

New Britain Police Department

10 Chestnut Street

860-826-3000

Supplement Report

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Page: 1 of

IR21-019086-S25

21-019086

EAST ST/BELDEN ST, New Britain, CT, 06051

United States

Related Case:

New Britain Police

07/28/2021 06:42

Date of this Report:

Division:

Date/Time Reported: 06/29/2021 19:07

(N) Not Applicable

Clearance Code:

Homicide Negmanslau, Recovered Stolen MV . Outside Agency, Evading Crash-Unknown

Vehicle

Classification:

Incident Occurred from 06/29/2021 19:07 to 06/29/2021 19:07

Other Crime

Report Type:

Mendes, Jovaldo

Officer Assigned:

Location:

07/28/2021 00:00 Clearance Date:

Person

OLN State: CJIS Number: Weight Email: **Description:** Arrestee/Custodial , Suspect/Offender Office Phone: FBi Number: Arm, right Height: OLN: Body Location: 860-553-5134 6/16/1969 Brown N/A StateID Number: AFIS Number: Cell Phone: Ethnicity: Tattoo Eyes: DOB; 22 NORTON PL APT:2, PLAINVILLE, CT, 06062 JONES, BEN Feature Type: Black Black DOC Number: Home Phone: Person 1: Address: Physical Feature: Race: Alias: SSN: Hair.

Connecticut

240

Supplement Supplement

UAR Number: 2051870 UAR Number: 2051870

> Count: 1 Count: 1

> > Narrative

Charges:

53a-63 RECKLESS ENDANGERMENT 1ST DEG 14-222 RECKLESS DRIVING

On July 28, 2021, at approximately 0630 hours, I, Officer Mendes, was dispatched to 10 Chestnut Street (NBPD Headquarters) for a warrant service. BEN JONES (DOB 06/16/1969), who was positively identified by his DMV blowback photo, was turning himself in on the basis of an active, hardcopy arrest warrant out of GA-15 (See NBPD case #21-019086). The warrant was confirmed by Front Desk Officer Uccello. Officer Lolic responded to assist with booking.

oved:		
Date Approved	Date	
SZTACHELSKI, RADEK		20 Supervisor/Notary Signature
Review/Approved By:		20 Superviso
Mendes, Jovaldo		Day of
Reporting Officer:	Reporting officer sworn signature	Subscribed and sworn before me this_
77		

inquiry.

JONES was booked and processed without incident. The arrest warrant was confirmed as served via

Nothing further at this time.

Related Entities

Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	Primary	
IR21-019086 -S18	IR21-019086 -S17	IR21-019086 -\$16	IR21-019086 -S15	IR21-019086 -S14	iR21-019086 -S13	IR21-019086 -S12	IR21-019086 -S11	JR21-019086 -S10	IR21-019086 -S9	IR21-019086 -S8	IR21-019086 -S7	JR21-019086 -S6	IR21-019086 -S5	IR21-019086 -S4	IR21-019086 -S3	IR21-019086 -S2	IR21-019086 -S1	IR21-019086	The state of the s

		20 Supervisor/Notary Signature	20Superviso	Day of	Subscribed and sworn before me this_
. 30	Date			200	Reporting officer swom signature
7/28/2021	Date Approved:	SZTACHELSKI, RADEK	Réview/Approved By:	Mendes, Jovaldo	Reporting Officer.

Page: 3 of 3

New Britain Police Number: IR21-019086-S25

IKZ1-U19086 -519	IR21-019086 -S21	IR21-019086 -S22	IR21-019086 -523	IR21-019086 -524	IR21-019086 -S26	21-019086 MVA-Evading	CR21-019086	a AB21-019086	
Supplement	Supplement	Supplement	Supplement	Supplement	Supplement	CAD Record	Crash	Arrest/Booking	CHARLES AND ADDRESS OF THE PARTY OF THE PART

Reporting Officer:	Mendes, Jovaldo	Review/Approved By:	SZTACHELSKI, RADEK	Date Approved:	7/28/2021
Reporting officer sworn signature				Date	
Subscribed and sworn before me this	Day of	20 Supervisor	20 Supervisor/Notary Signature		

CONNECTICUT UNIFORM POLICE CRASH REPORT Form PR-1 REV June 2014.01

Number of Motor Vehicles: 3 Automobiles, Motorcycles, etc.

Number of Non-Motorists: 1 Pedestrians, Bicyclists, etc.

Crash Summary

Case Number:

21-019086

	21010000
DOT Identifier: For DOT use only	
TION	

		CRASH DATE,		/ERITY, AN	D LOCAT	ION		Bront, W.	
Date of Crash (YYYYMMDD)		(0000-2359) Town N				Town #	Crash	Severity	
2021/06/29	19	9:07 Nev	w Britair	1		89	⊙ Fat	al Olnjury	○ PDO
Latitude	Crash occur	rred on (street name or route #	at its intersect	ion with (street n	ame or route#)_ •			
41.666582	EAST	ST		at					×
Longitude	If not at an i	intersection: distance	N N	, S, E, W	name of neare	et intersecting	road, town line,	or mile marker	
-72.765516	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		у, со.	of	name of ficure	or intersecting	rodu, town mic,	or mine marker	
			Tenths of Mile						
For pichyment (elds, 99 = Unknow	M)			AND CONE			T. Turk		- 18
TRAFFICWAY OWNERSHIP 01. Public Road		LOCATION OF FIRST HARMI 01. On Roadway	FUL EVENT	FIRST HARMFU	L EVENT		MANNER OF IM (Applies to: multi		31
02. Private Road	01	02. Shoulder	02	Non-Collision:		36	09		" 03
88. Not Applicable	-	03, Median		01. Overtum/Rol 02. Fire / Explosi		<u></u>	01. Front to Rea 02. Front to Fron		
TRAFFICWAY CLASS		05. Gore		03. Immersion, F			03. Angle	ı	8
01. Trafficway, On Road 02. Trafficway, Not on Road	02	06. Separator		04. Jackknife 05. Cargo/Equip	= ment Loss or Si	hift	04. Sideswipe, S	ame Direction	
03. Non-Trafficway		07. In Parking Lane or Zone 08. Off-Roadway Location University	mown	06. Fell/Jumped	from Vehicle		05. Sideswipe, 0 06. Rear to Side	pposite Directio	on
04. Parking Lot		09. Outside Right-of-Way (traff		07. Thrown or Fa			07. Rear to Rear		
LIGHT CONDITIONS		97. Other		9			88. Not Applicab 97. Other	le	
01. Daylight 02. Dawn	01	CRASH-SPECIFIC LOCATIO	N	Collision with P or Non-Fixed O	'erson, Vehicle blect:	·	07.00101		*
03. Dusk	01	01. Non-Junction 02. Intersection	03	09, Pedestrian	•		CONTRIBUTING ENVIRONMENT		
04. Dark- Lighted		03. Intersection-Related		10. Pedal cycle/i 11. Other Non-m			00. None	AL (cnoose up to	00
05. Dark- Not Lighted 06. Dark Unknown Lighting		04. Entrance / Exit Ramp 05. Entrance / Exit Ramp-Rela	hated	12. Railway Veh 40. Deer	icle (train, engine)	01. Weather Con		[00]
97, Other		06. Railway Grade Crossing	nod ,	13. Animal Othe	Than Deer (live	e)	02. Visual Obstr 03. Glare	iction(s)	88
		07. Crossover-Related 08. Driveway Access		14. Motor Vehicl 15. Parked Motor			04. Animal(s) in		88
WEATHER CONDITIONS (cho	ose un to 21	09. Driveway Access-Related		16. Struck by Fa	lling, Shifting C	argo or	88. Not Applicate 97. Other	le	00
01. Clear	500 ap 10 ay	10. Shared-Use Path or Trail		Anything Sel 17, Work Zone/N	in Metion by M		CONTRIBUTING	CIRCUMSTA	NCFS.
02. Cloudy 03. Fog, Smog, Smoke	. 01	11. Through Roadway 12. Acceleration / Deceleration	n Lane	18. Other Non-F		ulpillelik	ROAD (choose u		itoroj
04, Rain	88	13. On A Bridge		Collision With I	ived Object:		00, None 01, Backup Due	to Prior Crash	•
05. Sleet or Hail	00	14. HOV Lane 15. Service or Rest Area		19. Impact Atten	uator/Crash Cu	shion	02. Backup Due		
06. Freezing Rain/Drizzle 07. Snow		16. Weigh Station		20. Bridge Overl 21. Bridge Pier o			Non-recurring		00
08. Blowing Snow	8	17. Other Location Not Listed Within an Interchange Are		22. Bridge Rail		36	03. Backup Due Congestion	to Regular	88
09. Severe Crosswinds 10. Blowing Sand, Soil, Dirt	20	(median, shoulder and roadsid		23. Cable Barrie 24, Culvert	r		04. Toll Booth/P		
88. Not Applicable		97. Other		25, Curb			Road Surfactivet, icy, snow		88 .
97. Other				26. Ditch 27. Embankmen	t		06. Debris	,	
TRAFFICWAY SURFACE CO	NDITIONS	TYPE OF INTERSECTION 01, Not an Intersection		28. Guardrail Fa	ce	H1	07. Ruts, Holes, 08. Work Zone	Bumps	
01. Dry 02. Wet	01	02. Four-Way Intersection	03	29. Guardrail Er 30. Concrete Tra				maintenance/utilit	yJ
03. Snow	. [01]	03. T-Intersection 04. Y-Intersection		31. Other Traffic	Barrier		09. Worn, Trave		ice
04. Slush		05. L-Intersection	*	32. Tree (standing 33. Utility Pole/L			 Obstruction Traffic Cont 		rative. Missing.
95. Ice/Frost 06. Moving Water		06. Traffic Circle		34, Traffic Sign	Support	e e	or Obscured	,	
07. Sand		07. Roundabout 08. Five-Point, or More	8	35. Traffic Signa 36. Fence	ii Support		12. Shoulder (no 13. Non-Highwa)
08. Mud, Dirt, Gravet 09. Oit	κ.	SCHOOL BUS RELATED		37. Mailbox	Dala 0		88. Not Applicat		
10. Standing Water		01. No	04	38. Other Post, 39. Other Fixed			97. Other		
97. Other		02. Yes, a school bus was directly involved	01						
		03. Yes, a school bus was Ind	irectly involved)%	
For all august a trades 40 = 41-1	audi .	WORK	ZONE CRA	SH INFOR	MATION	304 5000	Canaly	MIN VISITED IN	D. 1480 7
For all numeric holds: 99 = 'Unkno WORK ZONE	LOCATION	WORK	TYPE	CH INFOR		WORKERS PRE		rashes occurring NFORGEMENT	
01. No	01. Before the	e First Work Zone Warning Sign	01. Lane Clos			01. No	-3000001	1. No	III INCOLINI
02. Yes	02. Advance V 03. Transition	9	02, Lane Shift	/ Crossover houlder or Mediar		02. Yes		2. Yes	do
01	04. Activity Are	rea 88	04. Intermitter	it or Moving Work		88. Not Applicat	88	88. Not Applicab	88
[01]	05. Terminatio	on Area	88. Not Applic			(4)	00		
	88. Not Applic	Sanie	97. Other				1		

