

# **APPENDIX 16-C**

**Accident Summary Data** 



		Segment				Cra	shes wi	thin th	e Facility	/ Area		w/ Animal	Crashes	w/o Animal	Crashes
Roadway	From	<b>To</b> t RT 148 4		AADT	2018	2019	2020	2021	Animal	Total No Animal	Total	Crashes/ MEV	Crashes/ 100M VMT	Crashes/ MEV	Crashes/ 100M VMT
Lake Road	RT 78 Olcott	RT 148	4.8 miles	3,180	-	4	-	-	6	4	10	0.00000036	0.18	0.000000239	190.26
Hartland Road	Somerset Townline Road	Lake Road	3.0 miles	931	-	-	-	-	3	0	3	0.0000098	0.61	-	-
Lower Lake Road	Hartland Road	Johnson Creek Road	1.6 miles	229	-	-	-	-	-	0	0	-	2.49	-	-
Quaker Road	RT 18 End RT 148	Hartland/Somerset Townline Road	4.1 miles	2,067	-	-	1	-	-	1	1	0.0000011	0.28	0.000571	668.23
Hosmer Road	West Somerset Road	Lake Road	1.5 miles	271	-	-	-	-	-	0	0	-	2.11	-	-
Hess Road	West Somerset Road	Lake Road	1.3 miles	572	-	-	-	-	-	0	0	-	1.00	-	-

	Page 1' of 3 Pages	New York S	tate Departme	ent of Motor V	'ehicles			
	Local Codes 2019-00067909	POLICE.	ACCIDE	ENT RE	PORT			1
		DED REPORT	MV-104A (6	6/04)				Σ
'	Accident Date Day of We	ek Military Time No.		ured No. Killed	Not Investigat	ed at Scene	Scene   Police Photos	2
Ŀ	Month Day Year 11 30 2019 SATURI	DAY 02:59 Vehi	cles 0	0	Accident Reco	onstructed	Yes V No	
_	VEHICLE 1		- I bramel	EHICLE	BICYCLIST	PEDESTRIAN	OTHER PEDESTRIAN	1
;	VEHICLE 1- Driver License ID Number	State		CLE - Driver e ID Number			State of Lic.	2.
	Driver Name - exactly as printed on license LSA,		Driver	Name - exactly				
	Address (Include Number and Street)				ber and Street)		Apt. No.	
	City or Town Ste							2:
3	N N	ate Zip Code	. Gity o	Town		State	Zip Gode	
[3	Date of Birth Sex Unlicensed	No. of Occupants Public Property	Date of Month	Birth Day Ye	ar Sex Ur	No. of Occupa	ints Public Property	
	Name - exactly as printed on registration	UN Damaged Sex Date of Birth	Name -	exactly as printed	on registration	Sex Ina	Demaged te of Birth	23
4	LSA,		Year		on regionarium		onth Day Year	1
4	Address (Include Number and Street)	Apt. No. Haz. F Mat	Released Address	s (Include Number	and Street)	Apt No. Ha	z Release	]
	City or Town Sta		City or 3	lown .		Apl. No. Ha Go State	de Zip Code	24
1	N Plate Number   State of Reg.   Vehicle Year & Ma	Y			5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
	UNKNOWN NY	vericia Type IIIs	. Code Plate Ni	umber	State of Reg. Vehi	de Year & Make Veh	Icis Type Ins. Gode	
	Ticket/Arrest Number(s)		Tickg//A Number					25
6	Violation Section(s)		Violatio	n				1
1	Check if involved vehicle is:	direck if involved vehicle is:	Section		gram below that	describes the accident,	or draw your own	
	V more than 95 inches wide; V E more than 34 feet long; E	more than 95 inches with more than 34 feet long:		diagram in s	oace #9. Number	the vehicles.		
7	H operated with an overweight permit;	operated with an overw		ReparEnd	Left Turn	Right Angle Right Turn	Head On	26
1	O VEHICLE 1 DAMAGE CODES C	operated with an overdi		1. Sideswips (same dire	3, Left Turn	5, 7	Sideswipe (opposite direction)	-
<u> </u>	L Box 1 - Point of Impact 1 2 L	Box 1 - Point of Impact Box 2 - Most Damage		2 2	0.	4. 8. 7	(opposite direction)	
	Enter up to three 3 4 5	Enter up to three	3 4	ACCIDENT	DIAGRAM			27
	1 more damage codes 1. 2 3 Vehicle By:	more damage codes Vehicle By:		See th	e last nad	ge of the MV-1	04A for the	2
	Towed To: VEHICLE DAMAGE CODING:	Towed To:			nt diagram		on tor the	
	1-13 SEE DIAGRAM ON RIGHT.	·/	<b>†</b>					
	14. UNDERCARRIAGE 17. DEMOLISHED 15. TRAILER 18. NO DAMAGE	2   (   13		9.				_ 28
	16. OVERTURNED 19. OTHER	, \	<u>L</u> .		irs to any one vel wn/Unable to det	icle will be more than \$		15
	Reference Marker   Coordinates (if available)	Place Where Accident O	ccurred;	I L GIRID	wii/Onable to det	ermine 🗸 Yes	∐ No	-
	1 8 Latitude/Northing	County NIAGARA		City	√illage 🔽 Tov	n of NEWFANE	Ε	
	4805745	Road on which accident o	ccurred <u>LA</u>	KE RD		(Route Number or		29
	5 4 0 1 Longitude/Easting	at 1) intersecting street	HESS R	D		<u> </u>		Ļ
	1 2 7 3 204177	or 2)		s of M		(Route Number or	·	
	Accident Description/Officer's notes	feet mlles		AA (INI	iepost, Nearest inter	secting Route Number or S	treet Name)	30
	Investigation at the scene re	vealed that a ve	hicle ra	n the sto	p sign on	Hess Road at	E Lake Road.	
	The vehicle crossed over E La Jeremy Kaiser, stated that he	heard the colli	sion and	observed	a beige 4	4 door sedan 1	leaving the	USE COVER SHEET
	scene east bound on E Lake Ro PROPERTY DAMAGED BY VEHICLE #	ad. Patrol check	ed the a	rea for t	he vehicle	with negative	ve results.	SHEET
	8 9 10 11 12	13 14 15	RUSSELL 16 17		D 18 Na		D-1	J
A L			10 17	- I	7 16 Na	mes of all involved	Date of Death Only	, 
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0								
νL	Officer's Rank	PadesUP No.	INCIC N-	Brog'nt/P	Ctatic (D)	In the second		
D .	nd Signature DEPUTY	Badge/ID No.	NCIC No.	Precint/Post Troop/Zone	Station/Beat Sector	Reviewing Officer WARSOCKI,	Date/Time Reviewed	
	rint Name in COREY M HOHL	0169	03100	3		DAVID	11/30/2019 06:24	

	Page 2 of 3 Pages			•	of Motor Vel				
	Local Codes 2019-00067909	POLI	CE AC	CIDE	NT REP	ORT			19
		ED REPORT	MV-1	104A (6/0	94)				L
1	Accident Date Day of Weel	k Military Time	No. of	No. Injure	d No. Killed	Not Investigated	dat Scene Lef	t Scene Police Photos	20
	Month Day Year 11 30 2019 SATURD.	AY 02:59	Vehicles 1	o	0	Accident Recon	structed	Yes V No	
	VEHICLE				ICLE	BICYCLIST	PEDESTRIAN	OTHER PEDESTRIAN	1
2	VEHICLE - Driver License ID Number		State of Lic.		- Driver D Number			State of Lig.	2
	Driver Name - exactly as printed on license				ime - exactly d on license				
	Address (Include Number and Street)		Apt. No.		(Include Numb	er and Street)		Apt. No.	
	City or Town Stal	e Zip Go	dn.	City or T	ewe.		State	Zip Code	2:
3		e zipoc	uu				Otalia	ZIP GOUB	
	Date of Birth Month Day Year Sex Unicensed N	Pri	blic operty	Dale of Bir Month	th Day Year	Sex Unii	censed No. of Occup	ents Public Property Demaged	
	Name - exactly as printed on registration	ex Date of Birth	maged'	Name -ex	acily as printed o	n registration	Sex D	Damaged ale of Birth	2:
4		Month Day	/ Year					lonth Day Year	
	Address (include Number and Street)	pi. No. Haz. Wali Code	Release	id Address (i	nclude Number a	nd Street)	Apt. Na.	iz i Relitase il - i ode 'i	
<u> </u>	City or Town Slat		-	City or Toy	m		Siale Ci	rde ¦  Zip Gode	24
5.						ara separa di Masia	e Year & Make		
	Plate Number State of Reg. Vehicle Year & Mak	e Vehicle Type	Ins. Code	-1888 140/0	DO) SI	ale of Reg. Vehicl	E TOBI & MURB 90	hicle Type Ins. Code	
	Tickel/Afrest Number(a)			Ticket/Am Number(s					2!
6	Violation			Violation					
	Section(s)  Check if involved vehicle is:	Check if involved ve		Section(s)	Circle the diag	ram below that d	escribes the accident	. or draw your own	
I	V more than 95 inches wide; V more than 34 feet long;	more than 95 in more than 34 fe	102377 (2016) (20		diagram in spa	ce #9. Number t	he vehicles.	•	
7	E mare than 34 feet long. E  H operated with an overweight permit; H	operated with ar		permit;	Rear End	<u></u>	Right Angle Right Turr	Head On	26
	Operated with an overdimension permit.     VEHICLE DAMAGE CODES	operated with an			1. Sideswipe (same direct	3. The Left Turn	Flight Turn	Sideswipe (opposite direction)	
	L Box 1 - Point of Impact 1 1 2 L	Box 1 - Point of Impe	ict	1 2	2	0 🕏	4. 6.7	6	
	Enter up to three 3 4 5	Box 2 - Most Damag Enter up to three	3	4 5	ACCIDENT D	IAGRAM			27
	1	more damage codes Vehicle By:							
		Towed To:							
	1-13 SEE DIAGRAM ON RIGHT.	1	<del></del>	7 '	_				
	14. UNDERCARRIAGE 17. DEMOLISHED	2 -	13	•	9.			*1000	28
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER	, \		∣		s to any one veni /n/Unable to dete	icle will be more than ermine Ye		
	Reference Marker   Coordinates (if available)	Place Where Acc	ident Occurre	red:		ALIFORNIE TO CIETE		<u> </u>	-
	Latitude/Northing	County NIAG	ARA ´	[	City 🔲 V	illage 🔲 Tow	n of		- XX
		Road on which ac	cident occurre	ed			(Route Number o	or Street Name)	29
	Longitude/Easting	at 1) intersecting	street		· · · · · · · · · · · · · · · · · · ·		(Route Number o	,	-
		or 2)	miles	N S E N	O1	onst Nearestinter	secting Route Number or		
	Accident Description/Officer's notes	1000		<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			30
	1800 HESS RD APPLETON, NY 140	08 WITNESS	#1 JEREM	MY J KA	ISER 🌌			NY	
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_	8 9 10 11 12	13 14	15 16	17 B	Y TO	18 Na	mes of all involved	Date of Death Onl	<b>」</b> ¨ ¨
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	Officer's Rank DEPUTY	Badge/I	D No.   NCI	IC No.	Precint/Post	Station/Beat	Reviewing Officer	Date/Time Reviewe	d
D J	Print Name in				Troop/Zone	Sector	WARSOCKI,	11/30/2019	
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Page 3 of 3 Pages Local Codes New York State Department of Motor Vehicles

