

<b>(2)</b>	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. E236384	3 2 27
	INTERSTATE GITY STREET FIRE RESULTED CASE # 13-002876	2
1 1	STATE ROUTE V OTHER STOLEN VEHICLE CODING  COUNTY RD PRIVATE WAY   HIT & RUN INVOLVED	3
2 2	TRIBAL RESERVATION 2 OBJECT STRUCK Guardrail	1 28
3 1	M M D D Y Y Y Y TIME (2400)   COUNTY#   MILES   N D E V IN D   O745	3
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO.	
48	EB SR 531 MILE POST V 4 60	0 1 29
5	DISTANCE  O 30 MILES V N E 172ND ST NW  172ND ST NW	
	UNIT 01 MOTOR PEDAL- CYCLE DAMAGE THRESHOLD MET VES NO	30
62	LAST NAME FIRST NAME MIDDLE INITIAL INITIAL	
	STREET NEW ADDRESS CO.	
7	CITY         STANWOOD         ST         WA         ZIP         982927801	1 2 31
8	CDL RESTRICTIONS ENDORSEMENTS	2
9 9	DRIVER'S LICENSE # STATE WA SEX F MMDDYYYY	3
10	ON DUTY STATUS AIRBAG 6 RESTR. 4 EJECT 1 HELMET USE STATUS 6 NATURE OF INJURIES FACE IMPACT AND POSSIBLE ARM INJURY	1 32
11 3 5	LICENSE PLATE # AFP0358 STATE WA VIN	2
12	TRAILER PLATE# STATE TRAILER PLATE# STATE	3
13 4	VEH. YEAR 1997 MAKE HOND CIVCP STYLE VEHICLE TOWED BY GOVT VEHICLE NO. 1	8 4 33
14	SHADE IN DAMAGED AREA  LIABILITY INSURANCE IN INSURANCE CO	FROM TO
15 2	VENUE VES NO CITATION # CHARGE NEG DRIVING 2 NO INSURANCE STANDING	
16	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY VENICUE DAMAGE THRESHOLD MET PHONE (206) 440-4497	4 35
	LAST NAME WA DEPT OF TRANSPORTATION FIRST NAME MIDDLE INITIAL	36
17	STREET PO BOX 330310	38
18	CITY SEATTLE ST WA ZIP 98113	39
19	CDL RESTRICTIONS ENDORSEMENTS	40
20	DRIVER'S LICENSE # SEX D.O.B. MMDDYYYY	<u>                                     </u>
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE CLASS NATURE OF INJURIES	
22	LICENSE PLATE # VIN#	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41
24	VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVT. VEHICLE YES NO YES NO YES NO YEAR IN DAMAGED AREA	42
	LIABILITY INSURANCE INSURANCE CO 8 POLICY # 9 TOP 5	
25	STATION BADGE OR ID # AGENCY	
26	GORT, S. 0598 WASHINGTON STATE PATROL PAGE 01 OF 4	

PART A 3000-345-159 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





REPORT NO.

E236384

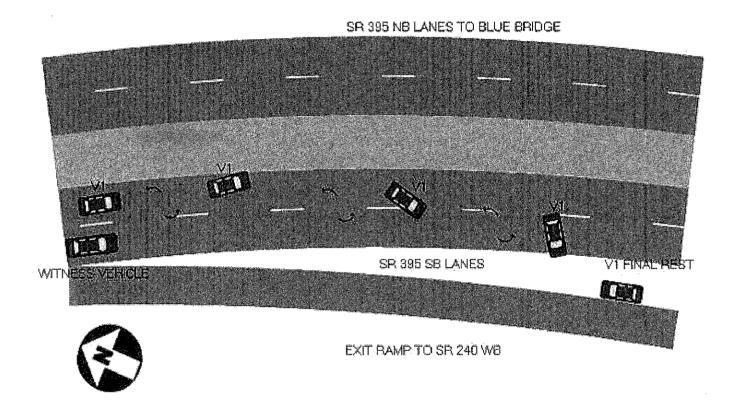
CASE#

13-002876

			ADDITI	ONAL PERS	ONS INVOLV	ED (PASSENG	ERS AND/C	H WILNESSE	S ONLY)			
NAME (LAST, FIRST, MIDDLE I	NITIAL)											
ADDRESS & PHONE #				·				SEX	D.O.B. MMDDYYYY			
PASSENGER V	VITNESS	UNIT#	S	EAT OS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS		NATURE OF INJUI	PIES
NAME (LAST, FIRST, MIDDLE	NITIAL)					,						
ADDRESS & PHONE #								SEX	D.O.B. MMODYYYY	-	-	
PASSENGER   \	VITNESS 🔲	UNIT#	S	EAT OS.	AIRBAG	RESTR.	EJEČT	HELMET USE	INJURY CLASS		NATURE OF INJUI	RIES
NAME (LAST, FIRST, MIDDLE	NITIAL)											
ADDRESS & PHONE #		<u>'</u>						SEX	D.O.B. MMDDYYYY	-	]-[	
PASSENGER 1	VITNESS	UNIT #	S	EAT OS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	$\exists$	NATURE OF INJU	9168
	,	<u> </u>				IAGRAM			<u> </u>			
					<del>_</del>						IND	ICATE NORTH BY ARROW
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Please s	ee subs	equent	narrati	ve page(	s)							
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								·		,		
I CERTIFY (DECLA	RE) UNDER F	PENALTY ÖF	PERJURY (	UNDER THE LA	WS OF THE STA			THE FOREGO	ING IS TRUE AN	ID COR	RECT. (RCW 9A	72.085)
S. GORT	Electric electr	ATUDE	<u> </u>	UNIT OR DIS	OF DET	4/5/20	13	DI A	CE SIGNED			
	nott, Sgt.			ONIT OR DIS	) Ι, ŲΕΙ	DATED		DATE	AE OIGINED			
BADGE OR ID #	0598		ORI#	WAWSPO	701		TIME POLICE DI	ISPATCHED 61	53 AM	TIME P	OLICE ARRIVED	7:03 AM
	10000			V U I C	~ .			0.	1181	L		1

