Incident Report

Print Date/Time: 09/15/2016 08:15
Login ID: ss0100

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2016-00018170

Incident Date/Time:	9/14/2016 7:08:00 AM	**Incident Type:**	Collision
Location:	7500 BLK SR 204 LAKE STEVENS WA 98258	**Venue:**	Lake Stevens
Phone Number:	(206) 930-8692	**Source:**	911
Report Required:	Yes	**Priority:**	3
Prior Hazards:	No	**Status:**	3
LE Case Number:		**Nature of Call:**	

Unit/Personnel

Unit	Personnel
19D1	SS0131-Wells
19D2	SS0136-Shein
19S11	SS0071-Valvick

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	TRINIDAD GUZMAN, ELIGDIO		(206) 930-8692			
1	Driver	MAXWELL, KRISTEN HOPE	1714 88TH AVE NE Lake Stevens WA 982582463	(425) 346-2960	White	Female	10/08/1979
2	Driver	TRINIDAD GUZMAN, EMIGDIO	2427 101ST AVE NE Lake Stevens WA 982588470	(425) 212-8618		Unknown	07/28/1972

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	2001	Ford	Econoline 100		B11751D	WA
Involved Vehicle	Passenger Car	2002	Chevrolet	BLAZR		BAB5048	WA

Disposition(s)

Disposition	Count
R	1

Property

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

CAD Narrative

09/14/2016 : 07:10:21 SP0368 Narrative: AGENCY ADVISED
09/14/2016 : 07:10:08 SP0331 Narrative: LR331
09/14/2016 : 07:09:51 SP0331 Narrative: CC, NON INJ, BLOCKING, WHI FORD PK VS WHI BLAZER, RP SAID ON SR 529, BUT MAPPING IS COF: 5, SHOWS AT LOC

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. **E584583**

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

CASE # **2016-18170**

LOCAL AGENCY CODING **0664**

TRIBAL RESERVATION

TOTAL # OF UNITS **02** OBJECT STRUCK

M M	D D	Y Y Y Y	TIME (2400)	COUNTY #	MILES				CITY #
DATE OF COLLISION **09**	**14**	**2016**	**0708**	**31**		N ☐ S ☐	E ☐ W ☐	IN ☑ OF ☐	**0664**

ON (PRIMARY TRAFFIC WAY) **HWY 204** INTERSECTION ☐ NON-INTERSECTION ☑

BLOCK NO. ☑ MILE POST ☐ **7500**

DISTANCE **1000** MILES ☐ FEET ☑ N ☑ S ☐ E ☐ W ☐ OF (REFERENCE OR CROSS STREET) **10TH ST SE**

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☐ NO ☑ PHONE

LAST NAME	FIRST NAME	MIDDLE INITIAL
MAXWELL	**KRISTEN**	**H**

STREET NEW ADDRESS ☐ **1714 88TH AVE NE**

CITY	ST	ZIP
LAKE STEVENS	**WA**	**982582463**

CDL	RESTRICTIONS	ENDORSEMENTS

DRIVER'S LICENSE #	STATE	SEX	D.O.B. MMDDYYYY
MAXWEKH215PH	**WA**	**F**	**10 - 08 - 1979**

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

LICENSE PLATE #	STATE	VIN#
BAB5048	**WA**	**1GNDT13S322353729**

TRAILER PLATE #	STATE	TRAILER PLATE #	STATE

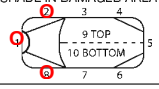
VEH. YEAR	MAKE	MODEL	STYLE	VEHICLE TOWED	TOWED BY	GOVT. VEHICLE
2002	**CHEV**	**BLAZR**	**UT**	YES ☐ NO ☑		YES ☐ NO ☑

REGISTERED OWNER INFO. **BARGREEN CO INC 2821 RUCKER AVE EVERETT WA 98201**

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # **HANOVER AW2A75149300**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE

VEHICLE NO. 1
SHADE IN DAMAGED AREA



UNIT 02

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☐ NO ☑ PHONE **D: 4252128618**

LAST NAME	FIRST NAME	MIDDLE INITIAL
TRINIDAD GUZMAN	**EMIGDIO**	

STREET NEW ADDRESS ☐ **2427 101ST AVE NE**

CITY	ST	ZIP
LAKE STEVENS	**WA**	**982588470**

CDL	RESTRICTIONS	ENDORSEMENTS

DRIVER'S LICENSE #	STATE	SEX	D.O.B. MMDDYYYY
TRINIE*286M8	**WA**	**M**	**07 - 28 - 1972**

ON DUTY	STATUS	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
☐		**2**	**4**	**1**		**7**	**POSSIBLE LOWER BACK**

LICENSE PLATE #	STATE	VIN#
B11751D	**WA**	**1FTSE34L61HA07036**

TRAILER PLATE #	STATE	TRAILER PLATE #	STATE

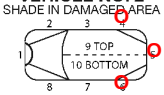
VEH. YEAR	MAKE	MODEL	STYLE	VEHICLE TOWED	TOWED BY	GOVT. VEHICLE
2001	**FORD**	**ECONOV**	**CG**	YES ☐ NO ☑		YES ☐ NO ☑