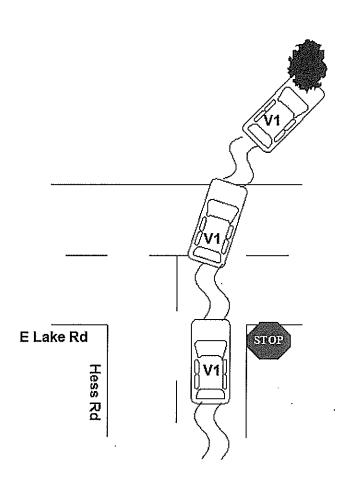
#### POLICE ACCIDENT REPORT

2019-00067909

HKTB86B88K5Z | AMENDED REPORT

Accident Date			Day of Week		No. of	No. Injured	No. Killed	Not Investigated at Scene	Left Scene	Police Photos
Month 11	Day 30	Year 2019	SATURDAY	02:59	Vehicles 1	Ó	0	Accident Reconstructed		Yes V No





	Page 1 of 4 P	ages		w York Stat	-							
t.	Local Codes		POI	LICE A	CCID	EN	Γ REP	ORT				ं   व
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	6 19 20	VEHICLE 1	Y   11:5	5   1	1	0 VEHIC	0	Accident Reco	PEDEST		OTHER OF	Yes V No 2
2	VEHICLE 1- Driver	ARUICE I		State of	lic Web	ICLE	<u> </u>	TRIC LCFIST	Thenesi	RIAN		tate of Lic
	License ID Number			NY	Lice	nse ID I	Vumber					2
	Driver Name - exactly as printed on license ROB	ERTS, MARK A	NDREW	,			e - exactly n license					
	Address (Include Number and	•		AD				er and Street)				Apt. No.
												2
3	City or Town	Stat N	e Zip Y	Code	City	or Tow	n		Stat	B	Zip Code	
4	Date of Birth Sex	Unlicensed No	o. of Occupants	Public		of Birth	ay Year	Sex Ui	ilicensed N	ь, от Оссирал		
		м 🗀	01	Properly Damaged	✓ Mo	nur 😐	<b>29</b> 108				Prope Dama	ig8d
	Name - exactly as printed on registr	ation S	Date of B	irth Day Ye		a - exacil	y as printed o	n registration	s	ex Date Mor	of Birth th Day	Year c
4	ROBERTS, W R		M									Year
1	Address (Include Number and Street	t) A <sub>1</sub>	pt. No. Haz. Mat. Code	Rel	eased Adda	ess (inclu	ide Number e	nd Street)	A	ot No. Haz Mai Code		Released
	City or Town	State		Code	City	or Town			i State	- North Control	Zip Gode	2
5	Plate Number   State of Re	N Y ag.   Vehicle Year & Make		pe Ins. C	ode Distr	Okon-akan	lei	or of Dee I Vote	ale Vene II Mali	l Vente		Total State
1	Plate Number State of Re	2013 CHEV	SUBN	pe Ins. C	S100000	Number	31	nie of Reg.   Veh	cle Year & Maki	) Veriic	ів Туро	ins Goda
	Ticket/Arrest		· Fr			al/Arrest		1				2:
6	Number(s) Violation					iber(s) ilion						2
1	Section(s) [Check if involved vehicle is:		Check if involved	livribrib (Fee	Sect	ion(s)						
	more than 95 inches wi			5 inches wide				ram below that ace #9. Number		accident, o	t draw you	rown
	E more than 34 feet long;	Ė	more than 3	a de la companya del companya de la companya del companya de la co			Repr End	Left_Turn	Right Angle	Right Turn	Head On	
7	I operated with an overw	1.8		h an overwel; h an overdim		mit	1.	- 3. Y ×	. 1	5.	7.	
1	C VEHICLE 1 DAMAG	GE CODES C	VEHICLE	DAMAGE			Sideswipe (same direc	tkin) Left Turn		Right Turn	Skletwipe (opposite	
	L Box 1 - Point of Impact E Box 2 - Most Damage	2 2 L	Box 1 - Point of Box 2 - Most Da	Impact made	1	2	2	- 0 7	4,	6. 7	<u>le.</u> →	
	Enter up to three 1 more damage codes	3 4 5	Enter up to three more damage co	3	4	5 A	CCIDENT D	DIAGRAM				25
	Vehicle By:		Vehicle By:	/1003			See the	last pa	ae of th	e MV-1	04A for	r the
	Towed To:	Sales and the sa	Towed To:	_		688888		ıt diagra	-	•		
	VEHICLE DAMAGE CODING: 1-13 SEE DIAGRAM ON RIGHT.		· /		<u>-</u> 7							
	14. UNDERCARRIAGE 17	. DEMOLISHED	2 — (	13		9.						
	15. TRAILER 18	. NO DAMAGE . OTHER	\ \ \		ļ	C	ost of repair	s to any one ve	hicle will be m	ore than \$1	000.	30
			1 12	11	10		Unknov	vn/Unable to de	termine	<b>∨</b> Yes		No
	<del></del>	inates (if available) te/Northing	Place Where County NIX		curred:		🗀	🗀			_	
	Laude	erroruning	Road on whice		curred		City U		wn of <u>S</u>	OMERSE	T	25
			Trodu on wino	ii acoldelit oc	•		ER ROAD	)	(Route	Number or S	Street Name)	
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	1 1 1		or 2)		-   E	□ s □ w	of	annel Negra - Chet			-	
	Accident Description/Officer's	notes	feet	miles	니느	<u> </u>	(IANI)	epost, Nearest inte	staccing Long	Halting Of 20	eer ivalile)	30
	Vehicle #1 was tr		bound on	Lake Roa	ad app	coach	ing Qua	aker Road	l. The ve	ehicle	attemp	1
	turn Northbound o											sign use
	on the west side a license plate											Shee
	in the Town of So										600 0- Maj. 1900	Ran V
Аг	8 9 10	11 12	13 ` 1	4 15	16	17 BY	то	) 18 N	lames of all i	nvolved	Date of	Death Only
L /	A 1 1 X	1 59	· M -					ROB	ERTS, MA	ARK AND	RE	
L	В											
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	E											
V	F S S S S S S S S S S S S S S S S S S S											
	Officer's Rank DEPUTY	Dep. 2	etrick Bad	ge/ID No.	NCIC No.			Station/Beat Sector	Reviewing			e Reviewed
_ F	Print Name in KEITH D	HETRICK	01	21	03100	3			RINDFLE		6/23/	

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	. Page	2 of 4	Pages			New Yo	rk State	e Depa	artment	of Motor Vel	hicles						
n.	Local	Codes	7.6		P	OLIC	EA	CCI	DEN	IT REP	OR	Γ					19
		20-319 KTB95B		AMENDE	n <i>REDC</i>	ne T	М	V-10	4A (6/0	4)							
1	Accident Date			Day of Week	Military	mosenness.	No. of	15	lo foiura	đ No, Killed	INot Inv	estigated	at Scene	□ Left S	Scene Po	olice Photos	20
	Month 6	Day 19	Year 2020	FRIDAY	1 '	:55	Vehicles	s  ˈ	0. aljule 0	0		nt Recon		나-나 _	<b>₹</b>	Yes V No	
			VEH	<del>. l</del>					VEH	ICLE [	ВІСУС	CLIST [	PEDES'			PEDESTRIAN	ļ
2	VEHICLE License ID I					S	itale of l			- Driver D Number						State of Lic.	21
	Driver Nami	e - exactly				L			Jriyer Ne	me - exactly					I .		
	as printed o	and the second	er and Street	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Apt			l on license (include Numb	per and S	Street)				Apl. No.	
	Audiosa (III	isidale (100)	er and bricer				Papa										22
3	City or Tow	n		State		Zip Code	1		Cily or T	awn			Sta	le.	Zip Cod	<b>D</b>	
	Date of Birth Month C	Jay Yeur	Sex	Unlicensed No. o	of Occupant	s Publ Prop		_ l'	Date of Blr Month	in Day Yesi	Sex	Unli	censed h	lo, of Occupen		lic	
					15.	Dam	agad		unas s	actly as printed o	n contetro	lian		Sex I Date		naged	23
4	Name - exact	iy as prinko o	n registration	Sex	Mon	of Birth th Day	Yei		Aniin - ax	acity as printed o	ii i tedlessi	uun		Mor		Year	
	Address (inch	ide Number a	nd Street)	Apt	No. Haz.		/ Raid	ased /	\ddress (li	nclude Number e	ind Street	)	,	ipi No. Haz Mai Odd		Released	
L	City or Tour			State	No. Har. Code	Zip Code	1	Ш	Oity or You	ers a Alexandra m			Sta		e Zip Gode		24
5	City or Town							20.0									
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6	Violation							0.4	Violetion								
	Section(s)	involved ve	ricle is;	ICh	eck if invi	olved vehi	cla is:	<u> </u>	Section(s)	Circle the diag	ram bel	ow that d	escribes th	e accident. c	or draw vo	ur own	
<u>:</u>		e than 95 in e than 34 fe		<u>v</u>		an 95 inch an 34 feet	1612 36			diagram in spa	ace #9. i	Number t	he vehicles				
7	lue [mane] [77]		overweight i	emit, H		d with an o		iht pen	nit;	Rear End	←   Le!	t Tum	Right Angle	Right Turn	Head O	·	26
			overdimensi DAMAGE CC			d with an o				5ideswipe (same direc	tion) Let	i Tum		Füght Turn	Sideswi	e direction)	
<u> </u>	L Box 1 - F	oint of Impr	ict	1 2 L Bo	x 1 - Poin	t of Impac I Damage	t e	1	2	2,	- O.	F	4,	6. 7	0,	>**-	
	Enter up		3	4 5 En	ter up to t	hree	3	4	5	ACCIDENT D	DIAGRAI	М					27
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	Referenc	e Marker	Coordinates	(if available)		ere Accio	lent Occ		<u> </u>	<u> </u>							
	1 1	r r	Latitude/Nor	-	٠,	NIAGA			[	City \	/illage	Tow	n of				29
					Road on 1	which acc	ident oc	curred					(Rou	ite Number or	Street Nam	e)	
	1 1		Longitude/E	asting	at 1) inte	ersecting s	street						(Rot	ite Number or	Street Nam	e)	
			-		or 2) 	eet	miles	- H		S of N (Mil	lepost, Ne	arest inten	secting Route	Number or S	treet Name	<del></del>	
			fficer's notes											•			30
	Robert	s. Mark	appear	ed to be hong the ini-	aving tial i	a med	ical	prol	olem obert	and EMS s he had	was r	reques	st to r Lection	espond of the	to 🚾	dant	
	While	EMS was	on scen	ne he said	he co	ould n	ot sl	Lowd	own t	o turn o	nto c	guaker	road	because	some	one was	USE COVER SHEET
	driving	g right dical p	behind roblems	him. Robe: . No injur:	rts wa ies wa	as tra ere ob	nspor	cted ed o	to L r rep	ockport orted as	Hospi	tal f	for an	evaluat	lion d	ue to	N
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L.	E														-		
	Officer's Ran		rY	Dep. He	ا ستا و توا	Badge/IC	No.	NCIC		Precint/Post			Reviewin	g Officer	Date/T	ime Reviewed	i i
ρL	and Signatur Print Name i	e			were.					Troop/Zone	Sector		1	EISCH,		/2020	
	Full	VETT	H D HETE	LLCK		0121		0310	00	3			PATRIC	.ĸ	08:5	J	