#### **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.



0	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1591971  REPORT NO. E223938	0 1 27
12	INTERSTATE GITY STREET RESULTED STOLEN GOAL NOT NOW.	<sup>2</sup> 0 3
12	STATE ROUTE V OTHER VEHICLE LOCAL AGENCY 13-001 133-001  COUNTY RD PRIVATE WAY INVOIVED	3
2 1	TRIBAL OBJECT Guardrail Guardrail	1 28
3 4	M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#    DATE OF COLLISION 1 - 27 - 2013	3
4	ON (PRIMARY TRAFFIC WAY)  INTERSECTION NON-INTERSECTION BLOCK NO. DO GO	
4a	MILE POST V	0 1 29
5	DISTANCE  100 MILES N S V W SR 240	
	UNIT 01 MOTOR VEHICLE V SEDAL.  OYOLE PHONE   30	
6 6	LAST NAME FIRST NAME MIDDLE INITIAL	
	STREET NEW ADDRESS	
7	CITY KENNEWICK ST WA ZIP	1 2 31
8	CDL RESTRICTIONS ENDORSEMENTS	2
9	DRIVER'S LIGENSE # STATE WA SEX F D.Q.B. MINDOYYYY	3
10	ON DUTY STATUS AIRBAG 2 RESTR. 1 EJECT 1 HELMET 2 INJURY 6 NATURE OF INJURIES LEFT SHOULDER, LEFT ARM, RIBS, LUNG	1 32
11 5 5	LICENSE STATE WA VIN#	2
12	TRAILER PLATE # STATE PLATE # STATE	3
	VEH. YEAR 1998 MAKE HOND ACCORD STYLE VEHICLE TOWED BY ACTION TOWING, PASCO GOVT. VEHICLE VES NO ACTION TOWING, PASCO	1 5 33
13 3	REGISTERED OWNER INFO.  VEHICLE NO. 1 SHADE IN DAMAGED AREA  LIABILITY INSURANCE  8 POLICY B  1 NEFFOT  1	FROM TO
14	LIABITY INSURANCE V \$ POLICY # S P P P P P P P P P P P P P P P P P P	34
15 1	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY VEST NO PHONE (509) 545-2202	1 35
16	LAST NAME DEPT OF TRANSPORTATION FIRST NAME MIDDLE INITIAL	36
17	STREET NEW ADDRESS 1816 N 4TH ST	9 7 37
18	OTTY PASCO ST WA ZIP 99301	38
19	CDL RESTRICTIONS ENDORSEMENTS	39
20	DRIVER'S LICENSE # SEX D.O.B	40
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET INJURY CLASS NATURE OF INJURIES	
22	LICENSE PLATE # VIN#	
23	TRAILER PLATE # STATE PLATE # STATE	1 41
24	VEH, YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVT, VEHICLE TOWED BY YES NO YES NO	42
-	REGISTERED OWNER INFO.  VEHICLE NO. 2 SHADE IN DAMAGED AREA  1 INSURANCE CO	
92	LIABERTY INSURANCE NO. STARTON # CHARGE  INSURANCE OF A POLICY # 10 BOTTOM # CHARGE  CHARGE	
25	GRANT, S.  BADGE OR ID # AGENCY WASHINGTON STATE PATROL	

PART A 3000 345-155 F (7705)
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





REPORT NO.

E223938

CASE #

ADDITIONAL PERSONS INVOLVED (PASSE	NGERS AND/OR WITNESSES ONLY)	
NAME (LAST, FIRST, MIDDLE INITIAL)		
ADDRESS & PHONE #	SEX F D.O.B.	
PASSENGER WITNESS UNIT # 1 SEAT 9 AIRBAG 2 RESTR.	1 EJECT 3 HELMET 2 INJU	
NAME LAST, FIRST, MIDDLE INITIAL)		
ADISTROA MIDURE INTONIA	asy M D.O.B.	
	SEX M D.O.B.	
PASSENGER WITNESS UNIT # 1 SEAT 70S. 3 AIRBAG 2 RESTR.	1 EJECT 1 HELMET 2 INJU	JRY 1 NATURE OF INJURIES
NAME LAST, FIRST, MIDDLE INITIAL)		
ADDDESS 2 PHONE #	SEX M D,O.B.	
SEAT		
PASSENGER WITNESS UNIT # SEAT POS. AIRBAG RESTR.		URY NATURE OF INJURIES
DIAGRA	VI	
Diamaga and authorized dimension in the		INDICATE NORTH BY ARROW
Please see subsequent diagram page		
NARRAT	IVE	
Please see subsequent narrative page(s)		
	INIOSON TO LOTTING CONTROL OF THE	HE AND ADDREAT (DAILY OF TO COS)
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WAS		ue and correct. (RCW 9A.72.085)
· · · · · · · · · · · · · · · · · · ·	1/2013	
NVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET DATE	D PLACE SIGNED	)
APPROVED BY WILSON, SGT. D. 267	DATE	
BADGE OR ID # 354 ORI # WAWSP0308	TIME POLICE DISPATCHED 5:23 AM	TIME POLICE ARRIVED 5:25 AM





REPORT NO.

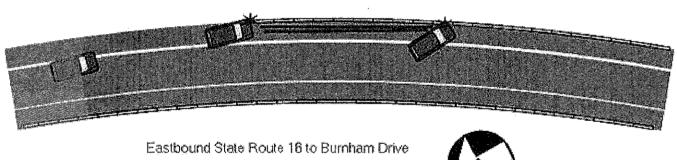
E223938

CASE#

ADDITIONAL PERSONS INVOLVE	D (PASSENGERS AND/OR WITNESSES ONLY)
NAME (LAST, FIRST, MIDDLE INITIAL)	
ADDRESS & PHONE 1	SEX M D.O.B.
PASSENGER WITNESS V UNIT # SEAT AIRBAG	RESTR. EJECT HELMET INJURY CLASS NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)	
ADDISES A DIVINITI	SEX M D.O.B.
PASSENGER WITNESS UNIT # SEAT AIRBAG	RESTR. EJECT HELMET INJURY NATURE OF INJURIES
NAME (LAST, PIRST, MIDDLE INITIAL)	
ADDRESS & PHONE #	SEX D.O.B.
PASSENGER WITNESS UNIT # SEAT AIRBAG	RESTR. EJECT HELMET INJURY NATURE OF INJURIES CLASS
	IAGRAM
	INDICATE NORTH BY ARROW
Please see subsequent diagram page	
· N	ARRATIVE
Please see subsequent narrative page(s)	
	THE OF WASHINGTON THAT THE EXDENOUNCE THE AND CARRED THOM AS TO SEE
	TE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)  1/31/2013
S. GRANT INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET	DATED PLACE SIGNED
APPROVED BY WILSON, SGT. D. 267	DATE
BADGE OR ID# 354 ORI# WAWSP0308	TIME POLICE DISPATCHED 5:23 AM TIME POLICE ARRIVED 5:25 AM

## **Narrative**

VEHICLE 1 WAS SB ON SR395 AT A HIGH RATE WHEN THE DRIVER LOST CONTROL SRUCK THE INSIDE GUARD RAIL, OVERCORRECTED AND CROSSED BOTH LANES GOING THROUGH THE OUTSIDE GUARDRAIL AND DOWN AN EMBANKMENT. THE VEHICLE WAS DESTROYED IN THE COLLISION AND WASHINGTON DEPARTMENT OF TRANSPORTATION HAD 9 SECTIONS OF GUARDRAIL AND 11 POST DAMAGED IN THE COLLISION. TWO OF THE THREE OCCUPANTS IN THE VEHICLE WERE INJURED AND TRANSPORTED BY AMBULANCE TO LOURDES MEDICAL CENTER AS A RESULT OF THE COLLISION. VEHICLE WAS TOWED BY ACTION TOWING OF PASCO



