

1. Task Number 090602HCC2657		2. Investigator's ID 2343		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
3. Office Code 840	4. Date of Accident YR MO DAY 2009 04 25	5. Date Initiated YR MO DAY 2009 06 04		
6. Synopsis of Accident or Complaint UPC A 47 year old male was riding his 40Wheel ATV when he lost control, rolled it and was subsequently ejected, suffering fatal head wounds. The victim was operating the ATV in a city park that natural resource investigators stated is not conducive to ATV operation. Their report indicated that based on the evidence at the scene, the victim drove his ATV northbound down a grassy hill and then westbound onto a paved parking lot. The victim was not wearing a helmet and had a blood alcohol level of 0.138 g / 100 ml. The cause of death was severe head trauma.				
<p><u>MFR/PRVLBR NOTIFIED</u></p> <p>COMMENTS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> OVERRULED: <input type="checkbox"/> ATTACHED</p> <p><input checked="" type="checkbox"/> EXCISIONS/FOIA EXS. <u>3, 25C, 6</u></p> <p><input checked="" type="checkbox"/> DO NOT RE-NOTIFY <input type="checkbox"/> RE-NOTIFY</p>				
7. Location (Home, School, etc) 4 - STREET OR HIGHWAY		8. City PLYMOUTH		9. State WI
10A. First Product 3286 - All Terrain Vehicles (four W		10B. Trade/Brand Name POLARIS		10C. Model Number PREDATOR
10D. Manufacturer Name and Address POLARIS INDUSTRIES INC. 1225 Highway 169 North Minneapolis, MN 55441 <b>(b)(6)</b>				
11A. Second Product 0		11B. Trade/Brand Name NONE		11C. Model Number NONE
11D. Manufacturer Name and Address NONE				
12. Age of Victim 47	13. Sex 1 - Male	14. Disposition 8 - Death	15. Injury Diagnosis 71 - Other	
16. Body Part(s) Involved 85 - ALL OF BODY	17. Respondent 3 - 2nd Hand Info Only	18. Type of Investigation 2 - Telephone	19. Time Spent (Operational / Travel) 18 / 2	
20. Attachment(s) 2 - Documents		21. Case Source 05 - Newspaper		22. Sample Collection Number
23. Permission to Disclose Name (Non NEISS Cases Only) <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
24. Review Date 06/18/2009	25. Reviewed By 8929		26. Regional Office Director Frank J. Nava	
27. Distribution Streeter, Robin			28. Source Document Number N0950065A	



**IDI 090602HCC2657**

This In Depth Investigation (IDI) was initiated based on a newspaper article reporting on an All Terrain Vehicle (ATV) fatality in a park. On April 25, 2009 it was reported that the 47 year old male victim had been riding his 4 – Wheel ATV and had apparently lost control, rolled it and was subsequently ejected from it suffering fatal head wounds. It was reported that the victim operated his two wheel drive ATV in a city park that is not open or conducive to ATV operation and use.

It was reported that the victim lived adjacent to the city park at the time of the accident. The accident investigators reported that there were no witnesses who observed the accident occur. The Department of Natural Resources (DNR) investigators reported that based on the evidence found at the scene, the victim drove his Polaris Predator ATV northbound down a grassy hill east of the southern parking lot at City Park, and then westbound onto the paved parking lot.

The onsite accident investigators further reported that the victims ATV traveled approximately 107 feet west onto the paved parking lot when it apparently skidded, continuing to skid an additional 28 to 29 feet, with the ATV veering towards the left, and then it rolled upside down onto its right side.

Evidence at the scene indicated that the ATV then slid upside down for approximately another 21 feet before coming to rest. During this event the victim was ejected from the ATV and he came to rest 18 feet 4 inches from where the ATV had overturned. Reports indicated that the victim suffered severe head trauma due to not wearing a helmet and was pronounced dead at the scene by the emergency medical response team.

The onsite investigator advised that he examined the ATV once the machine was uprighted after the incident and discovered that the machine was in second gear and that the foot brake appeared to work normally when he pushed the machine in neutral and depressed the foot brake.

He reported that the handbrake lever was broken off of the right handlebar, and that it still provided braking when depressed with the machine in neutral. The investigator stated that the throttle returned to the idle position when it was depressed and released.

It was reported that there were scuffmarks on the top of the handlebar on both the left and right side and that it was documented in Wisconsin Department of Natural Resources (**WDNR Photographs DSC0683 through 686**), as well as the front and rear fenders on the ATV's right side (**WDNR photographs DSC0681 through 684, 687, and 688**).

A review of the coroner's report on the victim revealed that that the victim's injury resulted in death due to "**traumatic head injury**". The coroner had previously advised the investigating officer at the scene of the ATV accident that he would

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obtain a **blood draw from the victim for a toxicology test**. The coroner's report to the investigating officer included an attachment from the **Wisconsin State Laboratory of Hygiene showing that the victim's blood alcohol level was 0.138 g / 100 ml**.

My research of the **State of Wisconsin's drunken driving statute revealed that the legal limit for being charged with driving while drunk is 0.08 g / 100 ml., which indicates the victim was nearly twice the legal limit** to be considered impaired for operating a motor vehicle. The reports also indicated that one of the emergency medical responders reported that they smelled the odor of alcohol emanating from the deceased.

All reports indicated that the victim was discovered in a pool of blood and deceased upon the emergency medical responder's arrival after being discovered by his 14 year old son who was riding a two wheel dirt bike nearby. The investigator stated that he examined the son's vehicle and determined that it was not involved in the accident.

**Type:** 4 - Wheel All Terrain Vehicle  
**Brand:** Polaris  
**Model:** 2003 Predator 500cc  
**Retailer:** Winnebagoland Kawasaki, Inc.  
**Purchase Date:** August 8, 2008  
**Approx. Price:** Unknown

**ATTACHMENTS:**

- Exhibit A** – Department of Natural Resources (DNR) Reports
- Exhibit B** – Plymouth Police Department Reports
- Exhibit C** – Coroners Report
- Exhibit D** – Department of Natural Resources (DNR) Photo Log
- Exhibit E** – Department of Natural Resources (DNR) Accident Scene Photos
- Exhibit F** – Plymouth Police Department Accident Scene Photos
- Exhibit G** – Contact Information



## State of Wisconsin \ DEPARTMENT OF NATURAL RESOURCES

Jim Doyle, Governor  
Matthew J. Frank, Secretary  
Gloria L. McCutcheon, Regional Director

Plymouth Service Center  
1155 Pilgrim Rd.  
Plymouth, Wisconsin 53073  
Telephone 920-892-8756  
FAX 920-892-6638  
TTY Access via relay - 711

June 5, 2009

Investigator Michael Terrell  
U.S. Consumer Product Safety Commission  
Western - Omaha, NE Post  
P.O. Box 742  
Boystown, NE 68116-0742

Investigator Terrell,

I have enclosed all reports and photographs for the April 25, 2009 fatal All Terrain Vehicle accident involving victim Bruce Brown on the enclosed CD. I do not have the Plymouth Police Departments report in electronic form, so I have enclosed a photocopy of that report. Please note that the report titled 09-C200-002 Officer Report.doc was updated (revised title Updated 09-C200-002 Officer Report.doc) when information from the Coroner's office was received. I have attempted to answer your specific questions below:

- Do you know the type, brand, or model of the product(s) involved in this incident?  
The product involved in this incident was a 2003 Polaris Predator 500cc ATV.
- Is the product(s) available for me to examine? Were photographs taken?  
The ATV was returned to the victim's brother-in-law Doug Daugherty (cellular telephone number 414-614-2297) at the request of the victim's widow on May 05, 2009. Mr. Daugherty told me the family planned to sell the ATV. I took several digital photographs of the ATV at the scene of the incident; those photographs, as well as those taken by the Plymouth Police Department, are on the enclosed CD
- Was it examined by someone in your organization? If so, who?  
I examined the ATV once the machine was uprighted after the incident. I found the machine was in second gear and the foot brake appeared to be working normally when I pushed the machine in neutral and depressed the foot brake. The handbrake lever was broken off of the right handlebar, but still provided braking when I pushed the machine in neutral and depressed the broken handbrake lever. The throttle returned to the idle position when it was depressed and released. There were scuff marks on the top of the handlebar on both the left and right side (WDNR photographs DSC0683 through 686), as well as the front and rear fenders on the ATV's right side (WDNR photographs DSC0681 through 684, 687, and 688).

I hope this information is helpful. If you have any additional questions please feel free to contact me by any of the methods listed below:

Michael Clutter  
Conservation Warden  
1155 Pilgrim Rd.  
Plymouth, WI 53073-4294  
Office/Voice Mail: (920) 892-8756 Ext. 3038  
FAX: (920) 892-6638  
E-MAIL: [Michael.Clutter@dnr.state.wi.us](mailto:Michael.Clutter@dnr.state.wi.us)  
Cellular Telephone: (920) 980-8716

# Preliminary ATV/Boat/Snowmobile Incident Report

NON-RELEASEABLE Document

State of Wisconsin  
Department of Natural Resources  
Bureau of Law Enforcement

Form 4100-198 (Rev 01/08)

Date of Incident 04-25-09		Time of Incident <input type="checkbox"/> am 2:37 <input checked="" type="checkbox"/> pm		Type of Incident (Check One) <input checked="" type="checkbox"/> ATV <input type="checkbox"/> Boat <input type="checkbox"/> Snow		Location (Name of Waterbody, Trail, Roadway) Plymouth City Park parking lot Route? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	
<input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of Plymouth		County Sheboygan		Number of INJURIES		Number of FATALITIES 1	
Victim Last Name <u>(b)(6)</u>		First <u>(b)(6)</u>		MI		Victim Last Name First MI	
Street or Route <u>(b)(6)</u>				Street or Route			
City, State, Zip Code <u>(b)(6)</u>				City, State, Zip Code			
<input checked="" type="checkbox"/> Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Other		Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Age 47		Date of Birth 08-09-1961	
<input type="checkbox"/> Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Other		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Age		Date of Birth	
Rec. Vehicle #1	<u>Type of Boat</u>			Boat Length Boat Horsepower		<input type="checkbox"/> Physical disability <input checked="" type="checkbox"/> Speed related <input checked="" type="checkbox"/> Alcohol/drugs suspected <input type="checkbox"/> Other (SPECIFY)  <input type="checkbox"/> Unknown at this time	
	<input type="checkbox"/> Open Motorboat <input type="checkbox"/> Canoe/Kayak <input type="checkbox"/> Cabin Motorboat <input type="checkbox"/> PWC <input type="checkbox"/> Auxiliary Sail <input type="checkbox"/> Pontoon <input type="checkbox"/> Sail <input type="checkbox"/> Houseboat <input type="checkbox"/> Rowboat <input type="checkbox"/> Other (SPECIFY)			ATV/Snowmobile CC size 500 Snow – studs present <input type="checkbox"/> YES <input type="checkbox"/> NO Helmet worn <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Two person machine? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
Rec. Vehicle #2	<u>Type of Boat</u>			Boat Length Boat Horsepower		<input type="checkbox"/> Physical disability <input type="checkbox"/> Speed related <input type="checkbox"/> Alcohol/drugs suspected <input type="checkbox"/> Other (SPECIFY)  <input type="checkbox"/> Unknown at this time	
	<input type="checkbox"/> Open Motorboat <input type="checkbox"/> Canoe/Kayak <input type="checkbox"/> Cabin Motorboat <input type="checkbox"/> PWC <input type="checkbox"/> Auxiliary Sail <input type="checkbox"/> Pontoon <input type="checkbox"/> Sail <input type="checkbox"/> Houseboat <input type="checkbox"/> Rowboat <input type="checkbox"/> Other (SPECIFY)			ATV/Snowmobile CC size Snow – studs present <input type="checkbox"/> YES <input type="checkbox"/> NO Helmet worn <input type="checkbox"/> YES <input type="checkbox"/> NO Two person machine? <input type="checkbox"/> YES <input type="checkbox"/> NO			

**Summary**

Victim was operating a two wheel drive Polaris Predator All Terrain Vehicle in a city park that is not open to ATV use. The ATV traveled down a grassy hill then onto an asphalt parking lot. The ATV traveled west bound in the parking lot then slid sideways and rolled, ejecting victim from the ATV. Victim received head injuries and was pronounced dead at the scene.

This Report Compiled By Warden Michael Clutter	Investigating Agency/Warden & date prepared WDNR Warden Michael Clutter 04-25-09
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**NOTE:** Immediately following a fatal incident, forward or e-mail this information to the Regional Recreational Safety Warden and the law enforcement bureau program administrator. The Law Enforcement Bureau fax no is: (608) 266-3696.



**OFFICER INCIDENT REPORT FOR: 2. ATV Crash**

**VEHICLE A**

<b>Vehicle Type</b> <input type="checkbox"/> Snowmobile <input type="checkbox"/> Three Wheel ATV <input checked="" type="checkbox"/> Four Wheel ATV		<b>Name of Passenger – Vehicle A</b> ( ) -		<b>Telephone Number</b> ( ) -			
<b>Vehicle Rented</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>Vehicle Borrowed</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>Address</b>			
<b>Make of Vehicle</b> Polaris		<b>Chassis Serial Number</b> (b)(6)		<b>City, State, Zip Code</b>			
<b>Vehicle Registration Number</b> (b)(6)		<b>Expiration Date</b> 2009	<b>State</b> WI	<b>Date of Birth (M-D-Y)</b> - -	<b>Age</b>	<b>Gender</b>	<b>Male</b>
<b>Model of Vehicle</b> Predator		<b>Year</b> 2003	<b>CC/Horsepower</b> 500 cc	<b>Was Passenger Wearing A Helmet?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Studded Tracks</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Estimated Speed At Time of Incident</b> MPH		<b>Did Passenger Have Eye Protection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			

**VEHICLE B**

<b>Vehicle Type</b> <input type="checkbox"/> Snowmobile <input type="checkbox"/> Three Wheel ATV <input type="checkbox"/> Four Wheel ATV		<b>Name of Passenger – Vehicle A</b> ( ) -		<b>Telephone Number</b> ( ) -			
<b>Vehicle Rented</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Vehicle Borrowed</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Address</b>			
<b>Make of Vehicle</b>		<b>Chassis Serial Number</b>		<b>City, State, Zip Code</b>			
<b>Vehicle Registration Number</b>		<b>Expiration Date</b>	<b>State</b>	<b>Date of Birth (M-D-Y)</b>	<b>Age</b>	<b>Gender</b>	<b>Male</b>
<b>Model of Vehicle</b>		<b>Year</b>	<b>CC/Horsepower</b>	<b>Was Passenger Wearing A Helmet?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Studded Tracks</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Estimated Speed At Time of Incident</b> MPH		<b>Did Passenger Have Eye Protection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			

**TYPE AND CAUSE OF INCIDENT**

**ENVIRONMENT**

<b>Type Of Incident</b> <input type="checkbox"/> Fell from moving Snowmobile/ATV <input type="checkbox"/> Collision with fixed object <input type="checkbox"/> Collision with another Snowmobile/ATV <input type="checkbox"/> Collision with moving motor vehicle <input type="checkbox"/> Collision with parked motor vehicle <input type="checkbox"/> Broke through ice <input type="checkbox"/> Driven into open water <input checked="" type="checkbox"/> Snowmobile/ATV rolled over <input type="checkbox"/> Struck fence or cable <input type="checkbox"/> Injured by contact with part of Snowmobile/ATV <input type="checkbox"/> Pedestrian struck by Snowmobile/ATV <input type="checkbox"/> Being pulled by Snowmobile/ATV <input type="checkbox"/> Other: _____		<b>Activity at Time Of Incident</b> <input checked="" type="checkbox"/> Recreational <input type="checkbox"/> Farm related <input type="checkbox"/> Sanctioned race/event <input type="checkbox"/> Construction <input type="checkbox"/> Hunting  <b>What in Your Opinion Contributed to the Incident?</b> <input type="checkbox"/> Drinking or Drugs <input checked="" type="checkbox"/> Vehicle speed <input type="checkbox"/> Equipment failure <input type="checkbox"/> Failure to yield <input type="checkbox"/> Inexperience <input type="checkbox"/> Trail conditions <input type="checkbox"/> Other: _____		<b>Weather</b> <input type="checkbox"/> Foggy – Mist <input checked="" type="checkbox"/> Raining <input type="checkbox"/> Snowing <input type="checkbox"/> Clear  <b>Temperature</b> 45 ° F  <b>Trail Condition</b> <input type="checkbox"/> Icy <input type="checkbox"/> Smooth <input type="checkbox"/> Rough <input type="checkbox"/> Muddy <input type="checkbox"/> Dry <input type="checkbox"/> Other: _____		<b>Visibility</b> <input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input checked="" type="checkbox"/> Day <input type="checkbox"/> Night  <b>Road Condition</b> <input type="checkbox"/> Dry <input type="checkbox"/> Snow Covered <input checked="" type="checkbox"/> Wet <input type="checkbox"/> Gravel <input checked="" type="checkbox"/> Paved <input type="checkbox"/> Other: _____	
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**DESCRIBE WHAT HAPPENED (The Sequence of Events Leading Up to the Incident):**

Victim lived in a residence adjacent to City Park. No witnesses could be found who saw the accident occur. Based on evidence found at the scene victim drove a Polaris Predator all terrain vehicle northbound down a grassy hill east of the southern parking lot at City Park, then westbound onto the paved parking lot. The ATV traveled approximately 107 feet westbound on the paved parking lot when it started to skid. The ATV skidded 28 to 29 feet, with the machine sliding/turning more to the left as it skidded, then rolled upside down onto its right side. The ATV slid upside down for approximately 21 feet before coming to rest. The victim was ejected from the ATV and came to rest 18 feet 4 inches from where the ATV overturned. The victim suffered severe head injuries and was pronounced dead at the scene.

OFFICER INCIDENT REPORT FOR: 2. ATV

Draw a Diagram of Crash Incident. Indicate North with an arrow in the circle. (Attach additional sheets if necessary.)

DIAGRAM NOT TO SCALE



Paved  
Parking Lot

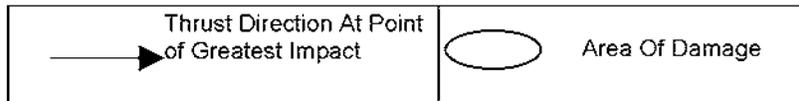
ATV

Victim

Grass / lawn  
area

ATV travel  
path

Diagram area of damage on appropriate chart below.



Snowmobile-A



Snowmobile-B



ATV-A



ATV-B



**INJURIES/DEATHS**

<p><b>Vehicle (Circle One)</b>  <b>Name:</b> _____  <b>Address:</b> _____  <b>City, State, Zip Code:</b> _____  <b>Telephone Number:</b> _____  <b>Date of Birth &amp; Age:</b> _____</p> <p><b>Was The Victim:</b>  <input checked="" type="checkbox"/> Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian</p> <p><b>Type of Injury:</b> <input type="checkbox"/> Minor – No Permanent Injury  <input type="checkbox"/> Major – Required Hospitalization  <input checked="" type="checkbox"/> Fatal</p> <p><b>Specific Injury:</b> (If more than one, number choices in order of severity)</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Amputation</td> <td><input type="checkbox"/> Laceration</td> </tr> <tr> <td><input type="checkbox"/> Broken Bone(s)</td> <td><input type="checkbox"/> Spinal Injury</td> </tr> <tr> <td><input type="checkbox"/> Burns</td> <td><input type="checkbox"/> Sprain/Strain</td> </tr> <tr> <td><input type="checkbox"/> Contusion</td> <td><input type="checkbox"/> Neck Injury</td> </tr> <tr> <td><input checked="" type="checkbox"/> Head Injury</td> <td><input type="checkbox"/> Back Injury</td> </tr> <tr> <td><input type="checkbox"/> Hypothermia</td> <td><input type="checkbox"/> Shock</td> </tr> <tr> <td><input type="checkbox"/> Internal Injuries</td> <td><input type="checkbox"/> Dislocation</td> </tr> </table> <p><b>Cause Of Death:</b>  <input checked="" type="checkbox"/> Trauma/Impact Injury  <input type="checkbox"/> Drowning _____  <input type="checkbox"/> Hypothermia  <input type="checkbox"/> Other _____</p>	<input type="checkbox"/> Amputation	<input type="checkbox"/> Laceration	<input type="checkbox"/> Broken Bone(s)	<input type="checkbox"/> Spinal Injury	<input type="checkbox"/> Burns	<input type="checkbox"/> Sprain/Strain	<input type="checkbox"/> Contusion	<input type="checkbox"/> Neck Injury	<input checked="" type="checkbox"/> Head Injury	<input type="checkbox"/> Back Injury	<input type="checkbox"/> Hypothermia	<input type="checkbox"/> Shock	<input type="checkbox"/> Internal Injuries	<input type="checkbox"/> Dislocation	<p align="center"><b>A B</b></p> <p align="center">_____          _____          _____          ( ) _____          _____ &amp; _____</p> <p><input type="checkbox"/> Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian</p> <p><input type="checkbox"/> Minor – No Permanent Injury  <input type="checkbox"/> Major – Required Hospitalization  <input type="checkbox"/> Fatal</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Amputation</td> <td><input type="checkbox"/> Laceration</td> </tr> <tr> <td><input type="checkbox"/> Broken Bone(s)</td> <td><input type="checkbox"/> Spinal Injury</td> </tr> <tr> <td><input type="checkbox"/> Burns</td> <td><input type="checkbox"/> Sprain/Strain</td> </tr> <tr> <td><input type="checkbox"/> Contusion</td> <td><input type="checkbox"/> Neck Injury</td> </tr> <tr> <td><input type="checkbox"/> Head Injury</td> <td><input type="checkbox"/> Back Injury</td> </tr> <tr> <td><input type="checkbox"/> Hypothermia</td> <td><input type="checkbox"/> Shock</td> </tr> <tr> <td><input type="checkbox"/> Internal Injuries</td> <td><input type="checkbox"/> Dislocation</td> </tr> </table> <p><input type="checkbox"/> Trauma/Impact Injury  <input type="checkbox"/> Drowning _____  <input type="checkbox"/> Hypothermia  <input type="checkbox"/> Other _____</p>	<input type="checkbox"/> Amputation	<input type="checkbox"/> Laceration	<input type="checkbox"/> Broken Bone(s)	<input type="checkbox"/> Spinal Injury	<input type="checkbox"/> Burns	<input type="checkbox"/> Sprain/Strain	<input type="checkbox"/> Contusion	<input type="checkbox"/> Neck Injury	<input type="checkbox"/> Head Injury	<input type="checkbox"/> Back Injury	<input type="checkbox"/> Hypothermia	<input type="checkbox"/> Shock	<input type="checkbox"/> Internal Injuries	<input type="checkbox"/> Dislocation	<p align="center"><b>A B</b></p> <p align="center">_____          _____          _____          ( ) _____          _____ &amp; 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<input type="checkbox"/> Internal Injuries	<input type="checkbox"/> Dislocation																																											

**WITNESSES (Other Than Operator or Injured Persons)**

<p><b>Name:</b> _____  <b>Address:</b> _____  <b>City, State, Zip:</b> _____  <b>Telephone #:</b> ( ) _____  <b>Date Of Birth:</b> _____</p>	<p>_____          _____          _____          ( ) _____          _____</p>	<p>_____          _____          _____          ( ) _____          _____</p>
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**INFORMATION SOURCES**

<p><b>Other Investigating Agencies:</b> <u>Plymouth Police Department</u></p>	<p>_____          _____</p>
<p><b>Other Agencies Rendering Assistance:</b> <u>Sheboygan County Sheriff</u></p>	<p>_____          _____</p>

**ATTACH ALL CASE ACTIVITY REPORTS AND DIAGRAMS**

**Attachments To This Report:**

<input checked="" type="checkbox"/> Narrative/Case Activity Report	<input type="checkbox"/> Coroner's Report	<input type="checkbox"/> Statements	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Diagram Of Incident	<input type="checkbox"/> Citation Or Criminal Complaint	<input type="checkbox"/> Photographs/Negatives	
<input type="checkbox"/> BAC Report	<input type="checkbox"/> Other Agency Reports	Were Photos Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No By Whom? <u>Warden Clutter</u>	

**Enforcement Action Taken (Please Attach Copy Of Citation Or Complaint)**  
 Yes  No If Yes Explain: \_\_\_\_\_

**VALIDATION**

<b>Investigation Prepared By:</b> <u>Michael Clutter</u>	<b>Date:</b> <u>04-29-09</u>	<b>Agency:</b> <u>WDNR</u>
<b>Primary Cause Of Incident</b> <u>Speed</u>	<b>Secondary Cause Of Incident:</b> <u>Wet pavement</u>	<b>Causes Based On:</b> <input type="checkbox"/> Invest. & Oper. Report <input checked="" type="checkbox"/> Investigation <input type="checkbox"/> Other

**REVIEWER**

<b>Reviewed By (Supervisor)</b>	<b>Date:</b>	<b>Agency:</b>
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**•• ATTACH ALL CASE ACTIVITY REPORTS AND DIAGRAMS ••**

Case Number <b>09 – C200 – 002.BMC</b>	Case Title <b>Plymouth City Park ATV Fatality</b>
Activity <b>Accident Scene Investigation</b>	Date of Activity <b>04 – 25 – 09</b>

Narrative<sup>1</sup>

On April 25, 2009 Warden Clutter was investigating a fatal all-terrain vehicle (ATV) accident that occurred in the southern parking lot of City Park in Plymouth, WI. Warden Clutter digitally photographed the area of the ATV accident with a WDNR issued Sony Cybershot DSC-P72 digital camera upon arrival. Though it was not raining when Warden Clutter arrived at the scene, the area had received rain earlier in the day and while the accident scene was investigated. The parking lot pavement and grass surrounding the area was wet at the time of the accident. Warden Clutter placed orange flags along the outside of the ATV's right tire tracks from the top of the hill southeast of the accident scene to where the ATV overturned. Warden Clutter digitally photographed and videoed the ATV's path.

Based on ATV tracks in the grass and on the pavement, gouge marks in the parking lot pavement, and damage to the ATV Warden Clutter determined the following:

- The ATV was operated east and westbound on the hilltop south of the parking lot, between the park and (b)(6) residence.
- The ATV was driven northbound, down the hill east of the parking lot, then curved to the northwest towards the parking lot.
- Based on the more distinct ATV tire tracks in the disturbed lawn/dirt at the east end of the parking lot it appears the ATV accelerated as it entered the parking lot.
- Where the ATV entered the parking lot from the grass hill the outside of the ATV's right tire track is 11 feet 10 inches north of the parking lot pavements southeast corner.
- The ATV traveled westbound on the paved asphalt parking lot in a gently serpentine path.
- Approximately 107 feet into the parking lot the ATV began to skid to the left.
- The ATV skidded 28 to 29 feet, with the machine sliding/turning more to the left as it skidded, then rolled upside down onto its right side. The ATV flipped at 135 feet 6 inches west of the parking lots east end and 22 feet south of the parking lots north curb.
- The ATV slid westbound before coming to rest where it was found upon Warden Clutter's arrival. There are gouges in the pavement that appear to be from the ATV's handlebar or hand brake. The ATV came to rest 21 feet west of where the ATV overturned and 18 feet 4 inches south of the parking lots north curb.
- The right handbrake was broken off the ATV's right handlebar. There were also fresh scuff marks on the ATV's right front and rear fenders, as well as the handlebar and the end of

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Warden Reporting <b>Michael Clutter</b>	Date of Report <b>04-27-09</b>	Exhibit Reference
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- the exhaust pipe.
- The rims of the right front and right rear tires appear to have fresh scuff marks on the "bead" area; near where the tire meets the rim.
  - The south end of the blood stained pavement, where (b)(6) head was reported to be, is 18 feet 4 inches west/northwest from where the ATV overturned and 16 feet 4 inches south of the parking lots north curb.
  - The left lens from a pair of glasses was found on the parking lot 30 feet 6 inches west of where the ATV overturned and 27 feet 7 inches south of the parking lots north curb. This left lens was also straight south from a light pole at the park's baseball field; this light pole is 13 feet 6 inches north of the parking lots north curb and is the first light pole east of the announcers stand behind home plate.
  - The right lens from a pair of glasses was found on the parking lot 43 feet 10 inches west of where the ATV overturned and 34 feet 2 inches south of the parking lots north curb.
  - The damaged frames from a silver colored pair of glasses were found on the parking lot 47 feet west of where the ATV overturned and 30 feet south of the parking lots north curb.

Warden Clutter and Warden Mark Pearce had up-righted the ATV to inspect damage to the top of the machine. Warden Clutter digitally photographed the up-righted ATV. Warden Clutter watched Warden Pearce engage the throttle on the ATV and saw that the throttle returned to the idle position when depressed and released. Warden Clutter engaged the hand clutch on the left handlebar of the ATV and pushed down on the gear shift operated by the ATV operator's left foot. The gear shift shifted down through two gears, then would go no further. Warden Clutter telephoned Feldman Sales and Service (920-565-3939) on April 27, 2009. Warden Clutter spoke to a man in the service department, asking what gear the 2003 Polaris Predator ATV was in if it could only be shifted down through 2 gears before it would not go any further. The service department employee told Warden Clutter that the ATV described by Warden Clutter has 5 speeds in a one down / four up configuration, and the ATV would have been in second gear if Warden Clutter could only push down through 2 gears (out of second into neutral, then out of neutral into first gear).

Warden Clutter inspected the Yamaha off-road motorcycle at the scene but saw no damage to suggest the motorcycle was involved in a collision with the ATV. The model of the Yamaha motorcycle is unknown; the side of the fuel tank said "Fleshwound" Films and there was a #48 on the sides of the motorcycle.

Warden Pearce and Officer Koball collected the bloody jacket from where (b)(6) had laid.

Warden Clutter collected the lenses and frames from the glasses as evidence. Warden Mark Pearce brought an aluminum trailer to the parking lot. The ATV gear shift was raised until the "Neutral" indicator light illuminated. Warden Clutter and Warden Pearce pushed the Polaris Predator ATV up the ramp and onto the trailer. Warden Pearce placed tie-down straps on the ATV to hold it in place while it was transported. Plymouth Police Officer David Koball asked that Warden Pearce transport the Yamaha motorcycle to the Plymouth City garage for safe keeping until it could be returned to (b)(6). The motorcycle was laid across the back of the trailer with the trailer gate closed.

Warden Clutter left the accident scene at approximately 6:30 p.m. on April 25, 2009. Warden Clutter later met with Warden Pearce at the WDNR Plymouth warehouse on Woodchuck Lane. Warden Pearce and Warden Clutter pushed (b)(6) Polaris Predator ATV down the trailer ramp and into the warehouse for safekeeping and to hold as evidence if needed. Warden Clutter placed seizure tag # A38030 on the ATV's handlebars.

On April 27, 2009 Warden Clutter received a CD of pictures and a printed incident report from the Plymouth Police Department regarding this ATV accident.

On April 27, 2009 Warden Clutter checked WDNR all terrain vehicle registration for (b)(6) and ATV decal # (b)(6). Warden Clutter found that the Polaris Predator involved in this accident was the only ATV ever registered to (b)(6). (b)(6) purchased the ATV on August 08, 2008 from Winnebagoland Kawasaki, Inc.

Case Number <b>09 – C200 – 002</b>	Case Title <b>Plymouth City Park ATV Fatality</b>
Activity <b>Initial Investigation</b>	Date of Activity <b>04 – 25 – 09</b>

Narrative<sup>1</sup>

On April 25, 2009 at 2:47 p.m. Conservation Warden Michael Clutter received a telephone call from Kettle Moraine State Forest – Northern Unit Ranger Kathy Kramasz reporting an all terrain vehicle (ATV) accident with serious injuries near the City of Plymouth Aquatic Center. Warden Clutter was working in full uniform and operating his WDNR issued squad truck.

Warden Clutter arrived at the Plymouth City Park located at the southwest intersection of N. Milwaukee Street and Suhrke Rd. in Plymouth, WI. Warden Clutter saw Plymouth Police and Sheboygan County Sheriff squad cars with a Plymouth Paramedic/EMS ambulance near the middle of the southern parking lot of the park. Warden Clutter parked at the west end of the parking lot. Warden Clutter saw an overturned Polaris Predator ATV, and a Yamaha off-road motorcycle lying on its side east of the ATV. Both vehicles were in the south parking lot. Warden Clutter saw a large area of blood on the pavement between the ATV and motorcycle.

Warden Clutter met with Plymouth Police Officer David Koball. Officer Koball told Warden Clutter the following information:

- the operator of the ATV, (b)(6) (D.O.B. (b)(6)), had died.
- (b)(6) owns the (b)(6) Jug in Plymouth, WI and is known to Officer Koball.
- (b)(6) suffered severe head injuries and was pronounced dead at the scene.
- (b)(6) was not wearing a helmet.
- Plymouth ambulance personnel relayed (b)(6) injury information to the hospital. Ambulance personnel were told by the hospital not to transport (b)(6) to the hospital because (b)(6) could not be revived.
- (b)(6) lives in a house south of the park; the roof and part of the second floor of (b)(6) residence is visible south/southwest from the accident scene. (b)(6) address is (b)(6) (b)(6)
- (b)(6) son, (b)(6) (D.O.B. (b)(6)), was riding the motorcycle lying at the scene.
- (b)(6) rode the motorcycle into the parking lot and found (b)(6) lying on the pavement near the upside down ATV. Samuel called 911 and was attempting CPR when emergency responders arrived.
- (b)(6) was not present when (b)(6) crashed the ATV.

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Warden Reporting <b>Michael Clutter</b>	Date of Report <b>04 – 26 – 09</b>	Exhibit Reference
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- The helmet lying near the ATV was worn by (b)(6) on the motorcycle.
- When Officer Koball arrived at the scene (b)(6) was lying in an east to west direction. (b)(6) head was pointing east, where the pooled blood begins. (b)(6) was on his back with his legs crossed. Officer Koball does not know if (b)(6) moved (b)(6) (b)(6) while attempting to assist him.
- Officer Koball checked the ATV public use registration decal # (b)(6) and found the machine is registered to (b)(6).

Warden Clutter telephoned Conservation Warden Mark Pearce, who agreed to assist with the accident investigation. Warden Clutter telephoned Warden Supervisor Joe Jerich to report the fatal ATV accident. Warden Jerich agreed to relay the incident to Recreational Safety Warden John Plenke.

Warden Clutter spoke to a Sheboygan County Sheriff Deputy who pointed out that the ATV's ignition key was in the "on" position with the ATV's headlight and taillight on. The Deputy then turned off the ignition switch because the ATV was leaking gasoline onto the pavement.

Warden Clutter met with Plymouth Police Officer Paul Haag. Officer Haag had spoken to Samuel Brown upon arriving at the accident scene and later in the day at another location. Officer Haag told Warden Clutter the following information:

- (b)(6) and (b)(6) were getting the ATV and off-road motorcycle running and checking the operation of the machines.
- (b)(6) rode the ATV from the (b)(6) residence out of sight of (b)(6).
- (b)(6) rode the motorcycle from their house to the parking lot, where he found the overturned ATV and (b)(6) lying on the pavement.
- (b)(6) called 911 then tried to assist (b)(6).
- (b)(6) stated during both of Officer Haag's contacts that (b)(6) was not present when the accident occurred and did not see what happened.

Warden Clutter met with Plymouth Ambulance personnel on the scene and was told the following information:

- When ambulance personnel arrived on the scene (b)(6) was lying in the parking lot where the blood stain originated.
- (b)(6) was bleeding from both ears with brain matter protruding from his skull.
- (b)(6) had a faint pulse but his eyes were fixed and dilated.
- Ambulance personnel telephoned Saint Nicholas hospital in Sheboygan, WI and relayed (b)(6) vital statistics. (b)(6) lost his pulse while ambulance personnel called the hospital.
- Saint Nicholas Hospital staff told ambulance personnel not to transport (b)(6) his injuries were too severe and his life could not be saved.
- Ambulance personnel placed (b)(6) in a body bag and moved him into the ambulance awaiting the Sheboygan County Coroner.
- The female member of the ambulance crew thought she smelled a faint odor of alcohol from (b)(6); none of the other crew members noticed the odor of an alcoholic beverage.

Warden Clutter met with Sheboygan County Coroner David J. Leffin (work telephone 920-459-3945; cellular telephone 920-254-7918) at the accident scene. Coroner Leffin told Warden Clutter the following information:

- (b)(6) would be transported to Suchon Funeral Home (1317 Hwy 67, Plymouth, WI; telephone 920-893-9797).
- Coroner Leffin had viewed (b)(6) body inside the ambulance. (b)(6) received severe head injuries.
- Coroner Leffin smelled plastic from (b)(6) body bag but did not notice the smell of an alcoholic beverage.
- Blood will be drawn from (b)(6) at the funeral home; Coroner Leffin speculated the toxicology results should be available in two weeks.

A man who identified himself as the funeral director from Suchon Funeral Home arrived at the scene and asked if officers wanted pictures of (b)(6) before any work was begun. Plymouth Police Officer Paul Haag agreed to take pictures of Brown's injuries and left the accident scene. Plymouth Police Officer Koball told Warden Clutter the pictures taken by Officer Haag should be available at the Plymouth Police Department on Monday, April 27, 2008.



**OFFICER INCIDENT REPORT FOR: 2. ATV Crash**

**VEHICLE A**

<b>Vehicle Type</b> <input type="checkbox"/> Snowmobile <input type="checkbox"/> Three Wheel ATV <input checked="" type="checkbox"/> Four Wheel ATV		<b>Name of Passenger – Vehicle A</b> _____		<b>Telephone Number</b> ( ) -	
<b>Vehicle Rented</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>Vehicle Borrowed</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>Address</b> _____	
<b>Make of Vehicle</b> Polaris		<b>Chassis Serial Number</b> (b)(6)		<b>City, State, Zip Code</b> _____	
<b>Vehicle Registration Number</b> (b)(6)		<b>Expiration Date</b> 2009	<b>State</b> WI	<b>Date of Birth (M-D-Y)</b> - -	<b>Age</b> _____
<b>Model of Vehicle</b> Predator		<b>Year</b> 2003	<b>CC/Horsepower</b> 500 cc	<b>Was Passenger Wearing A Helmet?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Studded Tracks</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Estimated Speed At Time of Incident</b> MPH		<b>Did Passenger Have Eye Protection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

**VEHICLE B**

<b>Vehicle Type</b> <input type="checkbox"/> Snowmobile <input type="checkbox"/> Three Wheel ATV <input type="checkbox"/> Four Wheel ATV		<b>Name of Passenger – Vehicle A</b> _____		<b>Telephone Number</b> ( ) -	
<b>Vehicle Rented</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Vehicle Borrowed</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Address</b> _____	
<b>Make of Vehicle</b> _____		<b>Chassis Serial Number</b> _____		<b>City, State, Zip Code</b> _____	
<b>Vehicle Registration Number</b> _____		<b>Expiration Date</b> _____	<b>State</b> _____	<b>Date of Birth (M-D-Y)</b> - -	<b>Age</b> _____
<b>Model of Vehicle</b> _____		<b>Year</b> _____	<b>CC/Horsepower</b> _____	<b>Was Passenger Wearing A Helmet?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Studded Tracks</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Estimated Speed At Time of Incident</b> MPH		<b>Did Passenger Have Eye Protection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

**TYPE AND CAUSE OF INCIDENT**

**ENVIRONMENT**

<b>Type Of Incident</b> <input type="checkbox"/> Fell from moving Snowmobile/ATV <input type="checkbox"/> Collision with fixed object <input type="checkbox"/> Collision with another Snowmobile/ATV <input type="checkbox"/> Collision with moving motor vehicle <input type="checkbox"/> Collision with parked motor vehicle <input type="checkbox"/> Broke through ice <input type="checkbox"/> Driven into open water <input checked="" type="checkbox"/> Snowmobile/ATV rolled over <input type="checkbox"/> Struck fence or cable <input type="checkbox"/> Injured by contact with part of Snowmobile/ATV <input type="checkbox"/> Pedestrian struck by Snowmobile/ATV <input type="checkbox"/> Being pulled by Snowmobile/ATV <input type="checkbox"/> Other: _____		<b>Activity at Time Of Incident</b> <input checked="" type="checkbox"/> Recreational <input type="checkbox"/> Farm related <input type="checkbox"/> Sanctioned race/event <input type="checkbox"/> Construction <input type="checkbox"/> Hunting  <b>What in Your Opinion Contributed to the Incident?</b> <input type="checkbox"/> Drinking or Drugs <input checked="" type="checkbox"/> Vehicle speed <input type="checkbox"/> Equipment failure <input type="checkbox"/> Failure to yield <input type="checkbox"/> Inexperience <input type="checkbox"/> Trail conditions <input type="checkbox"/> Other: _____		<b>Weather</b> <input type="checkbox"/> Foggy – Mist <input checked="" type="checkbox"/> Raining <input type="checkbox"/> Snowing <input type="checkbox"/> Clear  <b>Temperature</b> 45° F  <b>Trail Condition</b> <input type="checkbox"/> Icy <input type="checkbox"/> Smooth <input type="checkbox"/> Rough <input type="checkbox"/> Muddy <input type="checkbox"/> Dry <input type="checkbox"/> Other: _____		<b>Visibility</b> <input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input checked="" type="checkbox"/> Day <input type="checkbox"/> Night  <b>Road Condition</b> <input type="checkbox"/> Dry <input type="checkbox"/> Snow Covered <input checked="" type="checkbox"/> Wet <input type="checkbox"/> Gravel <input checked="" type="checkbox"/> Paved <input type="checkbox"/> Other: _____	
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**DESCRIBE WHAT HAPPENED (The Sequence of Events Leading Up to the Incident):**

Victim lived in a residence adjacent to City Park. No witnesses could be found who saw the accident occur. Based on evidence found at the scene victim drove a Polaris Predator all terrain vehicle northbound down a grassy hill east of the southern parking lot at City Park, then westbound onto the paved parking lot. The ATV traveled approximately 107 feet westbound on the paved parking lot when it started to skid. The ATV skidded 28 to 29 feet, with the machine sliding/turning more to the left as it skidded, then rolled upside down onto its right side. The ATV slid upside down for approximately 21 feet before coming to rest. The victim was ejected from the ATV and came to rest 18 feet 4 inches from where the ATV overturned. The victim suffered severe head injuries and was pronounced dead at the scene.

OFFICER INCIDENT REPORT FOR: 2. ATV

Draw a Diagram of Crash Incident. Indicate North with an arrow in the circle. (Attach additional sheets if necessary.)

DIAGRAM NOT TO SCALE

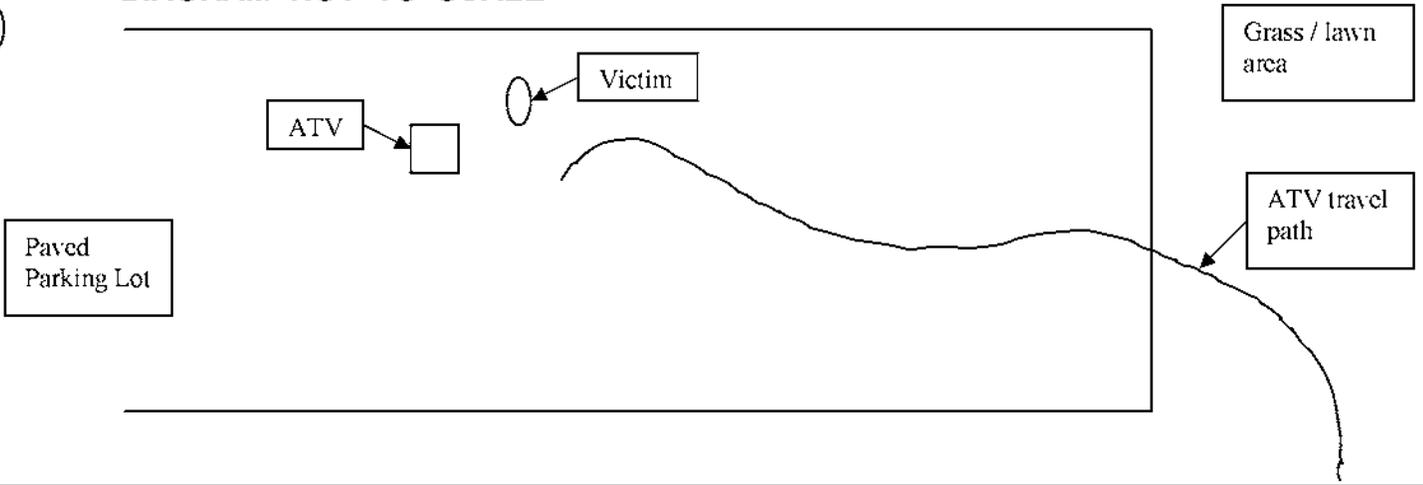
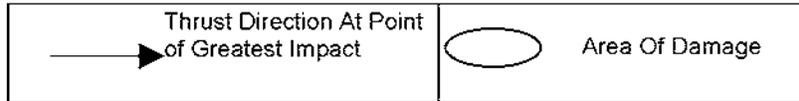


Diagram area of damage on appropriate chart below.



Snowmobile-A



Snowmobile-B



ATV-A



ATV-B



**INJURIES/DEATHS**

<p><b>Vehicle (Circle One)</b>      <b>A</b></p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State, Zip Code: _____</p> <p>Telephone Number: _____</p> <p>Date of Birth &amp; Age: _____</p> <p><b>Was The Victim:</b></p> <p><input checked="" type="checkbox"/> Operator   <input type="checkbox"/> Passenger   <input type="checkbox"/> Pedestrian</p> <p><b>Type of Injury:</b>   <input type="checkbox"/> Minor – No Permanent Injury</p> <p>                          <input type="checkbox"/> Major – Required Hospitalization</p> <p>                          <input checked="" type="checkbox"/> Fatal</p> <p><b>Specific Injury:</b> (If more than one, number choices in order of severity)</p> <p>___ Amputation                      ___ Laceration</p> <p>___ Broken Bone(s)                ___ Spinal Injury</p> <p>___ Burns                                ___ Sprain/Strain</p> <p>___ Contusion                        ___ Neck Injury</p> <p><input checked="" type="checkbox"/> Head Injury                        ___ Back Injury</p> <p>___ Hypothermia                      ___ Shock</p> <p>___ Internal Injuries                ___ Dislocation</p> <p><b>Cause Of Death:</b></p> <p>                          <input checked="" type="checkbox"/> Trauma/Impact Injury</p> <p>                          <input type="checkbox"/> Drowning _____</p> <p>                          <input type="checkbox"/> Hypothermia</p> <p>                          <input type="checkbox"/> Other _____</p>	<p align="center"><b>A    B</b></p> <p align="center">_____</p> <p align="center">_____</p> <p align="center">( ) _____</p> <p align="center">_____ &amp; _____</p> <p><input type="checkbox"/> Operator   <input type="checkbox"/> Passenger   <input type="checkbox"/> Pedestrian</p> <p><input type="checkbox"/> Minor – No Permanent Injury</p> <p><input type="checkbox"/> Major – Required Hospitalization</p> <p><input type="checkbox"/> Fatal</p> <p>___ Amputation                      ___ Laceration</p> <p>___ Broken Bone(s)                ___ Spinal Injury</p> <p>___ Burns                                ___ Sprain/Strain</p> <p>___ Contusion                        ___ Neck Injury</p> <p>___ Head Injury                        ___ Back Injury</p> <p>___ Hypothermia                      ___ Shock</p> <p>___ Internal Injuries                ___ Dislocation</p> <p><input type="checkbox"/> Trauma/Impact Injury</p> <p><input type="checkbox"/> Drowning _____</p> <p><input type="checkbox"/> Hypothermia</p> <p><input type="checkbox"/> Other _____</p>	<p align="center"><b>A    B</b></p> <p align="center">_____</p> <p align="center">_____</p> <p align="center">( ) _____</p> <p align="center">_____ &amp; _____</p> <p><input type="checkbox"/> Operator   <input type="checkbox"/> Passenger   <input type="checkbox"/> Pedestrian</p> <p><input type="checkbox"/> Minor – No Permanent Injury</p> <p><input type="checkbox"/> Major – Required Hospitalization</p> <p><input type="checkbox"/> Fatal</p> <p>___ Amputation                      ___ Laceration</p> <p>___ Broken Bone(s)                ___ Spinal Injury</p> <p>___ Burns                                ___ Sprain/Strain</p> <p>___ Contusion                        ___ Neck Injury</p> <p>___ Head Injury                        ___ Back Injury</p> <p>___ Hypothermia                      ___ Shock</p> <p>___ Internal Injuries                ___ Dislocation</p> <p><input type="checkbox"/> Trauma/Impact Injury</p> <p><input type="checkbox"/> Drowning _____</p> <p><input type="checkbox"/> Hypothermia</p> <p><input type="checkbox"/> Other _____</p>
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**WITNESSES (Other Than Operator or Injured Persons)**

<p>Name: _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Telephone #: ( ) _____</p> <p>Date Of Birth: _____</p>	<p>_____</p> <p>_____</p> <p>( ) _____</p> <p>_____</p>	<p>_____</p> <p>_____</p> <p>( ) _____</p> <p>_____</p>
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**INFORMATION SOURCES**

<p><b>Other Investigating Agencies:</b>      <u>Plymouth Police Department</u></p> <p>_____</p>	<p>_____</p> <p>_____</p>
<p><b>Other Agencies Rendering Assistance:</b>      <u>Sheboygan County Sheriff</u></p> <p>_____</p>	<p>_____</p> <p>_____</p>

**ATTACH ALL CASE ACTIVITY REPORTS AND DIAGRAMS**

**Attachments To This Report:**

Narrative/Case Activity Report       Coroner's Report       Statements       Other: \_\_\_\_\_

Diagram Of Incident       Citation Or Criminal Complaint       Photographs/Negatives

BAC Report       Other Agency Reports      Were Photos Taken?  Yes    No By Whom? Warden Clutter

**Enforcement Action Taken (Please Attach Copy Of Citation Or Complaint)**

Yes    No If Yes Explain: \_\_\_\_\_

**VALIDATION**

<p><b>Investigation Prepared By:</b> <u>Michael Clutter</u></p>	<p><b>Date:</b> <u>04-29-09</u></p>	<p><b>Agency:</b> <u>WDNR</u></p>
<p><b>Primary Cause Of Incident</b> <u>Speed</u></p>	<p><b>Secondary Cause Of Incident:</b> <u>Wet pavement</u></p>	<p><b>Causes Based On:</b> <input type="checkbox"/> Invest. &amp; Oper. Report   <input checked="" type="checkbox"/> Investigation   <input type="checkbox"/> Other</p>

**REVIEWER**

<p><b>Reviewed By (Supervisor)</b> _____</p>	<p><b>Date:</b> _____</p>	<p><b>Agency:</b> _____</p>
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**•• ATTACH ALL CASE ACTIVITY REPORTS AND DIAGRAMS ••**

Case Number 09 – C200 – 002.CMC	Case Title Plymouth City Park ATV Fatality
Activity Coroner Report	Date of Activity 05-07-09

Narrative<sup>1</sup>

On May 07, 2009 Conservation Warden Michael Clutter received an e-mail from WDNR operations program associate Julie Fitzgerald containing the coroners report for (b)(6) Sheboygan County Coroner David Leffin's report lists Mr. (b)(6) injury causing death as "traumatic head injury". Coroner Leffin had told Warden Clutter at the scene of the ATV accident that blood would be drawn from Mr. (b)(6) for a toxicology test. The coroner's report included an attachment from the Wisconsin State Laboratory of Hygiene showing Mr. (b)(6) blood alcohol level was 0.138 g / 100 ml.

Warden Clutter updated the Officer Incident Report for an ATV Crash (Form 4100-203 (Rev. 11/04)) with the information from the coroner's report and submitted the revised report to Warden Supervisor Joe Jerich and Recreational Safety Warden John Plenke.

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Warden Reporting Michael Clutter	Date of Report 05 - 12 - 09	Exhibit Reference
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Case Number 09 – C200 – 002.DMC	Case Title Plymouth City Park ATV Fatality
Activity Return of ATV	Date of Activity 05-05-09

Narrative<sup>1</sup>

Warden Clutter received a request from Doug Daugherty (telephone number 414-614-2297), the brother-in-law of victim (b)(6), to have the ATV and motorcycle held as a result of this incident returned to the victim's widow, Susan (b)(7). Mr. Daugherty also requested copies of all reports related to this incident for Susan Brown. Mr. Daugherty explained that he was taking care of these arrangements for his sister.

Warden Clutter discussed this request with Recreational Safety Warden John Plenke and agreed that there was no need for WDNR to hold the ATV involved in this fatality any longer. Warden Clutter photocopied all reports available at the time and arranged to meet with Doug Daugherty at the Brown's residence (110 Grove St., Plymouth, WI 53073) on May 05, 2009 at 2:00 p.m. Warden Clutter told Mr. Daugherty that the Plymouth Police Department had stored the motorcycle left at the scene of the accident for safe keeping and Mr. Daugherty would have to contact the Plymouth Police Department for the motorcycles return.

On May 05, 2009 Warden Clutter was met by a man who verbally identified himself as Doug Daugherty and a woman who verbally identified herself as Sue Brown at 110 Grove St., Plymouth, WI. Warden Clutter was working in full uniform and driving a WDNR issued truck. Warden Clutter was invited into the residence and spoke to Mr. Daugherty and Mrs. Brown in the dining area. Warden Clutter gave Mrs. Brown copies of WDNR and Plymouth Police reports related to Bruce Brown's fatal ATV incident, as well as information Warden Clutter had received from the Sheboygan County Victim/Witness Protection Office to possibly assist the family. Mrs. Brown thanked Warden Clutter for the information and asked that Warden Clutter release the ATV to Doug Daugherty. Mrs. Brown then signed Seizure Tag A38030 as the recipient of the ATV.

Doug Daugherty followed Warden Clutter to the WDNR Woodchuck Lane office where Mr. Daugherty and Warden Clutter pushed the ATV out of the law enforcement storage area and loaded it into Mr. Daugherty's truck. Mr. Daugherty commented to Warden Clutter that Mrs. Brown wanted the ATV sold and Mr. Daugherty was going to need to make some repairs before the sale could occur.

Warden Reporting Michael Clutter	Date of Report 06 - 05 - 09	Exhibit Reference
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*This document was produced as a result of an official Law Enforcement investigation. Contents, in whole or part, are privileged by s. 905.09, Wis. Stats., and may not be used without express permission of the Wisconsin Warden service or appropriate prosecutor.*

SERVICE CALL INFORMATION Doc# 1

Page 1

Nature.....: EMS/MEDICAL 04/25/2009 14:37  
 Location.....: (b)(6)  
 Jurisdiction..: 26 Plymouth  
 How Received..: 911 Call Contact Phone: (b)(6)  
 Received by...: S120 Dispatcher...: S120

Current Dispo: Sit. resolved Assigned Ofcr: P716 04/25/2009  
 Disposition...: 003 Sit. resolved Owing Jurisd.: 26 Plymouth  
 ISC.....: 9730 AMBULANCE-ACCIDENTAL INJURY  
 Incident Code: 6 Medical UCR.....: 00 Non-Criminal  
 Report Type...: 1  
 UOCL.....: 9730 NON-EMERGENCY CALLS

Notes:

MALE SUBJECT FELL FROM ATV POOL AREA AT PARK  
 (TS) Officers dispatched along with EMS for a male party who had crashed an ATV while operating it in the City Park parking lot. Male party was ejected. Male party had severe head trauma, and as a result, died. Officers assisted EMS and Wisconsin Department of Natural Resources conservation warden with investigation. (FF)\*

ASSIGNED UNITS

Unit	Name	Jur	Type	Filed	Resp	Disp	Arrv	Clrd	Tot
8061	PLYMOUTH AMBULANCE	59	A		3	14:40	14:42	15:43	1:01
P732	HAAG, PAUL	26	P		3	14:42	16:22	18:01	1:39
F853	PLYMOUTH TOWN FD	28	F		3	14:44	14:56	15:06	10
S149	KROGSTAD, JUSTIN	59	P		3	14:48	14:55	15:05	10
P716	KOBALL, DAVID	26	P	F	2	15:00	15:02	17:53	2:51
C951	LEFFIN, DAVID J	59	O		2	15:01	15:26	18:56	3:30
P732	HAAG, PAUL	26	P		2	18:22	18:27	18:31	4

OFFENSE INFORMATION Offense# 1 Filed by: P732 on 04/25/2009 Part 2

Original.....: 9730 NON-EMERGENCY CALLS Sit resolv Patrol  
 Occurred: From: 04/25/2009 14:37 To: 00/00/0000

CONTACT LIST Offense# 1

Page 3

Contact: 1 Filed by: P716 on 04/25/2009  
 Complainant...: (b)(6) Male  
 Location.....: (b)(6)  
 Description...: EMS/MEDICAL on 04/25/2009 Race: White  
 Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 2 Filed by: P716 on 04/25/2009  
 Victim.....: (b)(6)  
 Location.....: (b)(6)  
 Description...: EMS/MEDICAL on 04/25/2009 Race: White  
 Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 3 Filed by: P716 on 04/25/2009

CONTACT LIST Offense# 1

Part 3

Citizen Conta: (b)(6)  
Location.....: (b)(6)  
Description...: EMS/MEDICAL on 04/25/2009 Race: White  
Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 4 Filed by: P716 on 04/25/2009

Citizen Conta: (b)(6)  
Location.....: (b)(6)  
Description...: EMS/MEDICAL on 04/25/2009 Race: White  
Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 5 Filed by: P716 on 04/25/2009

Citizen Conta: PLYMOUTH AMBULANCE SERVICE (920) 893-0588  
Location.....: 604 S MILWAUKEE STREET, PLYMOUTH, WI 53073  
Description...: EMS/MEDICAL on 04/25/2009  
Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 6 Filed by: P716 on 04/25/2009

Citizen Conta: SUCHON FUNERAL HOME (920) 893-9797  
Location.....: 1317 67 HIGHWAY, PLYMOUTH, WI 53073  
Description...: EMS/MEDICAL on 04/25/2009  
Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 7 Filed by: P716 on 04/25/2009

Citizen Conta: (b)(6)  
Location.....: (b)(6)  
Description...: EMS/MEDICAL on 04/25/2009 Race: White  
Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 8 Filed by: P716 on 04/25/2009

Citizen Conta: (b)(6)  
Location.....: (b)(6)  
Description...: EMS/MEDICAL on 04/25/2009 Race: White  
Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

Contact: 9 Filed by: P716 on 04/25/2009

Citizen Conta: OPPENEER, CAROL L. 09/27/1949 Female  
Location.....: W5724 W W HIGHWAY, CASCADE, WI 53011  
New Location..: W5724 W HIGHWAY, CASCADE, WI 53011  
Move to new location updated in system as of: 04/27/2009  
Description...: EMS/MEDICAL on 04/25/2009 Race: White  
Report.....: Offns Rpt 090028477 Disposition...: Sit Resolv 04/25/2009

VEHICLE INFORMATION Offense# 1

Part 5

IMPOUNDED.: 1 04/25/2009, YAMAHA/FLESHWOUND BLU  
License.....: VIN# 4ES043232  
Value.....: \$200.00  
Notes.....: DIRT BIKE

TEXT INFORMATION

Part 8

NARRATIVE.: 1 by P716 KOBALL, DAVID 04/25/2009

TEXT INFORMATION

Page 8

(TS) OFFENSE REPORT BY OFFICER KCBALL:

On 04-25-09 at approximately 2:37 p.m., Sheboygan County Sheriff's Department related that they received a 911 call from (b)(6) regarding a male party who had fallen from a bike. They said it was near a park. As myself and Officer Haag were the only department to go to that location, we were exiting the parking lot and asked again where it was, and I heard the dispatch for EMS to (b)(6) in the city of Plymouth, which is near City Park. I responded to that location and upon arrival at (b)(6), did not see anything. Officer Haag was behind me and passed me westbound on Grove Street to look on the west end of City Park. I took my squad car and drove it down the bike path on the southeast corner of the park. I drove it to the north towards the pool. Upon going down the hill towards the parking lot, I could see an ATV turned on its side. I then drove into the parking lot and saw a male party lying in the ground with a young male attempting to do chest compressions on this male party. Upon pulling up, and prior to exiting the squad car, I could see the male party lying on the ground had severe head trauma, due to the large amount of blood that was on the pavement.

I radioed to dispatch that I had found the accident and explained it was an ATV accident with severe head trauma, and we were in the parking lot by the city pool. Officer Haag arrived shortly after I had arrived. I had my defibrillator and he walked over to the victim, who was later identified as (b)(6) Plymouth. (b)(6) was unconscious at this time and a large amount of blood was coming from his right ear canal. His face had some abrasions on it as well. He has shallow breathing and at this time appeared to have a pulse. Plymouth Ambulance then arrived. Officer Haag was attempting to hook up the defibrillator and remove (b)(6) jacket and shirt. Plymouth Ambulance arrived approximately the same time and I was attempting to get a bag mask in an attempt to assist Bruce with breathing. Plymouth Ambulance stated they did have a pulse, but it was very weak at this time. They continued to work on him and Plymouth Fire Department members were also dispatched to assist. Upon their arrival, I turned over my position at (b)(6) head, assisting him with breathing, to a fire department member.

Myself and Officer Haag then went and spoke with the young male party who was there, who was identified as (b)(6) son, (b)(6), 11-28-95. I asked (b)(6) if he had seen the accident. He stated he did not. He had gone up by the house and when he came back down, he found his father lying on the pavement with the ATV tipped over. Officer Haag then took (b)(6) to a friend of the family's house as the rest of his family was out of town at this time. I then radioed the Sheboygan County Sheriff's Department and asked if there were any conservation wardens working at this time. They stated they were not sure, but would attempt to get a hold of one.

While waiting for the warden to arrive, Deputy Krogstad related he had some training in ATV accident reporting and would respond to our location to assist. On his arrival, he started filling out the

TEXT INFORMATION

Part 8

accident form and a short time later Conservation Warden Michael Clutter arrived on scene. He stated he would be handling the investigation. Prior to him arriving, ambulance staff had asked me to come to the ambulance as they had moved Bruce to the ambulance. They said there was nothing they could do for him anymore and they would be calling the hospital to receive authorization to stop any resuscitative attempts, which they did. I then contacted the coroner via radio to the Sheboygan County Sheriff's Department.

While waiting for the coroner to arrive, I assisted Conservation Warden Clutter and Conservation Warden Mark Pearce with measurements and reconstruction of the accident. I made an attempt to find out what had occurred. Officer Haag also provided information by interviewing (b)(6) regarding the accident. Upon Coroner Dave Leffin arriving, he went and looked at (b)(6). There was a question whether he had consuming intoxicants, and the coroner advised he did not smell any intoxicants on him, but would be doing a blood draw. Deputy Krogstad then assisted with keeping people out of the parking lot.

During reconstruction of the accident, I also made phone contact with Deputy Chief Ringel and advised him what had occurred. He did arrive at our location and requested that I take photos of the area. Warden Clutter also had been taking numerous photos and I continued to assist him with taking measurements of the area. On no longer needing measurements, the area was cleaned up and quick dry was placed on fluids that were on the ground at this time. The Plymouth Street Department was also contacted to clean the area as well with a street sweeper. Funeral Director Sam Suchon also arrived on scene and was given some personal effects of (b)(6) that we located. Officer Haag also went to the funeral home to take photographs of (b)(6) body for the investigation.

Warden Pearce had gone and procured an ATV utility trailer and I assisted them with loading the ATV onto the trailer, along with the small dirt bike which the son was riding at the time. The dirt bike is a Yamaha Fleshwound motorcycle, serial # (b)(6). It should be noted that there was a helmet there as well, which matched the motorcycle. Sam said that was his helmet and his father was not wearing a helmet at the time of this crash. It appears as if the crash had occurred when the ATV veered quickly to the left and the ATV went end over end, ejecting (b)(6) into the pavement, then landing on top of him and continuing past his body. (b)(6) was face up at the time we were there, but upon speaking with (b)(6), we found that he had been face down on the pavement and (b)(6) had rolled him over after he had found him. The Yamaha motorcycle was impounded at this time and taken to the City Garage until the Wisconsin Department of Natural Resources wardens concluded their investigation regarding this accident.

NARRATIVE.: 2 by P732 HAAG, PAUL 04/25/2009  
(TS) SUPPLEMENTAL REPORT BY OFFICER HAAG:

On 04-25-09 at approximately 2:35 p.m., I, Officer Haag of the Plymouth Police Department, along with Officer Koball of the Plymouth Police

TEXT INFORMATION

Part 8

Department, were dispatched to a bike accident at a park in Plymouth, where the condition of the party involved was unknown. I then informed Officer Koball that perhaps we should go to City Park as that is the park most people refer to as "the park". We were then told that the call was coming from (b)(6), which runs along the southern end of City Park. As we were driving to the scene in emergency mode, we turned onto (b)(6) as that is the location of City Park, and we did not find anybody on Grove Street. I then rode up next to Officer Koball on Grove Street and communicated with him that I was going to drive on the paved walking trail that goes through City Park to see if somebody had fallen on that. As I pulled away to access that walking trail, I noticed that Officer Koball had taken a different path on the southeast side of City Park and I was accessing a trail from the southwest side. As I was traveling the trail and looking for people, I observed only a male party walking a dog on Laack Street. However as I took the trail towards the east, I saw Officer Koball enter the parking lot area from the trail he had taken and I then heard him call out that a male party was down.

I then proceeded in that direction and then heard Officer Koball, prior to even stopping and getting out of his vehicle, announce that there was severe head trauma to the male party who was down. Officer Koball pulled up to the scene first and I followed a few seconds after. When I stopped, Officer Koball retrieved life support equipment from his trunk. I then ran around to the back of his squad car where he handed to me his defibrillator and told me to get it over by the patient. The ambulance was dispatched at the same time we were and they were shortly behind us. As I came up to the patient, I recognized a tall, middle-aged man lying on his back on the ground, with his head in a large pool of blood. I then yelled out to the man, "Sir can you hear me" as I was preparing the electrodes for the defibrillator. In looking at him, I did see his stomach rise and fall, although in a very shallow fashion, and knew that he was, at that time, getting very shallow breaths. Then, as I was surveying him, I noticed a large amount of blood draining from his right ear in a fashion that indicated to me there was significant internal injury, just by the sheer volume that I had observed. I then, as I was preparing to place the electrodes on him in case they were needed, was joined by the ambulance crew of Plymouth Ambulance Service. They began to work on this male party, who was later identified as (b)(6), M/W, (b)(6), who was staring up at the sky and appeared to have no pupil response. The ambulance crew immediately got to work with suction devices and bag masks to help ventilate Mr. (b)(6).

I then had the occasion to look at Mr. (b)(6) and his stomach again to see how his breathing was doing and I did no notice any movement at that time in his stomach, as I had before. I then ran to the ambulance, grabbed the stretcher, and brought that over to where he was being worked on. I then ran back to the ambulance again to get the back board as well. As more medical crews arrived, I removed myself from the area of Mr. (b)(6) so that they could work and perform the techniques they were trained to do. I then observed there was an ATV that had been tipped over in the area of Mr. (b)(6), as well as a

TEXT INFORMATION

Part 8

blue-colored dirt bike that was also laying down by the curb.

I then informed Officer Koball that I was going to make contact with the caller and two un-related citizens who were there providing comfort to the caller. The caller was (b)(6), M/W, (b)(6). He was being comforted by another lady, perhaps in her mid 50's - early 60's. (b)(6) first question to me was whether or not his dad was going to die. I told him I did not know, that the last I had heard is they had a pulse, but that I was not sure what was all going on. (b)(6) then told me that his mother, (b)(6), F/W, (b)(6), as well as his sister, were flying from Florida, that they had left earlier in the day as they were going down to bury his grandfather's ashes. Knowing the family and knowing there would be nobody at the residence to be there with him, I asked him if he had any other relatives in the area and he advised that the only person he had, that he knew of, was an uncle down in Milwaukee. I asked if he had any other aunts or uncles in the area and he stated no. I asked him if he had any grandparents in the area and he stated they were all deceased. I then told him that he could sit in the back of my patrol car as I did not want to have him hearing anything that would have been going on with his father. I also intended to remove him from the scene and get him in a place of comfort so he did not have to witness any of the work being done, especially in the event things were not going well.

(b)(6) then told me he did have a friend who lived nearby, and took me to (b)(6) in Plymouth to the residence of (b)(6), F/W, (b)(6). We pulled up in the driveway and made contact with (b)(6) at the front door of the residence. (b)(6) was understandably shaking and tearful and was trying to explain what happened to (b)(6), however she was not able to understand what he was saying. I then asked (b)(6) if he could step inside and I would explain the situation to (b)(6) for him and he complied with that. With (b)(6) inside, and (b)(6) and I on the porch, I informed her in a soft, low voice that (b)(6), who is a family friend, had been involved in an ATV accident and had suffered what can only be described as significant and very serious trauma. We then walked inside where she provided emotional comfort for (b)(6) and I informed her and (b)(6) that I would go back to the scene of the accident to find out any more information that I could.

