



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E365623**

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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 #	14-02598
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

TRIBAL RESERVATION				
M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	10 - 16 - 2014	1808	31	N <input type="checkbox"/> E <input type="checkbox"/> IN <input checked="" type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> OF <input type="checkbox"/> 0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
SR 9 NE	BLOCK NO. <input checked="" type="checkbox"/>	700
DISTANCE	OF (REFERENCE OR CROSS STREET)	
MILES	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	7TH PL 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: 4254183648
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LAST NAME	RHOADES	FIRST NAME	NANCY	MIDDLE INITIAL	L
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STREET NEW ADDRESS	2514 85TH DR NE UNIT Z3
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CITY	LAKE STEVENS	ST	WA	ZIP	982586417
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CDL	RESTRICTIONS	B	ENDORSEMENTS	
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DRIVER'S LICENSE #	RHOADNL447ND	STATE	WA	SEX	F	D.O.B. MMDDYYYY	08 - 04 - 1956
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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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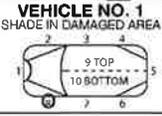
LICENSE PLATE #	AFA3439	STATE	WA	VIN#	WVWMM7AJ2BW311418
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2011	MAKE	VOLK	MODEL	GOLF/H	STYLE	2H	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. NANCY RHOADES 2514 85TH DR NE UNIT Z3 LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	PEMCO CA 0705186
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: 4254229058
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LAST NAME	NEWMAN	FIRST NAME	MICHELLE	MIDDLE INITIAL	R
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STREET NEW ADDRESS	2302 GRADE RD APT 6
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CITY	LAKE STEVENS	ST	WA	ZIP	982589185
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CDL	RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	NEWMAMR104OC	STATE	WA	SEX	F	D.O.B. MMDDYYYY	09 - 03 - 1990
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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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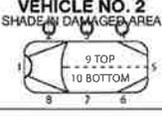
LICENSE PLATE #	341YKR	STATE	WA	VIN#	1FAFP34323W130414
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2003	MAKE	FORD	MODEL	FOC4D	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. JOANNE NEWMAN 2302 GRADE RD # 5 LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	PEMCO CA 0266071
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE



OFFICER'S NAME (PRINT)	W. AUKERMAN	BADGE OR ID #	72	AGENCY	WA0311900
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0 4 30
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FROM TO 5 3 33
FROM TO 1 3 34
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1 41
1 42



1591972

CORRECTION

REPORT NO. **E365623**

CASE # **14-02598**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		VANLEUVAN MISHA																
ADDRESS & PHONE #		UNKNOWN					SEX	F	D.O.B. MMDDYYYY	01	-	01	-	1984				
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	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)																		
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
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