	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1591971  CASE #	3 1 27
1 2	INTERSTATE GITY STREET HERE RESULTED RESULTED STOLEN STOLEN STOLEN LOCAL AGENCY	3
2 3	COUNTY PD PRIVATE WAY HIT & RUN INVOLVED CODING  TRIBAL RESERVATION  TOTAL # OF 1 OBJECT STRUCK Guardrail	1 28
3 1	M M D D Y Y Y Y TIME (2400)	3
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION V  STATE ROUTE 16  BLOCK NO.	0 1 29
5	O STANCE  O 15 MILES V N E BURNHAM DR  OF (REFERENCE OR CROSS STREET)  BURNHAM DR	
	UNIT 01 MOTOR VEHICLE VEHICLE CYCLE DAMAGE THRESHOLD MET VES NO PHONE	30
6 2	LAST NAME A MIDDLE INITIAL	
	STREET NEW ADDRESS.	
7	CITY ST WA ZIE	1 2 31
8	COL RESTRICTIONS ENDORSEMENTS	z
9 9	DRIVER'S LICENSE# STATE WA SEX F MMDDYYYY	3
10	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES	32
1160	LIGENSE PLATE # WA VID	3
12	TRAILER PLATE # STATE TRAILER PLATE # STATE	°
13 6	VEH. YEAR 2005 JEP CHEROKEE UT VEHICLE TOWED BY TOWN AND COUNTRY  BEGISTERED OWNER INFO.  WEHICLE NO. 1 SHADE IN DAMAGED AREA	7 3 33 HIOM TO
14	LIABILITY INSURANCE IN STRANCE OF STORY ST	34
15 2	WHEELS OFF ROADWAY  STANDING TEST OFF ROADWAY  B 7 6  WHEELS OFF ROADWAY  B 7 6  UNIT 02 MOTOR PEDAL PEDESTRIAN PROPERTY OWNER PHONE  OWNER PHONE  PROPERTY OWNER PHONE	4 35
16	LAST NAME FIRST NAME MIDDLE INITIAL	36
17	STREET NEW ADDRESS .	37
18	CITY ST ZIP	38
19	CDL RESTRICTIONS ENDORSEMENTS	39
20	DRIVER'S LIGENSE # STATE SEX D.O.B. MMDDYYYY	40
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE CLASS	
22	LICENSE PLATE VIN#	
23	TRAILER PLATE # STATE STATE STATE	1 41
24	VEH, YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVT VEHICLE YES NO	42
	REGISTERED OWNER INFO.  VEHICLE NO. 2 SHADE IN DAMAGED AREA  LIABILITY INSURANCE A POLICY # 9 TOP 5	
25	VEHICLE YES NO CITATION # CHARGE	
26	PIGOTT, K.  BADGE OR ID #  963  AGENCY WASHINGTON STATE PATROL	

PART A PAGE 01 OF 4 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





REPORT NO.

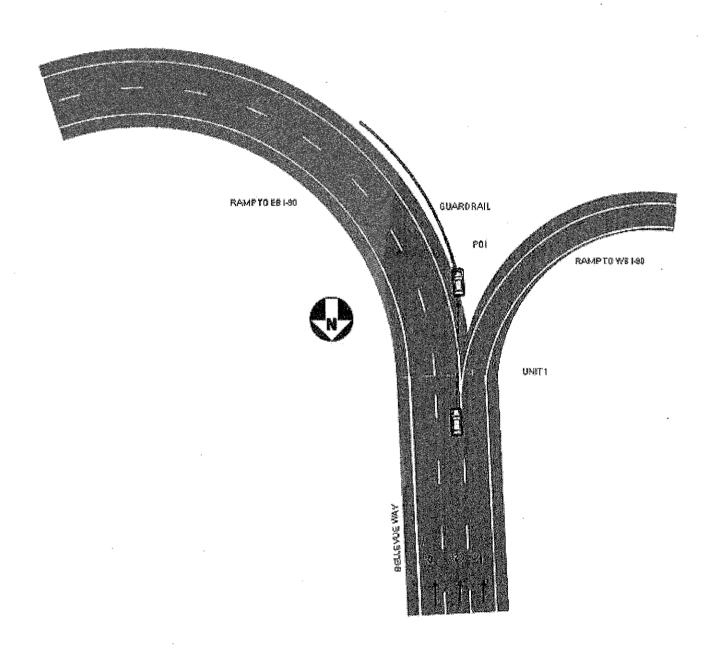
E219479

CASE #

	ADDITIONAL PERSONS INV	OLVED (PASSENGERS AN	D/OR WITNESSES ONLY)	
AME AST, FIRST, MIDDLE INITIAL)	TABLITICITY IL 1 100 TO 1144	( )		
DDRESS & PHONE #			SEX D.O.B.	
SSENGER WITNESS UNIT#	SEAT AIRBAG	RESTR. EJEC	F HELMET INJURY CLASS	NATURE OF INJURIES
AME AST, FIRST, MIDDLE INITIAL)				
DDRESS & PHONE #			SEX D.O.B.	-
ASSENGER WITNESS UNIT #	SEAT AIRBAG	RESTR. EJEC	T HELMET INJURY CLASS	NATURE OF INJURIES
AME ST, FIRST, MIDDLE INITIAL)				
DRESS & PHONE #		·	SEX D.O.B.	n
ASSENGER WITNESS UNIT #	SEAT POS. AIRBAG	RESTR. EJEC	T HELMET INJURY CLASS	NATURE OF INJURIES
		DIAGRAM		
				INDICATE NORTH BY ARROW
Please see subsequent	: diagram page			
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		NARRATIVE		
<u>Please see subsequen</u>	t narrative page(s)			
				· .
ERTIFY (DECLARE) UNDER PENALTY C	DE PERJURY UNDER THE LAWS OF TH	HE STATE OF WASHINGTON TI	HAT THE FOREGOING IS TRUE AND	CORRECT. (RCW 9A.72.085)
. PIGOTT	, grageri gradet ind entro of th	1/9/2013	gracero to moc Ano	
/ESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED	
PPROVED BY SHADES, D. 285			DATE	
DADGE OB ID # 1062	OPI # \\/\/\\\\\\\\	TIME BOLL	DE DISPATCHED 7:46 A.M. TI	ME POLICE ARRIVED 8:13 A.M.

## **Narrative**

Vehicle 1 was Eastbound State Route 16 to Burnham Drive on the exit ramp. Vehicle 1 left the roadway to the left and struck the guard rail. Vehicle 1 went up the guard rail approximately 30 feet before coming to rest.



