

DATE OF ACCIDENT: MONTH **03**, DAY **11**, YEAR **2004**, DAY OF WEEK **Thu**, TIME **07:00**, TIME REPORTED **07:05**, TIME ARRIVED **07:10**

ROUTE **NORTH BELFAST**, CITY OR TOWN **Augusta**, CODE NUMBER **11020**, COUNTY **Kennebec**, HIT AND RUN

AT **07242**, BETWEEN NODE NUMBERS **07241**, DISTANCE FROM SCENE **0** MILES **4** TNTHS, TO NUMBER **07242**, MILES AND TENTHS TO LANDMARK **N** W S E

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

DRIVER'S LICENSE NUMBER 1 **123456789**, STATE **ME**
 LAST NAME **Jones, John A**, FIRST NAME **John A**, MIDDLE
 NUMBER AND STREET **18 Jones Avenue**
 CITY **Paris**, STATE **ME**, CODE NUMBER **04281**

DRIVER'S LICENSE NUMBER 2 **23876541**, STATE **ME**
 LAST NAME **Doe, Jane C**, FIRST NAME **Jane C**, MIDDLE
 NUMBER AND STREET **45 Princeton Avenue**
 CITY **Gardiner**, STATE **ME**, CODE NUMBER **04345**

DATE OF BIRTH **01/26/1957**, SEX **M**, LICENSE STATUS **A S P N**, REST/PERM **0**, CLASS **C**

DATE OF BIRTH **03/10/1984**, SEX **F**, LICENSE STATUS **A S P N**, REST/PERM **A**, CLASS **C**

LAST NAME - OWNER 1 **Jones, John A**, FIRST NAME **John A**, MIDDLE
 NUMBER AND STREET **18 Jones Avenue**
 CITY **Paris**, STATE **ME**, CODE NUMBER **04281**

LAST NAME - OWNER 2 **Doe, Jane C**, FIRST NAME **Jane C**, MIDDLE
 NUMBER AND STREET **45 Princeton Avenue**
 CITY **Gardiner**, STATE **ME**, CODE NUMBER **04345**

VEHICLE TYPE **4 Door**, YEAR AND MAKE **2002 Chevrolet**, COLOR **Blue (BL)**

VEHICLE TYPE **2 Door**, YEAR AND MAKE **2000 Dodge**, COLOR **Green (GR)**

LICENSE PLATE NUMBER **7645 GC**, YEAR **2004**, ISSUE STATE **ME**, NO OCCUP **1**

LICENSE PLATE NUMBER **2389 HI**, YEAR **2004**, ISSUE STATE **ME**, NO OCCUP **1**

VEHICLE IDENTIFICATION NO **1234567890HJ89**

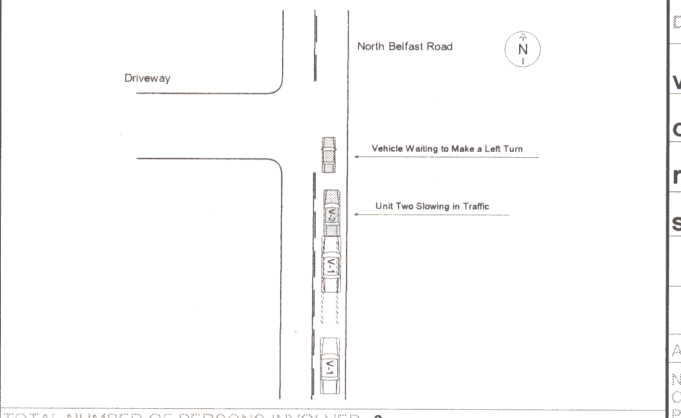
VEHICLE IDENTIFICATION NO **2224446666HIKJT666**

INSURANCE CO. **Peerless Ins NAIC: 1356**

INSURANCE CO. **All State Ins NAIC: 5643**

POLICY NO. **1234567**, TOWED BY: **N/A**, DAMAGE CODES **1, 2, 8**, DAMAGE ESTIMATE **\$2,000.00**

POLICY NO. **222222222**, TOWED BY: **N/A**, DAMAGE CODES **4, 5, 6**, DAMAGE ESTIMATE **\$1,500.00**



DESCRIPTION: **Unit two was slowing in traffic waiting for vehicles in front of her to turn left into a driveway. Unit one was following too close and struck unit two in the rear. Operator of unit one stated he did not see unit two slowing.**

AMBULANCE CODES **N/A(1000)**
 NAME AND ADDRESS OF OWNER OF DAMAGED PROPERTY (OTHER THAN VEH.)

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
Jones, John A (Driver/Owner)	11	11	2	5	12	1	1	1	M	47
Doe, Jane C (Driver/Owner)	11	11	2	5	1	2	1	1	F	20

INVESTIGATING OFFICER (SIGNATURE) **Sgt. Rick McAlister**, OFFICER NUMBER **0000**, TROOP OR DEPARTMENT **MAINE STATE POLICE TRAFFIC DIVISION**, APPROVED BY: **Sgt. Shawn Currie**, DATE **3/11/2004**

1
1
2
2
3
3
4
4
5
13
6
2
7
1
8
1
9
1
10
1
11
45
12
1

13
1
14
10
15
4
16
1
17
14
18
19
1
20
1
21
2
23
1
24
1
LOCAL CODES