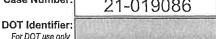
CONNECTICUT UNIFORM POLICE CRASH REPORT Form PR-1 REV June 2014.01

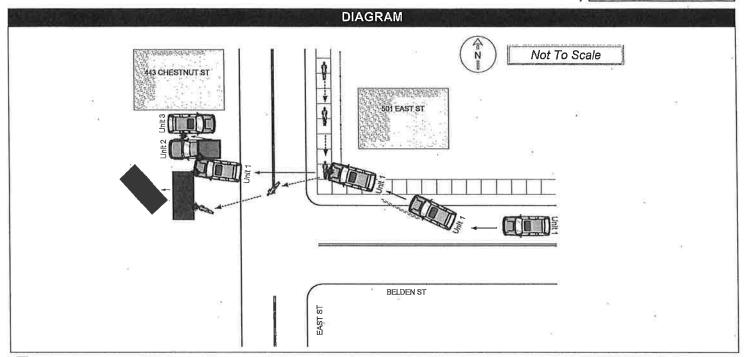
Crash Summary

Case Number:

21-019086

For DOT use only





Vehicles were moved prior to police arrival

NARRATIVE

Officers Narrative: Describe any unusual circumstances associated with the crash, including officer's observations. Refer to each by motor vehicle number and/or non-motorist number

TU1 was traveling westbound on Belden St. and as it approached the intersection with East St., it lost control, began skidding over the north sidewalk before impacting a chain link fence on the northeast corner of the intersection (501 East St). TU1 then struck PEDESTRIAN, continued traveling westbound across East St., and then impacting TU2 and a metal commercial dumpster. TU1 was left on scene and both Operator and Passenger fled on foot. TU2 sustained heavy disabling damage to the front, driver side and passenger side, as well as all around airbag deployment. TU1 was found to be a File 01 Stolen Vehicle out of Hartford. TU1 was properly registered and insured. TU1 was towed from the scene to the NBPD evidence bay by Empire Motors. A Tow Form was completed.

TU2 was parked in the backyard of 443 Chestnut St., which is adjacent to East St., when it was struck by TU1. TU2 sustained moderate damage to the front end and passenger side. The impact from TU1 forced TU2 into TU3, which was parked next to it, causing damage to the driver side of TU2. TU2 was not towed from the scene as it was on private property.

TU3 was parked in the backyard of 443 Chestnut St. when it was struck by TU2 after it was forced by the impact from TU1. TU3 sustained moderate damage to the driver side front end. TU3 was not towed from the scene as it was on

Related Incident Number Officer First Name Officer Last Name Badge Number Police Agency Code NEIL 481 BEATY 089 IR21-019086 Case Status Officer Signature: BEATY, NEIL, W Supervisor: TORRENTE, JOSEPH J O - Open C - Closed 2021/07/09 10:32 2021/07/14 09:10 Date & Time : Date & Time:

This report is a revision to a previously submitted report

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CONNECTICUT UNIFORM POLICE CRASH REPORT

Form PR-1 REV June 2014.01 Appendix A: Narrative Continued Complete this sheet if more space is needed for the narrative

Case Number:

21 010006

DC

	21-019000
OT Identifier:	
For DOT use only	Section of the second section is

NARRATIVE CONTINUED (i)

private property.

The metal commercial dumpster was in the backyard of 443 East St. and as a result of the impact, was forced westbound through the yard and sustained damage consisting of a corner being dented and bent.

PEDESTRIAN was jogging southbound on the east sidewalk of East St. and as he approached the intersection with Belden St., he was struck by TU1. The impact forced PEDESTRIAN airborne and he traveled through the air westbound across both travel lanes of East St. PEDESTRIAN then landed in the rear yard of 443 Chestnut St. and impacted the metal commercial dumpster. PEDESTRIAN was unresponsive on scene and was transported to The Hospital of Central Connecticut by New Britain EMS where he was pronounced deceased at approximately 2006HRS.

Members of the New Britain Police Department Traffic Safety Bureau were recalled to the scene to further investigate. Video was obtained from the residents at 443 Chestnut St. which showed TU1 traveling at a high rate of speed westbound on Belden St., losing control and skidding sideways before impacting the chain link fence, PEDESTRIAN, TU2, and the metal dumpster. Both occupants of TU1 then exit through the driver side front window and flee on foot westbound through the backyard. Neither occupants were located at the time of the initial investigation. An Acura sedan was observed on video following closely behind TU1 and after the crash, the operator of the Acura got out of the vehicle and began yelling at the occupants of TU1 as they fled on foot.

Witness (P2) stated that he was outside on Belden St. when he observed TU1 traveling at a high rate of speed. Witness stated that TU1 lost control and struck PEDESTRIAN as he was traveling southbound on the sidewalk. Witness further stated that TU1 was being chased by an Acura (not directly involved in the crash) and that following the crash, two males fled from TU1. Witness stated that the operator of the Acura pulled over and began yelling at him to chase the occupants of TU1 because they had stolen his wallet. Witness provided a sworn written statement.

On 06/30/21 the Operator of TU1 was positively identified, interviewed and subsequently taken into custody. Operator of TU1 admitted that he was operating the vehicle at the time of the crash and that he was being chased by the operator of the Acura. Operator of TU1 stated that he was trying to get away from the operator of the Acura because he thought that he [operator of the Acura] might shoot him. Operator of TU1 was found at fault for the crash and subsequently charged with violations of CGS 53a-63 Reckless Endangerment in the First Degree, 53a-59(a)(3) Assault in the First Degree and 53a-124/53a-119(8) Larceny in the 3rd Degree by Possession via an arrest warrant. Passenger of TU1 was also identified and interviewed by members of the NBPD detective bureau.

No wants/warrants. Nothing further.

