Melissa Cordeiro
*Council Clerk*

# PETITION TO THE TOWN COUNCIL

TOWN CLERK'S OFFICE
BRISTOL, RHODE ISLAND
2026 JUL 15 PM 3:07
DATE RECEIVED

To the Honorable Town Council of the Town of Bristol:

The undersigned hereby respectfully request of your Honorable Body that:

while My car was parked on Chestnut steet it was struck by a town vehicle dicetly IN the rear of the My car I have the police Report Confiming this along with an estimate On the damge cost of Repairs Please Have insurance or a check issued to cover this amount so I can have the repairs completed Thank YOU

**PLEASE NOTE:**
Please ensure that your petition is submitted by 4:00 PM two (2) Wednesdays before the Town Council meeting scheduled for_____
In order to be included on the Town Council docket. According to Council policy, petitions cannot be addressed unless recommendations, if needed from the relevant departments are received before the Council meeting.

SIGNATURE: [signature]

NAME: Nicholas McGaw

ADDRESS: 15 Hambly Rd

TOWN: Tiverton

## Nicholas McGaw

**From:** Carl's CC N
**Sent:** Tuesday, July 7, 2026 4:36 PM
**To:** Nicholas McGaw
**Subject:** TOYOTA ESTIMATE
**Attachments:** TOYOTA ESTIMATE.pdf; IMAGE REPORT.pdf



Attached is the estimate to repair your vehicle. Please keep in mind this estimate is based on a visual inspection and there could be additional hidden damage behind the rear bumper and gate. As the estimate stands right now I would expect repairs to take 10 business days. This estimate does not include a rental vehicle, and that would need to be set up by the at fault insurance company. If you have any questions please let me know and I would be happy to help.

Thank you!
--

**Carl's Collision Center**
**166 Connell Highway**
**Newport, RI 02840**

# CARL'S COLLISION CENTER, LLC

166 CONNELL HWY, NEWPORT, RI 02840

Workfile ID: f9741d43

## Customer: MCGAW, NICK

Written By: Michael Downing

| | | | | | |
|---|---|---|---|---|---|
| Insured: | MCGAW, NICK | Policy #: | | Claim #: | |
| Type of Loss: | | Date of Loss: | | Days to Repair: | 10 |
| Point of Impact: | 06 Rear | | | | |

**Owner:**
MCGAW, NICK
(

**Inspection Location:**
CARL'S COLLISION CENTER, LLC
166 CONNELL HWY
NEWPORT, RI 02840
Repair Facility
(800) 624-4051 Business

**Insurance Company:**

## VEHICLE

2021 TOYO RAV4 LE AWD 4D UTV 4-2.5L Gasoline Port/Direct Injection GRAY

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| VIN: | 2T3F1RFV0MC205772 | Interior Color: | | Mileage In: | 43,024 | Vehicle Out: | |
| License: | | Exterior Color: | GRAY | Mileage Out: | | | |
| State: | | Production Date: | 4/2021 | Condition: | Excellent | Job #: | |

**TRANSMISSION**
Automatic Transmission
4 Wheel Drive
**POWER**
Power Steering
Power Brakes
Power Windows
Power Locks
Power Mirrors
**DECOR**
Dual Mirrors
Privacy Glass
Console/Storage
Overhead Console
**CONVENIENCE**
Air Conditioning
Intermittent Wipers
Tilt Wheel
Cruise Control
Rear Defogger
Keyless Entry
Message Center
Steering Wheel Touch Controls
Rear Window Wiper
Telescopic Wheel
Backup Camera
Intelligent Cruise
**RADIO**
AM Radio
FM Radio
Stereo
Search/Seek
Auxiliary Audio Connection
Satellite Radio
**SAFETY**
Drivers Side Air Bag
Passenger Air Bag
Anti-Lock Brakes (4)
4 Wheel Disc Brakes
Traction Control
Stability Control
Front Side Impact Air Bags
Head/Curtain Air Bags
Communications System
Hands Free Device
Xenon or L.E.D. Headlamps
Lane Departure Warning
**SEATS**
Cloth Seats
Bucket Seats
**WHEELS**
Wheel Covers
**PAINT**
Clear Coat Paint
**OTHER**
Rear Spoiler
California Emissions

