



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. E323695

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INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input 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 #	14-01018
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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	04	-	27	-	2014			1849	31		0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
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SR 204	BLOCK NO. <input checked="" type="checkbox"/>	9100
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DISTANCE	OF (REFERENCE OR CROSS STREET)
	91ST AVE NE

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: 4255257683
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LAST NAME	BEAVER	FIRST NAME	SUSAN	MIDDLE INITIAL	M
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STREET NEW ADDRESS	401 E STANLEY ST
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CITY	GRANITE FALLS	ST	WA	ZIP	982528484
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CDL	RESTRICTIONS	B	ENDORSEMENTS	
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DRIVER'S LICENSE #	BEAVESM400J5	STATE	WA	SEX	F	D.O.B.	04	-	25	-	1960
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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 #	ALS1623	STATE	WA	VIN#	4C3AG52H64E139674
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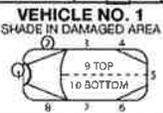
TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2004	MAKE	CHRY	MODEL	SEBCP	STYLE	CP	VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. SUSAN BEAVER 401 E STANLEY ST GRANITE FALLS WA 98252 D: 4255257683

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	PROGRESSIVE 901535594
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	4Z0402043	CHARGE	FAIL TO STOP/YIELD AT
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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: 4259714712
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LAST NAME	RAMIREZ MACHUCA	FIRST NAME	RUPERTO	MIDDLE INITIAL	F
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STREET NEW ADDRESS	11500 MERIDIAN AVE S UNIT 10
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CITY	EVERETT	ST	WA	ZIP	982084922
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CDL	RESTRICTIONS	ENDORSEMENTS	
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DRIVER'S LICENSE #	RAMIRRF057D7	STATE	WA	SEX	M	D.O.B.	03	-	27	-	1995
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	4	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	ACR2957	STATE	WA	VIN#	19UUA66254A011717
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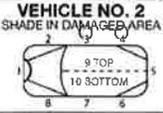
TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2004	MAKE	ACUR	MODEL	TL	STYLE	4T	VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. BERNARDO RAMIREZ 11500 MERIDIAN AVE S #10 EVERETT WA 98208

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	FARMERS
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE	
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OFFICER'S NAME (PRINT)	M. HINGTGEN	BADGE OR ID #	126	AGENCY	WA0311900
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4 35
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1591972

CORRECTION

REPORT NO. **E323695**

CASE # 14-01018

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		SORENSEN JOHN R																
ADDRESS & PHONE #		7631 218TH ST SW EDMONDS WA 98026 4254220646						SEX	M	D.O.B. MMDDYYYY	11	-	11	-	1984			
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		PATE DONALD L																
ADDRESS & PHONE #		2710 21ST EVERETT WA 98201 4253514447						SEX	M	D.O.B. MMDDYYYY	03	-	15	-	1952			
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	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	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Veh #1 was traveling west of SR 204 approaching the traffic signaled intersection of SR 204 and 91st Ave NE. Veh #2 was in the left hand only turn lane at the intersection of SR 204 and 91st Ave NE, attempting to complete a left turn onto Northbound 91st Ave NE. Veh #2 began the turn and Veh #1 continued into the intersection. Veh #1 impacted Veh #2 prior to completing the turn.