REGISTERED OWNER INFO. **EMIGDIO TRINIDAD GUZMAN 2427 101ST AVE NE LAKE STEVENS WA 982588470 D: 4252128618**

LIABILITY INSURANCE IN EFFECT ☑ INSURANCE CO & POLICY # **LIBERTY MUTUAL A02-268-197448-40 4 0**

VEHICLE LEGALLY STANDING YES ☑ NO ☐ CITATION # CHARGE

VEHICLE NO. 2
SHADE IN DAMAGED AREA



OFFICER'S NAME (PRINT) **C. WELLS #131** BADGE OR ID # **131** AGENCY **WA0311900**

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

PAGE 01 OF 3

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591972

CORRECTION | REPORT NO. E584583

CASE # 2016-18170

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

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
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
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

Unit #1 failed to stop for traffic congestion and rear-ended Unit #2 at a slow speed - 5 to 10 mph.

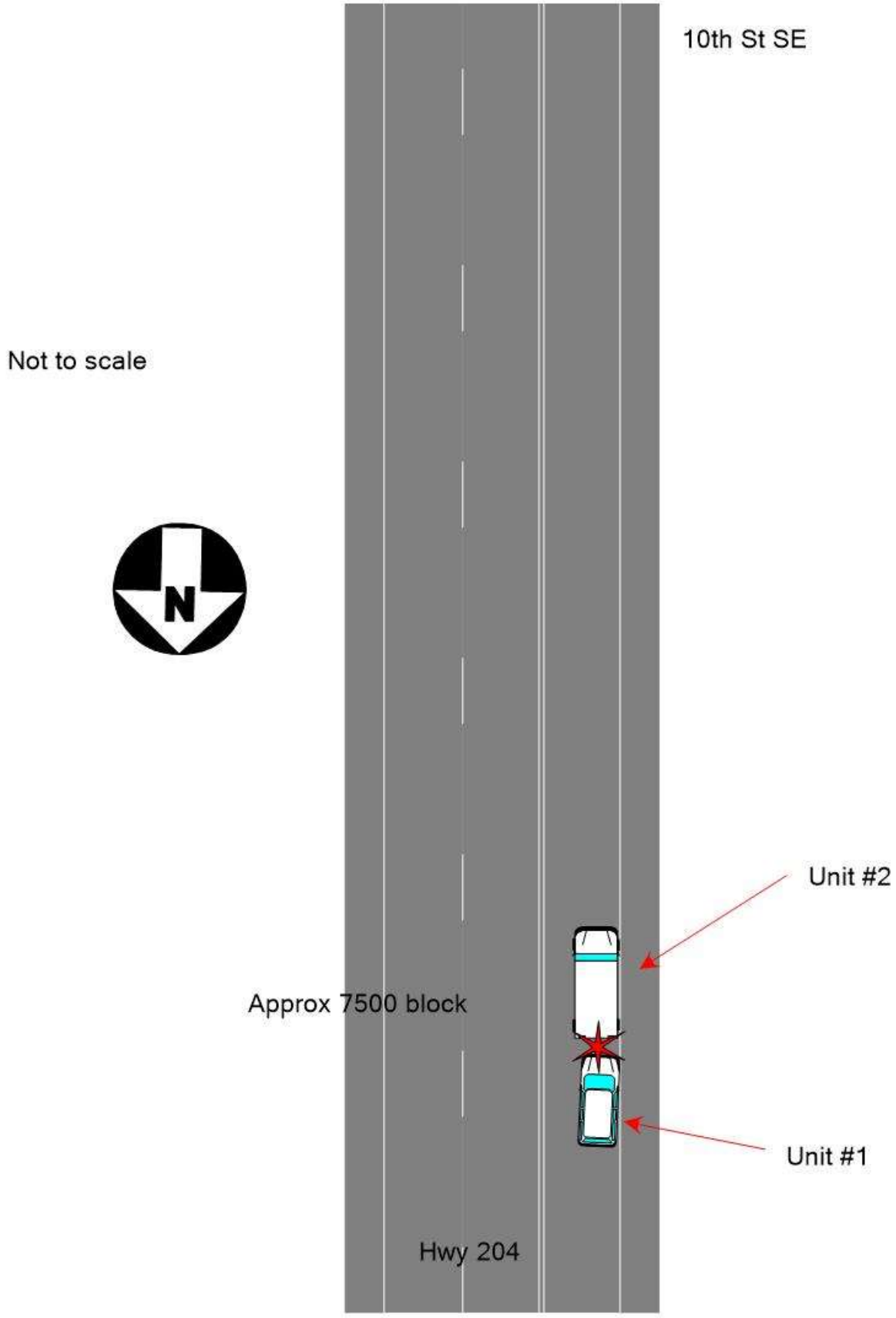
Unit #1 Driver admitted to inattention "...I looked up and the car in front of me had stopped."

Unit #2 driver claimed low back discomfort but declined Aid.

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)

C. WELLS #131		09-14-16 02:12 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
ROBERT MINER 0095	9/14/2016 9:54:31 PM

BADGE OR ID #	131	ORI #	WA0311900	TIME POLICE DISPATCHED	7:09 AM	TIME POLICE ARRIVED	7:18 AM

REPORT NO. E584583 **CASE #** 2016-18170 **DATE AND TIME OF COLLISION** 09/14/16 07:08