STATE OF WASHINGTON
POLICE TRAFFIC COLLISION REPORT

1591971

REPORT NO. **E493428**

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

FIRE RESULTED ☐
STOLEN VEHICLE ☐
HIT & RUN INVOLVED ☐

CASE # 2015-00202686

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 #
12 - 10 - 2015	1650	31	.	N ☐ S ☐ E ☐ W ☐	IN ☑ OF ☐ 0664

ON (PRIMARY TRAFFIC WAY) SR9 NE

INTERSECTION ☐ NON-INTERSECTION ☑

BLOCK NO. ☐ MILE POST ☐

DISTANCE 300 . 00 MILES ☐ FEET ☑ N ☐ S ☑ E ☐ W ☐ OF (REFERENCE OR CROSS STREET) LUNDEEN PKWY

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE D: 4253099186

LAST NAME KNUDSON | FIRST NAME SAMUEL | MIDDLE INITIAL C

STREET ADDRESS (NEW ADDRESS ☐) 6711 49TH ST NE

CITY MARYSVILLE | ST WA | ZIP 982706919

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE # KNUDSSC071CP | STATE WA | SEX M | D.O.B. MMDDYYYY 02 - 17 - 1993

ON DUTY ☐ | STATUS | AIRBAG 6 | RESTR. 4 | EJECT 1 | HELMET USE | INJURY CLASS 1 | NATURE OF INJURIES

LICENSE PLATE # AFZ5262 | STATE WA | VIN# 1G1JC52F647373561

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

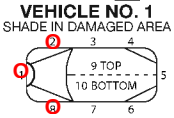
VEH. YEAR 2004 | MAKE CHEV | MODEL CAV4D | STYLE 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. SAMUEL KNUDSON PO BOX 894 GRANITE FALLS WA 98252 D: 4253099186

LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY # STATE FARM 090 3678-B07-47C

VEHICLE LEGALLY STANDING YES ☐ NO ☐ | CITATION # | CHARGE

VEHICLE NO. 1 SHADE IN DAMAGED AREA



UNIT 02

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE D: 3602244495

LAST NAME MUGHAL | FIRST NAME FAREED | MIDDLE INITIAL A

STREET ADDRESS (NEW ADDRESS ☐) 170 POLO PARK DR

CITY BELLINGHAM | ST WA | ZIP 982297777

CDL | RESTRICTIONS B | ENDORSEMENTS

DRIVER'S LICENSE # MUGHAFA212M8 | STATE WA | SEX M | D.O.B. MMDDYYYY 07 - 28 - 1979

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

LICENSE PLATE # AHA0389 | STATE WA | VIN# 4A3AB36F95E059258

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

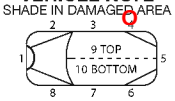
VEH. YEAR 2005 | MAKE MITS | MODEL GAL4D | STYLE 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. FAREED MUGHAL 8813 132ND ST NE ARLINGTON WA 98223 D: 3602244495

LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY # GEICO 4216-46-39-78

VEHICLE LEGALLY STANDING YES ☐ NO ☐ | CITATION # | CHARGE

VEHICLE NO. 2 SHADE IN DAMAGED AREA



OFFICER'S NAME (PRINT) STEVE WARBIS | BADGE OR ID # 112 | AGENCY WA0311900

PAGE 01 OF 3

PART A 3000-345-159 R (7/06)