## Customer: MCGAW, NICK

2021 TOYO RAV4 LE AWD 4D UTV 4-2.5L Gasoline Port/Direct Injection GRAY

| Line | | Oper | Description | Part Number | Qty | Extended Price $ | | Labor | Paint |
|---|---|---|---|---|---|---|---|---|---|
| 1 | # | | PRELIMINARY ESTIMATE ONLY **** | | 1 | | | | |
| | | | Note: ESTIMATE BASED OFF VISUAL INSPECTION ONLY. ADDITIONAL DAMAGE POSSIBLE BEHIND REAR BUMPER AND GATE | | | | | | |
| 2 | # | | OEM QUALIFY / LESS THAN 72 MONTHS PER RI STATE REGULATION | | 1 | | | | |
| 3 | **LIFT GATE** | | | | | | | | |
| 4 | | Repl | Lift gate w/power (ALU) | 670050R290 | 1 | 1,209.75 | | 6.3 | 3.9 |
| 5 | | | Add for Clear Coat | | | | | | 1.6 |
| 6 | | | Add for trnsfr glass | | | | | 0.7 | |
| 7 | | Repl | Lift gate cushion | 75129AC010 | 2 | 43.54 | | | |
| | | | Note: Part cannot be reused/reinstalled. 2 of these are required. | | | | | | |
| 8 | | Repl | Body w'strip | 678810R050 | 1 | 202.91 | | 0.4 | |
| | | | Note: PARTS: Part cannot be reused/reinstalled. | | | | | | |
| 9 | | R&I | Finish panel NAM built | | | | | Incl. | |
| 10 | | Refn | Finish panel NAM built | | | | | | 1.6 |
| 11 | | | Overlap Major Non-Adj. Panel | | | | | | -0.2 |
| 12 | | | Add for Clear Coat | | | | | | 0.3 |
| 13 | | Repl | Lower trim NAM built gray | 768020R030 | 1 | 181.79 | | Incl. | |
| 14 | | Repl | Emblem NAM built silver | 90975A2003 | 1 | 37.58 | | 0.2 | |
| 15 | | Repl | Nameplate "RAV4" silver | 754310R070 | 1 | 43.23 | | 0.2 | |
| 16 | | Repl | Nameplate "LE" | 754430R080 | 1 | 32.92 | | 0.2 | |
| 17 | | Repl | Nameplate "AWD" | 754440R100 | 1 | 32.09 | | 0.2 | |
| 18 | | R&I | Lift gate glass Toyota | | | | | Incl. | |
| 19 | | Repl | Lift gate glass spacer inner | 6278560030 | 2 | 11.28 | | | |
| | | | Note: Part cannot be reused/reinstalled. 2 of these are required. | | | | | | |
| 20 | | Repl | RT Lift gate glass spacer outer | 648180R050 | 1 | 6.64 | | | |
| | | | Note: PARTS: Part included with lift gate glass. Part cannot be reused/reinstalled. | | | | | | |
| 21 | | Repl | LT Lift gate glass spacer outer | 648190R050 | 1 | 6.64 | | | |
| | | | Note: PARTS: Part included with lift gate glass. Part cannot be reused/reinstalled. | | | | | | |
| 22 | | Repl | Lift gate glass dam | 6829426030 | 4 | 19.88 | | | |
| | | | Note: Part included with lift gate glass. Part cannot be reused/reinstalled. 4 of these are required. | | | | | | |
| 23 | | Repl | Reveal molding | 755750R060 | 1 | 30.09 | | | |
| | | | Note: PARTS: Part included with lift gate glass. Part cannot be reused/reinstalled. | | | | | | |
| 24 | | R&I | Wiper arm NAM built | | | | | Incl. | |
| 25 | * | R&I | Wiper blade NAM built | | | | | 0.1 | |
| 26 | * | R&I | Wiper motor NAM built | | | | m | Incl. | |
| 27 | | R&I | Washer nozzle | | | | | Incl. | |
| 28 | | R&I | Insert panel | | | | | 0.3 | |
| 29 | | R&I | Spoiler | | | | | 0.8 | |
| 30 | * | R&I | Tail gate switch | | | | | Incl. | |
| 31 | | Repl | Lock assy NAM built | 693500R043 | 1 | 487.68 | | Incl. | |
| 32 | * | Algn | Striker NAM built | | | | | 0.2 | |

