



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E489828**

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FROM TO 5 1 33

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INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" 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 # **15-0202237**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

TRIBAL RESERVATION

DATE OF COLLISION **12-03-2015** TIME (2400) **1600** COUNTY # **31** MILES N E S W IN OF **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION

SR 9 BLOCK NO. **2900** MILE POST

DISTANCE **100.00** MILES N E S W OF (REFERENCE OR CROSS STREET) **SOPER HILL RD**

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

LAST NAME **CHANG** FIRST NAME **JJ** MIDDLE INITIAL **H**

STREET NEW ADDRESS **7811 64TH PL NE**

CITY **MARYSVILLE** ST **WA** ZIP **982706596**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **CHANGJH146QF** STATE **WA** SEX **M** D.O.B. **11-06-1986**

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

LICENSE PLATE # **AUU2802** STATE **WA** VIN# **YV1RS61R612074931**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2001** MAKE **VOLV** MODEL **S60** STYLE **4D** VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **VANESSA NAPEAHI 7811 64TH PL NE MARYSVILLE WA 98271**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **21 CENTURY INS 2202 72 35**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



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

LAST NAME **WOODS** FIRST NAME **KELLEY** MIDDLE INITIAL **D**

STREET NEW ADDRESS **319 128TH ST SE UNIT P228**

CITY **EVERETT** ST **WA** ZIP **982086357**

ODL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **WOODSKD050CK** STATE **WA** SEX **F** D.O.B. **02-12-1995**

ON DUTY STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **7** NATURE OF INJURIES **NECK PAIN**

LICENSE PLATE # **ABA7770** STATE **WA** VIN# **KMHND45D43U654515**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2003** MAKE **HYUN** MODEL **ELA4D** STYLE **4D** VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **KELLEY WOODS 9312 16TH PL NE LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **PROGRESSIVE 70876557**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



OFFICER'S NAME (PRINT) **W. AUKERMAN** BADGE OR ID # **0072** AGENCY **WA0311900**



1591972

CORRECTION

REPORT NO.

E489828

CASE #

15-0202237

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

On 12/03/2015 at about 1600 hours (all times approximate) I was dispatched by police radio to a two vehicle collision (non-injury/non-blocking) just north of Soper Hill Road on SR 9 NE in the city of Lake Stevens.

Arriving on scene I spoke with both drivers involved. At the time of the collision one driver stated she was having neck pain from the rear end collision.

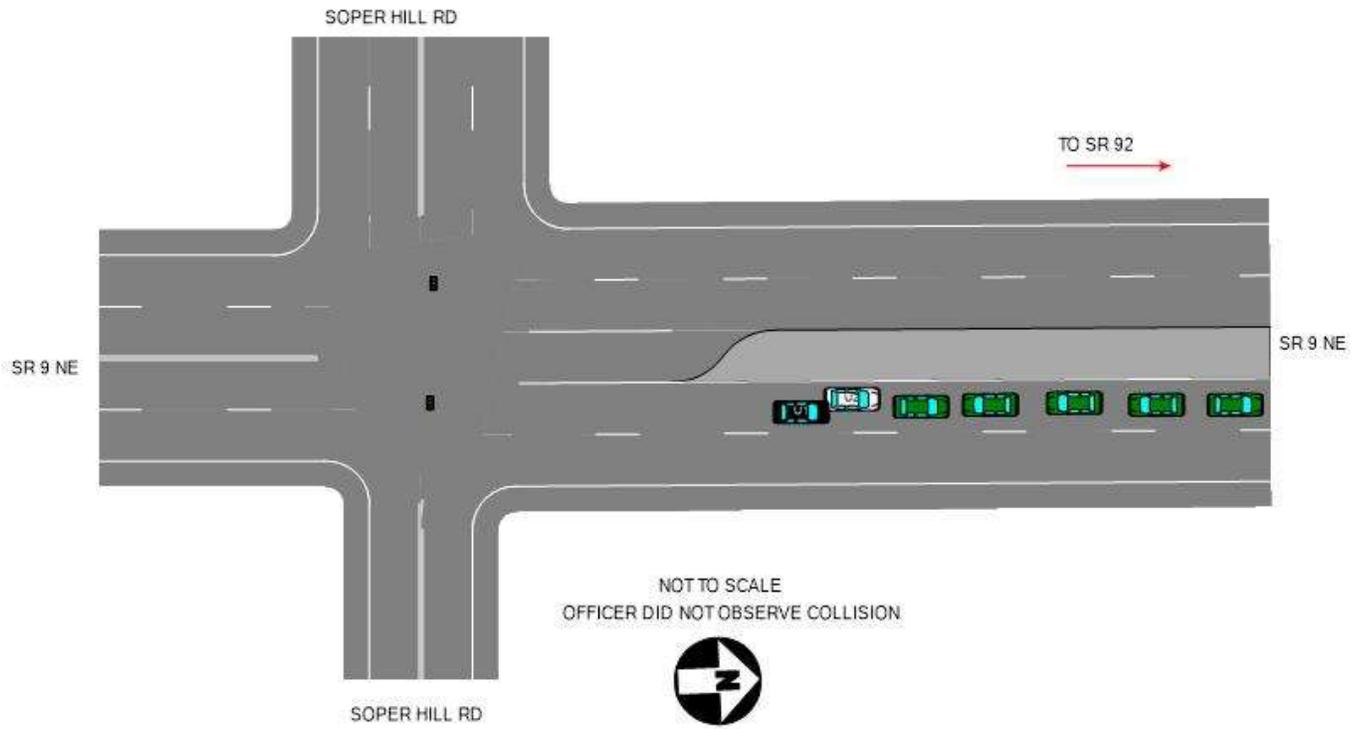
Based on evidence and statements made at the scene it is found both units U1 and U2 were traveling northbound on SR 9 NE in the inside lane of travel. At this location SR 9 has two northbound lanes; the outside lane is a right turn only lane at the intersection of SR 92. Traffic was heavy and the inside lane of travel was backing up with vehicle traffic due to the traffic light at SR 92. U2 was slowing for backed up vehicle traffic when U1 observed vehicle traffic ahead slowing/stopping and was unable to stop before rear ending U2.