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		Local (						PO	LICE	ACC	IDEN	T REF	PORT							19
		<u></u>	20-319		4_,	ANZEN	5-5	proop		MV-10	04A (6/04	<b>!</b> )								
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	Accid	dent Date Ionth	Day	Year	1	ay of We		Military Tin	ne No. Vel	. of hicles	No. Injured		Not Invest			_	Left Scer	ie F	olice Photo	
	┦	6	19	2020	1_	FRIDA	AY	11:5	5	1	0	0	Accident F	<u></u>	tructed		V		Yes 🗸 PEDESTRI	
	Normania.	uo e	5	VI	EHICLE	=			To be to	of Lic.	VEHICLE VEHICLE	L	BICYCLIS	51 <u> </u>	Thenes	IRIAN	Поп	ПЕК	State of Li	
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Page 4 of 4 Page

New York State Department of Motor Vehicles

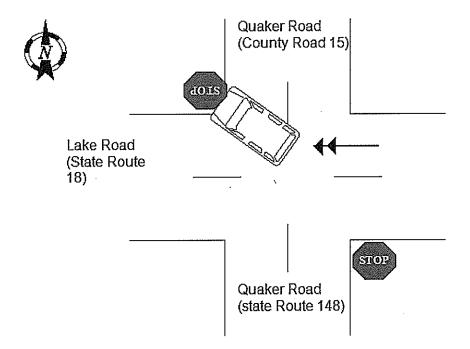
POLICE ACCIDENT REPORT

Local Codes 20-31976

HKTB95BZV3FP

AMENDED REPORT

Accident Date		Vess	Day of Week	Military Time	No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene	Left Scene	Police Photos
Month 6	19	Year 2020	FRIDAY	11:55	1	0	0	Accident Reconstructed		Yes V No



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	2018-00036488  HKTB908FCH88  AMENDED REPORT	MV-10	04A (6/04	1)		•		61
1								
1_	Accident Date Day of Week Military Time Month Day Year	No. of Vehicles	•	No. Killed	Not investigated		_  _	20
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2	License ID Number		License IC				Gald of Lic.	21
<u> </u>	Driver Name - exactly as printed on license GOODRICH, JOHN			ne - exactly on license				
	Address (Include Number and Street)				er and Street)		Apt. Ng.	
								22
3	City or Town State Zip Cod	e	City or To	wn		State	Zip Gode	
1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date of Birth Month	l Day Year	Sex Unli	censed No. of Occupant		
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	Name - exactly as printed on registration Sex Date of Birth Month Day	Year	Name - exa	clly as printed o	n registration	Sex Date Mon	of Birth Ih Day Year	23 7
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	City or Town State Zip Code	<u> </u>	City or Town	)		State	Zip Code	2-7
5		Ins. Code	Plate Numb	or ISI	ate of Reg.   Vehicl	e Year & Make	e Type     Ins. Gode	<u></u>
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6			Violation					1
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	more than 95 inches wide;				jram below that d ace #9. Number t	escribes the accident, o he vehicles.	r draw your own	
	E more than 34 feet long;			Rear End	الثا	Right Angle Right Turn	Head On	26
7	appropriate with an averdimention permit appropriate with an	in Adad in the Uni	edition in the second	1.	3. "	5.	7.	
1	C VEHICLE 1 DAMAGE CODES C VEHICLE C	JAMAGE COD		Sideawipe (same direc	tkin) Left Turn	Right Turn	Sideswips (opposite direction)	
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	Enter up to three 3 4 5 Enter up to three more damage codes 1 12 more damage codes		4 5	ACCIDENT I	DIAGRAM			27 1
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	Towed To:	5 ¢		accider	nt diagram			
	VEHICLE DAMAGE CODING:  1-13 SEE DIAGRAM ON RIGHT.		7					
	14. UNDERCARRIAGE 17. DEMOLISHED 2	13	*	9.				28
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER				·	icle will be more than \$1	_	7
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	1 2 8 1 or 2) 100 feet	miles V	N   S   E   N			secting Route Number or St	reet Name)	
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	Road for a report of a single motor vehice interviewed the operator of VEHICLE #1 (N	THE ACCIO	dent in	NOTATUG	GOODRICH	Jpon arrivai, . GOODRICH s	tated while	USE OVER HEET
	operating VEHICLE #1 he was traveling wes	st on Lak	ce Road	l. GOODR	ICH stated	d in the area		N
	Road a deer entered the roadway from the							ΙV
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New York State Department of Motor Vehicles

### POLICE ACCIDENT REPORT

2018-00036488 . HKTB908FCH88 AMENI

AMENDED REPORT

Accident Date			Day of Week		No. of	No. Injured	No. Killed	Not Investigated at Scene	Left Scene	Police Photos
Month 7	Day 3	Year 2018	TUESDAY	09:57	Vehicles 1	ó	0	Accident Reconstructed		Yes V No





e		Page	1 of	3 Pages	3			New Y	′ork Sta	te Dep	artmen	t of M	otor Ve	ehicles			•			
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7	Page	2 of 3	Pages			New Yo	rk State D	epartment	of Motor Vei	nicles					
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3	City or To	γn		Ste	ite	Zip God	8	City or Ti	awn		Şit	ate	Zip (	200B	
	Date of Birth Month		Sex	Unlicensed	No. of Occupar			Date of Bir Month		Sex	Unilcensed	No. of Occu		Public Property	7
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	Name - exe	tly as printed o	n registration			of Birth nth Day	Year	Name - ax	acily as printed o	n registration			Date of Birth Month - L	l Day Year	23
4			12, 175												<u> </u>
	Address (Inc	lude Number a	nd Street)		Apt No. Haz	A	Release	d Address (li	nclude Number a	nd Street)		Apl. No.	ez al ode	Releas	24
	City or Town			Sli		Zip Code		City or Tox	m .		Si	alo .	Zip C	ode	
5	Plate Numb	. lei	nte of Reg.   \	/ehicle Year & Ma	ke Mehi	de Type	I Ins. Code	Plate Num	ner ISt	ate of Reg.   V	ehicle Year & Mi	ike IV	ehicis Type	Ins. Cod	D.
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	Ticket/Arres							Ticket/Arre Number(s)							25
6	Violation							Violation							
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	C VE	HICLE	DAMAGE C	ODES	VEHIC	uer I	AMAGE CO		Sideswipe (same direc	tion) Left Turr	_  →	Right Tu	m (op)	eswipe posite direction)	·
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		1 I			- or 2)	feet	miles		S of(Mil	epost, Nearest	Intersecting Rou	ite Number o	or Street Na	ame)	
	Accident	Description/O	l Officer's note:	S									V	<u> </u>	30
	Ottav	iano was	extri	ated by	fire pe	rsonne	el. Ha	ackenbe	rg had c	omplain	ts of ba	ck pai	n and	had a	
	fishi	ng lure	stuck i	n her sc pain an	alp, sh	e was	transpo	orted t	o ECMC b by Mercy	y Olcot Fliaht	t Fire.	Ottavı o was	ano c secur	omplaine	USE COVER SHEET
	Hacker	g and ab nberg's	family	and was	not inj	ured.	Vehicle	e 1 was	demolis	hed and	towed b	y Hill	.man's		SHEET
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Page 3 of 3 Page

Local Codes 19-28320

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New York State Department of Motor Vehicles

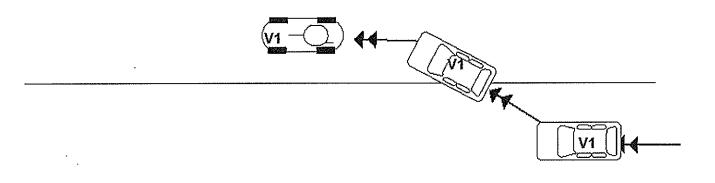
#### POLICE ACCIDENT REPORT

AMENDED REPORT

MV-104A (6/04)

Accident Date		Vess	Day of Week		No. of Vehicles	1	No. Killed	Not Investigated at Scene	Left Scene	Police Photos
Month 5	Day 11	Year 2019	SATURDAY	05:52	venicies 1	2	0	Accident Reconstructed		Yes 🗸 No





