



Crash Information

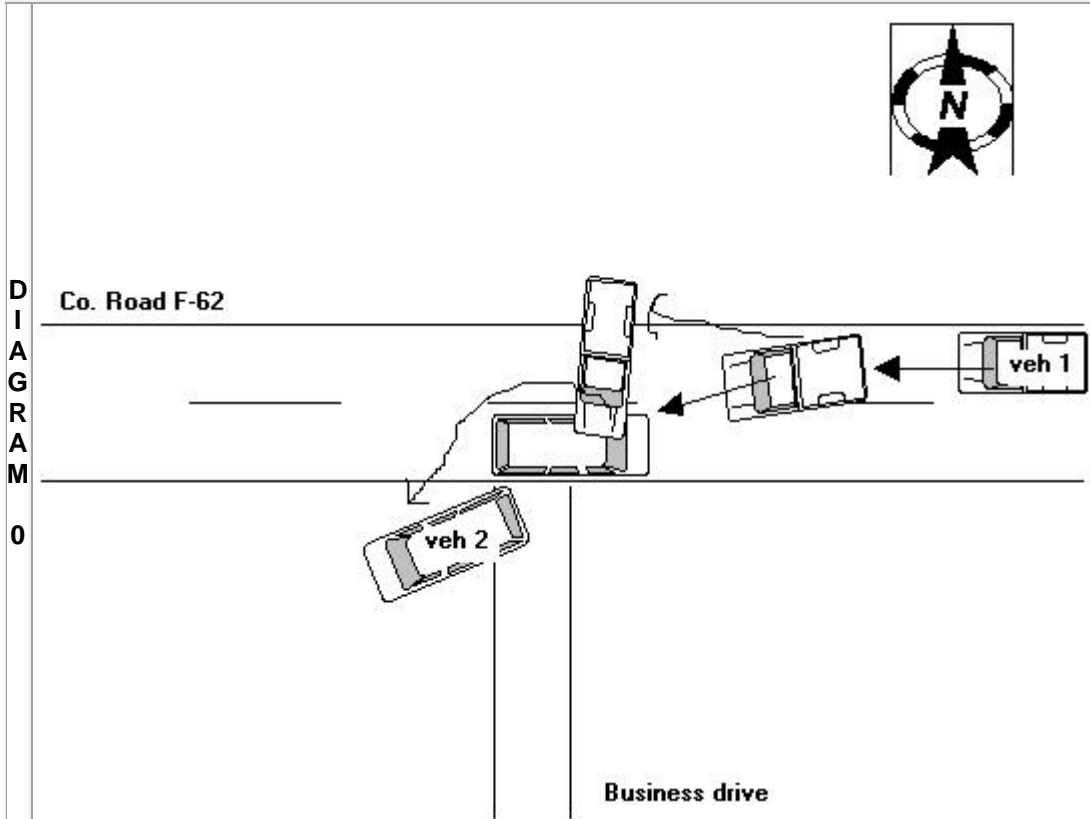
L O C A T I O N	Date of Accident 3/24/2011	Time of Accident 06:14 AM	County Jasper - 50	Accident occurred within corporate limits of (city)	Law Enforcement Case Number: 2005018894		
	Literal Description F062 / HWY F-62 E				Legal Intervention? No	Private Property? No	
					X-Coordinate: 509665.3		
					Y-Coordinate 4603261.		
U N I T	Driver's Name - Last WHITSON		First JEREMY		Middle SCOTT		Suffix
	City NEWTON		State IA - Iowa, US			Zip 50208	
	Driver's Age 20				Citation Charge Code 1	Citation Charge 1	
	Gender Male	State IA - Iowa, US	Class C - Non-commercial vehicle or commercial Veh w/26000 GVWR or less & either 16 Pass Design or Hazmat	Endorsements None	Restrictions None	Citation Charge Code 2	Citation Charge 2
	Alcohol Test Given? 1 - None		Drug Test Given? 1 - None		Citation Charge Code 3	Citation Charge 3	
					Citation Charge Code 4	Citation Charge 4	
	Seating Position 01 - Front: Left Side / Motorcycle Driver	Injury Status 3 - Non-incapacitating	Occupant Protection 2 - Shoulder and lap belt used	Airbag Deployment 1 - Deployed front of person	Airbag Switch Status 1 - Switch in ON position	Ejection 1 - Not ejected	Ejection Path 3 - Extricated by mechanical means
	Transported to: MERCY HOSPITAL				Transported by: AIRLIFE		
	Insurance Co. Name						