	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. E218283	1 0 1 27
12	INTERSTATE CASE # CASE # STATE ROUTE OTHER CHICLE CASE # LOCAL AGENCY WAW/SP0218	\$
2 2	COUNTY RD PRIVATE WAY HIT & RUN INVOLVED	1. 28
	TRIBAL RESERVATION TOTAL # OF UNITS 2 OBJECT STRUCK Guardrail	2
3 4	M M D D Y Y Y Y TIME (2400)   COUNTY # MILES   N E   IN	3
4	ON (PRIMARY TRAFFIC WAY)  INTERSECTION NON-INTERSECTION BLOCK NO.	
4a	BELLEVUE WAY  DISTANCE  OF (REFERENCE OR CROSS STREET)  BLOCK NO.  MILE POST   9 00	O 1 29
5	0 01 MILES V N V E EBI-90	
	UNIT 01 MOTOR VEHICLE V PEDAL- CYCLE DAMAGE THRESHOLD MET PHONE PHONE	30
¢ 2	LAST NAME FIRST NAME MIDDLE INITIAL	
	STREET NEW ADDRESS.	
7	MERCER ISLAND ST WA ZIP	1 2 31
8	CDL RESTRICTIONS J ENCORSEMENTS	2
<u>9</u>	DRIVER'S LICENSE # STATE V/A SEX M D.O.B. MMDDYYYY	3
10	ON DUTY STATUS AIRBAG 3 RESTR. 9 EJECT 1 HELMET INJURY 1 NATURE OF INJURIES	32
1160	LICENSE PLATE # STATE WA VIN#	2
12	TRAILER PLATE # STATE TRAILER PLATE # STATE	3
13 6	VEH. YEAR 2006 MAKE TOYT PRIHB STYLE 4H VEHICLE TOWED BY ISSEN VEHICLE NO. 1  BEGIETTERE OND BE IMPO.  VEH. YEAR 2006 MAKE TOYT PRIHB BY ISSEN VEHICLE NO. 1 SHADE IN DAMAGED AREA	1 5 33
14	LIABILITY INSURANCE V INSURANCE CO S POLICY # 9 TOP 10 BOTTOM 1 CHARGE	34
15 2	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY DAMAGE THRESHOLD MET PHONE (425) 739-3757	1 35
16	LAST NAME DOT FIRST NAME MIDDLE INITIAL	36
17	STREET T 10022 NODTUDUD MAY NE	2 2 37
18	CITY BELLEVUE ST WA ZIP 98004	38
18	CDL RESTRICTIONS ENDORSEMENTS	39
20	DRIVER'S LICENSE # STATE SEX D.O.B	40
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET UNJURY CLASS NATURE OF INJURIES	
22	LICENSE PLATE # STATE VIN#	
23	TRAILER STATE TRAILER STATE	[4] <sub>44</sub>
مار م	PLATE #         PLATE #         PLATE #           VEH, YEAR         MAKE         MODEL         STYLE         VEHICLE TOWED BY YES NO YES	41
24	REGISTERED OWNER INFO.  VEHICLE NO. 2 SHADE IN DAMAGED AREA	
	LIABILITY INSURANCE INSURANCE CO REPOLICY # 2 TOP 10 BOTTOM # CHARGE  CHARGE  CHARGE  CHARGE	
25	OFFICER'S NAME (PRINT)  JAMES, P  BADGE OR ID a  AGENCY WASHINGTON STATE PATROL	

PART A 3000 345 159 F 17/05 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





REPORT NO.

E218283

CASE#

		ADDITIONAL PERS	ONS INVOLV	ED (PASSENC	ERS AND/OR	WITNESSE	S 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 INJU	RIES
NAME (LAST, FIRST, MIDDLE INITIAL)										
ADDRESS & PHONE #						SEX	D.O.B. MMODYYYY			
PASSENGER WITNESS	UNIT#	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS		NATURE OF INJU	RIES
NAME (LAST, FIRST, MIDDLE INITIAL)			•			·	· · · · · · · · · · · · · · · · · · ·			
ADDRESS & PHONE #						SEX	D.O.B. MMODYYYY		-	
PASSENGER WITNESS	UNIT #	ŞEAT POS.	AIRBAG	RESTR,	EJECT	HELMET	INJURY CLASS		NATURE OF INJU	RIES
· · · · · · · · · · · · · · · · · · ·			<u>-   -       -  </u>	DIAGRAM	<del> </del>					
				n mrs ne"h1#1		······································			IND	ICATE NORTH
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Please see subs	sequent	narrative page/		VARRATIV	<b>L</b>					
		,,ai, aaro pago(	<del>-</del> /							
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									· · · · · · · · · · · · · · · · · · ·	
I CERTIFY (DECLARE) UNDER	PENALTY OF	PERJURY UNDER THE LA	WS OF THE STA			HE FOREGO	ING IS TRUE AN	VD CORF	RECT. (RCW 9A	.72.085)
P JAMES INVESTIGATING OFFICER'S SIGN	NATURE	UNIT OR DIS	T. DET	1/3/20	113	FΙΔ	CE SIGNED			
APPROVED BY Alexander,				2/11/20	DAT		And Albert			
BADGE OR ID # 1239		ORI# WAWSP(	)218		TIME POLICE DISP.	ATCHED 2:	56 AM	TIME PO	DLICE ARRIVED	3:03 AM

### **Narrative**

VEHICLE ONE WAS TRAVELING SB BELLEVUE WAY ON THE RAMP TO EB I-90. VEHICLE ONE TRAVELED STRAIT THROUGH THE GORE POINT AND THE MEDIAN AND COLLIDED WITH THE END OF A GUARDRAIL.

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1591921	1 6 27
	INTERSTATE CITY STREET   FIRE RESULTED   CASE #	2
1	STATE ROUTE OTHER STOLEN COOLING CODING	3
2	TRIBAL REBERVATION  TOTAL * OF U Q OBJECT GAURDRAIL / UNDER PASS	1 8 28
3	M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#	2
$\Box$	ON (PRIMARY TRAFFIC WAY)  INTERSECTION   NON-INTERSECTION   NON-INTERSECTION	الليا")
42	33 I5 BLOCK NO. ☐ 208 , 67	0 1 29
<u>5</u> 3	OF (REFERENCE OR CROSS STREET)  OF (REFERENCE OR CROSS STREET)  OF (REFERENCE OR CROSS STREET)	
	DAMAGE/THRESHOLD MET PHONE	<del>   </del>
<del></del> 1	UNITOT: VEHICLE GALL CACLE	30
e 1	LAST NAME INITIAL	
	STREET NEW ADDRESS OF THE STREET NEW ADDRESS	
7	CITY. ST ZIP	1 0 5 31
a	GOL CLASS 5 ENDORSEMENTS 15 RESTRICTIONS 21	2
9	DRIMER'S:  UCENSE # SEX M D.O.B.  MMCDYYY	3   1   20
10	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT   HELMET USE INJURY   NATURE OF INJURIES NOWE STATED	32
1170	LICENSE PLATE # STATE 73 C VINH	3
12	TRAILER STATE TRAILER STATE STATE	<u>"                                    </u>
13 3	VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED BY YES NO DISCUSS CLASS C VEHICLE NO. 1 SCHOOL OF THE STATE OF THE S	5 J 33
14	WAELITY INSURANCE INSURANCE A POLICY A 910P	FROM TO
15 }	VENCUE VENCUE VENCUE DE PEDESTRIAN PEDESTRIAN PEDESTRIAN DAMAGE THRESHOLD MET PHONE	35
16		35
	LAST NAME   WS DOT   FIRST NAME   MIDDLE INITIAL	37
<u>ත</u>	STREET. PO BOX 330310	38
18	SEATTLE ST WAZP 98133	39
19	COL ENDORSEMENTS RESTRICTIONS	40
20	DRIVER'S LICENSE#. SEX DO.B. MMDDYYYY -	L
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26	OFFICER'S NAME (PRINT)  J. SAUCERMAN  BADGE OR 10 / AGENCY  WSP	
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PART A 3000-345-169 R (7/08)

