



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E479057**

1 2

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"/>

2 1

3 1

TRIBAL RESERVATION

CASE # **15-00200557**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

4

4a

5

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #
DATE OF COLLISION **11 - 05 - 2015** **1449** **31** N E IN OF **0664**
S W

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION
N. LAKESHORE DRIVE BLOCK NO. **12200**
MILE POST

DISTANCE OF (REFERENCE OR CROSS STREET)
100 **00** MILES N E
FEET S W **123RD AVENUE NE**

6 5

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

LAST NAME **SPINELLI** FIRST NAME **KADEN** MIDDLE INITIAL **J**

STREET NEW ADDRESS **7821 29TH PL NE**

CITY **MARYSVILLE** ST **WA** ZIP **982706849**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **SPINEKJ015JK** STATE **WA** SEX **M** D.O.B. **04 - 12 - 1999**

ON DUTY STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **AUD0871** STATE **WA** VIN# **1HGEJ8246WL050363**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1998** MAKE **HOND** MODEL **CIVCP** STYLE **CP** VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. VEHICLE NO. 1 SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **SAFECO H2124273** VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



11 2 5

12 2 5

13 4

14 4

15 1

16 1

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

LAST NAME **HOLLO** FIRST NAME **SAMUEL** MIDDLE INITIAL **A**

STREET NEW ADDRESS **12212 21ST ST NE UNIT B**

CITY **LAKE STEVENS** ST **WA** ZIP **982589539**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **HOLLOSA019JB** STATE **WA** SEX **M** D.O.B. **04 - 02 - 1999**

ON DUTY STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **C17725C** STATE **WA** VIN# **JT4VN13G7S5150084**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1995** MAKE **TOYT** MODEL **PU** STYLE VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. VEHICLE NO. 2 SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **ALLSTATE 964594053** VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



OFFICER'S NAME (PRINT) **R. RUTHERFORD** BADGE OR ID # **0130** AGENCY **WA0311900**

23

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1 0 4 27

2

3

1 1 8 28

2

3

0 1 29

0 1 30

1 1 2 31

2

3

1 1 2 32

2

3

FROM TO 7 3 33

FROM TO 3 7 34

4 35

4 36

37

38

39

40

1 41

1 42



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1591972

CORRECTION

REPORT NO. **E479057**

CASE # **15-00200557**

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

11/05/15 I was dispatched to a non-injury/blocking collision at 123rd Avenue NE and N. Lakeshore Drive. Upon arrival, I contacted both drivers. The driver of vehicle 1 said that he was going to fast on the wet road and the rear end of his vehicle "drifted out" and he crossed the center line colliding with vehicle 2. There was a skid mark on the roadway indicating that is what occurred. The roadway in the area is a very windy, two lane road with no sidewalks. Both driver's stated that they were not injured but were cautioned to go to the walk-in clinic if they began to experience any pain.

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)

R. RUTHERFORD

INVESTIGATING OFFICER'S SIGNATURE

11-05-15 04:00 PM

DATED

PLACE SIGNED

APPROVED BY

SGT. C. VALVICK 0071

DATE

11/6/2015 9:11:45 AM

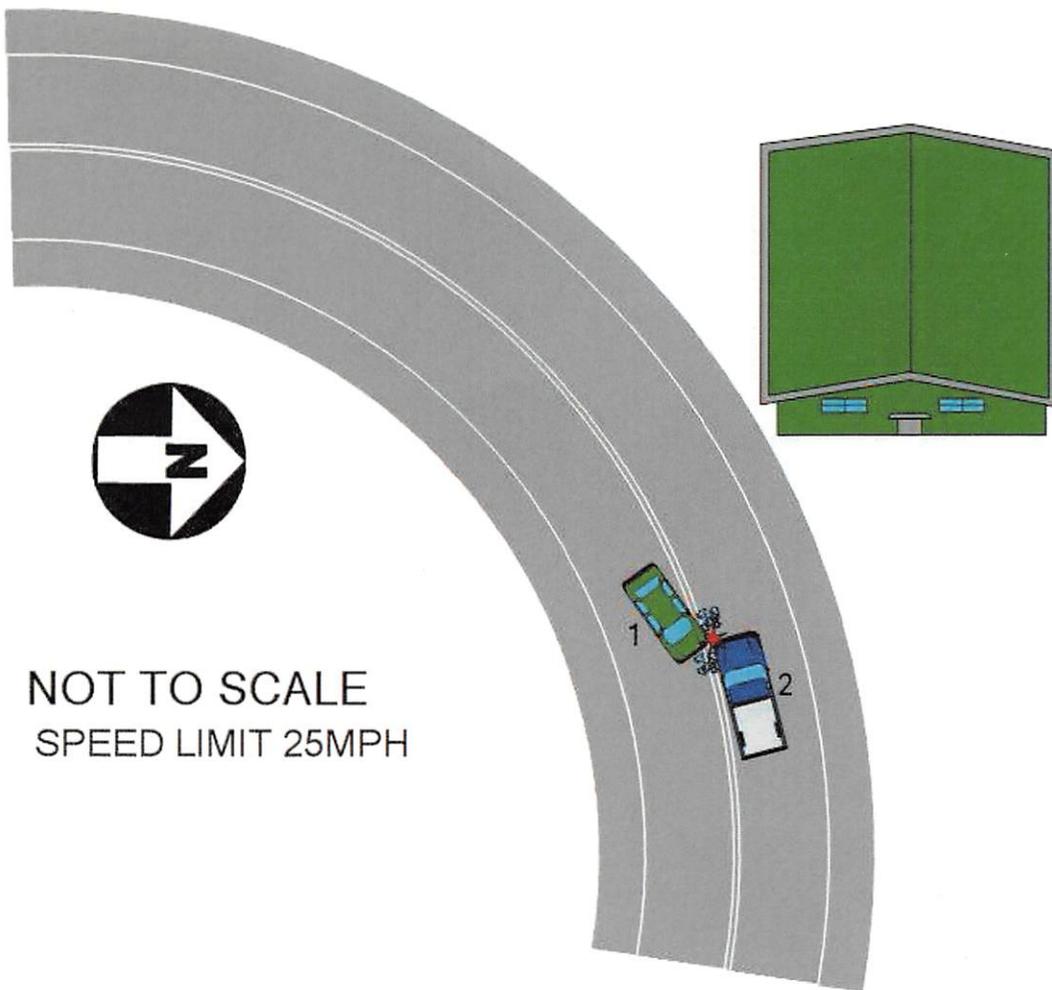
BADGE OR ID # **0130**

ORI # **WA0311900**

TIME POLICE DISPATCHED **2:50 PM**

TIME POLICE ARRIVED **2:53 PM**

12200 blk N. Lakeshore Drive



NOT TO SCALE
SPEED LIMIT 25MPH









LAKE STEVEN
POLICE

SI

