Incident Report

Print Date/Time: 02/04/2016 10:04
Login ID: ss0139

Lake Stevens Police Department
ORI Number: WA0311900

Incident: **2016-00001921**

Incident Date/Time:	1/30/2016 3:47:11 PM	**Incident Type:**	Collision
Location:	SR 9 NE / SR 204 LAKE STEVENS WA 98258	**Venue:**	Lake Stevens
Phone Number:	(425) 308-6457	**Source:**	911
Report Required:	No	**Priority:**	3
Prior Hazards:	No	**Status:**	3
LE Case Number:		**Nature of Call:**	

Unit/Personnel

Unit	Personnel
19D4	SS0138-Fiske

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	HAPLEY, CHRISTINE		(425) 308-6457			

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State

Disposition(s)

Disposition	Count
R	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.

CAD Narrative

01/30/2016 : 15:53:04 SP0407 Narrative: AA, 43S
01/30/2016 : 15:49:07 SP0348 Narrative: CC, NON INJ NON BLKING, HONDA ACCORD VS SVU, PULLED INTO PK LOT OF BISTRO

STATE OF WASHINGTON
POLICE TRAFFIC COLLISION REPORT

1591971

REPORT NO. E511548

CASE #	2016-00001921
LOCAL AGENCY CODING	00311900
TOTAL # OF UNITS	02
OBJECT STRUCK	

1 INTERSTATE ☐ CITY STREET ☑ | FIRE RESULTED ☐
STATE ROUTE ☐ OTHER ☐ | STOLEN VEHICLE ☐
COUNTY RD ☐ PRIVATE WAY ☐ | HIT & RUN INVOLVED ☐

2 TRIBAL RESERVATION

3 DATE OF COLLISION (M M - D D - Y Y Y Y): 01 - 30 - 2016 | TIME (2400): 1549 | COUNTY #: 31 | MILES: . | N ☐ S ☐ E ☐ W ☐ | IN OF ☑ | CITY #: 0664

4 ON (PRIMARY TRAFFIC WAY): FRONTAGE RD | INTERSECTION ☐ NON-INTERSECTION ☑

4a BLOCK NO. ☑ MILE POST ☐: 700 .

5 DISTANCE: 60 . 00 | MILES ☐ FEET ☑ | N ☐ S ☐ E ☑ W ☐ | OF (REFERENCE OR CROSS STREET): SR9

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ | DAMAGE THRESHOLD MET YES ☑ NO ☐ | PHONE: D: 4257839961

6 LAST NAME: PETHERAM | FIRST NAME: ROBIN | MIDDLE INITIAL: R

STREET NEW ADDRESS ☐: 2310 CEDAR RD

7 CITY: LAKE STEVENS | ST: WA | ZIP: 982589147

8 CDL: | RESTRICTIONS: B | ENDORSEMENTS:

9 DRIVER'S LICENSE #: PETHERR472QN | STATE: WA | SEX: F | D.O.B. MMDDYYYY: 11 - 15 - 1953

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

11 LICENSE PLATE #: 993VZV | STATE: WA | VIN#: 1GKDT13WXV2545217

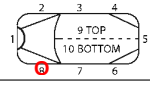
12 TRAILER PLATE #: | STATE: | TRAILER PLATE #: | STATE:

13 VEH. YEAR: 1997 | MAKE: GMC | MODEL: JIMMY | STYLE: | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY: | GOVT. VEHICLE YES ☐ NO ☑

14 REGISTERED OWNER INFO.: ROBIN PETHERAM 2310 CEDAR RD LAKE STEVENS WA 98258

15 LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY #: ALLSTATE 1GKDT13WXV2545217

VEHICLE LEGALLY STANDING YES ☐ NO ☐ | CITATION #: 6Z0247215 | CHARGE: FAIL TO YIELD THE RIGHT OF WAY

VEHICLE NO. 1
SHADE IN DAMAGED AREA


UNIT 02

16 MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ | DAMAGE THRESHOLD MET YES ☑ NO ☐ | PHONE: D: 4253086457

LAST NAME: HADLEY | FIRST NAME: CHRISTINE | MIDDLE INITIAL: M

17 STREET NEW ADDRESS ☐: 907 CLEVELAND AVE

18 CITY: SNOHOMISH | ST: WA | ZIP: 982902269

19 CDL: | RESTRICTIONS: | ENDORSEMENTS:

20 DRIVER'S LICENSE #: HADLECM172DW | STATE: WA | SEX: F | D.O.B. MMDDYYYY: 03 - 16 - 1983

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

22 LICENSE PLATE #: ASW2661 | STATE: WA | VIN#: 1HGCM56707A813346

23 TRAILER PLATE #: | STATE: | TRAILER PLATE #: | STATE:

24 VEH. YEAR: 2007 | MAKE: HOND | MODEL: ACCORD | STYLE: 4D | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY: | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO.: CHRISTINE HADLEY 907 CLEVELAND AVE SNOHOMISH WA 98290

LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY #: FIRST NATIONAL H2186361

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

VEHICLE NO. 2
SHADE IN DAMAGED AREA

25 OFFICER'S NAME (PRINT): B. FISKE #0138 | BADGE OR ID #: 0138 | AGENCY: WA0311900

26

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

PAGE 01 OF 3

1	5	1	27
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION | REPORT NO. E511548

