



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E312518**

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INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" 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 #	14-00481	
LOCAL AGENCY CODING		
TOTAL # OF UNITS	02	OBJECT STRUCK

TRIBAL RESERVATION

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

DATE OF COLLISION **02** - **28** - **2014** **1726** **31** N E IN OF **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION

SR 204 BLOCK NO. **1000** MILE POST

DISTANCE OF (REFERENCE OR CROSS STREET)

150 **00** MILES N E **10TH ST SE** FEET S W

UNIT 01 MOTOR VEHICLE PEDAL-CYCLE DAMAGE THRESHOLD MET YES NO PHONE **D: 4253129622**

LAST NAME **POWELL** FIRST NAME **SHAWN** MIDDLE INITIAL **R**

STREET NEW ADDRESS **16529 W LAKE GOODWIN RD**

CITY **STANWOOD** ST **WA** ZIP **982926956**

CDL RESTRICTIONS **J** ENDORSEMENTS

DRIVER'S LICENSE # **POWELSR317DJ** STATE **WA** SEX **M** D.O.B. **03** - **11** - **1969**

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

LICENSE PLATE # **B63515W** STATE **WA** VIN# **JT4RN67S0J8008833**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1988** MAKE **TOYT** MODEL **1/2 TON** STYLE **PK** VEHICLE TOWED YES NO TOWED BY **TOP NOTCH** GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **SHAWN POWELL 16529 W LAKE GOODWIN RD STANWOOD WA 98292**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **MIDDLESEX INSURANCE 474588530**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET YES NO PHONE **D: 4253149425**

LAST NAME **MILLER** FIRST NAME **CLIFFORD** MIDDLE INITIAL **C**

STREET NEW ADDRESS **2302 LUNDQUIST LN**

CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **MILLECC172D0** STATE **WA** SEX **M** D.O.B. **03** - **20** - **1983**

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

LICENSE PLATE # **B19744U** STATE **WA** VIN# **1GTCS19Z2M8522893**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1991** MAKE **GMC** MODEL **S10PU** STYLE **PK** VEHICLE TOWED YES NO TOWED BY **TOP NOTCH** GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **CLIFFORD MILLER 2302 LUNDQUIST LN LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **STATE FARM 179 8153-E15-47**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



OFFICER'S NAME (PRINT) **JIM BARNES** BADGE OR ID # **101** AGENCY **WA0311900**

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2 2 0
3 0 5
1 1 8 28
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0 5 29
0 1 30
1 1 2 31
2
3
1 1 2 32
2
3
FROM TO 3 3 33
FROM TO 7 3 34
1 35
4 36
1 0 37
38
39
40
1 41
1 42



1591972

CORRECTION

REPORT NO. **E312518**

CASE # **14-00481**

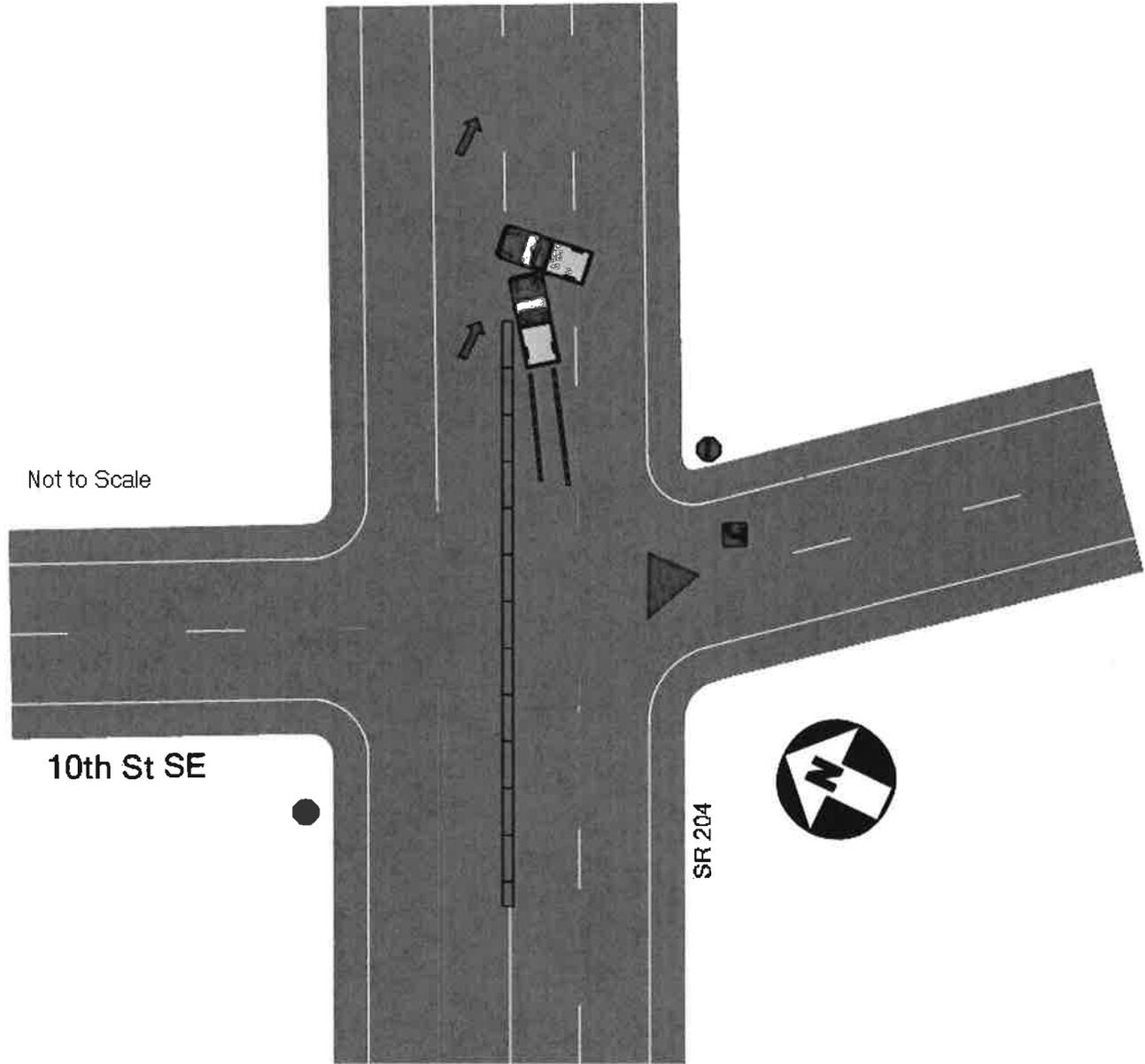
ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)																		
NAME (LAST, FIRST, MIDDLE INITIAL)		WOOD MARY A																
ADDRESS & PHONE #						SEX	F	D.O.B. MMDDYYYY	01	15	1966							
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	3	AIRBAG	1	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		LOZENSKY JEFFREY E																
ADDRESS & PHONE #						SEX	M	D.O.B. MMDDYYYY	11	18	1969							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		CLATTERBUCK DAVID S																
ADDRESS & PHONE #						SEX	U	D.O.B. MMDDYYYY	09	18	1966							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Vehicle 1 turned eastbound onto SR 204 from 10th St SE. The driver wanted to head westbound, but there is a barrier in the roadway preventing a left turn onto SR 204. The driver of V-1 drove to the east end of the barrier and started to perform a u-turn around the barrier. Vehicle 2 was traveling westbound in the inside lane of SR 204. The driver of V-2 saw that V-1 was making a u-turn, but was not able to stop to avoid the collision. As a result of the high speed impact, V-1 was pushed up onto its side. Both vehicle sustained reportable damage. No injuries were reported at the time of the collision, but all occupants were checked by aid crews at the scene. Both vehicles were towed from the scene by Top Notch towing.

