



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E345480**

1 4 9 27

1 1

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE # **14-01804**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

2 1

TRIBAL RESERVATION

3 1

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #

DATE OF COLLISION **07 - 30 - 2014** **1047** **31** N  E  IN  S  W  OF **0664**

4

ON (PRIMARY TRAFFIC WAY) INTERSECTION  NON-INTERSECTION

**SR 92** BLOCK NO.  **9500**

4a

5

DISTANCE OF (REFERENCE OR CROSS STREET)

**LAKE DR**

6 2

**UNIT 01** MOTOR VEHICLE  PEDAL-CYCLE  DAMAGE THRESHOLD MET YES  NO  PHONE **D: 4258706991**

6 2

LAST NAME **MILLS** FIRST NAME **ASHLEY** MIDDLE INITIAL **M**

7

STREET NEW ADDRESS **2328B MADRONA DR**

7

CITY **LAKE STEVENS** ST **WA** ZIP **982589560**

8

CDL RESTRICTIONS ENDORSEMENTS

9 9

DRIVER'S LICENSE # **MILLSAM102CS** STATE **WA** SEX **F** D.O.B. **02 - 10 - 1990**

10 9

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

11 5 5

LICENSE PLATE # **AJX5835** STATE **WA** VIN# **3VWLL7AJ9CM389398**

12 5 5

TRAILER PLATE # STATE TRAILER PLATE # STATE

13 4

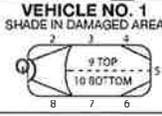
VEH. YEAR **2012** MAKE **VOLK** MODEL **JET TDI** STYLE **4D** VEHICLE TOWED YES  NO  TOWED BY GOVT. VEHICLE YES  NO

14 4

REGISTERED OWNER INFO. **ASHLEY MILLS PO BOX 806 LAKE STEVENS WA 98258 D: 4258706991**

15 2

LIABILITY INSURANCE IN EFFECT  INSURANCE CO & POLICY # **STATE FARM 090-5745-804-47C** CITATION # CHARGE



16 2

**UNIT 02** MOTOR VEHICLE  PEDAL-CYCLE  PEDESTRIAN  PROPERTY OWNER  DAMAGE THRESHOLD MET YES  NO  PHONE **D: 4253748146**

