



# Incident Report

**Print Date/Time:** 04/19/2016 10:01  
**Login ID:** ss0139

Lake Stevens Police Department  
**ORI Number:** WA0311900

**Incident:** 2016-00006885

**Incident Date/Time:** 4/12/2016 5:33:26 AM  
**Location:** 7900 SR 204  
LAKE STEVENS WA 98258  
**Phone Number:** (425) 280-3172  
**Report Required:** No  
**Prior Hazards:** No  
**LE Case Number:**

**Incident Type:** Collision  
**Venue:** Lake Stevens  
**Source:** 911  
**Priority:** 3  
**Status:** 3  
**Nature of Call:**

## Unit/Personnel

Unit	Personnel
19N1	SS0072-Aukerman
19N2	SS0132-Kilroy
19S11	SS0071-Valvick

## Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	ROBLES, FROY					

## Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle						C76662D	

## Disposition(s)

Disposition	Count
R	1

## Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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# CAD Narrative

04/12/2016 : 06:08:40 SP0120 Narrative: TOW ON SCENE

04/12/2016 : 05:51:02 SP0120 Narrative: SVR Notes: FLATBED, TOP NOTCH TOW ENRT

04/12/2016 : 05:48:10 SP0120 Narrative: SVR Notes: REQ FLAT BED , SKY VALLEY FLATBED NOT AVL FOR 45 MIN

04/12/2016 : 05:45:27 SP0243 Narrative: 19N2/FLATBED

04/12/2016 : 05:40:08 SP0326 Narrative: LINKED CALL 531

04/12/2016 : 05:35:58 SP0375 Narrative: LR375

04/12/2016 : 05:35:19 SP0375 Narrative: AC, NOW, NON BLKING, NON INJ, SMALL TRUCK V FULL SIZE TRUCK, ON SR 204  
APPROX 1 MILE WO SR 9 NE



STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT



1591971

REPORT NO. E534997

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INTERSTATE  CITY STREET   
STATE ROUTE  OTHER   
COUNTY RD  PRIVATE WAY

FIRE RESULTED   
STOLEN VEHICLE   
HIT & RUN INVOLVED

CASE # 2016-6885

LOCAL AGENCY CODING

TOTAL # OF UNITS 03 OBJECT STRUCK GUARDRAIL

TRIBAL RESERVATION

DATE OF COLLISION 04 - 12 - 2016 TIME (2400) 0533 COUNTY # 31 MILES N  E  IN  S  W  OF CITY # 0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION  NON-INTERSECTION   
SR 204 BLOCK NO.  7900 MILE POST

DISTANCE 300 00 MILES  N  E  S  W OF (REFERENCE OR CROSS STREET) 81ST AVE SE

UNIT 01 MOTOR VEHICLE  PEDAL-CYCLE  DAMAGE THRESHOLD MET YES  NO  PHONE D: 4252996733

LAST NAME BUCHHOLZ FIRST NAME ALDEN MIDDLE INITIAL M

STREET NEW ADDRESS 6618 ROBE MENZEL RD

CITY GRANITE FALLS ST WA ZIP 982529749

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # BUCHHAM178K0 STATE WA SEX M D.O.B. MMDDYYYY 05 - 20 - 1983

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

LICENSE PLATE # C76662D STATE WA VIN# JT4RN93P2M5038473

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 1991 MAKE TOYT MODEL SR5 PK STYLE PK VEHICLE TOWED YES  NO  TOWED BY TOP NOTCH TOWING GOVT. VEHICLE YES  NO

REGISTERED OWNER INFO. ALDEN BUCHHOLZ 6618 ROBE MENZEL RD GRANITE FALLS WA 982529749

LIABILITY INSURANCE IN EFFECT  INSURANCE CO & POLICY # OMNI INSURANCE 5626128

VEHICLE LEGALLY STANDING YES  NO  CITATION # CHARGE



UNIT 02 MOTOR VEHICLE  PEDAL-CYCLE  PEDESTRIAN  PROPERTY OWNER  DAMAGE THRESHOLD MET YES  NO  PHONE D: 4252746184

LAST NAME RUSSELL FIRST NAME CLINTON MIDDLE INITIAL W

STREET NEW ADDRESS 11621 33RD CT NE

CITY LAKE STEVENS ST WA ZIP 98258

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # RUSSECW408P6 STATE WA SEX U D.O.B. MMDDYYYY 10 - 26 - 1960