## Customer: MCGAW, NICK

2021 TOYO RAV4 LE AWD 4D UTV 4-2.5L Gasoline Port/Direct Injection GRAY

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 33 | * | Algn | RT Hinge NAM built | | | | | 0.5 | |
| 34 | * | Algn | LT Hinge NAM built | | | | | 0.5 | |
| 35 | * | R&I | RT Lift cylinder NAM built | | | | m | Incl. | |
| 36 | * | R&I | LT Lift cylinder NAM built | | | | m | Incl. | |
| 37 | | Repl | RT Lift cylinder bolt | 9010506325 | 1 | 1.81 | | | |
| | | | Note: PARTS: Part cannot be reused/reinstalled. | | | | | | |
| 38 | | Repl | LT Lift cylinder bolt | 9010506325 | 1 | 1.81 | | | |
| | | | Note: PARTS: Part cannot be reused/reinstalled. | | | | | | |
| 39 | | R&I | RT Pinch sensor NAM built | | | | | 0.3 | |
| 40 | | R&I | LT Pinch sensor NAM built | | | | | 0.3 | |
| 41 | | R&I | Lift gate trim NAM built | | | | | Incl. | |
| 42 | | R&I | RT Side trim panel | | | | | Incl. | |
| 43 | | R&I | LT Side trim panel | | | | | Incl. | |
| 44 | **REAR LAMPS** | | | | | | | | |
| 45 | | R&I | RT Tail lamp | | | | | 0.3 | |
| 46 | | R&I | LT Tail lamp | | | | | 0.3 | |
| 47 | | R&I | RT Backup lamp | | | | | Incl. | |
| 48 | | R&I | LT Backup lamp | | | | | Incl. | |
| 49 | | Repl | RT Gasket | 8158442080 | 1 | 4.14 | | | |
| | | | Note: PARTS: Part included with backup lamp. Part cannot be reused/reinstalled. | | | | | | |
| 50 | | Repl | LT Gasket | 8159442050 | 1 | 4.14 | | | |
| | | | Note: PARTS: Part included with backup lamp. Part cannot be reused/reinstalled. | | | | | | |
| 51 | | R&I | License lmp assy | | | | | Incl. | |
| 52 | **REAR BUMPER** | | | | | | | | |
| 53 | | | O/H rear bumper | | | | | 2.4 | |
| 54 | * | Repl | Bumper cover w/o park sensors, w/o hybrid LE, XLE | 521590R160 | 1 | 229.53 | | Incl. | 0.0 |
| 55 | * | Repl | Lower molding gray type 1 | 524530R060B0 | 1 | 387.38 | | Incl. | 0.0 |
| 56 | | R&I | RT Side panel w/o Adventure, TRD Off-Road | | | | | Incl. | |
| 57 | | R&I | LT Side panel w/o Adventure, TRD Off-Road | | | | | Incl. | |
| 58 | * | Blnd | RT Side panel w/o Adventure, TRD Off-Road | | | | | | 0.8 |
| 59 | * | Blnd | LT Side panel w/o Adventure, TRD Off-Road | | | | | | 0.8 |
| 60 | | Repl | Impact bar (ALU) | 521710R060 | 1 | 314.86 | | 0.3 | |
| 61 | **VEHICLE DIAGNOSTICS** | | | | | | | | |
| 62 | * | Subl | Pre-repair scan +25% | | 1 | 156.25 | X m | | |
| 63 | * | Subl | Post-repair scan +25% | | 1 | 156.25 | X m | | |
| 64 | **MISCELLANEOUS OPERATIONS** | | | | | | | | |
| 65 | ** | Repl | A/M ADHESION PROMOTER | | 1 | 10.00 | | 0.5 | |
| 66 | ** | Repl | A/M CLEAN & RETAPE MOLDINGS | | 1 | 5.00 | | 0.5 | |
| 67 | # | Rpr | DENIB & POLISH | | | | | 1.0 | |
| 68 | # | Rpr | D&R BATTERY & RESET ELECTRONICS | | | | | 0.5 | |
| 69 | ** | Repl | A/M FLEX | | 1 | 10.00 | | | |

**Customer: MCGAW, NICK**

2021 TOYO RAV4 LE AWD 4D UTV 4-2.5L Gasoline Port/Direct Injection GRAY

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 70 | # | Subl | HWD | 1 | 3.50 | X | | |
| 71 | ** | Repl | A/M MASK JAMBS FOR PAINT | 1 | 5.00 | X | 0.5 | |
| 72 | ** | Repl | A/M SEAM SEALER (2 PART HEAVY BODY) | 1 | 60.00 | | 0.5 | |
| 73 | # | Refn | TINT COLOR | | | | | 1.0 |
| 74 | ** | Repl | A/M URETHANE GLASS KIT | 1 | 29.95 | | | |
| | | | **SUBTOTALS** | | **3,725.64** | | **18.0** | **9.8** |

**ESTIMATE TOTALS**

| Category | Basis | | Rate | Cost $ |
|---|---|---|---|---|
| Parts | | | | 3,404.64 |
| Body Labor | 18.0 hrs | @ | $ 55.00 /hr | 990.00 |
| Paint Labor | 9.8 hrs | @ | $ 55.00 /hr | 539.00 |
| Paint Supplies | 9.8 hrs | @ | $ 50.00 /hr | 490.00 |
| Miscellaneous | | | | 321.00 |
| Subtotal | | | | 5,744.64 |
| Sales Tax | $ 3,894.64 | @ | 7.0000 % | 272.62 |
| **Grand Total** | | | | **6,017.26** |

VISUAL DAMAGE ONLY. MAY HAVE ADDITIONAL HIDDEN DAMAGE.