	w (6)	
Page 4 of 13 Motor Vehicle ID: 1	CONNECTICUT UNIFORM POLICE CRASH REPORT Form PR-1 REV June 2014.01 Case Num	abor: 040000
1	Motor Vehicle Information	21-019000
Number of occupants in Vehicle : (including the driver)	Complete One Sheet Per Motor Vehicle DOT Identi	
	MOTOR VEHICLE INFORMATION	
VIN: WA1LFAFP3DA078	630 VIN missing or removed Plate #: BA29	334 Invalid Plate
Make: Audi	Color: White Driver Evaded Responsibility Plate State:	
Model: Q5 Premium Plus	Year: 2013 Direction of Travel	
	N, S, E, W	Total lanes in roadway: 2
Road on which vehicle was traveling: BELT	JEIN ST Unknown direction	Bike lanes/sharrows present
For all numeric fields: 99 = 'Unknown'	MOTOR VEHICLE CRASH INFORMATION	
THE PROPERTY OF THE PROPERTY O	01 Straight Ahead 01 Passenger Car	MOTOR VEHICLE TYPE 01. Motor Vehicle in Operation
Non-Collision	02. Negotiating a Curve $01 \mid 02$. (Sport) Utility Vehicle $02 \mid 02$	02. Parked Motor Vehicle 01
		03. Working Vehicle/Equipment 04. Non-Collision Vehicle
	0F 0 - 142 - 70 - 1 - 14 - 14 - 14 - 14 - 14 - 14 - 14	TRAFFICWAY DESCRIPTION
0.7,000	06. Turning Right 06. Motor Home	01. Two-Way, Not Divided
06. Equipment Failure (blown tire, brake failure, etc)	08. Making U-Turn 08. Transit Bus	02. Two-Way, Not Divided w/ a Continuous Left Turn Lane
07. Separation of Units	09. Leaving Traffic Lane 09. Motor Coach 10. Entering Traffic Lane 10. Other Bus	03. Two-Way, Divided, Unprotected
	14.00	(Painted >4 Feet) Median 04. Two-Way, Divided, Positive Median Barrier
10. Cross Median	12. Parked 12. Moped	05. One-Way Trafficway
11. Cross Center Line 12. Downhill Runaway	14. Overtaking/Passing Cyclist 1.14. Golf Cart	88. Not Applicable
13. Fell/Jumped From Motor Vehicle	15. Wrong Way or Wrong Side 15. All Теттаin Vehicle (ATV)	ROADWAY GRADE 01. Level
14, Reentering Roadway 15, Thrown or Falling Object	97. Other 17. Other Light Trucks (10.000 lbs GVWR or less)	02. Uphill
16. Other Non-Collision	18. Medium/Heavy Trucks	03. Hill Crest 04. Downhill
Collision With Person, Motor Vehicle,	CONTRIBUTING CIRCUMSTANCES 97 Other	05. Sag (bottom)
or Non-Fixed Object 17. Pedestrian		ROADWAY ALIGNMENT
18. Pedal Cycle/Pedal-cyclist 19. Other Non-motorist	01. Brakes UU 12 1	01. Straight 02. Curve Left
20. Railway Vehicle (train, engine)	U3. BODY, LIDORS IN IN INC.	03. Curve Right
21. Animal (live) 22. Motor Vehicle In Motion	04. Steering	TRAFFIC CONTROL DEVICE TYPE 01, No Control Device
23. Parked Motor Vehicle		02, Person (flagger, law enforcement, 06
24. Struck By Falling, Shifting Cargo or Anything Set In Motion By Motor Vehicle	07. Tires	crossing guard, etc.) 03. Traffic Control Signal
25. Work Zone/Maintenance Equipment		04. Flashing Traffic Control Signal
26. Other Non-Fixed Object		05. School Zone Sign/Device 06. Stop Sign
Collision With Fixed Object 27. Impact Attenuator/Crash Cushion	12. Wipers	07. Yleld Sign
28. Bridge Overhead Structure		08. Warning Sign
29. Bridge Pier or Support 30. Bridge Rail	Safety Chains See user guide for other vehicle diagrams. 88. Not Applicable Initial Contact Point	09. Railway Crossing Device 10. Marked Uncontrolled Crosswalk
31. Cable Barrier	97. Other 13. Non-Collision 17.	11. Pedestrian Button
32, Culvert 2nd 45	POSTED/STATUTORY SPEED LIMIT 14. Top (record the posted/statutory value as miles per hour) 15. Undercarriage	12. Bicycle Detection 97. Other
34. Ditch	01. Not Posted 16. Cargo loss	TRAFFIC CONTROL DEVICE
36. Guardrail Face	10, 15, 20, 25, 30, 35, 40, 45 50, 55, 60, 65, 70, 75, 80, 85	FUNCTIONAL?
37. Guardrail End 4 th 23	50, 55, 60, 65, 70, 75, 80, 85 Bamaged Areas (choose up to 3) 88. Not Applicable Damaged Areas (choose up to 3) 00. None	01. No 02, Yes 02
38. Concrete Traffic Barrier 39. Other Traffic Barrier	TOWED 14. Top 15. Undercarriage 12.	03. Missing
40. Tree (standing) 41. Utility Pole Most Harmful Event	01. Towed Due to Disabling Damage	88. Not Applicable
42. Traffic Sign Support	03. Not Towed 01 88. Not Applicable 01	Ġ.
43. Traffic Signal Support 45	TOWED TO EXTENT OF DAMAGE	
44. Other Post, Pole, or Support 45. Fence	Empire Motors 01. No Visible Damage	3
46. Mailbox 47. Other Fixed Object (wall, building, tunnel, etc.)	02. Minor Damage	5 ±
48, Light Support	03, Functional Damage 04. Disabling Damage	
88. Not Applicable	INSURANCE INFORMATION	
INSURANCE COMPANY		INSURANCE EXPIRATION DATE (yyyymmdd)
PROGRESSIVE	945016959	INSURANCE EXPIRATION DATE (yyyymmdd)
I LOOKEGOIVE	OTOU I OOOO	

CONNECTICUT UNIFORM POLICE CRASH REPORT

Form PR-1 REV June 2014.01 **Motor Vehicle Information** Complete One Sheet Per Motor Vehicle Case Number:

21-019086

DOT Identifier: For DOT use only

MOTO	OR VEHICLE OWNERSHIP INFORMATION	
Vehicle Owner Name (Last, First, Middle, Suffix) GASPARD, SAPPHIRE, MERCEDEZ	☐ Information same as driver	8 * ×
Street Address or Post Office Box 777 MAIN ST APT 1407		
City HARTFORD	State/Prov Country CT United States	Postal Code 06103
Email Address (optional)	Phone (optional)	
SPECIAL VEHICLE FUNCTION 01. No Special Function 02. Taxi 03. Vehicle Used as School Bus 04. Vehicle Used as Other Bus 05. Military 06. Police 07. Ambulance 08. Fire Truck 09. Non-Transport Emergency 10. Incident Response Services Vehicle	04. Emergency Operation, Emergency Warning Equipment in Use 88. Not Applicable 05. Ch 06. Shi	t a Bus nool nsit/Commuter ercity arter/Tour
Gomplote if public or private property other than validles were damaged in the cra NATURE AND EXTENT OF DAMAGE TO PROPERTY 1	PROPERTY DAMAGED	
CHAIN LINK FENCE		40 40 28
LIAME OF CHAPP OF COOPERTY		
NAME OF OWNER OF PROPERTY 1	e e e	
MATURE AND EXTENT OF DAMAGE TO PROPERTY 2 METAL COMMERCIAL DUMPSTER IN	PACTED BY AUDI	1.4
©	95	*
NAME OF OWNER OF PROPERTY 2	at-	
7 8	# W	
NATURE AND EXTENT OF DAMAGE TO PROPERTY 3		
a l		
NAME OF OWNER OF PROPERTY 3		

Pa	age 6 of 13 " Motor Vehic	The same of the sa		ORM POLICE CR. -1 REV June 2014.0		T Case Number:	21-019086
	Pers	on ID: 1		cle Driver Informa		DOT Identifier: For DOT use only	
	Name (Last, First, Middle, Suffix): Street Address or PO Box: 723 Eas	t Street	UIS	0.00 0.00 0.00 0.00 0.00 0.00	ENDER 1. Male 2. Female 9. Unknown	01	DATE OF BIRTH (YYYYMMDD) 2003/10/04 Date of Birth is unknown
	city: New Brit	tain State CT	Code	: 00031	(optional):	0532926)
	LICENSE INFO	For all numero fel day 99 = Unknow	â	0.000.000.000	NFORMATION	DODGED A OTION	
	STATE	EJECTION 01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable	01	SEATING POSITION FI	18	DRIVER ACTION: 01. No Contributin 02. Ran Off Roads 03. Failed to Yield 04. Ran Red Light 05. Ran Stop Sign	g Action 14 Away Right-of-Way 88
	DRIVER LICENSE JURISDICTION 11. Not Licensed 12. State 13. Tribal Nation 14. U.S. Government 15. Canadian Province 16. Mexican State 17. International License (other than	RESTRAINT SYSTEM 00. None Used-Motor Vehicle Oct 01. Shoulder and Lap Belt Used 02. Shoulder Belt Only Used 03. Lap Belt Only Used 04. Restraint Used Type Unknown 88. Not Applicable 97. Other		SECOND DIGIT _1. Left Seat (usually the motorcycle driver exvehicles and some for a middle Seat _3. Right Seat _8. Other Seat	cept for postal	06. Disregarded C 07. Disregarded C 08. Improper Turn 09. Improper Bacl 10. Improper Pass 11. Wrong Side of 12. Followed Too 13. Failed to Keep	Other Traffic Sign Other Road Markings It king sing or Wrong Way Closely
	Mexico and Canada) 08, Valid License (other country) 88. Not Applicable	HELMET USE 01. No Helmet 02. DOT-Compliant Motorcycle H	99			15. Operated Mot Negligent, or I 16. Swerved or A' Motor Vehicle 17. Over-Correcti	or Vehicle in Inattentive, Careless, Erratic Manner voided Due to Wind, , Object, Non-Motorist in Roadway, etc. ng/Over-Steering
	00. None 01. Class A 02. Class B 03. Class C 04. Class D 05. Class M 88. Not Applicable	03. Helmet, Other Than DOT-Cor Motorcycle Helmet 04. Helmet, Unknown If DOT-Cor 88. Not Applicable	npliant	900 900 900 900	33 (a) E		e uting Action CTED BY d 99 erating an mmunication Device (Texting, etc)
	COMMERCIAL LICENSE 01, No 02, Yes ENDORSEMENTS A - Activity Vehicles	01. Not Deployed 02. Deployed-Front 03. Deployed-Side 04. Deployed-Curtain 05. Deployed-Other 06. Deployed-Combination 88. Not Applicable	02	55)	Migitor ray cile	04. Talking on Ha 05, Other Activity 06, Passenger 07. Other Inside t 08. Outside the V	TIME OF CRASH (choose up to 2)
	☐ F - Taxi, Livery, Motor Coach ☐ H - Hazardous Materials ☐ M - Motorcycles ☐ N - Tank Vehicles ☐ P - Passenger	SPEED RELATED 01. No 02. Racing 03. Exceeded Speed Limit 04. Too Fast for Conditions	03	3		02. Physically Im 03. Emotional (de 04. III (sick), Faint 05. Asleep or Fal 06. Under the Inf 97. Other 99. Unknown	paired epressed, angry, etc.) 88
	☐ Q - Fire Fighting Vehicles ☐ S - School Bus ☐ T - Double/Triple Traillers ☐ V - Student Transportation ☐ X - Combination of Tank Vehicle and Hazardous Materials	INJURY STATUS K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury C. Possible Injury O. No Apparent Injury	MEDIO 01. No 02. EM 03. EM	MS Ground w Enforcement 01	EMS COMPA	NY NAME	
	00. None Taken 01. Verbal Warning 02. Written Warning 03. Infraction 04. Arrest/Summons [53a 12/3 53a- 10/0 53a-	ENFORCEMENT ACTION ON STATUTES -59]53a-59 ASSAUL 1/2199 -63 RECKLESS END 1/1992 - 12/31/2199 -124 LARCENY 3RD 1/2199	T 1ST D	MENT 1ST DE	G 01. 02. 03. 99. DRI 01. 02. 03. 03. 03. 03. 03. 03.	COHOL TEST STATUS Test Not Given Test Refused Test Given Unknown if Tested Ung TEST STATUS	OHOL INFORMATION S TYPE OF ALCOHOL TEST O1. Blood 02. Urine 03. Breath 88. Not Applicable 97. Other TYPE OF DRUG TEST O1. Blood 02. Urine 88. Not Applicable 97. Other

