

INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Case Number:	18-3943	Report to All Drivers:		At Intersection with:	
Date of Acc:	06/06/18	Legal Intervention:	NO	Div HWay Trvl Dir:	
Time of Acc:	14:40 Hrs.	Private Property:	NO	Distance 1:	
Name of Agency:	IDA COUNTY SHERIFF'S OFFICE	County:	IDA - 47	Direction 1:	
Officer:	STEHR MICHAEL	Acc Loc City:	HOLSTEIN - 3515	Distance 2:	
Badge #:	47-3	Acc Dir From City:		Direction 2:	
Report Date:	06/06/2018	Closest City:		X-Coordinate:	00290816
Officer Notified:	14:40 Hrs.	Miles From City:		Y-Coordinate:	04705644
Officer Arrived:	14:44 Hrs.	Road, Street, HWay:		Location Literal:	US 59/S MAIN ST AND US 20 AND
Scene Investigated:	YES	Definable Location:		Description:	INDORF AVE
		Milepost Number:			

Unit 001

Driver Name - Last:	GOODBURN	Bus Use:		Transported to:	N/A
First:	GARY	Dvrv Distractions:	02 - NOT DISTRACTED	Transported by:	N/A
Middle:	LEE	Traffic Controls:	01 - NO CONTROLS PRESENT	Special Veh Func:	01 - NO SPECIAL FUNCTION
City:	CUSHING	Point of Init Impact:	11 - FRONT DRIVER SIDE CORNER	Emergency Status:	01 - NOT APPLICABLE
State:	IA	Most Damaged Area:	11 - FRONT DRIVER SIDE CORNER	Cont. Circum., Dvrv:	88 - NO IMPROPER ACTION
Zip:	51018-0000	Undridd/Ovrid:	1 - NONE	Carrier Name:	GOODBURN CONSTRUCTION
Suffix:		Rpr/Rplc Cost:	\$10,000.00	Carrier Address:	304 FERRY STREET
Gender:	Male	Ext of Damage:	5 - SEVERE, VEHICLE TOTALED	Carrier City:	CUSHING
Age:	78	First Event:	33 - VEHICLE IN TRAFFIC	Carrier State:	IA
CDL:	YES	Second Event:		Carrier Zip:	51018
License State:	IA	Third Event:		Cargo Body Type:	01 - NOT APPLICABLE
License Class:	A	Fourth Event:		Number of Axles:	5
License Endorsmnt:		Most Harmful Event:	33 - VEHICLE IN TRAFFIC	HazMat Involvement:	02 - NO
License Restrictions:		Abg Switch Stat:		HazMat Placard:	
Speed Limit:	55	Abg Deploy:	01 - NOT APPLICABLE	Placard #:	
Seating Position:	01 - 1ST ROW: LEFT SIDE/MOTORCYCLE DRIVER	Trapped:	1 - NOT TRAPPED/APPLICABLE	HazMat Released?:	
Driver Condition:	01 - APPARENTLY NORMAL	Ejection:	1 - NOT APPLICABLE	Converter Dolly:	
Alcohol Test Given:	NO	Ejection Path:	01 - NOT EJECTED/NOT APPLICABLE	GVWR:	3 - 26,001 LBS OR MORE
Drug Test Given:	1 - NONE	Occpnt Protect:	03 - SHOULDER AND LAP BELT USED	Cit Chrg Code 1:	
Total Occupants:	1	Source of Trans:	01 - NOT TRANSPORTED	Citation Charge 1:	
Vehicle Year:	2001	Died at Scene:	01 - NOT APPLICABLE	Cit Chrg Code 2:	
Vehicle Make:	STLG			Citation Charge 2:	
Vehicle Model:	LT9500			Citation Charge 3:	
Vehicle Style:	DS			Citation Charge 4:	
Vehicle Color:	BLACK - BLK				
Vehicle Config:	12 - TRUCK TRACTOR (BOBTAIL)				
Vehicle Defect:	01 - NONE				
Vehicle Action:	01 - MOVEMENT ESSENTIALLY STRAIGHT				
Tow:	3 - DISABLED - OFFICER ARRANGED				
Tow #:					
Initial Trvl Dir:	02 - EAST				
Vision Obscured:	01 - NOT OBSCURED				

