STATE OF WASHINGTON
POLICE TRAFFIC COLLISION REPORT

1591971

REPORT NO. E339212

CASE #	14-01535
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 #
07 - 03 - 2014	1428	31	.	N ☐ S ☐ E ☐ W ☐	IN ☑ OF ☐ 0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☑ NON-INTERSECTION ☐

STATE ROUTE 9 — BLOCK NO. ☐ MILE POST ☐ .

DISTANCE . MILES ☐ FEET ☐ N ☐ S ☐ E ☐ W ☐ OF (REFERENCE OR CROSS STREET) 20TH STREET SE

UNIT 01 MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☑ NO ☐ PHONE

LAST NAME	FIRST NAME	MIDDLE INITIAL
STACK	THOMAS	A

STREET NEW ADDRESS ☐ 15528 168TH AVENUE SE

CITY	ST	ZIP
MONROE	WA	98272

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE #	STATE	SEX	D.O.B. MMDDYYYY
STACKTA222KP	WA	M	05 - 17 - 1978

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

LICENSE PLATE #	STATE	VIN#
B17462X	WA	J8BE5B16867902134

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

VEH. YEAR 2006 | MAKE CHEV | MODEL P30 | STYLE CB | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. COHO DISTRIBUTING 20301 59TH PLACE S KENT WA 98032

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # TRAVELLERS 25674

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

LAST NAME	FIRST NAME	MIDDLE INITIAL
JOHNSEN	MATTHEW	J

STREET NEW ADDRESS ☐ 2421 84TH AVENUE NE

CITY	ST	ZIP
LAKE STEVENS	WA	98258

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE #	STATE	SEX	D.O.B. MMDDYYYY
JOHNSMJ205M4	WA	M	07 - 24 - 1980

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

LICENSE PLATE #	STATE	VIN#
PF00863	WA	1GNSKCE06DR365630

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

VEH. YEAR 2013 | MAKE CHEV | MODEL TAHOE | STYLE LL | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. OWNED BY DRIVER

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # STATE FARM 1454003F05447B

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
R. RUTHERFORD	130	WA0311900

	FROM	TO
27	2	3
28	1	8
29	1	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	1	
42	1	

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

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION

REPORT NO. E339212

CASE # 14-01535

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)	JOHNSEN JACE															
ADDRESS & PHONE #	2421 84TH AVENUE NE LAKE STEVENS WA 98258									SEX	U	D.O.B. MMDDYYYY	09 - 24 - 2013			
PASSENGER ☑ WITNESS ☐	UNIT #	2	SEAT POS.	9	AIRBAG	2	RESTR.	5	EJECT	1	HELMET USE		INJURY CLASS	1	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

07/03/2014 1929 hours, I responded to a two vehicle collision which occurred southbound SR9 at 20th Street SE. Vehicle 2 was stopped at the red traffic signal. Vehicle 1 approaching from the rear and failed to stop, colliding with rear of vehicle 2. No injuries reported and damage minor.

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)

R. RUTHERFORD		07-03-14 07:20 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
ROBERT MINER 095	7/4/2014 9:09:20 AM

BADGE OR ID #	130	ORI #	WA0311900	TIME POLICE DISPATCHED	2:29 PM	TIME POLICE ARRIVED	2:37 PM

SUPPLEMENTAL POLICE TRAFFIC COLLISION REPORT

013197

REPORT NO. E339212

CASE # 14-01535

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐ INTRASTATE ☐

UNIT #	1	USDOT		ICC #		VEHICLE TYPE		CARGO BODY TYPE	

CARRIER NAME

CARRIER ADDRESS

CITY | ST | ZIP

NAME SOURCE | # AXLES 00 | GVWR 0 | PLACARD ☐ | + | NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT # | MOTOR VEHICLE ☐ | PEDAL-CYCLE ☐ | PEDESTRIAN ☐ | PROPERTY OWNER ☐ | DAMAGE THRESHOLD MET YES ☐ NO ☐ | PHONE

LAST NAME | FIRST NAME | MIDDLE INITIAL

STREET NEW ADDRESS ☐

CITY | ST | ZIP

CDL | RESTRICTIONS | ENDORSEMENTS

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

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

LICENSE PLATE # | STATE | VIN#

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

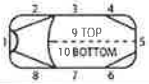
VEH. YEAR | MAKE | MODEL | STYLE | VEHICLE TOWED YES ☐ NO ☐ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ | INSURANCE CO & POLICY #