Also, during that time, I obtained a cell phone number I could reach (b)(6) at to provide her with information as would be necessary. I then left out the front door of the residence and as I was walking down the steps of the front porch, heard Officer Koball request for the coroner to come on scene. I then stopped walking, turned back around, saw (b)(6) through the window of the residence and waved her in my direction. When she walked outside, I informed her that they had called for the coroner to come on scene and that (b)(6) had passed. Sandra, after getting herself as composed as she could, then entered the residence and informed (b)(6) what had happened. (b)(6) then called the cell phone number where she could reach (b)(6) and informed (b)(6) who had just landed in Florid and was just getting off the airplane, what had happened. (b)(6) then wanted to speak to me and I informed her of what I knew at that point and then advised that they

TEXT INFORMATION

Part 8

would be getting on a plane immediately to come back to Wisconsin. (b)(6) then stated he wanted to go to a different residence where it turns out he has other relatives in the city of Plymouth. I asked (b)(6) if she could, when she knew where the residence was, call and let me know in the event family called we could connect everyone.

I then returned back to the scene where I had been requested by the emergency workers there to make contact with a member of the Sheboygan Press and provide him with options for what he needed to do. After handling that situation, during which the member of the Press did leave the park, I received a call from (b)(6), F/W, (b)(6), who resides at (b)(6) advised that she was (b)(6) sister, that she had heard there had been an accident, and she was wondering what had happened and where (b)(6) was. After providing her with (b)(6) phone number so that she could call (b)(6) to find out where he was, I hung up with (b)(6). I was then informed that (b)(6) was at 111 Frederick Street in the city of Plymouth by other relatives.

I then made contact with members inside the Plymouth Ambulance where I was given a bag with property that (b)(6) had on his person. This property was eventually given to Sam Suchon so that he could clean the property up and give it to the family when they arrived. I then was asked by one of the DNR wardens investigating if I could talk to (b)(6) again to try and figure out what happened. I then went to (b)(6) and talked to (b)(6). He advised that he and his dad were riding together, his dad on the ATV and (b)(6) on a dirt bike, so that they could get the machines warmed up for the season. (b)(6) advised that his dad had gone down the hill from the back yard and was down there approximately a minute or two before (b)(6) himself came down and found him lying on the concrete, face down. (b)(6) stated that he rode over to where his dad was, dropped the bike and rolled his dad over to see what his condition was, because in (b)(6) words he was already bleeding a lot. He then noticed that his dad needed help, so ran up to the house, called 911, got the information to the dispatchers and then ran back down to the scene to help out his father. When we pulled up to the scene initially, (b)(6) was observed doing chest compressions on his father. I asked him how long they had been riding around before they went down to the parking lot of the park, and he stated they were riding around for approximately five minutes in the back yard. I asked him how they got down there, and he stated there is a path that they usually take down there when they ride. (b)(6) stated that they were actually on their way back to the house so they could get (b)(6) helmet.

I then thanked him for his time and left the residence to go back to the scene of the crash to inform the DNR wardens what I had obtained for information. After giving them this information, they asked me if I could go and take photographs of Mr. (b)(6) body for their report. I then followed Sam Suchon, who was on scene, to the Suchon Funeral Home and upon arrival, I did take photographs. One photograph that was taken was one of what appeared to be a puncture wound to the back of Mr. (b)(6) head that (b)(6) had discovered and pointed out to me. I then once again drove back to the scene and informed the wardens of the

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copy of the back of the head of the vehicle. I was able to find the  
license plate number. I then called the police department and  
the officers, I could not find the police department and I  
took a copy, which they did request. I then proceeded to the  
department where I printed off a copy of the license plate  
photo of vehicle #1380000, view marks and other markings that were  
initially hole-punch punch marks. The county cop, who was  
also at the department at that time, did make me a CD with the  
photos on it as well. I did also attempt to locate one of the  
officers on Hwy 98 and a second one on Woodman Lane, however was  
unsuccessful in doing so.

# CORONER'S REPORT OF MOTOR VEHICLE DEATH

MV1238 199 Chapters 23, 30, 346, 350 Wis. Stats.

Wisconsin Department of Transportation  
 Department of Health and Family Services  
 Department of Natural Resources

In compliance with s. 23.33, 30.67(6), 346.71 and 350.155, Wis. Stats., coroners and medical examiners are required to submit blood specimens to the State Laboratory of Hygiene in all motor vehicle, boating, all-terrain vehicle and snowmobile fatalities. S. 23.33, 30.67(6), 346.71 and 350.155, Wis. Stats., appear in their entirety in the handbook for coroners and medical examiners published by the Department of Health and Family Services.

**Send report, or specimen and report to:**

Coroner's Fatality Reports  
 Wisconsin State Laboratory of Hygiene  
 2601 Agriculture Dr.  
 P.O. Box 7996  
 Madison, WI 53707-7996

Report each death promptly, answering all questions completely for each case within your jurisdiction. Please print or type all names and addresses.

*David J. Leffin*

SEE REVERSE FOR EXPLANATORY NOTE

Name of Fatality (First)	(b)(6)	Birth Date	(b)(6)	Sex	M
Address	(b)(6)				

<input type="checkbox"/> Motor Vehicle Accident	<input type="checkbox"/> Motorcycle	<input checked="" type="checkbox"/> Driver	<input checked="" type="checkbox"/> Restraint Use (Check)	<input type="checkbox"/> Helmet
<input type="checkbox"/> Snowmobile Accident	<input type="checkbox"/> Moped	<input type="checkbox"/> Passenger	<input checked="" type="checkbox"/> None Used	<input type="checkbox"/> Life Vest
<input checked="" type="checkbox"/> All-Terrain Vehicle	<input type="checkbox"/> Dirt Bike	<input type="checkbox"/> Pedestrian	<input type="checkbox"/> Shoulder Belt Only	<input type="checkbox"/> Restraint Used, Type Unknown
<input type="checkbox"/> Boating	<input type="checkbox"/> Other	<input type="checkbox"/> Bicyclist	<input type="checkbox"/> Lap Belt Only	<input type="checkbox"/> Unknown if Used
			<input type="checkbox"/> Lap and Shoulder Belt	
			<input type="checkbox"/> Child Safety Seat	

Date of Accident	Hour	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM	Accident Location (City, Village, Town)	County	Highway/Lake
4-25-09	1427			Phynsooth (Cty)	Sheboygan	
Date of Death	Hour	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM	Place of Death (At scene, Enroute to hospital, At hospital, etc.)		
4-25-09	1529			Scene		
Injury Causing Death						
Traumatic Head Injury						

Sample Obtained By (Or Reason Not Obtained)	Date	Hour	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM
David J. Leffin	4-25-09	1610		

Drug Screen  Other \_\_\_\_\_

Please send additional specimen kits with forms.

Please send additional forms only. → Blood + urine - TN

*David J. Leffin* 4-25-09  
 (Coroner's Signature) (Date)

Note: Forwarding of this completed report, along with a blood specimen when required, meets the requirements of s. 23.33, 30.67(6), 346.71 and 350.155, Wis. Stats. "Coroners or medical examiners to report; require blood specimen."

Name and address of person to receive test results, specimen kits, forms, etc.

Name	Mr. David Leffin		
Address	4450 White Oak Ln Sheboygan, WI 53083		
City	State	Zip Code	

FOR LABORATORY USE ONLY	
Sample Received By	Date
J. Neuh	28 Apr 09
Specimen Label/Seal/Comments	
Specimen was labelled and sealed.	
Sample Analyzed By	Date
Test Result	09FX - 08273



Toxicology Section  
 Wisconsin State Laboratory of Hygiene  
 2601 Agriculture Dr., P.O. Box 7996  
 Madison, WI 53707-7996  
 (608) 224-6241

# Laboratory Report

http://www.slh.wisc.edu

Daniel F. I. Kurtycz, M.D., Medical Director • Charles D. Brokopp, Dr.P.H., Director

\* Page 1 of 1\*  
 Date: 5/1/2009

Submitter copy to:

SHEBOYGAN CO CORONER-3274  
 DAVID LEFFIN RN  
 4450 WHITE OAK LN  
 SHEBOYGAN, WI 53083

Spec #: 09FX008273

Subject

(b)(6)

DOB: (b)(6)

Sex: M

Coll By: D LEFFIN  
 Date Coll: 4/25/2009  
 Time Coll: 1610  
 Date Rcvd: 4/28/2009

Spec Type: BLOOD  
 Spec Condition: Labelled and sealed  
 Ethanol Tested: 4/28/2009

Final Results

ETHANOL 0.138 g/100 mL

Specimen Comments:

Specimen(s) will be retained no longer than six months unless otherwise requested by agency or subject.

ETHANOL ANALYST:

*Thomas P. Neuser*

Thomas P. Neuser, MT(ASCP), #AP-245

As designee of the Director, I do hereby certify this document to be a true and correct report of the findings of the Wisconsin State Laboratory of Hygiene.

*Thomas Ecker*

Thomas Ecker, Advanced Chemist



## Photo-documentation Log

**Note: Time stamp on digital photo is one hour behind actual time taken; time on this photo log is accurate.**

**Case:** 09-C200-002

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Image Number: 3657                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:00 p.m.

Location: City Park south parking lot

Description: ATV as seen upon Warden Clutter's arrival

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Image Number: 3658                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:08 p.m.

Location: City Park south parking lot

Description: ATV as found upon arrival but with ignition turned off.

---

Image Number: 3659                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:08

Location: City Park south parking lot

Description: ATV. blood stain. motorcycle as found upon Warden Clutter's arrival.

---

Image Number: 3660                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:08 p.m.

Location: City Park south parking lot

Description: ATV. blood stain. motorcycle as found upon Warden Clutter's arrival.

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**Case:** 09-C200-002

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Image Number: 3661                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:08 p.m.

Location: City Park south parking lot

Description: ATV, blood stain, motorcycle as found upon Warden Clutter's arrival.

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Image Number: 3662                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:09 p.m.

Location: City Park south parking lot

Description: ATV, blood stain, motorcycle as found upon Warden Clutter's arrival.

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Image Number: 3663                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:09 p.m.

Location: City Park south parking lot

Description: ATV, blood stain, motorcycle, faint ATV tracks from east of scene facing west.

---

Image Number: 3664                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:10 p.m.

Location: City Park south parking lot

Description: Overview of parking lot from east of scene facing west.

---

Image Number: 3665                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:10 p.m.

Location: East end of City Park south parking lot

Description: ATV tracks entering east end of parking lot.

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**Case:** 09-C200-002

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Image Number: 3666                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:10 p.m.

Location: East end of City Park south parking lot.

Description: ATV tracks entering east end of parking lot and overview of accident scene.

---

Image Number: 3667                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:10 p.m.

Location: East end of City Park south parking lot.

Description: ATV tracks entering east end of parking lot and overview of accident scene.

---

Image Number: 3668                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:11 p.m.

Location: City Park south parking lot

Description: ATV accident scene with skid and gouge marks on pavement.

---

Image Number: 3669                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:12 p.m.

Location: City Park south parking lot

Description: WI ATV registration decal # 30886-46.

---

Image Number: 3670                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:25 p.m.

Location: City Park south parking lot

Description: Right side handlebar and throttle of upside down ATV

---



**Case:** 09-C200-002

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Image Number: 3671                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:25 p.m.

Location: City Park south parking lot

Description: Left side handlebar of upside down ATV

---

Image Number: 3672                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:26 p.m.

Location: City Park south parking lot

Description: Left side of upside down ATV

---

Image Number: 3673                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:26 p.m.

Location: City Park south parking lot

Description: Rear of upside down ATV

---

Image Number: 3674                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:26 p.m.

Location: City Park south parking lot

Description: Undercarriage of upside down ATV

---

Image Number: 3675                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:26 p.m.

Location: City Park south parking lot

Description: Front of upside down ATV

---



**Case:** 09-C200-002

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Image Number: 3676                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:26 p.m.

Location: City Park south parking lot

Description: Left side of upside down ATV

---

Image Number: 3677                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:33 p.m.

Location: City Park south parking lot

Description: Vehicle Identification Number of ATV

---

Image Number: 3678                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:34 p.m.

Location: City Park south parking lot

Description: Handlebar and fuel tank area of upside down ATV

---

Image Number: 3679                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:35 p.m.

Location: City Park south parking lot

Description: Lens from eye glasses near end of upside down ATV (referred to as left lens in report 09-C200-002.BMC)

---

Image Number: 3680                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:35 p.m.

Location: City Park south parking lot

Description: Skid marks and gouges in pavement east of overturned ATV

---



**Case:** 09-C200-002

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Image Number: 3681                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:41 p.m.

Location: City Park south parking lot

Description: Right side of up-righted ATV

---

Image Number: 3682                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:41 p.m.

Location: City Park south parking lot

Description: Scuff marks on right rear fender and exhaust pipe of ATV

---

Image Number: 3683                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:41 p.m.

Location: City Park south parking lot

Description: Broken hand brake. scuffs on handlebar and right front fender of ATV

---

Image Number: 3684                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:41 p.m.

Location: City Park south parking lot

Description: Right side of up-righted ATV; view from front

---

Image Number: 3685                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:41 p.m.

Location: City Park south parking lot

Description: Scuff marks on top of left handlebar

---



**Case:** 09-C200-002

---

Image Number: 3686                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:42 p.m.

Location: City Park south parking lot

Description: Front view of up-righted ATV

---

Image Number: 3687                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:42 p.m.

Location: City Park south parking lot

Description: Scuff on rear of front right ATV fender

---

Image Number: 3688                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:42 p.m.

Location: City Park south parking lot

Description: Scuffs on right rear ATV fender

---

Image Number: 3689                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:43 p.m.

Location: City Park south parking lot

Description: ATV's gear shift lever prior to manipulation

---

Image Number: 3690                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                                      Time: 3:47 p.m.

Location: City Park south parking lot

Description: Left rear half of up-righted ATV

---



**Case:** 09-C200-002

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Image Number: 3691                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 3:47 p.m.

Location: City Park south parking lot

Description: Left front half of up-righted ATV

---

Image Number: 3692                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:21 p.m.

Location: City Park south parking lot

Description: Blood stain area facing south.

---

Image Number: 3693                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:25 p.m.

Location: City Park south parking lot

Description: Flagged path of ATV's travel path prior to accident facing east.

---

Image Number: 3694                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:25 p.m.

Location: City Park south parking lot

Description: Flagged path of ATV's travel path prior to accident facing east

---

Image Number: 3695                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:31 p.m.

Location: Grass hill east of parking lot

Description: Flagged path of ATV's travel path prior to accident facing west

---



**Case:** 09-C200-002

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Image Number: 3696                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:32 p.m.

Location: Grass hill southeast of parking lot

Description: Flagged path of ATV's travel path prior to accident facing northwest

---

Image Number: 3697                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:32 p.m.

Location: Grass hill southeast of parking lot.

Description: Flagged path of ATV's travel path prior to accident facing northwest.

---

Image Number: 3698                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:32 p.m.

Location: Grass hill southeast of parking lot

Description: Flagged path of ATV's travel path prior to accident facing northwest

---

Image Number: 3699                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:32 p.m.

Location: Grass hilltop southeast of parking lot

Description: Path of ATV's travel prior to accident on hilltop: facing west.

---

Image Number: 3700                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:32 p.m.

Location: Grass hilltop southeast of parking lot

Description: Path of ATV's travel prior to accident on hilltop: facing west.

---



**Case:** 09-C200-002

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Image Number: 3701                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:33 p.m.

Location: Grass hilltop southeast of parking lot

Description: Path of ATV's travel prior to accident on hilltop; facing west.

---

Image Number: 3702                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:34 p.m.

Location: Grass hilltop southeast of parking lot

Description: Path of ATV's travel prior to accident on hilltop; facing west.

---

Image Number: 3703                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:35 p.m.

Location: Grass hilltop south of parking lot

Description: Path of ATV's travel prior to accident on hilltop; facing west; ATV tracks from what is reportedly victims residence.

---

Image Number: 3704                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:35 p.m.

Location: Grass hilltop south of parking lot

Description: ATV tracks in wet lawn; camera zoom lens to show trailer with black SUV in driveway at what is reportedly victims residence.

---

Image Number: 3705                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:36 p.m.

Location: Grass hilltop south of parking lot

Description: ATV tracks in wet lawn hilltop facing east from near victims residence.

---



**Case:** 09-C200-002

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Image Number: 3706                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:36 p.m.

Location: Grass hilltop south of parking lot

Description: ATV tracks in wet lawn hilltop facing east from near victims residence

---

Image Number: MOV3707                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:46 p.m.

Location: City Park south parking lot

Description: Digital video walking from accident scene east along flagged ATV path

---

Image Number: 3708                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:47 p.m.

Location: City Park south parking lot

Description: Gouges/scuffs in pavement and flagged ATV path in parking lot

---

Image Number: 3709                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:47 p.m.

Location: City Park south parking lot

Description: Gouges/scuffs in pavement and flagged ATV path in parking lot

---

Image Number: 3710                      Photographer: Warden Michael Clutter

Date: 04 - 25 - 09                      Time: 4:48 p.m.

Location: City Park south parking lot

Description: Gouges/scuffs in pavement

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**Case:** 09-C200-002

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Image Number: 3711

Photographer: Warden Michael Clutter

Date: 04 - 25 - 09

Time: 4:49 p.m.

Location: City Park south parking lot

Description: Gouges/scuffs in pavement

---

**IDI 090602HCC2657**

**Exhibit E 1 – ATV, blood stain, motorcycle as found by Warden Clutter**



**Exhibit E 2 – ATV, blood stain, motorcycle as found by Warden Clutter**



IDI 090602HCC2657

Exhibit E 3 – ATV, blood stain, motorcycle as found by Warden Clutter



Exhibit E 4 – ATV, blood stain, motorcycle as found by Warden Clutter



IDI 090602HCC2657

Exhibit E 5 – ATV tracks entering east end of parking lot.

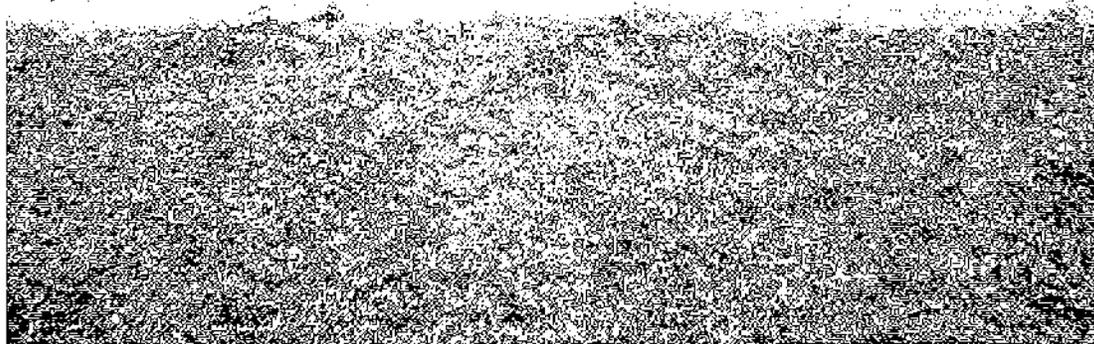


Exhibit E 6 – ATV tracks east end of parking lot; overview of accident scene

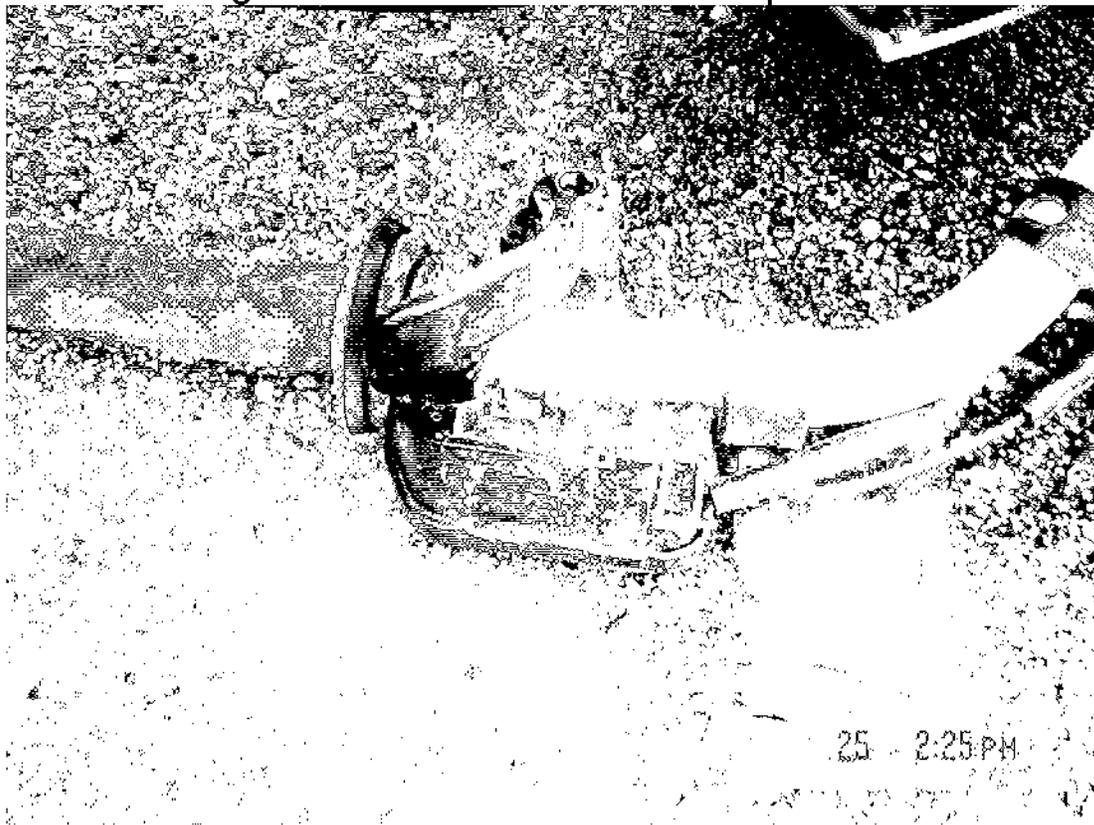


IDI 090602HCC2657

**Exhibit E 7 – ATV accident scene with skid and gouge marks on pavement**



**Exhibit E 8 – Right side handlebar and throttle of upside down ATV**



IDI 090602HCC2657

Exhibit E 9 – Left side handlebar of upside down ATV

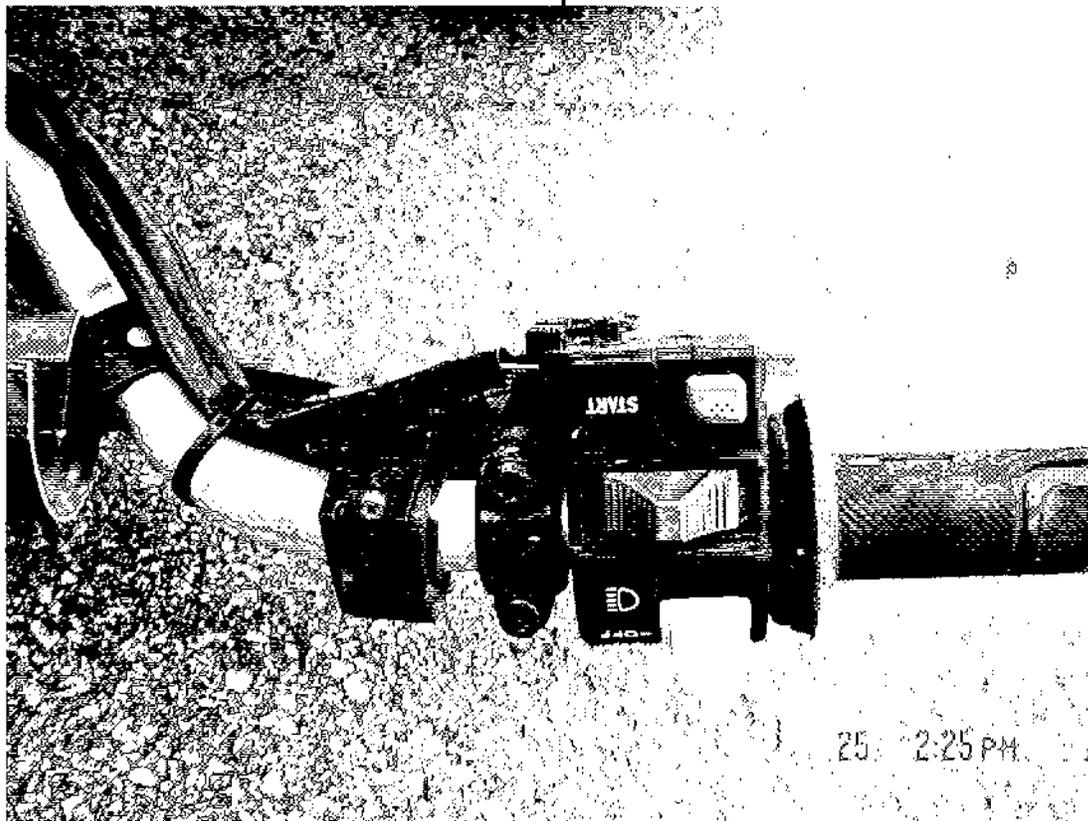


Exhibit E 10 – Left side of upside down ATV



IDI 090602HCC2657

Exhibit E 11 – Rear of upside down ATV

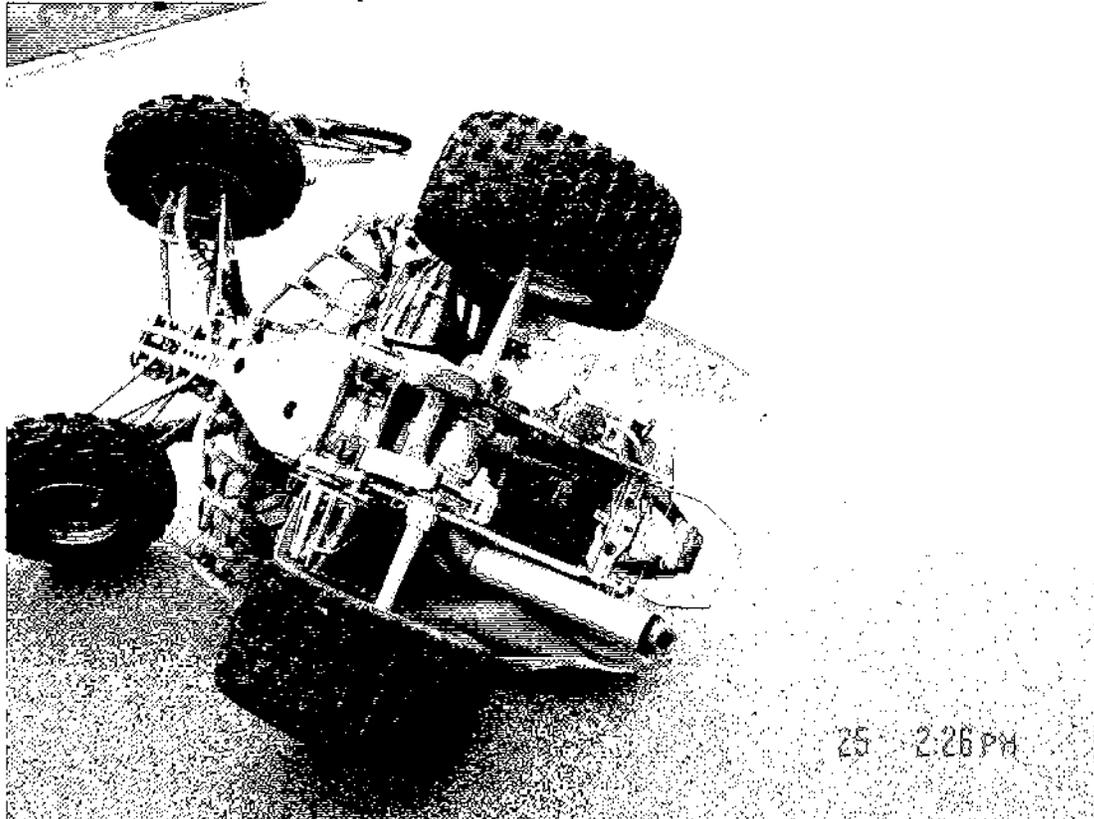
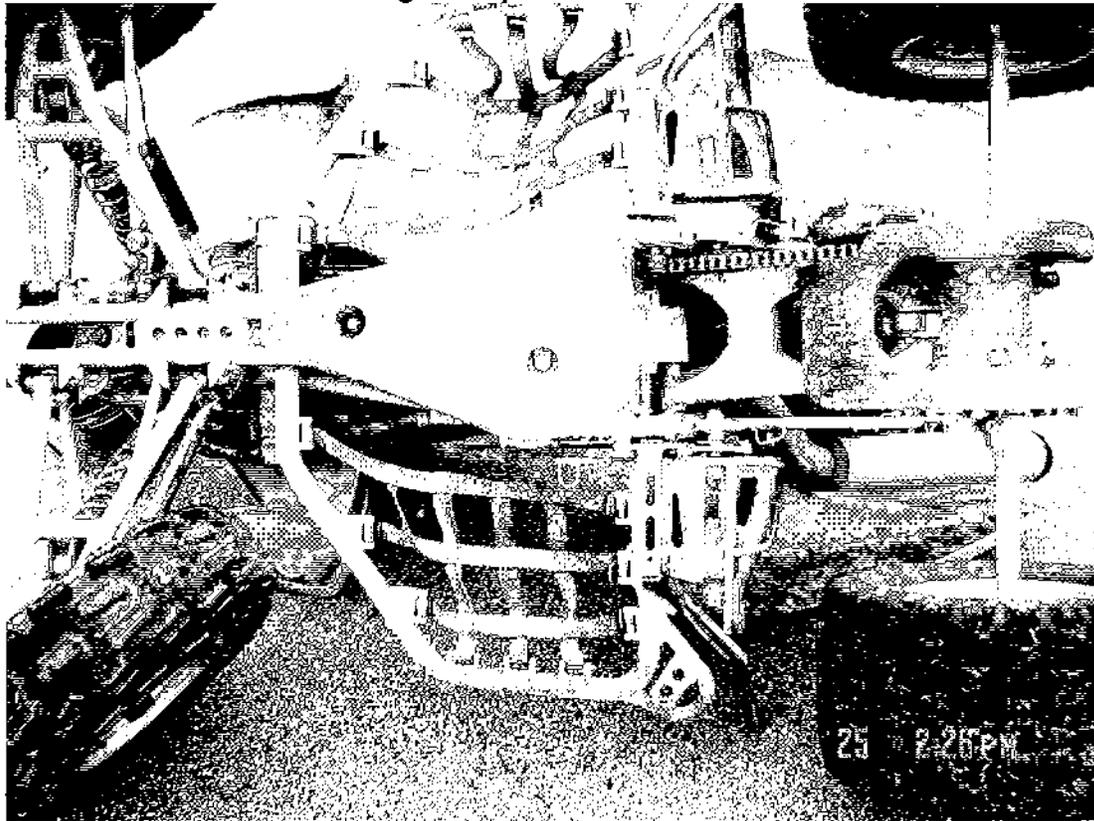


Exhibit E 12 – Undercarriage of upside down ATV



IDI 090602HCC2657

Exhibit E 13 – Front of upside down ATV

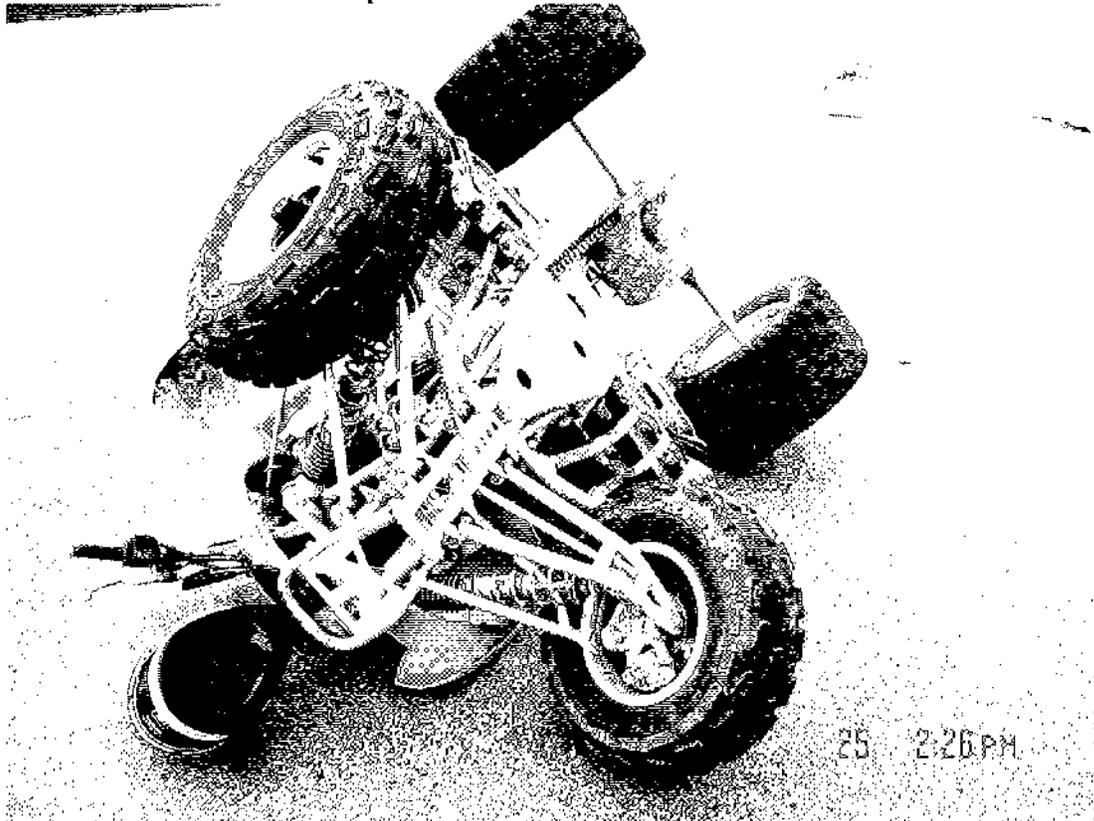
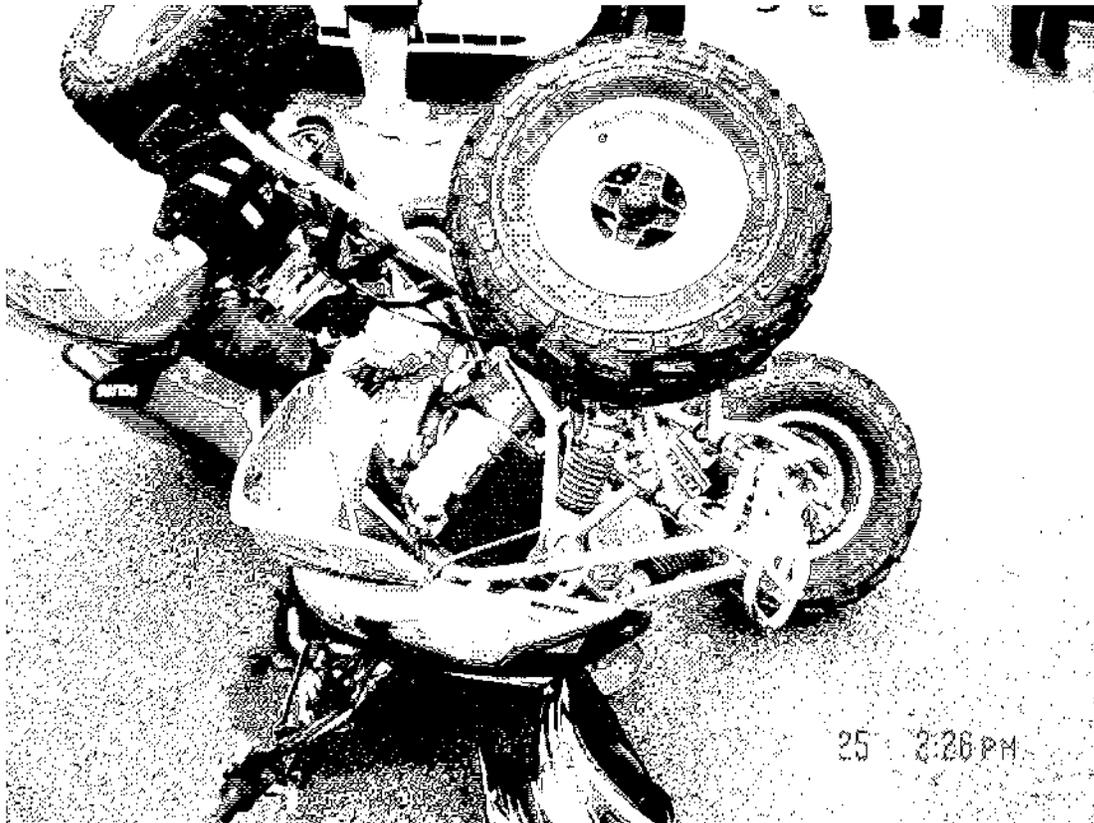


Exhibit E 14 – Left side of upside down ATV



IDI 090602HCC2657

Exhibit E 15 – Vehicle Identification Number of ATV

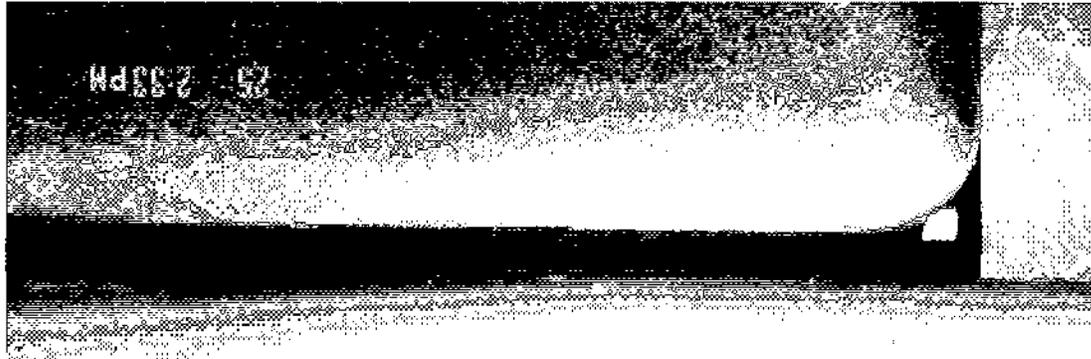


Exhibit E 16 – Handlebar and fuel tank area of upside down ATV





Exhibit E 18 – Right side of up-righted ATV

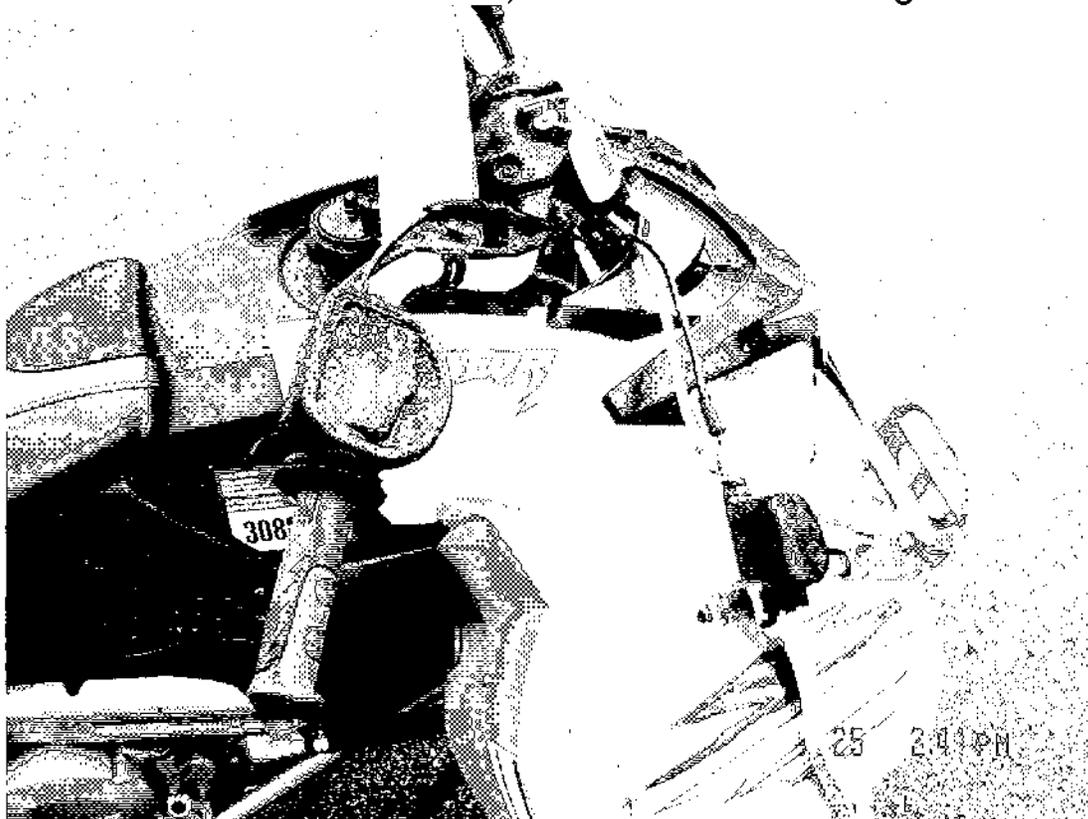


IDI 090602HCC2657

Exhibit E 19 – Scuff marks on right rear fender and exhaust pipe of ATV



Exhibit E 20 – Broken hand brake, scuffed handlebar and right front fender



IDI 090602HCC2657

Exhibit E 21 – Right side of up-righted ATV; view from front

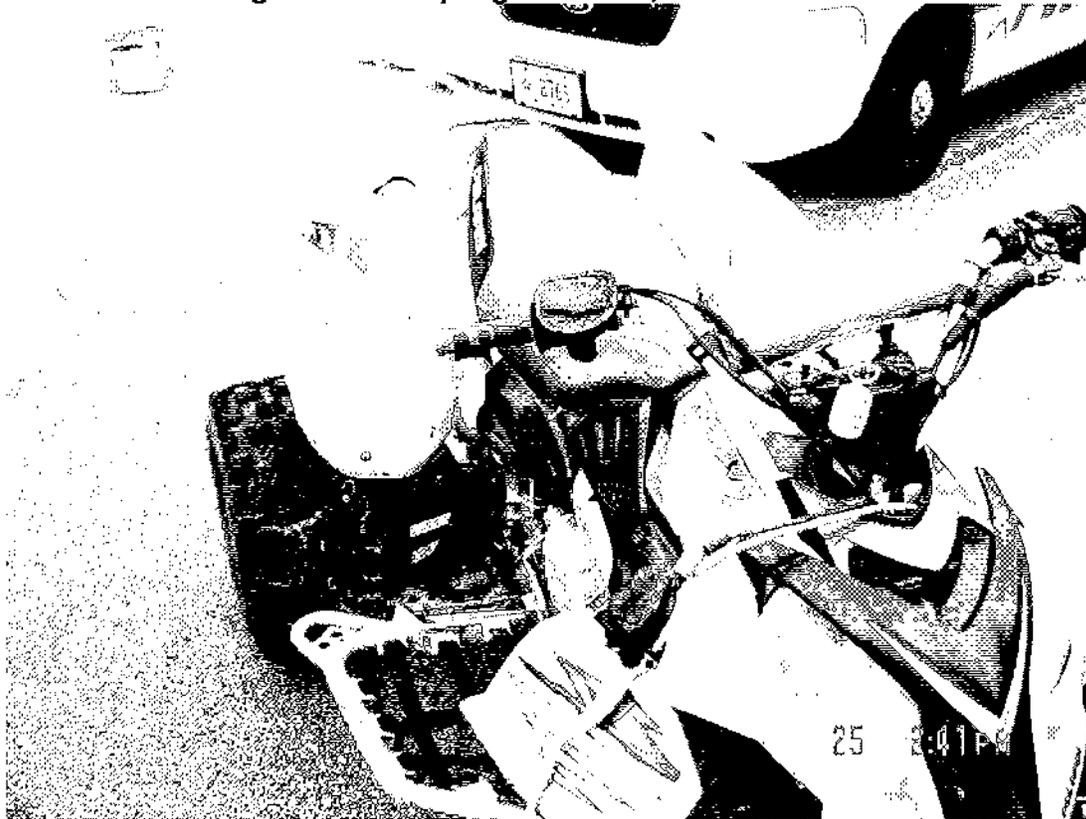
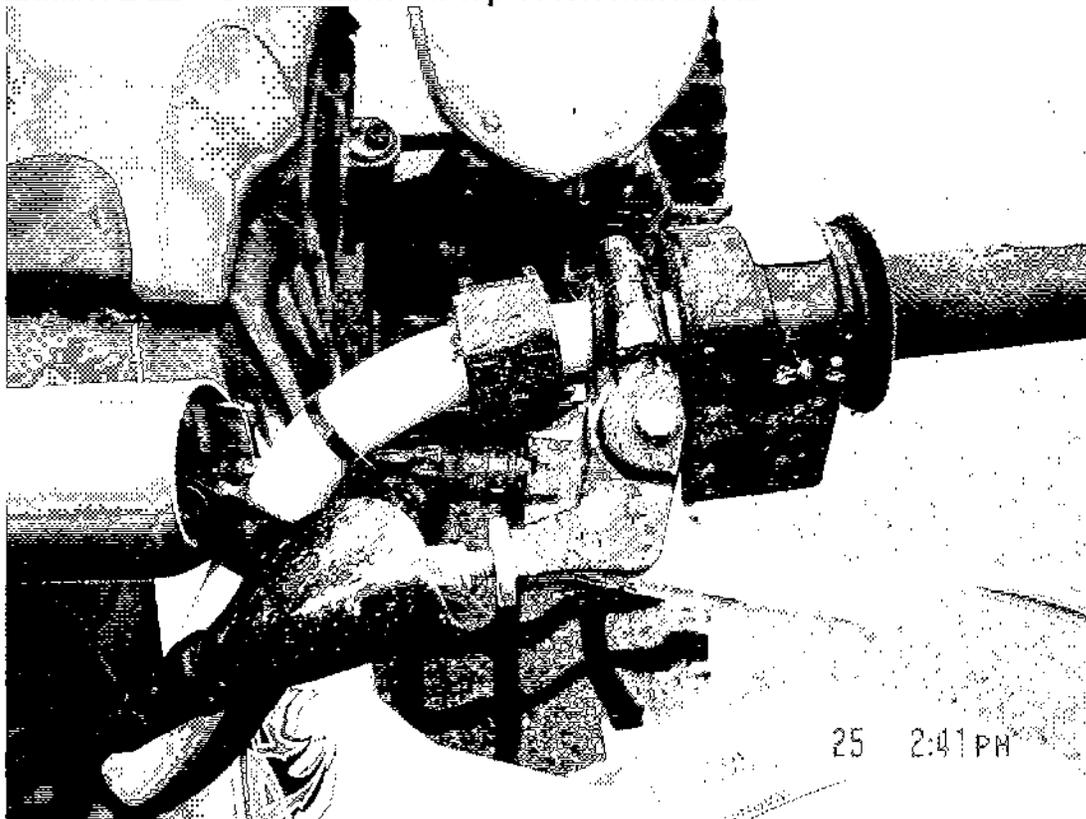


Exhibit E 22 – Scuff marks on top of left handlebar



IDI 090602HCC2657

Exhibit E 23 – Front view of up-righted ATV

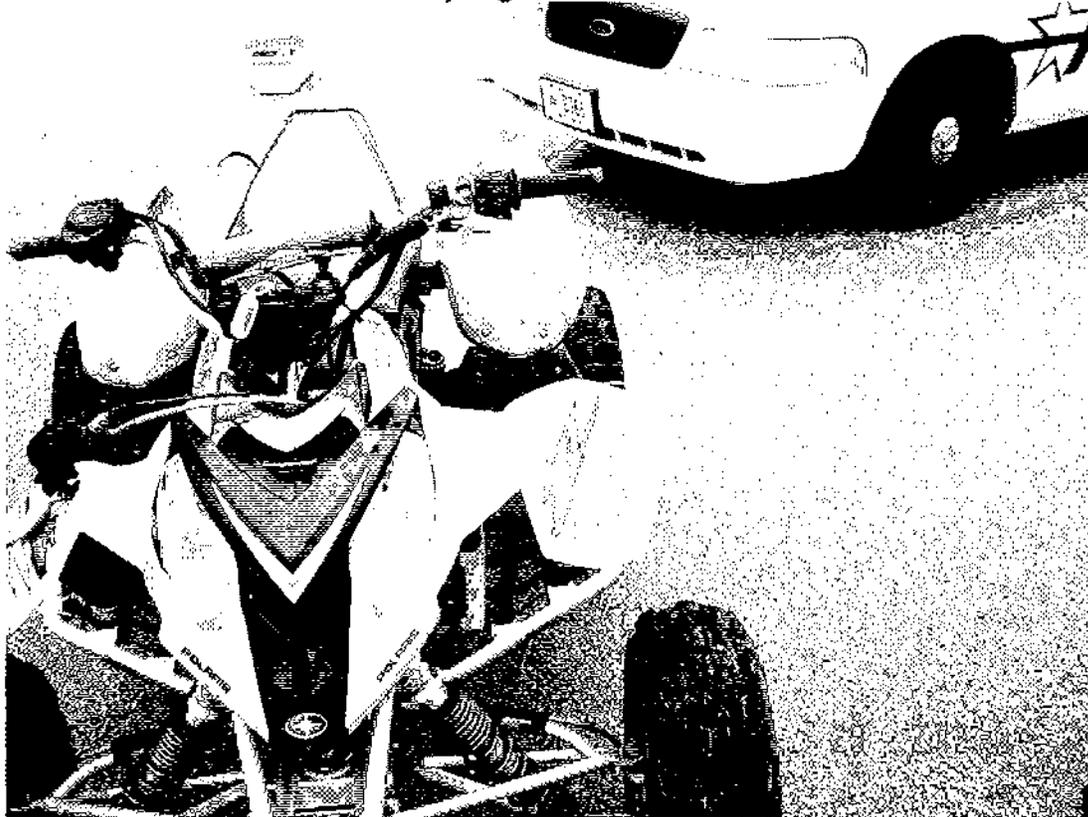


Exhibit E 24 – Scuff on rear of front right ATV fender

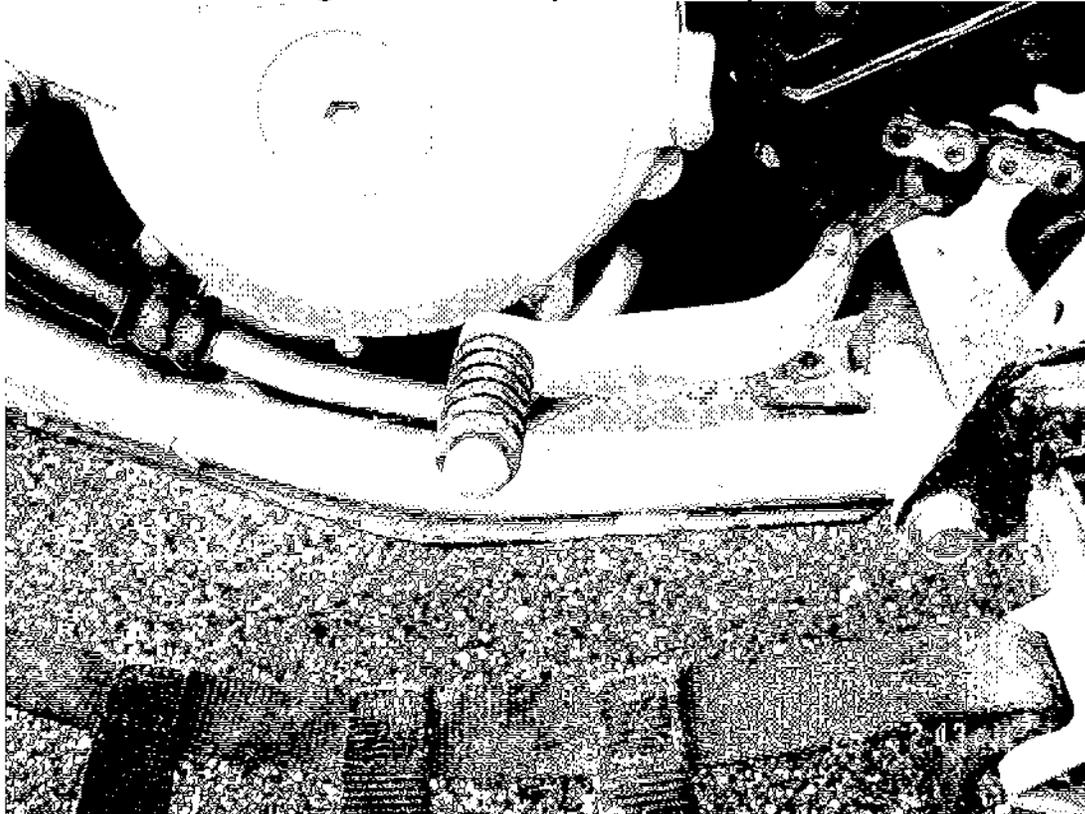


IDI 090602HCC2657

**Exhibit E 25 – Scuffs on right rear ATV fender**



**Exhibit E 26 – ATV's gear shift lever prior to manipulation**



**Exhibit E 27 – Flagged path of ATV's travel prior to accident facing east**



**Exhibit E 28 – Flagged path of ATV's travel prior to accident facing west**



IDI 090602HCC2657

Exhibit E 29 – Path of ATV's travel prior to accident on hilltop; facing west



Exhibit E 30 – Gouged/scuffed pavement & flagged ATV path in parking lot



**IDI 090602HCC2657**

**Exhibit F 1 – ATV tracks in grass looking uphill**



**Exhibit F 2 – Close-up of ATV tracks in grass looking uphill**



IDI 090602HCC2657

**Exhibit F 3 – Close-up of ATV tracks in grass near out buildings**



**Exhibit F 4 –ATV tracks in grass looking downhill**



IDI 090602HCC2657

Exhibit F 5 – Photo of victim's head injury



**Exhibit G**

**Contact Information**

Michael Clutter – Conservation Warden  
Wisconsin Department of Natural Resources  
1155 Pilgrim Rd.  
Plymouth, WI 53073 - 4294  
920-892-8756 Ext. 3038

Mark Pearce – Conservation Warden  
Wisconsin Department of Natural Resources  
1155 Pilgrim Rd.  
Plymouth, WI 53073 - 4294  
920-892-8756

(b)(6)

Victims Son

(b)(6)

000-000-0000

(b)(6)

Victim Decedent

(b)(6)

000-000-0000

Officer David Koball  
Plymouth Police Department  
128 Smith St  
Plymouth, WI 53073  
920-893-6541

Officer Paul Haag  
Plymouth Police Department  
128 Smith St  
Plymouth, WI 53073  
920-893-6541

David J. Leffin RN.  
Sheboygan County Coroner  
615 N 6<sup>th</sup> Street  
Sheboygan, WI 53083  
920-459-3945

Task Number 090602HCC2657

INTERVIEWER: When the response to a particular question is unknown, please leave blank.

Type of respondent: Police Department

Other, specify:

1. What type of vehicle was involved in the incident? (If vehicle is not an ATV, or if ATV has more than 4 wheels, politely thank respondent for her/his cooperation and terminate interview).

- |                                       |                     |
|---------------------------------------|---------------------|
| 1 - 3 wheeled ATV                     | 7 - Utility Vehicle |
| 2 - 4 wheeled ATV                     | 8 - Other Vehicle   |
| 3 - ATV with unknown number of wheels | 0 - Unknown         |
| 4 - 2 wheeled motorcycle              |                     |
| 5 - Dune Buggy                        |                     |
| 6 - ATV with more than 4 wheels       |                     |

2. What is the manufacturer/brand name of the ATV(s) involved in the incident? If more than two ATVs, use an additional sheet.

ATV #1

ATV #2

Manufacturer: 05 - Polaris

Manufacturer:

3. What is the model name or number and/or vehicle identification number (VIN) of the ATV?

Model: Predator

VIN: (b)(6)

4. What is the model year of the ATV? (Record last two digits of model year. For example 89,90).

Model Year: 2003

5. What is the engine size (in CCs) of the ATV?

Engine Size: 475-500

6. Was there more than one death involved in this incident? If more than two individuals were killed use an additional sheet.

Death #1

Death #2

Date of Death: 04/25/2009

Age/Sex: 47/Male

State of Death: WI

City of Death: PLYMOUTH

County of Death: Sheboygan

7. Describe how the incident occurred. (Use additional sheets if necessary).

A 47 year old male was riding his 4-Wheel ATV when he lost control, rolled it and was subsequently ejected, suffering fatal head wounds. The victim was operating the ATV in a city park that natural resource investigators stated is not conducive to ATV operation. Their report indicated that based on the evidence at the scene, the victim drove his ATV northbound down a grassy hill and then westbound onto a paved parking lot. The victim was not wearing a helmet and had a blood alcohol level of 0.138 g / 100 m

8. Did the ATV overturn/tipover/rollover? Yes

9. If ATV overturned/tipped over/rolled over, did it land on the victim?

Victim 1:	Victim 2:
Yes <input checked="" type="radio"/> No Unknown	Yes No Unknown

10. Who was killed in the incident? Check all that apply.

<input checked="" type="radio"/> - Driver	3 - Bystander	8 - Other
2 - Passenger	4 - Driver/Other Vehicle	

11. Was the victim wearing a helmet at the time the incident occurred?

Victim 1:	Victim 2:
Yes <input checked="" type="radio"/> No Unknown	Yes No Unknown

12. How many riders (including the driver) were on the ATV at the time the incident occurred?

0 - Unknown	2 - Two riders	4 - Four or more riders
<input checked="" type="radio"/> - One rider	3 - Three riders	

13. List the following physical characteristics of the DRIVER of the ATV:

Age: 47	Height:	(inches)
Weight:	Sex:	Male





**WNA**

The Sheboygan Press: April 26, 2009 -Page 1a  
Sheboygan, WI



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April 26, 2009

## Man, 47, killed when his ATV overturns in Plymouth City Park

*Sheboygan Press staff*

PLYMOUTH — A 47-year-old Plymouth man died Saturday afternoon when he was thrown from a four-wheel all-terrain recreational vehicle in the City Park parking lot.

The man had been riding his ATV in the park before entering an adjacent parking lot, where his vehicle rolled over, according to a Plymouth Police Department news release.

Emergency officials responded to the call at about 2:30 p.m. Police say the man died at the scene.

The man's 13-year-old son had been riding with him in the park — located near the intersection of Suhrke Road and N. Milwaukee Street — on an off-road motorcycle but was not involved in the accident.

Police are withholding the victim's name until the family has been notified.

Because the accident involved an ATV, the investigation is being handled by the state Department of Natural Resources, along with assistance from the Plymouth Police Department.



April 27, 2009

## ATV crash victim rolled 4-wheeler in park

*Sheboygan Press staff*

A 47-year-old Plymouth man killed in an ATV crash Saturday was thrown from his four-wheeler while riding in a parking lot at Plymouth City Park, according to the Plymouth Police Department.

The victim — identified in an obituary as (b)(6), owner of the (b)(6) in Plymouth — was riding with his 13-year-old son when the crash occurred about 2:30 p.m., according to the Plymouth Police Department. The boy was riding nearby on an off-road motorcycle and was not involved in the crash.

Deputy Chief Christopher Ringel said Brown, of (b)(6) died at the scene after being thrown from his ATV as it rolled. He was not wearing a helmet, and it is not yet clear what he was doing that caused the crash.

"We know he lost control — that's it," Ringel said.

The crash is under investigation by Plymouth police and the Wisconsin Department of Natural Resources.

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1. Task Number 090603CEP9030		2. Investigator's ID 8554		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
3. Office Code 840	4. Date of Accident YR MO DAY 2009 05 01	5. Date Initiated YR MO DAY 2009 06 23		
6. Synopsis of Accident or Complaint <b>UPC</b> A 36-year-old male victim was driving a four-wheeled, utility all terrain vehicle (UTV) along flat desert terrain, when he slowed down to make a right turn. No one else was in the vehicle. He was using his seat belt and wearing a helmet. As the vehicle started to make the turn the passenger side of the vehicle went up into the air. It landed on the driver's side. His feet had slipped out the driver side (no door) of the vehicle and his right foot was trapped by the frame of the vehicle. He suffered a compound fracture to his right foot.				
<p><b>MER/PRVLBR NOTIFIED</b> <i>[Signature]</i></p> <p>COMMENTS: YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/> 3/24/10</p> <p>OVERRULED: ATTACHED</p> <p>EXCISIONS/FOIA EXS. <u>6</u>:</p> <p>DO NOT RE-NOTIFY <input type="checkbox"/> RE-NOTIFY <input type="checkbox"/></p>				
7. Location (Home, School, etc) 5 - OTHER PUBLIC PROPERTY		8. City TUCSON		9. State AZ
10A. First Product 5044 - Utility Vehicles		10B. Trade/Brand Name ARCTIC CAT PROWLER		10C. Model Number PROWLER
10D. Manufacturer Name and Address ARCTIC CAT INC. Thief River Falls, MN 56101				
11A. Second Product 0		11B. Trade/Brand Name NONE		11C. Model Number NONE
11D. Manufacturer Name and Address NONE				
12. Age of Victim 36	13. Sex 1 - Male	14. Disposition 4 - Hospitalized	15. Injury Diagnosis 57 - Fracture	
16. Body Part(s) Involved 36 - LOWER LEG	17. Respondent 1 - Victim/Complainant	18. Type of Investigation 2 - Telephone	19. Time Spent (Operational / Travel) 7 / 0	
20. Attachment(s) 9 - Multiple Attachments		21. Case Source 03 - NEISS		22. Sample Collection Number
23. Permission to Disclose Name (Non NEISS Cases Only) <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
24. Review Date 07/15/2009	25. Reviewed By 9035		26. Regional Office Director Frank J. Nava	
27. Distribution Topka, Tanya			28. Source Document Number NEISS	

This tip-over incident involved a 4-wheeled utility vehicle and a 36-year old man (Consumer/Victim) in the Arizona desert. Information in this report was obtained from the man who was operating this vehicle.

According to the consumer, he began operating off road vehicles (dirt bikes, ATV's, Utility vehicles, etc.) at the age of 14 and currently has more than 20 years of experience.

He described himself as being 36-years old, weighing 185 pounds and being 6 feet 1 inch tall. Before this incident he was in good physical shape.

This injury took place during May 2009. The consumer said that he and his wife decided to take a vacation in Arizona and visit some of his wife's relatives. Part of their trip included the renting and driving of off road vehicles.

They left their home in Florida and came out to Arizona during the last half of May 2009 for their vacation.

It was during the morning of May 22 or 23, 2009, when they went to a Rental Company in Tucson and rented two vehicles. He described one of the vehicles as a 4-wheeled All Terrain Vehicle (ATV), see photo # 1. The consumer believes the engine capacity of this ATV was about 550 cc.

The second vehicle which they rented was a 2-seat, automatic, utility vehicle, see photo # 3. It had two seats with lap safety belts, a steering wheel for the driver with foot pedal controls, and a roll over safety bar frame (roll cage) above the seats. He believes that this vehicle had an engine capacity of 700 cc.

He went to the Vehicle Rental shop and spoke with an employee who helped him determine which vehicles he would be renting. I was told that the store employee did not provide any specific training or safety brochures on these vehicles nor did he receive any video presentations or hands-on training in operating the vehicles while at the store.

He explained that the employee pointed out the various features of the vehicles (start/stop/speed controls) as each vehicle was loaded onto the bed of the pickup truck that he borrowed from his wife's relatives.

The Victim said that he first loaded the utility vehicle onto the truck and took it to a desert area to the north of the city. He then unloaded the vehicle.

His wife and her aunt then got in the utility vehicle and started riding it around the local desert terrain. He said that they were wearing helmets as they began traveling around in this vehicle.

He returned to the Rental shop and loaded up the 4-wheeled ATV onto the truck. He then took the ATV out to the desert area and unloaded it. His wife and aunt stopped riding around on the utility vehicle and started traveling around the area on the ATV.

The consumer took several photographs while they were out at this desert location riding the off road vehicles, see exhibit # 3. Photograph # 1 shows the victim's wife and her aunt as they sat on the ATV. Both women are wearing helmets. The utility vehicle is shown in photograph # 3. The general desert terrain where they were riding these vehicles can be observed in the background of the photographs.

The victim decided to take the utility vehicle for a spin and find out how it handled. He had not operated this specific model utility vehicle in the past.

I was told that his clothing included a shirt, blue jeans, boots, a face mask and a helmet. He stepped over the side of the vehicle (no door) and sat down in the driver's seat and started the utility vehicle. He told me that this utility vehicle was an automatic.

The victim was the only person in the vehicle.

He fastened the seat belt and started driving around the desert. The victim described the desert terrain where he was driving as being flat with loose sand, see photo # 1.

It was around 12:30 p.m. or possibly later when it occurred. The consumer estimated that he had been operating the utility vehicle for total of about 10 minutes when the tip over happened.

He was not able to provide me with a specific GPS location where this tip over took place. He said that it happened in the desert to the north of town, at least 1/2 mile from any roads.

He said that the terrain was flat as he drove the vehicle forward in a straight line. His speed was estimated at about 20 miles per hour.

The victim said that he was traveling in a straight line and decided to make a right turn. He used the brake to slow down. He then took his foot off of the brake pedal as he began to make the turn. As he made the turn he said that he leaned his body over towards the passenger side of the vehicle.

Suddenly, the passenger side of the vehicle tipped up into the air. It continued tipping and landed over on driver's side.

I was told that the vehicle did not hit any rocks or debris nor did he drive over any vegetation, bumps or holes which could have influenced the movement of the vehicle.

He speculated that the passenger side of this vehicle was lighter than the driver's side since he did not have a passenger sitting in it as he was driving. This is why he thinks the passenger side of the vehicle went up into the air as he was making a turn.

The victim was not ejected out of the vehicle as it flipped over. The seat belt kept him in the driver's seat.

When the vehicle began to flip up into the air the victim's feet slipped out of the open side panel (no door) on the driver's side. His right foot was stuck under the driver's side of the vehicle as it came down to rest sitting on the ground.

The victim said that his leg was stuck. He could not pull his right foot out from under the vehicle.

He undid the seat belt and looked out across the sand. He could see his wife in the distance on the ATV and waved his hands.

His wife and her aunt saw that that the victim was having problems and came over to help. They pushed on the vehicle and were able to move it up off of the driver's side and back onto its four tires.

He victim was no long stuck under the vehicle. He was in a lot of pain. A broken bone was sticking out of his leg.

They called 9-1-1 requesting medical assistance.

Paramedics arrived. The victim said that his injury consisted of an open compound fracture just above the ankle of his right foot.

His wife's aunt used her cellular telephone and called her husband. He got into a vehicle and came out to help.

The uncle transported both the ATV and the Utility vehicle back to the rental company.

Paramedics took the victim to a local medical hospital. He was admitted and underwent surgery the following day.

I was told that they placed a plate in his leg along with pins and screws. They also placed a cast on his leg. According to the victim, he was in the hospital for about three days.

He mentioned that he has been undergoing physical therapy sessions. Also he has been unable to work for six weeks because of this injury.

#### PRODUCT IDENTIFICATION

This utility vehicle was identified by the victim as an Arctic Cat Prowler. Prowler brand utility vehicles are manufactured by:

Arctic Cats Inc.  
Thief River Falls, MN 56101

The victim said that both of the vehicles that they rented that day were Arctic Cat vehicles. One was a 4-wheeled ATV while the second was a Prowler utility vehicle, see photos # 2, 4 & 5.

He believes that the utility vehicle he was operating was a 2009 model Prowler with an engine capacity of 700 cc. He does not know the serial number or the VIN number for this vehicle.

NOTE:

An information sheet about the 2009 Arctic Cat Prowler utility vehicles was obtained from an Internet website (ATVsource.com) and is attached as exhibit # 2

An Internet web page about the Rental Company where the consumer rented the vehicles was obtained and is attached as exhibit # 1.

CONTACTS:

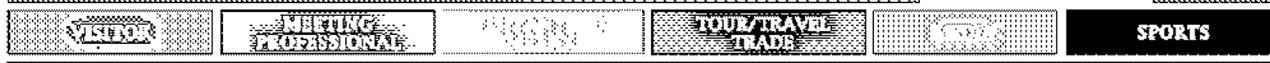
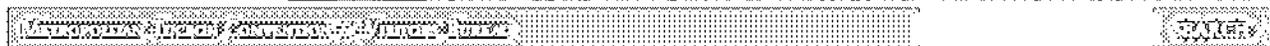
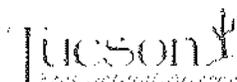
PURPOSE & RESULTS:

Consumer/Victim

Incident scenario & product info

EXHIBITS:

1. RENTAL COMPANY WEB PAGE (1 page)
2. INFORMATON SHEET ON UTILITY VEHICLE (5 pages)
3. PHOTOGRAPHS (3 pages/5 images)
4. DATA SHEET - UTILITY VEHICLES (2 page)
5. MISSING DOCUMENT FORM (1 page)
6. CONTACT SHEET (1 page)
- .
- .



