

212049429

State of Nebraska Investigator's Motor Vehicle Accident Report

Sheet 1 of 1

002 Total Number of Vehicles Local No./District 2/28 Agency Case No. 2012-12432 HIT & RUN? YES NO INVESTIGATION MADE AT SCENE? YES NO

A/1 DATE OF ACCIDENT 11-13-2012 TIME OF ACCIDENT 1420 STATE USE ONLY

A/2 PLACE OF ACCIDENT COUNTY Scotts Bluff CITY Scottsbluff POLICE NOTIFIED 1420

B ROAD ON WHICH ACCIDENT OCCURRED WEST OVERLAND ONE-WAY STREET? YES NO

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

D IF AT INTERSECTION IF NOT AT INTERSECTION NAME OF INTERSECTING ROADWAY AVENUE O

V1/M 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 R. WORK ZONE CODES S. PEDESTRIAN CLASSIFICATION CODES DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY?

F DRIVER LICENSE NO. H12725751 STATE (Of License) NE SEX FEMALE

V1/N DRIVER LISA B WHITNEY PHONE (308) 633-1600 LOCAL NO.

V2/N DRIVER ADDRESS 1013 AVENUE Q, SCOTTSBLUFF, NE, 69361 DATE OF BIRTH 12-27-1967

G OWNER LISA B WHITNEY PHONE (308) 633-1600 LOCAL NO.

H LICENSE PLATE PA NO. 21BZ39 YEAR 2012 STATE (Of Plate) NE

V1/O VEHICLE 1995 Chevrolet CAM COLOR RED ESTIMATED DAMAGE \$ 3500.00

V2/O VEHICLE ID NO. 2G1FP22S8S2118811 INSURANCE COMPANY VIKING INSURANCE

I TOWED TO TOWED BY POLICY NO. 275614731

J DRIVER LICENSE NO. H13452846 STATE (Of License) NE SEX FEMALE

V1/P DRIVER COREY A GREEN PHONE (308) 765-8867 LOCAL NO.

V2/P DRIVER ADDRESS 34 COUNTRY CLUB RD, GERING, NE, 69341 DATE OF BIRTH 01-28-1995

K OWNER JAMES A GREEN PHONE (308) 641-5798 LOCAL NO.

L LICENSE PLATE PA NO. 21CS21 YEAR 2013 STATE (Of Plate) NE

V1/Q VEHICLE 2001 Oldsmobile A/G BODY STYLE 4 door Sedan COLOR SIL ESTIMATED DAMAGE \$ 4000.00

V2/Q VEHICLE ID NO. 1G3NL52T11C161474 INSURANCE COMPANY STATE FARM

K TOWED TO TOWED BY POLICY NO. 0864778-D10-27

Table with 6 columns: VEH.#, NAME, ADDRESS, DATE OF BIRTH, and 5 injury categories (Seat Position, Eject, Body Region, Injury Sev., Trans.).

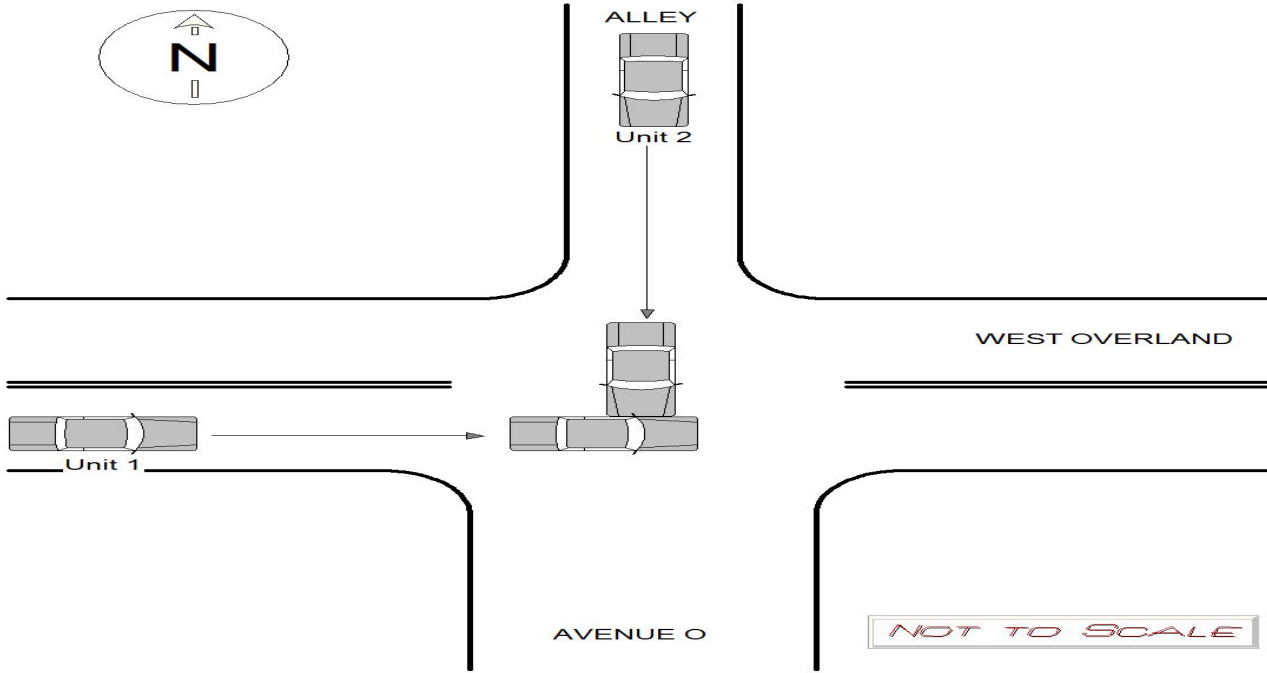
THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
2012-12432



