



MOTOR VEHICLE CRASH REPORT

Department of Transportation, Drivers Lic. & Traf. Safety
SFN 2355, DL-1 (Rev. 2-90)

NDDOT USE ONLY	
Crash No.	Rpt. Seq.

AGENCY	Crash Date (m/d/y)	Time (24 hr.)	Officer No.	Officer Name	Agency Name
	10 / 08 / 91	0645	222	Tracy Brumfield	Highway Patrol
	Emergency Unit No.	Emergency Unit Responding	Agency Report No.	Police Notified (m/d/y)	Time (24 hr.)
				10 / 08 / 91	0708

LOCATION	County	Co. Code	City	City Code	Rural/Urban	Func. Class.	Fed. Aid System
	LaMoire	23					
	Highway	281	80	hundredths miles from milepost	33	toward milepost	34
	Township	Range	Route	hundredths miles from node	toward node		
	ON	AT intersection with					
	(Street Name)		(Street Name)	(Node)			
	OR	ft. FROM	(Intersecting Street)	(Node)	toward	(Intersecting Street)	(Node)

UNIT 1/STRIKING UNIT	Operator Name (Last, First, MI)	Owner Name, if not operator (Last, First, MI)					
	McMath, Roger Lee	Rushmore Livestock Co.					
	Address	Address, if different from operator					
	Box 1054	Box 152					
City	City						
Mission	Piedmont						
State	State						
SD	SD						
Zip	Zip						
57555	57769						
Damage Amount	Operator License No.	St. Iss.	DOB (m/d/y)	Plate No.	State	Make	Year
\$110,000	42130210444	SD	04 / 18 / 44	PRO 7887	SD	FRHT	91
Insurance Code	Insurance Company Name (not agent)	Policy Number	Ins. (yr)	Spd. Lmt.	DVR No.		
Code	American Livestock Ins.	LTM 59035	<input type="checkbox"/> 1-Owner <input type="checkbox"/> 2-Driver	55	095326		

UNIT 2/OTHER UNIT	Operator Name (Last, First, MI)	Owner Name, if not operator (Last, First, MI)					
	Address	Address, if different from operator					
	City	City					
	State	State					
Zip	Zip						
Damage Amount	Operator License No.	St. Iss.	DOB (m/d/y)	Plate No.	State	Make	Year
\$							
Insurance Code	Insurance Company Name (not agent)	Policy Number	Ins. (yr)	Spd. Lmt.	DVR No.		
			<input type="checkbox"/> 1-Owner <input type="checkbox"/> 2-Driver				

UNIT 3/OTHER UNIT	Operator Name (Last, First, MI)	Owner Name, if not operator (Last, First, MI)					
	Address	Address, if different from operator					
	City	City					
	State	State					
Zip	Zip						
Damage Amount	Operator License No.	St. Iss.	DOB (m/d/y)	Plate No.	State	Make	Year
\$							
Insurance Code	Insurance Company Name (not agent)	Policy Number	Ins. (yr)	Spd. Lmt.	DVR No.		
			<input type="checkbox"/> 1-Owner <input type="checkbox"/> 2-Driver				

Other Prop. Damage	Action Sequence and Violations																																				
	<table border="1"> <tr> <td>Unit</td> <td>Code</td> <td>Unit</td> <td>Code</td> <td>Unit</td> <td>Code</td> <td>Unit</td> <td>Code</td> <td>Unit</td> <td>Code</td> <td>Unit</td> <td>Code</td> </tr> <tr> <td>1</td> <td>0</td> <td>1</td> <td>4</td> <td>1</td> <td>6</td> <td>1</td> <td>6</td> <td>1</td> <td>8</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Unit	Code	Unit	Code	Unit	Code	Unit	Code	Unit	Code	Unit	Code	1	0	1	4	1	6	1	6	1	8														
Unit	Code	Unit	Code	Unit	Code	Unit	Code	Unit	Code	Unit	Code																										
1	0	1	4	1	6	1	6	1	8																												

OPERATOR	OCCUPANT, WITNESS, PROPERTY OWNER NAME, ADDRESS, PHONE, PROPERTY DESCRIPTION									
	Unit	Seat	Age	Sex	Alc. Test	BAC	Inj.	Safety Equip.	Ejc. Ext.	Own. Nat.
1	00	47	M	0	-	3	01	0	1	
2										
3										
OCCUPANT, WITNESS, PROP.										
98										

THREE-STAGE CRASH DIAGRAM

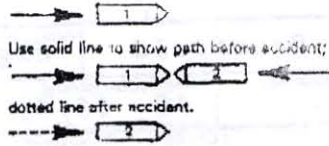
(Pre-Crash, Crash, Post-Crash)

Crash Number

Acc. Seq.

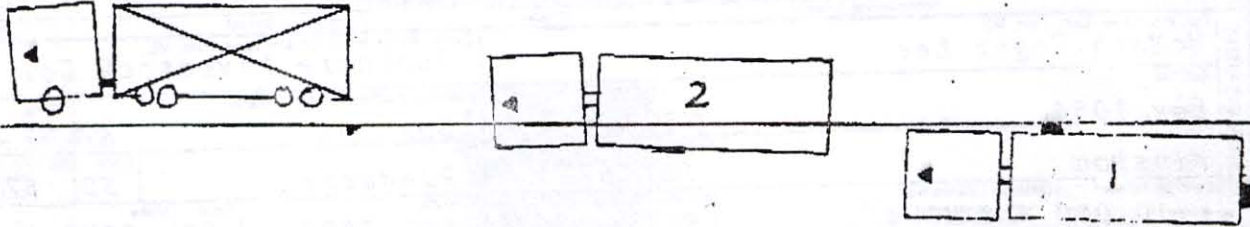
Diagram what happened:

INSTRUCTIONS
 Draw outline of roadway at place of accident.
 Number each vehicle and show direction of travel by arrow.



Show pedestrian by: X
 Show railroad by: + + + +
 Show utility poles by: ⊕ ⊕
 Show motorcycle by: ⊙ ⊙
 Show animal by: 🐾

Indicate north by arrow through



US 281

OFFICER'S NARRATIVE: Engineering concerns and asterisk items. (Please print.)

Vehicle #1 was northbound on US 281. Vehicle was coming from Watertown, SD going to Shelby, MT. The driver stated he either fell asleep or got too close to the shoulder and the horses shifted and he lost control. There was no evasive action taken. The passenger side of the vehicle dropped off the shoulder and the vehicle skidded out of control and rolled onto its side. The trailer had 78 horses inside. 34 horses were killed. The driver was cited for care required in operating a motor vehicle, citation number 3087468.

Date of Report: 10-10-91

Signature(s): *Lacy Brunfeld* #222 NDHP