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





REPORT NO. 3 4 6 7 9

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	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. 2945911	4 27
	INTERSTATE CITY STREET CITY STREET CASE #	2
1	STATE ROUTE OTHER OF STOLEN LOCAL AGENCY	3
25	TRIBAL RESERVATION  HIT & RIUN INVOLVED  TOTAL # OF UNITS . D Z OBJECT STRUCK CALL ZAIL	28
3	M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#	2
4	ON (PRIMARY THAFFIG WAY) INTERSECTION INDICATED IN NON-INTERSECTION INTERSECTION IN	
48	STATE ZOUTE 77 BLOCK NO. [ 1] 60	29
52	OF (REFERENCE OF CROSS STREET)	
	UNIT 01 MOTOR PEDAL. DAMAGE THRESHOLD MET PHONE	30
6	LAST NAME FIRST NAME MIDDLE INITIAL .	
	STREET NEW ALDORESS	
7	CITY: TUPENISH ST WAZE	1 2 31
8	CDL ENDORSEMENTS RESTRICTIONS	2
9	DRIVER'S LICENSE # STATE JA SEX M MDDYYYY DC - 19 79	3
10	ON DUTY STATUS AIRBAG 7 RESTR. 4 EJECT / HELMET USE CLASS /	32
11	LICENSE PLATE # STATE LV A VINH	3
12	TRAILER PLATE # STATE STATE STATE	
134	VEH. YEAR OI MAKE HEV MODEL NE STYLE 4 DQ VEHICLE TOWED TOWED BY HOULED SOVE VEHICLE YES NO SHADE IN DAMAGED AREA	3 7 33
14	LIABILITY INSURANCE INSURANCE INSURANCE CO & POLICY OF THE PROPERTY OF THE PRO	34
15	UNIT 02 MOTOR PEDAL PEDESTRIAN PROPERTY DAMAGE THRESHOLD MET PHONE CYCLE PEDESTRIAN OWNER PROPERTY OWNER PHONE PHONE	4/ 35
16	LAST NAME DEDT DE RANGONATION FIRST NAME MIDDLE INITIAL	36
17	STREET STREET 2385 23 1 FORT 20	37
18	CITY TOPENSH ST 4 ZIP 78748	36
19	COL ENDORSEMENTS RESTRICTIONS	39
20	DRIVER'S LICENSE # STATE SEX D.O.B. MMDDYYYY	
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS	
22	LICENSE PLATE VINB STATE	
23	TRAILER PLATE * STATE STATE STATE	41
24	VEH, YEAR MAKE MODEL STYLE VEHICLE TOWED YES NO TOWER INFO.  REGISTERED OWNER INFO.  VEHICLE NO. 2 SHADE IN DAMAGED AREA	42
	UABILITY INSURANCE I INSURANCE CO & POLICY / 9 JOP , 5	
25	VEHICLE YES NO CITATION & CHARGE  CHARGE  OFFICER'S NAME (PRINT)  BADGE OR ID  AGENCY	
26	OFFICER'S NAME (PRINT)  ME12  BADGE OR ID  S Z 8  AGENCY  S Z 8  AGENCY  S Z 8	

PART A 30000 3445-1599 PART (7/08)
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





REPORT NO. 79

2945911
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CASE#

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PART B								DAGE	02	3E / ) č

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UNIT #  LAST NAME  STREET NEW ADDRESS  CITY  CDL  DRIVER'S LICENSE #  LICENSE #  LICENSE PLATE #  VEH YEAR  REGISTERED ON  LIABILITY INSURAN  NEFFECT	STATUS  MAK WNER INFO.	MOTO	AIRBAI	G MODE	RESTI	NDORSEM	EJECT STATE		CHAPGE PROPE CWNEF FIRS  STATE HELMET USE	T NAME	SEX SEX		RESTRI D.O.EI	CTION	s	]-[	.(6	S S	DAMAGE  9 10P  10 BOTTO  7  MIDDIO  10 INITIA  10 INITIA  11 INITIA  12 INITIA  13 INITIA  14 INITIA  15 INITIA  16 INITIA  17 INITIA  18 INITI	T. VEHING
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	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. 2980662	1 0 4 27
	INTERSTATE CITY STREET CASE # CASE #	<sup>2</sup> <b>Z 3</b>
12	STATE ROUTE OTHER OTHER DISTOLEN LOCAL AGENCY	3
23	TRIBAL: RESERVATION  TOTAL * OF UNITS	28
3 C	M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#	2
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5	DISTANCE  OF (REFERENCE OF CROSS STREET)  OF (REFERENCE OF CROSS STREET)  OF (REFERENCE OF CROSS STREET)	
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•	LICENSE # STATE WANDDYYYY	1 32
10	CN DUTY STATUS AIRBAG Z RESTR. 4 EJECT   HELMET USE CLASS   NATURE OF INJURIES	2
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12	TRAILER PLATE # STATE STATE STATE	<u> </u>
13 2	PEDISTRIED OWNERSHIP ON BOLL ONE STYLE UT VEHICLE TOWED TOWER OWNERSHIP OWNE	7ROM TO 33
14	NEFFECT INSURANCE CO SPOLICY NO INSURANCE CO	34
16 2	SPANONG. LANGE THE SPANONG THE PHONE	35
16	LAST NAME  UNIT 02 VEHICLE CYCLE PEDESTRIAN OWNER OWNER SES NO SE	36
17	STREET NEW ADDRESS - 8293 SPRING CREEK RD	37
18	CITY PORT OFER MORD ST WAZIP 98367	38
19	CDL ENDORSEMENTS RESTRICTIONS	39
20	DRIVER'S LICENSE # STATE SEX D.O.B. MMD0YYYY	40
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE CLASS	
22	LICENSE PLATE STATE VIN#	
23	TRAILER PLATE # STATE STATE	} . 41
24	VEH, YEAR MAKE MODEL STYLE VEHICLE TOWED BY COVT, VEHICLE YES NO TOWED BY  REGISTERED OWNER INFO.  VEHICLE NO. 2	42
	SHADE IN DAMAGED AREA  LIABILITY INSUFANCE IN POLICY IN 19 10P  1 9 10P	
25	VEHICLE VES NO CITATION A CHARGE	
26	OFFICER'S NAME (PRINT)  TO AGENCY  TO AGENCY  TO AGENCY  DAGE DI OF TO	Oly

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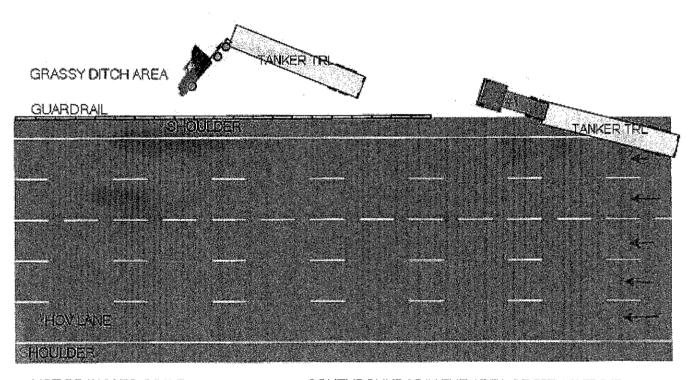


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BADGE OR ID #	122	0	ORI#	W	125008	01	TIME POLICE DISP	ATCHED ) 6	845	TIME POLI	CE ARRIVED 1850
PAR	T B 3000-0	345-160 FI (	7/06)					,		<b>.</b>	AGE 7 OF 7



