

INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Law Enforcement: **20210724-S7171-50438001**
 Case Numbers: **21-004975**
 Date of Acc: **07/24/21**
 Time of Acc: **16:15** Hrs.
 Name of Agency: **O'BRIEN COUNTY SHERIFF'S OFF**
 Officer: **DEPUTY TIMOTHY ROHRBAUGH**
 Badge #: **71-5**
 Report Date: **07/24/2021**
 Officer Notified: **16:13** Hrs.
 Officer Arrived: **16:20** Hrs.

Scene Investigated: **YES**
 Report to All Drivers:
 Legal Intervention: **NO**
 Private Property: **NO**
 County: **CASS - 15**
 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: **00275528**
 Y-Coordinate: **04786156**
 Location Literal: **OLIVE AVE**
 Description:

Unit 001

Driver Name - Last: ANDERSON	Bus Use:	Transported to: SANFORD SHELDON
First: KEVIN		
Middle: GLEN	Drvr Distractions: 99 - UNKNOWN	Transported by: SCAT 1
City: SHELDON	Traffic Controls: 01 - NO CONTROLS PRESENT	Special Veh Func: 01 - NO SPECIAL FUNCTION
State: IA	Point of Init Impact: 02 - FRONT PASSENGER SIDE	Emergency Status: 01 - NOT APPLICABLE
Zip: 51201-0000	Most Damaged Area: 13 - TOP OF VEHICLE	Cont. Circum., Drvr: 03 - EXCEEDED AUTHORIZED SPEED, 06 - LOST CONTROL
Suffix:	Undrriid/Ovrid: 1 - NONE	
Gender: Male	Rpr/Rplc Cost: \$5,000.00	Carrier Name:
Age: 63	Ext of Damage: 3 - FUNCTIONAL DAMAGE	Carrier Address:
CDL: NO	First Event: 33 - VEHICLE IN TRAFFIC	Carrier City:
License State: IA	Second Event: 11 - LOSS OF TRACTION	Carrier State:
License Class: C	Third Event: 01 - RAN OFF ROAD, RIGHT	Carrier Zip:
License Endorsmnt:	Fourth Event: 20 - OVERTURN/ROLLOVER	Cargo Body Type: 01 - NOT APPLICABLE
License Restrictions:	Most Harmful Event: 20 - OVERTURN/ROLLOVER	Number of Axles:
Speed Limit: 5	Abg Switch Stat:	HazMat Involvement:
Seating Position: 01 - 1ST ROW: LEFT SIDE/MOTORCYCLE DRIVER	Abg Deploy: 03 - NOT DEPLOYED	HazMat Placard:
Driver Condition: 06 - UNDER THE INFLUENCE O	Trapped: 1 - NOT TRAPPED/APPLICABLE	Placard #:
Alcohol Test Given: YES	Ejection: 2 - NOT EJECTED	HazMat Released?:
Drug Test Given: 2 - BLOOD	Ejection Path: 01 - NOT EJECTED/NOT APPLICABLE	Converter Dolly:
Total Occupants: 1	Occpnt Protect: 03 - SHOULDER AND LAP BELT USED	GVWR:
Vehicle Year: 2007	Source of Trans: 03 - EMS GROUND	Cit Chrg Code 1:
Vehicle Make: CHEVROLET - CHEV	Died at Scene: 01 - NOT APPLICABLE	Citation Charge 1:
Vehicle Model: COBALT		Cit Chrg Code 2:
Vehicle Style: 4 D		Citation Charge 2:
Vehicle Color: WHITE - WHI		Citation Charge 3:
Vehicle Config: 01 - PASSENGER CAR		Citation Charge 4:
Vehicle Defect: 99 - UNKNOWN		
Vehicle Action: 01 - MOVEMENT ESSENTIALLY STRAIGHT		
Tow: 5 - NOT DISABLED - OFFICER ARRANGED		
Tow #: 21-101		
Initial Trvl Dir: 03 - SOUTH		
Vision Obscured: 01 - NOT OBSCURED		

Accident Environment

First Harmful Event Loc: 01 - ON ROADWAY	Roadway Characteristics
Manner of Crash/Collision: 01 - NON-COLLISION (SINGLE VEHICLE)	Environment: 01 - NONE APPARENT
Light Conditions: 1 - DAYLIGHT	Roadway: 01 - NONE APPARENT
Weather Conditions: 01 - CLEAR	Type of Road Junc/Feat: 01 - NON-JUNCTION/NO SPECIAL FEATURE
Surface Conditions: 10 - GRAVEL	FRA No.:
Workzone Related: NO	Horizontal Alignment:
Activity:	Vertical Alignment:
Location:	First Harmful Evt of Crash: 33 - VEHICLE IN TRAFFIC
Type:	
Workers Present:	

Narrative

THE VEHICLE WAS TRAVELING SOUTH ON OLIVE AVE. THE VEHICLE APPEARED TO BE TRAVELING AT A HIGH RATE OF SPEED AND LOST CONTROL. THE VEHICLE LOST TRACTION AND BEGAN TO FISHTAIL AND EVENTUALLY ENTERED THE WEST DITCH. THE VEHICLE ROLLED 3 OR 4 TIMES AND CAME TO REST ON ITS ROOF. CHARGES ARE PENDING.

Diagram

