

29 OCT 1996

EPIDEMIOLOGIC INVESTIGATION REPORT

| | | |
|---|---|-----------------------------------|
| 1. CASE NO. 960801CWE5004 | 2. INVESTIGATOR'S ID [8][2][3][2] | 3. OFFICE CODE [8][7][0] |
| 4. DATE OF INCIDENT YR MO DAY [9][6][0][7][1][0] | 5. DATE INVESTIGATION INITIATED YR MO DAY [9][6][0][8][1][2] | |

6. SYNOPSIS OF INCIDENT OR COMPLAINT

A three year old female used a barbecue lighter to ignite clothing inside a closet in her home. The fire was discovered by the mother. The family escaped without injury.

CPSA 6 (b)(1) Cleared
JSC
 No Mfrs/PrvtLbrs or
 Products Identified
 Excepted by *ANPR*
 Firms Notified.
 Comments Processed
Am 6/30/97

| | | |
|--|-------------------|-------------------------|
| 7. LOCATION (Home, school, etc.) home interior [1][0] | 8. CITY Keizer | 9. STATE Oregon [OR] |
|--|-------------------|-------------------------|

| | |
|---|--|
| 10A. FIRST PRODUCT barbecue lighter [1][6][0][4] | 11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Brand: Marlboro Distributor: Philip Morris, New York, NY |
|---|--|

| | |
|--|--|
| 10B. SECOND PRODUCT clothing [1][6][5][8] | 11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS unknown |
|--|--|

| | | | |
|--------------------------------------|---|---------------------------------------|---|
| 12. AGE OF VICTIM [0][0][3] | 13. SEX (USE NUMERICAL CODE) MALE - 1 FEMALE - 2 [2] UNKNOWN - 3 | 14. DISPOSITION no injury [0] | 15. INJURY DIAGNOSIS no injury [7][0] |
|--------------------------------------|---|---------------------------------------|---|

| | | | |
|--|---|---|------------------------------------|
| 16. BODY PART no injury [9][9] | 17. RESPONDENT(S) (Mother, Friend) fire marshal, father [3] | 18. TYPE INVESTIGATION ON SITE - 1 TELEPHONE - 2 [2] OTHER - 3 | 19. TIME SPENT [][5][:][] |
|--|---|---|------------------------------------|

| | | |
|--------------------------------------|--|--|
| 20. ATTACHMENTS fire report [2] | 21. CASE SOURCE [0][5] newspaper F9885004A | 22. REVIEWED BY YR MO DAY [8][1][0][1] [9][6][0][9][1][3] |
|--------------------------------------|--|--|

23. PERMISSION TO DISCLOSE NAMES
 (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME [] CPSC MAY NOT DISCLOSE MY NAME [X]

| | |
|--|--|
| 24. NARRATIVE (See Instructions on Page 2) | 25. REGIONAL OFFICE DIRECTOR REVIEW DATE |
|--|--|

The respondents were the Fire Marshal who investigated the fire and the father of the child who started the fire.

MFR/PRVLBR NOTIFIED

~~No Comments made~~
~~Comments attached~~
~~Excisions/Revisions~~
~~Firm has not requested further notice~~

(USE ADDITIONAL SHEETS IF NECESSARY)

STATE OF OREGON FIRE REPORT
STATE FIRE MARSHAL

DO NOT WRITE IN THIS SPACE
CONTROL NO. EXP. NO.

FIRE DEPT. ALARM NO. 96-1243

District of Incident Keizer County MULTON Dept. Responding Keizer

1 MO 7 DAY 10 YEAR 96 DAY OF WEEK Sun Mon Wed Thur Fri Satur ALARM TIME 0826 ARRIVAL TIME 0830 TIME BACK IN 1109

2 INCIDENT ADDRESS [REDACTED] ZIP CENSUS TRACT ISO CLASS

3 OCCUPANT NAME (Last, First, MI) [REDACTED] DOB (optional) 6-27-7 TELEPHONE [REDACTED]

4 BUSINESS OWNER [REDACTED] ADDRESS DOB (optional) TELEPHONE [REDACTED]

5 OWNER NAME (Last, First, MI) [REDACTED] ADDRESS DOB (optional) TELEPHONE [REDACTED]

6 FIRE REPORTED BY (Last, First, MI) [REDACTED] ADDRESS 97220 DOB (optional) TELEPHONE [REDACTED]

METHOD OF ALARM Telephone Direct Municipal Alarm System Private Alarm System Radio Verbal No Alarm Rec'd 911 (Tie Line) Voice Signal Muni Alarm Not Classified Above Mutual Aid (extinguish or investigate only) Received Given N/A

8 # OF FIRE SERVICE PERSONNEL RESPONDED 14 # OF ENGINES RESPONDED 375-385 # OF AERIAL APPARATUS RESPONDED 0 # OTHER VEHICLES RESPONDED (do not include PA's) M-35 D-381 A-32

9 TYPE OF SITUATION FOUND Structure Fire Vehicle Fire Brush, Grass, Leaves Trash, Rubbish Other Prop. w/value Other (List) TYPE OF ACTION TAKEN Extinguish Investigation Removed Hazard Stood By Salvage Not Classified

10 METHOD OF EXTINGUISHMENT Self-Extinguished Make-shift aids Portable Extinguisher Automatic Ext. System Pre-connect hose/tank only Pre-connect hose/hydrant, standpipe Hand-laid hose/hydrant, standpipe Master Stream Device Not Classified Above Undetermined

11 FIXED PROPERTY USE Single Family Dwelling PROPERTY COMPLEX (if applicable) MOBILE PROPERTY (Complete line M)

M MOBILE PROPERTY YEAR MAKE MODEL SERIAL # LICENSE #

12 ROOM/AREA OF FIRE ORIGIN Bedroom Closet EQUIPMENT INVOLVED IN IGNITION (Complete Line E)

E EQUIPMENT INVOLVED IN IGNITION YEAR MAKE MODEL SERIAL # VOLTAGE

13 IGNITION FACTOR Direct Flame Contact - lighter ignited clothing in closet

14 FORM OF HEAT OF IGNITION Direct MATERIAL FIRST IGNITED WAS MADE OF Cloth ITEM FIRST IGNITED: shirt

15 LEVEL OF FIRE ORIGIN Grade level to 9 feet 10 to 19 feet 20 to 29 feet 30 to 49 feet 50 to 70 feet Over 70 feet Objects in Flight Below grd. level Not Classified Undetermined

16 VALUE Building 62,000 Contents 12,000 Vehicle and Contents Other TOTAL 74,000 LOSS 6,000 3,500 9,500

17 NUMBER OF STORIES 1 story 2 stories 3 to 4 stories 5 to 6 stories 7 to 12 stories 13 to 24 stories 25 to 49 stories 50 stories or more

18 BUILDING AGE (In Years) 45 BUILDING SIZE (Grnd Flr Only) 0-999 sq ft 1000-4999 sq ft 5000-9999 sq ft 10,000-19,999 sq ft 20,000-49,999 sq ft 50,000-99,999 sq ft 100,000-199,999 sq ft 500,000 sq ft

19 CONSTRUCTION TYPE Steel & Concrete, 3-4 hr. prot. Heavy Timber Protect. Steel Bldg Unprotect. Steel Bldg Protect. Masonry Ext. & Wood Int. Unprotect. Masonry Ext. & Wood Int. Protect. Wood Frame Unprotected Wood Frame Not Classified Above

EXTENT OF DAMAGE CONFINED TO: Flame Smoke 1 The object of origin 1 1 2 Part of room or area of origin 2 2 3 Room of origin 3 3 4 Fire-rated comp. of origin 4 4 5 Floor of origin 5 5 6 Structure of origin 6 6 7 Extended beyond structure of origin 7 7 9 No damage of the type (N/A) 9 9 DETECTOR PERFORMANCE 1 In room of origin-oper. 2 Not in room of origin-oper. 3 In rm of origin-not oper-fire too small 4 Not in rm of origin-not oper. fire too small 5 In room of origin-not oper. power disconnect 6 Not in rm of origin-not oper. power disconnect 7 In room of origin-not oper. dead battery 8 Not in room of origin-not oper. dead battery 9 No detector present 10 Undetermined SPRINKLER PERFORMANCE 1 Equipment operated 2 Equip. should have oper. -did not 3 Equip. prevent fire too small to oper. 9 Not classified above 0 Undetermined or not reported 8 No equipment present (N/A) Sprinklers Controlled Fire: YES NO # of Heads Opened

21 REMARKS Weather Conditions (optional): 3 year old admitted to lighting a shirt on fire in the closet. He was able to light lighter

22 Follow Up Investigation Requested Y X N If yes, who will investigate Keizer Fire

23 Number of Injuries Fire Service Other Number of Fatalities Fire Service Other

24 Member Making Report Joel Stein Title Div Chief/FM Date 7-10-96

25 Additional Information by Title Date

COMPLETE FOR ALL HOSTILE FIRES
COMPLETE FOR ALL HOSTILE FIRES
STRUCTURE FIRES ONLY

REG Pres 101
F 96855004
9 30801 0155004

Salem, OR
(Marion Co.)
Statesman-Journal
(Cir. D. 60,172)
(Cir. S. 69,015)

JUL 11 1996

711

**Child with lighter
causes house fire 3569**

A child playing with a cigarette lighter caused a fire Wednesday morning in the bedroom of a home at [redacted] Keizer Fire District officials said.

Crews found heavy black smoke coming from the residence when they responded to the 8:25 a.m. alarm. Occupant [redacted] awoke to find the master bedroom closet in flames. She and two young children escaped safely from the home.

Fire officials said leftover fireworks in the closet might have helped fuel the fire.

The two-bedroom rental house sustained moderate fire damage to the bedroom and smoke damage throughout the house. Estimates of damage were at least \$8,000 to the structure and \$3,000 to the contents.

There was a smoke detector in the house, but it had no battery, officials said.

7-10-96

4627 Therman Dr

NON-CHILD RESISTANT

3 YEARS OLD



John TRET

503-393-1045

SECTKW

OCT 1996

SN

| | | | | | |
|--|--|--|---|---|--|
| 1. TASK NUMBER 960801CCC5418 | | 2. INVESTIGATOR'S ID 8516 | | EPIDEMIOLOGIC INVESTIGATION REPORT | |
| 3. OFFICE CODE 896 | 4. DATE OF ACCIDENT YR MO DAY 96 06 04 | 5. DATE INITIATED YR MO DAY 96 08 08 | | | |
| 6. SYNOPSIS OF ACCIDENT OR COMPLAINT There were no injuries involved in this accident. There were no witnesses to this fire but the child explained what he did. The four year old male took a butane charcoal lighter that was hidden behind the entertainment center, in the living room of a townhouse. The child stated that he then ignited the lighter, and then ignited papers in the living room. The child's mother was upstairs and she was able to successfully evacuate the house. The living room was gutted and there was smoke damage to the remainder of the house. | | | | | |
| 7. LOCATION (Home, School, etc.) Home 10 | | 8. CITY Hollywood | | 9. STATE Maryland | |
| 10A. FIRST PRODUCT Butane Charcoal Lighter 1247 | | 10B. TRADE/BRAND NAME Unk. | | 10C. MODEL NUMBER Unk. | |
| 10D. MANUFACTURER NAME AND ADDRESS Unk. Unk. Unk. | | | | | |
| 11A. SECOND PRODUCT Paper 1137 | | 11B. TRADE/BRAND NAME Unk. CPSA 6 | | 11C. MODEL NUMBER Unk. | |
| 11D. MANUFACTURER NAME AND ADDRESS Unk. Unk. Unk. | | | | | |
| 12. AGE OF VICTIM No Injury 99 | 13. SEX No Injury 9 | 14. DISPOSITION No Injury 0 | 15. INJURY DIAGNOSIS No Injury 70 | | |
| 16. BODY PART (S) INVOLVED No Injury 99 | 17. RESPONDENT Mother 3 Fire Marshall | 18. TYPE OF INVESTIGATION Telephone 2 | | 19. TIME SPENT (OPERATIONAL HOURS) 05 | |
| 20. ATTACHMENT(S) None 0 | 21. CASE SOURCE Newspaper 06 | | 22. SAMPLE COLLECTION NUMBER N/A | | |
| 23. PERMISSION TO DISCLOSE NAMES (NON NEISS CASES ONLY) No | | | | | |
| 24. REVIEW DATE | 25. REVIEWED BY | | 26. REGIONAL OFFICE DIRECTOR | | |
| 27. DISTRIBUTION O:EHDS CC: | | | | | |

1 OCT 1996

960801CCC5418

Page 2

NOTE: For purposes of this investigation, the State Fire Marshal, that conducted an on-site investigation, was contacted. He offered information that is contained in this report. Also contacted, for purposes of this investigation was the mother of the child, involved in this lighter ignition fire. The mother could only speak briefly, consequently, not all the background information could be ascertained.

PRE-ACCIDENT

The mother of the child stated that the lighter involved in this fire was a charcoal lighter. It was purchased in approximately May, 1996. She could not give the number of times it was used but said that it was used for "a lot of barbecues" before the fire in the house. She said that she did not know if the lighter was ever refilled during ownership. During ownership, the lighter never malfunctioned; it was never dropped or damaged. The mother said that her four year old son had, to her knowledge, never played with the lighter before this accident.

At the time just before the fire, the mother was in the upstairs level of this townhouse, taking a shower. Her son was in the downstairs living room. The mother said that the charcoal lighter was hidden behind the entertainment center, in the living room. The mother said that the "off-on" switch was off, when it was placed behind the entertainment center. The Fire Marshal spoke with the child, after the fire. The child told him that he took the lighter from the area of the entertainment center.

ACCIDENT

The four year old child told the fire marshal that he then took the charcoal lighter and ignited papers that were on top of a television, that was on the floor of the living room. The paper fire then ignited other items in the living room. The mother was alerted to the fire (unknown how alerted) and evacuated herself and her child from the house.

POST-ACCIDENT

The two people that were in the house, at the time of the fire, escaped without injury. According to the fire department, losses in the house amounted to \$30,000 contents and \$40,000 structure. The living room was gutted and there was heat and smoke damage in the rest of the house. The fire department found the charcoal lighter, after the fire. The Deputy Fire Marshal, that was interviewed, for purposes of this investigation, stated he looked at the remains of the charcoal lighter after the fire, but did not collect the lighter. He said that it was melted into a glob of plastic there was no brand name information visible. Neither the mother or fire marshal had the charcoal lighter.

PRODUCT IDENTIFICATION/INFORMATION

As stated above, brand name information was not known by the consumer or the Fire Marshal's Office. The consumer said the lighter had a red end and a black tip. She said that it had an off-on control, a flame height control and a lever for activating the flame. She said that the lighter may have been 8-9" long. She said that it was purchased at a Walmart store, but she is unsure of the location. The mother said that the charcoal lighter had no child resistant feature on it. The fire marshal said that he took photographs on the scene, but the photographs did not come out. He said that what remained of the lighter was a glob of melted plastic. He said that the handle may have been red and the nozzle for the lighter was a 4"-5" piece of metal. He said that it was a butane lighter. He said that there was no brand name visible on the remains of the lighter.

STANDARDS INFORMATION

Unknown.

EXHIBIT DESCRIPTION

None (Fire Marshal's report requested).

ACCIDENT INVESTIGATION REQUEST FORM

DAK E

Document Number N9670229A

Date of Incident 6-4-96 Category I.D. SECT KW1984

Follow-Up Requested _____ Hazard Analysis Section 15

Type Follow-Up Requested _____ Telephone Call _____ On-Site _____

Headquarters Contact Kate Wallace, CCA

Assignment Message Please conduct a Section 15 I.D.I. Verify age of child who started the fire, and the accident scenario. Determine make of charcoal lighter, where it was kept and how the child accessed it. Was it used for its intended purpose, i.e. charcoal fire? Was the switch in the "on" or "off" position?

Person(s) to Contact Allen Gosnell
Deputy State Fire Marshall
Hollywood/Solomons, MD
[Redacted] Church Drive

Guideline _____

Requested By Kate Wallace, CCA

Task Number 940801 CCC 5418

Assigned to MRS C Date 8/1/96

ISSUE

44

TE 30

JUL

(13)

N967-0229A

Kate

ENTERPRISE

LEXINGTON PARK, MD
2-TIMES/WEEK 10,000

FRIDAY
JUN 7 1996

BURRELLE'S

08
..cc..



Staff Photo by John Whorton

2024
Lighter Burns Home

Bay District volunteer firefighters, joined by others from Hollywood and Solomons, respond to a blaze reported at 3:19 p.m. Tuesday at the apartment home of [redacted] and [redacted] on Church Drive in the Greenview Knolls community. [redacted] and her 4-year-old son escaped unharmed from the blaze, which Deputy State Fire Marshal Allen Gosnell said was accidentally started by the child as he played with a butane charcoal lighter in the living room. Damages were estimated at \$70,000.