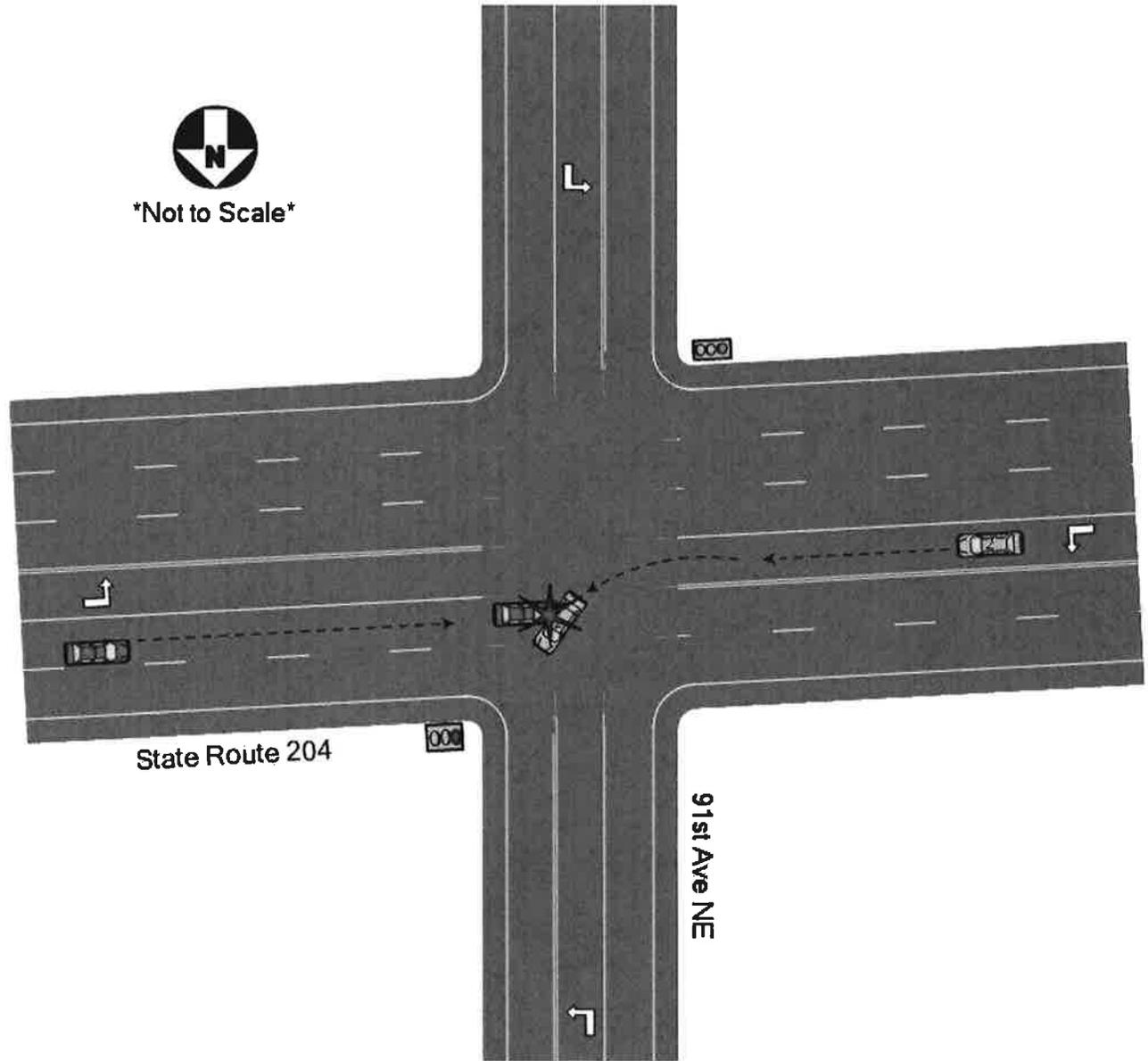
Both drivers indicated that they had green traffic lights to proceed through.

W-1 indicated that he was following Veh #1, approaching the intersection. W-1 stated that he had slowed for the red light that was illuminated on the traffic signal. W-1 stated that he watch Veh #1 proceed into the intersection, disregard the signal, and impact Veh #2.

W-2 stated that he was just in front of Veh #2, completing a left turn onto 91st Ave NE. W-2 stated that he had a green light to complete the turn and was forced to accelerate to avoid being hit by Veh #1. W-2 stated that he saw Veh #1 coming and did not believe they were going to stop.

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)

M. HINGTGEN		04-28-14 04:44 AM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY ROBERT MINER 095		DATE 4/28/2014 5:01:33 AM	
BADGE OR ID #	126	ORI #	WA0311900
TIME POLICE DISPATCHED	6:50 PM	TIME POLICE ARRIVED	6:50 PM



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-01018

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) PATE DONALD LEE	RACE W	ETH	SEX M	DOB 03-15-1952	AGE 62	HGT 5'9"	WGT 180	HAIR Red	EYES Blue
STREET ADDRESS 2710 21ST		CITY EVERETT			STATE WA	ZIP 98201		RES. STATUS		
HOME PHONE 425-351-4447		CELL PHONE 574MIE			PLACE OF EMPLOYMENT Business					
WORK PHONE		EMAIL ADDRESS BEYOND EVERYONE@MAIL.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.