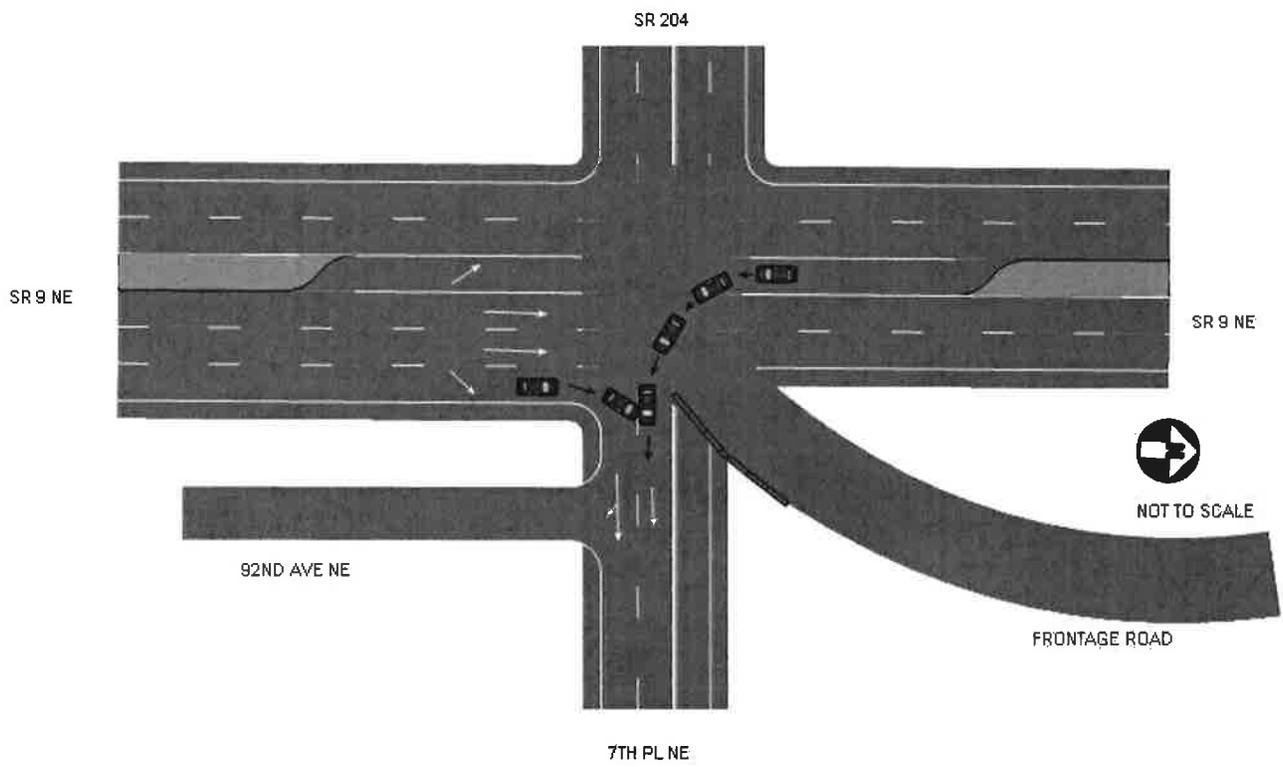
On 10/16/2014 at about 1813 hours (all times approximate) I was radio dispatched to a non-blocking/non-injury collision that had occurred at the intersection of SR 9 NE and 7th Place NE in the city of Lake Stevens.

Arriving on scene I contacted both drivers. At the time of my arrival on scene a passenger in U2 (Misha) had left the scene and the driver of U1 did not have a phone number or address to contact Misha. The driver of U2 claimed Misha was not injured as a result of the collision.

Based on evidence and statements at the scene it is found that U2 had been traveling southbound on SR 9 and was making a left turn on a green left turn arrow onto eastbound 7th Place. At this same time U1 had entered the intersection making a right turn on a red light from northbound SR 9 onto eastbound 7th Place. U1 struck the passenger side of U2 with the front driver's corner of U1. Both vehicles sustained reportable damage and were driven from the scene under their own power.

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)

W. AUKERMAN		10-17-14 02:56 AM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY BOB SUMMERS 079		DATE 10/17/2014 5:18:40 AM	
BADGE OR ID # 72	ORI # WA0311900	TIME POLICE DISPATCHED 6:13 PM	TIME POLICE ARRIVED 6:23 PM



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-02598

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>Newman, Michelle R.</u>	RACE <u>CA</u>	ETH <u>WL</u>	SEX <u>F</u>	DOB <u>9/3/1990</u>	AGE <u>24</u>	HGT. <u>5'3"</u>	WGT. <u>140</u>	HAIR <u>BR</u>	EYES <u>HZE</u>
STREET ADDRESS <u>2302 Girado Rd Apt #6</u>		CITY <u>Lake Stevens</u>			STATE <u>WA</u>	ZIP <u>98258</u>	RES. STATUS			
HOME PHONE <u>N/A</u>		CELL PHONE <u>(425) 422-9058</u>			PLACE OF EMPLOYMENT <u>Granite Falls Child care</u>					
WORK PHONE <u>(360) 691-348-3280</u>		EMAIL ADDRESS <u>Sing.like.no.one.hears.you@gmail.com</u>								

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 taking a left turn on Hwy 9 at the Safeway light. It turned green, and we took our turn. When Nancy turned right and entered into our lane hitting the driver side of the car. I had one passenger Misha Yanfetan. No one was injured.

