STATE OF WASHINGTON
POLICE TRAFFIC COLLISION REPORT

1591971

REPORT NO. E345479

CASE #	14-1810
LOCAL AGENCY CODING	0664
TOTAL # OF UNITS	02
OBJECT STRUCK	

INTERSTATE ☐ CITY STREET ☐ STATE ROUTE ☑ OTHER ☐ COUNTY RD ☐ PRIVATE WAY ☐

FIRE RESULTED ☐ STOLEN VEHICLE ☐ HIT & RUN INVOLVED ☐

TRIBAL RESERVATION

DATE OF COLLISION (M M - D D - Y Y Y Y)	TIME (2400)	COUNTY #	MILES		CITY #
07 - 30 - 2014	1827	31		N ☐ S ☐ E ☐ W ☐	IN ☑ OF ☐ 0664

ON (PRIMARY TRAFFIC WAY): HWY 9 — INTERSECTION ☑ NON-INTERSECTION ☐ — BLOCK NO. ☐ MILE POST ☐

DISTANCE: MILES ☐ FEET ☐ N ☐ S ☐ E ☐ W ☐ — OF (REFERENCE OR CROSS STREET): SOPER HILL RD

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE D: 4259230107

LAST NAME	SALAZAR	FIRST NAME	JOSE
MIDDLE INITIAL	R		
STREET (NEW ADDRESS ☐)	1604 78TH PL SE		
CITY	EVERETT	ST	WA
ZIP	982036769		
CDL		RESTRICTIONS	
ENDORSEMENTS			
DRIVER'S LICENSE #	SALAZJR342C4	STATE	WA
SEX	M	D.O.B. MMDDYYYY	02 - 24 - 1966
ON DUTY ☐	STATUS	AIRBAG 2	RESTR. 4
EJECT 1	HELMET USE	INJURY CLASS 1	NATURE OF INJURIES
LICENSE PLATE #	B56878X	STATE	WA
VIN#	2GCFK29K6M1243925		
TRAILER PLATE #		STATE	
TRAILER PLATE #		STATE	
VEH. YEAR 1991	MAKE CHEV	MODEL K2PU	STYLE PK
VEHICLE TOWED YES ☐ NO ☑	TOWED BY	GOVT. VEHICLE YES ☐ NO ☑	

REGISTERED OWNER INFO. JOSE SALAZAR 527 N MACLEOD AVE ARLINGTON WA 98223

LIABILITY INSURANCE IN EFFECT ☑ — INSURANCE CO & POLICY # ALLSTATE 917982529 10/12

VEHICLE LEGALLY PARKED YES ☐ NO ☐ — CITATION # — CHARGE

VEHICLE NO. 1 SHADE IN DAMAGED AREA

UNIT 02

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE D: 4258766551

LAST NAME	KALHOVDE-BUSTARD	FIRST NAME	ANDREW
MIDDLE INITIAL	M		
STREET (NEW ADDRESS ☐)	13016 107TH ST NE		
CITY	LAKE STEVENS	ST	WA
ZIP	982588865		
CDL		RESTRICTIONS	
ENDORSEMENTS			
DRIVER'S LICENSE #	KALHOAM039O7	STATE	WA
SEX	M	D.O.B. MMDDYYYY	09 - 27 - 1997
ON DUTY ☐	STATUS	AIRBAG 2	RESTR. 4
EJECT 1	HELMET USE	INJURY CLASS 1	NATURE OF INJURIES
LICENSE PLATE #	B47996Z	STATE	WA
VIN#	1GCCS19W0Y8129146		
TRAILER PLATE #		STATE	
TRAILER PLATE #		STATE	
VEH. YEAR 2000	MAKE CHEV	MODEL S10PU	STYLE PK
VEHICLE TOWED YES ☐ NO ☑	TOWED BY	GOVT. VEHICLE YES ☐ NO ☑	

REGISTERED OWNER INFO. PAUL BUSTARD PO BOX 1243 MARYSVILLE WA 98270

LIABILITY INSURANCE IN EFFECT ☑ — INSURANCE CO & POLICY # PEMCO CA 1508004

VEHICLE LEGALLY PARKED YES ☑ NO ☐ — CITATION # — CHARGE

VEHICLE NO. 2 SHADE IN DAMAGED AREA

OFFICER'S NAME (PRINT)	BADGE OR ID #	AGENCY
C. WELLS #131	131	WA0311900

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E345479

CASE # 14-1810

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		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		
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		

NARRATIVE

Unit #2 was stopping at the signal when Unit #1 rear ended Unit #2. No injuries reported.