ić.

CONNECTICUT UNIFORM POLICE CRASH REPORT Motor Vehicle ID: 1

Form PR-1 REV June 2014.01

Case Number:

21-019086

Motor Vehicle Passenger Information Complete this sheet for Passengers in this Motor Vehicle

DOT Identifier: For DOT use only

PERSON ID 4		SER INFORMAT	1011	For all numeric fells: 99 = 1	University)	Use additional sheets if more
NAME:		P P	PERSON TYPE: 02	SEATING POSITION:	13	than 4 passengers occupied this motor vehicle
ADDRESS:				RESTRAINT SYSTEM:	99	PERSON TYPE 02. Passenger
CITY:		STATE or PROV:	POSTAL CODE:	HELMET USE:	01	07. Occupant of Parked Motor Vehicle 99. Unknown
DATE OF BIRTH (YYYYMMDD):	7 01. Male	INTENDED RECEIV	ING FACILITY:	EJECTION:	01	SEATING POSITION
Date of Birth is unknown	02. Female 99. Unknown	3		AIR BAG:	02	Example: Car, SUV, Van
EMS COMPANY NAME:	01	EMS RUN NUMBER	3.	INJURY STATUS:	0	3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
EMO COMPANT NAME.	š	ENG KON NOMBER		TRANSPORTED TO 1s MEDICAL FACILITY BY	01	
PERSON ID				For all numeric fields: 99 =	'Unknown'	RESTRAINT SYSTEM 00. None Used-Motor Vehicle Occupant
NAME:			PERSON TYPE:	SEATING POSITION:		01. Shoulder and Lap Belt Úsed 02. Shoulder Belt Only Used
ADDRESS:				RESTRAINT SYSTEM:		03. Lap Belt Only Used 04. Restraint Used Type Unknown
CITY:		STATE or PROV:	POSTAL CODE:	HELMET USE:		05. Child Restraint System Forward Facing 06. Child Restraint System Rear Facing
DATE OF BIRTH (YYYYMMDD):	GENDER: 01. Male	INTENDED RECEIV	VING FACILITY:	EJECTION:		07. Booster Seat 08. Child Restraint Type Unknown
Date of Birth is unknown	02, Female 99, Unknown	· ×		AIR BAG:		88. Not Applicable 97. Other
		PHO DUN ANTES	0	INJURY STATUS:	E	99, Unknown HELMET USE
EMS COMPANY NAME:	2	EMS RUN NUMBE	κ ;	TRANSPORTED TO 1s MEDICAL FACILITY B		01. No Helmet 02. DOT-Compliant Motorcycle Helmet 03. Helmet, Other Than DOT-Compliant
PERSON ID				For all numeric fields, 99 =	: "Ипкаска"	Motorcycle Helmet 04. Helmet, Unknown If DOT-Compliant
NAME:			PERSON TYPE:	SEATING POSITION:		88. Not Applicable 99. Unknown If Helmet Worn
ADDRESS:		L		RESTRAINT SYSTEM:		
CITY:				RESTRAINT STSTEM		EJECTION
	(1)	STATE or PROV:	POSTAL CODE:	HELMET USE:		01. Not Ejected 02. Ejected, Partially
DATE OF BIRTH (YYYYMMDD):	GENDER:		CODE:	-		01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable
		or PROV:	CODE:	HELMET USE:		01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown	01. Male 02. Female	or PROV:	CODE: VING FACILITY:	HELMET USE:		01. Not Ejected 02. Ejected, Partially .03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front
DATE OF BIRTH (YYYYMMDD):	01. Male 02. Female	or PROV:	CODE: VING FACILITY:	HELMET USE: EJECTION: AIR BAG:	L L L L L L L L L L L L L L L L L L L	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Side 04. Deployed-Curtain
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME:	01. Male 02. Female	or PROV:	CODE: VING FACILITY:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1. MEDICAL FACILITY B	st y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Side 04. Deployed-Curtain 05. Deployed-Other 06. Deployed-Combination
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME: PERSON ID	01. Male 02. Female	or PROV:	CODE: VING FACILITY:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1:	st y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Side 04. Deployed-Curtain 05. Deployed-Other 06. Deployed-Combination 88. Not Applicable 99. Deployment Unknown
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME: PERSON ID NAME:	01. Male 02. Female	or PROV:	CODE: VING FACILITY:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1: MEDICAL FACILITY B	st Y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Front 04. Deployed-Curtain 05. Deployed-Other 06. Deployed-Combination 88. Not Applicable 99. Deployment Unknown INJURY STATUS K. Fatal Injury
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME: PERSON ID NAME: ADDRESS:	01. Male 02. Female	or PROV:	CODE: VING FACILITY:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1: MEDICAL FACILITY B For all numero, fields: 39 SEATING POSITION:	st Y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Side 04. Deployed-Curtain 05. Deployed-Curtain 05. Deployed-Combination 88. Not Applicable 99. Deployment Unknown INJURY STATUS K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury C. Possible Injury
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME: PERSON ID NAME: ADDRESS: CITY:	01. Male 02. Female	or PROV: INTENDED RECEI	CODE: VING FACILITY: R: PERSON TYPE: POSTAL CODE:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1. MEDICAL FACILITY B For all numeric fields: 39 SEATING POSITION: RESTRAINT SYSTEM	st Y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Side 04. Deployed-Curtain 05. Deployed-Curtain 05. Deployed-Combination 88. Not Applicable 99. Deployment Unknown INJURY STATUS K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury C. Possible Injury O. No Apparent Injury
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME: PERSON ID NAME: ADDRESS:	01. Male 02. Female 99. Unknown	or PROV: INTENDED RECEI EMS RUN NUMBE STATE or PROV:	CODE: VING FACILITY: R: PERSON TYPE: POSTAL CODE:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1. MEDICAL FACILITY B For all numeric fields: 39 SEATING POSITION: RESTRAINT SYSTEM HELMET USE:	st Y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Front 03. Deployed-Gurtain 05. Deployed-Curtain 05. Deployed-Other 06. Deployed-Combination 88. Not Applicable 99. Deployment Unknown INJURY STATUS K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury C. Possible Injury O. No Apparent Injury TRANSPORTED TO FIRST MEDICAL FACILITY BY
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME: PERSON ID NAME: ADDRESS: CITY:	01. Male 02. Female 99. Unknown GENDER: 01. Male	or PROV: INTENDED RECEI EMS RUN NUMBE STATE or PROV:	CODE: VING FACILITY: R: PERSON TYPE: POSTAL CODE:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1. MEDICAL FACILITY B For all numero fields 39 SEATING POSITION: RESTRAINT SYSTEM HELMET USE: EJECTION: AIR BAG:	st Y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Front 03. Deployed-Gurtain 05. Deployed-Curtain 05. Deployed-Combination 88. Not Applicable 99. Deployment Unknown INJURY STATUS K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury C. Possible Injury O. No Apparent Injury TRANSPORTED TO FIRST MEDICAL FACILITY BY 01. Not Transported 02. EMS Air
DATE OF BIRTH (YYYYMMDD): Date of Birth is unknown EMS COMPANY NAME: PERSON ID NAME: ADDRESS: CITY: DATE OF BIRTH (YYYYMMDD):	GENDER: 01. Male 02. Female 99. Unknown GENDER: 01. Male 02. Female	or PROV: INTENDED RECEI EMS RUN NUMBE STATE or PROV:	CODE: VING FACILITY: ER: PERSON TYPE: POSTAL CODE: IVING FACILITY:	HELMET USE: EJECTION: AIR BAG: INJURY STATUS: TRANSPORTED TO 1. MEDICAL FACILITY B For all numero fields 39 SEATING POSITION: RESTRAINT SYSTEM HELMET USE: EJECTION:	st Y:	01. Not Ejected 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable 99. Unknown AIRBAG 01. Not Deployed 02. Deployed-Front 03. Deployed-Front 03. Deployed-Gurtain 05. Deployed-Curtain 05. Deployed-Curtain 06. Deployed-Combination 88. Not Applicable 99. Deployment Unknown INJURY STATUS K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury C. Possible Injury O. No Apparent Injury TRANSPORTED TO FIRST MEDICAL FACILITY BY 01. Not Transported

