



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. E296993

1 0 4 27

3

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 #

LOCAL AGENCY CODING WAWSP0708

TOTAL # OF UNITS 2 OBJECT STRUCK Guardrail

4

TRIBAL RESERVATION

1

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

DATE OF COLLISION 12 - 20 - 2013 1313 31 7 50 N  E  IN  S  W  OF  1235

4

ON (PRIMARY TRAFFIC WAY) INTERSECTION  NON-INTERSECTION

EB SR 532 BLOCK NO. MILE POST  7 00

4a

5

DISTANCE OF (REFERENCE OR CROSS STREET)

0 31 MILES  N  E  FEET  S  W  36TH AVENUE NW

6

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

LAST NAME FIRST NAME MIDDLE INITIAL

7

STREET NEW ADDRESS

CITY STANWOOD ST WA ZIP 982929626

8

CDL RESTRICTIONS ENDORSEMENTS

9

DRIVER'S LICENSE # STATE WA SEX M D.O.B. M/MDD/YYYY

10

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

11

LICENSE PLATE # STATE WA VIN#

12

TRAILER PLATE # STATE TRAILER PLATE # STATE

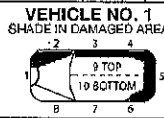
13

VEH. YEAR 2004 MAKE SUBA MODEL LEGACY STYLE 4D VEHICLE TOWED YES  NO  TOWED BY GOVT. VEHICLE YES  NO

14

REGIS. COMPLAINTED

LIABILITY INSURANCE IN EFFECT  INSURANCE CO. CITATION # 3Z0944326 CHARGE SPEED TOO FAST



15

VEHICLE LEGALLY STANDING YES  NO  PEDESTRIAN  PROPERTY OWNER  DAMAGE THRESHOLD MET YES  NO  PHONE

16

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

LAST NAME WSDOT FIRST NAME MIDDLE INITIAL

17

STREET NEW ADDRESS

18

CITY ST ZIP

19

CDL RESTRICTIONS ENDORSEMENTS

20

DRIVER'S LICENSE # STATE SEX D.O.B. M/MDD/YYYY

21

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

22

LICENSE PLATE # STATE VIN#

23

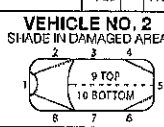
TRAILER PLATE # STATE TRAILER PLATE # STATE

24

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

25

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



26

OFFICER'S NAME (PRINT) ANDERSON, D BADGE OR ID # 304 AGENCY WASHINGTON STATE PATROL



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E296993**

CASE #

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) [REDACTED]

ADDRESS & PHONE # [REDACTED] SEX F D.O.B. MMDDYYYY [REDACTED]

PASSENGER  WITNESS  UNIT # 1 SEAT POS. 3 AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE 2 INJURY CLASS 7 NATURE OF INJURIES BACK

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)

D ANDERSON 12/31/2013  
INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET DATED PLACE SIGNED  
APPROVED BY Arnold, Sgt. J. 237 DATE

BADGE OR ID # 304 ORI # WAWSP0708 TIME POLICE DISPATCHED 1:16 PM TIME POLICE ARRIVED 1:30 PM

## Narrative

Vehicle #1 was traveling eastbound on State Route 532 at milepost 7 in lane two of two lanes. Vehicle #1 was changing lanes into lane one and lost control of their vehicle. Vehicle #1 struck the guardrail on the south side of the roadway. Snow and slush was on the roadway at the time of collision.

# State Route 532 at Milepost 7

