

DATE OF ACCIDENT: 03 23 98
DAY OF WEEK: MON
TIME: 1820
TIME REPORTED: 1829
TIME ARRIVED: 1829

ROUTE: ON
OR NAME OF STREET OR HIGHWAY: STEVENS AVE
CITY OR TOWN: PORTLAND
CODE NUMBER: 019
COUNTY: CUMBERLAND
HIT AND RUN:

AT: BETWEEN NODE NUMBERS: 3277
DISTANCE FROM SCENE: MILES TENTHS
TO NUMBER:
MILES AND TENTHS TO LANDMARK: AT WOODFORD ST.
W N E
W S E
CIRCLE ONE

UNIT NO. 1 - VEHICLE 1

TOTAL UNITS INV: 2

UNIT NO. 2 - VEH 2 PED BIKE

DRIVER'S LICENSE NUMBER 1: [blank] STATE: ME
DRIVER'S LICENSE NUMBER 2: [blank] STATE: ME

LAST NAME FIRST NAME MIDDLE
1: [blank] [blank] J
2: [blank] [blank] [blank]

NUMBER AND STREET
1: BRIGHTON AVE.
2: BUNNYBRIER RD

CITY STATE CODE NUMBER
1: PORTLAND ME 20
2: SW. PTD ME 20

DATE OF BIRTH SEX LICENSE STATUS REST/PERM CLASS
1: [blank] F @ SPN - C
2: [blank] M @ SPN W/X B

LAST NAME - OWNER 1 FIRST NAME MIDDLE
1: SAME
2: SAME

NUMBER AND STREET
1: SAME
2: SAME

CITY STATE
1: SAME
2: SAME

VEHICLE TYPE YEAR AND MAKE COLOR
1: 4 DR 85 TOYOTA BK
2: TRK 86 CHEV BK

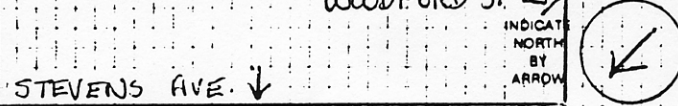
LICENSE PLATE NUMBER YEAR ISSUE STATE NO OCCUP
1: [blank] 98 ME 01
2: [blank] 98 ME 01

VEHICLE IDENTIFICATION NO.
1: [blank]
2: [blank]

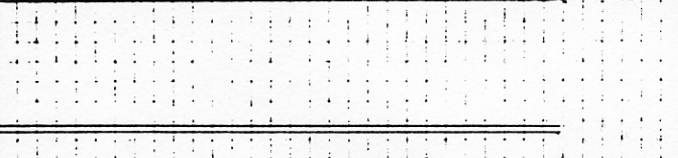
INSURANCE CO. AUTOMOBILE CLUB INS. CO. TRAVELERS INDEMNITY

POLICY NO. [blank] '01 1

TOWED BY: N/A
DAMAGE CODES: [blank] DAMAGE ESTIMATE: \$400.00
DAMAGE CODES: [blank] DAMAGE ESTIMATE: \$8



DESCRIPTION: VEH. #1 WAS STOPPED IN TRAFFIC
S/B ON STEVENS AVE. NEAR WOODFORD ST.
BEHIND VEH. #2. VEH. #2 BACKED UP TO
ALLOW ANOTHER VEH. TO PULL OUT OF DRIVE-
WAY. VEH. #2 BACKED INTO VEH. #1 CAUSING
MINOR DAMAGE TO VEH. #1



AMBULANCE CODES
NAME AND ADDRESS OF OWNER OF DAMAGED PROPERTY (OTHER THAN VEH): N/A

TOTAL NUMBER OF PERSONS INVOLVED: 2

NAMES OF ALL PERSONS INVOLVED (DRIVERS, PASSENGERS, WITNESSES, PEDESTRIANS)

25	26	27	28	29	30	31	32	33	34

INVESTIGATING OFFICER (SIGNATURE): [Signature] OFFICER NUMBER: 215 TROOP OR DEPARTMENT: PORTLAND
APPROVED BY: [Signature] DATE: 3/23/98