	ε			
Page 8 of 13 Motor Vehicle ID:	CONNECTICUT UNIFO	DRM POLICE CRASH REPOR	RT Case Nun	nham a da da a a a
2	Motor Vehic	le Information	Case Nun	21-019086
Number of occupants in Vehicle : (Including the driver)	Complete One	Sheet Per Motor Vehicle	For DOT us	
	MOTOR VE	HICLE INFORMATION		
VIN: 1D7HU18D44J154	180	VIN missing or removed Pla	te #: 7CJ2	284 Invalid Plate
Make: Dodge	Color: Red	Driver Evaded Responsibility Plate S	State: CT	No Plate
Model: RAM 1500 Quad ST/SLT	Year: 2004	Direction of Travel		
Road on which vehicle was traveling: 443		N, S, E, W	ot in roadway	Total lanes in roadway:
			ction	Bike lanes/sharrows present
For all numeric fields, 99 = "Unknown" SEQUENCE OF EVENTS	MOTOR VEHICLE ACTION	LE CRASH INFORMATION		MOTOR VEHICLE TYPE
(choose up to four, in chronological order)	01 Straight Ahead	01 Passenger Car		01 Motor Vehicle in Operation
Non-Collision	02. Negotiating a Curve 12	02. (Sport) Utility Vehicle		02. Parked Motor Vehicle 02
01. Overtum/Rollover	03. Backing	03, Passenger Van		03. Working Vehicle/Equipment
02. Fire / Explosion	04. Changing Lanes 05. Overtaking/Passing Motor Vehicle	04. Cargo Van (<10,000 lbs GVWR) 05. Pickup		04. Non-Collision Vehicle
03. Immersion, Full or Partial 04. Jackknife	06. Turning Right	05. Pickup 06. Motor Home		TRAFFICWAY DESCRIPTION
05. Cargo/Equipment Loss or Shift	07. Turning Left	07. School Bus		01, Two-Way, Not Divided 02, Two-Way, Not Divided w/
06. Equipment Failure (blown tire, brake failure, etc)	08. Making U-Tum	08. Transit Bus		02. Two-Way, Not Divided w/ a Continuous Left Turn Lane
07. Separation of Units	09. Leaving Traffic Lane	09. Motor Coach		03. Two-Way, Divided, Unprotected
08. Ran Off Roadway Right 09. Ran Off Roadway Left	10. Entering Traffic Lane 11. Slowing	10. Other Bus 11. Motorcycle		(Painted >4 Feet) Median
10. Cross Median	12. Parked	12. Moped		04. Two-Way, Divided, Positive Median Barrier
11. Cross Center Line	13. Stopped in Traffic	13. Low Speed Vehicle		05. One-Way Trafficway 88. Not Applicable
12. Downhill Runaway	14. Overtaking/Passing Cyclist	14. Golf Cart	. }	ROADWAY GRADE
13. Fell/Jumped From Motor Vehicle 14. Reentering Roadway	 Wrong Way or Wrong Side Traveling in Bike Lane 	15. All Terrain Vehicle (ATV) 16. Snowmobile		Of Level
15. Thrown or Falling Object	97. Other	17. Other Light Trucks (10,000 lbs	GVWR or less)	02. Uphill
16. Other Non-Collision		18. Medium/Heavy Trucks		03. Hill Crest
Collision With Person, Motor Vehicle,	CONTRIBUTING CIRCUMSTANCES	(more than 10,000 lbs GVWR)		04. Downhill 05. Sag (bottom)
or Non-Fixed Object	MOTOR VEHICLE (choose up to 2)	97. Other		ROADWAY ALIGNMENT
17. Pedestrian 18. Pedal Cycle/Pedal-cyclist	00. None 01. Brakes	MOTOR VEHICLE DAMAGE		Od Chroight
19. Other Non-motorist	01. Brakes 02. Exhaust System	11		02. Curve Left 01
20. Railway Vehicle (train, engine)	03. Body, Doors	12	λ	03. Curve Right
21. Animal (live)	04. Steering	10/ 11/11/11/11	\ ²	TRAFFIC CONTROL DEVICE TYPE
22. Motor Vehicle In Motion 23. Parked Motor Vehicle	05, Power Train	10 2		01. No Control Device
24, Struck By Falling, Shifting Cargo or	06. Suspension 07. Tires	9 9 3	3	02. Person (flagger, law enforcement, 01
Anything Set in Motion By Motor Vehicle	08. Wheels	8 4		crossing guard, etc.) 03. Traffic Control Signal
25. Work Zone/Maintenance Equipment	09. Lights (head, signal, tail)	7 5	/4	04. Flashing Traffic Control Signal
26. Other Non-Fixed Object	10. Windows/Windshield	6	Y	05. School Zone Sign/Device
Collision With Fixed Object	11. Mirrors 12. Wipers	1 5		06. Stop Sign
27. Impact Attenuator/Crash Cushion 28. Bridge Overhead Structure	13. Truck Coupling / Trailer Hitch /	Use diagram above for values 1-12		07. Yield Sign 08. Warning Sign
20 Bridge Pier or Support	Safety Chains	See user guide for other vehicle di	agrams.	09. Railway Crossing Device
30. Bridge Rail	88. Not Applicable	Initial Contact Point		10. Marked Uncontrolled Crosswalk
31. Cable Barrier	97. Other	13. Non-Collision	01	11. Pedestrian Button
32. Culvert 2nd 88	POSTED/STATUTORY SPEED LIMIT	14. Top		12. Bicycle Detection 97. Other
24 Ditab	(record the posted/statutory value as miles p 01. Not Posted	er hour) 15. Undercarriage 16. Cargo loss		
35. Embankment 3rd 88	10, 15, 20, 25, 30, 35, 40, 45			TRAFFIC CONTROL DEVICE
36. Guardrail Face	50, 55, 60, 65, 70, 75, 80, 85	Damaged Areas (choose up to 3)	01	FUNCTIONAL?
37. Guardrail End 4th 88	88. Not Applicable	00, None		01. No 02. Yes
39. Other Traffic Barrier	TOWED	14. Top	10	03. Missing
40. Tree (standing)	01. Towed Due to Disabling Damage	15. Undercarriage 17. All Areas		88. Not Applicable
41. Utility Pole Most Harmful Event 42. Traffic Sign Support	02. Towed, But Not Due to Disabling D 03. Not Towed	amage 88. Not Applicable		
43. Traffic Signal Support 22	03. Not Towed 03	8		
44. Other Post, Pole, or Support	TOWED TO	EXTENT OF DAMAGE)		
45. Fence		01. No Visible Damage		
46. Mailbox		02. Minor Damage		
47. Other Fixed Object (wall, building, tunnel, etc.) 48. Light Support		03. Functional Damage	03	·
88. Not Applicable		04. Disabling Damage	1-0	:*
TO THE RESIDENCE OF	INSURA	NCE INFORMATION		
				THE PART OF THE PARTY OF THE PA

INSURANCE COMPANY
CSAA AFFINITY INSURANCE CO CTSS107071549

INSURANCE EXPIRATION DATE (yyyymmdd)

CONNECTICUT UNIFORM POLICE CRASH REPORT

Form PR-1 REV June 2014.01

Motor Vehicle Information

Complete One Sheet Per Motor Vehicle

Case Number:

21-019086 DOT Identifier: For DOT use only MOTOR VEHICLE OWNERSHIP INFORMATION

Vehicle Owner Name (Last, First, Middle, Suffix) GARCIA, WANDA	, Information same as driver	
Street Address or Post Office Box 443 CHESTNUT ST	t (
city NEW BRITAIN	State/Prov Country Postal Code CT United States 06051	
Email Address (optional)	Phone (optional)	
SPECIAL VEHICLE FUNCTION 01. No Special Function 02. Taxi 03. Vehicle Used as School Bus 04. Vehicle Used as Other Bus 05. Military 06. Police 07. Ambulance 08. Fire Truck 09. Non-Transport Emergency 10. Incident Response Services Vehicle	EMERGENCY VEHICLE 01. Non-Emergency Situation, Not Transporting Patient 02. Non-Emergency Transport of Passenger 03. Emergency Operation, Emergency Warning Equipment Not in Use 04. Emergency Operation, Emergency Warning Equipment In Use 88. Not Applicable BUS USE 01. Not a Bus 02. School 03. Transit/Commuter 04. Intercity 05. Charter/Tour 06. Shuttle 88. Not Applicable	01
Complete if public or private properly other than vehicles were damagnature and extent of damage to property 1	ged in the crash PROPERTY DAMAGED	
INTO EXTERN OF BUILDING FOR THE EXTERNAL		·
a a		
NAME OF OWNER OF PROPERTY 1	9 9 9 ¥	=
*		
·		
NATURE AND EXTENT OF DAMAGE TO PROPERTY 2		
NAME OF OWNER OF PROPERTY 2		
NATURE AND EXTENT OF DAMAGE TO PROPERTY 3	t (20)	
	e e	
NAME OF OWNER OF PROPERTY 3		
× ×	027	