940801C CC5418

| 1. CASE NO. 960815CCN1696 | | 2. INVESTIGATOR'S ID [9][0][0][3] | | 3. OFFICE CODE [8][3][0] | | EPIDEMIOLOGIC INVESTIGATION REPORT | |
|---|--|--|--|---|--|---|--|
| 4. DATE OF INCIDENT YR MO DAY [9][6][0][8][0][7] | | 5. DATE INVESTIGATION YR MO DAY INITIATED [9][6][0][8][1][5] | | | | | |
| 6. SYNOPSIS OF INCIDENT OR COMPLAINT: On 8/07/96 a three year old boy started the patio door window curtains on fire in his family's home with a grill/ fireplace lighter. The flames were observed by a neighbor, who alerted the parents. The fire was partially extinguished with pitchers of water and a garden hose by the time the fire department could arrive and completely extinguish the fire. Damage was estimated at approximately \$6,000; no one was injured. The boy's mother received the lighter as a promotional item when she purchased cigarettes at a local gas station on 6/24/96. The lighter was placed on the kitchen counter and largely forgotten by the parents. The mother believes that the boy thought the lighter was a toy, as the on/off switch is similar to that on his toy "CD player," and the "trigger" style switch used to ignite the lighter may have been likened to his toy guns. The lighter was collected by MKE-RP submitted to CCA as sample #96-830-3546. | | | | | | | |
| 7. LOCATION (Home, school, etc.) home [1][0] | | 8. CITY Delavan | | 9. STATE WI. | | | |
| 10A. FIRST PRODUCT grill lighter [1][2][8][5] | | 11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS "Aim n Flame" model butane gas lighter manufactured by the Scripto-Tokai Corporation, Fontana, CA. 92337. | | | | | |
| 10B. SECOND PRODUCT patio door curtains [0][6][1][7] | | 11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS N/A | | | | | |
| 12. AGE OF VICTIM [9][9][9] | | 13. SEX (USE NUMERICAL CODE) MALE - 1 FEMALE - 2 [9] UNKNOWN - 3 | | 14. DISPOSITION No injury [0] | | 15. INJURY DIAGNOSIS No injury [7][1] | |
| 16. BODY PART No injury [9][9] | | 17. RESPONDENT(S) (Mother, Friend) victim's father, fire department investigators [1] | | 18. TYPE INVESTIGATION ON SITE - 1 TELEPHONE - 2 [3] OTHER - 3 | | 19. TIME SPENT Tr:3.0 [0][6][0] | |
| 20. ATTACHMENTS multiple [9] | | 21. CASE SOURCE [0][5] | | 22. REVIEWED BY [8][1][3][0] | | YR MO DAY [9][6][0][9][1][7] | |
| 23. PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME <input checked="" type="checkbox"/> CPSC MAY NOT DISCLOSE MY NAME <input type="checkbox"/> | | | | | | | |
| 24. NARRATIVE (See Instructions on Page 2) See attached narrative. | | | | 25. REGIONAL OFFICE DIRECTOR REVIEW DATE | | | |
| <p style="text-align: center;">MFR/PRVLBLR NOTIFIED</p> <p style="text-align: center;">No Comments made</p> <p style="text-align: center;">Comments attached</p> <p style="text-align: center;">Excisions/Revisions</p> <p style="text-align: center;">Firm has not requested</p> <p style="text-align: center;">further notice</p> | | | | <p style="text-align: center;">CPSA 6 (b)(1) Cleared</p> <p style="text-align: center;">No Mfrs/PrvtLblrs or Products Identified</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Excepted by <u>ANPR</u></p> <p style="text-align: center;">Firms Notified. <u>Jan 6/30/97</u></p> <p style="text-align: center;">Comments Processed</p> | | | |

(USE ADDITIONAL SHEETS IF NECESSARY)

960815CCN16961**SUMMARY:**

On 8/07/96 a three year old boy started the patio door window curtains on fire in his family's home with a grill/ fireplace lighter. The flames were observed by a neighbor, who alerted the parents. The fire was partially extinguished with pitchers of water and a garden hose by the time the fire department could arrive and completely extinguish the fire. Damage was estimated at approximately \$6,000; no one was injured.

The boy's mother received the lighter as a promotional item when she purchased cigarettes at a local gas station on 6/24/96. The lighter was placed on the kitchen counter and largely forgotten by the parents. The mother believes that the boy thought the lighter was a toy, as the on/off switch is similar to that on his toy "CD player," and the "trigger" style switch used to ignite the lighter may have been likened to his toy guns. The lighter was collected by MKE-RP submitted to CCA as sample #96-830-3546.

PRE-INCIDENT:

This incident occurred in a two story, wood-framed, single family home with an attached garage located in Delavan, WI. The family consisted of the parents and their two children, a boy age 3 and a 6 year old girl.

Only the mother smokes cigarettes in the home. Between 6/24/96 and 6/26/96 she purchased a promotional carton of "Basic Lights" brand cigarettes from the Super America gas station and convenience store located at 803 Geneva Street, Delavan, WI. 53135. This carton consisted of three 20 cigarette packs of cigarettes as well as a "free" "Aim n Flame" model fireplace/grill butane lighter. The lighter is 7" long. It has "trigger" style lighting mechanism, a slide on/off switch, and a rotating wheel style switch to adjust the flame height. The lighter is not child resistant. It is manufactured by the Scripto-Tokai Corporation, Fontana, CA. 92337. Photographs of this lighter are attached as Exhibit "A." The lighter was packaged together with the cigarettes, which are manufactured by Philip Morris.

The mother stated that her children have never shown any interest in the regular size butane cigarette lighters that she uses to light her cigarettes. She buys lighters with or without the child resistant feature, depending what happens to be conveniently offered for sale when she needs to buy a lighter. She normally keeps the lighter with her in her pocket, but does routinely leave her cigarettes and lighter on the kitchen counter or on the coffee tables in the den. She never saw her children show any interest in the lighters, and was not concerned that they might play with them.

Due to the large size of the promotional grill lighter, it was never used to light cigarettes, but instead was placed on the edge of the kitchen counter near the patio door leading outside should it be needed to start the grill. The mother estimated that it was actually used 2-3 times by her husband to start the grill between 6/24/96 and 8/07/96. She does not believe the children ever saw her husband or anyone else light this grill lighter. The lighter was largely forgotten, due to the infrequency of use.

INCIDENT:

On Wednesday, 8/07/96 at 8:40PM the mother put both of her children to bed in their separate bedrooms upstairs. She then went back downstairs to do the dishes, wash clothes and other household chores. At approximately 9:45PM she went out to the garage to talk with her husband and a neighbor, who were working on an automobile and had been in the garage all evening.

At approximately 10:10PM the neighbor happened look towards the patio door leading to the backyard, and noticed heavy flames just inside the door. The neighbor and husband then ran into the home, finding the three year old boy standing approximately 12" from the flames, staring towards the patio door. He was apparently in shock, and apparently did not realize the impending danger. The fire department was immediately summoned. The father and neighbor were able to partially extinguish the fire using pitchers of water and the garden hose; the fire department arrived a short time later and fully extinguished the flames. The fire caused fire damage to the kitchen, and smoke damage throughout the home, total damage estimate is approximately \$6,200.

POST-INCIDENT:

Fire investigators and the parents questioned the 3 year old boy, who admitted starting the fire with the fireplace/grill lighter. The boy pulled a chair from the kitchen table over to the counter, then climbed on the chair and was able to reach the lighter. It is not known how he knew the lighter was there, or what attracted him to it this particular evening. This lighter was found on the floor, where the boy had apparently dropped it after starting the fire. The boy ignited the lacy synthetic material full length curtains that hang on either side of the french-style swinging patio doors in the kitchen. The fire spread to the door and the ceiling above the door.

The investigators gave the boy the lighter and asked him to demonstrate how he lighted it, however the boy would not do so and would not answer any further questions. The parents have attempted to discuss the incident with their son since the fire, however he will not answer their questions.

The boy had no previous history of playing with fire or lighters. The boy's mother did not know how her son learned to use the lighter, except to say that the simple on/off switch was similar to that on some toys he had played with (she specifically mentioned a portable compact disk player toy (it doesn't actually play music)). She also suggested that the trigger pull action of the lighter is similar to that of toy guns the boy had played with in the past. The boy's manual dexterity was described as being average for his age; his mother described her boy as being small for his age, weighing approximately 35 pounds and standing an estimated 30-36" tall. His DOB is 5/14/93.

The boy's mother was adamant that these lighters should have specific child resistant features. She now realizes that her children have reached the age where they might become interested in fire and playing with cigarette lighters, and she feels that if a lighter is offered as a promotional item it should contain appropriate warnings and safety features. She noticed that the packaging and the lighter did have warning labeling, but she didn't pay much attention to the information at the time of purchase.

PRODUCT IDENTIFICATION:

Fireplace/grill lighter: "Aim n Flame" model, plastic handle with black metal tip. Has "trigger" style lighting mechanism, slide on/off switch, and a rotating wheel style switch to adjust the flame height. Lighter is not child resistant. It is manufactured by the Scripto-Tokai Corporation, Fontana, CA. 92337. Made in Mexico.

Warning label on handle states "Warning: Failure to follow instructions can result in burn injury. Danger Lighter contains butane gas under pressure. Extremely flammable. Do not use near fire or flame. Caution: Do not puncture, incinerate or expose to temperature above 120 degrees. Keep and store away from children!"

The lighter was collected as sample #96-830-3546, and was forwarded to CCA via the Sample Custodian on 8/20/96.

APPLICABLE STANDARDS:

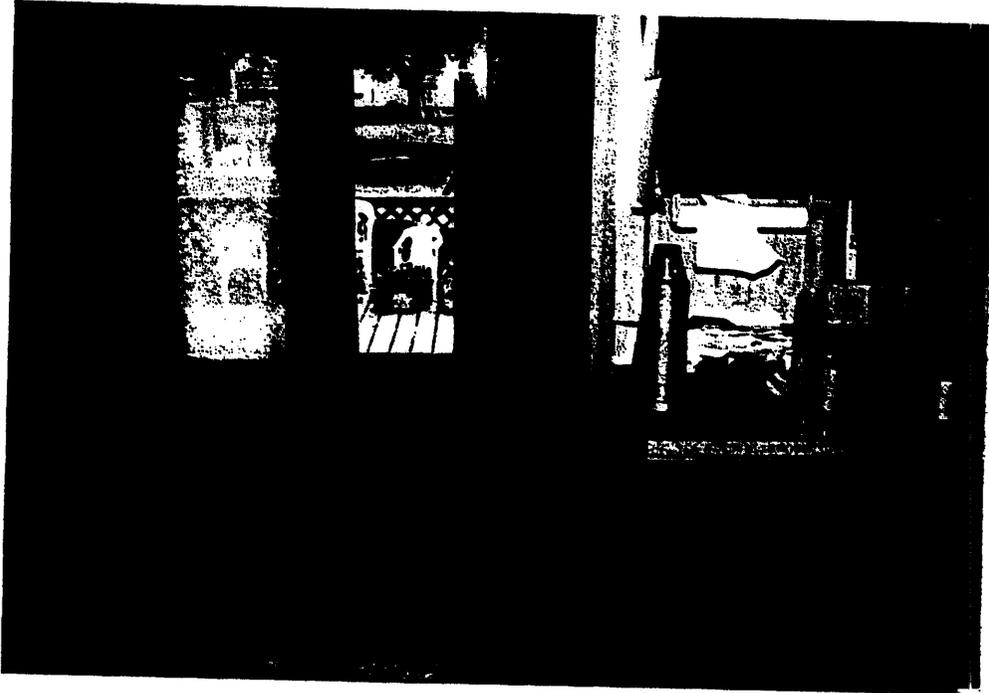
This product would be subject to the Consumer Product Safety Act and the Federal Hazardous Substances Act.

ATTACHMENTS:

Exhibit "A" - CPSC Photographs of the lighter involved in this incident.

- Exhibit "B" - Delavan, WI. Fire Department report.
- Exhibit "C" - Photos taken at the fire scene by the fire investigators.
- Exhibit "D" - Sample Collection Receipt issued to the complainant on 8/19/96 for the lighter involved.
- Exhibit "E" - Sample Collection Report #96-830-3546.
- Exhibit "F" - "Authorization for release of name" form signed by the complainant on 8/19/96.
- Exhibit "G" - Original investigation request.

Exhibit "A"
IDI #960815CCN1696



Photos of the interior of the home where this fire occurred. The counter pictured above is where the grill lighter was kept; the patio door shown is where the fire originated. Much of the damage has been repaired.

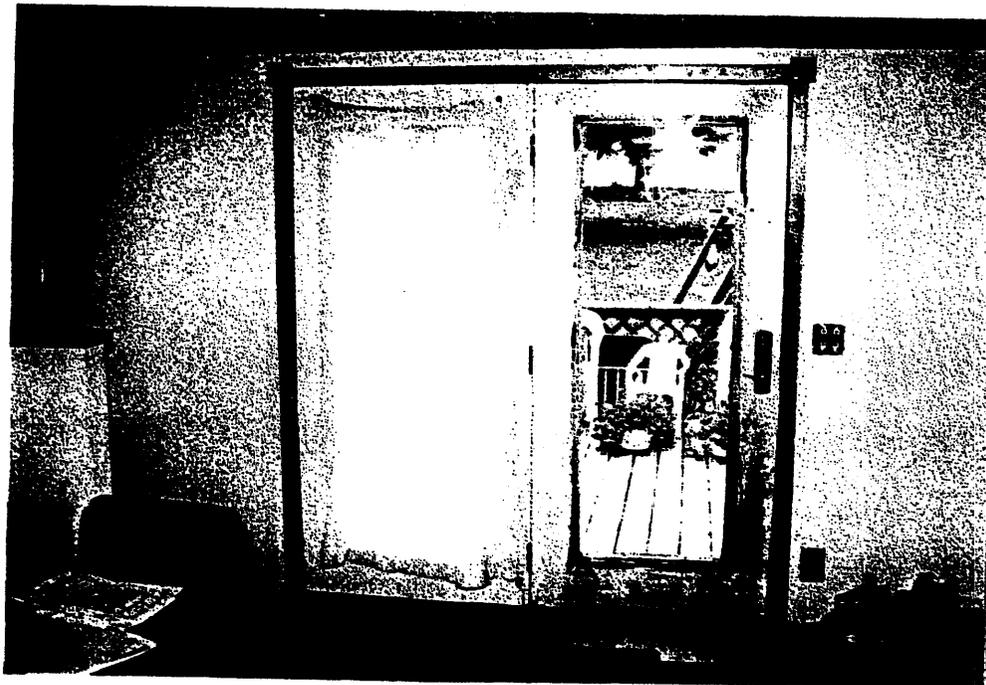
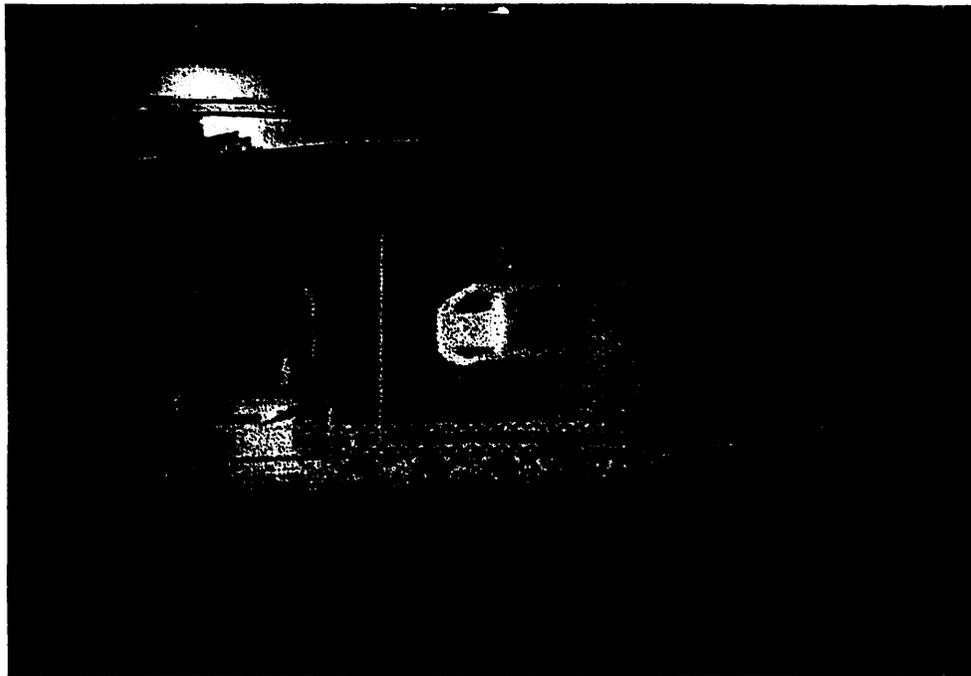


Exhibit "A"
IDI #960815CCN1696



This same curtain material pictured is what the boy first ignited with the grill lighter.