LAKE ROAD

	of 7 Peggs  Ne State Department of Motor Vehicles OUSE ACCIDENT REPORT	10.1
	19-1299.   MV-104A (6/04)  AMENDED REPORT DMV COPY	2/
	Accident Date Day of Week Military Time No. of No. tributed No. Killed Not Insured Sound Left Scene Police Photos	20
	06 03 2019 MO 2120 1 D Accident Reconstructed & Ares 2 No	1
2	VEHICLE 1 - Driver  State of Lic.  State of Lic.	
-	Driver Name -exactly ANUTSU TIMES N- Driver Name -exactly as printed on license  BY  Driver Name -exactly as printed on license	21
	Address (Include Number & Street)  Apt. No. Address (Include Number & Street)  Apt. No.	
7 <del>5</del>		22
3	Date of Birth Sex Unlicensed No. of Occupants Public Property Damaged Date of Birth Day Year	
	Name-exactly as printed on registration  Sex  Date of Birth  Month  Day  Year  Month  Name-exactly as printed on registration  Sex  Date of Birth  Month  Day  Year	23
	Address (Include Number & Street) Apt. No. Haz. Released Address (Include Number & Street) Apt. No. Haz. Released	2
4	Mat Gode □ Mat. Code □	
2		24
5	Plate Number State of Reg. Vehicle Year & Make Vehicle Type Ins. Code Plate Number State of Reg. Vehicle Year & Make Vehicle Type Ins. Code Code Code Code Code Code Code Code	
1	Ticket/Arrest Ticket/Arrest Number(s) Number(s)	
	Violation Violation Section(s) Section(s)	
6	Check if involved vehicle is: Check if involved vehicle is: Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.	<sup>25</sup>
/	V — more than 34 feet long; E — poperated with an overweight permit; V □ more than 34 feet long; Rear End Left Turn Right Angle Right Turn Head On	
	H Coperated with an overdimension permit.  VEHICLE 1 DAMAGE CODES  VEHICLE 2 DAMAGE CODES  Sideswipe  Left Turn  Sideswipe	ZR.
13	C Box 1 - Point of Impact 1 2 Sideswipe (same direction) Left Turn (Opposite direction) C Box 2 - Most Damage 1 2 Right Turn (Opposite direction)	7
4	E Enter up to three more Damage Codes   3   4   5   E Enter up to three more Damage Codes   3   4   5   ACCIDENT DIAGRAM	لــــا
	Vehicle By Towed:	7
	То	
	VEHICLE DAMAGE CODING:  1-13. SEE DIAGRAM ON RIGHT.	
	14. UNDERCARRIAGE 17. DEMOLISHED 2 13 8 9	
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER Cost of repairs to any one vehicle will be more than \$1000.	28
	Reference Marker   Coordinates (if available)   Place Where Accident Occurred:	
	Latitude/Northing: County NIACARA City Village Town of Sometimes.	_
	Road on which accident occurred 7766 LAKE RO (S7)  (Route Number or Street Name)	29
	Longitude/Easting: (Route Number or Street Name)	
	or 2) Feet Miles SE OW of Melepost, Nearest intersecting Route Number or Street Name)	
	Accident Description/Officer's Notes USFICE #1 WAS TRAVELING EAST ON LAKE RO(ST) VETICE #1 3 STRUCK A DEER AS THE ANIMAL ATTEMPTED TO TRAVEL SOUTHBOURD ACROSS	30
	The UNIDERS	USE
		USE OVER HEET
ا	8 9 10 11 12 13 14 15 16 17 BY TO 18 Names of all involved Date of Death On	ly
L A	1 33 M KANUTSU JAMES N -	$\exists$
N C	1 3 7 1 58 F TONNIE RATHERINE G -	+
ρ̈́Ρ		
Off	Badge/ID No. NCIC No. Precinct/Post Station/Beat/ Reviewing Date/Time Reviewed	J
Pri	Troop/Zone Sector Officer  2917 A3/5944 — Sector Officer  Pull Assessed, 5.	470

	Page of Pages N York State Department of Motor Vehicles Cocal Codes PC CE ACCIDENT REPORT	19
	19-1610 MV-104A (6/04)  AMENDED REPORT DMV COPY	131
1	Accident Date Day of Week Military Time No. of Vehicles  No. Injured No. Killed Not Investigated at Some  Left Scene Police Photo Accident Reconstructed  Uyes United No. Killed Not Investigated at Some  Accident Reconstructed	
	VEHICLE 1 ME VEHICLE 2 BICYCLIST PEDESTRIAN OTHER PEDESTRIAN	N c.
2	Ucense ID Number 587 164 191 Same Sel.c. Univer Name - exactly FARNHAM, ELLEN MARIE Driver Name - exactly as printed on license FARNHAM, ELLEN MARIE Sprinted on license COTRISS, WILLIAM M	21
-	Address (Include Number & Street) Apt. No. Address (Include Number & Street) Apt. No. 16 BIDWELL PKWY Apt. No. 10774 TELEGRAPH RD	
	City or Town BUFFALO State Zip Code 222 City or Town BDINA NY THOS	61
1		
	Name-exactly as printed on registration  Name-exactly as printed on registration  Sex Date of Birth  Month Pay Ye  Cotr 135, WILL IAM M  Month Pay Ye  On Page 18 PK  Month Pay Ye  No Page 18	<sup>23</sup> 43
4	Address (Include Number & Street)  Apt. No. Haz. Released Address (Include Number & Street)  Apt. No. Haz. Released No. Haz. Released No.	ed
	City or Town State Zip Code Zip Code State Zip Code Zip C	3
5	Plate Number HRY9994 State of Reg. Vehicle Year & Make 1999 TOWTH 4DSD 100 Z888HY State of Reg. Vehicle Year & Make 100 Z888HY NY 2019 CHEV 4050 05	te
I	Ticket/Arrest Number(s)  Ticket/Arrest Number(s)  Ticket/Arrest Number(s)	
	Violation Section(s)  Check if involved vehicle is:  Check if involved vehicle is:  Check if involved vehicle is:  Circle the diagram below that describes the accident, or draw your or	25
6	U more than 95 inches wide; U more than 95 inches wide; diagram in space #9. Number the vehicles.  V more than 34 feet long; diagram in space #9. Number the vehicles.	世
	E	26
7	C Box 1 - Point of Impact L Box 2 - Most Damage C L Box 2 - Most Damage Sideswipe (same direction) 2.	a) 1
	E Enter up to three more Damage Codes a 4 5 E Enter up to three more Damage Codes a 5 ACCIDENT DIAGRAM	
	Vehicle By Towed: To To	27
	VEHICLE DAMAGE CODING:  4	$\vdash$
	1-13. SEE DIAGRAM ON RIGHT.  14. UNDERCARRIAGE 17. DEMOLISHED 2 13 9.	
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER Cost of repairs to any one vehicle will be more than \$1000.	28 1
	Reference Marker   Coordinates (if available)   Place Where Accident Occurred:	+"
	1 8 Latitude/Northing: County NIAGARA   City   Village A Town of SOMERSE    Road on which accident occurred LAKE RD ,	29
	S 4 0 1 (Route Number or Street Name)  at 1) intersecting street (Route Number or Street Name)	
	1 3 2 3 or 2) O.2 DIS ON OF OUR RANGE (Miles or Street Name)	
	Accident Description/Officer's Notes  Two dang ran across Lake Rd causing the vehicles to suddenlytop. Vehicle # 1	30
	was traveling east on Lake Rd (1887). Vehicle # 2 was traveling east on	USE COVER SHEET
	Lake Rd (18-87). Vehicle #2 8 lowed 8 udden by these to dogs thousing Lake Rd. Vehicle #1 struck Vehicle #2 due to improper tollowing distance.	N
۸ſ	8 9 10 11 12 13 14 15 16 17 BY TO 18 Names of all involved Date of Dec	th Only
֝֞֞֜֝֞֜֜֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֓֓֓֡֓֜֡֓֓֡֡֡֓֜֡֓֡֡֓֡	1 2 4 1 25 F ANGELICA R. MINOIA	
0 0 0 0	o a line of the control of the contr	
L > E		
O	Difficer's Rank Patrolnon Made J. Time Badge/ID No. NCIC No. Precinct/Post Station/Beat/ Reviewing Officer CAIS 2914	
	Print Name Mark J. Zimb 2918 23590 Towns of Smarch 7/21/19 C	2000

	Page 1 of 3 Pages		partment of Motor Vehicles	
	19-2634		CIDENT REPORT 04A (6/04)	1
	Accident Date Day of Week Month Day Year 10 31 2019 Thursda	Military Time No. of	The state of the s	₩ No 4
2	License ID Number 794287508 Driver Name - exactly	State of Lic. NY	VEHICLE 2- Driver	
	as printed on license ECKER, COLE JOS Address (Include Number and Street) 8486 LAKE RD	EPH Apt. No.	as printed on license PASTWICK, JEFFREY P Address (Include Number and Street) 8487 LAKE RD	Apt. No.
3	City or Town State BARKER NY Date of Birth	14.0120000	City or Town         State         Zip Code           BARKER         NY         140120000	2
L	Month Day Year 39X Unicensed No. 3 9 2003 M	0. of Occupants Public Property Damaged	Date of Birth Sex Unlicensed No. of Occupants Public Property 5 20 1983 M 01 01 Damaged	
1	ECKER, HEATHER S	Month Day Year 12 5 1972	PASTWICK, JEFFREY P M 5 20 1	Year 983
 	8486 LAKE RD City or Town State		8487 LAKE RD Apt. No. Mat. Code  City or Town State Zio Code	Released 24
1	Plate Number		BARKER NY 14012-0000  Plate Number State of Reg.   Vehicle Year & Make   Vehicle Type   Ins.	. Code 93
F 6	Ticket/Arrest Number(s)		Ticket/Arrest Number(s)	26
2	Section(s)  Check if involved vehicle is:	heck if involved vehicle is: more than 95 inches wide:	Violation Section(s)  Circle the diagram below that describes the accident, or draw your own	15
7	V	more than 34 feet long; operated with an overweight pe	diagram in space #9. Number the vehicles.	26
3	C VEHICLE 1 DAMAGE CODES C L Box 1 - Point of Impact 1 2 L	operated with an overdimension VEHICLE 2 DAMAGE COL	permit. 1. 3. 5. 7.	,,
	Enter up to three 3 4 5	ox 2 - Most Damage 10 inter up to three nore damage codes 9 11	10 2. 10. 14. 18. 18. 19. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	27
		/ehicle By: lowed To:	See the last page of the MV-104A for the accident diagram.	he 1
	1-13 SEE DIAGRAM ON RIGHT.  14. UNDERCARRIAGE 17. DEMOLISHED		9.	
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER	12 11 10	Cost of repairs to any one vehicle will be more than \$1000.  Unknown/Unable to determine Yes V No	28
	Reference Marker Coordinates (if available) Latitude/Northing	Place Where Accident Occurred County NIAGARA	I:  ☐ City ☐ Village ✔ Town of SOMERSET	
	Longitude/Easting	Road on which accident occurred at 1) intersecting street	LAKE ROAD (Route Number or Street Name)	
		or 2)	N S of 20 METERS WEST OF ROUTE Number or Street Name) - I	10
	Accident Description/Officer's notes On above date, time, and locat	tion D2 of V2 states	that he was parked on the side of the	30
	hit V2 on the left rear side of states that V2 was pulling away	of the vehicle. D1 of the vehicle.	g out of their driveway and continued until V f V1 stated that he did indeed back up but	COVER
A	8 9 10 11 12	7 from the side of t 13 14 15 16	he road onto Lake  17 BY TO 18 Names of all involved Date of Deat	
	A     1     1     4     1     16       B     1     3     4     1     16	M M	ECKER, COLE JOSEPH MASON, ROBERT D	
N F	2 1 4 1 36	M	PASTWICK, JEFFREY P	12000
0 1 0				
E	Officer's Rank PATROL Juylz Brown	Badge/ID No. NCIC	Troop/Zone Sector Date/Time Re	viewed
	ull KYLE BOND	2921 031	59 CC C 11/06/20	1,9

