

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

Case Number: **18-319**  
 Date of Acc: **01/16/18**  
 Time of Acc: **15:38** Hrs.  
 Name of Agency: **IDA COUNTY SHERIFF'S OFFICE**  
 Officer: **KINNAMAN KIRK**  
 Badge #: **47-4**  
 Report Date: **01/16/2018**  
 Officer Notified: **15:38** Hrs.  
 Officer Arrived: **15:42** Hrs.  
 Scene Investigated: **NO**

Report to All Drivers:  
 Legal Intervention: **NO**  
 Private Property: **NO**  
 County: **IDA - 47**  
 Acc Loc City: **IDA GROVE - 3650**  
 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: **00296437**  
 Y-Coordinate: **04691034**  
 Location Literal: **MAIN ST**  
 Description:

**Unit 001**

Driver Name - Last: <b>BEHRENDSEN</b>	Bus Use:	Transported to:
First: <b>DERRICK</b>		
Middle: <b>LEE</b>	Drvr Distractions: <b>02 - NOT DISTRACTED</b>	Transported by:
City: <b>IDA GROVE</b>		
State: <b>IA</b>	Traffic Controls: <b>04 - STOP SIGNS</b>	Special Veh Func: <b>01 - NO SPECIAL FUNCTION</b>
Zip: <b>51445</b>		
Suffix:	Point of Init <b>12 - FRONT MIDDLE</b>	Emergency Status: <b>01 - NOT APPLICABLE</b>
Gender: <b>Male</b>	Impact:	
Age: <b>15</b>	Most Damaged <b>98 - OTHER (EXPLAIN IN</b>	Cont. Circum., Drvr: <b>50 - VISION OBSTRUCTED</b>
CDL: <b>NO</b>	Area: <b>NARRATIVE)</b>	
License State: <b>IA</b>	Undrrid/Ovrid: <b>1 - NONE</b>	
License Class: <b>C</b>	Rpr/Rplc Cost: <b>\$0.00</b>	
License Endorsmnt: <b>7</b>	Ext of Damage: <b>1 - NONE</b>	
License Restrictions: <b>7</b>	First Event: <b>32 - NON-MOTORIST (SEE NON-</b>	Carrier Name:
Speed Limit: <b>20</b>	<b>MOTORIST SECTION - NOT A UNIT</b>	Carrier Address:
Seating Position: <b>01 - 1ST ROW: LEFT</b>	Second Event:	Carrier City:
<b>SIDE/MOTORCYCLE DRIVER</b>		Carrier State:
Driver Condition: <b>01 - APPARENTLY NORMAL</b>	Third Event:	Carrier Zip:
Alcohol Test Given: <b>NO</b>		Cargo Body Type: <b>01 - NOT APPLICABLE</b>
Drug Test Given: <b>1 - NONE</b>	Fourth Event:	
Total Occupants: <b>1</b>		Number of Axles:
Vehicle Year: <b>2002</b>	Most Harmful <b>32 - NON-MOTORIST (SEE NON-</b>	HazMat Involvement:
Vehicle Make: <b>FORD - FORD</b>	Event: <b>MOTORIST SECTION - NOT A UNIT</b>	HazMat Placard:
Vehicle Model: <b>RANGER</b>	Abg Switch Stat:	Placard #:
Vehicle Style: <b>PK</b>	Abg Deploy: <b>01 - NOT APPLICABLE</b>	HazMat Released?:
Vehicle Color: <b>WHITE - WHI</b>	Trapped: <b>1 - NOT TRAPPED/APPLICABLE</b>	Converter Dolly:
Vehicle Config: <b>02 - FOUR-TIRE TRUCK (PICK-UP)</b>	Ejection: <b>1 - NOT APPLICABLE</b>	GVWR:
Vehicle Defect: <b>01 - NONE</b>	Ejection Path: <b>01 - NOT EJECTED/NOT APPLICABLE</b>	Cit Chrg Code 1:
	Occpnt Protect: <b>03 - SHOULDER AND LAP BELT USED</b>	Citation Charge 1:
Vehicle Action: <b>02 - TURNING LEFT</b>		Cit Chrg Code 2:
Tow: <b>1 - DRIVEN AWAY</b>	Source of Trans: <b>01 - NOT TRANSPORTED</b>	Citation Charge 2:
Tow #: <b>04 - WEST</b>	Died at Scene: <b>01 - NOT APPLICABLE</b>	Citation Charge 3:
Initial Trvl Dir: <b>10 - BLINDED BY SUN OR HEADLIGHTS</b>		Citation Charge 4:
Vision Obscured:		

**Accident Environment**

First Harmful Event Loc: <b>01 - ON ROADWAY</b>	<b>Roadway Characteristics</b>
Manner of Crash/Collision: <b>01 - NON-COLLISION (SINGLE VEHICLE)</b>	Environment: <b>05 - GLARE</b>
Light Conditions: <b>1 - DAYLIGHT</b>	Roadway: <b>02 - SURFACE CONDITION (E.G., WET, ICY)</b>
Weather Conditions: <b>01 - CLEAR</b>	
	Type of Road Junc/Feat: <b>12 - FOUR-WAY INTERSECTION</b>
Surface Conditions: <b>04 - SNOW</b>	
	FRA No.:
Workzone Related: <b>NO</b>	Horizontal Alignment:
Activity:	Vertical Alignment:
Location:	First Harmful Evt of Crash: <b>32 - NON-MOTORIST (SEE NON-MOTORIST SECTION - NOT A UNIT)</b>
Type:	
Workers Present:	

**Non Motorist 001**

Type: <b>01 - PEDESTRIAN</b>	Location: <b>01 - INTERSECTION: WITHIN MARKED CROSSWALK</b>
Name - Last: <b>SNELL</b>	Action: <b>01 - ENTERING OR CROSSING ROADWAY</b>
First: <b>BRUCE</b>	
Middle: <b>MOREY</b>	Condition: <b>01 - APPARENTLY NORMAL</b>
Suffix: <b>JR</b>	Safety Equipment: <b>01 - NOT APPLICABLE</b>
Address: <b>310 BURNS</b>	Contributing Circumstances: <b>01 - NO IMPROPER ACTION</b>
City: <b>IDA GROVE</b>	
State: <b>IA</b>	Alcohol Test Given: <b>NO</b>

Zip Code: 51445  
Age: 88  
Sex: MALE  
Unit No. of Vehicle Striking: 001  
Injury Status: 3 - SUSPECTED MINOR/NON-INCAPACITATING

Drug Test Given: 1 - NONE  
Source of Transport: 03 - EMS GROUND  
Died at Scene/Enroute: 01 - NOT APPLICABLE  
Transported to: HORN MEMORIAL  
Transported by: IDA GROVE AMBULANCE

### Narrative

Unit 1 came to a stop at the intersection of 2nd/Main. Made left hand turn to go south on Main Street. Sun was bright where Unit 1 didn't see pedestrian crossing the street. When Unit 1 noticed pedestrian he pressed his brakes but pavement was snow packed and Unit 1 slid into pedestrian. Pedestrian was transported to hospital with possible broken hip.

### Diagram

