



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E396078**

1 0 6 27
2
3
1 1 8 28
2
3

| | | |
|---|--------------------------------------|---|
| INTERSTATE <input type="checkbox"/> | CITY STREET <input type="checkbox"/> | FIRE RESULTED <input type="checkbox"/> |
| STATE ROUTE <input checked="" 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 # **15-00259**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

TRIBAL RESERVATION

DATE OF COLLISION **01 - 27 - 2015** TIME (2400) **1803** COUNTY # **31** MILES **N** **E** **IN** **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION
SR 9 BLOCK NO. **900**
 MILE POST

DISTANCE **200** **00** MILES **N** **E** **S** **W** OF (REFERENCE OR CROSS STREET) **LUNDEEN PKWY**

UNIT 01 MOTOR VEHICLE PEDAL-CYCLE DAMAGE THRESHOLD MET YES NO PHONE **D: 4258914270**

LAST NAME **BENNETT** FIRST NAME **MELISSA** MIDDLE INITIAL **D**

STREET NEW ADDRESS **632 75TH ST SE APT 9**

CITY **EVERETT** ST **WA** ZIP **98203**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **BENNEMD131D1** STATE **WA** SEX **F** D.O.B. **03 - 21 - 1987**

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

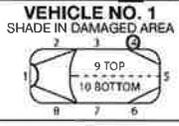
LICENSE PLATE # **AQY2794** STATE **WA** VIN# **JH4KA8263PC002600**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1993** MAKE **ACUR** MODEL **LEG2D** STYLE **CP** VEHICLE TOWED YES NO TOWED BY **RESCUE TOW** GOVT. VEHICLE YES NO

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY #
 VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET YES NO PHONE **D: 4252443043**

LAST NAME **BORDERS** FIRST NAME **CHINATSU** MIDDLE INITIAL

STREET NEW ADDRESS **3326 BAKER VISTA LN**

CITY **LAKE STEVENS** ST **WA** ZIP **982588786**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **BORDEC*268NB** STATE **WA** SEX **F** D.O.B. **08 - 02 - 1974**

ON DUTY STATUS AIRBAG **3** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

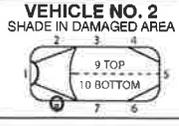
LICENSE PLATE # **ASU2820** STATE **WA** VIN# **3HGGK5H87FM742807**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2015** MAKE **HOND** MODEL **FIT** STYLE **4H** VEHICLE TOWED YES NO TOWED BY **RESCUE TOW** GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **OWNED BY DRIVER**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **ALLSTATE 907774067**
 VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



OFFICER'S NAME (PRINT) **G. HEINEMANN #133** BADGE OR ID # **#0133** AGENCY **WA0311900**

0 2 29

0 1 30

1 1 2 31

1 1 2 32

FROM TO 5 1 33

FROM TO 5 1 34

4 35

4 36

37

38

39

40

41

42



1591972

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **BENNETT MADILYNN D**

ADDRESS & PHONE # **632 75TH ST SE APT 9 EVERETT WA 98203** SEX **F** D.O.B. (MMDDYYYY) **08** - **16** - **2005**

PASSENGER WITNESS UNIT # **1** SEAT POS. **7** AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL) **BORDERS SAKURA M**

ADDRESS & PHONE # **3326 BAKER VISTA LN LAKE STEVENS WA 98258** SEX **F** D.O.B. (MMDDYYYY) **04** - **23** - **2003**

PASSENGER WITNESS UNIT # **2** SEAT POS. **7** AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL) **STEPHENS MIKE**

ADDRESS & PHONE # **4255300800** SEX **M** D.O.B. (MMDDYYYY) **06** - **03** - **1975**

PASSENGER WITNESS UNIT # SEAT POS. AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NARRATIVE

On the listed date and time, Unit 1 and Unit 2 were traveling northbound in the 900 block of SR 9 NE in the city of Lake Stevens. Unit 1 was traveling the the west lane (1 of 3). Unit 2 was traveling in lane 2. Approaching a line of traffic, Unit 1 abruptly changed lanes to lane 2 without looking, striking Unit 2 in the front left fender with their rear right fender. Airbag deployment in Unit 2 but driver refused medical attention. Both vehicles were towed by Rescue towing per owner request. Multiple witnesses provided statements in regard to the incident.

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)

G. HEINEMANN #133 INVESTIGATING OFFICER'S SIGNATURE **01-28-15 08:32 PM** UNIT OR DIST. DET DATED PLACE SIGNED

APPROVED BY **BOB SUMMERS 079** DATE **1/29/2015 4:53:56 AM**

BADGE OR ID # **#0133** ORI # **WA0311900** TIME POLICE DISPATCHED **6:04 PM** TIME POLICE ARRIVED **6:11 PM**



1591972

CORRECTION

REPORT NO.

