



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E458788**

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INTERSTATE  CITY STREET   
STATE ROUTE  OTHER   
COUNTY RD  PRIVATE WAY   
FIRE RESULTED   
STOLEN VEHICLE   
HIT & RUN INVOLVED

CASE # **15-02242**  
LOCAL AGENCY CODING  
TOTAL # OF UNITS **02** OBJECT STRUCK

TRIBAL RESERVATION

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #  
DATE OF COLLISION **09 - 05 - 2015** **1115** **31** N  E  IN   
S  W  OF **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION  NON-INTERSECTION   
**86TH AVE SE** BLOCK NO.  **315**  
MILE POST

DISTANCE **200** **00** MILES  N  E   
FEET  S  W  OF (REFERENCE OR CROSS STREET) **3RD STREET SE**

UNIT 01 MOTOR VEHICLE  PEDAL-CYCLE  DAMAGE THRESHOLD MET YES  NO  PHONE

LAST NAME **UNKNOWN** FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL RESTRICTIONS ENDORSEMENTS

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

ON DUTY  STATUS AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

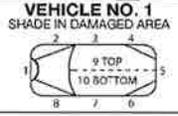
LICENSE PLATE # STATE VIN#

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 IS ABANDONED YES  NO  CITATION # CHARGE



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

LAST NAME **UNKNOWN** FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL RESTRICTIONS ENDORSEMENTS

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

ON DUTY  STATUS AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

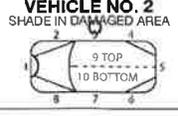
LICENSE PLATE # **C03101B** STATE **WA** VIN# **1FTFX1EF7EFC18411**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2014** MAKE **FORD** MODEL **F1** STYLE **PK** VEHICLE TOWED YES  NO  TOWED BY GOVT. VEHICLE YES  NO

REGISTERED OWNER INFO. **KEVIN WILLIAMS 315 86TH AVE SE LAKE STEVENS WA 98258 D: 4255638327** LIABILITY INSURANCE IN EFFECT  INSURANCE CO & POLICY # **SAFECO H2119517**

VEHICLE LEGALLY IS ABANDONED YES  NO  CITATION # CHARGE



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



1591972

CORRECTION

REPORT NO. **E458788**

CASE # **15-02242**

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

Please see subsequent narrative pages

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>W. AUKERMAN</b>				<b>09-05-15 07:47 PM</b>			
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET		DATED		PLACE SIGNED	
APPROVED BY <b>ROBERT MINER 095</b>				DATE <b>9/5/2015 10:40:38 PM</b>			
BADGE OR ID #	<b>72</b>	ORI #	<b>WA0311900</b>	TIME POLICE DISPATCHED	<b>11:36 AM</b>	TIME POLICE ARRIVED	<b>11:45 AM</b>

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NARRATIVE

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OFFICER: W. Aukerman #72-Lake Stevens Police

This incident was reported in the city of Lake Stevens, which is located in Snohomish County in the State of Washington.

NARRATIVE:

On 09/05/2015 at about 1115 hours (all times approximate) I was dispatched by police radio to a cold hit and run vehicle collision at the address of 315 86th Ave SE, with no suspect information, in the city of Lake Stevens. Kevin Williams called 911 from his residence to report the incident.

Arriving at the residence I spoke with Williams. Williams stated he had noticed new damage to the passenger side of his vehicle (#C03101B-2014 Ford F150). Williams stated he had parked his truck in his driveway last night and then went to Home Depot in Snohomish this morning. Williams stated when he got home from Home Depot is when he observed the damage but could not say exactly when or where the damage had occurred. Williams pointed out the damage to his vehicle appeared very recent since his truck was dirty and the damaged area was clean.

Williams stated he had reported the damage to his insurance company and that his insurance company had instructed him to file a police report so the insurance could repair the damage under uninsured motorist.

Williams completed a written statement under penalty of perjury and I took several digital images of the damage to the truck.

I later printed the images (included in the report) and saved the images to a CD-RW. The CD-RW was logged as evidence and secured in an evidence drop bin at the Lake Stevens Police Department.

At this time the location of where the damage had occurred is not known and there are no suspects.

END OF REPORT.