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95-11957
LOCAL CODES

DATE OF ACCIDENT: MONTH 12 DAY 23 YEAR 97 DAY OF WEEK Tues TIME 1055 TIME REPORTED 1049 TIME ARRIVED 1100

ROUTE ON OR NAME OF STREET OR HIGHWAY Woodford St CITY OR TOWN Portland CODE NUMBER 019 COUNTY Cumberland HIT AND RUN

BETWEEN NODE NUMBERS 3277 DISTANCE FROM SCENE TO NUMBER Stevens Av MILES AND TENTHS TO LANDMARK Stevens Av N W S E CIRCLE ONE

UNIT NO. 1 - VEHICLE 1 TOTAL UNITS INV 2 UNIT NO. 2 - VEH 2 PED BIKE

DRIVER'S LICENSE NUMBER 1 STATE ME

LAST NAME FIRST NAME MIDDLE

NUMBER AND STREET

CITY STATE CODE NUMBER So. Freeport ME 20

DATE OF BIRTH SEX LICENSE STATUS REST/PERM CLASS F A S P N - C

LAST NAME - OWNER 1 FIRST NAME MIDDLE Same

NUMBER AND STREET

CITY STATE Same

VEHICLE TYPE YEAR AND MAKE COLOR UT 1996 Chev Grn

LICENSE PLATE NUMBER YEAR ISSUE STATE NO OCCUP 1997 ME 1

VEHICLE IDENTIFICATION NO

INSURANCE CO. Clark Assoc.

POLICY NO

DRIVER'S LICENSE NUMBER 2 STATE ME

LAST NAME FIRST NAME MIDDLE

NUMBER AND STREET

CITY STATE CODE NUMBER So Freeport ME 20

DATE OF BIRTH SEX LICENSE STATUS REST/PERM CLASS F A S P N - C

LAST NAME - OWNER 2 FIRST NAME MIDDLE Same

NUMBER AND STREET

CITY STATE Same

VEHICLE TYPE YEAR AND MAKE COLOR Van 1994 Dodge Wh.

LICENSE PLATE NUMBER YEAR ISSUE STATE NO OCCUP 1998 ME 1

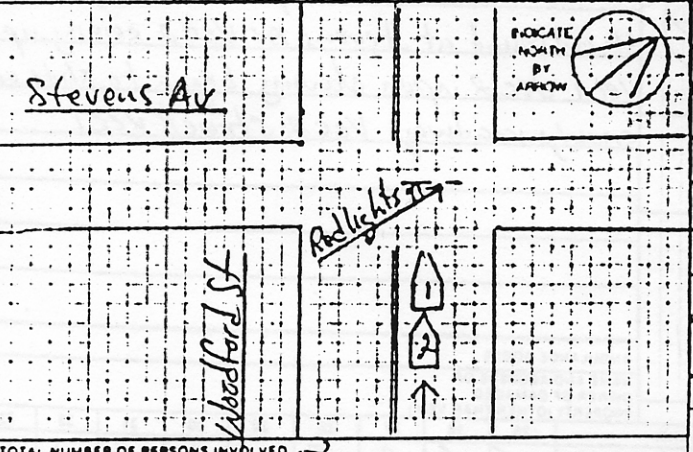
VEHICLE IDENTIFICATION NO

INSURANCE CO. Acadia Ins.

POLICY NO

TOWED BY: 5 DAMAGE CODES 3 100 DAMAGE ESTIMATE 100

TOWED BY: AAA DAMAGE CODES 112 DAMAGE ESTIMATE 1,500



DESCRIPTION: Vec 1 stopped at a traffic light Red on Woodford St at Stevens Av Vec 2 coming behind Vec 1 Both vehicles outbound Woodford St Vec 2 stopped behind Vec 1 then began to roll forward and tried to stop again Vec 2 began to slide on the snowy roadway Vec 2 struck Vec 1

TOTAL NUMBER OF PERSONS INVOLVED 2

NAME AND ADDRESS OF OWNER OF DAMAGED PROPERTY (OTHER THAN VEH)

NAMES OF ALL PERSONS INVOLVED (DRIVERS PASSENGERS WITNESSES PEDESTRIANS)	25	26	27	28	29	30	31	32	33	34
	/	/	2	5	1	1	1	1	F	45
	/	/	2	5	1	2	1	1	F	41

INVESTIGATING OFFICER (SIGNATURE) William M. Apple OFFICER NUMBER 28 TROOP OR DEPARTMENT Portland APPROVED BY St. W. White DATE 12-23-97