Unit 002

Driver Name - Last: HEDBERG	Bus Use:	Transported to: CHEROKEE REGIONAL MEDICAL
First: EMILY		Transported by: HOLSTEIN AMB
Middle: MAE	Drvr Distractions: 02 - NOT DISTRACTED	Special Veh Func: 01 - NO SPECIAL FUNCTION
City: HOLSTEIN	Traffic Controls: 04 - STOP SIGNS	Emergency Status: 01 - NOT APPLICABLE
State: IA	Point of Init Impact: 04 - REAR PASSENGER SIDE	Cont. Circum., Drvr: 40 - FTYROW: FROM STOP SIGN
Zip: 51025	Most Damaged Area: 04 - REAR PASSENGER SIDE	
Suffix:	Undrrid/Ovrid: 1 - NONE	Carrier Name:
Gender: Female	Rpr/Rplc Cost: \$5,000.00	Carrier Address:
Age: 20	Ext of Damage: 5 - SEVERE, VEHICLE TOTALED	Carrier City:
CDL: NO	First Event: 33 - VEHICLE IN TRAFFIC	Carrier State:
License State: IA	Second Event:	Carrier Zip:
License Class: C	Third Event:	Cargo Body Type: 01 - NOT APPLICABLE
License Endorsmnt: B	Fourth Event:	Number of Axles:
License Restrictions: B	Most Harmful Event: 33 - VEHICLE IN TRAFFIC	HazMat Involvement:
Speed Limit: 55	Abg Switch Stat:	HazMat Placard:
Seating Position: 01 - 1ST ROW: LEFT SIDE/MOTORCYCLE DRIVER	Abg Deploy: 03 - NOT DEPLOYED	Placard #:
Driver Condition: 01 - APPARENTLY NORMAL	Trapped: 1 - NOT TRAPPED/APPLICABLE	HazMat Released?:
Alcohol Test Given: NO	Ejection: 2 - NOT EJECTED	Converter Dolly:
Drug Test Given: 1 - NONE	Ejection Path: 01 - NOT EJECTED/NOT APPLICABLE	GVWR:
Total Occupants: 1	Occpnt Protect: 02 - NONE USED	Cit Chrg Code 1: 321.321
Vehicle Year: 2009	Source of Trans: 03 - EMS GROUND	Citation Charge 1: FAIL TO YIELD UPON ENTERING THROUGH HIGHWA
Vehicle Make: FORD - FORD	Died at Scene: 01 - NOT APPLICABLE	Cit Chrg Code 2: 321.445
Vehicle Model: F15		Citation Charge 2: FAILURE TO WEAR SEATBELT
Vehicle Style: PK		Citation Charge 3:
Vehicle Color: BLACK - BLK		Citation Charge 4:
Vehicle Config: 02 - FOUR-TIRE TRUCK (PICK-UP)		
Vehicle Defect: 01 - NONE		
Vehicle Action: 01 - MOVEMENT ESSENTIALLY STRAIGHT		
Tow: 3 - DISABLED - OFFICER ARRANGED		
Tow #:		
Initial Trvl Dir: 03 - SOUTH		
Vision Obscured: 08 - MOVING VEHICLE(S)		

Accident Environment

First Harmful Event Loc: 01 - ON ROADWAY	Roadway Characteristics
Manner of Crash/Collision: 05 - BROADSIDE (FRONT TO SIDE)	Environment: 01 - NONE APPARENT
Light Conditions: 1 - DAYLIGHT	Roadway: 01 - NONE APPARENT
Weather Conditions: 01 - CLEAR	Type of Road Junc/Feat: 07 - CROSSOVER-RELATED
Surface Conditions: 01 - DRY	FRA No.:
Workzone Related: NO	Horizontal Alignment:
Activity:	Vertical Alignment:
Location:	First Harmful Evt of Crash: 33 - VEHICLE IN TRAFFIC
Type:	
Workers Present:	

Narrative

UNIT 1 WAS TRAVELING EASTBOUND ON HWY 20. UNIT 2 WAS AT THE STOP SIGN GOING SOUTH ACROSS HWY 20. UNIT 2 DID NOT SEE UNIT 1 AND PULLED OUT FROM THE STOP SIGN AND WAS HIT BY UNIT 1. UNIT 2 WAS HIT, SPUN AROUND AND HIT THE TRAILER OF UNIT 1 AND THEN WENT ACROSS A TRIANGLE MEDIAN AND CAME TO A REST IN A TURNING LANE OFF OF HWY 20 AND ONTO HWY 59. UNIT 2 FAILED TO YIELD TO THE RIGHT OF WAY.

Diagram

