

TB-15A PREVENTABLE TROOP VEHICLE ACCIDENT-REPORT OF ADJUDICATION (8/07)

VAN 08247	DATE OF ACCIDENT/INCIDENT 05/27/2009
--------------	---

TIME OF ACCIDENT/INCIDENT 12:15 A.M.	VEHICLE PLATE NUMBER 2F5
---	-----------------------------


DRIVER'S NAME (FIRST, MI, LAST) Jason J. Lewis

SHIELD NUMBER 3020	STATION SP Monroe	ORIGINAL FILE 3# AMSPW37000020
-----------------------	----------------------	-----------------------------------

I. Type(s) OF Adjudication

- 01 - Clinical Phase
- 02 - Instruction - Troop Safety Officer or Traffic Supervisor
- 03 - EVOC assignment
- 04 - NO disciplinary action
- 05 - Counselling
- 06 - Censure
- 07 - Vacation Days (number) _____
- 08 - Probation
- 09 - Suspension without pay
- 10 - Termination
- 11 - Other (specify) _____

II. Date of Adjudication 9,10,09

APPROVED BY 	RANK MAJOR	DATE 9/10/09
--	---------------	-----------------

NEW YORK STATE POLICE

MEMORANDUM

Troop F Station Middletown

Date September 10, 2009

To: Colonel John P. Melville, Field Commander
Attn: Major, Division Traffic

From: Major Edward Raso, Troop Commander

Subject: **TROOP CAR ACCIDENT – 5/27/09**
TPR. JASON J. LEWIS, SP MONROE

Reference is made to the previously-submitted report regarding the above subject.

On September 10, 2009, Trooper Lewis appeared before me and executed his consent to have me adjudicate this matter at Troop level.

Pursuant to Rule 3 of the New York State Police Administrative Manual, I have determined that he receive a letter of censure for his actions. Attached is a copy of the letter of censure and consent waiver.

This matter is closed.

Attach.

HARRY J. CORBITT
SUPERINTENDENT



MAJOR EDWARD RASO
TROOP COMMANDER

**STATE OF NEW YORK
NEW YORK STATE POLICE
TROOP "F" HEADQUARTERS
55 CRYSTAL RUN ROAD
MIDDLETOWN, NY 10941
(845) 344-5300**

September 10, 2009

Trooper Jason J. Lewis
New York State Police
Monroe, New York

LETTER OF CENSURE

Dear Trooper Lewis:

On May 27, 2009 you were operating your assigned Division vehicle when you were involved in a troop car accident. This accident has been reviewed at Troop Headquarters and it was determined to have been preventable on your part. On September 10, 2009 you appeared before me, executed a waiver, and requested that I adjudicate the disciplinary action.

The accident occurred as you were entering Interstate 84. As you merged into the driving lane, your Division vehicle made contact with another vehicle. Minor damage was incurred. As a professional driver, you are expected to drive more carefully.

It is my decision that you receive a letter of censure for your actions. I trust that you will drive more cautiously in the future.

Sincerely,

Edward Raso
Major
Troop Commander


NEW YORK STATE POLICE

MEMORANDUM

TROOP F STATION Monroe

DATE July 19, 2009

To: Major Edward Raso, Troop Commander

From: Trooper Jason Lewis 

Subject: **DISCIPLINARY ACTION**

I hereby consent to have the above-captioned investigation adjudicated by the Troop Commander under the provisions of Article 3, Disciplinary Action of the New York State Police Manual.

I waive the following:

1. The right to have this matter disposed of by the Superintendent or by a formal hearing.
2. Any right to appeal from the Troop Commander's adjudication which may be a determination of unfounded or, upon a finding of guilty, the imposition of:
 - a. A Letter of Censure and/or
 - b. An intra-troop transfer, with my consent and/or
 - c. A fine to be expressed in the loss of no more than five vacation days to be worked by the member with no additional compensation or overtime and/or
 - d. A period of probation not exceeding 90 days which probation must be for a definite period of time and must include conditions of probation which, if violated, could subject me, without the right of a further inquiry or a hearing, to the imposition of any one or more of the penalties that can be imposed by the Troop Commander, and/or an intra-troop transfer, without my consent.

NEW YORK STATE POLICE

DIVISION VEHICLE ACCIDENT/INCIDENT COVER PAGE

<p>(TRAFFIC SECTION COMPLETE)</p> <p>Received At Traffic: <u>7/27/09</u> (Date)</p> <p>Reviewed By: <u>Sgt D.S. Bates</u> 16</p>	<p>OPERATOR OF SP VEHICLE:</p> <p><u>Tpr. Jason J. Lewis</u></p> <p><u>2F5</u> License <u>08247</u> Van</p> <p><u>F</u> Troop <u>05/27/09</u> (D/A)</p>
<p>(FLEET MANAGEMENT COMPLETE)</p> <p>Received From Traffic: <u>JUL 28 2009</u> (Date)</p>	<p>REPAIR INFORMATION:</p> <p>Order Number: <u>F-BODY</u></p> <p>Amount: \$ <u>36.96</u></p>
<p>Case Closed: <u>07/29/09</u> (Date)</p> <p>Initials: <u>(Signature)</u></p>	<p>Date Paid: _____</p> <p>Returned To Service Date: <u>06/01/09</u></p>
<p>Forwarded From Fleet To Records: <u>08/04/09</u> (Date)</p>	<p>Estimates: (1) \$ <u>761.13</u></p> <p>(2) \$ _____</p>
<p>TOT Attorney General: <u>NA</u> (Date)</p>	<p>(3) \$ _____</p>
<p>MISCELLANEOUS:</p>	<p>INSURANCE INFORMATION:</p> <p>Check Number: _____</p> <p>Amount: \$ <u>NC</u></p> <p>Date Of Check: _____</p> <p>Date Received: _____</p>
<p>P <u>X</u> NP _____ I _____</p> <p><u>X</u> UF _____ BCI _____</p> <p>AUG 05 2009</p>	<p>RCN Number: <u>09025032</u></p> <p>FILED BY <u>HT</u> <u>05/19</u></p>

283 05/27/09 60/17/09


NEW YORK STATE POLICE

MEMORANDUM

TROOP F STATION Middletown

DATE June 26, 2009

TO: Deputy Superintendent John P. Melville, Field Command
Attn: Major, Division Traffic

FROM: Major Edward Raso, Troop Commander 

SUBJECT: TROOP CAR ACCIDENT – 5/27/09
TPR. JASON J. LEWIS, SP MONROE

Reference is made to the attached self-explanatory investigative report regarding the above subject.

