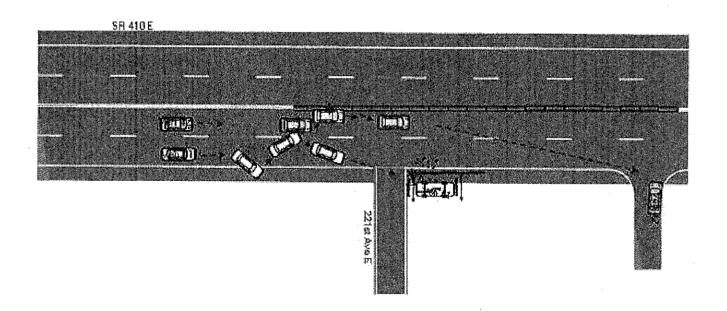


BL14002704

Not to Scale



	COLLISION REPORT	0 4 27
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23		1 1 8 28
34	RESERVATION	2
	DATE OF COLLISION     12     -     2314     2306     27     N     E     IN     V     0105	3
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO. 22100	
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13 3	VEH. YEAR 2003 AAKE MODEL STANG P2 VEHICLE TOWED BY CASCADE TOW YES NO C	FROM 10 7 3 33
143	FP     VEHICLE NO. 1       SHADE IN DAMAGE O AREA     INSURANCE COMPANY       LIABULTY INSURANCE IN DAMAGE O AREA     2       INSURANCE IN DAMAGE O AREA     2	
15 2	VENICLE VES NO CITATION # STANDING SPEED TOO FAST FOR	1     3       4     35
16 2		4 36
17	LAST NAME     FIRST NAME     MIDDLE       STREET     TOTAL     TOTAL	37
18	NEW ADDRESS	38
19	CDL RESTRICTIONS ENDORSEMENTS	39
20	DRIVER'S LICENSE # VVA SEX M D.O.B	40
21	ON DUTY STATUS AIRBAG 4 RESTR. 4 EJECT 1 HELMET 2 INJURY 1 NATURE OF INJURIES	
22	LICENSE PLATE # VIN	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41
24	VEH. YEAR 2014 MAKE MODEL STYLE VEHICLE TOWED TOWED BY CONTINUE OF VESTICAL OF	1 42
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25	VERICIE YES NAME (PRINT) STANDING CHARGE CH	
26	JOHNSTON, TOBIE     00363     PD BONNEY LAKE       PAGE 01     OF     5	
UNDER 23	PAGE 01 OF 5 3 UNITED STATES CODE – SECTION 409, THIS DATA CANNOT BE USED IN DISCOVERY OR AS EV	VIDENCE

.

AT TRIAL IN ANY ACTION FOR DAMAGES AGAINST THE WSDOT, OR ANY JURISDICTIONS INVOLVED IN THE DATA





E388002 REPORT NO.

BL14002704

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	S UNIT	#	SEAT POS.		AIRBAG	RESTR.		EJECT	ŀ	USE USE		INJURY CLASS		NA	TURE OF	FINJUF	UE8	
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						REPORT NO.	E388002
		013197		CASE #	BL140027	04	
COMMER	CIAL MOTOR	CARRIER				INTERSTATE	
UNIT #	USDOT			100 #		VEHICLE TYP	E CARGO BODY TYPE
CARRIER NAME							
CARRIER ADDRESS		· · · · · · · · · · · · · · · · · · ·					
CITY					ST	ZIP	· ·
NAME SOURCE	# AXLES	GVWR		PL		+	iame if no number
ADDITION	NAL UNITS	· · · ·					
UNIT #	3 MOTOR VEHICLE	CYOLE	PEDESTRI	AN PROF	ERTY IR V		<sup>DNE</sup> (253) 538-3240
LAST NAME	DEPT OF TH		ATION	FIF	ST NAME		MIDDLE INITIAL
	<b>25</b> 02 112T⊢	ISTE					
CITY T/	ACOMA				ST	WA ZIP 98445	
CDL			RESTRICTIONS			ENDORSEMENTS	
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LAST NAME						FIRST NAME		,		N	MIDDLE INITIAL		
STREET NEW ADDRESS										· · · · · · · · · · · · · · · · · · ·			
СІТУ			· · ·				ST	ZIP					
			RESTRICT	TIONS				ENDORSEMENTS					
DRIVER'S LICENSE #				•		STATE	SEX	D.O.B.	-	]-	•-		
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IN EFFECT VEU CLE YES LEGALLY STANDING						CHARGE					9 TOP BOTTOM 7 6	- - -	
	ICLARE) UNDER PENAL JOHNSTON	lty of Perjury Unc	ER THE LAW	S OF THE S		washington tha 12/30/2014	THE FORE	OING IS TRUE AND CO	RRECT. (RCW	9A.72.065)			
.,	NG OFFICER'S SIGN	IATURE ü	NIT OR DIST	T DET		ATED:		PLACE SIG	INED				
BADGE OR ID #	00363	ORI WAO	271400		, <b>-</b> ,	APPROV Hoag	ED BY	DATE	PAGE	3	OF	5	
DER 23 UNITE								F BE USED I NY JURISD					

Vehicle #1 was traveling eastbound in the right lane and Vehicle #2 was traveling eastbound in the left lane, both were traveling in the 22000 block of SR 410 E. Vehicle #1 hydroplaned, lost control of vehicle, went up over a curb, corrected and then struck Vehicle #2 on its passenger side, pushing Vehicle #2 into the cement jersey barrier. Vehicle #1 then traveled to the right going over a curb and off the roadway, crashing through a guardrail, down an embankment and landing on its top. Driver of Vehicle #1 was cited for Speed too Fast for Conditions.