	Page 2 of 3 Pages	New York State	Department of Motor Vehicles		
	Local Codes 19-2634		CIDENT REPORT -104A (6/04)		19
1		) REPORT	-1047 (0/04)		<u> </u>
	Accident Date Day of Week Month Day Year 10 31 2019 Thursday VEHICLE	Military Time No. of Vehicles 2	0 0 Accident	stigated at Scene Left Scene Police Pho Reconstructed Yes	No
2	VEHICLE - Driver	State of Lin	VEHICLE BICYCL	IST PEDESTRIAN OTHER PEDESTR	-
1	License ID Number Driver Name - exactly		License ID Number  Driver Name - exactly	Sime of E	21
	as printed on license		as printed on license		
	Address (Include Number and Street)	Apt t	Address (Include Number and Str	Get) Apt.	10000
3	- City or Town State	Zip Gode	City or Town	State Zip Code	22
	Date of Birth Morth Day Year Sex Unlicensed No. of	Occupants Public Property	Date of Birth Month Day Year Sex	Unlicensed No. of Occupants Public	
	Name - exactly as printed on registration Sex	Damaged Date of Birth		Property Damaged	23
4		Month Day Year	Name - exactly as printed on registratio	n Sex Date of Birth Month Day Yea	RECEIVED IN
	Address (Include Number and Street) Apt. N	lo. Haz Relea Mat. Code	ed Address (Include Number and Street)	Apt No. Haz Rele	ased
	City or Town State	Zip Code	Qity or Town	Apt. No. Har Rele Code State Zip Code	24
5	Plate Number   State of Reg.   Vehicle Year & Make	Vehicle Type Ins. Coo			
L				Vehicle Year & Make Vehicle Type Ins. Co	ide .
	Ticket/Arrest Number(s)		Ticket/Arrest Number(s)		25
6	Violation Section(s)		Violation Section(in)		
Щ.		ck if involved vehicle is: more than 95 inches wide;	Circle the diagram below diagram in space #9. Nu	that describes the accident, or draw your own	
	E more than 34 feet long;	more than 34 feet long;	Rear End Left.1		
7	operated with an overdimension permit.	operated with an overweigh operated with an overdimen	ion normit. 1. 3.	<b>∀</b> 1 5. 7. → ←	26
<u> </u>	C VEHICLE DAMAGE CODES C	VEHICLE DAMAGE C		(coposite direction)	200000
	E Box 2 - Most Damage E Box	2 - Most Damage	2. 10.	1. 6. 7	27
	more damage codes mor	e damage codes	S AGGISENT SINGIVIE		-
	Towed To:	licle By; yed To:	Y		-
	VEHICLE DAMAGE CODING: 1-13 SEE DIAGRAM ON RIGHT.		7'		
	14. UNDERCARRIAGE 17. DEMOLISHED 15. TRAILER 18. NO DAMAGE	12	9.		28
	16. OVERTURNED 19. OTHER		- I   □	ne vehicle will be more than \$1000. to determine Yes No	1
	5,11000	lace Where Accident Occu	E	to determine Yes No	$\neg \Gamma$
		County NIAGARA  Road on which accident occu	City Village	Town of	29
)				(Route Number or Street Name)	- "
		at 1) intersecting street	N S of	(Route Number or Street Name)	-  -
		feet miles		st Intersecting Route Number or Street Name)	-
	Road. Accident report numbers w	ere given to bot	h drivers and evolain	ed the process of how to are	30
	a copy of the reports and send	them to their in	surance companies.	ed the process of now to ge	
					USE COVER SHEET
į	8 9 10 11 12				N
A	Desired to the second s	13 14 15 1	17 BY TO 18	Names of all involved Date of Death	Only
L B					
NC					(F) (1)
OVO					
니늄					
- 10.	Officer's Rank PATROL Surfz Burnt	Badge/ID No. N	CIC No.   Precint/Post   Station/B	eat Reviewing Officer Date/Time Review	wed
P	Print Name in KYLE BOND		Troop/Zone Sector	1/20/19	
[ ]	WII.	2921 0	3159 CC C	1100	

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Local Codes

19-2634

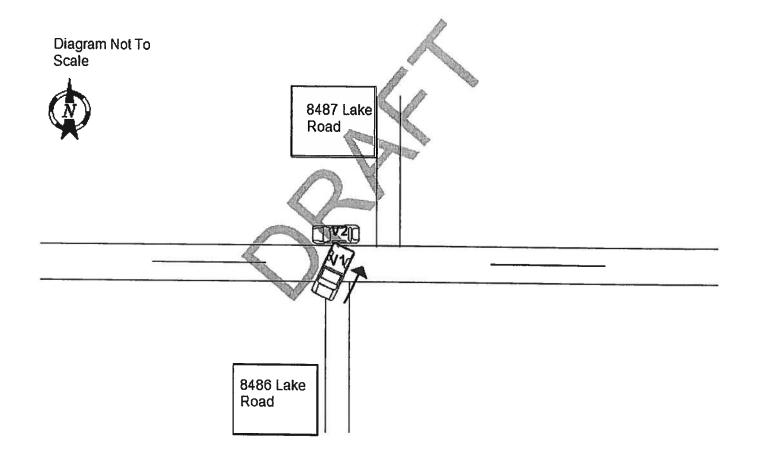
New York State Department of Motor Vehicles

### POLICE ACCIDENT REPORT

MV-104A (6/04)

HKTB291B5496H AMENDED REPORT

Accident Date  Month Day Year			Year	Day of Week		No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene   Left Scene   Police Photos					
, 	10	31	2019	Thursday	17:00	2	0	0	Accident Reconstructed		Yes V No			



-	Page 1 of 2 Pages	New York State De	epartment of Motor Vehicles
	Local Codes 19-2776	POLICE ACC	CIDENT REPORT
		MV 1	04A (6/04)
1		<del></del>	
-	Moritor Day Tear	Military Time No. of Vehicles	No. Injured No. Killed Not Investigated at Scene Left Scene Police Photos
	11   15   2019   FRIDAY	17:55 1	0 0 Accident Reconstructed Yes No
2	VEHICLE 1- Driver	State of Lic.	VEHICLE BICYCLIST PEDESTRIAN OTHER PEDESTRIAN  VEHICLE - Driver
-	License ID Number 437266720  Driver Name - exactly	NY	License ID Number
Ь	as printed on license THUMAN, JEFFREY TH	OMAS JR	Driver Name - exactly as printed on license
	Address (Include Number and Street) 8463 LOWER LAKE RD	Apt. No.	Address (Include Number and Street) Apt. No
	City or Town State	Zip Code	
1	BARKER NY	140120000	City or Town State Zip Code
Ļ	Month Day Year Sex Officerised No. of O	ccupants Public Property	Date of Birth Month Day Year Sex Unlicensed No of Occupants Public
	5   30   1996   M     0  Name - exactly as printed on registration   Sex	2 Damaged  Date of Birth	Property Damaged
4	THUMAN JR, JEFFREY T M	Month Day Year	Name - exactly as printed on registration Sex Date of Birth Month Day Year
5	Address (Include Number and Street)	5 30 1996 Haz. Released	All Property and the second se
	8463 LOWER LAKE RD	Mat	Well Code
5	BARKER NY	Zip Code 14012-0000	City or Town State Zip Code
1	Plate Number State of Reg. Vehicle Year & Make HME 4125 NY 2017 KIA	Vehicle Type Ins. Code 4 DSD 328	Plate Number State of Reg.   Vehicle Year & Make   Vehicle Type   Ins. Code
-	Ticket/Arrest	4D3D 328	Ticket/Arrest A
6	Number(s) Violation		Number(s)
1	Section(s)		Violation Section(s)
		if involved vehicle is: ore than 95 inches wide;	Circle the diagram below that describes the accident, or draw your own
-	E more than 34 feet long;	ore than 34 feet long;	diagram in space #9. Number the vehicles.  Rear End Left Turn Right Angle Right Turn Head On
7		perated with an overweight pe	
2	C VEHICLE 1 DAMAGE CODES C	perated with an overdimension EHICLE DAMAGE GOD	Right Turn Sideswipe (opposite direction)
	L Box 1 - Point of Impact 1 2 L Box 1	- Point of Impact - Most Damage	2 - 0 - 0 - 0 - 0
	Enter up to three 3 4 5 Enter	up to three damage codes	4 5 ACCIDENT DIAGRAM 2
		le By:	See the last page of the MV-104A for the
	Tower VEHICLE DAMAGE CODING:	To:	accident diagram.
	1-13 SEE DIAGRAM ON RIGHT.	in in	7
	14. UNDERCARRIAGE 17. DEMOLISHED 15. TRAILER 18. NO DAMAGE		9.
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER		Cost of repairs to any one vehicle will be more than \$1000.
	Reference Marker   Coordinates (if available)   Pla	12 11 10 ce Where Accident Occurred	Unknown/Unable to determine Yes No
	Latitude/Northing Co	unty NIAGARA	City Village V Town of SOMERSET
	Roa	ad on which accident occurred	
	Longitude/Easting at	1) intersecting street	(Route Number or Street Name)
	or 2	.5	N S of HALF A MILE NORTH OF LAKE ROAD ON HAR
		feet miles	E W (Milepost, Nearest Intersecting Route Number or Street Name)
	Accident Description/Officer's notes	ation D1 .C ma	30
	marciana noda when a peer shonen	IV ran out into t	that he was traveling southbound on the middle of the roadway. D1 stated he was
	and ser and ser and ser	uck it. Officer o	Deerved front and damage to the
	anniown II the damage will be by	er \$1000 at this	time. Neither D1 or P1 were injured.
Α	8 9 10 11 12	13 14 15 16	17 BY TO 18 Names of all involved Date of Death Only
- A		М	THUMAN, JEFFREY THO ,
ᆸ	1 3 4 1 11	F	THUMAN, KALEIGH R
I C			
νμ			
OE			MARKE STATE OF THE
V F	fficer's Rank pampox di / M	Dade and M	
D at	nd Signature PATROL Wycz Burnt	Badge/ID No. NCIC	No. Precint/Post Troop/Zone Station/Beat Sector Reviewing Officer Date/Time Reviewed 12/02/19
	rint Name in KYLE BOND	2921 031	1702/19
			70 2000

Local Codes 19-2776

HKTB291B6QDK5

New York State Department of Motor Vehicles

# POLICE ACCIDENT REPORT

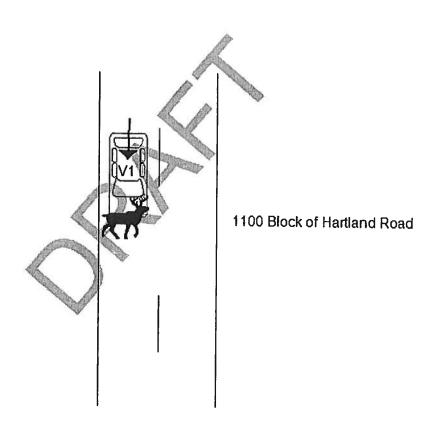
MV-104A (6/04)

AMENDED REPORT

Accident Reconstructed Yes V No	Month Day Year	ay of Week FRIDAY		No. of Vehicles 1	No. Injured 0	_	Not Investigated at Scene Accident Reconstructed	Left Scene	Police Photos
---------------------------------	----------------	----------------------	--	-------------------------	------------------	---	--	------------	---------------



Diagram not to scale.