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)

JIM BARNES		03-03-14 03:54 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY CHAD CHRISTENSEN 075		DATE 3/7/2014 1:50:56 PM	
BADGE OR ID #	ORI #	TIME POLICE DISPATCHED	TIME POLICE ARRIVED
101	WA0311900	5:26 PM	5:31 PM



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <i>Miller Clifford Charles West</i>	RACE <i>W</i>	ETH	SEX <i>M</i>	DOB <i>3 20 83</i>	AGE <i>30</i>	HGT <i>56</i>	WGT <i>140</i>	HAIR <i>Br</i>	EYES <i>Blu</i>
STREET ADDRESS <i>2302 Lundquist Ln</i>		CITY <i>Lake Stevens</i>			STATE <i>WA</i>	ZIP <i>98258</i>	RES. STATUS			
HOME PHONE		CELL PHONE <i>425 314 9425</i>			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS								

I, *Clifford Miller*, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was headed into Lake Stevens from Hwy 2 on 204 when the black truck attempted to make an illegal U-turn in front of me causing me to f-bone him. I attempted to help him exit his vehicle, I smelled what could have been alcohol on him or within the vehicle.

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

SIGNATURE: <i>[Signature]</i>	DATE SIGNED <i>2/28/14</i>	LOCATION SIGNED <i>in middle of 204</i>
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 14-00481

NON-DISC NAME (LAST, FIRST MIDDLE) CLATTERBUCK DAVID SCOTT DOB 09-03-06
 425-772-2211 11526 28th ST NE LAKE STEVENS, 98258

WE WERE TRAVELING ON 204 TOWARDS HWY 9. WE PASSED 10th ST SE AND IMMEDIATELY NOTICED A BLACK PICKUP TRUCK TRYING TO MAKE A UTURN IN FRONT OF MY VEHICLE AND THE VEHICLE IN FRONT OF ME - A MAROON GMC SONOMA PICKUP TRUCK. THE DRIVER IN THE SONOMA COULD NOT REACT QUICKLY ENOUGH TO AVOID HITTING THE BLACK TRUCK. THE SONOMA DRIVER DID SLAM ON HIS BRAKES - LEAVING SKID MARKS ON THE ROAD, BUT THE BLACK TRUCK TRIED TO MAKE THE UTURN DIRECTLY IN FRONT OF THE SONOMA SO THE SONOMA DRIVER DID NOT HAVE ROOM TO STOP BEFORE HITTING THE BLACK TRUCK. I STOPPED ABOUT 15 FEET BEHIND THE SONOMA WITHOUT HITTING IT.

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

SIGNATURE: David A Clatterbuck	DATE SIGNED: 2/28/2014	LOCATION SIGNED: ON 204
OFFICER/NUMBER: grh 101	DATE SIGNED: 2-28-14	LOCATION SIGNED: LK STEVENS

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education" PAGE 1 OF 1