ON DUTY  STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY CLASS 7 NATURE OF INJURIES NECK AND BACK

LICENSE PLATE # C43022C STATE WA VIN# 1D7HU18N26J232833

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2006 MAKE DODG MODEL RAMPU STYLE CW VEHICLE TOWED YES  NO  TOWED BY GOVT. VEHICLE YES  NO

REGISTERED OWNER INFO. CLINTON RUSSELL 11621 33RD CT NE LAKE STEVENS WA 98258 D: 4252746184

LIABILITY INSURANCE IN EFFECT  INSURANCE CO & POLICY # ALLSTATE A02-268-160854-40 5 2

VEHICLE LEGALLY STANDING YES  NO  CITATION # CHARGE OFFICER'S NAME (PRINT) J. KILROY #0132 BADGE OR ID # #0132 AGENCY WA0311900





STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E534997**

CASE # **2016-6885**

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 1 was driving east SR 204 near the 8100 block. Unit 2 was driving west on SR 204 near the 8100 block. Unit 1 lost control and struck the guardrail on the south side of the road. Unit 1 then went into the westbound lane and struck unit 2. Unit 1 came to rest on the north side of the road damaging the guardrail.

Unit 1 was at fault due to the driver falling asleep and losing control. This comes directly from his written statement.

Unit 1 was towed from the scene and unit 2 was 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)

<b>J. KILROY #0132</b>				<b>04-18-16 03:57 AM</b>			
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET		DATED		PLACE SIGNED	
APPROVED BY <b>SGT. C. VALVICK 0071</b>				DATE <b>4/18/2016 9:37:55 AM</b>			
BADGE OR ID #	<b>#0132</b>	ORI #	<b>WA0311900</b>	TIME POLICE DISPATCHED	<b>5:35 AM</b>	TIME POLICE ARRIVED	<b>5:40 AM</b>



SUPPLEMENTAL POLICE TRAFFIC COLLISION REPORT



013197

REPORT NO. E534997

CASE # 2016-6885

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COMMERCIAL MOTOR CARRIER

UNIT # USDOT IOC # VEHICLE TYPE CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY ST ZIP

NAME SOURCE # AXLES GVWR PLACARD + NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT # 3 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET PHONE D: 2064404000

LAST NAME DEPT OF TRANSPORTATION FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS 15700 DAYTON AVE N

CITY SHORELINE ST WA ZIP 98133

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX U 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 # CITATION # CHARGE

UNIT # MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET 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 # CITATION # CHARGE

UNIT # MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET PHONE

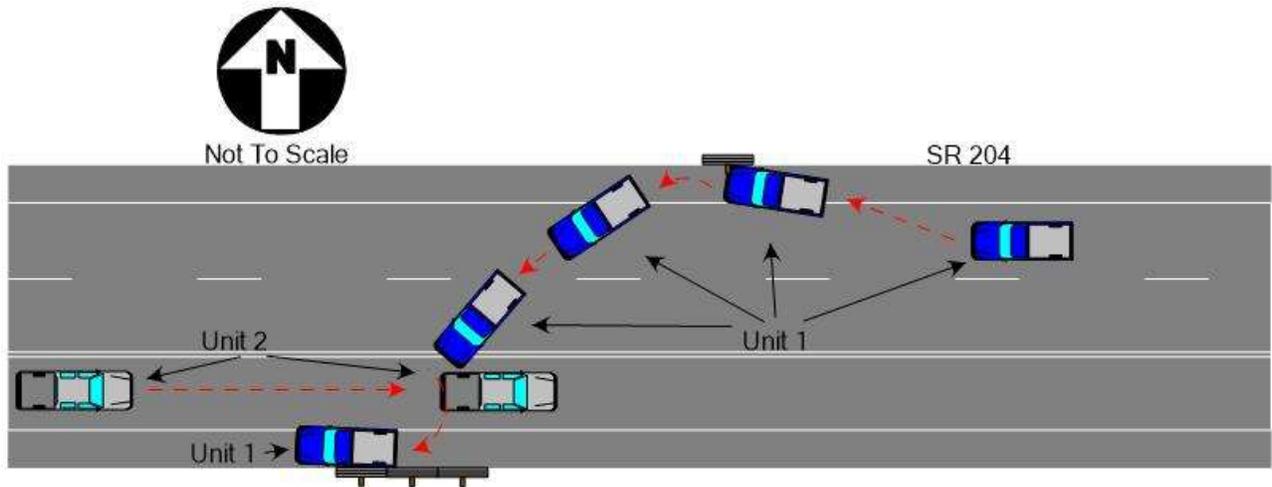
INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST DET DATED: 04-18-16 03:57 AM PLACE SIGNED