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

SIGNATURE: <u>Michelle R Newman</u>	DATE SIGNED <u>10/16/2014</u>	LOCATION SIGNED <u>Frontier Village (Safeway Parking lot)</u>
OFFICER/NUMBER: <u>ALUKERMAN #72</u>	DATE SIGNED <u>10-16-14</u>	LOCATION SIGNED <u>LAKE STEVENS, WA</u>

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

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-02598

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>Rhoades, Nancy Lynn</u>	RACE <u>W</u>	ETH <u>C</u>	SEX <u>F</u>	DOB <u>8/4/1956</u>	AGE <u>58</u>	HGT <u>5'2"</u>	WGT <u>102</u>	HAIR <u>gray</u>	EYES <u>green</u>
STREET ADDRESS <u>2514 85th Dr NE, E3</u>		CITY <u>Lake Stevens, WA</u>			STATE	ZIP <u>98258</u>	RES. STATUS <u>WA</u>			
HOME PHONE <u>425-418-3648</u>		CELL PHONE <u>Same</u>			PLACE OF EMPLOYMENT <u>Snohomish School Dist.</u>					
WORK PHONE <u>360-563-4229</u>		EMAIL ADDRESS <u>Same</u>								

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.

As I was going north on Hwy. 9, I made a right-on-red to turn into the Frontier Village. The other vehicle was headed into the Frontier Village from the west and my front bumper on the driver's side hit the back passenger's door of her car, scraping the door & denting it.

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

SIGNATURE: <u>Nancy L. Rhoades</u>	DATE SIGNED <u>10/16/14</u>	LOCATION SIGNED <u>Frontier Village</u>
OFFICER/NUMBER: <u>ANKERMAN #72</u>	DATE SIGNED <u>10-16-14</u>	LOCATION SIGNED <u>LAKE STEVENS, WA</u>

"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

LAKE STEVENS POLICE
EVIDENCE UNIT

Primary Officer/Badge Number
AUERMAN

Case Number
14-02598

Type of Crime: Felony / Misdemeanor (Circle)

Type of Case: *COLLISION*

Date/Time: *10-16-14 205*

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

Item # <i>1</i>	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber		(Further Description)			
Action # <i>3</i>	Serial #	Where Found	Weight of Narcotic			
	<i>700 SR 9 W/ 45</i>					

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

Owner Signature/Other remarks /additional information/ special instructions
PLS (VEHICLES) *72*

Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber		(Further Description)			
Action #	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 #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber		(Further Description)			
Action #	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 #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber		(Further Description)			
Action #	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 #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber		(Further Description)			
Action #	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

