



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. E245161

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2

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 2 OBJECT STRUCK Guardrail

TRIBAL RESERVATION

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

DATE OF COLLISION 5 - 20 - 2013 0245 31 N S E W IN OF 0420

3 4

ON (PRIMARY TRAFFIC WAY) INTERSECTION  NON-INTERSECTION

SB I-5 BLOCK NO. 191 MILE POST 60

4

4a

DISTANCE 300.00 MILES  N  E  OF (REFERENCE OR CROSS STREET) LOWELL RD

FEET  S  W

5

UNIT 01 MOTOR VEHICLE  PEDAL-CYCLE  DAMAGE THRESHOLD MET YES  NO  PHONE (425) 583-0462

6 2

LAST NAME FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST WA ZIP

7

CDL RESTRICTIONS ENDORSEMENTS

8

DRIVER'S LICENSE # STATE WA SEX F D.O.B. MMDDYYYY

9 9

ON DUTY  STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE 2 INJURY CLASS 1 NATURE OF INJURIES

10

LICENSE PLATE # STATE WA VIN#

11 6 0

TRAILER PLATE # STATE TRAILER PLATE # STATE

12

VEH. YEAR 2005 MAKE PONT MODEL GRAND STYLE 4T VEHICLE TOWED YES  NO  TOWED BY AMERICAN TOW GOVT. VEHICLE YES  NO

13 1

LIABILITY INSURANCE IN EFFECT  INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING YES  NO  CITATION # 3Z0327167 CHARGE NEGLIGENT DRIVING 2ND DEGREE

VEHICLE NO. 1 SHADE IN DAMAGED AREA

14

15 2

UNIT 02 MOTOR VEHICLE  PEDAL-CYCLE  PEDESTRIAN  PROPERTY OWNER  DAMAGE THRESHOLD MET YES  NO  PHONE (206) 440-4000

16

LAST NAME WSDOT FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS PO BOX 330310

17

CITY SEATTLE ST WA ZIP 98133

18

CDL RESTRICTIONS ENDORSEMENTS

19

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

20

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

21

LICENSE PLATE # STATE VIN#

22

TRAILER PLATE # STATE TRAILER PLATE # STATE

23

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

24

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT  INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING YES  NO  CITATION # CHARGE

VEHICLE NO. 2 SHADE IN DAMAGED AREA

25

26

OFFICER'S NAME (PRINT) STATEMA, A. BADGE OR ID # 1090 AGENCY WASHINGTON STATE PATROL

0 1 29

1 1 2 31

1 32

1 5 33

4 35

1 41

1 42

PART A

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  
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1591972

CORRECTION

REPORT NO. **E245161**

CASE #

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-	-
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	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 <input type="checkbox"/>	WITNESS <input type="checkbox"/>	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 <input type="checkbox"/>	WITNESS <input type="checkbox"/>	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)

A. STATEMA		5/20/2013	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY Statema, A. 1090	DATE		
BADGE OR ID # 1090	ORI # WAWSP0702	TIME POLICE DISPATCHED 2:46 AM	TIME POLICE ARRIVED 2:55 AM

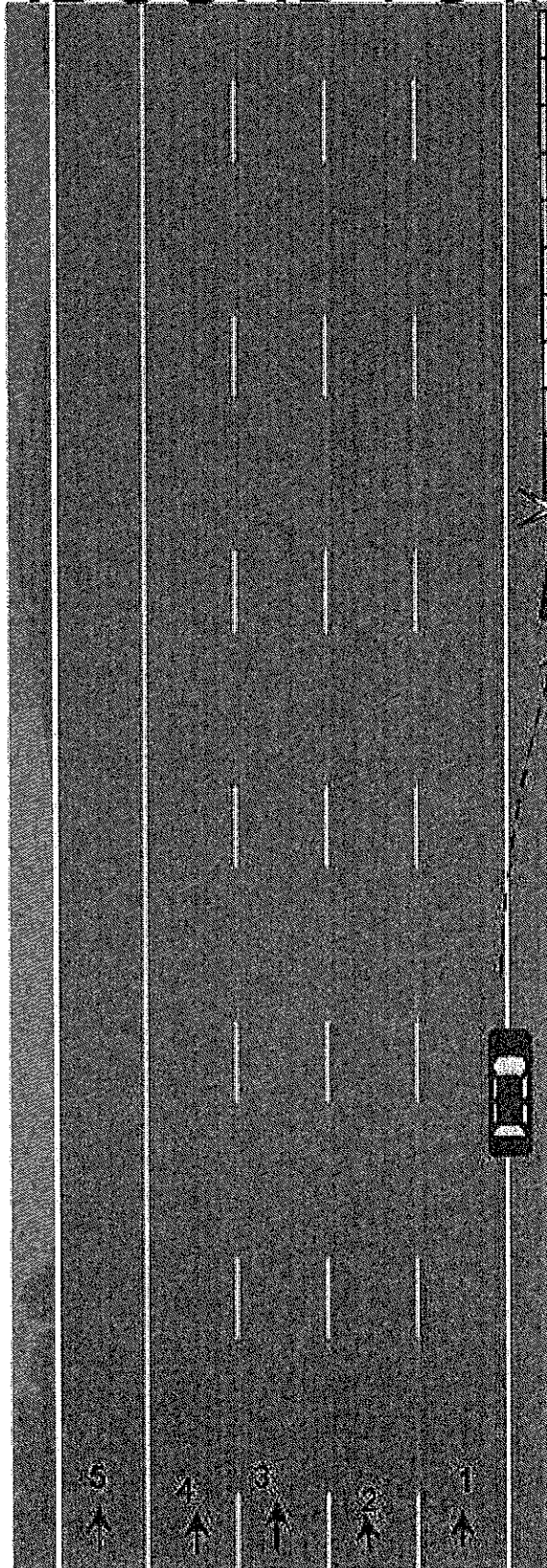
**Narrative**

VEH 1 SOUTHBOUND I-5 MILEPOST 191.6. DRIVER 1 STATES WAS FALLING ASLEEP.

VEH 1 DRIFTS OFF ROADWAY TO RIGHT, STRIKES END OF GUARDRAIL AND COMES TO REST IN DITCH.

UNKNOWN VEHICLE, MATCHING DESCRIPTION OF VEH 1, PREVIOUSLY REPORTED AS DRIVING ON RIGHT SHOULDER JUST PRIOR TO COLLISION.

# SOUTHBOUND I-5 MP 191.6



GUARDRAIL