



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. 3467933

1 16 27
2
3
1 18 28
2
3
01 29
05 31
32
1 33
2
3
51 34
4 35
36
37
38
39
40
1 41
42

INTERSTATE <input checked="" type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #

LOCAL AGENCY CODING

TOTAL # OF UNITS 02 OBJECT STRUCK GAURDRAIL/UNDERPASS

TRIBAL RESERVATION

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #

DATE OF COLLISION 12-05-2012 100031 208 N E IN S W OF 0045

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION

SB IS BLOCK NO. 208 MILE POST 67

DISTANCE 0.0 MILES N E OF (REFERENCE OR CROSS STREET) FEET S W OF SRS30 OVERPASS 530/115

UNIT 01 MOTOR VEHICLE PEDAL-CYCLE DAMAGE THRESHOLD MET YES NO PHONE

LAST NAME FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL CLASS 5 ENDORSEMENTS 15 RESTRICTIONS 21

DRIVER'S LICENSE # STATE BC SEX M D.O.B.

ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY CLASS 1 NATURE OF INJURIES NONE STATED

LICENSE PLATE # STATE BC VIN#

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2007 MAKE GMC MODEL FLDCR STYLE TOWED BY DICK'S CLASS C GOVT. VEHICLE YES NO

REGISTERED OWNER INFO LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # CITATION # 270898882 CHARGE DEFECTIVE EQUIP.



VEHICLE LEGALLY STANDING YES NO CITATION # 270898882 CHARGE DEFECTIVE EQUIP.

UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET YES NO PHONE

LAST NAME WSDOT FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS PO BOX 330310

CITY SEATTLE ST WA ZIP 98133

CDL ENDORSEMENTS RESTRICTIONS

DRIVER'S LICENSE # STATE SEX D.O.B.

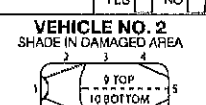
ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

LICENSE PLATE # STATE VIN#

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR MAKE MODEL STYLE TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # CITATION # CHARGE



VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE

OFFICER'S NAME (PRINT) J. SAUCERMAN BADGE OR ID # 332 AGENCY WSP

PAGE 01 OF 2

PART A 3000-345-169 R (7/06)

UNDER 23 UNITED STATES CODE - SECTION 409, THIS DATA CANNOT BE USED IN DISCOVERY OR AS EVIDENCE AT TRIAL IN ANY ACTION FOR DAMAGES AGAINST THE WSDOT, OR ANY JURISDICTIONS INVOLVED IN THE DATA



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. 3467933

CASE #

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX D.O.B.
MMDDYYYY

PASSENGER

WITNESS

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX D.O.B.
MMDDYYYY

PASSENGER

WITNESS

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX D.O.B.
MMDDYYYY

PASSENGER

WITNESS

UNIT #

SEAT
POS.

AIRBAG

RESTR.

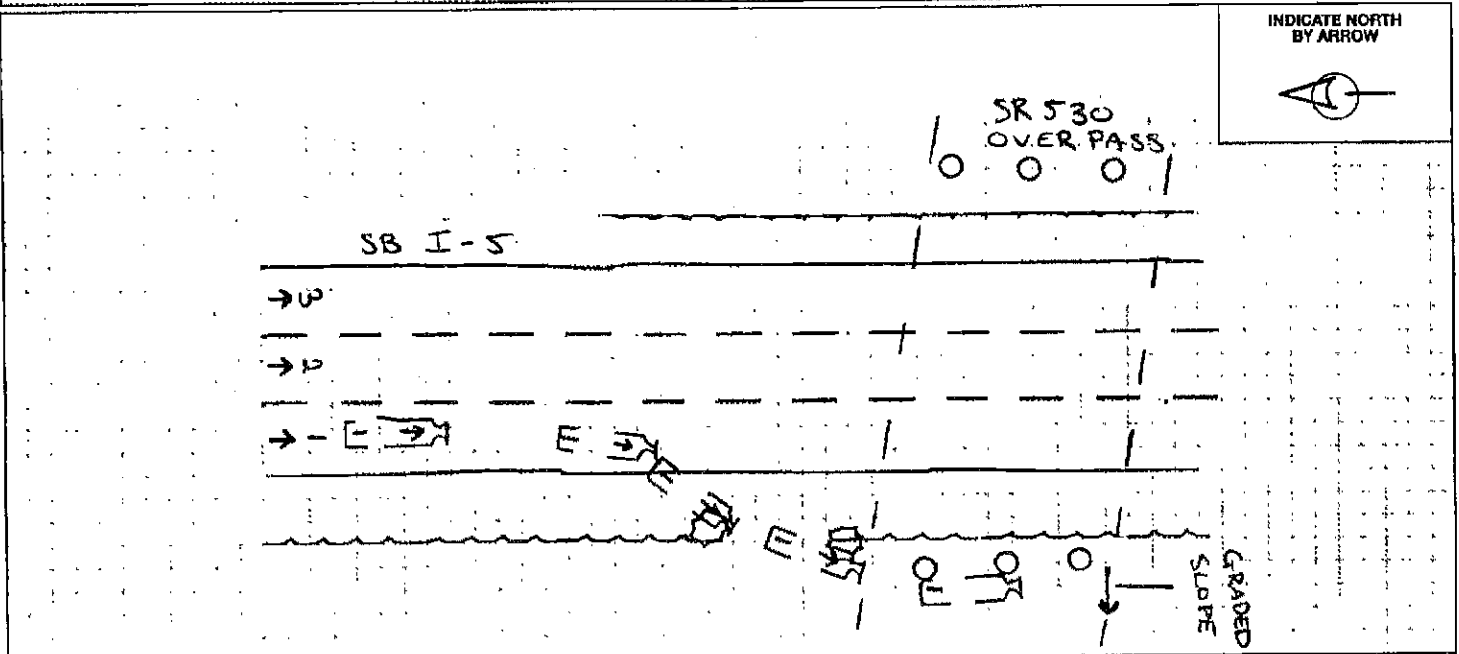
EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

DIAGRAM



NARRATIVE

UNIT 1 TRAVELING SB ON I-5. DRIVER STATED; TRAVELING IN LN 1 OF 3 WHEN FRONT DRIVER'S SIDE TIRE BLEW. DRIVER ATTEMPTED TO EXIT ROADWAY AND OVER CORRECTED. UNIT 1 STRUCK GUARDRAIL AND CAME TO REST UNDER OVERPASS TO HWY 530 ON 2 SUPPORT PILLARS.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

INVESTIGATING OFFICER'S SIGNATURE

0709
UNIT OR DIST. DET

12/5/12
DATED

SNOHOMISH CO/WA
PLACE SIGNED

APPROVED BY

R. Hesse

DATE

12/13/12

BADGE OR ID #

332

ORI #

WAWSP0709

TIME POLICE DISPATCHED

0958

TIME POLICE ARRIVED

1006