	Page 1 of 2 Pages	New Yor	k State De	epartment of Motor Vehicles	
	20-0322	POLIC	E AC	CIDENT REPORT	
_	HKTB291BHCL7J AMENI	DED REPORT		04A (6/04)	6
] 1	Accident Date Day of Wee		No. of	I	L
L	Month Day Year 2020 TUESDA	, , , , , , , , , , , , ,	No. of Vehicles 1	No. Injured No. Killed Not Investigated at Scene Left Scene Police Photos	2
	VEHICLE 1	27.50		Accident Reconstructed Yes V No	
2	VEHICLE 1- Driver License ID Number 153900023	St	ate of Lic.	VEHICLE - Driver	_
-	Driver Name - exactly		NY	License ID Number State of Lic.	2
	as printed on license THUMAN, AMY LYN	N		Driver Name - exactly as printed on license	
	Address (Include Number and Street) 8 4 6 3 LOWER LAKE RD		Apt. No.	Address (include Number and Street)	_
3	City or Town State	e Zip Code		ADS. NO.	2
1	BARKER N) Date of Birth Sex Unicensed	140120000	)	State ZID Code	_
	Month Day Year Sex Unlicensed No.	o. of Occupants Public Proper		Date of Birth Month Day Year Sex Uniticensed No. of Occupants Public	_
	Name overtive a select	0 1 Damag	jed	Property Damaged	
4	THUMAN, JEFFREY T	Month Day	Year	Name - exectly as printed on registration Sex Date of Birth Month Day Year	2
3	Address (Include Number and Street)		1969 Released	Address (Include Number and Street)	1
	City of Tarre	Code		Apt No. Mat. 1 Resisted	_
5	BARKER NY			City or Town State Zip Code	24
	Plate Number State of Reg. Vehicle Year & Make GSF3457 NY 2014 FORD		Ins. Code	Plate Number State of Reg.   Vehicle Year & Make   Vehicle Type   Ins. Code	_
	Ticket/Arrest	4DSD	328	Ticket/Arrest A	
6	Number(s) Violation			Number(s)	26
1	Section(s)			Violation	1
	Check if involved vehicle is: more than 95 inches wide;	heck if involved vehicle more than 95 inches	is;	Circle the diagram below that describes the accident as describes	_
	E more than 34 feet long;	more than 34 feet los		The state was required the vehicles.	
7	H operated with an overweight permit;	operated with an over	erweight per		26
2	C VEHICLE 1 DAMAGE CODES C	operated with an ove VEHICLE DAM	AND DOOR	perrol Striaged to 3. 7.	••
	Box 1 - Point of Impact 1 2 L B	lox 1 - Point of Impact		(same direction) Left Turn (opposite direction)	
	Enter up to three 3 4 5	ox 2 - Most Damage inter up to three	3	ACCIDENT PLACE IN	=
	Vahiala D. 200	fore damage codes			2 <b>7</b> 1
	Toward To. On Doman	owed To:		See the last page of the MV-104A for the accident diagram.	_
	1-13 SEE DIAGRAM ON RIGHT.		7	7 desident diagram.	
	14. UNDERCARRIAGE 17. DEMOLISHED	13	F	a 9.	
	16. OVERTURNED 18. NO DAMAGE 16. OVERTURNED 19. OTHER		_	Cost of repairs to any one vehicle will be more than \$1000.	8
	Reference Marker   Coordinates (if available)	12 11	10	9 Unknown/Unable to determine Vac	7
	Reference Marker Coordinates (if available) Latitude/Northing	Place Where Accident			
	43	Road on which acciden		City Village V Town of SOMERSET	
				HARTLAND RD. (Route Number or Street Name)	9
	Longitude/Easting	at 1) intersecting stree			_
		or 2) .	-	N S of LAKE RD. (Route Number or Street Name)	
	Accident Description/Officer's notes			(Mileposi, Nealest Intersecting Route Number or Street Name)	
- 1	Vehicle #1 was driving straigh Deer ran off	t ahead when	deer ra	an west in front of vehicle causing collision.	)
- 1					_
- 1				USE COVE SHEE	R
	8 9 10 11 12			N	ı
AA	1 1 4 1 20	13 14 15		17 BY TO 18 Names of all involved Date of Death Only	_
LВ	1 20	F	-	THUMAN, AMY LYNN	
1 4					
N D					
이티					
r E	CONTRACTOR OF THE STATE OF THE				
E Of	Icer's Rank d Signature PATROLMAN	Badge/ID No.	NCIC N	lo. Precint/Post Station/Beat Reviewing Officer Peter Reviewed	
Pri	nt Name In MARK STATE			Troop/Zone Sector Date/Time Reviewed	
Fu	II THE STEEL	2918	0315	9 TSPD 2911 2/5/20	
				1700	

New York State Department of Motor Vehicles

POLICE ACCIDENT REPORT

20-0322 HKTB291BHCL7J

AMENDED REPORT

ľ	Accident Date Month 2	Day 4	Year 2020	Day of Week TUESDAY	No. of Vehicles 1	No. Injured	1 .	Not Investigated at Scene Accident Reconstructed	Left Scene		
						<u> </u>		recident reconstructed		Yes 🗸 No	



	Page 1 of 2 Pages New York Sta	ate Dep	partment o	of Motor Ve	hicles				
ė	Local Codes POLICE A				ORT				19
-	HK0999BW4616 AMENDED REPORT	MV-10	04A (6/04	•)					61
'	Accident Date Day of Week Military Time No. of Vehic	f :les	No. Injured		Not Investiga	ted at Scene	Left Sce	ene Police Photo	s <b>20</b>
	5 24 2020 SUNDAY 21:30 VEHICLE 1	1	0 VEHIC	I O	Accident Rec	onstructed PEDESTRIA	TO NA	Yes 🗸 I	_
2	VEHICLE 1- Driver State o	f Lic.	VEHICLE			FEDESTRIA		State of Lic	1000
-	License ID Number 250857975 N3  Driver Name - exactly	Y	License ID						21
	as printed on license STRATTON, ROBERT J		Driver Nam as printed of						
	Address (Include Number and Street) 8192 LAKE ROAD	pt. No.	Address (Ir	nclude Numb	er and Street)			Apt. N	1600
3	City or Town         State         Zip Code           BARKER         NY         14012		City or Tov	vn		State	Z	Zip Code	22
1	Date of Birth Sex Unlicensed No. of Occupants Public Presents		Date of Birth		Sex U	nlicensed No. of	Occupants	Public	
	3 14 1958 M 01 Property Damaged		Month 1	Day Year				Property Damaged	
4		rear	Name - exac	tly as printed o	n registration	Sex	Date of Month		<b>23</b>
5		958	Addrage (Incl	lude Number a	and Stenat)			Relea	(B)
	8192 LAKE ROAD Mat Code		Addiess (iiid	lude Mulliber a	ind Street)	Apt. N	lo. Haz. Mat. Code	Relea	24
5	City or Town         State         Zip Code           BARKER         NY         14012		City or Town			State	Z	ip Code	
1	1 *1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Code 40	Plate Numbe	or St	ate of Reg. Veh	nicle Year & Make	Vehicle 1	Type Ins. Cod	е
_	Ticket/Arrest	40	Ticket/Arrest						
6	Number(s) Violation		Number(s)	<u> </u>					25
	Section(s)		Violation Section s	0					1
	Check if involved vehicle is:  Check if involved vehicle is:  Check if involved vehicle is:  more than 95 inches wide;  more than 95 inches wide;	de;			ram below that ace #9. Numbe	t describes the ac or the vehicles.	cident, or d	fraw your own	
_	more than 34 feet long;   E more than 34 feet long;   more than 34 feet long;   more than 34 feet long;   H   operated with an overweight permit;   Operated with an overweight permit   Operated with a overweight   Operated with a overweight   Operated with a overweight   Oper	. 4		Rear End	Left_Tum	Right Angle Ri		Head On	26
7	operated with an overdimension permit.	10000		1.	<u> 3.</u>		7	7.	
	C VEHICLE 1 DAMAGE CODES C VEHICLE DAMAGE L Box 1 - Point of Impact 1 2 L Box 1 - Point of Impact	E COLD	ES 2	Sideswipe (same direc	tion) Left Turn		ght Turn	Sideswipe (opposite direction)	
	E Box 2 - Most Damage 11 11 E Box 2 - Most Damage			ACCIDENT D	IACRAM		77	6.	27
	Enter up to three a more damage codes 12 1 Enter up to three more damage codes	3	4 5 7	ACCIDENT L	JAGRAM				1
	Vehicle By: Towed To:  Vehicle By: Towed To:	V			e last pa nt diagra		MV-104	A for the	-
	VEHICLE DAMAGE CODING:	6	7	accidei	ic dragic				
	1-13 SEE DIAGRAM ON RIGHT.  14. UNDERCARRIAGE 17. DEMOLISHED		, 9	).					70
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER		Ì	Cost of repair	s to any one v	ehicle will be more	than \$100	00.	<b>28</b> 4
	12 11	10	9	Unknow	wn/Unable to d	etermine [	Yes	☐ No	
	Reference Marker Coordinates (if available) Place Where Accident O Latitude/Northing County NIAGARA	ccurrec	d: 	City \	Gilogo 🗐 T	our of CO	MERSET		
	1 1 8 County NIAGARA  Road on which accident of	occurred	□ I LAKE	ROAD	/illage 🔽 To	own of SO	MEKSEI		29
	5 4 0 1 Longitude/Easting at 1) intersecting street					(Route N	umber or Stre	eet Name)	<u> </u>
	25	, <del>-</del>	N S	as 8192	LAKE RO	AD (Route N	umber or Stre	eet Name)	
	1 3 0 0 feet miles		E VW	(Mil		tersecting Route Nu	nber or Stree	et Name)	
	Accident Description/Officer's notes Stratton stated he was traveling east bound of	on La	ke Pos	d when	a deer e	margad fro	m the	north aido	30
	shoulder and struck his vehicle on the driver	r sid	de fron	t door.	This ca	used subst	antial	body	
	damage to said area. Also damage was endured claimed, vehicle was driveable. Incident occ	on t	he fro	nt driv ximatel	er side :	bumper. No	injur	ies Stratton's	USE COVER SHEET
	address, 8192 Lake Road.	arrec	иррго.	AIMGECI	y 1/4 OL	a mile we	30 01	Stratton S	N
A	8 9 10 11 12 13 14 15	16	17 BY	т		Names of all inve		Date of Death C	Only
L A		HEZENI WA	O Commence of the		ST	RATTON, RO	BERT J	T I	
L E									
N									
O E		100							
L		11/3%							
E	officer's Rank nd Signature PATROL Badge/ID No.	NCIC		recint/Post roop/Zone	Station/Beat	Reviewing O	ficer	Date/Time Review	wed
٦   F	Print Name in DODERT TOUNGTON	001		JUPIZUNE	Sector	1	, l	5/25/26	
Ľ	full ROBERT JOHNSTON 2922	031	.59			291	2	@ 1900	