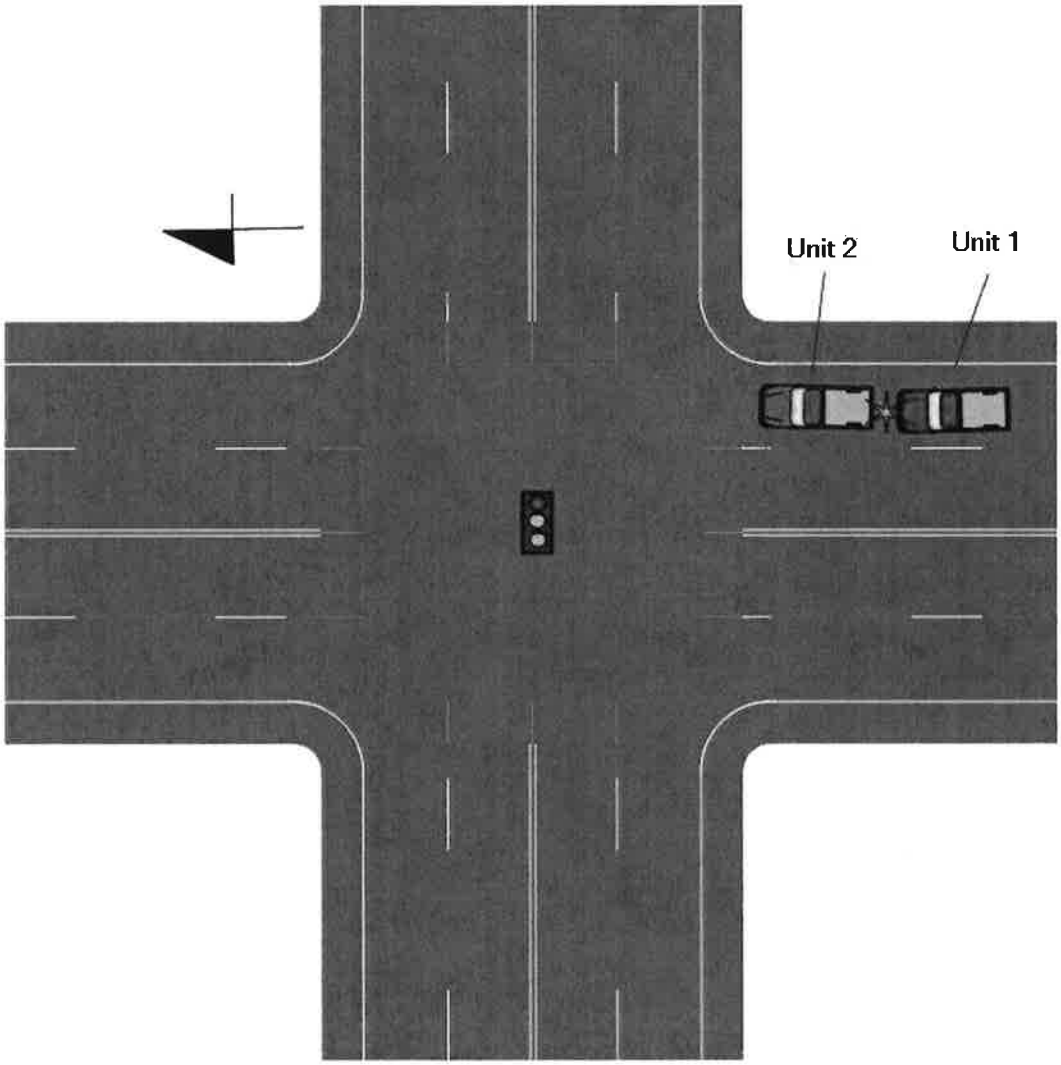
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

C. WELLS #131		07-31-14 12:03 AM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
BOB SUMMERS 079	7/31/2014 12:28:49 PM

BADGE OR ID #	131	ORI #	WA0311900	TIME POLICE DISPATCHED	6:27 PM	TIME POLICE ARRIVED	6:32 PM

Not to Scale



Incident History for: #SS14014885
Case Numbers: $SS14001810
Entered 07/30/14 18:27:03 BY SPCT03 SP0374
Dispatched 07/30/14 18:27:39 BY SPSC40 SP0166
Enroute 07/30/14 18:27:39
Onscene 07/30/14 18:32:58
Closed 07/30/14 18:57:14

Initial Type: COL Initial Alarm Level: Final Alarm Level:
Final Type: COL (COLLISION,NON-PRIORITY) Pri: 2 Dispo: H
Police BLK: SS002 Fire BLK: AG1618 Map Page: 377E-5 Group: SS1 Beat: WEST
Src: T
Loc: SOPER HILL RD/SR 9 NE ,LKS (V)

Loc Info: NB SR 9
Name: KALHOVDEBUSTARD, ANDREW Addr: Phone: 4257503658

/1827 (SP0374) ENTRY ,CC, JO, 2 VEH ACC, NON INJ, NON BLKING, PULLED
TO SHOULDER, CHEVY S10 VS CHVY PU
/1827 (SP0166) MISC ,BRCST
/1827 VIEWED
/1827 DISPER 19R1 #SS131 WELLS,OFCR (CHAD)
/1832 (SS131) *ONSCNE 19R1
/1835 (SP0166) ASSTOS 19S10 [SOPER HILL RD/SR 9 NE ,LKS]
#SS13 BROOKS,SGT (RON)
/1838 CLEAR 19S10
/1839 ASNCAS 19R1 $SS14001810
/1839 OK 19R1 ,NFC
/1857 (SP0326) CLEAR 19R1 D/H
/1857 CLOSE 19R1

LSPD
ORIGINAL