17

LAST NAME **NEUFELD** FIRST NAME **JAMES** MIDDLE INITIAL **E**

18

STREET NEW ADDRESS **14719 43RD PL NE**

19

CITY **LAKE STEVENS** ST **WA** ZIP **982580000**

20

CDL RESTRICTIONS **B** ENDORSEMENTS **L**

21

DRIVER'S LICENSE # **NEUFEJE536L4** STATE **WA** SEX **M** D.O.B. **06 - 24 - 1947**

22

ON DUTY  STATUS AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **7** NATURE OF INJURIES **NECK/BACK**

23

LICENSE PLATE # **DP19859** STATE **WA** VIN# **1B3EJ56H4WN153782**

24

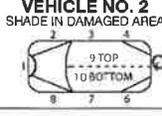
TRAILER PLATE # STATE TRAILER PLATE # STATE

25

VEH. YEAR **1998** MAKE **DODG** MODEL **STR4D** STYLE **4D** VEHICLE TOWED YES  NO  TOWED BY GOVT. VEHICLE YES  NO

26

REGISTERED OWNER INFO. **JAMES NEUFELD 14719 43RD PL NE LAKE STEVENS WA 98258**



LIABILITY INSURANCE IN EFFECT  INSURANCE CO & POLICY # **TRUMBALL 52 PH 408203-817656** CITATION # CHARGE

OFFICER'S NAME (PRINT) **M. HINGTGEN** BADGE OR ID # **126** AGENCY **WA0311900**

0 1 29

0 6 30

1 1 2 31

1 1 2 32

3 7 33

3 7 34

4 35

4 36

37

38

39

40

41

1 42



1591972

CORRECTION

REPORT NO. **E345480**

CASE # **14-01804**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

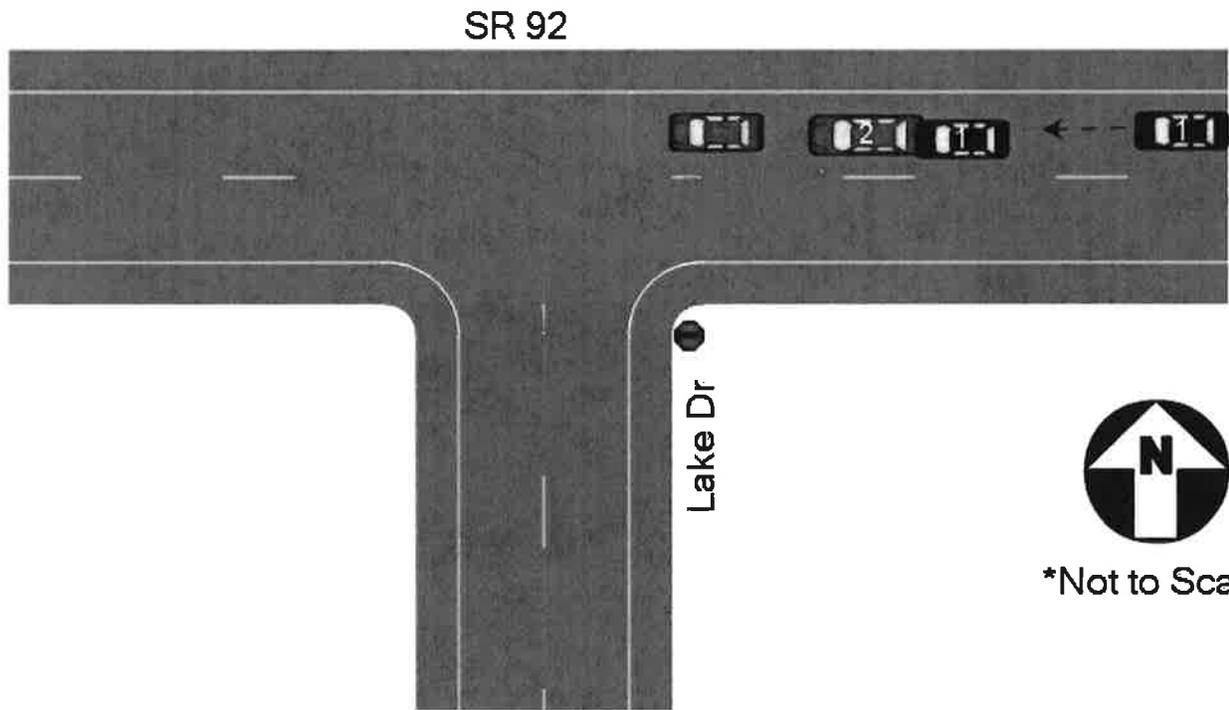
NAME (LAST, FIRST, MIDDLE INITIAL)																	
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY	-		-	
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																	
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY	-		-	
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	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	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES

**NARRATIVE**

Veh #2 and Veh #1 were traveling westbound in approximately 9500 blk of SR 92. Veh #2 slowed for a stopped vehicle making a left turn onto Lake Dr from SR 92. the Veh #2 slowed for the forward vehicle and Veh #1 failed to yield to the slowing/stopped vehicle. Veh #1 impacted the rear of Veh #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)

<b>M. HINGTGEN</b>				<b>07-30-14 11:27 AM</b>			
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET		DATED		PLACE SIGNED	
APPROVED BY <b>BOB SUMMERS 079</b>				DATE <b>7/31/2014 12:28:03 PM</b>			
BADGE OR ID #	<b>126</b>	ORI #	<b>WA0311900</b>	TIME POLICE DISPATCHED	<b>10:47 AM</b>	TIME POLICE ARRIVED	<b>10:51 AM</b>



**CHECK ALL THAT APPLY:**

NON-IMPOUND/TOW

AAA or OTHER ROADSIDE ASSISTANCE

EVIDENCE

SEIZED UNDER RCW 99.50.505

IMPOUND ONLY

DUI/PC IMPOUND WITH 12 HOUR HOLD

DWLS IMPOUND WITH \_\_\_ DAY HOLD

INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER

REGISTERED OWNER MAY REDEEM \_\_\_\_\_

CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER/LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. THEY WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

