Incident Report

Print Date/Time: 12/09/2016 12:39
Login ID: ss0139

Lake Stevens Police Department
ORI Number: WA0311900

Incident: **2016-00023775**

Incident Date/Time:	12/9/2016 12:35:00 PM	**Incident Type:**	Collision
Location:	700 E LAKESHORE DR LAKE STEVENS WA 98258	**Venue:**	Lake Stevens
Phone Number:		**Source:**	
Report Required:	No	**Priority:**	
Prior Hazards:	No	**Status:**	
LE Case Number:		**Nature of Call:**	

Unit/Personnel

Unit	Personnel

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	PEARSON, ASHLEY ANN	12921 22ND PL NE Lake Stevens WA 982589277	(425) 760-4056	White	Female	08/30/1997
2	Involved Party	PEARSON, ASHLEY ANN	12921 22ND PL NE Lake Stevens WA 982589277	(425) 760-4056	White	Female	08/30/1997
1	Involved Party	TAGEANT, MARCUS ALONGINO	790 E LAKESHORE DR Lake Stevens WA 982588665	(425) 377-8183	White	Male	08/08/1972

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	2004	Honda	Civic/CRX/Del Sol		BAX1557	WA

Disposition(s)

Disposition	Count

Property

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

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. E614487

CASE # 2016-00023775

LOCAL AGENCY CODING

TOTAL # OF UNITS 02 | OBJECT STRUCK MAILBOX

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

TRIBAL RESERVATION

DATE OF COLLISION (M M - D D - Y Y Y Y)	TIME (2400)	COUNTY #	MILES	N ☐ S ☐ E ☐ W ☐	IN OF ☑	CITY #
11 - 30 - 2016	0654	31				0664

ON (PRIMARY TRAFFIC WAY) E LAKESHORE DR

INTERSECTION ☐ NON-INTERSECTION ☑

BLOCK NO. ☑ MILE POST ☐ 700

DISTANCE 100 . 00 MILES ☐ FEET ☑ | N ☑ S ☐ E ☐ W ☐ | OF (REFERENCE OR CROSS STREET) 7TH ST NE

UNIT 01

MOTOR VEHICLE ☑ PEDAL-CYCLE ☐ | DAMAGE THRESHOLD MET YES ☑ NO ☐ | PHONE D: 4257604056

LAST NAME	FIRST NAME	MIDDLE INITIAL
PEARSON	ASHLEY	A

STREET NEW ADDRESS ☐ 12921 22ND PL NE

CITY LAKE STEVENS | ST WA | ZIP 982589277

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE # PEARSAA033NT | STATE WA | SEX F | D.O.B. MMDDYYYY 08 - 30 - 1997

ON DUTY ☐ | STATUS | AIRBAG 3 | RESTR. 4 | EJECT 1 | HELMET USE | INJURY CLASS 1 | NATURE OF INJURIES

LICENSE PLATE # BAX1557 | STATE WA | VIN# 1HGEM21084L085034

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

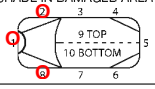
VEH. YEAR 2004 | MAKE HOND | MODEL CIVCP | STYLE CP | VEHICLE TOWED YES ☐ NO ☑ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☑

REGISTERED OWNER INFO. RICHARD KUMMER 426 AIRPORT WAY SW MATTAWA WA 99349 D: 4257604056

LIABILITY INSURANCE IN EFFECT ☑ | INSURANCE CO & POLICY # SAFECO M1807435

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

LAST NAME	FIRST NAME	MIDDLE INITIAL
TAGEANT	MARCUS	A

STREET NEW ADDRESS ☐ 790 E LAKESHORE DR

CITY LAKE STEVENS | ST WA | ZIP 982588665

CDL | RESTRICTIONS | ENDORSEMENTS

DRIVER'S LICENSE # | STATE | SEX M | D.O.B. MMDDYYYY 08 - 08 - 197 2

ON DUTY ☐ | STATUS | AIRBAG | RESTR. | EJECT | HELMET USE | INJURY CLASS | NATURE OF INJURIES

LICENSE PLATE # | STATE | VIN#

TRAILER PLATE # | STATE | TRAILER PLATE # | STATE

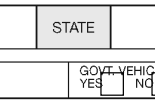
VEH. YEAR | MAKE | MODEL | STYLE | VEHICLE TOWED YES ☐ NO ☐ | TOWED BY | GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ | INSURANCE CO & POLICY #

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

VEHICLE NO. 2
SHADE IN DAMAGED AREA



OFFICER'S NAME (PRINT) P. BASSETT #0142 | BADGE OR ID # 0142 | 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. E614487

CASE # 2016-00023775

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				

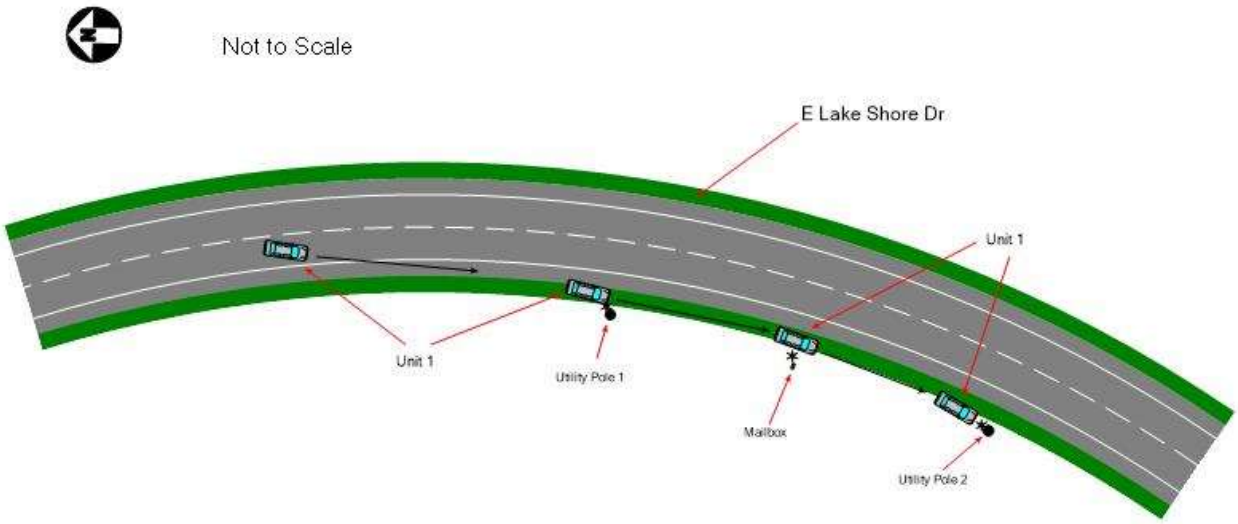
NARRATIVE

Unit 1 was traveling southbound on E Lakeshore Dr at a speed that was too fast for the weather and street conditions. Unit 1 left the roadway and struck Utility Pole 1, a mailbox and came to rest against Utility Pole 2. Unit 1 had extensive damage to the front end, but no injuries.

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)

P. BASSETT #0142		11-30-16 09:57 AM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED

APPROVED BY	DATE
C. WELLS 0131	12/1/2016 2:59:38 PM

BADGE OR ID #	0142	ORI #	WA0311900	TIME POLICE DISPATCHED	6:54 AM	TIME POLICE ARRIVED	7:00 AM

REPORT NO. E614487 **CASE #** 2016-00023775 **DATE AND TIME OF COLLISION** 11/30/16 06:54