STATE OF WASHINGTON
POLICE TRAFFIC COLLISION REPORT

1591971

REPORT NO. E296392

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

FIRE RESULTED ☐
STOLEN VEHICLE ☐
HIT & RUN INVOLVED ☐

CASE # 13-03230

LOCAL AGENCY CODING

TOTAL # OF UNITS 03 | OBJECT STRUCK

TRIBAL RESERVATION

DATE OF COLLISION (M M - D D - Y Y Y Y)	TIME (2400)	COUNTY #	MILES		CITY #
12 - 24 - 2013	1135	31		N ☐ S ☐ E ☐ W ☐	IN ☑ OF ☐ 0664

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

DISTANCE MILES ☐ FEET ☐ N ☐ S ☐ E ☐ W ☐ — OF (REFERENCE OR CROSS STREET) LUNDEEN PKWY

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ — DAMAGE THRESHOLD MET YES ☑ NO ☐ — PHONE D: 3604359786

LAST NAME MOSER | FIRST NAME MICHAEL | MIDDLE INITIAL R

STREET NEW ADDRESS ☑ 18408 BURN RD

CITY ARLINGTON | ST WA | ZIP 98223

CDL D M | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE # 7233458 | STATE AK | SEX M | D.O.B. MMDDYYYY 12 - 16 - 1953

ON DUTY ☐ | STATUS | AIRBAG 1 | RESTR. 1 | EJECT 1 | HELMET USE 1 | INJURY CLASS 1 | NATURE OF INJURIES

LICENSE PLATE # 1C3770 | STATE WA | VIN#

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

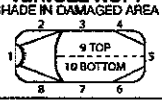
VEH. YEAR 2005 | MAKE HDMC | MODEL TWO | STYLE MC | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ | INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING 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: 2064995334

LAST NAME INGBRETSON | FIRST NAME GARY | MIDDLE INITIAL A

STREET NEW ADDRESS ☐ 626 BENTON ST

CITY PORT TOWNSEND | ST WA | ZIP 98368

CDL | RESTRICTIONS B | ENDORSEMENTS

DRIVER'S LICENSE # INGBRGA478O9 | STATE WA | SEX M | D.O.B. MMDDYYYY 09 - 29 - 1953

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

LICENSE PLATE # AFB6908 | STATE WA | VIN# JTEBU5JR2B5056224

TRAILER PLATE # 9843YD | STATE | TRAILER PLATE # | STATE

VEH. YEAR 2011 | MAKE TOYT | MODEL 4RUNNER | STYLE UT | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. GARY INGBRETSON PO BOX 2008 PORT TOWNSEND WA 98368

LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY # USAA 00142 41 07C

VEHICLE LEGALLY STANDING YES ☐ NO ☐ | CITATION # | CHARGE

VEHICLE NO. 2 SHADE IN DAMAGED AREA

OFFICER'S NAME (PRINT) STEVE WARBIS | BADGE OR ID # 112 | AGENCY WA0311900

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E296392

CASE # 13-03230

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)	INGERBERTSON TERI L
ADDRESS & PHONE #	626 BENTON ST PORT TOWNSEND WA 98368
SEX	F
D.O.B. MMDDYYYY	12 - 28 - 1954

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

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 traveling north on SR9 through intersection of Lundeen Pkwy. Unit 1 did not see that unit 2 was pulling a travel trailer, pulled out onto SR9, and struck the trailer being pulled by unit 2.

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)

STEVE WARBIS		12-24-13 03:51 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
ROBERT MINER 095	12/29/2013 5:42:44 PM

BADGE OR ID #	ORI #	TIME POLICE DISPATCHED	TIME POLICE ARRIVED
112	WA0311900	11:36 AM	11:36 AM

SUPPLEMENTAL POLICE TRAFFIC COLLISION REPORT

013197

REPORT NO. E296392

CASE # 13-03230

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐ INTRASTATE ☐

UNIT # | USDOT | ICC # | VEHICLE TYPE | CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY | ST | ZIP

NAME SOURCE | # AXLES | GVWR | PLACARD ☐ | + | NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT # 3 | MOTOR VEHICLE ☑ | PEDAL-CYCLE ☐ | PEDESTRIAN ☐ | PROPERTY OWNER ☐ | DAMAGE THRESHOLD MET YES ☐ NO ☑ | PHONE

LAST NAME: INGBRETSON | FIRST NAME: GARY | MIDDLE INITIAL

STREET / NEW ADDRESS ☐: 626 BENTON ST

CITY: PORT TOWNSEND | ST: WA | ZIP: 98368

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE # | STATE | SEX: U | D.O.B. MMDDYYYY

ON DUTY ☐ | STATUS | AIRBAG: 1 | RESTR.: 9 | EJECT: 1 | HELMET USE | INJURY CLASS: 1 | NATURE OF INJURIES

LICENSE PLATE #: 9843YD | STATE: WA | VIN#: 1STC9AA10DJ528171

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

VEH. YEAR: 2013 | MAKE: AIRS | MODEL: TRAVEL | STYLE | VEHICLE TOWED YES ☑ NO ☐ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO.: GARY INGBRETSON 626 BENTON ST PORT TOWNSEND WA 98368

LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY #: USAA 00142 41 07C

VEHICLE LEGALLY STANDING YES ☐ NO ☐ | CITATION # | CHARGE

SHADE IN DAMAGED AREA: 9 TOP, 10 BOTTOM

UNIT # | MOTOR VEHICLE ☐ | PEDAL-CYCLE ☐ | PEDESTRIAN ☐ | PROPERTY OWNER ☐ | DAMAGE THRESHOLD MET YES ☐ NO ☐ | PHONE

LAST NAME | FIRST NAME | MIDDLE INITIAL

STREET / NEW ADDRESS ☐

CITY | ST | ZIP

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE # | STATE | SEX | D.O.B. MMDDYYYY

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

LICENSE PLATE # | STATE | VIN#

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

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

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ | INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING YES ☐ NO ☐ | CITATION # | CHARGE

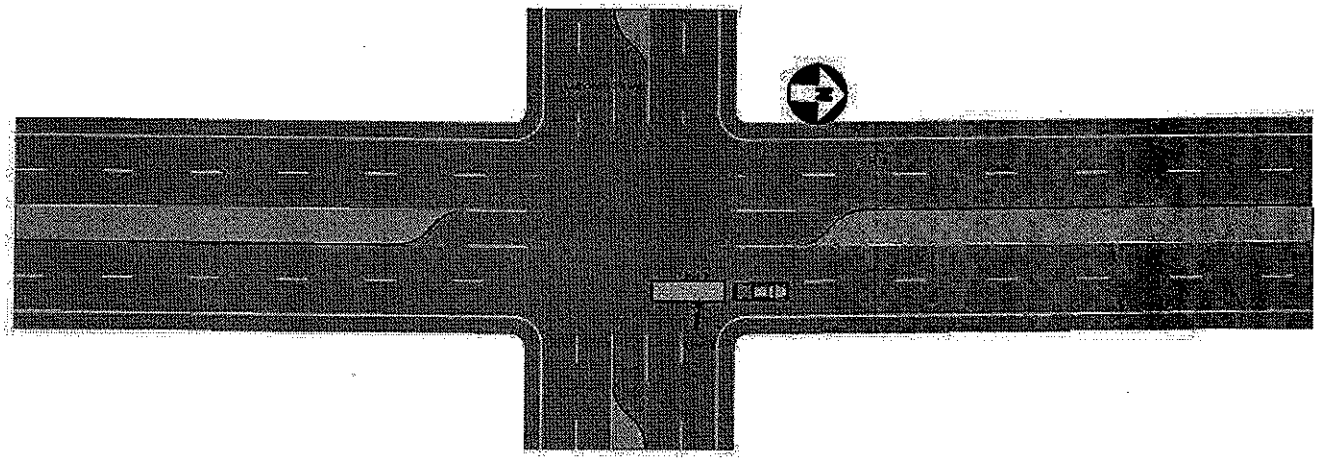
SHADE IN DAMAGED AREA: 9 TOP, 10 BOTTOM

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)

INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST DET	DATED:	PLACE SIGNED
STEVE WARBIS		12-24-13 03:51 PM	

BADGE OR ID #	ORI #	APPROVED BY	DATE
112	WA0311900	MINER	12/29/201

3000-345-013 R (7/06)



Incident History for: #SS13027963 Xref: #AG13003654
Case Numbers: $SS13003230
Entered 12/24/13 11:36:16 BY SPCT05 SP0137
Dispatched 12/24/13 11:36:31 BY SPDP17 SP0194
Enroute 12/24/13 11:36:31
Onscene 12/24/13 11:36:48
Closed 12/24/13 12:12:39

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT,NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H
Police BLK: SS002 Fire BLK: AG1618 Map Page: 377E-6 Group: SS1 Beat: WEST
Src: T
Loc: LUNDEEN PK/SR 9 NE ,LKS (V)

Loc Info:
Name: LENNON, JEREMY Addr: Phone: 4259311373

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/1136  (SP0137)  ENTRY          ,MOTORCYCLE VS VEH, RIDER IS UP & WALKING
/1136  (SP0194)  DISPER  SS1937  #SS112  WARBIS,OFFICER (STEVE)
/1136  (SP0137)  CROSS          #AG13003654
/1136  (SP0194)  ONSCNE  SS1937
/1137  (SP0137)  SUPP           NAM: LENNON, JEREMY,
                                PHO: 4259311373,
                                TXT: ON SR 9 JUST N/O LUNDEEN NB SHOULDER, NON B
                                LKING
/1137  (SP0194)  ASSTER  SS1931 [LUNDEEN PK/SR 9 NE ,LKS]
                                 #SS75   CHRISTENSEN,OFCR (CHAD)
/1138  (SS75  )  REMINQ  SS1931 MDTVEH,AKM8401,,WA,,,,,,,,,,
/1139            REMINQ  SS1931 MDTWANT,,,,,,,WA,HOODMC060PU,,,,,,,,,,,,
/1147  (SP0194)  ASNCAS  SS1937 $SS13003230
/1148  (SS112 )  REMINQ  SS1937 MDTVEH,1C3770,,WA,,,,,,,,,,
/1159  (SS75  ) *ONSCNE  SS1931
/1159            CLEAR   SS1931
/1212  (SP0194)  CLEAR   SS1937 D/H
/1212            CLOSE   SS1937
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LSPD
ORIGINAL