Incident Report

Print Date/Time: 07/21/2016 08:21
Login ID: ss0143

Lake Stevens Police Department
ORI Number: WA0311900

Incident: **2016-00014081**

Incident Date/Time:	7/19/2016 10:16:45 PM	**Incident Type:**	Collision
Location:	SR 9 NE / SR 204 LAKE STEVENS WA 98258	**Venue:**	Lake Stevens
Phone Number:	(425) 330-9254	**Source:**	911
Report Required:	Yes	**Priority:**	3F
Prior Hazards:	No	**Status:**	3
LE Case Number:		**Nature of Call:**	

Unit/Personnel

Unit	Personnel
19N2	SS0112-Warbis
19N3	SS0135-Parnell
19S10	SS0013-Brooks

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	BARRONS, JULIE A	3830 115TH AVE Snohomish WA 98290			Unknown	

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle						AKA5396	

Disposition(s)

Disposition	Count
R	1

Property

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

CAD Narrative

07/19/2016 : 23:03:08 SP0288 Narrative: 1 ADULT FEM
07/19/2016 : 22:41:26 sp0337 Narrative: 19N3 TOW OS
07/19/2016 : 22:30:34 sp0337 Narrative: TOP NOTCH ER
07/19/2016 : 22:27:22 SP0226 Narrative: TWO GREEN THREE YELLOW
07/19/2016 : 22:25:09 SP0226 Narrative: 4 VEHS MINOR INV
07/19/2016 : 22:20:20 SP0325 Narrative: THIS RP/CATHY RUDD 425-3468156
07/19/2016 : 22:19:51 SP0345 Narrative: RP ADVISING DRIVER OF MINIVAN HOLDING HER HEAD
07/19/2016 : 22:19:44 SP0325 Narrative: ANOTHER INVOLVED PARTY CALLING IN, UNK INJ, ONE VEH IS TOTALED, RP HAS NECK AND BACK PX
07/19/2016 : 22:19:02 SP0345 Narrative: LINCOLN NAVIGATOR, SIL KIA RIO, MINIVAN
07/19/2016 : 22:18:13 SP0345 Narrative: BLOCKING INTERSECTION
07/19/2016 : 22:18:06 SP0345 Narrative: CC, 4 CARS INVOLVED, NON INJ'S

LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016-000 14081

VICTIM ☐ WITNESS ☐ NON-DISCLOSURE ☐

NAME (LAST, FIRST, MIDDLE	RACE	ETHNICITY	SEX	D.O.B.	AGE	HGT	WGT	HAIR	EYES
KALOGIROS Lyn M	W		F	4/12/51	65	5	5	br	br

STREET ADDRESS	CITY	STATE	ZIP
514 Pearl St Snohomish 98290			

HOME PHONE	CELL PHONE	WORK PHONE
425 786 3930		360 668 3887

EMAIL ADDRESS (OPTIONAL)	PLACE OF EMPLOYMENT

STATEMENT:

Stopped at Red light Looking at the moon and boom. Squeezed like a gun shot until I got hit so hard, whole body went forward going to be sore tomorrow I bet.

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

SIGNATURE:	DATE SIGNED:
L Kalogiros	7/19/16
OFFICER/NUMBER: S. WARBIS 112	DATE SIGNED: 7/19/16

OUR MISSION STATEMENT: ***"WE BELIEVE THAT PRESERVING LIFE, ENSURINGJUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"***

STATEMENT RUDD CATHERINE

LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016-00014081

VICTIM [X] **WITNESS** [ ]

NON-DISCLOSURE [ ]

NAME (LAST, FIRST, MIDDLE)	RACE	ETHNICITY	SEX	D.O.B.	AGE	HGT	WGT	HAIR	EYES
Rudd Catherine M	C		F	10-1-58	57	507	132	BLN	BLU

STREET ADDRESS	CITY	STATE	ZIP
9920 38th Pl. S.E.	Lake Stevens	Wa	98258

HOME PHONE	CELL PHONE	WORK PHONE
425 334 3273	425 346 8156	Same

EMAIL ADDRESS (OPTIONAL)	PLACE OF EMPLOYMENT
	Self employed

STATEMENT:

We were stopped at a red light when a car slammed into the back of us. We were pushed forward + hit the car ahead of us.

