



STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT



1591971

REPORT NO. E480366

0 5 27

1

INTERSTATE CITY STREET STATE ROUTE COUNTY RD PRIVATE WAY FIRE RESULTED STOLEN VEHICLE HIT & RUN INVOLVED

CASE # 2015-00200353

LOCAL AGENCY CODING

2

2

TRIBAL RESERVATION

TOTAL # OF UNITS 02 OBJECT STRUCK

1 8 28

3

DATE OF COLLISION 11-02-2015 TIME 0601 COUNTY # 31 MILES CITY # 0664

2

4

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION S LAKE STEVENS RD BLOCK NO. 2200

3

4a

DISTANCE OF (REFERENCE OR CROSS STREET) 103RD AVE SE

0 4 29

5

UNIT 01 MOTOR VEHICLE PEDAL-CYCLE DAMAGE THRESHOLD MET PHONE D: 4255120502

0 1 30

6

LAST NAME THOMPSON FIRST NAME JEREMY MIDDLE INITIAL W

STREET NEW ADDRESS 10829 35TH ST SE

7

CITY LAKE STEVENS ST WA ZIP 982585788

1 2 31

8

CDL RESTRICTIONS ENDORSEMENTS

2

9

DRIVER'S LICENSE # THOMPJW03105 STATE WA SEX M D.O.B. 09-25-1997

3

10

ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE 2 INJURY CLASS 7 NATURE OF INJURIES BACK AND NECK PAIN - NO EMT TRANSPORT

1 2 32

11

LICENSE PLATE # B64903U STATE WA VIN# 5TBDT44195S481592

2

12

TRAILER PLATE # STATE TRAILER PLATE # STATE

3

13

VEH. YEAR 2005 MAKE TOYT MODEL PU STYLE CW VEHICLE TOWED YES NO TOWED BY UNKNOWN - OWNER'S GOVT. VEHICLE YES NO

FROM TO 5 7 33

REGISTERED OWNER INFO. JASON THOMPSON 10829 35TH ST SE LAKE STEVENS WA 98258

14

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # ENUMCLAW PROPERTY AA10001423

FROM TO 7 3 34

VEHICLE LEGALLY STANDING CITATION # CHARGE



15

UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET PHONE D: 3605637300

4 35

16

LAST NAME REQUA FIRST NAME VIOLET MIDDLE INITIAL M

4 36

17

STREET NEW ADDRESS 6422 101ST PL NE

37

18

CITY MARYSVILLE ST WA ZIP 982702029

38

19

CDL B RESTRICTIONS B ENDORSEMENTS L, P

39

20

DRIVER'S LICENSE # REQUAVM437QH STATE WA SEX F D.O.B. 11-08-1957

40

21

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

22

LICENSE PLATE # 94651C STATE WA VIN# 4DRAPSKK5BB330553

23

TRAILER PLATE # STATE TRAILER PLATE # STATE

1 41

24

VEH. YEAR 2011 MAKE IC MODEL BE STYLE VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

1 42

REGISTERED OWNER INFO. SNOHOMISH SCHOOL DISTRICT 1601 AVE D SNOHOMISH WA 98290 D: 3605633525

25

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # SIAW SIAW151634039



26

VEHICLE LEGALLY STANDING CITATION # CHARGE

OFFICER'S NAME (PRINT) J. BARNES BADGE OR ID # 0101 AGENCY WA0311900



1591972

CORRECTION

REPORT NO. **E480366**

CASE # **2015-00200353**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **THOMPSON JUSTIN H**

ADDRESS & PHONE # **10829 35TH ST SE LAKE STEVENS WA 982585788 4255120502** SEX **M** D.O.B. **11** - **16** - **1999**

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

NAME (LAST, FIRST, MIDDLE INITIAL) **KELLEY BRET L**

ADDRESS & PHONE # **720 150TH AVE NE SNOHOMISH WA 982905863 4253309359** SEX **M** D.O.B. **11** - **29** - **1963**

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

V-1 was stopped and waiting to turn left from 103rd Ave SE onto S. Lake Stevens Road. V-2 was traveling eastbound on S. Lake Stevens Road approaching 103rd Ave SE. The driver of V-1 stated he looked, but did not see V-2 approaching the intersection, so he proceeded into the intersection to make the left turn. V-2 had the right of way at the intersection, as there was no stop or yield sign for her. The driver of V-2 was unable to stop and collided with V-1. This caused reportable damage to both vehicles. The witness was driving a vehicle and had stopped on S. Lake Stevens Road to turn left onto southbound 103rd Ave SE, but was waiting to turn until V-2 passed. No injuries were reported at the scene, but the mother of the driver of V-1 took him to the clinic to get him checked out, as he stated his back and neck was sore. V-1 was inoperable and was towed from the scene by an unknown tow company at the owner's request.

