

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

Case Number: <b>SO11002779</b>	Legal Intervention: <b>NO</b>	At Intersection with: <b>"N/A"</b>
Date of Acc: <b>12/03/11</b>	Private Property: <b>NO</b>	Div HWay Trvl Dir: <b>"N/A"</b>
Time of Acc: <b>16:15 Hrs.</b>	County: <b>PLYMOUTH - 75</b>	Distance 1: <b>"N/A"</b>
Name of Agency: <b>PLYMOUTH COUNTY SHERIFFS OFF</b>	Acc Loc City: <b>"N/A"</b>	Direction 1: <b>"N/A"</b>
Officer: <b>TEBRINK, J</b>	Acc Dir From City: <b>"N/A"</b>	Distance 2: <b>"N/A"</b>
Badge #: <b>75-3</b>	Closest City: <b>"N/A"</b>	Direction 2: <b>"N/A"</b>
Report Date: <b>12/03/2011</b>	Miles From City: <b>"N/A"</b>	X-Coordinate: <b>00243239</b>
Officer Notified: <b>16:15 Hrs.</b>	Road, Street, HWay: <b>"N/A"</b>	Y-Coordinate: <b>04743790</b>
Officer Arrived: <b>16:18 Hrs.</b>	Definable Location: <b>"N/A"</b>	Location Literal: <b>IOWA 0003 / IOWA 3</b>
Scene Investigated: <b>YES</b>	Milepost Number: <b>"N/A"</b>	Description: <b>MEASURING 0.25 MILES WEST FROM MARBLE AVE AND IOWA 0003 / IOWA 3</b>

**Unit 001**

Driver Name - Last: <b>ROBE</b>	Towing: <b>YES</b>	Injury Status: <b>3 - NON-INCAPACITATING</b>
First: <b>MEGAN</b>	Initial Trvl Dir: <b>2 - EAST</b>	Transported to: <b>FLOYD VALLEY HOSPITAL</b>
Middle: <b>ANN</b>	Vision Obscured: <b>01 - NOT OBSCURED</b>	Transported by: <b>LEMARS AMBULANCE</b>
Address: <b>1202 5TH AVE</b>	Traffic Controls: <b>01 - NO CONTROLS PRESENT</b>	Emergency Veh: <b>1 - NOT APPLICABLE</b>
City: <b>ALTON</b>	Point of Init Impact: <b>01 - FRONT</b>	Emergency Status: <b>3 - NOT APPLICABLE</b>
State: <b>IA</b>	Most Damaged Area: <b>01 - FRONT</b>	Cont. Circum., Drvr: <b>27 - OTHER IMPROPER ACTION</b>
Zip: <b>51003</b>	Undrld/Ovrid: <b>1 - NONE</b>	Carrier Name:
Suffix:	Rpr/Rplc Cost: <b>\$17,000.00</b>	Carrier Address:
Gender: <b>FEMALE</b>	Ext of Damage: <b>5 - SEVERE, VEHICLE TOTALED</b>	Carrier City:
Age: <b>27</b>	First Event: <b>21 - VEHICLE IN TRAFFIC</b>	Carrier State:
License State: <b>IA</b>	Second Event: <b>01 - RAN OFF ROAD, RIGHT</b>	Carrier Zip:
License Class: <b>C</b>	Third Event:	Cargo Body Type: <b>01 - NOT APPLICABLE</b>
License Endorsmnt: <b>NONE</b>	Fourth Event:	Number of Axles:
License Restrictions: <b>NONE</b>	Most Harmful Event: <b>21 - VEHICLE IN TRAFFIC</b>	HazMat Released?:
Speed Limit: <b>55</b>	Abg Switch Stat: <b>3 - NO ON/OFF SWITCH PRESENT</b>	GVWR:
Seating Position: <b>01 - FRONT: LEFT SIDE / MOTORCYCLE DRIVER</b>	Abg Deploy: <b>1 - DEPLOYED FRONT OF PERSON</b>	Placard #:
Driver Condition: <b>1 - APPARENTLY NORMAL</b>	Trapped: <b>1 - NOT TRAPPED</b>	Cit Chrg Code 1: <b>321J.21</b>
Alcohol Test Given: <b>NO</b>	Ejection: <b>1 - NOT EJECTED</b>	Citation Charge 1: <b>DRIVING WHILE LICENSE DENIED OR REVOKED</b>
Drug Test Given: <b>NO</b>	Ejection Path: <b>1 - NOT EJECTED/NOT APPLICABLE</b>	Cit Chrg Code 2:
Total Occupants: <b>01</b>	Occpnt Protect: <b>9 - UNKNOWN</b>	Citation Charge 2:
Vehicle Year: <b>2008</b>		Cit Chrg Code 3:
Vehicle Make: <b>HYUNDAI - HYUN</b>		Citation Charge 3:
Vehicle Model: <b>AZERA</b>		Cit Chrg Code 4:
Vehicle Style: <b>4D</b>		Citation Charge 4:
Vehicle Config: <b>01 - PASSENGER CAR</b>		
Vehicle Defect: <b>01 - NONE</b>		
Vehicle Action: <b>01 - MOVEMENT ESSENTIALLY STRAIGHT</b>		