# I-5 MP 207

MEDIAN



**Temil** 

RICHEROPAT

, Q	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT	REPORT NO. E384955	1 2 3 27
1			<sup>2</sup> 0 5
2		4 OBJECT Guardrail	1 1 8 26
36	M         D         D         Y         Y         TIME (2400)         COUNTY           DATE OF COLLISION         12         -         11         -         2014         2027         31		3
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION	BLOCK NO.         207         87           MILE POST         Image: Contract of the second sec	202
4a 5	DISTANCE O MILES V N V E KING THOMPSO	STREET)	└ <u></u>
	UNIT 01 MOTOR VEHICLE CYCLE		0 1 30
۶ 5	LAST NAME FIRST	NAME MIDDLE NITAL	
	STREET NEW ADDRESS		
7		st WA ZIP	י 1 2 א z
8	CDL RESTRICTIONS B		3
9 9 10 9	ON DUTY STATUS AIRBAG 3 RESTR. 4 EJECT 1 HELMET USE	WA     SEX     M     D.O.B.       INJURY     INJURY     INJURIES	1 2 3
	LICENSE PLATE # WA VIN#		2
<sup>11</sup> 7 0 <sup>12</sup> 7 0	TRAILER TR	AAILER ATE # STATE	3
133	VEH. YEAR 2002 FORD RIDPU 4C YEAR		
14 3		VEHICLE NO. 1 SHADE IN DAMAGE AREA 2 3 9 TOP 3 5	FROM TO
15 2		SIGNAL STOPS/TURNS- PHONE (206) 595-7658	4 3
16 2		NAME MIDDLE INITIAL	4 3
17	STREET NEW ADDRESS		3
18	OTTY REDMOND	ST WA ZIP	3
19	CDL RESTRICTIONS	ENDORSEMENTS	3
20	DRIVER'S LICENSE #	WA SEX M D.O.B	•
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET	INJURY 1 NATURE OF INJURIES	
22	LICENSE STATE WA VIN#		
23	PLATE # PL	AILER STATE STATE	4
24	VEH, YEAR 2012 FORD E250 CG VEHIC		1 4
<del>,                                     </del>	LIABULITY INSURANCE INSUFANCE CO. IN EFFECT & POLICY # VENCLE Y ES NO CITATION # CHARGE	SHADE IN DAMAGED AREA 2 3 4 2 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
25	DFFICER'S NAME (PRINT) BAD	DGE OR ID # AGENOY 10 WASHINGTON STATE PATROL	
<sup>26</sup> UNDER 2;	PART A 3000-345-159 B (7/06)		VIDENC





REPORT NO.

E384955

CASE # ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY) NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.Ó.B. MMDDYYYY SEX NATURE OF INJURIES HELMET USE INJURY ÇLAŞŞ SEAT POS. UNIT # AIRBAG RESTR. EJECT PASSENGER [ WITNESS NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMDDYYYY SEX NATURE OF INJURIES SEAT POS. HELMET USE INJURY CLASS PASSENGER WITNESS UNIT # AIRBAG RESTR. EJEĆT NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMDDYYYY SEX NATURE OF INJURIES SEAT POS. HELMET USE INJURY CLASS PASSENGER WITNESS UNIT # AIRBAG RESTR. EJECT DIAGRAM INDICATE NORTH BY ARROW Please see subsequent diagram page 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. WATKINS 12/19/2014 INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST, DET DATED PLACE SIGNED APPROVED BY DATE SLOAN, SGT. M. 196 BADGE OR ID # 310 ORI # WAWSP0715 TIME POLICE DISPATCHED 8:27 PM TIME POLICE ARRIVED 8:27 PM PART B 3000-345-160 R (7/08) 2 5 OF PAGE

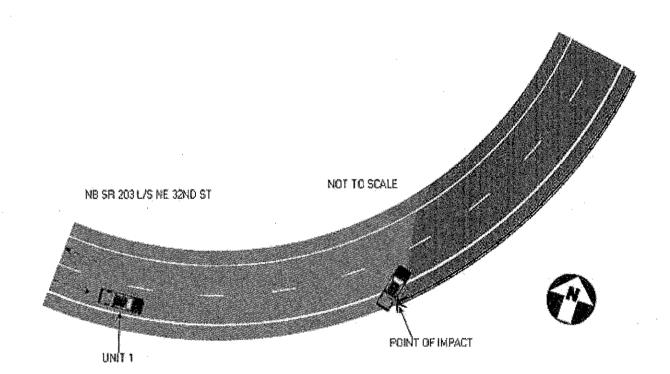
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	SUPPLEMENTAL POLICE TRAFFIC POLICE TRAFFIC POLICE TRAFFIC	1 1 8
		2
	COMMERCIAL MOTOR CARRIER     INTERSTATE     INTERSTATE       UNIT #     USDOT     ICC #     VEHICLE TYPE     CARGO BODY TYPE	3
	UNIT #     USDOT     ICC #     VEHICLE TYPE     CARGO BODT TYPE       CARRIER     CARRIER	1
	NAME	2
	CARRIER ADDRESS	3
ר	CITY ST ZIP	
]	NAME SOURCE     * AXLES     GVWR     PLACARD     +     MAME IF NO NUMBER	0
]	ADDITIONAL UNITS	
]	UNIT # 3 MOTOR VEHICLE PEDAL- PEDESTRIAN PROPERTY VENICLE PROPERTY	
	LAST NAME FIRST NAME MIDDLE INITIAL	
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	CITY ST WA ZIP	
	CDL RESTRICTIONS ENDORSEMENTS	
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י ר	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET UNJURY 1 NAJURE OF INJURIES	3
j	LICENSE PLATE # VVA VIN#	1
	TRAILER PLATE # STATE STATE STATE	2
0	VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVT. VEHICLE YES NO VEHICLE TOWED BY YSS NO V	3
	SHADE IN DAMAGED AREA	
]	LABILITY INSURANCE CO H EFFECT INSURANCE CO & POLICY # VEHALLS YES TO NO CITATION # OHARGE	FROM
]		ROM
 	LAST NAME WA STATE DOT FIRST NAME MIDDLE INITIAL	4
	STREET PO BOX 330310	
7	CITY SEATTLE ST WA ZIP 98133	
	CDI. RESTRICTIONS ENDORSEMENTS	
]	DRIVER'S LICENSE # SEX D.O.B. MMDDYYYY	
]	CN DUTY STATUS AIRBAG RESTR. EJECT HELMET USE CLASS	
]		
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	PLATE # STATE PLATE # STATE	
	VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED TOWED BY GOVT VEHICLE TOWED BY VEHICLE TOWED BY VEHICLE TOWED BY VES NO	
	Z 3 4	
	LABILITY INSURANCE INSURANCE CO IN EFFECT VELICITY # VELICITY # VELICITY # VELICITY # CHARGE	
	I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (ROW 9A.72.085)	
	D. WATKINS 12/19/2014 INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST DET DATED: PLACE SIGNED	
	BADGE 310 ORI WAWSP0715 SLOAN DATE PAGE 3 OF 5	

