

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

Law Enforcement  
 Case Number: **22-004734**  
 Date of Acc: **07/05/22**  
 Time of Acc: **18:00** Hrs.  
 Name of Agency: **O'BRIEN COUNTY SHERIFF'S OFF**  
 Officer: **DEPUTY LEE VELLEMA**  
 Badge #: **71-7**  
 Report Date: **07/06/2022**  
 Officer Notified: **18:04** Hrs.  
 Officer Arrived: **18:08** 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: **00267616**  
 Y-Coordinate: **04782753**  
 Location Literal: **IA 60 N**  
 Description:

**Unit 001**

Driver Name - Last: **HASKIN**  
 First: **JEROME**  
 Middle: **EMIL**  
 City: **JACKSON**  
 State: **MN**  
 Zip: **56143**  
 Suffix:  
 Gender: **Male**  
 Age: **60**  
 CDL: **YES**  
 License State: **MN**  
 License Class: **A**  
 License Endorsmnt: **N-L**  
 License Restrictions: **2**  
 Speed Limit: **65**  
 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: **2020**  
 Vehicle Make: **KENWORTH - KW**  
 Vehicle Model: **SEMI TRUCK**  
 Vehicle Style: **TR**  
 Vehicle Color: **MAROON, BURGUNDY (PURPL**  
 Vehicle Config: **13 - TRACTOR/SEMI-TRAILER**  
 Vehicle Defect: **01 - NONE**  
 Vehicle Action: **01 - MOVEMENT ESSENTIALLY STRAIGHT**  
 Tow: **2 - DISABLED - PRIVATELY ARRANGED**  
 Tow #:  
 Initial Trvl Dir: **02 - EAST**  
 Vision Obscured: **01 - NOT OBSCURED**

Bus Use:  
 Dvr Distractions: **02 - NOT DISTRACTED**  
 Traffic Controls: **01 - NO CONTROLS PRESENT**  
 Point of Init Impact: **03 - MIDDLE PASSENGER SIDE**  
 Most Damaged Area: **03 - MIDDLE PASSENGER SIDE**  
 Undrrid/Ovrid: **1 - NONE**  
 Rpr/Rplc Cost: **\$10,000.00**  
 Ext of Damage: **4 - DISABLING DAMAGE**  
 First Event: **98 - OTHER (EXPLAIN IN NARRATIVE)**  
 Second Event: **44 - DITCH**  
 Third Event:  
 Fourth Event:  
 Most Harmful Event: **98 - OTHER (EXPLAIN IN NARRATIVE)**  
 Abg Switch Stat:  
 Abg Deploy: **03 - NOT DEPLOYED**  
 Trapped: **3 - EXTRICATED BY MECHANICAL**  
 Ejection: **2 - NOT EJECTED**  
 Ejection Path: **01 - NOT EJECTED/NOT APPLICABLE**  
 Occpnt Protect: **03 - SHOULDER AND LAP BELT USED**  
 Source of Trans: **03 - EMS GROUND**  
 Died at Scene: **01 - NOT APPLICABLE**

Transported to: **SHELDON SANFORD HOSPITAL**  
 Transported by: **SHELDON AMBULANCE**  
 Special Veh Func: **01 - NO SPECIAL FUNCTION**  
 Emergency Status: **01 - NOT APPLICABLE**  
 Cont. Circum., Dvr: **88 - NO IMPROPER ACTION**  
 Carrier Name: **JBS CARRIERS INC.**  
 Carrier Address: **1770 PROMONTORY CIRCLE**  
 Carrier City: **GREELEY**  
 Carrier State: **CO**  
 Carrier Zip: **80634**  
 Cargo Body Type: **02 - VAN/ENCLOSED BOX**  
 Number of Axles: **5**  
 HazMat Involvement: **02 - NO**  
 HazMat Placard:  
 Placard #:  
 HazMat Released?:  
 Converter Dolly: **2**  
 GVWR: **3 - 26,001 LBS OR MORE**  
 Cit Chrg Code 1:  
 Citation Charge 1:  
 Cit Chrg Code 2:  
 Citation Charge 2:  
 Citation Charge 3:  
 Citation Charge 4:

**Property Damage 001**

Object Damaged: **GREEN "O'BRIEN COUNTY" SIGN**  
 Estimate of Damage: **\$100.00**  
 Owner's Name - Last:  
 First:  
 Middle:  
 Suffix:

Company Owner Name: **STATE OF IOWA**  
 City: **ASHTON**  
 State: **IA**  
 Zip Code: **51232**

**Accident Environment**

First Harmful Event Loc: **01 - ON ROADWAY**  
 Manner of Crash/Collision: **01 - NON-COLLISION (SINGLE VEHICLE)**  
 Light Conditions: **1 - DAYLIGHT**  
 Weather Conditions: **09 - SEVERE WINDS**  
 Surface Conditions: **02 - WET**  
 Workzone Related: **NO**  
 Activity:  
 Location:  
 Type:  
 Workers Present:

**Roadway Characteristics**  
 Environment: **07 - SEVERE CROSSWIND**  
 Roadway: **01 - NONE APPARENT**  
 Type of Road Junc/Feat: **01 - NON-JUNCTION/NO SPECIAL FEATURE**  
 FRA No.:  
 Horizontal Alignment:  
 Vertical Alignment:  
 First Harmful Evt of Crash: **98 - OTHER (EXPLAIN IN NARRATIVE)**

**Narrative**

Unit 1 was traveling in the Highway 60 Northbound Lanes near McKinley Ave. As Unit 1 was driving eastbound on the south side of Sheldon, the semi encountered significant straight lined winds that the national weather service categorized as a "Derecho." The strong winds caused Unit 1 to turn over onto it's passenger side. Unit 1 sustained approximately \$10,000 worth of damage. The driver of Unit 1 sustained minor injuries and was transported to the Sanford Sheldon Hospital for treatment.

## Diagram

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