E396078

CASE #

15-00259

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

| | | | | | | | | | | | | | | | | | | |
|---------------------------------------|--------------------------|---------------------------------------|-------------------------------------|--------|--|-----------|--|--------|----------|--------------------|-----------|-------|-----------|------------|-------------|--------------|--|--------------------|
| NAME (LAST, FIRST, MIDDLE INITIAL) | | BAIN LYNNE N | | | | | | | | | | | | | | | | |
| ADDRESS & PHONE # | | MARYSVILLE WA 98271 4253500854 | | | | | | SEX | F | D.O.B. MMDDYYYY | 10 | - | 25 | - | 1985 | | | |
| PASSENGER | <input type="checkbox"/> | WITNESS | <input checked="" 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 |

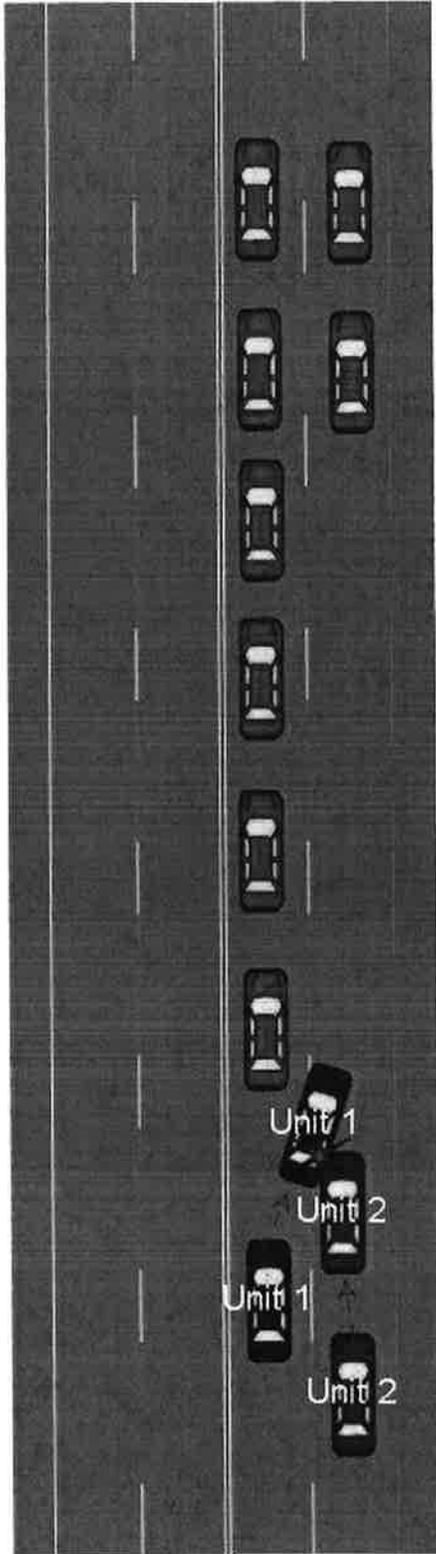
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| | | | | | | | |
|---------------------------------------|--------------|--------------------------|-------------------------------------|------------------------|----------------|---------------------|----------------|
| G. HEINEMANN #133 | | 01-28-15 08:32 PM | | | | | |
| INVESTIGATING OFFICER'S SIGNATURE | | UNIT OR DIST. DET | | PLACE SIGNED | | | |
| APPROVED BY BOB SUMMERS 079 | | | DATE 1/29/2015 4:53:56 AM | | | | |
| BADGE OR ID # | #0133 | ORI # | WA0311900 | TIME POLICE DISPATCHED | 6:04 PM | TIME POLICE ARRIVED | 6:11 PM |

SR 9 (55mph)



Not to scale

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 15-00259

VICTIM / WITNESS

| | | | | | | | | | | |
|-----------------------------------|---|---|-----------------|-----------------|---------------------------------------|---------------------|---------------------|-------------------|--------------------|--------------------|
| NON-DISC <input type="checkbox"/> | NAME (LAST, FIRST MIDDLE) <u>Bain, Lynne N</u> | RACE <u>W</u> | ETH <u>C</u> | SEX <u>F</u> | DOB <u>10/25/1952</u> | AGE <u>62</u> | HGT <u>5'10"</u> | WGT <u>140</u> | HAIR <u>GRY</u> | EYES <u>GRY</u> |
| STREET ADDRESS | | CITY <u>Marysville</u> | | | STATE <u>WA</u> | ZIP <u>98271</u> | RES. STATUS | | | |
| HOME PHONE | | CELL PHONE <u>425-350-0854</u> | | | PLACE OF EMPLOYMENT <u>FPI mgt</u> | | | | | |
| WORK PHONE | | EMAIL ADDRESS <u>WBAIN@OUTLOOK.COM</u> | | | | | | | | |

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Traveling North on Hwy 9 - a dark colored passenger car switched lanes into a blue Honda Fit - the rear passenger side went up and over the front driver panel of the Honda fit. Dark colored passenger car was in the left lane moving over to the right lane. - Both traveling North

