Incident Report

Print Date/Time: 10/24/2016 09:52
Login ID: ss0100

Lake Stevens Police Department
ORI Number: WA0311900

Incident: **2016-00020856**

Incident Date/Time:	10/20/2016 5:55:00 AM	**Incident Type:**	Collision
Location:	20TH ST SE / SR 9 SE LAKE STEVENS WA 98258	**Venue:**	Lake Stevens
Phone Number:	(206) 786-2638	**Source:**	911
Report Required:	Yes	**Priority:**	3
Prior Hazards:	No	**Status:**	3
LE Case Number:		**Nature of Call:**	

Unit/Personnel

Unit	Personnel
19D2	SS0136-Shein
19S11	SS0071-Valvick

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	BUHR, DEVON LOREE	6410 ROBE MENZEL RD Granite Falls WA 982520000			Female	06/16/1988
2	Driver	INDALECIO-RODRIGUEZ, SOCORRO	310 PILCHUCK ST Granite Falls WA 982520000			Female	06/27/1966
3	Driver	STEWART, CAROLYN JEANETTE	3249 SW OLD FARM RD Port Orchard WA 983670000			Female	05/17/1958
4	Driver	SILVA LEDESMA, ANGEL	9911 12TH AVE W B Everett WA 982042641			Male	11/23/1972

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	2015	Ford	EDGE		AXW8182	WA
Involved Vehicle	Passenger Car	1997	Ford	EXPEDITI		APR5459	WA
Involved Vehicle	Passenger Car	2000	Saturn	SL14D		AUD6130	WA
Involved Vehicle	Passenger Car	1998	Ford	ESC4D		168ZNN	WA

Disposition(s)

Disposition	Count
R	1

Property

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

CAD Narrative

10/20/2016 : 05:58:08 SP0352 Narrative: AA 19S11
10/20/2016 : 05:57:47 sp0337 Narrative: CC, 4 CAR VEH COL, NON INJ, NON INJ, WHI FORD EDGE VS FORD EXPLORER VS SADAN VS SADAN

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. E599041

CASE #	2016-00020856
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 #
10 - 20 - 2016	0555	31		N ☐ S ☐ E ☐ W ☐	IN ☑ OF ☐ 0664

ON (PRIMARY TRAFFIC WAY): SR9
INTERSECTION ☐ NON-INTERSECTION ☑
BLOCK NO. ☐ MILE POST ☐

DISTANCE: 300.00 MILES ☐ FEET ☑ N ☑ S ☐ E ☐ W ☐
OF (REFERENCE OR CROSS STREET): S. LAKE STEVENS RD

UNIT 01

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

LAST NAME	BUHR	FIRST NAME	DEVON
MIDDLE INITIAL	L		
STREET / NEW ADDRESS ☐	6410 ROBE MENZEL RD		
CITY	GRANITE FALLS	ST	WA
ZIP	982520000		
CDL		RESTRICTIONS	
ENDORSEMENTS			
DRIVER'S LICENSE #	BUHR*DL124LW	STATE	WA
SEX	F	D.O.B. MMDDYYYY	06-16-1988

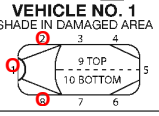
ON DUTY ☐ | STATUS | AIRBAG 2 | RESTR. 2 | EJECT 1 | HELMET USE | INJURY CLASS 1 | NATURE OF INJURIES

LICENSE PLATE #	168ZNN	STATE	WA
VIN#	1FAFP10P0WW271645		
TRAILER PLATE #		STATE	
TRAILER PLATE #		STATE	

VEH. YEAR 1998 | MAKE FORD | MODEL ESC4D | STYLE 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. DEVON BUHR 6410 ROBE MENZEL RD GRANITE FALLS WA 98252

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # GEICO 4155-36-52-59
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

LAST NAME	INDALECIO-RODRIGUEZ	FIRST NAME	SOCORRO
MIDDLE INITIAL			
STREET / NEW ADDRESS ☐	310 W PILCHUCK ST		
CITY	GRANITE FALLS	ST	WA
ZIP	982520000		
CDL		RESTRICTIONS	
ENDORSEMENTS			
DRIVER'S LICENSE #	INDALS*347L7	STATE	WA
SEX	F	D.O.B. MMDDYYYY	06-27-1966

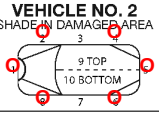
ON DUTY ☐ | STATUS | AIRBAG 2 | RESTR. 3 | EJECT 1 | HELMET USE | INJURY CLASS 1 | NATURE OF INJURIES

LICENSE PLATE #	AUD6130	STATE	WA
VIN#	1G8ZH5284YZ264176		
TRAILER PLATE #		STATE	
TRAILER PLATE #		STATE	

VEH. YEAR 2000 | MAKE STRN | MODEL SL14D | STYLE 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. MARTIN AQUINO BALTAZAR 310 W PILCHUCK ST GRANITE FALLS WA 98252

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # SAFECO P5585487
VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE

VEHICLE NO. 2
SHADE IN DAMAGED AREA


OFFICER'S NAME (PRINT)	BADGE OR ID #	AGENCY
SGT. C. VALVICK	0071	WA0311900

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E599041

CASE # 2016-00020856

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

On 10/20/2016 at about 0555 hours I was dispatched to a vehicle collision at SR9 and 20th Street SE. Upon arrival I noted 4 vehicles involved and all pulled over to the side of the road. It should be noted that weather conditions were very bad with very heavy rain. All 4 vehicles were traveling the same direction, south on SR9, when vehicle Unit #1 slowed causing Unit #2 to rear end Unit#1. Unit #3 rear ended Unit #2 then Unit #4 rear ended Unit #3.