I have reviewed this accident and it is my opinion that it was preventable.

Member has consented to adjudication by the Troop Commander under the provisions of Article 3, Disciplinary Action, Rules of the New York State Police. Results of the adjudication will be forwarded to you upon completion of same.

Attach.

09025032

NEW YORK STATE POLICE

MEMORANDUM

TROOP F STATION Middletown

DATE June 26, 2009

TO: Major Edward Raso, Troop Commander
FROM: T/Sergeant Scott Mohl, Troop Traffic Supervisor *SM*
SUBJECT: **TROOP CAR ACCIDENT – 5/27/09**
TPR. JASON J. LEWIS, SP MONROE

Reference is made to the attached self-explanatory investigative report regarding the above subject.

I have reviewed this accident and it is my opinion that it was preventable.


The primary cause of this accident was unsafe lane change.

Attach.

NEW YORK STATE POLICE

MEMORANDUMTroop F Station SP MonroeDate June 23, 2009

TO: Major Edward Raso, Troop Commander, Troop F

FROM: Captain Stephen  Nevins, Zone Commander, Zone 2

SUBJECT: DIVISION VEHICLE PDAA- 2F5
TROOPER JASON J. LEWIS - SP MONROE – EOD 5/19/02

Reference is made to the AMS Message # AMSPW37000020, SP Middletown, dated May 27, 2009, and the attached Genl. 84 Investigation Report of Zone Sergeant DAVID G. SCOTT dated May 27, 2009, regarding above subject matter.

I have reviewed the attached two-car property damage accident report submitted by Zone Sergeant SCOTT and concur with his findings. On May 27, 2009, Trooper JASON J. LEWIS was operating non-video equipped marked Division vehicle 2F5 with emergency lights and siren activated, along with Trooper DESMOND LEWIN as the passenger. Trooper LEWIS entered Interstate 84 westbound from State Route 17 westbound in the Town of Wallkill, Orange County. As Trooper LEWIS merged into the driving lane, he made contact with the front, right fender of another vehicle. Troopers LEWIS and LEWIN were wearing their seatbelts and uninjured. The damage sustained to 2F5 consisted of a broken tail light and a scratch on the fender.

Investigation has concluded that the culpability for this accident lies solely upon the actions of Trooper LEWIS and could have only been prevented by him. It is recommended this accident be classified as "preventable" on the part of Trooper LEWIS and further administrative action be considered.

Attachment

NEW YORK STATE POLICE

MEMORANDUMTroop F Station SP MonroeDate June 18, 2009**To: Major Edward Raso, Troop Commander, Troop F****From: Zone Sergeant David G. Scott** **Subject: DIVISION VEHICLE/TWO CAR PDAA 2F5
TROOPER JASON J. LEWIS/SP MONROE****Reference: AMSPW37000020, SP Middletown, dated May 27, 2009.****Genl. 84 Investigation Report of Sergeant DAVID G. SCOTT, dated May 27, 2009, same subject.**

On May 27, 2009 at 12:15 AM, Trooper JASON J. LEWIS (EOD 05/19/2002 SP Monroe) was operating marked Division vehicle 2F5 with Trooper DESMOND LEWIN (EOD 4/21/08 SP Monroe) as the passenger. The Troopers were en route to a home invasion robbery/shooting in the Town of Deerpark. Trooper LEWIS entered I-84 westbound via St Rt 17 westbound at exit 121W in heavy rain. His emergency lights and siren were activated as he rounded the entrance ramp to I-84. He observed a tractor-trailer westbound on I-84 in the driving lane, however he lost sight of that vehicle at the end of the ramp. As Trooper LEWIS merged onto I-84, the driver's side rear of 2F5 made slight contact with the passenger side, front corner of the tractor-trailer. Both vehicles stopped on the shoulder and Trooper LEWIS verified that there were no injuries.

Investigation into the collision revealed that the culpability lie with Trooper LEWIS, the operator of 2F5. The damage to both vehicles was relatively minor. The accident is classified as "preventable" on the part of Trooper LEWIS. It is recommended that this matter be closed by investigation.

New York State Police Investigation Report

1. Troop F	2. Station SP Monroe	2A. T.ZS F-211	4. Case No. 09-38	3. Station	3A. T.ZS	5. Case No.	
C O M P L A I N T	6. Complainant Name (Last, First, Middle)						7. DOB UNK
	8. Street # Name		Apt.	C/T/V	State	Zip	County
	10. Employer Address				10A. Occupation		10B. Bus. Phone
	11. Place of Occurrence - Specific Location I-84 W/B MM 19.0						11A. County Orange
	11B. C-T-V T/Walkkill		11C. C-T-V CODE F3666	12. Date Occurred: From - To 05272009 -	Time Occurred: From/To 12:15 AM -	13. Date Reported 05 27 2009	Time Reported 12:15 AM
C A S E D A T A	14. Owner if other than Complainant Address			15. Weather <input type="radio"/> Clear <input type="radio"/> Cloudy <input checked="" type="radio"/> Rain <input type="radio"/> Fog <input type="radio"/> Sleet <input type="radio"/> Snow			
	16. Character of Case Division Vehicle Accident			17. Counts 1	18. Case No. 09-38	19. CC Code MVE5058	
	Code: Stolen (S) / Used in Crime (C) / Crim. Misch. (M) Recovered (R) / Evidence (E) Genl. 2 (A) / Term. Msg (T) Other (O) (Specify) / 21 Monetary Value						
	P R O P E R T Y	20. P-1	Code	Qty	Description	ID - Serial Number	
V E H	22. V-1 <input type="radio"/> Used in Crime <input checked="" type="radio"/> Acc. MV <input type="radio"/> Acc. Non MV <input type="radio"/> Suspect <input type="radio"/> Crim. Misch. <input type="radio"/> Stolen <input type="radio"/> Recovered <input type="radio"/> OTHER (Specify)						
	Description - Make Ford - VAN# 08247 mlg/37445		Year 2008	Reg. No. 2F5	State NY	Stolen MV - Keys in Ignition <input type="radio"/> Yes <input type="radio"/> No	
Color BL/GD		Body - Model Crown Vic	Vin No. 2FAHP71V38X104891				
Recovered - Running Condition <input type="radio"/> Yes <input type="radio"/> No							
W E A P O N	23. W-1 <input type="radio"/> Used in Crime <input type="radio"/> Lawful Surrender <input type="radio"/> Unlawful Poss. <input type="radio"/> Stolen <input type="radio"/> Other (Specify)						
	D E S C R I P T	Make - Type Model		CAL - GA	Name of Owner or Licensee		
		Ser. No.	<input type="radio"/> Loaded	Tot Capacity	Address		
		Finish Blue <input type="radio"/> Other (Specify)	<input type="radio"/> Unloaded	Rds Fired	Lic. No.	Date of Issue	
Unexpended Rounds		County of Issue					
D O C U M E N T	24. D-1 Kind of Document Name of Receiver Reason <input type="radio"/> No Acct. <input type="radio"/> Insuff Funds <input type="radio"/> Acct. Closed <input type="radio"/> Forgery						
	Name of Maker - ID or Address Given				Identifiable <input type="radio"/> Yes <input type="radio"/> No		
	Bank Drawn On - Address			Doc. No.	Photo-Suspect <input type="radio"/> Yes <input type="radio"/> No		
	Doc Date	Doc Amount	Money, Property or Service Obtained				
D A M	25. Describe or List Physical Damage or Any Other Loss						
	V-1: Driver's Rear Tail Light Assembly					761.13	
V-2: Passenger Front Quarterpanel hole & scratches							
D I S P O S I T I O N	26. INSUR Property <input checked="" type="radio"/> Yes Insured? <input type="radio"/> No		Name of Insurer V-1 Self Insured State of New York		Amt. Insurance FULL		
	No. V-1	Date 05 27 2009	Disposition Driven from scene				
	No. V-2	Date 05 27 2009	Disposition Driven from scene				
W I T N E S S	29. WT-1 Name (Last, First, Middle) - Address				Age	DOB	
30A. Report Date							
05 27 09							