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)

J. BARNES INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET **11-06-15 12:31 PM** DATED PLACE SIGNED

APPROVED BY **ROBERT MINER 0095** DATE **11/10/2015 5:14:33 AM**

BADGE OR ID # **0101** ORI # **WA0311900** TIME POLICE DISPATCHED **6:04 AM** TIME POLICE ARRIVED **6:14 AM**



**SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT**



013197

REPORT NO. E480366

CASE # 2015-00200353

COMMERCIAL MOTOR CARRIER

INTERSTATE INTRASTATE

UNIT # 2 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 _____

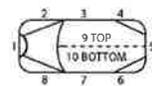
VEH. YEAR _____ MAKE _____ MODEL _____ STYLE _____ VEHICLE TOWED YES NO TOWED BY _____ GOVT. VEHICLE YES NO

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # _____

VEHICLE LEGALLY STANDING YES NO CITATION # _____ CHARGE _____

SHADE IN DAMAGED AREA



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 _____

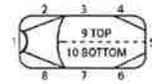
VEH. YEAR _____ MAKE _____ MODEL _____ STYLE _____ VEHICLE TOWED YES NO TOWED BY _____ GOVT. VEHICLE YES NO

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # _____

VEHICLE LEGALLY STANDING YES NO CITATION # _____ CHARGE _____

SHADE IN DAMAGED AREA



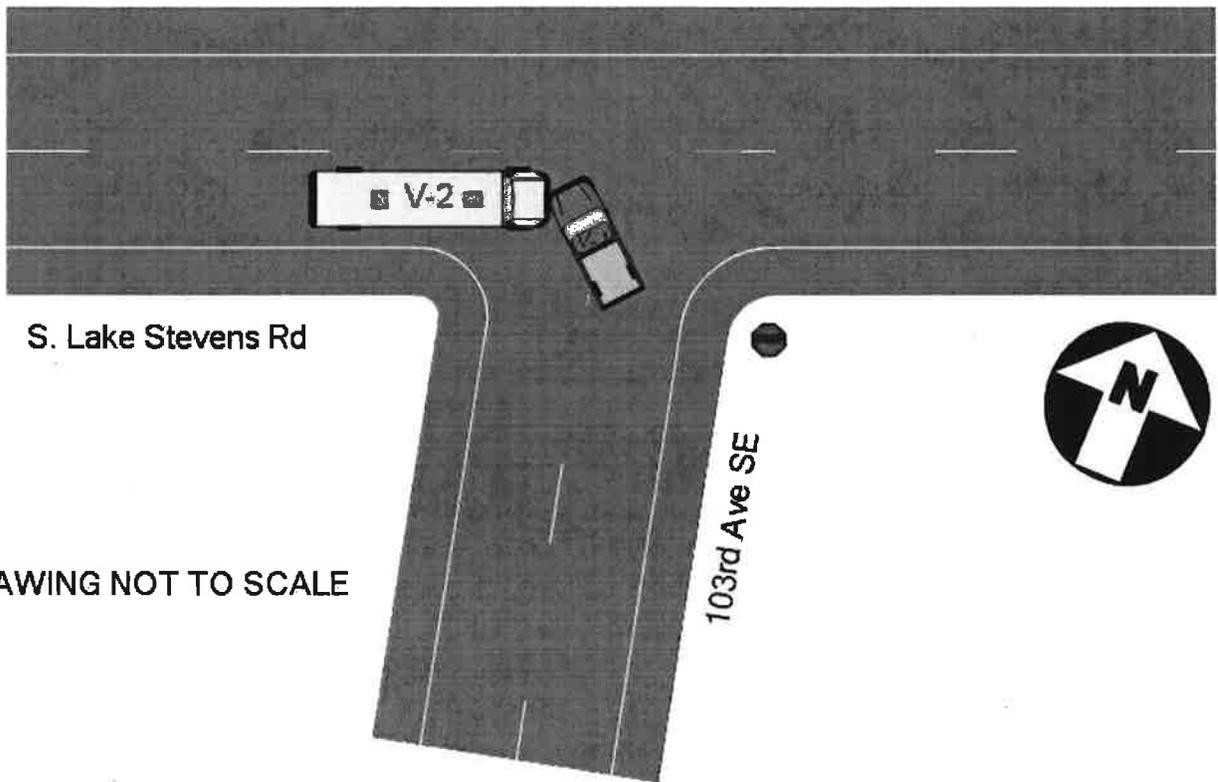
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