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

SHADE IN DAMAGED AREA



FROM TO

UNIT # | MOTOR VEHICLE ☐ | PEDAL-CYCLE ☐ | PEDESTRIAN ☐ | PROPERTY OWNER ☐ | DAMAGE THRESHOLD MET YES ☐ NO ☐ | PHONE

FROM TO

LAST NAME | FIRST NAME | MIDDLE INITIAL

STREET NEW ADDRESS ☐

CITY | ST | ZIP

CDL | RESTRICTIONS | ENDORSEMENTS

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

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

LICENSE PLATE # | STATE | VIN#

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

VEH. YEAR | MAKE | MODEL | STYLE | VEHICLE TOWED YES ☐ NO ☐ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ | INSURANCE CO & POLICY #

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

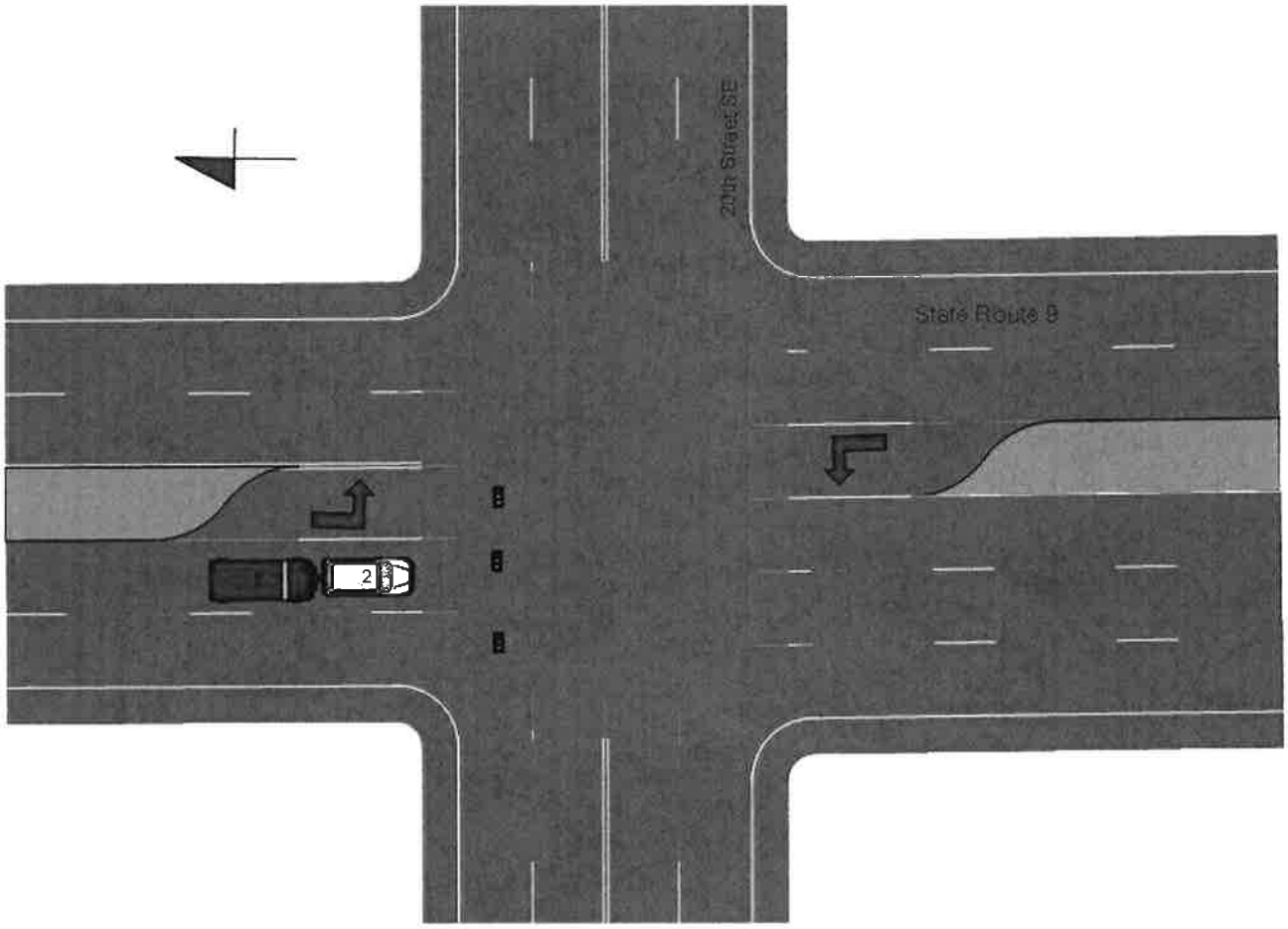
SHADE IN DAMAGED AREA

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)