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.



Ø	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1591971	1 0 4 27
12 21	INTERSTATE       GITY STREET       FIRE         STATE ROUTE       OTHER       STOLEN         STOLEN       VEHICLE       HT & RUN         COUNTY PD       PRIVATE WAY       INT & RUN         TRIBAL       TOTAL # OF       2       OBJECT         UNITS       2       OBJECT       STRUCK	
32	M         D         D         Y         Y         Y         TIME (2400)         COUNTY #         MILES         N         E         IN         Ø           DATE OF COLLISION         12         -         8         -         2014         0740         17	3
4 4a	ON (PRIMARY TRAFFIC WAY)       INTERSECTION       INTERSECTION       INTERSECTION         N203       BLOCK NO.       HILE POST       HILE POST         DISTANCE       OF (REFERENCE OR CROSS STREET)       HILE POST       HILE POST	0 1 29
5		31
65		
7	CITY ST WA ZIP	1 2 31
8	CDL RESTRICTIONS ENDORSEMENTS	2
99	DRIVER'S LICENSE # VVA SEX F D.O.B. MMDDDYYYY	3
10	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE CLASS 1	
11 5 5	LICENSE STATE WA VIN#	2
12	TRAILER     TRAILER     STATE     TRAILER       PLATE #     STATE     STATE	°L
13 3	VEH. YEAR 2006 MAKE MODEL STYLE VEHICLE TOWED BY VES NO DEC VEHICLE NO. 1 BEODER HAR AMAGE NO DEC VEHICLE NO. 1 SHADE NAMAGED AREA	
14	LAGULTY INSURANCE CO	
15	VERICIE STANDWIG     VEN     CHARGE 4Z10398663     CHARGE STANDWIG     CHARGE	4 3
16	LAST NAME WSDOT FIRST NAME MIDDLE	3
17	STREET NEW ADDRESS 15700 DAYTON AVE	3
18	CITY SEATTLE ST WA ZIP 98133	34
19	CDL RESTRICTIONS ENDORSEMENTS	4
20	DRIVER'S LICENSE # STATE SEX D.O.B, MMDDYYYY	<u> </u>
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE NJURY CLASS	
22	LICENSE PLATE # VIN#	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE STATE	1 4
24	VEH. YEAR     MAKE     MODEL     STYLE     VEHICLE TOWED     TOWED BY     GOVT. VEHICLE       VEH. YEAR     NO     NO     TOWED BY     VEHICLE TOWED     NO	4
I	REGISTERED OWNER INFO.     VEHICLE NO. 2       SHADE IN DAMAGED AREA     SHADE IN DAMAGED AREA       IABILITY INSURANCE     INSURANCE CO       IN EFFECT     IN OUCLY #	kan na man
25	IN SEFECT & POLICY #	
26	OFFICER'S NAME (PRINT) BADGE OR ID # AGENCY WILLIAMS, T. 368 WASHINGTON STATE PATROL	





CASE #

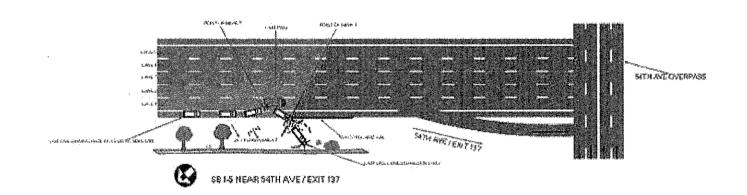
REPORT NO.

E383829

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY) NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMDDYYYY SEX NATURE OF INJURIES HELMET USE INJURY CLASS SEAT EJECT UNIT # AIRBAG BESTR. PASSENGER WITNESS NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMODYYYY SEX NATURE OF INJURIES SEAT POS. HELMET INJURY CLASS UNIT # AIRBAG RESTR. EJECT PASSENGER WITNESS NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMDDYYYY SEX NATURE OF INJURIES HELMET USE INJURY CLASS UNIT # SEAT POS. AIRBAG RESTR. EJECT PASSENGER WITNESS DIAGRAM INDICATE NORTH BY ARROW Please see subsequent diagram page 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) T. WILLIAMS 12/15/2014 DATED PLACE SIGNED INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET DATE APPROVED BY Cozzitorto, Sgt. P. 145 7:41 AM 7:55 AM BADGE OR ID # 368 ORI# WAWSP0218 TIME POLICE DISPATCHED TIME POLICE ARRIVED

UNIT 1 WAS TRAVELING NB ON SR 203 JUST SOUTH OF NE 32ND ST IN CARNATION. THE ROADS WERE WET AND SLIPPERY. UNIT 1 WAS TRAVELING TOO FAST FOR THE ROAD CONDITIONS AND LOST CONTROL OF THE REAR END WHILE MANEUVERING A CORNER. THE REAR PASSENGER SIDE COLLIDED WITH A METAL GUARDRAIL, PULLING THE GUARDRAIL INTO THE ROADWAY.