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Tucson, AZ 85710
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Fax: 520-747-4889
Email: cyclescsa7@hotmail.com
Website: www.csasuperstore.com

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Description:

We rent dreams. World's largest motorcycle tourism company, specializing in the rental of motorcycles, ATVs and motor scooters. We offer a huge selection of perfectly maintained Harley Davidsons, Honda motorcycles, Arctic Cat ATVs. Eagle Rider allows one way rentals or guided tours between franchise facilities located in the most desirable tourist destinations in the world. Please call or visit our website for rates and availability.

### Tucson Weather




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Home > Manufacturers > Arctic Cat > 2009 > Prowler XTX 700 H1 EFI



**2009 Arctic Cat Prowler XTX 700 H1 EFI**  
*Get Up and Go. Anywhere.*

If the Prowler XTX 700 H1 EFI means anything, it means freedom. To go do what you want. When you want. Wherever you want. Combining sport riding features while not losing any of its functional "work" qualities, the highly agile Prowler XTX provides the ultimate all-around recreation machine.



Prowler XTX 700 H1 EFI Camo



Prowler XTX 700 H1 EFI Metblack



Prowler XTX 700 H1 EFI Streetblue

Hardcore jobs and hardcore fun are only executed when provided with Arctic Cat-built engines, drivetrain and suspension systems. Born and bred at Arctic Cat the powerhouse 700 H1 has a 695cc, 4-stroke torque monster mill. The Duramatic automatic transmission has dynamic engine braking with Low, High, Neutral and Reverse. The Prowler is just as easy to use as an Arctic Cat ATV; just gas it and go.

One of the defining features of the Prowler XTX that is often overlooked simply because you don't have to flip any levers or press buttons is the Turf Saver Auto Locking rear differential. When wheel slip is sensed, both rear wheels lock for improved traction. Otherwise, the differential is open. This very turf friendly open differential also has a lightened steering effort on concrete or hard packed surfaces.

The cab of every Prowler is equipped with dual bucket seats and driver/passenger seat belts, a center console complete with drink holders and dual 12v accessory plugs. The open air



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[www.ArcticCatPartsHous.com](http://www.ArcticCatPartsHous.com)

cab has a full canopy with rearview mirror (exc. Camo) and various storage compartments like a dash mounted tray shelf, glove box with door and an easily accessible molded tool kit located under the passenger-side seat.

Keeping true to Arctic Cat ATV heritage, the Prowler was designed to conquer any job when it comes to storage and hauling capacities. Lift the hood on any Prowler and you will find a storage compartment that can hold 25lbs of hunting supplies, tools, and can double as a cooler to store ice. The composite cargo bed has a brand new box latch for easier box dumping so you can throw in 600lbs. of the harshest payloads and the Prowler won't even whimper.

Arctic Cat engineers have laid to rest the claims of "best" suspension travel and ground clearance by other manufacturers.

The front and rear suspensions are Fully Independent with a double A-arm front design and a double a-arm rear design with 10" of suspension travel for sure footed offroad prowess. Spring preload adjustable shocks are used on all four corners for the ultimate in terrain and load adjustability, while off-roading capabilities are enhanced by 12.5" of ground clearance, a front locking 4wd differential with an all new all-in-one 2wd/4wd/Diff Lock rocker switch button for quick engagement shifting and rear mounted swaybar for improved trail driving.

Other amenities of the Prowler XTX include a brand new front bumper and fascia, all-new cast aluminum 14" wheels with black painted inlays (14" steel on Camo) with 26x9R14 Goodyear MTR front tires and 26x11R14 Goodyear MTRs in the rear for the ultimate in offroad traction. All this packaged in Steel Blue automotive paint that can be buffed and waxed or Max 4 Camo.

In the end, owning a Prowler XTX 700 H1 EFI means good times will be abound. Anywhere.

#### Key Buying Points

1. The H1 revolution of hemi-producing power has dominated the ROV 700 EFI class. As you can imagine, the 700 H1 EFI has a powerful 695cc, SOHC, single-cylinder, liquid-cooled engine, designed for a wide torque curve with the smoothest power via Electronic Fuel Injection. Cold weather starting and changes in elevation are no longer an issue.
2. One of the defining features of the Prowler XTX that is often overlooked simply because you don't have to flip any levers or press buttons is the Turf Saver Auto Locking rear differential. When wheel slip is sensed, both rear wheels lock for improved traction. Otherwise, the differential is open. This very turf friendly open differential also has a lightened steering effort on concrete or hard packed

surfaces.

3. Keeping true to Arctic Cat ATV heritage, the Prowler was designed to conquer any job when it comes to storage and hauling capacities. Lift the hood on any Prowler XTX and you will find a storage compartment that can hold 25lbs of hunting supplies, tools and can double as a cooler to store ice. The Prowler is rated for a 1500lb towing capacity and also has a single hand-operated tailgate latch like a pickup truck for easy bed access
4. The Prowler cockpit is laid out so that everything is at your fingertips. 2-wheel to 4-wheel drive is electrically selectable with a new all-in-one 2wd/4wd/Diff Lock rocker switch button for quick engagement shifting. A reverse override button is located on the center console for quicker reverse speeds. A rack and pinion steering system provides easy turning in 2- and 4-wheel drive applications
5. 700 XTX comes in a Limited Edition with all the great features of the standard model, but additionally has a flat bed with stake sides, 3,000lb Warn Winch, 2" Receiver Hitch w/ball, Cat Black Metallic Painted bodywork, 14" Aluminum wheels.

#### Features & Benefits

New for 2009

##### ENGINE:

##### Engine

- 695cc, EFI, DOHC 4-stroke, 4-valve, single-cylinder, liquid cooled engine

##### Arctic Cat-Built

- An Arctic Cat produced performance-based engine built in the state-of-the-art St. Cloud manufacturing facility

- Electronic Fuel Injection aids in perfect starting no matter what altitude or temperature changes.

##### Cooling

- Liquid cooling system with high-capacity radiator and thermostatically-controlled cooling fan provides consistent engine operating temperatures

##### Transmission

- Duramatic Automatic Transmission with long life maintenance-free belt

##### Air Intake

- Quarter wave intake tuner cancels out unwanted sounds reducing air intake decibels 6db to the riders ear.

##### Rigid Airbox

- Also reduces sound along with exhaust and muffler – also increases low end torque. The muffler has a longer head pipe and longer/larger diameter mild steel muffler.

**Clutch Ducts**

- Clutch air intake has increased cooling and flow

**CHASSIS/SUSPENSION:****Cockpit**

- Dual bucket seats with center console allow you easy access to the conveniently located dual plug 12V accessory outlets in the dashboard, glovebox

with storage door, or molded tool kit, located underneath the passenger seat. Prowler floors sit higher to protect riders feet from the elements when

forging water crossings or muddy terrain

**Plastic Fascia Bumper**

- Sport bumper and plastic fascia design on the XTX add enhanced styling.

**Easier Driver/Passenger Entry/Departure**

- The armrests, or side canopy supports have a large radius for ease of entry and departure of vehicle, while the seat belts have large button for easier

passenger and driver removal

**Suspension**

- The Prowler leads the way with 12.5" of ground clearance and 10" of suspension travel front and rear to clear the gnarliest of obstacles

**Brakes**

- Foot operated front and rear disk brakes provide positive stopping power, and also has a foot operated mechanical parking brake

**Large Storage and Hauling Capacities**

- A fully composite rear cargo box has a 600lb. hauling capacity, resists rust, denting and also acts as a dump box with a pull of a lever located behind the driver and passenger seats. A large under hood storage compartment can hold 25 lbs. of gear or doubles as a cooler that holds ice. A dash mounted

glovebox with door, provides additional storage. The Prowler is rated for a 1500lb towing capacity and also has a single hand-operated tailgate latch like a pickup truck for easy bed access

**Rims and Tires**

- All-new Cast aluminum 14" wheels are standard (Camo has 14" Steel), with 26x8R14 Goodyear MTR front tires and 26x11R14 Goodyear MTR's in the rear provide superb traction in all conditions

**Digital Gauges**

- Displays 14 critical operation indicators including: MPH, odometer, dual trip, hours, clock, fuel level and gear position, also has red display for nighttime readability

**4WD Controls**

- The Prowler cockpit is laid out so that everything is at your fingertips. 2-wheel to 4-wheel drive is electrically selectable with a new all-in-one

2wd/4wd/Diff Lock rocker switch button for quick engagement shifting. A reverse override button is located on the center console for quicker reverse

speeds. A rack and pinion steering system provides easy turning in 2- and 4-wheel drive applications

**2-Inch Automotive Style Receiver Hitch**

- This feature allows the consumer to remove the hitch from their 2" automotive receiver and install it into the Prowler's receiver hitch located on the front and the rear of the vehicle

**Tool Kit**

- Conveniently molded into the passenger side seat for easy access and secure fit

**ADDITIONAL FEATURES:****Camo**

Advantage® MAX-4 Camo was designed to give hunters maximum effectiveness in open terrain. The pattern incorporates cattails, millet, milo, corn stalks, dead sunflowers, oak and maple leaves, cedar and oak limbs,

plus a variety of other plant life into the largest camouflage artwork on the market. It melts into marshes, grasslands, deserts, croplands - even the open canopy of a treetop. It's ideal for deer, turkey, waterfowl and western big game hunting.

LE

700 XTX comes in a Limited Edition with all the great features of the standard model, but additionally has a flat bed with stake sides, 3,000lb Warn Winch, 2" Receiver Hitch w/ball, Cat Black Metallic Painted bodywork, 14" Aluminum wheels.

Turf Friendly

- Turf Saver Auto Locking rear differential - When wheel slip is sensed, both rear wheels lock for improved traction. Otherwise, the differential is open.

Very Turf friendly - Open diff has a lightened steering effort on concrete or hard packed surfaces.

Rear View Mirror (Except Camo)

- An easy way to see what the competition is doing behind you.

Tilt Steering

- 5 position - lever activated for easier Entry/Departure and leg room

Frame Protection

- Frame cover underneath running board/entry areas - Helps styling and aids in frame protection as well as keep mud and debris from entering and collecting on skidplates

Color

- Steel Blue (painted), Max 4 Camo or Cat Black Metallic (LE)

AVAILABLE ACCESSORIES:

Please log on to [www.arcticcat.com](http://www.arcticcat.com) or browse the 2009 Arcticwear and Accessories brochure at you nearest Arctic Cat dealer.

**Specifications**

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Photo # 1 – The 4-wheeled ATV is in the foreground with the victim’s wife and aunt sitting on it wearing helmets. Notice the desert terrain in the background.



Photo # 2 – This cropped image of the previous photo provides a better view of the brand name “Arctic Cat” which is on the side of the ATV.



Photo # 3 – This is a view of the utility vehicle that the victim was driving.



Photo # 4 – The name "PROWLER" is listed on the side of this vehicle.



Photo # 5 – Closer look at the model name "PROWLER".

### Data Record Sheets - Utility Vehicle

Use NEISS Product Code 5044 on Form 182 for incidents involving Utility Vehicles. Please answer the following questions. If no answer is available, indicate "N/A".

1. Provide the terrain type for the incident (grass, pavement, gravel, etc.) and also indicate if the terrain is flat, sloped, etc.

**Flat desert terrain with loose sand (see consumer's photos).**

2. Determine if the driver and/or passengers were wearing seat belts. If they were wearing seat belts, please note if the driver and or passenger were ejected (either partially or fully) during the incident.

**One person, the driver, was in the vehicle. He was wearing the seat belt. He was not ejected out of the vehicle when it flipped on to the driver's side.**

3. Determine if the driver and or passengers were wearing helmets.

**Yes. The driver was wearing a helmet.**

4. Determine ages of the driver and all passengers, and list each person by age and location in the vehicle.

**The victim was 36 years old.**

5. Determine the vehicle's speed at the time of the incident. If the exact speed is not available, please provide a range (e.g. 10 – 20 mph).

**He estimated the speed of the vehicle at about 20 miles per hour.**

6. Determine if the driver was making a turn at the time of the incident and, if so, in what direction the turn was being made. Also, please note any other reported driver actions at the time of the incident (e.g. braking, etc.).

**He was making a right turn. He used the brake before making the turn but took his foot off the brake as he started making the turn.**

7. Determine if the vehicle had aftermarket modifications.

**The victim does not think this utility rental vehicle had aftermarket modifications on this vehicle.**

8. Determine the make, model, and model year of the vehicle. If possible, provide complete product identification information including brand, date manufactured, date of purchase, place of purchase, model/serial numbers, costs, etc.

**This was a rental vehicle (see consumer's photos). The victim identified this vehicle as a 2009 Arctic Cat, Prowler, 2 seat utility vehicle, with an engine capacity of about 700 cc. He has no information on the vehicle's price, place of purchase, serial number or VIN number.**

9. On Form 182 list the vehicle manufacturer (e.g. Yamaha) in block 10b or 11b and the vehicle model in block 10c or 11c.

**Prowler utility vehicle from Arctic Cat with a 700 cc engine.**

10. Determine if the vehicle rolled or tipped over.

**It tipped over.**

11. Determine the number of riders on the vehicle at the time of the incident.

**One person was in this vehicle (the victim/driver).**

12. For each person injured or killed, was the victim a driver or a passenger & where was the victim located in the vehicle.

**He was the driver, sitting in the driver's seat.**

13. Did the vehicle land on or crush the victim.

**The victim was not crushed. The victim's foot got stuck under the frame of the vehicle causing a fracture.**

14. Was the victim injured or killed? Please note the nature of any injuries.

**He was injured (not killed) and suffered a compound fracture of the right foot.**

Task No. 090603CEP9030

Date: 07-14-2009

**Status of Missing Document(s)**

The official records were requested for this investigation report but could not be obtained.

- 1. Victim's Medical Records
- 2. CPSC Form 322
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

DATE: 7-14-2009 INVESTIGATOR NO: 8554

REGIONAL OFFICE: CFIW SUPERVISOR NO: 9035

CONTACT & IDENTIFICATION SHEET

NOTES:

I spoke with the victim by telephone on several occasions during July 2009. Several unsuccessful attempts (verbal telephone calls and e-mail) were made to obtain copies of the victim's medical were made.

Victim – (b)(6)



Recreation Vehicle Retail Shop – Eagle Rider of Tucson  
7201 E. 22<sup>nd</sup> Street  
Tucson, AZ 85710  
Phone # 520-731-1021

Hospital – University Medical Center – Tucson, AZ.



Note: The consumer did not wish to participate in the investigation of this incident, therefore an abbreviated report was completed.

In the source document, the consumer indicated that he was riding on a Yamaha Rhino 660 utility vehicle on 29 April 09, with his 4-year-old son in the passenger seat. Both he and his son were wearing seat belts and helmets. The consumer made a turn to the left and the unit rolled over to the right. His son's legs were pinned beneath the machine. He shouted for help and his wife helped to remove the child from beneath the machine. The child was transported to a local hospital where he was diagnosed with a broken tibia and spiral fracture of the fibia.

This investigator contacted the consumer via email, requesting the opportunity to photograph the machine and the terrain where the incident occurred. The consumer responded via email that his family has been traumatized by the incident, and they did not wish to participate in the investigation. He stated that they cannot bear to even look at the machine.

On 31 March 2009, CPSC announced in Press Release # 09-172 that Yamaha was offering a free repair for Rhino models 450, 660, and 700. The hazard involved rollovers, many of which "involved turns at relatively low speeds on level terrain." The repair involves "the installation of a spacer on the rear wheels as well as the removal of the rear anti-sway bar to help reduce the chance of rollover and improve vehicle handling, and continued installation of half doors and additional passenger handholds where these features have not been previously installed to help keep occupants' arms and legs inside the vehicle during a rollover and reduce injuries."

The consumer stated in his email that his Rhino is a stock unit and has not been modified in any way. The repairs listed in the press release were not performed. He stated that Yamaha wants the vehicle delivered to the dealership for evaluation.

This investigator contacted the local fire and police departments regarding this incident. The fire department did not respond to any incidents in the timeframe in question except a brush fire. Several messages were left at the local police department. They did not respond. It is unknown if the police or other emergency agencies responded to this incident, as the consumer's incident report states, " *We rushed to the ER* where he was diagnosed with a horrible spiral fracture of his fibia and broken tibia." It is possible he and his wife transported their son to the hospital on their own.

Additional information regarding the vehicle, the incident, or the terrain is unknown.

### **SAMPLE COLLECTED**

The sample is not available for collection.

**PRODUCT IDENTIFICATION**

The product is a Rhino manufactured by: Yamaha Motor Corp, Cypress, CA  
The consumer purchased the unit at: Unknown dealer, Ticonderoga, NY

The product is Rhino 660 utility vehicle. An identification number on the vehicle is YXR66FAEXHV. Additional information regarding the unit is unknown.

**ATTACHMENTS**

- Exhibit 1 – Respondent List
- Exhibit 2 – Consumer's Email dated 6/12/09
- Exhibit 3 – CPSC Press Release #09-172

090604CCC1763

Exhibit 1

**Respondent List**

(b)(6)	Consumers	email	6/12/09
Ralph Jackman, Fire Chief 828 US 7 Vergennes, VT 05491 802-877-3428		telephone	7/7/09

**Collins, Cynthia**

---

**From:** (b)(6)  
**Sent:** Friday, June 12, 2009 6:39 AM  
**To:** Collins, Cynthia  
**Subject:** Re: Yamaha Rhino incident

We have also been contacted previously, are you associated with:

Jason Twitchell  
Product Safety Investigator  
U.S. Consumer Product Safety Commission  
P.O. Box 392  
Shrewsbury, MA 01545  
tel. 508-842-5304  
fax. 866-517-6866  
email. [jtwitchell@cpsc.gov](mailto:jtwitchell@cpsc.gov)  
website. [www.cpsc.gov](http://www.cpsc.gov)

We are happy to help, but not interested in having the a personal interview or having the vehicle photographed at this time. This is a stock yamaha rhino, vehicle has not been changed in any way since we made the purchased. Yamaha is also wanting the vehicle delivered to their dealership. Due to the nature and the pain this has caused our child, we are not able to look at the machine. This has been a trajedy and we are working through this day by day. Possibly in the future.

Thanks, (b)(6)

----- Original Message -----

**From:** Collins, Cynthia  
**To:** (b)(6)  
**Sent:** Thursday, June 11, 2009 2:41 PM  
**Subject:** Yamaha Rhino incident

Hi (b)

I am an investigator with the U.S. Consumer Product Safety Commission, and I've been assigned to investigate your complaint regarding the Yamaha Rhino accident. I would like to photograph the unit and the area where the incident occurred, and get a little more information about what happened.

I'd like to set up an appointment where I can come and take the photographs and ask you a few questions about the incident. I left a message for you at 802-475-2940. If there is a phone number where you are available during the day, or a certain time you would like me to call, please let me know. You can reach me at 860-444-9640, or just reply to this email. I will be out of the office from 12 June 09 through 21 Jun 09, but I hope to speak with you on the 22<sup>nd</sup>.

Thanks very much.

Cindy Collins, Investigator  
U.S. Consumer Product Safety Commission  
New London, CT  
860-444-9640

\*\*\*\*\*!!! Unless otherwise stated, any views or opinions expressed in this e-mail (and any attachments) are solely those of the author and do not necessarily represent those of the U.S. Consumer Product Safety Commission. Copies of product recall and product safety information can be sent to you automatically via Internet e-mail, as they are released by CPSC. To subscribe or unsubscribe to this service go to the following web page: <https://www.cpsc.gov/epsclist.aspx> \*\*\*\*\*!!!

# NEWS from CPSC

## U.S. Consumer Product Safety Commission

Office of Information and Public Affairs

Washington, DC 20207

FOR IMMEDIATE RELEASE

March 31, 2009

Release #09-172

**Yamaha Hotline: (800) 962-7926**  
CPSC Hotline: (800) 638-2772  
CPSC Media Contact: (301) 504-7908

Updated To Include Additional Model Information

### **Yamaha Motor Corp. Offers Free Repair For 450, 660, and 700 Model Rhino Vehicles**

***CPSC advises consumers not to use the off-road vehicles until repaired***

WASHINGTON, D.C. - The U.S. Consumer Product Safety Commission (CPSC), in cooperation with Yamaha Motor Corp. U.S.A., of Cypress, Calif., is announcing a free repair program to address safety issues with all Rhino 450, 660, and 700 model off-highway recreational vehicles. Yamaha has also agreed to voluntarily suspend sale of these models immediately until repaired. Consumers should immediately stop using these popular recreational vehicles until the repair is installed by a dealer.

CPSC staff has investigated more than 50 incidents involving these three Rhino models, including 46 driver and passenger deaths involving the Rhino 450 and 660 models. More than two-thirds of the cases involved rollovers and many involved unbelted occupants. Of the rollover-related deaths and hundreds of reported injuries, some of which were serious, many appear to involve turns at relatively low speeds and on level terrain.

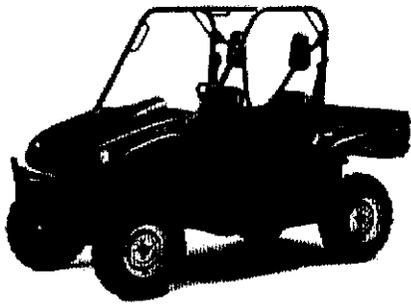
About 120,000 of the 450 and 660 model Rhinos have been distributed nationwide since Fall 2003. Some units have been equipped by Yamaha with half doors and additional passenger handholds, either before or after sale.

Yamaha's repair includes the installation of a spacer on the rear wheels as well as the removal of the rear anti-sway bar to help reduce the chance of rollover and improve vehicle handling, and continued installation of half doors and additional passenger handholds where these features have not been previously installed to help keep occupants' arms and legs inside the vehicle during a rollover and reduce injuries. Owners of the affected Rhinos should stop using them and call their dealer to schedule an appointment to have repairs made once they are available and to take advantage of a free helmet offer.

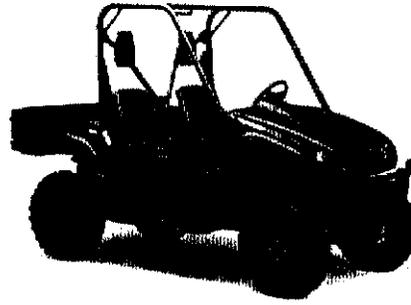
Yamaha is also voluntarily implementing the same repair program and suspension of sale for the Rhino 700 model, in order to ensure customer satisfaction. Consumers should stop riding the 700 model until it is repaired. About 25,000 Rhino 700s are part of this repair program.

Once these repairs have been made to their vehicles, Rhino users should always wear their helmet and seatbelt and follow the safety instructions and warnings in the on-product labels, owner's manuals and other safety materials. The Rhino is only recommended for operators 16 and older with a valid driver's license. All passengers must be tall enough to place both feet on the floorboard with their back against the seat back.

For additional information, contact Yamaha at 800-962-7926 anytime, or visit the firm's Web site at [www.yamaha-motor.com](http://www.yamaha-motor.com)



**Rhino 450 (with doors)**



**Rhino 450 (without doors)**



**Rhino 660 (without doors)**

CPSC is still interested in receiving incident or injury reports that are either directly related to this product recall or involve a different hazard with the same product. Please tell us about it by visiting <https://www.cpsc.gov/cgibin/incident.aspx>

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Send the [link for this page to a friend!](#) The U.S. Consumer Product Safety Commission is charged with protecting the public from unreasonable risks of serious injury or death from thousands of types of consumer products under the agency's jurisdiction. The CPSC is committed to protecting consumers and families from products that pose a fire, electrical, chemical, or mechanical hazard. The CPSC's work to ensure the safety of consumer products - such as toys, cribs, power tools, cigarette lighters, and household chemicals - contributed significantly to the decline in the rate of deaths and injuries associated with consumer products over the past 30 years.

To report a dangerous product or a product-related injury, call CPSC's Hotline at (800) 638-2772 or CPSC's teletypewriter at (800) 638-8270. To join a CPSC e-mail subscription list, please go to <https://www.cpsc.gov/cpsclist.aspx>. Consumers can obtain recall and general safety information by logging on to CPSC's Web site at [www.cpsc.gov](http://www.cpsc.gov).

1. Task Number 090605HWE8280		2. Investigator's ID 8953		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>			
3. Office Code 840	4. Date of Accident YR MO DAY 2009 04 13	5. Date Initiated YR MO DAY 2009 06 28					
6. Synopsis of Accident or Complaint UPC An 11-year-old male was driving a utility vehicle, at an unknown speed, down a dirt/gravel road on private property, when he made an unsafe turning movement to the right as he approached a downward sloping right turn. The utility vehicle drove up a dirt embankment, and the victim was ejected. The utility vehicle overturned and landed on top of him. The victim was not wearing a seatbelt or helmet. The victim was taken by ambulance to the hospital where he was pronounced dead. The utility vehicle belonged to the private estate owner where the father was working.							
MFR/PRVLR NOTIFIED <i>3/24/09</i> COMMENTS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> OVERRULED; <input type="checkbox"/> ATTACHED <input checked="" type="checkbox"/> EXCISIONS/FOIA EXS. <i>225c, 6</i> ; <input checked="" type="checkbox"/> DO NOT RE-NOTIFY <input type="checkbox"/> RE-NOTIFY							
7. Location (Home, School, etc) 1 - HOME		8. City HAYWARD		9. State CA			
10A. First Product 5044 - Utility Vehicles		10B. Trade/Brand Name KAWASAKI MULE/VIN JK1AFCE192B513805		10C. Model Number KAF620E			
10D. Manufacturer Name and Address KAWASAKI MOTOR CORPORATION 9950 Jeronimo Road Irvine, CA 92716-2016							
11A. Second Product 0		11B. Trade/Brand Name NONE		11C. Model Number NONE			
11D. Manufacturer Name and Address NONE							
12. Age of Victim 11		13. Sex 1 - Male		14. Disposition 8 - Death		15. Injury Diagnosis 65 - Anoxia	
16. Body Part(s) Involved 85 - ALL OF BODY		17. Respondent 3 - 2nd Hand Info Only		18. Type of Investigation 2 - Telephone		19. Time Spent (Operational / Travel) 20 / 0	
20. Attachment(s) 9 - Multiple Attachments		21. Case Source 05 - Newspaper		22. Sample Collection Number			
23. Permission to Disclose Name (Non NEISS Cases Only) <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only							
24. Review Date 08/10/2009		25. Reviewed By 9021			26. Regional Office Director Frank J. Nava		
27. Distribution Topka, Tanya; Mills, Alberta; Streeter, Robin				28. Source Document Number N0960088A			

This investigation was initiated in response to a newspaper article. The following information was obtained from a telephone conversation with the police investigator, along with the police and coroner reports. I was unable to establish contact with the family or utility vehicle owner.

The victim was 11-years-old at the time of the incident. His date of birth was 5/16/97. According to the coroner, he was 61" tall and weighed 146 pounds. Alcohol was not a factor in this incident.

The incident occurred on a private estate where the victim's father was working. The victim resided in another city with his father, mother and sister.

The victim's father was a construction worker at the estate where the incident occurred. There were other workers at the site that day. The father brought the victim to work with him on the day of the incident because the victim was on spring break from school. As per the newspaper article (see source document), the victim frequently helped his father at work. It is not known if the victim had been to this estate on prior occasions.

The specific incident location is a private dirt/gravel road that was located about 600 feet behind the main residence of the estate, and approximately 605 feet east of a concrete paved helicopter-landing pad on the estate. There is no public access to the property and gates control all access to the property. An online search of the property reveals that it is 2.19 acres in size.

The estate includes a horse ranch. According to the police, the incident did not occur on the horse ranch part of the estate.

The private dirt/gravel roadway on the estate where the incident occurred descends in an easterly direction and turns sharply to the right at the collision scene. There is a dirt embankment located along the south roadway edge, and a steep ravine bordering the north roadway edge.

The product involved in the incident is a utility vehicle. It is a 2002 model year. As per the police, the vehicle is registered to the ranch that is located on the property. As per the newspaper article, the vehicle belongs to the

estate owner. There is other information known about the utility vehicle.

The father told the police that the victim has extensive experience driving off-road vehicles, including off-road motorcycles and vehicles similar to the utility vehicle involved in the incident. The father reported that the victim was a competent driver of utility vehicles. The victim's prior experience driving the incident utility vehicle is unknown.

The incident occurred on Monday, April 13, 2009. The police report that the incident time was about 12:35 p.m., and that the weather was sunny, warm and dry.

The victim's clothing worn at the time is unknown. He was not wearing any protective gear or a helmet. The police believe that he was not wearing a seatbelt.

The victim began riding the utility vehicle at around 8 a.m. that morning, and he had been driving it on and off all morning on a dirt road that traveled throughout the private property. He was riding alone. The victim periodically stopped while riding around and spoke to his father, who was working in the residence of the estate. At about 12:40 p.m., the father had not seen the victim for approximately 30 to 60 minutes, so he went looking for him with a co-worker. They found the victim about five minutes later. He was lying in the dirt roadway. The vehicle was lying on its driver's side and the victim was pinned underneath it. The vehicle's left floorboard was directly on top of the victim's neck. The men were unable to lift the vehicle off of the victim. The father remained with the victim while the co-worker went to get help. The victim was unresponsive.

The co-worker returned with two other workers, and the four men lifted the vehicle off of the victim. The father checked the victim for a pulse but he was unable to find one. The men drove the victim to the concrete driveway of the estate and waited for medical attention to arrive.

Paramedics arrived on the scene and began lifesaving measures, according to the police. The victim was transported to the hospital by ambulance at about 12:58 p.m. He was pronounced dead at 1:47 p.m.

The police and coroner investigator arrived after the victim was transported to the hospital, and after the utility vehicle had been moved from its incident location.

The coroner investigator reports that he found fresh tire treads on the hillside of the road where the incident occurred and skid marks on the road. The investigator stated that, based on this evidence, it appears that the victim was driving the utility vehicle when he locked the wheels and began a downhill skid. He was ejected with the vehicle landing on top of him. The coroner lists the death as an accident. The cause of death is stated as respiratory insufficiency due to traumatic asphyxiation (see exhibit 3 - coroner's report).

The police were called in at approximately 1:28 p.m. and arrived on the scene at 1:45 p.m. Based on witness statements, physical evidence at the scene, and the damage to the utility vehicle, the police summarized the following. The victim was driving the vehicle on a private dirt roadway within private property. He was traveling in an easterly direction at an unknown speed. As he approached a downward sloping right turn in the dirt roadway, for unknown reasons, he made an unsafe turning movement to the right. The front of the utility vehicle collided into a large dirt embankment located along the south roadway edge. The vehicle partially drove up the dirt embankment while it continued in an easterly direction (see exhibit 1 - photos 16 - 22). The victim was not wearing his seatbelt and he became ejected onto the dirt roadway. The utility vehicle overturned and landed on top of him. The outside floorboard of the vehicle came to rest directly on top of the victim's neck. The police concluded that the victim caused the incident by making an unsafe turning movement with the vehicle. Due to this turning movement, the victim lost control of the vehicle, resulting in the collision.

The police inspected the vehicle's mechanical condition at a private garage, and report the following details. While test driving the vehicle under hard brake application, the vehicle had a slight pull to the left but was not severe enough to affect the control of the vehicle. The hand operated parking brake was fully functional. No mechanical defects were noted within the steering or suspension systems. The 4-stroke gas engine idled and ran normally.

The front tires were in fair condition with minimal tread. The rear tires were in poor condition and nearly bald within the center portion of the tires (photos 7 and 8). The manufacturer recommends tire pressure at 10 PSI front and 24 PSI rear (photo 9). The police found the following tire pressure on the vehicle: front left 5 PSI, front right 11 PSI, rear left 26 PSI, rear right 12 PSI. The seatbelts consist of lap belts only. The driver's seatbelt was tucked between the bottom and top portion of the seat and it did not appear to have been used recently (photo 5). The police drove the vehicle and report that it drove and handled well without any obvious concerns or issues. The police concluded that the vehicle did not have any prior mechanical conditions that would have caused the collision (see exhibit 2, police report).

The vehicle sustained damage to the driver's side. The front bumper and fender sustained small scratches. The plastic roof along the rear was cracked. The left side of the dump bed sustained small scratches and minor dings (some of the damage can be seen in photos 13 to 15) .

#### PRODUCT IDENTIFICATION:

The product involved in the incident is a utility vehicle (photos 1 - 4). The brand/model is Kawasaki Mule. According to the police, the model year is 2002. The model is KAF620E (photo 11). The VIN is JK1AFCE192B513805 (photo 10). The color is red. The manufacturer is Kawasaki Motors Mfg. Corp. U.S.A. (photo 11). Office data indicates that this firm is located in Irvine, CA.

Labeling on the vehicle states "Kawasaki", "4WD" "RJS GC-12" (photo 1), and "\*\*\* Max. Power: 14.7/3600 [kW/rpm] Curb Mass: 604kg." (photo 11). Additional labeling on the engine area states "CODE FD620D-AV50 E/NO FD620DE294683" (photo 12). The police report that the tires are Dunlop KT 765 AT 22X11-10 (photo 6).

An online advertisement for the Kawasaki Mule KAF620E reveals that a specific model name for the vehicle is Mule 3010 4X4 (see exhibit 4).

The utility vehicle was taken into police custody for examination, but has since been released to its owner.

**EXHIBITS:**

1. Police photographs (1 - 22).
2. Police report (12 pages).
3. Coroner's report (12 pages).
4. Online advertisement (3 pages).

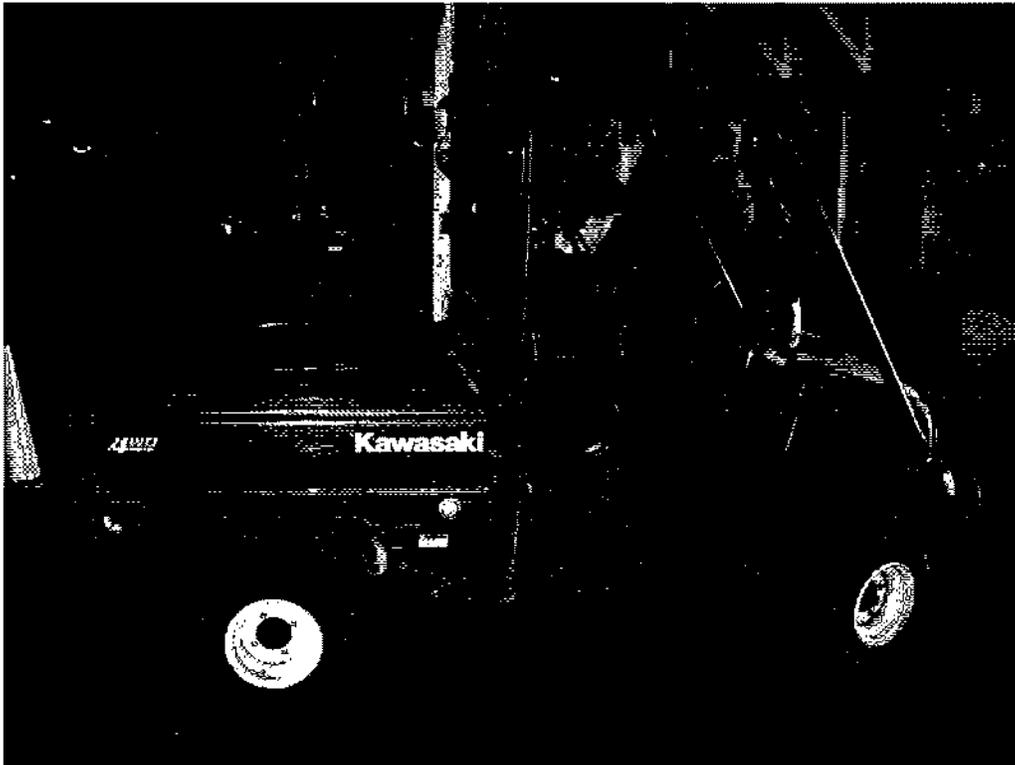


Photo 1: View of the utility vehicle involved in the incident. Labeling on this side of the vehicle states “Kawasaki”, “4WD” and “RJS GC-12”.



Photo 2: Front and other side view. The driver's side sustained damage.



Photo 3: Back view. Labeling states "Kawasaki" and "4WD". Registration sticker states "K95DOH JUN 2005 CALIFORNIA OFF HIGHWAY".



Photo 4: Front view.

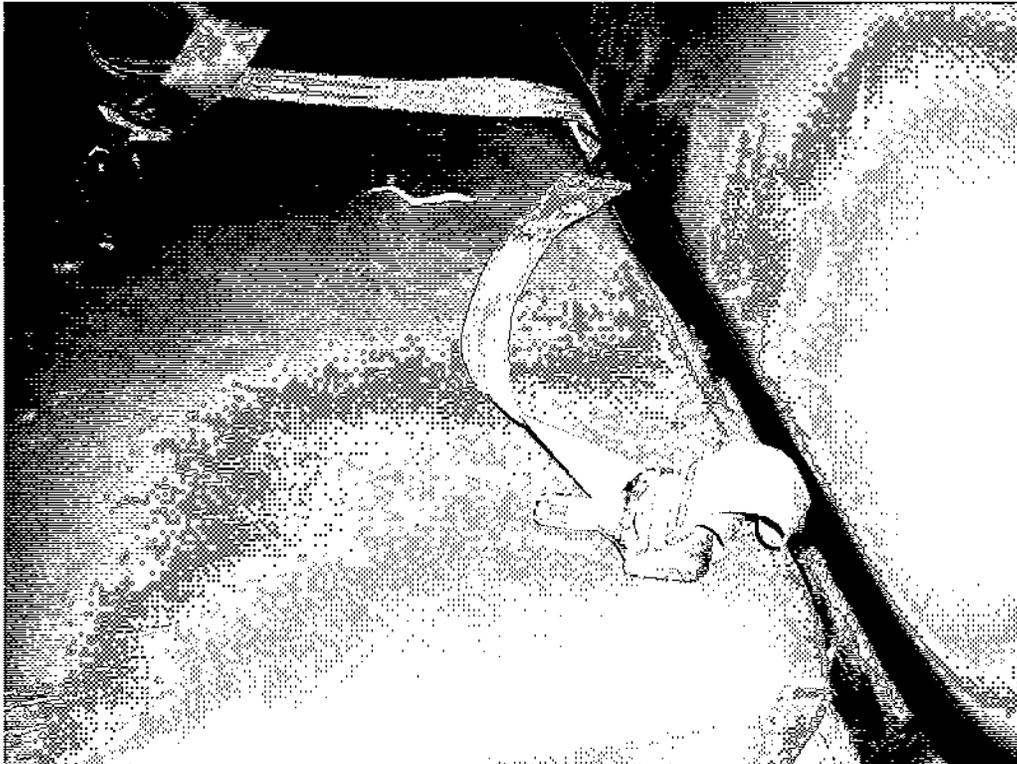


Photo 5: Seat belts.

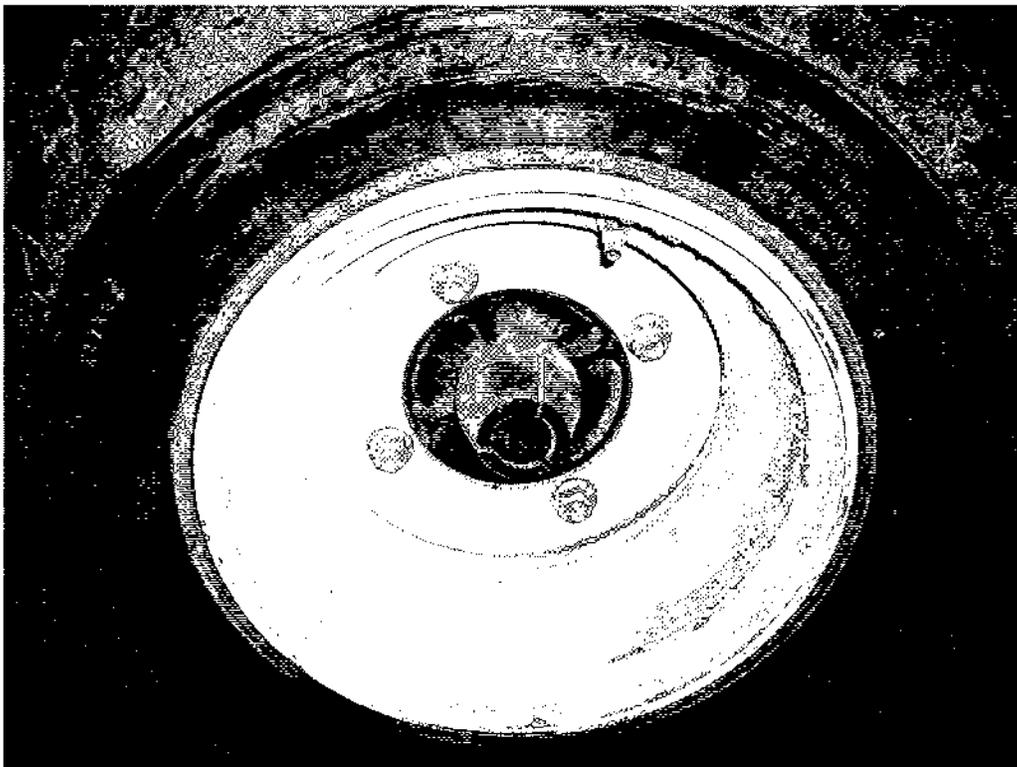


Photo 6: The tires are Dunlop KT 765 AT 22X11-10.



Photo 7: One of the front tires. The front tires were in fair condition with minimal tread.



Photo 8: One of the rear tires. The rear tires were in poor condition and nearly bald within the center portion of the tires.



Photo 9: Tire pressure label recommends 10 PSI in the front and 24 PSI in the rear.



Photo 10: Vehicle Identification Number (VIN) is JK1AFCE192B513805.

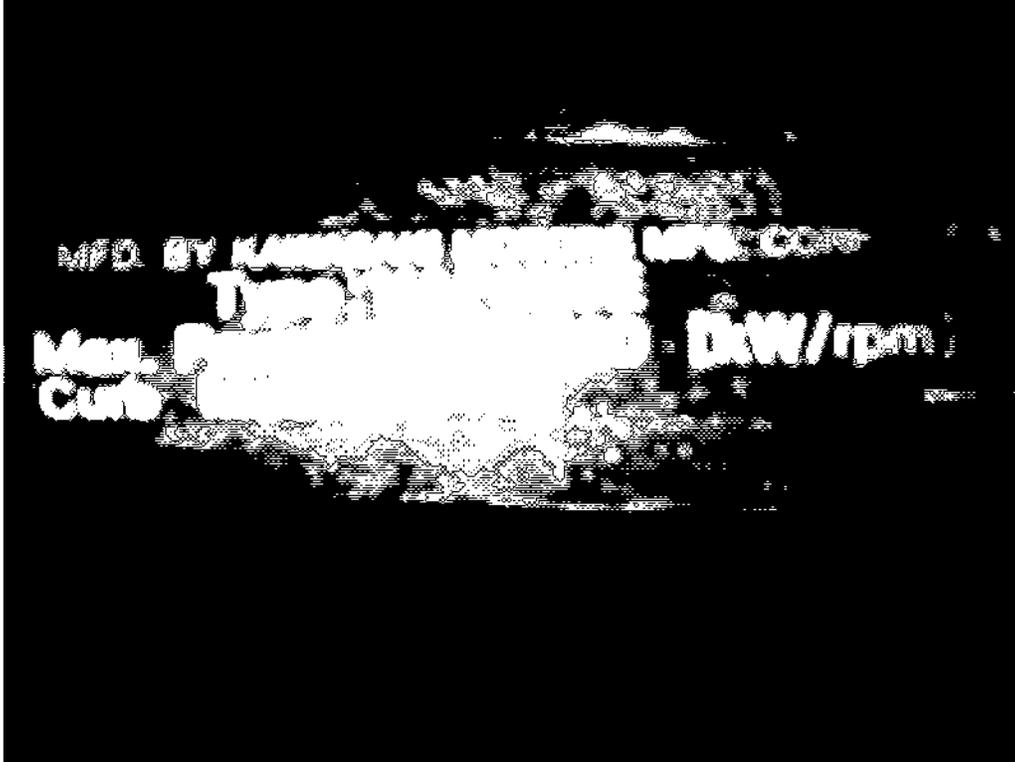


Photo 11: Labeling on the vehicle states “MFD. BY KAWASAKI MOTORS MFG. CORP U.S.A. Type: KAF620E Max. Power: 14.7/3600 [kW/rpm] Curb Mass: 604kg.”

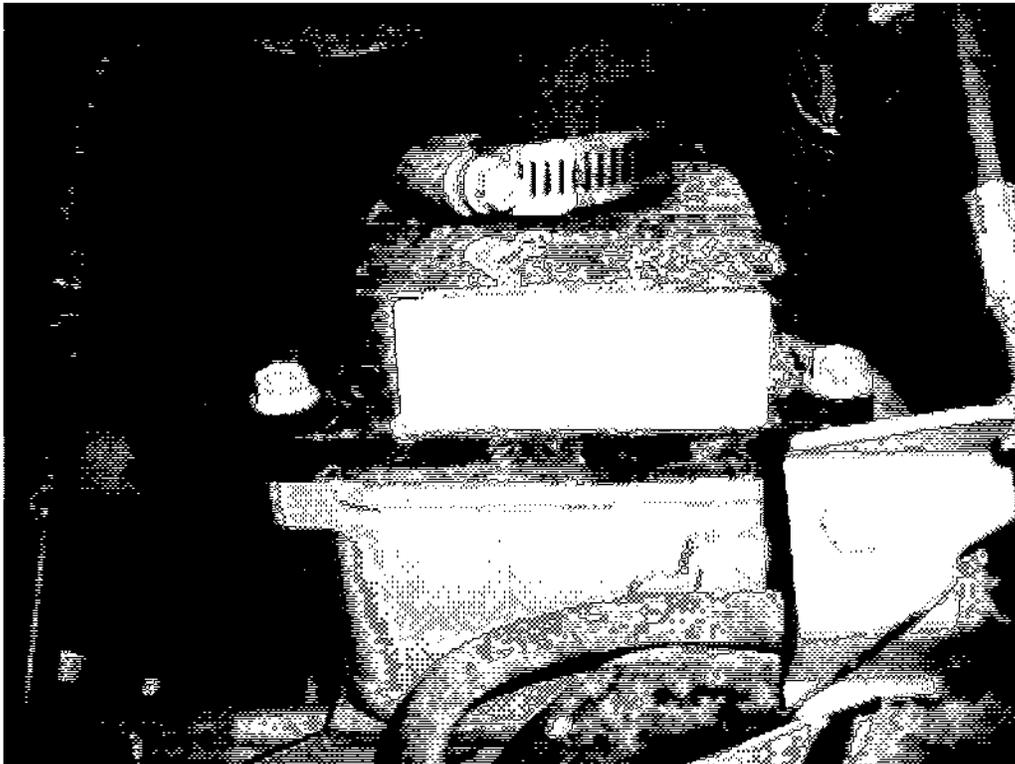


Photo 12: Additional labeling on the engine area states “CODE FD620D-AV50 E/NO FD620DE294683”.



Photo 13: Front fender and bumper sustained small scratches.



Photo 14: Roof damage.

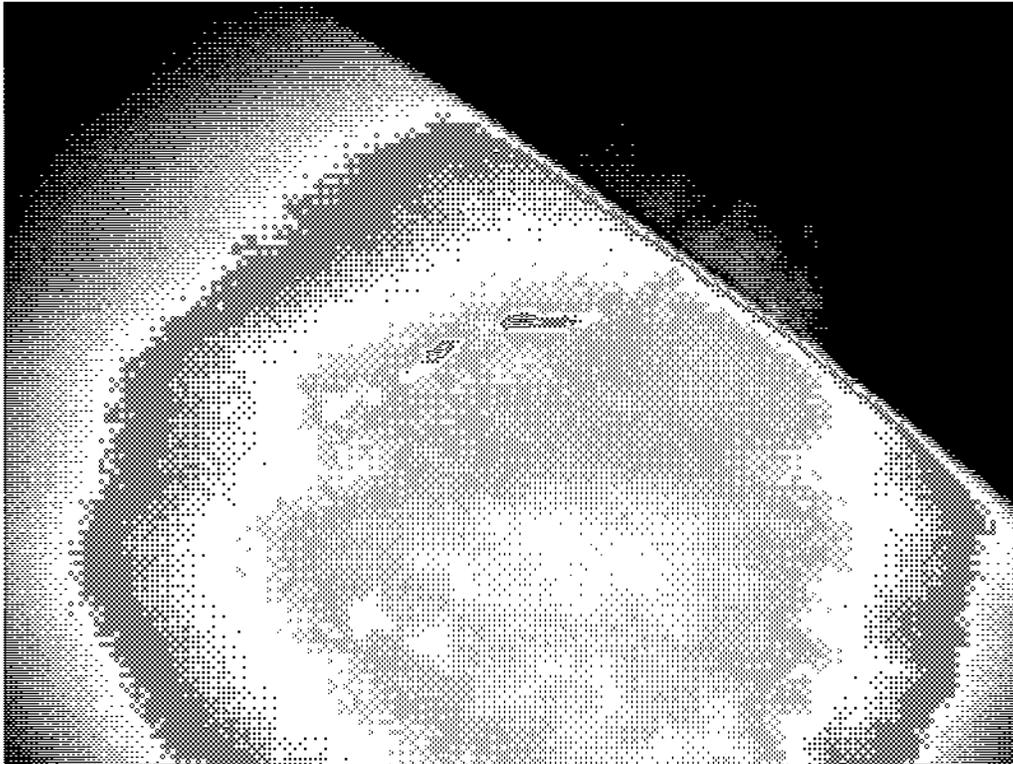


Photo 15: Crack in the hood area.



Photo 16: Incident location. The victim was traveling down this dirt/gravel road and approaching the sloping right turn in the road.



Photo 17: The vehicle collided with the embankment prior to the sloping turn in the road.

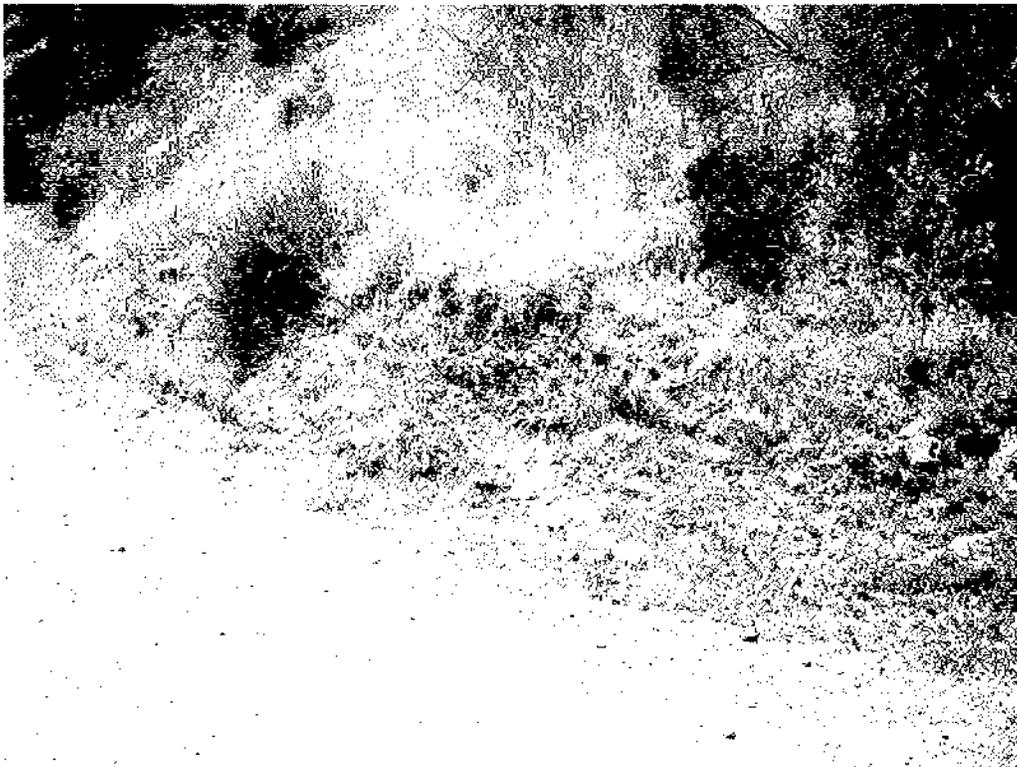


Photo 18: Closer view of the embankment. The vehicle and victim came to rest on the road surface in front of the embankment.

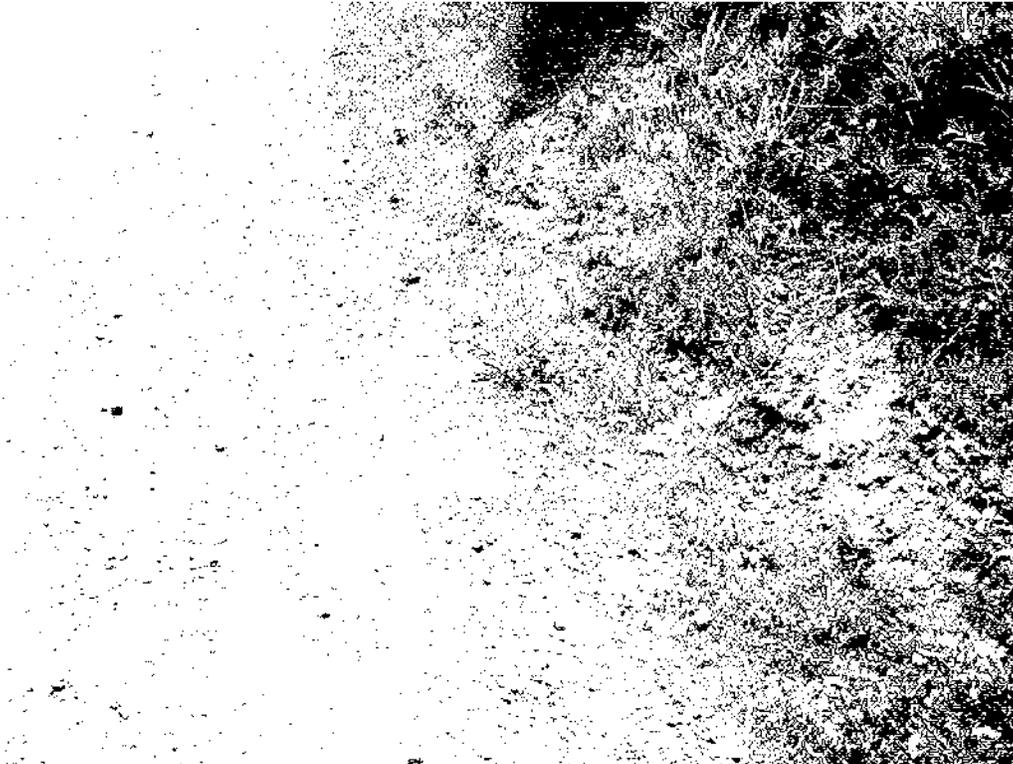


Photo 19: Closer view of the marks on the road surface in front of the embankment.



Photo 20: Another view of the area where the vehicle collided with the embankment.



Photo 21: View of the road and collision area from the other direction.

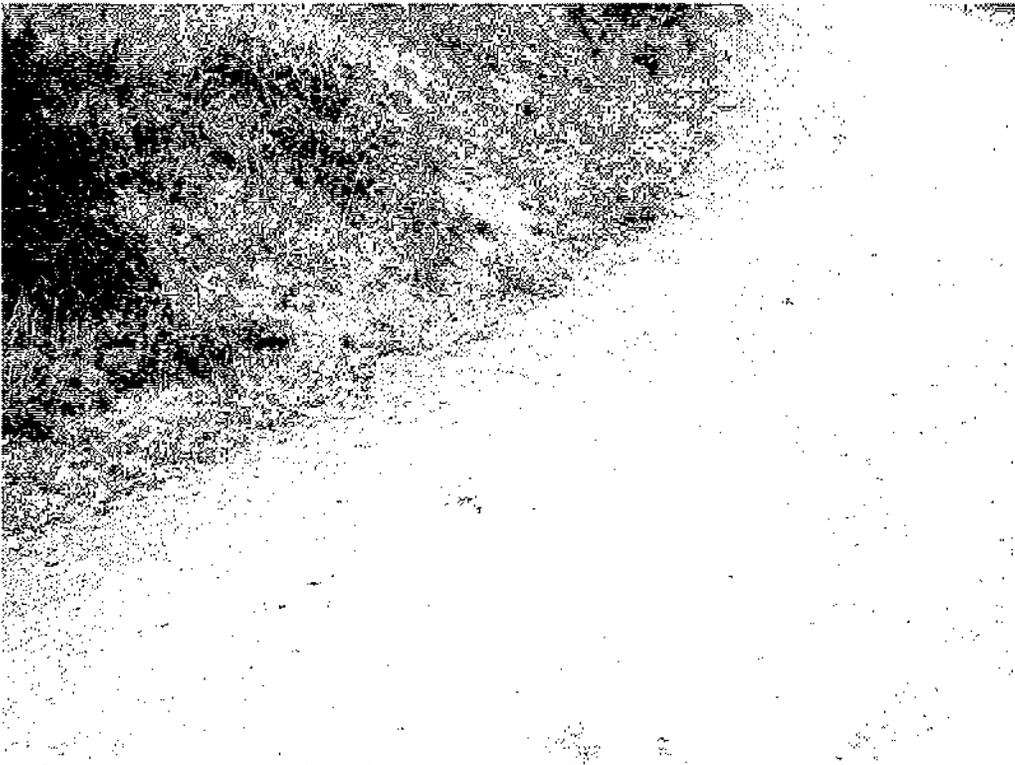


Photo 22: Closer view of the collision area from the other direction.

SPECIAL CONDITIONS FATAL PRIVATE PROPERTY		NUMBER INJURED 0	HIT & RUN FELONY <input type="checkbox"/>	CITY UNINCORPORATED	JUDICIAL DISTRICT HAYWARD SUPERIOR		LOCAL REPORT NUMBER 2009040057				
		NUMBER KILLED 1	HIT & RUN MISDEMEANOR <input type="checkbox"/>	COUNTY ALAMEDA	REPORTING DISTRICT	BEAT 902	DAY OF WEEK MONDAY	TOW AWAY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
LOCATION	COLLISION OCCURRED ON: (b)(6)				MO 04	DAY 13	YEAR 2009	TIME (2400) 1235	NGIC # 9375	OFFICER ID. 016295	
	MILEPOST INFORMATION:				GPS COORDINATES LATITUDE 37.66437°		LONGITUDE - 122.02244°		PHOTOGRAPHS BY: ROSSI 16295 <input type="checkbox"/> NONE		
	AT INTERSECTION WITH: <input checked="" type="checkbox"/> OR: 1301 FEET EAST OF FAIRVIEW AVE				STATE HWY REL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
ARTY 1	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
					P	D	2002	KAWA MULE RED			
DRIVER	NAME(FIRST, MIDDLE, LAST) (b)(6)				OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER R LAZY H RANCH						
PEDESTRIAN	<input type="checkbox"/>				OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER (b)(6)						
MARKED VEHICLE	CITY / STATE / ZIP SAN CARLOS CA 94070				DISPOSITION OF VEHICLE ON ORDERS OF: <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER						
ICICLE LIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE DAY	YEAR	RACE		
	M	BRN	BRN	4-08	100	05	16	1997	W		
OTHER	HOME PHONE (b)(6)		BUSINESS PHONE NONE								
INSURANCE CARRIER		POLICY NUMBER									
NONE											
DIR OF TRAVEL	ON STREET OR HIGHWAY				SPEED LIMIT						
E	PRIVATE PROPERTY										
ARTY 2	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
DRIVER	NAME(FIRST, MIDDLE, LAST)				OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER						
PEDESTRIAN	STREET ADDRESS				OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER						
MARKED VEHICLE	CITY / STATE / ZIP				DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER						
ICICLE LIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE DAY	YEAR	RACE		
OTHER	HOME PHONE		BUSINESS PHONE								
INSURANCE CARRIER		POLICY NUMBER									
DIR OF TRAVEL	ON STREET OR HIGHWAY				SPEED LIMIT						
ARTY 3	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
DRIVER	NAME(FIRST, MIDDLE, LAST)				OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER						
PEDESTRIAN	STREET ADDRESS				OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER						
MARKED VEHICLE	CITY / STATE / ZIP				DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER						
ICICLE LIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE DAY	YEAR	RACE		
OTHER	HOME PHONE		BUSINESS PHONE								
INSURANCE CARRIER		POLICY NUMBER									
DIR OF TRAVEL	ON STREET OR HIGHWAY				SPEED LIMIT						
PREPARER'S NAME A. ROSSI 016295		DISPATCH NOTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		REVIEWER'S NAME K DILLING # 14726				DATE REVIEWED 04-26-09			



DATE OF COLLISION (MO. DAY YEAR) 14/13/2009	TIME(2400) 1235	NCIC # 9375	OFFICER I.D. 016295	NUMBER 2009040057
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WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY('X' ONE)				INJURED WAS ('X' ONE)					PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER					
<input type="checkbox"/> #	<input type="checkbox"/>	11	M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	P	D	1

NAME / D.O.B. / ADDRESS: (b)(6) TELEPHONE: (b)(6)

(INJURED ONLY) TRANSPORTED BY: AMR UNIT #564 TAKEN TO: EDEN HOSPITAL CASTRO VALLEY, CA

DESCRIBE INJURIES: INTERNAL INJURIES INCLUDING HEAD AND LEFT ARM TRAUMA.  
 PRONOUNCED BY DR. M. GYNN ON 04-13-09 AT 1347 HOURS AT EDEN HOSPITAL CASTRO VALLEY, CA.

CORONER CASE #2009-01055  VICTIM OF VIOLENT CRIME NOTIFIED

<input checked="" type="checkbox"/> # 1	<input type="checkbox"/>	44	M	<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS: (b)(6) TELEPHONE: (b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

<input checked="" type="checkbox"/> # 2	<input type="checkbox"/>	52	M	<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS: (b)(6) TELEPHONE: (b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

<input checked="" type="checkbox"/> # 3	<input type="checkbox"/>	25	M	<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS: (b)(6) TELEPHONE: (b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

<input checked="" type="checkbox"/> # 4	<input type="checkbox"/>	50	M	<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS: (b)(6) TELEPHONE: (b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/> #	<input type="checkbox"/>			<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS: TELEPHONE:

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

PREPARER'S NAME A. ROSSI	I.D. NUMBER 016295	MO. DAY YEAR 04/13/2009	REVIEWER'S NAME	MO. DAY YEAR
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# COLLISION NARRATIVE

Report #2009040057

04-13-2009/ 1235 / 9375 / 16295

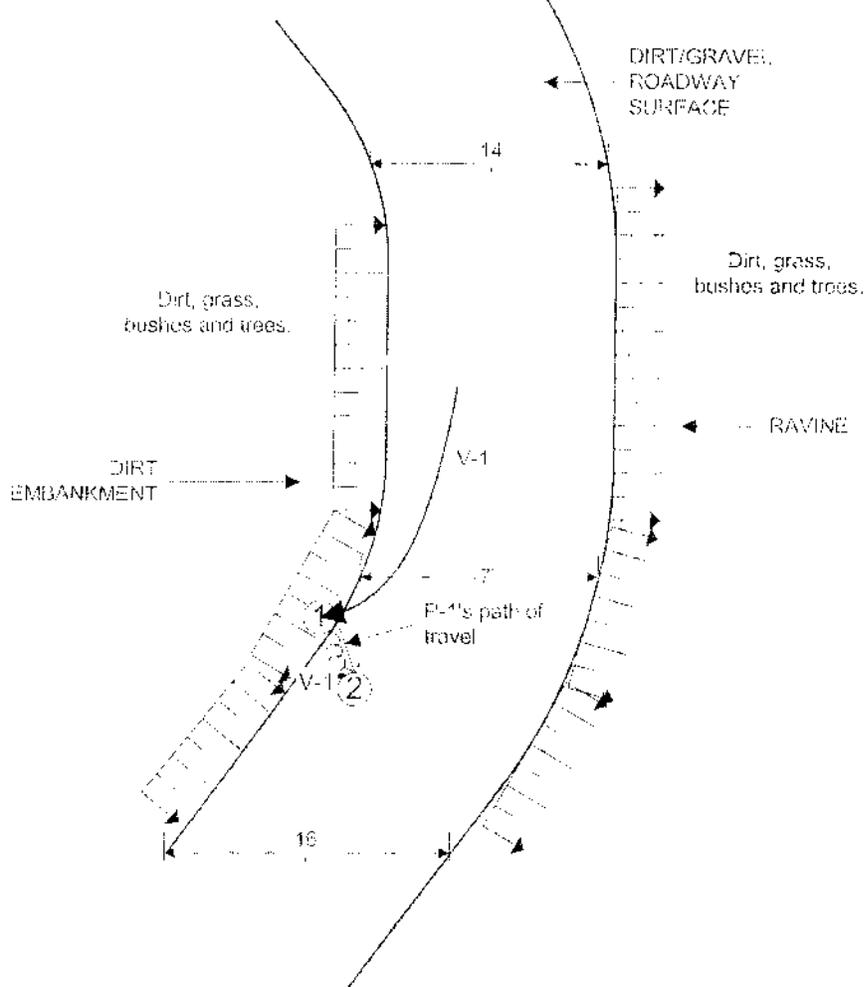
27308 Fairview Rd. east of Amyx Ct.

## Private Dirt Roadway at 27308 Fairview Ave.



SKETCH  
(Not To Scale)

Fairview Ave.  
←





# COLLISION NARRATIVE

Report #2009040057

04-13-2009/ 1235 / 9375 / 16295

27308 Fairview Rd. east of Amyx Ct.

Page

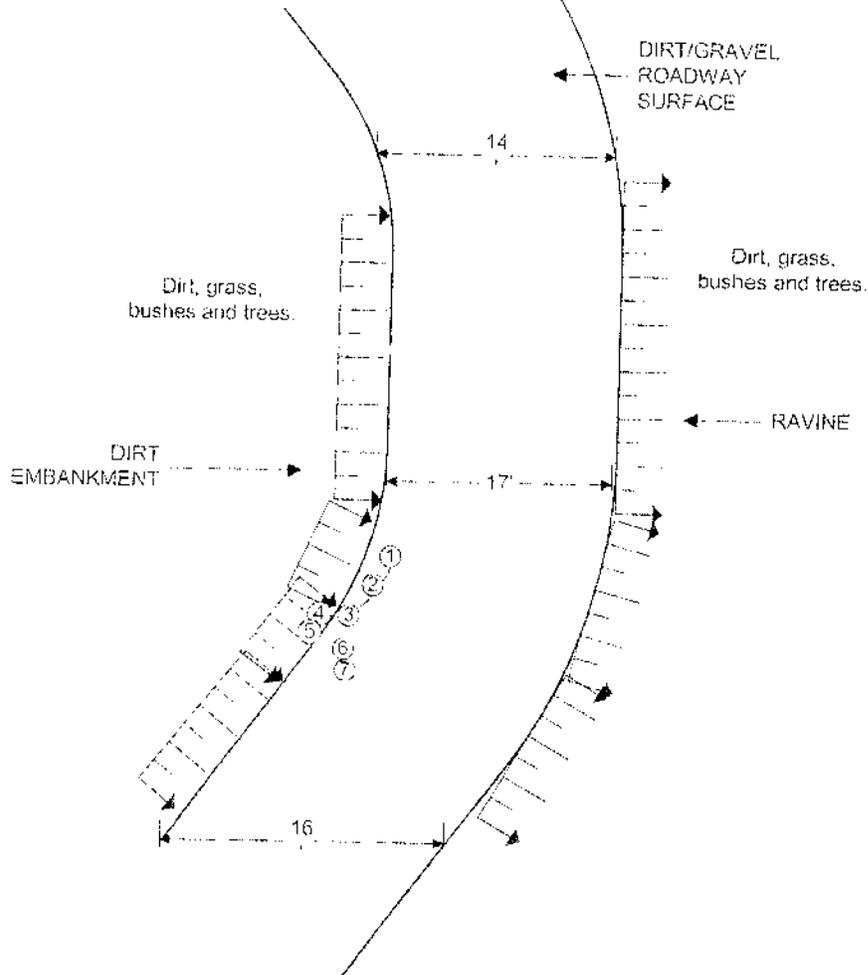
1

## Private Dirt Roadway at 27308 Fairview Ave.



Factual Diagram  
(Not To Scale)

Fairview  
Ave.  
←





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**Factual Diagram Legend**

**Physical Evidence**

- (1) Beginning of dirt tire furrow mark located 578 ft. east of a concrete paved helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to (b)(6), and 4 ft. north of the south roadway edge of the private dirt roadway.
- (2) Midpoint of dirt tire furrow mark located 595 ft. east of a concrete paved helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to (b)(6), and 3 ft. north of the south roadway edge of the private dirt roadway.
- (3) End of dirt tire furrow mark located 606 ft. east of a concrete paved helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to (b)(6) and 3 ft. north of the south roadway edge of the private dirt roadway.
- (4) Begin disturbed dirt 4 ft. in height on the side of the embankment located 605 ft. east of a concrete paved helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to 27308 Fairview Ave. and at the south roadway edge of the private dirt roadway.
- (5) End disturbed dirt 4 ft in height on the side of the embankment located 614 ft. east of a concrete paved helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to 27308 Fairview Ave. and at the south roadway edge of the private dirt roadway.
- (6) Scrape mark on the dirt roadway 6 inches long, located 618 ft. east of a concrete paved helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to 27308 Fairview Ave. and 5 ft. north of the south roadway edge of the private dirt roadway.
- (7) Gouge on the dirt roadway 6 inches long, located 618 ft. east of a concrete paved helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to 27308 Fairview Ave. and 6 ft. north of the south roadway edge of the private dirt roadway.



