

INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Case Number: **21-003144**
 Date of Acc: **05/14/21**
 Time of Acc: **06:44** Hrs.
 Name of Agency: **O'BRIEN COUNTY SHERIFF'S OFF**
 Officer: **DEPUTY TIMOTHY ROHRBAUGH**
 Badge #: **71-5**
 Report Date: **05/14/2021**
 Officer Notified: **06:48** Hrs.
 Officer Arrived: **06:57** 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: **00279952**
 Y-Coordinate: **04773781**
 Location Literal: **POLK AVE**
 Description:

Unit 001

Driver Name - Last: **FARRELL**
 First: **CALEB**
 Middle: **JAMES**
 City: **PRIMGHAR**
 State: **IA**
 Zip: **51245-0000**
 Suffix:
 Gender: **Male**
 Age: **19**
 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: **03 - ASLEEP/FATIGUED**
 Alcohol Test Given: **NO**
 Drug Test Given: **1 - NONE**
 Total Occupants: **1**
 Vehicle Year: **1992**
 Vehicle Make: **FORD - FORD**
 Vehicle Model: **F25**
 Vehicle Style: **PK**
 Vehicle Color: **TAN - TAN**
 Vehicle Config: **02 - FOUR-TIRE TRUCK (PICK-UP)**
 Vehicle Defect: **01 - NONE**
 Vehicle Action: **01 - MOVEMENT ESSENTIALLY STRAIGHT**
 Tow: **1 - DRIVEN AWAY**
 Tow #:
 Initial Trvl Dir: **02 - EAST**
 Vision Obscured: **01 - NOT OBSCURED**

Bus Use:
 Dvr Distractions: **99 - UNKNOWN**
 Traffic Controls: **11 - WORKZONE SIGN(S)**
 Point of Init Impact: **01 - FRONT PASSENGER SIDE CORNER**
 Most Damaged Area: **01 - FRONT PASSENGER SIDE CORNER**
 Undrrid/Ovrid: **1 - NONE**
 Rpr/Rplc Cost: **\$800.00**
 Ext of Damage: **3 - FUNCTIONAL DAMAGE**
 First Event: **51 - OTHER TRAFFIC BARRIER (EXPLAIN IN NARRATIVE)**
 Second Event: **06 - EVASIVE ACTION (SWERVE, PANIC BRAKING, AVOIDANCE)**
 Third Event: **03 - RAN OFF ROAD, LEFT**
 Fourth Event:
 Most Harmful Event: **03 - RAN OFF ROAD, LEFT**
 Abg Switch Stat:
 Abg Deploy: **01 - NOT APPLICABLE**
 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: **06 - SELF**
 Died at Scene: **01 - NOT APPLICABLE**

Transported to:
 Transported by:
 Special Veh Func: **01 - NO SPECIAL FUNCTION**
 Emergency Status: **01 - NOT APPLICABLE**
 Cont. Circum., Dvr: **18 - SWERVED TO AVOID: VEHICLE, OBJECT, NON-MOTORIST, OR ANIMAL IN ROADWAY, 53 - DISREGARDED SIGNS/ROAD MARKINGS**
 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: **321.256**
 Citation Charge 1: **FAILURE TO OBEY TRAFFIC CONTROL DEVICE**
 Cit Chrg Code 2:
 Citation Charge 2:
 Citation Charge 3:
 Citation Charge 4:

Property Damage 001

Object Damaged: **ROAD CLOSED SIGN**
 Estimate of Damage: **\$1,000.00**
 Owner's Name - Last:
 First:
 Middle:
 Suffix:

Company Owner Name: **O'BRIEN COUNTY**
 City: **PRIMGHAR**
 State: **IA**
 Zip Code: **51245**

Property Damage 002

Object Damaged: **CORN**
 Estimate of Damage: **\$75.00**
 Owner's Name - Last: **VAN BEEK**
 First: **JON**
 Middle:
 Suffix:

Company Owner Name:
 City: **PRIMGHAR**
 State: **IA**
 Zip Code: **51245**

Accident Environment

First Harmful Event Loc: **01 - ON ROADWAY**
Manner of Crash/Collision: **01 - NON-COLLISION (SINGLE VEHICLE)**
Light Conditions: **3 - DAWN**
Weather Conditions: **02 - CLOUDY, 05 - RAIN**

Surface Conditions: **02 - WET**

Workzone Related: **YES**
Activity: **01 - CONSTRUCTION**
Location: **04 - WITHIN OR ADJACENT TO WORK ACTIVITY**
Type: **03 - WORK ON SHOULDER OR MEDIAN**
Workers Present: **02 - NO WORKERS PRESENT**

Roadway Characteristics
Environment: **01 - NONE APPARENT**
Roadway: **05 - WORK ZONE (ROADWAY-RELATED)**

Type of Road Junc/Feat: **97 - OTHER INTERSECTION (EXPLAIN IN NARRATIVE)**

FRA No.:
Horizontal Alignment:
Vertical Alignment:

First Harmful Evt of Crash: **51 - OTHER TRAFFIC BARRIER (EXPLAIN IN NARRATIVE)**

Narrative

THE VEHICLE WAS TRAVELING EAST ON B-40. THE ROAD IS CLOSED FOR CONSTRUCTION. THE DRIVER FELL ASLEEP OR BLACKED OUT. HE SWERVED TO MISS THE ROAD CLOSED SIGN, HIS RIGHT FRONT CLIPPED THE SIGN AND HE ENDED UP IN THE FIELD.

Diagram