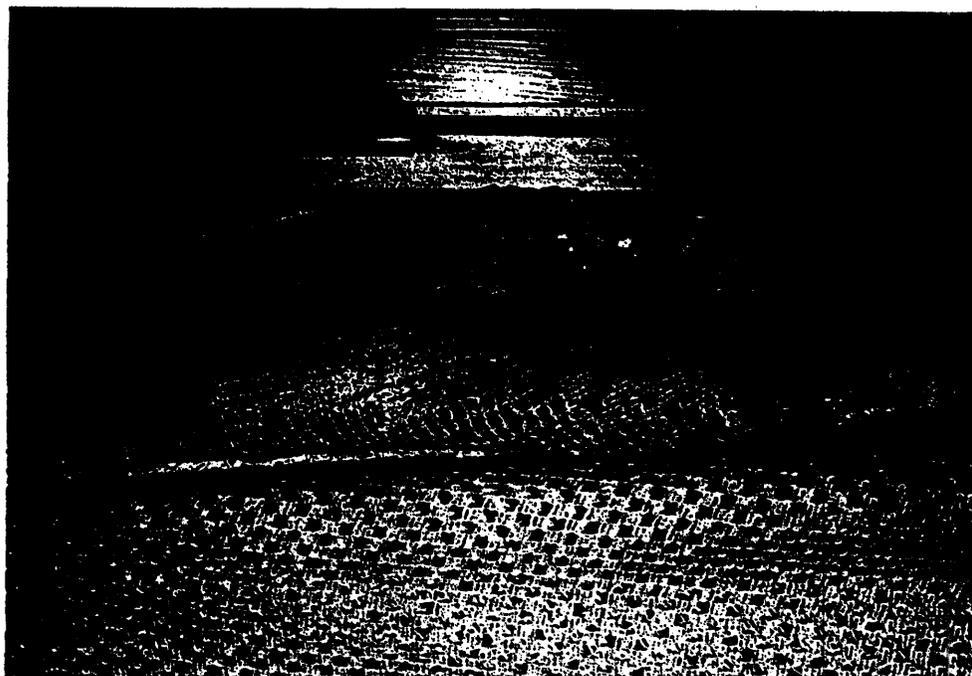
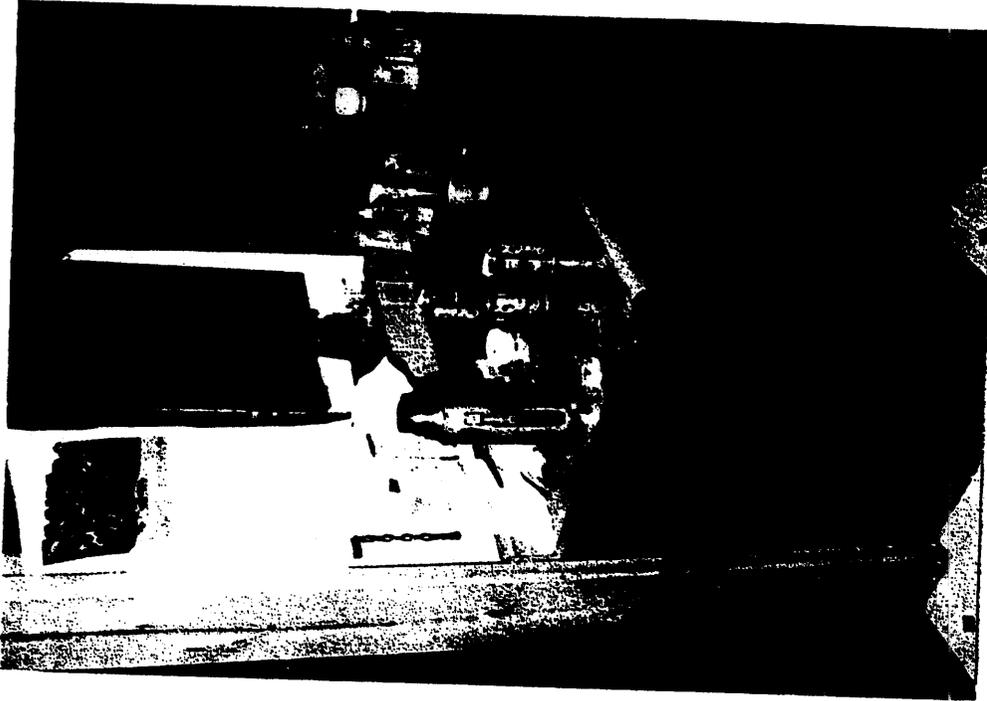
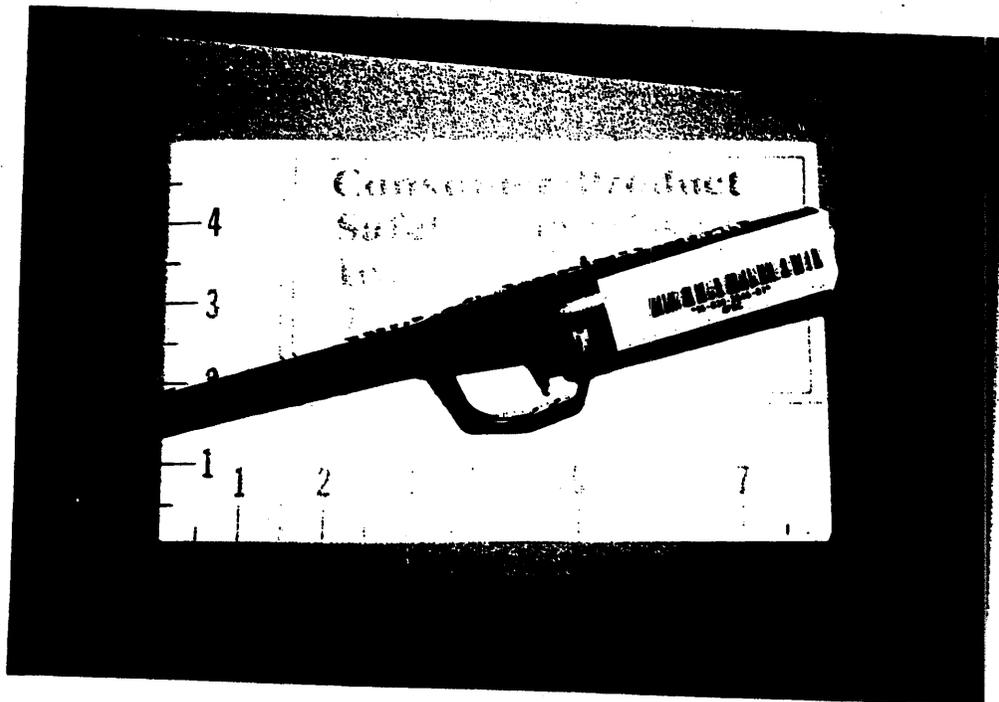


Exhibit "A"
IDI #960815CCN1696



As depicted, misc. items are kept on the kitchen counter top, and the grill lighter was simply placed here without much thought when taken from the cigarette carton it came with. The lighter in question is shown below.



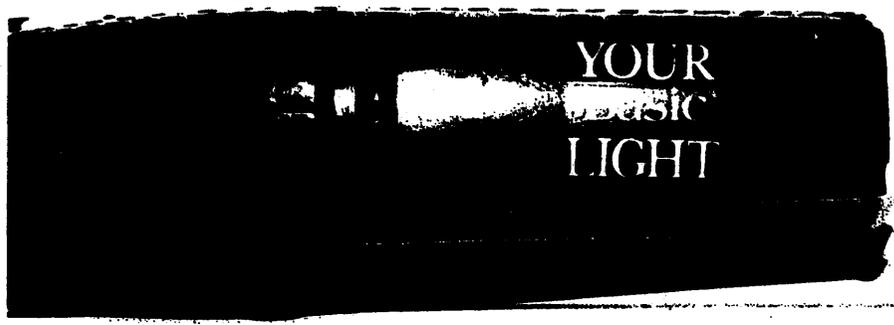
Safety Comm Injury I To



1 2 3 4 5

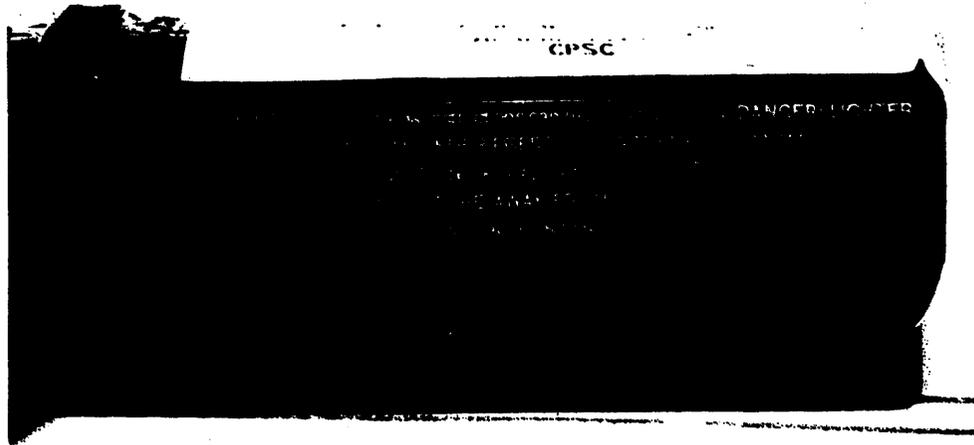
Identification on the lighter.

Consumer Safety Comm



2 4 5 6 7

Exhibit "A"
IDI #960815CCN1696



Warning labeling on the lighter handle. The packaging it came in was discarded.

NEGATIVES

WISCONSIN FIRE INCIDENT REPORTING SYSTEM

Exhibit "B" 8/22/96
 CITY FOI # 960815ccN 1696 (02)

| | | | | | | | | | | | | |
|---|---|--|---|---|---|--|---|--|-----------------------|--------------------------|-----------------------|--|
| A | 10 | FDID 641103 | INCIDENT NO. 86 | EXP. 08 | MO. 07 | YEAR 96 | DAY OF WEEK 1 <input type="checkbox"/> Sunday 3 <input type="checkbox"/> Tuesday 2 <input type="checkbox"/> Monday 4 <input checked="" type="checkbox"/> Wednesday 7 <input type="checkbox"/> Saturday 5 <input type="checkbox"/> Thursday 6 <input type="checkbox"/> Friday | ALARM TIME 22:16 | ARRIVAL TIME 22:21 | BACK IN SERVICE 22:50 | | |
| B | SITUATION FOUND | PARTIAL MENU - SEE HANDBOOK | | | | | | | | | | |
| | 11 <input checked="" type="checkbox"/> Structure Fire | 29 <input type="checkbox"/> Overpressure Rupture | 44 <input type="checkbox"/> Power line down | 54 <input type="checkbox"/> Animal Rescue | 65 <input type="checkbox"/> Steam, gas mistaken for smoke | | | | | | | |
| | 13 <input type="checkbox"/> Vehicle Fire | 32 <input type="checkbox"/> Emergency Medical call | 45 <input type="checkbox"/> Arcing electric equipment | 55 <input type="checkbox"/> Assist Police | 71 <input type="checkbox"/> Malicious false | | | | | | | |
| | 14 <input type="checkbox"/> Brush, grass, leaves | 33 <input type="checkbox"/> Locked-in trapped | 46 <input type="checkbox"/> Aircraft standby | 56 <input type="checkbox"/> Unauthorized burning | 72 <input type="checkbox"/> Bomb Scare | | | | | | | |
| | 15 <input type="checkbox"/> Trash, Rubbish | 34 <input type="checkbox"/> Search | 47 <input type="checkbox"/> Chemical spill | 57 <input type="checkbox"/> Move-up | 73 <input type="checkbox"/> Alarm Malfunction | | | | | | | |
| | 16 <input type="checkbox"/> Explosion, No after fire | 35 <input type="checkbox"/> Extrication | 48 <input type="checkbox"/> Hazardous condition | 58 <input type="checkbox"/> Other service call | 74 <input type="checkbox"/> Unintentional false | | | | | | | |
| | 17 <input type="checkbox"/> Outside spill with fire | 38 <input type="checkbox"/> Rescue-Not classified | 52 <input type="checkbox"/> Water removal | 61 <input type="checkbox"/> Smoke scare | | | | | | | | |
| | 19 <input type="checkbox"/> Other fires not classified | 41 <input type="checkbox"/> Spill, leak-No fire | 53 <input type="checkbox"/> Smoke removal | 63 <input type="checkbox"/> Controlled burn | (Other Code) | | | | | | | |
| | ACTION TAKEN | 1 <input type="checkbox"/> Extinguishment | 5 <input type="checkbox"/> Stand by | 8 <input type="checkbox"/> Fill in, Move up | MUTUAL AID | | | | | | | |
| | | 2 <input type="checkbox"/> Rescue or Assistance | 6 <input type="checkbox"/> Salvage | 9 <input type="checkbox"/> Not classified | 1 <input type="checkbox"/> Rec'd | | | | | | | |
| | | 3 <input checked="" type="checkbox"/> Investigation only | 7 <input type="checkbox"/> Ambulance | 0 <input type="checkbox"/> Undetermined | 2 <input type="checkbox"/> Given | | | | | | | |
| | | 4 <input type="checkbox"/> Remove Hazard | | | | | | | | | | |
| C | FIXED PROPERTY USE (Occupancy) | | | | IGNITION FACTOR GRILL LIGHTER | | | | | | | |
| D | CORRECT ADDRESS (UP TO MAXIMUM OF 21 CHARACTERS) 215 S 6TH STREET | | | | | | | | ZIP CODE | CENSUS TRAC | | |
| E | 11 | OCCUPANT NAME Keebe Tank M | | | TELEPHONE 725-4480 | | | ROOM OR Apt | | | | |
| F | 12 | OWNER NAME [Redacted] | | | ADDRESS | | | TELEPHONE | | | | |
| G | 13 | METHOD OF ALARM | | 4 <input type="checkbox"/> Radio | 8 <input type="checkbox"/> Voice signal municipal alarm signal | CO. INSPECTION DISTRICT | | SHIFT | NO. ALARMS | | | |
| | | 1 <input checked="" type="checkbox"/> Telephone direct | 5 <input type="checkbox"/> Verbal | 9 <input type="checkbox"/> Not classified above | | | | | | | | |
| | | 2 <input type="checkbox"/> Municipal alarm system | 6 <input type="checkbox"/> No alarm rec'd. | 0 <input type="checkbox"/> Undetermined or not reported | | | | | | | | |
| | | 3 <input type="checkbox"/> Private alarm system | 7 <input type="checkbox"/> Tie-line (811) | | | | | | | | | |
| H | NO. FIRE SERVICE PERSONNEL RESPONDED | | NO. ENGINES RESPONDED | | NO. AERIAL APPARATUS RESPONDED | | NO. OTHER VEHICLES RESPONDED | | | | | |
| I | 20 | NUMBER OF INJURIES FIRE SERVICE | | | NUMBER OF FATALITIES FIRE SERVICE | | | NUMBER OF INJURIES CIVILIAN | | | | |
| J | COMPLEX | | | | MOBILE PROPERTY TYPE (COMPLETE LINE S) | | | | | | | |
| K | AREA OF FIRE ORIGIN | | | | EQUIPMENT INVOLVED IN IGNITION (COMPLETE LINE T) | | | | | | | |
| L | FORM OF HEAT IGNITION | | | TYPE OF MATERIAL IGNITED | | | FORM OF MATERIAL IGNITED | | | | | |
| M | METHOD OF EXTINGUISHMENT | | 1 <input type="checkbox"/> Self extinguished | 2 <input type="checkbox"/> Make shift aids | 5 <input type="checkbox"/> Pre-connect hose/tank only | 6 <input type="checkbox"/> Master stream device | | 7 <input type="checkbox"/> Not classified above | | | | |
| | | | | 3 <input type="checkbox"/> Portable extinguisher | 6 <input type="checkbox"/> Pre-connect hose/hydrant draft standpipe | 8 <input type="checkbox"/> Not classified above | | 9 <input type="checkbox"/> Undetermined or not reported | | | | |
| | | | | 4 <input type="checkbox"/> Automatic ext. system | 7 <input type="checkbox"/> Hand-held hose/hydrant draft standpipe | 0 <input type="checkbox"/> Undetermined or not reported | | | | | | |
| | LEVEL OF FIRE ORIGIN | | 1 <input type="checkbox"/> Grade level to 9 ft. | 6 <input type="checkbox"/> Over 70 feet | ESTIMATED TOTAL DOLLAR LOSS (DO NOT SHOW CENTS) | | | NFIRS 1 | | | | |
| | | | 2 <input type="checkbox"/> 10 to 19 feet | 7 <input type="checkbox"/> Objects in flight | [Redacted] | | | Layout 4 | | | | |
| | | | 3 <input type="checkbox"/> 20 to 29 feet | 8 <input type="checkbox"/> Below ground level | | | | DISCLAIMER: No representation is made, intended, or implied as to the validity or accuracy of information shown. | | | | |
| | | | 4 <input type="checkbox"/> 30 to 49 feet | 9 <input type="checkbox"/> Not classified above | | | | | | | | |
| | | | 5 <input type="checkbox"/> 50 to 70 feet | 0 <input type="checkbox"/> Undetermined | | | | | | | | |
| N | Number of Stories | | | | CONSTRUCTION TYPE | | | 6 <input type="checkbox"/> Unprotected ordinary | | | | |
| | 1 <input type="checkbox"/> 1 story | 4 <input type="checkbox"/> 5 to 6 stories | 7 <input type="checkbox"/> 25 to 49 stories | | 1 <input type="checkbox"/> Fire resistant | 7 <input checked="" type="checkbox"/> Protected wood frame | 7 <input type="checkbox"/> Protected wood frame | | | | | |
| | 2 <input checked="" type="checkbox"/> 2 story | 5 <input type="checkbox"/> 7 to 12 stories | 8 <input type="checkbox"/> 50 stories or more | | 2 <input type="checkbox"/> Heavy timber | 8 <input type="checkbox"/> Unprotected wood frame | 8 <input type="checkbox"/> Unprotected wood frame | | | | | |
| | 3 <input type="checkbox"/> 3 to 4 stories | 6 <input type="checkbox"/> 13 to 24 stories | 0 <input type="checkbox"/> Number of Stories undetermined or not reported | | 3 <input type="checkbox"/> Protected noncombustible | 9 <input type="checkbox"/> Not classified above | 9 <input type="checkbox"/> Not classified above | | | | | |
| | | | | | 4 <input type="checkbox"/> Unprotected noncombustible | 0 <input type="checkbox"/> Undetermined or not reported | 0 <input type="checkbox"/> Undetermined or not reported | | | | | |
| | | | | | 5 <input type="checkbox"/> Protected ordinary | | | | | | | |
| O | EXTENT OF DAMAGE | | | Flame | | Smoke | | DETECTOR PERFORMANCE | | | SPRINKLER PERFORMANCE | |
| | 1 <input type="checkbox"/> Confined to the object of origin | 1 <input checked="" type="checkbox"/> | 1 <input type="checkbox"/> | 1 <input type="checkbox"/> Det. in room or space of fire origin - oper. | 1 <input type="checkbox"/> Equipment operated | | 1 <input type="checkbox"/> Equipment should have operated - did not | | | | | |
| | 2 <input type="checkbox"/> Confined to part of room or area of origin | 2 <input type="checkbox"/> | 2 <input type="checkbox"/> | 2 <input type="checkbox"/> Det. not in rm. or space of fire origin - oper. | 2 <input type="checkbox"/> Equipment should have operated - did not | | 2 <input type="checkbox"/> Equipment pre. but fire too small to oper. | | | | | |
| | 3 <input type="checkbox"/> Confined to room of origin | 3 <input type="checkbox"/> | 3 <input type="checkbox"/> | 3 <input type="checkbox"/> Det. in rm. or space of origin - no oper. | 3 <input type="checkbox"/> Not classified above | | 3 <input type="checkbox"/> Not classified above | | | | | |
| | 4 <input type="checkbox"/> Confined to the fire-rated comp. of origin | 4 <input type="checkbox"/> | 4 <input type="checkbox"/> | 4 <input type="checkbox"/> Det. not in rm. or space of origin, - no oper. | 4 <input type="checkbox"/> Undetermined or not reported | | 4 <input type="checkbox"/> Undetermined or not reported | | | | | |
| | 5 <input type="checkbox"/> Confined to floor of origin | 5 <input type="checkbox"/> | 5 <input type="checkbox"/> | 5 <input type="checkbox"/> Det. not in rm. or space of fire origin, but fire too small to oper. | 5 <input type="checkbox"/> No equipment present | | 5 <input type="checkbox"/> No equipment present | | | | | |
| | 6 <input type="checkbox"/> Confined to structure of origin | 6 <input type="checkbox"/> | 6 <input type="checkbox"/> | 6 <input type="checkbox"/> Undetermined or not reported | | | | | | | | |
| | 7 <input type="checkbox"/> Extended beyond structure of origin | 7 <input type="checkbox"/> | 7 <input type="checkbox"/> | 7 <input type="checkbox"/> No detectors present | | | | | | | | |
| | | | 9 <input type="checkbox"/> No damage of this type (N/A) | | | | | | | | | |
| Q | TYPE OF MATERIAL GENERATING MOST SMOKE IF SMOKE SPREAD BEYOND ROOM OF ORIGIN | | | | AVENUE OF SMOKE TRAVEL | | | 7 <input type="checkbox"/> Utility opening in floor | | | | |
| | | | | | 1 <input type="checkbox"/> Air handling duct | 4 <input type="checkbox"/> Stairwell | 9 <input type="checkbox"/> Not classified above | | | | | |
| | | | | | 2 <input type="checkbox"/> Corridor | 5 <input type="checkbox"/> Opening in construction | 0 <input type="checkbox"/> Undetermined or not reported | | | | | |
| | | | | | 3 <input type="checkbox"/> Elevator shaft | 6 <input type="checkbox"/> Utility opening in wall | 8 <input type="checkbox"/> No avenue of smoke travel | | | | | |
| R | FORM OF MATERIAL GENERATING MOST SMOKE IF SMOKE SPREAD BEYOND ROOM OF ORIGIN | | | | DOOR CURTAINS | | | | | | | |
| S | 30 | IF MOBILE PROPERTY | | YEAR | MAKE | MODEL | SERIAL NO. | | LICENSE NO. | | | |
| T | 40 | IF EQUIPMENT INVOLVED IN IGNITION | | YEAR | MAKE | MODEL | SERIAL NO. | | | | | |