I WAS SITTING IN LEFT TURN LANE HEADING EAST ^{ON 204} TURNING NORTH. LIGHT TURN GREEN AND I PROCEEDED TO TURN LEFT. I WAS THE FIRST CAR IN LINE TO TURN LEFT. A BLUE CAR HEADING WEST ON 204 RAN RED LIGHT I HAD TO SPEED UP TO MAKE SURE THE BLUE DID NOT HIT ME. THE BLUE CAR HIT THE CAR BEHIND ME.

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

SIGNATURE: <i>Donald L. Pate</i>	DATE SIGNED 04-27-2014	LOCATION SIGNED 204 & VERNON Rd
OFFICER/NUMBER: <i>[Signature]</i> 146	DATE SIGNED 4/28/14	LOCATION SIGNED LAKE STEVENS

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1
ORIGINAL

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-01018

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>CORSENSEN JONAS RICKARD</u>	RACE <u>WHITE</u>	ETH <u></u>	SEX <u>M</u>	DOB <u>11/11/1994</u>	AGE <u>20</u>	HGT <u>6'2</u>	WGT <u>250</u>	HAIR <u>BRN</u>	EYES <u>BRN</u>
STREET ADDRESS <u>7631 218th St SW Apt 23</u>		CITY <u>EDMONDS</u>			STATE <u>WA</u>	ZIP <u>98026</u>	RES. STATUS <u>SINGLE</u>			
HOME PHONE <u>425 422 0646</u>		CELL PHONE <u>D</u>			PLACE OF EMPLOYMENT <u>STUDENT</u>					
WORK PHONE <u>↓</u>		EMAIL ADDRESS <u>JONAS.RICKARD@GMAIL.COM</u>								