**PURSUANT TO RHODE ISLAND LAW, THE CONSUMER HAS THE RIGHT TO CHOOSE THE REPAIR FACILITY TO COMPLETE REPAIRS TO A MOTOR VEHICLE; AND AN INSURANCE COMPANY MAY NOT INTERFERE WITH THE CONSUMER'S CHOICE OF REPAIRER.**

**FOR ANY VEHICLE THAT IS LESS THAN FORTY-EIGHT (48) MONTHS BEYOND THE DATE OF MANUFACTURE, RHODE ISLAND LAW ENTITLES THE VEHICLE OWNER TO ORIGINAL EQUIPMENT MANUFACTURER (OEM) PARTS IN THE REPAIR OF A MOTOR VEHICLE PART. THIS ESTIMATE WILL INDICATE IF/WHEN AFTERMARKET BODY PARTS ARE SPECIFIED.**

**Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.**

**Customer: MCGAW, NICK**

2021 TOYO RAV4 LE AWD 4D UTV 4-2.5L Gasoline Port/Direct Injection GRAY

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARM8452, CCC Data Date 07/01/2026, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2024 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:
m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:
D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:
Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. CFC=Carbon Fiber. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. STS=Stainless Steel. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Solutions Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:
BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

# STATE OF RHODE ISLAND UNIFORM CRASH REPORT

#1,05

| Reporting Agency Name | Report Number | Crash Date | Crash Time | Walk In Report | Parking Lot |
|---|---|---|---|---|---|
| BRISTOL POLICE DEPARTMENT | 2026-016538 | 07/05/2026 | 00:43 | ☐ | ☐ |

| City or Town Name | Street or Highway | | Exit # | # of Lanes | Posted Speed Limit |
|---|---|---|---|---|---|
| BRISTOL | CHESTNUT ST & HOPE ST | ☐On Ramp ☐Off Ramp | | 2 | 25 ☐N/A ☐Unk |

| Nearest Intersection Street | Direction From Nearest Intersection to Crash Site | Distance From Nearest Inter. | Latitude | Longitude |
|---|---|---|---|---|
| | ☐ At Inter. ☐ North ☐ South ☐ East ☒ West | 100 ☒ Feet ☐ Miles | 41.685820 | -71.278950 |

| Unit ID | Driver's Last Name First Name M.I. | DOB |
|---|---|---|
| 01 | HARVEY CHRISTOPHER M | [redacted] |

| Address | City | State | Zip | Home Phone | Cell Phone | Work Phone |
|---|---|---|---|---|---|---|
| 18 GEORGE ST | BRISTOL | RI | 02809 | [redacted] | | |

| Driver's License # | ☐CDL | Lic. State |
|---|---|---|
| 9533674 | | RI |

| M/V Violation | M/V Violation | M/V Violation | M/V Violation |
|---|---|---|---|
| | | | |

| Driver & Owner are Same | Owner's Last Name First Name M.I. |
|---|---|
| ☐ | TOWN OF BRISTOL |

| Address | City | State | Zip | Home Phone | Cell Phone | Work Phone |
|---|---|---|---|---|---|---|
| 10 COURT ST | BRISTOL | RI | 02809 | [redacted] | | [redacted] |

| Insurance Company Name | Insurance Policy Number |
|---|---|
| THE TRUST ☐No Ins. | XXXXXX |

Hit And Run: ☐ Yes, M/V & Driver left Scene ☐ Yes, Driver left Scene ☒ No ☐ Unk

| Registration # | Not Reg. | State | Yr Reg. | VIN |
|---|---|---|---|---|
| 972 | ☐ | RI | | S9000D |

| Veh Yr. | Make | Model | Color | Plate Type |
|---|---|---|---|---|
| 2002 | OTHER | UNK | YEL | TN |