INCIDENTS

FOR ALL FIRES

COMPLETE IF STRUCTURE FIRE

96081500N1696

**DELAVAN FIRE DEPARTMENT
INCIDENT ATTENDANCE FORM**

| | | | | |
|--------------------|-----------|-------|--------------|------------|
| DATE <u>8/7/96</u> | ON SCENE | 22:21 | TYPE FIRE | STRUCTURAL |
| DISPATCH 22:11 | RETURNING | 22:40 | TYPE SQUAD 1 | |
| ENROUTE 22:21 | QUARTERS | 22:55 | | |

| | | | | |
|------------------|-----|----------------|-----|-----|
| UNITS RESPONDING | E-3 | E-2 | T-4 | |
| | T-1 | T-5 | T-7 | S-8 |

| NO. | NAME | TIME IN | TIME OUT | NO. | NAME | TIME IN | TIME OUT |
|----------------|------------------------|---------|----------|-----|---------------------|---------|----------|
| 603 | BRITT, JAMES | X | | 607 | LEITZKE, BRIAN | ✓ | |
| 690 | BRYANT, JAMES | X | | 648 | LOFY, JEFF | | |
| 664 | BUHLER, STEVE | | | 653 | LOGTERMAN, GLEN | | |
| 650 | BUNNELL, FRANK | | | 646 | LUDOWISE, BOB | X | |
| 655 | CHAPMAN, BOB | X | | 687 | MURRAY, TIM | | |
| 609 | DEMBNY, KYLE | X | | 667 | NIEUWENHUIS, ELI | | |
| 602 | DODGE, KIRK | | | 683 | NIEUWENHUIS, LARRY | X | |
| 612 | FLOOD, NEILL | X | | 682 | NIEUWENHUIS, MELVIN | | |
| 663 | FLOOD, PAT | ✓ | | 668 | NIEUWENHUIS, PETER | | |
| 636 | GRAIR, RON | ✓ | | 608 | O'NEILL, JOHN | ✓ | |
| 611 | HACKET ALLYN | X | | 621 | O'NEILL, TIM | | |
| 691 | HEFLICK, TROY | ✓ | | 657 | PIETERS, BOB | X | off duty |
| 616 | HEIMSTRA, DON | | | 641 | SMITH, LYLE | X | |
| 634 | HEMBROOK, KEVIN | | | 639 | STROHM, GREG | X | |
| 635 | KARSTETTER, JOHN | | | 640 | STURTEVANT, TIM | X | |
| 613 | KOLANDA, KEITH | X | | 645 | VITULLO, CHRIS | | |
| 644 | KROPACEK, RICK | ✓ | | 674 | WALTERS, FRITZ | ✓ | |
| 679 | KUEHNI, PAUL | ✓ | | 632 | YOUMANS, BOB | ✓ | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| | | | | |
|----------------------|---|--------|--------------------|----|
| TOTAL GALLONS PUMPED | 0 | | INCIDENT COMMANDER | |
| TOTAL HOSE LAID | 0 | 2 1/2" | Flood | 5" |

COMMENTS
 She went out to the garage for a few minutes
 Bill Boushwood said he saw door on fire Bill
 + Scott Kropack put out fire. Three (3) year old Ross
 started curtain on fire w/aim N Flame Ryan

American Family - Wendal Painter Clinton.

Evid. # 6

8/21/86

| | | | |
|---|--|---|--|
| U.S. CONSUMER PRODUCT SAFETY COMMISSION | | 1. ARE FOI # 960815CCN1696 CPSC - MILITARY RECEIPT NO. 21 W376 1878 WOODRIDGE LN. WATKINSA, W. 53188 | |
|---|--|---|--|

| | | |
|--|---------------------------------------|---------------------------|
| 2. NAME OF INDIVIDUAL Ksepke | 3. TITLE OF INDIVIDUAL Sage | 4. DATE 8/14/86 |
|--|---------------------------------------|---------------------------|

| | |
|-----------------------------|--|
| 5. FIRM NAME Self | 8. SAMPLE NUMBER 96-500-3546 |
|-----------------------------|--|

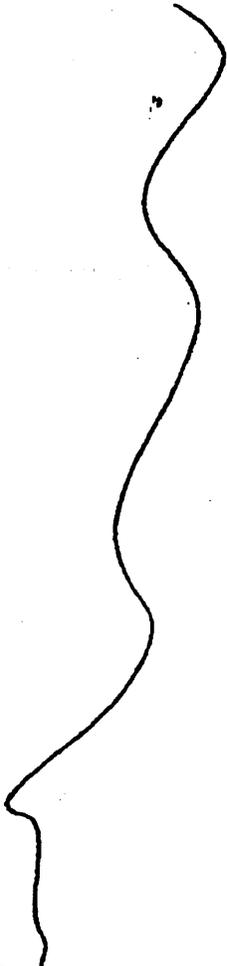
| | |
|--|--|
| 7. NUMBER AND STREET 329 S 6th St. | 8. CITY AND STATE (Include Zip Code) DECATUR, W. 53115 |
|--|--|

9. SAMPLES COLLECTED (Describe fully. List lot, serial, model numbers and other positive identification)

The following samples were collected by the Consumer Product Safety Commission pursuant to Section 27(f) of the Consumer Product Safety Act (15 U.S.C. 2070(f) and/or Section 11(b) of the Federal Hazardous Substances Act (15 U.S.C. 1170(b) and/or Sections 5(c) and (d) of the Flammable Fabrics Act (15 U.S.C. 1194(c) and (d) and/or Section 704(c) of the Federal Food Drug and Cosmetic Act (21 U.S.C. 374(c)) [Authority for sample collections made in connection with the Poison Prevention Packaging Act of 1970 (15 U.S.C. 1471 et seq.)], and receipt for said samples is hereby acknowledged. Sections cited are quoted on the reverse side of this form.

1 - USED 'AM N FLAME MODEL GRILL Lighter,
manufactured by Scripto-Titan Corp,
Poulsboro, CA. 92337. Black.

unit involved in FOI # 960815CCN 1696.



| | | | | | |
|---|--|--|--|---|--|
| 10. AMOUNT RECEIVED FOR SAMPLE | | 11. SAMPLES WERE | | 12. COLLECTOR | |
| b. SIGNATURE (Person with whom sample received) Budget King | | <input type="checkbox"/> PURCHASED <input type="checkbox"/> BORROWED (To be returned) | | b. NAME (Print or type) Dennis P. Blasi | |
| | | | | b. SIGNATURE D. Blasi | |

Exhibit "D"

8/20/96

DRB

U.S. Consumer Product TOE #960815CCN1696

SAMPLE COLLECTION REPORT

| | | | |
|----------------|------------------------------|---|--|
| 1. Sample Flag | 2. Date Collected 8/19/96 | 3. Sample Type and Number: 96-830-3546 <input checked="" type="radio"/> Physical <input type="radio"/> Documentary | |
|----------------|------------------------------|---|--|

| | | | |
|--|--------------------------|------------------|---------------------------------------|
| 4a Product Name GRILL/FIREPLACE LIGHTER | 4b Model AIM 'N FLAME | 4c NEISS 1285 | 5. Assignment Number 960815CCN1696 |
|--|--------------------------|------------------|---------------------------------------|

| | | |
|---|--------------------|---|
| 6. Complete for Import Samples Port of Entry: _____ Country of Origin: _____ Entry No. and Date: _____ Customs Contact: _____ | 7. MIS 32826 | 8. Hours Activity _____ Travel _____ 2 |
| | 9a Home RO FOWR | 9b Collecting RO FOCR |

| | | | |
|-----------------|--------------------------|----------------------|--------------|
| 10. Sample Cost | 11. Invoice Value of Lot | 12. Size of Lot 1 | Units unt |
|-----------------|--------------------------|----------------------|--------------|

| | | |
|--|--|---|
| 13. Manufacturer/Importer # SCR012 SCRIPTO-TOKAI CORP. FONTANA, CA 92337 | 14. Shipper/Foreign Manufacturer SUPER AMERICA GAS STATION 803 GENEVA STREET DELAVAN, WI. 53135 | 15. Dealer/Import Broker # PAULA KOEPKE 329 S. 6TH STREET DELAVAN, WI. 53135 |
|--|--|---|

16. Supporting documents attached:
 Invoice No. and Date: _____ Date Shipped: _____
 Shipping Record and Date: _____
 Affidavit Signer's name, title and date: _____

17. Product Identification:
 Product is described as a "Aim 'n Flame" model butane grill/fireplace lighter manufactured by #13 above. The lighter is all black, 9" long, with a plastic handle and a metal tip. It has a "trigger" style

18. Reason for collection/analysis needed: FHSA CPSC FFA PPA RSA

19. Summary of Field Screening:
 None. A visit to the gas station where the lighter was originally purchased determined that the lighter promotion is not ongoing as of 8/19/96.

20. Sample size/Method of Collection:
 Sample was collected directly from the complainant during on-site visit to their home on 8/19/96. Lighter remained in my custody or in the locked CPSC office from time of collection until later shipment to

| | |
|--|--|
| 21. Identification on sample: 96-830-3546 DRB 8/19/96 | 22. Identification on seal and date: 96-830-3546 Dennis Blasius 8/20/96 |
|--|--|

| | | |
|---|---------------------|------------------------------------|
| 23a Sample delivered to: SAMPLE CUST VIA RPS | 23b Date 8/21/96 | 24. Report/Record Sent to: FOWR |
|---|---------------------|------------------------------------|

25. Laboratory/Office: LSHL ___ LSEL ___ CRM ___ CCA X Other WALLACE

26. Remarks:
 Please forward to Catherine Wallace, CCA. Attached: SCR. original investigation request.

27. Related Samples: None

| | |
|---|--|
| 28a Collector's name/title: Dennis Blasius Resident Investigator | 28b Collector's signature/date: <i>Dennis Blasius</i> 8/20/96 |
|---|--|

| | |
|----------------------------|--------------------------------|
| 29a Reviewer's name/title: | 29b Reviewer's signature/date: |
|----------------------------|--------------------------------|

960815CCN1696

PRODUCT IDENTIFICATION

lighting switch, a slide on/off switch, and a rotating wheel style switch to adjust the flame height. There is a sticker on the handle stating "Your BASIC Light."

METHOD OF COLLECTION

the Sample Custodian via RPS on 8/21/96. Sample was labeled as ID'd in #21, and shipped in an envelope sealed as ID'd in #22.

U.S. CONSUMER PRODUCT SAFETY COMMISSION

AUTHORIZATION FOR RELEASE OF NAME

Thank you for assisting us in collecting information on a potential product safety problem. The Consumer Product Safety Commission depends on concerned people to share product safety information with us. We maintain a record of this information, and use it to assist us in identifying and resolving product safety problems.

We routinely forward this information to manufacturers and private labelers to inform them of the involvement of their product in an accident situation. We also give the information to others requesting information about specific products. Manufacturers need the individual's name so that they can obtain additional information on the product or accident situation.

Would you please indicate on the bottom of this page whether you will allow us to disclose your name. If you request that your name remain confidential, we will of course, honor that request. After you have indicated your preference, please sign your name and date the document on the lines provided.

You are hereby authorized to disclose my name and address with the information collected on this case.

My identity is to remain confidential.

Bud At Kerk
(Signature)

AUG 19 1996
(Date)

Exhibit "F"

8/20/96

Author: Marc J. Schoem at CPSC-HQ2

Date: 8/15/96 1:59 PM

Priority: Urgent

Receipt Requested

Subject: Hotline Incident, scripto utility lighter

DOI # 960815 CEN 1696

(99)

----- Message Contents -----

Can this incident be assigned for an IDI ASAP! We are now negotiating with Philip Morris over their promotion with Basics as well as discussing changes needed with Scripto. I am in contact with consumer at this time, but may need assistance in collecting sample. Can FOCR please contact fire department and obtain their report. Thanks. If contact needs to be made with consumer, I will advise. --GEORGE RUTHERFORD - PLEASE ASSIGN CAA NUMBER!

Forward Header

Subject: Hotline Incident, scripto utility lighter

Author: Catherine C. Harris at CPSC-HQ1

Date: 8/15/96 11:27 AM

Attached file contains a report on a hotline incident.

960815 ECN 1096

Author: Marc J. Schoem at CPSC-HQ2
Date: 8/15/96 4:14 PM
Priority: Urgent
Receipt Requested
Subject: Scripto Aim N Flame Lighter Incident

----- Message Contents -----

As discussed, FOCR will assign an IDI number for the latest hotline incident.

The following information is needed from Paula Koepke:

1. How was the utility lighter being used?
2. How many of the promotional cartons of Basics did she purchase over what time period?
3. Does she smoke?
4. Has she or anyone in the house ever used the utility lighter to light anything other than a barbecue grill, i.e., cigarettes, stove, cigar, pipe etc.
5. Were any of the users of the utility lighter aware of the warnings contained on the Basics lighter and package?

Thanks

*Pls cc: Mail answer to the questions
to Marc Schoem*

CONSUMER PRODUCT INCIDENT REPORT

Region: **CENTRAL**

| | |
|--|---|
| 1. NAME OF RESPONDENT Paula Koepke | 2. PHONE NO. (HOME) (WORK) 414-728-4480 414-728-5531 |
| 3. STREET ADDRESS 329 South 6th Street | 4. CITY STATE ZIP CODE Delavan WI 53115 |

5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES
 Igniter was on counter when son turned on igniter by sliding its child resistant lever off; igniter ignited curtains which resulted in a fire causing \$6,000 worth of damage. City of Delavan Fire Department extinguished fire.