30. RCN
 091025032
 Retained
 Destroy

New York State Police Investigation Report

CODE: Assault = A Homicide = H Suicide = S Attempted Suicide = AS Natural Death = ND Accident Victim = AV Other = O (Specify)

31.	S-1	Code	Name (Last, First, Middle)	Address	Sex	Age	DOB	
	Nature of Injuries				Hospital and/or Physician			
	Date of Death		Coroner or Medical Examiner		Autopsy Yes <input type="radio"/> No <input type="radio"/>		Pathologist	
							Kin Notified Yes <input type="radio"/> No <input type="radio"/>	
V I C T I M	S-2	Code	Name (Last, First, Middle)	Address	Sex	Age	DOB	
	Nature of Injuries				Hospital and/or Physician			
	Date of Death		Coroner or Medical Examiner		Autopsy Yes <input type="radio"/> No <input type="radio"/>		Pathologist	
							Kin Notified Yes <input type="radio"/> No <input type="radio"/>	
M	S-3	Code	Name (Last, First, Middle)	Address	Sex	Age	DOB	
	Nature of Injuries				Hospital and/or Physician			
	Date of Death		Coroner or Medical Examiner		Autopsy Yes <input type="radio"/> No <input type="radio"/>		Pathologist	
							Kin Notified Yes <input type="radio"/> No <input type="radio"/>	

CODE: Unknown Subject = U Crim. Sum = C Perpetrator = P Accomplice = A Defendant = D Suspect = S Wanted-Warrant = W Juvenile = J Other = O (Specify)									
32.	T-1	Code	Name (Last, First, Middle) - Address - Alias V-1 Operator: Lewis, Jason J.; 369 Nininger Rd, Monroe, NY 10950				Sex	Age	DOB
	T-2	O	V-2 Operator: Howlett, Bernard A.; [REDACTED]				M		[REDACTED]
	T-3	O	V-1 Passenger: Lewin, Desmond; 369 Nininger Rd, Monroe, NY 10950				M		[REDACTED]
	T-4								
	T-5								
	T-6								
	T-7								

33.	W	Title No.	Race	Ht.	Wt.	Hair	Eyes	Crime	Section	Law
	A	Judge - Name - Address - Title							County	Date Issued
N	T	Title No.	Race	Ht.	Wt.	Hair	Eyes	Crime	Section	Law
	D	Judge - Name - Address - Title							County	Date Issued

34.	I	DCJS	M	No.	File	Date	Station	C A N C E C	No.	Date	35.	<input type="radio"/> C/A	<input type="radio"/> C/EC	<input checked="" type="radio"/> C/INV	<input type="radio"/> C/UNF	<input type="radio"/> Open
	N	<input checked="" type="radio"/> YES	<input type="radio"/> NO										<input type="radio"/> Other			
	Y	<input type="radio"/> YES	<input type="radio"/> NO										TOT BCL <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Date			
	S	<input type="radio"/> YES	<input type="radio"/> NO										Lead Request <input type="radio"/> YES <input type="radio"/> NO			

36.	I	Photos Taken Yes <input checked="" type="radio"/> No <input type="radio"/>	By Whom Z/Sgt D. G. Scott	Dusted For Latent Prints Yes <input type="radio"/> No <input checked="" type="radio"/>	By Whom
	O	Name and Address of Agency Notified or Requested		Responded If "Yes" Name Of Person In Charge - If "No" Name F "NO" Name Of Person Notified Yes <input type="radio"/> No <input type="radio"/>	
	A	Name(s) of Licensee(s)		Business Name	
	S			Lic. No.	

39.	The Presence or absence of any individual factor is indicated by checking Yes or No			
	Witness to Crime	<input type="radio"/> Yes	<input type="radio"/> No	Property Traceable / Identifiable <input type="radio"/> Yes <input type="radio"/> No
	Identification / Description Of Suspect Vehicle	<input type="radio"/> Yes	<input type="radio"/> No	Distinctive / Significant MO <input type="radio"/> Yes <input type="radio"/> No
	Significant Physical Evidence	<input type="radio"/> Yes	<input type="radio"/> No	Significant Community Interest <input type="radio"/> Yes <input type="radio"/> No

40.	1. Genl. 7- Tpr. Lewis	8. Estimate of Repairs
	2. Genl. 7- Tpr. Lewin	
	3. Genl. 4- Mr. Howlett	
	4. Genl. 34D & Photographs	
	5. AMS #AMSPW37000020	
	6. MV-104A	
	7. MV-104L	

41.	Complainants	Properties	Vehicles	Weapons	Documents	Witnesses	Victims	Titles	Wanted
SUM	0	0	0	0	0	0	0	3	0
42.	Signature And Rank Z/Sgt David G. Scott				Shield No. 3209	43 Signature And Rank			Shield No.
42A	Station SP Monroe		42B Case No. 09-38		Approved	43A Station T2S		43B Case No. Approved	