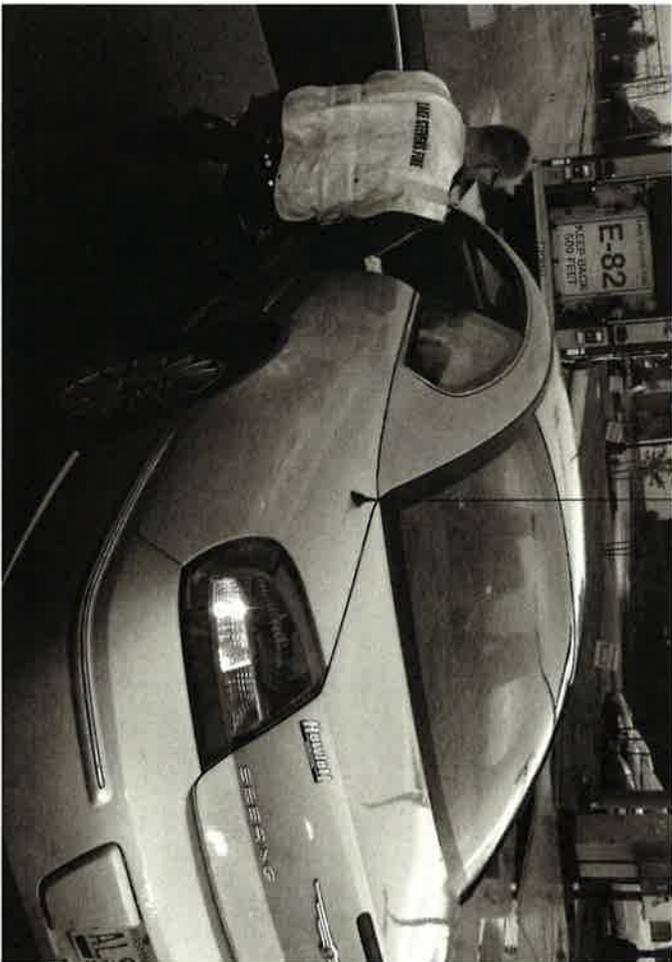
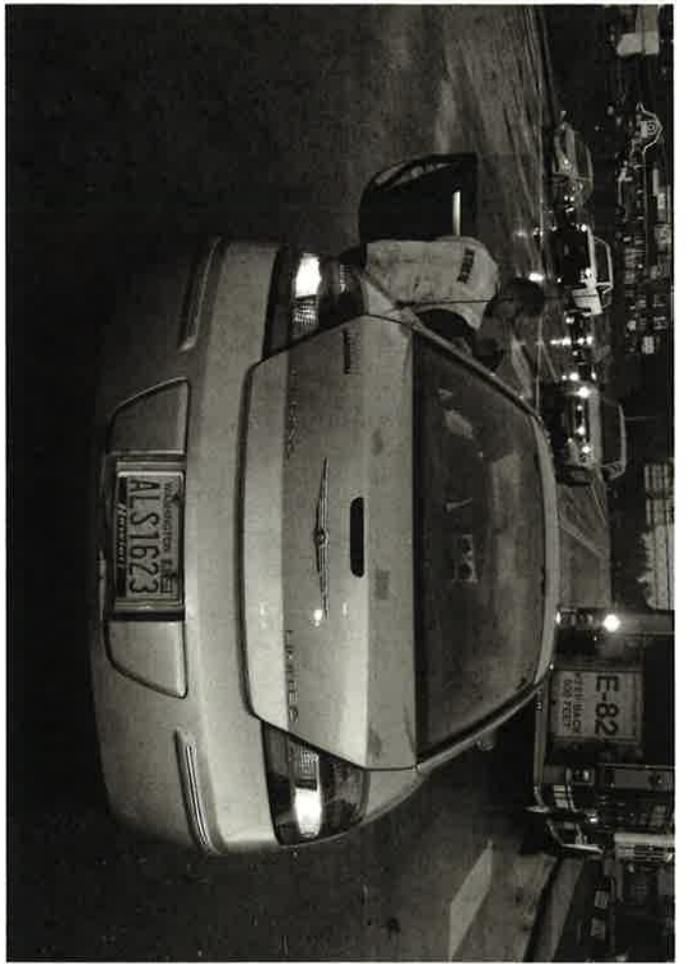
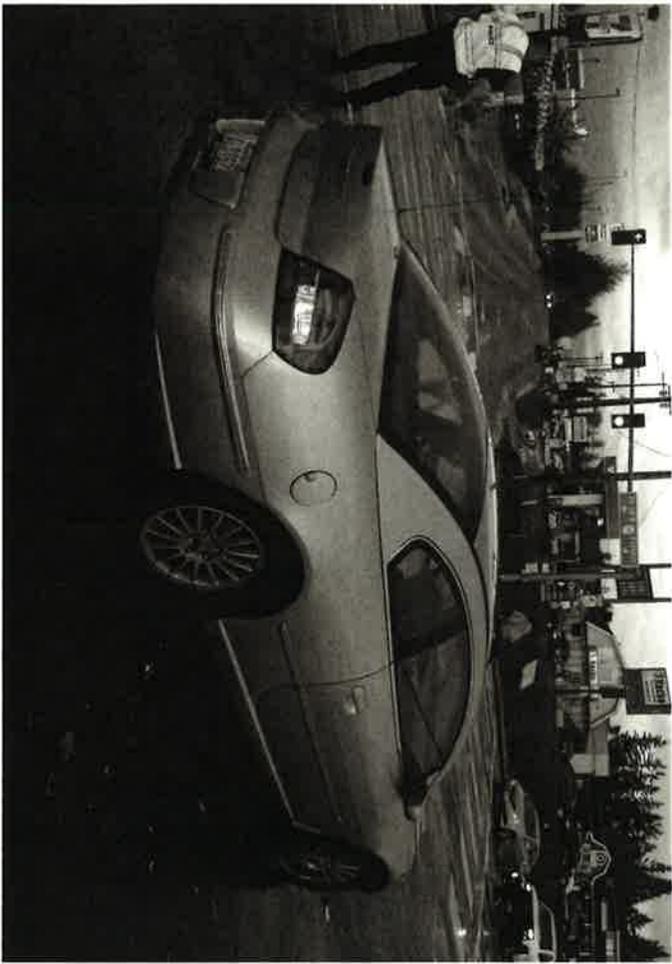
I, SON SOLESEN, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