Veh Travel Direction: ☐ Northbound ☐ Southbound ☐ Eastbound ☒ Westbound ☐ Not on Roadway ☐ Unk

| Vehicle Towed? | Towing Company Name | Haz Mat Placard? |
|---|---|---|
| ☐ Yes ☒ No | | ☐ Yes ☒ No |

| Unit ID | Last Name First Name M.I. | DOB |
|---|---|---|
| 02 | | |

| Address | City | State | Zip | Home Phone | Cell Phone | Work Phone |
|---|---|---|---|---|---|---|
| | | | | | | |

| Driver's License # | ☐CDL | Lic. State |
|---|---|---|
| | | |

| M/V Violation | M/V Violation | M/V Violation | M/V Violation |
|---|---|---|---|
| | | | |

| Driver & Owner are Same | Owner's Last Name First Name M.I. |
|---|---|
| ☐ | MCGAW NICHOLAS G |

| Address | City | State | Zip | Home Phone | Cell Phone | Work Phone |
|---|---|---|---|---|---|---|
| 15 HAMBLY RD | TIVERTON | RI | 02878 | [redacted] | [redacted] | |

| Insurance Company Name | Insurance Policy Number |
|---|---|
| PROGRESSIVE CASUALTY INS ☐No Ins. | 982487594 |

Hit And Run: ☐ Yes, M/V & Driver left Scene ☐ Yes, Driver left Scene ☒ No ☐ Unk

| Registration # | Not Reg. | State | Yr Reg. | VIN |
|---|---|---|---|---|
| 1VV263 | ☐ | RI | | 2T3F1RFV0MC205772 |

| Veh Yr. | Make | Model | Color | Plate Type |
|---|---|---|---|---|
| 2021 | TOYOTA | RAV4 | GRY | PC |

Veh Travel Direction: ☐ Northbound ☐ Southbound ☐ Eastbound ☐ Westbound ☒ Not on Roadway ☐ Unk

| Vehicle Towed? | Towing Company Name | Haz Mat Placard? |
|---|---|---|
| ☐ Yes ☒ No | | ☐ Yes ☒ No |

**Person Type**

1 Driver, 2 Passenger, 3 Pedestrian, 4 Bicyclist, 5 Other Cyclist, 6 Witness, 7 Other Ped. (Wheelchair, Person in Building, Skater, Ped. conveyance, etc.), 8 Occupant of Motor Veh. Not in Transport (Parked, etc.), 9 Occupant of a Non-Motor Veh Transportation Device, 10 Unknown Type of Non-Motorist, 11 Unknown

**Unit ID:** 1 Unit 1, 2 Unit 2, 3 (etc.) or N/A

**Sex:** M Male, F Female, U Unk

**Seat Position:** 13 Other Row (Bus), 14 Unk Row, 15 Other Seat, 16 Unk Seat

**Other Location:** 17 N/A, 18 Sleeper, 19 Other Enclosed Area, 20 Other Unenclosed Area, 21 Towed Unit, 22 Unk

**Air Bag Deployed:** 1 N/A, 2 No, 3 Front, 4 Side, 5 Other, 6 Comb, 7 Unk

**Ejected:** 1 No, 2 Partially, 3 Totally, 4 N/A, 5 Unk

**Protection System:** 1 N/A, 2 None Used, 3 Shoulder & Lap, 4 Shoulder Only, 5 Lap Only, 6 Type Unk, 7 Child - Forw Facing, 8 Child - Rear Facing, 9 Booster Seat, 10 Child – Unk, 11 Helmet Used, 12 Other, 13 Unk

**Injury:** 1 Complains of Pain, 2 Non-Incapacitating, 3 Incapacitating, 4 Fatal, 5 No Injury, 6 Unk

| Name: Occupants - Witnesses - Pedestrians - Bicyclists | Person Type | Unit ID | Sex | DOB | Seat Pos. | Air Bag Deployed | Ejected | Prot. System | Injury | Trans by Rescue |
|---|---|---|---|---|---|---|---|---|---|---|
| HARVEY, CHRISTOPHER M | 1 | 01 | M | [redacted] | 1 | 2 | 1 | 1 | 5 | ☐Y ☒N |
| | | | | | | | | | | ☐Y ☐N |
| | | | | | | | | | | ☐Y ☐N |

**Non-Vehicle Property Damage** ☐ State Property ☐ City/Town Property ☐ Private Property

Owner | Address

| Home Phone | Cell Phone | Work Phone | Damage Description |
|---|---|---|---|
| | | | |

| Reporting Officer Name | Reporting Officer Badge Number | Report Date |
|---|---|---|
| SHELDON, DAVID | 32 | 07/05/2026 |

Report Number
2026-016538

# *STATE OF RHODE ISLAND UNIFORM CRASH REPORT CODING GUIDE*

**1** — **Type of Roadway**
1 Two-Way, Not Divided (No Median or Barrier)
2 Two-Way, Not Divided With a Continuous Left Turn Lane
3 Two-Way, Divided, Unprotected (painted >4 feet) Median
4 Two-Way, Divided, Positive Median Barrier
5 One-Way Trafficway
6 Unknown