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

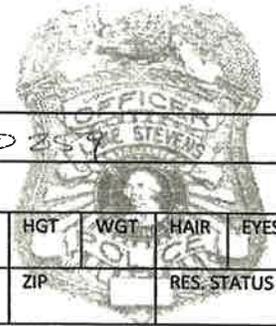
| | | |
|---|---------------------------------|--|
| SIGNATURE: <u>Lynne Bain</u> | DATE SIGNED <u>1-21-2015</u> | LOCATION SIGNED <u>Lake Stevens, WA</u> |
| OFFICER/NUMBER: <u>[Signature] 133</u> | DATE SIGNED <u>1-28-15</u> | LOCATION SIGNED <u>LSPD</u> |

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 15-00259

VICTIM / WITNESS

| | | | | | | | | | | | |
|-----------------------------------|--|------|----------------------------|------|-----------------|---------------------|-------|-----|-------------|------|--|
| NON-DISC <input type="checkbox"/> | NAME (LAST, FIRST MIDDLE) STEPHENS MIKE | RACE | ETH | SEX | DOB 6/3/1975 | AGE 39 | HGT | WGT | HAIR | EYES | |
| STREET ADDRESS | | | | CITY | | | STATE | ZIP | RES. STATUS | | |
| HOME PHONE | | | CELL PHONE 425 530 0800 | | | PLACE OF EMPLOYMENT | | | | | |
| WORK PHONE | | | EMAIL ADDRESS | | | | | | | | |

I, MI, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I WAS DRIVING NORTH ON Hwy 9 Coming Down THE HILL TO LUNDEN PARKWAY AND SAW A DARK COLORED CAR CHANGE LANES (my LANE) WITHOUT THERE BLINKER AND CRASH INTO THE FRONT DRIVER CORNER OF ANOTHER CAR IN FRONT OF ME. I STOPPED TO HELP THE CARS.

| | | |
|--|------------------------|---------------------------------|
| I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT | | |
| SIGNATURE | DATE SIGNED 1/27/15 | LOCATION SIGNED LAKE STEVENS |
| OFFICER/NUMBER: 153 | DATE SIGNED 1-28-15 | LOCATION SIGNED 1572 |

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PAGE 1 OF 1
LSPD ORIGINAL

Incident History for: #SS15001723

Case Numbers: \$SS15000259

Entered 01/27/15 18:03:48 BY SPDF26 SP0326
Dispatched 01/27/15 18:04:20 BY SPDF17 SP0147
Enroute 01/27/15 18:04:20
Onscene 01/27/15 18:11:15
Closed 01/27/15 19:10:17

Initial Type: COL Initial Alarm Level: Final Alarm Level:
Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H
Police BLK: SS001 Fire BLK: AG1618 Map Page: 377E-6 Group: SS1 Beat: NORT

Src: T
Loc: LUNDEEN PARK WY/SR 9 NE , LKS (V)

Loc Info: SO LOC NB
Name: WITN/LYNNE BAIN Addr: Phone: 4253500854

/1803 (SP0326) ENTRY , CAR ACC, AIRBAG DEPLOYED, UNK INJS
/1804 (SP0147) AGCADV , BCST
/1804 DISPER 19N3 #SS133 HEINEMANN, OFFICER (GAVIN)
/1804 ASSTER 19N2 [LUNDEEN PARK WY/SR 9 NE , LKS]
#SS126 HINGTGEN, OFFICER (MICHAEL)
/1805 (SP0326) SUPP NAM: WITN/LYNNE BAIN,
PHO: 4253500854,
TXT: BLKING TURN LANE, HONDA FIT VS UNK OTHER
/1806 (SS133) REMINQ 19N3 MDTVEH, AJX2045, , WA, , , , , , , , , ,
/1806 (SP0326) SUPP TXT: AID DECLINED
/1811 (SP0147) ONSCNE 19N3
/1813 (*****) REMINQ 19N3 AQY2794
/1813 (ROGER) REMINQ 19N3 LIC, 19N3, AQY2794, , ,
/1815 ONSCNE 19N2
/1820 MISC 19N2 , RESCUE TOWING AT OWNERS REQ
/1823 (SS133) REMINQ 19N3 MDTWANT, BORDERS, CHINATSU, , 080274, , , WA, , , , , , , , , ,
', , ,
/1824 REMINQ 19N3 MDTWANT, BENNETT, MELISSA, D, 032187, , , WA, , , , , , , , , ,
' , , ,
/1829 (SP0297) CLEAR 19N2
/1836 (ROGER) ASNCAS 19N3 \$SS15000259
/1853 (SS133) *MISC 19N3 , RESCUE TOW IS TOWING BOTH VEHICLES PER OWNER RE
QUEST
/1910 (ROGER) CLEAR 19N3 D/H
/1910 CLOSE 19N3

LSPD
ORIGINAL