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LOCAL CODES

DATE OF ACCIDENT MONTH **12** DAY **23** YEAR **97** DAY OF WEEK **Tues** TIME **1138** TIME REPORTED **1138** TIME ARRIVED **1138**

ON ROUTE **Woodford St** OR NAME OF STREET OR HIGHWAY **Woodford St** CITY OR TOWN **Portland** CODE NUMBER **019** COUNTY **Cumberland** HIT AND RUN

AT BETWEEN NODE NUMBERS **3277** DISTANCE FROM SCENE TO NUMBER **Stevens Av** MILES AND TENTHS TO LANDMARK **Stevens Av** W S CIRCLE ONE

UNIT NO. 1 - VEHICLE 1 TOTAL UNITS INV **2** UNIT NO. 2 - VEH 2 PED BIKE

DRIVER'S LICENSE NUMBER - 1 STATE **ME** DRIVER'S LICENSE NUMBER 2 STATE **ME**

LAST NAME FIRST NAME MIDDLE LAST NAME FIRST NAME MIDDLE

NUMBER AND STREET NUMBER AND STREET **Stevens Av** **Sauanders St**

CITY STATE CODE NUMBER CITY STATE CODE NUMBER **Portland ME 20** **Portland ME 20**

DATE OF BIRTH SEX LICENSE STATUS REST/PERM CLASS DATE OF BIRTH SEX LICENSE STATUS REST/PERM CLASS **M @ S P N - C** **M @ S P N W B**

LAST NAME - OWNER 1 FIRST NAME MIDDLE LAST NAME - OWNER 2 FIRST NAME MIDDLE **Same** **Same**

NUMBER AND STREET NUMBER AND STREET

CITY STATE CITY STATE **Same** **Same**

VEHICLE TYPE YEAR AND MAKE COLOR VEHICLE TYPE YEAR AND MAKE COLOR **4dr 1997 Ford Sil** **PK 1988 Chevy Br**

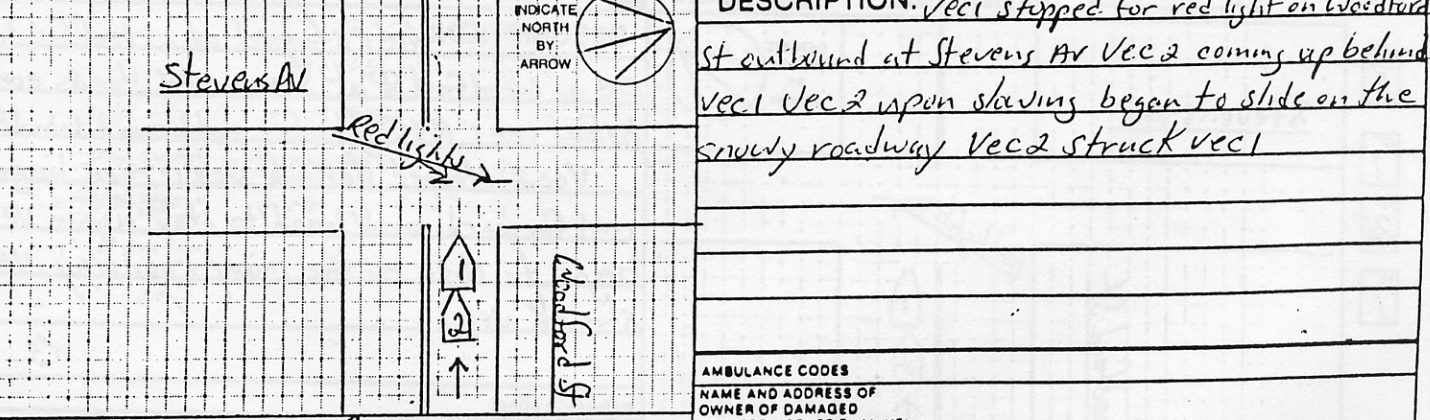
LICENSE PLATE NUMBER YEAR ISSUE STATE NO OCCUP LICENSE PLATE NUMBER YEAR ISSUE STATE NO OCCUP **1998 ME 1** **1998 ME 1**

VEHICLE IDENTIFICATION NO. VEHICLE IDENTIFICATION NO.