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E493428

CASE # 2015-00202686

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

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		

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

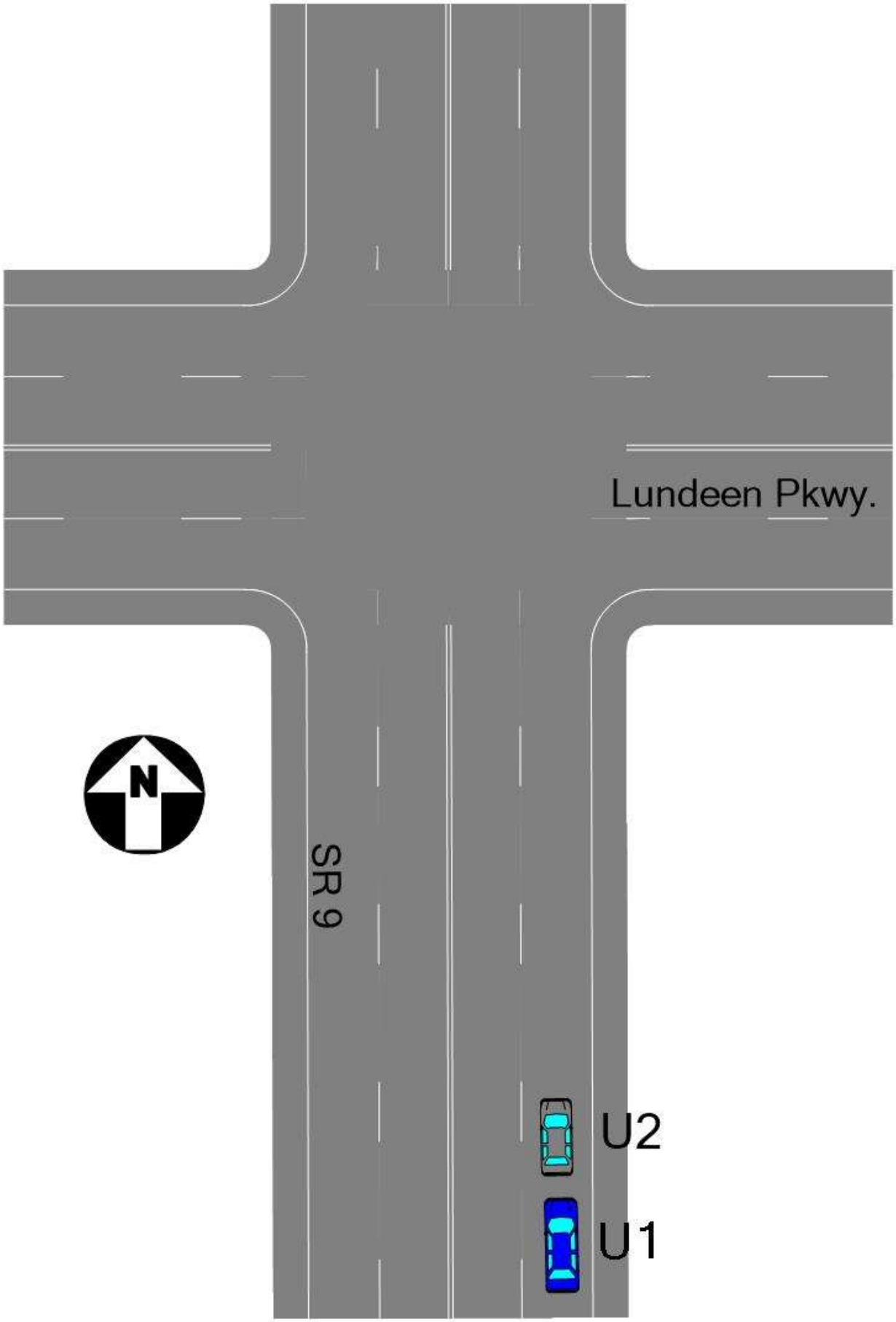
Unit 2 was traveling south on SR 9 and began slowing for traffic. Unit 1 was also traveling north nd failed to slow fpr traffic. Unit 1 struck Unit 2 from behind. No injuries. Unit 2 was driven from the scene, and Unit 1 was towed.

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)

INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
STEVE WARBIS		12-10-15 06:13 PM	

APPROVED BY	DATE
R. BROOKS 0013	12/14/2015 11:50:38 AM

BADGE OR ID #	112	ORI #	WA0311900	TIME POLICE DISPATCHED	4:50 PM	TIME POLICE ARRIVED	4:55 PM


Lundeen Pkwy.
N
SR 9
U2
U1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 2015-00202686

VICTIM / WITNESS

NON-DISC ☐	NAME (LAST, FIRST MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES
	Mughal, Fareed Ahmed			M	7/28/79					

STREET ADDRESS	CITY	STATE	ZIP	RES. STATUS
8813 132nd st NE	Arlington	WA	98223	

HOME PHONE	CELL PHONE	PLACE OF EMPLOYMENT
	360 224 4495	

WORK PHONE	EMAIL ADDRESS
	Fmughal79@gmail.com

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.

Driving NB on Hwy 9, South of Lundeen Pkwy. Traffic came to a stop and I was rear-ended, pushing car into Southbound lane.

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	LOCATION SIGNED
[signature]	12/10/15	
OFFICER/NUMBER: S. WARBIS 112	DATE SIGNED 12-10-15	LOCATION SIGNED

"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 2015-00202686

VICTIM / WITNESS

NON-DISC ☐	NAME (LAST, FIRST MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES
	Knudson Samuel C	W		M	2/17/93	22	[illegible]	[illegible]	[illegible]	G

STREET ADDRESS	CITY	STATE	ZIP	RES. STATUS
6711 49th St NE	Marysville	WA	98270	

HOME PHONE	CELL PHONE	PLACE OF EMPLOYMENT
	425 309 9184	IGA

WORK PHONE	EMAIL ADDRESS

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.

I was looking over my right side
see if I was cleared to go over
I look back and he had his
brakes on and then I hit him

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	LOCATION SIGNED
Samuel C	12.10.15	
OFFICER/NUMBER: S. WARBIS 112	DATE SIGNED 12-10-15	LOCATION SIGNED

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REVISED 4/2009