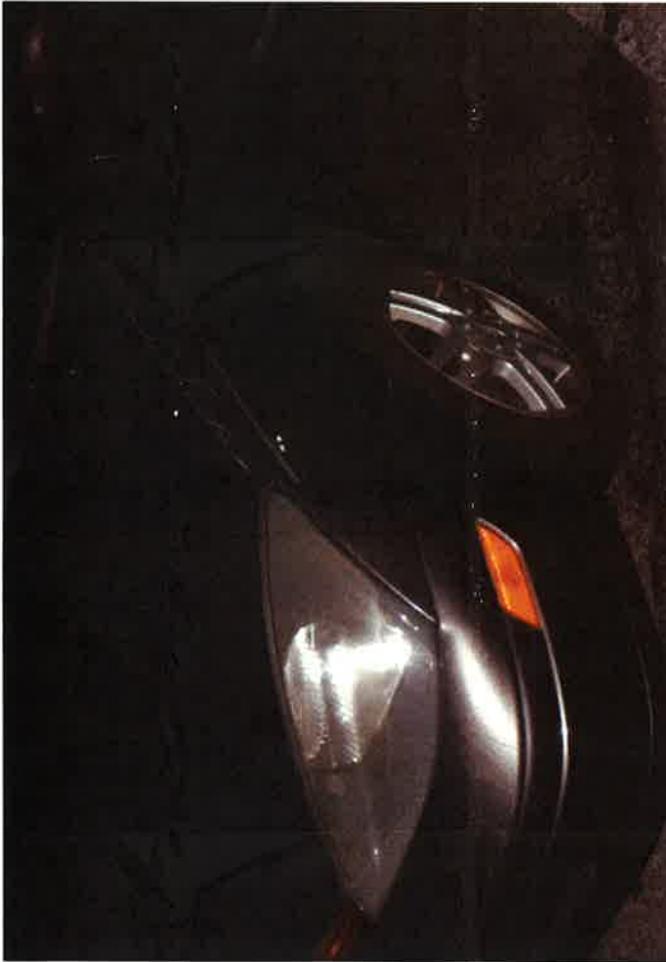
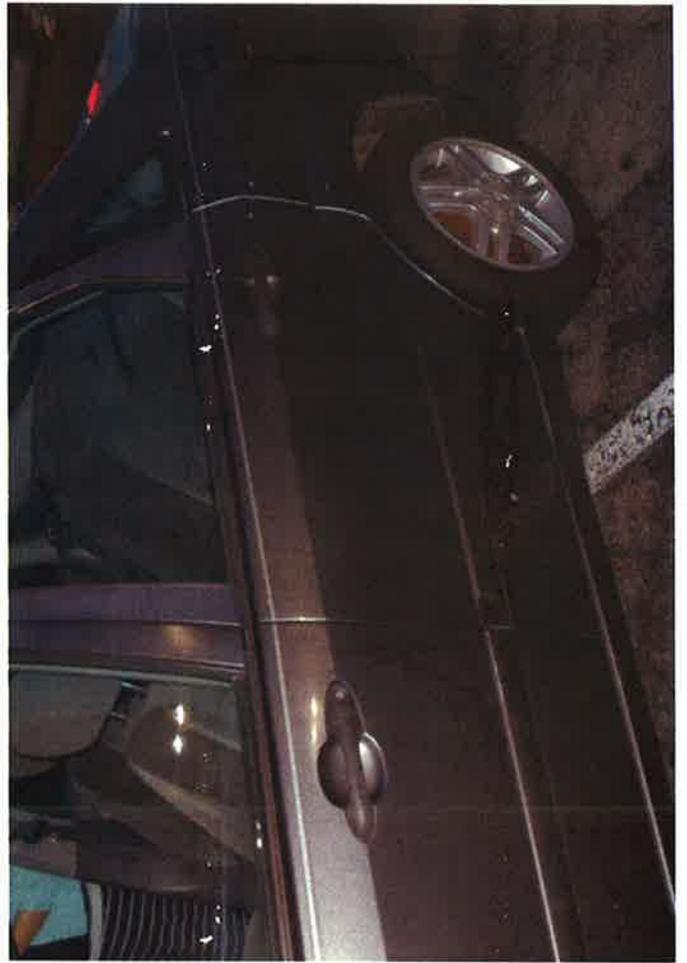
Evidence Control Use Only:

Received by Evidence: _____ NCIC/WACIC Date: _____ CAD/RMS Checked _____

Name: _____ # _____ NCIC/WACIC + Date: _____ Owner Letter Sent: _____

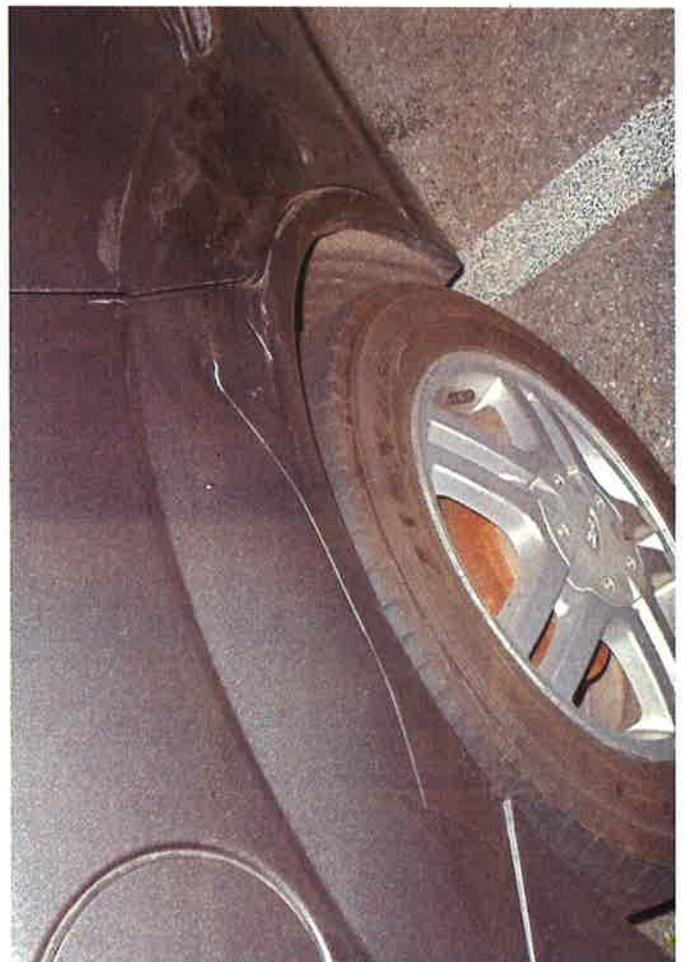
Date: _____ Time: _____ NCIC/WACIC - Date: _____ Owner Letter Sent: _____

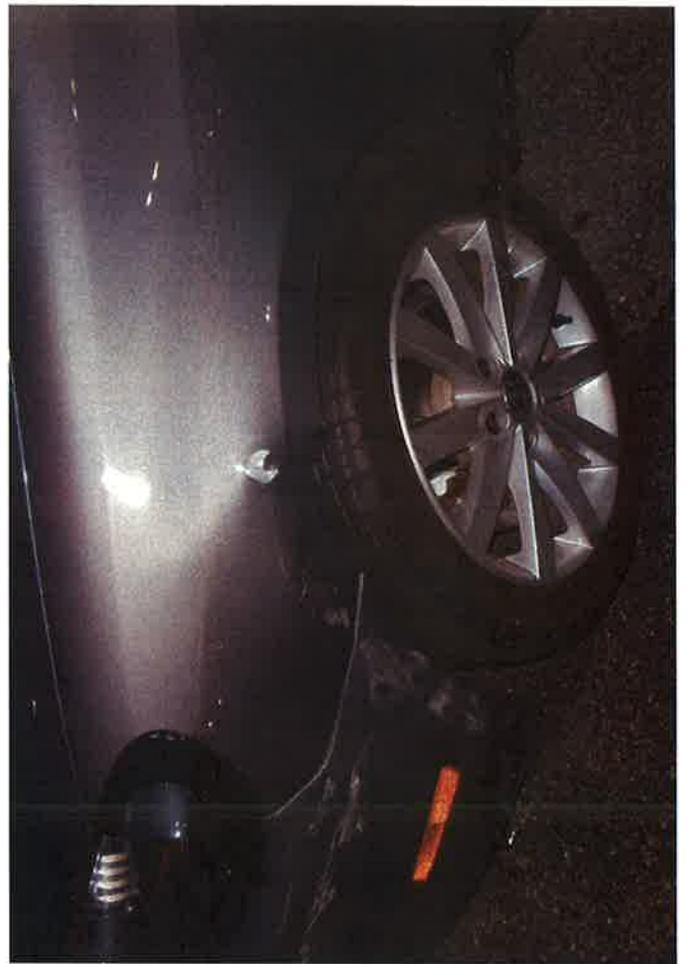
ROUTING:
White: Property Room
ORIGINAL
Yellow: Case File