Indicate North by Arrow



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

VEHICLE#1 WAS EASTBOUND ON WEST OVERLAND. VEHICLE#2 WAS SOUTHBOUND IN AN ALLEY, NORTH OF WEST OVERLAND. DRIVER#1 SAID VEHICLE#2 JUST CAME OUT OF THE ALLEY AND STRUCK HER VEHICLE IN THE SIDE. DRIVER#2 SAID HE WAS TRAVELING AROUND 25 MPH AND WHEN HE TRIED TO STOP BEFORE THE INTERSECTION, HE DISCOVERED HIS BRAKES WERE NOT WORKING. DRIVER#2 SAID HIS "ABS KICKED IN", BUT DRIVER#2 USED HIS PARKING BRAKE TO ASSIST. AS A RESULT, DRIVER#2 STRUCK VEHICLE#1. THE IMPACT CAUSED VEHICLE#1 TO TURN 180 DEGREES, STRIKING THE CURB AND CAUSING HER FRONT DRIVER'S SIDE TIRE TO POP OFF THE RIM. NO INJURIES WERE REPORTED, AND BOTH VEHICLES DROVE AWAY FROM THE SCENE. DRIVER#2 WAS ISSUED A CITATION FOR FAILURE TO YIELD TO A VEHICLE.

| | | | | | |
|-----------|----------------|------------|--------------|--------------|------------------------------|
| PROPERTY | OBJECT DAMAGED | OWNER NAME | ADDRESS | PHONE () | APPROX. COST OF DAMAGE \$ |
| | OBJECT DAMAGED | OWNER NAME | ADDRESS | PHONE () | APPROX. COST OF DAMAGE \$ |
| WITNESSES | NAME | ADDRESS | PHONE () | | |
| | NAME | ADDRESS | PHONE () | | |

| | | | | | | | | | | | | | |
|--|---------|--|--|--|-----------|----------------------------------|----|--------------------------------|--|-----------------------------------|--------------|-------------------------|--------------|
| VEHICLE MOVEMENT BEFORE COLLISION | | POINT OF IMPACT AND MOST DAMAGED AREA (Enter numbers for each vehicle) | | | | AIRBAG DEPLOYED VEHICLE 1 | | RESTRAINT USE VEHICLE 1 | | TOTAL OCCUPANTS | | | |
| VEH NO. | N S E W | ROAD OR HIGHWAY NAME | | | | | | | | VEH 1 | 001 | VEH 2 | 001 |
| 1 | X | WEST OVERLAND | | | | 4 | | 2 | | ALCOHOL TESTING | Driver No. 1 | Driver No. 2 | Pedestrian |
| 2 | X | ALLEY | | VEHICLE 1 | VEHICLE 2 | | | | | ALCOHOL LEVEL TESTED | Y | Y | Y |
| 1 | 01 | 06 Turning left | | POINT OF IMPACT | 07 | POINT OF IMPACT | 01 | 1 None used - vehicle occupant | | BAC LEVEL | N | X | N |
| 2 | 01 | 08 Entering traffic lane | | MOST DAMAGED AREA | 06 | MOST DAMAGED AREA | 01 | 2 Lap & shoulder belt used | | ALCOHOL/DRUGS SUSPECTED | | Driver No. 1 | Driver No. 2 |
| 01 Essentially straight ahead | | 09 Leaving traffic lane | | 00 None | | 02 03 04 | | 3 Shoulder belt only used | | 1 | | 1 | |
| 02 Backing | | 10 Parked | | 09 Top & windows | | 01 05 | | 4 Lap belt only used | | 2 Yes - alcohol suspected | | 3 Yes - drugs suspected | |
| 03 Changing lanes | | 11 Slowing or stopped in traffic | | 10 Undercarriage | | 08 07 06 | | 5 Child safety seat used | | 4 Yes - alcohol & drugs suspected | | 5 Unknown | |
| 04 Overtaking/Passing | | 12 Other | | 11 Total (all areas) | | | | 6 Costume helmet used | | | | | |
| 05 Turning right | | 13 Unknown | | 12 Other | | | | 7 DOT approved helmet used | | | | | |
| OFFICER NO. 116 | | TROOP/TEAM/BEAT BEAT 2 | | DEPARTMENT 7906 Scottsbluff Police Department | | PHOTOGRAPHS TAKEN? YES NO | | | | DATE OF REPORT 11/14/2012 | | | |
| INVESTIGATOR NAME (Print or Type) Matthew D. Herbel | | | | INVESTIGATOR SIGNATURE Digital Certificate with Nebraska Crime Commission | | | | | | | | | |