CASE # 2016-00001921

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)	HADLEY TREVOR M
ADDRESS & PHONE #	515 112TH ST SE UNIT B6 EVERETT WA 982085014 4257374206
SEX	M
D.O.B. MMDDYYYY	03 - 19 - 1983

PASSENGER	WITNESS	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
☑	☐	2	3	2	9	1	2	1	

NAME (LAST, FIRST, MIDDLE INITIAL)	HADLEY ROSALI M
ADDRESS & PHONE #	907 CLEVELAND AVE SNOHOMISH WA 98490
SEX	F
D.O.B. MMDDYYYY	05 - 05 - 2007

PASSENGER	WITNESS	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
☑	☐	2	9	2	8	1	2	7	SORENESS

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
☐	☐								

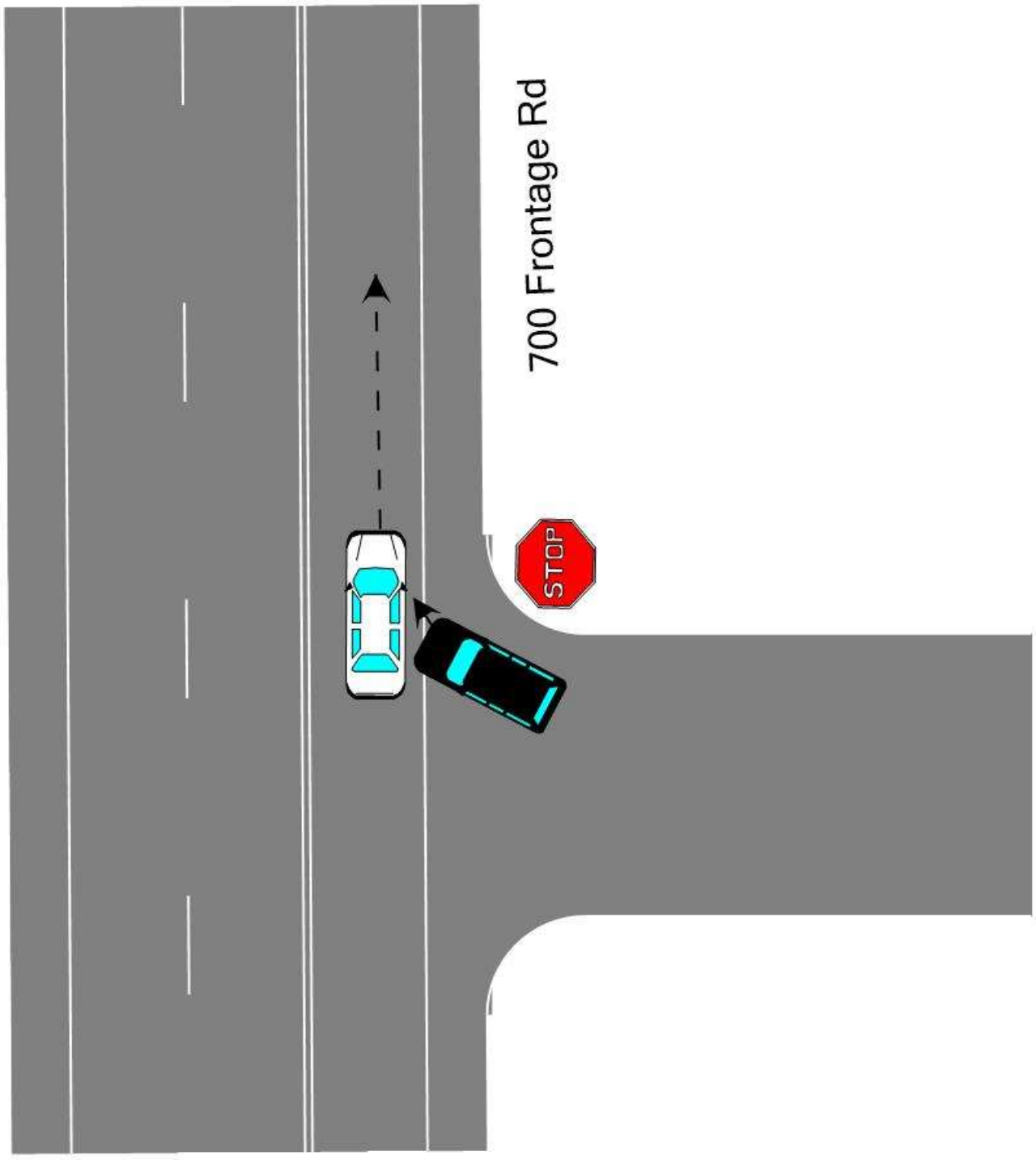
NARRATIVE

V1 was turning right from the parking lot at Safeway onto Frontage Rd. V2 was traveling norhtbound on Frontage Rd. V1 struck the right rear end of V2. Driver of V1 was issued an NOI for failing to yield.

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)

B. FISKE #0138		02-01-16 09:42 AM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
ROBERT MINER 0095	2/1/2016 5:39:39 PM

BADGE OR ID #	0138	ORI #	WA0311900	TIME POLICE DISPATCHED	3:49 PM	TIME POLICE ARRIVED	3:53 PM

REPORT NO. E511548 **CASE #** 2016-00001921 **DATE AND TIME OF COLLISION** 01/30/16 15:49