



Incident Report

Print Date/Time: 12/09/2016 15:53
Login ID: ss0139

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2016-00024038

Incident Date/Time: 12/3/2016 5:28:00 PM
Location: LUNDEEN PKWY / SR 204
LAKE STEVENS WA 98258
Phone Number: (425) 633-6044
Report Required: No
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 2
Status: 2
Nature of Call:

Unit/Personnel

Unit	Personnel
1947	SS0136-Shein
19S13	SS0095-Miner

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	PRASAD, RONALD		(425) 633-6044			
1	Involved Party	PRASAD, RONALD A	8818 W MALL DR EVERETT WA 98208	(425) 633-6044	Asian-Pacific Islander	Male	01/04/1978
2	Involved Party	ELMHDI, RADWAN S	17536 UNIT A307 12TH AVE Shoreline WA 98155	(206) 859-1710		Male	12/01/1980
1	Passenger	PRASAD, RAJNIE W	8818 W MALL DR EVERETT WA 98208			Female	04/13/1956
2	Passenger	YELTON, MICHAEL L	1001 UNIT 406 N STATE ST Bellingham WA 98225	(206) 892-8211		Male	10/24/1992
3	Passenger	GROULX, JOHN P	4715 80TH DR NE Marysville WA 98072	(813) 361-5080		Female	06/01/1963
4	Passenger	GROULX, DANA B	4715 80TH DR NE MARYSVILLE WA 98270	(813) 361-5080		Female	12/01/1956

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	2009	Chrysler	300		C38229F	WA
Involved Vehicle	Passenger Car	2005	Subaru	OUTBACK		AKE6880	WA

Disposition(s)

Disposition	Count
M	1
S	1

Property

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

12/03/2016 : 17:38:14 SP0421 Narrative: OVER VEH ON MARKET NEAR AID

12/03/2016 : 17:37:43 SP0168 Narrative: 4 GRN 1 YEL

12/03/2016 : 17:37:23 SP0421 Narrative: ONE LANE BLKING WB SR 204 AT INTERSECTION

12/03/2016 : 17:37:01 SP0421 Narrative: NOT BLKING

12/03/2016 : 17:32:09 SP0338 Narrative: LR338

12/03/2016 : 17:31:51 SP0338 Narrative: WB SR 204 NOW CARS PULLING OVER TO SHOULDER

12/03/2016 : 17:30:57 SP0338 Narrative: SIL SUBU VS BLK SEABRING,

12/03/2016 : 17:30:36 SP0338 Narrative: BLKING, 1 ADULT F SHOULDER/HAND PX CON/BN, UNK INJ'S ON F IN OTHER VEH

12/03/2016 : 17:29:52 SP0338 Narrative: 2 INJ'S AFTER COL

COLLISION REPORT



STATE OF WASHINGTON
POLICE TRAFFIC
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1591971

REPORT NO. **E616942**

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1 1 2 31

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1 1 2 32

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FROM TO 5 7 33

FROM TO 1 5 34

4 35

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1 41

1 42

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	2016-00024038
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LOCAL AGENCY CODING	
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TOTAL # OF UNITS	02	OBJECT STRUCK	
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TRIBAL RESERVATION	
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M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	12 - 03 - 2016	1728	31	0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
SR204	BLOCK NO. <input checked="" type="checkbox"/>	8500
	MILE POST	

DISTANCE	MILES	N	E	OF (REFERENCE OR CROSS STREET)
				MARKET PL

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4256336044
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LAST NAME	PRASAD	FIRST NAME	RONALD	MIDDLE INITIAL	A
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STREET NEW ADDRESS	8818 W MALL DR
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CITY	EVERETT	ST	WA	ZIP	98208
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	PRASARA228BD	STATE	WA	SEX	M	D.O.B. MMDDYYYY	01 - 04 - 1978
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	AKE6880	STATE	WA	VIN#	4S4BP61C656349955
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2005	MAKE	SUBA	MODEL	OUTBA	STYLE	GA	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	ALLSTATE 987075550
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE	