## COLLISION NARRATIVE

Report #2009040057

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27308 Fairview Rd. east of Amyx Ct.

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### FACTS:

### NOTIFICATION:

On 04-13-2009 at approximately 1328 hours, I was dispatched to a call of a traffic collision with possible fatal injuries. I responded from Benedict Ave. at I-580 and arrived on scene at approximately 1345 hours. All times, speeds and measurements in this investigation are approximate. Measurements were taken by Officer LaPonte #15971, using a rollmeter and patrol vehicle odometer.

### SCENE DESCRIPTION:

This collision occurred on the private property of (b)(6), which is a residence located in the unincorporated area of Hayward California. The collision scene is located behind a residence approximately 605 ft east of a concrete paved helicopter-landing pad, which is located just east of a 684 ft. long concrete paved driveway. Gates control access to the concrete paved driveway and dirt roadway. There is no public access to the property. The dirt roadway descends as you travel in an easterly direction and primarily consists of gravel and loose dirt. The roadway turns sharply to the right at the collision scene. There is a dirt embankment located along the south roadway edge and a steep ravine bordering the north roadway edge. At the time of the collision, the weather was sunny, warm and dry. There were no visual obstructions noted at the time of my investigation. For further details refer to the factual diagram.

### PARTIES:

**Party # 1 (Haket Jr.)** Prior to my arrival, P-1 was transported by AMR ambulance to Eden Hospital in Castro Valley. P-1 was identified and determined to be the driver of V-1 by witness statements and the fatal injuries sustained by this collision. Dr. M. Gynn of Eden Hospital determined P-1 was deceased on 04-13-09 at 1347 hours.

### DRIVER PROFILE (24 HOUR):

On 04-13-2009 at approximately 1500 hours, I contacted P-1's father, Witness #1 (b)(6) at Eden Hospital in Castro Valley. W-1 is a construction worker at (b)(6) in Hayward. W-1 related to me that he brought his son (P-1) to work with him because P-1 was on spring break from school. W-1 stated P-1 began driving V-1 at approximately 0800 hours and had been driving V-1 off and on throughout the morning. W-1 related P-1 has extensive experience driving off-road vehicles including off road motorcycles and vehicles similar to V-1. W-1 related that P-1 was a competent driver of this type of vehicle.



# COLLISION NARRATIVE

Report #2009040057  
27308 Fairview Rd. east of Amyx Ct.

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## PARTIES Continued:

**Vehicle #1 (Kawasaki)** is a 2002 "Mule" off-highway vehicle. V-1 was located on the private dirt roadway within the private property of (b)(6), east of the collision scene. V-1 had been moved prior to CHP arrival. The driver's seatbelt in V-1 did not appear to have any type of stretching or other indications of being worn during a collision. The driver's seat belt was inspected at the scene and during the vehicle inspection. The driver's seatbelt was tucked between the bottom and top portion of the seat and did not appear to have been used recently. On 04-14-09 at approximately 1130 hours, V-1's mechanical condition was inspected by Officer Rossi #16295 and Officer McGhee #17131 at Palace Garage in San Leandro. (See attached supplemental inspection report for further information).

## OTHER FACTUAL INFORMATION:

The following agencies and personnel were present at the scene:

### **California Highway Patrol:**

Castro Valley Area

Sgt. S. Perea ID #17274 Scene supervision

Officer A. Rossi ID #16295 Investigating Officer

Officer M. LaPonte ID #15971 Measurements / Scene management

Officer J. Ridad ID#18850 Vehicle storage / Scene management / Measurements

### **Alameda County Sheriffs Department:**

Eden township substation

Sgt. D. McKaig

Sgt. S. Duder

Sgt. K. Bass

Det. M. Godlewski

Dep. S. Light

Dep. Gallindo

Dep. W. Lam

Dep. K. Gilkerson

Dep. Larousa

### **American Medical Response:**

640 143<sup>rd</sup> Ave.

San Leandro, Ca. 94578

Unit # 564

Paramedic M. Cross

EMT T. Corral

### **Hayward Fire District:**

Station #8

25862 Five Canyons Rd.



# COLLISION NARRATIVE

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## OTHER FACTUAL INFORMATION CONTINUED:

### **Hayward Fire District:**

Station #8

25862 Five Canyons Rd.

Hayward, Ca. 94542

Capt. M. Dedomenico

Operator T. Opdycke

Firefighter M. Barbano

## STATEMENTS:

**Statements are not verbatim and are written in summary form.**

Party # 1 (b)(6) sustained fatal injuries as a result of this collision and was unable to provide a statement.

Witness #1 (b)(6) was contacted on 04-13-09 at approximately 1500 hours at Eden Hospital in Castro Valley and in essence related the following. W-1 is a construction worker at (b)(6) Fairview Ave. in Hayward. W-1 stated he brought his son (P-1) to work with him because P-1 was on spring break from school. W-1 stated P-1 began driving V-1 at approximately 0800 hours and had been driving V-1 off and on throughout the morning. P-1 periodically stopped and spoke with W-1 while driving V-1 on a dirt road that traveled throughout the property at 27308 Fairview Rd. At approximately 1240 hours, W-1 stated he had not seen P-1 for approximately 30 minutes to 1 hour and went to go look for P-1 with Witness #2 (b)(6). At approximately 1245 hours, W-1 and W-2 located P-1 lying in the dirt roadway with V-1 on top of P-1. V-1's left outside floorboard was directly on top of P-1's neck. W-1 and W-2 were unable to lift V-1 off of P-1. W-1 remained with P-1 while W-2 went to get help. W-2 returned with Witness #3 (b)(6) and Witness #4 (b)(6). W-1, W-2, W-3 and W-4 were able to lift V-1 off of P-1. W-1 checked P-1 for a pulse and was unable to find one. The witnesses drove P-1 to the concrete driveway of 27308 Fairview Ave. and waited for medical attention to arrive. Hayward Fire Department and AMR responded to the scene. At approximately 1258 hours, AMR unit #564 transported P-1 to Eden Hospital in Castro Valley.

Witness #3 (b)(6) provided a written statement to Deputy S. Light of the Alameda County Sheriffs Department. (See attached written supplemental for further info)



**OPINIONS AND CONCLUSIONS:**

**SUMMARY:**

P-1 was driving V-1 on a private dirt roadway within the private property of (b)(6) east Amyx Ct. in an easterly direction at an unknown speed. As V-1 approached a downward slopping right turn in the dirt roadway, for unknown reasons, P-1 made an unsafe turning movement to the right. The front of V-1 collided into a large dirt embankment located along the south roadway edge. V-1 partially drove up the dirt embankment while continuing in an easterly direction. P-1 was not wearing his seatbelt and became ejected onto the dirt roadway. V-1 overturned and landed on top of P-1. V-1's left outside floorboard came to rest directly on top of P-1's neck. At approximately 1240 hours, W-1 and W-2 were driving in the area to check on P-1's well being because they he had not seen P-1 for approximately 30 minutes to 1 hour. W-1 and W-2 located P-1 and V-1 but were unable to lift V-1 off of P-1. W-1 remained with P-1 while W-2 went to get help. W-2 returned with W-3 and W-4. W-1, W-2, W-3 and W-4 were able to lift V-1 off of P-1. W-1 checked P-1 for a pulse and was unable to find one. The witnesses drove P-1 back to the concrete driveway of 27308 Fairview Ave. and waited for medical attention to arrive. Hayward Fire Department and AMR responded to the scene. AMR unit #564 transported P-1 to Eden Hospital in Castro Valley.

**AREA OF IMPACTS:**

AOI #1 (V-1 vs. Dirt Embankment) was located 605 feet east of a concrete paved circular helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to 27308 Fairview Ave. and at the south roadway edge of the private dirt roadway.

AOI #2 (V-1 vs. P-1) was located 615 feet east of a concrete paved circular helicopter pad at the end of a 684 ft. long concrete paved driveway from the main entrance to 27308 Fairview Ave. and 4 feet north of the south roadway edge of the private dirt roadway.

**CAUSE:**

P-1 caused this collision by making an unsafe turning movement with V-1. Due to P-1's turning movement, P-1 lost control of V-1 resulting in this collision.

The AOI was based on the statements and vehicle damage. The cause, summary and AOI's were determined by witness statements, physical evidence and the damage to V-1.

**RECOMMENDATIONS:**

None.



## Vehicle inspection report

Report # 2009040057

04-13-09/1235/375/16295

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### Prior Mechanical Defect Inspection:

### Personnel Involved:

The vehicle inspection was performed by Officer A. Rossi #16295 and Officer B. McGehee #17131 of the Castro Valley CHP office. Officer Rossi is a former Journeyman Automotive Technician and former Commercial Vehicle Inspection Specialist with a degree in automotive technology. Officer B. McGehee #17131 is a former ASC certified master automotive technician.

### Inspection Location Information:

On 04-14-09 at approximately 1130 hours at Palace Garage tow yard in San Leandro Ca.

### Description of Vehicle:

2002 Kawasaki Mule, VIN # JK1AFCE192B513805, gas engine, four wheel drive, red in color with an automatic transmission and drum brakes.

### Brakes:

The hydraulic brake system on this vehicle consists of drum brakes on both the front and the rear. The fluid was inspected and was filled to the proper height. The brake pedal was depressed for feel and function. When depressed, the pedal felt firm and activated the brakes properly. I inspected the rubber brake lines and found no leaks or obvious defects. While test driving the Kawasaki under hard brake application, the vehicle had a slight pull to the left but was not severe enough to effect the control of the vehicle. The hand operated parking brake was also fully functional.

### Steering and Suspension:

The steering system was checked for feel and function. The steering wheel was turned through its full range of motion without any issues. All of the steering components appeared to be properly attached. The front suspension consists of coil-over struts and appeared to be in working order. The rear suspension is a leaf-spring style with shocks and also appeared to be in working order. I did not locate any prior mechanical defects within the steering or suspension systems.



## Vehicle inspection report

Report # 2009040057

04-13-09/1235/375/16295

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### Engine and Transmission:

The engine in this vehicle is a 4-stroke gas engine. The engine was started. It idled and ran normally. The throttle cables were inspected and did not bind or stick through out its entire range of motion. The foot throttle was functioned numerous times without any issues. The engine RPM's would rise and fall accordingly.

### Tires:

The tires on the vehicle are Dunlop KT 765 AT 22X11-10  
The manufactures recommended tire pressure is 10 PSI in the front and 24 PSI in the rear.  
The front tires were in fair condition with minimal tread. The rear tires were in poor condition and nearly bald within the center portion of the tires.

The tire pressures were as follows:

Front Left 5 PSI  
Front Right 11 PSI  
Rear Left 26 PSI  
Rear Right 12 PSI

### Safety Equipment:

V-1's seatbelts consist of lap belts only. They were inspected and functioned properly. The driver's seatbelt did not appear to have any type of stretching or other indications of being worn during a collision. The driver's seat belt was tucked between the bottom and top portion of the seat and did not appear to have been used recently.

### Damage:

The Kawasaki incurred the following damages:

The front left bumper and fender sustained small scratches. The plastic roof along the left rear was cracked. The left side of the dump bed sustained small scratches and minor dings.

See the photographs for further information about the damage and condition from this collision.

### Conclusion:

As part of the inspection the Kawasaki was driven within the Palace Garage tow yard parking lot. The Kawasaki drove and handled well without any obvious concerns or issues. The brakes functioned well and could lock up upon full hard brake application. In my opinion, this vehicle did not have any prior mechanical condition that could have caused this collision.



**Alameda County Sheriff's Office**  
 Gregory J. Ahern, Sheriff / Coroner  
 Coroner's Bureau, 480 4th Street, Oakland, CA 94607-3829  
 (510) 268-7300 / (510) 268-7333 (fax)

**Coroner Investigator's Report**

<b>CALL INFO</b>	NAME OF DECEASED (LAST, FIRST, MIDDLE) <b>(b)(3):CPSA Section 25(c)</b>		TENTATIVE ID <input type="checkbox"/>	UNIDENTIFIED <input type="checkbox"/>	CASE NUMBER <b>2009-01055</b>	
	REPORTED BY <b>Lyan Santangelo</b>	REPORTED BY PHONE NO. <b>(510) 537-1234</b>	REPORTING AGENCY <b>Eden Medical Center</b>		REFERENCE NUMBER <b>2009040057</b>	
	INVESTIGATOR <b>Wellington Wong</b>	CALL DATE AND TIME <b>4/13/2009 13:59</b>	CASE TYPE <b>Removal Case</b>			
	DATE AND TIME OF DEATH <b>4/13/2009 13:47</b>	DATE OF BIRTH <b>5/16/1997</b>	AGE <b>11 Years</b>	SEX <b>Male</b>	RACE <b>Caucasian/White</b>	MARITAL STATUS <b>Never Married</b>
<b>DECEDENT</b>	HGT <b>61</b>	WEIGHT <b>146</b>	EYE COLOR <b>Brown</b>	HAIR COLOR <b>Brown</b>	SECURIZATION <b>Student</b>	EMPLOYER
	<b>Preliminary Summary</b> 11 Y/O Discovered at the scene with Kawasaki 'Mule' utility vehicle on top of him. He was last seen riding the utility vehicle about 45 minutes prior. Incident occurred at 27308 Fairview Avenue, Hayward. Transported to Eden MC and pronounced.					
<b>DEATH</b>	LOCATION OF DEATH <b>Eden Medical Center</b>				LOD TYPE <b>Hospital - ER/OP</b>	
	ADDRESS (STREET, CITY, STATE, ZIP) <b>20103 Lake Chabot Road Castro Valley CA 94546</b>				COUNTY <b>Alameda</b>	
	Manner <b>Accident</b>	Death Certificate Signed By <b>M. Yost #3, Deputy Coroner</b>				
	Cause A <b>Respiratory insufficiency</b>					Interval Minutes
	Cause B <b>Traumatic asphyxiation</b>					Interval Minutes
	Cause C					Interval
Cause D					Interval	
Other Significant Conditions						
<b>NOTIFICATION</b>	LEGAL NEXT OF KIN <b>Erik Hakot Sr. &amp; Suzanne</b>		RELATIONSHIP <b>Parents</b>		TELEPHONE NO. <b>(650) 593-1561</b>	
	NOTIFIED BY		METHOD <b>In Person</b>		DATE AND TIME <b>4/13/2009 0:00</b>	
	IDENTIFICATION METHOD <b>Personal Identification</b>		DATE AND TIME <b>4/13/2009 13:47</b>			
<b>INCIDENT</b>	LOCATION OF INCIDENT <b>Private estate</b>				AT WORK <input type="checkbox"/>	
	ADDRESS (STREET, CITY, STATE, ZIP) <b>27308 Fairview Avenue Hayward CA 94542</b>				COUNTY <b>Alameda</b>	
	INVESTIGATING AGENCY <b>CHP - Castro Valley</b>		INV AGENCY PHONE NUMBER		OFFICER <b>A. Rossi</b>	
	DATE AND TIME OF INCIDENT					
<b>DISP</b>	FUNERAL HOME <b>Sneider &amp; Sullivan &amp; O'Connell's Funeral Home</b>			BODY RELEASED TO FUNERAL HOME ON <b>4/16/2009 13:34</b>		
	Full Autopsy <input checked="" type="checkbox"/>	Partial Autopsy <input type="checkbox"/>	Inspection <input type="checkbox"/>	Record Review <input type="checkbox"/>	Inspection w/Specimen <input type="checkbox"/>	EXAM BY <b>Thomas W. Rogers</b>



Alameda County Sheriff's Office  
Gregory J. Abern, Sheriff / Coroner  
Coroner's Bureau, 480 4th Street, Oakland, CA  
94607-3829  
(510) 268-7300 / (510) 268-7333 (fax)

### Investigator Narrative

**Decedent:** HAKET JR., Erik David  
**Case Number:** 2009-01055  
**Investigator:** Wellington Wong

#### First Call Information:

On April 13, 2009, Monday, about 1355 hours, I (WONG) received a call from Nurse Lynn SANTANGELO of the Emergency Room at Eden Medical Center reporting the accidental death of (b)(3):CPSA Section 25(c) arrived at their facility via AMR paramedics with CPR in place. Life saving measures were continued by the medical staff without success and (b)(3):CPSA pronounced death at 1347 hours.

SANTANGELO had no other information at this time except that (b)(6) was discovered under a tractor somewhere in the Hayward hills area. (WWO#1076)

#### Medical Summary:

The decedent was discovered underneath a utility vehicle. He apparently sustained trauma to the right side of his head. There were no other obvious life threatening injuries. (WWO#1076)

#### Description of the Death/ Injury Scene:

The decedent was pronounced in the Emergency Room at Eden Medical Center.

The incident occurred on a dirt road on a private estate at 27308 Fairview Avenue, Hayward. (WWO#1076)

#### Body Identification:

The decedent was personally identified by his parents at the hospital. (WWO#1076)

#### Next of Kin Investigation:

Erik HAKET Sr. is the decedent's father and next of kin. He was a contractor at the estate when the incident occurred. He saw his son driving the utility vehicle about 1230 hours. When his son did not return to the residence on the estate, he went looking for his son and saw him pinned underneath the utility vehicle that was lying on its side. Several other co-workers assisted in lifting the 1,400 pound vehicle and moving the decedent from underneath it.

Father: Erik HAKET Sr. 02/16/1965  
Mother: Suzanne HAKET 04/20/1967

#### Other Agency Reports:

CHP - Castro Valley will be writing the report (2009040057)

#### Property and Evidence:



Alameda County Sheriff's Office  
Gregory J. Ahern, Sheriff / Coroner  
Coroner's Bureau, 480 4th Street, Oakland, CA  
94607-3829  
(510) 268-7300 / (510) 268-7333 (fax)

On Wednesday, April 15, 2009, I (GONZALEZ) issued Coroner's Receipt #28752 for jewelry found on (b)(6) person during inspection by morgue staff. The necklace was concealed by the C-spine collar. (RG1644)

**Coroners Fees:**

The fees were paid in full by Sneider and Sullivan & O'Connells Funeral Services during the release from the Coroner's Bureau.

**Other Investigative Details/ Supplemental Information:**

On April 13, 2009, about 1530 hours, Deputy D. SANCEZ and I (WONG) arrived at the scene where the incident occurred. We were directed down a gravel/dirt road about 600 feet from the main residence. I saw a Kawasaki 'Mule' utility vehicle on the side of the road. CHP Officer A. ROSSI #16295 showed me some fresh tire treads on the hillside of the road. I could also see skid marks on the road. Based on the evidence at the scene, it appears as if the decedent was driving the utility vehicle when he locked the wheels and began a downhill skid. He was ejected with the vehicle landing on top of him. I examined the vehicle and noted the tires had little tread left on the rear tires. I took scene photographs of the vehicle and the scene.

About 1610 hours, we arrived at Eden Medical Center and located the decedent. He was intubated with medical therapy in place. The only item of clothing he had on was a pair of underwear. I conducted a visual examination and saw a wound to the right side of his head and what appeared to be gravel indentations to his left arm. The decedent was moved to a gurney and into the Coroner's van for transportation back to the Coroner's Bureau. Nurse Lynn SANTANGELO said the parents were present and left shortly after because they were extremely distraught.

About 1740 hours, we returned to the Coroner's Bureau and I processed the decedent into the morgue. I also took intake photographs at this time. (WVO#1076)

On April 14, 2009, about 1430 hours, I (WONG) notified Casey CALIVO of the San Mateo CPS of the incident. (WVO#1076)

**Findings:**

On May 17, 2009, I (WONG) reviewed this case to determine a manner of death. Upon reviewing the autopsy protocol, case file, and other documents associated with this case, I find this death to be an accident. The autopsy protocol established the cause of death as respiratory insufficiency due to traumatic asphyxiation. The decedent was discovered unresponsive underneath a utility vehicle that he was seen driving while on the homeowner's property. Based on the tread marks on the scene, the decedent struck a hillside and tipped over and ended up beneath the vehicle. (WVO#1076)

**Supervisor Review:**

On May 29, 2009, I (GENTLE) reviewed this report and concur with the findings. I placed this case to Awaiting Closure. (FJG#10)

**Case Name:**

Haket Jr, Erik D.

**TOXICOLOGY NUMBER:** CVT-09-5042

**Specimen Description:** 5 ml leg blood & 11 ml heart blood each labeled (b)(3):CPSA Section 25(c) 4/15/2009;  
2009-01055"

**Delivered by** Tricor **Date** 16-Apr-09 **Received by** Bill Poscy **Date** 16-Apr-09

**Request:** Ethyl Alcohol

**Agency Case #** 2009-1055

**Requesting Agency**

Alameda Co. Coroner's Office  
Attn: Records  
480 4th Street  
Oakland CA 94607

**Report To**

Alameda Co. Coroner's Office  
Attn: Dr. Rogers  
480 4th Street  
Oakland CA 94607

**RESULTS**

Specimen: Peripheral Blood Sample

Blood Alcohol Content:

Blood Ethyl Alcohol = Negative  
Ethyl Alcohol analysis performed and recorded on: 04/16/09

04-23-09 16:51 FILE

VM



**Analyst**

B. L. Poscy

April 17, 2009

**B.L. POSEY**  
**S.N. KIMBLE**  
Director

1580 Tollhouse Road  
Clovis, California 93611  
Phone (559) 323-9940  
Fax (559) 323-7502

# Alameda County Sheriff's Office

Coroner's Bureau  
480 4<sup>th</sup> Street, Oakland, CA 94607-3829



**Gregory J. Ahern, Sheriff**

Coroner - Public Administrator - Marshal  
Director of Emergency Services

## M E M O R A N D U M

DATE: April 15, 2009  
FROM: Thomas Wayne Rogers, M.D.  
TO: Case File 2009-01055  
SUBJECT: AUTOPSY PROTOCOL

Autopsy performed upon the body of (b)(3):CPSA Section 25(c) at the Coroner's Bureau, 480 4th Street, Oakland, California, on April 15, 2009, at 8:50 a.m.

### AUTOPSY FINDINGS

- 1) ASPHYXIATION:
  - A) PETECHIAL HEMORRHAGES
  - B) FLUIDITY OF BLOOD
  - C) PULMONARY CONGESTION AND EDEMA
  - D) VISCERAL ORGAN CONGESTION.
  
- 2) LEFT PNEUMOTHORAX.

CAUSE OF DEATH: RESPIRATORY INSUFFICIENCY DUE TO TRAUMATIC ASPHYXIATION.

cc: EMS



Sheriff-Coroner  
Alameda County

Body of (b)(3):CPSA Section 25(c)

21 There are the following BLUNT INJURIES to the body:

22 HEAD AND NECK:

- 23 1) A 4-inch red abrasion in the left parietal area.  
24 2) A 1-1/4 inch red-brown abrasion in the right occipital  
25 area.

26 RIGHT ARM:

- 27 1) A 6-inch red-purple contusion on the posterior-lateral  
28 upper arm, at and above its midportion.  
29 2) Two purple contusions, each about 1/2 inch, on the  
30 posterior-lateral distal upper arm.  
31 3) A 1-1/2 inch area of red-brown abrading on the  
32 posterior proximal forearm.  
33 4) A 3/4-inch red abrasion on the posterior-lateral  
34 proximal forearm.

35 LEFT ARM:

- 36 1) A 6-inch purple contusion on the medial aspect of the  
37 upper arm, at the midportion.

38 RIGHT LEG:

- 39 1) A 4-inch linear red-brown abrasion on the anterior-  
40 medial distal lower leg.

41 LEFT LEG:

- 42 1) Four to five green contusions over the medial knee,

Sheriff-Coroner  
Alameda County

Body of (b)(3):CPSA Section 25(c)

43 covering a 2-inch area and ranging upwards to 3/8-inch in  
44 greatest dimension.

45 TORSO:

46 None present.

47 The hair is brown and about 1/2 inch long. Pupils are  
48 round. Irides are brown. Sclerae are white. No petechial  
49 hemorrhages are noted on the conjunctival surfaces. There are  
50 petechial hemorrhages on the skin of both orbital areas. Ears,  
51 nose and lips are normal. The neck is normal. The chest is  
52 flat. Breasts are consistent with an infant male. The abdomen  
53 is minimally obese. The external genitalia are normal. Legs,  
54 feet, arms and hands are without further abnormalities. The  
55 back is normal.

56 INTERNAL EXAMINATION

57 The body is opened through the usual Y-SHAPED INCISION  
58 under water. A small left pneumothorax is present.

59 BODY CAVITIES: The pleural cavities, pericardial cavity  
60 and peritoneal cavity are lined by smooth, glistening surfaces  
61 and contain no fluid. Ribs and diaphragms are intact.

62 HEART: In situ, the heart is normal, with the apex at the  
63 left midclavicular line. The heart weighs 200 grams. The  
64 epicardial surface is smooth and glistening. Ventricular

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Alameda County

Body of (b)(3):CPSA Section 25(c)

65 myocardium is brown. Chambers are normal. Valves are normal.  
66 No left ventricular hypertrophy is present. No asymmetric  
67 hypertrophy is present. No myxoid degeneration of the mitral  
68 valve is present. No vegetations are present on valve leaflets.  
69 Coronary ostia are patent. The coronary system has its usual  
70 anatomical distribution and is nonremarkable. No thrombi are  
71 present. There is fluidity of blood.

72 VESSELS: The aorta and tributaries are nonremarkable. The  
73 pulmonary artery and venous system contain no thromboemboli.

74 TRACHEA AND BRONCHI: Lined by pale yellow mucosal  
75 surfaces.

76 LUNGS: The left lung weighs 450 grams. The right lung  
77 weighs 500 grams. Pleural surfaces are smooth. Lung parenchyma  
78 is prominently congested and edematous. There are no areas of  
79 consolidation. No pulmonary infarcts are present. No bronchial  
80 asthma is identified. Airways of both lungs are nonremarkable.  
81 No tumors are present. The arterial system of both lungs is  
82 opened, and no thromboemboli or other abnormalities are  
83 identified.

84 ORAL CAVITY: The teeth are natural and with orthodontic  
85 hardware in place. The tongue is normal.

86 ESOPHAGUS: Lined by a white, wrinkled mucosal surface.

Sheriff-Coroner  
Alameda County

Body of (b)(3):CPSA Section 25(c)

87 STOMACH: Contains scant amounts of brown fluid. The  
88 mucosal surface is tan. No tumors or ulcers are noted.

89 INTESTINES: Covered by smooth serosal surfaces. No  
90 abnormalities are noted.

91 LIVER: Weighs 1150 grams. The serosal surface is smooth  
92 and glistening. The anterior margin is sharp. The parenchyma  
93 is brown and moderately congested. No tumors are present. No  
94 fatty metamorphosis or cirrhosis is present.

95 GALLBLADDER: The gallbladder is of normal size. Its  
96 surface is smooth. Its wall is of normal thickness. It is  
97 lined by a green velvety mucosal surface. It contains 10 cc of  
98 bile and no stones.

99 PANCREAS: The pancreas is of normal size. Its parenchyma  
100 is yellow-brown and lobulated. No tumors are present. No  
101 saponification is noted.

102 SPLEEN: The spleen weighs 240 grams. Its capsule is gray  
103 and smooth. Its parenchyma is red-purple and soft.

104 ADRENAL GLANDS: The adrenals are normal in size and have  
105 their usual triangular shape. Sectioning of them reveals non-  
106 remarkable cortex and medullary parts. No hemorrhages are  
107 present.

108 KIDNEYS: The left kidney weighs 140 grams. The right

Sheriff-Coroner  
Alameda County

Body of (b)(3):CPSA Section 25(c)

109 kidney weighs 150 grams. Surfaces are smooth. Parenchyma is  
110 brown and moderately congested. There is a distinct cortico-  
111 medullary separation. Papillae are normal. The calyces and  
112 pelves of both kidneys are nonremarkable. No obvious  
113 abnormalities are noted of the ureters. No stones are present.

114 BLADDER: The bladder contains no urine. It is lined by a  
115 tan mucosal surface. No trabeculation or tumors are present.  
116 No diverticula are noted.

117 PROSTATE: Infantile.

118 TESTICLES: Infantile.

119 MUSCULOSKELETAL SYSTEM: No abnormalities noted.

120 NECK: The hyoid bone and laryngeal structures are intact.  
121 Soft tissue about the larynx is normal. The larynx is free of  
122 obstructing material. The cervical vertebral column is non-  
123 remarkable. The thyroid gland is of normal size. Sectioning of  
124 it reveals a nonremarkable red-brown parenchyma.

125 CENTRAL NERVOUS SYSTEM: There is red-purple glistening  
126 soft-tissue hemorrhage present in association with blunt  
127 injuries, above mentioned, on the right side of the head. The  
128 brain weighs 1050 grams. The gyri and sulci of the cerebral  
129 hemispheres are normal. Sectioning of the brain reveals no  
130 abnormalities. No contusions are noted. The ventricular system

Sheriff-Coroner  
Alameda County

Body of (b)(6)

131 of the brain is nonremarkable. No subdural or subarachnoid  
132 hemorrhages are present. The vessels at the base of the brain  
133 are nonremarkable. Stripping the dura from the inner table of  
134 the skull reveals no abnormalities.

135 SPECIMENS:

- 136 1) Heart's blood  
137 2) Leg blood  
138 3) Liver  
139 4) Tissue  
140 5) Photographs.

141

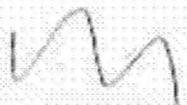
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146 TWR/cah



Thomas Wayne Roge, M.D.

## 2002 Kawasaki Mule 3010



The Mule 3010 features four-wheel drive capability and is ideally suited for applications ranging from forestry and nature reserve use to work on construction sites. As with all Mule utility vehicles, the Mule 3010 features a steel tilting cargo bed, bench seat, fully-automatic transmission and car-like controls. But this Mule brings a whole new look to the Kawasaki fold.

Most apparent is the striking new bodywork that features fashionable pickup truck styling. A rugged grille and rounded fenders add strength to the new look, and body panels of the cab are made of durable plastic that has molded-in color to help prevent scuffing.

**GENERAL INFORMATION**

M.S.R.P.	\$8,799.00*
Engine	617cc, Liquid cooled, 4-stroke, V-twin, OHV
Displacement	617cc
Bore x Stroke	78 x 68mm
Carburetion	Mikuni BW26-18
Ignition	Digital Electronic
Transmission	Automatic
Final Drive	All-Shaft, selectable 4x4, dual-mode rear differential
Suspension	Front: Independent MacPherson strut-type Rear: DeDion leaf spring
Brakes	Front: Hydraulic Drum Rear: Hydraulic Drum
Tires	Front: 23 x 11-10 tubeless Rear: 23 x 11-10 tubeless
Length	112.6"
Wheelbase	73.6"
Dry Weight	1200 lbs.
Ground Clearance	7.2"
Fuel Capacity	5.3 gal.
Load Capacity	Load Capacity 1330 lbs. Bed Capacity 803 lbs.
Towing Capacity	1200 lbs.
Colors	Hunter Green, Firecracker Red

# Mule 3010 4x4



## KEY POINTS:

- High torque industrial V-twin petrol engine
- Automatic transmission, selectable 4WD, dual-mode differential
- Selectable high / low ratio
- Large cargo bed
- Low ground pressure tyres
- Winch ready mounts on frame
- Excellent ground clearance
- Cab frame tested and approved in accordance with 98/37/EC

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## SPECIFICATIONS KAF620E

Engine type	4-stroke, liquid cooled, 90° V-twin, OHV, electric starter
Displacement	617 cc
Bore and stroke	76.0 mm x 68.0 mm
Compression ratio	10.3:1
Maximum power	14.7 kW (20 PS) / 3,600 rpm
Maximum torque	47N·m (4.8 kgf·m) / 2,500 rpm
Fuel system	Mikuni BW26-18 double barrel carburettor
Ignition system	digital electronic ignition
Transmission	2 speed, automatic, continuously variable transmission (CVT), forward/reverse, 4WD
Differential	front, limited slip / rear, dual mode
Suspension, front	independent MacPherson strut
Suspension, rear	semi-independent, leaf spring
Wheel travel, front / rear	100 / 70 mm
Minimum turning radius	3.4 m
Front / rear tyres	23 x 11-10 (tubeless)
Brakes, front / rear	4-wheel, 180 mm self-adjusting, sealed hydraulic drums
Overall L x W x H	2,861 x 1,460 x 1,936 mm
Cargo bed L x W x H	1,175 x 1,310 x 288 mm
Wheelbase	1,870 mm
Ground clearance	184 mm
Track width, front / rear	1,160 x 1,180 mm
Top speed	40 km/h (25 mph) (governed)
Cargo bed capacity	363 kgs
Towing capacity	545 kgs (trailer + cargo)
Maximum permissible load	603 kgs (+ towing capacity)
Fuel capacity	20 litres
Alternator rated output	12V, 18A
Dry weight	580 kgs
Colour	Aztec Red

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# Mule 3010 4x4 (KAF620E)

## FEATURES AND BENEFITS

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### ENGINE

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#### Liquid cooled, 90°V-twin

- High torque, 617cc, compact V-twin OHV engine is powerful and smooth running.
- Mounted in rubber isolated sub frame for low vibration levels minimising wear, noise and driver fatigue.
- Liquid cooling for greater efficiency and reduced noise levels.
- Digital electronic ignition improves engine idle, response and prevents spark plugs from fouling.

#### Air intake

- Cyclone type air filter design is effective and needs less frequent cleaning even in extremely dusty conditions.
- Draws engine and converter cooling air from the top of the cab frame where there is less dust, to maximise air filter life.
- Restriction gauge indicates when to clean the air filter.

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### TRANSMISSION

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#### Kawasaki Automatic Power-drive System (KAPS)

- The Continuously Variable Transmission (CVT) system is fully automatic.
- Keeps the engine rpm in the most efficient range for any selected vehicle speed, load and terrain.
- Belt deflection is adjustable for extended belt life and efficient performance.
- Filtered cooling air further boosts belt life.

#### 4WD with 2 speed transfer case

- Shift to 4WD and low range for maximum traction under adverse conditions.
- Shift to 2WD and high range to cut running gear wear and increase fuel economy.

#### Dual mode differential

- Locked mode for maximum traction, unlocked mode to minimise ground disturbance.

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### CHASSIS

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#### Independent strut type front suspension

- Firm front suspension helps prevent bottoming out under full load without sacrificing ride comfort.
- Independent MacPherson strut suspension allows each wheel to track over uneven ground for maximum traction with light steering effort.

#### DeDion leaf spring rear suspension

- Strong leaf spring rear suspension handles the heavy load capacity and ensures a smooth, stable ride over rugged terrain.

- Semi-independent action.

#### 4-wheel, self adjusting, hydraulic brakes

- Reliable, hard wearing and powerful.

#### Low ground pressure tyres

- Low weight plus the use of wide section, low pressure tyres allow the Mule to be used on soft ground with minimal surface damage and to be driven over low kerbs etc. without causing damage.

#### Body and hood

- The cab frame has a mesh rear panel and is tested and approved to meet the relevant requirements of the European Machinery Directive (98/37/EC). This is combined with individual seat belts to help protect occupants.
- Sturdy passenger side grab rail mounted on the cab frame provides additional passenger security in rough off-road conditions.
- Frame has winch ready mounts fitted as standard.
- Pick Up truck style front hood releases with a touch of a button to reveal a storage area with 4 hooks to help secure cargo.
- Passenger glove box and driver's side glove pocket provide additional storage.
- Large 23 inch tyres combined with the suspension travel add up to an impressive 184 mm of ground clearance.

#### Tilting cargo bed

- 363 kg load capacity cargo bed features a two lever tailgate release system for easy opening and closing and 288 mm tall side rails that allow for a high load volume.
- Lock pin guide, rubber dampers and thick steel for the tailgate, enhance operability and styling while reducing vibration and noise.

#### Simple controls

- Instrumentation includes hour meter, fuel gauge, horn and DC outlet socket. Also included are oil pressure, parking brake and coolant temperature warning lamps.
- Shift lever with Y-gate pattern eliminates the need for a separate High-Low ratio gear shift lever.
- Automotive type fuse box for reliability and ease of use.
- Twin sealed beam headlights, dual taillights .

CONTACT LIST

California Highway Patrol  
21020 Redwood Rd.  
Castro Valley, CA 94546  
Lt. Chris Day 707-581-9028  
Report received 6/25

Alameda Co. Coroner  
480 4<sup>th</sup> St.  
Oakland, CA 94607-3829  
510-268-7300  
Report received: 7/20

(b)(6)

Telephone messages left, letter sent - no response

(b)(6)

Telephone message left – no response

Google.com, zillow.com, manta.com – websites checked from property information  
Kawasaki.com, englehart.com, Kawasaki.co.nz – websites checked for vehicle  
information

**The Daily Review**

Fairview, CA

ISSUE 36

## Off-road accident in Fairview fatal for 11-year-old

By Jason Sweeney

Posted: 04/14/2009 09:39:46 AM PDT  
Updated: 04/14/2009 08:24:11 PM PDT

FAIRVIEW — An 11-year-old boy died in a hospital of internal injuries Monday after the off-road utility vehicle he had been riding overturned, authorities said.

(b)(6) of San Carlos, lost control of the vehicle about 12:45 p.m. while driving on a dirt roadway on private property in the 27300 block of Fairview Avenue in Fairview, an unincorporated area near Hayward. The vehicle apparently flipped and he became pinned underneath, according to the California Highway Patrol.

Emergency personnel arrived on the scene and began lifesaving measures. They then transported the boy to Eden Medical Center in Castro Valley, where he died, the CHP said.

(b)(6) was at the extensive, gated property in the hills above Hayward with his father, who was working on a large house under construction there. (b)(6), a sixth-grader at St. Matthew's Catholic School in San Mateo, was out of school for spring break.

The vehicle was a Kawasaki Mule, an off-road utility vehicle about the size of a golf cart, and not a recreational ATV quad.

"It's considered a motor vehicle," CHP Officer Eric Morales said. "It has a seat belt, and a helmet is not required. On a quad, you are required to wear a helmet."

The boy's father, also named (b)(6), is an electrician, and said that his son frequently helped him at work. "He was a great kid," he said. "He couldn't be any more helpful."

Sgt. Steve Perea said the boy had been driving the vehicle down

a 12-foot-wide dirt lane. "He was going downhill and banking right. He lost control as he was making the turn, hit the dirt embankment on the right side and flipped over. He was either fully or partially ejected and the vehicle rolled over him. Speed is really hard to determine because he was on a dirt road."

It appears the boy had not been wearing a seat belt, although it is not clear if that would have saved him, because the vehicle is not enclosed, Perea said. No license is required for such vehicles, he said.

Relatives gathered at the (b)(6) home in San Carlos on Tuesday afternoon. (b)(6) was active and loved the outdoors, skiing and riding bikes, relatives said.

His mother, (b)(6), said he loved doing anything "that made his mother nervous."

"He was just a little boy who always wanted to move and groove," she said, "so he died doing something he loved."

The CHP is continuing to investigate the case to determine if the cause was mechanical or human error.

The off-road vehicle belongs to the owner of the property, Perea said. The owner did not return calls for a comment Tuesday.



This investigation was initiated in follow-up to a news article dated May 30, 2009 describing the death of a thirteen year-old male involving an off-road utility vehicle, (UTV). The majority of the information contained in this report was obtained verbally from the victim's father during a June 10, 2009 telephone conversation; from the owner of the dealership where the incident off-road UTV was purchased during a June 12, 2009 telephone conversation; from the investigating state police detective during a June 18, 2009 in-person meeting and from the attorney representing the victim's family over the course of several conversations between June 12, 2009 and June 18, 2009. Product identification information regarding the incident vehicle was obtained during a June 18, 2009 examination of the vehicle at a private garage where it was being held at the request of the state police. In addition to this Investigator, the investigating state police detective, the attorney representing the victim's family, two CPSC Engineers, three manufacturer representatives and one crash expert hired by the attorney representing the victim's family were all present during the examination of the vehicle. Following the examination of the vehicle, all of the above parties made an on-site visit and obtained photographs and measurements. Although the victim's father was present for a portion of the on-site visit, he was not interviewed at this time. A local news reporter and camera operator were present during both the examination of the incident vehicle and the on-site visit. Efforts to obtain the state police incident report, state police scene photographs, the state police investigative report, the local police report, medical records and the medical examiner's report were all unsuccessful, (see Exhibit 2 for details). If and when these reports are obtained, they will be submitted as an addendum to this report. Finally, the passenger, a minor child, could not be located for the purpose of this investigation.

The victim's father reported the following:

The incident off-road UTV was purchased on May 20, 2009 new from a local dealership for approximately \$9,000.00. A purchase receipt was not immediately available. At the time of purchase, the salesman reportedly told the victim's father that he could not take delivery of the vehicle for approximately one week because "the rear tires needed to be retro-fit to make the vehicle more stable". The victim's father stated that no one at the dealership ever mentioned that the vehicle was subject to a "CPSC negotiated repair program" or that "the vehicle was prone to tip over". The victim's father further stated that he informed the salesman that the UTV was being purchased primarily for use by his thirteen year-old son and his eighty year-old father-in-law. The victim's father explained that the family lives on an alpaca farm and planned to use the vehicle to "haul farm related stuff around". The incident vehicle was not marketed as a discontinued model nor was it purchased during a special sales event; the victim's father stated that it was a "new 2009 model" and "looked really tough".

The victim's father stated that the incident UTV was retrieved from the dealership on May 28, 2009 and transported to his home. When initially questioned, the victim's father stated that the incident vehicle had doors installed on both the driver's side and passenger's side at the time of the incident. It was later clarified that the doors were

installed at the time of delivery, but were removed prior to the incident at the request of the victim's eighty year-old grandfather to allow him easier access to the vehicle. It is unclear if the doors were removed by the dealer at the dealership or if the victim's father and/or the victim removed the doors after transporting the vehicle home. With the exception of the removal of the doors, the incident UTV was not modified or altered prior to the incident.

The victim's father stated that the incident UTV was accompanied by an owner's manual at the time of delivery. The victim's father further stated that he read and understood the owner's manual, but acknowledged that he did not believe his son had read the manual prior to operating the vehicle. The victim was reportedly "extremely experienced" in operating "ATV's, farm tractors, dirt bikes and other farm equipment". The family reportedly owns three ATV's manufactured by the same firm as the incident UTV. The victim's father stated that the victim "typically" rode a 350cc ATV manufactured by the same firm "like it's a tricycle". The victim's father noted that his son "rode had a 4-wheeler between his legs since he was four years old". The victim never received any formal training in how to operate either an ATV or UTV. The victim's father noted that the incident UTV was not accompanied by an instructional DVD, although it was his understanding that "it should have". (Although verbally requested during the conversation, the victim's father stated that he did not wish to forward this Investigator any printed material that accompanied the incident UTV without first checking with the attorney hired to represent the victim's family.)

The victim's father stated that he "had very little knowledge of the actual machine" with regards to if the repairs conducted post-purchase / pre-delivery were, in fact, conducted. The victim's father did not know if spacers were installed on the rear wheels or if the anti-sway bar was removed; however he stated that he was told by the dealer at the time of delivery that the repairs were, in fact, conducted.

The thirteen year-old male victim and a fourteen year-old male friend received permission from their parents to skip school on May 28, 2009 and ride the newly delivered UTV in a field approximately ¼ mile from the main house. The victim's family owns the incident property and the victim's father reported that the field has "ATV tracks all through it" and is the primary area where the victim would ride off-road vehicles "for fun". The victim's father described the incident field as a "high grass hayfield". The victim's father reported that his son was "really excited" about the newly purchased UTV as it was "a bit different from the ATV's" the family owns.

At the time of the incident, the victim was approximately 5'6" in height and weighed an estimated 120 pounds. The victim's father noted that his son was "pretty tall for his age". The victim's fourteen year-old friend was reportedly 5'4" in height and 145 pounds. The victim's father described the victim's friend as being "as strong as an ox". The two boys spent the morning and early afternoon of May 28, 2009 riding the incident UTV. It is unknown if the victim always drove the vehicle or if he allowed his friend to operate the

UTV. The victim's father reported that, to his knowledge, the boys "never" wore helmets while operating the machine. In or about mid-afternoon, the boys took a break from riding the incident UTV and at approximately 4:30 p.m. decided to return to the field and ride it again. (It is unknown if the victim's family was offered a free helmet at the time of sale.)

At the time of the incident, the thirteen year-old male victim was driving the incident UTV and was not wearing a helmet or a seat-belt. The victim's fourteen year-old male friend was a passenger in the vehicle at the time of the incident. The passenger was wearing a seat-belt, but no helmet. The UTV was not hauling anything at the time of the incident and nothing was in the bed of the vehicle. Details regarding any other protective gear or clothing in use by either of the two occupants of the vehicle at the time of the incident are unknown.

With regards to the immediate pre-incident information, the victim's father stated that the passenger reported the following to him:

"(The victim) was driving the UTV down a slight hill, in the high grass parallel to the main ATV path. He drove the UTV between two trees and was just getting ready to get back on the center dirt trail." The passenger reportedly stated that the UTV was going "no more than 15 miles per hour" at the time of the incident. The grass was "a bit wet" at the time of the incident. (The attorney retained by the family walked this Investigator through the reported path of the incident UTV immediately prior to the incident during the on-site visit. See Exhibit 1 for details.)

Lighting conditions were reportedly clear at the time of the incident and lighting is not believed to be a contributing factor to the incident.

At approximately 4:30 p.m. on May 28, 2009, the incident UTV tipped towards the driver's side as the vehicle was being steered towards the right. The victim fell out of the vehicle as it tipped and the roll-cage reportedly landed on the victim's neck and head, killing him "instantly". The passenger was suspended by the seat belt, over top of the victim, as a result of the incident.

The passenger, uninjured, reportedly was able to free himself from the seat belt, lifted the vehicle off of the victim, ran home and telephoned "911". Details regarding the time(s) that first responders arrived on-scene were not available. The victim was reportedly air-lifted to a nearby medical center where he was pronounced dead at 5:10 p.m. of injuries sustained during the incident. (The official cause of death is unknown as the medical examiner's report was not submitted.) The victim's father stated that the UTV "landed on his (the victim's) neck, killing him instantly". As the Medical Examiner's report was not obtained, it is unknown if drug or alcohol use played a part in the incident.

The investigating police detective stated that the victim "was not ejected from the vehicle in the typical sense. It was more like he fell out of the vehicle rather than was ejected

out". When questioned about the difference between "falling out" and "being ejected", the detective noted that when a victim is "ejected" they land some distance from the vehicle; he noted that the victim in this incident appeared to have "fallen" out the driver's side during the incident as he landed directly underneath the vehicle and was not "thrown clear".

The victim's father stated that post-incident he examined the incident area with the passenger and observed that the "slight hill" was no more than a "10 percent incline at most". The victim's father reported that the incident UTV was "locked in 4-wheel drive independent" at the time of the incident, but this could not be independently verified.

Neither the victim's family nor the attorney retained by the victim's family notified the manufacturer about the incident. It is unknown how the manufacturer first became aware of the incident.

The victim's father believes that the repair program does not address the "hazards of the vehicle" and would like to see the UTV's recalled. The victim's father opined that "putting spacers on only the rear wheels and removing a 15-pound anti-sway bar changes its center of gravity" and "turns it into a tricycle, making it top heavy". The victim's father further opined that the "fatal design flaw is that to get it to look 'tough' they made the ground clearance higher than any other vehicle on the market, which makes it subject to tipping". The victim's father acknowledged that he is not an engineer, but noted that "if you have a vehicle that continually kills people; you have a problem with the design". Finally, the victim's father encouraged this Investigator to obtain promotional brochures for the subject UTV. He noted that, "the brochures all show the (UTV) climbing terrain that it could absolutely never climb without the thing rolling over. It's meant to get you to buy it but it gives you a false sense of what the machine can do".

The owner of the dealership that sold the incident UTV was contacted via telephone on June 12, 2009 and was interviewed. The owner reported the following regarding the incident UTV:

The repairs negotiated as part of the CPSC repair program were conducted "absolutely by the book". The dealership is in its fifteenth year of business and is "extremely familiar" with the subject make and model UTV. The repair kit, including the spacers and required hardware, was received from the manufacturer on or about the morning of the incident. The anti-sway bar was removed and the spacers installed according to printed instructions received from the manufacturer the morning of the incident. A passenger hand-hold was installed on the vehicle. Half doors were installed on both the driver's side and the passenger's side of the incident UTV at the time of delivery. All repairs were completed approximately one hour prior to delivery to the victim's father. The owner opined that the incident was a "tragic accident" and suggested that CPSC seek a copy of the state police report. The dealer stated that he had been told by the local police that "speed and

lack of a helmet” both were contributing factors to the incident and that “the kids had been trying to get the vehicle to ‘slide’” at the time of the incident.

The dealer explained that the manufacturer has a “freeze” placed on any brand new UTV of the subject model in that dealers have been told that “new (subject make and model UTV’s) cannot be delivered until the repairs as outlined under the repair program are completed. The manufacturer has been sending us four to six repair kits at a time and when we run out, we order more.” The dealer noted that in his opinion the manufacturer should “just recall and repair” all of the same make and model UTV’s. He stated that it “concerned him” as a dealer that the repairs were “mandatory” for new vehicles but were “voluntary” for previously purchased vehicles.

No further information concerning this incident was available at this time.

### **SAMPLE COLLECTED**

The incident UTV was being held by the State Police and was not available for collection.

### **PRODUCT IDENTIFICATION**

The incident UTV was manufactured by: **Yamaha Motor Corporation USA**; 6555 Katella Avenue; Cypress, CA 90630. The firm’s telephone number is 714-761-7300.

The incident UTV was purchased from: Gable Motor Sports; 2431-2 St.; Route 7 East; Cobleskill, NY 12043. The retailer’s telephone number is 518-234-0150.

The incident product is a side-by-side, 4 X 4, fully automatic, Off-Road Utility Vehicle, (UTV). The model name of the vehicle is “RHINO” and the model number is “450”. The victim’s father reported that the vehicle was believed to have been manufactured in 2009. The serial number appearing on the vehicle is “\*\*\*\*5Y4AJ32Y89A006682\*\*\*\*”. The vehicle is primarily green in color and is equipped with roll-bars, a passenger grab handle, two bucket seats with head rests, passenger and driver seat belts, headlights, a foot brake pedal, a foot accelerator pedal, a center console shifter, a turn-to-start ignition switch, a dump bed and a trailer hitch. The vehicle measures approximately 113”L X 55”W X 73”H. The vehicle reportedly is equipped with a four-stroke engine and a push button on the center console which controls whether the vehicle is in 2 wheel-drive, 4 wheel-drive or “fully locked” 4 wheel-drive. The vehicle, as examined, appears to have spacers installed on both of the rear wheels and it appears that a rear anti-sway bar has been removed, (see Exhibit 1). The vehicle, as examined, did not have doors installed on either the driver’s or passenger’s side.

During the on-site examination, a manufacturer representative removed the tire gauge from the battery compartment of the vehicle and measured the tire pressure of all four

tires in the presence of everyone present for the examination. The front right passenger-side tire measured 13 psi; the back right passenger-side tire measured 16 psi; the front left driver-side tire measured 13 psi and the back left driver-side tire measured 16 psi.

Labeling on the incident vehicle included the following, (see Exhibit 1 for location of labels):

**“\*\*\*YAMAHA\*\*\*”**

**“\*\*\*!\*\*\*WARNING\*\*\*Keep hands, body, and other people away from pinch points when lowering bed. Do not hold the cage/frame while closing bed.\*\*\*YAMAHA\*\*\*”**

**“\*\*\*DIFF-LOCK\*\*\*4 X 4\*\*\*”**

**“\*\*\*RHINO\*\*\*”**

**“\*\*\*RHINO\*\*\*INDEPENDENT SUSPENSION\*\*\*450\*\*\*”**

**“\*\*\*!\*\*\*WARNING\*\*\*Improper tire pressure or overloading the Rhino may cause severe injury or death from loss of control or rollover.\*\*\*OPERATING TIRE PRESSURE: Set with tires cold.\*\*\*RECOMMENDED:\*\*\* FRONT: 70kPa, (.70kgf/cm2), 10psi\*\*\*REAR: 98kPa, (.98kgf/cm2), 14psi\*\*\*MINIMUM:\*\*\*FRONT: 63kPa,(.63kgf/cm2), 9psi\*\*\*REAR: 91kPa (.91kgf/cm2), 13psi\*\*\*Never set or allow tire pressure to be below the minimum. Tire may dislodge from rim.\*\*\*Gross Vehicle Weight Rating: 907 kg (2000 lb) maximum including vehicle, weight of operator, passenger, accessories, cargo, and (if applicable) trailer tongue weight.\*\*\*YAMAHA\*\*\*”**

**“\*\*\*Head to Toe Safety Checklist\*\*\*Head Helmet and eye protection.\*\*\*Body Seatbelt and protective clothing\*\*\*Hands Inside vehicle and holding the handholds or steering wheel.\*\*\*Feet On floorboard, ready to brace, and door closed.\*\*\*YAMAHA\*\*\*”**

**“\*\*\*Abrupt maneuvers or aggressive driving have caused rollovers-even on flat, open areas.\*\*\*Genuine Yamaha Doors and a Handhold / Strap are available for free installation or replacement.\*\*\*Yamaha\*\*\*Genuine Yamaha Doors and a Handhold / Strap are available for free installation or replacement. Yamaha recommends these features to help keep occupants from sticking arms or legs out of the vehicle during a rollover.\*\*\*Contact your dealer or visit [www.yamaha-motor.com/rhino](http://www.yamaha-motor.com/rhino)\*\*\*Avoid Rollovers and Crushing Injuries\*\*\*Use care when turning:\*\*\*Turning the steering wheel too far or too fast can result in a rollover or loss of control.\*\*\*Slow down before entering a turn.\*\*\*When making tight turns from a stop or at slow speeds, avoid sudden or hard acceleration.\*\*\*Avoid sideways**

sliding, skidding, or fishtailing, and never do donuts.\*\*\*Drive straight up and down inclines, not across them. If crossing a hill is unavoidable drive slowly and turn downhill immediately if you feel the vehicle may tip.\*\*\*Avoid paved surfaces. Turn gradually and go slowly if you must drive on pavement. This vehicle is designed for off-road use only.\*\*\*If you think or feel the Rhino may tip or roll:\*\*\*Brace yourself by pressing your feet firmly on the floorboards and keep a firm grip on the steering wheel or handholds.\*\*\*Do not put your hands or feet outside of the vehicle for any reason.\*\*\*DRIVER UNDER 16\*\*\* Be Prepared\*\*\*Wear seat belt, motorcycle helmet, eye protection and protective gear.\*\*\*Keep your body completely inside the vehicle at all times. Keep both hands on the steering wheel. Be sure passenger is seated, belted, and holding onto the handholds. Be Qualified and Responsible\*\*\*This vehicle is intended for use only by an operator 16 or older with a valid motor vehicle license.\*\*\*Passenger and driver must be able to place both feet flat on the floorboard while seated upright with their backs against the seat backs.\*\*\*Do not drive or ride as passenger after using drugs or alcohol.\*\*\*Do not operate on public roads.\*\*\*Read the Owner's Manual.\*\*\*"

“\*\*\*!\*\*\*WARNING\*\*\*Do not rest hands on door or hip restraint bar. To avoid injury, keep hands completely”

“\*\*\*!\*\*\*WARNING\*\*\*Improperly loading a trailer or pulling an object can affect handling, stability, and risk of overturn or other accidents.\*\*\*Secure load to prevent it from shifting.\*\*\*Never load more than 50 kg (110 lb) tongue weight on the towing bracket.\*\*\*Do not tow more than 550 kg (1212 lb) rolling weight (trailer plus cargo).\*\*\*Tow or pull only from hitch bracket.\*\*\*Read Owner's Manual before loading, towing\*\*\*pulling objects.\*\*\*YAMAHA\*\*\*”

“\*\*\*YAMAHA\*\*\*MAX 7.3 INCH\*\*\*(185MM)\*\*\*”

“\*\*\*5Y4AJ32Y89A006682\*\*\*”

“\*\*\*WARNING\*\*\*Any part of your body (arms, legs or head) outside of the vehicle can be crushed by the cage/frame\*\*\*If you think or feel that the vehicle may tip or roll, brace your feet on the floorboards, and keep your hands on the handholds.\*\*\*Do not try to stop a vehicle tipover using your arm or leg.\*\*\*”

“\*\*\*!\*\*\*WARNING\*\*\*Improper use of cargo bed or cage/frame can result in severe injury or death from loss of control, overturn or other accidents.\*\*\*Do not carry passengers in cargo bed.\*\*\*Maximum load in cargo bed: 181 kg (400 lb).\*\*\*Load or trailer may affect handling and stability:\*\*\*Secure cargo so that it will not shift – a loose load could change handling unexpectedly or be thrown forward and strike occupants.\*\*\*Keep weight in the cargo bed centered side to side and low and as far forward as possible. Top-heavy loads increase the risk of overturn.\*\*\*Do not tow or pull objects from any point other than the trailer hitch

**bracket or winch (if installed).\*\*\*When loaded with cargo or towing a trailer:  
\*\*\*Reduce speed and allow more room to stop.\*\*\*Turn gradually and go  
slowly.\*\*\*Avoid hills and rough terrain.\*\*\*Read Owner's Manual before loading,  
towing or pulling objects.\*\*\*YAMAHA\*\*\*"**

**\*\*\*\*MAXXIS\*\*\*WARNING: SEE VEHICLE LABEL OR OWNER'S MANUAL  
FOR OPERATING PRESSURE\*\*\*DO NOT INFLATE BEYOND 250 kPa  
(2.5Kg/cm<sup>2</sup>, 36 PSI) WHEN SEATING BEAD\*\*\*25X8.00-12NHS\*\*\*2 PLY  
RATING\*\*\*"**

**\*\*\*\*DATE:07-21-08 Shift 1<sup>st</sup>\*\*\*\*"**

**\*\*\*\*MAXXIS\*\*\*25X10.00-12NHS\*\*\*WARNING\*\*\*SEE VEHICLE LABEL OR  
OWNER'S MANUAL FOR OPERATING PRESSURE\*\*\*DO NOT INFLATE  
BEYOND 250kPa\*\*\*WHEN SEATING BEAD\*\*\*"**

### **ATTACHMENTS**

Exhibit 1: Photographs 1.1-1.78

Exhibit 2: Identification of Parties

Exhibit 3: Missing Document Form

Exhibit 4: Retailer information downloaded from Retailer's Internet web-site

Exhibit 5: Product Information downloaded from Retailer's Internet web-site



**Exhibit 1.1: Back View of Incident UTV**  
**IDI # 090608CNE4481**



**Exhibit 1.2: Passenger Side View of Incident UTV  
IDI #090608CNE4481**



**Exhibit 1.3: Front View of Incident UTV  
IDI #090608CNE4481**

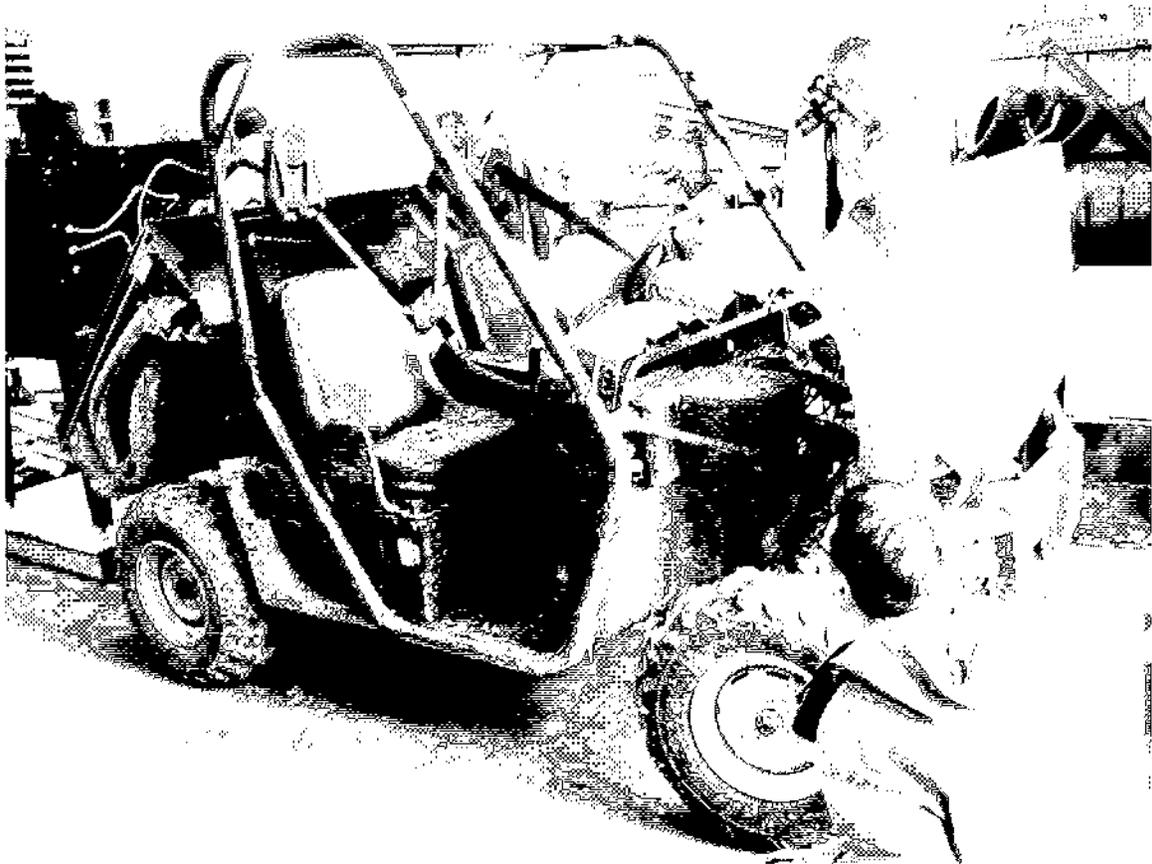
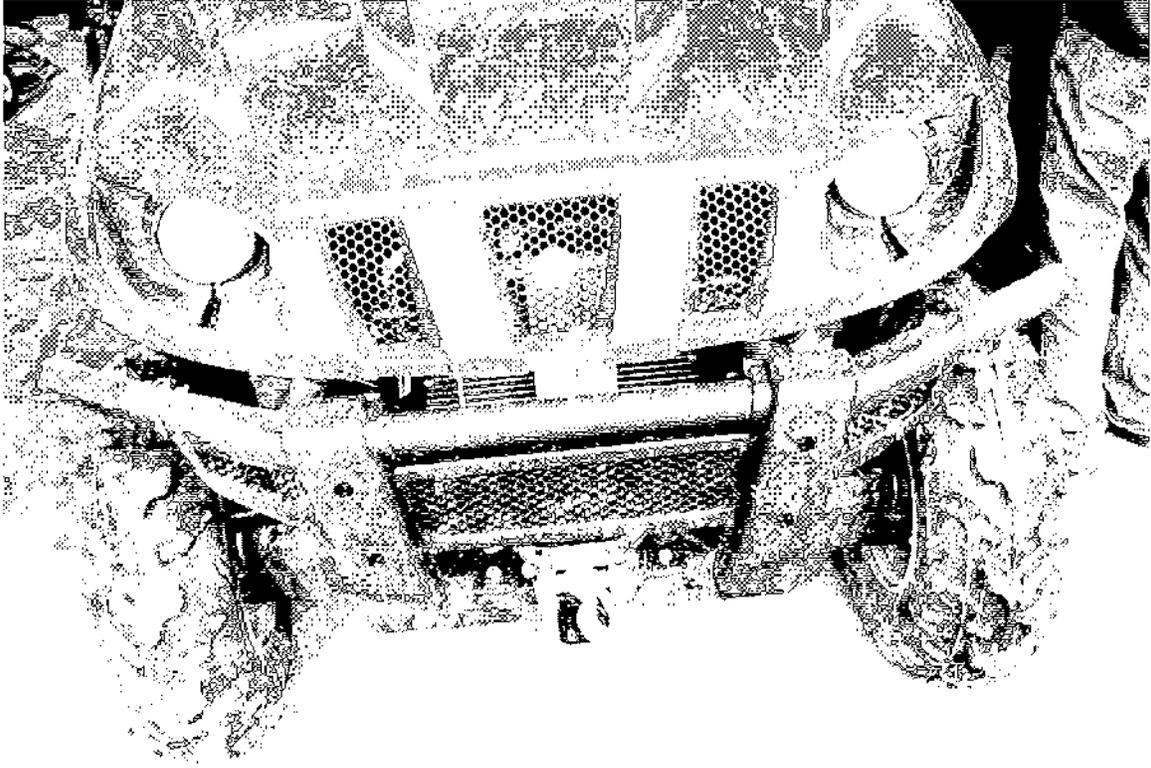


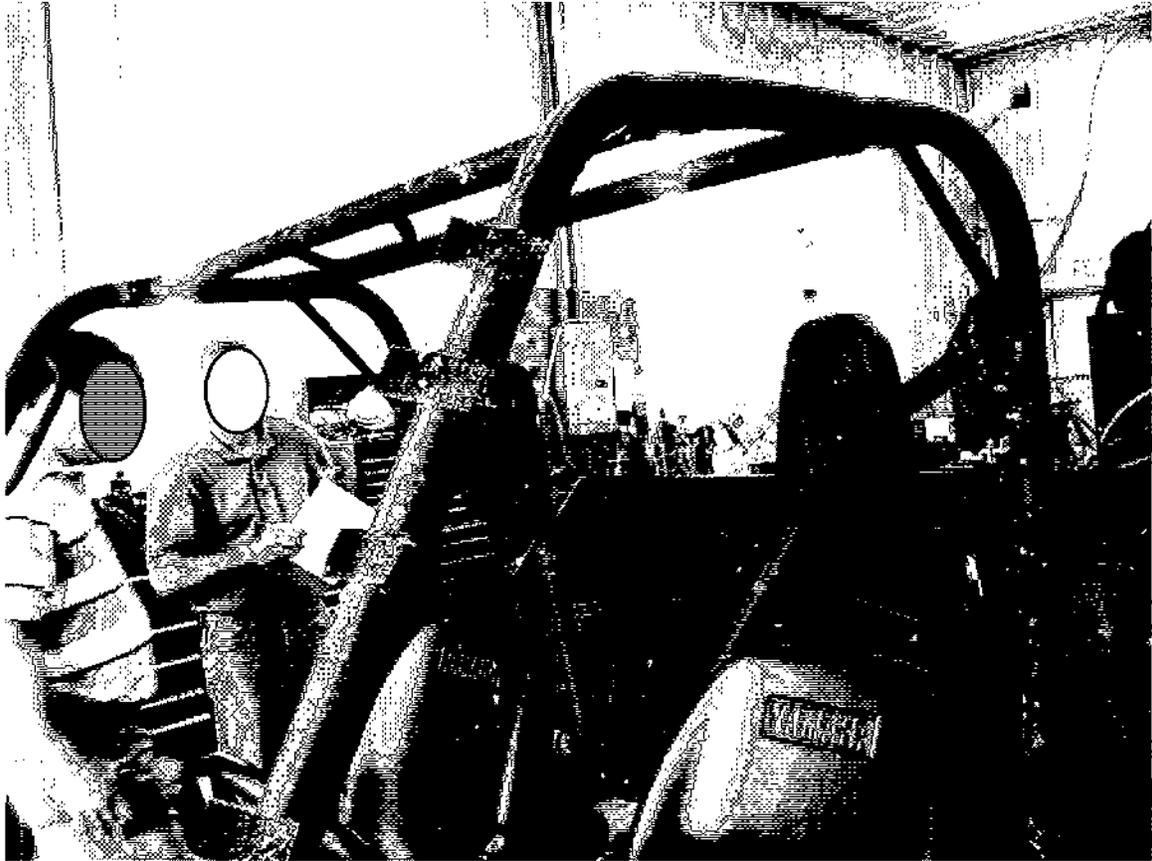
Exhibit 1.4: Passenger Side View of UTV with engine cover open / back bed tilted  
IDI #090608CNE4481



**Exhibit 1.5: Driver side View of Incident UTV  
IDI #090608CNE4481**



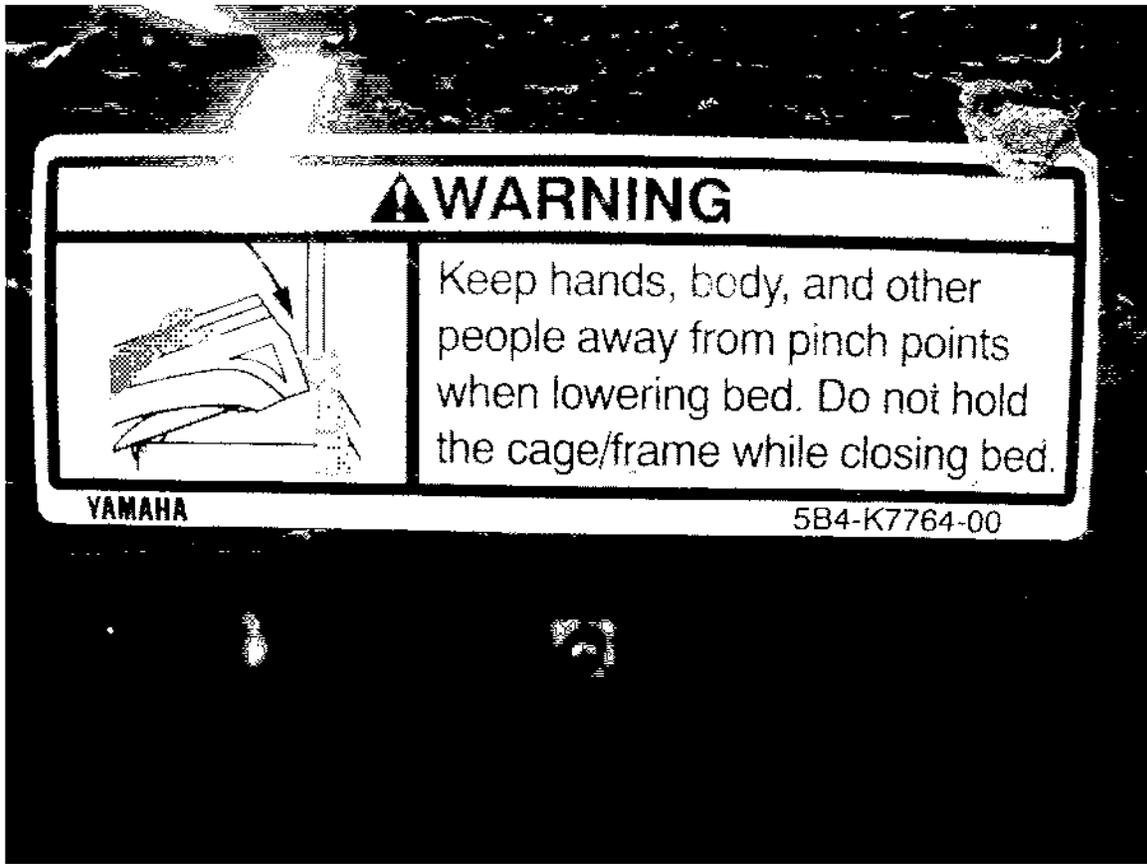
**Exhibit 1.6: Close-Up of Front of Incident UTV  
IDI # 090608CNE4481**



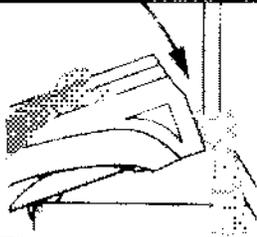
**Exhibit 1.7: Close Up of Roll-Bar portion of Incident UTV  
IDI # 090608CNE4481**



**Exhibit 1.8: Labeling on Incident UTV  
IDI # 090608CNE4481  
Labeling reads in part, "\*\*\*\*YAMAHA\*\*\*\*"**



**⚠ WARNING**



Keep hands, body, and other people away from pinch points when lowering bed. Do not hold the cage/frame while closing bed.