\*\*\*\* AUTO-POPULATED SECTION \*\*\*\*

THE FOLLOWING ARE DESCRIPTIONS ENTERED FOR ITEMS SELECTED AS "OTHER":

Motor Vehicle Unit 1

Action Code: UNKNOWN

\*\*\*\* END OF AUTO-POPULATED SECTION \*\*\*\*

LOCATION AND TIME OF COLLISION NOT KNOWN OR OBSERVED

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT



CASE NUMBER 15-02242

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>WILLIAMS KEVIN PIERPONT</u>	RACE <u>W</u>	ETH	SEX <u>M</u>	DOB <u>12/29/72</u>	AGE <u>42</u>	HGT <u>6'2"</u>	WGT <u>220</u>	HAIR <u>BROWN</u>	EYES <u>BROWN</u>
STREET ADDRESS <u>315 810<sup>th</sup> AVE SE</u>		CITY <u>LAKE STEVENS</u>			STATE <u>WA</u>	ZIP <u>98258</u>	RES. STATUS			
HOME PHONE <u>425 563 8327</u>		CELL PHONE <u>SAME</u>			PLACE OF EMPLOYMENT <u>BOEING</u>					
WORK PHONE <u>425 314 9513</u>		EMAIL ADDRESS <u>KWILLIE28@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 ITEM(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

~~WENT~~ HAD MY TRUCK PARKED AT HOME THIS MORNING. WENT TO HOME DEPOT, RETURNED HOME. WHILE I WAS UNLOADING THE TRUCK I NOTICED DAMAGE TO THE PASSANGER SIDE OF THE TRUCK. NOT SURE WHERE THE DAMAGE OCCURED.

