

212031204

State of Nebraska Investigator's Motor Vehicle Accident Report

Sheet 1 of 1

Main form containing accident details: 002 Total Number of Vehicles, 01 DATE OF ACCIDENT (07-05-2012), 74 ROAD ON WHICH ACCIDENT OCCURRED (AVE I), 01 DRIVER LICENSE (H12813648), 05 DRIVER (LOLA L EITZEN), 05 OWNER (LOLA L EITZEN), 01 DRIVER LICENSE (G21026191), 5 DRIVER (ELIZABETH A ANDREWS), 01 OWNER (ELIZABETH A ANDREWS), 4 LICENSE PLATE (21AN16), 4 VEHICLE (2005 Toyota SCL Mini van), 01 TOWED TO (059 4454 A03 27A).

Complete this section for all injured persons (Complete a continuation report, if more than three were injured)

Table with columns: VEH. #, NAME, ADDRESS, LOCAL NO., MEDICAL FACILITY NAME, EMS SERVICE NAME, DATE OF BIRTH, 1 Seat Position, 2 Eject, 3 Body Region, 4 Injury Sev., 5 Trans., SEX M F.

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

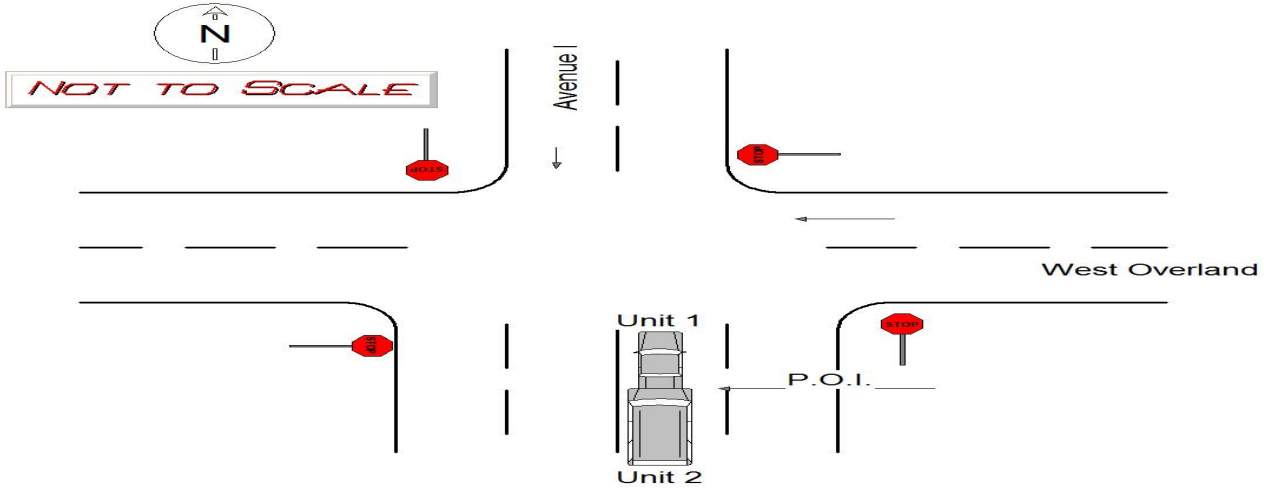
INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
12-07271



Indicate North by Arrow

West Overland & Ave I



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Vehicle 1 was stopped Northbound on Ave I at the intersection of W. Overland stop sign. Vehicle 2 was traveling North on Ave I coming up to the stop sign at W. Overland. Vehicle 2 failed to stop striking vehicle 1 in the rear.

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 VEH NO. N S E W ROAD OR HIGHWAY NAME 1 X AVE I 2 X AVE I		POINT OF IMPACT AND MOST DAMAGED AREA (Enter numbers for each vehicle) VEHICLE 1 VEHICLE 2 POINT OF IMPACT 05 POINT OF IMPACT 01 MOST DAMAGED AREA 00 MOST DAMAGED AREA 01		AIRBAG DEPLOYED VEHICLE 1 4		RESTRAINT USE VEHICLE 1 2 2		TOTAL OCCUPANTS VEH 1 002 VEH 2 001 ALCOHOL TESTING Driver No. 1 Driver No. 2 Pedestrian ALCOHOL LEVEL TESTED Y Y Y N X N X N BAC LEVEL	
01 01 06 Turning left 02 01 07 Making U-turn 03 08 Entering traffic lane 04 09 Leaving traffic lane 05 10 Parked 06 11 Slowing or stopped in traffic 07 12 Other 08 13 Unknown		00 None 02 03 04 09 Top & windows 01 05 10 Undercarriage 11 Total (all areas) 12 Other 08 07 06		1 Deployed - front 2 Deployed - side 3 Deployed - both front/side 4 Not deployed 5 Not applicable/ No airbag available 6 Unknown		1 None used - vehicle occupant 2 Lap & shoulder belt used 3 Shoulder belt only used 4 Lap belt only used 5 Child safety seat used 6 Child booster seat used 7 DOT approved helmet used 8 Costume helmet used 9 Restraint use unknown		ALCOHOL/ DRUGS SUSPECTED Driver No. 1 Driver No. 2 1 1 1 Neither alcohol nor drugs suspected 2 Yes - alcohol suspected 3 Yes - drugs suspected 4 Yes - alcohol & drugs suspected 5 Unknown	
OFFICER NO. 110 TROOP/ TEAM/ BEAT 2 / 29		DEPARTMENT 7906 Scottsbluff Police Department		Photographs taken? YES NO		DATE OF REPORT 07/10/2012			
INVESTIGATOR NAME (Print or Type) William Howton		INVESTIGATOR SIGNATURE Digital Certificate with Nebraska Crime Commission		DATE OF REPORT 07/10/2012					