DOT # 026185



1       INTERSTATE	1 3 4 27
a       M       M       D       D       Y       Y       Y       Y       TIME (2400)       COUNTY #       MILES       CITY #         A       DATE OF       9       -       30       -       2014       1552       27	206 3 15228
4     BLOCK NO.     137     45       4a     OF (REFERENCE OR CROSS STREET)     137     45       5     100     00     MILES     N     E     54TH AVE	2 2
	0 1 30
0 1 LAST NAME MIDDLE INITIAL	
7 CITY VANCOUVER ST WA ZIP	1231
8 CDL RESTRICTIONS ENDORSEMENTS	2
9 9 DRIVER'S LICENSE # STATE WA SEX M MADDYYYY COMP - COMPANY	3 1 1 2 32
10 9 ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMEN CLASS 1	2
11     PLATE #     STATE     TRAILER       12     6     0     STATE     TRAILER	
13     3     VEH. YEAR 2000     MAKE CHEV     MODEL EXPRESS     STYLE VN     VEHICLE TOWED VES     TOWED BY FIFE RECOVERY     QOVT.VEHIC VES       13     BEGISTER OF VEHICLE TOWED     TOWED BY FIFE RECOVERY     VEHICLE TOWED VES     TOWED BY FIFE RECOVERY     VEHICLE TOWED VES       13     BEGISTER OF VEHICLE TOWED     TOWED BY FIFE RECOVERY     VEHICLE TOWED VES     VEHICLE TOWED       13     BEGISTER OF VEHICLE TOWED     SHADE IN DAMAGED AREA	
15     1     VENCLE VES     N°     □     CITATION # 4ZO836740, 4ZO836741     CHARGE NEGLIGENT DRIVING 2ND     1     1     1     1     1     8     7     5       15     1     NIT 02     MOTOR VEHICLE     ✓     PEDAL- CYCLE     PEDESTRIAN     PROPERTY CWNER     DAMAGE THRESHOLD MET VES     PHONE     PHONE     0     0	<u> </u>
16 1 EIRST NAME DOLORES MIDDLE INITIAL	G 4 36
17 STREET NEW ADDRESS COMPANY	38
	39
ZI     STATE     V VA     SEX     IVI MMDDYYYY     -       21     ON DUTY     STATUS     AIRBAG     2     RESTR.     4     EJECT     1     HELMET USE     INJURY     1     NATURE OF INJURIES	
22 LICENSE VIN	
23 TRAILER PLATE # STATE STATE STATE STATE	1 41
24 VEH, YEAR 2004 MAKE MODEL STYLE VEHICLE TOWED BY SOVT VEHIC PEOPLE DUMNEE INFO. TO WE BY VEHICLE TOWED BY VEHICLE TOWED BY VEHICLE TOWED BY VEHICLE TOWED BY VEHICLE NO. 2 SHADE IN DAMAGED AREA VEHICLE NO. 2 SHADE IN DAMAGED AREA 2 3 4	
25 VEHICLE YES NO CITATION # CHARGE	
26       OFFICER'S NAME PRINT)       BADGE CR ID #       AGENCY         26       DORN, M.       586       WASHINGTON STATE PATRO         PART A 3000-345-158 F. 7/000         PART A 3000-345-158 F. 7/000         INDER 23 UNITED STATES CODE - SECTION 409. THIS DATA CANNOT BE USED IN DISCOVERY OF A	—

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14-017490

CASE #

**REPORT NO.** 

E361778

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY) NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE ( M D.O.B. SEX NATURE OF INJURIES HELMET USE INJURY WITNESS SEAT POS. RESTR. EJECT UNIT # AIRBAG PASSENGER NAME (LAST, FIRST, MIDDLE INITIAL) D.O.B. MMDDYYYY SEX М NATURE OF INJURIES HELMET USE INJURY CLASS SEAT POS. RESTR. EJEĊT PASSENGER WITNESS UNIT # AIRBAG NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMODYYYY SEX NATURE OF INJURIES HELMET USE INJURY CLASS SEAT POS. PASSENGER WITNESS UNIT # AIRBAG RESTR. EJECT DIAGRAM INDICATE NORTH BY ARROW Please see subsequent diagram page 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) 10/3/2014 M. DORN INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET DATED PLACE SIGNED APPROVED BY DATE Sager, Sgt. J. 234 TIME POLICE DISPATCHED 3:52 PM TIME POLICE ARRIVED 4:00 PM BADGE OR ID # 586 ORI # WAWSP0112

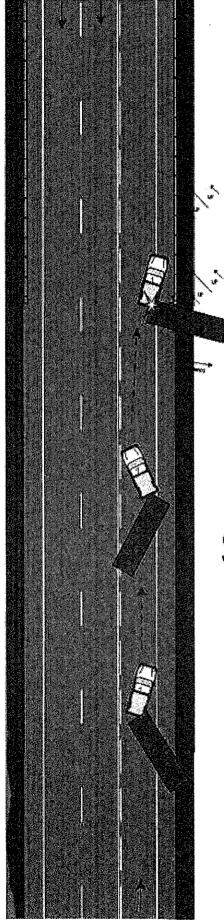
PART B 3000-345-160 R (7/06)