**Unit 002**

Driver Name - Last: <b>BRITCHER</b>	Towing: <b>NO</b>	Injury Status: <b>5 - UNINJURED</b>
First: <b>HEATHER</b>	Initial Trvl Dir: <b>4 - WEST</b>	Transported to:
Middle: <b>MARIE</b>	Vision Obscured: <b>01 - NOT OBSCURED</b>	Transported by:
Address: <b>32884 C38</b>	Traffic Controls: <b>01 - NO CONTROLS PRESENT</b>	Emergency Veh: <b>1 - NOT APPLICABLE</b>
City: <b>LEMARS</b>	Point of Init Impact: <b>01 - FRONT</b>	Emergency Status: <b>3 - NOT APPLICABLE</b>
State: <b>IA</b>	Most Damaged Area: <b>01 - FRONT</b>	Cont. Circum., Drvr: <b>04 - DRIVING TOO FAST FOR CONDITIONS, 08 - LOST CONTROL</b>
Zip: <b>51031</b>	Undrld/Ovrid: <b>1 - NONE</b>	Carrier Name:
Suffix:	Rpr/Rplc Cost: <b>\$9,000.00</b>	Carrier Address:
Gender: <b>FEMALE</b>	Ext of Damage: <b>5 - SEVERE, VEHICLE TOTALED</b>	Carrier City:
Age: <b>23</b>	First Event: <b>21 - VEHICLE IN TRAFFIC</b>	Carrier State:
License State: <b>IA</b>	Second Event:	Carrier Zip:
License Class: <b>C</b>	Third Event:	Cargo Body Type: <b>01 - NOT APPLICABLE</b>
License Endorsmnt: <b>NONE</b>	Fourth Event:	Number of Axles:
License Restrictions: <b>NONE</b>	Most Harmful Event: <b>21 - VEHICLE IN TRAFFIC</b>	HazMat Released?:
Speed Limit: <b>55</b>	Abg Switch Stat: <b>3 - NO ON/OFF SWITCH PRESENT</b>	GVWR:
Seating Position: <b>01 - FRONT: LEFT SIDE / MOTORCYCLE DRIVER</b>	Abg Deploy: <b>1 - DEPLOYED FRONT OF PERSON</b>	Placard #:
Driver Condition: <b>1 - APPARENTLY NORMAL</b>	Trapped: <b>1 - NOT TRAPPED</b>	Cit Chrg Code 1: <b>321.288</b>
Alcohol Test Given: <b>NO</b>	Ejection: <b>1 - NOT EJECTED</b>	Citation Charge 1: <b>FAILURE TO MAINTAIN CONTROL</b>
Drug Test Given: <b>NO</b>	Ejection Path: <b>1 - NOT EJECTED/NOT APPLICABLE</b>	Cit Chrg Code 2: <b>321.20B</b>
Total Occupants: <b>01</b>	Occpnt Protect: <b>9 - UNKNOWN</b>	Citation Charge 2: <b>FINANCIAL LIABILITY ACCIDENT</b>
Vehicle Year: <b>2002</b>		Cit Chrg Code 3:
Vehicle Make: <b>CHEVROLET - CHEV</b>		Citation Charge 3:
Vehicle Model: <b>TRAILBLAZER</b>		Cit Chrg Code 4:
Vehicle Style: <b>EX</b>		Citation Charge 4:
Vehicle Config: <b>04 - SPORT UTILITY VEHICLE</b>		
Vehicle Defect: <b>01 - NONE</b>		
Vehicle Action: <b>01 - MOVEMENT ESSENTIALLY STRAIGHT</b>		