



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E458565**

12
22
31
4
4a
5
61
7
8
99
109
1140
1240
132
142
152
162
17
18
19
20
21
22
23
24
25
26

1 0 4 27
2
3
1 1 8 28
2
3
0 1 29
0 7 30
1 1 2 31
2
3
1 1 2 32
2
3
1 5 33
9 9 34
4 35
4 36
37
38
39
40
1 41
1 42

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 #	15-02215	
LOCAL AGENCY CODING		
TOTAL # OF UNITS	02	OBJECT STRUCK

TRIBAL RESERVATION												
DATE OF COLLISION	M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	CITY #
09			03		2015				1656	31		0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>
SR 9 NE	BLOCK NO. <input checked="" type="checkbox"/>	800
	MILE POST <input type="checkbox"/>	
DISTANCE	OF (REFERENCE OR CROSS STREET)	
450	00	SR 204
MILES	FEET	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
N	E	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S	W	

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
LAST NAME	AMAN	FIRST NAME	ZOE	MIDDLE INITIAL
				E
STREET NEW ADDRESS	601 W LILAC WAY			
CITY	ELLENSBURG	ST	WA	ZIP
				989262390
CDL	RESTRICTIONS	B	ENDORSEMENTS	

DRIVER'S LICENSE #	AMAN*ZE129P4	STATE	WA	SEX	F	D.O.B. MMDDYYYY	10	-	24	-	1988
--------------------	--------------	-------	----	-----	---	-----------------	----	---	----	---	------

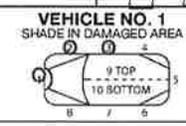
ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	9	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
----------------------------------	--------	--------	---	--------	---	-------	---	------------	---	--------------	---	--------------------

LICENSE PLATE #	ANF5450	STATE	WA	VIN#	1FAFP13P4WW207796
-----------------	---------	-------	----	------	-------------------

TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
-----------------	-------	-----------------	-------

VEH. YEAR	1998	MAKE	FORD	MODEL	ESC4D	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
REGISTERED OWNER INFO.	ANTHONY AMAN 11411 CHAIN LAKE RD SNOHOMISH WA 98290									

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GEICO 4398-95-47-37
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #	CHARGE



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
---------	---------------------------------------------------	--------------------------------------	-------------------------------------	-----------------------------------------	------------------------------------------------------------------------------------------	-------

LAST NAME	NGUYEN	FIRST NAME	KHOA	MIDDLE INITIAL	V
-----------	--------	------------	------	----------------	---

STREET NEW ADDRESS	12909 2ND ST SE				
--------------------	-----------------	--	--	--	--

CITY	LAKE STEVENS	ST	WA	ZIP	982589278
------	--------------	----	----	-----	-----------

CDL	RESTRICTIONS	ENDORSEMENTS
-----	--------------	--------------

DRIVER'S LICENSE #	NGUYEKV048NP	STATE	WA	SEX	M	D.O.B. MMDDYYYY	08	-	17	-	1996
--------------------	--------------	-------	----	-----	---	-----------------	----	---	----	---	------

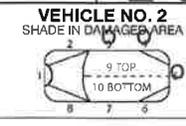
ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	9	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
----------------------------------	--------	--------	---	--------	---	-------	---	------------	---	--------------	---	--------------------

LICENSE PLATE #	040YPK	STATE	WA	VIN#	KNAFE121365261591
-----------------	--------	-------	----	------	-------------------

TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
-----------------	-------	-----------------	-------

VEH. YEAR	2006	MAKE	KIA	MODEL	SPEC4D	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
REGISTERED OWNER INFO.	LARRY DICKEN 12909 2ND ST SE LAKE STEVENS WA 98258									

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	21ST CENTURY 2198 16 25
VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE



OFFICER'S NAME (PRINT)	W. AUKERMAN	BADGE OR ID #	72	AGENCY	WA0311900
------------------------	-------------	---------------	----	--------	-----------



1591972

CORRECTION

REPORT NO. **E458565**

CASE # **15-02215**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **AMAN RYDER J**

ADDRESS & PHONE # **11411 CHAIN LAKE RD SNOHOMISH WA 98290** SEX **M** D.O.B. **11** - **25** - **2010**

PASSENGER WITNESS UNIT # **1** SEAT POS. **7** AIRBAG **9** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL) **AMAN KINSEY L**

ADDRESS & PHONE # **11411 CHAIN LAKE RD SNOHOMISH WA 98290** SEX **F** D.O.B. **01** - **02** - **2013**

PASSENGER WITNESS UNIT # **1** SEAT POS. **9** AIRBAG **9** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE # SEX D.O.B.