T2S
F211

**NEW YORK STATE POLICE
CONTINUATION SHEET**

TROOP F SP Monroe
COMPLAINANT - LAST, FIRST, MIDDLE

PAGE 1

CASE NUMBER

[Complainant (L,F,M)]	[Case Number] 09-38
-----------------------	------------------------

BOX 22 VEHICLE (CONTINUED)

V-2 Description- Make/Freightliner YR/2007 Reg. No./920999 State/ME Color/White Body Model/Unknown Vin/1FUJBBCK17LX28497

BOX #26 INSURANCE (CONTINUED)

V-2 Insured by: Continental Casualty Co. Policy: 0-1080826304

1. On May 27, 2009 Trooper JASON J. LEWIS (EOD 05/19/2002 SP Monroe) advised Z/Sgt. DAVID G. SCOTT that he had been involved in a minor property damage collision with Division Vehicle 2F5 while entering I-84 in the Town of Wallkill. Zone 2 Commander, Captain STEPHEN NEVINS was advised and assigned Sergeant SCOTT to investigate.
2. On May 27, 2009 I interviewed Tpr. LEWIS who stated that he was heading to a home invasion robbery/shooting in the Town of Deerpark at approximately 12:15am. He was operating Division Vehicle 2F5 with Trooper DESMOND LEWIN (EOD 04/21/2008 SP Monroe) as the passenger. Trooper LEWIS activated the emergency lights and siren and entered I-84 westbound from St Rt 17 westbound via exit 121W. As he entered I-84, he drove through a period of very heavy rain. Trooper LEWIS stated that he observed a tractor-trailer traveling west on I-84 as he rounded the entrance ramp and that it appeared to be in the driving lane of the highway. Prior to merging onto I-84, he did not see the tractor-trailer in his rear view mirror and entered the lane of travel. He immediately felt a tap on the rear of 2F5. Trooper LEWIS pulled to the shoulder and the tractor-trailer did as well. Upon inspection, Trooper LEWIS observed a small hole in the driver's side tail light of 2F5. He interviewed the driver of the tractor-trailer and determined that there were no injuries. His statements were reduced to writing on a Genl. 7 and are attached as Enclosure #1.
3. On May 27, 2009 I interviewed Trooper DESMOND LEWIN. His account of the incident supports that of Trooper LEWIS, except that Trooper LEWIN was looking out of the passenger side window and did not see the tractor-trailer. He stated that he was not injured. Trooper LEWIN'S statements were reduced to writing on a Genl. 7 and are attached as Enclosure #2.
4. On May 27, 2009 I interviewed Mr. BERNARD A. HOWLETT (DOB [REDACTED]) at the scene. He stated that he was heading west on I-84 at about 12:15 am and observed a State Trooper with the emergency lights on entering the highway from an entrance ramp on his right side. Mr. HOWLETT stated that it was a long entrance ramp and he observed the Trooper from a great distance. He was able to move from the driving lane to the passing lane and reduced his speed to allow the Trooper to merge. He didn't see the Trooper actually enter I-84, as the Trooper came off the ramp either next to or behind his tractor-trailer. The Trooper came up on his right and either attempted to get in front of the truck or drifted into his lane. He heard an impact and pulled off the road, in front of the Trooper. Mr. HOWLETT was not injured and there is only minor damage to his vehicle. Mr. HOWLETT'S statements were reduced to writing on a Genl. 4 and are attached as Enclosure #3.
5. On May 27, 2009 I examined and photographed the damage to both vehicles. 2F5 had a broken driver's side tail light, while the tractor-trailer had some scratches and a small hole in the passenger side, front quarter panel. The description of the accident as reported by Trooper LEWIS, Trooper LEWIN and Mr. HOWLETT, appeared to be consistent with the scene and the damage to the vehicles. There were no independent witnesses identified and no other physical evidence was located at the scene. The scene consisted of two westbound lanes of travel on I-84 with one merge lane on the north side of the roadway that emanated from St Rt 17 at exit 121W. The photographs and Genl. 34D are attached as Enclosure #4.

6. On May 27, 2009 I prepared and sent AMS # AMSPW37000020 from SP Middletown. A copy is attached as Enclosure #5.
7. On May 27, 2009 I prepared an MV-104 A. A copy is attached as Enclosure #6.
8. On May 27, 2009 I prepared an MV-104L. A copy is attached as Enclosure #7.
9. On May 27, 2009 the Troop F AMI obtained a repair estimate for 2F5 from T&C Auto Body, 770 Rt 17M, Middletown, NY 10940. The total estimate of repair is \$761.13. A copy of said estimate is attached as Enclosure #8.
10. Closed by Investigation.

NEW YORK STATE POLICE

MEMORANDUMTroop F Station MONROEDate MAY 30, 2009**To: Major Edward Raso, Troop Commander, Troop F****From: Trooper Jason J Lewis** **Subject: DAMAGE TO DIVISION VEHICLE**

Writer was advised by Zone Sergeant DAVID SCOTT to submit a memorandum regarding DAMAGE TO DIVISION VEHICLE 2F5.

On May 27, 2009 at approximately 12:15am, I was operating marked unit 2F5 with TROOPER DESMOND LEWIN as the passenger, en route to a home invasion/shooting in the Town of Deerpark. The emergency lights and siren in 2F5 were activated. While en route to said location there was an extreme down pour of rain. I proceeded to exit State Route 17 west at exit 121w onto Interstate 84 westbound. While on the entrance ramp to I-84, I observed a tractor trailer travelling west bound in the driving lane. Prior to merging into the driving lane I looked into my rear view mirror and did not see any vehicles. As I then merged into the driving lane I felt a tap on the rear of 2F5. I pulled over onto the shoulder as did the tractor trailer. The only damage I observed on 2F5 was the driver's side tail light which had a small 2-3 inch hole in the tail light. Both myself and Tpr Lewin had no injuries. I then approached the tractor trailer and spoke to the operator who also had no injuries. I then contacted Z/Sgt Scott who responded to scene.

NEW YORK STATE POLICE

MEMORANDUMTroop F Station SP MONROEDate May 30, 2009**To: Major Edward Raso, Troop Commander, Troop F****From: Trooper Desmond L. Lewin** **Subject: DAMAGE TO DIVISION VEHICLE**

I was instructed by Zone /Sgt DAVID SCOTT to submit a memorandum regarding DANAGE TO DIVISION VEHICLE 2F5.