**UNIFORM WASHINGTON STATE  
TOW / IMPOUND  
AND INVENTORY RECORD**

CASE / EVIDENCE NUMBER  
14-01804

VEHICLE INFORMATION			
VIN 1 B 3 E J 5 6 H 4 W N 1 5 3 7 8 2			
LICENSE DP19859	STATE WASHINGTON	YEAR 1998	MAKE DODGE
MILEAGE <input checked="" type="checkbox"/> Digital <input type="checkbox"/> Report of Sale DIGITAL UNREADABLE		STYLE 4-DOOR SEDAN	MODEL STR4D
COLOR GREEN			
DRIVER	REGISTERED OWNER	LEGAL OWNER	
NAME (LAST, FIRST, MI) NEUFELD, JAMES E	NAME (LAST, FIRST, MI) NEUFELD, JAMES E	NAME (LAST, FIRST, MI)	
STREET ADDRESS 14719 43RD PL NE	STREET ADDRESS 14719 43RD PL NE	STREET ADDRESS	
CITY, STATE, ZIP CODE LAKE STEVENS, WA 982580000	CITY, STATE, ZIP CODE LAKE STEVENS, WA 98258	CITY, STATE, ZIP CODE	
PHONE (425)374-8146	DOB	PHONE	PHONE

**AUTHORIZATION AND RECEIPT**

ON 7/30/2014 AT 11:20 PURSUANT TO RCW 46.55.085 / 113 AND HAVING PERSONALLY INVENTORIED THE ITEMS  
(DATE) (24 HOURS)

IN THE DESCRIBED VEHICLE, I AUTHORIZED ANGEL TOWING 5024-7  
(TOWING FIRM) (DOL TRUCK NO.)

DRIVEN BY STANDLE TO REMOVE THIS VEHICLE FROM 9500 SR 92/LAKE DR  
(DRIVER'S PRINTED FIRST AND LAST NAME) (LOCATION)

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> [ ] KEYS <input type="checkbox"/> LOCKED TRUNK <input type="checkbox"/> LOCKED GLOVE BOX <input type="checkbox"/> LOCKED CENTER CONSOLE <input type="checkbox"/> AUTO STEREO <input type="checkbox"/> [ ] DISC(S) <input type="checkbox"/> HANDS FREE DEVICE <input type="checkbox"/> GPS <input type="checkbox"/> RADAR / LIDAR DETECTOR <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER _____	<input type="checkbox"/> FRONT SHADE DAMAGED AREA <input type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input type="checkbox"/> R REAR <input type="checkbox"/> L FRONT <input type="checkbox"/> L SIDE <input type="checkbox"/> L REAR <input type="checkbox"/> REAR <input type="checkbox"/> TOP <input type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OTHER _____		

INVENTORY	NARRATIVE OR DIAGRAM <small>(List re-accr(s) for impound.)</small>
N/A	Collision Impound. Driver transported to hospital.

I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT TO THE TOWING FIRM'S OPERATOR WHO TOOK POSSESSION OF THE VEHICLE.

I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE TO THE DRIVER OF THIS VEHICLE.  THE VEHICLE WAS ABANDONED - A COPY OF THE TOW / IMPOUND REPORT WAS LEFT WITH THE VEHICLE.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT (RCW 9A.72.085), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

OFFICER'S ELECTRONIC SIGNATURE M. Hingtgen SNOHOMISH, WA 126 Lake Stevens PD  
COUNTY, WA BADGE NO AGENCY

**LSPD ORIGINAL**



LSPD  
ORIGINAL

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number M. H. NORTON #126			Case Number 14-01904	
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: COLLISION			Date/Time: 7/30/14 @ 1101	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification				
Item # 2	Item PISTOL	Brand Name STBYR			Storage Location	Disposition
Action # 10	Brand/Model/Caliber 59/9MM (Further Description)					
	Serial # 036076	Where Found	Weight of Narcotic			
Owner's Name NEUFELD, JAMES R		Address 14719 43RD PL NW		City LAKE STEVENS	State WA	Zip 98258
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here	
Item # 3	Item MAGAZINES (3)	Brand Name			Storage Location	Disposition
Action # 10	Brand/Model/Caliber 9MM (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name NEUFELD, JAMES R		Address 14719 43RD PL NW		City LAKE STEVENS	State WA	Zip 98258
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here	
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State	Zip
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here	
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State	Zip
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here	
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State	Zip
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here	
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State	Zip
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here	

