



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. E236384

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FROM 10 8 4 33
FROM 10
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INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" 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 # 13-002876

LOCAL AGENCY CODING

TOTAL # OF UNITS 2 OBJECT STRUCK Guardrail

TRIBAL RESERVATION

DATE OF COLLISION: M 3 - D 5 - Y 2013 TIME (2400) 0653 COUNTY # 31 MILES 0.50 N E S W IN OF CITY # 0745

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION

EB SR 531 BLOCK NO. 4 MILE POST 60

DISTANCE 0.30 MILES N E S W OF (REFERENCE OR CROSS STREET) 172ND ST NW

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

LAST NAME [REDACTED] FIRST NAME [REDACTED] MIDDLE INITIAL [REDACTED]

STREET NEW ADDRESS [REDACTED]

CITY STANWOOD ST WA ZIP 982927801

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # [REDACTED] STATE WA SEX F D.O.B. [REDACTED]

ON DUTY STATUS AIRBAG 6 RESTR. 4 EJECT 1 HELMET USE INJURY CLASS 6 NATURE OF INJURIES FACE IMPACT AND POSSIBLE ARM INJURY

LICENSE PLATE # AFP0358 STATE WA VIN# [REDACTED]

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 1997 MAKE HOND MODEL CIVCP STYLE CP VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. VEHICLE NO. 1 SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # VEHICLE STANDING YES NO CITATION # 3Z0091357 CHARGE NEG DRIVING 2, NO INSURANCE

UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET YES NO PHONE (206) 440-4497

LAST NAME WA DEPT OF TRANSPORTATION FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS PO BOX 330310

CITY SEATTLE ST WA ZIP 98113

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX D.O.B. [REDACTED]

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 VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. VEHICLE NO. 2 SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # VEHICLE STANDING YES NO CITATION # CHARGE

OFFICER'S NAME (PRINT) GORT, S. BADGE OR ID # 0598 AGENCY WASHINGTON STATE PATROL



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1691972

CORRECTION

REPORT NO. **E236384**

CASE # 13-002876

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

Please see subsequent diagram page

INDICATE NORTH BY ARROW



NARRATIVE

Please see subsequent narrative page(s)

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)

S. GORT

4/5/2013

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY Knott, Sgt. J. 126

DATE

BADGE OR ID # 0598

ORI # WAWSP0701

TIME POLICE DISPATCHED 6:53 AM

TIME POLICE ARRIVED 7:03 AM

Narrative

Unit 1 travels eastbound on State Route 531 near milepost 4.6. Unit 1 drifts to the right and impacts the guard rail end cap, causing the vehicle to rotate. Unit 1 remains blocking eastbound SR 531 until a tow is able to remove it due to extensive damage sustained. Driver 1 stated that she was "tired" that morning and that she could feel herself "nodding off" prior to the collision. When questioned further, she stated that the last thing she remembers is traveling on SR 531 "before the curve", which is approximately 0.2 miles west of the collision location. Driver 1 states directly that she does not have insurance for the vehicle and a check with DOL reveals that she is DWLS 3rd degree. Driver 1 refused transport by aid, stated that she would go to hospital with her mother.

