

**INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT**

Case Number: **17-001324**  
 Date of Acc: **03/10/17**  
 Time of Acc: **07:01** Hrs.  
 Name of Agency: **O'BRIEN COUNTY SHERIFF'S OFF**  
 Officer: **VANMEETEREN KEVEN**  
 Badge #: **71-7**  
 Report Date: **03/10/2017**  
 Officer Notified: **07:01** Hrs.  
 Officer Arrived: **07:10** Hrs.  
 Scene Investigated: **YES**

Report to All Drivers: **YES**  
 Legal Intervention: **NO**  
 Private Property: **NO**  
 County: **O'BRIEN - 71**  
 Acc Loc City:  
 Acc Dir From City: **"N/A"**  
 Closest City: **"N/A"**  
 Miles From City: **"N/A"**  
 Road,Street,HWay: **"N/A"**  
 Definable Location: **"N/A"**  
 Milepost Number: **"N/A"**

At Intersection with: **"N/A"**  
 Div HWay Trvl Dir: **"N/A"**  
 Distance 1: **"N/A"**  
 Direction 1: **"N/A"**  
 Distance 2: **"N/A"**  
 Direction 2: **"N/A"**  
 X-Coordinate: **00283358**  
 Y-Coordinate: **04779810**  
 Location Literal: **3510 REDWOOD AVE**  
 Description:

**Unit 001**

Driver Name - Last: <b>BAKKER</b>	Bus Use:	Transported to: <b>N/A</b>
First: <b>CALEB</b>		
Middle: <b>ANDREW</b>	Drvtr Distractions: <b>02 - NOT DISTRACTED</b>	Transported by: <b>N/A</b>
City: <b>SANBORN</b>		
State: <b>IA</b>	Traffic Controls: <b>01 - NO CONTROLS PRESENT</b>	Special Veh Func: <b>01 - NO SPECIAL FUNCTION</b>
Zip: <b>51248-0000</b>		
Suffix:	Point of Init: <b>11 - FRONT DRIVER SIDE CORNER</b>	Emergency Status: <b>01 - NOT APPLICABLE</b>
Gender: <b>Male</b>	Impact:	
Age: <b>23</b>	Most Damaged: <b>11 - FRONT DRIVER SIDE CORNER</b>	Cont. Circum., Drvr: <b>06 - LOST CONTROL</b>
CDL: <b>NO</b>	Area:	
License State: <b>IA</b>	Undridd/Ovrid: <b>1 - NONE</b>	
License Class: <b>D</b>	Rpr/Rplc Cost: <b>\$4,000.00</b>	
License Endorsmnt: <b>3 - PASS VEH LESS THAN 10</b>	Ext of Damage: <b>5 - SEVERE, VEHICLE TOTALED</b>	
License Restrictions: <b>PASS DESIGN</b>	First Event: <b>06 - EVASIVE ACTION (SWERVE, PANIC BRAKING, AVOIDANCE)</b>	Carrier Name:
Speed Limit: <b>55</b>		Carrier Address:
Seating Position: <b>01 - 1ST ROW: LEFT SIDE/MOTORCYCLE DRIVER</b>	Second Event: <b>11 - LOSS OF TRACTION</b>	Carrier City:
Driver Condition: <b>01 - APPARENTLY NORMAL</b>		Carrier State:
Alcohol Test Given: <b>NO</b>	Third Event: <b>20 - OVERTURN/ROLLOVER</b>	Carrier Zip:
Drug Test Given: <b>1 - NONE</b>		Cargo Body Type: <b>01 - NOT APPLICABLE</b>
Total Occupants: <b>01</b>	Fourth Event: <b>54 - UTILITY POLE/LIGHT SUPPORT</b>	Number of Axles:
Vehicle Year: <b>2004</b>		HazMat Involvement:
Vehicle Make: <b>JEEP - JEEP</b>	Most Harmful: <b>20 - OVERTURN/ROLLOVER</b>	HazMat Placard:
Vehicle Model: <b>LBY</b>	Event:	Placard #:
Vehicle Style: <b>SW</b>	Abg Switch Stat:	HazMat Released?:
Vehicle Color: <b>RED - RED</b>	Abg Deploy: <b>03 - NOT DEPLOYED</b>	Converter Dolly:
Vehicle Config: <b>03 - SPORT UTILITY VEHICLE</b>		GVWR:
Vehicle Defect: <b>01 - NONE</b>	Trapped: <b>1 - NOT TRAPPED/APPLICABLE</b>	Cit Chrg Code 1:
Vehicle Action: <b>01 - MOVEMENT ESSENTIALLY STRAIGHT</b>	Ejection: <b>2 - NOT EJECTED</b>	Citation Charge 1:
Tow: <b>3 - DISABLED - OFFICER ARRANGED</b>	Ejection Path: <b>01 - NOT EJECTED/NOT APPLICABLE</b>	Cit Chrg Code 2:
Tow #: <b>17-26</b>	Occpnt Protect: <b>03 - SHOULDER AND LAP BELT USED</b>	Citation Charge 2:
Initial Trvl Dir: <b>01 - NORTH</b>	Injury Status: <b>4 - POSSIBLE (COMPLAINT OF PAIN/INJURY)</b>	Cit Chrg Code 3:
Vision Obscured: <b>01 - NOT OBSCURED</b>	Source of Trans: <b>01 - NOT TRANSPORTED</b>	Citation Charge 3:
	Died at Scene: <b>01 - NOT APPLICABLE</b>	Cit Chrg Code 4:
		Citation Charge 4:

**Property Damage**

Object Damaged: <b>POWER LINE POLE (#25)</b>	Company Owner Name: <b>NORTHWEST REC</b>
Estimate of Damage: <b>\$600.00</b>	City: <b>ORANGE CITY</b>
Owner's Name - Last:	State: <b>IA</b>
First:	Zip Code: <b>51041</b>
Middle:	
Suffix:	

**Accident Environment**

First Harmful Event Loc: <b>06 - OUTSIDE TRAFFICWAY</b>	<b>Roadway Characteristics</b>
Manner of Crash/Collision: <b>01 - NON-COLLISION (SINGLE VEHICLE)</b>	Environment: <b>06 - ANIMAL IN ROADWAY</b>
Light Conditions: <b>3 - DAWN</b>	Roadway: <b>01 - NONE APPARENT</b>
Weather Conditions: <b>01 - CLEAR</b>	
Surface Conditions: <b>10 - GRAVEL</b>	Type of Road Junc/Feat: <b>01 - NON-JUNCTION/NO SPECIAL FEATURE</b>
	FRA No.:
Workzone Related: <b>NO</b>	Horizontal Alignment:
Activity:	Vertical Alignment:
Location:	First Harmful Evt of Crash: <b>54 - UTILITY POLE/LIGHT SUPPORT</b>
Type:	
Workers Present:	

**Narrative**

UNIT 1 WAS NORTHBOUND ON REDWOOD AVE, DRIVER CLAIMED A DEER CROSSED OVER THE ROAD. DRIVER LOST CONTROL AND ENTERED THE WEST DITCH WHERE THE VEHICLE ROLLED AND STRUCK A ELECTRICAL POLE BELONGING TO NORTHWEST REC.

**Diagram**

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