-cont-

| | | |
|---|---|---|
| 6. DATE OF INCIDENTS 8/7/96 | 7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX AND DESCRIBE INJURY: 3 Y/M none | 8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME RELATIONSHIP Ross son |
| 9. DESCRIPTION OF PRODUCT butane gas grill igniter w/cigarettes | | 10. BRAND NAME: Aim N Flame |

| | |
|---|--|
| 11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE unknown, Made in Mexico unknown unknown unknown Scripto-Tokai Corporation unknown Fontana, CA 92337 | 12. MODEL, SERIAL NUMBERS unknown 13. DEALER'S NAME, ADDRESS & PHONE Super America Geneva Street Delavan, WI 53115 unknown |
|---|--|

| | |
|--|---|
| 14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES NO x IF YES, BEFORE OR AFTER THE INCIDENT? DESCRIBE: | 15. PRODUCT PURCHASED NEW x USED DATE PURCHASED 6/96 AGE 2 mos. 16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: "Keep away from children. Do not puncture, incinerate or expose to temperature over 120 degrees." |
|--|---|

| | | |
|---|---|--|
| 17. HAVE YOU CONTACTED THE MANUFACTURER? YES NO x IF NOT, DO YOU PLAN TO CONTACT THEM? YES NO x OTHER? | 18. IS THE PRODUCT STILL AVAILABLE? YES x NO IF NOT, ITS DISPOSITION | 19. MAY WE USE YOUR NAME WITH THIS REPORT? YES x NO |
|---|---|--|

FOR ADMINISTRATION USE

| | | |
|--|---|--------------------------------------|
| 20. DATE RECEIVED 08/14/96 | 21. RECEIVED BY (NAME & OFFICE) ctw/HL | 22. DOCUMENT NO. H9680132A |
| 23. FOLLOW-UP ACTION 960815CCW1696 | | 24. PRODUCT CODE(S) 1285 |
| 25. DISTRIBUTION | 26. ENDORSER'S NAME & TITLE CCH 8/15/1996 | |

960 815 ECN 1696

CONSUMER PRODUCT INCIDENT REPORT

H9680132A

Narrative Continued

Approximately 8.5 long black igniter was given as a promotional item with Basic Light brand cigarettes, manufactured by Philip Morris Company, TEL: 1-800-343-0975.

8/13/96 Consumer called cigarette manufacturer, explained incident to Cheryl Scott (title unknown) who said manufacturer's purchasing agent would call consumer back.

Distributor phone #: unknown

CPSC Source: S/GOVT

Author: Barbara J. Jacobson at CPSC-HQ2
Date: 8/16/96 3:14 PM
Priority: Normal
TO: Linda E. Smith
Subject: Re: Grill lighter fire in Delavan, WI.

----- Message Contents -----

Linda - Just for your information - a new incident on grill lighters.

Forward Header

Subject: Re: Grill lighter fire in Delavan, WI.
Author: Marc J. Schoem at CPSC-HQ2
Date: 8/16/96 8:46 AM

Dennis - I appreciate the report - It's very helpful in my dealings with Philip Morris as well as Scripto. Appreciate the quick turnaround as well. Thanks again.

Reply Separator

Subject: Grill lighter fire in Delavan, WI.
Author: Dennis R. Blasius at cpsc-hq1
Date: 8/15/96 6:05 PM

Mark-

I just got off the telephone with Paula Koepke, and will send you the complete IDI report tomorrow. Regarding your specific questions:

She received the lighter free with either 2 or 3 packs of "Basics" lights cigarettes when she purchased the cigarettes on 6/24/96. The lighter was enclosed in the same carton/packaging as the cigarettes. She purchased the cigarettes from a local Super America gas station. She has never purchased cigarettes and received a similar promotion before or since. She paid no specific attention to the warning labeling on the lighter or packaging.

Paula (mother) is the only one in house who smokes. She normally leaves her standard cigarette lighters (they may or may not be child resistant, depending on what she happened to buy) on the kitchen counter or on the coffee table in the den. The 3 year old boy that started the fire and his six year old sister have ready access to lighters, but had never shown any prior interest in them. The promotional grill lighter has been kept on the kitchen counter continuously since first being purchased, and the kids have had access to it should they have desired to. The lighter has only been used two or three times total by the husband to start the outdoor gas grill; no one has used this lighter for any other purpose. The mother doesn't believe that the children have ever seen anyone use the lighter. It is not known how the 3 year old actually ignited the lighter, he has been questioned by FD and parents but clams up. The boy has several toys with the same slide-to-side style on/off switch, and the mother believes he would have recognized the switch mechanism from that experience. He first ignited the lacy floor length curtains that hang on the french patio doors- this is approximately 12' from where the lighter was kept on the kitchen counter.

I will be going to Delavan on Monday 8/19 to collect the lighter as

a sample and pick up the FD report and scene pictures.

If you need anything more, e-mail me before that! Paula apologizes for not returning your call, she had trouble dialing long distance from work, and I called her just as she got home today.

The IDI # assigned is 960815CCN1696; the sample # will be 96-830-3546.

Dennis

entire

Author: Kate H. Wallace at CPSC-HQ2

Date: 8/16/96 9:04 AM

Priority: Normal

TO: Linda E. Smith

Subject: Grill Lighter

----- Message Contents -----

Here's one more: H9680132A; 960815CCN1696; Delavan, WI, 8/7/96;
Three year old male ignited lace curtains (\$6000 PD) with BASICS brand
Aim 'n Flame kept on kitchen counter.

EFHAA

ACCIDENT INVESTIGATION REQUEST FORM

Document Number H9680132A

Date of Incident 8/7/94 Category I.D. SECT RW 1994

Follow-Up Requested Hazard Analysis Section 15

Type Follow-Up Requested Telephone Call On-Site

Headquarters Contact Kate Wallace

Assignment Message Please conduct an on-site investigation on this lighter. Obtain samples, if available and fire report.

Person(s) to Contact Paula Koepke

329 South 6th St.

DeLavan, WI 53115

(H) 414-728-4480 (W) 414-728-5531

Gridline _____

Requested By _____

Task Number 960816 CAA 5524

Assigned to CHIC Date 8/16/94

960815 CCN 1696

CONSUMER PRODUCT INCIDENT REPORT

Region: CENTRAL

| | | | |
|---|--|---|--|
| 1. NAME OF RESPONDENT Paula Koepke | | 2. PHONE NO. (HOME) (WORK) 414-728-4480 414-728-5531 | |
| 3. STREET ADDRESS 329 South 6th Street | | 4. CITY STATE ZIP CODE Delavan WI 53115 | |
| 5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES Igniter was on counter when son turned on igniter by sliding its child resistant lever off; igniter ignited curtains which resulted in a fire causing \$6,000 worth of damage. City of Delavan Fire Department extinguished fire. | | | |

-cont-

| | | |
|--|--|--|
| 6. DATE OF INCIDENTS 8/7/96 | 7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX AND DESCRIBE INJURY: 3 Y/M none | 8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME RELATIONSHIP Ross son |
| 9. DESCRIPTION OF PRODUCT butane gas grill igniter w/cigarettes | | 10. BRAND NAME Aim N Flame |

| | | |
|--|--------------------------------------|--|
| 11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE unknown, Made in Mexico unknown unknown unknown Scripto-Tokai Corporation unknown Fontana, CA 92337 | 12. MODEL, SERIAL NUMBERS unknown | 13. DEALER'S NAME, ADDRESS & PHONE Super America Geneva Street Delavan, WI 53115 unknown |
|--|--------------------------------------|--|

| | | |
|---|--|--|
| 14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES NO x IF YES, BEFORE OR AFTER THE INCIDENT? DESCRIBE: | 15. PRODUCT PURCHASED NEW x USED DATE PURCHASED 6/96 AGE 2 mcs. | 16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: "Keep away from children. Do not puncture, incinerate or expose to temperature over 120 degrees." |
|---|--|--|

| | | |
|--|--|---|
| 17. HAVE YOU CONTACTED THE MANUFACTURER? YES NO x IF NOT, DO YOU PLAN TO CONTACT THEM? YES NO x OTHER? | 18. IS THE PRODUCT STILL AVAILABLE? YES x NO IF NOT, ITS DISPOSITION | 19. MAY WE USE YOUR NAME WITH THIS REPORT? YES x NO |
|--|--|---|

FOR ADMINISTRATION USE

| | | |
|---|--|-------------------------------|
| 20. DATE RECEIVED 08/14/96 | 21. RECEIVED BY (NAME & OFFICE) ctw/HL | 22. DOCUMENT NO. H9680132A |
| 23. FOLLOW-UP ACTION <i>960814 CAA5524</i> | | 24. PRODUCT CODE(S) 1285 |
| 25. DISTRIBUTION | 26. ENDORSER'S NAME & TITLE CCH 8/15/1996 | |

• Narrative Continued

Approximately 8.5 long black igniter was given as a promotional item with Basic Light brand cigarettes, manufactured by Philip Morris Company, TEL: 1-800-343-0975.

8/13/96 Consumer called cigarette manufacturer, explained incident. to Cheryl Scott (title unknown) who said manufacturer's purchasing agent would call consumer back.

Distributor phone #: unknown

CPSC Source: S/GOVT

Author: Marc J. Schoem at CPSC-HQ2

Date: 8/15/96 01:59 PM

Priority: Urgent

Receipt Requested

TO: Eric B. Ault at CPSC-CRO

TO: John R. Vece at CPSC-CRO

TO: James A. Miersch at CPSC-CRO

TO: Robert C. Okarski at CPSC-CRO

CC: Kate H. Wallace

CC: David Schmeltzer

CC: Eric L. Stone

CC: George W. Rutherford

CC: Arthur K. McDonald

CC: Joyce E. Coonley

CC: Jack T. Kramer

Subject: Hotline Incident, scripto utility lighter

----- Message Contents -----

Can this incident be assigned for an IDI ASAP! We are now negotiating with Philip Morris over their promotion with Basics as well as discussing changes needed with Scripto. I am in contact with consumer at this time, but may need assistance in collecting sample. Can FOCR please contact fire department and obtain their report. Thanks. If contact needs to be made with consumer, I will advise. --GEORGE RUTHERFORD - PLEASE ASSIGN CAA NUMBER!

----- Forward Header -----

Subject: Hotline Incident, scripto utility lighter

Author: Catherine C. Harris at CPSC-HQ1

Date: 8/15/96 11:27 AM

Attached file contains a report on a hotline incident.

| | | | | |
|--|--|---|---|---|
| 1. TASK NUMBER 960816CCC5518 | | 2. INVESTIGATOR'S ID 8189 | | EPIDEMIOLOGIC INVESTIGATION REPORT |
| 3. OFFICE CODE 800 | 4. DATE OF ACCIDENT YR MO DAY 96/07/12 | 5. DATE INITIATED YR MO DAY 96/08/29 | | |
| 6. SYNOPSIS OF ACCIDENT OR COMPLAINT This investigation involved a residential fire that was started by a three year old and four year old boy and girl playing with a fueled charcoal lighter. Unknown to the children's mother, the children were playing with the lighter in a bedroom closet and ignited unspecified materials in the closet. No injuries occurred. | | | | |
| 7. LOCATION (Home, School, etc.) Home 10 | | 8. CITY Casar | | 9. STATE NC |
| 10A. FIRST PRODUCT Fuel Charcoal Lighter 1247 | | 10B. TRADE/BRAND NAME unknown | | 10C. MODEL NUMBER unknown |
| 10D. MANUFACTURER NAME AND ADDRESS unknown <i>MFR/PRVILBR NOTIFIED</i> <i>No Comments made</i> <i>Comments attached</i> <i>Excisions/Revisions</i> <i>Firm has not requested</i> <i>further notice</i> | | | | |
| 11A. SECOND PRODUCT unknown 0000 | | 11B. TRADE/BRAND NAME NA CPSA 6 <i>10/11/97</i> <i>Cleared</i> <i>25C</i> <i>No Mfrs/Prvilbrs</i> | | 11C. MODEL NUMBER NA |
| 11D. MANUFACTURER NAME AND ADDRESS NA <i>Products Identified</i> <i>Excepted by ANPR</i> <i>Firms Notified</i> <i>Comments Processed</i> <i>6/30/97</i> | | | | |
| 12. AGE OF VICTIM -000 999 | 13. SEX 0 <i>No Injury</i> | 14. DISPOSITION no injury 0 | 15. INJURY DIAGNOSIS no injury 70 | |
| 16. BODY PART (S) INVOLVED no injury 99 | 17. RESPONDENT Fire Investigators -23 | 18. TYPE OF INVESTIGATION Other 3 | 19. TIME SPENT (OPERATIONAL HOURS) 09.0 | |
| 20. ATTACHMENT(S) Multi 9 | 21. CASE SOURCE Newspaper 05 | 22. SAMPLE COLLECTION NUMBER None | | |
| 23. PERMISSION TO DISCLOSE NAMES (NON HEISS CASES ONLY) No | | | | |
| 24. REVIEW DATE 961029 | 25. REVIEWED BY 8342 | | 26. REGIONAL OFFICE DIRECTOR RDS 10-31-96 | |
| 27. DISTRIBUTION O:EHDS CC: | | | | |

NOTE: This investigation involved a child playing with a lighter however the lighter was not a disposable cigarette lighter but rather a grill lighter/fueled charcoal lighter. The information in this report was limited to that provided by the fire department/fire marshal as I was never able to reach the parents of the child that was playing with the lighter. The lighter was in the possession of the fire marshal and photographed at the fire marshal's office.

PRE-ACCIDENT:

The residence involved in this fire was a one and one-half story frame residence. The residence was occupied by a husband and wife and their children ages 3 and 4. The children were a boy and girl but the fire department did not know which one was three and which one was four. I was not able to determine if the residence had a smoke alarm.

ACCIDENT:

The fire occurred on the morning of July 12, 1996 and was reported at 9:22 am. The mother discovered the fire and called the fire department. The mother of the children reported to the fire department that the fire started in the living room.

POST-ACCIDENT:

The fire department extinguished the fire but the residence suffered smoke damage throughout and heavy damage to the front bedroom and damage to the living room. The fire department requested assistance from the county fire marshal. The heaviest damage was found in the front bedroom closet. There was no ignition source in the closet, light, etc. The fire marshal interviewed the children and the girl admitted that her brother started the fire in the bedroom closet. She stated that he used a lighter. The fire investigator found in the bottom of the closet the lighter seen in the attached photographs. This is the lighter used by the male child to start the fire.

PRODUCT IDENTIFICATION:

The mother reported that the lighter involved in the ignition was given to them the day before the fire by a relative. She was not aware that the children had the lighter and was not aware that they had been playing in the bedroom closet as the room was off limits to the children because the father had firearms stored in the room. I could not determine where the lighter was when the children obtained the lighter.

The lighter involved in the ignition is a grill lighter/fueled charcoal lighter. It operated by a trigger mechanism and was not believed to be child resistant by the fire investigators. The operation required only one motion, a trigger mechanism. It also had a switch to adjust the flame height. I could not determine the manufacturer or brand of the lighter from the burned and damaged lighter. The fire officials had not determined the brand and I was never able to reach the parents whom may have been able to determine the brand or put me in touch with the relative that purchased the lighter. I could not determine where the lighter was purchased.

The materials which were ignited in the closet by the child were not identified.

STANDARD INFORMATION:

There are mandatory standards for inexpensive disposable butane lighters and novelty lighters but not grill lighters such as the lighter involved in this fire.

EXHIBITS:

- Exhibit 1 - Fire Marshal Report
- Exhibit 2 - Photographs of Lighter

CLEVELAND COUNTY FIRE MARSHAL REPORT
NOT PUBLIC RECORD
FOR FIRE DEPARTMENT USE ONLY

Case Number: 96102.CVA

Date: 7-12-96

Called in By: [REDACTED]

Exhibit 1
960816 0005518
8189 112

Type of Fire: STRUCTURAL

Time Called in: 09:22

Truck 10-8: 09:23

Truck 10-23: 09:25

Location of Fire: [REDACTED]

Departments Responding: CASAR & POLKVILLE VFDs

Officer in Charge: ASST CHIEF RANDY WILLIAMS

Attack: KENNY PARKER & ALLEN HUDSON

Owner: [REDACTED] ESTATES

Owner Phone:

Occupant: [REDACTED]

Occupant Phone: [REDACTED]

Insurance Company:

Vin & Tag Number:

Investigators: DEPUTY FIRE MARSHAL DEWEY C .COOK & FIRE INSPECTOR PERRY DAVIS

TIME 09:22 RESPONDED TO A STRUCTURAL FIRE AT [REDACTED] ROAD TO ASSIST IN EXTINGUISHMENT. WHILE ENROUTE FIRE IS REPORTED UNDER CONTROL BY ASST. CHIEF RANDY WILLIAMS AND HE REQUESTED THE FIRE MARSHAL OFFICE FOR AN INVESTIGATION.

