STATE OF WASHINGTON
# POLICE TRAFFIC COLLISION REPORT

1591971

REPORT NO. **E484747**

| | |
|---|---|
| CASE # | 15-00201532 |
| LOCAL AGENCY CODING | 0664 |
| TOTAL # OF UNITS | 02 |
| OBJECT STRUCK | |

INTERSTATE ☐ CITY STREET ☑ STATE ROUTE ☐ OTHER ☐ COUNTY RD ☐ PRIVATE WAY ☐

FIRE RESULTED ☐ STOLEN VEHICLE ☐ HIT & RUN INVOLVED ☐

TRIBAL RESERVATION

| DATE OF COLLISION (M M - D D - Y Y Y Y) | TIME (2400) | COUNTY # | MILES | | CITY # |
|---|---|---|---|---|---|
| 11 - 20 - 2015 | 1359 | 31 | | N ☐ S ☐ E ☐ W ☐ | IN ☑ OF ☐ 0664 |

ON (PRIMARY TRAFFIC WAY) 20TH ST SE — INTERSECTION ☐ NON-INTERSECTION ☑ — BLOCK NO. ☑ MILE POST ☐ 9600

DISTANCE 100.00 MILES ☐ FEET ☑ N ☐ S ☐ E ☐ W ☑ OF (REFERENCE OR CROSS STREET) 98TH AVE SE

## UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE D: 4257767400

| | | | |
|---|---|---|---|
| LAST NAME | LOEWEN | FIRST NAME | ALFRED |
| MIDDLE INITIAL | E | | |
| STREET (NEW ADDRESS ☐) | 22029 98TH PL W | | |
| CITY | EDMONDS | ST | WA |
| ZIP | 980204500 | | |
| CDL | | RESTRICTIONS | B |
| ENDORSEMENTS | | | |
| DRIVER'S LICENSE # | LOEWEAE727QJ | STATE | WA |
| SEX | M | D.O.B. MMDDYYYY | 11-11-1928 |

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

| | | | |
|---|---|---|---|
| LICENSE PLATE # | ADY1379 | STATE | WA |
| VIN# | JTDBE32K820113028 | | |
| TRAILER PLATE # | | STATE | |
| TRAILER PLATE # | | STATE | |

VEH. YEAR 2002 | MAKE TOYT | MODEL CAM4D | STYLE 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. CAROL LOEWEN 22029 98TH PL W EDMONDS WA 98020

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # STATEFARM 201-9468-F07-47O

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE

VEHICLE NO. 1 SHADE IN DAMAGED AREA — 9 TOP, 10 BOTTOM

## UNIT 02

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE D: 4259236724

| | | | |
|---|---|---|---|
| LAST NAME | FORCK | FIRST NAME | STEFANIE |
| MIDDLE INITIAL | A | | |
| STREET (NEW ADDRESS ☐) | 1014 89TH AVE SE | | |
| CITY | LAKE STEVENS | ST | WA |
| ZIP | 982583746 | | |
| CDL | | RESTRICTIONS | B |
| ENDORSEMENTS | | | |
| DRIVER'S LICENSE # | FORCKSA162K2 | STATE | WA |
| SEX | F | D.O.B. MMDDYYYY | 05-22-1984 |

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

| | | | |
|---|---|---|---|
| LICENSE PLATE # | 815SLY | STATE | WA |
| VIN# | 2HGFB2F88CH327082 | | |
| TRAILER PLATE # | | STATE | |
| TRAILER PLATE # | | STATE | |

VEH. YEAR 2012 | MAKE HOND | MODEL CIV4D | STYLE 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. STEFANIE FORCK 1014 89TH AVE SE LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # FARMERS 190197312

VEHICLE LEGALLY STANDING YES ☐ NO ☑ CITATION # CHARGE

VEHICLE NO. 2 SHADE IN DAMAGED AREA — 9 TOP, 10 BOTTOM

| OFFICER'S NAME (PRINT) | BADGE OR ID # | AGENCY |
|---|---|---|
| C. CHRISTENSEN | 0075 | WA0311900 |

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E484747

CASE # 15-00201532

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

| NAME (LAST, FIRST, MIDDLE INITIAL) | LOEWEN CAROL M |
|---|---|
| ADDRESS & PHONE # | 22029 98TH PL W EDMONDS WA 980204500 4257767400 |
| SEX | F |
| D.O.B. MMDDYYYY | 12 - 25 - 1931 |
| PASSENGER ☑ WITNESS ☐ | |
| UNIT # | 1 |
| SEAT POS. | 3 |
| AIRBAG | 3 |
| RESTR. | 4 |
| EJECT | 1 |
| HELMET USE | 2 |
| INJURY CLASS | 1 |
| NATURE OF INJURIES | |

| NAME (LAST, FIRST, MIDDLE INITIAL) | |
|---|---|
| ADDRESS & PHONE # | |
| SEX | |
| D.O.B. MMDDYYYY | - - |
| PASSENGER ☐ WITNESS ☐ | |
| 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 ☐ WITNESS ☐ | |
| UNIT # | |
| SEAT POS. | |
| AIRBAG | |
| RESTR. | |
| EJECT | |
| HELMET USE | |
| INJURY CLASS | |
| NATURE OF INJURIES | |