**YAMAHA**

5B4-K7764-00

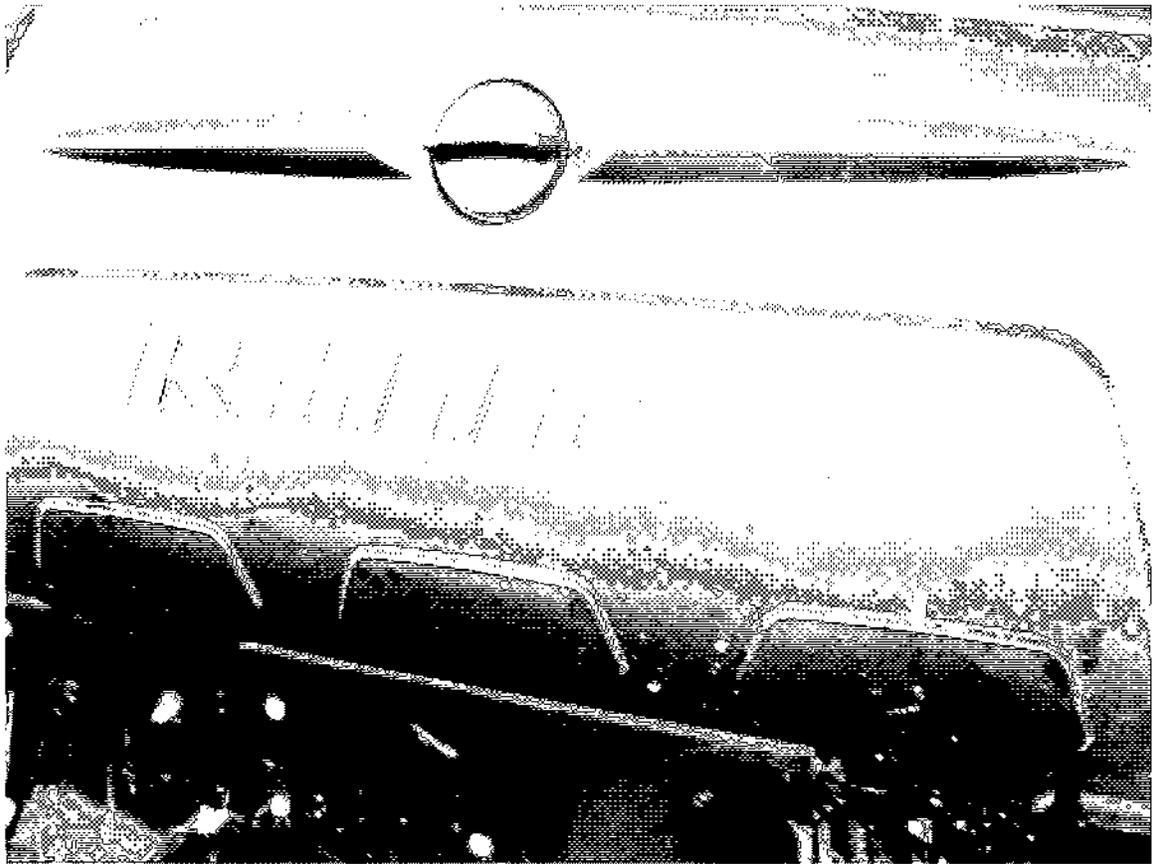
**Exhibit 1.9: Labeling on Rear portion of Incident UTV**

**IDI # 090608CNE4481**

**Labeling reads in part, “\*\*\*!\*\*\*WARNING\*\*\*Keep hands, body, and other people away from pinch points when lowering bed. Do not hold the cage/frame while closing bed.\*\*\*YAMAHA\*\*\*”**



**Exhibit 1.10: Labeling on Incident UTV**  
**IDI # 090608CNE4481**  
**Labeling reads in part, "\*\*\*\*DIFF-LOCK\*\*\*\*4 X 4\*\*\*\*"**  
**(Due to mud, remainder of labeling is not legible)**



**Exhibit 1.11: Labeling on front console portion of Incident UTV  
IDI # 090608CNE4481  
Labeling reads in part, "\*\*\*\*RHINO\*\*\*\*"**



**Exhibit 1.12: Labeling on front hood portion of Incident UTV**

**IDI # 090608CNE4481**

**Labeling reads in part, "\*\*\*\*RHINO\*\*\*INDEPENDENT SUSPENSION\*\*\*450\*\*\*\*"**

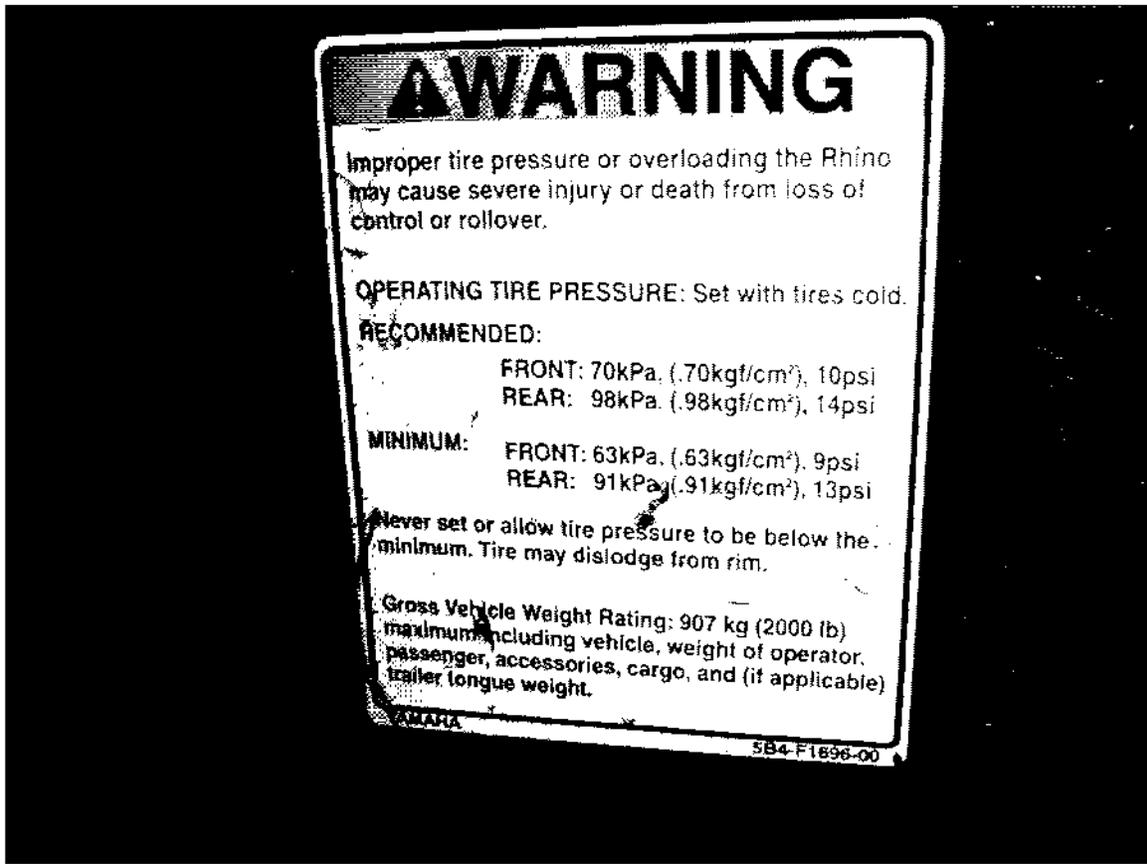
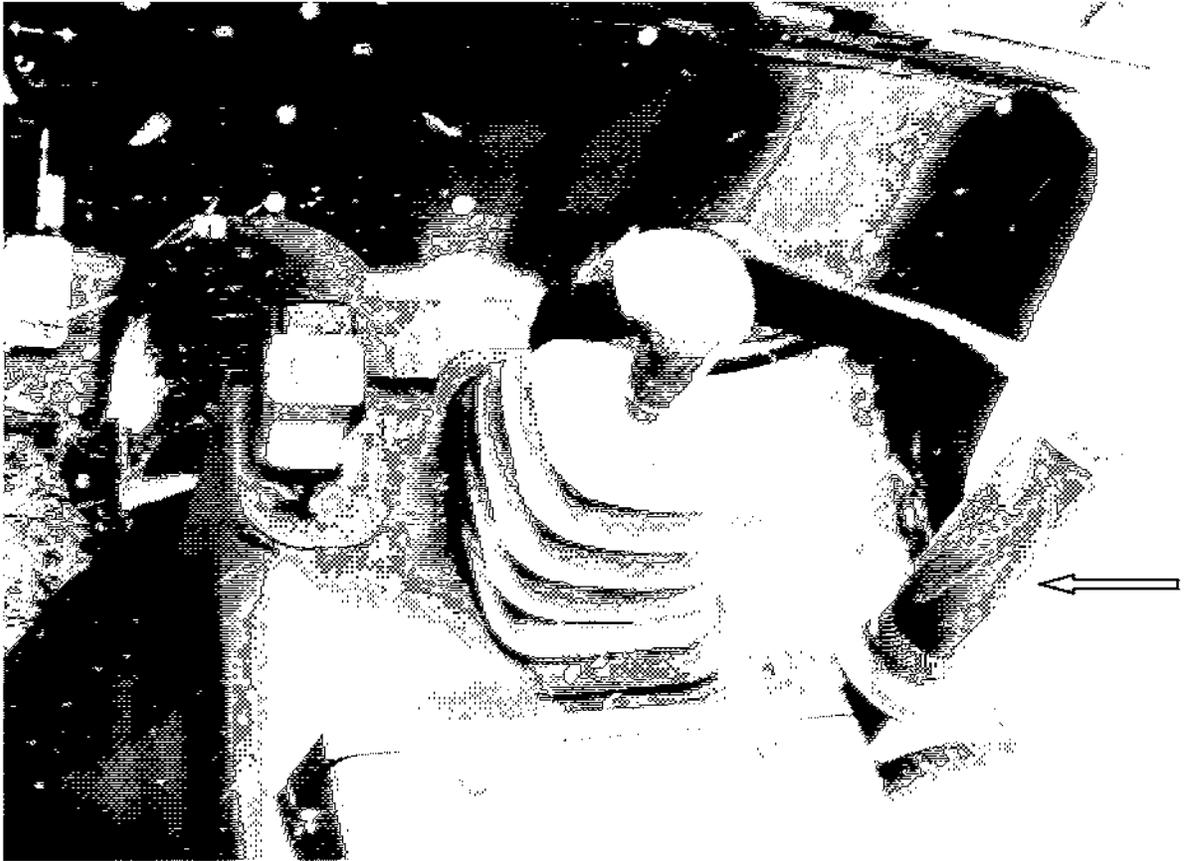
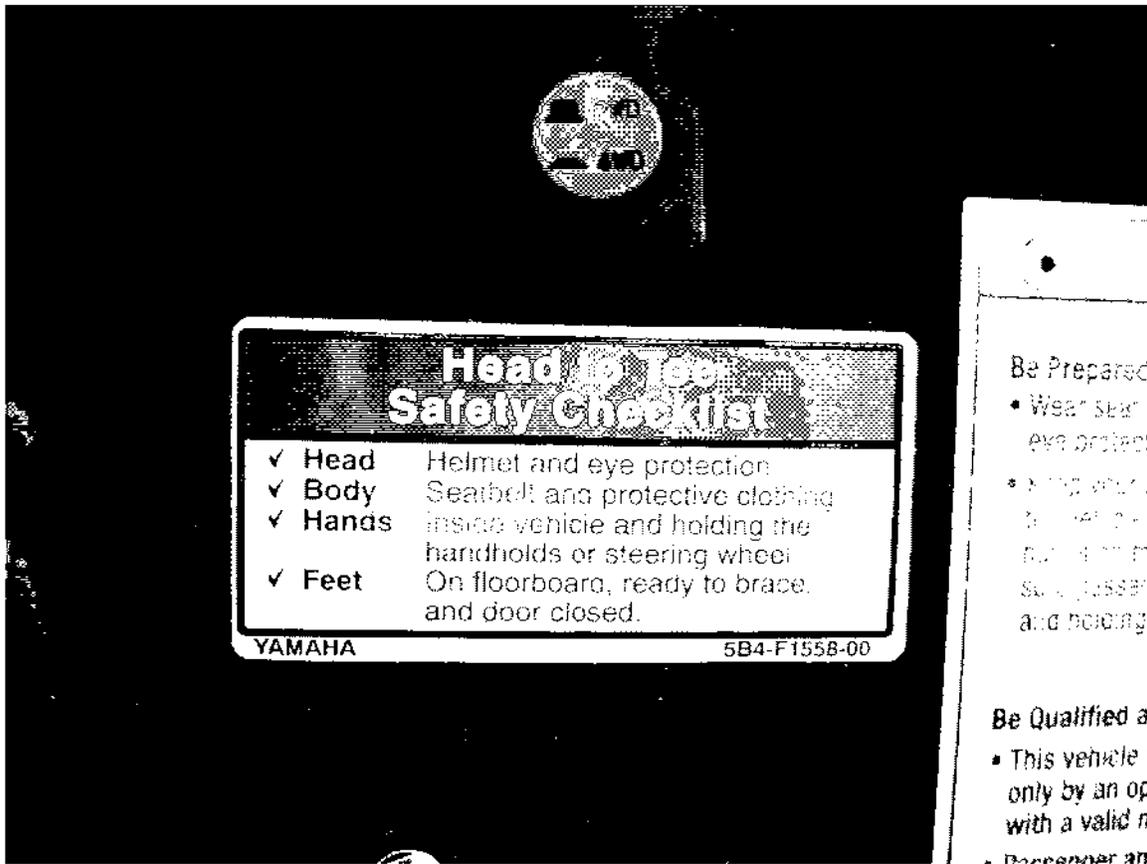


Exhibit 1.13: Warning Label affixed to Incident UTV  
IDI # 090608CNE4481

Label reads in part, "\*\*\*\*\*WARNING\*\*\*Improper tire pressure or overloading the Rhino may cause severe injury or death from loss of control or rollover.\*\*\*OPERATING TIRE PRESSURE: Set with tires cold.\*\*\*RECOMMENDED:\*\*\* FRONT: 70kPa, (.70kgf/cm<sup>2</sup>), 10psi\*\*\*REAR: 98kPa, (.98kgf/cm<sup>2</sup>), 14psi\*\*\*MINIMUM:\*\*\*FRONT: 63kPa,(.63kgf/cm<sup>2</sup>), 9psi\*\*\*REAR: 91kPa (.91kgf/cm<sup>2</sup>), 13psi\*\*\*Never set or allow tire pressure to be below the minimum. Tire may dislodge from rim.\*\*\*Gross Vehicle Weight Rating: 907 kg (2000 lb) maximum including vehicle, weight of operator, passenger, accessories, cargo, and (if applicable) trailer tongue weight.\*\*\*YAMAHA\*\*\*"



**Exhibit 1.14: View of Stick Shift and passenger hand-hold (red arrow) in Incident UTV  
IDI # 090608CNE4481**



**Head to Toe Safety Checklist**

- ✓ **Head**    Helmet and eye protection
- ✓ **Body**    Seatbelt and protective clothing
- ✓ **Hands**    Inside vehicle and holding the handholds or steering wheel
- ✓ **Feet**    On floorboard, ready to brace, and door closed.

YAMAHA 5B4-F1558-00

**Be Prepared**

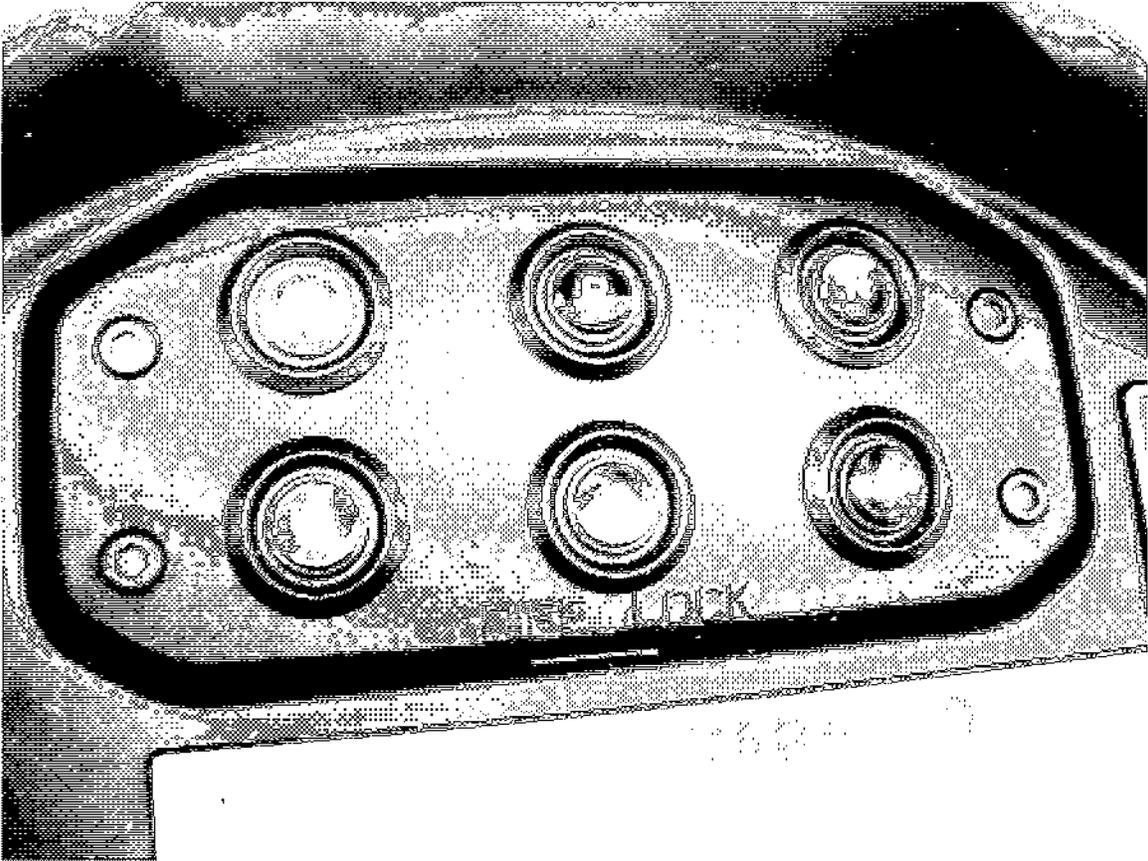
- Wear seat belt, eye protection
- Make sure you are properly seated, buckled in, and holding

**Be Qualified at**

- This vehicle is only to be operated by an operator with a valid driver's license

Exhibit 1.15: Labeling on incident UTV adjacent to 2WD/4WD select button  
 IDI # 090608CNE4481

Labeling reads in part, “\*\*\*Head to Toe Safety Checklist\*\*\*Head Helmet and eye protection.\*\*\*Body Seatbelt and protective clothing\*\*\*Hands Inside vehicle and holding the handholds or steering wheel.\*\*\*Feet On floorboard, ready to brace, and door closed.\*\*\*YAMAHA\*\*\*”



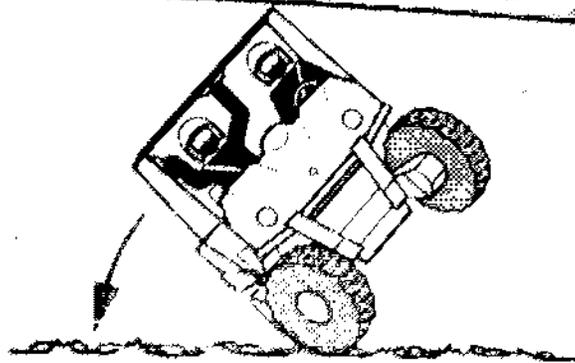
**Exhibit 1.16: View of Control Buttons on Console of Incident UTV  
IDI # 090608CNE4481**

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top or at slow  
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or fishtailing,

t across  
drive slowly  
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and go  
This vehicle



**Abrupt maneuvers or aggressive driving have caused rollovers - even on flat, open areas.**

**Genuine Yamaha Doors and a Handhold/Strap are available for free installation or replacement. Yamaha**

Exhibit 1.17: View of labeling on Incident UTV  
IDI # 090608CNE4481

Labeling reads in part, "\*\*\*\*Abrupt maneuvers or aggressive driving have caused rollovers-even on flat, open areas.\*\*\*Genuine Yamaha Doors and a Handhold / Strap are available for free installation or replacement.\*\*\*Yamaha\*\*\*\*"

es, not across  
dable, drive slowly  
you feel the

lually and go  
nent. This vehicle

tip or roll:  
feet firmly on the  
on the steering

itside of the

caused rollovers - even on  
flat, open areas.

Genuine Yamaha Doors and  
a Handhold/Strap are  
available for free installation  
or replacement. Yamaha  
recommends these features to  
help keep occupants from  
sticking arms or legs out of the  
vehicle during a rollover.

Contact your dealer or visit  
[www.yamaha-motor.com/rhino](http://www.yamaha-motor.com/rhino)



5B4-F1568-01

Exhibit 1.18: Labeling affixed to Incident UTV  
IDI # 090608CNE4481

Label reads in part, "\*\*\*\*Genuine Yamaha Doors and a Handhold / Strap are available for free installation or replacement. Yamaha recommends these features to help keep occupants from sticking arms or legs out of the vehicle during a rollover.\*\*\*Contact your dealer or visit [www.yamaha-motor.com/rhino](http://www.yamaha-motor.com/rhino)\*\*\*\*"

**Avoid RISK of accidents and injury or death:**

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**Avoid Rollovers and Crushing Injuries**

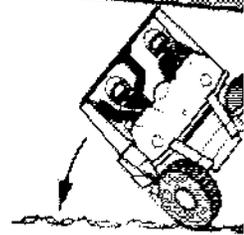
- Use care when turning:
  - Turning the steering wheel too far or too fast can result in a rollover or loss of control.
  - Slow down before entering a turn.
  - When making tight turns from a stop or at slow speeds, avoid sudden or hard acceleration.
  - Avoid sideways sliding, skidding, or fishtailing, and never do donuts.

- Drive straight up and down inclines, not across them. If crossing a hill is unavoidable, drive slowly and turn downhill immediately if you feel the vehicle may tip.

- Avoid paved surfaces. Turn gradually and go slowly if you must drive on pavement. This vehicle is designed for off-road use only.

**If you think or feel the Rhino may tip or roll:**

- Brace yourself by pressing your feet firmly on the floorboards and keep a firm grip on the steering wheel or handholds.
- Do not put your hands or feet outside of the vehicle for any reason.



Abrupt maneuvers or aggressive driving has caused rollovers - on flat, open areas.

Genuine Yamaha Use a Handhold/Strap as available for free inspection or replacement. Yamaha recommends these help keep occupants sticking arms or legs vehicle during a rollover.

Contact your dealer or visit [www.yamaha-motor.com/rhino](http://www.yamaha-motor.com/rhino)

204-7150-47

**Exhibit 1.19: Labeling on Incident UTV  
IDI # 090608CNE4481**

Label reads in part, “\*\*\*Avoid Rollovers and Crushing Injuries\*\*\*Use care when turning:\*\*\*Turning the steering wheel too far or too fast can result in a rollover or loss of control.\*\*\*Slow down before entering a turn.\*\*\*When making tight turns from a stop or at slow speeds, avoid sudden or hard acceleration.\*\*\*Avoid sideways sliding, skidding, or fishtailing, and never do donuts.\*\*\*Drive straight up and down inclines, not across them. If crossing a hill is unavoidable drive slowly and turn downhill immediately if you feel the vehicle may tip.\*\*\*Avoid paved surfaces. Turn gradually and go slowly if you must drive on pavement. This vehicle is designed for off-road use only.\*\*\*If you think or feel the Rhino may tip or roll:\*\*\*Brace yourself by pressing your feet firmly on the floorboards and keep a firm grip on the steering wheel or handholds.\*\*\*Do not put your hands or feet outside of the vehicle for any reason.\*\*\*DRIVER UNDER 16\*\*\*”

Note: DRIVER UNDER 16 is in a Red-colored Circle with a “slash” through the center.

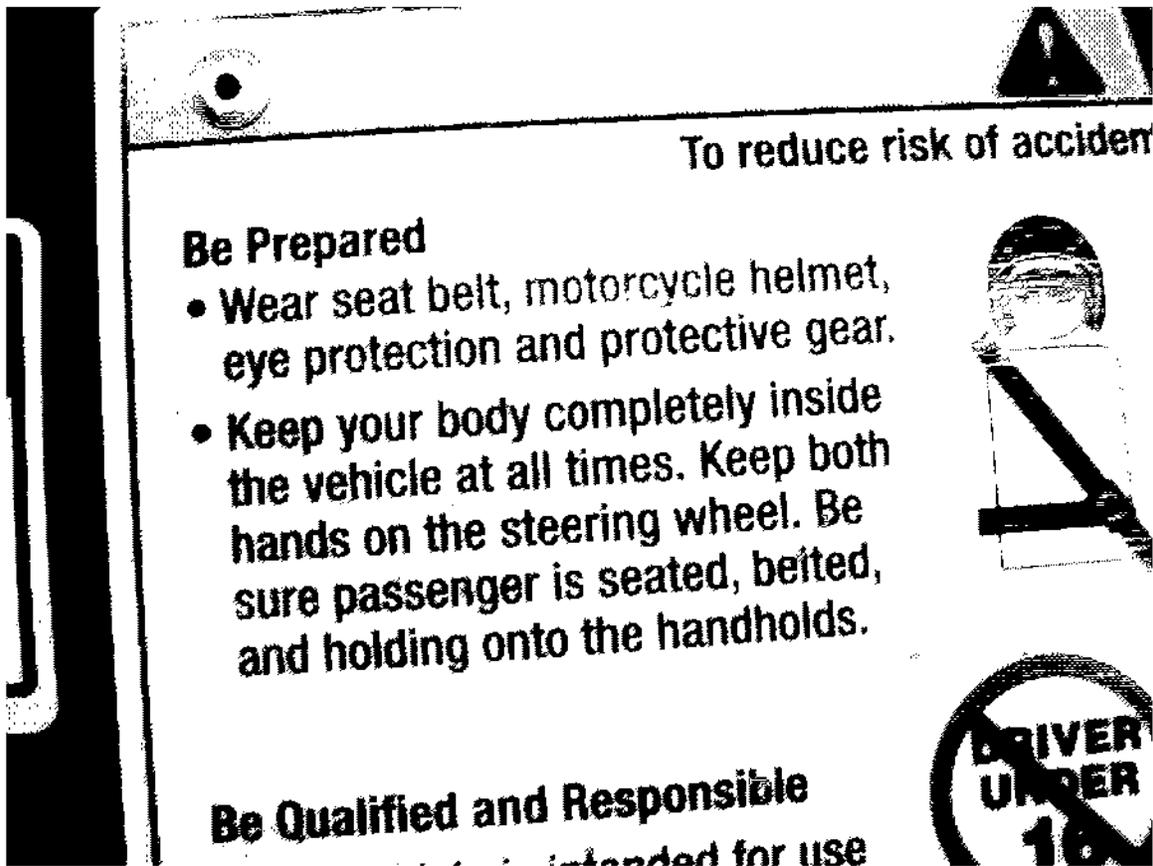


Exhibit 1.20: Labeling on Incident UTV  
IDI # 090608CNE4481

Label reads in part, "\*\*\*\*Be Prepared\*\*\*Wear seat belt, motorcycle helmet, eye protection and protective gear.\*\*\*Keep your body completely inside the vehicle at all times. Keep both hands on the steering wheel. Be sure passenger is seated, belted, and holding onto the handholds.\*\*\*"

and holding onto the handholds.

### Be Qualified and Responsible

- This vehicle is intended for use only by an operator 16 or older with a valid motor vehicle license.
- Passenger and driver must be able to place both feet flat on the floorboard while seated upright with their backs against the seat backs.
- Do not drive or ride as passenger after using drugs or alcohol.
- Do not operate on public roads.



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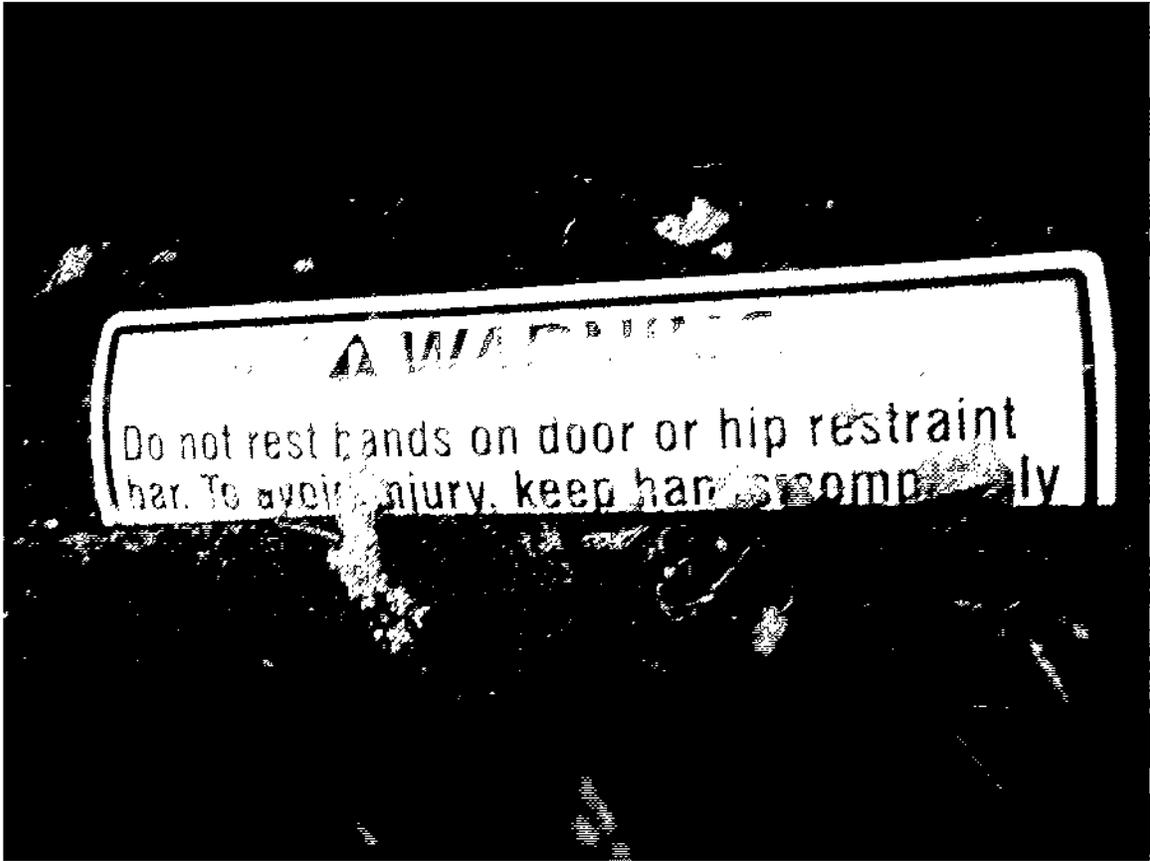


YAMAHA

**Read the Owner's Manual**

Exhibit 1.21: Labeling on Incident UTV  
IDI # 090608CNE4481

Label reads in part, "\*\*\*\*Be Qualified and Responsible\*\*\*This vehicle is intended for use only by an operator 16 or older with a valid motor vehicle license.\*\*\*Passenger and driver must be able to place both feet flat on the floorboard while seated upright with their backs against the seat backs.\*\*\*Do not drive or ride as passenger after using drugs or alcohol.\*\*\*Do not operate on public roads.\*\*\*Read the Owner's Manual.\*\*\*"



**Exhibit 1.22: Labeling on Incident UTV**

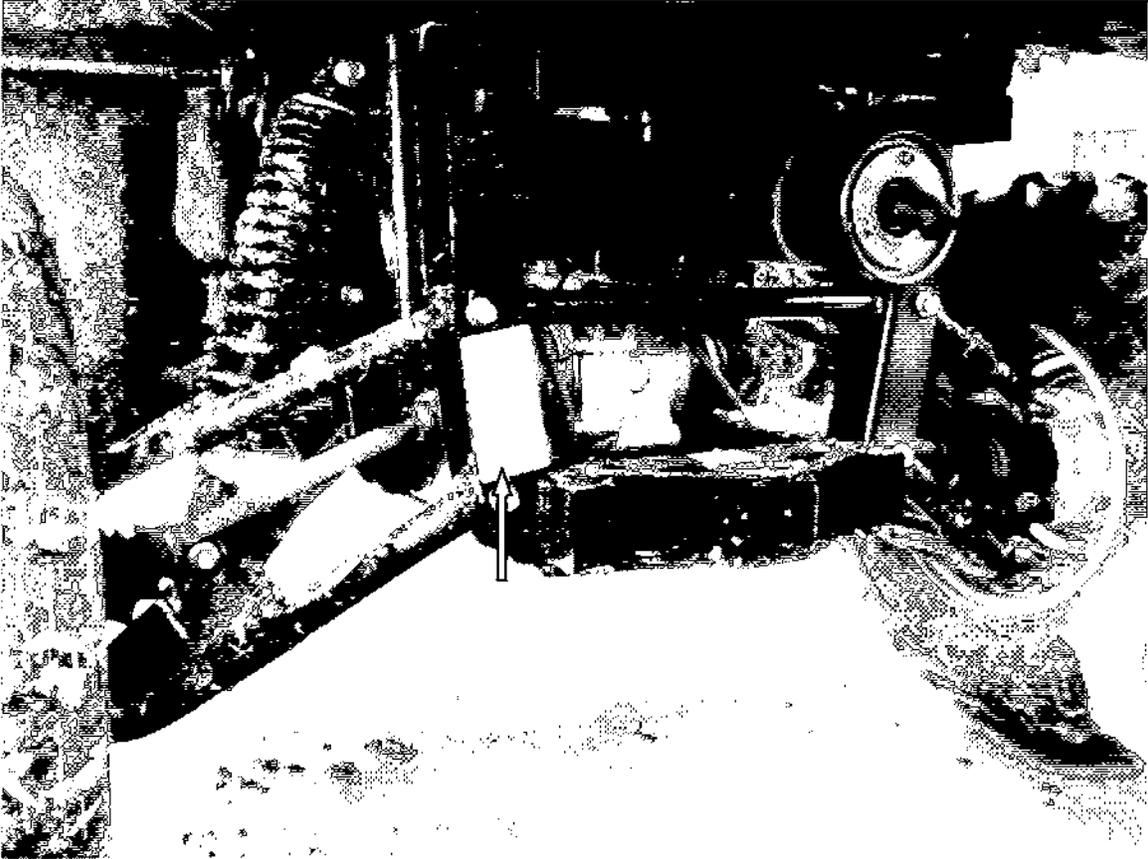
**IDI # 090608CNE4481**

**Label reads in part, "\*\*\*\*!\*\*\*WARNING\*\*\*Do not rest hands on door or hip restraint bar. To avoi\* \*njury, keep han\*s comp\*\*\*\*ly\*\*\*\*"**

**(Portion of label is obscured by mud)**



**Exhibit 1.23: View showing added Spacer on left rear wheel of Incident UTV  
IDI # 090608CNE4481**



**Exhibit 1.24: View of Rear Suspension / Exhaust System on incident UTV  
IDI # 090608CNE4481  
(Content of label identified by red-colored arrow can be seen in Exhibit 1.25)**

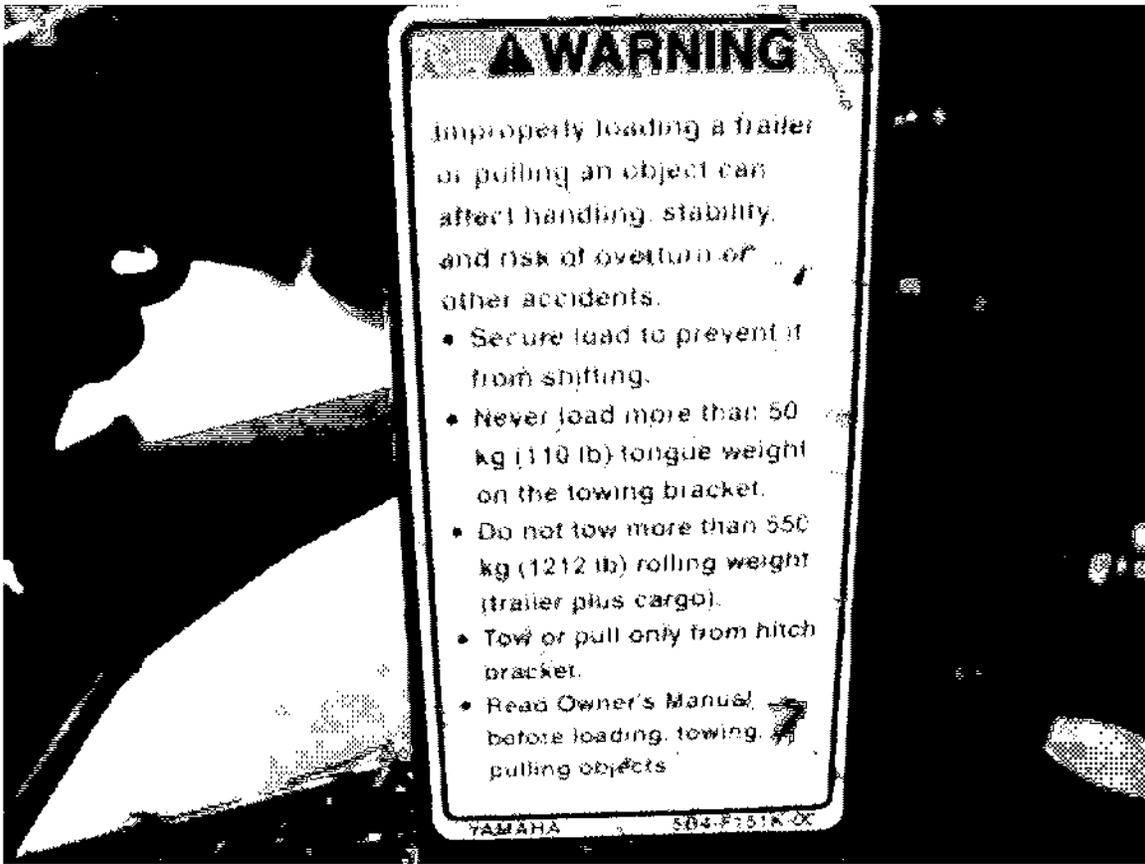


Exhibit 1.25: Label affixed to Incident UTV  
IDI # 090608CNE4481

Label reads in part, "\*\*\*\*!\*\*\*WARNING\*\*\*Improperly loading a trailer or pulling an object can affect handling, stability, and risk of overturn or other accidents.\*\*\*Secure load to prevent it from shifting.\*\*\*Never load more than 50 kg (110 lb) tongue weight on the towing bracket.\*\*\*Do not tow more than 550 kg (1212 lb) rolling weight (trailer plus cargo).\*\*\*Tow or pull only from hitch bracket.\*\*\*Read Owner's Manual before loading, towing\*\*\*pulling objects.\*\*\*YAMAHA\*\*\*\*"

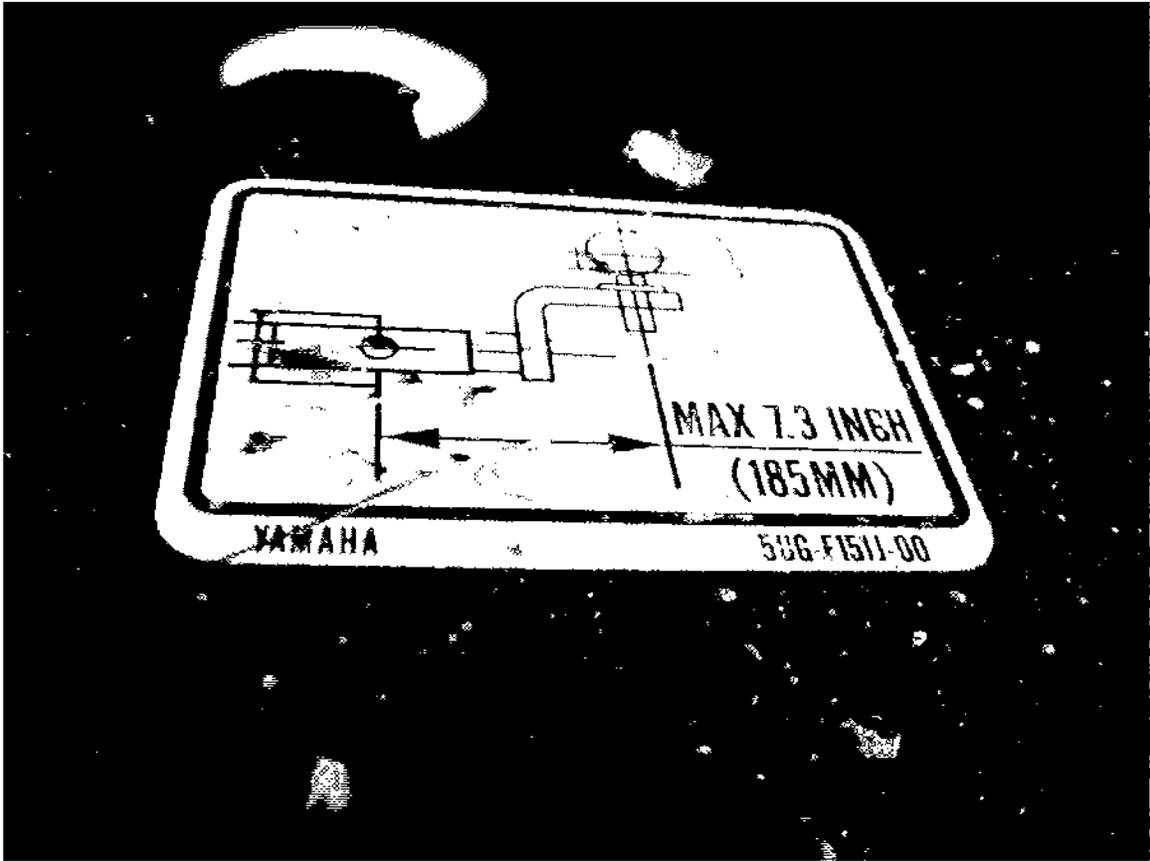
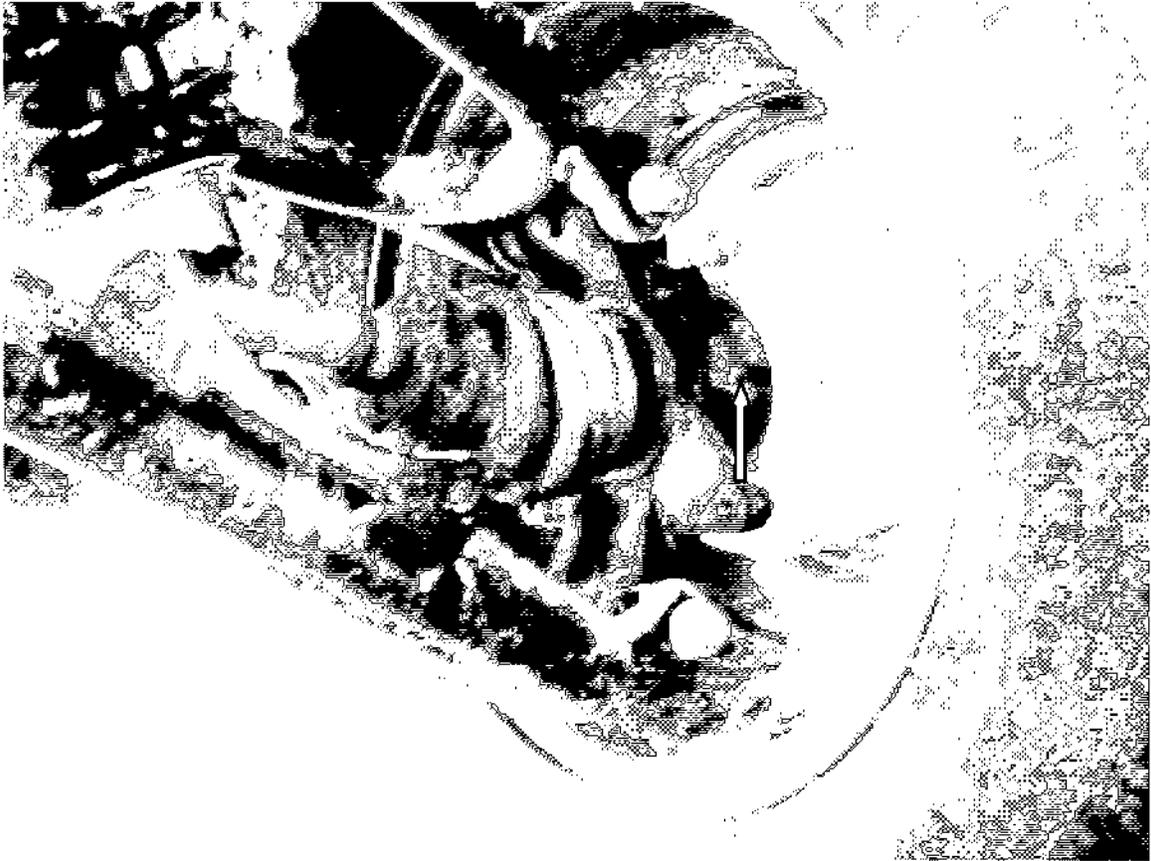


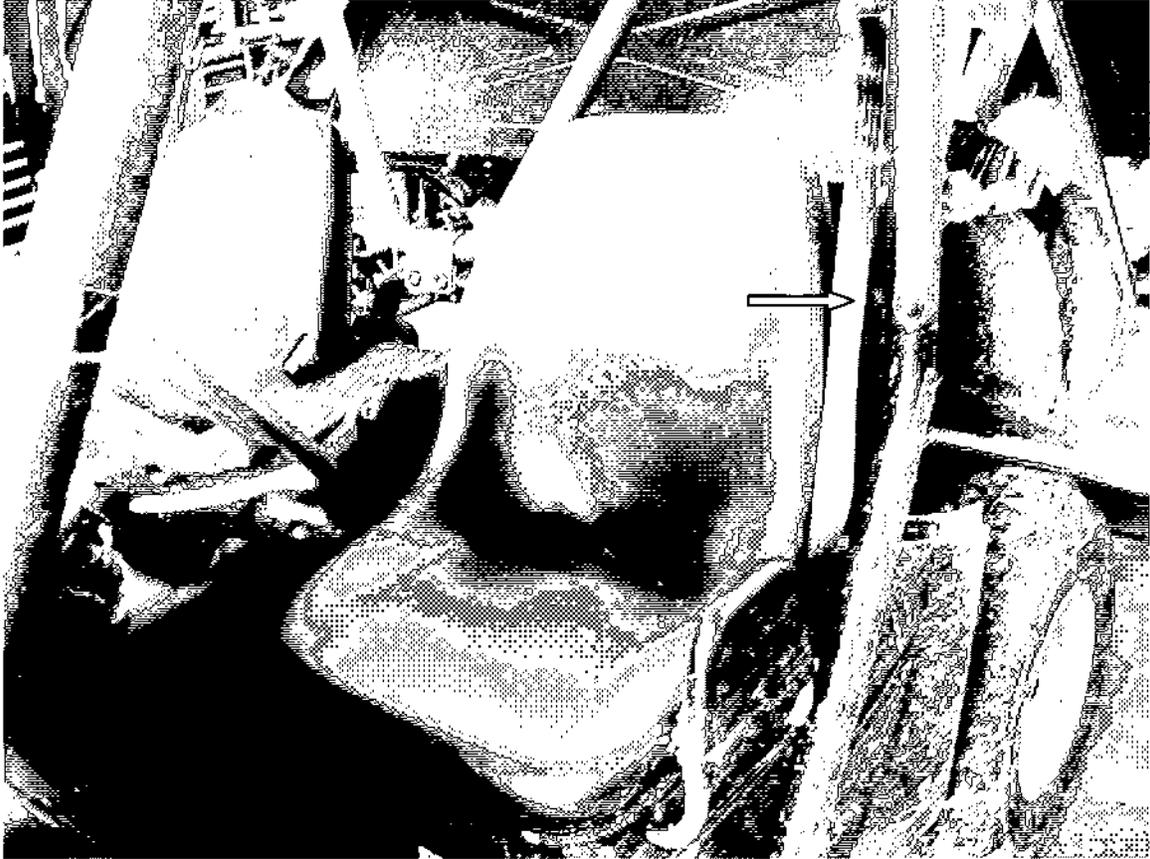
Exhibit 1.26: Label affixed to incident UTV

IDI # 090608CNE4481

Label reads in part, "YAMAHA MAX 7.3 INCH (185MM)"



**Exhibit 1.27: View showing added Spacer on right rear wheel of Incident UTV  
IDI # 090608CNE4481**



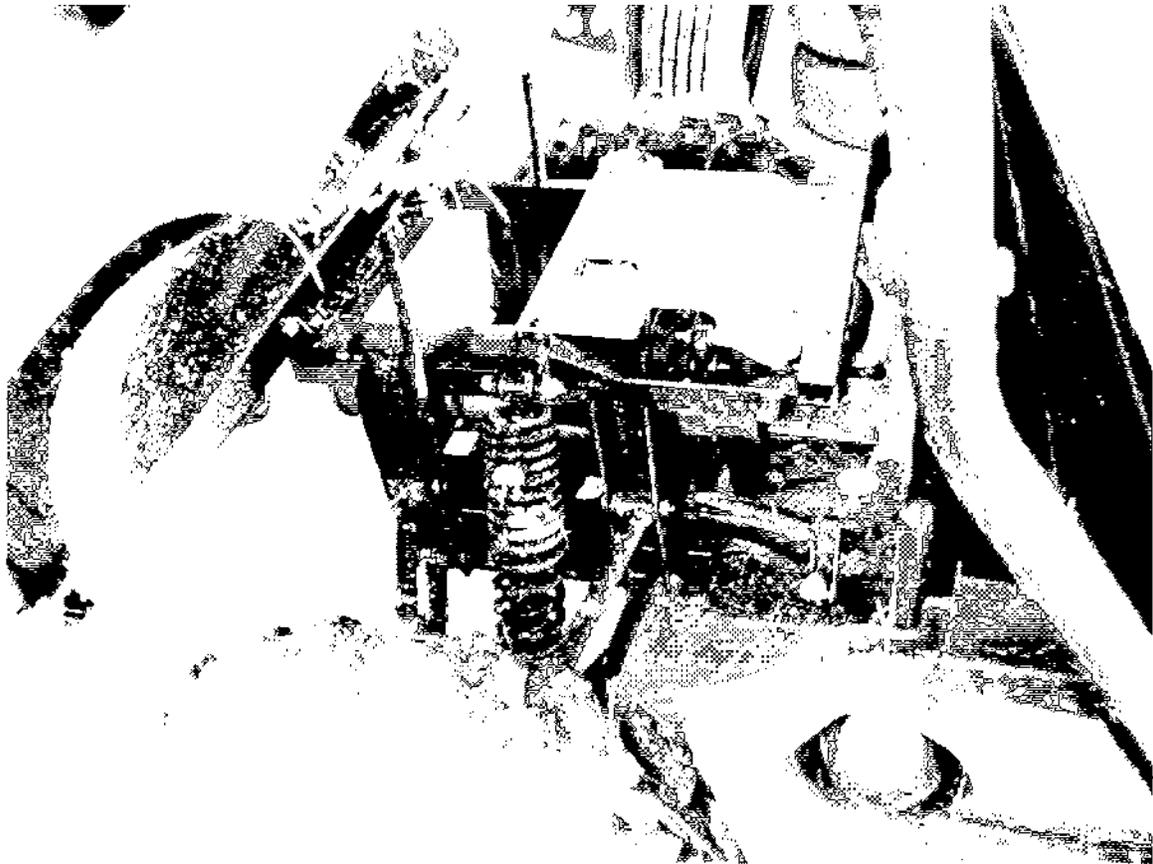
**Exhibit 1.28: Driver's Door on Incident UTV / Restraint Belt  
IDI #090608CNE4481**



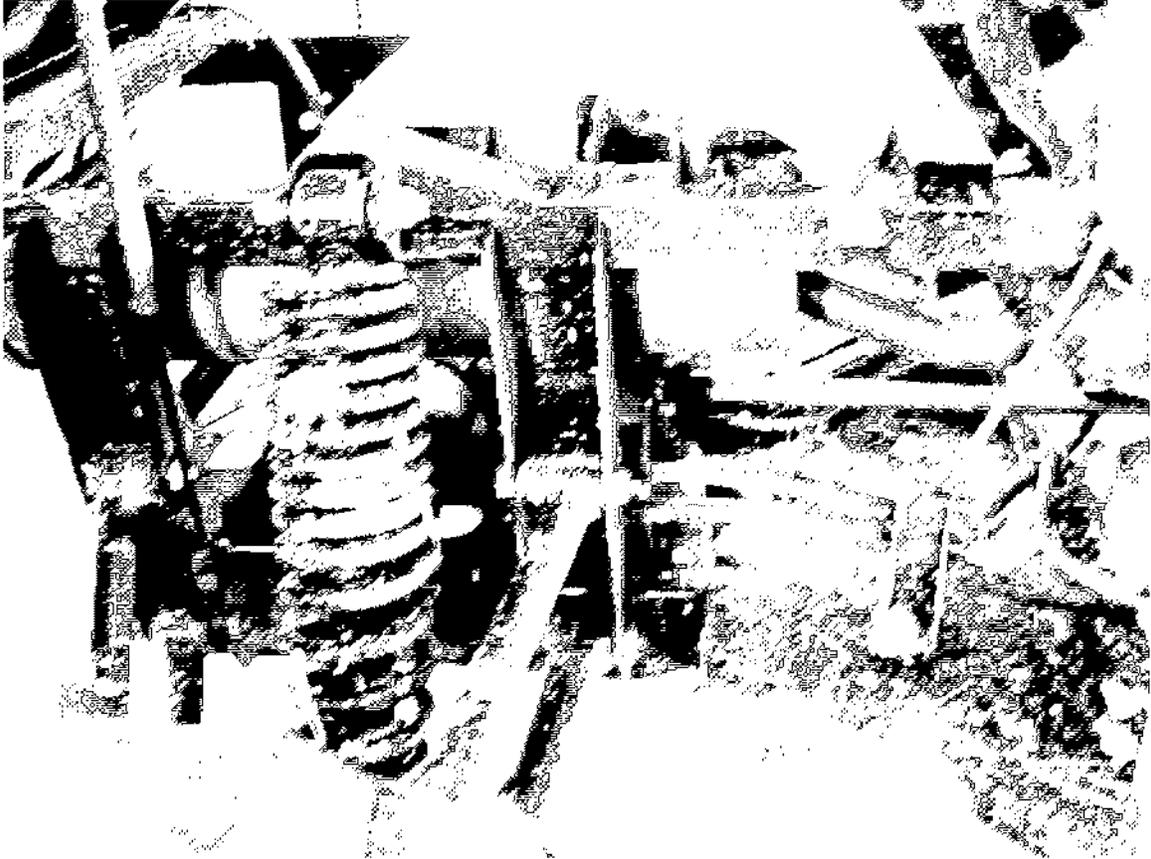
Exhibit 1.29: Serial Number appearing on incident UTV  
IDI #090608CNE4481  
Serial Number reads in full, "\*\*\*\*5Y4AJ32Y89A006682\*\*\*\*"



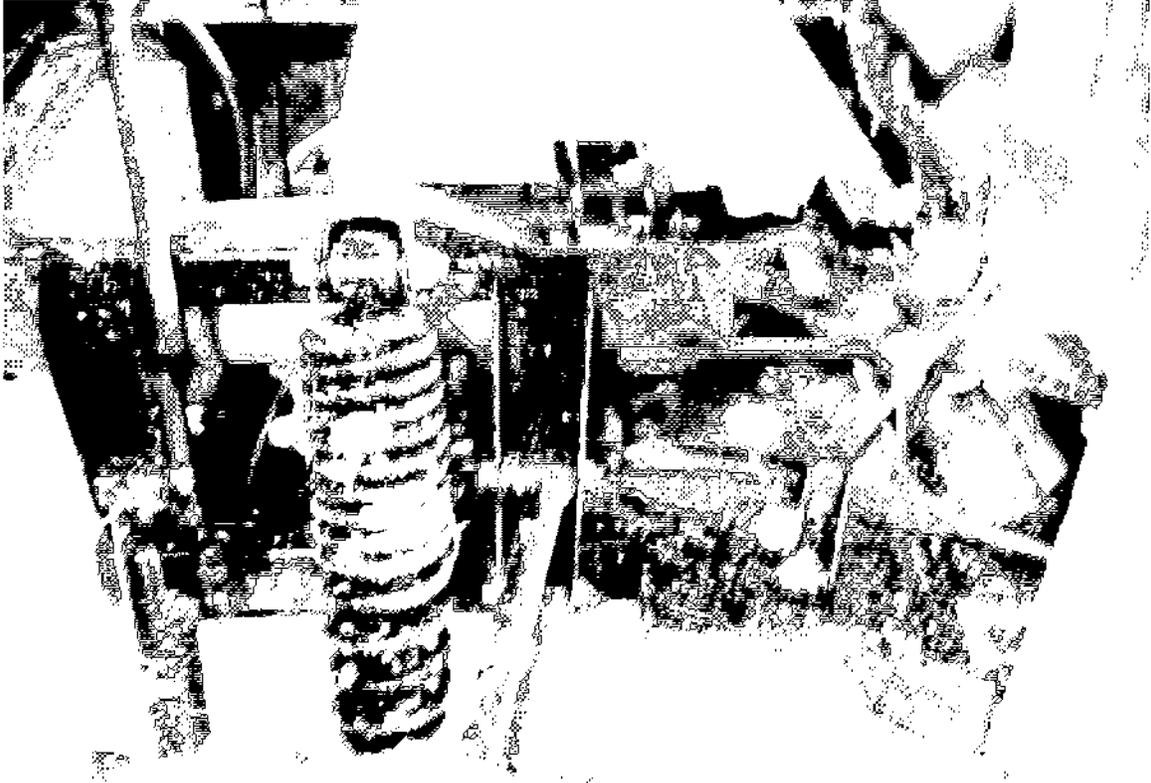
**Exhibit 1.30: View from Left Rear wheel well looking across to opposite side  
IDI #090608CNE4481**



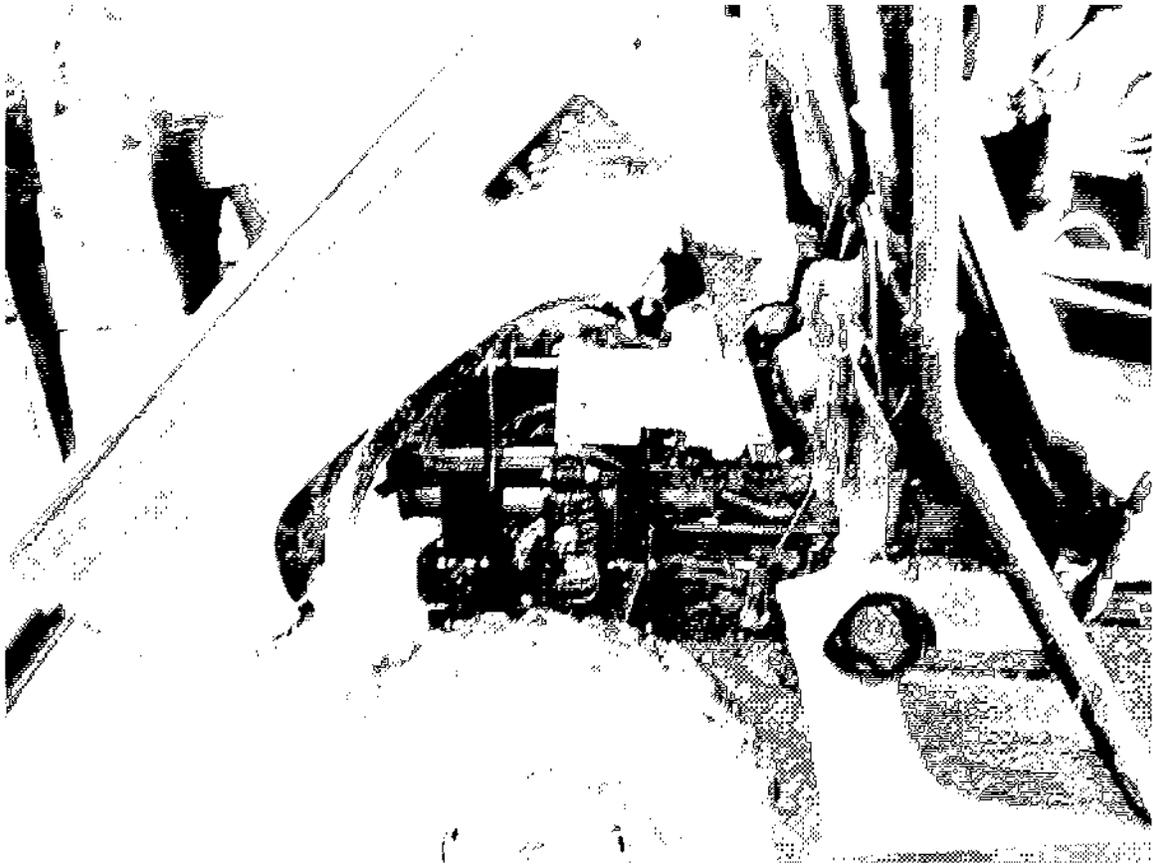
**Exhibit 1.31: View of Rear of Incident UTV with Bed in Raised position  
IDI #090608CNE4481**



**Exhibit 1.32: Close Up View of that seen in Exhibit 1.31  
IDI #090608CNE4481**



**Exhibit 1.33: Another Close Up View similar to Exhibits 1.31 & 1.32  
IDI #090608CNE4481**



**Exhibit 1.34: Rear Portion of Incident UTV with bed in raised position  
IDI #090608CNE4481**



**Exhibit 1.35: View of Passenger Hand-Hold on Incident UTV  
IDI #090608CNE4481**



Exhibit 1.36: Label affixed to Incident UTV  
IDI #090608CNE4481

Label reads in part, “\*\*\*WARNING\*\*\* Any part of your body (arms, legs or head) outside of the vehicle can be crushed by the cage/frame\*\*\*”