TIME 09:48 ARRIVED ON THE SCENE AND FIRE IS OUT AT THIS TIME. SCENE IS SECURED BY YELLOW CRIME SCENE TAPE. MET WITH ASST CHIEF RANDY WILLIAMS WHO STATED MRS [REDACTED] STATED TO HIM THAT THE FIRE WAS DISCOVERED IN THE CLOSET OF THE FRONT ROOM. THE HOUSE IS A ONE AND ONE HALF STORY STRUCTURE. SMOKE STAIN IS PRESENT TO

THE OUTSIDE OF THE HOUSE AROUND WINDOWS. ON THE INTERIOR OF THE HOUSE BURN DAMAGE IS HEAVIER TO THE FRONT LEFT ROOM, WHICH IS A BEDROOM. BURN PATTERN IS FROM THE BEDROOM CLOSET OUT INTO THE BEDROOM. THE LIGHT BULB OVER THE BED IS DRAWN TOWARD THE CLOSET IN A VERY DISTINCT MANNER. THIS ROOM IS HEAVIEST DAMAGED ROOM. FIRE DID EXTEND INTO THE LIVING ROOM AREA, HOWEVER FIRE DAMAGE IS NOT NEAR AS GREAT AS TO THE BEDROOM. THE LIVING ROOM DOES HAVE HEAVY SMOKE AND HEAT DAMAGE. THERE IS HEAVY SMOKE DAMAGE TO THE ENTIRE HOME. ALL INDICATIONS POINTS TO THE CLOSET AS THE POINT OF ORIGIN. THERE ARE NO APPARENT IGNITION SOURCES IN THE CLOSET.

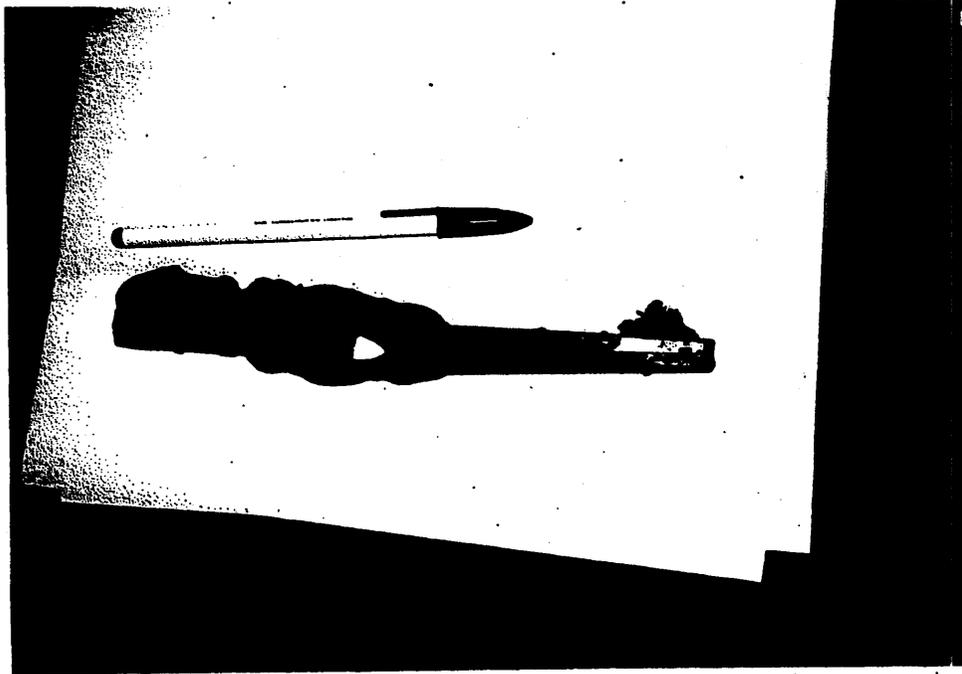
TALKED WITH MRS. [REDACTED] AND ASK IF THE KIDS WERE IN THE BEDROOM PRIOR TO THE FIRE AND SHE STATED THEY WERENT THAT THEY DONT GO IN THIS ROOM FOR HER HUSBAND HAD SOME AMMUNITION AND GUNS IN THE BEDROOM. I ASK HER IF I COULD TALK TO THE KIDS AND SHE SAID I COULD. THE KIDS WERE SITTING IN THE CAR AND I OPENED THE DOOR AND SPOKE WITH THEM AS SHE WAS STANDING AT THE FRONT FENDER. I ASK IF THEY WERE IN THE HOUSE WHEN THE FIRE STARTED AND THEY REPLIED YES. I ASK IF THEY WERE IN THE BEDROOM WHEN THE FIRE STARTED AND THEY SAID YES. I ASK IF THEY KNEW WHAT STARTED THE FIRE AND THE LITTLE GIRL SAID HER BROTHER LIT IT. WHEN I ASK HER WHAT WITH SHE STATED A LIGHTER. I INFORMED MR. & MRS [REDACTED] WHAT THE KIDS TOLD ME. THEN I WENT INSIDE WHERE PERRY DAVIS WAS DIGGING OUT THE CLOSET AND TOLD HIM TO BE LOOKING FOR A LIGHTER. WHILE DIGGING OUT THE BEDROOM CLOSET A GRILL LIGHTER WAS LOCATED IN THE FLOOR AT THE CLOSET DOORWAY.

THE CHILDREN ARE AGES APPROX. 3 & 4 YOA AND THERE WAS NO CRIMINAL INTENT AS TO THE FIRE.

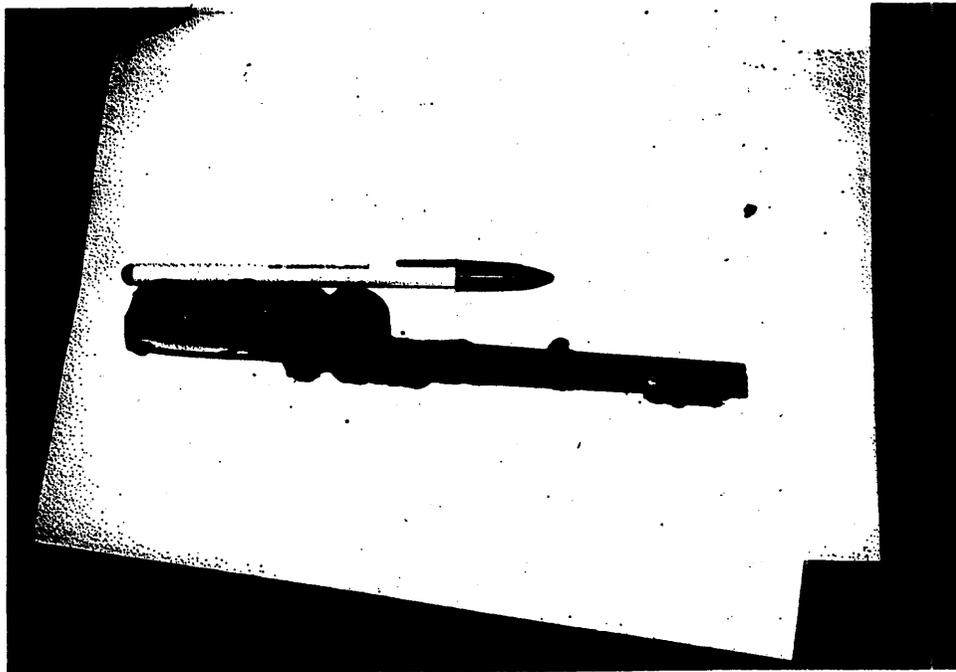
THIS FIRE IS RULED ACCIDENTAL BY A CHILD PLAYING WITH A LIGHTER.

Exhibit 1
960816 0005518
8189 212

Exhibit 2
960816CCC551B
8189 1/2

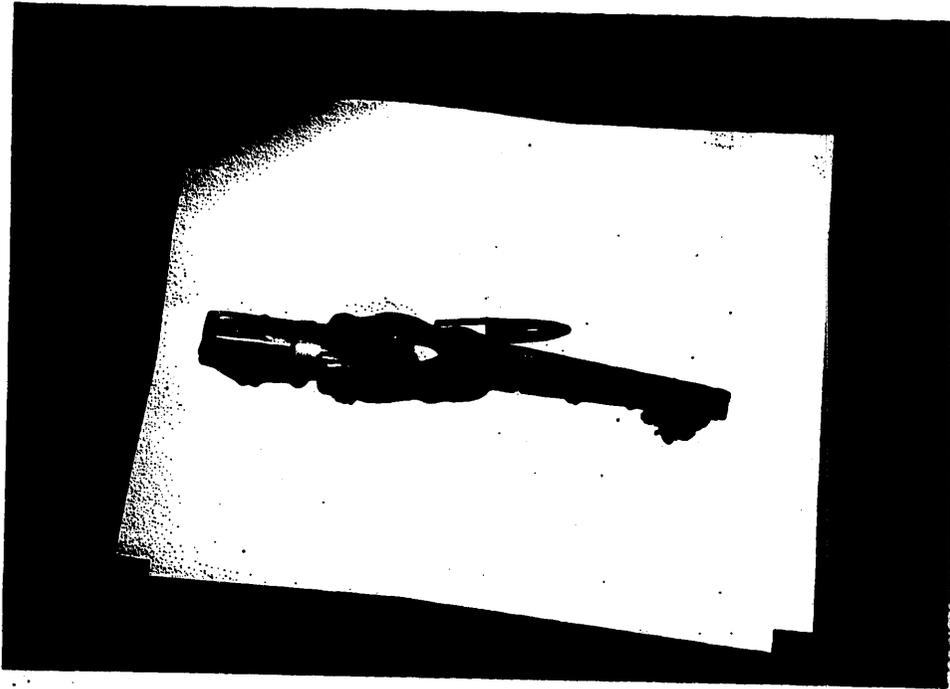


Photograph no. 1 shows the grill lighter that was used by the child to start the fire.

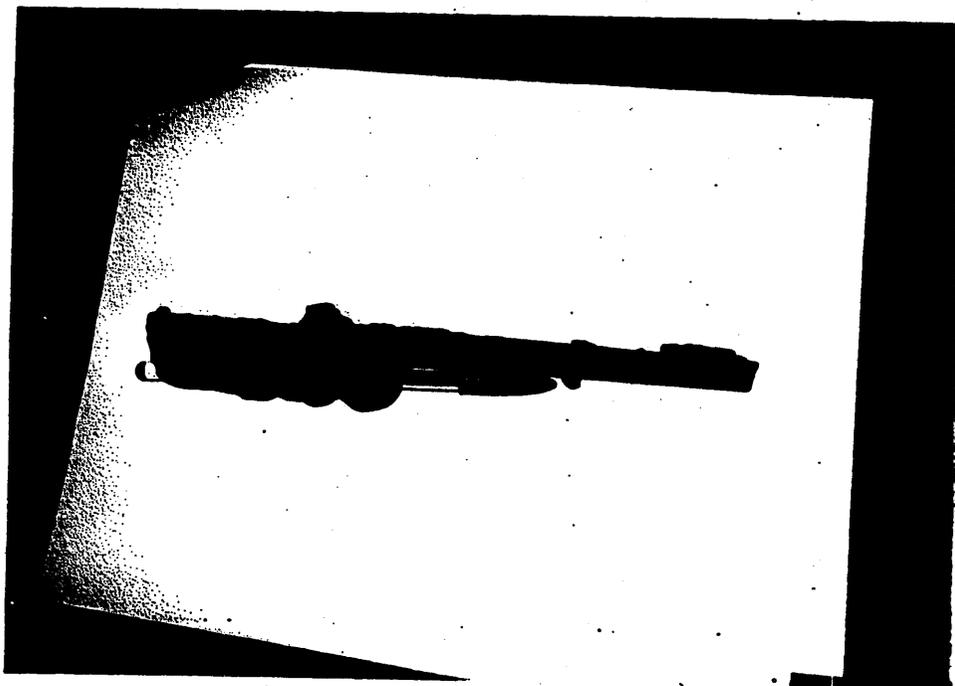


Photograph no. 2 is another view of the grill lighter that was used by the child to start the fire.

Exhibit 2
960816CCC5518
8189 2/2



Photograph no. 3 is another view of the grill lighter that was used by the child to start the fire.



Photograph no. 4 is another view of the grill lighter that was used by the child to start the fire.

NEGATIVES
960816CCC5518
8189

2 FOR 1 EVERY DAY



BIGGER & BETTER

4" PRINTS OR 4" PHOTO GALAXY

PRINTS IN AN ALBUM

Allen Dobbin *8/12/94*

ACCIDENT INVESTIGATION REQUEST FORM

Capit E
G. Budini
8/20/94

DOCUMENT NUMBER: *N7680331A*

DATE OF INCIDENT: *7/12/94* CATID: CARM07 1996

FOLLOW-UP REQUESTED HAZARD ANALYSIS () CFM

TYPE FOLLOW-UP TELEPHONE () ON-SITE: (X)

HEADQUARTERS CONTACT: Michael Bogumill 504-0400 x1368
Backup: Bob Poth 504-0400 x1375

ASSIGNMENT MESSAGE: For any child playing with fire involving a cigarette lighter. Determine the model and manufacturer's name, type of lighter (refillable/disposable and fluid/butane), operating mechanism, age of child who operated the lighter, and accident scenario. Describe operating mechanism in detail and collect lighter, if possible.

The new regulation requiring disposable butane lighters and all novelty lighters to be child-resistant went into effect in July 1994.

128

Person(s) to Contact: *1) Deputy Fire Marshal Dewey Cook*
2) Parent/Guardian

Guidelines: Appendix 45

Task Number: *960814 CCC5518* Date: *8/16/96*
Assigned to: *Nyco* Requested by: *S. Newman*

ISSUE 46 -

N968-033A

AUG 15 1996

Carolina CLIPPING SERVICE
1115 HILLSBORO
RALEIGH, NC 27603
TEL. (919) 833-2079

DAILY S
SPRING, N. C.

JUL 14 96

131
**Child with lighter
blamed in house**

A child playing with a
the bedroom closet caus
at
Friday morning, but no o
injured, according to Deput
Marshal Dewey Cook.

Cook said the fire, which
reported at 9:22 a.m., gutted
front bedroom, and heavy smoke
and heat damage also occurred
throughout the rest of the home.
Cook said 27 firefighters from
Casar and Polkville volunteer fire
departments responded to the
blaze with a pumper, tanker and
light truck from each
department.

Firefighters had the blaze out
in less than three minutes, Cook
said.

The home was occupied by
and , along
with their two children, ages 3
and 4, Cook said. The Red Cross
is providing assistance to the
family, Cook said.

-1/12/94

940814 C.C. 5518

Investigation Report - Analyst's Comments

Task No. 960816 CCC 5518 Regional Office NYCO
Product Code 1247 Investigator ID 8189
Category CARMO71996 Hours Reported 9.0 hrs.

Comments

Box #12 - Should have numeric
code "999"

Box #13 - should have numeric code "9"
AND the words "NO INJURY"
APPEAR IN IT.

Box #17 - should read "3" for
numeric code.

Reviewer ph

Date: 11/5/96

If you believe the identified deficiencies require contacting investigator/victim and requesting further information, please sign here.

Additional Information

new - 6 NOV 1996

| | | | | |
|---|--|--|------------------------------|---|
| 1. TASK NUMBER 960819CCC7398 | | 2. INVESTIGATOR'S ID 8807 | | EPIDEMIOLOGIC INVESTIGATION REPORT |
| 3. OFFICE CODE 820 | 4. DATE OF ACCIDENT YR MO DAY 960322 | 5. DATE INITIATED YR MO DAY 961018 | | |
| 6. SYNOPSIS OF ACCIDENT OR COMPLAINT On 3/22/96 at approximately 9:15am a four year old boy, playing with a disposable-type grill lighter, approximately 5" long, with a pistol-like handle, ignited the bedroom carpet and bedding material of the daybed on which his father was sleeping. Smoke detector awoke father who picked-up son, left apartment and phoned 911. No one was injured. Fire caused \$12,000 damage to building and \$3,000 damage to bedroom contents. | | | | |
| 7. LOCATION (Home, School, etc.) Apartment 10 | | 8. CITY Gaithersburg | | 9. STATE Maryland |
| 10A. FIRST PRODUCT Grill Lighter (Disposable) 1247 | | 10B. TRADE/BRAND NAME Unknown MFR/PRVLR NOTIFIED | | 10C. MODEL NUMBER Unknown |
| 10D. MANUFACTURER NAME AND ADDRESS Unknown No Comments made Comments attached Excisions/Revisions Firm has not requested further notice | | | | |
| 11A. SECOND PRODUCT DAYBED 0694 | | 11B. TRADE/BRAND NAME CPSC CPSC Cleared 25C No Mfrs/Prvlblrs | | 11C. MODEL NUMBER |
| 11D. MANUFACTURER NAME AND ADDRESS Products Identified Exempted by <u>AMPR</u> Firms Notified Comments Processed 6/30/97 | | | | |
| 12. AGE OF VICTIM * 000 | 13. SEX 0 9 | 14. DISPOSITION No Injury 0 | | 15. INJURY DIAGNOSIS No Injury 70 |
| 16. BODY PART (S) INVOLVED No Injury 99 | 17. RESPONDENT Fire Investigator 3 | 18. TYPE OF INVESTIGATION Other 3 | | 19. TIME SPENT (OPERATIONAL HOURS) 8 |
| 20. ATTACHMENT(S) Multiple 9 | 21. CASE SOURCE Newspaper 05 | | 22. SAMPLE COLLECTION NUMBER | |
| 23. PERMISSION TO DISCLOSE NAMES (NON HEISS CASES ONLY) No | | | | |
| 24. REVIEW DATE | 25. REVIEWED BY 8614 | | 26. REGIONAL OFFICE DIRECTOR | |
| 27. DISTRIBUTION O:EHDS CC: | | | | |

6 NOV 1996

PRE-INCIDENT: The four year old boy and his 31 year old father involved in this fire incident lived with the father's sister and her fiancée in the garden apartment where it occurred. It is not known how long they had lived with the sister and fiancée prior to this incident.