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 2068591710
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LAST NAME	ELMHDI	FIRST NAME	RADWAN	MIDDLE INITIAL	S
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STREET NEW ADDRESS	17536 12TH AVE NE UNIT A307
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CITY	SHORELINE	ST	WA	ZIP	98155
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	ELMHDRS205RA	STATE	WA	SEX	M	D.O.B. MMDDYYYY	12 - 01 - 1980
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	C38229F	STATE	WA	VIN#	2C3LK53V69H586860
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2009	MAKE	CHRY	MODEL	300	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	KNICHTBROOK LWA-000641-01
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE	



OFFICER'S NAME (PRINT)	G. SHEIN	BADGE OR ID #	0136	AGENCY	WA0311900
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STATE OF WASHINGTON
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COLLISION REPORT



1591972

CORRECTION

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CASE # **2016-00024038**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **PRASAD RAJNIE W**

ADDRESS & PHONE # **8818 W MALL DR EVERETT WA 98208** SEX **F** D.O.B. MMDDYYYY **04** - **13** - **1956**

PASSENGER WITNESS UNIT # **1** SEAT POS. **3** AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **7** NATURE OF INJURIES **NECK SHOULDER PAIN**

NAME (LAST, FIRST, MIDDLE INITIAL) **YELTON MICHAEL L**

ADDRESS & PHONE # **1001 N STATE ST UNIT 406 BELLINGHAM WA 98225 2068928211** SEX **M** D.O.B. MMDDYYYY **10** - **24** - **1992**

PASSENGER WITNESS UNIT # **2** SEAT POS. **3** AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL) **GROULX JOHN P**

ADDRESS & PHONE # **4715 80TH DR NE MARYSVILLE WA 98072 8133615080** SEX **F** D.O.B. MMDDYYYY **06** - **01** - **1963**

PASSENGER WITNESS UNIT # **2** SEAT POS. **7** AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NARRATIVE

Please see subsequent narrative pages

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)

G. SHEIN INVESTIGATING OFFICER'S SIGNATURE **12-07-16 07:51 AM** DATED PLACE SIGNED

APPROVED BY **C. CHRISTENSEN 0075** DATE **12/7/2016 4:42:16 PM**

BADGE OR ID # **0136** ORI # **WA0311900** TIME POLICE DISPATCHED **5:28 PM** TIME POLICE ARRIVED **5:32 PM**



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ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **GROULX DANA B**

ADDRESS & PHONE # **4715 80TH DR NE MARYSVILLE WA 98270 8133615080** SEX **F** D.O.B. **12** - **01** - **1956**

PASSENGER WITNESS UNIT # **2** SEAT POS. **9** AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE # SEX D.O.B.

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.

PASSENGER WITNESS UNIT # SEAT POS. AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NARRATIVE

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DATE AND TIME
OF COLLISION 12/03/16 17:28**NARRATIVE**

On 12/03/2016 at approximately 1728 hours I, Officer Shein (SS0136) of the Lake Stevens Police Department was on routine patrol in a fully marked patrol vehicle equipped with lights and sirens wearing full duty uniform with shoulder patches and a badge.

UNIT 1 was turning left / westbound from Market PI onto SR 204. UNIT 2 was going straight ahead southbound from Lundeen Park Wy onto Market PI. UNIT 1 did not yield to UNIT 2.

Driver of UNIT 1 said that he was turning left, just like all the other cars ahead of him. Driver of UNIT 2 said that he was going straight, and all of the sudden, a car turned right in front of him. Driver of UNIT 2 said that he did not have time to stop to prevent a collision.

Passenger of UNIT 1 complained of injuries to neck and shoulder pain. She was transported to Providence Medical Center by an Aid Unit.