**1** — **Road Surface Condition (Prevailing)**
1 Dry
2 Wet
3 Snow
4 Slush
5 Ice/Frost
6 Water (Standing, Moving)
7 Sand
8 Mud, Dirt, Gravel
9 Oil
10 Other
11 Unknown

**4** — **Light Condition (Prevailing)**
1 Daylight
2 Dawn
3 Dusk
4 Dark - Lighted
5 Dark - Not Lighted
6 Dark - Unknown Lighting
7 Other
8 Unknown

**1** — **Weather Condition (Prevailing)**
1 Clear
2 Cloudy
3 Fog, Smog, Smoke
4 Rain
5 Sleet, Hail (Freezing Rain or Drizzle)
6 Snow
7 Blowing Snow
8 Severe Crosswinds

**2** — **Manner of Impact**
1 Not a Collision Between Two Motor Vehicles in Transport
2 Rear End (Front-to-Rear)
3 Head-On (Front-to-Front)
4 Angle (Front-to-Side) Same Direction
5 Angle (Front-to-Side) Opposite Direction
6 Angle (Front-to-Side) Right Angle (Includes Broadside)
7 Angle-Direction Not Specified
8 Sideswipe, Same Direction
9 Sideswipe, Opposite Direction
10 Rear-to-Side
11 Rear-to-Rear
12 Other
13 Unknown

**School Bus Related Crash?**
**(Directly Involved Indicates Contact was Made)**

☐ Yes, Directly Involved ☒ No
☐ Yes, Indirectly Involved

**Traffic Controls** — **1**
1 No Controls
2 Person
3 Traffic Control Signal
4 Flashing Traffic Control Sig.
5 School Zone Signs
6 Stop Signs
7 Yield Signs
8 Warning Signs
9 Railway Crossing Device
10 Pavement Markings
11 Other
12 Unknown

**Pre-Crash Traffic Controls Malfunctioning, Damaged or Missing?**
☐ Yes ☒ No ☐ N/A

**Construction Zone Crash?**
**(Crash Occurs in or Related to Construction, Maintenance, or Utility Work Zone. May include Vehicles Slowed or Stopped because of Work Zone)**
☐ Yes ☒ No

**Construction Workers Present?**
☐ Yes ☒ No

**Contributing Circumstances Environment**
1st: **1**
2nd:
3rd:
1 None
2 Weather Conditions
3 Physical Obstructions
4 Glare
5 Animal(s) in Roadway
6 Other
7 Unknown

**Contributing Circumstances Road**
1st: **5**
2nd:
3rd:
1 None
2 Road Surface Condition (Wet, Icy, Snow, Slush, etc.)
3 Debris
4 Rut, Holes, Bumps
5 Work Zones (Construction/Maintenance/Utility)
6 Worn, Travel-Polished Surface
7 Obstruction in Roadway
8 Traffic Control Device Inoperative, Missing or Obscured
9 Shoulders (None, Low, Soft, High)
10 Non-Highway Work
11 Other
12 Unknown

Report Number
2026-016538

# STATE OF RHODE ISLAND UNIFORM CRASH REPORT
# CODING GUIDE

**Vehicle #01** | **Unit Types** | **Vehicle #02**

| | | | |
|---|---|---|---|
| 1 Passenger Car | 6 Motor Home | 11 Motorcycle | 17 Tow Truck |
| 2 (Sport) Utility Vehicle | 7 School Bus | 12 Moped | 18 Pedestrian |
| 3 Passenger Van | 8 Transit Bus | 13 Low Speed Vehicle | 19 Bicyclist |
| 4 Cargo Van (10K lbs[4,536 kg] or Less) | 9 Motor Coach | 14 Other Light Trucks (10K lbs [4,536 kg] or Less) | 20 Witness |
| 5 Pickup | 10 Other Bus | 15 Tractor Trailer or Combination (More than 10K lbs [4,536 kg]) | 21 Other |
| | | 16 Medium/ Heavy Trucks (More than 10K lbs [4,536 kg]) | |

**Vehicle #01** ☐Yes ☒No — **Does this Vehicle have Seats to Transport 9 or more people, including the Driver's Seat?** — **Vehicle #02** ☐Yes ☒No

**Vehicle #01** ☐Yes ☒No — **Was this Vehicle in Tow?** — **Vehicle #02** ☐Yes ☒No

**Vehicle #01** | **Special Function Vehicle** | **Vehicle #02**

| | | | |
|---|---|---|---|
| 1 No Special Function | 3 Vehicle Used as School Bus | 5 Military | 7 Ambulance |
| 2 Taxi | 4 Vehicle Used as Other Bus | 6 Police | 8 Fire Truck |
| | | | 9 Unknown |