Local Codes

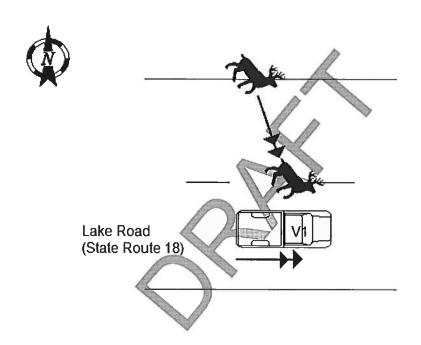
New York State Department of Motor Vehicles

POLICE ACCIDENT REPORT

20-001617 HK0999BW4616

AMENDED REPORT

Accident Date Month	Day	Year	Day of Week	Military Time	No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene	Left Scene	Police Photos
5	24	2020	SUNDAY	21:30	1	0	0	Accident Reconstructed [		Yes V No



	Page ↑ of 2 Pages		~		ment of Motor Vel		3		
	Local Codes 20-3267	P	OLICE	ACCID	ENT REP	ORT			19
		MENDED REP	ORT	MV-104A	(6/04)				61
	Accident Date Day C	of Week Military	Time No.	of No.	Injured No. Killed	Not Investigated	at Scene Left	Scene Police Photos	20
L_	11 8 2020 St		:46	1	0 0	Accident Recons		OTHER PEDESTRIAL	
2	VEHICLE 1- Driver	•	State	of Lic. VE	HICLE - Driver	BICYCLIST	PEDESTRIAN	State of Lic.	
-	License ID Number 135837860  Driver Name - exactly		1	200000	ense ID Number ver Name - exactly				21
	as printed on license GOODMAN, RO	GER A		(STORY)	orinted on license dress (include Numb	on and Change			
	Address (Include Number and Street) 6139 LILLYPOND WAY					per and Street)		Apt. No	22
3	City or Town ONTARIO	State NY 14	Zip Code 5190000	City	y or Town		State	Zip Code	
1	Date of Birth Sex Unticense Month Day Year		nts Public Property		e of Birth onth Day Year	Sex Unifo	ensed No. of Occupa	Property	
	5 11 1934 M	Sex Dat	Damaged e of Birth	THE REAL PROPERTY.	ne - exactly as printed o	in registration	Sex De	Demeged ate of Birth	23
4	BITTNER, BRIAN J	M Mo	nth Day	Year 1961				onth Day Year	3
5	Address (Include Number and Street) 3197 PEACOCK CIRCLE	Apt. No. Haz	-	Released Add	ress (Include Number s	and Street)	Apt. No. Ha	Release	ed 24
6	City or Town	State	Zip Code	City	or Town		State	Zip Code	1
1	MACEDON Plate Number State of Reg. Vehicle Ye	ar & Make Vehi	cle Type In	160,00	le Number S	tate of Reg.   Vehicle	Year & Make Vel	hicle Type Ins. Code	
	ARX2165 NY 2013 Ticket/Arrest	FORD SU	BN	743 Tid	ket/Arrest 🌧				
6	Number(s)			No	mber(s)				25
1	Violation Section(s) Check if involved vehicle is:	Checkillin	volved vehicle is	Sec	ctions				1
	more than 95 inches wide;	V more t	han 95 inches v	vide;		gram below that di ace #9. Number ti	escribes the accident he vehicles.	, or draw your own	
7	more than 34 feet long; operated with an overweight permit;	MAKE THE PARTY OF THE	han 34 feet long ed with an over	The Control of the Co	Rear End	Let, Tum	Right Angle Right Tun	Heed On	26
1	operated with an overdimension perr	nit. I operat	ed with an over	dimension pe	1. Sideswipe (same dire	3. The Left Turn	5. Right Tun	7. Sideswipe (opposite direction)	┺
-	L Box 1 - Point of Impact 1	2 L Box 1 - Po 3 E Box 2 - Mo	Int of Impact	V	3 2	- 0 4	6.7	- 0	
	Enter up to three 3 4 1 more damage codes 2 4	5 Enter up to	three	3 4	5 ACCIDENT	DIAGRAM			27
	Vehicle By: BEAUMANS	Vehicle By	/ 7		CN79005.045			104A for the	1
	Towed To: BEAUMANS VEHICLE DAMAGE CODING:	Towed To	4	6 7	accide	nt diagram	•		
	1-13 SEE DIAGRAM ON RIGHT.		1		9.				- 22
	14. UNDERCARRIAGE 17. DEMOLISHEI 15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER		13	11 1.	Cost of repa	irs to any one veh	icle will be more than	\$1000.	<b>28</b> 7
		Inhia Diagon	13 11	10 0	Unkno	own/Unable to dete	ermine Y	es No	_
	Reference Marker Coordinates (if ava		here Accident NIAGARA	Occurrea:	City	Village V Tow	n of SOMERS	SET	
		Road o	n which accider	t occurred	9784 LAKE		701-111-		29
	Longitude/Easting	at 1) ir	ntersecting stree	et				or Street Name)	L
		or 2) _	feet mile	. 5 N		NTYLINE RD	secting Route Number o	or Street Name)	.
	Accident Description/Officer's notes		1001		<u> </u>	mopost, real ost inter	adding Nodio Halliber C	, Substituting	30
	DRIVER GOING STRAIGHT AH	EAD EASTBO	JND STRUC	K DEER (	YAWDAON NC				70
	11								USE COVER SHEET
									N
A	8 9 10 11	12 13	14 16	$\overline{}$	17 BY 1		mes of all involved		Only
	A 1 1 4 1	86 M			\$450 PAGE 1	GO	ODMAN, ROGEF	R A	Street,
- 1	C						t the miles of the		
N V	D	1							
	E								
٧	Officer's Rank Page Ox May		Badge/ID No	D. NCIC N	o. Precint/Pos	t Station/Beat	Reviewing Officer	Data/Time Saule	wod
- 0 1	and Signature PATROLMAN		San Seulo M	,   NOIC N	Troop/Zone		CHIEF	Date/Time Revie	wea
	Full MARK ZIMA		2918	0315	9	TSPD	miller, I	2000	2

Local Codes 20-3267

НКТВ291СН17ТН

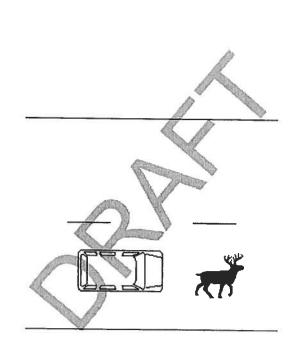
New York State Department of Motor Vehicles

### POLICE ACCIDENT REPORT

MV-104A (6/04)

AMENDED REPORT

Accident Date	Day of Week	Military Time	No. of	No. Injured	No. Killed	Not Investigated at Scene Left Scene Police Photos
Month Day Year 11 8 2020	SUNDAY	17:46	Vehicles 1	0		Not Investigated at Scene





	Page 1 of 2 Pages New York State D	epartment of Motor Vehicles	
	POLICE AC	CIDENT REPORT	_
		104A (6/04)	[19
1	AMENDED REPORT	(6.6.1)	6:
-	Accident Date  Month Day Year Day of Week Military Time No. of Vehicles	No. Injured No. Killed Not Investigated at Scene   Left Scene   Police Photos	20
	12 11 2020 FRIDAY 20:19 1	0 0 Accident Reconstructed Yes V No	6:
2	VEHICLE 1 VEHICLE 1- Driver	VEHICLE BICYCLIST PEDESTRIAN OTHER PEDESTRIAN	F
-	License ID Number 994672359	VEHICLE - Driver License ID Number State of Lic,	L.
L	Driver Name - exactly	Driver Name - exactiv	21
	Address (Include Number and Street)	as printed on license	_
	5743 CLINTON ST RD	Address (Include Number and Street) Apt. No.	
3	City or Town State Zip Code BERGEN NY 14416	City or Town State Zip Code	22
1	Date of Birth Sex Unicensed No of Occupants Laur	Data of Pidts	
	12 23 10.66 M Financial Property	Month Day veet loss Uningensed No. of Occupants Public	
	Name - exactly as printed on registration Sex Date of Birth	Name - exactly as printed on registration : Sex I Date of Earth	22
4	WRIGHT, DARRELL B M 12 23 1966	Name - exactly as printed on registration . Sex Date of Brith Month Day Year	<b>23</b> 3
5	Address (trained to the contract of the contra	Arriges (Inchide Number and Direct)	13
787	5743 CLINTON ST RD  Apt. No. Haz. Released wat Code Code Code Code Code Code Code Code	Apt. No. Haz Released	24
5	BERGEN State Zip Code NY 14416	City or Town State Zip Code	24
1	Plate Number State of Reg. Vehicle Year & Make Vehicle Type Ins. Code HRP1163 NY 2014 CADT ADD ADD CODE	Plate Number State of Reg.   Vehicle Year & Make   Vehicle Type   Ins. Code	_
	HRP1163 NY 2014 CADI 4DSD 677 Ticket/Arrest	NIO-OOLO	
	Number(s)	Ticket/Arrest Number(s)	
6	Violation Section(s)	Violation	25
1	Check if involved vehicle is:   Check if involved vehicle is:	Section S	1
	more than 95 inches wide;    more than 34 feet long;   more than 35 inches wide;   more than 36 inches wide;	Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.	
7	E more than 34 feet long; H operated with an overweight permit; H operated with an overweight permit;	Bow Feet Lat War Line Late 1	
1	operated with an overdimension permit	1. 3. 7	26
Ш	VEHICLE DAMAGE CODES C VEHICLE DAMAGE INSI	Sideswipe (same direction) Left Turn   Right Turn (opposite direction)	
	E Box 2 - Most Damage 3 3 E Box 2 - Most Damage	2 - 0 0 -	
	1 Enter up to three more damage codes 4 3 4 5 Enter up to three more damage codes	4 5 ACCIDENT DIAGRAM	27
	Vehicle By:	Soo the last	1
	Towed To:  VEHICLE DAMAGE CODING:	See the last page of the MV-104A for the accident diagram.	
	1-13 SEE DIAGRAM ON RIGHT,	7	
	14. UNDERCARRIAGE 17. DEMOLISHED	9.	
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER	Cost of repairs to any one vehicle will be more than \$1000.	28
	1 12 11 10	9 Unknown/Unable to determine ✓ Yes □ No	4
	Reference Marker Coordinates (if available) Place Where Accident Occurred Latitude/Northing County NTAGARA	d:	2.00
	Tarionica	City Village V Town of SOMERSET	
	Road on which accident occurred	DAKE KD	29
	Longitude/Easting at 1) intersecting street	(Route Number or Street Name)	40
	1 ; 3 ; 1 ; 0 or 2) .5	N S of HARTLAND RD (Route Number or Street Name)	
	Accident Description (Office I.e.)	E W (Milepost, Nearest intersecting Route Number or Street Name)	
	Accident Description/Officer's notes  V1 was travling east bound, deer was travling east		30
	vl was travling east bound. deer was travling sou passenger side bumper.	oth bound. vl struck the deer in the front	
		u	ISE IVER IEET
8		SH I	ÉÉT
A	8 9 10 11 12 13 14 15 16		V
A A	1 1 4 1 53 M	17 BY TO 18 Names of all involved Date of Death Only	
LB		WRIGHT, DARRELL B	
1 0			
N D			
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r E			
E 0	ficer's Rank d Signature OFFICER Badge/ID No.   NCIC	Ma I Brooker I I I I I I I I I I I I I I I I I I I	
D an	nt Name in	Trace / Date/Time Reviewed	
Fu		1 12/4/20	
	1200	1900	È