J. BARNES

11-06-15 12:31 PM

INVESTIGATING OFFICER'S SIGNATURE _____ UNIT OR DIST DET _____ DATED: _____ PLACE SIGNED _____

BADGE OR ID # **0101** ORI # **WA0311900** APPROVED BY **MINER** DATE **11/10/201** PAGE **3** OF **4**



S. Lake Stevens Rd

103rd Ave SE

DRAWING NOT TO SCALE

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 2015-0206

VICTIM / WITNESS

| | | | | | | | | | | |
|---|--|--|-----|---------------------|-----------------------|---------------------|----------------------|-------------------|--------------------|--------------------|
| NON-DISC <input type="checkbox"/> | NAME (LAST, FIRST MIDDLE) <u>Thompson, Jeremy William</u> | RACE <u>W</u> | ETH | SEX <u>M</u> | DOB <u>9/25/97</u> | AGE <u>18</u> | HGT <u>5-10.5</u> | WGT <u>165</u> | HAIR <u>BLK</u> | EYES <u>BLU</u> |
| STREET ADDRESS <u>10829 35th St SE</u> | | CITY <u>Lake Stevens</u> | | STATE <u>WA</u> | | ZIP <u>98250</u> | | RES. STATUS | | |
| HOME PHONE <u>425-512-0502</u> | | CELL PHONE <u>425-31-0044</u> | | PLACE OF EMPLOYMENT | | | | | | |
| WORK PHONE | | EMAIL ADDRESS <u>JeremyThompson1997@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 Jeremy Thompson proceeded to take a left turn after stopping @ a stop sign near the lake Stevens Grange. I then looked both ways to check for oncoming traffic and then committed to taking a left turn. However when taking the left I did not see the oncoming vehicle which I previously looked and then collided with a bus.

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>Jeremy Thompson</u> | DATE SIGNED <u>11/2/15</u> | LOCATION SIGNED <u>163 rd south lake Stevens</u> |
| OFFICER/NUMBER: <u>[Signature] 101</u> | DATE SIGNED <u>11/2/15</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"
PAGE 1 OF 1

VICTIM/WITNESS STATEMENT

CASE NUMBER 2015-0200353



VICTIM / WITNESS

| | | | | | | | | | | |
|---|--|--|-----|--------------------|---------------------------------------|---------------------|-------------------|-------------------|--------------------|--------------------|
| NON-DISC <input type="checkbox"/> | NAME (LAST, FIRST MIDDLE) <u>BRETT KELLEY</u> | RACE <u>W</u> | ETH | SEX <u>M</u> | DOB <u>11/29/83</u> | AGE <u>31</u> | HGT <u>5-8</u> | WGT <u>150</u> | HAIR <u>BRN</u> | EYES <u>BLU</u> |
| STREET ADDRESS <u>720 150TH AVE N.E.</u> | | CITY <u>SNATONMISH</u> | | STATE <u>WA</u> | | ZIP <u>98290</u> | | RES. STATUS | | |
| HOME PHONE <u>N/A</u> | | CELL PHONE <u>425 330 9359</u> | | | PLACE OF EMPLOYMENT <u>POOLING</u> | | | | | |
| WORK PHONE <u>N/A</u> | | EMAIL ADDRESS <u>MKELLES0@COMCAST.NET</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.

STOPPED TO TURN LEFT ON 103RD ST. WHEN I NOTICED A SCHOOL BUS COMING TOWARDS ME, SO I STOPPED TO WAIT FOR BUS TO PASS BY, WHEN A TRUCK STOPPED AT CORNER OF 103RD, DECIDED TO PULL OUT, TURNING LEFT, STOPPED AGAIN, THEN PULLED OUT IN FRONT OF BUS A SLOW PACE AND THE BUS COULDN'T STOP, HITTING THE TRUCK

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>Brett Kelley</u> | DATE SIGNED <u>11-2-15</u> | LOCATION SIGNED |
| OFFICER/NUMBER: <u>[Signature] 901</u> | DATE SIGNED <u>11-2-15</u> | LOCATION SIGNED <u>LAKE STEVENS</u> |

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REVISED 4/2009

LAKE STEVENS POLICE DEPARTMENT

FOLLOW-UP / ROUTING SHEET

CASE NUMBER 15-200353

| | | |
|---|---------|------|
| MUST HAVE CITATION NUMBER OR SUSPECT INFO IF FORWARDING TO PROSECUTOR, COURT OR INVESTIGATIONS. | | DATE |
| CITATION # | SUSPECT | DOB |
| CITATION # | SUSPECT | DOB |
| CITATION # | SUSPECT | DOB |

