Incident Report

Print Date/Time: 03/22/2016 09:56
Login ID: ss0100

Lake Stevens Police Department
ORI Number: WA0311900

Incident: **2016-00004776**

Incident Date/Time:	3/11/2016 2:58:13 PM	**Incident Type:**	Collision
Location:	12806 20TH ST NE LAKE STEVENS WA 98258	**Venue:**	Lake Stevens
Phone Number:	(425) 512-4018	**Source:**	911
Report Required:	No	**Priority:**	4
Prior Hazards:	No	**Status:**	3
LE Case Number:		**Nature of Call:**	

Unit/Personnel

Unit	Personnel
19D3	SS0135-Parnell

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	CARROLL, JASON		(425) 923-5081			

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State

Disposition(s)

Disposition	Count
R	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.

CAD Narrative

03/11/2016 : 15:01:59 SP0262 Narrative: LR262
03/11/2016 : 15:01:03 SP0262 Narrative: PH, 5 AGO, H&R ON 20TH, NON INJ, RP DIDNT GET VEH DSCRPN OTHER THAN TRK , JUST WANTS CN FOR HIS INS

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. E526585

CASE #	16-4776
LOCAL AGENCY CODING	
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 #
03 - 11 - 2016	1458	31		N ☐ S ☐ E ☐ W ☐	IN ☑ OF ☐ 0664

ON (PRIMARY TRAFFIC WAY): 20TH ST NE
INTERSECTION ☑ NON-INTERSECTION ☐
BLOCK NO. ☑ MILE POST ☐: 13000

DISTANCE: MILES ☐ FEET ☐ N ☐ S ☐ E ☐ W ☐
OF (REFERENCE OR CROSS STREET): 130TH DR NE

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐
DAMAGE THRESHOLD MET YES ☑ NO ☐
PHONE: D: 4255124018

LAST NAME	FIRST NAME	MIDDLE INITIAL
CARROLL	JASON	M

STREET NEW ADDRESS ☐: 12001 29TH PL NE

CITY	ST	ZIP
LAKE STEVENS	WA	982589177

CDL	RESTRICTIONS	ENDORSEMENTS

DRIVER'S LICENSE #	STATE	SEX	D.O.B. MMDDYYYY
CARROJM087MS	WA	M	07 - 10 - 1992

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

LICENSE PLATE #	STATE	VIN#
AXD8396	WA	JN8AZ2KR2CT255869

TRAILER PLATE #	STATE	TRAILER PLATE #	STATE

VEH. YEAR	MAKE	MODEL	STYLE	VEHICLE TOWED	TOWED BY	GOVT. VEHICLE
2012	NISS	CUBE	UT	YES ☐ NO ☑		YES ☐ NO ☑

REGISTERED OWNER INFO. JASON CARROLL 4313 149TH PL NE MARYSVILLE WA 98271

LIABILITY INSURANCE IN EFFECT ☑
INSURANCE CO & POLICY # STATE FARM 384 8536-D23-47
VEHICLE LEGALLY STANDING YES ☐ NO ☐
CITATION #
CHARGE

VEHICLE NO. 1
SHADE IN DAMAGED AREA
2 3 4 / 1 9 TOP 10 BOTTOM 5 / 8 7 6

UNIT 02

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

LAST NAME	FIRST NAME	MIDDLE INITIAL
UNKNOWN		

STREET NEW ADDRESS ☐:

CITY	ST	ZIP

CDL	RESTRICTIONS	ENDORSEMENTS

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

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

LICENSE PLATE #	STATE	VIN#
UNKNOWN		

TRAILER PLATE #	STATE	TRAILER PLATE #	STATE

VEH. YEAR	MAKE	MODEL	STYLE	VEHICLE TOWED	TOWED BY	GOVT. VEHICLE
	UNKN	UNKNOW		YES ☐ NO ☑		YES ☐ NO ☑

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐
INSURANCE CO & POLICY #
VEHICLE LEGALLY STANDING YES ☐ NO ☐
CITATION #
CHARGE

VEHICLE NO. 2
SHADE IN DAMAGED AREA
2 3 4 / 1 9 TOP 10 BOTTOM 5 / 8 7 6

OFFICER'S NAME (PRINT)	BADGE OR ID #	AGENCY
K. PARNELL	0135	WA0311900

PAGE 01 OF 3

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

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E526585

CASE # 16-4776

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

Both drivers left scene prior to LE arrival. Driver of veh. 1 states traveling wb on about the 13000 block of 20th St. NE. Veh. 2 made left turn in front of veh. 1 to go EB on 20th St NE. Veh 1 swerved, but could not avoid. Front of veh. 2 impacted passenger side of veh. 1.

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)

K. PARNELL		03-11-16 03:43 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
ROBERT MINER 0095	3/19/2016 3:58:29 AM

BADGE OR ID #	0135	ORI #	WA0311900	TIME POLICE DISPATCHED	3:01 PM	TIME POLICE ARRIVED	3:01 PM

REPORT NO. E526585 **CASE #** 16-4776 **DATE AND TIME OF COLLISION** 03/11/16 14:58

Did not observe