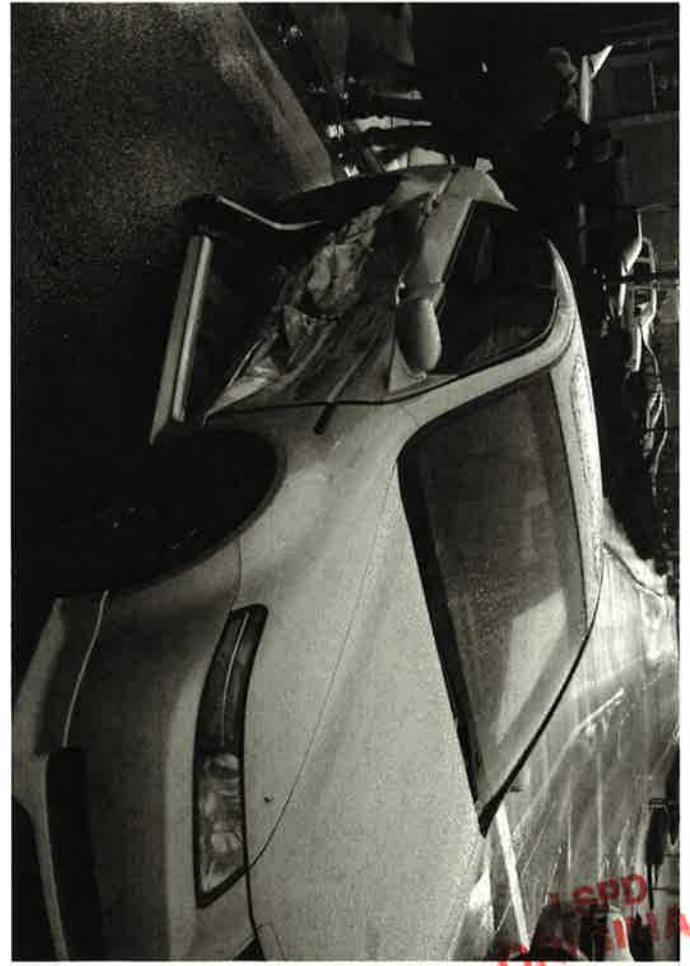
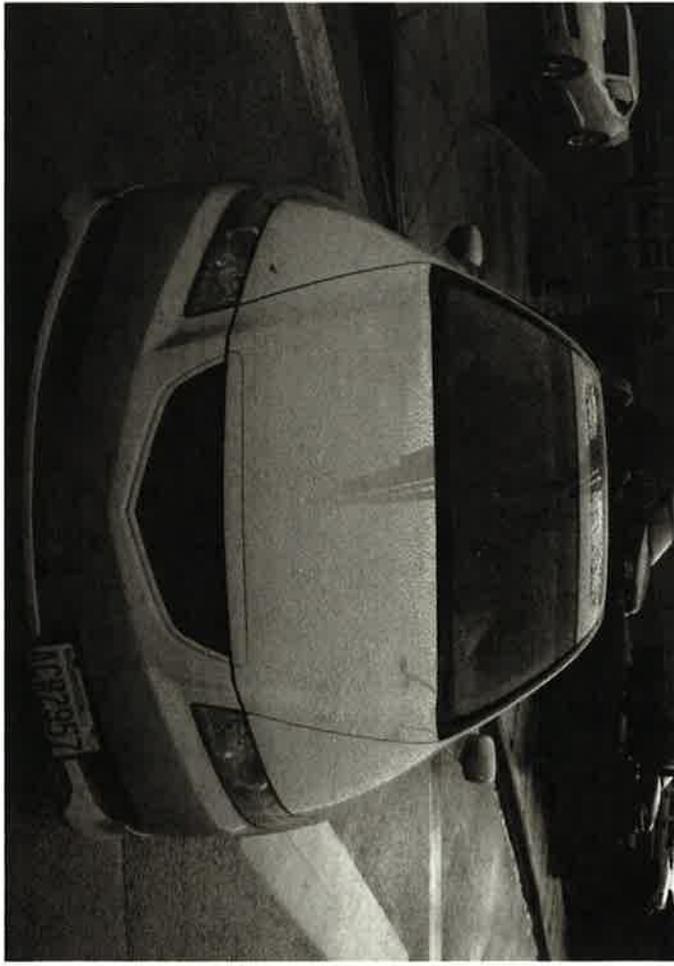
I WAS HEADING EAST ON SR 204 AND WAS STOPPING AT A RED LIGHT ON 91st AVE NE, AND A LIGHT TEAL CRYSTLER RAN THE RED LIGHT AND STRUCK THE PASSENGER SIDE OF A GREY ACURA, LY# ACR 2957.

