

INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Law Enforcement
 Case Number: **23-000074**
 Date of Acc: **01/05/23**
 Time of Acc: **07:00** Hrs.
 Name of Agency: **O'BRIEN COUNTY SHERIFF'S OFF**
 Officer: **DEPUTY BRAD STEVENS**
 Badge #: **71-10**
 Report Date: **01/05/2023**
 Officer Notified: **07:45** Hrs.
 Officer Arrived: **08:23** 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: **00266891**
 Y-Coordinate: **04765137**
 Location Literal: **MCKINLEY AVE**
 Description:

Unit 001

Driver Name - Last: HADEN	Bus Use:	Transported to:
First: CARLY		
Middle: GRACE	Drvr Distractions: 02 - NOT DISTRACTED	Transported by:
City: PAULLINA		
State: IA	Traffic Controls: 01 - NO CONTROLS PRESENT	Special Veh Func: 01 - NO SPECIAL FUNCTION
Zip: 51046		
Suffix:	Point of Init Impact: 09 - MIDDLE DRIVER SIDE	Emergency Status: 01 - NOT APPLICABLE
Gender: Female		
Age: 25	Most Damaged Area: 09 - MIDDLE DRIVER SIDE	Cont. Circum., Drvr: 05 - DRIVING TOO FAST FOR CONDITIONS, 06 - LOST CONTROL
CDL: NO		
License State: IA	Undrriid/Ovrid: 1 - NONE	
License Class: C	Rpr/Rplc Cost: \$2,700.00	
License Endorsmnt:	Ext of Damage: 9 - UNKNOWN	
License Restrictions:	First Event: 06 - EVASIVE ACTION (SWERVE, PANIC BRAKING, AVOIDANCE)	Carrier Name:
Speed Limit: 55		Carrier Address:
Seating Position: 01 - 1ST ROW: LEFT SIDE/MOTORCYCLE DRIVER	Second Event: 01 - RAN OFF ROAD, RIGHT	Carrier City:
Driver Condition: 01 - APPARENTLY NORMAL		Carrier State:
Alcohol Test Given: NO	Third Event: 44 - DITCH	Carrier Zip:
Drug Test Given: 1 - NONE		Cargo Body Type: 01 - NOT APPLICABLE
Total Occupants: 1	Fourth Event: 20 - OVERTURN/ROLLOVER	
Vehicle Year: 2011		Number of Axles:
Vehicle Make: FORD - FORD	Most Harmful Event: 20 - OVERTURN/ROLLOVER	HazMat Involvement:
Vehicle Model: ESCAPE		HazMat Placard:
Vehicle Style: UT	Abg Switch Stat:	Placard #:
Vehicle Color: RED - RED	Abg Deploy: 05 - DEPLOYED SIDE OF PERSON	HazMat Released?:
Vehicle Config: 03 - SPORT UTILITY VEHICLE		Converter Dolly:
Vehicle Defect: 01 - NONE	Trapped: 1 - NOT TRAPPED/APPLICABLE	GVWR:
	Ejection: 2 - NOT EJECTED	Cit Chrg Code 1:
Vehicle Action: 01 - MOVEMENT ESSENTIALLY STRAIGHT	Ejection Path: 01 - NOT EJECTED/NOT APPLICABLE	Citation Charge 1:
Tow: 2 - DISABLED - PRIVATELY ARRANGED	Occpnt Protect: 03 - SHOULDER AND LAP BELT USED	Cit Chrg Code 2:
Tow #: 01 - NORTH		Citation Charge 2:
Initial Trvl Dir: 01 - NORTH	Source of Trans: 01 - NOT TRANSPORTED	Citation Charge 3:
Vision Obscured: 01 - NOT OBSCURED	Died at Scene: 01 - NOT APPLICABLE	Citation Charge 4:

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: 02 - SURFACE CONDITION (E.G., WET, ICY)
Weather Conditions: 02 - CLOUDY	
	Type of Road Junc/Feat: 01 - NON-JUNCTION/NO SPECIAL FEATURE
Surface Conditions: 03 - ICE/FROST	
	FRA No.:
Workzone Related: NO	Horizontal Alignment:
Activity:	Vertical Alignment:
Location:	First Harmful Evt of Crash: 20 - OVERTURN/ROLLOVER
Type:	
Workers Present:	

Narrative

Unit 1 was northbound in the 4400 mi of Mckinley Ave and lost control after hitting a patch of ice. Unit 1 entered the snow filled east ditch and overturned, coming to rest on it's driver's side.