OFFICER / DETECTIVE REQUEST

| | | |
|---|--|---|
| <input checked="" type="checkbox"/> ADD DOCUMENTS TO ORIGINAL FILE | <input type="checkbox"/> NO FURTHER ACTION REQUIRED | |
| <input type="checkbox"/> ADDITIONAL STOLEN OR RECOVERED PROPERTY SHEETS ATTACHED FOR DATA ENTRY | | |
| <input type="checkbox"/> FORWARD FOLLOW-UP (COURT HAS OPEN FILE ON CASE) | <input type="checkbox"/> FORWARD COMPLETED COPY OF CASE | |
| <input type="checkbox"/> MARYSVILLE COURT | <input type="checkbox"/> SNO CO FELONY DIVISION | <input type="checkbox"/> WACIC / NCIC ENTRY RECORDS |
| <input type="checkbox"/> CITY PROSECUTOR | <input type="checkbox"/> JUVENILE COURT | <input type="checkbox"/> WASH STATE LIQUOR CONTROL |
| <input type="checkbox"/> REVIEW FOR CHARGES | <input type="checkbox"/> CPS/DSHS <input type="checkbox"/> EVERETT <input type="checkbox"/> SKY VALLEY | <input type="checkbox"/> OTHER: |
| DATE SENT: | BY: | |

| | |
|--|-----|
| <input type="checkbox"/> FORWARD ORIGINAL FILE WITH THE FOLLOW-UP TO COURT | |
| <input type="checkbox"/> CITATION JUVENILE REFERRAL ATTACHED | |
| <input type="checkbox"/> SUBJECT REFERRED FOR FELONY CHARGING | |
| DATE SENT: | BY: |

| | | |
|---|------------------|----------|
| <input type="checkbox"/> PROSECUTOR FOLLOW-UP RESPONSE (ATTACH PROSECUTOR REQUEST FORM) | | |
| <input type="checkbox"/> INVESTIGATIONS | OFFICER ASSIGNED | DUE DATE |

CASE CLOSED

| | |
|--|--|
| <input type="checkbox"/> UNFOUNDED | <input type="checkbox"/> ARREST MADE SENT TO COURT |
| <input type="checkbox"/> LACK OF INVESTIGATIVE LEADS | <input type="checkbox"/> VICTIM REQUEST |

| | |
|-------------------------------|---------------------|
| OFFICER / INVESTIGATOR | DATE SIGNED |
| SERGEANT APPROVAL <i>W #1</i> | DATE SIGNED 11/6/15 |

| | | | |
|--------------------|---|-----------------------------------|----------------------------------|
| RECORDS DATA ENTRY | ADDITIONAL PERSONS <input type="checkbox"/> | PROPERTY <input type="checkbox"/> | ARRESTS <input type="checkbox"/> |
| RECORDS: | DATE: | | |

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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 2015-02008

VICTIM / WITNESS

| | | | | | | | | | | |
|--|---|--|-----|-----------------|-----------------------------------|---------------------|---------------------|-------------------|--------------------|--------------------|
| NON-DISC <input type="checkbox"/> | NAME (LAST, FIRST MIDDLE) <u>Thompson, Justin Hunter</u> | RACE | ETH | SEX <u>M</u> | DOB <u>11/16/1999</u> | AGE <u>15</u> | HGT <u>5'11"</u> | WGT <u>120</u> | HAIR <u>BRN</u> | EYES <u>BLU</u> |
| STREET ADDRESS <u>10829 35th St SE Lake Stevens, WA</u> | | CITY <u>Lake Stevens</u> | | | STATE <u>WA</u> | ZIP <u>98258</u> | RES. STATUS | | | |
| HOME PHONE <u>425-512-0502</u> | | CELL PHONE <u>425-249-8655</u> | | | PLACE OF EMPLOYMENT <u>N/A</u> | | | | | |
| WORK PHONE <u>N/A</u> | | EMAIL ADDRESS <u>Thompsonj4boys@comcast.net</u> | | | | | | | | |

I, Justin Thompson, 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.

My brother and I were turning left on to south lake stevens rd from 103 AV SE. He looked left didn't see the bus, then looked right. we pulled out then collide)

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>Justin Thompson</u> | DATE SIGNED <u>NOV. 24 2015</u> | LOCATION SIGNED <u>103 AV SE / SR Stevens RD</u> |
| OFFICER/NUMBER: <u>JRH / 101</u> | DATE SIGNED <u>11/2/15</u> | LOCATION SIGNED <u>LC STEVENS</u> |

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REVISED 4/2009

15302JTIView

11/02/2015 : 06:04:23 SP0368 Narrative: AGENCY ADVISED

11/02/2015 : 06:03:39 SP0335 Narrative: CAR VS BUS, NO INJS, CAR PULLED OUT IFO BUS,
BRO OR BEIGE TOYT TUNDRA, NON BLKING