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

NARRATIVE

On 09/03/2015 at about 1656 hours (all times approximate) I responded to a two vehicle non-injury/non-blocking vehicle collision in the 800 block of SR 9 NE in the city of Lake Stevens. Arriving on scene I spoke with both driver's involved. Based on evidence and statements at the scene it is found that U2 had been stopped in the inside lane of southbound SR 9 NE for traffic backed up from the red light at SR 204. U1 approached from the rear and was unable to stop (driver claimed to skid) before hitting the back of U2. U1 had moved right before impact which resulted in the front driver's corner striking the rear passenger corner of U2. The driver of U1 stated she believed the tires/brakes on her vehicle were bad due to the skid. I observed the tires to have legal tread depth. The driver also stated the tires on U1 had been purchased as used tires. There were no reported injuries at the time of the collision. Both driver's were provided statement forms to complete if they wished to. I took several digital images of the collision scene and involved vehicles. I provided both driver's with the exchange of information. U1 drove from the scene and U2 had electrical problems (ongoing issue stated by the driver of U2) and had to wait for assistance to be moved.

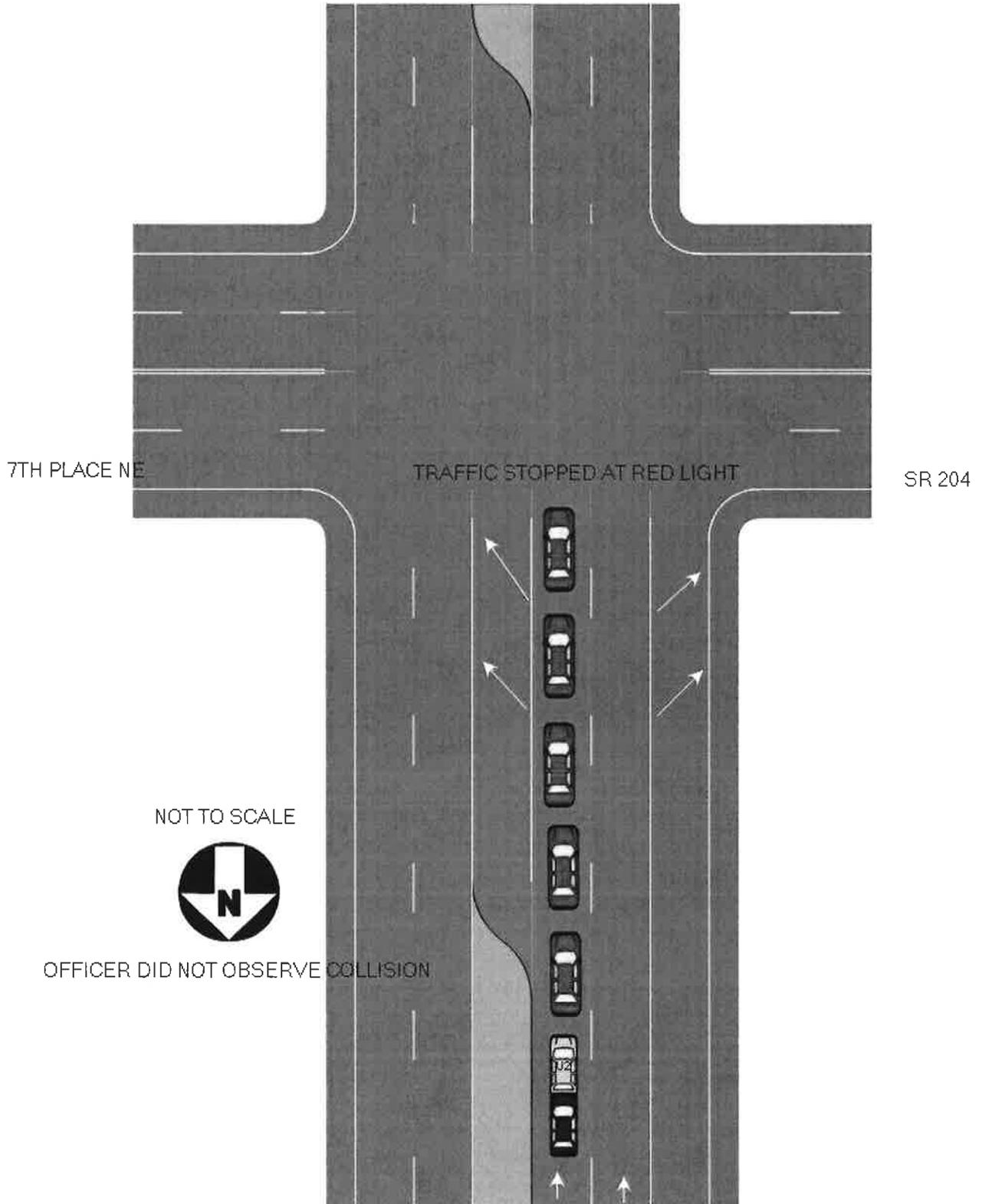
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