NOT DRAWN TO SCALE

SOUTHBOUND IS IN THE AREA OF 70TH AVENUE

6	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. E198697	1 4 27
1 1	INTERSTATE CASE #	2 2 3
الم	STATE ROUTE OTHER LOUNTY PD PRIVATE WAY NIVOLVE LOCAL AGENCY CODING	3
² [ ]	TRIBAL # OF UNITS 2 OBJECT STRUCK Guardrail	1 28
3 4	M M D D Y Y Y Y TIME (2400)   COUNTY # MILES   CITY #	3
4	ON (PRIMARY TRAFFIC WAY)  INTERSECTION NON-INTERSECTION BLOCK NO. BLOCK NO. DATE:  OND 1.5	
4a	MILE POST [7] 139 [U1]	O 1 29
5	OF (REFERENCE OR CROSS STREET)  O 34 MILES V N E 70TH AVENUE	
	UNIT 01 MOTOR VEHICLE V PEDAL- CYCLE DAMAGE THRESHOLD MET VES NO	30
6 1	LAST NAME FIRST NAME MIDDLE INITIAL	
	STREET NEW ADDRESS	
7	CITY KENT ST WA ZIP	1 1 2 31
8	CDL A RESTRICTIONS ENDORSEMENTS T, X	2
,9	DRIVER'S LICENSE # WA SEX M D.O.B. WAMDDYYYY	3
10	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE CLASS 1 NATURE OF INJURIES	1 32
11 6 0	LICENSE PLATE # STATE WA VIN#	2
11 6 0	TRAILER PLATE # STATE OH TRAILER PLATE # STATE	3
13 1	VEH. VEAR 2006 MAKE PTRB CONVENT SE VEHICLE TOWED TOWEDBY OWNER REQUESTED  REGISTERED OWNER INFO. 1	1 5 33
14	LIABILITY INSURANCE CF S POLICY # SPOLICY # S POLICY #	ги 34
15 2	VEHICLE VES NO CITATION # CHARGE NEG 2  STANDING NOTOR PEDAL- PROPERTY DAMAGE THRESHOLD MET PHONE	4 35
16	O'NTE OZ VEHICLE CYCLE PELESTRIATO OWNER V YES NO	36
17 3	THE TOTAL DOT NIMAL	37
18	NEW ADDRESS   112114131 AVE SVV	38
	CITY TACOMA ST WA ZIP 98499	39
19	CDL RESTRICTIONS ENDORSEMENTS	40
20	DRIVER'S LIGENSE # STATE SEX D.O.B. MMDDYYYY	<del> </del>
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET INJURY CLASS NATURE OF INJURIES	
22	LICENSE PLATE # STATE VIN#	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41
24	VEH, YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVT, VEHICLE TOWED BY YES NO REGISTERED CWINER INFO.	42
<u>  </u>	SHADE IN DAMAGED AREA  LIABILITY INSURANCE CO	<del></del>
25	VEHICLE VES NO CITATION # CHARGE	
26	JONES, S  BADRE OR ID #  AGENCY WASHINGTON STATE PATROL	

PAGE 01 OF 5 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





REPORT NO.

E198697

CASE#

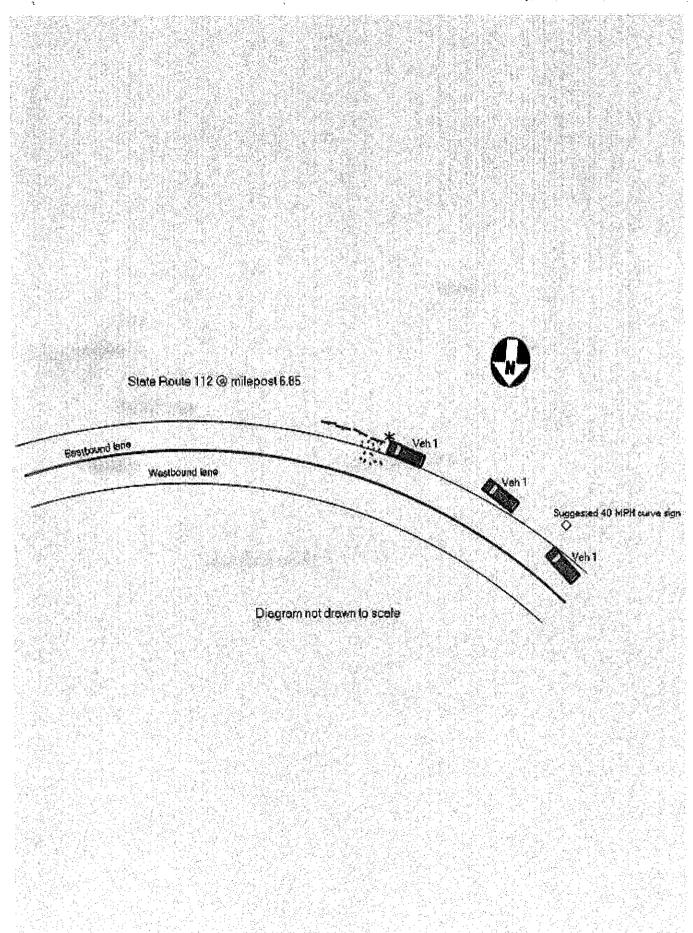
	ADDITIONAL	PERSONS INVOLV	VED (PASSENGE	RS AND/OR	WITNESSES	ONLY)		
NAME (LAST, FIRST, MIDDLE INITIAL)								
ADDRESS & PHONE #					SEX	D.O.B. MDDYYYY		-
PASSENGER WITNESS UNIT	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)								
ADDRESS & PHONE #		•		, .	SEX	D.O.B. MODYYYY	]-	•
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. MDDYYYY	-	-
PASSENGER WITNESS UNIT	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS		NATURE OF INJURIES
			DIAGRAM					
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Please see subsequ	ent diagram p	age						INDICATE NORTH BY ARROW
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1 CERTIFY (DECLARE) UNDER PENAL	TY OF PERJURY UNDER	THE LAWS OF THE ST	TATE OF WASHING	TON THAT TH	E FOREGOIN	G IS TRUE A	ND CORI	RECT. (RCW 9A.72.085)
S JONES			10/16/2					,
INVESTIGATING OFFICER'S SIGNATURE	UN	IT OR DIST. DET	DATED		PLACI	SIGNED		
APPROVED BY Camden, E 394				DATE				
BADGE OR ID # 1/7/	OBL# \\/\A\	M/SDU1U3	TI	ME POLICE DISPA	TCHED 1:5:	1 A M	TIME D	OLICE ARRIVED 5:06 A.M.