There were no injuries by any of the drivers reported at the time of the collision. All the vehicles were driveable.

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)

SGT. C. VALVICK		10-22-16 03:25 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
SGT. C. VALVICK 0071	10/22/2016 3:26:10 PM

BADGE OR ID #	0071	ORI #	WA0311900	TIME POLICE DISPATCHED	5:55 AM	TIME POLICE ARRIVED	6:10 AM

SUPPLEMENTAL POLICE TRAFFIC COLLISION REPORT

013197

REPORT NO. E599041

CASE # 2016-00020856

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

LAST NAME: SILVA LEDESMA FIRST NAME: ANGEL MIDDLE INITIAL:

STREET NEW ADDRESS ☐: 9911 12TH AVE W APT B

CITY: EVERETT ST: WA ZIP: 982042641

CDL: RESTRICTIONS: ENDORSEMENTS:

DRIVER'S LICENSE #: SILVAA*284Q3 STATE: WA SEX: M D.O.B. MMDDYYYY: 11 - 23 - 1972

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

LICENSE PLATE #: APR5459 STATE: WA VIN#: 1FMEU18W1VLA87613

TRAILER PLATE #: STATE: TRAILER PLATE #: STATE:

VEH. YEAR: 1997 MAKE: FORD MODEL: EXPEDITI STYLE: VEHICLE TOWED YES ☐ NO ☑ TOWED BY: GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. AGUSTIN SILVA 16307 177TH AVE SE MONROE WA 98272

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # ALLSTATE 964212957

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

LAST NAME: STEWART FIRST NAME: CAROLYN MIDDLE INITIAL: J

STREET NEW ADDRESS ☐: 3249 SW OLD FARM RD

CITY: PORT ORCHARD ST: WA ZIP: 983670000

CDL: RESTRICTIONS: ENDORSEMENTS:

DRIVER'S LICENSE #: STEWACJ420KP STATE: WA SEX: F D.O.B. MMDDYYYY: 05 - 17 - 1958

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

LICENSE PLATE #: AXW8182 STATE: WA VIN#: 2FMTK4J82FBC35540

TRAILER PLATE #: STATE: TRAILER PLATE #: STATE:

VEH. YEAR: 2015 MAKE: FORD MODEL: EDGE STYLE: SE VEHICLE TOWED YES ☐ NO ☑ TOWED BY: GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. CAROLYN STEWART 18250 142ND AVE NE WOODINVILLE WA 98072

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # FARMERS 188984461

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE

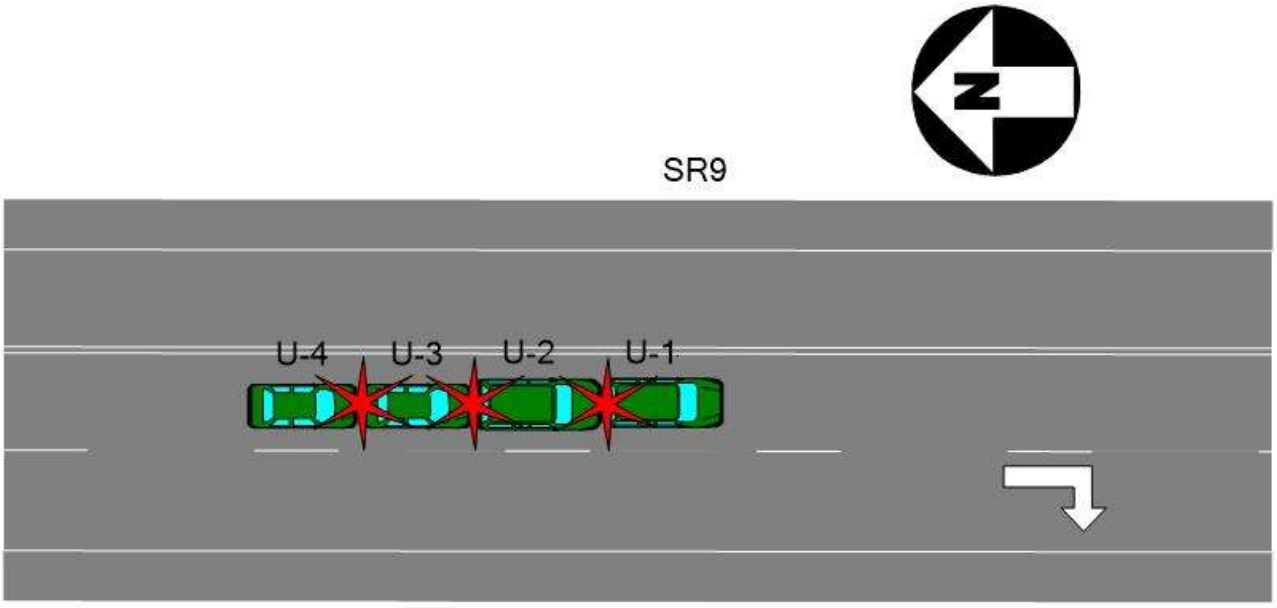
SHADE IN DAMAGED AREA: 1 2 3 4 5 6 7 8 9 TOP 10 BOTTOM

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
SGT. C. VALVICK		10-22-16 03:25 PM	

BADGE OR ID #	ORI #	APPROVED BY	DATE	PAGE	OF
0071	WA0311900	VALVICK	10/22/201	3	4

REPORT NO. E599041 **CASE #** 2016-00020856 **DATE AND TIME OF COLLISION** 10/20/16 05:55



NOT TO SCALE