The apartment consisted of a living room/dining room, kitchen and two bedrooms. It was located on the second floor of a three story building with 12 apartments in a residential apartment complex. The apartment had smoke detector(s).

On the morning of 3/22/96 the father and son were alone in the apartment. At approximately 9:00am the father was sleeping on a daybed in a back bedroom and the son was playing in the apartment. While the father slept, the son took a disposable-type grill lighter, apparently from a shelf or table in the living room, to play with. The fire investigator of this incident indicated that the grill lighter was apparently usually used by the adults to light candles in the living room area. Also, he stated it was apparently usually stored on a shelf or table in the living room.

INCIDENT: At approximately 9:00am or 9:15am, the four year old boy went to the bedroom where the father slept and, while playing, attempted to set the carpet behind the open bedroom door on fire using the open flame of the grill lighter. Apparently, the carpet did not ignite easily and the son moved to the daybed in the bedroom where his father slept, according to fire investigator.

The son then used the open flame of the grill lighter to set the bedding material and mattress on the underside of the daybed on fire. Smoke from the fire set off the smoke detector(s) in the apartment which awakened the father. He immediately noticed the bedding was on fire and his son sitting on the floor beside the daybed with the grill lighter in his hand. The father got up, picked up his son, and exited the bedroom, closing the bedroom door.

POST INCIDENT: The father then left the apartment with his son and at 9:30am telephoned 911 for assistance. Fire fighters arrived at the scene and extinguished the fire. The fire was limited to the back bedroom and there was no fire damage to other parts of the apartment. The contents of the bedroom were destroyed by the fire. No one was injured by the fire. There was approximately \$12,000 structural damage to the building and approximately \$3,000 damage to contents of the bedroom.

Fire investigators at the scene of the fire determined that the fire was ignited by a "large lighter designed to ignite fires in fireplaces and grills" found on the bedroom floor. It was a disposable-type grill lighter, approximately 5" long with a red pistol-like handle.

The fire investigator in charge interviewed the four year old boy after this incident. The boy stated that he was playing with the grill lighter while his father slept and set the underside of the daybed on fire. The father told the fire investigator that his son had never exhibited such behavior before.

The fire investigator collected the grill lighter used to start this fire. However, after the case was closed, the grill lighter was disposed of by the fire department. It was not available for examination during this investigation. The fire investigator stated that he had no product identification information, such as manufacturer

and model number, for the lighter. He did state during this investigation that the switch was in the "off" position when he found it at the fire scene. However, he indicated it was possible that one of the fire fighters could have switched it off at the scene before it was found by fire investigators.

Unsuccessful attempts were made during this investigation to contact the father of the four year old boy involved in this incident. All occupants of the apartment at the time of the fire moved after the fire. The occupants' telephone has been disconnected and there was no forwarding number listed in the geographic area. The fire investigator for this incident located a telephone number and address for the father and telephoned him requesting a return call regarding the fire. However, the father had not contacted the fire investigator at the time this report was completed.

A letter requesting that the father contact this investigator regarding the product involved and fire incident has been mailed to the father (Exhibit 2). If the father responds to the letter, an addendum to this report with additional information will be provided.

PRODUCT IDENTIFICATION: The product involved in this fire incident was determined to be a large disposable-type grill lighter with red pistol-like handle designed to ignite fires in fireplaces and grills. The lighter was approximately 5" in length. It was disposed of by fire department officials prior to this investigation and was not available for examination. Fire department photographs of the fire scene (Exhibit 4) include three pictures of the lighter. No additional product identification information was available during this investigation. A letter has been mailed to the father of the four year old boy involved in this incident (Exhibit 2). Additional information will be forwarded pending his response to the letter.

ATTACHMENTS:

- Exhibit 1: Assignment Documents
- Exhibit 2: Request Letter from CPSC to Father
- Exhibit 3: Fire Department Report
- Exhibit 4: Copies of Fire Department Photographs

ACCIDENT INVESTIGATION REQUEST FORM

EXH. 1
D.P. #
960819CCL 7398
10/18/96 SBH
Page 1 of 2

Document Number N 965-0144 B

Date of Incident ~~7-21-96~~ 3-22-96 Category I.D. _____

Follow-Up Requested (SN) Hazard Analysis _____

Type Follow-Up Requested _____ Telephone Call _____ In-Site _____

Headquarters Contact Kate Wallace, CCA

Assignment Message Please conduct a Section 15 I.D. Confirm
the accident scenario Identify make of lighter and for
what purpose it was regularly used. Where was
it stored and how did the child access it? Was
the switch in the "on" or "off" position?

Person(s) to Contact Ed Tobias
Littlenburg - Washington Grove Fire Dept.

Guideline _____

Requested By Kate Wallace, CCA

Task Number 960819CCL 7398

Assigned to NIFSC Date 8/19/96

EXHIBIT 2
960819CCC 7378
10/15/96 SDH
Page 1 of 1

U.S. Consumer Product Safety Commission

P.O. Box 21427, Washington, DC 20009-1427 • (202) 462-6673 • FAX (202) 462-6750

November 1, 1996


Re: Grill Lighter Involved in Fire

Dear Mr. Osuri:

I am a Product Safety Investigator with the U.S. Consumer Product Safety Commission (CPSC). I am contacting you in an effort to obtain additional information about the grill lighter and fire that occurred last March at  Apt. 22, in Gaithersburg.

As you may know, CPSC is the Federal agency responsible to protect the public from unreasonable risks of injury or death involving most consumer products. For this reason, I am interested in obtaining as much information as possible regarding the grill lighter involved in the fire, i.e. when/where it was purchased, how it was routinely stored and used, etc.

Therefore, I am requesting that you contact me as soon as possible, at your convenience, in order that I may obtain additional information by telephone, or schedule an appointment to meet with you, regarding the grill lighter and fire.

I can be reached by telephone at 202-462-6673. If you get a recorded message when you call, please leave your name and telephone number and I will return your call.

Thank you very much for your cooperation. I look forward to hearing you.

Sincerely,



Samuel B. Hall
Senior Investigator

EXHIBIT 3
960819CCCL7398
10/18/96 SBT
Page 1 of 5



Montgomery County
Department of Fire and Rescue Services
Division of Fire Investigations

15430 Old Columbia Pike
Burtonsville, MD 20866
301-421-5425
Fax: 301-421-5439

FAX TRANSMISSION COVER SHEET

Date: 10/18/96
To: DAVE
Fax: 301-990-3241
Re: CLIFFER SCAP?
Sender: VENISE

YOU SHOULD RECEIVE 5 PAGE(S), INCLUDING THIS COVER SHEET.
IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL 301-421-5425.

Exhibit 3 / Aug 24/5

EVENT REPORT
Montgomery County, Maryland
Department of Police

1. VICTIM NAME: [REDACTED] 2. REPORT NUMBER: **CS6/068906**

3. ADDRESS: [REDACTED] CITY - STATE - ZIP: **422 GAITHERSBURG, MD 2935**

BASIC EVENT AND VICTIM DATA

4. VICTIM'S PLACE OF EMPLOYMENT OR SCHOOL: **UNEMPLOYED**

5. RACE - SEX - D.O.B.: **2 M 12-24-64**

6. HEIGHT - WEIGHT: **5'10" - 165**

7. OCCUPATION: [REDACTED]

8. CLASSIFICATION: **2935**

9. ADDRESS: [REDACTED]

10. CHARACTER OF INCIDENT: **FIRE NOT ARSON**

11. COORDINATE OR MAP: **972 599**

12. NATURE OF INJURIES AND LOCATION ON BODY: **NONE**

13. LOCATION OF CRIME OR INCIDENT: [REDACTED]

14. COORDINATE SECURITY NUMBER: [REDACTED]

15. VICTIM TREATED: YES NO

16. WHEN OCCURRED: **05 22 96 TO 0900 - 0930**

17. COMPLAINT MADE (LAW ENFORCEMENT): [REDACTED]

18. COMPLAINT MADE (FIRE DEPT.): [REDACTED]

19. FBI REPORTED: LAYERS: FINGER:

20. COMPLAINT MADE (ADDRESS): [REDACTED] CITY - STATE - ZIP: [REDACTED]

21. COMPLAINT MADE (PHONE): [REDACTED]

CODE: W - WITNESS; P - PARENT; G - GUARDIAN; O - OTHER RELATIVE

22. NAME: [REDACTED] CODE: [REDACTED] AGE: [REDACTED] RESIDENCE ADDRESS: [REDACTED] CITY: [REDACTED] STATE: [REDACTED] ZIP: [REDACTED]

WORTHLESS DOCUMENT

23. TYPE OF DOCUMENT: **N/A**

24. DATE OF DOCUMENT: [REDACTED]

25. DOCUMENT NO.: [REDACTED]

26. NAME ON DOCUMENT: [REDACTED]

27. ADDRESS: [REDACTED]

28. NAME PAYABLE TO: [REDACTED]

29. TYPE OF TRANSACTION: [REDACTED]

30. TYPE OF PROPERTY OR SERVICE OBTAINED: [REDACTED]

31. TYPE OF AREA OR PREMISES: **N/A**

32. WEAPON - TOOL, WEAPON USED IN CRIME: [REDACTED]

33. WEAPON - WEAPON NOT OBTAINED: [REDACTED]

34. TYPE OF CRIME: [REDACTED]

35. WEAPON OF SUSPECT (ACTION OR COMPENSATION DETERMINED BY SUSPECT): [REDACTED]

SUSPECT/DEFENDANT

36. SUSPECT: ARRESTED WARRANT ISSUED ON FILE WARRANT ISSUED

37. NAME: [REDACTED] AGE: [REDACTED] SEX: [REDACTED] D.O.B.: [REDACTED] HEIGHT: [REDACTED] WEIGHT: [REDACTED] EYES: [REDACTED] HAIR: [REDACTED] LENGTH - COLOR OF HAIR: [REDACTED] BUILD: [REDACTED]

38. SUSPECT PHYSICAL AND CLOTHING DESCRIPTION: [REDACTED]

39. ADDRESS OR POSSIBLE LOCATION: [REDACTED]

40. SUSPECT: ARRESTED WARRANT ISSUED ON FILE WARRANT ISSUED

41. NAME: [REDACTED] AGE: [REDACTED] SEX: [REDACTED] D.O.B.: [REDACTED] HEIGHT: [REDACTED] WEIGHT: [REDACTED] EYES: [REDACTED] HAIR: [REDACTED] LENGTH - COLOR OF HAIR: [REDACTED] BUILD: [REDACTED]

42. SUSPECT PHYSICAL AND CLOTHING DESCRIPTION: [REDACTED]

43. ADDRESS OR POSSIBLE LOCATION: [REDACTED]

44. VEHICLE: USED IN CRIME VEHICLE TO OPERATE

45. MAKE: [REDACTED] MODEL: [REDACTED] YEAR: [REDACTED] COLOR: [REDACTED] VIN: [REDACTED] LICENSE: [REDACTED] REGISTRATION: [REDACTED]

E.C.C.

46. TOXIC SCREENING: YES NO

47. ALCOHOL SCREENING: YES NO

48. NERVE DAMAGE: YES NO

49. OTHER: [REDACTED]

50. TOTAL VALUE STOLEN: [REDACTED]

51. TOTAL VALUE RECEIVED: [REDACTED]

NARRATIVE

FIRE/RESCUE #9602050. CAUSE - CHILD WITH LIGHTER

DAMAGE THIS VICTIM - \$3K CONT. INJURY - NONE

INSURANCE - NONE S/D - PRESENT & ACTIVATED

SEE MASTER REPORT FOR DETAILS:

GATES HUDSON & ASSOCIATES: 2935

STATUS: OPEN CLOSED BY: ARREST DISPOSITION UNFOUNDED

REPORTING OFFICER: **SGT. ANDERSON #9169** DATE: **04-21-95**

REPORTING OFFICER: [REDACTED] DATE: [REDACTED]

Case # 9602050

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EVENT REPORT
Montgomery County, Maryland
Department of Police

VICTIM SERVICE ASSOCIATES

2870086906

3 ADDRESS CITY - STATE - ZIP
0020 HAMAKEN CT #301 FAIRFAX VA

4 R.V.S. CODE

5 A CLASSIFICATION
2935

BASIC EVENT AND VICTIM DATA

| | | | |
|---|---|--------------------------------|-----------------------------------|
| 6A. VICTIM'S PLACE OF EMPLOYMENT OR SCHOOL | 7 RACE - SEX - DOB 0 | 8 PHONE NO. 703 | 9B CLASSIFICATION CODE TO |
| 9A ADDRESS | 8 CRIME / INCIDENT FIRE NOT ARSON | 9A CODE OR NO. INVEY | 9C 3092 506 C/L |
| 10 NATURE OF INJURIES AND LOCATION ON BODY NONE | 11 LOCATION OF CRIME OR ACCIDENT [REDACTED] RD #22 | 12 SOCIAL SECURITY NUMBER | |
| 13 VICTIM TREATED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | 14 DATE OCCURRED 07-22-96 10:00-11:00 | 15 TIME OCCURRED 0900-0930 | 16 DATE REPORTED 07-22-96 0930 |
| 17 UNIT NOTIFIED <input type="checkbox"/> | 18A COMPLAINT'S NAME (LAST, FIRST, INITIAL) | 18B RACE - SEX - AGE 2 M 32 | 18C [REDACTED] |
| 19A YES REFERRED <input type="checkbox"/> LADERS <input type="checkbox"/> PHOTOS <input type="checkbox"/> | 19B COMPLAINT'S ADDRESS [REDACTED] RD #22 | 19C CITY - STATE - ZIP | 19D [REDACTED] |

WORTHLESS DOCUMENT

CODE: W - WITNESS; P - PARENT; G - GUARDIAN; O - OTHER RELATIVE

20 NAME: N/A

21 TYPE OF DOCUMENT: 1/1

22 REASON NOT RETURNED: [REDACTED]

23 DECIDE TYPE OF AREA OR PREMISES: 1/3

24 MEANS - TOOL, WEAPON USED IN CRIME

25 TRACEWAYS OF SUSPECTS (ACTION OR OBSERVATION DETERMINING THE SUSPECT)

M.O.

26 SUSPECT ARRESTED WARRANT / ICE ON FILE WARRANT ICE SERVED

27 RACE SEX AGE DOB HEIGHT WEIGHT EYES LENGTH - COLOR OF HAIR FACIAL HAIR

28 SUSPECT / DEFENDANT PHYSICAL AND CLOTHING DESCRIPTIONS

29 ADDRESS OR POSSIBLE LOCATION

SUSPECT / DEFENDANT

30 RACE SEX AGE DOB HEIGHT WEIGHT EYES LENGTH - COLOR OF HAIR FACIAL HAIR

31 SUSPECT / DEFENDANT PHYSICAL AND CLOTHING DESCRIPTIONS

32 ADDRESS OR POSSIBLE LOCATION

33 VEHICLE USED IN CRIME VEH. MAKE MODEL BODY STYLE COLOR YR. MO. STATE SERVICE TAG NO.

E.C.C.