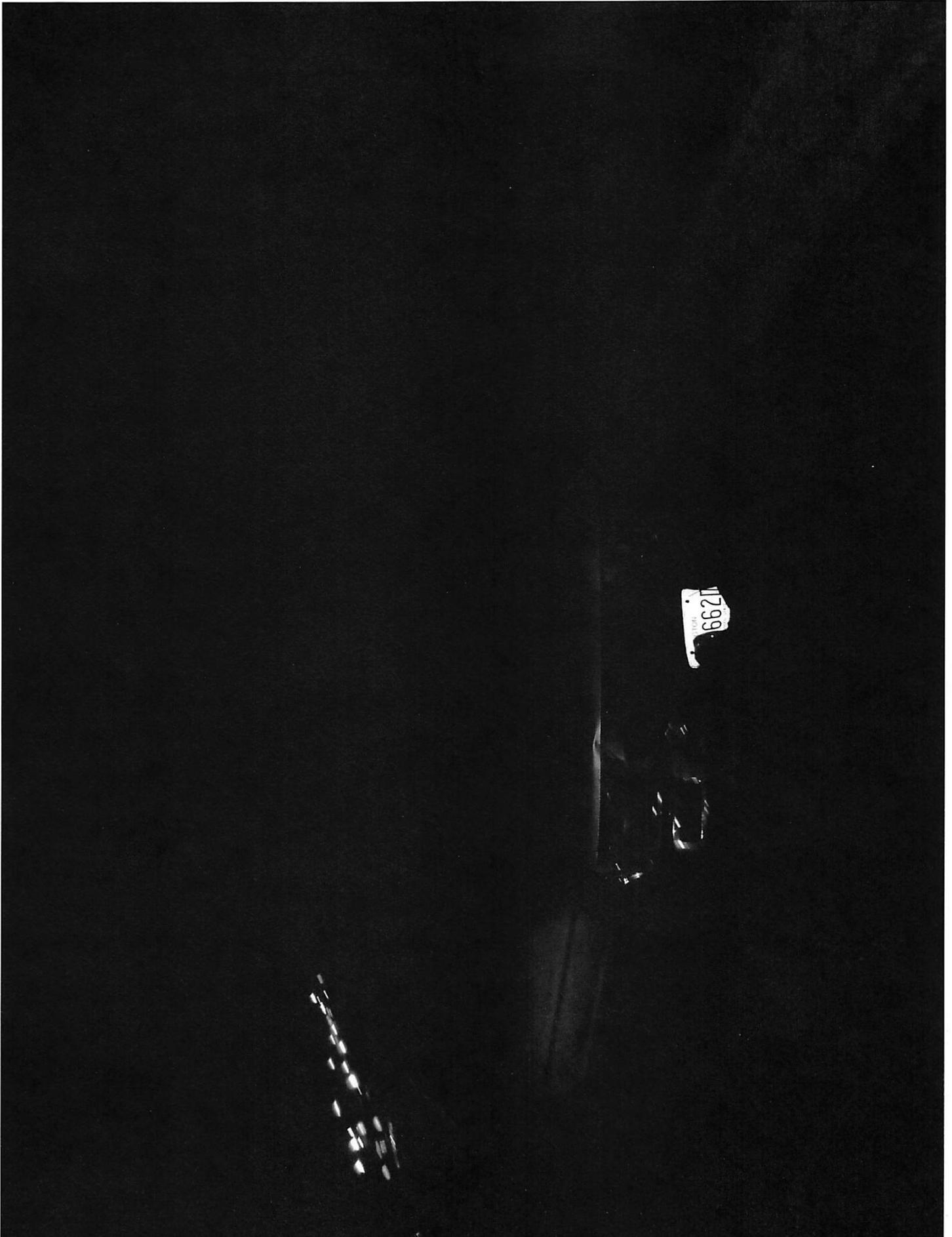
BADGE OR ID # #0132 ORI # WA0311900 APPROVED BY VALVICK DATE 4/18/2016 PAGE 3 OF 4