2 5 PAGE OF UNDER 23 UNITED STATES CODE – SECTION 409, THIS DATA CANNOT BE USED IN DISCOVERY CE

AT TRIAL IN ANY ACTION FOR DAMAGES AGAINST THE WSDOT, OR ANY JURISDICTIONS INVOLVED IN THE DATA

OLICE TRAFFIC	ort	CA	<b>SE #</b> 14-0	17490				
COMMERCIAL	MOTOR CARRIER	<u>L</u>			INTER	STATE 🖌	INTR/	
<b>UNIT #</b> 2	USDOT 2320385	ICC #			VEHIC	LE TYPE	3 <sup>CAP</sup>	IGO BODY TYPE
CARRIER SAN	/Е					· ·		
CARRIER ADDRESS		······						
CITY			· · ·	ST	ZIP			
NAME 1	AXLES 3 GVWR 25500		PLACARD	ļ	 +[	NAME IF	NO NUMBER	
					] ` [		<del></del>	
<b>UNIT #</b> 3			PRÓPERTY OWNER			PHONE		
			FIRST NAME	WAS	HINGTON	STATE		MIDDLE
	02 112TH STREET EAST		, <b>}</b>				I	
	· · · · · · · · · · · · · · · · · · ·		· · ·	ST \	WA ZIP 90	 8445		
CDL CDL	RESTRICT	IONS			ENDORSEMENT	1		
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DRIVER'S LICENSE #				SEX				
	US AIRBAG RESTR.	EJECT	USE	NJURY OLASS				
LICENSE PLATE #	STATE	VIN#						
TRAILER PLATE #		STATE	TRAILER PLATE #					STATE
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LIABILITY INSURANCE	INSURANCE CO & POLICY #							
	CITATION #	1	CHARGE				ı L	
UNIT #	MOTOR PEDAL- VEHICLE CYCLE PE		PROPERTY OWNER	DAMAGI YES	E THRESHOLD MET	PHONE		
LAST NAME			FIRST NAME					MIDDLE
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			~	ST	ZIP			
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DRIVER'S LICENSE #			STATE	SEX	D.O.B.		· ] [	
		·····			MMDOYYYY NATURE OF	INJURIES		
	<u> </u>		USE	NJURY CLASS				
	STATE	VIN#			· ·		<u> </u>	
TRAILER PLATE #		STATE	TRAILER PLATE #		•			STATE
VEH, YEAR		STYLE		ED TOWED	BY			GOVT, VEHICI YES NO
	INSURANCE CO & POLICY #							
VEITCLE YES NO			CHARGE					10 BOTTOM
I CERTIFY (DECLARE) UN M. DORN	DER PENALTY OF PERJURY UNDER THE LAWS		VASHINGTON TH.	at the fore	going is true a	ND CORRECT.	(RCW 9A.72.0	85) .
INVESTIGATING OFFICE	ER'S SIGNATURE UNIT OR DIST		ATED:		PLA	CE SIGNED		

UNIT ONE TRAVELING DOWN SHOULDER OF ROAD WAY AS HE NEARS THE EXIT FOR 54TH AVE / 137. UNIT ONE DRIVER ENTERS FROM SHOULDER AND INTO LANE ONE, STRIKING UNIT TWO. UNIT ONE BOUNCES OFF OF UNIT TWO AND TRAVELS BACK TOWARDS SHOULDER. UNIT ONE IMPACTS INTO WA DOT GUARD RAIL (30-40 FEET) AND TRAVELS DOWN INTO AN EMBANKMENT COMING TO REST. UNIT ONE DRIVER STATED THAT HE WANTED TO TAKE THE EXIT TO 54TH AND THAT TRAFFIC WAS BAD SO HE TRAVELED ONTO THE SHOULDER.