	2000 10 of 12	CONNECTICUT UNITODIA		\$6.
Г	age 10 of 13 Motor Vehicle ID:		/ June 2014.01 Case N	umber: 21-019086
	Number of occupants in Vehicle :	Motor Vehicle Inf Complete One Shee	et Per Motor Vehicle DOT Ide	ntifier:
I	The second secon	MOTOR VEHICLE		E HE EN LONG EN LA CONTROL DE
Ī	VIN: 1GBFG15R9X1025	684 □vin	missing or removed Plate #: 7AF	PLJ6 Invalid Plate
	Make: CHEVR	Color: GRN Driv	er Evaded Responsibility Plate State: CT	
1	Model: G1500 EX	1001.1 [333	ection of Travel	
	Road on which vehicle was traveling: 443 (CHESTNUT ST	N, S, E, W Vehicle was not in roadway Unknown direction	Total lanes in roadway: O
Ì	For su numero, (ictas, 99 ≤ 'Uniciavia')	MOTOR VEHICLE CR		
Ī	SEQUENCE OF EVENTS	MOTOR VEHICLE ACTION	BODY TYPE	MOTOR VEHICLE TYPE
1	(choose up to four, in chronological order)	01. Straight Ahead 02. Negotiating a Curve	01. Passenger Car 02. (Sport) Utility Vehicle	01. Motor Vehicle in Operation 02. Parked Motor Vehicle 02
- 1	Non-Collision 01. Overturn/Rollover	03, Backing	03. Passenger Van	03. Working Vehicle/Equipment
	02. Fire / Explosion	04, Changing Lanes	04. Cargo Van (<10,000 lbs GVWR)	04. Non-Collision Vehicle
	03. Immersion, Full or Partial	05. Overtaking/Passing Motor Vehicle	05. Pickup	TRAFFICWAY DESCRIPTION
- 1	04. Jackknife	06, Turning Right 07. Turning Left	06, Motor Home 07, School Bus	01. Two-Way, Not Divided 02. Two-Way, Not Divided w/
Н	05. Cargo/Equipment Loss or Shift 06. Equipment Failure (blown tire, brake failure, etc)	08. Making U-Turn	08. Transit Bus	52. 11.5 traj; 1.5.2.11.252 tr.
	07. Separation of Units	09. Leaving Traffic Lane	09. Motor Coach	a Continuous Left Turn Lane 03. Two-Way, Divided, Unprotected
	08. Ran Off Roadway Right	10. Entering Traffic Lane	10. Other Bus	(Painted >4 Feet) Median
	09. Ran Off Roadway Left	11. Slowing 12. Parked	11. Motorcycle 12. Moped	04. Two-Way, Divided, Positive Median Barrier
	10. Cross Median 11. Cross Center Line	13. Stopped in Traffic	13. Low Speed Vehicle	05. One-Way Trafficway 88. Not Applicable
	12. Downhill Runaway	14. Overtaking/Passing Cyclist	14. Golf Cart	ROADWAY GRADE
	13, Fell/Jumped From Motor Vehicle	15. Wrong Way or Wrong Side 16. Traveling in Bike Lane	15. All Terrain Vehicle (ATV) 16. Snowmobile	Ot Lovel
	14, Reentering Roadway 15, Thrown or Falling Object	97. Other	17. Other Light Trucks (10,000 lbs GVWR or less	02, Uphill 01
	16. Other Non-Collision		18. Medium/Heavy Trucks	03. Hill Crest
	Collision With Person, Motor Vehicle,	CONTRIBUTING CIRCUMSTANCES	(more than 10,000 lbs GVWR)	04. Downhill 05. Sag (bottom)
	or Non-Fixed Object	MOTOR VEHICLE (choose up to 2)	97. Other	ROADWAY ALIGNMENT
	17. Pedestrian 18. Pedal Cycle/Pedal-cyclist	00. None 01. Brakes	MOTOR VEHICLE DAMAGE	Od Chroight
	19. Other Non-motorist	02. Exhaust System	11	02. Curve Left
	20. Railway Vehicle (train, engine)	03. Body, Doors	10 12 2	03. Curve Right
	21. Animal (live) 22. Motor Vehicle In Motion	04. Steering		TRAFFIC CONTROL DEVICE TYPE
	23, Parked Motor Vehicle	05. Power Train 06. Suspension	10 2	01. No Control Device 02. Person (flagger, law enforcement, 01
	24. Struck By Falling, Shifting Cargo or	07. Tires	9 9 3 3	crossing guard, etc.)
	Anything Set In Motion By Motor Vehicle	08. Wheels	8 4 7	03. Traffic Control Signal
	25. Work Zone/Maintenance Equipment 26. Other Non-Fixed Object	09. Lights (head, signal, tail) 10. Windows/Windshield	5 4	04. Flashing Traffic Control Signal 05. School Zone Sign/Device
	Collision With Fixed Object	11. Mirrors	7 6	06. Stop Sign
	27. Impact Attenuator/Crash Cushion	12. Wipers	6	07. Yield Sign
	28. Bridge Overhead Structure	13. Truck Coupling / Trailer Hitch / Safety Chains	Use diagram above for values 1-12 See user guide for other vehicle diagrams.	08. Warning Sign 09. Railway Crossing Device
	29. Bridge Pier or Support 30. Bridge Rail	88. Not Applicable	Initial Contact Boint	10. Marked Uncontrolled Crosswalk
	31. Cable Barrier	97. Other	13. Non-Collision	11. Pedestrian Button
	32. Culvert 2nd 88	POSTED/STATUTORY SPEED LIMIT	14. Top	12. Bicycle Detection 97, Other
	34 Ditch	(record the posted/statutory value as miles per hour)	15, Undercarriage 16, Cargo loss	or, Outo
	35, Embankment 3 rd 88	01, Not Posted 10, 15, 20, 25, 30, 35, 40, 45	To, Calgo loss	TRAFFIC CONTROL DEVICE
	36, Guardrail Face	50, 55, 60, 65, 70, 75, 80, 85	Damaged Areas (choose up to 3)	FUNCTIONAL?
	37. Guardrail End 4th 88	88, Not Applicable	00, None	01. No 02. Yes
	39. Other Traffic Barrier	TOWED	14. Top 15. Undercarriage	03. Missing
	40. Tree (standing) Most Harmful	01. Towed Due to Disabling Damage	17 All Aroge	88, Not Applicable
	41. Utility Pole Most Harmful Event 42. Traffic Sign Support	02. Towed, But Not Due to Disabling Damage 03. Not Towed	88. Not Applicable	~
	43. Traffic Signal Support 22	03. Not Towed		
	44. Other Post, Pole, or Support	TOWED TO	EXTENT OF DAMAGE	
	45, Fence 46, Mailbox		01. No Visible Damage 02. Minor Damage	
	47. Other Fixed Object (wall, building, tunnel, etc.)	12	100 5 11 15	
	48. Light Support		03, Functional Damage 04, Disabling Damage	
	88, Not Applicable	INCLIDANCE	INFORMATION	
			INFORMATION	INCHES AND EVEN AND A TOTAL OF THE STATE OF
	INSURANCE COMPANY	INSURANCE POLICY		INSURANCE EXPIRATION DATE (yyyymmdd)
	CSAA AFFINITY ASSU	KANCE CO C 5510	7071549	

CONNECTICUT UNIFORM POLICE CRASH REPORT

Form PR-1 REV June 2014.01 Motor Vehicle Information

Complete One Sheet Per Motor Vehicle

Case Number:

21-019086

DOT Identifier: For DOT use only

MOTOR VEHICLE OWNERSHIP INFORMATION Information same as driver Vehicle Owner Name (Last, First, Middle, Suffix) GARCIA, JULIO, OSVALDO Street Address or Post Office Box 443 CHESTNUT ST State/Prov Postal Code **United States NEW BRITAIN** CT 06051 Phone (optional) Email Address (optional) 8608390398 SPECIAL VEHICLE FUNCTION **EMERGENCY VEHICLE BUS USE** 01, No Special Function 01. Non-Emergency Situation, Not Transporting Patient 01. Not a Bus 01 01 02, School 02. Non-Emergency Transport of Passenger 02. Taxi 03, Vehicle Used as School Bus 03. Emergency Operation, Emergency Warning Equipment Not in Use 03. Transit/Commuter 04. Emergency Operation, Emergency Warning Equipment in Use 04. Intercity 04. Vehicle Used as Other Bus 05, Charter/Tour 05. Military 88, Not Applicable 06. Shuttle 06. Police 07, Ambulance 88. Not Applicable 08. Fire Truck 09. Non-Transport Emergency 10, Incident Response Services Vehicle **PROPERTY DAMAGED** Complete if public of private property other than vehicles were damaged in the crash NATURE AND EXTENT OF DAMAGE TO PROPERTY 1 NAME OF OWNER OF PROPERTY 1 NATURE AND EXTENT OF DAMAGE TO PROPERTY 2 NAME OF OWNER OF PROPERTY 2 NATURE AND EXTENT OF DAMAGE TO PROPERTY 3 NAME OF OWNER OF PROPERTY 3