W. AUKERMAN INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET **09-04-15 06:32 AM** DATED PLACE SIGNED

APPROVED BY **ROBERT MINER 095** DATE **9/4/2015 11:13:22 PM**

BADGE OR ID # **72** ORI # **WA0311900** TIME POLICE DISPATCHED **4:56 PM** TIME POLICE ARRIVED **5:02 PM**

SR 9 NE



NOT TO SCALE



OFFICER DID NOT OBSERVE COLLISION

SR 9 NE

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 15-02215

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>Nguyen, Khoa, V</u>	RACE	ETH	SEX <u>M</u>	DOB <u>08/17/96</u>	AGE <u>19</u>	HGT	WGT	HAIR	EYES
STREET ADDRESS <u>12909 2nd St SE</u>		CITY <u>Lake Stevens</u>			STATE <u>WA</u>	ZIP <u>98258</u>	RES. STATUS			
HOME PHONE		CELL PHONE <u>425-232-6016</u>			PLACE OF EMPLOYMENT <u>Safeway</u>					
WORK PHONE		EMAIL ADDRESS <u>ranger3912@gmail.com</u>								

I, Khoa Nguyen, 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 at the red light stopped waiting, didnt see it coming and just felt the impact. No passengers on my part. No one was hurt.

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>Khoa Nguyen</u>	DATE SIGNED <u>09/3</u>	LOCATION SIGNED <u>Lake Stevens</u>
OFFICER/NUMBER: <u>AWKERMAN #72</u>	DATE SIGNED <u>9-3-15</u>	LOCATION SIGNED <u>LAKE STEVENS, WA</u>

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

REVISED 4/2009

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 15-02215

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>Aman, Zoe Eliza</u>	RACE <u>W</u>	ETH	SEX <u>F</u>	DOB <u>10-24-88</u>	AGE <u>26</u>	HGT <u>5'6"</u>	WGT <u>135</u>	HAIR <u>BRN</u>	EYES <u>BLU</u>
STREET ADDRESS <u>11411 Chain Lake Rd</u>		CITY <u>Snohomish</u>			STATE <u>WA</u>	ZIP <u>98290</u>	RES. STATUS			
HOME PHONE <u>360-794-7572</u>		CELL PHONE <u>360-547-9585</u>			PLACE OF EMPLOYMENT <u>student - EJCC</u>					
WORK PHONE		EMAIL ADDRESS <u>zoneytea@gmail.com</u>								

I, Zoe Aman, 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.

Ryder Aman 11-25-10

Kinsey Aman 1-2-13

Tires locked up & slid, hitting rear end of gray Kia Spectra.

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>Zoe Aman</u>	DATE SIGNED <u>9-3-15</u>	LOCATION SIGNED
OFFICER/NUMBER: <u>Alkerman #72</u>	DATE SIGNED <u>9-3-15</u>	LOCATION SIGNED <u>LAKE STEVENS</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 EVIDENCE UNIT		Primary Officer/Badge Number <i>AUERMAN #72</i>			Case Number <i>15-02215</i>	
Type of Crime: <u>Felony</u> / Misdemeanor (Circle)		Type of Case: <i>COLLISION</i>			Date/Time: <i>9-3-15/1745</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Stature of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification				
Item # <i>1</i>	Item <i>CD-RW</i>	Brand Name <i>COMPUCESSORY</i>		Storage Location		Disposition
Action #	Brand/Model/Caliber		(Further Description)			
<i>3</i>	Serial #	Where Found <i>800 SE 9th LKS</i>	Weight of Narcotic			
Owner's Name		Address		City	State	Zip Phone #
Owner Signature/Other remarks /additional information/ special instructions <i>PICS</i>						Barcode goes here
<i>72</i>						
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	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File





EXCHANGE OF INFORMATION

OFFICER NAME: **W. AUKERMAN #72**

COLLISION: **09/03/15 04:56 PM**

CASE#: **15-02215**

AGENCY: **LAKE STEVENS PD**

DISPATCH: **09/03/15 04:56 PM**

LOCATION: **SR 9 NE BN:800**

NARRATIVE/ NOTES:

ARRIVAL: **09/03/15 05:02 PM**

AT SR 204

UNIT 1:	MOTOR VEHICLE -	1998 FORD ESC4D PLATE: ANF5450 (WA)	TOWED BY:
DRIVER: ZOE E AMAN		VEH OWNER: ANTHONY J AMAN	
ADDRESS: 601 W LILAC WAY ELLENSBURG, WA 989262390		ADDRESS: 11411 CHAIN LAKE RD SNOHOMISH, WA 98290	
DL #: AMAN*ZE129P4		STATE: WA	
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY: GEICO		INSURED BY:	
POLICY #: 4398-95-47-37		POLICY #:	
<hr/>			
UNIT 2:	MOTOR VEHICLE -	2006 KIA SPEC4D PLATE: 040YPK (WA)	TOWED BY:
DRIVER: KHOA V NGUYEN		VEH OWNER: LARRY A DICKEN	
ADDRESS: 12909 2ND ST SE LAKE STEVENS, WA 982589278		ADDRESS: 12909 2ND ST SE LAKE STEVENS, WA 98258	
DL #: NGUYEKV048NP		STATE: WA	
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY: 21SY CENTURY		INSURED BY:	
POLICY #: 2198 16 25		POLICY #:	