**Vehicle #01** ☐Yes ☐No ☐Unk — **Police, Ambulance or Fire Truck Responding to a Call?** — **Vehicle #02** ☐Yes ☐No ☐Unk

**Vehicle #01** | **Motor Vehicle Position** | **Vehicle #02**

| | | |
|---|---|---|
| 1 Motor Vehicle on Roadway | 2 Motor Vehicle Parked | 3 Working Vehicle/Equipment |

**Vehicle #01** | **Extent of Damage** | **Vehicle #02**

| | | | |
|---|---|---|---|
| 1 No Damage Observed | 2 Minor damage (<= $1000) | 3 Functional Damage (> $1000) | 4 Disabling Damage (> $1000) |

**Vehicle #01** | **Most Harmful Event** | **Vehicle #02**

**Non-Collision:**
1 Overturn/ Rollover
2 Fire/ Explosion
3 Immersion
4 Jackknife
5 Cargo/ Equip. Loss or Shift
6 Fell/ Jumped from Motor Veh.
7 Thrown or Falling Object
8 Other Non-Collision

**Collision with Person, Motor Veh, or Non-Fixed Obj:**
9 Pedestrian
10 Pedalcycle
11 Railway Vehicle (Train, Engine)
12 Animal
13 Motor Vehicle in Transport
14 Work Zone/ Maintenance Equipment
15 Other Non-Fixed Object

**Collision with Fixed Object:**
16 Impact Attenuator/ Crash Cushion
17 Bridge Overhead Structure
18 Bridge Pier or Support
19 Bridge Rail
20 Culvert
21 Curb
22 Ditch
23 Embankment
24 Guardrail Face
25 Guardrail End
26 Jersey/ Concrete Traffic Barrier
27 Other Traffic Barrier
28 Tree (Standing)
29 Landscaping
30 Utility Pole(Elec/Tele)/ Light Support
31 Highway Lighting/ Light Standard
32 Traffic Sign/ Support
33 Traffic Signal/ Support
34 Traffic Control Box
35 Variable Message Board/ Arrow Board
36 Other Post, Pole, or Support
37 Fence
38 Mailbox
39 Other Fixed Obj. (Wall, Building, Tunnel, etc.)

40 Unknown - Most Harmful Event

**Vehicle #01** | **Vehicle Action Prior** | **Vehicle #02**

| | | |
|---|---|---|
| 1 Movements Essentially Straight Ahead | 6 Turning Left | 11 Negotiating a Curve |
| 2 Backing | 7 Making U-Turn | 12 Parked |
| 3 Changing Lanes | 8 Leaving Traffic Lane | 13 Stopped in Traffic |
| 4 Overtaking/ Passing | 9 Entering Traffic Lane | 14 Other |
| 5 Turning Right | 10 Slowing | 15 Unknown |

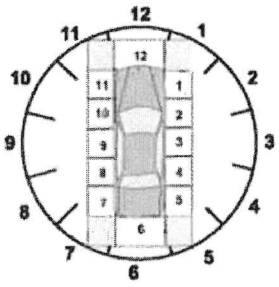
Report Number
2026-016538

# *STATE OF RHODE ISLAND UNIFORM CRASH REPORT CODING GUIDE*

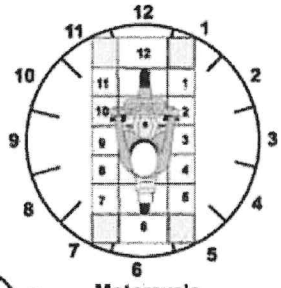
**Vehicle #01** 12

**Initial Impact Area**
Clock Diagram
Or
13 Top (Roof)
14 Undercarriage
15 Non-Collision
16 Unknown

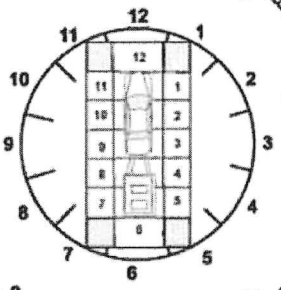
**Most Damaged Area** 12 **Vehicle #01**