	age 12 of 13 Bicycle ID: Person ID: 3	CONNECTICUT UNIFORM Form PR-1 REV		21-019086
	Striking Motor Vehicle ID:	Non-Motorist	201 100	ntifier:
_			ion motorial involved in order	and only
Ī	Road on which non-motorist was traveling/locate	ed: SIDEWALK OF EAST ST JUST NORTH OF BE	Non-motorist was not in roadway	Direction of travel (N, S, E, W):
l			JOnknown direction	<u>U</u>
	Name (Last, First, Middle, Suffix); GUDELSKI,	NON-MOTORIST	GENDER	DATE OF BIRTH (YYYYMMDD)
	Street Address or P.O. Box: 30 JEFFER	SON ST	01. Male 02. Female 99. Unknown	1967/12/11 Date of Birth is unknown
	city: New Britain	State CT Postal Code: 06	Phone/Email (optional):	
(NON-MOTORIST PERSON TYPE 03. Pedestrian 04. Other Pedestrian (wheelchair, person in a building, skater, pedestrian conveyance) 05. Bicyclist	NON-MOTORIST ACTION/ CIRCUMSTANCE PRIOR TO CRASH 00. None 01. Crossing Roadway 02. Waiting to Cross Roadway	NON-MOTORIST LOCATION AT TIME OF CRASH 01. Intersection - Marked Crosswalk 02. Intersection - Unmarked Crosswalk 03. Intersection - Other	NON-MOTORIST DISTRACTED BY 01. Not Distracted 02. Manually Operating an Electronic Communication Device (Texting, etc)
	06. Other Cyclist 08. Occupant of a Non-Motor Vehicle Transportation Device	03. Walking/Cycling Along Roadway With Traffic (In or Adjacent to Travel Lane) 04. Walking/Cycling Along Roadway Against Traffic (In or Adjacent to Travel Lane) 05. Walking/Cycling on Sidewalk 06. In Roadway - Other (Working, Playing, etc.)	04. Mid Block - Marked Crosswalk 05. Travel Lane - Other Location 06. Bicycle Lane 07. Shoulder/Roadside 08. Sidewalk 09. Median/Crossing Island	03. Talking on Hands-Free Electronic Device 04. Talking on Hand-Held Electronic Device 05. Other Activity, Electronic Device 06. Other Activity, Inside the Vehicle (eating, hygiene, etc.) 07. Other, Outside the Vehicle
	03	07. Adjacent to Roadway (e.g., Shoulder, Median) 08. Working in Trafficway for Incident Response 88. Not Applicable 97. Other	10. Driveway Access 11. Shared-Use Path or Trail 12. Non-Trafficway Area 13. Sharrow/Shared Lane Marking 97. Other	01
	IDENTIFICATION INFO	NON-MOTORIST ACTION/ CIRCUMSTANCES AT TIME OF CRASH	NON-MOTORIST SAFETY EQUIPMENT (choose up to 2)	NON-MOTORIST CONDITION AT TIME OF CRASH
	ISSUED BY	(choose up to 2) 01. No Improper Action 02. Dart/Dash 03. Failure to Yield Right-Of-Way 04. Failure to Obey Traffic Signs, Signals, or Officer	00. None 01. Helmet 02. Protective Pads Used 03. Reflective Clothing 04. Lighting 05. ANSI Approved Bicycle Helmet	(choose up to 2) 01. Apparently Normal 02. Physically Impaired 03. Emotional (depressed, angry, etc.) 04. Ill (sick), Fainted 05. Asleep or Fatigued
	DRIVER LICENSE JURISDICTION 01, Not Licensed 02. State 03. Tribal Nation 04. U.S. Government 05. Canadian Province	No Roadway Improperly (Standing, Lying, Working, Playing) Standard Vehicle Related (Working on, Pushing, Leaving/Approaching) Therring/Exiting Parked/Standing Vehicle Inattentive (talking, eating, etc.)	88. Not Applicable 97. Other	06. Under the Influence (Meds/Drugs/Alcohol) 97. Other 99 88
	06. Mexican State 07. International License (other than Mexico and Canada) 08. Valid License (Other Country) 88. Not Applicable 99. Unknown	09. Not Visible (Dark Clothing, No Lighting, etc.) 10. Improper Turn/Merge 11. Improper Passing 12. Wrong-Way Riding or Walking 13. Use of Electronic Device 88. Not Applicable 97. Other	00	GOING TO / FROM SCHOOL 01. No 02. Yes
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A	K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury C. Possible Injury 03. EM	SPORTED TO FIRST IAL FACILITY BY EMS COMPAN EMS RUN NUI S Air IS Ground V Enforcement THE	NEW BRITAIN I	
	ACTION BY OFFICER 00. None Taken 01. Verbal Warning 02. Written Warning 03. Infraction 04. Arrest/Summons	ORCEMENT ACTIONS TAKEN TUTES	ALCOHOL TEST 01. Test Not Give 02. Test Refused 03. Test Given 99. Unknown if T	01 01. Blood 02. Urine 03. Breath 88. Not Applicable 97. Other TYPE OF DRUG TEST
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Page 13 of 13

Number of Witnesses: 1

CONNECTICUT UNIFORM POLICE CRASH REPORT

Form PR-1 REV June 2014.01

Case Number:

21-019086

Appendix E: Witness Complete this sheet for all witnesses to the crash **DOT Identifier:** For DOT use only

Please complete this Appendix form for witnesses to a crash. Each Appendix form can document information for up to three witnesses. Multiple forms can be used if necessary. Actual witness statements should be collected on department statement sheets and witnesses should be identified using unique Person ID numbers.

PERSON ID 2	WITNESS INFORMATIO	N		
NAME: Ramirez, Joshua	12		WITNESS STATEMENT TYPE (choose all that apply; max 2)	
ADDRESS: 501 EAST ST			01. No Statement Taken 02. Provided Written Statement	02
	STATE OF POSTAL OF CODE:	3051	03, Willing to Provide a Written Statement 04. Oral Statement Only	88
DATE OF BIRTH (YYYYMMDD): 1997/08/14	Date of Birth is unknown		05. Statement Confirmed by other Witness	
WITNESS STATEMENT SOURCE (choose all that apply; max 4) 01. Observed Crash Occur 02. Overheard Statements by Person Involved 03. Observed illegal activities by persons involved in the crash prior t 04. Observed other illegal behavior by a vehicle involved in the crash 88. Not Applicable	o police arrival or resulting in the crash occurring	01 88 88	WITNESS OBSERVATION VERIFICATION (choose all that apply; max 3) 01. Sight Lines Verified By Reporting Officer 02. Sight Lines Verified By Other Officer 03. Sight Lines Confirmed by Other Witness 04. Verification Not Possible 05. Verification Not Undertaken	05 88 88
PERSON ID				
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Arrest Warr	ant	or y or that the ele-	***************************************	1
Geographical area number 15	State of Connecticu	tvs. Ben Jones		
To: Any Proper By Authority	Officer of the State of y of the State of Conne occused. ("X" all that ap	cticut, vou are hereby commanded to	arrest the body of the	
☐ A. Acc	used is ordered to be k	prought before a clerk or assistant cler	rk of the Superior Court	
☐ B. Acc	used is not entitled to b	pall.	9	
com	nmitted, or if the clerk's	l above, you shall without undue delay perior Court for the geographical area office is not open, to a community co- unity correctional center if no such ce , as the case may be.	a where the offense is alle	eged to have been
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Geographical	Arrest Warrant	With the second		×
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ARREST WARRANT APPLICATION JD-CR-64b Rev. 1-11	STATE OF CONNECTICUT	For Court Use Only
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	New Britain Police	CT0008900
Nama (Last, First, Middle Initial): JONES, BEN	PLAINVILLE	New Britain Scoggaphical 15
Application For Arrest Warrar	it	
To: A Judge of the Superior Court		
The undersigned hereby applies for a set forth in the: Affidavit Below.	warrant for the arrest of the above-named accuse Affidavit(s) Attached.	ed on the basis of the facts
Date 7 27 2 Signed (Prosect	uting authority)	Compression of the compression o
Affidavit The undersigned affiant, being duly so	worn, deposes and says:	
THAT, the undersigned	Affiant, Officer Neil Beaty	, being duly sworn,
does depose and state	that he is a member of the	New Britain Police
Department and has be	en a member since May 22, 20	15. At all times
mentioned herein he w	ras acting as a member of sai	d department. The
following facts and c	ircumstances are stated from	ı personal knowledge
and observations as w	well as information received	from other police
officers acting in th	neir official capacity and fr	om official police
reports and statement	s made by prudent and credib	ole witnesses.
Division in the Traff Department. Your Af- Reconstructionist and part of the Traffic S serious and fatal mod THAT, on June 29, 20 Traffic Safety Burea vehicle crash that o	Fic Safety Bureau at the New Fiant is a Motor Vehicle Accident one of the primary responsible Safety Bureau is to respond to the vehicle accidents. 21, your Affiant along with a were recalled to duty to industried on East Street at the	Britain Police ident ibilities as being a to and investigate other members of the nvestigate a motor
07/01/2021	Signed (Affinit) BEATY, NEIL, W	the state of the s
Jurat Subscribed and Avern to before me	The state of the s	arior Coulti, Notary Publici
Finding		And the second s
considered by the undersigned, the an offense has been committed an issuance of a warrant for the arrest		e is probable cause to believe that at probable cause exists for the
Date and Shried at (Chypretayin) Signature	Single (Male) Single (Male And) .	Name of Sudge of the Francisco
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JD-CR-64a Rev. 1-11 O.G.S. § 54-2a Pr. Bk. Sec. 38-1, 38-2, 36-3