INSURANCE CO. **State Farm** INSURANCE CO. **State Farm**

POLICY NO. POLICY NO.

TOWED BY: **6.5 \$1,500.00** TOWED BY: **0 \$ -**



TOTAL NUMBER OF PERSONS INVOLVED	25	26	27	28	29	30	31	32	33	34
NAMES OF ALL PERSONS INVOLVED (DRIVERS PASSENGERS WITNESSES PEDESTRIANS)			2	5	1	1	1	1	M	24
"			2	5	1	2	1	1	M	38

INVESTIGATING OFFICER (SIGNATURE) **William M. Lopez** OFFICER NUMBER **28** TROOP OR DEPARTMENT **Portland** APPROVED BY **M. A. ...** DATE **12-23-97**

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DATE OF ACCIDENT MONTH 1 DAY 7 YEAR 98 DAY OF WEEK WED TIME 0910 TIME REPORTED 0915 TIME ARRIVED 0920 8790896

ROUTE ON OR NAME OF STREET OR HIGHWAY STEVENS AVE. CITY OR TOWN PORTLAND CODE NUMBER 0119 COUNTY CUMBERLAND HIT AND RUN

AT BETWEEN NODE NUMBERS 3255 DISTANCE FROM SCENE TO NUMBER MILES TENTHS MILES AND TENTHS TO LANDMARK W N E S CIRCLE ONE

Emergency Unit No. 1 - VEHICLE 1 TOTAL UNITS INV UNIT NO. 2 - VEH 2 PED BIKE

DRIVER'S LICENSE NUMBER 1 STATE ME
 LAST NAME FIRST NAME MIDDLE

NUMBER AND STREET 109 MIDDLE ST.
 CITY PORTLAND STATE ME CODE NUMBER 20

DATE OF BIRTH SEX M LICENSE STATUS ASPN REST. PERM - CLASS C

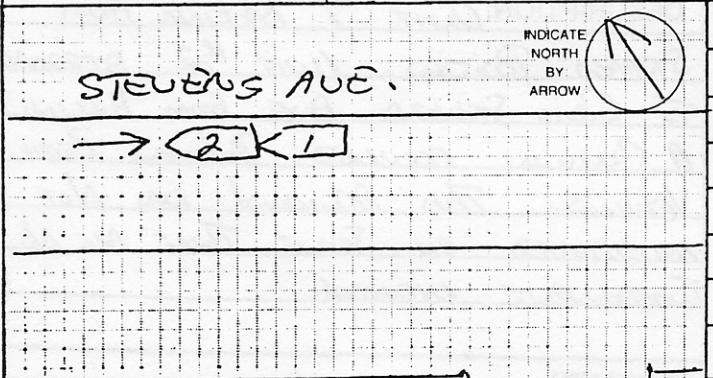
LAST NAME - OWNER 1 CITY OF PORTLAND FIRST NAME MIDDLE
 NUMBER AND STREET 109 MIDDLE ST.

CITY PORTLAND STATE ME

VEHICLE TYPE 4 DR. YEAR AND MAKE 94 CHEVY COLOR BLK/WHT
 LICENSE PLATE NUMBER 617 POLICE YEAR 98 ISSUE STATE ME NO OCCUP 0

VEHICLE IDENTIFICATION NO. 1G1BL52P9RR192558
 INSURANCE CO. SELF INSURED

POLICY NO.
 TOWED BY: DAMAGE CODES DAMAGE ESTIMATE \$200.00



AMBULANCE CODES
 NAME AND ADDRESS OF OWNER OF DAMAGED PROPERTY (OTHER THAN VEH)

TOTAL NUMBER OF PERSONS INVOLVED	<u>2</u>												
NAMES OF ALL PERSONS INVOLVED (DRIVERS PASSENGERS WITNESSES PEDESTRIANS)	25	26	27	28	29	30	31	32	33	34			
											<u>24</u>		<u>M 33</u>
											<u>25</u>	<u>12</u>	<u>11 M 51</u>

INVESTIGATING OFFICER (SIGNATURE) D. WHITE OFFICER NUMBER 158 TROOP OR DEPARTMENT PORTLAND APPROVED DATE 1/7/98

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INVESTIGATING AGENCY: 00305 TRAFFIC ACCIDENT REPORT STATE OF MAINE 98-10341