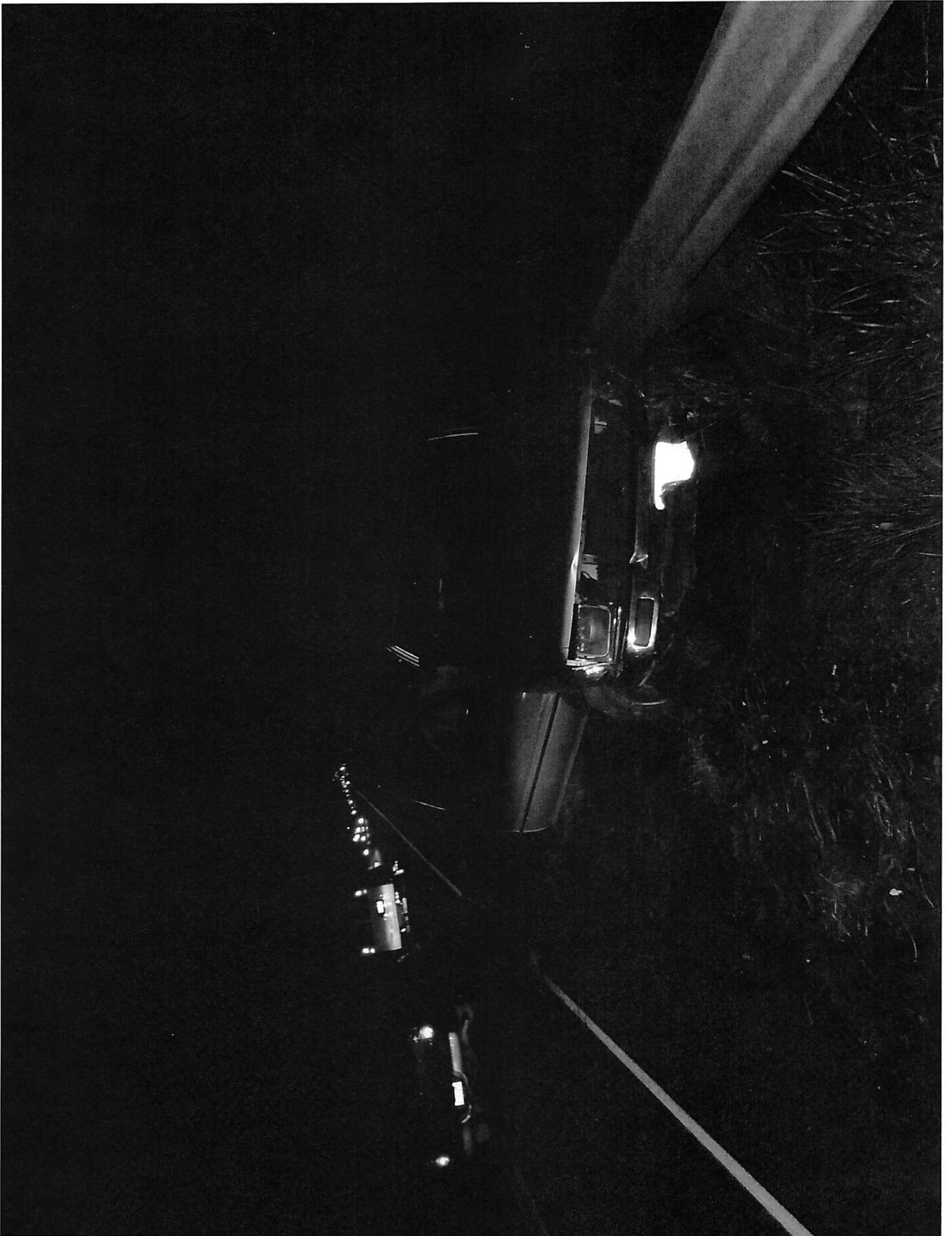
REPORT NO. E534997

CASE # 2016-6885

DATE AND TIME OF COLLISION 04/12/16 05:33















WASHINGTON  
EVERETT  
C76662D  
EVERGREEN STATE









STATEMENT RUSSELL, CLINTON W



**LAKE STEVENS POLICE DEPARTMENT**  
INCIDENT STATEMENT FORM

CASE NUMBER 2016-6885

VICTIM  WITNESS

NON-DISCLOSURE

NAME (LAST, FIRST, MIDDLE) <u>RUSSELL, CLINTON W</u>	RACE <u>W</u>	ETHNICITY	SEX <u>M</u>	D.O.B. <u>10/26/60</u>	AGE <u>55</u>	HGT <u>6-3</u>	WGT <u>290</u>	HAIR <u>BR</u>	EYES <u>BR</u>
STREET ADDRESS <u>11621 33RD G NE</u>			CITY <u>LAKE STEVENS</u>		STATE <u>WA</u>	ZIP <u>98258</u>			
HOME PHONE <u>425-353-8669</u>		CELL PHONE <u>425-274-6184</u>		WORK PHONE <u>425-274-6184</u>					
EMAIL ADDRESS (OPTIONAL)				PLACE OF EMPLOYMENT					

**STATEMENT:**

I WAS DRIVING SOUTH ON RT 204 COMING OUT OF FRONTIER VILLAGE. A SMALL TRUCK COMING UP THE HILL HIT THE GUARD RAIL ON THE OTHER SIDE OF THE RD. HE LOST CONTROL OF HIS VEHICLE AND CAME ACROSS THE CENTERLINE AND HIT MY TRUCK IN THE LEFT REAR QUARTER PANEL. THE OTHER VEHICLE CRASHED INTO THE GUARDRAIL ON MY SIDE OF THE RD AND I PULLED OVER TO THE SHOULDER. THE POLICE WERE CALLED.