STATE OF CONNECTICUT SUPERIOR GOURT

www.jud.ct.gov

Name (Lest, First, Middle Intel): JONES, BEN Residence (Town) of accused PLAINVILLE

New Britain

Geographical 15

Affidavit - Continued

Belden Street in the City of New Britain, Connecticut. Upon arrival your Affiant observed that the scene had been secured by New Britain Police Officers. Your Affiant observed that there was a white Audi SUV that had crashed through a chain link fence on the northeast corner of the intersection and subsequently into a parked pickup truck, van and dumpster. The occupants of the Audi had fled on foot following the crash. Your Affiant was further advised that a pedestrian, identified as Henryk Gudelski DOB 12/11/67, had also been struck by the Audi and was killed. Gudelski's sneakers were still on scene where he was struck by the Audi. The details of the incident are as follows.

THAT, June 29, 2021 at approximately 7:11 PM, Officer Lagasse from the New Britain Police Department responded to the area of East Street and Ellis Street in the City of New Britain, Connecticut, for a report of a party following a white Audi SUV. Dispatch advised that that the party, later positively identified by his valid State of Connecticut driver's license as BEN JONES DOB 06/16/1969, called 911 to report that he observed a suspect in the Audi committing a larceny from his unoccupied vehicle (Acura TL) in the Town of Plainville and was currently following it in New Britain.

THAT, Officer Lagasse reported that JONES followed the Audi throughout the City of New Britain providing a partial registration, at which time Dispatch provided an update that the Audi matched a File 01 Stolen Vehicle bearing CT registration BA29334 which was a confirmed stolen vehicle out of the City of Hartford.

THAT, Officer Lagasse reported that he was traveling northbound on

Dato	page 2 of ¹¹ page Affidavit). /2021	Signed (Afflant) BEATY, NEIL, W
Jurat	Subscribed and swarp to before me on (Deta)	Signed (Judgin Glerk, Commission of Superior Gour, Notelly Public) TORRENTE, JOSEPH A J. T. C.
Reviewed	1 (Prosperioris) Onto Date 7 27 2	Raviowed Hudge North Related Date 27, 2021

JD-CR-64a Rev. 1-11 C.G.S. § 54-2a Pr. Bk. Sec. 38-1, 38-2, 36-3

STATE OF CONNECTICUT SUPERIOR COURT

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JONES	BEN	**

Residence (Town) of accused PLAINVILLE

New Britain

Geographical 15

Affidavit - Continued

East Street and as he was approaching the intersection of East Street and Belden Street, he was able to observe a white Audi SUV travel westbound on Belden Street. Officer Lagasse stated that the Audi failed to reduce speed and crossed both lanes of traffic, striking a fence post at 501 East Street and a pedestrian, later identified as Henryk Gudelski DOB 12/11/67, who was believed to be on the east side of the sidewalk. Officer Lagasse reported that the Audi continued to travel westbound across both lanes of traffic on East Street where it collided into two additional vehicles and a large dumpster before coming to final rest. Officer Lagasse reported that two males fled from the Audi on foot were subsequently not located.

THAT, Sergeant Strzalka from the New Britain Police Department also responded to the area in response to the complaint. Sergeant Strzalka reported that as he was traveling northbound on East Street he observed the Audi traveling westbound on Belden Street at a high rate of speed. Sergeant Strzalka reported that he observed the Audi collide with a fence along the west of 501 East Street, continue to travel striking Gudelski, then continue to travel westbound across both lanes of East Street finally coming to rest in the rear of 443 Chestnut Sreet. Sergeant Strzalka reported that he observed two males exit the Audi and flee on foot.

THAT, Sergeant Strzalka reported that he exited his marked police cruiser to check on Gudelski and as he did so he observed that JONES had exited his vehicle, an Acura TL bearing CT registration BB64499. Sergeant Strzalka reported that JONES told him that the suspect(s) had thrown his [JONES'] wallet out the window of the Audi. As JONES was talking to Sergeant Strzalka, other Officers converged on the

07/01	/2021	Signed (Affiant) BEATY, NEIL, W
Jurat	1	Signed (Judge/Clerk, Commissioner of Suffers) Court, Nicery Public) TORRENTE, JOSEPH J 3774
Reviewer	1 (Prosecularies Opinion)	Reclaimed (Judget Jacks Fried Reference) Date 2.7.20

JD-CR-64a Rev. 1-11 C.G.S. § 54-2a Pr. Bk. Sec. 36-1, 36-2, 36-3

STATE OF CONNECTICUT SUPERIOR COURT

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Name (Lest, First, Middle Inka)	Residence (Town) of accused	Court to be held at (Town).	Goographical:	4 -
JONES, BEN	PLAINVILLE	New Britain	ylus unimpan	15

Affidavit - Continued

scene and as a result, JONES' car was boxed in. Sergeant Strzalka reported that JONES demanded that he [Sergeant Strzalka] move the cruiser so that he [JONES] could leave to retrieve the wallet. Sergeant Strzalka reported that he declined and continued to make his way towards Gudelski. JONES continued to request that Sergeant Strzalka move the cruiser while Sergeant Strzalka was tending to Gudelski.

THAT, Officer Mantiglia of the New Britain Police Department also responded to the area in response to the complaint. Officer Mantiglia reported that he observed both the Audi and JONES' Acura TL traveling at a high rate of speed on Dwight Street. Officer Mantiglia reported that he lost sight of both vehicles but then observed them again on Belden Street, both traveling at a high rate of speed. Officer Mantiglia reported that he lost sight of them again however a short time later heard the motor vehicle crash being reported over the police radio.

THAT, Officer R. McColgan of the New Britain Police Department also responded to the area in response to the motor vehicle crash. Officer R. McColgan reported that she spoke with a witness, Joshua Ramirez DOB 08/14/97, who stated that he was waiting outside of his house located on Belden Street for his girlfriend. Ramirez stated that he saw an Audi SUV traveling westbound on Belden Street at a high rate of speed. Ramirez stated that the Audi lost control and struck a person traveling southbound on the sidewalk. Ramirez stated that the Audi was being chased by a gray Acura. Ramirez stated that following the crash, two males fled from the Audi. Ramirez further stated that the driver of the Acura pulled over and began yelling at

Date 07/01	/2021	Signed (Affiant) BEATY, NEIL, W Signed (Jodga/Obick, Commissioner of Stipenor Could, New Public) TORRENTE, JOSEPHJ	
Jurat	Subscribed and sworn to before me on (Qale)		
Ravlaws	d (Prosecutorial Official)	Reviewed (Judge / Judge Trial Estates) April 47, 20 mg	

JD-CR-84a Rev. 1-11 C.G.S. § 54-2a Pr. Bk. Sec. 36-1, 36-2, 36-3

STATE OF CONNECTICUT SUPERIOR COURT

www.jud.ct.gov

Name (Lust, First, Middle Intial), JONES, BEN Residence (Town) of accused PLAINVILLE

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Geographical 15

Affidavit - Continued

him to chase the two males from the Audi because they stole his wallet at a store. Ramirez stated that the Police arrived on scene at this time. Ramirez provided a sworn written statement.

THAT, JONES voluntarily came to the New Britain Police Department where he was brought up to the Detective Bureau to be interviewed. JONES was advised of his Miranda Rights, which he waived and agreed to speak with me about the incident. JONES provided a sworn written statement of the following:

"On 06/29/21 around 5:30PM - 6:00PM, I was at the Mobil Gas Station in Plainville. I was sitting in my girlfriend's car in a parking spot because she was at work there. My car, a gray Acura TL, was parked next to hers. While I was sitting in her car I saw someone next to mine. His car was parked at an angle next to the side of my car. I saw a silhouette of a person inside of my car. I jumped out of my girlfriend's car and the male got into his car and drove off like nothing was going on. I opened my car and saw that my glasses had fallen down. I realized the male had been inside my car. I got into my car and drove off after the other car. Once the other car got onto the highway they realized I was following them and they tried to get away from me. They got off the Columbus Blvd. exit in New Britain off At this point the passenger pointed something back at me out I did not know if it was a gun or not but I wasn't of the window. going to find out so I backed off. I continued following him until he got to the area of Guida's Dairy, then he accelerated fast. He was going around 60-65 MPH at this point. They kept on slowing and stopping thinking that they were going to jump out. They finally went down Kelsey St. and threw my wallet out of

07/01/2021			Signed (Million). BEATY, NEIL, W
Jurat	Subscribed and Ayam to before me on (Dale)		Significati (Judgo Clork, Commissioner of Supplice County Public) TORRENTE, JOSEPH
Reviewed	(Proseculonia) (Illicial)	7/27/21	Raviewad (Judge/Judger Zant Referge) Affel a 6-6-4 Let Z7 202