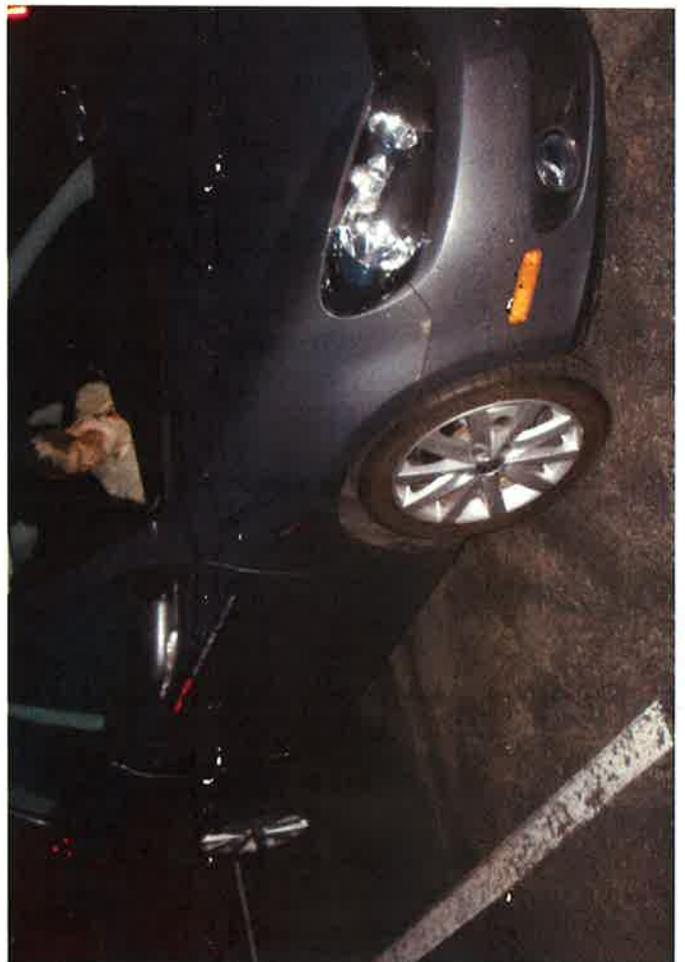
LSPD
ORIGINAL







1000 ORIGINAL



EXCHANGE OF INFORMATION

OFFICER NAME: **W. AUKERMAN #72**

AGENCY: **LAKE STEVENS PD**

COLLISION: **10/16/14 06:08 PM**

DISPATCH: **10/16/14 06:13 PM**

ARRIVAL: **10/16/14 06:23 PM**

CASE#: **14-02598**

LOCATION: **SR 9 NE BN:700**

AT 7TH PL NE

NARRATIVE/NOTES:

UNIT 1:	MOTOR VEHICLE -	2011 GOLFHB PLATE: AFA3439 (WA)	TOWED BY:
DRIVER:	NANCY L RHOADES	VEH OWNER:	NANCY L RHOADES
ADDRESS:	2514 85TH DR NE UNIT Z3 LAKE STEVENS, WA 982586417	ADDRESS:	2514 85TH DR NE UNIT Z3 LAKE STEVENS, WA 98258
DL #:	RHOADNL447ND	STATE:	WA
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY:	PEMCO	INSURED BY:	PEMCO
POLICY #:	CA 0705186	POLICY #:	CA 0705186
UNIT 2:	MOTOR VEHICLE -	2003 FORD FOC4D PLATE: 341YKR (WA)	TOWED BY:
DRIVER:	MICHELLE R NEWMAN	VEH OWNER:	JOANNE E NEWMAN
ADDRESS:	2302 GRADE RD APT 6 LAKE STEVENS, WA 982589185	ADDRESS:	2302 GRADE RD # 5 LAKE STEVENS, WA 98258
DL #:	NEWMAMR1040C	STATE:	WA
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY:	PEMCO	INSURED BY:	PEMCO
POLICY #:	CA 0266071	POLICY #:	CA 0266071

13-AL