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

SIGNATURE:	DATE SIGNED:
Catherine M Rudd	7/19/16
OFFICER/NUMBER:	**DATE SIGNED:**
S. WARRS 112	7/19/16

OUR MISSION STATEMENT: ***"WE BELIEVE THAT PRESERVING LIFE, ENSURINGJUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"***

IMPOUND VEHICLE ENTRY FORM

IMPOUNDED VEHICLE ENTRY FORM

Type of Impound: (Check one)

Police Impound ✓ Private Impound _____ Repo _____

For Police Impound: Reason for Impound and Case Number (if available):
(DUI, DWLS, COL, ABAND, VEHR, EVIDENCE, Etc.)

Incident Number: 2016-14081 Reason: COL

MKE/ (Circle One) EVI EVIP EVR

ORI/ WA0311900

LIC/ AKA5396 LIS/ LIY/ 2015 LIT/

VIN/ 2BGP5439IR220723

VYR/ 2001 VMA/ Dodge VMO/ Caravan

VST/ Van VCO/ Gray

DATE OF IMPOUND/REPO: 07/20/2016

TOW COMPANY NAME: Top Notch Towing

TOW COMPANY OCA/** 5705 PHONE #: 360-568-8877

**(For Repossession Company with no DOL issued OCA, use 5999)

Address Taken From: SR 9 NE / SR 204

City of Jurisdiction: Lake Stevens PD

For Repo:

Financial Institution:

Contact Person: Phone #:

For Teletype:

Date: 07/20/16 Faxed to: _____

Entered By: 422 Checked By: _____

WAC #: 16V0096646 Checked Date: _____

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. E564984

CASE #	2016-00014081
LOCAL AGENCY CODING	
TOTAL # OF UNITS	04
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 #
07 - 19 - 2016	2118	31		N ☐ S ☐ E ☐ W ☐	IN ☑ OF ☐ 0664

ON (PRIMARY TRAFFIC WAY): SR 9 NE
INTERSECTION ☑ NON-INTERSECTION ☐
BLOCK NO. ☐ MILE POST ☐

DISTANCE: MILES ☐ FEET ☐ N ☐ S ☐ E ☐ W ☐
OF (REFERENCE OR CROSS STREET): SR 204

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE D: 3602028950

LAST NAME	ADEJARE	FIRST NAME	LEAH
MIDDLE INITIAL	C		
STREET (NEW ADDRESS ☐)	7017 53RD PL NE		
CITY	MARYSVILLE	ST	WA
ZIP	982700000		
CDL		RESTRICTIONS	B
ENDORSEMENTS			
DRIVER'S LICENSE #	ADEJALC299BK	STATE	WA
SEX	F	D.O.B. MMDDYYYY	01 - 12 - 1971

ON DUTY ☐ STATUS | AIRBAG 6 | RESTR. 4 | EJECT 1 | HELMET USE | INJURY CLASS 7
NATURE OF INJURIES: MINOR IMPACT INJURIES

LICENSE PLATE #	AKA5396	STATE	WA
VIN#	2B4GP54391R220723		
TRAILER PLATE #		STATE	
TRAILER PLATE #		STATE	

VEH. YEAR 2001 | MAKE DODG | MODEL CAVAN | STYLE ES | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. LEAH ADEJARE 7017 53RD PL NE MARYSVILLE WA 98270

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # TRAVELERS 979534828 101 1
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: 4253468156 N: 4253343273

LAST NAME	RUDD	FIRST NAME	CATHERINE
MIDDLE INITIAL	M		
STREET (NEW ADDRESS ☐)	9920 38TH PL SE		
CITY	LAKE STEVENS	ST	WA
ZIP	982585717		
CDL		RESTRICTIONS	
ENDORSEMENTS			
DRIVER'S LICENSE #	RUDD*CM422PA	STATE	WA
SEX	F	D.O.B. MMDDYYYY	10 - 01 - 1958