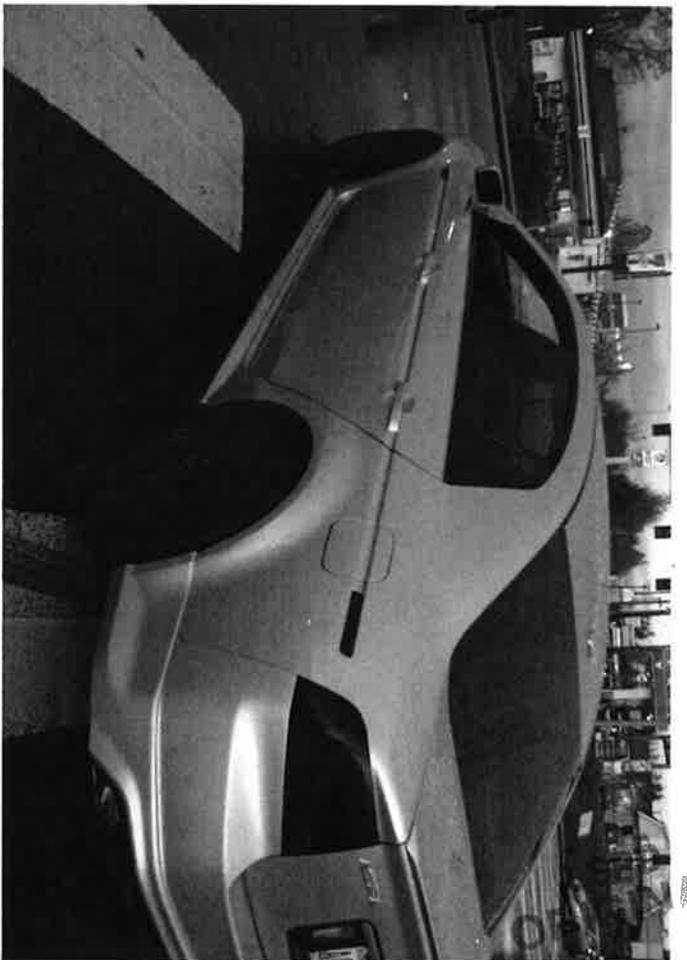
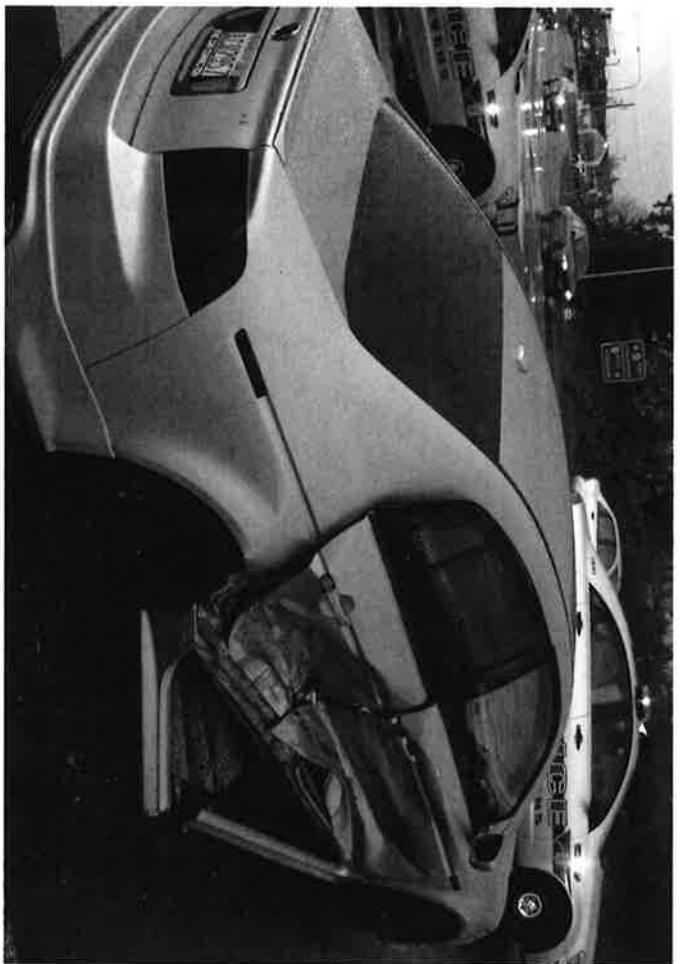
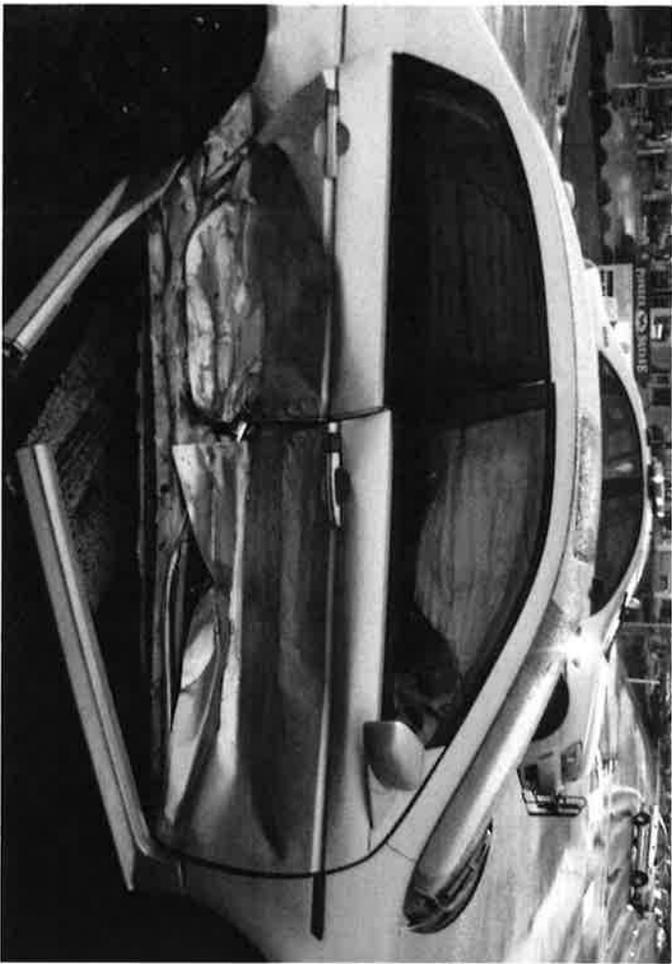
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED <u>4/27/14</u>	LOCATION SIGNED <u>LAKE STEVENS</u>
OFFICER/NUMBER: <u>14-01018</u>	DATE SIGNED <u>7/28/14</u>	LOCATION SIGNED <u>LAKE STEVENS</u>