34 FIRE LOGOUT LOGOUT CANCELLED VEH. FIRE VEH. FIRE CANCELLED E.C.C. OFF. E.C.C. OFF.

35 DRUG RELATED ALCOHOL RELATED 36 HATE VIOLENCE RACIAL ETHNIC RELIGIOUS SEX ORIENT OTHER

NARRATIVE

37 FIRE RESULT #9002907 CAUSE - CHILD WITH LIGHTER

38 DAMAGE - \$12K STRU., \$3K CONT. INJURY - NONE

39 INSURANCE - KEMPER S/O - PRESENT & ACTIVATED

40 THIS IS A MASTER REPORT WITH ADDITIONAL VICTIMS: (SCHI, STANLEY; 2935)

STATUS: OPEN CLOSED BY: [Signature] EXCEPTION UNFOUNDED

41 SGT. B.E. ANDERSON #9169

42 DATE: 07-21-96

43 APPROVED BY: [Signature]

Case 10/28/96

EXHIBIT 3 / Page 4 of 5

CONTINUATION REPORT
Montgomery County, Maryland
Department of Public Safety

PERSON OR FIRM FOR WHICH COMPLAINT WAS MADE
Gates, Hudson & Associates

PROPERTY NO. OR IDENTIFYING NO.
090/000900

ADDRESS CITY-STATE-ZIP
[REDACTED] Ct #301 Fairfax, VA 22031

CLASSIFICATION
2935

| ITEM NO | DESCRIPTION | PROPERTY VALUE | EST. | REC. | LOSS CLASS |
|---------|--|----------------|------|------|------------|
| | <p>On March 22, 1996 this I/O and Lieutenant Reda of the Fire Investigations Office were requested on the scene of an apartment fire at [REDACTED] Road #21 Gaithersburg, Maryland by Captain Mulhall of the Department of Fire and Rescue Services. This I/O and Reda arrived on the scene and the investigation began.</p> <p>Working from the area of least damage to the area of most damage this I/O was able to determine that the fire's point of origin was the bed in a back bedroom in apartment #22. The fire grew up and out from this area consuming the contents of the room. This I/O also found a second point of origin on the carpet behind the bedroom door. This I/O was able to determine that this area was not a result of "drop down". This I/O was able to eliminate all accidental and electrical sources of ignition for both the fire with the point of origin of the bed and the second fire with the point of origin on the carpet. Both fires are found to be incendiary. While conducting the origin and cause examination this I/O came across a large lighter designed to ignite fires in fire places and grills. This I/O feels that this lighter was the open flame device used to ignite these fires.</p> <p>This I/O next spoke to the occupant of apartment #22, Mr. [REDACTED]. [REDACTED] advised that he was asleep on the bed when he was awoken by the smoke detector activating. [REDACTED] noticed that the bed was on fire and that his four year old son was sitting on the floor with a lighter in his hand. [REDACTED] picked up his son, closed the bedroom door and left the apartment to call 911.</p> <p>This I/O next spoke to [REDACTED] a four year old white male. [REDACTED] told this I/O that he had taken the lighter and was playing with it while his father slept. [REDACTED] stated that he had set the underside of the bed on fire while his father slept.</p> | | | | |

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COPIES OF PHOTOGRAPHS OF FIRE SCENE OBTAINED FROM FIRE DEPARTMENT

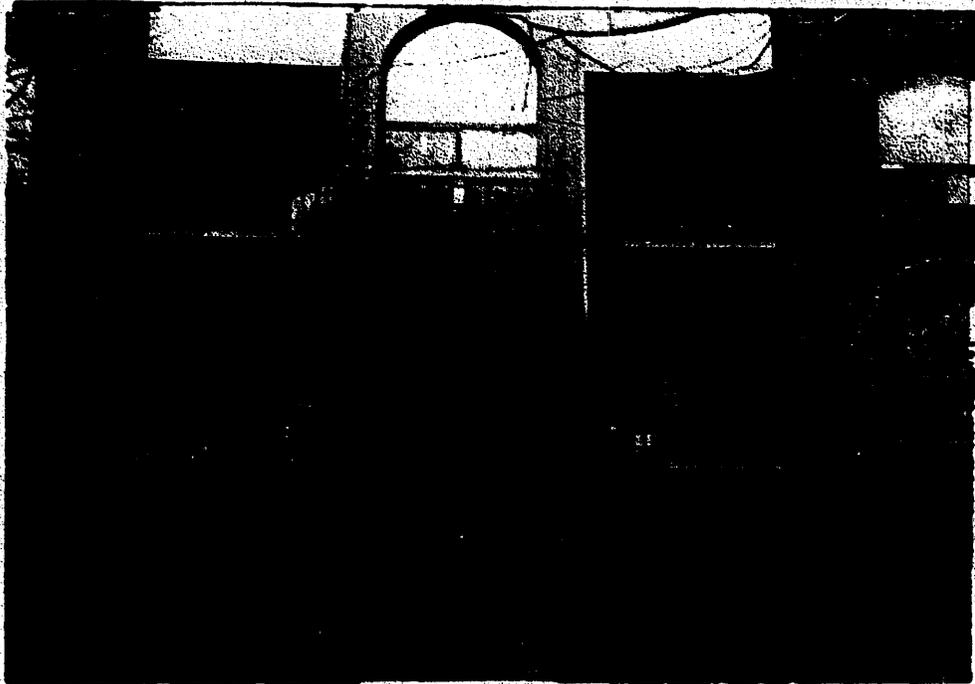


Photo 1: View of entrance to apartment building where this fire incident occurred.

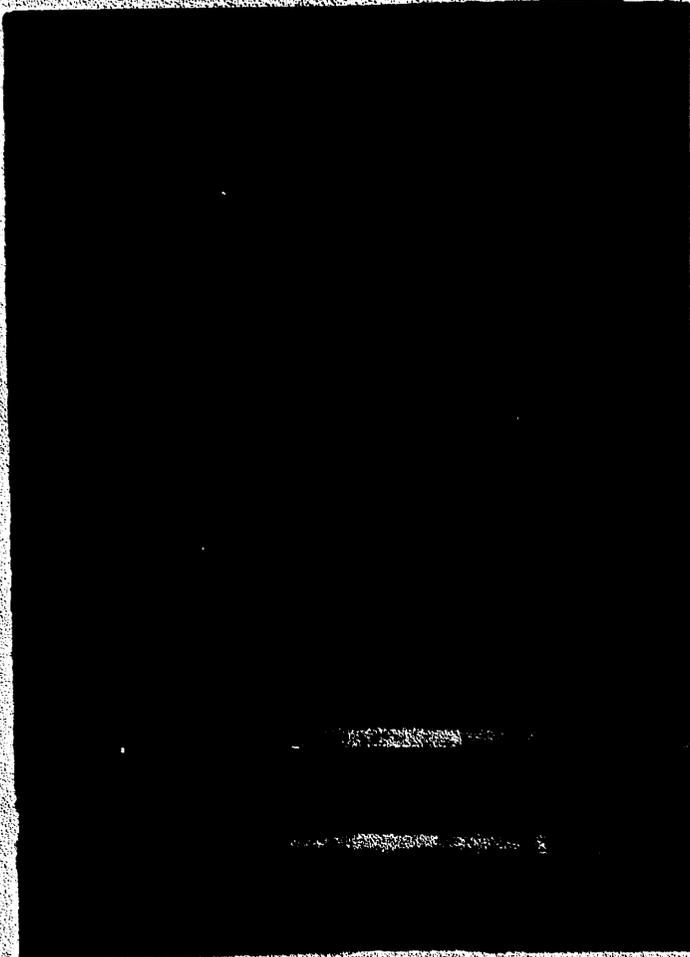


Photo 2: View of entrance to apartment where fire incident occurred.

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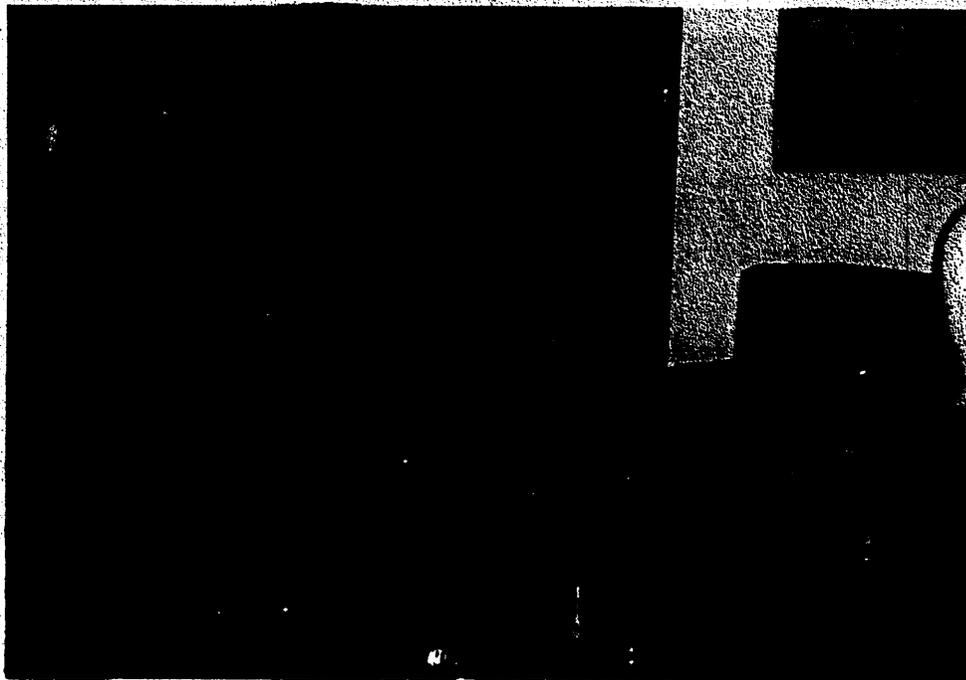


Photo 3: View of living room/dining room area of apartment.



Photo 4: Second view of living room area of apartment.

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Photo 5: View of grill lighter on bedroom floor where it was found by fire investigators.

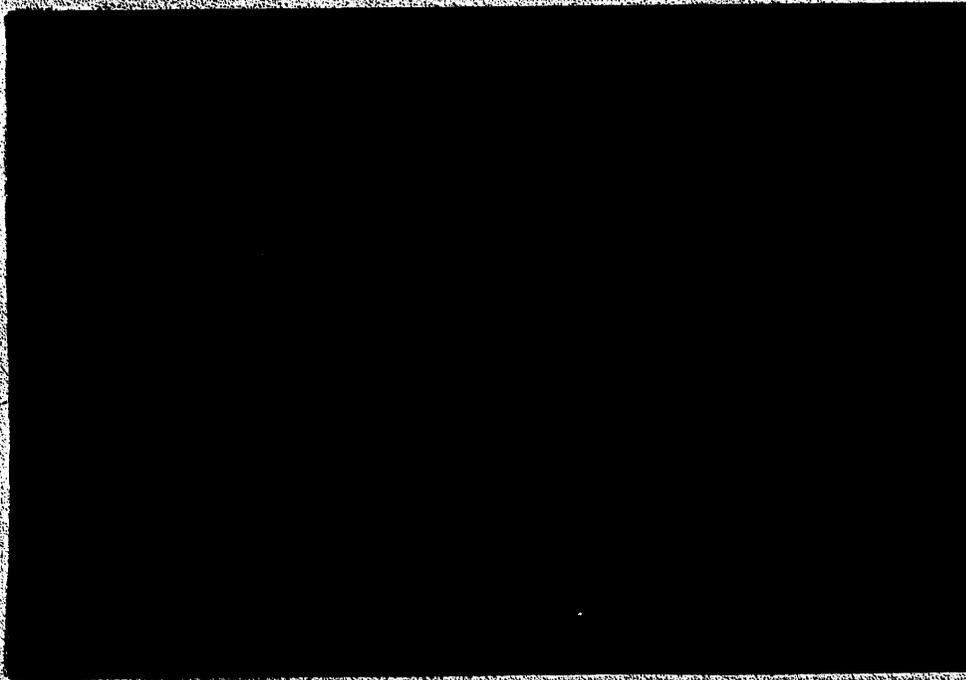


Photo 6: Close up view of grill lighter on bedroom floor.

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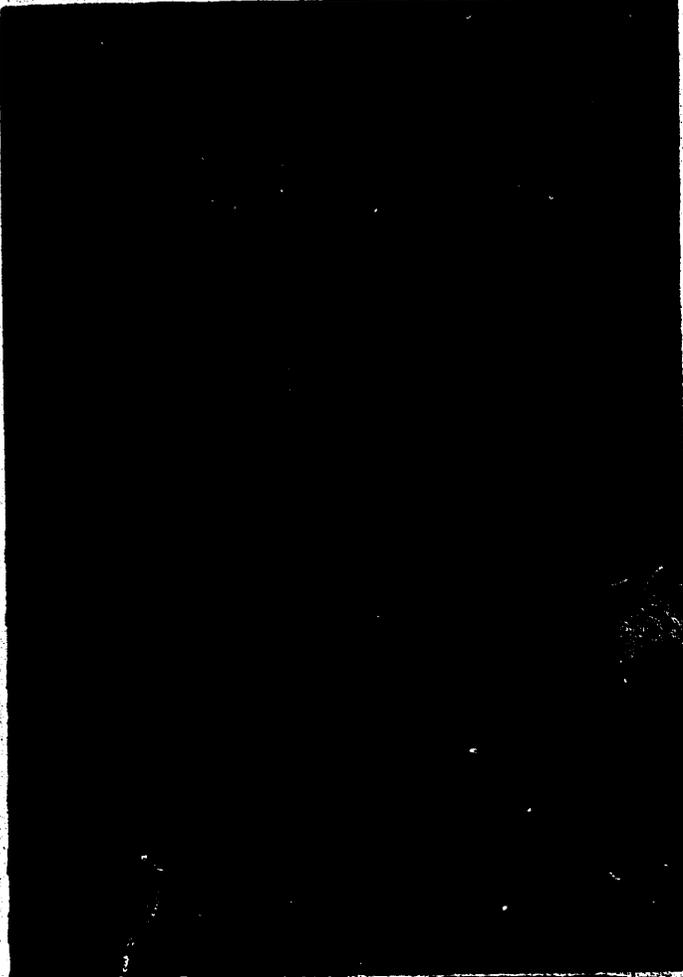


Photo 7: View of burned carpet
at area behind opened bedroom
door. Also shown is grill
lighter held by fire
investigator.

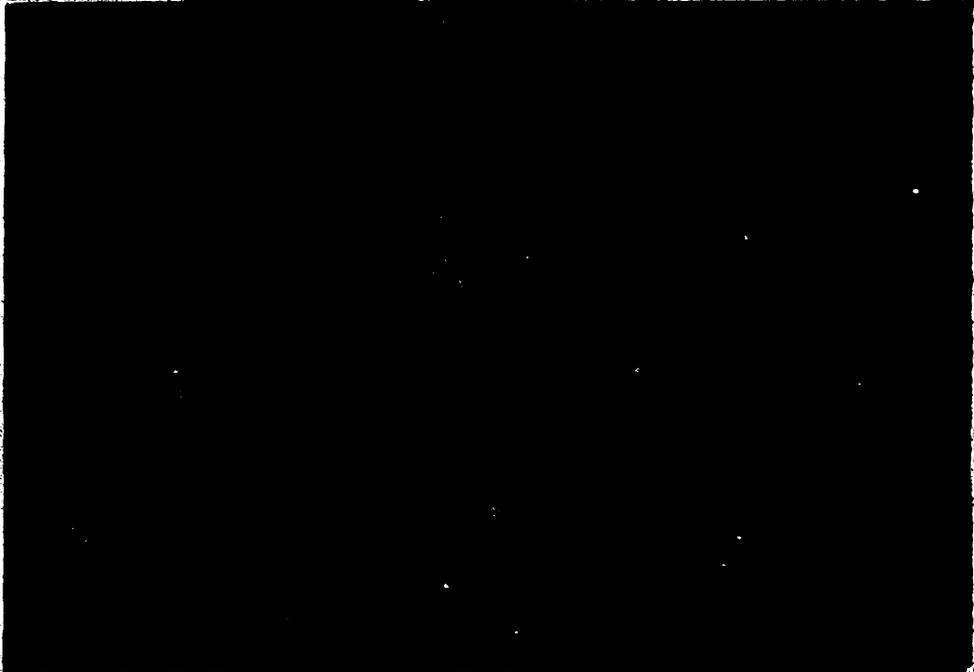


Photo 8: Second view of burned carpet located behind opened bedroom
door.

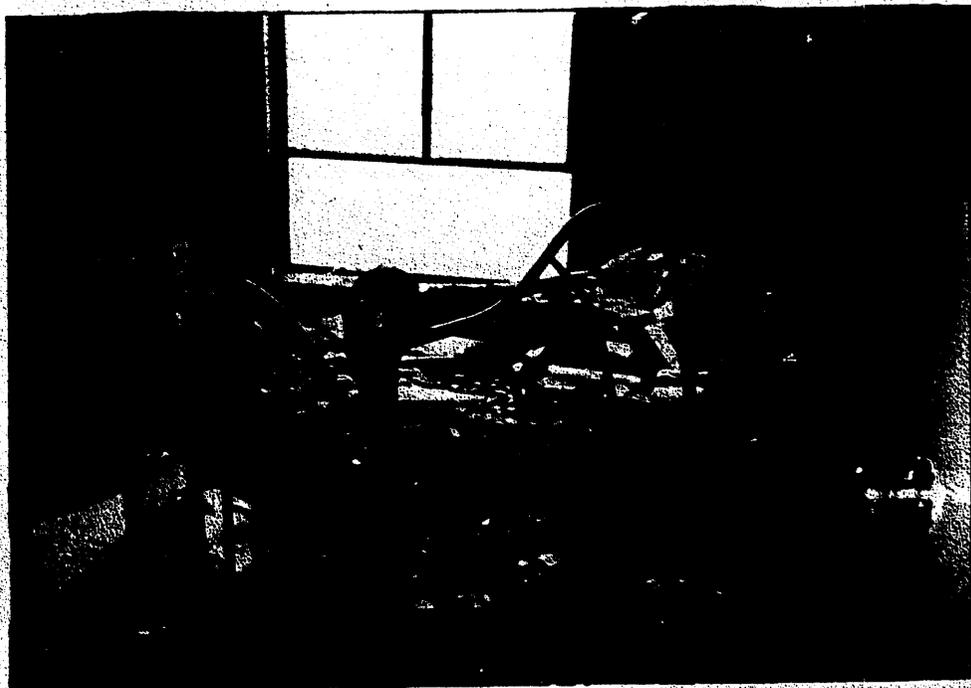


Photo 9: View of burned daybed.



Photo 10: Close-up view of burned mattress of daybed.



Photo 11: View of portion of bedroom showing corner of daybed and partially opened bedroom door.



Photo 12: View of closet area of bedroom, weight bench and end of daybed in bedroom.

Investigation Report - Analyst's Comments

Task No. 960819CCC7398

Regional Office MASC

Product Code 1247/0694

Investigator ID 8807

Category SECT 15 1996

Hours Reported 8

Comments

DAYBED SHOULD BE
listed as second
product 0694

Why victim's age & sex
entered if no injury

Block # 17 NOT coded

STATUS incomplete
waiting on response
to letter sent
NOV 1, 1996.

Reviewer MWald Date 11-7-96

If you believe the identified deficiencies require contacting investigator/victim and requesting further information, please check the box and sign here.

Signature