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

LICENSE PLATE #	ATC3703	STATE	WA
VIN#	5LMFU27R74LJ01788		
TRAILER PLATE #		STATE	
TRAILER PLATE #		STATE	

VEH. YEAR 2004 | MAKE LINC | MODEL NAVGTR | STYLE UT | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. RAYMOND RUDD 9920 38TH PL SE LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # STATE FARM 313 4276-A05-47T
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
STEVE WARBIS	112	WA0311900

	FROM	TO
27	2	3
28	1	8
29	0	1
30	0	8
31	1	2
32	1	2
33	1	5
34	9	9
35	4	
36	4	
37		
38		
39		
40		
41		
42	1	

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

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E564984

CASE # 2016-00014081

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)	BARRONS JULIE A
ADDRESS & PHONE #	3830 115TH AVE SE SNOHOMISH WA 98290
SEX	U
D.O.B. MMDDYYYY	

PASSENGER	✓	WITNESS		UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	0	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 1 was traveling south on SR 9 N.E.as it approached the intersection of SR 9 and SR 204. Units 2,3, and 4 were stopped at a red light facing south on SR 9. Unit 1 failed to stop for the three cars already stopped at the intersection. Unit 1 struck Unit 2 causing it to hit Unit 3, that then hit Unit 4. Driver of Unit 1, and the passenger in Unit 2 were transported to the hospital. Units 1 and 4 were towed from 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)

STEVE WARBIS		07-20-16 05:21 AM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
R. BROOKS 0013	7/20/2016 5:53:51 AM

BADGE OR ID #	112	ORI #	WA0311900	TIME POLICE DISPATCHED	9:18 PM	TIME POLICE ARRIVED	9:22 PM

SUPPLEMENTAL POLICE TRAFFIC COLLISION REPORT

013197

REPORT NO. E564984

CASE # 2016-00014081

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐ INTRASTATE ☐

UNIT #	USDOT	ICC #	VEHICLE TYPE	CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY | ST | ZIP

NAME SOURCE | # AXLES | GVWR | PLACARD ☐ | + | NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT # 3 — MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☐ NO ☑ PHONE D: 4253343378

LAST NAME: GIBSON | FIRST NAME: WILLIAM | MIDDLE INITIAL: R

STREET NEW ADDRESS ☐: 2720 165TH DR SE

CITY: SNOHOMISH | ST: WA | ZIP: 982909782

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE #: GIBSOWR281MS | STATE: WA | SEX: M | D.O.B. MMDDYYYY: 07 - 10 - 1972

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

LICENSE PLATE #: ANT4275 | STATE: WA | VIN#: KNADC125256378832

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

VEH. YEAR: 2005 | MAKE: KIA | MODEL: RIO4D | STYLE: 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. WILLIAM GIBSON 2720 165TH DR SE SNOHOMISH WA 98290 D: 4253343378

LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY #: STATE FARM 134 5017-F04-47D

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

SHADE IN DAMAGED AREA: 1 2 3 4 5 6 7 8 9 TOP 10 BOTTOM

UNIT # 4 — MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☐ NO ☑ PHONE D: 4252863930

LAST NAME: KALOGIROS | FIRST NAME: LYN | MIDDLE INITIAL: M

STREET NEW ADDRESS ☐: 514 PEARL ST

CITY: SNOHOMISH | ST: WA | ZIP: 982903031

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE #: KALOGLM492JK | STATE: WA | SEX: F | D.O.B. MMDDYYYY: 04 - 12 - 1951

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

LICENSE PLATE #: AOZ8239 | STATE: WA | VIN#: 2HGFB6E5XDH711462

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

VEH. YEAR: 2013 | MAKE: HOND | MODEL: CIVIC | STYLE: 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. LYN KALOGIROS 514 PEARL ST SNOHOMISH WA 98290 D: 4252863930