Year 1998		Make General Motors - GMC		Model SIERRA		Style PU		Approximate Cost to Repair or Replace 8000	
Initial Travel Direction 4 - West	Vehicle Action 01 - Movement essentially straight	Speed Limit 55	Point of Initial Impact 01 - Front	Most Damaged Area 01 - Front	Extent of Damage 5 - Severe, vehicle totaled	Override/Override 1 - None			
Total Occupants 01	Traffic Controls 01 - No controls present	Vehicle Config. 02 - Four-tire light truck (pick-up, panel)	Cargo Body Type 01 - Not applicable	Vehicle Defect 01 - None	Driver Condition 5 - Asleep, fainted, d, fatigue d, etc	Vision Obscured 01 - Not obscure d	Contributing Circumstances, Driver (up to 2)		
SEQUENCE OF EVENTS			First Event 04 - Crossed centerline/median	Second Event 21 - Vehicle in traffic	Third Event	Fourth Event	Most Harmful Event (by vehicle) 21 - Vehicle in traffic		
Emergency Vehicle Type 1 - Not applicable					Emergency Status 3 - Not Applicable				
Carrier Name			City		State		Zip		
Number of Axles			Gross Vehicle Weight Rating		Placard #		Hazardous Materials Released?		
Driver's Name - Last HOPKINS			First SHERYL		Middle KAY		Suffix		
City COLFAX			State IA - Iowa, US			Zip 50054			
Driver's Age 54				Citation Charge Code 1		Citation Charge 1			
Gender Female	State IA - Iowa, US	Class C - Non-commercial vehicle or commercial Veh w/26000 GVWR or less & either 16 Pass Design or Hazmat	Endorsements None	Restrictions B - Cor Lenses	Citation Charge Code 2		Citation Charge 2		
Alcohol Test Given? 1 - None			Drug Test Given? 1 - None		Citation Charge Code 3		Citation Charge 3		
					Citation Charge Code 4		Citation Charge 4		
Seating Position 01 - Front: Left Side / Motorcycle Driver	Injury Status 1 - Fatal	Occupant Protection 2 - Shoulder and lap belt used	Airbag Deployment 1 - Deployed front of person	Airbag Switch Status 1 - Switch in ON position	Ejection 1 - Not ejected	Ejection Path	Trapped 2 - Freed by non-mechanical means		
Transported to: COLFAX FUNERAL HOME				Transported by:					
Insurance Co. Name									
Year 2007		Make Ford - FORD		Model XPL		Style MV		Approximate Cost to Repair or Replace	

UNIT 2

Initial Travel Direction 2 - East	Vehicle Action 01 - Movement essentially straight	Speed Limit 55	Point of Initial Impact 01 - Front	Most Damaged Area 01 - Front	Extent of Damage 5 - Severe, vehicle totaled	Underride/Override 1 - None	20000
Total Occupants 01	Traffic Controls 01 - No controls present	Vehicle Config. 04 - Sport utility vehicle	Cargo Body Type 01 - Not applicable	Vehicle Defect 01 - None	Driver Condition 1 - Apparently normal	Vision Obscured 01 - Not obscured	Contributing Circumstances, Driver (up to 2)
SEQUENCE OF EVENTS			First Event 21 - Vehicle in traffic	Second Event	Third Event	Fourth Event	Most Harmful Event (by vehicle) 21 - Vehicle in traffic
Emergency Vehicle Type 1 - Not applicable					Emergency Status 3 - Not Applicable		
Carrier Name			City		State		Zip
Number of Axles			Gross Vehicle Weight Rating		Placard #		Hazardous Materials Released?

ACCIDENT ENVIRONMENT		ROADWAY CHARACTERISTICS Major Contributing Circumstances:	WORKZONE RELATED?	SEQUENCE OF EVENTS
Location of First Harmful Event 1 - On Roadway	Weather Conditions (up to two) 03 - Cloudy	Environment 1 - None apparent	Location	First Harmful Event of Crash (use codes 11-42 only) 21 - Vehicle in traffic
Manner of Crash/Collision 2 - Head-on		Roadway 01 - None apparent	Type	
Light Conditions 5 - Dark, roadway not lighted	Surface Conditions 1	Type of Roadway Junction/Feature 05 - Farm/residential drive	Workers Present?	



NARRATIVE

VEHICLE NUMBER 1 WAS WESTBOUND ON CO. RD F-62. DRIVER OF VEHICLE NUMBER 1 APPEARED TO BE FALLING ASLEEP AND WAS CROSSING THE CENTER LINE. VEHICLE NUMBER 1 CROSSED THE CENTERLINE AND STRUCK VEHICLE NUMBER 2 WHO WAS EASTBOUND HEAD-ON.

Officer CUTTS	Badge No. 170	Time Officer Notified of Accident 06:30	Time Officer Arrived At Scene 06:42
Name of Agency P01	Date of Report 3/24/2011	Investigation made at scene? Yes	T.I. #

Any questions about this report may be directed to the following address:

Iowa State Patrol District 01 Office
260 NW 48th Place
Des Moines, IA 50313-2299
Phone: (515) 725-0010
Fax: (515) 725-0011

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