DATE OF ACCIDENT: 3/10/98 TIME REPORTED: 3-12-98 TIME ARRIVED: 12:30

ROUTE: ON OR NAME OF STREET OR HIGHWAY: STEVENS AVE CITY OR TOWN: BURLINGTON COUNTY: CUMBERLAND

AT: BETWEEN NODE NUMBERS: 3277 3246 DISTANCE FROM SCENE TO NUMBER: 0 MILES 0 TENTHS TO NUMBER: 3246 MILES AND TENTHS TO LANDMARK: 019

UNIT NO. 1 - VEHICLE 1 TOTAL UNITS INV: 2 UNIT NO. 2 - VEH 2 PED BIKE

DRIVER'S LICENSE NUMBER 1: STATE: ME

LAST NAME: FIRST NAME: MIDDLE: L

NUMBER AND STREET: CITY: Raymond STATE: ME CODE NUMBER: 20

DATE OF BIRTH: 8-26-80 SEX: F LICENSE STATUS: A S P N REST. PERM: CLASS: C

LAST NAME - OWNER 1: FIRST NAME: MIDDLE: NUMBER AND STREET: CITY: STATE:

VEHICLE TYPE: Pick up YEAR AND MAKE: 1995 Ford COLOR: Si

LICENSE PLATE NUMBER: YEAR: 98 ISSUE STATE: ME NO OCCUP: 1

VEHICLE IDENTIFICATION NO.: INSURANCE CO.: POLICY NO.:

DRIVER'S LICENSE NUMBER 2: STATE: ME

LAST NAME: FIRST NAME: MIDDLE: NUMBER AND STREET: BIRCHMAN DR

CITY: BURLINGTON STATE: ME CODE NUMBER: 20

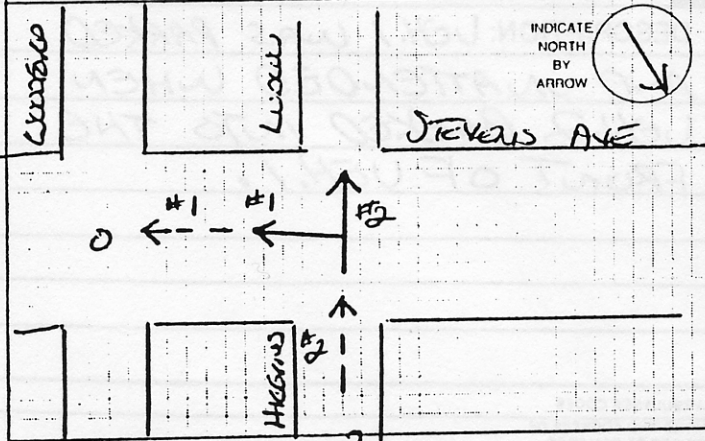
DATE OF BIRTH: SEX: F LICENSE STATUS: A S P N REST. PERM: A CLASS: C

LAST NAME - OWNER 2: FIRST NAME: MIDDLE: NUMBER AND STREET: CITY: STATE:

VEHICLE TYPE: 4dr YEAR AND MAKE: 1989 Mercury COLOR: TAN

LICENSE PLATE NUMBER: YEAR: 98 ISSUE STATE: ME NO OCCUP: 1

VEHICLE IDENTIFICATION NO.: INSURANCE CO.: EMPLOYERS FIRE POLICY NO.:



DESCRIPTION: Unit #1 Backing From Stopped Position. Unit #2 Attempting to Cross Stevens Ave from Higgins St. A Collision Occurred Between Both Vehicles. This Accident Was Not Investigated on Scene. There Are No Independent Witnesses.

TOWED BY: 6 DAMAGE CODES \$300.00 DAMAGE ESTIMATE

TOWED BY: 7 DAMAGE CODES \$1,900.00 DAMAGE ESTIMATE

AMBULANCE CODES	25	26	27	28	29	30	31	32	33	34
NAME AND ADDRESS OF OWNER OF DAMAGED PROPERTY (OTHER THAN VEH)			2	5	1	1	1	1	F	17
			2	5	1	2	1	1	F	71

INVESTIGATING OFFICER (SIGNATURE): Rachel Bette OFFICER NUMBER: 13 TROOP OR DEPARTMENT: BURLINGTON P.D. APPROVED BY: [Signature] DATE: 3-10-98

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