



STORY COUNTY SHERIFF'S OFFICE

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Paul H. Fitzgerald, Sheriff

BULLETIN FROM 09/11/2013 00:00:00 TO 09/12/2013 23:59:59

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Case Types: (LW) Incident, (AR) Arrest, (FC) Field Contact, (TC) Citation/Summons, (OR) Ordinance, (TA) Accident, (DB) Miscellaneous Events

Table with 4 columns: Case #, Description, (A)ttempted, (C)ompleted, (F)elony, (M)isdemeanor, and Officer. Contains 10 rows of case details including names like Jason Alan Jennings, Dan Eugene Render, and Joshua Alan Wycoff.

R\_Bull1 Additional Criteria:



You May anonymously report criminal activity to STORY COUNTY CRIMESTOPPERS by calling (515)382-7577, texting "STORYCOUNTY", followed by your tip to 274637 (CRIMES) or by going online to http://www.storycountycs.com. Rewards up to \$1,000 may be given for information leading to arrests.

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

Case Number:	13-001083	Legal Intervention:	NO	At Intersection with:	"N/A"
Date of Acc:	09/11/13	Private Property:	NO	Div HWay Trvl Dir:	"N/A"
Time of Acc:	07:22 Hrs.	County:	STORY - 85	Distance 1:	"N/A"
Name of Agency:	STORY COUNTY SHERIFF'S OFFICE	Acc Loc City:		Direction 1:	"N/A"
Officer:	TICKLE, BRIAN	Acc Dir From City:	"N/A"	Distance 2:	"N/A"
Badge #:	85-40	Closest City:	"N/A"	Direction 2:	"N/A"
Report Date:	09/11/2013	Miles From City:	"N/A"	X-Coordinate:	00442125
Officer Notified:	07:22 Hrs.	Road, Street, HWay:	"N/A"	Y-Coordinate:	04642918
Officer Arrived:	07:29 Hrs.	Definable Location:	"N/A"	Location Literal:	500TH AVE AND 290TH ST
Scene Investigated:	YES	Milepost Number:	"N/A"	Description:	

**Unit 001**

Driver Name - Last:	KIRKPATRICK	Towing:	YES	Injury Status:	5 - UNINJURED
First:	CLAY	Initial Trvl Dir:	2 - EAST	Transported to:	
Middle:	ALAN	Vision Obscured:	02 - TREES/CROPS	Transported by:	
Address:	1891 ROSE ROAD	Traffic Controls:	01 - NO CONTROLS PRESENT	Emergency Veh:	1 - NOT APPLICABLE
City:	MADRID	Point of Init Impact:	01 - FRONT	Emergency Status:	3 - NOT APPLICABLE
State:	IA	Most Damaged Area:	01 - FRONT	Cont. Circum., Drvr:	20 - FTYROW: AT UNCONTROLLED INTERSECTION
Zip:	50156	Undridd/Ovrid:	1 - NONE	Carrier Name:	
Suffix:		Rpr/Rplc Cost:	\$10,000.00	Carrier Address:	
Gender:	Male	Ext of Damage:	5 - SEVERE, VEHICLE TOTALED	Carrier City:	
Age:	17	First Event:	22 - VEHICLE IN/FROM OTHER ROADWAY	Carrier State:	
License State:	IA	Second Event:	11 - OVERTURN/ROLLOVER	Carrier Zip:	
License Class:	C	Third Event:		Cargo Body Type:	01 - NOT APPLICABLE
License Endorsmnt:	NONE	Fourth Event:		Number of Axles:	
License Restrictions:	Y	Most Harmful Event:	22 - VEHICLE IN/FROM OTHER ROADWAY	HazMat Released?:	
Speed Limit:	55	Abg Switch Stat:	9 - UNKNOWN	GVWR:	
Seating Position:	01 - FRONT: LEFT SIDE / MOTORCYCLE DRIVER	Abg Deploy:	1 - DEPLOYED FRONT OF PERSON	Placard #:	
Driver Condition:	1	Trapped:	1 - NOT TRAPPED	Cit Chrg Code 1:	321.319
Alcohol Test Given:	NO	Ejection:	1 - NOT EJECTED	Citation Charge 1:	FAIL TO YIELD RIGHT OF WAY
Drug Test Given:	NO	Ejection Path:	1 - NOT EJECTED/NOT APPLICABLE	Cit Chrg Code 2:	
Total Occupants:	4	Occupant Protect:	2 - SHOULDER AND LAP BELT USED	Citation Charge 2:	
Vehicle Year:	2004			Cit Chrg Code 3:	
Vehicle Make:	CHEVROLET - CHEV			Citation Charge 3:	
Vehicle Model:	SILVERADO			Cit Chrg Code 4:	
Vehicle Style:	PK			Citation Charge 4:	
Vehicle Config:	02 - FOUR-TIRE LIGHT TRUCK (PICK-UP, PANEL)				
Vehicle Defect:	01 - NONE				
Vehicle Action:	01 - MOVEMENT ESSENTIALLY STRAIGHT				

