213025127 State of Nebraska Investigator's Motor Vehicle Accident Report Sheet 1									t _1	of _	1					
002	Total Number of Vehicles	Local No./ District 3/19 Agency Case No. 13-07287					HIT & RUN? YES X NO				INVESTIGATION MADE AT SCENE? XYES NO			1		
A/1 01 A/2	OF ACCIDENT 07-1	0-2013 Y Scotts B		y y S		W TH F		TIME OF ACCIDEN POLICE NOTIFIEI	ן דוי]	1258 1259	itary Time)	STATE USE	ONLY			-
в 88	OF ACCIDENT CITY	Scottsbluff								PRIVATE PROPERT		LONGITUD	E			-
C 1	ROAD ON WHICH ACCIDENT OCCURRED STREET/ HIGHWAY NO. 2nd Ave						HIGHW	ONE-WAY YES NO STREET?			SHOULD LOCATION HAVE				-	
D D	MILEPOST						IF NOT	AT INTE	RSE	CTION		engineering study? YES XNO				
1	NA	ME OF INTERSECTI	NG ROADWAY	′	X FE 150		MILES N	S	E '		EAREST STREE	T, BRIDGE,	RAILR	OAD CF	ROSSING	
14	MILES	IF N S E	ACCIDENT V	VAS OUTSIDI				AREST	FRO	OM NEAF	REST TOWN					1
V2/M 01	R. WORK R1 R2 R3 R4 S. PEDESTRIAN S1 S2 S3 S4 S5-a S5-b S6-a S6-b DOES ACCIDENT INVOLVE DAMAGE TO										_					
2	CODES 1 CLASSIFICATION CODES X NO															
F	DRIVER	NO 338014	50		VE	HICLE N	NO. 1				STATE	TX	SE		FEMALE	1
1 V1/N	DRIVER	110.	<u> </u>					PHONE		070.04	(Of License)	LOCAL NO		<u>^ </u>	MALE	-
01 V2/N	Pedro Agual DRIVER ADDRESS 26 Windmill V		TX, 78610	CITY, STA	TE, ZIP			(512		878-94	DATE OF BIRTH	03-28	 3-199	 92		V1/1
01	OWNER PETE AGUA	SUALLO S ENUE F. SCOTTSBI UFF, NF, 69361 SCOTTSBI UFF, NF, 69361 SCOTTSBI UFF, NF, 69361 SCOTTSBI UFF, NF, 69361														
G 2	OWNER ADDRESS	DORESS CITY, STATE, ZIP CITATION YES CITATION NO. PENDING NO V1/3									V1/2					
н 5	LICENSE TC	NO. 2112234							(Plat	te Expires)	2014		(Of Pla	ate) [NE	
V1/O	VEHICLE	2009	Chevrole	et 29	SK	В	ODY STYLE			COLOR		TOTALE	AMAGE D \$	50.00		V1/4
1 V2/O	VEHICLE ID NO. (V/N) 3GCEK23359G105708					VIKING INS. CO. OF WISCONSIN							V1/5 - 19			
1	TOWED TO			TOWED BY						^{POLIC} 2756	38346					V1/6 25
1	DRIVER	NO.			VE	HICLE N	NO. 2				STATE	Τ	SE	x -	FEMALE	25
V1/P	DRIVER	NO.						PHONE	١		(Of License)	LOCAL NO		<u>" </u>	MALE	
1 V2/P	DRIVER ADDRESS	VER ADDRESS CITY, STATE, ZIP DATE OF BIRTH (MM / DD / YYYY)							V2/1 18							
7	OWNER MICHAEL SC	OW						PHONE)		(MM / DD / YYY	LOCAL NO).			V2/2
J 01	OWNER ADDRESS									V2/3						
V1/Q 4		NO. 217945							(Plat	YEAR te Expires)	2013		STAT (Of Pla	ate)	NE	V2/4
V2/Q	VEHICLE	2004	Chevrol	et S	SK1	В	ODY STYLE			BLU		TOTALE	AMAGE D \$	100.0	00	V2/5
З К	1101 (1111)	CEK19T54E	207608							Geico						18 V2/6
10	TOWED TO	Complete this section for all injured persons						POLICY NO. 4212149613						25		
	(Cor	olete this se nplete a continuation	on report, if n	nore than thre							OF BIRTH DD / YYYY)	Seat Position	2 Eject	Body Region		SEX M F
VEH. #	NAME		AD	DRESS												
	LOCAL NO. MEDICAL FACILITY NAME					EMS SERVICE NAME					EMS RUN REPORT NO.					
