



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E463517**

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FROM TO
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FROM TO
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1 41
1 42

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 #	15-02386	
LOCAL AGENCY CODING	0664	
TOTAL # OF UNITS	02	OBJECT STRUCK

TRIBAL RESERVATION

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #

DATE OF COLLISION 09 - 21 - 2015 1535 31 N S E W IN OF 0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION

20TH ST SE BLOCK NO. 8100 MILE POST

DISTANCE 200 00 MILES FEET N S E W OF (REFERENCE OR CROSS STREET) 83RD AVE SE

UNIT 01 MOTOR VEHICLE PEDAL-CYCLE DAMAGE THRESHOLD MET YES NO PHONE D: 4252319877

LAST NAME BUNNEY FIRST NAME LORRIE MIDDLE INITIAL R

STREET NEW ADDRESS 1508 HEWITT AVE

CITY EVERETT ST WA ZIP 98201

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # BUNNELR397R1 STATE WA SEX F D.O.B. MMDDYYYY 12 - 21 - 1961

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

LICENSE PLATE # 270YPN STATE WA VIN# 1GNEK13Z62R215453

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2002 MAKE CHEV MODEL TAHOE STYLE UT VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. BRIAN LANG 4715 COLLEGE AVE EVERETT WA 98203

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # GEICO 4123475057

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET YES NO PHONE D: 2063513145

LAST NAME ROBERTS FIRST NAME ANGELA MIDDLE INITIAL M

STREET NEW ADDRESS 3040 BEACON AVE S

CITY SEATTLE ST WA ZIP 981445817

CDL RESTRICTIONS B ENDORSEMENTS

DRIVER'S LICENSE # ROBERAM244PG STATE WA SEX F D.O.B. MMDDYYYY 10 - 07 - 1976

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

LICENSE PLATE # AWV9025 STATE WA VIN# WA1LFAFP8FA096270

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2015 MAKE AUDI MODEL Q5 STYLE UT VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. ANGELA ROBERTS 1818 E MADISON ST SEATTLE WA 98122

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # ALLSTATE 976453883

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



OFFICER'S NAME (PRINT) CHAD CHRISTENSEN BADGE OR ID # 075 AGENCY WA0311900



1591972

CORRECTION

REPORT NO. **E463517**

CASE # **15-02386**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

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				
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

Unit 2 had just started moving from a stopped position in the 8100 20th St SE. Unit 1 had slowed down for Unit 2, but stated her foot slipped out off the brake an on to the gas peddle. Unit 1 struck Unit 2 at the rear bumper. There were no reported injuries and noth vehicle were driven from the scene.

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)

CHAD CHRISTENSEN

09-21-15 04:25 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY
ROBERT MINER 095

DATE
9/21/2015 8:43:15 PM

BADGE OR ID #	075	ORI #	WA0311900	TIME POLICE DISPATCHED	3:35 PM	TIME POLICE ARRIVED	3:47 PM
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DRAWING IS NOT TO SCALE



8100 20TH ST SE



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 15-02386

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Lorrie Bunnell	RACE W	ETH	SEX F	DOB 12/21/54	AGE 54	HGT 5'5"	WGT 110	HAIR Blond	EYES Blue
STREET ADDRESS 881 Olympic Blvd		CITY Everett		STATE WA		ZIP 98203		RES. STATUS		
HOME PHONE		CELL PHONE 425-231-9877			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS								

I, LORRIE BUNNELL, 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.

Was coming up to stop light
 slowed down then tried to step on
 brake foot slipped off hit back of
 silver Audi.

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 9-21-15	LOCATION SIGNED
OFFICER/NUMBER: C. [Signature]	DATE SIGNED 9/21/15	LOCATION SIGNED

"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

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 15-02386

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>ROBERTS ANGELA M</u>	RACE <u>W</u>	ETH <u>A</u>	SEX <u>F</u>	DOB <u>10/07/76</u>	AGE <u>38</u>	HGT <u>5'1</u>	WGT <u>132</u>	HAIR <u>BR</u>	EYES <u>H</u>
STREET ADDRESS <u>8100 20th St SE</u>		CITY <u>LAKE STEVENS</u>			STATE <u>WA</u>	ZIP <u>98258</u>	RES. STATUS <u>FULLTIME</u>			
HOME PHONE <u>206-351-3145</u>	CELL PHONE <u>" "</u>		PLACE OF EMPLOYMENT <u>SELF EMPLOYED</u>							
WORK PHONE <u>" "</u>	EMAIL ADDRESS <u>arob76@gmail.com</u>									

I, ANGELA ROBERTS, 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 DRIVING EAST ON 20TH ST SE. I STOPPED AT A RED LIGHT. WHEN THE LIGHT TURNED GREEN I BEGAN TO MOVE WITH THE FLOW OF TRAFFIC. AS I DID SO THE VEHICLE BEHIND HIT MY REAR BUMPER. I PULLED OVER TO THE SIDE OF THE ROAD. THE DRIVER SAID SHE HAD ACCIDENTALLY HIT THE GAS RATHER THAN THE BREAK.

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>Angela Roberts</u>	DATE SIGNED <u>9/21/15</u>	LOCATION SIGNED <u>8100 20th St SE</u>
OFFICER/NUMBER: <u>C. Ch... #15</u>	DATE SIGNED <u>9/21/15</u>	LOCATION SIGNED

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