## NARRATIVE

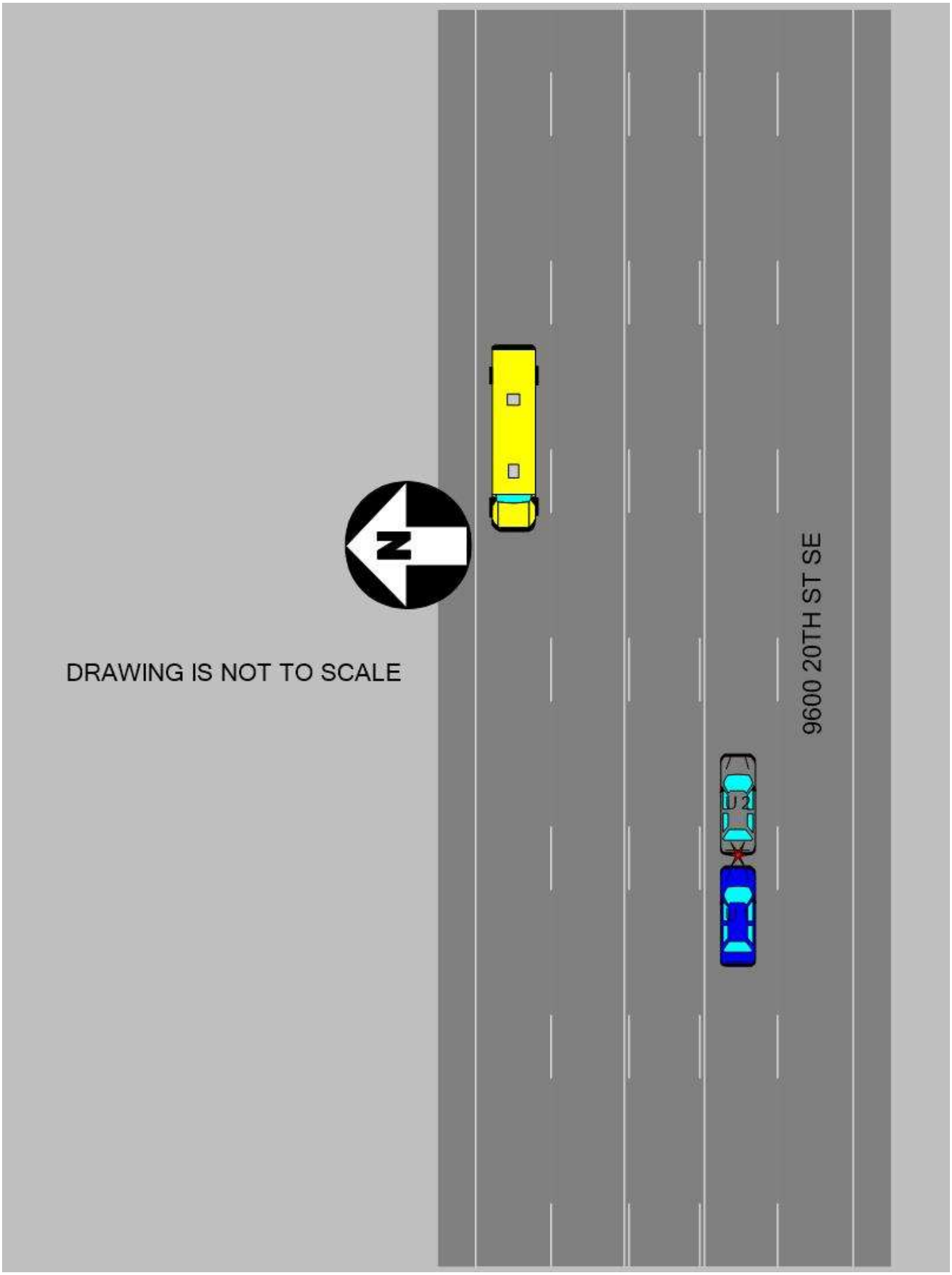
Unit 2 was travelling eastbound in the 9600 20th St SE and came to a stop for a school bus travelling the opposite direction with it crossarms out. Unit 1 did not see Unit 2 come to a stop and rear-ended Unit 2. It was determined that Unit 2 did not have stop for the school buses traffic control signs since that area of 20th St SE is two lanes in both directions with a centerlane. Unit 1 was towed from the scene by Dicks Towing. There were no reported injuries at the scene.