On Wednesday May 27, 2009 Trooper JASON LEWIS and I were working a 2-shift tour of duty out of SP Monroe in marked unit 2F5. Trooper LEWIS was the driver and I was the passenger in said vehicle. We were en route to assist SP Middletown with a home invasion/shooting in the Town of Deer Park. While en route to said location Trooper LEWIS exited State Route 17 at exit 121 west onto Interstate 84. I was looking out the passenger side window when I felt a slight bump in the back of 2F5. Trooper LEWIS pulled over onto the shoulder and a white tractor trailer also stopped in front of 2F5. I exited the vehicle and observed a small crack on the drive side tail light. No injuries were sustained during the accident. Trooper LEWIS then contacted Zone Sergeant SCOTT who responded to the accident scene.

SUPPORTING DEPOSITION (CPL § 100.20)

PAGE ___ OF ___

THE PEOPLE OF THE STATE OF NEW YORK
—VS.

DEFENDANT(S)

LOCATION OF INCIDENT:

STATE OF NEW YORK _____ COURT

COUNTY OF ORANGE

Town OF WALKILL

LOCATION OF DEPOSITION:

STATE OF NEW YORK

COUNTY OF ORANGE

Town OF WALKILL

On DATE: 5/27/09 at TIME STARTED: 1:20am I, FULL NAME: BERNIE A. HOWLETT

state the following: I was heading west on I-84 at about 12:15am. I was in the right lane and I saw a state Trooper with the emergency lights on, entering the highway from an entrance ramp on my right side. It's a long ramp, so I saw him from a good distance back. I moved to the left lane and slowed down. I had the brake break on too. As the Trooper came off the ramp, he was either behind or next to me. I didn't see him actually enter the highway. He came up on my right side and either tried to get in front of me or was going too fast and drifted into my lane as he entered the highway. I saw him on my right front side and I heard an impact. He pulled off the road and I pulled off ahead of him. I'm not injured and I'm the only one in the vehicle. There is only minor damage to the front, right corner of my company truck. I drive for PAF Transportation. I was on my way to Illinois from the state of Maine. B.H.

NOTICE

(Penal Law § 210.45)

In a written instrument, any person who knowingly makes a false statement which such person does not believe to be true has committed a crime under the laws of the state of New York punishable as a Class A Misdemeanor.

Affirmed under penalty of perjury

this 21TH day of May, 2009

Bernie Howlett
(SIGNATURE OF DEPONENT)

- OR -

* Subscribed and Sworn to before me

this _____ day of _____,

(WITNESS)
Z. Scott
(NAME OF PERSON TAKING DEPOSITION)

TIME ENDED:
1:40 am

* This form need be sworn to only when specifically required by the court

DIGITAL PHOTO RECORD

INSTRUCTIONS: • Complete a separate form for each investigation recorded on digital media
• Print or type all entries #4

STATION AND CASE NUMBER SP MONROE 09-38		ID LEAD #	DATE 5/27/09	TIME BEGAN 12:20am COMPLETED 12:30am	
INVESTIGATING MEMBER 2/SGT DAVID SCOTT			PHOTOGRAPHER'S NAME 2/SGT DAVID SCOTT		
CRIME/INCIDENT TCAA 2F5			WEATHER RAIN		
ADDRESS OR LOCATION I-84 X 4					COUNTY ORANGE
COMPLAINANT - DEFENDANT - DECEASED TPR JASON LEWIS					DATE OF BIRTH

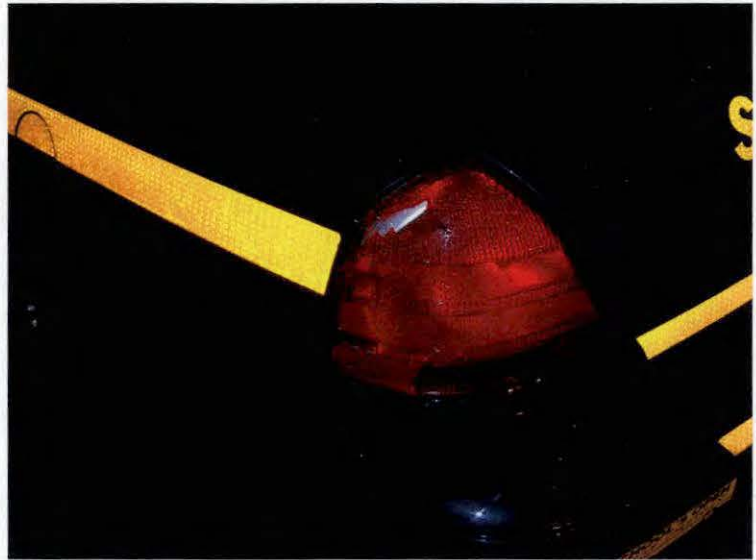
VEHICLE (S) OPERATOR - GENERAL DESCRIPTION OF SCENE 2F5 + TRACTOR TRAILER 1-84 W/B X 4	ACTION REQUESTED <input type="checkbox"/> BURN TO CD/DVD <input checked="" type="checkbox"/> PRINT 1 X'S <input type="checkbox"/> RETAIN
---	---

IMAGE TYPE OR FILE FORMAT <input checked="" type="checkbox"/> JPEG <input type="checkbox"/> TIF <input type="checkbox"/> RAW	CAMERA	PAGE # OF	DATE SUBMITTED TO ID SECTION	MANNER SUBMITTED: (Check one) <input checked="" type="checkbox"/> CD/DVD <input type="checkbox"/> FLOPPY <input type="checkbox"/> E-MAIL <input type="checkbox"/> OTHER
---	--------	-----------	------------------------------	--