	SUPPLEME POLICE TR											RE	PORT NO	р. <mark>Е</mark>	198	697				727
	COLLISION	REPOR	т	013	107			C	ASE #								•••		+	=
1 1	COMMER	CIAL M	OTOR (					<u> </u>					INTERST	ATE	IN.	TRASTAT	TE 🗸	<u> </u>		=
	UNIT #	1	USDOT	13440	6			IC	C#				VEHICL	ETYPE	4	CARGO E TYPE	BODY 3	3	+	
2 1	OARRIER NAME				<b>&gt;</b>								,		- "	•		٦ ' <u> </u>	+	28
3 4	CARRIER ADDRESS	4				<b>P</b>	)											]	<u> </u>	╡
	CITY		The State of the S								ST		ZIP					╡ ³L	Ш.,	
4	NAME SOURCE	4 AX		gv	wr 80	000	)		PLA	CARD 12	203		+ 3	NAME IF	NO NUME	BER		= _	· —	_
4a	ADDITION									<u>v</u> ] ''-								☐		29
5	UNIT#	·	MOTOR VEHICLE	☐ PE	EDAL-	Р	edestrian		PROPE	RTY	DAM. YES	AGE THE	RESHOLD MET	PHONE				Ī		
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	STREET NEW ADDRESS																	ΪL	$\perp$	30
6 1	CITY										ST		ZIP					=		
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7	DRIVER'\$	<u> </u>			1100				GTATE	1	er./		D.O.8.	<del></del>				- 1		31
8	LICENSE #			<u> </u>	1	<u> </u>	<u> </u>	1	STATE	l like	SEX		NATURE OF IN	JURIES		<u> </u>		<u> </u>		
9	ON DUTY	STATUS	AIRU	BAG	RESTR.	<u></u>	EJECT		USE	CL	URY ASS							3		
	LICENSE PLATE #					STATE		VIN#						un.				_		32
10	TRAILER PLATE #	<u></u>			•		STATE			FRAILER PLATE #						STAT	E			Ī
11	VEH, YEAR	MAKE		MODI	EL		STYLE		VEH YES	NO NO	TOW	ED BY				G Y	OVT. VEHICLE NO	] ; [		Ĩ
12	REGISTERED OWN		VSURANCE O	0											SHAL	DE IN DAM	AGED AREA			
13	IN EFFECT VEH CLE YES STANDING		# POLICY #				<del></del>		CHARGE	<del></del>					Į.		TOM 5	[	ROM TO	33
14	UNIT#		MOTOR VEHICLE	PE	EDAL-	] . P	EDESTRIAN		PROPE		DAM YES	AGE THE	ESHOLD MET	PHONE		8 7	- 6	7 5	ROM TO	34
15	LAST NAME					~			FIRS	ST NAME						MIE	DDLE			
16	STREET	1							<u> </u>								TIAL	  -	$\exists$	35
" <u> </u>	NEW ADDRESS												710					╡┟		36 —
17	CITY										\$T		ZIP							37
18	CDL		<del></del>		RES	TRIC	TIONS		1	1	<u></u>		NDORSEMENTS		<del></del>		1.	╡╘	$\perp$	38
19	DRIVER'S LICENSE #			<u> </u>	<u> </u>				STATE	<u></u>	SEX	M	D.O.B. MDDYYYY NATURE OF IN	-			<u>.</u>	<u> </u>		39
	ON DUTY	STATUS	AJRI	BAG	RESTR.		EJECT	<u> </u>	HELMET USE	INJ OL	URY ASS		NATURE OF IN	JURIES				<u> </u>		40
20	LICENSE PLATE #					STATE		VIN#												
21	TRAILER PLATE #						STATE		•	FRAILER PLATE #					•	STAT	E			
22	VEH, YEAR	MAKE		MÒD	EL		STYLE		YES	ICLE TOWED	TÓW	ED BY				G	NOVT, VEHICLE	$\exists$		
23	REGISTERED OWN	_	NIĆI IDANIĆE (	20											SHAL	DE IN DAMA	AGED AREA			41
24	LIABILITY INSURANCE IN EFFECT VEIL CLE YES LEGALLY STANDING		NSURANCE O POLICY # DITATION #						CHARGE		<u>-</u> ,,				J	97 10 BO	TOP 5	Ī		42
	I CERTIFY (DECLA	RE) UNDER	PENALTY OF	PERJURY	UNDER THE	LAW	S OF THE S	TATE O	L F WASHING	STON THAT I	THE FO	REGOIN	IG IS TRUE AND	CORRECT, (	RCW 9A.	6 7 72,085)	6 <sup>—</sup>	ł		
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25			OTOTAL OF						PAIGU:	APPROVE	ЭВҮ		DATE					_		
26	BADGE OR ID# 47	4		ORI W	AWSP	J10:	2			Camden				PA	GE	3 (	DF 5			

## Narrative

Vehicle #1 traveling southbound on I 5 in lane one of five in the area of 70th avenue.

Subject driving Vehicle #1 fell asleep drifted off the roadway to the right striking ten sections of guardrail and the continued off the roadway flipping over onto its side before coming to rest in the ditch.



Q	STATE OF WASHINGTON POLICE TRAFFIC REPORT NO. E1997	36 1 0 4 27
	INTERSTATE CITY STREET FIRE RESULTED CASE # C0818416	2
1 2	STATE ROUTE OTHER STOLEN LOCAL AGENCY WAWSP0811	3
2 3	COUNTY RD PRIVATE WAY	GUARD RAIL 1 28
3 1	M M D D Y Y Y Y TIME (2400) COUNTY# MILES	CITY# 2 0465 3
<del></del> 1		7 0400
4	STATE ROUTE 112	6 85 0 1 29
4a	DISTANCE OF (REFERENCE OR CROSS STREET)	
5	0 08 MILES N E M MILEPOST 6	
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET PHONE YES NO	30
6 1	LAST NAME FIRST NAME	MIDDLE INITIAL
	STREET NEW ADDRESS	
7	CITY ST WA ZIP	1 2 31
8	CDL. RESTRICTIONS ENOCRSEMENTS	2
9 8	DRIVER'S LICENSE# STATE WA SEX M D.O.B. MMDDYYYY	3
10	ON DUTY STATUS AIRBAG 2 RESTR. 1 EJECT 1 HELMET 9 INJURY CLASS 1	1 32
1150	LICENSE PLATE # VA VINA	2
12	TRAILER STATE TRAILER PLATE #	STATE 3
13 2	VEH. YEAR 2003 MAKE DODG CARAVAN VN VN VEHICLE TOWED BY SOL DUC TOWING	GOVT. VEHICLE NO. 1 7 3 33
14		ADE IN DAMAGED AREA
15 2	VEHICLE YES NO CITATION # CHARGE DUI HIT & RUN PROPRTY	10 BOTTOM
16	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY DAMAGE THRESHOLD MET OWNER PHONE	3 35
	LAST NAME WADOT FIRST NAME	MIDDLE INITIAL 9 9 37
17	STREET NEW ADDRESS 1707 S "C STREET	9937
18	OTTY PORT ANGELES ST WA ZIP 98362	39
19 .	CDL HESTRICTIONS ENDORSEMENTS	40
26	DRIVER'S LICENSE # STATE SEX D.C.B. MM00YYYY -	]-
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS	
22	LICENSE PLATE # STATE VIN#	
23	TRAILER PLATE # STATE TRAILER PLATE #	STATE 1 41
24	VEH, YEAR MAKE MODEL STYLE VEHICLE TOWED BY  REGISTERED OWNER INFO.	GOVT, VEHICLE VES NO  VEHICLE NO. 2 ADE IN DAMAGED AREA
	LIAGUITY INSURANCE INSURANCE CO A POLICY #	9 TOP
25	CHARGE  CHARGE  CHARGE  CHARGE  CHARGE  CHARGE  CHARGE	10 BOTTOM 8 7 6
26	NELSON, A. 780 WASHINGTON	STATE PATROL

PART A 3000-345-159 R (7/05)
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





REPORT NO.