R. RUTHERFORD		07-03-14 07:20 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST DET	DATED:	PLACE SIGNED

BADGE OR ID #	130	ORI #	WA0311900	APPROVED BY	MINER	DATE	7/4/2014

3000-345-013 R (7/06)


20th Street SE
State Route 9
2

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-01535

VICTIM / WITNESS

NON-DISC ☐	NAME (LAST, FIRST, MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES
	Stack Tom Alvin			M	5-17-78	36	5'8	150	B	G

STREET ADDRESS	CITY	STATE	ZIP	RES. STATUS
15528 168th Ave SE	Monroe	WA	98272	

HOME PHONE	CELL PHONE	PLACE OF EMPLOYMENT
	425 210-2563	Columbia Dist.

WORK PHONE	EMAIL ADDRESS

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.

We were both stopped at a stop light. Light turned green, traffic started moving. Then stopped. I ran into car in front of 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:	DATE SIGNED	LOCATION SIGNED
T. Stack	7-3-14	
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED
	07031	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___OF___

REVISED 4/2009

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-01535

VICTIM / WITNESS

NON-DISC ☐	NAME (LAST, FIRST MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES
	Johnsen, Matthew, J	W		M	07-24-1980	33	6.0	200	Blnd	Blue

STREET ADDRESS	CITY	STATE	ZIP	RES. STATUS
2421 84th AVE NE	Lake Stevens	WA	98258	WA

HOME PHONE	CELL PHONE	PLACE OF EMPLOYMENT
425-765-5259	425-765-5259	North County Fire & EMS

WORK PHONE	EMAIL ADDRESS
360-652-1246	mattJohnsen@hotmail.com

I, Matt Johnsen, 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 stopped @ the light, South Bound on Hwy 9 @ 20th St. I was in the center lane. I was stopped ~~at~~ waiting for the light to turn green & traffic to go when I heard screaching tires, I looked into my rear view mirror to see a Red bull delivery van comming up fast. I didnt have time to do anything before he hit the back of my car (2013 tahoe). The colision bumped my car into the back of the car infront of me. That car left the scene.

JACE JOHNSEN
09-24-13
PCS. 4

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 7-3-14	LOCATION SIGNED Lake Stevens, WA
OFFICER/NUMBER	DATE SIGNED 07/03/14	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"

REVISED 4/2009

Incident History for: #SS14012806
Case Numbers: $SS14001535
Entered 07/03/14 14:28:17 BY SPCT09 SP0251
Dispatched 07/03/14 14:29:29 BY SPDP17 SP0120
Enroute 07/03/14 14:29:29
Onscene 07/03/14 14:37:08
Closed 07/03/14 14:58:02

Initial Type: COL Initial Alarm Level: Final Alarm Level:
Final Type: COL (COLLISION,NON-PRIORITY) Pri: 2 Dispo: H
Police BLK: SS003 Fire BLK: AG1418 Map Page: 397E-3 Group: SS1 Beat: SOUT
Src: T
Loc: 20 ST SE/SR 9 SE ,LKS (V)

Loc Info:
Name: JOHNSON, MATT Addr: CELL Phone: 4257655259

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/1428  (SP0251)  ENTRY          ,CC 2 VEHS CHEVY TAHOE, RED BULL DELIVERY TRUCK
                                , NON BLKING, NON INJ
/1428            SUPP           TXT: VEHS PULLED OFF ON 20 ST
/1428  (SP0120)  AGCADV         ,BRDCST
/1429            AGCADV         ,19S13
/1429            VIEWED
/1429            DISPER  19R1    #SS130  RUTHERFORD,OFCR (RICH)
/1433  (SP0388)  SUPP           TXT: RP CB, MOVED VEHS FROM RD, NOW ON 94 DR SE
/1433  (SP0120)  AGCADV         ,19R1
/1433            CHGLOC  19R1   [94 DR SE ]
/1437  (SS130 ) *ONSCNE  19R1
/1446           *MISC    19R1   ,VEHICLE 1 B17462X, STACK THOMAS A 051778, DOT 1
                                61253, INSURANCE TRAVELLERS 25674. RED BULL. COH
                                O DISTRIBUTING 20301 59TH PL S KENT 98032
/1453  (SP0120)  ASNCAS  19R1   $SS14001535
/1454  (SS130 ) *MISC    19R1   ,VEH 2 PF00863, JOHNSON MATTHEW J, 072480, STATE
                                 FARM 1454003F0547B,
/1458           *CLEAR   19R1   D/H
/1458            CLOSE   19R1
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