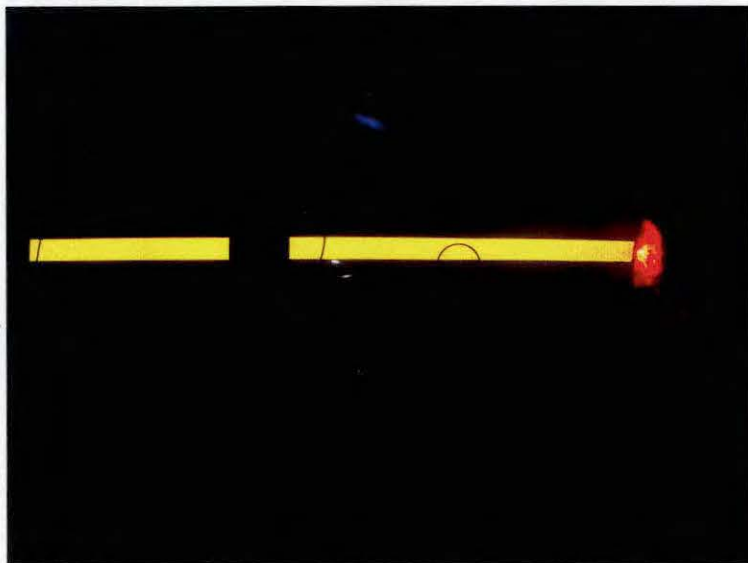
IMAGE#	CAMERA PHOTO ID#	DESCRIPTION:	IMAGE#	CAMERA PHOTO ID#	DESCRIPTION:
1		DRIVERS REAR OF 2F5	39		
2		CLOSE UP OF TAIL LAMP	40		
3		DRIVER'S SIDE OF 2F5	41		
4		FRONT OF ME - 920999	42		
5		PASS SIDE FRONT OF 920999	43		
6		CLOSE UP OF "	44		
7		FRONT OF ME - 920999	45		
8		CLOSE UP OF 920999	46		
9			47		
10			48		
11			49		
12			50		
13			51		
14			52		
15			53		
16			54		
17			55		
18			56		
19			57		
20			58		
21			59		
22			60		
23			61		
24			62		
25			63		
26			64		
27			65		
28			66		
29			67		
30			68		
31			69		
32			70		
33			71		
34			72		
35			73		
36			74		
37			75		
38			76		



105_3824.JPG
5/27/2009 1:19:43 AM



105_3825.JPG
5/27/2009 1:20:11 AM



105_3826.JPG
5/27/2009 1:20:28 AM



105_3827.JPG
5/27/2009 1:22:29 AM



105_3828.JPG
5/27/2009 1:22:43 AM



105_3829.JPG
5/27/2009 1:22:53 AM



105_3830.JPG
5/27/2009 1:23:08 AM



105_3831.JPG
5/27/2009 1:23:32 AM



Administrative Message Report

#5

Print/Run Date 05/27/2009

AMS # AMSPW37000020

Date\Time Reported\Discovered 05/27/2009 00:15	Agency ORI NYSP MIDDLETOWN	TZS F221
--	--------------------------------------	--------------------

Message
DIVISION VEHICLE - PDAA

Investigated By Z/SGT DAVID G. SCOTT	Units Responded UF	Photos YES	Videotape NO
--	------------------------------	-------------------	---------------------

Narrative

TPR JASON LEWIS WAS OPERATING 2F5 (V-1) WITH TPR. DESMOND LEWIN AS THE PASSENGER IN HEAVY RAIN. THE TROOPERS ENTERED I-84 WESTBOUND FROM ST RT 17 WESTBOUND WITH EMERGENCY LIGHTS AND SIREN ACTIVATED, EN ROUTE TO A HOME INVASION ROBBERY/SHOOTING IN THE TOWN OF DEERPARK. V-2 WAS A 2007 FREIGHTLINER WITH TRAILER. V-2 WAS TRAVELING IN THE RIGHT LANE OF I-84 WESTBOUND WHEN THE OPERATOR OBSERVED 2F5 ROUND THE CURVED ENTRANCE RAMP AHEAD. V-2 MOVED TO THE LEFT LANE AND SLOWED TO YIELD TO THE TROOP CAR. 2F5 MERGED INTO THE DRIVING LANE OF I-84 AND UPON PASSING V-2 ON THE RIGHT SIDE, MADE CONTACT WITH THE FRONT, RIGHT FENDER OF V-2. MINOR DAMAGE TO BOTH VEHICLES.

LT. FRANK KEYSER ADVISED.

# Vehicles 2	# Injured 0	# Deceased 0	Apparent Cause FAILED TO KEEP RIGHT
------------------------	-----------------------	------------------------	---

County ORANGE	C/T/V Name WALLKILL, TOWN OF - 3666	Location\ Street Name \ Mile Post Marker I-84 W/B MM.19.0
-------------------------	---	---

Weather Conditions 3 - RAIN	Road Conditions 2 - WET
---------------------------------------	-----------------------------------

Description of Damage
V-1 BROKEN TAIL LIGHT; V-2 SCRATCH ON FENDER

Criminal Action
NONE

Sent Date \ Sent Time 05/27/2009 03:09	Sent By Scott D	Authorized By LT FRANK KEYSER
--	---------------------------	---

Notification ZONE

Driver Information 001

Driver Name LEWIS, JASON J	DOB [REDACTED]	Gender M	License State NY	Chemical Test NO	Driver Charged NO
Address 1220 WASHINGTON AVE	City ALBANY	State NY	Zip 12226		

Violations

Driver Member? YES	Member Rank TROOPER	Date of Entry 05/19/2002	Member Shield 3020	Member Shift 2
------------------------------	-------------------------------	------------------------------------	------------------------------	--------------------------

Owner Information 001

Name (exactly as printed on registration)
NYSP,

Address 1220 WASHINGTON AVE	City ALBANY	State NY	Zip 12226
---------------------------------------	-----------------------	--------------------	---------------------

Insurance Company and Code
994 - GOVERNMENT OWNED

Vehicle Information 001

License Plate # POLICE	State NY	Vehicle Year 2008	Make FORD	VIN # 2FAHP71V38X104891
----------------------------------	--------------------	-----------------------------	---------------------	-----------------------------------

Van # 08247	Mileage 37445
-----------------------	-------------------------

School Bus	NO	Front Airbags Deployed	NO
Comm. Veh.	NO	Side Airbags Deployed	NO
NYSP Veh.	YES	Fire Suppression Deployed	NO

Equipment Damage	NO	Equipment Damage Description	
-------------------------	----	-------------------------------------	--

Driver Information 002

Driver Name HOWLETT, BERNARD A	DOB [REDACTED]	Gender M	License State	Chemical Test NO	Driver Charged NO
--	--------------------------	--------------------	----------------------	----------------------------	-----------------------------

Address [REDACTED]	City [REDACTED]	State ME	Zip [REDACTED]
------------------------------	---------------------------	--------------------	--------------------------

Violations

Driver Member? NO	Member Rank	Date of Entry	Member Shield	Member Shift
-----------------------------	--------------------	----------------------	----------------------	---------------------