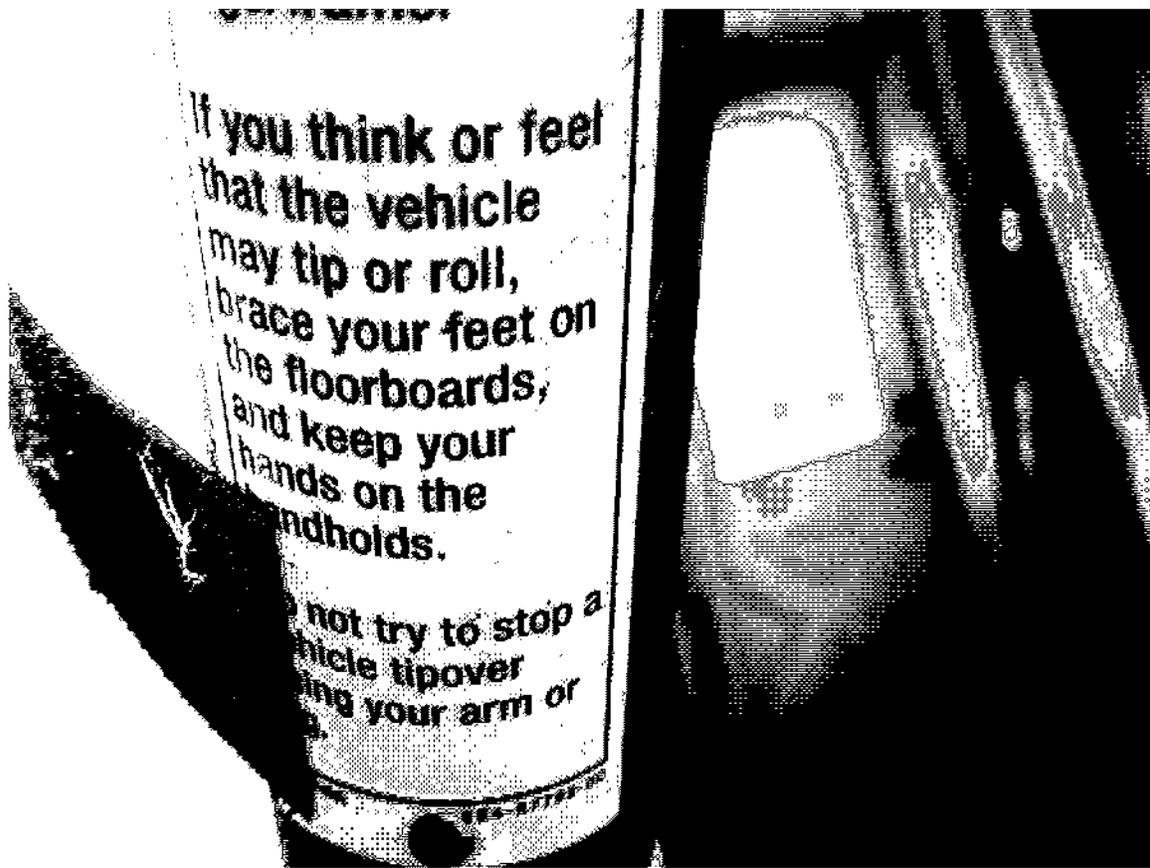


Exhibit 1.37: Continuation of label seen in Exhibit 1.36 affixed to incident UTV

IDI #090608CNE4481

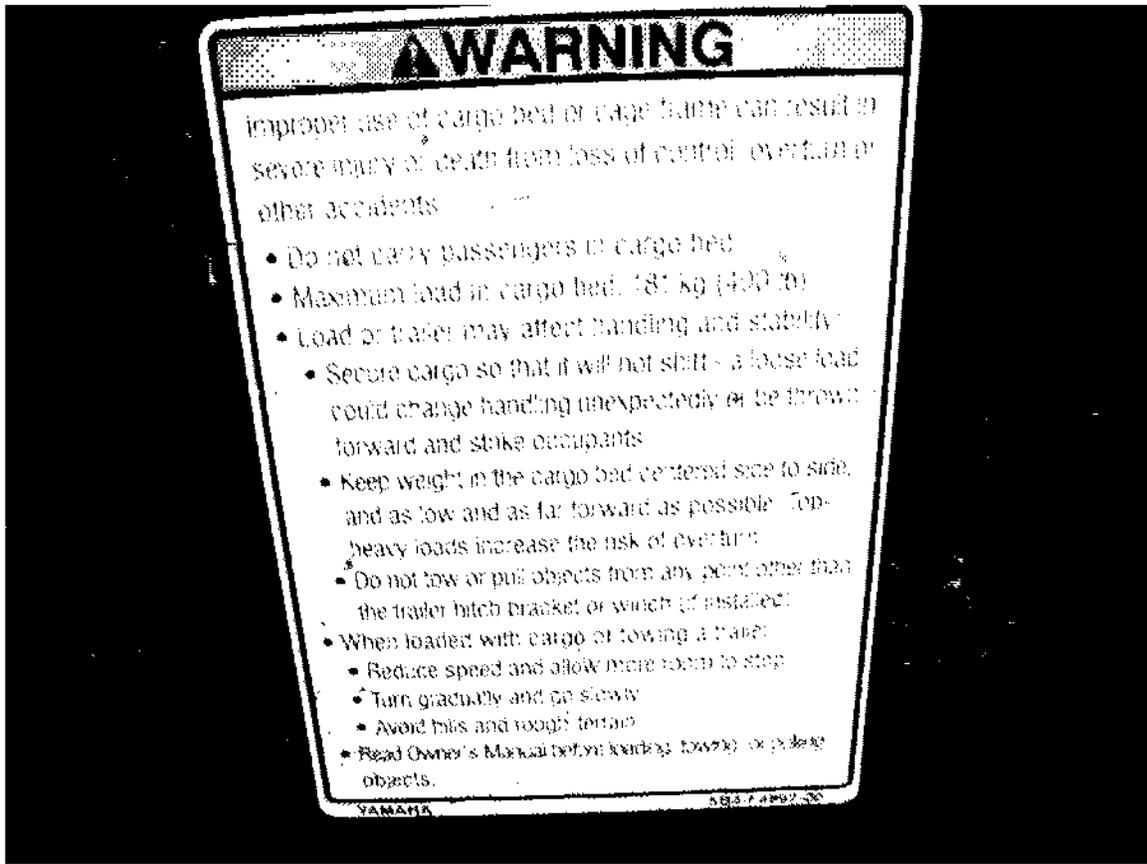
Label reads in part, “\*\*\*If you think or feel that the vehicle may tip or roll, brace your feet on the floorboards, and keep your hands on the handholds.\*\*\*Do not try to stop a vehicle tipover \*sing your arm or \*\*g.\*\*\*”



**Exhibit 1.38: View of Incident UTV from Passenger perspective  
IDI #090608CNE4481**



**Exhibit 1.39: Close Up of front of incident UTV  
IDI #090608CNE4481**



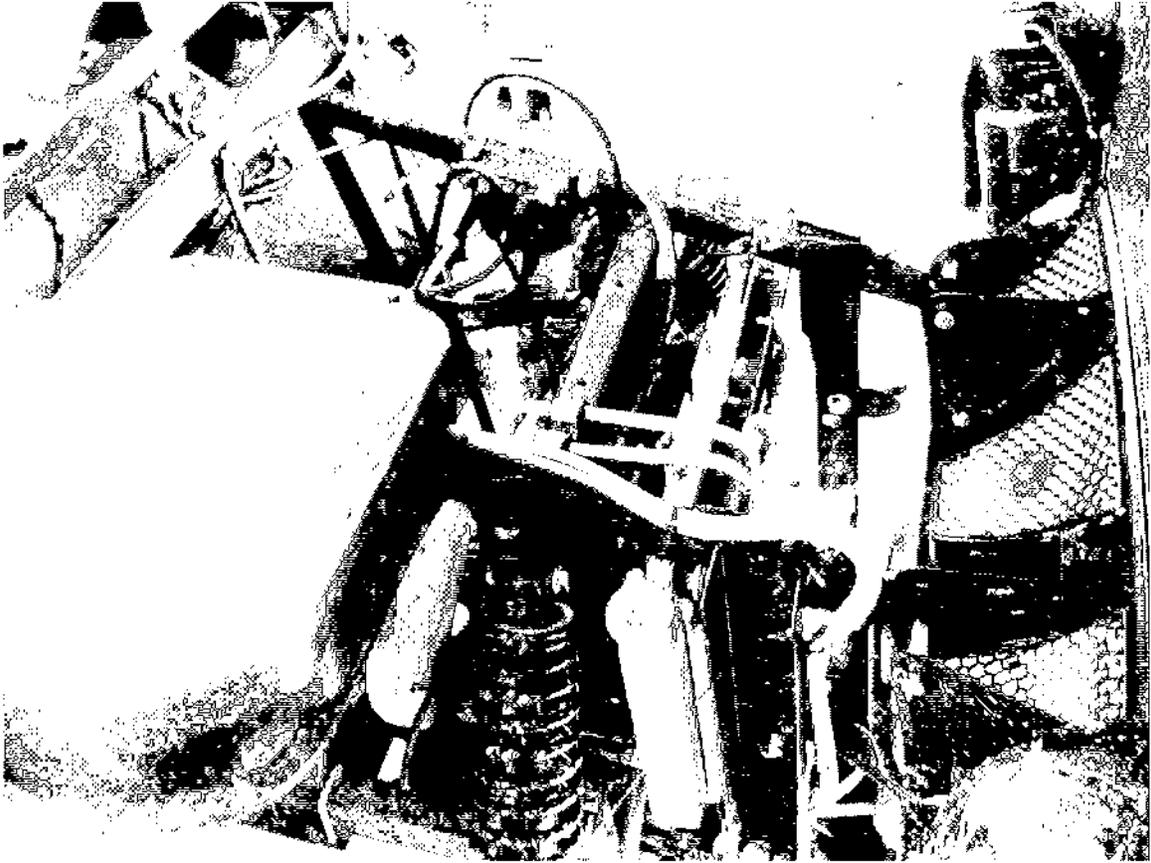
**Exhibit 1.40: Label affixed to Incident UTV  
IDI #090608CNE4481**

Label reads in part, **“\*\*\*!\*\*\*WARNING\*\*\*Improper use of cargo bed or cage/frame can result in severe injury or death from loss of control, overturn or other accidents.\*\*\*Do not carry passengers in cargo bed.\*\*\*Maximum load in cargo bed: 181 kg (400 lb).\*\*\*Load or trailer may affect handling and stability:\*\*\*Secure cargo so that it will not shift – a loose load could change handling unexpectedly or be thrown forward and strike occupants.\*\*\*Keep weight in the cargo bed centered side to side and low and as far forward as possible. Top-heavy loads increase the risk of overturn.\*\*\*Do not tow or pull objects from any point other than the trailer hitch bracket or winch (if installed).\*\*\*When loaded with cargo or towing a trailer: \*\*\*Reduce speed and allow more room to stop.\*\*\*Turn gradually and go slowly.\*\*\*Avoid hills and rough terrain.\*\*\*Read Owner’s Manual before loading, towing or pulling objects.\*\*\*YAMAHA\*\*\*”**



**Exhibit 1.41: Front Portion of Incident UTV with Hood in raised position  
IDI # 090608CNE4481**

**(Arrow points to battery cover; a “tool kit”, including a tire gauge, is included in the tool kit and is stored within the battery compartment.)**



**Exhibit 1.42: Close Up View of Incident UTV Engine Compartment  
IDI #090608CNE4481**



**Exhibit 1.43: Labeling on Tire installed on Incident UTV  
IDI # 090608CNE4481  
Labeling states in part, "\*\*\*\*MAXXIS\*\*\*\*"**



**Exhibit 1.44: Labeling on Right Front Tire installed on Incident UTV  
IDI # 090608CNE4481**

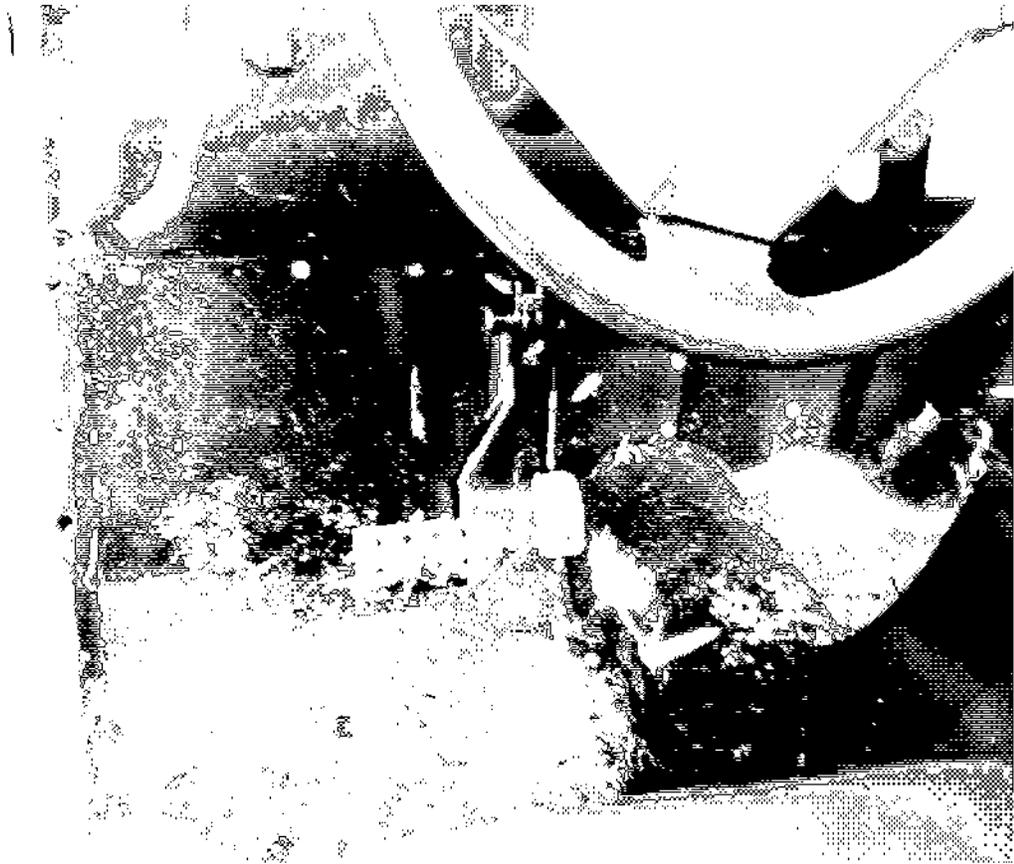
**Labeling states in part, "\*\*\*\*WARNING: SEE VEHICLE LABEL OR OWNER'S  
MANUAL FOR OPERATING PRESSURE\*\*\*\*DO NOT INFLATE BEYOND 250  
kPa (2.5Kg/cm<sup>2</sup>, 36 PSI) WHEN SEATING BEAD\*\*\*\*"**



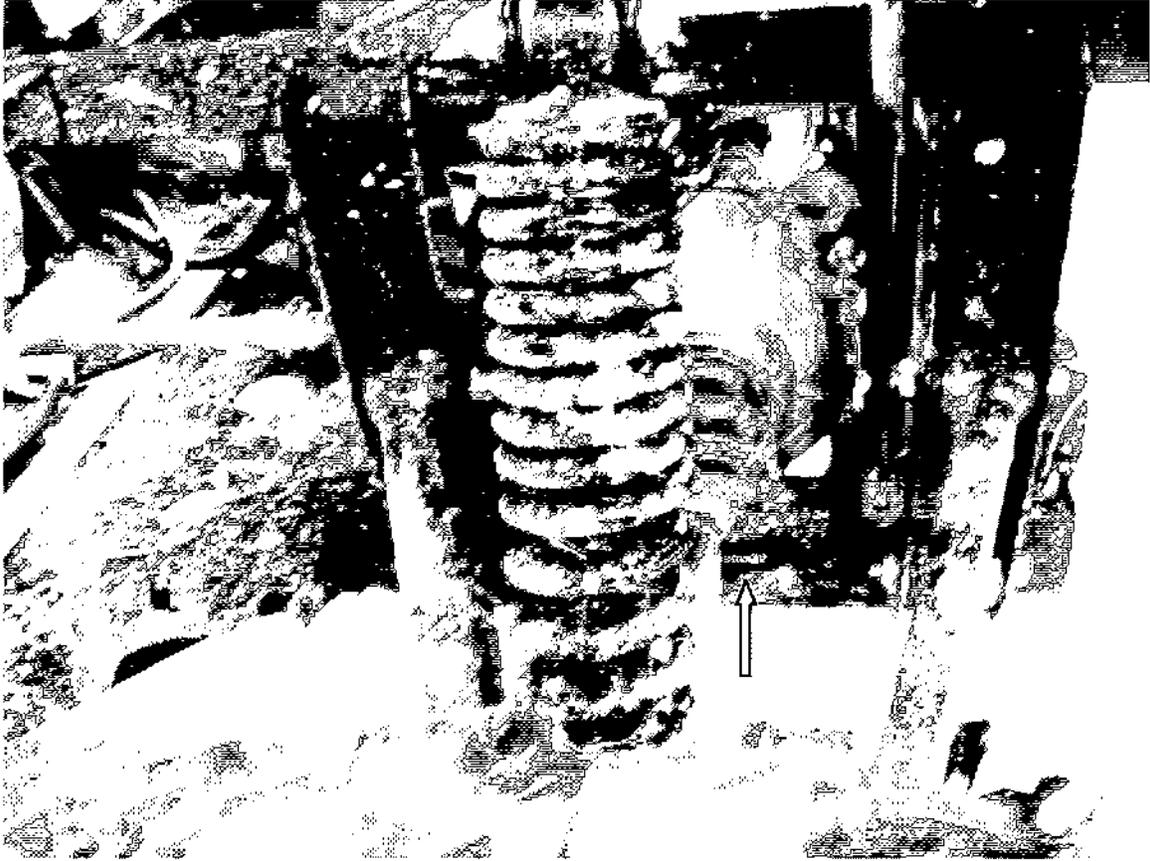
**Exhibit 1.45: Labeling on Front Right Tire installed on Incident UTV  
IDI # 090608CNE4481  
Labeling reads in part, "\*\*\*\*25X8.00-12HHS\*\*\*\*"**



**Exhibit 1.46: Labeling on Right Front Tire installed on Incident UTV  
IDI # 090608CNE4481  
Labeling reads in part, “\*\*\*\*2 PLY RATING\*\*\*\*”**



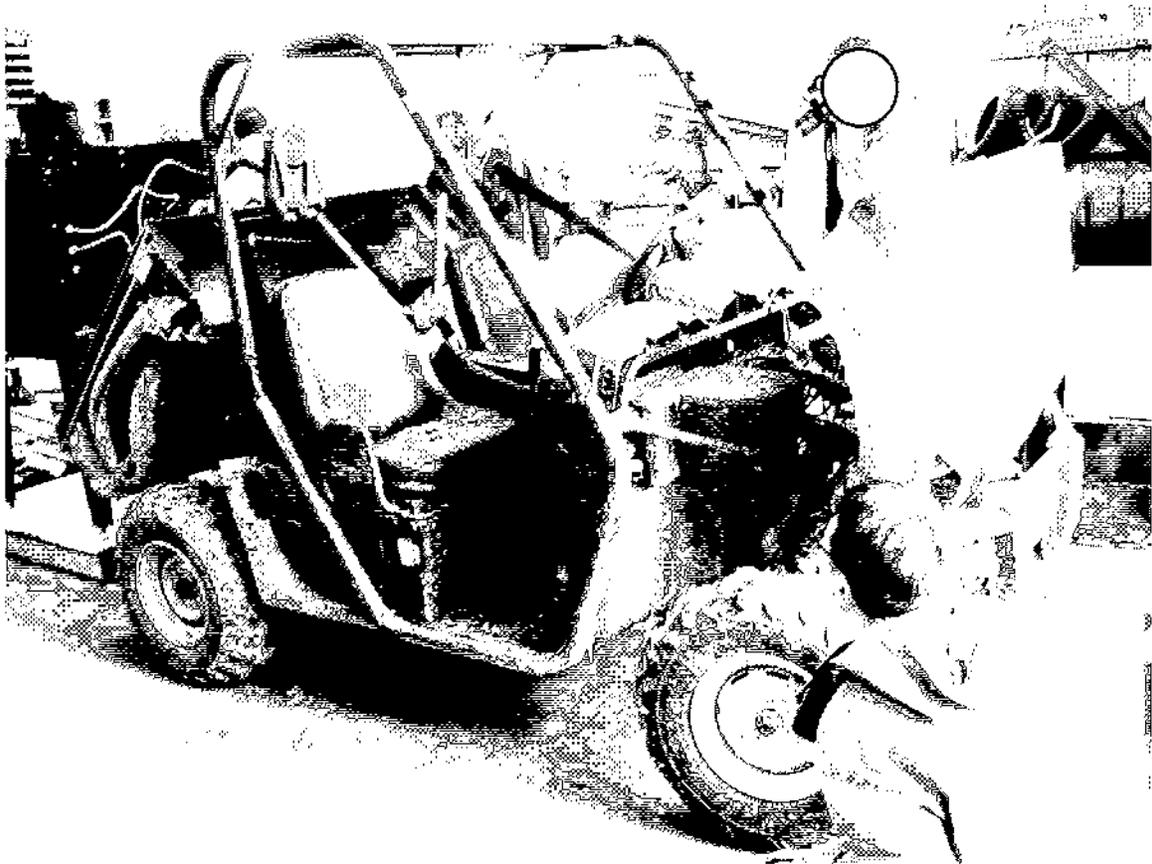
**Exhibit 1.47: View of Foot Control Pedals on Incident UTV  
IDI # 090608CNE4481**



**Exhibit 1.48: View of Rear left Suspension / Shock on Incident UTV  
IDI # 090608CNE4481  
(Arrow points to location of Serial number seen in Exhibit 1.29)**



**Exhibit 1.49: View of Rear Portion of Incident UTV with bed in raised position  
IDI # 090608CNE4481**



**Exhibit 1.50: Side View of Incident UTV with Hood & Bed in the raised position  
IDI # 090608CNE4481**



**Exhibit 1.51: Driver's Side View of Incident UTV**  
**IDI # 090608CNE4481**



**Exhibit 1.52: Label affixed to hood of Incident UTV  
IDI # 090608CNE4481  
Label reads in part, "\*\*\*\*DATE:07-21-08 Shift 1<sup>st</sup>\*\*\*\*"**



**Exhibit 1.53: Close Up of Foot Pedals installed on Incident UTV  
IDI # 090608CNE4481**



**Exhibit 1.54: Close Up of Left Rear Tire installed on Incident UTV with Bed in raised position  
IDI # 090608CNE4481**



**Exhibit 1.55: Close Up of Labeling on left rear tire installed on incident UTV  
IDI # 090608CNE4481  
Labeling reads in part, "\*\*\*\*MAXXIS\*\*\*\*"**

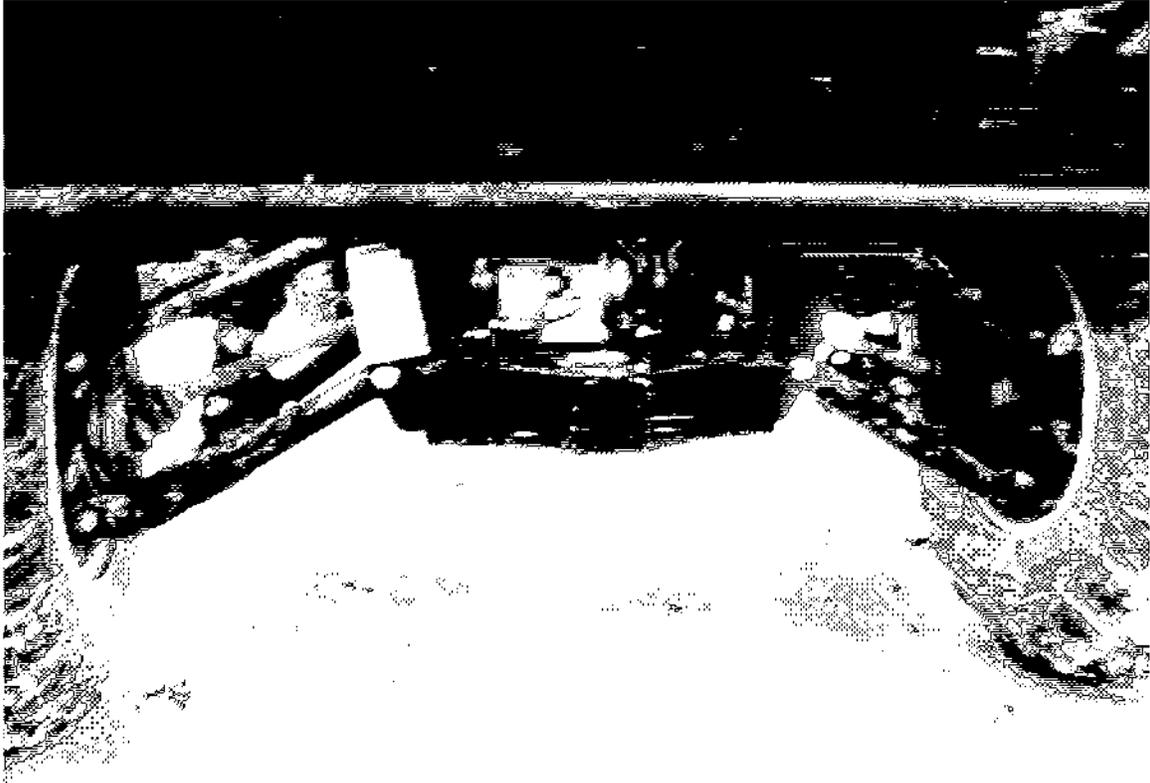


**Exhibit 1.56: Close Up of Labeling on left rear tire installed on incident UTV  
IDI # 090608CNE4481  
Labeling reads in part, "\*\*\*\*\*25X10.00-12NHS\*\*\*\*\*"**

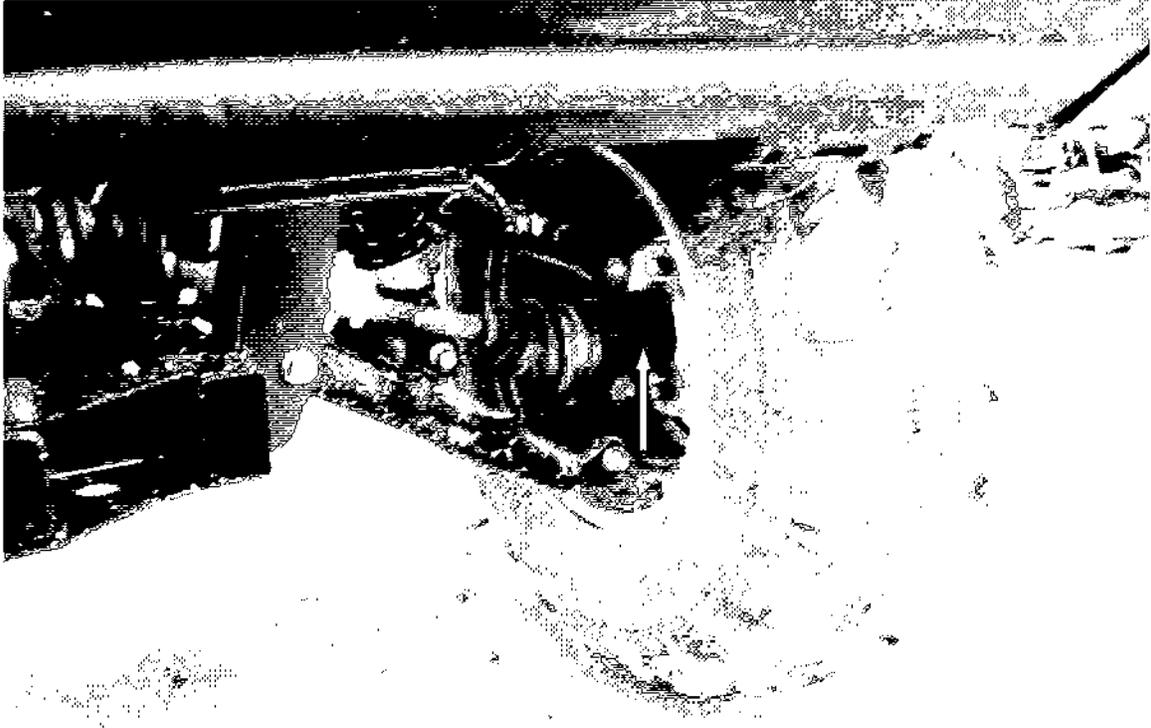


**Exhibit 1.57: Close Up of Labeling on left rear tire installed on incident UTV  
IDI # 090608CNE4481**

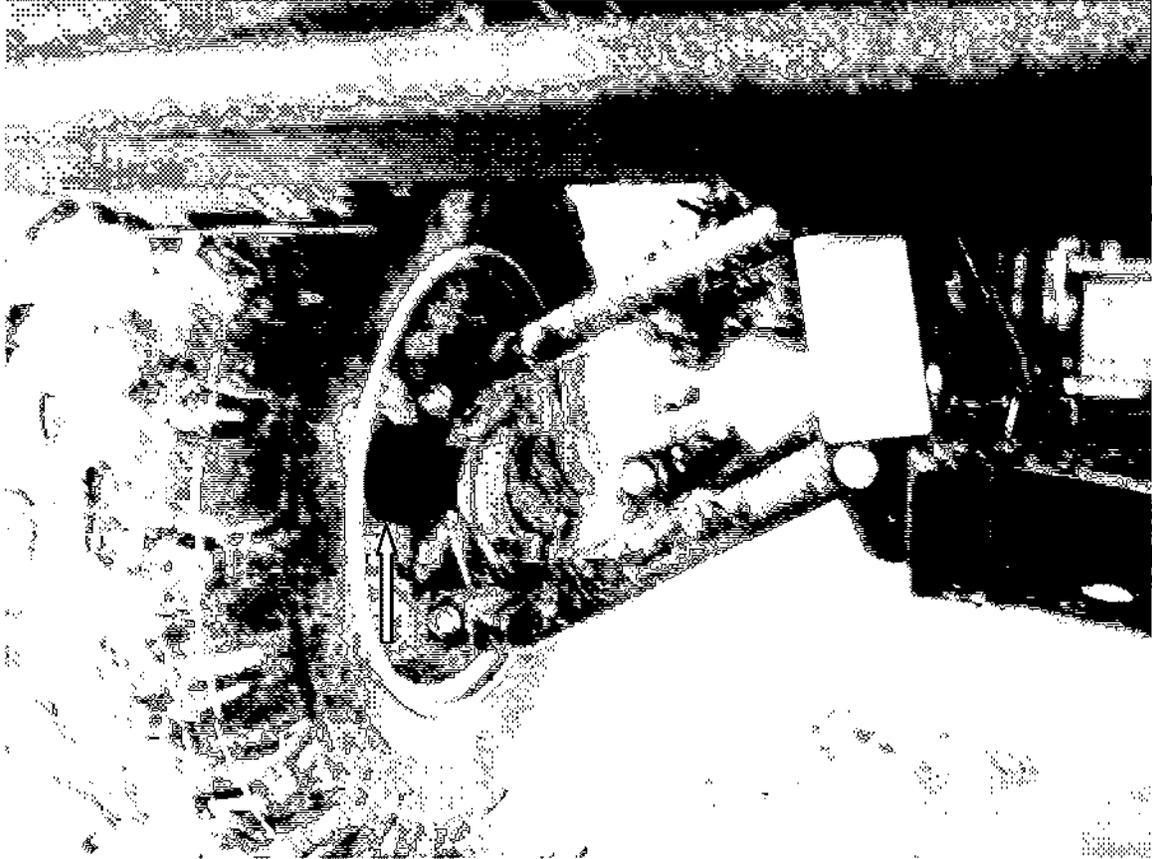
**Labeling reads in part, “\*\*\*WARNING\*\*\*SEE VEHICLE LABEL OR OWNER’S  
MANUAL FOR OPERATING PRESSURE\*\*\*DO NOT INFLATE BEYOND  
250kPa\*\*\*WHEN SEATING BEAD\*\*\*”**



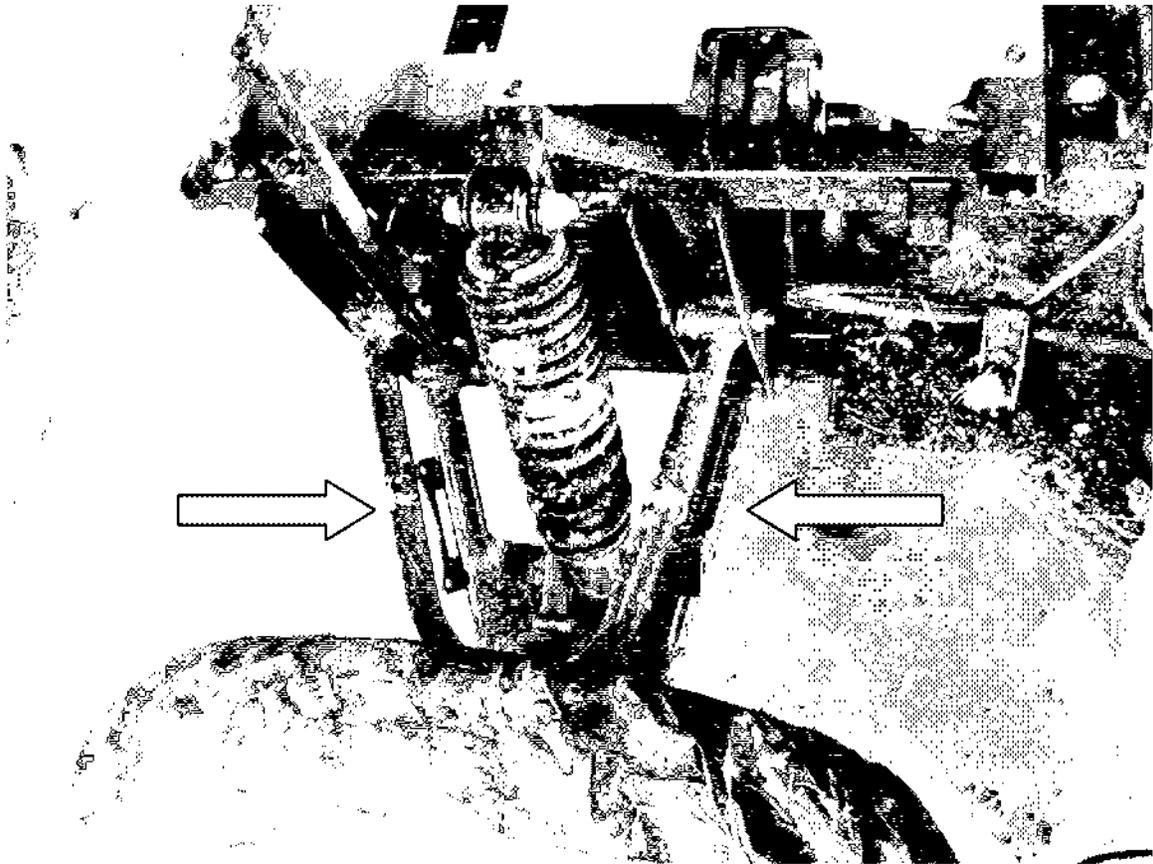
**Exhibit 1.58: View of Rear undercarriage of Incident UTV  
IDI # 090608CNE4481**



**Exhibit 1.59: View of Left Rear tire on Incident UTV  
IDI # 090608CNE4481  
(Arrow points to spacer)**



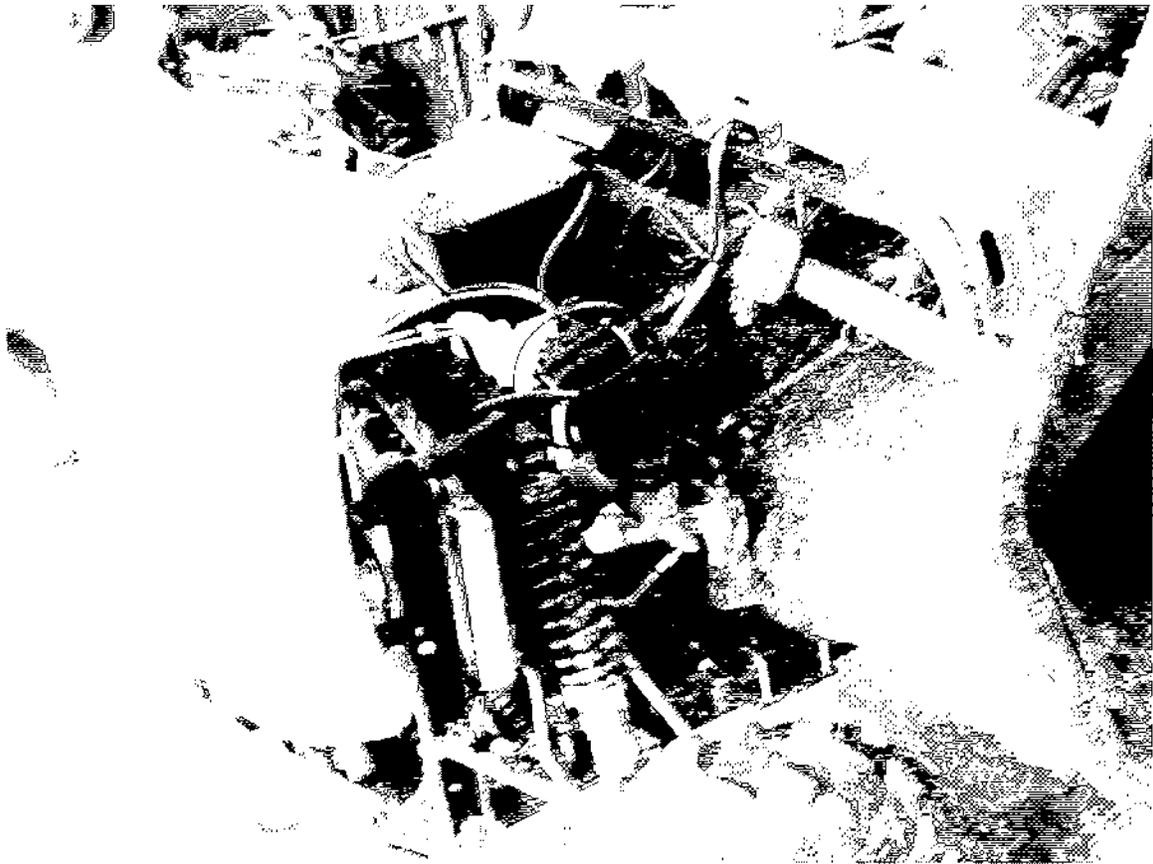
**Exhibit 1.60: View of Left Rear Tire installed on Incident UTV  
IDI #090608CNE4481  
(Arrow points to spacer)**



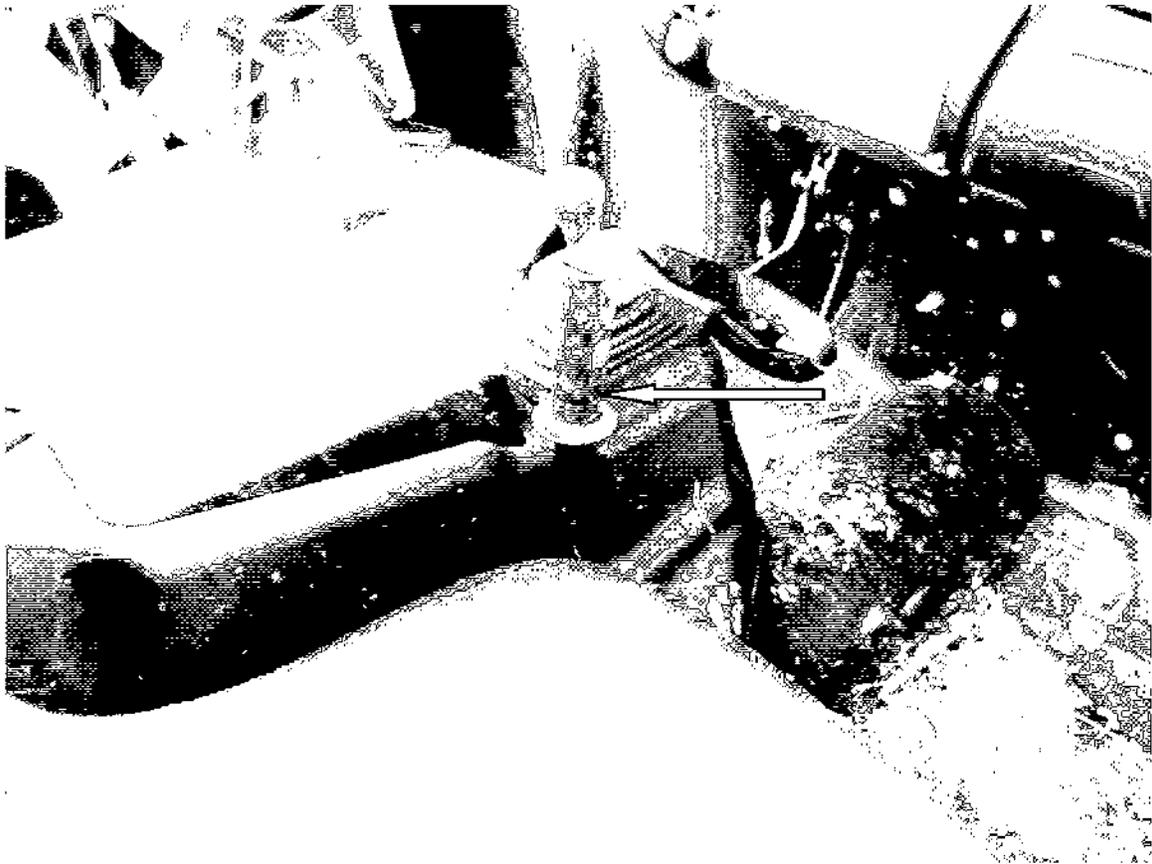
**Exhibit 1.61: Close Up view of Rear Portion of Incident UTV with bed in raised position**

**IDI # 090608CNE4481**

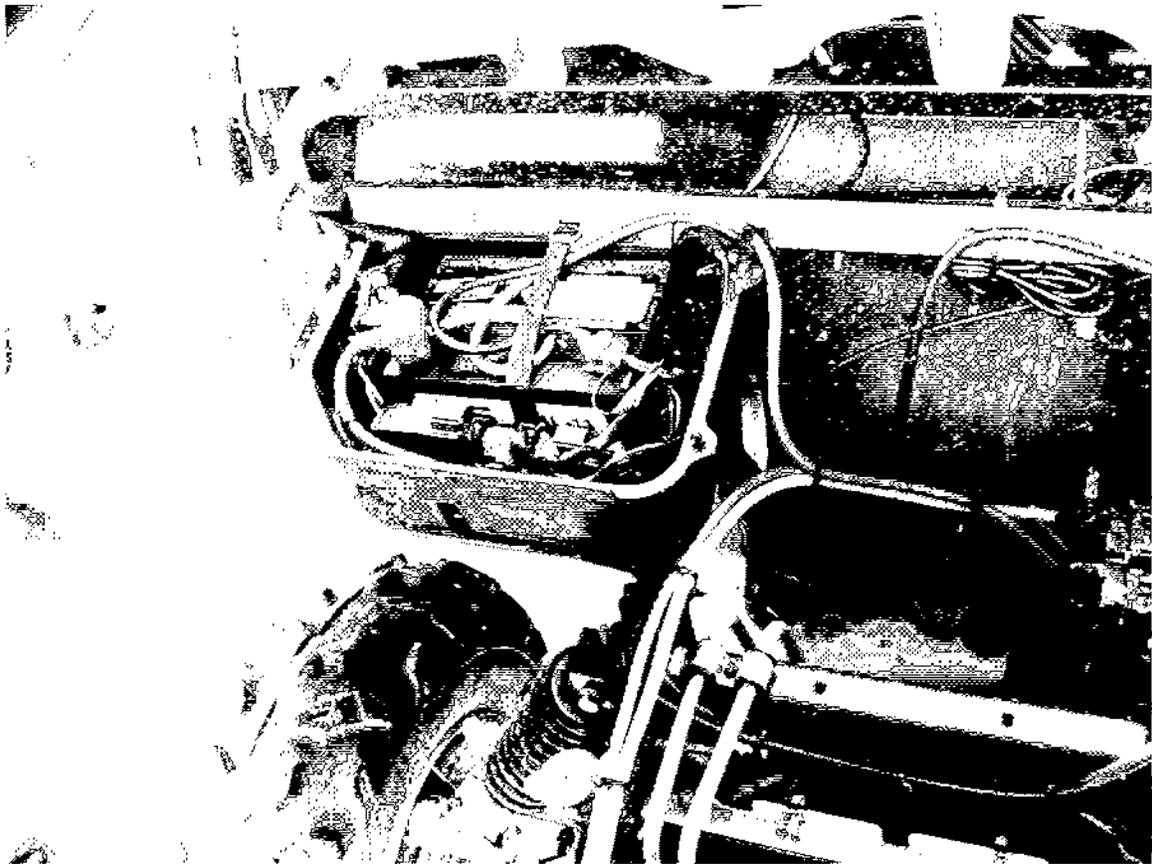
**(Arrows point to area on Incident UTV where anti-sway bar reportedly would be located, if installed. Anti-sway bar appears to have been removed.)**



**Exhibit 1.62: View from Driver's Side of Engine Compartment on Incident UTV  
IDI # 090608CNE4481**



**Exhibit 1.63: View from Passenger Side of interior of incident UTV  
#090608CNE4481  
(Arrow points to passenger hand-hold)**



**Exhibit 1.64: View of Engine Compartment of Incident UTV (arrow points to battery compartment with cover removed)  
IDI # 090608CNE4481**



**Exhibit 1.65: View of Steering Wheel installed on Incident UTV / Green arrow points to label seen in Exhibits 1.36 and 1.37; Red arrow points to label seen in Exhibits 1.17 through 1.21; Yellow arrow points to label seen in Exhibit 1.52  
IDI #090608CNE4481**



**Exhibit 1.66: View of Incident Field**  
**IDI # 090608CNE4481**



**Exhibit 1.67: View of Incident Location; Tracks identified by red arrows are reportedly “main ATV/UTV path” in incident field. As per statements reportedly made by Minor Passenger to Victim’s family, incident UTV was traveling parallel to main path, to left of path, in direction of yellow arrow just prior to incident. Incident UTV reportedly traveled between tree identified by blue arrow and tree identified by white arrow immediately prior to incident. Driver/Victim of Incident UTV reportedly was attempting to steer UTV around back of tree identified by white arrow to enter main path below tree, approximately where group of people with umbrellas are observed standing, when UTV flipped to left side just prior to entering main path. (Pink flags – small black arrows – were placed by manufacturer representatives during on-site visit)**

**IDI # 090608CNE4481**



**Exhibit 1.68: Close Up View of area just prior to where Incident UTV flipped to left side; Tree to right of photograph is tree identified with white arrow in Exhibit 1.67; red arrow points to faint off-road vehicle track in grass. It is unknown if this track is an ATV or UTV track and/or if track was made during incident (Black solid arrows point to pink flags placed by manufacturer representatives)  
IDI # 090608CNE4481**



**Exhibit 1.69: View showing marker where Victim's body was located in relation to tree identified by white arrow in Exhibit 1.67; Group of people with umbrellas are standing in main path (pink flags in photo placed by manufacturer representatives)  
IDI # 090608CNE4481**



**Exhibit 1.70: Similar View / Perspective as that seen in Exhibit 1.67; Main ATV/UTV Path tracks clearly visible. Incident UTV was reportedly traveling to left of path in direction of yellow arrow just prior to incident (pink flags placed by manufacturer representatives)  
IDI # 090608CNE4481**



**Exhibit 1.71: View from bottom of Field / Main ATV/UTV path looking up Field (opposite direction from which incident UTV was reportedly traveling.) White arrow points to tree identified by white arrow in Exhibit 1.67; Blue arrow points to tree identified by blue arrow in Exhibit 1.67; Red arrow points to third tree not visible in Exhibit 1.67. During the on-site visit, manufacturer representatives measured what appeared to be off-road vehicle tracks that appeared to go around tree identified by red arrow, crossed over main ATV/UTV path and went in between tree identified by white arrow and tree identified by blue arrow. (See pink arrows) It is unknown if this is the path incident UTV took, rather than reported path, immediately prior to incident.**

**IDI #090608CNE4481**



**Exhibit 1.72: Marker placed by Victim's Family to show where Victim was found**

**IDI # 090608CNE4481**



**Exhibit 1.73: View of Incident Location; black arrows point to flags placed by manufacturer representatives / white arrow points to tree identified by white arrow in Exhibits 1.67 and Exhibit 1.71; red arrow points to marker seen in Exhibit 1.72**  
**IDI #090608CNE4481**



**Exhibit 1.74: Similar View of that seen in Exhibit 1.73**

**IDI # 090608CNE4481**

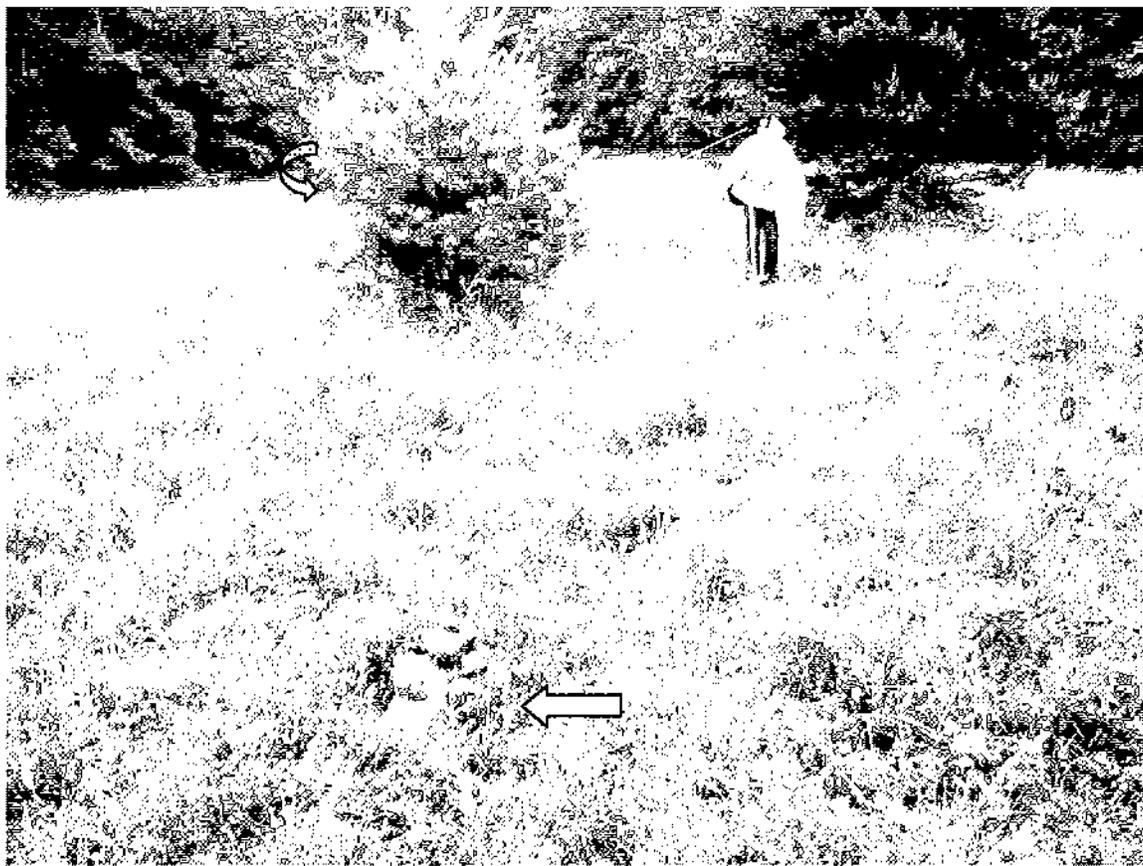
**(black arrows=manufacturer placed flags; white arrow=tree around which incident UTV was reportedly traveling at time of incident; red arrow =marker where victim was found; yellow arrow=main ATV/UTV path)**



**Exhibit 1.75: View showing Marker placed by Family (see in Exhibit 1.72) in relation to tree that UTV was reportedly steering around at time of incident  
IDI # 090608CNE4481**



**Exhibit 1.76: View from below Marker seen in Exhibit 1.72 looking up hill  
(opposite direction that incident UTV was reportedly traveling)  
IDI # 090608CNE4481**



**Exhibit 1.77: Similar view as that seen in Exhibit 1.76; Red arrow points to Marker placed by Victim's family; yellow arrow points to direction UTV was reportedly traveling immediately prior to incident as per statements reportedly made by Passenger to Victim's family; Pink arrows point to direction of off-road tracks measured by manufacturer representatives IDI #090608CNE4481**



**Exhibit 1.78: Incident Scene**

**Yellow arrows point to approximate reported path of Incident UTV immediately prior to incident, as per statements reportedly made by Passenger to Victim's family.**

**Blue arrow points to marker placed by Victim's family to show where victim was found.**

**Pink arrows point to approximate direction/location of off-road tracks measured by manufacturer representatives during on-site visit**

**Red arrow points to tree identified by Red arrow in Exhibit 1.71**

**IDENTIFICATION OF PARTIES**

1. James Spencer, Victim's Father  
485 Bozenkill Road  
Altamont, NY 12009  
Mailing Address: P.O. Box 182; Knox, NY 12107  
Telephone: 518-861-8575  
Interviewed via the telephone 6/10/2009  
\*\*Mr. Spencer was briefly present 6/18/09 with the Family's Attorney during the on-site visit, but was not interviewed at this time.  
During the 6/10/09 conversation, a verbal request was made for a copy of the ME's report; Mr. Spencer stated that he was not provided a copy of this document, but if and when he obtains it, he will forward a copy. A verbal request was also made for a copy of the owner's manual; but it was never received.
2. Jody Gable, Owner (Retail shop where incident ATU was purchased)  
Gable Motorsports  
2431-2 St., Route 7 East  
Cobleskill, NY 12043  
Telephone: 518-234-1075  
Interviewed via telephone 6/12/2009
3. Ronald Bates, Senior Investigator  
Albany County Sheriff's Department  
390 New Salem Road  
Voorheesville, NY 12186  
[rbates@albanycounty.com](mailto:rbates@albanycounty.com)  
518-655-7805  
Interviewed in-person 6/18/09 \*\*Present during other-site examination of ATU & on-site visit
4. Linda Donato  
Albany County Clerk's Office  
32 North Russell Road  
Albany, NY 12206  
E-mail: [ldonato@albanycounty.com](mailto:ldonato@albanycounty.com)  
Submitted written request for Sheriff's Report, any investigative report & photographs via E-mail on 6/12/2009  
Follow-Up E-mail sent 7/13/2009 & phone call placed – Documents requested not yet cleared for release
5. Edmund J. Scanlan, Attorney for Victim's Family  
Scanlan Law Group

8 S. Michigan Avenue; Suite 2700

Chicago, IL 60603

Office Phone: 312-422-0343

E-mail: [EJS@scanlanlawgroup.com](mailto:EJS@scanlanlawgroup.com)

\*\*\*Present during 6/18/09 other-site examination of ATU & on-site visit

Several conversations between 6/12/09 & 6/18/09

6. Altamont Police Department

115 Main Street

Altamont, NY 12009

Mailing Address: P.O. Box 643

Telephone: 518-861-5480

FAX: 518-861-5379

Submitted written request for Police Report via E-mail on 6/12/2009; no response

7/13/2009: Follow-Up Phone call placed; Spoke to Records Officer who stated

that she would "look into it". No response to date

7. Albany Medical Center

Medical Records

43 New Scotland Avenue

Albany, NY 12208

(518) 262-3151

6/12/2009 – written request for medical records submitted

7/13/09 – Phone call to medical records department confirmed request received, but not yet processed. No anticipated date of receipt of records.

8. Minor Passenger

Police would not release minor passenger's name or contact information

Efforts to locate the passenger via Lexis-Nexis using name(s) appearing in news report were unsuccessful.

\*\*\*In addition to Investigator Bates, Mr. Scanlan, a crash expert hired by Mr. Scanlan (name unknown), this Investigator, C. Paul (CPSC), M. Kumagai (CPSC) and Mr. Spencer, there were three Manufacturer Representatives present during the 6/18/09 on-site visit and other-site examination of the ATU, (names unknown – did not identify themselves).

\*\*\*Efforts to request a copy of the ME's report from the Albany County Medical Examiner's Office were not made as previous communication with this department revealed that the office does not release copies of the ME's report to any entity other than Next-of-Kin or the County Attorney pursuant to a NYS County Law.

**CONTACTS MADE BY COMPLAINANT**

As the Victim's Family is represented by Counsel, it is unknown how or when the Manufacturer became aware of the incident. Investigator Bates reported that he was contacted by a Manufacturer Representative soon after the incident inquiring about examining the incident ATU.

Task Number: 090608CNE4481\_\_\_\_\_

Date: 7/16/09\_\_\_\_\_

### Status of Missing Document(s)

The official records below were requested for this investigation report, but could not be obtained.

1. \_\_\_ State Police Incident Report \_\_\_\_\_
2. \_\_\_ State Police Photographs \_\_\_\_\_
3. \_\_\_ State Police Investigative Report \_\_\_\_\_
4. \_\_\_ Local Police Report \_\_\_\_\_
5. \_\_\_ Medical Examiner's Report (requested from Victim's family) \_\_\_\_\_
6. Medical Records (requested from hospital)

Date: July 16, 2009 \_\_\_\_\_ Investigator No. 9085 \_\_\_\_\_

Regional Office: CFIE \_\_\_\_\_ Supervisor No. 9093 \_\_\_\_\_



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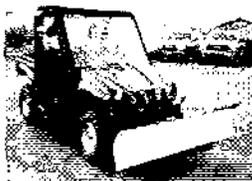
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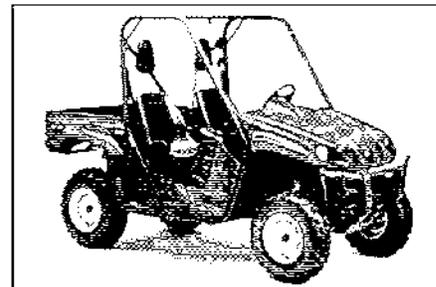
For those interested in driving the hardest-possible bargain on a Yamaha side-by-side, the Rhino 450 does just about everything its big brother does, only draws more power from an anviltough 421cc engine that squeezes maximum performance from a bulletproof and proven powerplant.

### Pricing/Color Information

MSRP: \$8,799.00  
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MSRP: \$8,799.00  
Red June 2008

MSRP: \$9,349.00  
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## Features

### All

- This ground-breaking off-road recreational side-by-side is like nothing else on the market—a new way to get way out there in style and comfort with a friend and your gear.
- Comfortable interior with automotive-type controls: Steering wheel, left-side foot brake pedal/right-side foot accelerator pedal, center-mounted console shifter and parking brake lever, turn-to-start ignition switch, indicator lights and 12-volt accessory outlet render the Rhino 450 totally user-friendly.
- 421cc liquid-/oil-cooled, four-stroke engine and light weight add up to great all-around performance, excellent terrainability and great fuel efficiency.
- Industry-exclusive fully automatic Ultramatic® transmission with dual-range (Hi/Lo) drive and reverse is the most advanced drive system available. Maintaining constant belt tension reduces wear, gives instant throttle response and provides industry-exclusive all-wheel downhill engine braking.
- Industry-exclusive three-position On-Command® In/Out 4WD feature lets you switch between 2WD, limited-slip 4WD and fully locked differential 4WD—all with the simple push of a button.
- Fully independent four-wheel suspension: Double wishbones front and rear deliver 7.3 inches of wheel travel and five-way preload adjustable shocks provide maximum tire contact and comfort while navigating rough terrain.
- Thick bucket seats and that great, long-travel suspension system work together to provide the smoothest ride in the industry.
- Super-reliable overhead-cam 421cc liquid-cooled engine produces abundant low-rev torque, fat midrange and serious top-end muscle.
- Dual-range (Hi/Lo) drive with reverse taps into more pulling power in low and more performance in high than any machine in its class.
- Console-mounted dual-range (H/L/N/R) shift lever.
- 33mm Mikuni BSR carburetor and high-output DC-CDI ignition serve up great throttle response and excellent fuel efficiency.
- Sealed drive case keeps out water and debris, and a hand-operated side cover drain lets out what little gets in.
- Specially designed full stainless steel-exhaust system features aluminum heat shields and a screen-type spark arrestor for superb power characteristics with minimum noise output.
- Large-capacity aluminum radiator and oil cooler with fan-assist delivers maximum cooling efficiency and is positioned high in the frame for optimal protection.
- Specially designed drive system air intake vent prevents overheating and keeps water and mud from entering drive case.
- Easy-access, tool-free air filter box.
- CAD-designed steel frame is lightweight and features outstanding durability with superior rigidity for superb handling.
- Light, responsive rack-and-pinion steering features a fully sealed steering column and double U-jointed steering linkage for smooth operation and class-leading turning radius—even in 4WD.
- Large-diameter ventilated hydraulic front disc brakes and shaft-mounted hydraulic rear disc provide outstanding stopping power in a variety of conditions.
- 12.1-inch ground clearance delivers maximum underbelly protection while enhancing terrainability.
- Low-maintenance front shaft drive features gear case and electronic servo-activated 2WD/4WD/Diff lock via the On-Command system. Direct rear shaft drive eliminates the U-joint for greater durability and more efficient power transfer at all rpm.

- Heavy-duty CV joint guards protect against rock and debris damage.
- Stamped steel dump bed is rated to haul 400 pounds of gear. Center-mounted 2-inch receiver trailer hitch comes standard and can tow over 1200 pounds.
- Comfortable passenger grab handles.
- Large, specially designed seats are extra plush and supportive for all-day driver and passenger comfort.
- Tough, rotomolded doors keep mud, water and dirt on the trail where they belong.
- Operator and passenger seat belts.
- Dual 30-watt multi-reflector Krypton bulb headlights with high/low beams feature stylishly sleek cat-eye design; dual 5-watt/21-watt tail/brake lights.
- Large, 7.9-gallon fuel tank features a fuel level gauge.
- Large style headrests for good looks and comfort.
- Tough wrinkle-finish coating on the upper frame.
- Maintenance-free battery provides power, even in cold weather.
- Built in Newnan, GA, USA.
- Optional digital instrument panel boasts multifunction LCD display with speedometer, odometer, dual tripmeters, hour meter, 4WD status, transmission position, and clock.

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## Specifications

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### Engine

Engine	421cc liquid-/oil-cooled w/fan, SOHC 4-stroke single
Bore x Stroke	84.5mm x 75mm
Compression Ratio	10:1
Carburetor	Mikuni 33mm BSR
Starting System	Electric
Fuel Capacity	7.9 gal

### Transmission

Ignition	DC-CDI
Transmission	Yamaha Ultramatic V-belt/H, L, N, R
Engine Braking System	All Wheel
Drive Train	yamaha On-Command pushbutton 3-way locking differential, 2WD, 4WD, locked 4WD; shaft

### Chassis

Suspension Front	Independent double wishbone, 7.3" travel w/5-way preload adjustment
Suspension Rear	Independent double wishbone, 7.3" travel w/5-way preload adjustment
Brake Front	Dual hydraulic discs, twin pistons
Brake Rear	Hydraulic disc, self-adjusting, shaft mounted
Tires Front	AT25x8-12 NHS
Tires Rear	AT25x10-12 NHS
Turning Radius	153.5"

### Dimensions

Length	113.6"
Width	54.5"
Height	73.0"
Wheelbase	75.2"
Ground Clearance	12.1 in
Dry Weight	1031 lb
Bed Capacity	400 lb

### General Information

Towing Capacity	1212 lb
Instruments	Fuel sight gauge, 4WD indicator lights
Lighting	Dual 30W Krypton multireflector headlights & 21/5W brake light

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**090608CNE4481**  
**ADDENDUM**

The attached police report, photograph log and photographs were received by Investigator Lytle via USPS on September 11, 2009. These reports should be appended to In-Depth Investigation Report #090608CNE4481. The information contained in these reports does not materially alter or conflict with any information previously reported, but rather confirms information previously submitted.

# Call 09190734 Details

File: Date: **05/28/09** Opr: **emacgreg** POD: **10055013041**  
 Location: **485 BOZENKILL RD** Juris: **KNX**  
 Type: **S07** Svc: **S** Agcy: **ACSO** Area: **KNX** Dist: **3** Zn: **AC** Bt: **1**  
**AUTO ACCIDENT** In Progress? **0** Priority: **1** How Recd? **1**  
**PERSONAL INJURY**

Last name: **COMM-SEC** First: Phone:  
 Address: **485 BOZENKILL RD** BOLO HAZ EL PH 10

#	Remarks	Time	Oper	POD
1	atv roll over 13 yrmc/a/b	16:13:00	emacgreg	100
2	1/2 mile into woods	16:13:09	emacgreg	100
3	09190734 split from 09190732 (S106) by kbovia.	16:13:14	*	100
4	GUILD MED 31 E/R	16:15:06	sbarker	100
5	GUILD MED 31 ARR	16:15:15	sbarker	100
6	EMT MOSBEY ER TO THE BAY	16:15:40	kbovia	100
7	GUILD MED REQ HELICOPTER ON STANDBY	16:15:53	sbarker	100
8	1601 E/R TO SCENE	16:17:22	sbarker	100
9	LIFENET CHECKING WEATHER	16:17:30	sbarker	100
10	3903 ADV DRIVER E/R TO HELDERBERG	16:17:56	sbarker	100
11	1601 ADVISED OF MEDICS REQUEST	16:18:40	sbarker	100
12	KNOX STATION ACK CALL	16:19:10	sbarker	100
13	GUILD EMS 30 REQ HELICOPTER LAUNCH	16:20:35	sbarker	100
14	5384 WAITING FOR 5306	16:21:03	sbarker	100
15	423---ALTAMONT RESCUE SQUAD ON SCENE	16:22:27	kbovia	100
16	LIFENET 71 WILL BE ENROUTE	16:22:48	sbarker	100
17	Call 09190745 has been linked to call 09190734.	16:23:45	*mdean	100
18	VIA W911, ASST CHIEF SADDLEMIRE E/R WITH ATV	16:23:57	sbarker	100
19	ETA FOR LIFENET 5 MINUTES	16:30:04	sbarker	100
20	AMCH NOTIFIED	16:41:42	mdean	100
21	102---GET AHOLD OF 410 ADVISE HIM TO GO UP TO THE	16:44:41	kbovia	100
22	DRIVEWAY TO THE DIRTTRAIL IN THE AREA OF 1G35	16:44:41	kbovia	100
23	W/A CAMERA ..APPROX 800YRDS IN	16:44:41	kbovia	100
24	410 ADVISED	16:44:47	sbarker	100
25	411---E/R AMCH	16:45:58	kbovia	100
26	429---COURTSEY TRANSPORT TO AMCH S.M 17770	16:56:52	kbovia	100
27	KETCHUMS E/R ETA 15...ADVISED WE NEED A FLATBED	17:01:32	kbovia	100
28	411---OUT AMCH	17:14:10	kbovia	100
29	412 E/R TO THE SCENE W/ UNIT 404	17:15:15	kbovia	100
30	404---ADVISE 410 NO CAR TO CAR IN UNIT 404 FIND	17:25:13	kbovia	100
31	OUT WHERE HE WANTS 404	17:25:13	kbovia	100
32	429---OUT AMCH	17:28:42	kbovia	100
33	102---I/S FROM BOZENKILL RD AND E/R TO 390	17:55:09	kbovia	100
34	VIN/5Y4AJ32Y89A006682	18:28:51	kbovia	100
35	VIN/5Y4AJ32Y899006682	20:58:07	gheath	100

Cross Streets Unit Recommendation  
**GUILDERLAND KNX TWN**  
**VILLENEUVE DR**

Veh Lic St Year Make Model Color Additional  
**5Y4AJ32Y89A006682**

1. Agency ALBANY COUNTY SHERIFF'S OFFICE	2. Div/Precinct PATROL	New York State <b>INCIDENT REPORT</b>	3. ORI NY0010000	5. Case No. 09190734	6. Incident No. 1491
7,8,9. Date Reported (Day, Date, Time) THURSDAY 05/28/2009 22:10		10,11,12. Occurred On/From (Day, Date, Time) THURSDAY 05/28/2009 16:13		13,14,15. Occurred To (Day, Date, Time)	
16. Incident Type ACCIDENT-FATAL			17. Business Name		
19. Incident Address (Street Name, Bldg. No., Apt. No.) 485 BOZENKILL RD					
20. City/State/Zip ALTAMONT NEW YORK 12009					
21. Location Code (TSLED) KNOX TOWN 0156		23. No. of Victims 1	24. No. of Suspects 0	26. Victim also Complainant? NO	
Location Type FIELD/WOODS					

### ASSOCIATED PERSONS

25. TYPE	Name (Last, First, Middle, Title)	DOB	Street Name Bldg., Apt.No., City, State, Zip	Res Phone Bus Phone
LEGAL GUARDIAN	SPENCER, BONNIE, W	[REDACTED]	[REDACTED]	[REDACTED]
PERSON REPORTING	PITTS, BRIAN	[REDACTED]	[REDACTED]	[REDACTED]
VICTIM	SPENCER, JAMES, W	11/24/1995	485 BOZENKILL RD ALTAMONT NY 12009	(518)861-8575

### VICTIM

Name	27. DOB	28. Age	29. Gender	30. Race	31. Ethnicity	32. Handicap	33. Residence
SPENCER, JAMES, W	11/24/1995	13	MALE	WHITE	NOT HISPANIC	NO	RESIDENT

### VEHICLE

59. Vehicle Status	60. License Plate No.	61. State	62. Exp. Yr.	64. Value
IMPOUNDED		NY		\$ 8,317.00
63. Plate Type	65. Year	66. Make	67. Model	
	2009	YAMAHA	UNKNOWN	
68. Style	69. VIN	70. Color(s)		
	5Y4AJ32Y89A006682	GREEN		
71a. Towed By	71b. Towed To			
ACSO	KETCHUMS			
72. Vehicle Notes				
YAMAHA 450 RHINO UTV				

### NARRATIVE

Date of Action	Date Written	Officer Name & Rank
05/28/2009	05/28/2009	HALLORAN, THOMAS (DEPUTY)
Narrative		
<p>ON THE ABOVE DATE AND TIME PATROL RESPONDED TO THE ABOVE ADDRESS FOR A REPORTED ATV ACCIDENT. UPON ARRIVAL (PR) STATED THAT (VI) WAS DRIVING A YAMAHA RHINO UTV, AND (PR) WAS IN THE PASSENGERS SEAT. THE UTV WAS EQUIPED WITH SEAT BELTS. (PR) STATED THAT HE WAS WEARING HIS AND THAT HE WAS UNSURE BUT DID NOT BELIEVE THAT (VI) WAS WEARING HIS. NEITHER (PR) NOR (VI) WERE WEARING HELMETS. (PR) STATED THAT AS THEY WERE DRIVING NORTH ACROSS A FIELD OWNED BY BONNIE SPENCER, THE MOTHER OF (VI), LOCATED BEHIND THE ABOVE ADDRESS, (VI) TURNED RIGHT CAUSING THE UTV TO ROLL ONTO THE DRIVERS SIDE. (VI) WAS PARTIALLY EJECTED FROM THE UTV. AT THAT TIME THE SAFETY BAR ON THE DRIVERS SIDE CAME DOWN AND STRUCK (VI) IN THE HEAD CAUSING HEAD INJURIES. (PR) STATED HE THEN LIFTED THE UTV OFF OF (VI) AND RAN TO THE HOUSE AT 485 BOZENKILL, APPROXIMATELY 1/2 MILE NORTH OF THE FIELD, TO CALL 911. (VI) WAS TRANSPORTED TO</p>		

ALBANY MEDICAL CENTER HOSPITAL BY HELICOPTER (LIFENET 71) WHERE HE WAS PRONOUNCED DEAD AT 1710. (PR) REPORTED NO INJURIES. STATEMENTS AND PHOTOGRAPHS OF THE SCENE WERE SECURED.

