



Revere Police Department

HIT AND RUN CRASH REPORT

Date of Crash _____ Time _____ am _____ pm _____

Location of crash _____

Registration number of vehicle that left scene _____ State _____

Make of vehicle _____ Color _____

Damage to other vehicle _____

How many occupants in other vehicle? _____ Male _____ Female _____

Would you be able to identify the driver? _____ Occupants? _____

If yes give Description (age, hgt., wt., ethnic background, etc.) _____

Name of operator making this report _____

Licenses number of operator making this report _____ State _____

Telephone number (home) _____ (cell) _____ (work) _____

Registration number of operator making this report _____ State _____

Damage to vehicle _____

No action can be taken on this report until all questions are answered. Those that can't be answered mark "unknown". An operators Crash Report MUST accompany this report.

Signature of person making this report _____

To be completed by Police Officer

Damage to Victims Vehicle _____

Inspecting Officer _____ Date & Time _____

Officer in Charge _____

Attach listings of both vehicles

Over for additional information