

INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Case Number: **19-008250**
 Date of Acc: **12/09/19**
 Time of Acc: **08:25** Hrs.
 Name of Agency: **O'BRIEN COUNTY SHERIFF'S OFF**
 Officer: **DEVEREAUX BRUCE**
 Badge #: **71-2**
 Report Date: **12/09/2019**
 Officer Notified: **08:27** Hrs.
 Officer Arrived: **08:40** Hrs.
 Scene Investigated: **YES**

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

At Intersection with:
 Div HWay Trvl Dir:
 Distance 1:
 Direction 1:
 Distance 2:
 Direction 2:
 X-Coordinate: **00281763**
 Y-Coordinate: **04780345**
 Location Literal: **L048/REDWING AVE**
 Description:

Unit 001

Driver Name - Last: **JOHNSON**
 First: **ANGELA**
 Middle: **KAYE**
 City: **SANBORN**
 State: **IA**
 Zip: **51248-0000**
 Suffix:
 Gender: **Female**
 Age: **50**
 CDL: **NO**
 License State: **IA**
 License Class: **C**
 License Endorsmnt:
 License Restrictions:
 Speed Limit: **55**
 Seating Position: **01 - 1ST ROW: LEFT SIDE/MOTORCYCLE DRIVER**
 Driver Condition: **01 - APPARENTLY NORMAL**
 Alcohol Test Given: **NO**
 Drug Test Given: **1 - NONE**
 Total Occupants: **1**
 Vehicle Year: **2007**
 Vehicle Make: **MERCURY - MERC**
 Vehicle Model: **MNR**
 Vehicle Style: **UT**
 Vehicle Color: **BLACK - BLK**
 Vehicle Config: **01 - PASSENGER CAR**
 Vehicle Defect: **01 - NONE**
 Vehicle Action: **01 - MOVEMENT ESSENTIALLY STRAIGHT**
 Tow: **6 - ABANDONED/LEFT AT SCENE**
 Tow #:
 Initial Trvl Dir: **01 - NORTH**
 Vision Obscured: **01 - NOT OBSCURED**

Bus Use:
 Dvr Distractions: **02 - NOT DISTRACTED**
 Traffic Controls: **01 - NO CONTROLS PRESENT**
 Point of Init Impact: **13 - TOP OF VEHICLE**
 Most Damaged Area: **13 - TOP OF VEHICLE**
 Undrrid/Ovrid: **1 - NONE**
 Rpr/Rplc Cost: **\$3,000.00**
 Ext of Damage: **3 - FUNCTIONAL DAMAGE**
 First Event: **11 - LOSS OF TRACTION**
 Second Event: **01 - RAN OFF ROAD, RIGHT**
 Third Event: **20 - OVERTURN/ROLLOVER**
 Fourth Event:
 Most Harmful Event: **20 - OVERTURN/ROLLOVER**
 Abg Switch Stat:
 Abg Deploy: **03 - NOT DEPLOYED**
 Trapped: **1 - NOT TRAPPED/APPLICABLE**
 Ejection: **2 - NOT EJECTED**
 Ejection Path: **01 - NOT EJECTED/NOT APPLICABLE**
 Occpnt Protect: **03 - SHOULDER AND LAP BELT USED**
 Source of Trans: **05 - PARENT/SPOUSE/FRIEND**
 Died at Scene: **01 - NOT APPLICABLE**

Transported to: **SHELDON HOSPITAL**
 Transported by: **HUSBAND/CHRIS**
 Special Veh Func: **01 - NO SPECIAL FUNCTION**
 Emergency Status: **01 - NOT APPLICABLE**
 Cont. Circum., Dvr: **06 - LOST CONTROL**
 Carrier Name:
 Carrier Address:
 Carrier City:
 Carrier State:
 Carrier Zip:
 Cargo Body Type: **01 - NOT APPLICABLE**
 Number of Axles:
 HazMat Involvement:
 HazMat Placard:
 Placard #:
 HazMat Released?:
 Converter Dolly:
 GVWR:
 Cit Chrg Code 1:
 Citation Charge 1:
 Cit Chrg Code 2:
 Citation Charge 2:
 Citation Charge 3:
 Citation Charge 4:

Accident Environment

First Harmful Event Loc: **04 - ROADSIDE**
 Manner of Crash/Collision: **01 - NON-COLLISION (SINGLE VEHICLE)**
 Light Conditions: **1 - DAYLIGHT**
 Weather Conditions: **08 - BLOWING SNOW, 09 - SEVERE WINDS**
 Surface Conditions: **03 - ICE/FROST**
 Workzone Related: **NO**
 Activity:
 Location:
 Type:
 Workers Present:

Roadway Characteristics
 Environment: **02 - WEATHER CONDITION**
 Roadway: **02 - SURFACE CONDITION (E.G., WET, ICY)**
 Type of Road Junc/Feat: **01 - NON-JUNCTION/NO SPECIAL FEATURE**
 FRA No.:
 Horizontal Alignment:
 Vertical Alignment:
 First Harmful Evt of Crash: **20 - OVERTURN/ROLLOVER**

Narrative

Driver of vehicle 1 lost control on the extremely slick road conditions, hit the east shoulder and rolled the vehicle onto it's top in the ditch.

Diagram