### ADMINISTRATIVE

74. Inquiries	75. NYSPIN Message No.	76. Complainant Signature	
77. Reporting Officer Signature (Include Rank) DEPUTY THOMAS HALLORAN <i>Thomas Halloran Deputy</i>	78. ID No. 1419	79. Supervisor Signature (Include Rank) SERGEANT ARREL MONCURE <i>Arrel Moncure</i>	80. ID No. 00115
81. Status PENDING INVESTIGATION	82. Status Date 05/28/2009	83. Notified/FOT CIU <i>pkw</i>	Solvability Total 0

STATE OF NEW YORK \_\_\_\_\_ )  
COUNTY OF ALBANY \_\_\_\_\_ ) ss:  
Town of Knox \_\_\_\_\_ )

Case No: 08  
Date 05/28/09

Time Started: 7:00 am/pm  
Time Ended: 7:29 am/pm

Name Brian Ritts Date of Birth \_\_\_\_\_  
Street Address \_\_\_\_\_ City/Town/Village \_\_\_\_\_ State \_\_\_\_\_

I state the following: I give this statement to Investigator William Brock of the Albany County Sheriff's office. I am giving this statement at the Albany Medical Center Hospital and it is about my friend Wyatt's accident. Wyatt's first name is James but he goes by his middle name is Wyatt. Today Wyatt and me stayed out of school because we were going to get a 4 wheeler for Wyatt. Wyatt his father and me drove out to a dealer in Cobleskill to pick up the 4 wheeler. We picked it up and drove back to Wyatt's house. Wyatt's and me took it out for about an hour. We then went inside of Wyatt's house to play video games. We then took the 4 wheeler for another ride. Wyatt was driving and I was on the passenger seat. I had my seat belt on but I don't think Wyatt's had his on. We were driving through a field to go on a trail when Wyatt turned the wheel and the 4 wheeler threw Wyatt's off the machine onto the ground. The 4 wheeler then rolled on top of him. I then killed the 4 wheeler off of him and I then ran to get help. I then went to Wyatt driveway and called for help to Coms. Bill.

Notice: false statements made herein are punishable as a Class A Misdemeanor pursuant to Section 210.45 of the New York State Penal Law.

Sworn to before me this 28th day of May 2009  
[Signature]  
(signature)

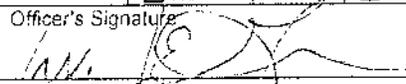
Brian Ritts  
(signature of deponent)

Investigator  
(title)

[Signature]  
(signature of witness)

Station Patrol	Incident No. 09190734	Other Case / Related No. -
Date 05/28/2009	Photographer Investigator James Goss	
Location 485 Bozenkill Rd	Town / Village / City Town of Knox	
Incident Type: Accident Investigation	Camera Type: <input type="checkbox"/> Film <input checked="" type="checkbox"/> Digital	Filter: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Film Type: <input checked="" type="checkbox"/> Digital <input type="checkbox"/> Other:	Film Speed: -	Roll No. -

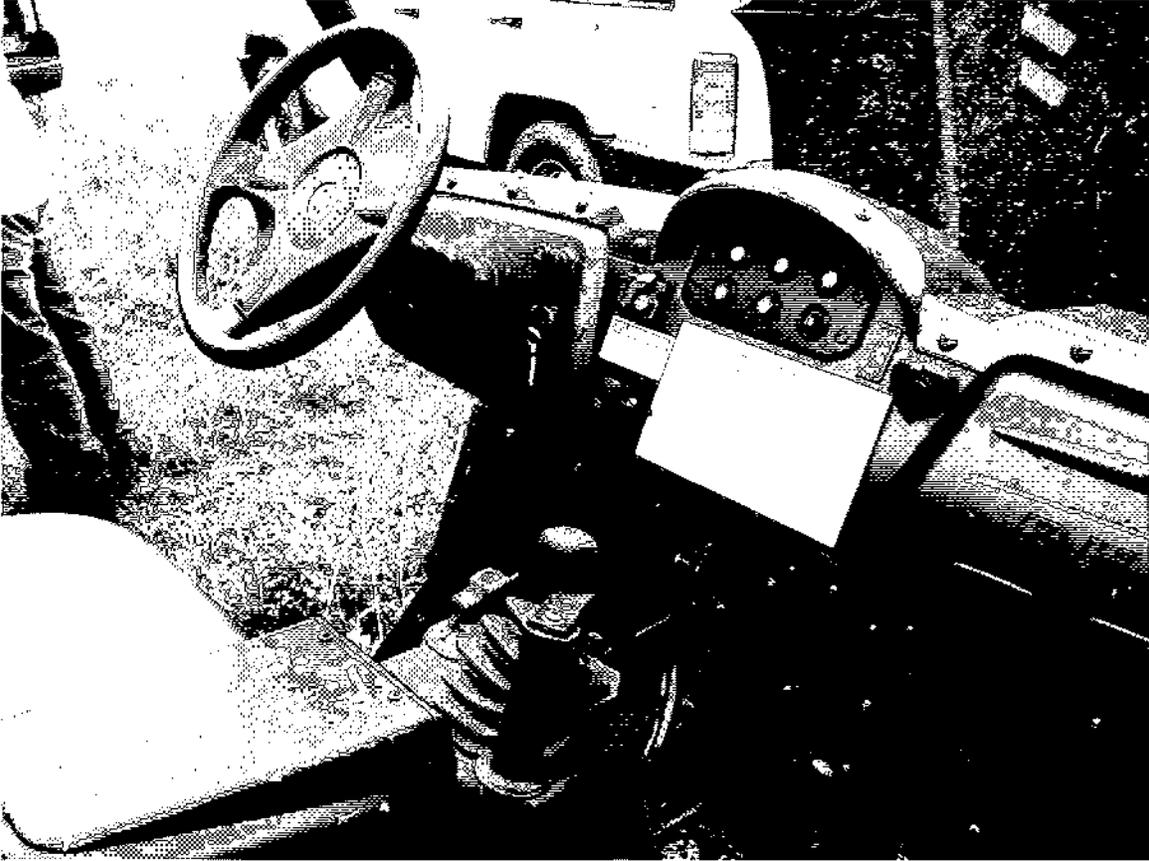
Exposure Number	Description	Auto	Lens	Flash	F/Stop	Shutter	Remarks
1	Yamaha 4x4 from Rear Passenger Side	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
2	Interior of Yamaha 4x4 with key in ignition	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
3	Yamaha 4x4 VIN 5Y4AJ32Y89A006682	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
4	Close-Up of Yamaha with rear Bed lifted	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
5	Engine area of Yamaha with hood raised	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
6	Front Driver's Side of Yamaha 4x4 with hood raised	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
7	Passenger side view of Yamaha 4x4	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
8	Front view of Yamaha 4x4	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9	Driver's side view of Yamaha 4x4	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
10	Driver's side seatbelt	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
11	Passenger side seatbelt	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
12	Area where victim was treated by EMS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
13	Victim's hat near blood on ground	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
14	Victim's clothes on ground removed by EMS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
15	Victim's clothes on ground	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
16	Blood on ground from victim and victim's hat	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
17	View of scene from area where victim was found	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
18	View of tire marks on ground from where victim was found toward where 4x4 came from	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
19	View of tire marks on ground from where victim was found toward direction 4x4 came from	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
20	Tire marks on ground from direction 4x4 came from	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
21	Overall view of ground from area 4x4 came from	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

Officer's Name and Rank Investigator James Goss	Officer's Signature 	I.D. Number 00017
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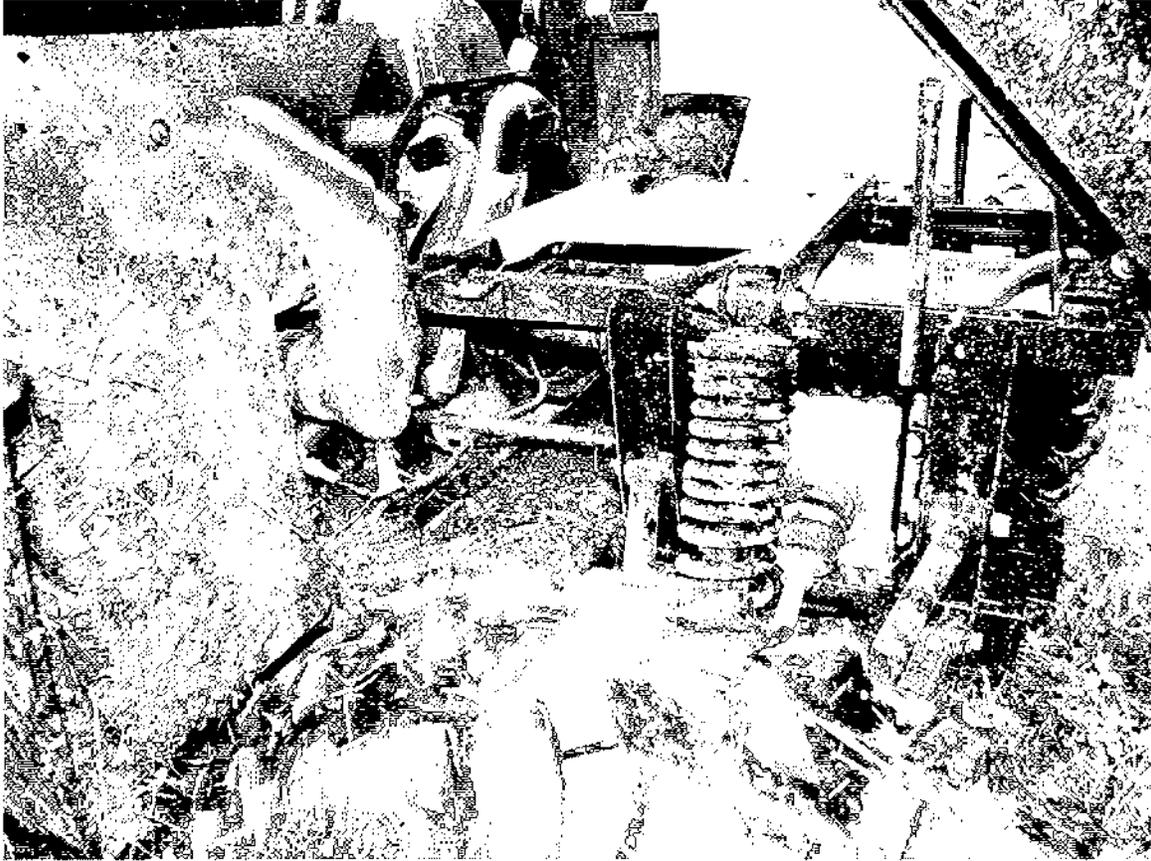
Police Photograph 1



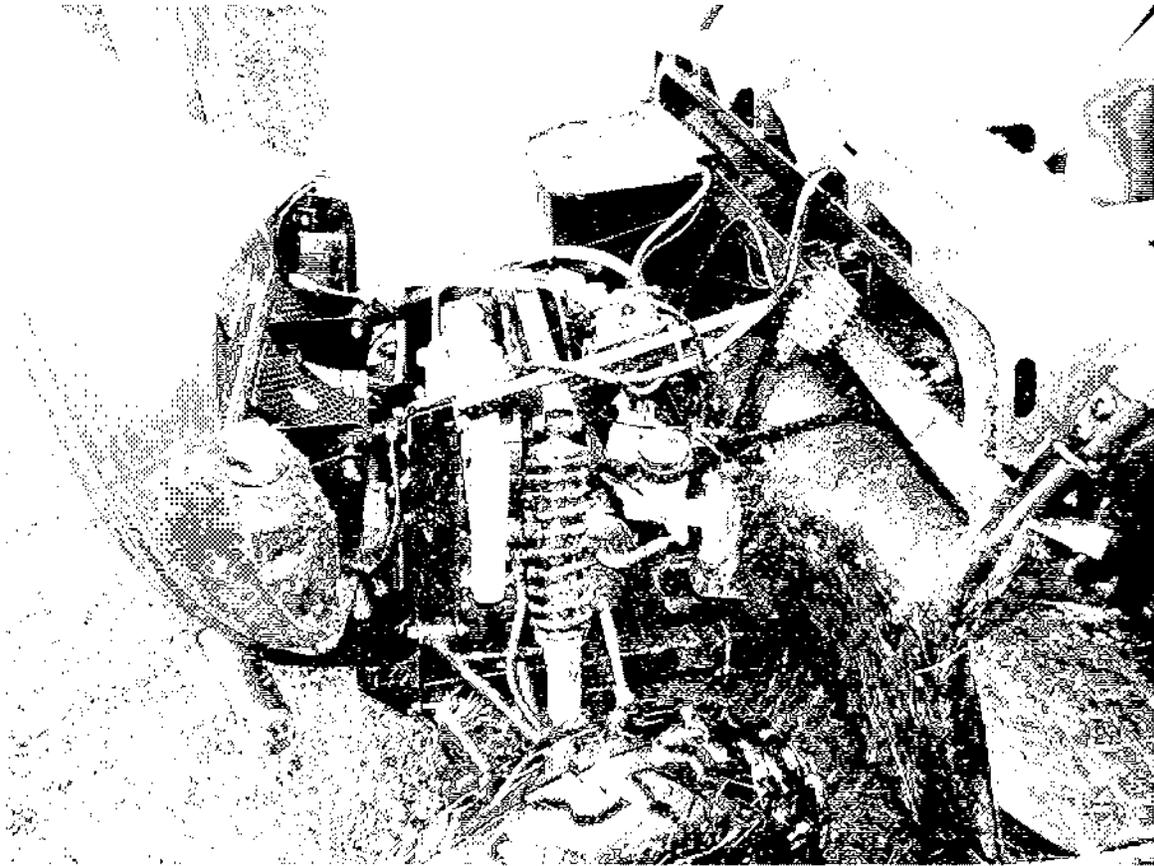
Police Photograph 2



Police Photograph 3



Police Photograph 4



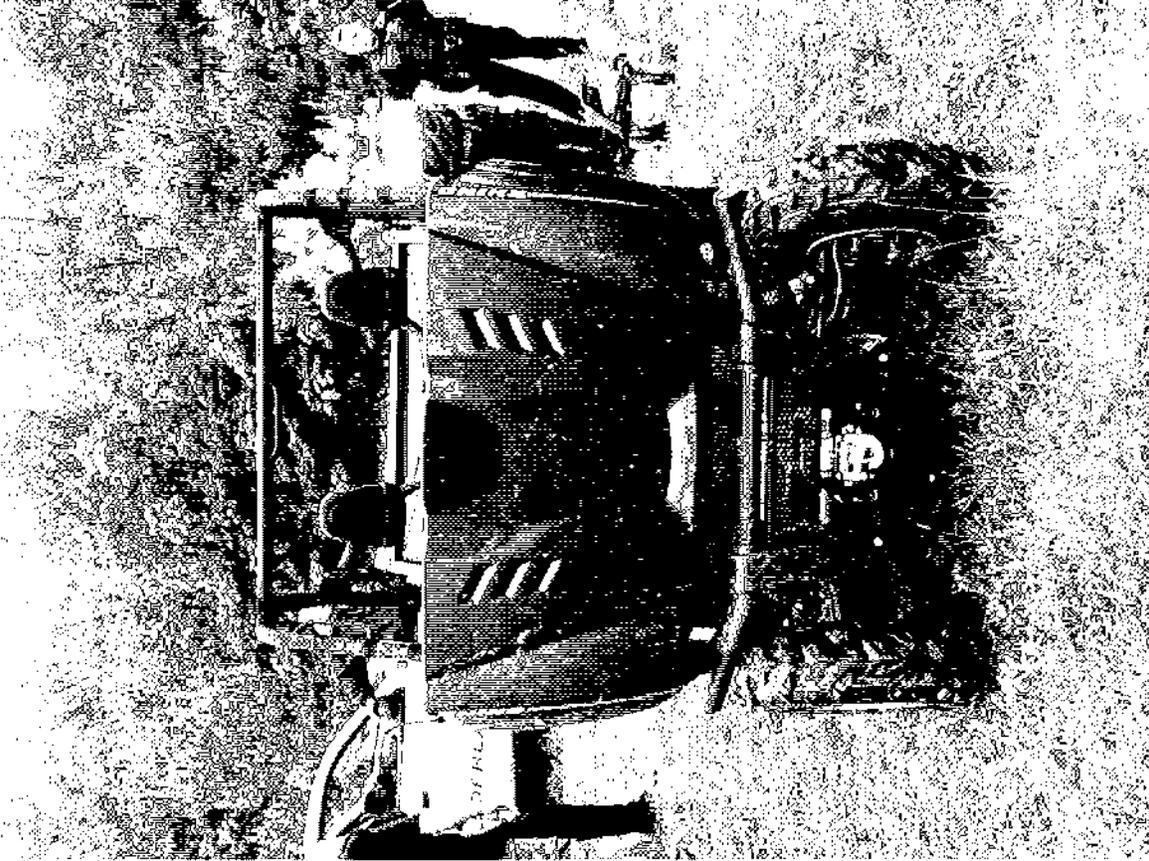
Police Photograph 5



Police Photograph 6



Police Photograph 7



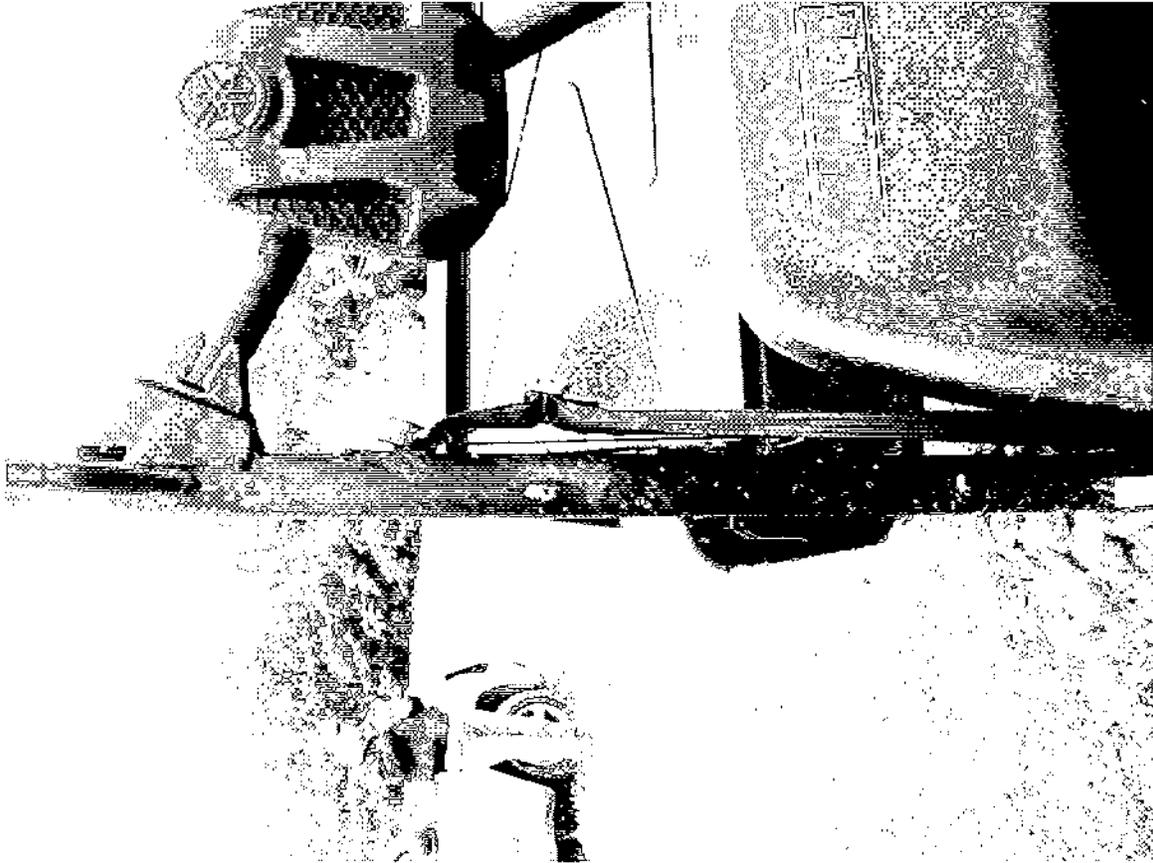
Police Photograph 8



Police Photograph 9



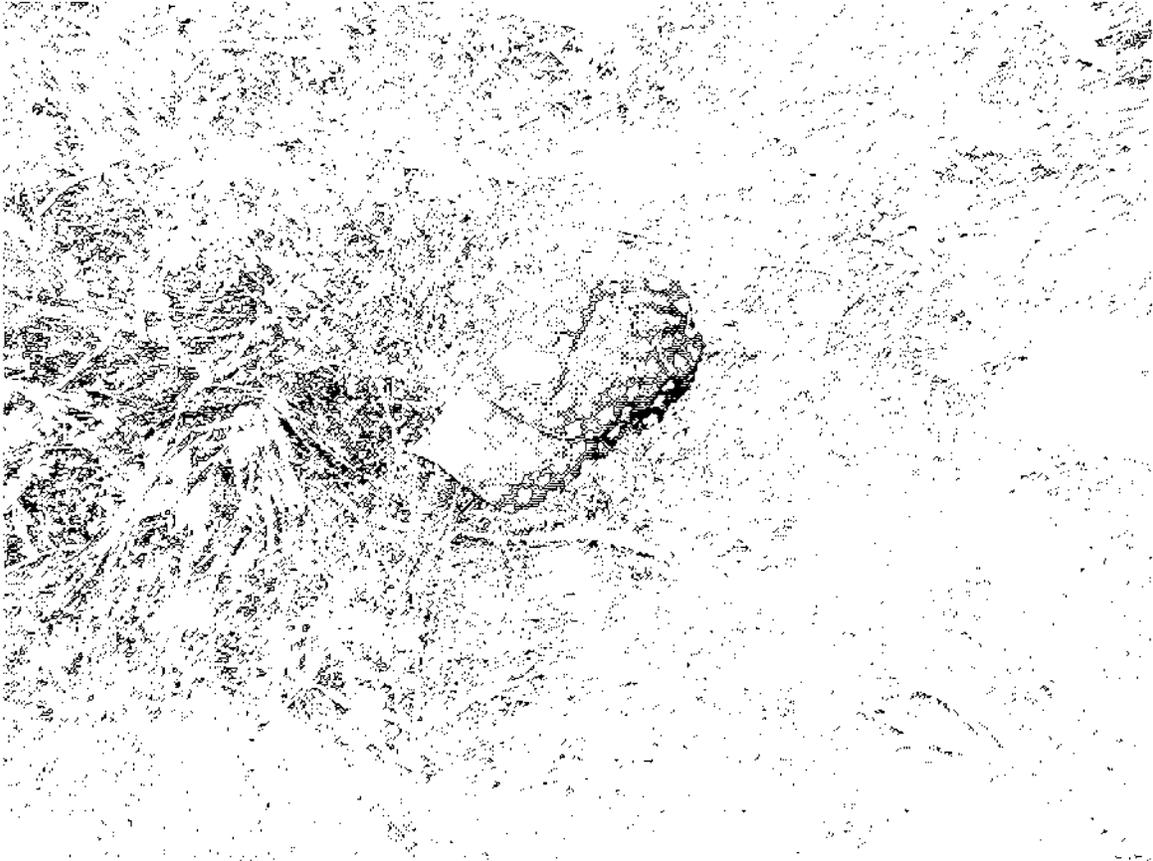
Police Photograph 10



Police Photograph 11



Police Photograph 12



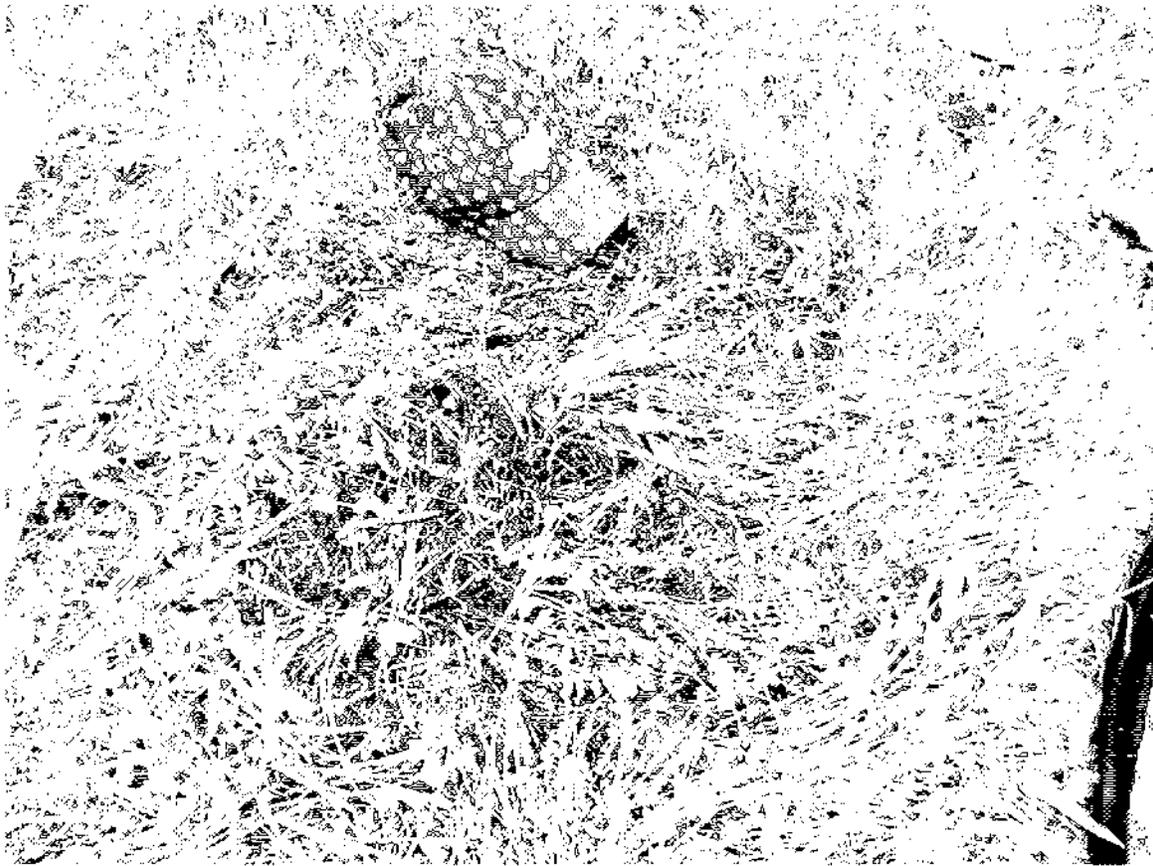
Police Photograph 13



Police Photograph 14



Police Photograph 15



Police Photograph 16



Police Photograph 17



Police Photograph 18



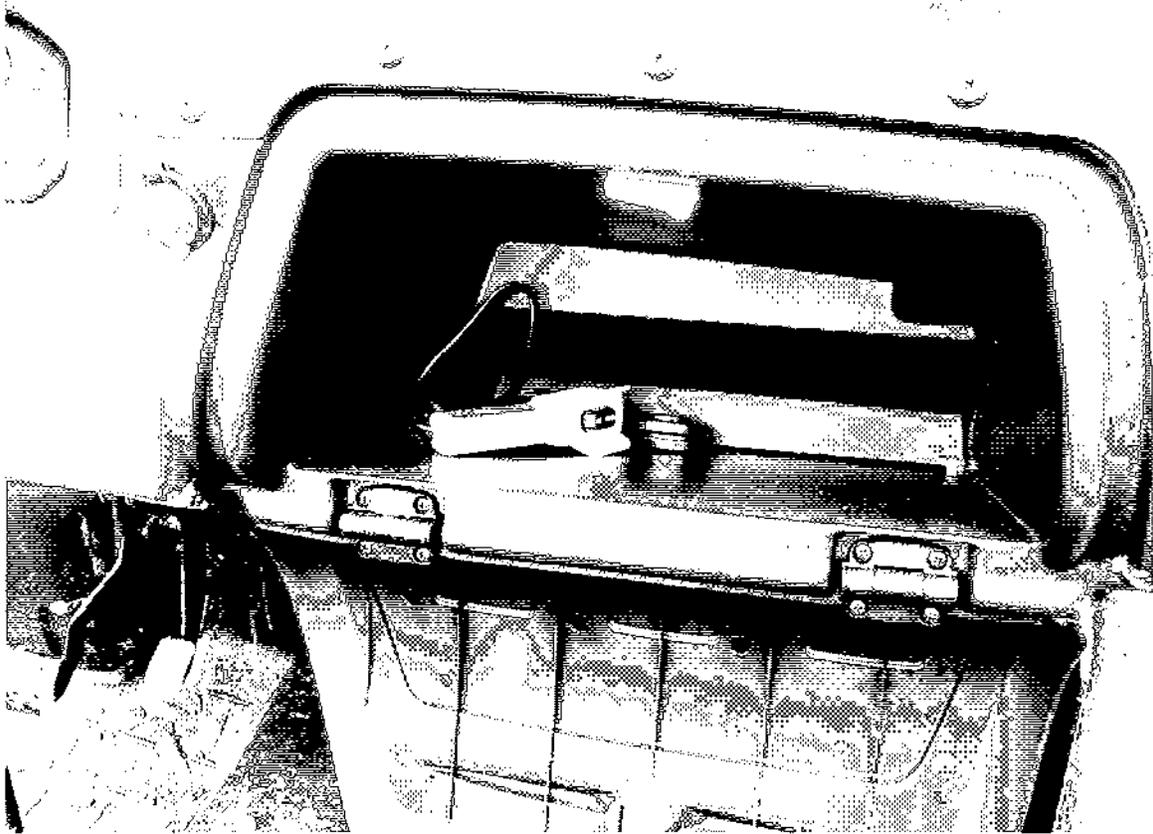
Police Photograph 19



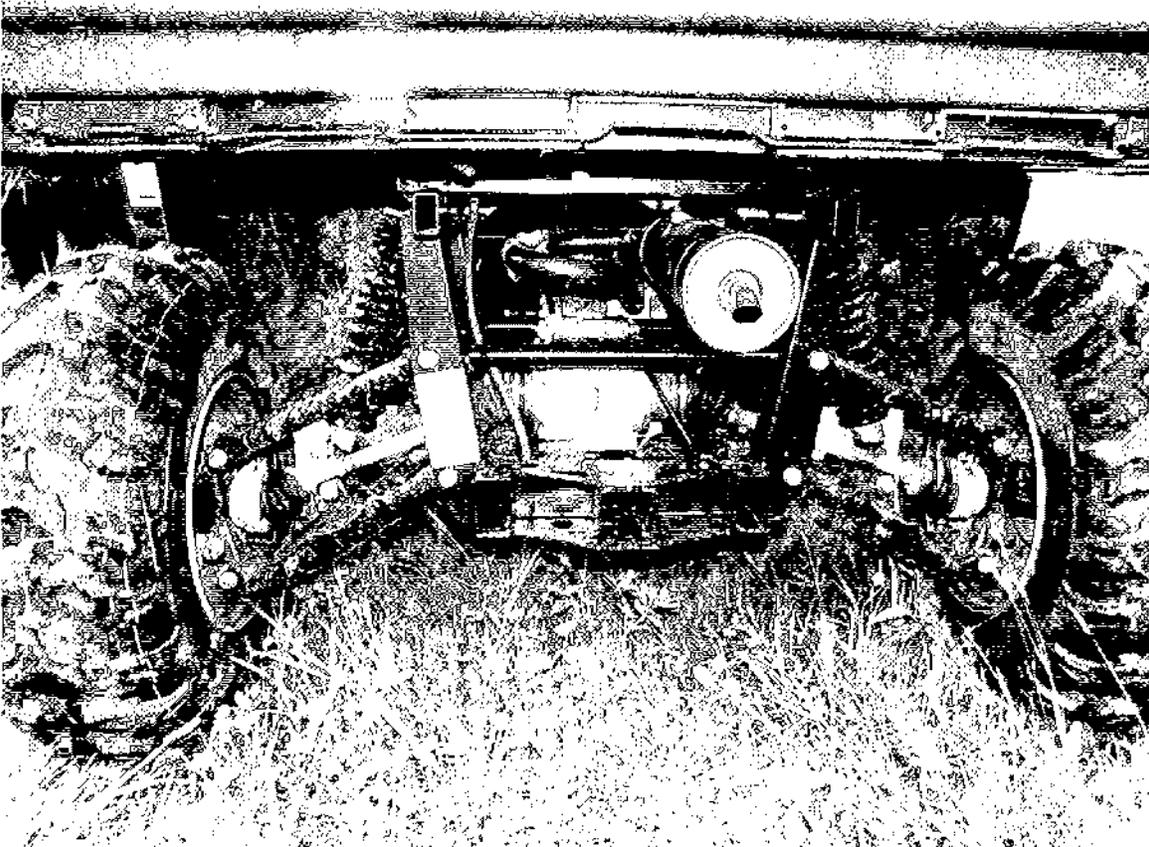
Police Photograph 20



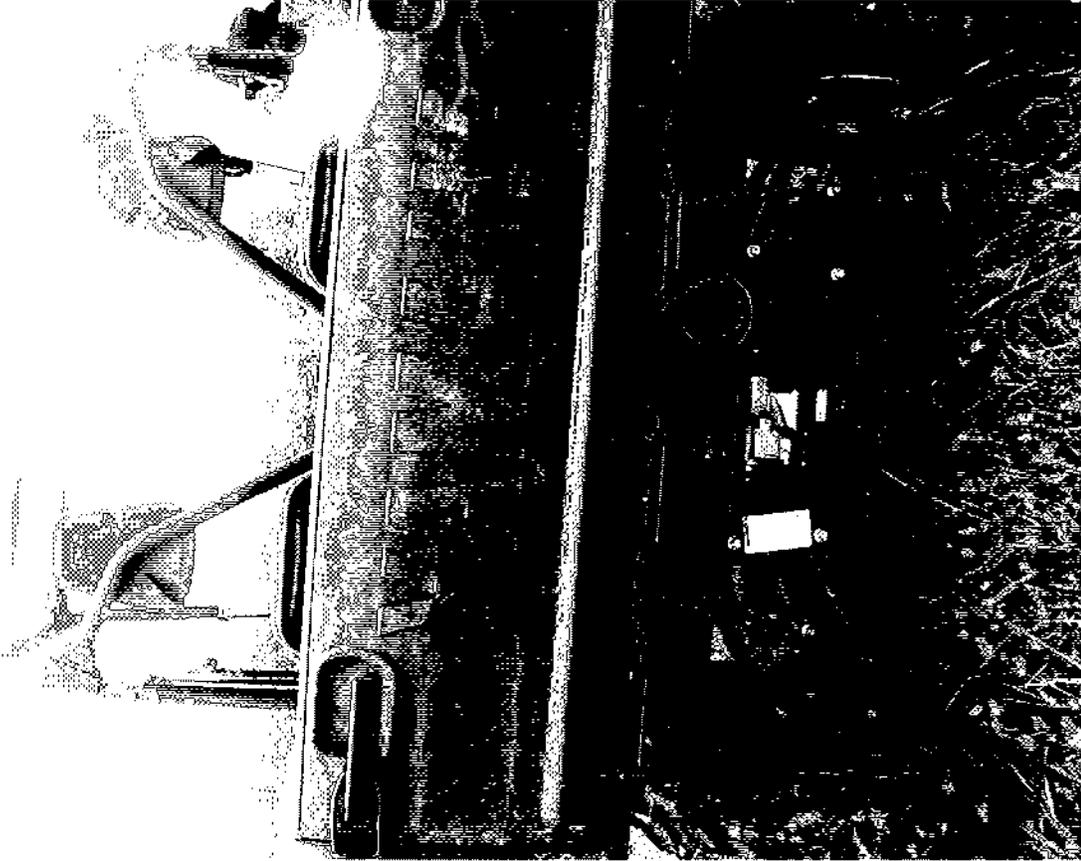
Police Photograph 21



Police Photograph 22



Police Photograph 23



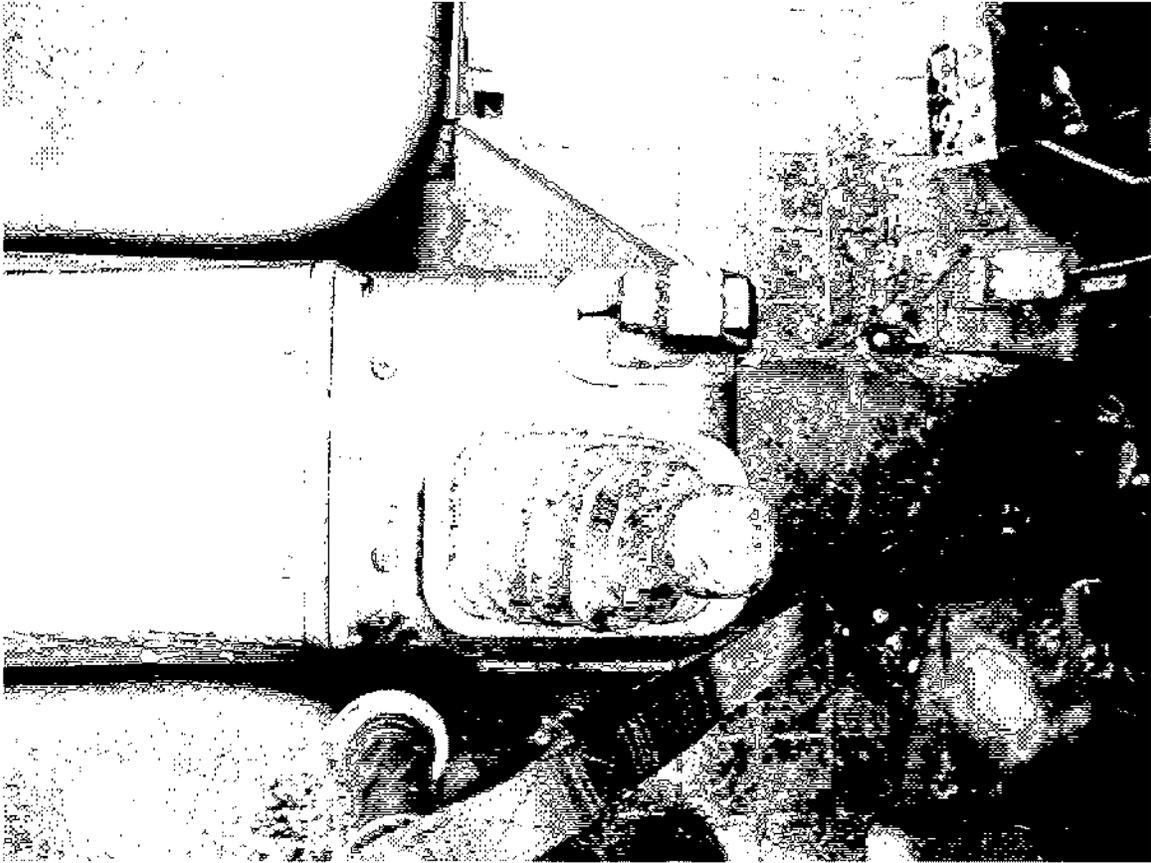
Police Photograph 24



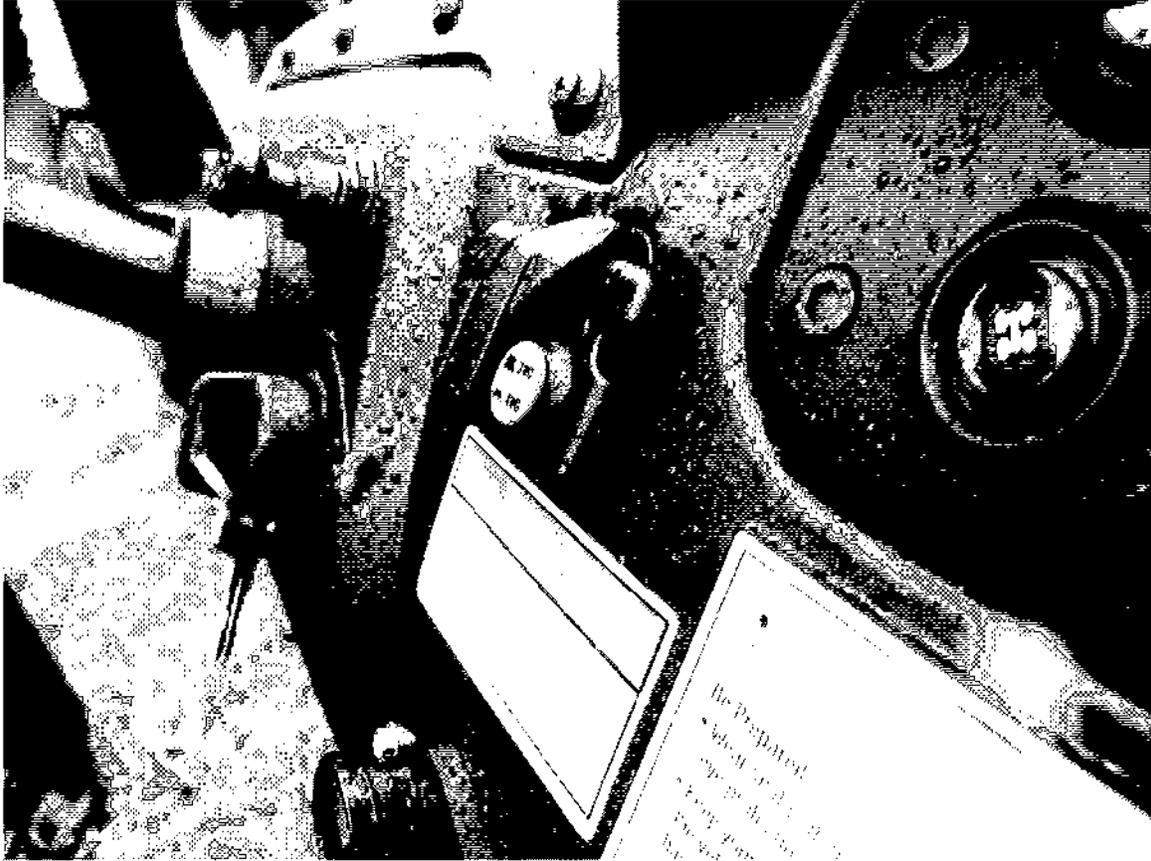
Police Photograph 25



Police Photograph 26



Police Photograph 27



Police Photograph 28

# A WARNING

To reduce risk of accidents and injury or death:

## Be Prepared

- Wear seat belt, motorcycle helmet, eye protection and protective gear.
- Keep your body completely inside the vehicle at all times. Keep both hands on the steering wheel. Be sure passenger is seated, belted, and holding onto the handholds.



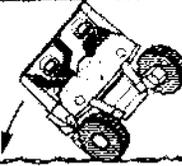
## Be Qualified and Responsible

- This vehicle is intended for use only by an operator 16 or older with a valid motor vehicle license.
- Passenger and driver must be able to place both feet flat on the floorboard while seated upright with their backs against the seat backs.
- Do not drive or ride as passenger after using drugs or alcohol.
- Do not operate on public roads.



## Avoid Rollovers and Crushing Injuries

- Use care when turning:
  - Turning the steering wheel too far or too fast can result in a rollover or loss of control.
  - Slow down before entering a turn.
  - When making tight turns from a stop or at slow speeds, avoid sudden or hard acceleration.
  - Avoid sideways sliding, skidding, or fishtailing, and never do donuts.



**Abrupt maneuvers or aggressive driving have caused rollovers - even on flat, open areas.**

- Drive straight up and down inclines, not across them. If crossing a hill is unavoidable, drive slowly and turn downhill immediately if you feel the vehicle may tip.

- Avoid paved surfaces. Turn gradually and go slowly if you must drive on pavement. This vehicle is designed for off-road use only.

## If you think or feel the Rhino may tip or roll:

- Brace yourself by pressing your feet firmly on the floorboards and keep a firm grip on the steering wheel or handholds.
- Do not put your hands or feet outside of the vehicle for any reason.

**Genuine Yamaha Doors and a Handhold/Strap are available for free installation or replacement. Yamaha recommends these features to help keep occupants from sticking arms or legs out of the vehicle during a rollover.**



Read the Owner's Manual

Contact your dealer or visit [www.yamaha-motor.com/rhino](http://www.yamaha-motor.com/rhino)

584-F1568-01

## Head to Toe Safety Checklist

- ✓ **Head**     Helmet and eye protection.
- ✓ **Body**     Seatbelt and protective clothing.
- ✓ **Hands**     Inside vehicle and holding the  
                         handholds or steering wheel.
- ✓ **Feet**        On floorboard, ready to brace,  
                         and door closed.

YAMAHA

5B4-F1558-00

Police Photograph 30

#090608CNE4481 N0960115A 6/8/09



## Death follows test drive

ISSUE 37

Rollover that killed boy, 13, came despite safety work

By DAVID FILKINS, Staff writer

**Click byline for more stories by writer.**

First published: Saturday, May 30, 2009

KNOX -- Thirteen-year-old James Wyatt Spencer, an experienced ATV rider, was driving a 2009 Yamaha Rhino with his friend Thursday when he hit a patch of wet grass and rolled. The machine flipped and landed on Spencer in a field more than 500 yards from his Bozenkill Road home.

His friend, 14-year-old Brian Pitts, pushed the machine off Spencer, ran home and called paramedics. Spencer was rushed to Albany Medical Center Hospital and was pronounced dead from massive head trauma at 5:10 p.m.

Family and friends knew him by his middle name, Wyatt. He had a great sense of humor and loved baseball. He rode dirt bikes and four wheelers and helped his mom care for their nine alpacas. He was an only child.

And he is far from the first person to die while riding a Yamaha Rhino.

The Yamaha Rhino has a roll cage and looks like a cross between a four wheeler and a lawn tractor. It weighs 1,105 pounds and is considered an ATU – the "U" stands for utility. It is made primarily for hauling and towing and has a small bed capable of carrying 400 pounds. Its top speed is less than 40 mph.

Yamaha released the Rhino series in 2003. On March 31, 2009, the company began offering a free repair program after the machines were deemed susceptible to rollovers. The work was recommended but not required because of the potential danger.

The Consumer Product Safety Commission said 46 people have died driving or riding a Rhino.

The boy's parents, James and Bonnie Spencer, wanted a machine to use for farm chores and bought the Rhino on May 20 from Gable Motorsports in Cobleskill.

They had heard about the potential for rolling so they had the store do the recommended work, installing spacers that would spread the rear wheels and limit the potential for an accident.

The work was completed earlier this week and the Rhino was delivered Thursday.

Spencer and Pitts, both good students, convinced their parents to let them skip school so they could test the new machine.

They rode for much of the afternoon. They did not wear helmets

Albany County Sheriff's Department Assistant Chief Craig Apple, who provided the information for this story along with Pitts' mother, Kelly Kallmer, said a certified mechanic will inspect the machine to see if the work was done correctly.

Apple said it's likely the Rhino would have flipped anyway because the teens were riding down a slope. No tickets have been issued.

There is not a minimum age for riding an ATU, though a sticker on every Rhino says it is not

recommended for riders under 16.

The boys rode during the day and took a break from the Rhino late Thursday afternoon. They parked it near the Spencer home and went inside to watch TV.

They played video games.

Soaked in the hot tub.

And around 5 p.m., they decided to go for one more ride.

David Filkins can be reached at 454-5456 or by e-mail at [dfilkins@timesunion.com](mailto:dfilkins@timesunion.com)

#### Service for boy

A memorial service for James Wyatt Spencer will be at the Knox Reformed Church at 3 p.m. Sunday. Memorial donations may be made in his memory to Fredendall Funeral Home to help with funeral arrangements. Read the obituary on page B6.



**090619HNE4524**

**ABBREVIATED NARRATIVE:**

This investigation was initiated based on a newspaper article. This investigator tried to contact the victim passenger's mother by telephone and letter but got no reply. This investigator contacted the Campbell County Sheriff to find out what happened to the utility vehicle but they did not know what happened to it. All they knew about the utility vehicle was the manufacturer and brand name. No photos were taken. The Campbell County Sheriff also told this investigator that none of the passengers or the driver was wearing helmets and they were on a paved road.

According to the Campbell County Sheriff's report, the incident happened on around 8:06 PM on 6/15/09 on Cedar Creek Road in LaFollette, TN. There were five people in the utility vehicle; The 21 year old male driver, the 26 year old female front seat passenger (she was the victim passenger's mother), the 6 year old victim male passenger sitting in the dump bed, the 34 year old male passenger sitting in the dump bed, and the 12 year old male sitting in the dump bed.

According to the Campbell County Sheriff's report, the 21 year old male driver lost control of the utility vehicle, left the road and struck a tree head on. The utility vehicle rolled down a 25 foot embankment and rested on its top. Two of the passengers who were in the dump bed were ejected from the utility vehicle. The driver, the front seat passenger and the victim male who was sitting in the dump bed were pinned under the utility vehicle.

**PRODUCT IDENTIFICATION:**

The product involved in the incident is a John Deere Gator utility vehicle.

Unknown year and owner.

Unknown date of manufacture and date of purchase.

Unknown VIN.

**ATTACHMENTS:**

Exhibit A – Campbell County Sheriff's Report.

Exhibit B – CPSC Data Recording Sheet for Utility Vehicle.

Exhibit C – CPSC Missing Document Form.

Exhibit D – Contact List.

Case: 090615

Classification:

Report Date: 06/15/2009

Report Time: 20:29

Occured From Date: 06/15/2009

Occured From Time: 20:06

Occured Thru Date:

Occured Thru Time:

UCR: NR - NOT REPORTABLE

Offense:

Location:

(b)(3):CPSA Section 25(c)

Zone:

Department: CCSO

Victim:

Race: W

Sex: F

D.O.B.: 04/06/2003

Address:

Phone:

Work Address:

Phone:

Person Arrested:

Race:

Sex:

D.O.B.:

Complainant:

Race:

Sex:

D.O.B.:

Address:

Phone:

Witness:

Race:

Sex:

D.O.B.:

Address:

Phone:

Witness:

Race:

Sex:

D.O.B.:

Address:

Phone:

Vehicle License #:

State:

Year: 0

Type:

V.I.N.:

Year: 0

Make:

Model:

Style:

Color:

Description:

Weapon:

Serial No:

Make:

Caliber:

Type:

PROPERTY:

TOTAL VALUE:

\$0.00

Reporting Officer: Id JH01 - HEATHERLY, JASON

Badge:

Unit #:

Approving Officer ID:

Investigator Assigned:

Case Status:

Narrative

WRITER IS A DEPUTY WITH THE CAMPBELL COUNTY SHERIFF'S OFFICE. ON 06/15/09, I WAS DISPATCHED TO 4211 CEDAR CREEK ROAD LAFOLLETTE, TN IN REFERENCE TO AN ATV ACCIDENT. THE ATV WAS TRAVELING WEST DOWN THE PRIVATE DRIVE. DRIVER OF THE ATV LOST CONTROL AND LEFT THE ROADWAY TO THE LEFT SIDE AND STRUCK A LARGE TREE HEAD ON. AFTER THE ATV STRUCK THE TREE, IT ROLLED ONE TIME DOWN AN APPROXIMATELY 25 FOOT EMBANKMENT AND CAME TO A FINAL REST ON IT'S TOP. THE ATV HAD A DUMP BED WHERE (b)(6) (b)(6) WERE RIDING. (b)(6) WERE EJECTED AND THE OTHER THREE SUBJECTS WERE PINNED UNDER THE ATV.

DRIVER: (b)(6) DOB 01/13/88 (21)

FRONT SEAT PASSENGER: ELIZABETH GOODMAN 432 POWDER MILL LN LAFOLLETTE, TN 37766 DOB 08/13/82 (26)

PASSENGER IN DUMP BED: (b)(6), TN 37766 DOB 04/06/03 (6)

PASSENGER IN DUMP BED: (b)(6) DOB 07/18/74 (34)

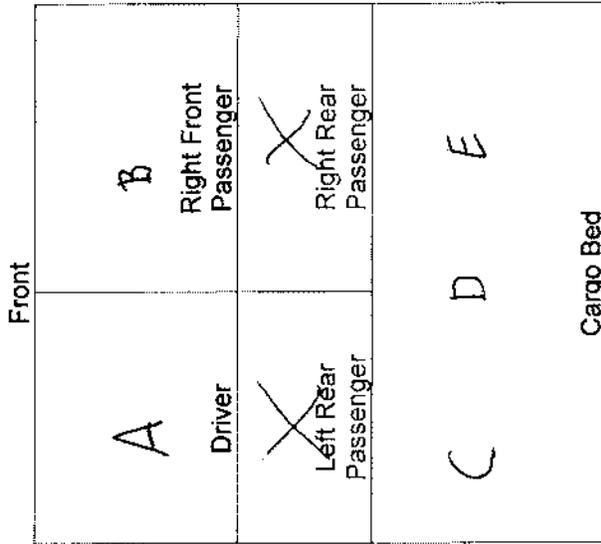
PASSENGER IN DUMP BED: (b)(6) DOB 11/07/96 (12)

Form Of Report

Officer Signature

Date

Utility Vehicle Data Record Sheet



The Utility Vehicle

**A:** Age: 21 | Height: | Weight: |  
 Gender: M |  
 Helmet (Y/N): N | Seatbelt (Y/N): |  
 Killed/Injured/Neither/Unknown: |  
 Injury Description: |  
 Did vehicle land on victim: |  
 Ejected (Either partially or fully):

**B:** Age: 26 | Height: | Weight: |  
 Gender: |  
 Helmet (Y/N): N | Seatbelt (Y/N): |  
 Killed/Injured/Neither/Unknown: Killed  
 Injury Description: LAK  
 Did vehicle land on victim: |  
 Ejected (Either partially or fully):

**C:** Age: 6 | Height: | Weight: |  
 Gender: M |  
 Helmet (Y/N): | Seatbelt (Y/N): |  
 Killed/Injured/Neither/Unknown: Killed  
 Injury Description: |  
 Did vehicle land on victim: Yes  
 Ejected (Either partially or fully):

**D:** Age: 34 | Height: | Weight: |  
 Gender: M |  
 Helmet (Y/N): N | Seatbelt (Y/N): |  
 Killed/Injured/Neither/Unknown: |  
 Injury Description: |  
 Did vehicle land on victim: |  
 Ejected (Either partially or fully): 117

**E:** Age: 17 | Height: | Weight: |  
 Gender: M |  
 Helmet (Y/N): | Seatbelt (Y/N): |  
 Killed/Injured/Neither/Unknown: Injured  
 Injury Description: 346  
 Did vehicle land on victim: |  
 Ejected (Either partially or fully): Fully

**F:** Age: | Height: | Weight: |  
 Gender: |  
 Helmet (Y/N): | Seatbelt (Y/N): |  
 Killed/Injured/Neither/Unknown: |  
 Injury Description: |  
 Did vehicle land on victim: |  
 Ejected (Either partially or fully):

\*If victim(s) were injured/killed, please include the other relevant information requested in the assignment message in the text of the IDI.

Using the figure on the left, please fill in where the occupants were in the vehicle at the time of the incident using A, B, C, etc. to identify the occupant(s) location. Fill in the occupants' characteristics in the corresponding location on the right. For example, the driver could be assigned to the letter 'A' and the letter 'A' would be placed in the diagram in the box designated 'Driver', and the drivers' characteristics would be filled on the right. If there were more than six occupants (or more room is needed), please add the other passenger(s) information (any other information) as needed. If information is not available, please indicate by 'na'.

Note: Not all locations indicated on the diagram exist in all types of utility vehicles. Please only use the locations that correspond to the incident vehicle. Please place an 'X' over the area if the vehicle was not equipped with the component.

## STATUS OF MISSING DOCUMENT

The purpose of this record is to notify the reader that the following document(s), which is/are missing from this report, will not be collected.

1. Campbell County Coroner's Report
2. Campbell County Sheriff's Photos
3. \_\_\_\_\_

The investigator indicates in the report that he/she requested a copy of the above listed document(s), but the document(s) was/were not yet available when the investigation report was completed. The investigator intended to forward the document(s) for attachment to this report when the requested material was obtained.

The investigator has made numerous attempts, since the original request, to collect a copy of the requested document(s) but has not been successful. Because of the problems associated with the collection of this material and our limited investigation resources, no additional efforts will be made to collect the missing document(s).

We apologize for any inconvenience the missing data may cause you.

Date: October 29, 2009

Investigator No.: 9027

Regional Office: 8180

Supervisor No.: 9001

**US CONSUMER  
PRODUCT SAFETY  
COMMISSION**

# Memo

**To:** Stephen V. Mele, Supervisory Investigator, CFIE  
**From:** Jonathan C. Williams, Investigator, CFIE  
**Date:** 10/29/2009  
**Re:** Contact List for 090619HNE4524

---

Campbell County Coroner's Office  
(Campbell County Clerk)  
195 Kentucky Street  
Jacksboro, TN. 37757

(b)(6)



## **U.S. Consumer Product Safety Commission**

P.O. Box 253, Chicago, IL., 60690-0253

**DATE:** 10/14/09

**TO:** Elizabeth Goodman

**RE:** Incident Records and Information

I am Jonathan C. Williams, an Investigator with the eastern regional of the U.S. Consumer Product Safety Commission (CPSC). The CPSC is a federal regulatory agency and has jurisdiction over about 15,000 types of consumer products including toys, tools, appliances, fireworks, clothing, chemicals, etc.. Our agency mission is to **“Protect the Public against unreasonable risk of death or injury associated with consumer products.”** The Commission was founded upon the Consumer Product Safety Act of 1971.

In this effort, we investigate incidents and deaths that are product related. Some of these incidents involve people in your community. Accurately investigating and documenting such accidents is crucial in our attempts to reduce the number injuries and deaths caused by these types of incidents.

I understand you; have information about an incident we are investigating. **Under Freedom of Information Act (FOIA), I am requesting information about and copies of any reports, pictures, records and test or investigative results you have in your possession, regarding the following events:**

**DATE:** 06-14-2009

**NAMES:** (b)(3):CPSA Section 25(c)

**Location:** La Follette, TN

**Product:** ATV

**Report #:**

**Please contact me as soon as possible, so we may expedite this inquiry. The CPSC is very interested in this case.** I would like an opportunity to ask the following questions: Do you know the type, brand, or model of the products involved in this incident? Is the product(s) available for me to examine? Was it examined by anyone in your organization? If so, who?

**Please call me at 312-479-4701, as soon as possible. Please FAX any reports, your office may have on this incident, to me at 866-541-6468.**

Thank you for your assistance in this investigation. All information provided on this incident will be used to study accident scenarios involving consumer products. The CPSC appreciates the interest you have shown in helping us to reduce the unreasonable risk of injury and death from consumer products. Thank you for supporting the Commission.

Sincerely,

Jonathan C. Williams, Investigator

**U.S. Consumer Product Safety Commission**

P.O. Box 253, Chicago, IL., 60690-0253

DATE: 6/29/09

TO: Campbell County Coroner's Office

RE: Incident Records and Information

I am Jonathan C. Williams, an Investigator with the eastern regional of the U.S. Consumer Product Safety Commission (CPSC). The CPSC is a federal regulatory agency and has jurisdiction over about 15,000 types of consumer products including toys, tools, appliances, fireworks, clothing, chemicals, etc.. Our agency mission is to **"Protect the Public against unreasonable risk of death or injury associated with consumer products."** The Commission was founded upon the Consumer Product Safety Act of 1971.

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**DATE:** 06-14-2009

**NAMES:** (b)(3):CPSA Section 25(c)

**Location:** LaFollette, TN.

**Product:** ATV

**Report #:**

**Please contact me as soon as possible, so we may expedite this inquiry. The CPSC is very interested in this case.** I would like an opportunity to ask the following questions: Do you know the type, brand, or model of the products involved in this incident? Is the product(s) available for me to examine? Was it examined by anyone in your organization? If so, who?

Please call me at 312-479-4701, as soon as possible. **Please FAX any reports, your office may have on this incident, to me at 866-541-6468.**

Thank you for your assistance in this investigation. All information provided on this incident will be used to study accident scenarios involving consumer products. The CPSC appreciates the interest you have shown in helping us to reduce the unreasonable risk of injury and death from consumer products. Thank you for supporting the Commission.

Sincerely,

Jonathan C. Williams, Investigator

## 6 yr old dies of injuries after Monday's ATV crash

LAFOLLETTE, Tenn. (WVLT) -- A 6-year-old boy died Tuesday at UT Medical Center after an ATV crash in Campbell County Monday night.

(b)(3):CPSA Section 2 was one of five people injured, including his mother, with an ATV they were riding went off a steep embankment.

(b)(6), is still in the hospital. She was planning to get married this weekend.

(b)(6) was a first grader at LaFollette Elementary School.

The incident happened near the Cedar Creek Bridge on Cedar Creek Road.

A 12-year-old was also injured in the crash.

Funeral arrangements for (b)(6) are set for 2 p.m. Tuesday at Coolidge First Baptist Church with interment to follow at Bakers Forge Cemetery.

<http://www.volunteertv.com/home/headlines/48534932.html>



**SYNOPSIS:**

On June 21, 2009, a 38 year-old male consumer was operating his off-highway recreational utility vehicle, turning at a low speed and on level terrain when it suddenly tipped over on its side. The UTV operator sustained head injuries, the passenger was not injured. There was no property damage or content loss at the consumer's single family residence in Mansfield, Ohio, where the incident occurred.

The information in this narrative was obtained from reviewing records received from the reporting consumers and a follow-up interview with the injured consumer and his wife who was a witness to the incident. The incident consumer has many years of experience operating motorcycles, all terrain vehicles and dirt bikes.

The UTV unit was purchased used with 265 miles on the odometer for \$9,500, on November 26, 2008, from a private owner in Indiana. The consumers found the UTV listed for sell on Craig's List.

The private owner of the UTV explained that he paid approximately \$15,000 for the UTV and was selling it in order to purchase himself an ATV. The private owner drove from Indiana with the UTV on a trailer to deliver it to the consumers at their home in Ohio.

The private owner turned over documents to the incident consumers regarding the UTV. A repair order invoice dated August 14, 2008, for the first service on the UTV unit that included an oil filter at a cost of \$143.19 including tax. According to the documents, on the same date, a brake caliper kit for a left front brake caliper recall was installed under the warranty.

The documents also included a Yamaha Extended Service Plan Contract, Maintenance Log and Identification Card issued from the dealer in Indiana with a date sold of February 23, 2008. The Yamaha Extended Service Plan will expire on August 23, 2012.

The consumers did not have any previous problems with the UTV unit. The consumers did not perform any repairs or modifications to the UTV unit before or after the incident. The condition of the UTV unit was like new and mechanically in good operating condition. All components were original as purchased from the private owner. The UTV was stored in the garage between uses and was not left out in the elements.

The consumers reviewed the accompanying literature when the UTV unit was first purchased. When it was used, the UTV was operated according to the manufacturer's recommendations.

The consumers purchased the manufacturer's snow plow kit SSV-5UG84-XX-OO, YXR 450/660, for approximately \$1200, and found the installation instructions adequate for an easy attachment of the plow. The consumers used the UTV approximately four times during the winter of 2008-2009, with the manufacturers plow attachment, for snow removal from the driveway on their property and sometime their neighbor's property.

In May 2009, the consumers put the incident UTV on a trailer to transport to a friend's property where they operated the UTV on the friend's five acres with trails.

The 38 year-old, 6'1" tall, 225 lbs male consumer was in good health although suffering from a leg injury sustained on his job. According to the consumer his leg injury did not contribute to the cause of the incident or hinder his quick reaction and escape from the UTV accident. He had no other recent illnesses or medical concerns. The consumer states he was not under the influence of alcohol, medication or drugs.

The consumer's were hosting a cook-out at their home on the day of the incident. The time was approximately 3 pm with clear to partly cloudy alternating weather conditions. The temperature was approximately 79 degrees Fahrenheit, 54% humidity and visibility was 10 miles with an 11.5 mph NNW wind.

The male consumer was operating his UTV in the backyard of his one acre property and giving rides to their guests, one person at a time. He was driving his guests in a big, wide circle in the UTV for between 1-2 hours following the same path for each ride. At times the highest speed he traveled was approximately 20 mph.

There were no accessories attached to the UTV unit at the time of the incident. The consumer was not hauling any passengers or anything else in the cargo bed of the UTV. He was not pulling or towing any objects with the UTV unit.

The consumer was gradually making a wide circle turn at a reduced speed of approximately 10 mph around the flat level dry grassy yard with a male passenger that was receiving his second ride in the UTV. The consumer and the 21 year-old, 5'10" tall, and 180 lbs male passenger were both wearing shorts with short-sleeved t-shirts and the consumer wore a baseball cap. Both men wore the seat and hip restraints but were not wearing any helmets. There was no horseplay or arms and legs sticking outside of the UTV unit.

Suddenly the UTV started to tip over in slow motion as the consumers describe it and landed on its passenger side. Family and guests responded to upright the UTV with the help of the uninjured passenger who managed to unbuckle his seatbelt and remove himself from the vehicle. The UTV operator was still buckled in his seat.

After the UTV was up righted, the operator's seat belt was unbuckled and he was removed from the driver side of the UTV. The passenger removed his own t-shirt and it was used to apply pressure to the UTV operator's bleeding head wounds. He stood up while his daughter held the t-shirt to his bleeding head and he was helped into the back of the UTV's cargo bed where he was able to lie down. The UTV operator was bleeding profusely from his head and appeared to blank out for a few minutes and become dazed and disoriented although he did not close his eyes. The consumer states he can remember the UTV tipping over and then the next thing he remembers is being in the back of the UTV's cargo bed.

The injured consumer states that due to him no longer having health benefits coverage, he did not choose to seek medical attention via a hospital, urgent care or doctor's office visit. Instead the

consumers phoned a relative that is a radiologist and asked for her medical advice on how to get the wounds to stop bleeding and how to administer first aid at home.

The consumer washed the head wounds with soap and water in the shower and his head was wrapped in a clean bandage. The consumer's wife felt he really was in need of sutures to close up the two open wounds on the consumer's head. One wound was on the top right side of his head and the other was toward the right front on his hairline and his forehead. Both wounds were approximately 2" long. The consumer's wife sat up all night with him on their sofa. She kept watch over him through the night as his wounds continued to seep until approximately 10 pm.

The consumer called off work the following day after the accident. He complained of a bad headache for several days following and at times will still experience a sharp pain in his head with an accompanying headache. The consumer has since resumed his normal activities although he is left with scars on his head and scalp.

The consumers immediately discontinued use of the UTV unit. After it was up righted and checked the consumers did not find any damage to the UTV unit. The consumers could not ascertain what caused the injuries to the UTV operator's head. Several areas in the UTV's interior were spattered with the consumer's blood. The roof of the unit was slightly out of alignment. The consumers loosened the roof latches so they could slide it back into place. The UTV unit did not appear to have been involved in an accident.

The consumers came across a CPSC Recall Alert regarding their UTV after the accident. They were not aware of the recall notice prior to the accident. The consumers contacted their local UTV dealer shortly after the accident who offered to add them to his list to have the free repairs performed to their UTV unit. The consumers did not contact the manufacturer.

The consumers believe the design defects and a lack of safety features cause the UTV to tip over during low speeds and the UTV units present a potential injury or death hazard.

### **PRODUCT DESCRIPTION:**

**2008, Yamaha Rhino 700 FI Sport Edition, Silver Utility Vehicle, Model No. YXR70FSPX, VIN No. 5Y4AM21Y18A000112, Serial No. AM21Y 0000112, UltraMatic, Diff-Lock On-Command 4x4 with steering wheel, bucket seats, dome light, fuel injected with cargo bed. Gross vehicle weight rating: 2000 lbs maximum including vehicle, weight of operator passenger, accessories, cargo and trailer tongue weight.**

Maintenance Log Primary ID: 5Y4AM21Y18A000112

#### **Dealer:**

Consumer, Carlin R. Smith Jr.  
5316 Edinburgh Court  
Lafayette, Indiana 47905-7587

**Manufacturer:**

Yamaha Motor Corporation USA  
US Corporate HQ  
6555 Katella Avenue  
Cypress, CA 90630  
800 962-7926  
[www.yamaha.com](http://www.yamaha.com)  
[www.yamaha-motor.com](http://www.yamaha-motor.com)

The consumers currently maintain possession of the incident UTV unit.

**PRODUCT LABELING:****WARNING**

Do not rest hands on door or hip restraint bar. To avoid injury, keep hands completely inside the vehicle by holding the steering wheel or handholds.

**WARNING**

Any part of your body (...) outside of the vehicle can be crushed by the cage/frame. If you think of feel that the vehicle may tip or roll, brace your feet on the floorboards, and keep your hands on the handholds. Do not try to stop a vehicle tip over using your arm or leg.