7	9	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT	REPORT NO.	E360454
1		INTERSTATE CITY STREET FIRE RESULTED STATE ROUTE OTHER STATE ROUTE OTHER		2
2 1				1 28
3 1	_		(2400) COUNTY # MILES	
	_	DATE OF COLLISION         9         -         27         -         2014         132		IN 0680 ₃
4		ON (PRIMARY TRAFFIC WAY) INTERSECTION IN NON		88 80 0 6 29
4a 5			EFERENCE OR CROSS STREET)	
				30
6 1		LAST NAME	FIRST NAME	
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7			st WA zip	
8				
9 9	9] 	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJEC		
		LICENSE STATE WA		
11 E 12	30	TRAILER PLATE #		STATE 3
"	1			· _ · · · · · · · · · · · · · · · · · ·
13 🤇	2	VEH. YEAR 2006 FORD FORD STYLE CW		
13 2 14	2]			VEHICLE NO. 1 SHADE IN DAMAGED AREA
F			CHARGE DEFECTIVE BRAKES	VEHICLE NO. 1 SHADE IN DAMAGED AREA 1 9 TOP 10 BOTTOM B 7 5 5 7 5 7 5 33 7 33 7 33 7 33 7 33 7
14				VEHICLE NO. 1 SHADE IN DAMAGED APEA         7         5         33           1         2         3         1         1         1         1         34           1         2         3         1         1         1         34         34           509)         667~2800         4         35         36         36
14 15			CHARGE DEFECTIVE BRAKES	$\begin{array}{c c} & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & &$
14 15 16		IMBULTY INSURANCE     INSULFANCE CO.       IN EFFECT     INSULFANCE CO.       VERCIFY     STANDING       VERCIFY     TESTINO       UNIT 02     MOTOR       VENCLE     PEDAL-       CYCLE     PEDESTRIAN		VEHICLE NO. 1 SHADE IN DAMAGED AREA         7 S 33           1         1         1
14 15 16 17		PE       INSURANCE       INSURANCE CO.         WHEFECT       INSURANCE CO.       8 POLICY #         VENCLE, YES       NO       CITATION #         VENCLE, YES       NO       CITATION #         UNIT 02       WOTOR       PEDAL- CYCLE       PEDAL- CYCLE         LAST NAME       WA DOT         STREET NEW ADDRESS       2830 EUCLID AVE	CHARGE DEFECTIVE BRAKES PROPERTY OWNER	VEHICLE NO. 1 SHADE IN DAMAGED AREA         7 S 33           1         1         1           1         2         3           1         2         4           10         2         6           509)         667-2800         4           10         36           11         37           31         38           32         38           33         38           34         39
14 15 16 17 18		PE     INSURANCE     INSURANCE CO & POLICY #       INFERET     INSURANCE     INSURANCE CO & POLICY #       YERCLE     INSURANCE     INSURANCE CO & POLICY #       UNIT 02     MOTOR     YEBAL- CYCLE     PEDAL- CYCLE       LAST NAME     WA DOT       STREET NEW ADDRESS     2830     EUCLID AVE       QITY     WENATCHEE	CHARGE DEFECTIVE BRAKES PROPERTY VENARCE THRESHOLD MET PHONE OWNER VENATCHEE	VEHICLE NO. 1 SHADE IN DAMAGED AREA 1         7         5         33           9         9         10         10         10         10         10         10         34           509) 667-2800         4         35         36         36         36           MIDDLE INITIAL         37         37         38         37           01         38         38         38         38
14 15 16 17 18 19		PE       INSURANCE       INSURANCE CO.         INBELITY INSURANCE       INSURANCE CO.       S POLICY #         VERICIE       VERICIE       COLOCY #         VERICIE       VERICIE       PEDAL-         LAST NAME       WA DOT         STREET       2830 EUCLID AVE         INW ADDRESS       2830 EUCLID AVE         CITY       WENATCHEE         CDL       RESTRICTIONS	CHARGE DEFECTIVE BRAKES PROPERTY OWNER VENATOLIE FIRST NAME WENATCHEE	VEHICLE NO. 1 SHADE IN DAMAGED APEA         7         33           1         1         1         1         1         34           1         1         1         1         34         34           509) 667-2800         4         35         36           MIDDLE INITIAL         37         38         37           31         37         38         34           32         40         40         34
14 15 15 16 17 18 19 20		INBULITY INSURANCE       INSULFANCE CO.         IN EFFECT       INSULFANCE CO.         VERCLE       SPOLICY #         VERCLE       CITATION #         STANDING       CITATION #         UNIT 02       WOTOR         VENCLE       PEDAL-         CYCLE       PEDESTRIAN         LAST NAME       WA DOT         STREET       2830 EUCLID AVE         OITY       WENATCHEE         CDL       RESTRICTIONS         DRIVER'S       LICENSE #	CHARGE DEFECTIVE BRAKES PROPERTY DAMAGE THRESHOLD MET PHONE ( FIRST NAME WENATCHEE ST WA ZIP 988( ENDORSEMENTS STATE SEX D.O.B. MMDDYYYY	VEHICLE NO. 1 SHADE IN DAMAGED APEA         7         33           1         1         1         1         1         34           1         1         1         1         34         34           509) 667-2800         4         35         36           MIDDLE INITIAL         37         38         37           31         37         38         34           32         40         40         34
14 15 16 17 18 19 20 21		PE       INSURANCE       INSURANCE COMERCIANCE COMERC	CHARGE DEFECTIVE BRAKES PROPERTY OWNER FIRST NAME FIRST NAME FIRST NAME FIRST NAME VENATCHEE ST VA ZIP 988( ENDORSEMENTS STATE STATE SEX MMDDYYY CT HELMET USE TRAILER PLATE #	VEHICLE NO. 1       7       5       33         SHADE IN DAMAGED AREA       1       1       34         1       1       1       1       41         1       1       41       35         1       1       1       41
14 15 16 17 18 19 20 21 22		PE       INSURANCE       INSURANCE COME         INBURANCE       INSURANCE COME       8 POLICY #         VERICLE       VERICLE       PEDAL-         UNIT 02       MOTOR       PEDAL-         CYCLE       PEDAL-       PEDESTRIAN         LAST NAME       WA DOT         STREET       2830       EUCLID AVE         CITY       WENATCHEE         CDL       RESTRICTIONS         DRIVER'S       LICENSE #         LICENSE #       STATUS         AIRBAG       RESTR.         EJICENSE       STATUS	CHARGE DEFECTIVE BRAKES PROPERTY OWNER FIRST NAME FIRST NAME VENATCHEE ST WA ZIP 988( ENDORSEMENTS STATE STATE STATE SEX MMDDYYYY CT HELMET USE TRAILER PLATE #	VEHICLE NO. 1       7       5       33         9       9       10       10       10       34         1       1       10       10       36       36         1       10       10       10       36       36         1       10       10       37       36       37         1       10       10       37       38       37         1       1       37       38       38       39         1       1       37       38       39       39         1       1       40       40       40         1       1       41       42       42         VEHICLE NO. 2       NAQEE NO. 2       1       42
114 115 115 116 117 118 119 21 221 222 233		PE       INSURANCE       INSURANCE CO         INBURANCE       INSURANCE CO       & POLICY #         VENCLE       YEADING       4Z0838509         UNIT 02       MOTOR       PEDAL- GYOLE       PEDESTRIAN         LAST NAME       WA DOT         STREET       2830       EUCLID AVE         CITY       WENATCHEE         CDL       RESTRICTIONS         DRIVER'S       LICENSE #         ILORNSE #       STATUS         AIRBAG       RESTR         LICENSE #       STATUS         VEH.YEAR       MAKE         YEAR #       STATUS         INSURANCE       NODEL         STATUS       AIRBAG         RESTRICTIONS       EJEC         LICENSE #       STATUS         VEH.YEAR       MAKE         MODEL       STATUS	CHARGE DEFECTIVE BRAKES PROPERTY OWNER FIRST NAME FIRST NAME FIRST NAME FIRST NAME VENATCHEE ST VA ZIP 988( ENDORSEMENTS STATE STATE SEX MMDDYYY CT HELMET USE TRAILER PLATE #	VEHICLE NO. 1       7       5       33         SHADE IN DAMAGED AREA       9 10P       34         1       9 10P       5       4       35         509) 667-2800       4       35       36         MIDDLE       36       37       38         01       31       37       38         01       39       40       39         1       40       40       40         VES       100       41       42         VEHICLE NO, 2       42       42
114 115 115 116 117 118 119 21 221 222 233		PE       INSURANCE       INSURANCE CO         INBURANCE       INSURANCE CO       & POLICY #         VENCLE       PEDAL-       PEDESTRIAN         LAST NAME       WA DOT       STREET         STREET       2830       EUCLID AVE         QITY       WENATCHEE       GOL         CITY       WENATCHEE       RESTRICTIONS         DRIVER'S       LICENSE #       INSURANCE       STATUS         ON DUTY       STATUS       AIRBAG       RESTR       EJEC         LICENSE #       STATUS       AIRBAG       RESTR       EJEC         VEH. YEAR       MAKE       MODEL       STATUS         REGISTE	CHARGE DEFECTIVE BRAKES PROPERTY DAMAGE THRESHOLD MET PHONE FIRST NAME WENATCHEE ST WA ZIP 9880 ENDORSEMENTS STATE SEX D.O.B. MMDDYYYY CT HELMET INJURY CT HELMET INJURY USE CLASS NATURE OF INJUR VINM TE PLATE # VEHICLE TOWED TOWED BY	VEHICLE NO. 1       7       3         9       9       9       9         9       9       9       9         10       8       7       5         509)       667-2800       4       35         10       10       10       36         11       131       37         131       38       38         131       37       38         131       37       38         131       37       38         131       37       38         131       38       39         140       40       40         141       141       41         142       9       9       10         142       9       9       10       42         11       41       42       4       42         150       9       10       5       5         10       9       10       5       5





