

212058979

State of Nebraska Investigator's Motor Vehicle Accident Report

Sheet 1 of 1

001 Total Number of Vehicles Local No./District 1/10 Agency Case No. 13-00377 HIT & RUN? INVESTIGATION MADE AT SCENE? L 1

A/1 06 DATE OF ACCIDENT 01-11-2013 TIME OF ACCIDENT 0956 STATE USE ONLY

A/2 PLACE OF ACCIDENT COUNTY Scotts Bluff CITY Scottsbluff POLICE NOTIFIED 0956

B 21 ROAD ON WHICH ACCIDENT OCCURRED STREET/HIGHWAY NO. 11th Avenue ONE-WAY STREET? PRIVATE PROPERTY?

C 1 DISTANCE FROM MILEPOST FEET N S E W OF MILEPOST HIGHWAY NO. SHOULD LOCATION HAVE ENGINEERING STUDY?

D 1 IF AT INTERSECTION IF NOT AT INTERSECTION NAME OF INTERSECTING ROADWAY FEET MILES N S E W OF NEAREST STREET, BRIDGE, RAILROAD CROSSING

V1/M 05 IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN

V2/M MILES N S E W AND MILES N S E W OF NEAREST CITY OR TOWN

E 2 R. WORK ZONE CODES S. PEDESTRIAN CLASSIFICATION CODES DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY?

F 3 DRIVER LICENSE NO. H12985257 STATE (Of License) NE SEX FEMALE MALE

V1/N 01 DRIVER John Alsidez PHONE (308) 672-9681 LOCAL NO.

V2/N DRIVER ADDRESS 260467 Lake Minatare Rd., , Scottsbluff, NE, 69361 DATE OF BIRTH (MM / DD / YYYY) 02-05-1986

G 2 OWNER John Alsidez PHONE (308) 672-9681 LOCAL NO.

H 4 LICENSE PLATE TC NO. 219731 YEAR (Plate Expires) 2013 STATE (Of Plate) NE

V1/O 1 VEHICLE 1994 Make Chevrolet Model GMT Body Style Pickup truck Color GRNGLD ESTIMATED DAMAGE TOALED \$ 50.00

V2/O VEHICLE ID NO. (VIN) 1GCEK14K3RZ157113 INSURANCE COMPANY Viking Insurance Company

TOWED TO TOWED BY POLICY NO. 275624354

I 2 DRIVER LICENSE NO. STATE (Of License) SEX FEMALE MALE

V1/P 1 DRIVER PHONE LOCAL NO.

V2/P DRIVER ADDRESS CITY, STATE, ZIP DATE OF BIRTH (MM / DD / YYYY) LOCAL NO.

J 02 OWNER PHONE LOCAL NO.

J 02 OWNER ADDRESS CITY, STATE, ZIP CITATION YES NO CITATION NO. A2319194

V1/Q 4 LICENSE PLATE NO. YEAR (Plate Expires) STATE (Of Plate)

V2/Q VEHICLE YEAR MAKE MODEL BODY STYLE COLOR ESTIMATED DAMAGE TOALED \$

V3/Q VEHICLE ID NO. (VIN) INSURANCE COMPANY

TOWED TO TOWED BY POLICY NO.

Table with 6 columns: VEH. #, NAME, ADDRESS, DATE OF BIRTH (MM / DD / YYYY), 1-5 (Seat Position, Eject, Body Region, Injury Sev., Trans.), SEX (M, F)