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING:
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

LSPD ORIGINAL

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number M. HINDERTZEN #122			Case Number 14-01804	
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: COLLISION			Date/Time: 7/30/14 @ 1047	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification				
Item # 1	Item Photo CD	Brand Name			Storage Location	Disposition
Action # 3	Brand/Model/Caliber (Further Description)					
Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here
Item #	Item	Brand Name			Storage Location	Disposition
Action #	Brand/Model/Caliber (Further Description)					
Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions						Barcode goes here

Evidence Control Use Only:

Received by Evidence: \_\_\_\_\_ NCIC/WACIC  Date: \_\_\_\_\_ CAD/RMS Checked \_\_\_\_\_  
 Name: \_\_\_\_\_ # \_\_\_\_\_ NCIC/WACIC + Date: \_\_\_\_\_ Owner Letter Sent: \_\_\_\_\_  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_ NCIC/WACIC - Date: \_\_\_\_\_ Owner Letter Sent: \_\_\_\_\_

**LSPD ORIGINAL**

ROUTING: \_\_\_\_\_  
 White: Property Room  
 Yellow: Case File



Incident History for: #SS14014854 Xref: #AG14002167

Case Numbers: \$SS14001804

Entered 07/30/14 10:47:37 BY SPCT09 SP0137  
Dispatched 07/30/14 10:47:58 BY SPDP17 SP0174  
Enroute 07/30/14 10:47:58  
Onscene 07/30/14 10:51:57  
Closed 07/30/14 11:29:14

Initial Type: COL Initial Alarm Level: Final Alarm Level:  
Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H  
Police BLK: SS001 Fire BLK: AG1718 Map Page: 377E-4 Group: SS1 Beat: NORT

Src: T  
Loc: LAKE DR/SR 92 ,LKS (V)

Loc Info:

Name: NEUFELD, JAMES Addr: Phone: 4253284510

/1047 (SP0137) ENTRY ,2 VEHS UNK INJ  
/1047 (SP0174) AGCADV ,BCST  
/1047 DISPER 19D2 #SS126 HINGTGEN, OFFICER (MICHAEL)  
/1048 ASSTER 19D1 #SS102 PLANALP, OFFICER (DANIEL)  
/1048 CROSS #AG14002166  
/1048 (SP0137) SUPP NAM: NEUFELD, JAMES,  
PHO: 4253284510,  
TXT: GREEN DODGE STRATUS VS DARK COLORED VOLKS L  
/AJX5835 NON BLKING  
/1048 (SP0174) MISC ,DISREGARD LAST XREF WRONG CALL  
/1051 ONSCNE 19D2  
/1051 ONSCNE 19D1  
/1052 (\*\*\*\*\*) REMINQ 19D2 AJX5835  
/1052 (SP0174) REMINQ 19D2 LIC, 19D2, AJX5835, ,  
/1052 (\*\*\*\*\*) REMINQ 19D2 DP19859  
/1052 (SP0174) REMINQ 19D2 LIC, 19D2, DP19859, ,  
/1100 ROTREQ 19D1 TOW 5024 LKS ANGEL TRANSPORT & TOWING  
3605680918  
/1101 REMINQ 19D1 GUN, 19D1, , , 036076, , , , , , , ,  
/1101 REMINQ 19D1 GUN, 19D1, 036076, , , , , , , ,  
/1101 REMINQ 19D1 GUN, 19D1, 036076, , , , , , , ,  
/1102 REMINQ 19D1 GUN, 19D1, , , , 036076, , , , , , , ,  
/1102 ASNCAS 19D2 \$SS14001804  
/1104 MISC 19D1 , ANGEL TOW ENRT  
/1113 (SS102 ) CLEAR 19D1  
/1129 (SP0174) CLEAR 19D2 D/H  
/1129 CLOSE 19D2

LSPD  
ORIGINAL