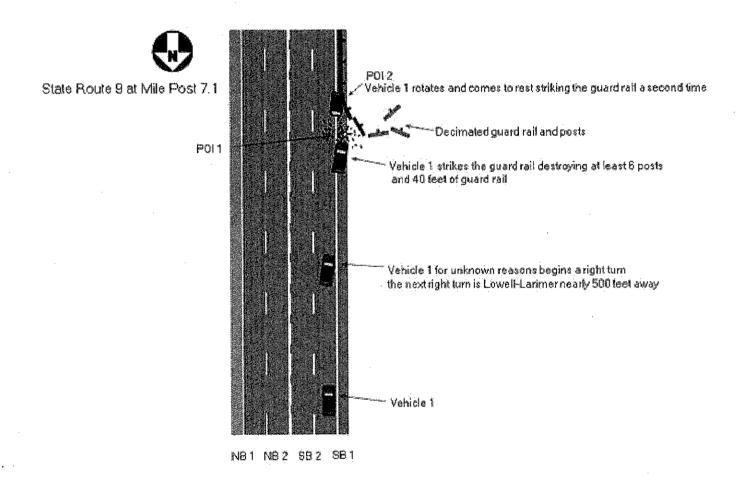
1591972 CASE #

REPORT NO.

E360454

NAME (LAST, FIRST, MIDDLE INITIAL) D.Ó.B. MMDDYYY SEX М NATURE OF INJURIES HELMET USE INJURY CLASS SEAT POS. 2 4 EJECT 1 1 3 PASSENGER V WITNESS UNIT # 1 AIRBAG RESTR. NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. SEX NATURE OF INJURIES SEAT POS. HELMET USE INJURY CLASS AIRBAG RESTR. EJECT UNIT# PASSENGER WITNESS NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMDDYYYY SEX NATURE OF INJURIES HELMET INJURY CLASS UNIT # SEAT POS. AIRBAG RESTR. EJECT PASSENGER WITNESS DIAGRAM INDICATE NORTH BY ARROW Please see subsequent diagram page NARRATIVE Please see subsequent narrative page(s) 1 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) 9/29/2014 J. ANDERSON PLACE SIGNED DATED INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET DATE APPROVED BY Schneider, Sgt. K. 0110 1:49 PM 1:35 PM TIME POLICE ARRIVED BADGE OR ID # 319 ORI # WAWSP0605 TIME POLICE DISPATCHED

VEHICLE 1 WAS TRAVELING EB SR 2 IN LANE 1 OF 1. VEHICLE 1 WAS TOWING A TRAILER WITH A CAR LOADED ON THE TRAILER. THE HOOD OF THE CAR BEING TOWED ON THE TRAILER OPENED IN THE WIND. VEHICLE 1 APPLIED THE BRAKES AND BEGAN TO SLOW. THIS CAUSED THE TRAILER TO BEGIN TO SWERVE. THE TRAILER THEN SWUNG TO THE RIGHT AS VEHICLE 1 CONTIUED TO SLOW. THE TRAILER WAS SIDEWAYS AS IT LEFT THE ROADWATY ONTO THE DIRT SHOULDER AND STRUCK THE GUARD RAIL. THE TRAILER WAS THEN RIPPED OFF THE BALL HITCH. FURTHER INVESTIGATION ON SCENE REVEALED THAT THE TRAILER HITCH WAS RATED AT ONLY 5000 LBS, WHICH WAS EXCEEDED GREATLY BY THE WEIGHT OF THE TRAILER AND VEHICLE LOADED ON IT. THE WEIGHT OF THE TRAILER AND VEHICLE LOADED ON IT TOTALED 7400 LBS. AN INSPECTION OF THE TRAILER REVEALED THAT THE BRAKES ON THE TRAILER DID NOT FUNCTION.