C03101B-

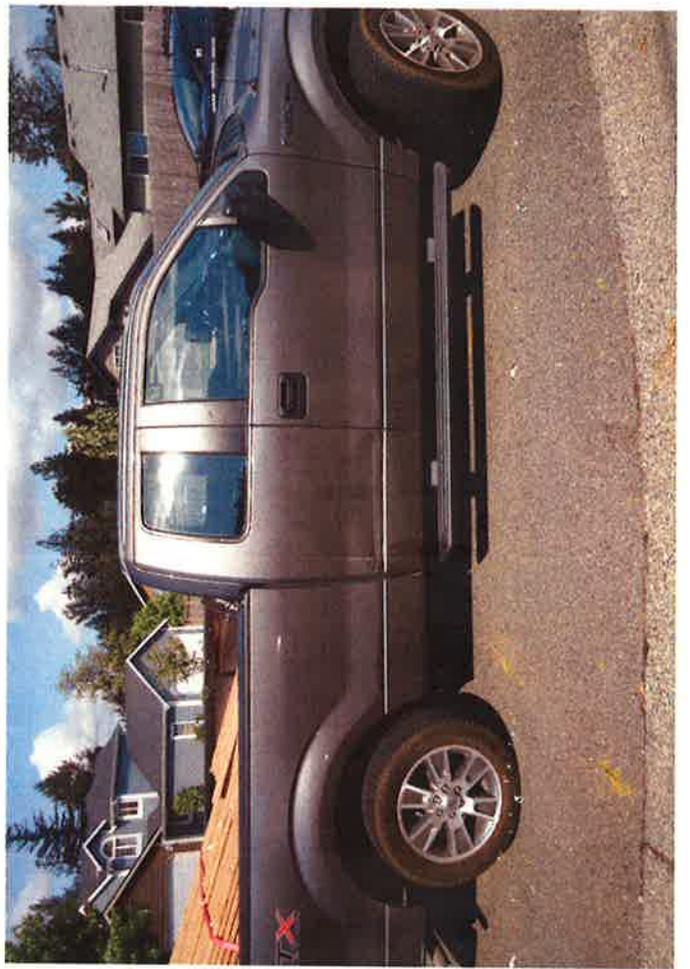
SAFE CO H2119517

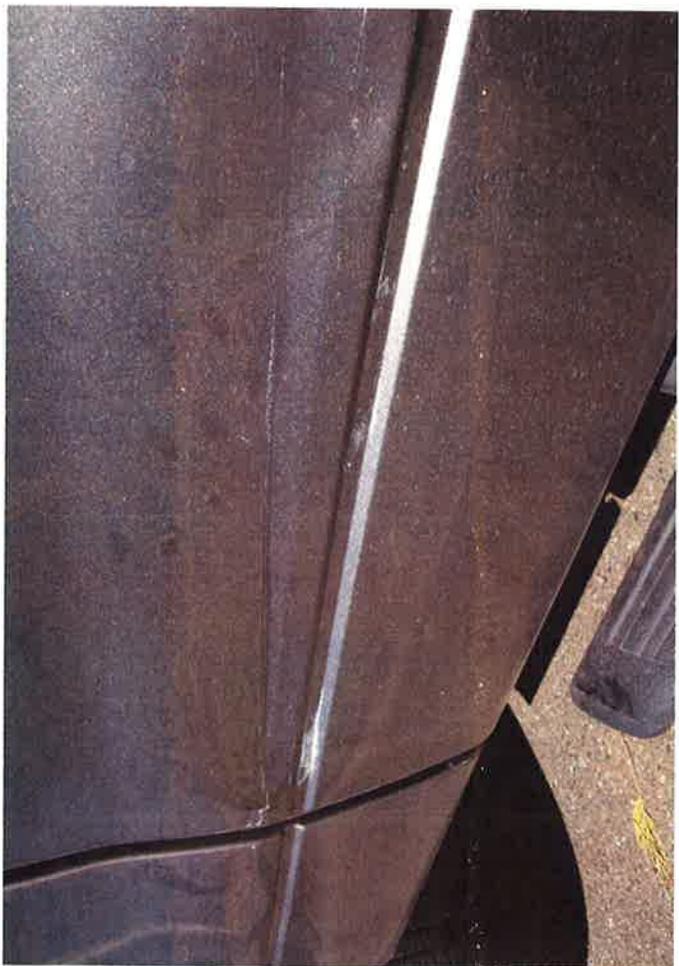
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>[Signature]</u>	DATE SIGNED <u>9/5/15</u>	LOCATION SIGNED
OFFICER/NUMBER: <u>[Signature]</u>	DATE SIGNED <u>9-5-15</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"







09/05/15 12:10:43 FROM ACCESS - TERMINAL ID: DOLDB FOR UNIT: ???????

L..WA0311927.LIC/C03101B

VIN/1FTFX1EF7EFC16411

.VYR/2014.VMA/FORD .VMO/F150 ,008000,06-15-2016

EXP DATE/06-15-2016

WILLIAMS,SHERRI L LSE PIC NAME2 WILLIKP287R9

WILLIAMS,KEVIN P LSE TAB# IS A525414 16

CAB WEST LLC LSR PREV TAB R962019 15

3309 182ND ST NE PLATE ISSUE DATE/ 06-2014

ARLINGTON,WA,98223 FIRST COLOR IS GRAY

HTD LEASING LLC SECOND COLOR IS NO COLOR

PO BOX 105704

ATLANTA,GA,30348

TITLE/ 06-26-2014 1417725602

Incident History for: #SS15017978

Case Numbers: \$SS15002242

Entered 09/05/15 11:15:26 BY SPDF24 SP0307

Dispatched 09/05/15 11:36:32 BY SPDP17 SP0224

Enroute 09/05/15 11:36:32

Onscene 09/05/15 11:45:53

Closed 09/05/15 11:56:49

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 3 Dispo: H

Police BLK: SS003 Fire BLK: AG1518 Map Page: 397D-1 Group: SS1 Beat: SOUT

Src: T

Loc: 315 86 AV SE ,LKS btwn 3 ST SE & DEAD END (V)

Loc Info:

Name: WILLIAMS, KEVIN

Addr:

Phone: 4255638327

/1115 (SP0307) ENTRY ,CC, COLD, N/S, HNR RP JUST NOTICED AT HOME

/1115 (SP0402) VIEWED

/1136 (SP0224) DISPER 19D2 #SS72 AUKERMAN, OFFICER (WAYNE)

/1145 (SP0393) SUPP TXT: RP CB, HAS TO LEAVE, REQ PH INSTEAD

/1145 (SP0224) NEWLOC 19D2 [PH]

/1146 NEWLOC 19D2 [315 86 AV SE ,LKS]

/1148 (SS72 ) \*ONSCNE 19D2

/1153 (SP0224) ASNCAS 19D2 \$SS15002242

/1156 (SS72 ) \*CLEAR 19D2 D/H

/1156 CLOSE 19D2

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>AUERMAN # 72</i>			Case Number <i>15-02242</i>	
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: <i>HIT / RUN COLLISION</i>			Date/Time: <i>9-5-15/1200</i>	
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 # <i>1</i>	Item <i>CD-RW</i>	Brand Name <i>COMPUCESSORY</i>		Storage Location		Disposition
Action # <i>3</i>	Brand/Model/Caliber (Further Description)					
Serial #	Where Found <i>315 86 AVE SE 115</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
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 <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	