VEH. #	NAME		AD	DRESS												
	LOCAL NO.	MEDICAL FACILITY	NAME			EMS SERV	/ICE NAME					EMS RUN	I REPO	RT NO.		
VEH. #	NAME		AD	DRESS		1										
	LOCAL NO.	MEDICAL FACILITY	NAME			EMS SERV	/ICE NAME					EMS RUN	N REPO	RT NO.		1

	THE FOLLOWING	INFORMATIO	N IS REQUIRED FO	OR ALL ACCIDENT	S					
			BY DIAGRAM WHAT HAP	PENED AGEN	CY CASE NO. 07287					
Indicate North by Arrow										
POT TO S	3CALE	2nd A	1405 2nd	d Ave	· · · · · · · ·					
				E 14th ST						
			BASED ON OFFICER'S IN							
Vehicle 2 was parked facing south. Vehicle 1 was backing out of the driveway of 1405 2nd Ave. Vehicle 1 stuck vehicle 2.										
OBJECT DAMAGED OWN	NER NAME	ADDRESS		PHONE	APPROX. COST OF DAMAGE					
OBJECT DAMAGED OWI	NEN NAME	ADDRESS		()	\$					
OBJECT DAMAGED OWI	NER NAME	ADDRESS		PHONE (APPROX. COST OF DAMAGE					
		ADDRESS		PHONE						
NAME NAME		4000500			()					
N INAME		ADDRESS			PHONE (
VEHICLE MOVEMENT BEFORE COLLISION	POINT OF IMPA		AIRBAG DEPLOYED VEHICLE 1	RESTRAINT USE VEHICLE 1	TOTAL VEH 001 VEH 000					
VEH NO E NAV ROAD OR	DOLD OD 15		VEHICLE I	VEHICLE	ALCOHOL Driver Driver Pedes-					
1 X Driveway	VEHICLE 1	VEHICLE 2	-		TESTING No. 1 No. 2 trian					
2 X 2nd Ave	POINT OF OG PO	OINT OF 08	4	1 None used - vehicle occupan	LEVEL					
1 02 06 Turning left	MOST	MOST AMAGED 08	1 Deployed - front2 Deployed - side3 Deployed - both front/side	2 Lap & shoulder belt used 3 Shoulder belt only used	BAC LEVEL					
07 Making U-turn 08 Entering	AREA 00	AREA OO	4 Not deployed 5 Not applicable/	4 Lap belt only used 5 Child safety seat used 6 Child booster seat used	ALCOHOL/ Driver No. 2					
01 Essentially 09 Leaving	00 None 02	03 04	No airbag available 6 Unknown	7 DOT approved helmet used 8 Costume helmet used	DRUGS SUSPECTED 1					
straight ahead traffic lane 02 Backing 10 Parked	09 Top & windows 10 Undercarriage 01 -	05	VEHICLE 2	9 Restraint use unknown VEHICLE 2	Neither alcohol nor drugs suspected Yes - alcohol suspected					
03 Changing lanes 11 Slowing or	11 Total (all areas)				3 Yes - drugs suspected 4 Yes - alcohol & drugs suspected					
Passing 12 Other	08 08	07 06			5 Unknown					
05 Turning right 13 Unknown OFFICER NO.	TROOP/ TEAM/ 3/10	DEPARTM			Photographs Q YES					
117	TEAM/ 3/19		Scottsbluff Police D	epariment	taken? X NO					
INVESTIGATOR NAME (Print or Type) Steven Lopez INVESTIGATOR SIGNATURE Digital Certificate with Nebraska Crime Commission DATE OF REPORT 07/11/20										