
Boston, MA 02109

Connecticut Department of Economic and
Community Development
505 Hudson Street
Hartford, CT 06106-7106

Connecticut Council on Environmental Quality
Ct DEEP Building
79 Elm Street
Hartford, CT 06106

Ms. Amy Jackson-Grove
Division Administrator
Federal Highway Administration
628-2 Hebron Avenue, Suite 303
Glastonbury, CT 06033

CT Construction Industries Association
912 Silas Deane Highway #112
Wethersfield, CT 06109

Ms. Suzanne Piacentini
Field Office Director
Department of Housing & Urban Development
20 Church Street, 10th Floor
Hartford, CT 06103-3220

Mr. Daniel Forrest
Division Director
Connecticut Commission on
Culture and Tourism
One Constitution Plaza, 2nd Floor
Hartford, CT 06103

SAMPLE LETTER

PRELIMINARY NOTIFICATION

(Date)

To: (Abutting Property Owners and Those of Enclosed List)

Dear:

Subject: (Project Title)

The Preliminary design has been completed for the (City or Town) of (Name of City or Town)'s (brief project description).

The (City or Town) will conduct an informational meeting on (date, time, and place). Deaf and hearing impaired persons wishing to attend this meeting and requiring an interpreter may make arrangements by contacting (contact person) of (City or Town Department) at (**-**-****) at least five working days prior to the meeting.

Based upon preliminary assessment, the construction cost will be approximately \$ (dollar amount). The Federal Highway Administration will provide 80% of the construction cost with the (City of Town) providing 20%.

It is the (City or Town)'s and the State's policy to keep persons informed and involved when such projects are undertaken. It is important that the community share its concerns with us to assist in the project's development.

Anyone interested in obtaining further information, providing input or requiring language assistance may do so by contacting (name and title of designated municipal official).

Very truly yours,

(name of municipal official)
(title)

cc: Hugh H. Hayward, P.E., Principal Engineer - Highway Design, ConnDOT
Robert W, Ike, Supervisor - Office of Rights of Way, ConnDOT

Distribution:

Official, Planning and Zoning Commission

Official, Zoning Board of Appeals

Official, Conservation Commission

Official, Inland Wetland Commission

Chief of Police

Chief of Fire Department

Superintendent of Schools

SAMPLE LETTER TO DOT

{Date}

Mr. Hugh H. Hayward, P.E.
Principal Engineer – Highway Design
Connecticut Department of Transportation
P.O. Box 317546
Newington, Connecticut 06131-7546

Dear Mr. Hayward

Subject: Project No. **{000-000}**
{Project Title} {Municipality}

To afford full opportunity to the public to comment on the **{Project Title}**, the **{Municipality}** held a public informational meeting on **{Date}**. The **{Municipality}** has reviewed the comments made by the public and has determined that the project should proceed to final design based on the preliminary design plans that were presented at the public informational meeting.

Comments received will be incorporated into the final design as appropriate.

Should you have any questions regarding this matter, please contact **{name and title of designated municipal official}**.

Very truly yours,

{Head of the municipal government}