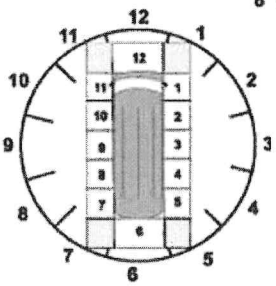
Passenger Car



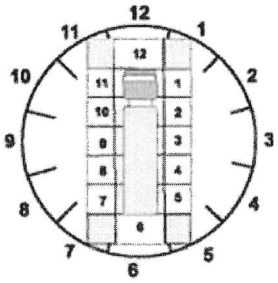
Motorcycle



Passenger Car W/Trailer



Bus



Tractor Trailer

**Vehicle #02** 6

**Initial Impact Area**
Clock Diagram
Or
13 Top (Roof)
14 Undercarriage
15 Non-Collision
16 Unknown

**Most Damaged Area** **Vehicle #02** 6

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**Sequence of Events**

1st **Vehicle #01** 13 — 1st **Vehicle #02** 13
2nd — 2nd
3rd — 3rd
4th — 4th

**Non-Collision:**
1 Overturn/ Rollover
2 Fire/ Explosion
3 Immersion
4 Jackknife
5 Cargo/ Equipment Loss or Shift
6 Fell/ jumped from Motor Vehicle
7 Thrown or Falling Object
8 Other Non-Collision

**Collision with Person, Motor Veh, or Non-Fixed Obj:**
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32 Traffic Sign/ Support
33 Traffic Signal/ Support
34 Traffic Control Box
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36 Other Post, Pole, or Support
37 Fence
38 Mailbox
39 Other Fixed Obj. (Wall, Building, Tunnel, etc.)

40 Unknown - Sequence of Events

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**Driver Distracted**

**Driver Vehicle #01** 1 — **Driver Vehicle #02**

1 Not Distracted
2 Electronic Communication Devices (Cell Phone, Pager, etc.)
3 Other Electronic Devices (Navigation Device, Palm Pilot,
4 Other Inside the Vehicle
5 Other Outside the Vehicle
6 Unknown

**Physical Condition of Driver**

**Driver Vehicle #01** 1 — **Driver Vehicle #02**

1 Apparently Normal
2 Emotional (Depressed, Angry, Distrurbed, etc.)
3 Ill (Sick)
4 Fell Asleep, Fainted, Fatigued, etc.
5 Under the Influence of Medications/Drugs/Alcohol
6 Other

Report Number
2026-016538

# *STATE OF RHODE ISLAND UNIFORM CRASH REPORT*
# *CODING GUIDE*

**1st Vehicle #01** ☐
**2nd Vehicle #01** ☐

**Non-Motorist Safety Equipment**

1 None
2 Helmet
3 Protective Pads Used (Elbows, Knees, Shins, etc.)
4 Reflective Clothing (Jacket, Backpack, etc.)
5 Lighting
6 Other
7 N/A
8 Unknown

**1st Vehicle #02** ☐
**2nd Vehicle #02** ☐

**Alcohol and/or Drug Testing**

| Driver Vehicle #01 Alcohol | Driver Vehicle #01 Drug | Chemical Test | Driver Vehicle #02 Alcohol | Driver Vehicle #02 Drug |
|---|---|---|---|---|
| ☒ | ☒ | None Given | ☐ | ☐ |
| ☐ | ☐ | Test Refused | ☐ | ☐ |
| | ☐ | Unknown if Tested | | ☐ |
| ☐ | ☐ | Blood | ☐ | ☐ |
| ☐ | ☐ | Urine | ☐ | ☐ |
| ☐ | ☐ | Serum | ☐ | ☐ |
| ☐ | ☐ | Other | ☐ | ☐ |
| ☐ | | Breath | ☐ | |

| Driver Vehicle #01 | Alcohol Test Result | Driver Vehicle #02 |
|---|---|---|
| | BAC | |
| ☐ | Pending | ☐ |
| ☐ | Unknown | ☐ |

| Driver Vehicle #01 | Drug Test Result | Driver Vehicle #02 |
|---|---|---|
| ☐ | Positive | ☐ |
| ☐ | Negative | ☐ |
| ☐ | Awaiting Test Result | ☐ |

Report Number
2026-016538

## *STATE OF RHODE ISLAND UNIFORM CRASH REPORT*
## *Narrative/Diagram Supplemental*

**Officer's Investigation**

On 07/05/26 at approximately 0043 hours, Veh#1(Town of Bristol) was traveling west bound on Chestnut St. Veh#2(Mcgaw) was parked unattended on Chestnut St facing west bound. This is when the front passenger side of the utility Veh#1 collied with the rear end of Veh#2.

I observed minor damage to the rear end of Veh#2.
I observed no damage to Veh#1.
No injuries were reported.

Report Number
2026-016538

# *STATE OF RHODE ISLAND UNIFORM CRASH REPORT*
## *Narrative/Diagram Supplemental*