Owner Information 002

Name (exactly as printed on registration)
PENSKE TRUCK LEASING CO L,

Address RT 10 GREEN HILLS BX 405	City READING	State PA	Zip 19603
--	------------------------	--------------------	---------------------

Insurance Company and Code
989 - OUT OF STATE INS CO - ITP

Vehicle Information 002

License Plate # 920999	State ME	Vehicle Year 2007	Make FRHT	VIN #
----------------------------------	--------------------	-----------------------------	---------------------	--------------

Van #	Mileage
--------------	----------------

School Bus	NO	Front Airbags Deployed	NO
Comm. Veh.	YES	Side Airbags Deployed	NO
NYSP Veh.	NO	Fire Suppression Deployed	NO

Equipment Damage	NO	Equipment Damage Description	
-------------------------	----	-------------------------------------	--

New York State Department of Motor Vehicles
POLICE ACCIDENT REPORT
MV-104A (3/04)

#10

19
20

Local Codes
3030528
SPPZ81000007

AMENDED REPORT

1	Accident Date Month 5 Day 27 Year 2009	Day of Week Wednesday	Military Time 00:35	No. of Vehicles 2	No. Injured 0	No. Killed 0	Not Investigated at Scene <input type="checkbox"/>	Left Scene <input type="checkbox"/>	Police Photos <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
-	Accident Reconstructed <input type="checkbox"/>								

2	VEHICLE 1				<input checked="" type="checkbox"/> VEHICLE 2 <input type="checkbox"/> BICYCLIST <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> OTHER PEDESTRIAN					
-	VEHICLE 1 - Driver License ID Number	State of Lic. NY	VEHICLE 2 - Driver License ID Number	State of Lic. ME						
-	Driver Name - exactly as printed on license LEWIS, JASON J				Driver Name - exactly as printed on license HOWLETT, BERNARD A					
-	Address (Include Number and Street) 369 NININGER RD				Address (Include Number and Street)					
-	City or Town MONROE State NY Zip Code 10950				City or Town State Zip Code					

3	Date of Birth	Sex	Unlicensed	No. of Occupants	Public Property Damaged	Date of Birth	Sex	Unlicensed	No. of Occupants	Public Property Damaged
15	Month Day Year	M	<input type="checkbox"/>	02	<input type="checkbox"/>	Month Day Year	M	<input type="checkbox"/>	01	<input type="checkbox"/>

4	Name - exactly as printed on registration	Sex	Date of Birth	Name - exactly as printed on registration	Sex	Date of Birth
5	NYS POLICE, C	Month Day Year	PENSKE TRUCK LEASNG CO LP, C	Month Day Year		
5	Address (Include Number and Street) 1220 WASH AVE BLDG 22			Address (Include Number and Street) RT 10 GREEN HILLS BX 405		
5	City or Town ALBANY State NY Zip Code 12226			City or Town READING State PA Zip Code 19603		

5	Plate Number	State of Reg.	Vehicle Year & Make	Vehicle Type	Ins. Code	Plate Number	State of Reg.	Vehicle Year & Make	Vehicle Type	Ins. Code
1	POLICE	NY	2008 FORD	POLI	994	920999	ME	2007 FRHT	TRAC	989

1	Ticket/Arrest Number(s)	Ticket/Arrest Number(s)
1	Violation Section(s)	Violation Section(s)

6	Check if involved vehicle is:	Check if involved vehicle is:	Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.																				
2	<input type="checkbox"/> more than 95 inches wide;	<input type="checkbox"/> more than 95 inches wide;	<table border="1"> <tr> <td>Rear End</td> <td>Left Turn</td> <td>Right Angle</td> <td>Right Turn</td> <td>Head On</td> </tr> <tr> <td>1. ←</td> <td>3. ↙</td> <td>4. ↓</td> <td>5. ↘</td> <td>7. →</td> </tr> <tr> <td>Sideswipe (same direction)</td> <td>Left Turn</td> <td>Right Turn</td> <td>Sideswipe (opposite direction)</td> <td></td> </tr> <tr> <td>2. ↔</td> <td>6. ↙</td> <td>8. ↘</td> <td></td> <td></td> </tr> </table>	Rear End	Left Turn	Right Angle	Right Turn	Head On	1. ←	3. ↙	4. ↓	5. ↘	7. →	Sideswipe (same direction)	Left Turn	Right Turn	Sideswipe (opposite direction)		2. ↔	6. ↙	8. ↘		
Rear End	Left Turn	Right Angle		Right Turn	Head On																		
1. ←	3. ↙	4. ↓	5. ↘	7. →																			
Sideswipe (same direction)	Left Turn	Right Turn	Sideswipe (opposite direction)																				
2. ↔	6. ↙	8. ↘																					
2	<input type="checkbox"/> more than 34 feet long;	<input type="checkbox"/> more than 34 feet long;																					
2	<input type="checkbox"/> operated with an overweight permit;	<input type="checkbox"/> operated with an overweight permit;																					
2	<input type="checkbox"/> operated with an overdimension permit.	<input type="checkbox"/> operated with an overdimension permit.																					

7	VEHICLE 1 DAMAGE CODES	VEHICLE 2 DAMAGE CODES	ACCIDENT DIAGRAM
3	Box 1 - Point of Impact	Box 1 - Point of Impact	
3	Box 2 - Most Damage	Box 2 - Most Damage	
3	Enter up to three more damage codes	Enter up to three more damage codes	See the last page of the MV-104A for the accident diagram.

1	Vehicle Bv:	Vehicle Bv:	Cost of repairs to any one vehicle will be more than \$1000.
1	Towed: To:	Towed: To:	<input checked="" type="checkbox"/> Unknown/Unable to determine <input type="checkbox"/> Yes <input type="checkbox"/> No

1	VEHICLE DAMAGE CODING:	Place Where Accident Occurred:
1	1-13 SEE DIAGRAM ON RIGHT.	County ORANGE <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of WALLKILL
1	14. UNDERCARRIAGE	Road on which accident occurred I 84
1	15. TRAILER	at 1) intersecting street ST RT 17 EXIT 4 W/B ENT RAMP
1	16. OVERTURNED	or 2) _____ of _____
1	17. DEMOLISHED	(Milepost, Nearest Intersecting Route Number or Street Name)
1	18. NO DAMAGE	
1	19. OTHER	

1	Reference Marker	Coordinates (if available)	Place Where Accident Occurred:
1		Latitude/Northing: 4588739	County ORANGE <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of WALLKILL
1		Longitude/Easting: 552710	Road on which accident occurred I 84
1			at 1) intersecting street ST RT 17 EXIT 4 W/B ENT RAMP
1			or 2) _____ of _____
1			(Milepost, Nearest Intersecting Route Number or Street Name)

Accident Description/Officer's notes
 THE ACCIDENT OCCURRED IN A POLICE VEHICLE OWNED/OPERATED BY THE NEW YORK STATE POLICE WHILE RESPONDING TO AN EMERGENCY. V-1 WAS A MARKED STATE POLICE CAR, TRAVELING WITH EMERGENCY LIGHTS AND SIRENS ACTIVATED. V-1 ENTERED I-84 WESTBOUND FROM THE ST RT 17 WESTBOUND EXIT 4W RAMP IN HEAVY RAIN. V-1 MERGED INTO THE DRIVING LANE AND MADE CONTACT WITH V-2.

