0	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1591971 REPORT NO. E384955	2 3 27						
1 1	INTERSTATE OTHER O	3 0 5						
36	TRIBAL TOTAL # OF 4 OBJECT Guardrail STRUCK Guardrail ODE COUNTY # MILES CITY # ODE COULISION 12 - 11 - 2014 2027 31 S W OF OD45 OD4	1 1 8 28						
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO. DISCRETE NO. DISC	2 0 29						
5	OF (REFERENCE OR CROSS STREET) O 10 MILES V N V E KING THOMPSON RD UNIT 01 MOTOR VEHICLE V CYCLE							
6 5	LAST NAME FIRST NAME MIDDLE INITIAL STREET	O 1 30						
7 8	CITY KENT ST WA ZIP CDL RESTRICTIONS B ENDORSEMENTS	1 2 31						
99	DRIVER'S LICENSE # STATE WA SEX M D.O.B. MMDDYYYY ON DUTY STATUS AIRBAG 3 RESTR. 4 EJECT 1 HELMET USE INJURY CLASS 1 NATURE OF INJURIES	1 2 32						
11 7 0 12 7 0	TRAILER PLATE # STATE STATE STATE STATE STATE STATE	3						
13 3 14 3 15 2	VEH. YEAR 2002 FORD RIOPU STYLE YES NO TOWED BY NORTH COUNTY TOWING GOVE YER NO TOWED BY NORTH COUNTY TOWING YES NO TOWED BY NORTH COUNTY TOWING YES NO TOWED BY NORTH COUNTY TOWING YES NO TOWN NORTH COUNTY TOWING YES NOT YES NOT YOUR YES NOT YOU YES NOT YOUR YES NOT YOUR YES NOT YOUR YES NOT YOUR YES NOT YOU YES NOT YOUR YES NOT YOUR YES NOT YOUR YES NOT YOUR YES NOT YOU YES NOT YOUR YES NOT YOUR YES NOT YOU YE NOT YOU YES NOT YOU YE NOT YOU YES NOT	1 5 33 FROM TO 1 34						
16 2	UNIT 02 MOTOR VEHICLE PEDESTRIAN PROPERTY DAMAGE THRESHOLD MET PHONE (206) 595-7658 LAST NAME FIRST NAME FIRST NAME PROPERTY DAMAGE THRESHOLD MET PHONE (206) 595-7658 MIDDLE INITIAL	4 35 4 36						
18	STREET NEW ADDRESS CONTY REDMOND ST WA ZIP							
20	CDL RESTRICTIONS ENDORSEMENTS DRIVER'S LICENSE # STATE VVA SEX M M.D.O.B. MMDDYYYY	40						
21 22	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE CLASS 1 NATURE OF INJURIES LICENSE PLATE # STATE WA VIN#							
23	TRAILER PLATE # STATE TRAILER PLATE # STATE VEH, YEAR 2012 FORD E250 CG VEHICLE TOWED BY GOVT, VEHICLE TOWED BY YES NO VEHICL	1 41						
25	VEHICLE NO. 2 SHADE IN DAMAGED AREA LIABILITY INSURANCE IN SURANCE CO. INSURANCE IN SURANCE IN SURANCE CO. A POLICY B STANDING CHARGE CHARGE STANDING CHARGE	<u> </u>						
26	OFFICER'S NAME (PRINT) WATKINS, D. BADGE OR ID # AGENCY WASHINGTON STATE PATROL							

PART A PA





CORRECTION

REPORT NO.

E384955

CASE#

	ADDI	TIONAL PERSO	NS INVOLVE	D (PASSENG	ERS AND/O	OR WITNESS	SES ONLY)			
NAME (LAST, FIRST, MIDDLE (NITIAL)										
ADDRESS & PHONE #						SEX	D.O.B. MMDDYYYY			
PASSENGER WITNESS UNI	Τ#	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE			NATURE OF INJU	RIES
NAME (LAST, FIRST, MIDDLE INITIAL)										
ADDRESS & PHONE #						SEX	D.O.B.			
PASSENGER WITNESS UNI		SEAT	AIRBAG	RESTR.	EJECT	HELME:	MMDDYYYY INJURY		NATURE OF INJU	FIES
NAME	#	POS.	AINDAG	NEOIN.	EJEOT	USE	CLASS			
(LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE #	<u> </u>						F I		·	
ADDRESS & PRIONE #						SEX	D.O.B. MMDDYYYY			
PASSENGER WITNESS UNI	Т#	SEAT POS.	AIRBAG	RESTR.	EJECT	HELME USE	T INJURY CLASS		NATURE OF INJU	RIES
			DI	AGRAM						
						•			IND	ICATE NORTH BY ARROW
Please see subseq	uent diagra	am page								
										\bigcirc
		•								
			N/	ARRATIVE						
Please see subseq	uent narra	tive page(s)							
		-								

