STATE OF WASHINGTON
POLICE TRAFFIC COLLISION REPORT

1591971

REPORT NO. 0684702

CASE #

LOCAL AGENCY CODING

TOTAL # OF UNITS | OBJECT STRUCK

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

FIRE RESULTED ☐
STOLEN VEHICLE ☐
HIT & RUN ☐

DATE OF COLLISION (M M - D D - Y Y Y Y) | TIME (2400) | COUNTY # | MILES | N ☐ E ☐ S ☐ W ☐ | IN ☐ OF ☐ | CITY #

ON (PRIMARY TRAFFIC WAY) | INTERSECTION ☐ NON-INTERSECTION ☐ | BLOCK NO. ☐ MILE POST ☐

DISTANCE | MILES ☐ FEET ☐ | N ☐ S ☐ | E ☐ W ☐ | OF (REFERENCE OR CROSS STREET)

UNIT 01 MOTOR VEHICLE ☐ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET ☐ PHONE

LAST NAME

FIRST NAME | MIDDLE INITIAL

STREET NEW ADDRESS ☐

CITY | ST | ZIP

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

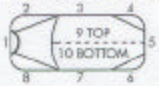
VEH. YEAR | MAKE | MODEL | STYLE | TOWED BY

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 ☐ PHONE

LAST NAME

FIRST NAME | MIDDLE INITIAL

STREET NEW ADDRESS ☐

CITY | ST | ZIP

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

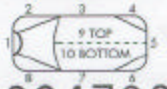
VEH. YEAR | MAKE | MODEL | STYLE | TOWED BY

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ | INSURANCE CO & POLICY #

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

VEHICLE NO. 2
SHADE IN DAMAGED AREA



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OFFICER'S NAME (PRINT) | BADGE OR ID # | AGENCY