New York State Department of Motor Vehicles

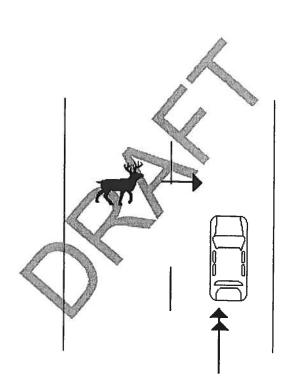
POLICE ACCIDENT REPORT

Local Codes 20-3577 HKTB291CLK38X

AMENDED REPORT

Accident Date		No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene
	20.19			U	Accident Reconstructed Yes No





Page 1 of 2 Pages Local Codes 21-0057	POLICE ACC	artment of Motor Vehicles IDENT REPORT
Accident Day	THE EAST EFFOR	4A (6/04)
- Month Day Year 1 5 2021 TUES	Mahialan	No. Injured No. Killed Not Investigated at Scene Left Scene Police Property O Accident Reconstructed Left Scene Police Property O Accident Reconstructed D Property O
VEHICLE 1- Driver	State of Lic.	VEHICLE BICYCLIST PEDESTRIAN OTHER PEDES
License ID Number 434779575  Driver Name - exactly	NY NY	
as printed on license ZIMA, MARK J  Address (Include Number and Street)		
6325 JENNIFER CT	Apt. No.	
CLARENCE CENTER	State Zip Code NY 14032	
Month Usy Year Sex Unlicensed	No. of Occupants Public Property Damaged	COLUMN THE WAY TO SEE THE PARTY OF THE PARTY
Name - exactly as printed on registration	Sex Date of Sirth  Month Day Year	
5 Address (Include Number and Street)	C	
8700 HAIGHT RD	Apt. No. Haz. Released Mat. Code	The sales have medical part of the sales of
	NY 14012	
291 NY 2014 DOI		The second of th
Number(s)		
Violation Section(s) Check if involved vehicle is:		
7 H operated with an overweight permit; 2 C operated with an overdimension permit.  VEHICLE 1 DAMAGE CODES  Box 1 - Point of Impact E Box 2 - Most Damage Enter up to three 1 more damage codes 3  Vehicle By: Towed To:	E H - C L E STATE	Reper End Left Turn Right Angle Right Turn Head On Turn (some direction)  ACCIDENT DIAGRAM  See the last page of the MV-104A for the
VEHICLE DAMAGE CODING:  1-13 SEE DIAGRAM ON RIGHT.  14. UNDERCARRIAGE 17. DEMOLISHED		accident diagram.
16. TRAILER 18. NO DAMAGE 18. OVERTURNED 19. OTHER		Cost of repairs to any one vehicle will be more than \$1000.
Reference Marker   Coordinates (if available)	Place Where Accident Occurred:	Unknown/Unable to determine Yes No
1 8 Latitude/Northing	County NIAGARA	City Village V Town of SOMERSET
5 4 0 1 Longitude/Easting	Road on which accident occurred	LAKE RD (Route Number or Street Name)
1 3 4 1	at 1) intersecting street or 2) 0.6	N S of JOHNSON CREEK RD (Route Number of Street Name)
Accident Description/Officer's notes		W (Milepost, Nearest Intersecting Route Number or Street Name)
I WAS DRIVING STRAIGHT AHEAR IN FRONT OF MY VEHICLE CAUSI	D AT 45-50 MPH IN A 55M ING A COLLISION	PH ZONE WHEN A LARGE DEER RAN ACROSS THE ROA
	2 13 14 15 16	17 BY TO 18 Names of all involved Date of Death
B C C C C C C C C C C C C C C C C C C C	17 M	ZIMA, MARK J
officer's Rank and Signature PATROLMAN Print Name in MARK ZIMA	Badge/ID No. NCIC No.	Precint/Post Troop/Zone Sector Reviewing Officer Date/Time Reviewing Officer

New York State Department of Motor Vehicles

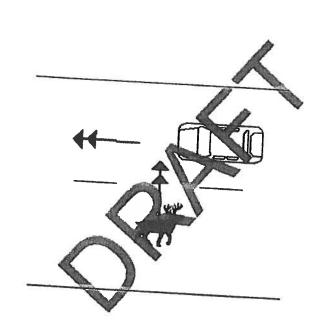
OLICE ACCIDENT REPORT

AMENDED REPORT

Local Codes

21-0057 HKTB291CP6W6H

Accident Date	ilitary Time No. of Vehicles No.	Injured No. Killed Not Investigated at Sce	ne Left Scene Police Photos
	1	O Accident Reconstructed	Yes No





		epartment of Motor Vehicles	
	Local Codes POLICE ACC	CIDENT REPORT	1.46
	21 01/5	04A (6/04)	19 61
	Accident Date Day Year Day of Week Military Time No. of	No. Injured No. Killed Not Investigated at Scene Left Scene Police Photos	20
_	THURSDAY 18:35 Vehicles	0 0 Accident Reconstructed Yes No	I -
_	VEHICLE 1	VEHICLE BICYCLIST PEDESTRIAN OTHER PEDESTRIAN	⊢
2	VEHICLE 1- Driver License ID Number 769862000 State of Lic. NY	VEHICLE - Driver License ID Number State of Lic.	21
L	Driver Name - exactly	Driver Name - exactly	12
	as printed on license WASS, AMANDA J  Address (Include Number and Street)	as printed on license	-
	8470 LOWER LAKE RD	Address (Include Number and Street)  Apt. No.	
3	City or Town         State         Zip Code           BARKER         NY         140120000	City or Town State Zip Code	22
1	Date of Birth Sex Unlicensed No of Occupants Public	Parte of Birth Seix Uniticensed No. of Occupents Public	
_	Month Day Year 6 13 1984 F 01 01 Property Damaged	Month Day Year Visite No. of Occupants Public Property	
_	Name - exactly as printed on registration Sex Date of Birth	Name - exactly as printed on registration Sex Date of Birth	23
5	WASS, AMANDA J F 6 13 1984	Month Day Year	1
L	Address (Include Number and Street)  8 4 7 0 LOWER LAKE RD  Apt. No. Haz. Released Mat. Code	Address (Include Number and Street) Apt. No. 1927. Released	
_	City or Town State Zip Code	Apt. No. Haz Released City or Town State Zip Code	24
5	BARKER NY 14012-0000 Plete Number State of Reg.   Vehicle Year & Make   Vehicle Type   Ins. Code	ZID COOL	
	DBU3749 State of Reg. Vehicle Year & Make Vehicle Type Ins. Code 240	Plate Number State of Reg.   Vehicle Year & Make   Vehicle Type   Ins. Code	Г
	Tickel/Arrest Number(s)	Ticket/Arrest	
6	Violation	Number(s) Violation	25
2	Section(s)  [Check if involved vehicle is: [Check if involved (vehicle is:	Section(a)	1
	more than 95 inches wide; more than 95 inches wide;	Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.	
	more than 34 feet long;	Poor Ford Left Turn Olohi Angle   Qual 7   Und On	
2	H operated with an overweight permit; Operated with an overweight permit. Operated with an overdimension permit. Operated with an overdimension		26
L	C VEHICLE 1 DAMAGE CODES C VEHICLE DAMAGE GOD		
	L Box 1 - Point of Impact 1 2 L Box 1 - Point of Impact E Box 2 - Most Damage 1 1 1 E Box 2 - Most Damage	2 2 0 1 0 0	
	Enter up to three 12 Enter up to three more damage codes 12 Enter up to three more damage codes	4 5 ACCIDENT DIAGRAM	27
	Vehicle By:	See the last page of the Wy 1012 C	1
	Towed To:  VEHICLE DAMAGE CODING:	See the last page of the MV-104A for the accident diagram.	
	1-13 SEE DIAGRAM ON RIGHT.	7	
	14. UNDERCARRIAGE 17. DEMOLISHED 2 13	9.	28
	15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER	Cost of repairs to any one vehicle will be more than \$1000.	4
	Reference Marker   Coordinates (if available)   Place Where Accident Occurred	9 Unknown/Unable to determine Yes No	-
	Reference Marker Coordinates (if available) Place Where Accident Occurred Latitude/Northing County NIAGARA		
	Road on which accident occurred	· · · · OUIDIONI	29
		(Route Number or Street Name)	40
	Longitude/Easting at 1) intersecting street	N M S WEST SOMEDORM DD (Route Number or Street Name)	
	feet miles	N	
	Accident Description/Officer's notes		30
	Vehicle #1 was traveling north on Hartland Rd. Veto travel easterly across Hartland Rd.	ehicle #1 struck a deer as the animal attempted	
	delegation and claim Na.		USE
			USE COVER SHEET
_	8 9 10 11 12 13 14 15 16		N
2	10 11 12 13 14 15 16 1 1 1 4 1 36 F	17 BY TO 18 Names of all involved Date of Death Only	_
- A	3	WASS, AMANDA J	1
			100
N			
ò			
r [			
E	Officer's Rank CHIEF Badge/ID No. NCIC	I TO THE REVIEW OF THE PROPERTY OF THE RESIDENCE	4
	Print Name in JOHN MILLER	Troop/Zone Sector /1/8/2'	
L	Full SOAN MILLER 2911 031	59 2911 61600	

Page 2 of 2 Pages
Local Codes
21-0173

HKTB291CQ5RVD

New York State Department of Motor Vehicles

# POLICE ACCIDENT REPORT

AMENDED REPORT

2021 TRORSDAY 18:35 1 0 0 Accident Reconstructed Yes V No	Accident Date  Month Day Year 1 14 2021	Day of Week THURS DAY	1 10.55	No. of Vehicles 1	No. Injured		Not Investigated at Scene Accident Reconstructed	Left Scene	
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