**Unit 002**

Driver Name - Last:	WYCOFF	Towing:	YES	Injury Status:	4 - POSSIBLE
First:	JOSHUA	Initial Trvl Dir:	1 - NORTH	Transported to:	WART GREENLET MEDICAL CNTR
Middle:	ALAN	Vision Obscured:	02 - TREES/CROPS	Transported by:	HUXLEY AMBULANCE
Address:	1145 K AVE	Traffic Controls:	01 - NO CONTROLS PRESENT	Emergency Veh:	1 - NOT APPLICABLE
City:	NEVADA	Point of Init Impact:	07 - LEFT SIDE	Emergency Status:	3 - NOT APPLICABLE
State:	IA	Most Damaged Area:	07 - LEFT SIDE	Cont. Circum., Drvr:	28 - NO IMPROPER ACTION
Zip:	50201	Undridd/Ovrid:	1 - NONE	Carrier Name:	
Suffix:		Rpr/Rplc Cost:	\$4,000.00	Carrier Address:	
Gender:	Male	Ext of Damage:	5 - SEVERE, VEHICLE TOTALED	Carrier City:	
Age:	31	First Event:	22 - VEHICLE IN/FROM OTHER ROADWAY	Carrier State:	
License State:	IA	Second Event:	11 - OVERTURN/ROLLOVER	Carrier Zip:	
License Class:	C	Third Event:		Cargo Body Type:	01 - NOT APPLICABLE
License Endorsmnt:	NONE	Fourth Event:		Number of Axles:	
License Restrictions:	B	Most Harmful Event:	22 - VEHICLE IN/FROM OTHER ROADWAY	HazMat Released?:	
Speed Limit:	55	Abg Switch Stat:	9 - UNKNOWN	GVWR:	
Seating Position:	01 - FRONT: LEFT SIDE / MOTORCYCLE DRIVER	Abg Deploy:	1 - DEPLOYED FRONT OF PERSON	Placard #:	
Driver Condition:	1	Trapped:	1 - NOT TRAPPED	Cit Chrg Code 1:	321.20B
Alcohol Test Given:	NO	Ejection:	1 - NOT EJECTED	Citation Charge 1:	NO INSURANCE (ACCIDENT RELATED)
Drug Test Given:	NO	Ejection Path:	1 - NOT EJECTED/NOT APPLICABLE	Cit Chrg Code 2:	
Total Occupants:	1	Occupant Protect:	2 - SHOULDER AND LAP BELT USED	Citation Charge 2:	
Vehicle Year:	1998			Cit Chrg Code 3:	
Vehicle Make:	FORD - FORD			Citation Charge 3:	
Vehicle Model:	RANGER			Cit Chrg Code 4:	
Vehicle Style:	PK			Citation Charge 4:	
Vehicle Config:	02 - FOUR-TIRE LIGHT TRUCK (PICK-UP, PANEL)				
Vehicle Defect:	01 - NONE				
Vehicle Action:	01 - MOVEMENT ESSENTIALLY STRAIGHT				

### Property Damage

Object Damaged:	<b>UTILITY BOX AND WIRES</b>	Company Owner Name:	<b>ALLIANT ENERGY</b>
Estimate of Damage:	<b>\$500.00</b>	Street or RFD:	
Owner's Name - Last:		City:	
First:		State:	<b>IA</b>
Middle:		Zip Code:	
Suffix:			

### Accident Environment

First Harmful Event Loc:	<b>1 - ON ROADWAY</b>	Roadway Characteristics	
Manner of Crash/Collision:	<b>5 - BROADSIDE</b>	Environment:	<b>1 - NONE APPARENT</b>
Light Conditions:	<b>1 - DAYLIGHT</b>	Roadway:	<b>01 - NONE APPARENT</b>
Weather Conditions:	<b>02 - PARTLY CLOUDY</b>	Type of Road Junc/Feat:	<b>11 - FOUR-WAY INTERSECTION</b>
Surface Conditions:	<b>6 - SAND, MUD, DIRT, OIL, GRAVEL</b>	Workzone Related:	<b>NO</b>
First Harmful Evt of Crash:	<b>22 - VEHICLE IN/FROM OTHER ROADWAY</b>	Location:	
		Type:	
		Workers Present:	

### Narrative

Vehicle #1 was eastbound on 290th and Vehicle #2 was northbound on 500th. Vehicle #1 failed to yield the right of way to vehicle #2 and struck vehicle #2 in the left side. Both vehicles rolled as a result of the impact and landed in the northeast ditch of the intersection.

The intersection is an uncontrolled intersection.

An Alliant Energy box and wires were damaged as a result of the accident. Alliant Energy was contacted and responded to the scene.

Driver #1 was at fault and cited for failure to yield.

Driver #2 was not at fault, however, was cited for no insurance.

Both vehicles were towed by Bud's Towing of Huxley.

Driver #2 was transported to Mary Greeley Medical Center by Huxley Ambulance for possible injuries.

### Diagram