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

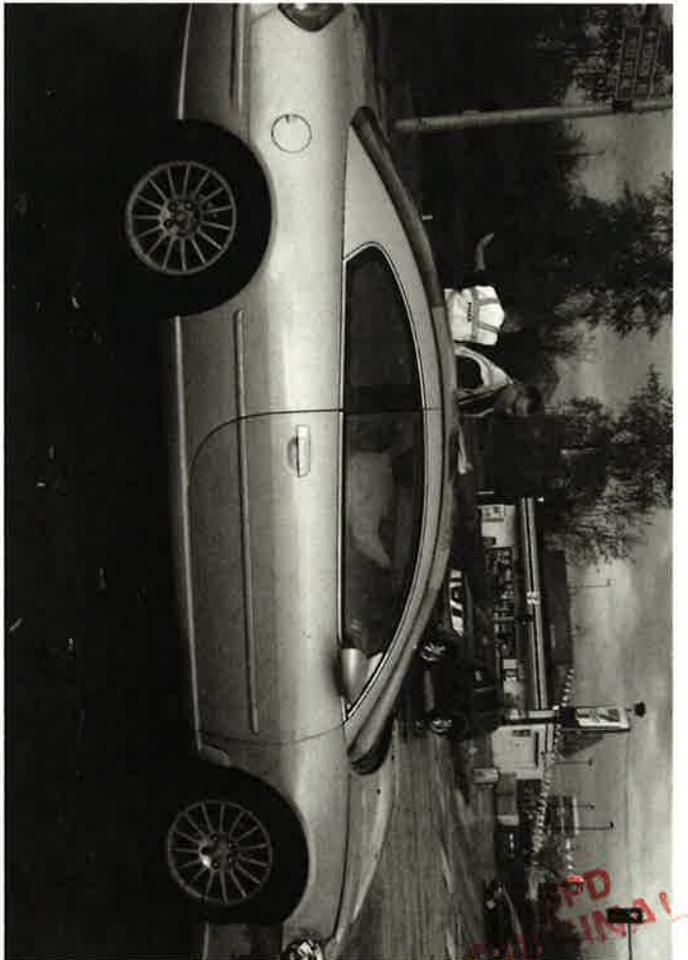






AL





CPD
11/21

LAKE STEVENS POLICE EVIDENCE UNIT Primary Officer/Badge Number M. HINTZGEN #126 Case Number 14-01018