0	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT							
1	INTERSTATE CITY STREET FIRE RESULTED STATE ROUTE OTHER OTHER VEHICLE CASE # 14-016922	2 0 2						
2								
<b></b>	TRIBAL RESERVATION     TOTAL # OF     2     OBJECT STRUCK     Guardrail       M     D     D     Y     Y     Y     TIME (2400)     COUNTY #     MILES     CITY	 2						
3 1	DATE OF COLLISION     9     -     22     -     2014     1025     31     2     20     N     E     IN     I18       COLLISION     9     -     22     -     2014     1025     31     2     20     N     E     IN     118							
4								
4a								
5								
62	LAST NAME FIRST NAME MIDDLE INITIAL							
7	CITY EVERETT ST WA ZIP	1 2 31						
8	CDL RESTRICTIONS ENDORSEMENTS	2						
۹9 .	DRIVER'S LICENSE #							
10	ON DUTY STATUS AIRBAG 6 RESTR. 2 EJECT 1 HELMET 2 INJURY 7 NATURE OF INJURIES SORENESS							
11 5 5	LICENSE PLATE # STATE WA VIN#							
12	TRAILER PLATE # STATE STATE STATE							
13 2	VEH. YEAR 2015 MAKE ADI SEVILLE STYLE 4D VEHICLE TOWED BY VES NO VEHICLE TO WED BY VES NO VEHICLE TO WED BY VES NO VEHICLE TO WED BY VEHIC							
14	LABILITY INSURANCE INSURANCE INSURANCE SPOLICY #							
15 2	VEHICLE       VES       NO       Citation # 4Z0847775, 4Z0847775       Citation # 4Z0847775, 4Z0847775         UNIT 02       MOTOR VEHICLE       PEDAL- CYCLE       PEDESTRIAN       PROPERTY West No       VEH W/OUT INS, PROPERTY VEHICLE       PHONE							
16	LAST NAME DOT FIRST NAME MIDDLE	36						
17	STREET NEW ADDRESS 15700 DAYTON AVE, NORTH	9737						
18	OITY SHORELINE ST WA ZIP 98133							
19	CDL RESTRICTIONS ENDORSEMENTS	8 39 40						
20	DRIVER'S LICENSE # STATE SEX D.O.B. MMDDYYYY							
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS							
22	LICENSE PLATE # VIN#							
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41						
24	VEH. YEAR     MAKE     MODEL     STYLE     VEHICLE TOWED TOWED BY     GOVT_J YES       REGISTERED OWNER INFO.     VEHICLE NO, SHADE IN DAMAGED,     STYLE     VEHICLE NO, SHADE IN DAMAGED							
	LIAGLITY INSURANCE INSURANCE INSURANCE O	3.						
25	EEARTY     Tes     NO     000000000000000000000000000000000000							
26	LEE, R.         725         WASHINGTON STATE PA           PART         A 3000-345-159 R.07/00         PAGE 01 OF	4						





REPORT NO.

). E359149

CASE # 14-016922 ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY) NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMDDYYYY SEX NATURE OF INJURIES SEAT POS. HELMET USE INJURY CLASS PASSENGER WITNESS UNIT # AIRBAG RESTR. EJECT NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D.O.B. MMODYYYY SEX NATURE OF INJURIES SEAT POS. HELMET USE INJURY CLASS PASSENGER WITNESS UNIT # AIRBAG RESTR. EJECT NAME (LAST, FIRST, MIDDLE INITIAL) ADDRESS & PHONE # D,O,B. ИМООҮҮҮҮ SEX NATURE OF INJURIES SEAT POS. HELMET USE INJURY CLASS PASSENGER WITNESS UNIT # AIRBAG RESTR. EJECT DIAGRAM INDICATE NORTH BY ARROW Please see subsequent diagram page 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)

R. LEE		UNIT OR DIST. DET	9/24/2014			PLACE SIGNED		
APPROVED BY Caiola, Sgt. C. 163		DATED	<u>.</u>	DATE				
BADGE OR ID # 725	oni#	WAWSP0706		TIME POLICE	DISPATCHED	10:31 AM	TIME POLICE ARRIVED	10:37 AM

PART B 3000-345-160 R (7/08)

page 2 of 4

Vehicle 1 is traveling southbound on State Route 9 at Mile Post 7.1 in lane 1 of 2. The roadway in this area is very straight and has no turns. \*\*\*The driver is under the influence of alochol and drugs. The driver believes that the guard rail is a right turn and begins to perform a right turn. The next available right turn is Lowell-Larimer which is nearly 500 feet away. Vehicle 1 strikes the guard rail and posts at a high rate of speed. There is no evidence in the roadway to suggest that the vehicle performed any braking or evasive steering. Vehicle 1 destroys approximately 6 posts and 40 feet of guard rail. Vehicle 1 rotates clock wise and comes to rest after the rear of the vehicle strikes the guard rail a second time. The actions of the driver shows a blatant disregard for the safety of others. Driver of Vehicle 1 is subsequently arrested for DUI. The driver sustained soreness from the collision.