

INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Case Number: **18-7027**
Date of Acc: **09/30/18**
Time of Acc: **08:30** Hrs.
Name of Agency: **IDA COUNTY SHERIFF'S OFFICE**

Officer: **ANDERSON FRED**

Badge #: **47-2**
Report Date: **09/30/2018**
Officer Notified: **08:40** Hrs.
Officer Arrived: **08:55** Hrs.
Scene Investigated: **YES**

Report to All Drivers:
Legal Intervention: **NO**
Private Property: **NO**
County: **IDA - 47**
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: **00275929**
Y-Coordinate: **04714298**
Location Literal: **STATE 31/IOWA 31**
Description:

Unit 001

Driver Name - Last: **OKUBAY**
First: **FINOT**
Middle: **SOLOMON**
City: **STORM LAKE**
State: **IA**
Zip: **50588-0000**
Suffix:
Gender: **Male**
Age: **37**
CDL:
License State: **IA**
License Class: **C**
License Endorsmnt:
License Restrictions:
Speed Limit:
Seating Position:

Driver Condition:
Alcohol Test Given: **NO**
Drug Test Given: **1 - NONE**
Total Occupants: **1**
Vehicle Year: **2008**
Vehicle Make: **TOYOTA - TOYT**
Vehicle Model: **RAV**
Vehicle Style: **SW**
Vehicle Color: **RED - RED**
Vehicle Config: **03 - SPORT UTILITY VEHICLE**

Vehicle Defect:

Vehicle Action:

Tow: **2 - DISABLED - PRIVATELY ARRANGED**

Tow #:
Initial Trvl Dir:
Vision Obscured:

Bus Use:
Dvr Distractions: **02 - NOT DISTRACTED**
Traffic Controls:
Point of Init Impact:
Most Damaged Area:
Undrrid/Ovrid:
Rpr/Rplc Cost: **\$2,500.00**
Ext of Damage:
First Event:
Second Event:
Third Event:
Fourth Event:
Most Harmful Event:
Abg Switch Stat:
Abg Deploy:
Trapped:
Ejection:
Ejection Path:
Occpnt Protect:

Source of Trans: **01 - NOT TRANSPORTED**
Died at Scene: **01 - NOT APPLICABLE**

Transported to:
Transported by:
Special Veh Func:
Emergency Status:
Cont. Circum., Dvr: **88 - NO IMPROPER ACTION**

Carrier Name:
Carrier Address:
Carrier City:
Carrier State:
Carrier Zip:
Cargo Body Type: **01 - NOT APPLICABLE**

Number of Axles:
HazMat Involvement:
HazMat Placard:
Placard #:
HazMat Released?:
Converter Dolly:
GVWR:
Cit Chrg Code 1:
Citation Charge 1:

Cit Chrg Code 2:
Citation Charge 2:

Citation Charge 3:

Citation Charge 4:

Accident Environment

First Harmful Event Loc:
Manner of Crash/Collision:
Light Conditions:
Weather Conditions:

Surface Conditions:

Workzone Related:
Activity:
Location:
Type:
Workers Present:

Roadway Characteristics
Environment:
Roadway:

Type of Road Junc/Feat:

FRA No.:
Horizontal Alignment:
Vertical Alignment:

First Harmful Evt of Crash: **31 - ANIMAL**

Narrative

Unit #1 was northbound on Hwy 31. Two deer entered the roadway from the west heading east. Unit #1 collided with one of the deer causing front end damage, disabling the vehicle. The driver of unit #1 arranged for the vehicle to be towed.

Diagram