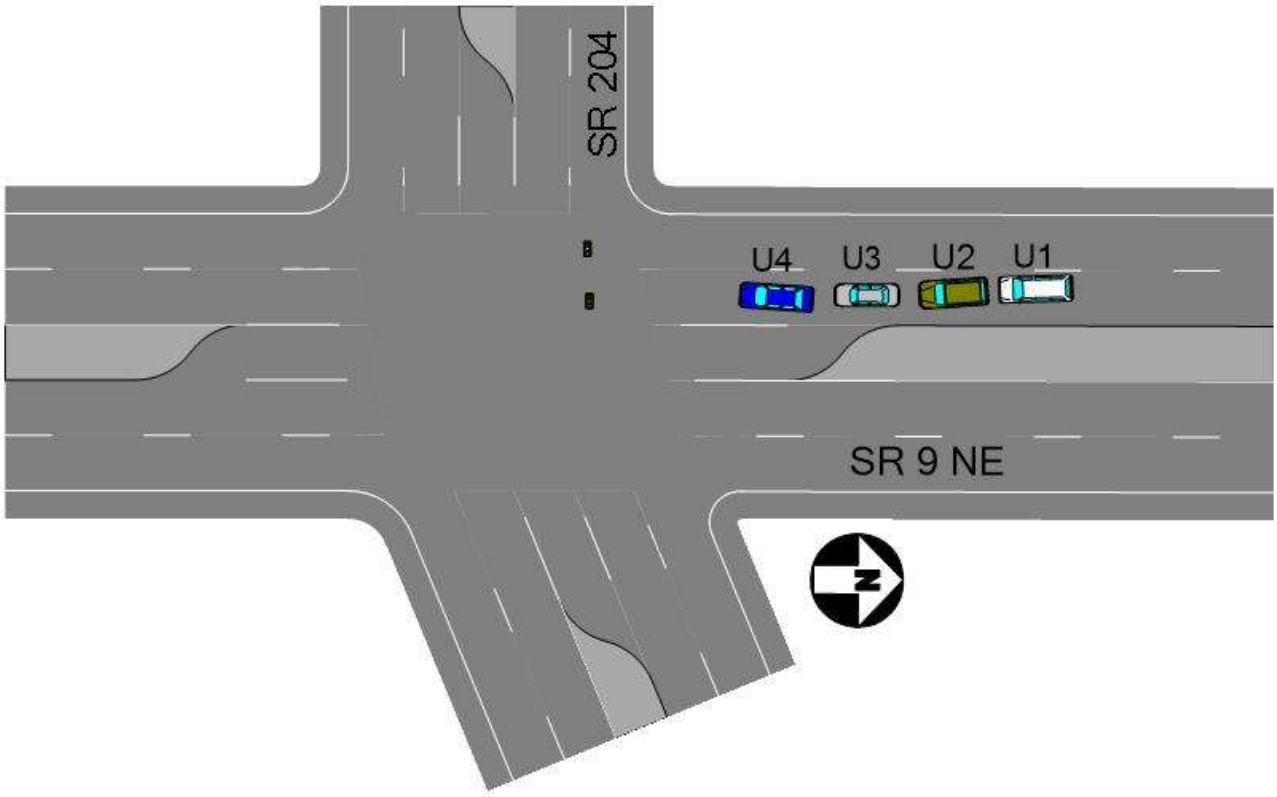
LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY #: ALLSTATE 920 549 236

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

SHADE IN DAMAGED AREA: 1 2 3 4 5 6 7 8 9 TOP 10 BOTTOM

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		07-20-16 05:21 AM	

BADGE OR ID #	ORI #	APPROVED BY	DATE	PAGE	OF
112	WA0311900	BROOKS	7/20/2016	3	4

REPORT NO. E564984 **CASE #** 2016-00014081 **DATE AND TIME OF COLLISION** 07/19/16 21:18