	8	9	10	11	12	13	14	15	16	17 BY	TO 18	Names of all involved	Date of Death Only
A	1	1	4	1		M	-	-	-			LEWIS, JASON J	
B	1	3	4	1		M	-	-	-			LEWIN, DESMOND	
C	2	1	4	1		M	-	-	-			HOWLETT, BERNARD A	
D													
E													
F													

Officer's Rank and Signature	Badge/ID No.	NCIC No.	Precinct/Post Troop/Zone	Station/Beat Sector	Reviewing Officer	Date/Time Reviewed
Print Name D G Scott	3209	13502	F2	11	Mohl, S C	6/22/2009 16:21

USE COVER SHEET

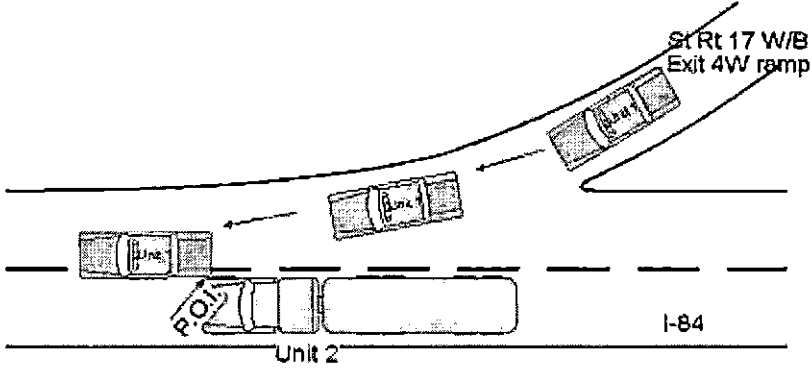
N

New York State Department of Motor Vehicles
POLICE ACCIDENT REPORT
MV-104A (3/04)

Local Codes
3030528
SPPZ81000007

AMENDED REPORT

Accident Date			Day of Week	Military Time	No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene <input type="checkbox"/>	Left Scene <input type="checkbox"/>	Police Photos <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Month	Day	Year	Wednesday	00:35	2	0	0	Accident Reconstructed <input type="checkbox"/>		
5	27	2009								



NOT TO SCALE



#7

REPORT OF MOTOR VEHICLE ACCIDENT POLICE LINE OF DUTY ACCIDENT

AMENDED REPORT

Page 1 of 1 Pages

Precinct
F211
Local Accident Number
3030528
SPPZ81000007

IMPORTANT: If you are the officer in charge, complete and sign this form, and attach it to the MV-104A or MV-104AN.

Accident Date	Accident Time	County
5 / 27 / 2009 Month Day Year	In Military Time 00:35	ORANGE

NAMES OF DRIVERS: (Please Print or Type)

*	Last	First	M.I.	State of Veh. Reg.	Plate Number	Driver License State	Driver License Number
VEH 1 <input checked="" type="checkbox"/>	LEWIS	JASON	J	NY	POLICE	NY	[REDACTED]
VEH 2 <input type="checkbox"/>	HOWLETT	BERNARD	A	ME	920999	ME	[REDACTED]
VEH 3							
VEH 4							
VEH 5							
VEH 6							

Pursuant to Section 605 of the New York State Vehicle and Traffic Law, the attached Police Accident Report is also the motorist report for vehicle number(s) 1.

* Pursuant to Section 605(a)(4) of the Vehicle and Traffic Law, check **only** the box for each police officer operating a police vehicle (as defined by V & T Section 132-a) **during emergency operation** (as defined by V&T Section 114-b) when the accident occurred.

Date	Signature of Owner of Police Vehicle/Police Agency Representative	NCIC#
6/22/2009 16:21	<i>T/ser. J. Hall</i>	13502

05/27/2009 at 01:39 PM
2479

Job Number:

PRELIMINARY ESTIMATE

2008 FORD CROWN VICTORIA POLICE 8-4.6L-FI 4D SED Blue Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
12#		Hazardous Waste	1	2.50		
Subtotals ==>				197.33	4.1	4.6
Parts						197.33
Body Labor						4.1 hrs @ \$ 50.00/hr 205.00
Paint Labor						4.6 hrs @ \$ 50.00/hr 230.00
Paint Supplies						4.6 hrs @ \$ 28.00/hr 128.80
SUBTOTAL						\$ 761.13
GRAND TOTAL						\$ 761.13
ADJUSTMENTS:						
Deductible						0.00
CUSTOMER PAY						\$ 0.00
INSURANCE PAY						\$ 761.13

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR COMMERCIAL INSURANCE OR A STATEMENT OF CLAIM FOR ANY COMMERCIAL OR PERSONAL INSURANCE BENEFITS CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, AND ANY PERSON WHO, IN CONNECTION WITH SUCH APPLICATION OR CLAIM, KNOWINGLY MAKES OR KNOWINGLY ASSISTS, ABETS, SOLICITS OR CONSPIRES WITH ANOTHER TO MAKE A FALSE REPORT OF THE THEFT, DESTRUCTION, DAMAGE OR CONVERSION OF ANY MOTOR VEHICLE TO A LAW ENFORCEMENT AGENCY, THE DEPARTMENT OF MOTOR VEHICLES OR AN INSURANCE COMPANY, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE VALUE OF THE SUBJECT MOTOR VEHICLE OR STATED CLAIM FOR EACH VIOLATION.

You are entitled to the return of all replaced parts, except warranty and exchange parts, but you must ask for them in writing before any work is done. If you authorize work by phone, the shop must keep any replaced parts, and make them available when you pick up the vehicle.