E199736

CASE# | C0818416

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 RES	TR. EJE	OT HELI	MET INJURY SE CLASS	NATURE OF INJU	RIES		
NAME (LAST, FIRST, MIDDLE INITIAL)									
ADDRESS & PHONE #				SEX	D.O.B. MMDDYYYY				
PASSENGER WITNESS UNIT #	SEAT POS.	AIRBAG RES	TR. EJE	CT HELI	MET INJURY SE CLASS	NATURE OF INJU	RIES		
NAME (LAST, PIRST, MIDDLE INITIAL)									
ADDRESS & PHONE # SEX D.O.B. MMDDYYYY									
PASSENGER WITNESS UNIT #	SEAT POS.	AIRBAG / RES	TR, EJE	CT HELL		NATURE OF INJU	FJES		
	1 , 00.	DIAG		1 00	J. J.A.O.S				
		DAG	I SATIAL			INIT	ICATE NORTH		
Please see subsequent d	iagram page					INL	ICATE NORTH BY ARROW		
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Please see subsequent r	narrative page(s	)		- itialia.					
	<u> </u>	··							
					<del>,,</del>				
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. NELSON 10/20/2012									
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST.		DATED	_	PLACE SIGNED				
APPROVED BY YACKLIN, SGT. B. 131									
BADGE OR ID # 780	ORI# WAWSP08	312	TIME PO	LICE DISPATCHED	12:54 PM	TIME POLICE ARRIVED	1:00 PM		

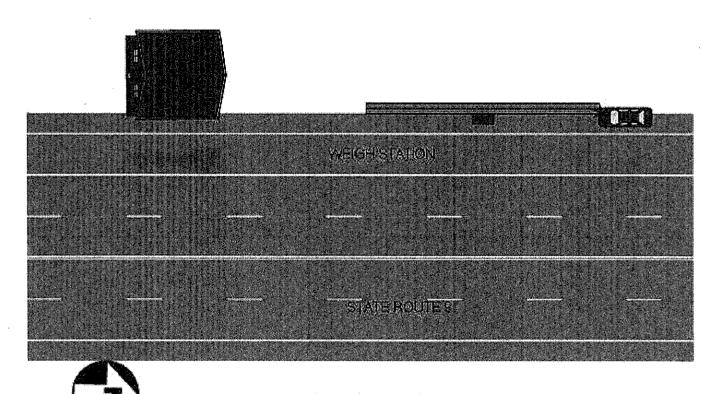
# **Other Descriptions**

UNIT LEVEL DESCRIPTIONS:

[TRAFFIC CONTROL. DESCRIPTION] - SUGGESTED 40 MPH CURVE SGN (Unit 1)

### Narrative.

Vehicle one was traveling east in the eastbound lane of State Route 112 near milepost 6.8. Vehicle one veered into the eastbound ditch and collided with a guardrail. Vehicle one continued traveling eastbound where it eventually became disabled with a left rear flat tire near milepost 7.4, at Ray's Grocery. Vehicle one sustained extensive front end damage. WADOT'S guardrail sustained extensive damage, two broken support posts, and two sections of rail.



DRAWING IS NOT TO SCALE

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT  1591971  INTERSTATE GITY STREET FIRE RESULTED CASE # 14-03109  2	2 3 27							
1 1	STATE ROUTE OTHER STOLEN VEHICLE LOCAL AGENCY CODING CODING CODING 3								
2 1	TRIBAL TOTAL # OF 2 OBJECT Guardrail	28							
3 1	RESERVATION								
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO. D								
4a	MILE POST Z800	0 1 29							
5 A									
	UNIT 01 MOTOR VEHICLE V PEDAL- CYCLE DAMAGE THRESHOLD MET VEHICLE VIOLE  DAMAGE THRESHOLD MET VEHICLE VIOLE PHONE	30							
6	LAST NAME FIRST NAME MIDDLE INITIAL								
_	STREET NEW ADDRESS								
7	CITY ST WA ZIP	1 2 31							
8	CDL RESTRICTIONS ENDOPSEMENTS 2								
99	DRIVER'S LICENSE # STATE WA SEX M D.Q.B. MMDDYYYY								
10	ON DUTY STATUS AIRBAG 2 RESTR. 9 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES	32							
11	LICENSE PLATE # STATE WA VIN#								
12	TRAILER PLATE # STATE STATE								
13 9	VEH. YEAR 1997 MAKE C MODEL ABRE 4D VEHICLE TOWED BY GOVT. VEHICLE TOWED BY YES NO VEHICLE TOWED BY VEHICLE TOWED BY YES NO VEHICLE NO. 1								
14	OWNED BY DRIVER  SHADE IN DAMAGED AREA  LABELTY INSURANCE TO A POLICY #								
15 2	YERICLE YES NO CITATION # CHARGE								
16	UNIT 02 VEHICLE CYCLE PEDESTRIAN OWNER VES NO								
17	LAST NAME WADOT FIRST NAME MIDDLE INITIAL								
18	STREET NEW ADDRESS 310 MAPLE PARK AVE SE								
	CITY OLYMPIA ST WA ZIP 98504	39							
19	COL RESTRICTIONS ENDORSEMENTS	40							
20	DRIVER'S LICENSE# SEX D.O.B. MMDDYYYY								
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE CLASS NATURE OF INJURIES								
22	LICENSE PLATE # VIN#								
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41							
24	VEH, YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVT_VEHICLE YES NO VEHICLE OWNER INFO.  PEGISTERED OWNER INFO.  VEHICLE TOWED BY  VEHICLE TOW	42							
	LABILITY INSURANCE INSURANCE CO & POLICY #								
25	VEHICLE YES NO CITATION # CHARGE  OFFICER'S NAME (PRINT)  BADGE OR 1D # AGENCY								
26	CHRISTENSEN, CHAD 075 PD LAKE STEVENS								

PAGE 01 OF 5
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





REPORT NO.

E384213

CASE# 14-03109

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY) NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. SEX NATURE OF INJURIES HELMET USE INJURY CLASS SEAT POS. AIRBAG RESTR. EJECT UNIT# PASSENGER [ ] WITNESS (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. SEX NATURE OF INJURIES HELMET USE INJURY CLASS SEAT POS. UNIT # AIRBAG RESTR. EJEČT WITNESS PASSENGER [ (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. SEX NATURE OF INJURIES INJURY CLASS PASSENGER WITNESS UNIT # SEAT POS. AIRBAG RESTR. EJECT DIAGRAM INDICATE NORTH BY ARROW Please see subsequent diagram page NARRATIVE Please see subsequent narrative page(s) 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) 12/16/2014 CHAD CHRISTENSEN UNIT OR DIST. DET DATED PLACE SIGNED **INVESTIGATING OFFICER'S SIGNATURE** Brooks, Ron 013 TIME POLICE DISPATCHED 12:02 PM TIME POLICE ARRIVED 12:39 PM ORI# WA0311900 BADGE OR ID # 075

# **Other Descriptions**

COLLISION LEVEL DESCRIPTIONS:

[LOCATION CHARACTER DESCRIPTION] - WEIGH STATION

## **Narrative**

Driver of Unit1 pulled into the weigh station in the 2800 SR 9 to adjust his seatbelt. Upon adjusting his seatbelt driver of Unit failed to see the gaurdrail and made contact with the guardrail. Unit sustained damage to the front passenger side of Unit 1 and the gaurdrail sustained significant damage.