I CERTIFY (DECLARE) UNDER PENA	ALTY OF PERJURY	Y UNDER THE LAW	S OF THE STAT			THE FOREG	OING IS TRUE AN	ID CORRE	ECT. (RGW 9A	72.085)
D. WATKINS	- DE	UNIT OR DIST.	DET	12/19/ DATED	2014	<u> </u>	ACE SIGNED			
INVESTIGATING OFFICER'S SIGNATURE SI		OINT OR UIST.	ŲE	DATED	<u> </u>	PL	AVE OIGNED		······································	
SLUAN, SUT.	IVI. 190									
BADGE OR ID # 310	ORI#	WAWSP07	15	Ī	IME POLICE DI	SPATCHED 8	:27 PM	TIME POI	LICE ARRIVED	8:27 PM

	SUPPLEMENTAL POLICE TRAFFIC	REP	1 1 8 27	
	COLLISION REPORT	CASE #		2
1 1	COMMERCIAL MOTOR CARRIER		INTERSTATE INTRASTATE	3
2 1	UNIT # USDOT	ICC#	VEHICLE TYPE CARGO BODY TYPE	1 28
	CARRIER NAME			2
³ 6	CARRIER ADDRESS			3
<u></u>	CITY	ST	ZIP	
4	NAME # SOURCE AXLES GVWR	PLACARD	+ NAME IF NO NUMBER	0 1 29
4a	ADDITIONAL UNITS	DAMACE TURES	HOLO MET PHONE	<u> </u>
5	UNIT # 3 MOTOR PEDAL PEDESYRIAN	PROPERTY DAMAGE THRES	HOLD MET PHONE	
	LAST NAME	FIRST NAME	MIDDLE INITIAL	30
65	STREET NEW ADDRESS			
۰	CITY	st WA	ZIP	
-	GDL RESTRICTIONS	END	ORSEMENTS	1 2 31
7	DRIVER'S LICENSE #	STATE WA SEX F D.	O.B. OYYYY	2
8	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT	1 HELMET INJURY 1	NATURE OF INJURIES	3
9	LICENSE PLATE #	VIN#		1 32
10	TRAILER PLATE # STATE	TRAILER PLATE #	STATE	2
11 7 0	VEH. YEAR MODEL STYLE C300 4D	VEHICLE TOWED TOWED BY	GOVT. VEHICLE	3
12	LIABILITY INSURANCE CO		SHADE IN DAMAGED AREA	
13 3	LIABILITY NSJRANCE INSUPANCE CO & POLICY # VEH CILE YES NO CITATION # STANDING	OHARGE	9 TOP 10 BOTTOM 8 7 6	5 1 33
14	UNIT # 4 MOTOR PEDAL- PEDESTRIAN	PROPERTY DAMAGE THRES		*ROM TO
15 2	LAST NAME WA STATE DOT	FIRST NAME	MIDDLE INITIAL	4 35
16	STREET PO BOX 330310			30
	CITY SEATTLE	st WA	zip 98133	37
17	CDL RESTRICTIONS	ENC	DORSEMENTS	38
18	DRIVER'S LIGENSE #	STATE SEX D.	O.B.	39
19	ON DUTY STATUS AIRBAG RESTR. EJECT	HELMET INJURY USE CLASS	NATURE OF INJURIES	40
20	LICENSE PLATE #	WH.		
21	TRAILER PLATE # STATE	TRAILER PLATE #	STATE	
22	VEH, YEAR MAKE MODEL STYLE	VEHICLE TOWED TOWED BY	GOVT, VEHICLE YES NO	
23	REGISTERED OWNER INFO.		SHADE IN DAMAGED AREA	1 1 41
24	LIABILITY INSURANCE INSURANCE CO & POLICY # PUBLICITY YES NO CITATION # STANDING	CHARGE	1 9 TOP 10 BOTTOM 5	42
	I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE S		6 7 6 IS TRUE AND CORRECT. (ROW 9A.72.085)	
ne l	D. WATKINS INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST DET	12/19/2014 DATED:	PLACE SIGNED	
25		APPROVED BY	PAGE 3 OF 5]
28	BADGE OR ID# 310 ORI # WAWSP0715	SLOAN	I AGE O OF O	

Report Number: E384955

Narrative

UNITS 1,2 WERE TRAVELING SB ON I-5 AT MP 207. UNIT 1, TRAVELING IN LANE 2 OF 3 ATTEMPTED TO CHANGE LANES TO LANE 3 OF 3. UNIT 1 STRUCK THE RIGHT FRONT OF UNIT 2 WHICH WAS TRAVELING IN LANE 3 OF 3. UNIT 1 LOST CONTROL AND SLID OFF THE LEFT SHOULDER STRIKING THE GUARDRAIL AND COMING TO REST IN THE MEDIAN. DEBRIS FROM THE IMPACT TRAVELED OVER THE CONCRETE BARRIER AND INTO THE NORTHBOUND LANE. UNIT 3, TRAVELING NB ON I-5 IN LANE 3 OF 3 WAS STRUCK BY DEBRIS FROM THE COLLISION.

UNIT 1 SUSTAINED HEAVY DAMAGE TO THE FRONT OF THE VEHICLE. UNIT'S 2 AND 3 SUSTAINED MINOR DAMAGE.

UNIT 1 MADE AN UNSAFE LANE CHANGE WHICH RESULTED IN THE COLLISION.

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I-5 MP 207



