

INFORMATION FROM THE INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Case Number: **19-161**
 Date of Acc: **01/08/19**
 Time of Acc: **13:56** Hrs.
 Name of Agency: **IDA COUNTY SHERIFF'S OFFICE**
 Officer: **ANDERSON FRED**
 Badge #: **47-2**
 Report Date: **01/08/2019**
 Officer Notified: **14:00** Hrs.
 Officer Arrived: **14:03** Hrs.
 Scene Investigated: **YES**

Report to All Drivers:
 Legal Intervention: **NO**
 Private Property: **YES**
 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: **00297438**
 Y-Coordinate: **04690371**
 Location Literal: **2ND ST**
 Description:

Unit 001

Driver Name - Last: BAKER	Bus Use:	Transported to: HORN MEMORIAL
First: JEANINE		
Middle: ANN	Drvtr Distractions: 02 - NOT DISTRACTED	Transported by: SELF
City: ODEBOLT		
State: IA	Traffic Controls: 01 - NO CONTROLS PRESENT	Special Veh Func: 01 - NO SPECIAL FUNCTION
Zip: 51458		
Suffix:	Point of Init Impact: 12 - FRONT MIDDLE	Emergency Status: 01 - NOT APPLICABLE
Gender: Female	Most Damaged Area: 12 - FRONT MIDDLE	Cont. Circum., Drvr: 06 - LOST CONTROL
Age: 54	Undrdr/Ovrid: 1 - NONE	
CDL: NO	Rpr/Rplc Cost: \$6,000.00	
License State: IA	Ext of Damage: 4 - DISABLING DAMAGE	
License Class: C	First Event: 06 - EVASIVE ACTION (SWERVE, PANIC BRAKING, AVOIDANCE)	Carrier Name:
License Endorsmnt: B	Second Event: 65 - BUILDING	Carrier Address:
License Restrictions: B	Third Event:	Carrier City:
Speed Limit: 15	Fourth Event:	Carrier State:
Seating Position: 01 - 1ST ROW: LEFT SIDE/MOTORCYCLE DRIVER	Most Harmful Event: 65 - BUILDING	Carrier Zip:
Driver Condition: 01 - APPARENTLY NORMAL	Abg Switch Stat:	Cargo Body Type: 01 - NOT APPLICABLE
Alcohol Test Given: NO	Abg Deploy: 04 - DEPLOYED FRONT OF PERSON	Number of Axles:
Drug Test Given: 1 - NONE	Trapped: 1 - NOT TRAPPED/APPLICABLE	HazMat Involvement:
Total Occupants: 1	Ejection: 2 - NOT EJECTED	HazMat Placard:
Vehicle Year: 2010	Ejection Path: 01 - NOT EJECTED/NOT APPLICABLE	Placard #:
Vehicle Make: CHEVROLET - CHEV	Occpnt Protect: 03 - SHOULDER AND LAP BELT USED	HazMat Released?:
Vehicle Model: SLV	Source of Trans: 01 - NOT TRANSPORTED	Converter Dolly:
Vehicle Style: PK	Died at Scene: 01 - NOT APPLICABLE	GVWR:
Vehicle Color: SILVER - SIL		Cit Chrg Code 1:
Vehicle Config: 02 - FOUR-TIRE TRUCK (PICK-UP)		Citation Charge 1:
Vehicle Defect: 01 - NONE		Cit Chrg Code 2:
Vehicle Action: 18 - ENTERING A PARKED POSITION		Citation Charge 2:
Tow: 2 - DISABLED - PRIVATELY ARRANGED		Citation Charge 3:
Tow #: 04 - WEST		Citation Charge 4:
Initial Trvl Dir: 01 - NOT OBSCURED		
Vision Obscured:		

Property Damage 001

Object Damaged: BUILDING	Company Owner Name: HORN MEMORIAL HOSPITAL
Estimate of Damage: \$500.00	City: IDA GROVE
Owner's Name - Last:	State: IA
First:	Zip Code: 51445
Middle:	
Suffix:	

Accident Environment

First Harmful Event Loc: 07 - IN PARKING LANE/ZONE	Roadway Characteristics
Manner of Crash/Collision: 01 - NON-COLLISION (SINGLE VEHICLE)	Environment: 01 - NONE APPARENT
Light Conditions: 1 - DAYLIGHT	Roadway: 01 - NONE APPARENT
Weather Conditions: 01 - CLEAR	
Surface Conditions: 01 - DRY	Type of Road Junc/Feat: 01 - NON-JUNCTION/NO SPECIAL FEATURE
	FRA No.:
Workzone Related: NO	Horizontal Alignment:
Activity:	Vertical Alignment:
Location:	First Harmful Evt of Crash: 65 - BUILDING
Type:	
Workers Present:	

Narrative

Unit #1 was entering a parking space at Horn Memorial Hospital. The driver stated that her foot was caught on the brake and gas pedal when she was attempting to stop. This caused the vehicle to accelerate over the curb and struck the corner of the building causing disabling damage to the vehicle and minor damage to the building.

Diagram