Both driver's completed statements about the collision. Digital images of the collision vehicles and scene were taken which were later printed and saved to a CD-R.

Both vehicles sustained reportable damage and both vehicles drove 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)

W. AUKERMAN			12-04-15 06:41 AM		
INVESTIGATING OFFICER'S SIGNATURE			UNIT OR DIST. DET		PLACE SIGNED
APPROVED BY ROBERT MINER 0095				DATE 12/5/2015 2:46:05 AM	
BADGE OR ID #	0072	ORI #	WA0311900	TIME POLICE DISPATCHED	4:00 PM
			TIME POLICE ARRIVED	4:01 PM	



EXCHANGE OF INFORMATION

OFFICER NAME: *W. AUKERMAN #0072*
AGENCY: *LAKE STEVENS PD*

COLLISION: *12/03/15 04:00 PM*
DISPATCH: *12/03/15 04:00 PM*
ARRIVAL: *12/03/15 04:01 PM*

CASE#: *15-0202237*
LOCATION: *SR 9 BN:2900*
AT SOPER HILL RD

NARRATIVE/NOTES:

UNIT 1: <i>MOTOR VEHICLE -</i>	2001 S60 PLATE: AUU2802 (WA)	TOWED BY:
DRIVER: <i>JIH CHANG</i>		VEH OWNER: <i>VANESSA N NAPEAHI</i>
ADDRESS: <i>7811 64TH PL NE</i> <i>MARYSVILLE, WA 982706596</i>		ADDRESS: <i>7811 64TH PL NE</i> <i>MARYSVILLE, WA 98271</i>
DL #: <i>CHANGJH146QF</i>	STATE: <i>WA</i>	
PHONE:		PHONE:
ALT PHONE:		ALT PHONE:
INSURED BY: <i>21 CENTURY INS</i>		INSURED BY:
POLICY #: <i>2202 72 35</i>		POLICY #:
<hr/>		
UNIT 2: <i>MOTOR VEHICLE -</i>	2003 ELA4D PLATE: ABA7770 (WA)	TOWED BY:
DRIVER: <i>KELLEY D WOODS</i>		VEH OWNER: <i>KELLEY D WOODS</i>
ADDRESS: <i>319 128TH ST SE UNIT P228</i> <i>EVERETT, WA 982086357</i>		ADDRESS: <i>9312 16TH PL NE</i> <i>LAKE STEVENS, WA 98258</i>
DL #: <i>WOODSKD050CK</i>	STATE: <i>WA</i>	
PHONE:		PHONE:
ALT PHONE:		ALT PHONE:
INSURED BY:		INSURED BY: <i>PROGRESSIVE</i>
POLICY #:		POLICY #: <i>70876557</i>



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER _____

VICTIM WITNESS

NON-DISCLOSURE

NAME (LAST, FIRST, MIDDLE) Chang, Jihoon		RACE	ETHNICITY	SEX M	D.O.B. 11/6/86	AGE 29	HGT 5'10"	WGT 236	HAIR blk	EYES brn
STREET ADDRESS 7811 64th PL NE				CITY Marysville			STATE WA	ZIP 98270		
HOME PHONE 808-797-5948		CELL PHONE 808-797-5948			WORK PHONE N/A					
EMAIL ADDRESS (OPTIONAL) myemailisjihoon@gmail.com					PLACE OF EMPLOYMENT T-Mobile					

STATEMENT:

I was driving towards Marysville on highway 9 from Lake Stevens, and all of a sudden cars in front of me stopped. I slammed on my brakes and tried to swing right but steering wheel locked up, and hit the right rear corner of another car.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT	
SIGNATURE: 	DATE SIGNED: 12-3-15
OFFICER/NUMBER:	DATE SIGNED:

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER _____

VICTIM WITNESS

NON-DISCLOSURE

NAME (LAST, FIRST, MIDDLE) Woods, Kelley Dawn Woods, Kelley Dawn	RACE White	ETHNICITY	SEX F	D.O.B. 2/12/1985	AGE 20	HGT 5 7	WGT 195	HAIR Red	EYES Blue
STREET ADDRESS 9312 16th PL NE			CITY Lake Stevens		STATE WA	ZIP 98258			
HOME PHONE	CELL PHONE 425 / 2031 5180		WORK PHONE						
EMAIL ADDRESS (OPTIONAL)			PLACE OF EMPLOYMENT Tully's Coffee						

STATEMENT:

~~Driving~~
I was driving down highway 9 towards Arlington. Line of cars were stopping for a red light. I ~~was~~ was coming to a stop when I glanced into my rearview mirror and was rear ended by a silver Volvo. My head slammed forward upon impact.

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

SIGNATURE:

DATE SIGNED:

OFFICER/NUMBER:

DATE SIGNED:

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"