Photographs of the damage captured and submitted along with this report.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT, AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

Gleb Shein #136
Officer

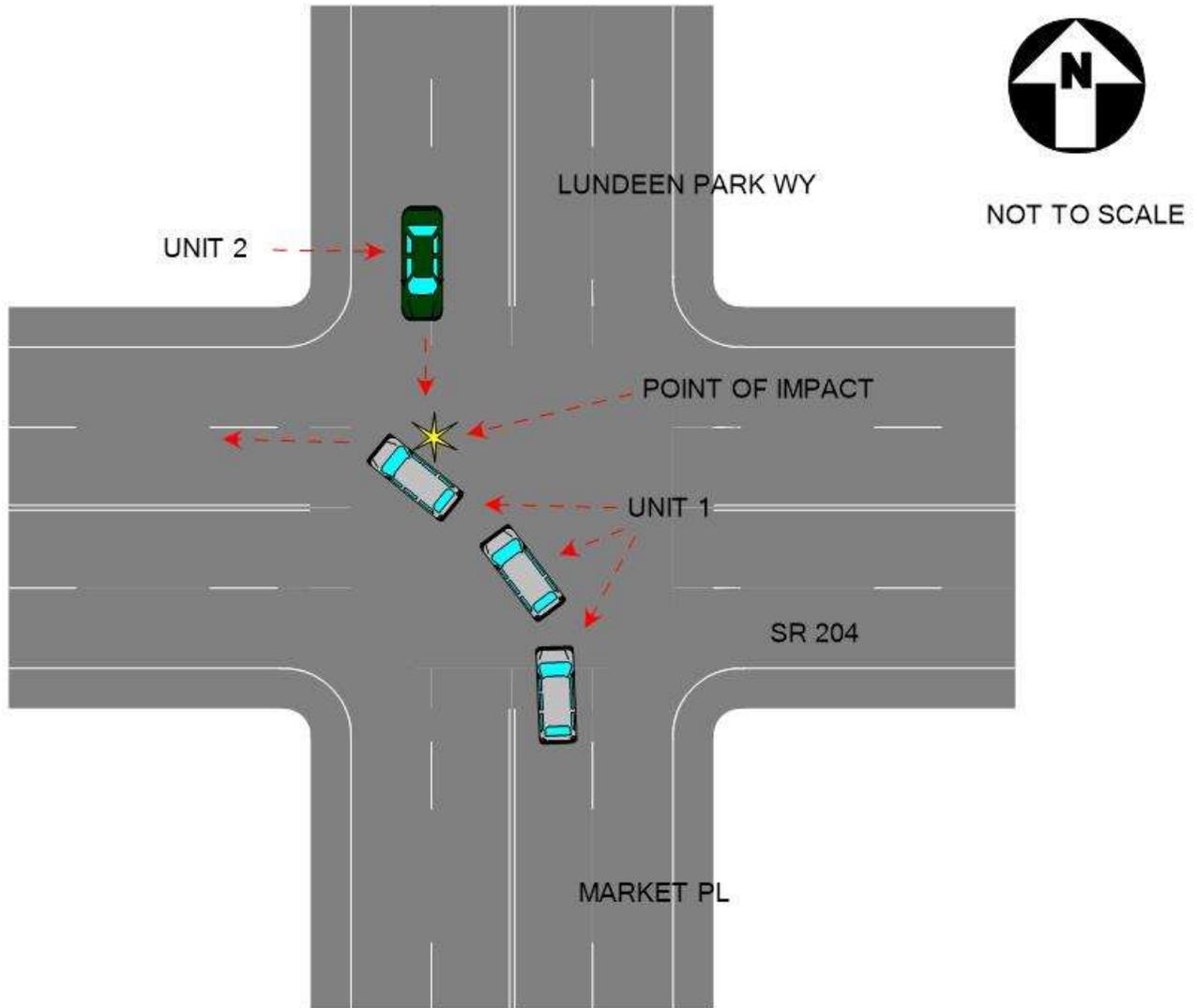
12/7/2016
Date

Lake Stevens, WA
Location Signed

REPORT NO. E616942

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DATE AND TIME OF COLLISION 12/03/16 17:28





16-24038





