



Incident Report

Print Date/Time: 10/21/2016 16:09
Login ID: ss0100

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2016-00020830

Incident Date/Time: 10/19/2016 4:19:00 PM
Location: 717 SR 9 NE
LAKE STEVENS WA 98258
Phone Number: (425) 931-9808
Report Required: Yes
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 2
Status: 2
Nature of Call:

Unit/Personnel

Unit	Personnel
19D3	SS0135-Parnell
19R1	SS0144-Michael

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	IMIG, DAWN EVE	12911 22ND PL NE Lake Stevens WA 982589277	(425) 931-9808	White	Female	03/03/1980
1	Driver	DISS, ROXANNE	1008 S MACHIAS RD Snohomish WA 982905634		White	Female	01/14/1945
1	Passenger	IMIG, SABASTION R				Unknown	08/26/2004
1	Witness	CERVIN, GREGORY C	5314 67TH AVE	(425) 308-9490		Male	12/23/1984

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	1999	Ford	EXPDTN		ANA1742	WA
Involved Vehicle	Passenger Car	2006	Ford	MUSCP		ALS1593	WA

Disposition(s)

Disposition	Count
R	1

Property

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

10/19/2016 : 18:09:36 ss0144 Narrative: Diss Insurance, state farm, 1027165-F25-47D

10/19/2016 : 18:01:45 SP0422 Narrative: C4, NFC

10/19/2016 : 16:52:04 ss0144 Narrative: 1008 S Machias Rd for suspect contact

10/19/2016 : 16:24:55 SP0422 Narrative: **DISREGARD THAT ADDRESS

10/19/2016 : 16:23:45 SP0422 Narrative: POSS HEADED 415 102ND DR SE

10/19/2016 : 16:21:26 SP0297 Narrative: RUN VEH IS BLU MUSTANG L/ALS1593. LSH TOWARDS THE PUMPS. RP IN BLU 99 FORD EXPEDITION. LR297

10/19/2016 : 16:20:28 SP0297 Narrative: CC, LESS THAN 5, PLOT HIT AND RUN. RP WITNESSED.

COLLISION REPORT



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E598131**

1

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input 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 # **2016-00020830**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

2

TRIBAL RESERVATION

3

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #

DATE OF COLLISION **10** - **19** - **2016** **1618** **31** N E IN S W OF **0664**

4

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION

SR 9 BLOCK NO. **717** MILE POST

4a

5

DISTANCE **1000** MILES FEET N E S W **SR 204**

6

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

LAST NAME **DISS** FIRST NAME **ROXANNE** MIDDLE INITIAL

STREET NEW ADDRESS **1008 S MACHIAS RD**

CITY **SNOHOMISH** ST **WA** ZIP **982905634**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **DISS*R*554BM** STATE **WA** SEX **F** D.O.B. **01** - **14** - **1945**

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

LICENSE PLATE # **ALS1593** STATE **WA** VIN# **1ZVHT80N565246247**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2006** MAKE **FORD** MODEL **MUSCP** STYLE **CP** VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **STATE FARM 1027165F2547D**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET YES NO PHONE **D: 4259319808**

LAST NAME **IMIG** FIRST NAME **DAWN** MIDDLE INITIAL **E**

STREET NEW ADDRESS **12911 22ND PL NE**

CITY **LAKE STEVENS** ST **WA** ZIP **982589277**

CDL RESTRICTIONS **B** ENDORSEMENTS

DRIVER'S LICENSE # **IMIG*DE209DC** STATE **WA** SEX **F** D.O.B. **03** - **03** - **1980**

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

LICENSE PLATE # **ANA1742** STATE **WA** VIN# **1FMRU1860XLB06477**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1999** MAKE **FORD** MODEL **EXPDTN** STYLE **UT** VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **DANIEL IMIG 12911 22ND PL NE LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **ALLSTATE 976294957**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



OFFICER'S NAME (PRINT) **A. MICHAEL #0144** BADGE OR ID # **0144** AGENCY **WA0311900**

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1 1 2 32

FROM TO 0 0 33

FROM TO 0 0 34

4 35

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1591972

CORRECTION

REPORT NO. **E598131**

CASE # **2016-00020830**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **IMIG SABASTION R**

ADDRESS & PHONE # _____ SEX **U** D.O.B. MMDDYYYY **08** - **26** - **2004**

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

NAME (LAST, FIRST, MIDDLE INITIAL) **CERVIN GREGORY C**

ADDRESS & PHONE # **5314 67TH AVE NE UNIT B MARYSVILLE WA 98270 4253089490** SEX **M** D.O.B. MMDDYYYY **12** - **23** - **1984**

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

On the listed date and time I was dispatched to a hit and run in the parking lot of 717 SR 9. The driver of V2 stated that she was backing out of a parking stall when a car parked directly behind her also started backing out. This vehicle (V1) was described as a blue Ford Mustang. It began backing out and eventually hit V2 with the back right portion of the vehicle striking the center left portion of V2.

V1 drove a short distance away and then parked. V2 pulled immediately back into the stall that it had begun leaving. Witness 1 was nearby and saw the collision from the behind passenger side area of V2. He did not see the collision specifically but saw V2 shake from being hit. He said that V1 then parked a few stalls away and waited a short time before leaving the area. W1 was able to get a license plate number for V1.

V2 said that she parked and waited for V1 but it left the area. She got out of her car and assessed the damage which was a dent to the side.

I went to the registered address of V1 and contacted the female RO. She stated that she had been driving and had been in a small collision. She had parked a few stalls away, exited her vehicle and then looked around for V2. When she was unable to find it she thought that they were not concerned with the collision and went home.

Both parties were given exchange of information sheets. There was extremely minimal damage to V1.

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)

A. MICHAEL #0144 _____ **10-19-16 09:53 PM** _____
 INVESTIGATING OFFICER'S SIGNATURE _____ UNIT OR DIST. DET _____ DATED _____ PLACE SIGNED _____

APPROVED BY **C. WELLS 0131** _____ DATE **10/20/2016 12:42:48 PM**

BADGE OR ID # **0144** ORI # **WA0311900** TIME POLICE DISPATCHED **4:20 PM** TIME POLICE ARRIVED **4:25 PM**

REPORT NO. E598131

CASE # 2016-00020830

DATE AND TIME OF COLLISION 10/19/16 16:18

To SR 9