THE OTHER SAID HE FELL ASLEEP

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

SIGNATURE: <u>[Signature]</u>	DATE SIGNED: <u>4/12/16</u>
OFFICER/NUMBER: <u>SKIBROY/132</u>	DATE SIGNED: <u>4/12/16</u>

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 2016-6885

VICTIM  WITNESS

NON-DISCLOSURE

NAME (LAST, FIRST, MIDDLE) <u>Buchholz, Alden, Mituter</u>		RACE <u>W</u>	ETHNICITY	SEX <u>M</u>	D.O.B. <u>5-20-83</u>	AGE <u>32</u>	HGT <u>5-10</u>	WGT <u>240</u>	HAIR <u>Brown</u>	EYES <u>Blue</u>
STREET ADDRESS <u>West ROSE MEWZER RD</u>				CITY <u>GRANITE</u>		STATE <u>WA</u>	ZIP <u>98852</u>			
HOME PHONE <u>360-691-2052</u>		CELL PHONE <u>425-299-6133</u>		WORK PHONE						
EMAIL ADDRESS (OPTIONAL)				PLACE OF EMPLOYMENT						

**STATEMENT:**

I WAS DRIVING HOME FROM WORK AND I MUST HAVE BEEN ASLEEP FOR A SECOND AND HIT A GUARD RAIL THAT SENT ME INTO ONCOMING TRAFFIC THE HIT THE GUARD RAIL ON OTHER SIDE OF ROAD ~~AND~~ I MUST HAVE ALSO HIT A TRUCK BUT

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

SIGNATURE: <u>Alden Buchholz</u>	DATE SIGNED: <u>4-18-16</u>
OFFICER/NUMBER: <u>KILROY / 132</u>	DATE SIGNED: <u>4/12/16</u>

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