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)

| C. CHRISTENSEN | | 11-21-15 07:46 AM | |
|---|---|---|---|
| INVESTIGATING OFFICER'S SIGNATURE | UNIT OR DIST. DET | DATED | PLACE SIGNED |

| APPROVED BY | DATE |
|---|---|
| ROBERT MINER 0095 | 11/21/2015 11:21:21 PM |

| BADGE OR ID # | 0075 | ORI # | WA0311900 | TIME POLICE DISPATCHED | 2:00 PM | TIME POLICE ARRIVED | 2:07 PM |
|---|---|---|---|---|---|---|---|


9600 20TH ST SE
U 2
N
DRAWING IS NOT TO SCALE

CHECK ALL THAT APPLY:

- [x] NON-IMPOUND/TOW
- [ ] AAA or OTHER ROADSIDE ASSISTANCE
- [ ] EVIDENCE
- [ ] SEIZED UNDER RCW 69.50.505
- [ ] 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
15-00201532

## VEHICLE INFORMATION

VIN: J T D B E 3 2 K 8 2 0 1 1 3 0 2 8

| LICENSE | STATE | YEAR | MAKE | MODEL |
|---|---|---|---|---|
| ADY1379 | WASHINGTON | 2002 | TOYOTA | CAM4D |

| Report of Sale | MILEAGE [x] Digital | STYLE | COLOR |
|---|---|---|---|
| [ ] | DIGITAL UNREADABLE | SEDAN 4 DR | BLUE |

| DRIVER | REGISTERED OWNER | LEGAL OWNER |
|---|---|---|
| NAME (LAST, FIRST, MI): LOEWEN, ALFRED E | NAME (LAST, FIRST, MI): LOEWEN, CAROL M | NAME (LAST, FIRST, MI): |
| STREET ADDRESS: 22029 98TH PL W | STREET ADDRESS: 22029 98TH PL W | STREET ADDRESS: |
| CITY, STATE, ZIP CODE: EDMONDS, WA 980204500 | CITY, STATE, ZIP CODE: EDMONDS, WA 98020 | CITY, STATE, ZIP CODE: |
| PHONE: (425)776-7400 / DOB: | PHONE: | PHONE: |

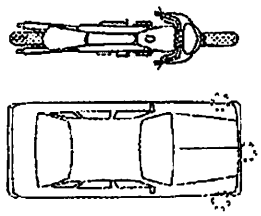
## AUTHORIZATION AND RECEIPT

ON 11/20/2015 (DATE) AT 14:24 (24 HOURS) PURSUANT TO RCW 46.55.085 / 113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I AUTHORIZED DICKS TOWING (TOWING FIRM) #5138-034 (DOL TRUCK NO.)

DRIVEN BY DAN (DRIVER'S PRINTED FIRST AND LAST NAME) TO REMOVE THIS VEHICLE FROM 9600 20TH ST SE/98TH AVE SE (LOCATION)

| EQUIPMENT | DAMAGE | EVIDENCE (DRIVER'S SIDE) | EVIDENCE (PASSENGER'S SIDE) |
|---|---|---|---|
| [x] [ 1 ] KEYS | [x] FRONT | | |
| [x] LOCKED TRUNK | [x] R FRONT | | |
| [ ] LOCKED GLOVE BOX | [ ] R SIDE | | |
| [ ] LOCKED CENTER CONSOLE | [ ] R REAR | | |
| [x] AUTO STEREO | [x] L FRONT | | |
| [ ] [ ] DISC(S) | [ ] L SIDE | | |
| [ ] HANDS FREE DEVICE | [ ] L REAR | | |
| [ ] GPS | [ ] REAR | | |
| [ ] RADAR / LIDAR DETECTOR | [ ] TOP | | |
| [x] SPARE TIRE | [ ] UNDERCARRIAGE | | |
| [ ] JACK | [ ] OTHER _____ | | |
| [ ] CHAINS | | | |
| [ ] OTHER _____ | | | |

SHADE DAMAGED AREA



| INVENTORY | NARRATIVE OR DIAGRAM (List reasons(s) for impound.) |
|---|---|
| | Vehicle involved in collision. |

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

[x] 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 | C. Christensen | SNOHOMISH, WA (COUNTY, WA) | 0076 (BADGE NO) | Lake Stevens PD (AGENCY) |
|---|---|---|---|---|

3000-110-076 (R 07/13)