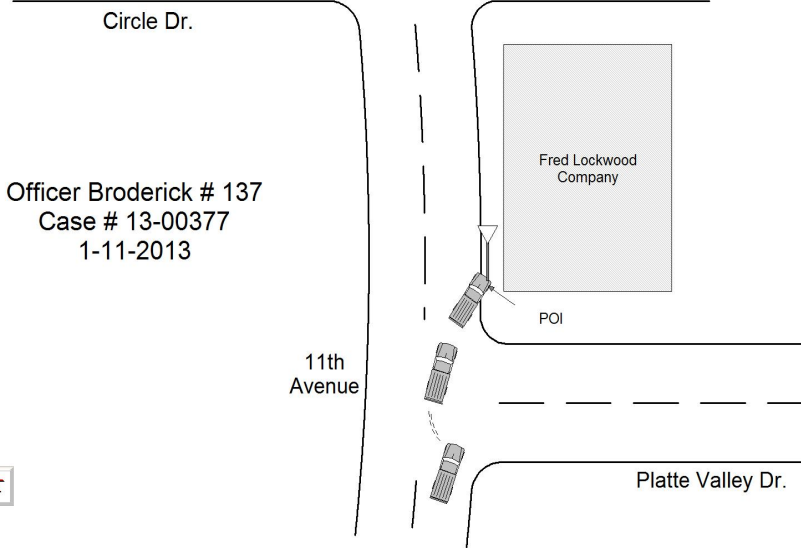
THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
13-00377



Indicate North by Arrow



Officer Broderick # 137
Case # 13-00377
1-11-2013

NOT TO SCALE

DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Driver 1 was headed northbound on 11th Avenue. Driver 1 lost control of his vehicle due to snowy weather conditions. Driver 1 went off the roadway and struck a traffic sign. Driver 1 left the scene of the accident without reporting the accident to authorities. Driver 1 and was later located and identified. Photographs were taken and placed into evidence under control # 45727.

PROPERTY	OBJECT DAMAGED Traffic Sign	OWNER NAME City of Scottsbluff , 2525 Circle Dr. , Scottsbluff, NE, 69361	ADDRESS	PHONE (308) 630-6297	APPROX. COST OF DAMAGE \$ 200.00	
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE ()	APPROX. COST OF DAMAGE \$	
WITNESSES	NAME Cheri Hutchinson , 1110 Circle Dr. Scottsbluff NE 69361				ADDRESS	PHONE (308) 632-6570
	NAME				ADDRESS	PHONE ()

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS						
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME				VEH 1		VEH 2		VEH 1		VEH 2		VEH 1		VEH 2			
1	X				11th Avenue				4		2		Y		Y		Y		Y			
2									-		-		N		N		N		N			
1	01	06 Turning left			POINT OF IMPACT		01	POINT OF IMPACT		1 Deployed - front				1 None used - vehicle occupant				ALCOHOL LEVEL TESTED				
2		07 Making U-turn			MOST DAMAGED AREA		01	MOST DAMAGED AREA		2 Deployed - side				2 Lap & shoulder belt used				Y				
		08 Entering traffic lane								3 Deployed - both front/side				3 Shoulder belt only used				N				
		09 Leaving traffic lane								4 Not deployed				4 Lap belt only used				BAC LEVEL				
		10 Parked								5 Not applicable/ No airbag available				5 Child safety seat used				ALCOHOL/ DRUGS SUSPECTED				
		11 Slowing or stopped in traffic								6 Unknown				6 Child booster seat used				Driver No. 1				
		12 Other												7 DOT approved helmet used				1				
		01 Essentially straight ahead			09 Top & windows		02		03						8 Costume helmet used				Driver No. 2			
		02 Backing			10 Undercarriage		01		05						9 Restraint use unknown				1			
		03 Changing lanes			11 Total (all areas)		08		06										2 Yes - alcohol suspected			
		04 Overtaking/ Passing			12 Other		07												3 Yes - drugs suspected			
		05 Turning right			13 Unknown		09												4 Yes - alcohol & drugs suspected			
OFFICER NO. 137				TROOP/ TEAM/ BEAT 1/10				DEPARTMENT 7906 Scottsbluff Police Department				Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO										
INVESTIGATOR NAME (Print or Type) Matthew Broderick						INVESTIGATOR SIGNATURE Digital Certificate with Nebraska Crime Commission						DATE OF REPORT 01/12/2013										