Type of Crime: Felony / (Misdemeanor (Circle)) Type of Case: # COLLISION Date/Time: 4/27/14 @ 1850

Action Number: 3 *Evidence will be held until court disposition or when the Statute of Limitations has expired
 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING *Found and Safekeeping will be held for 60 days or 60 days past owner notification

Item # 1 Action # 3	Item <u>PHOTO CD</u>	Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		

Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____ Barcode goes here

Owner Signature/Other remarks /additional information/ special instructions _____

Item # Action #	Item	Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		

Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____ Barcode goes here

Owner Signature/Other remarks /additional information/ special instructions _____

Item # Action #	Item	Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		

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Owner Signature/Other remarks /additional information/ special instructions _____

Item # Action #	Item	Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		

Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____ Barcode goes here

Owner Signature/Other remarks /additional information/ special instructions _____

Item # Action #	Item	Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		

Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____ Barcode goes here

Owner Signature/Other remarks /additional information/ special instructions _____

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/> Date:	CAD/RMS Checked	ROUTING:
Name: _____ # _____	NCIC/WACIC + Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC - Date:	Owner Letter Sent:	Yellow: Case File

ORIGINAL

Incident History for: #SS14007791 Xref: #AG14001182

Case Numbers: \$SS14001018

Entered 04/27/14 18:49:54 BY SPDF27 SP0263
Dispatched 04/27/14 18:50:17 BY SPDP17 SP0356
Enroute 04/27/14 18:50:17
Onscene 04/27/14 18:50:30
Closed 04/27/14 19:46:42

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: 9

Loc: 91 AV NE/SR 204 , LKS (V)

Loc Info: T MOBILE USA,

Name: SCOTT, ANNETTA

Addr:

Phone: 4253469953

/1849 (SP0263) ENTRY , AT CORNER, 2 VEHS, UNK INJ
/1850 (SP0356) AGCADV , BCST
/1850 DISPER 19N2 #SS126 HINGTGEN, OFFICER (MICHAEL)
/1850 (SP0263) CROSS #AG14001182
/1850 (SP0356) ONSCNE 19N2 , BLKING
/1850 ASSTER 19N1 #SS115 THOR, OFFICER (ANDREW)
/1850 ASSTER 19N3 #SS130 RUTHERFORD, OFCR (RICH)
/1850 (SP0263) SUPP TXT: GRY CHRYSTLER GRY HONDA ACCORD,
/1850? CHANGE LOCI: --> T MOBILE USA, ,
NAM: --> SCOTT, ANNETTA,
PHO: --> 4253469953,
SRC: T --> 9
/1851 (SS95) *ASST 19S13 [91 AV NE/SR 204 , LKS]
#SS95 MINER, SGT (ROBERT)
/1852 (*****) REMINQ 19N2 ACR2957
/1852 (SP0356) REMINQ 19N2 LIC, 19N2, ACR2957, ,
/1852 (*****) REMINQ 19N2 ALS2623
/1852 (SP0356) REMINQ 19N2 LIC, 19N2, ALS2623, ,
/1852 ENROUT 19S13
/1853 (*****) REMINQ 19N2 ALS1623
/1853 (SP0356) REMINQ 19N2 LIC, 19N2, ALS1623, ,
/1854 ONSCNE 19N3
/1856 ONSCNE 19N1
/1856 ONSCNE 19S13
/1901 ASNCAS 19N2 \$SS14001018
/1911 ROTREQ 19S13 TOW 5061 LKS SKY VAL SNO
3605636090 , ACR2957
/1913 \$PREMPT 19N1
/1913 MISC 19N2 , SKY VALLEY ADV' D
/1917 \$PREMPT 19S13
/1918 CLEAR 19N3
/1925 (SP0386) SUPP TXT: TOW COMPAY CALLED ADV ETA 25-30 MIN
/1926 (SP0356) ROTREQ 19N2 TOW 5705 LKS TOP NOTCH TOWING
3605688877 , SKY VALLEY ETA TOO LONG
/1938 (SP0364) MISC 19N2 , TOW OS
/1946 CLEAR 19N2 D/H
, ROADWAY CLEAR
/1946 CLOSE 19N2

LSPD ORIGINAL