**ATTACHMENTS:**

- Exhibit A - Persons Interviewed or Contacted (1 page)
- Exhibit B - Victim Identity (1 page)
- Exhibit C - Photos (45)
- Exhibit D - CPSC Recall Release #09-172, March 31, 2009 (3 pages)
- Exhibit E - Incident Consumer's UTV Bill of Sale, date signed 11/26/2008 (1 page)
- Exhibit F - Repair Order Invoice #5037723, Invoice #477618, dated 8/14/2008 (1 page)
- Exhibit G - Yamaha Extended Service Plan Contract, ID Card & Maintenance Log (3 pages)
- Exhibit H - CPSC Authorization for Release of Name (1 page)

**PERSONS INTERVIEWED or CONTACTED:****Exhibit A**

Consumers, Greg & Laurie Gleisinger (7/9/09...8/14/09)  
855 Shelby Ontario Road  
Mansfield, Ohio 44906  
Phone 419 522-9259  
[Kustom1955@aol.com](mailto:Kustom1955@aol.com)

Halcs Harley-Davidson (incident consumers purchased plow kit and contacted for recall repairs)  
1400 Harrington Memorial Road  
Mansfield, Ohio 44903  
Phone 419 522-8602  
Fax 419 522-5131

Greenfield Motor Sports, LLC (original purchasing consumer's dealer where UTV purchased)  
Dealer No. 304580  
4606 S. 100 E.  
Greenfield, Indiana 46140-9269  
Phone 317 462-2262

Max Pitts Yamaha, Inc. (original purchasing consumer's 1<sup>st</sup> service on UTV performed here)  
2990 S. U.S. 31  
Peru, Indiana 46970  
Phone 765 472-2423

**VICTIM IDENTITY:**

**Exhibit B**

Consumer, Greg Gleisinger  
855 Shelby Ontario Road  
Mansfield, Ohio 44906  
Phone 419 522-9259  
[Kustom1955@aol.com](mailto:Kustom1955@aol.com)

PHOTOS:

Exhibit C



Photo #1 – The consumer in the UTV Cargo Bed immediately after the incident



Photo #2 – The Consumer’s Forehead/Hairline Wound



Photo #3 – Consumer's Top of Head Wound

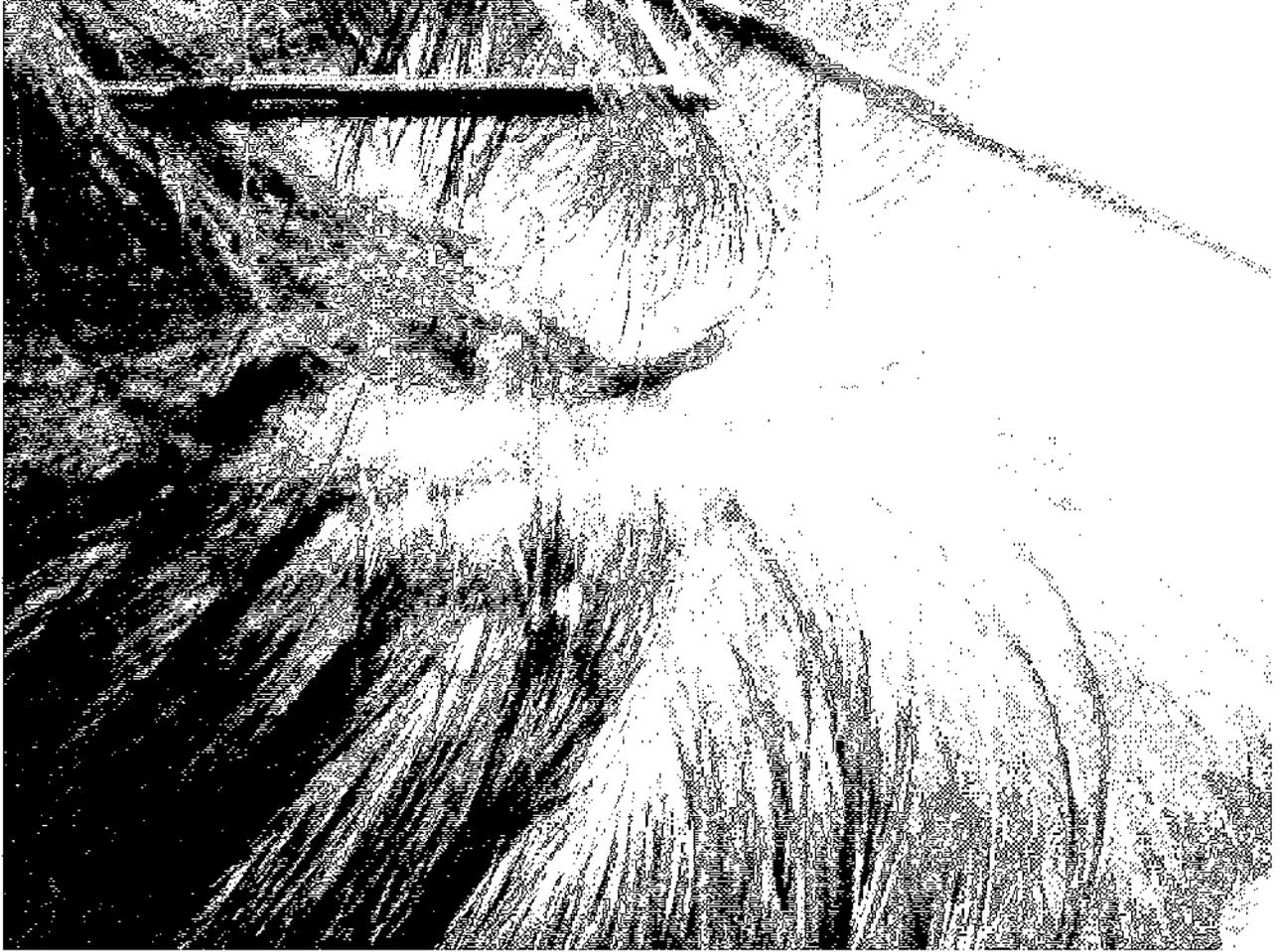


Photo #4 – Consumer's Top of Head Wound



Photo #5 - The Consumer's Forehead/Hairline Wound



Photo #6 - Consumer's Top of Head Wound Consumer's Top of Head Wound



Photo #7 – Consumer's Bandaged Head



Photo #8 – Consumer’s Scarred Scalp appx 2 months after Incident



Photo #9 - Consumer's Scarred Scalp appx 2 months after Incident



Photo #10 - Incident UTV

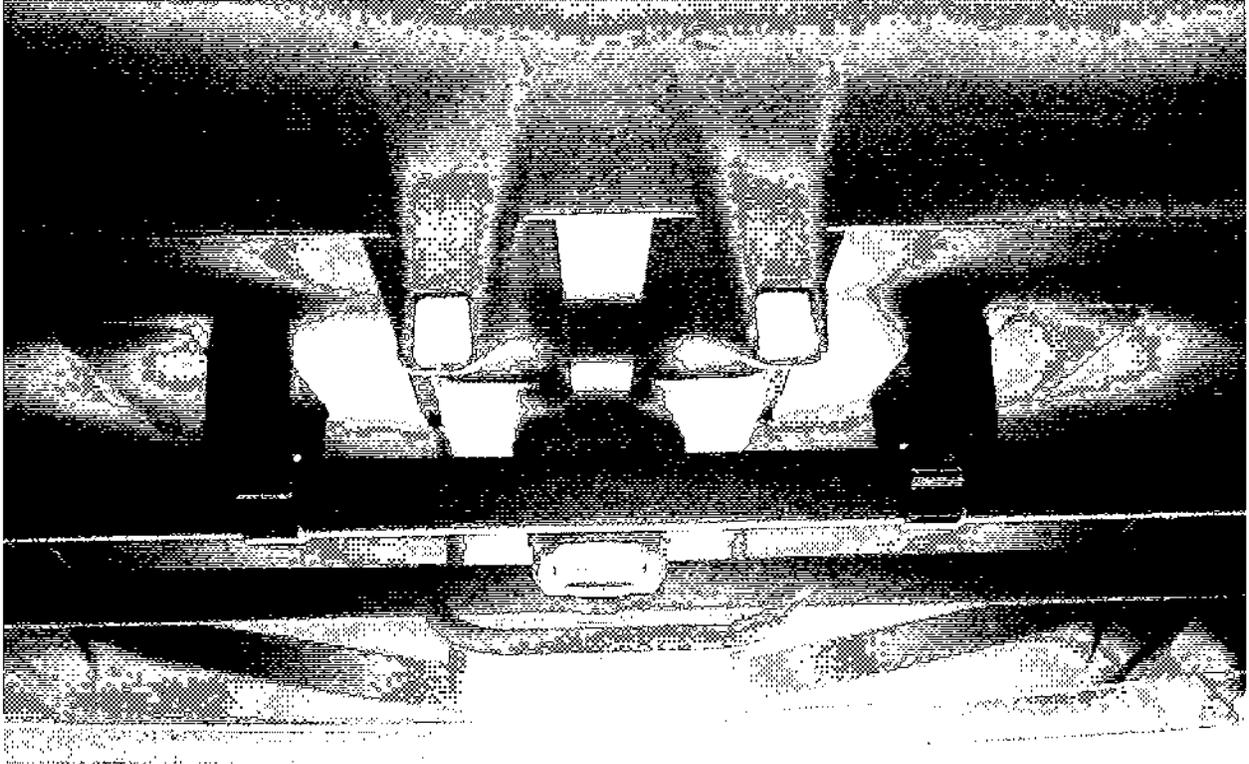


Photo #11 - Incident UTV Inside Roof

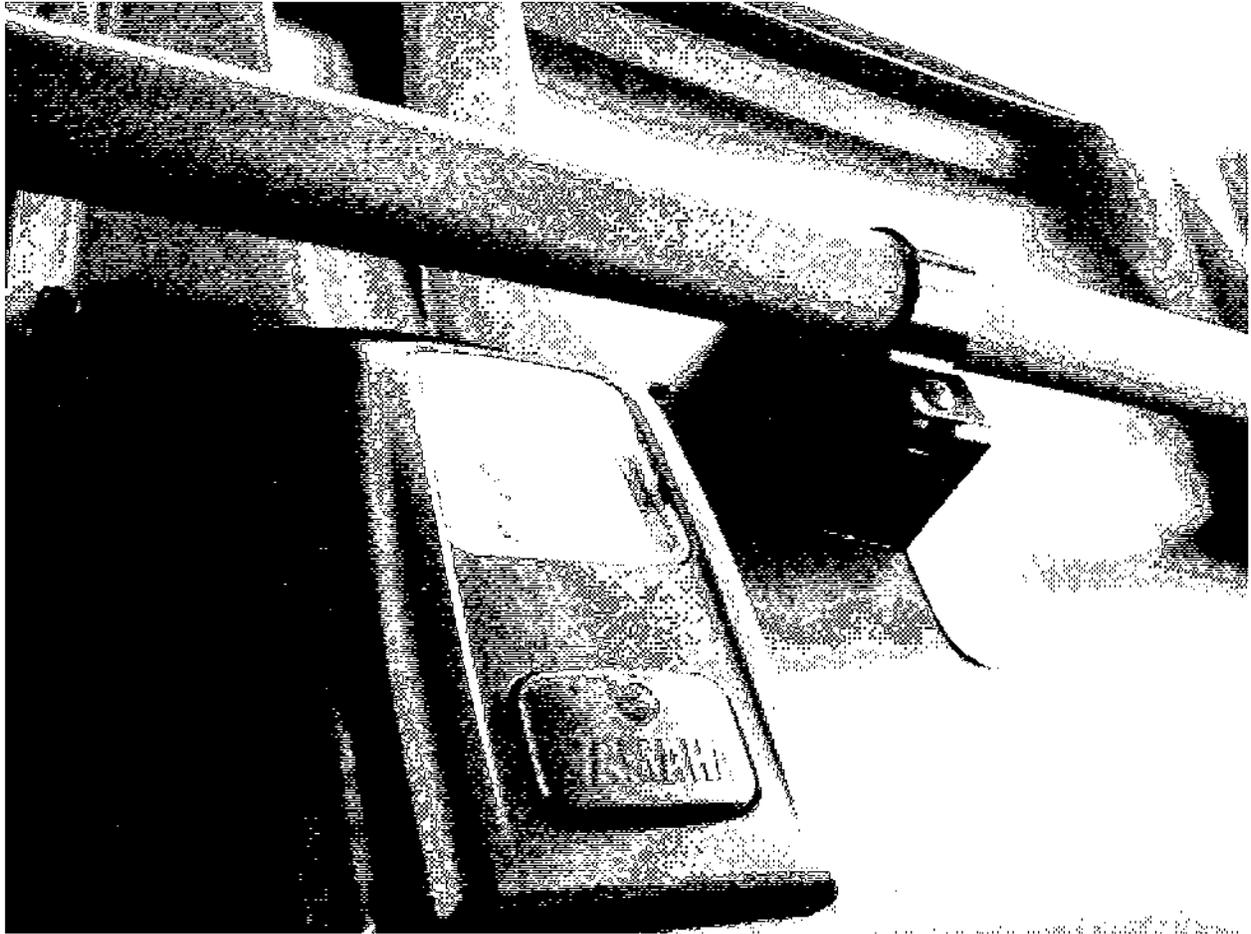


Photo #12 - Incident UTV Roof Domelight

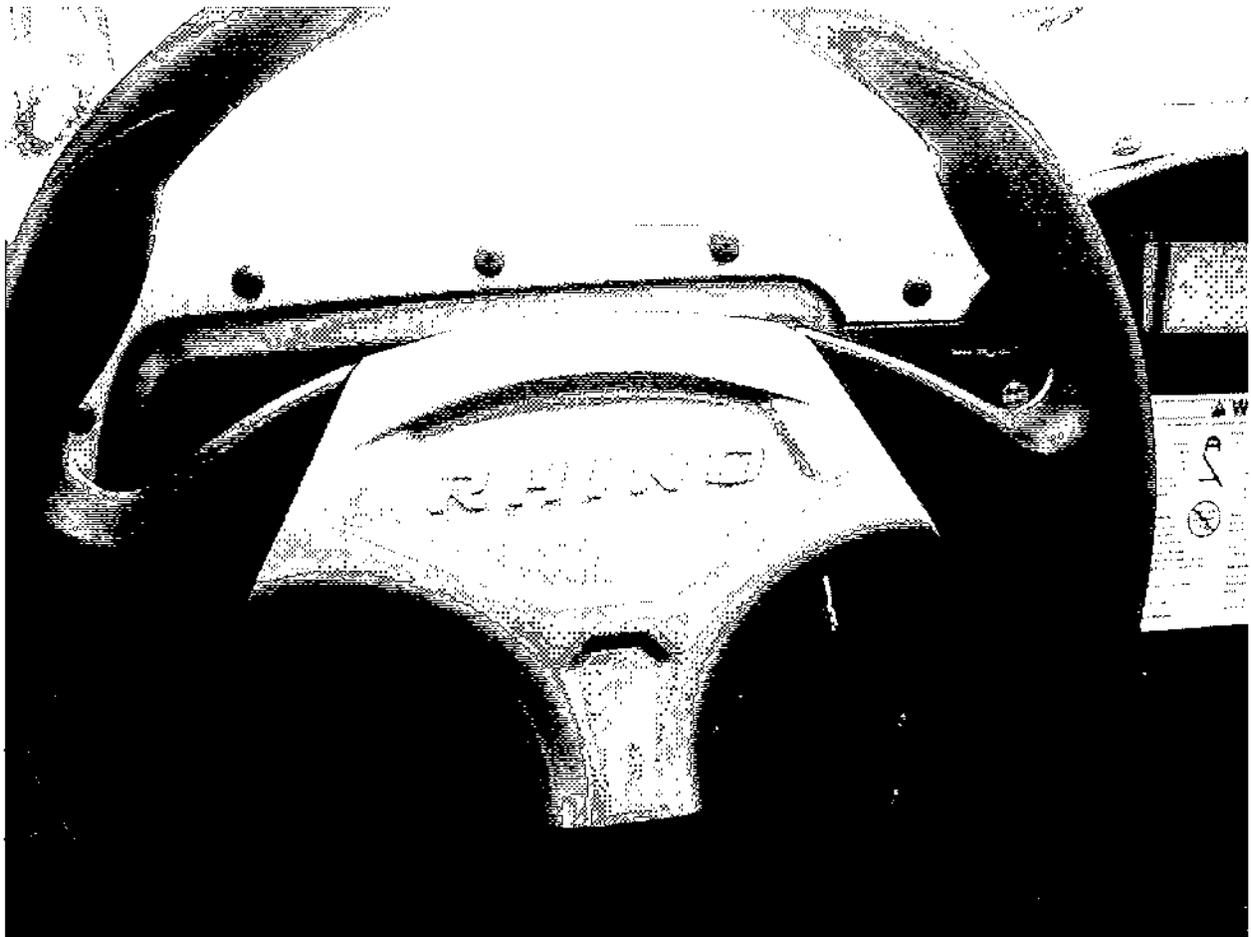


Photo #13 - Incident UTV Steering Wheel

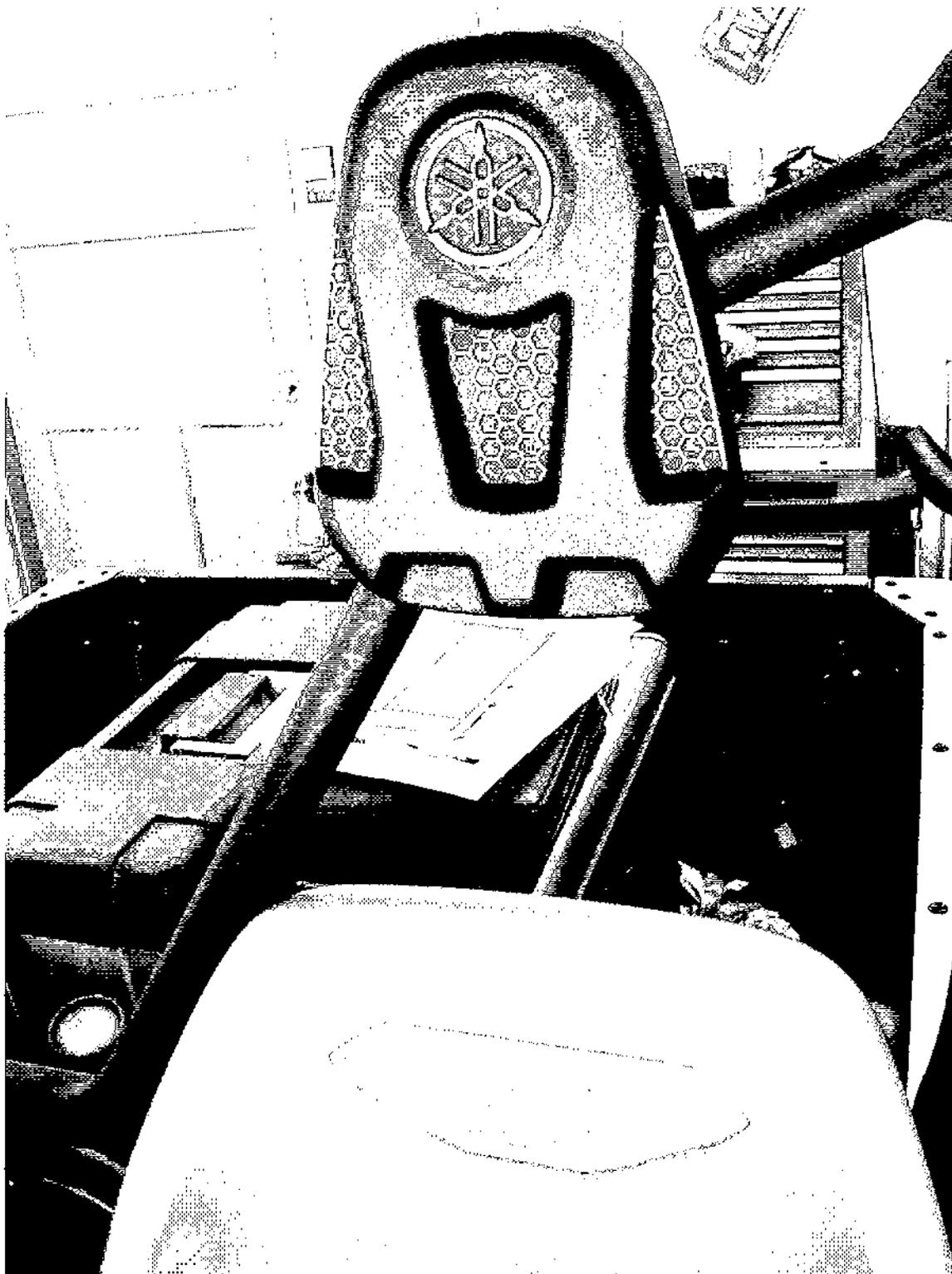


Photo #14 - Incident UTV Seat & Headrest

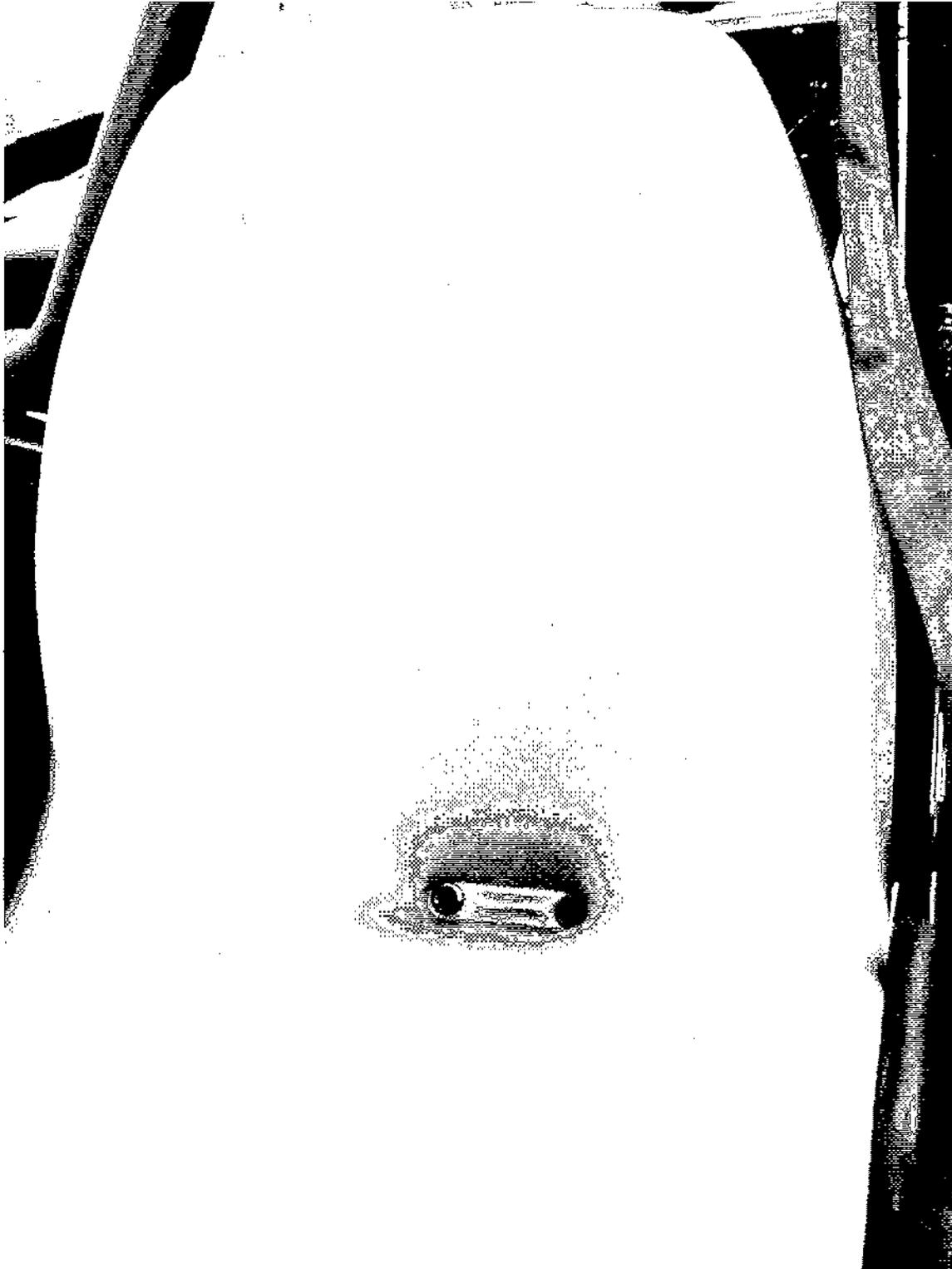


Photo #15 - Incident UTV Seat



Photo #16 - Incident UTV with Consumer's Blood Inside

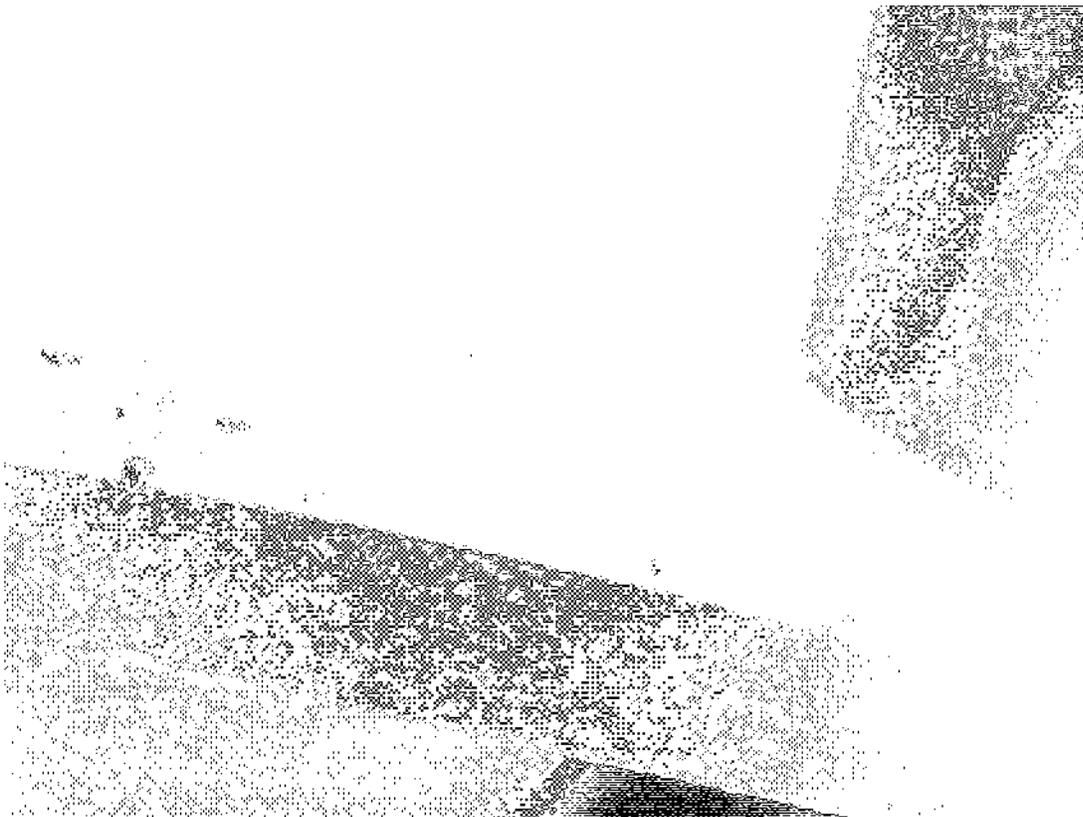


Photo #17 - Incident UTV with Consumer's Blood Inside

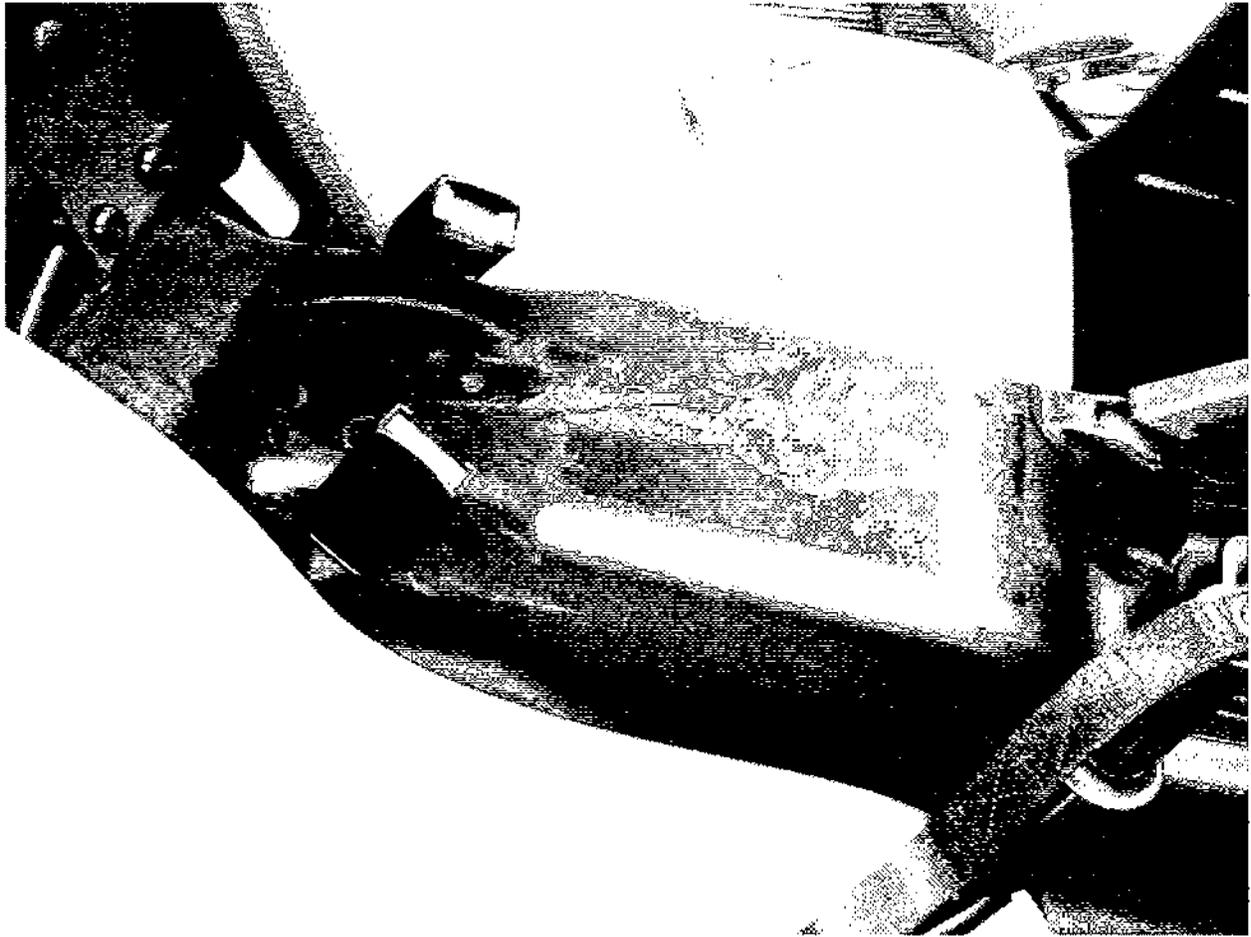


Photo #18 - Incident UTV with Consumer's Blood Inside

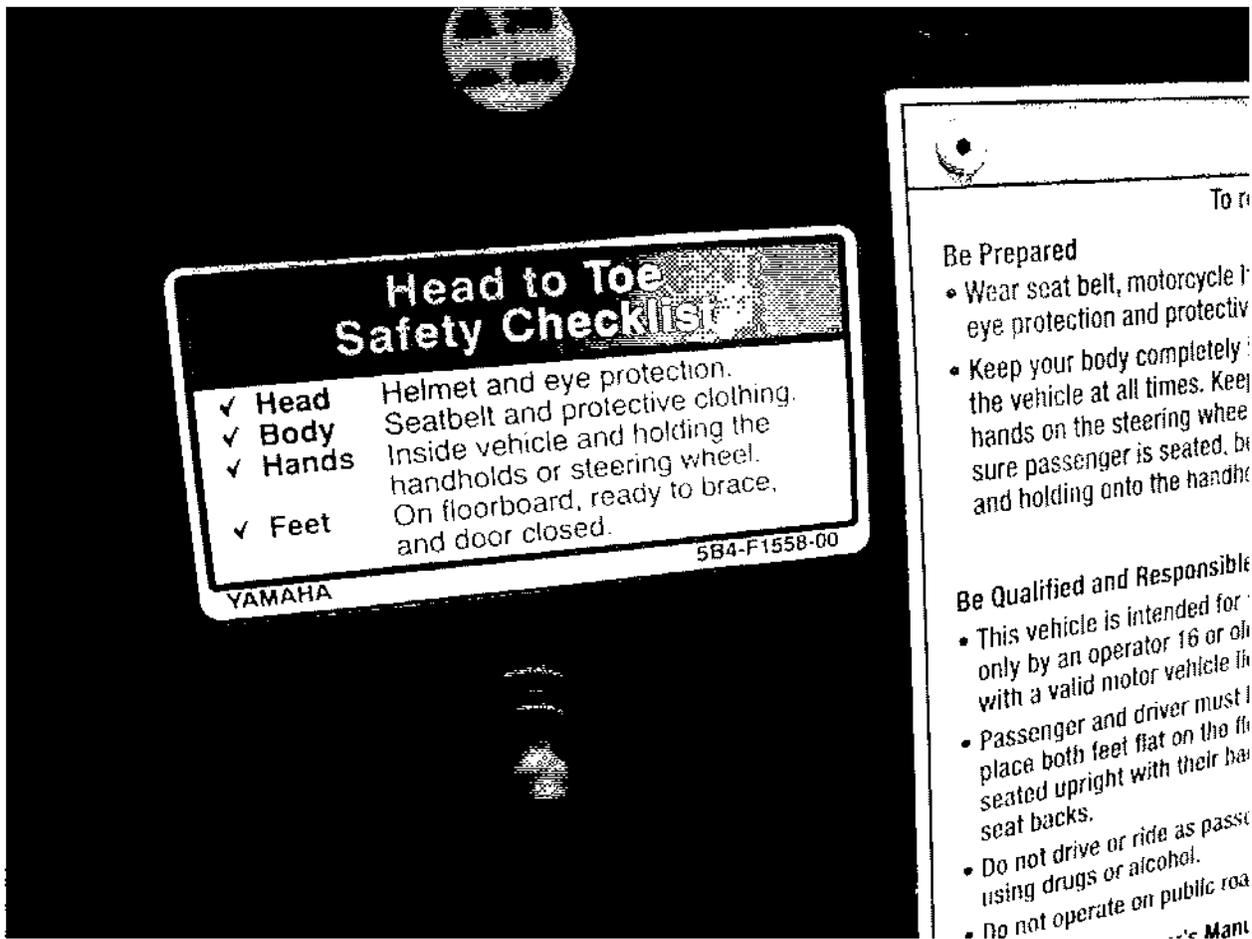


Photo #19 - Incident UTV's Labels

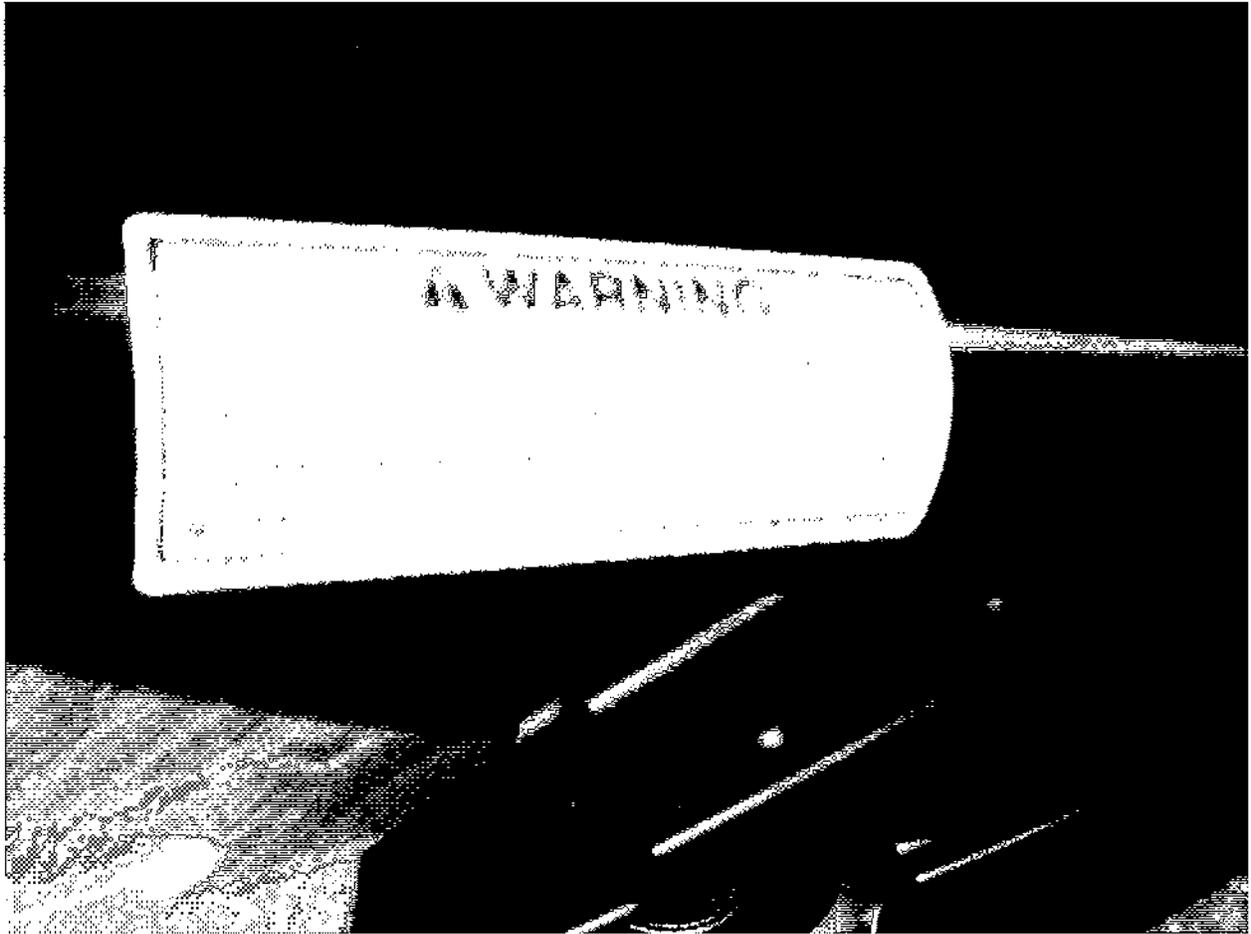


Photo #20 - Incident UTV's Warning Labels

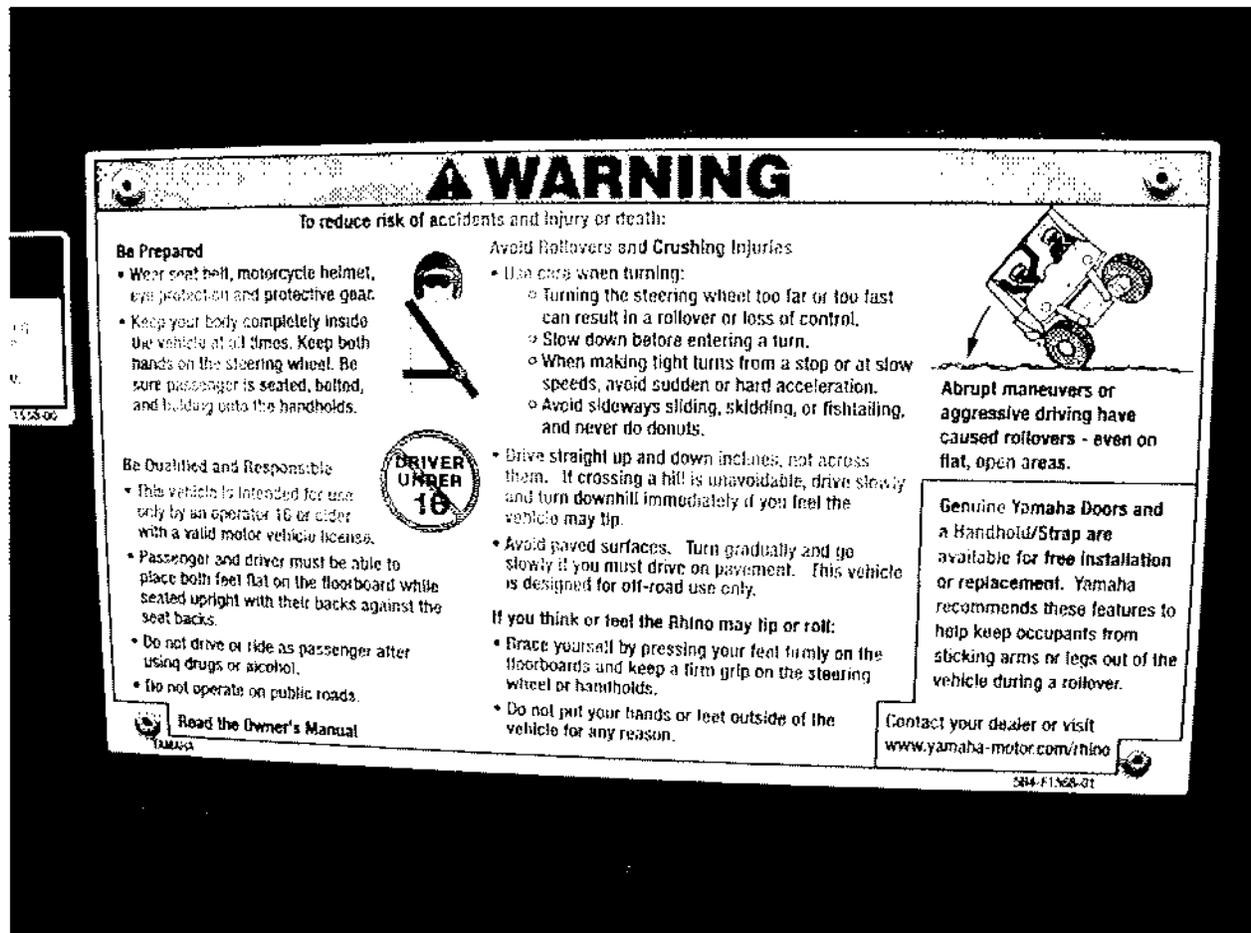


Photo #21 - Incident UTV's Warning Labels



Photo #22 - Incident UTV's Warning Labels

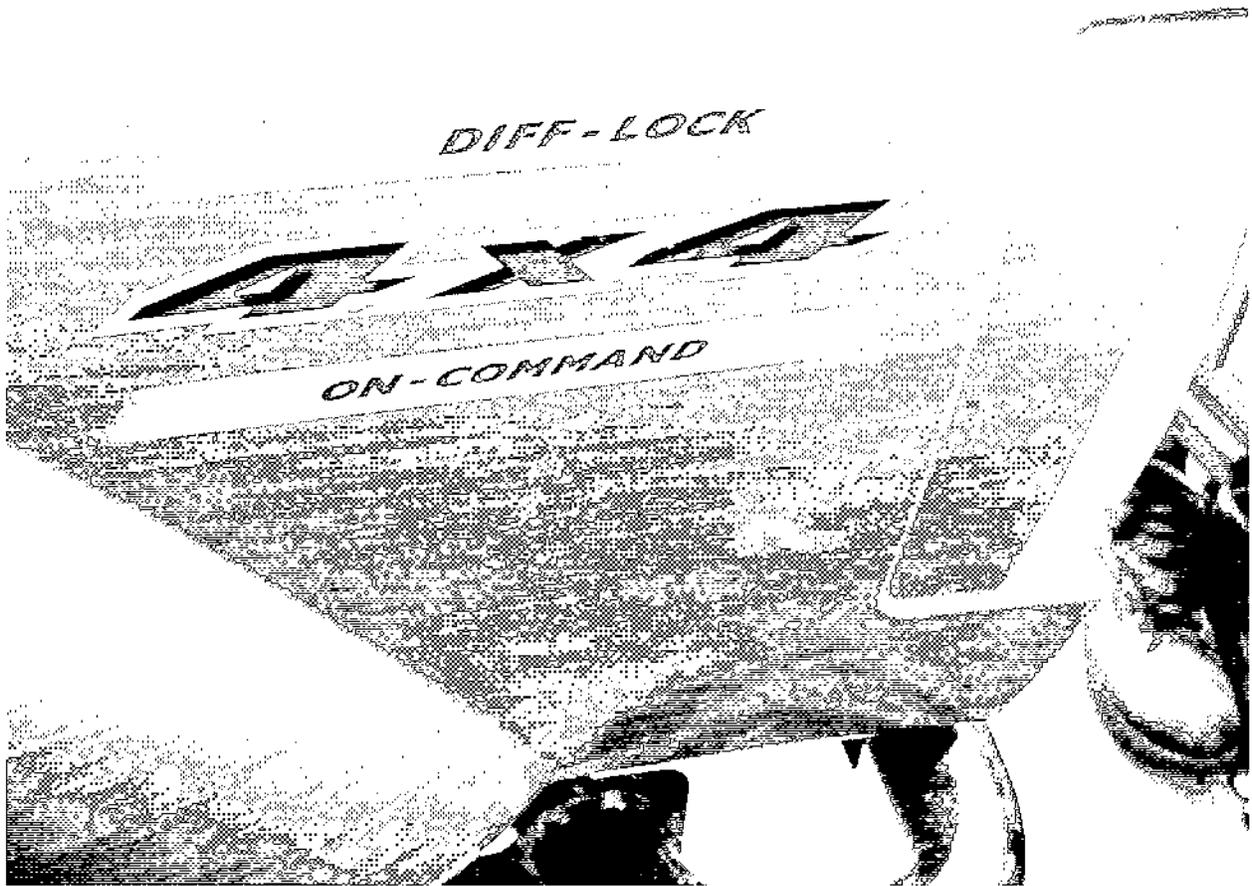


Photo #23 - Incident UTV

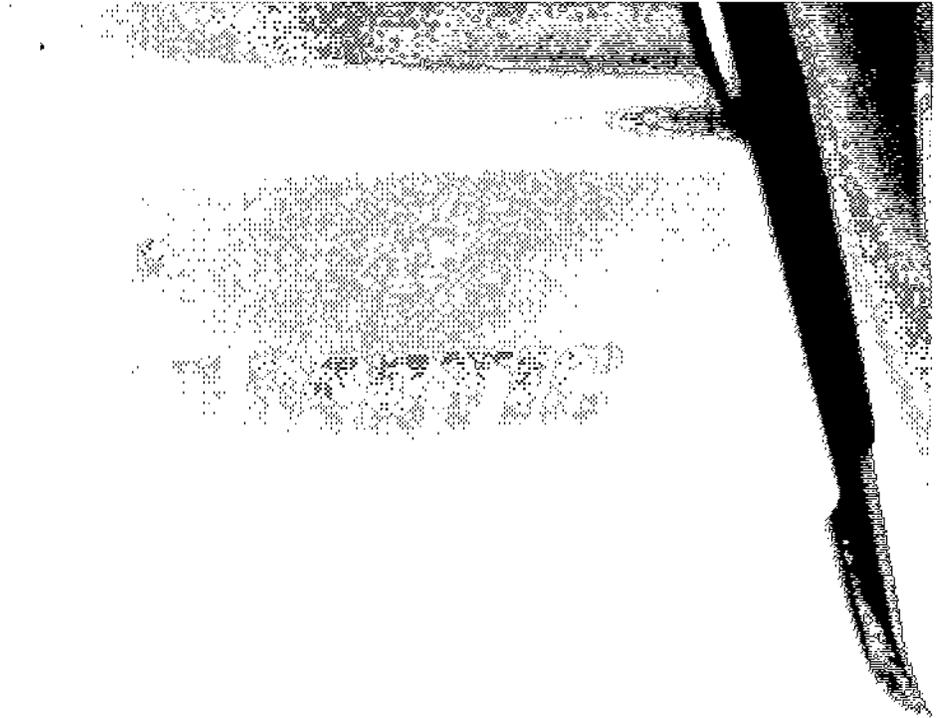


Photo #24 – Written on Incident UTV



Photo #25 – Written on Incident UTV



Photo #26 – Written on Incident UTV

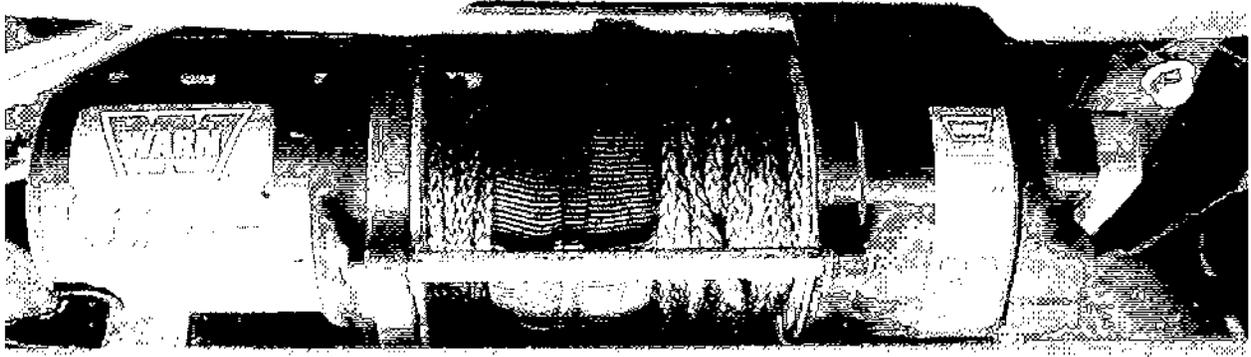


Photo #27 – Front End of Incident UTV



Photo #28 – Front End of Incident UTV

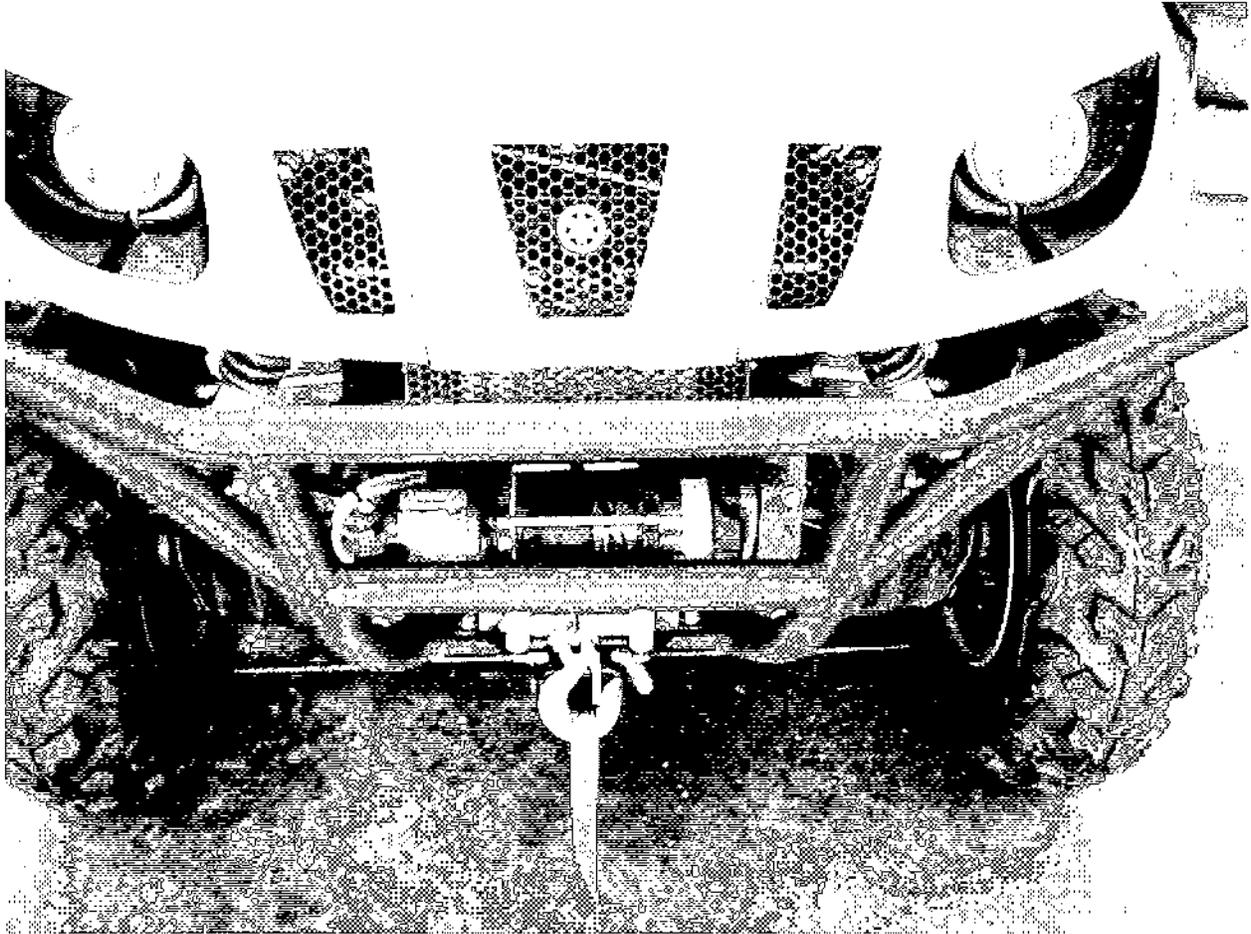


Photo #29 – Front End of Incident UTV

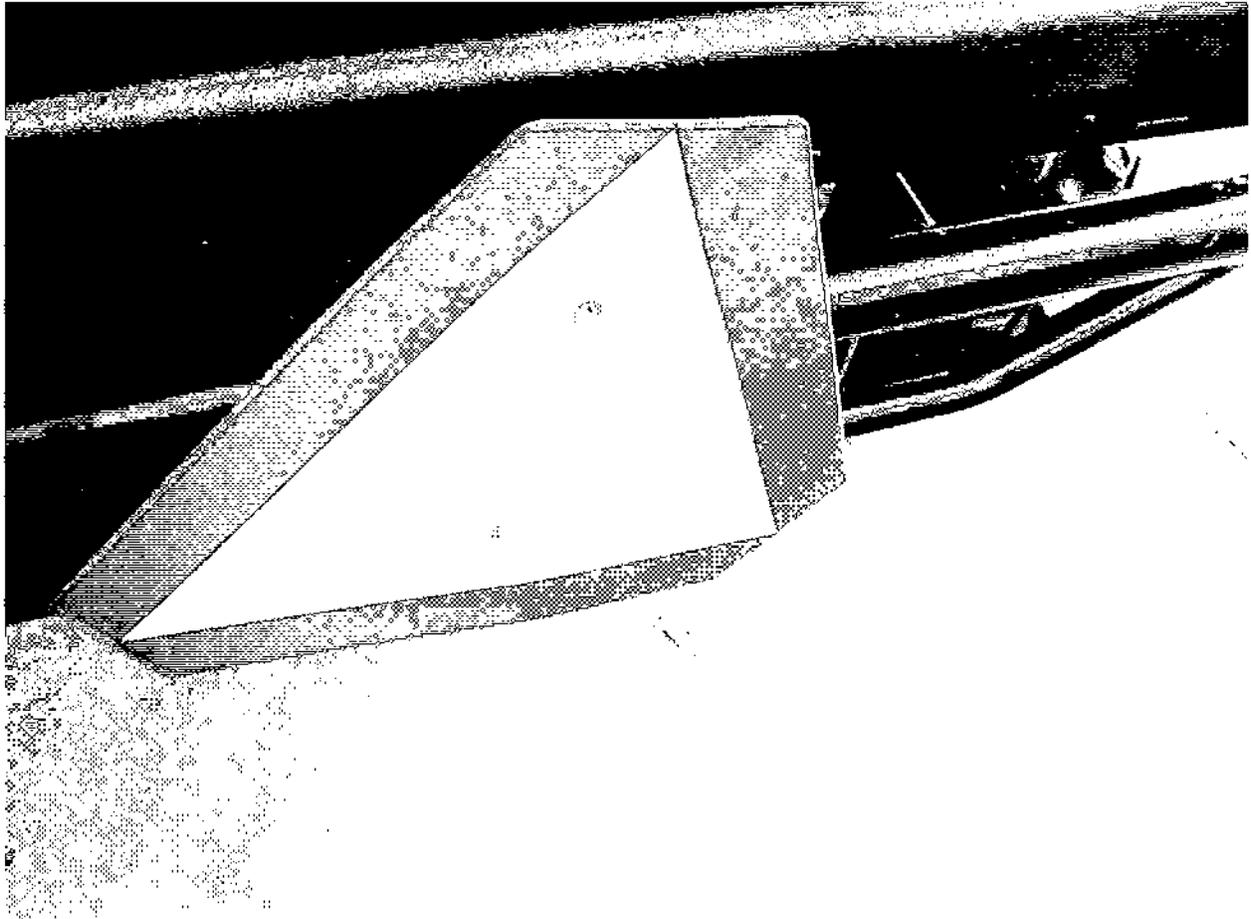


Photo #30 – Rear End of Incident UTV



Photo #31 – Rear End of Incident UTV



Photo #32 – Rear Inside View of Incident UTV



Photo #33 - Incident UTV Passenger Side View



Photo #34 - Incident UTV Driver Side View



Photo #35 - Incident UTV Driver Side View



Photo #36 - Incident UTV Passenger Side View

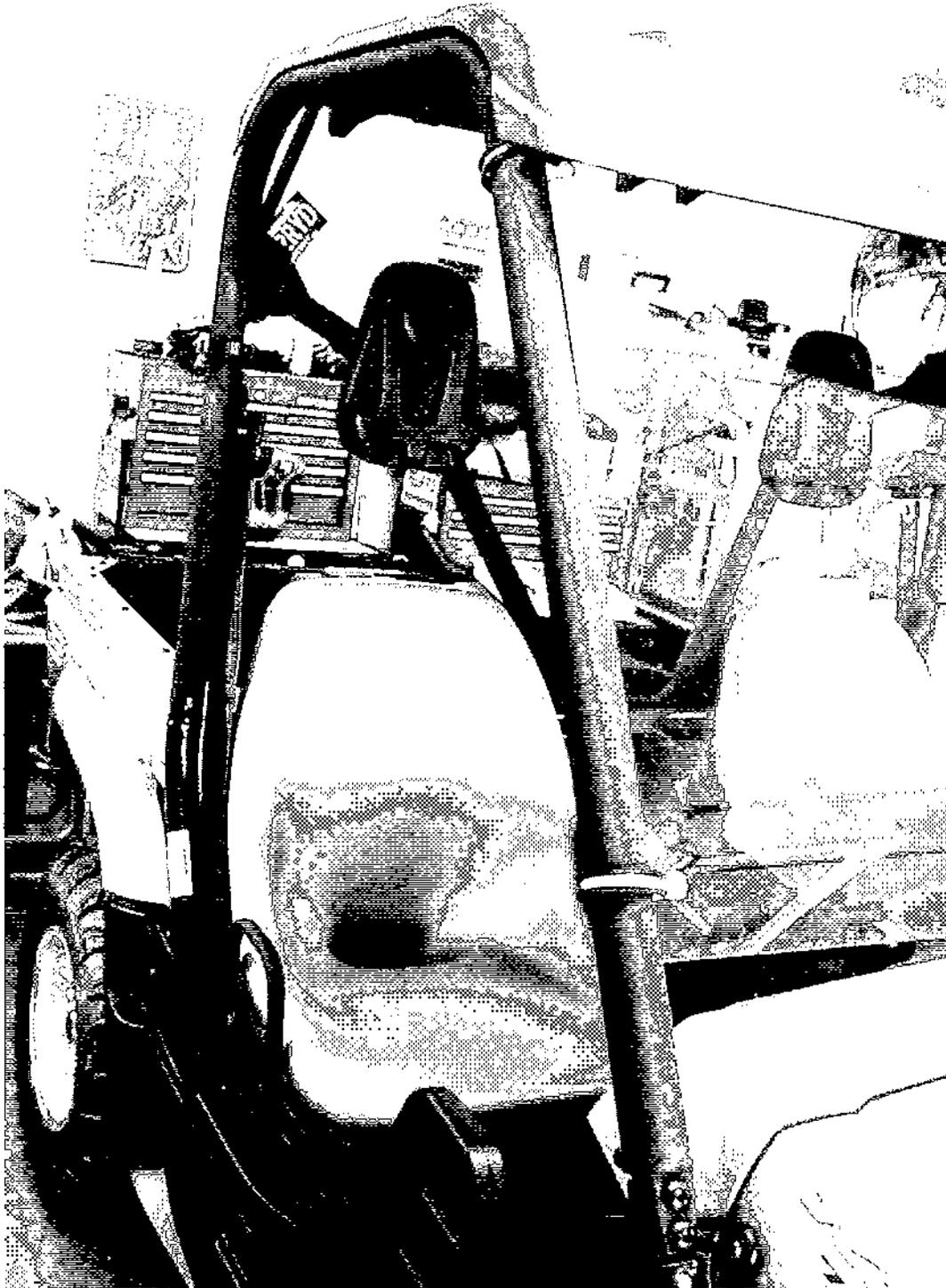


Photo #37 - Incident UTV Passenger Side View



Photo #38 - Incident UTV Front View



Photo #39 – Back of Consumer’s Home where Cook-out & UTV Rides took Place



Photo #40 – Consumer’s Back Yard Area where UTV Rides & Incident took Place



Photo #41 - Consumer's Back Yard Area where UTV Rides & Incident took Place



Photo #42 - Consumer's Back Yard Area where UTV Rides & Incident took Place



Photo #43 - Consumer's Back Yard Area where UTV Rides & Incident took Place



Photo #44 - Consumer's Back Yard Area where UTV Rides & Incident took Place



Photo #45 – Side of Consumer’s House

# NEWS from CPSC

## U.S. Consumer Product Safety Commission

Office of Information and Public Affairs

Washington, DC 20207

FOR IMMEDIATE RELEASE

March 31, 2009

Release #09-172

**Yamaha Hotline: (800) 962-7926**

CPSC Hotline: (800) 638-2772

CPSC Media Contact: (301) 504-7908

Updated To Include Additional Model Information; [safety tips](#) also available.

## **Yamaha Motor Corp. Offers Free Repair For 450, 660, and 700 Model Rhino Vehicles**

***CPSC advises consumers not to use the off-road vehicles until repaired***

WASHINGTON, D.C. - The U.S. Consumer Product Safety Commission (CPSC), in cooperation with Yamaha Motor Corp. U.S. A., of Cypress, Calif., is announcing a free repair program to address safety issues with all Rhino 450, 660, and 700 model off-highway recreational vehicles. Yamaha has also agreed to voluntarily suspend sale of these models immediately until repaired. Consumers should immediately stop using these popular recreational vehicles until the repair is installed by a dealer.

CPSC staff has investigated more than 50 incidents involving these three Rhino models, including 46 driver and passenger deaths involving the Rhino 450 and 660 models. More than two-thirds of the cases involved rollovers and many involved unbelted occupants. Of the rollover-related deaths and hundreds of reported injuries, some of which were serious, many appear to involve turns at relatively low speeds and on level terrain.

About 120,000 of the 450 and 660 model Rhinos have been distributed nationwide since Fall 2003. Some units have been equipped by Yamaha with half doors and additional passenger handholds, either before or after sale.

Yamaha's repair includes the installation of a spacer on the rear wheels as well as the removal of the rear anti-sway bar to help reduce the chance of rollover and improve vehicle handling, and continued installation of half doors and additional passenger handholds where these features have not been previously installed to help keep occupants' arms and legs inside the vehicle during a rollover and reduce injuries. Owners of the affected Rhinos should stop using them and call their dealer to schedule an appointment to have repairs made once they are available and to take advantage of a free helmet offer.

Yamaha is also voluntarily implementing the same repair program and suspension of sale for the Rhino 700 model, in order to ensure customer satisfaction. Consumers should stop riding the 700 model until it is repaired. About 25,000 Rhino 700s are part of this repair program.

Once these repairs have been made to their vehicles, Rhino users should always wear their helmet and seatbelt and follow the safety instructions and warnings in the on-product labels, owner's manuals and other safety materials. The Rhino is only recommended for operators 16 and older with a valid driver's license. All passengers must be tall enough to place both feet on the floorboard with their back against the seat back.

For additional information, contact Yamaha at 800-962-7926 anytime, or visit the firm's Web site at [www.yamaha-motor.com](http://www.yamaha-motor.com)



**Rhino 450 (with doors)**



**Rhino 450 (without doors)**



**Rhino 660 (without doors)**

CPSC is still interested in receiving incident or injury reports that are either directly related to this product recall or involve a different hazard with the same product. Please tell us about it by visiting <https://www.cpsc.gov/cgibin/incident.aspx>

---

Send the link for this page to a friend! The U.S. Consumer Product Safety Commission is charged with protecting the public from unreasonable risks of serious injury or death from thousands of types of consumer products under the agency's jurisdiction. The CPSC is committed to protecting consumers and families from products that pose a fire, electrical, chemical, or mechanical hazard. The CPSC's work to ensure the safety of consumer products - such as toys, cribs, power tools, cigarette lighters, and household chemicals - contributed significantly to the decline in the rate of deaths and injuries associated with consumer products over the past 30 years.

To report a dangerous product or a product-related injury, call CPSC's Hotline at (800) 638-2772 or CPSC's teletypewriter at (800) 638-8270. To join a CPSC e-mail subscription list, please go to <https://www.cpsc.gov/cpsclist.aspx>. Consumers can obtain recall and general safety information by logging on to CPSC's Web site at [www.cpsc.gov](http://www.cpsc.gov).

## UTV Bill of Sale

BE IT KNOWN, that for payment in the sum of \$9,500, the full receipt of which is acknowledged, the undersigned Carlin R. Smith Jr., 5316 Edinburgh Ct, Lafayette, IN 47905 (Seller) hereby sells and transfers to Greg Gleisinger, 855 Shelby Ontario Road, Mansfield, OH 44906 (Buyer), the following described motor vehicle (Vehicle):

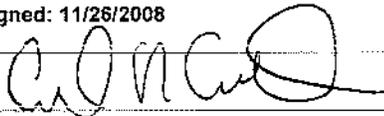
Make: Yamaha	Model or series: Rhino 700 SE
Year: 2008	Color: Silver
VIN #: 5Y4AM21Y18A000112	Style: N/A
Odometer reading: 265	Title #: N/A

**The sale is subject to the following conditions and representations:**

Seller certifies to the best of the Seller's knowledge that the odometer reading listed in the vehicle description above reflects the actual mileage of the Vehicle. The Vehicle's odometer was not altered, set back, or disconnected while in the Seller's possession, and the Seller has no knowledge of anyone doing so.

Seller warrants to Buyer that Seller has good and marketable title to said property, full authority to sell and transfer said property, and that said property is sold free of all liens, encumbrances, liabilities, and adverse claims of every nature and description whatsoever.

Seller has no knowledge of any hidden defects in and to the Vehicle, and believes to the best of the Seller's knowledge that the Vehicle being sold is in good operating condition. Said Vehicle is otherwise sold in "as is" condition and where currently located.

Date signed: 11/26/2008
Seller: 
Buyer:
In the presence of (Witness):
Print name of witness:

**MAX PITTS YAMAHA, INC.**

2990 S U.S. 31  
 PERU, IN 46970  
 765-472-2423

**REPAIR ORDER INVOICE**

Cashier: FRM WOLF

Repair Order # 5037723

Invoice # 477518

Sold to SMITH, DARLIN (4482541)  
 5315 EDINBURG CT  
 LAFAYETTE, IN 47985  
 Home Phone 765-446-2941 Work 7654184104

Invoice Date 8/14/08  
 Date In 8/14/08  
 Promised 0/ 0/ 0  
 Closed Out 8/14/08

Yr	Make	Model	Color	Class	Plate #	VIN	Key	Board#	Hrs/Odom
08	YAMAHA	YXR70FSPX		A		5Y4AK81Y18A000112			207

**Job: 1ST SERVICE**

Yr: 08 Make: YAMAHA Model: YXR70FSPX Color: Class: A

Part #/Labor Code	Description	Src	Cat	Tech	Hrs/Qty	Total
Parts 5GH-13440-20-00	OIL FILTER	YA	DSG		1	14.20
Labor	1ST SERVICE			TW	2.00	128.00
Job Subtotal \$	142.20					

**Job: LEFT FRONT BRAKE CALIPER RECALL**

Yr: 08 Make: YAMAHA Model: YXR70FSPX Color: Class: A

Part #/Labor Code	Description	Src	Cat	Tech	Hrs/Qty	Total
Parts 50891-60107-00	BRAKE CALIPER KIT	YA	PYA		0	WARRANTY
Labor (990045)	LEFT FRONT BRAKE CALIPER			TW	.60	WARRANTY

Job Breakdown ->	Parts	Labor	Sublet	Other	Total of all Jobs	Total
	14.20	128.00	.00	.00		142.20

MAX PITTS INC. IS NOT RESPONSIBLE  
 FOR CUSTOMERS PARTS, ACCESSORIES,  
 OR OTHER ITEMS LEFT ON THE PREMISES.

THANK YOU FOR YOUR BUSINESS!

Before Tax Total	142.20
Sales Tax	.99
* * Total Amount Due	143.19
Check Tendered	143.19

Check/CC# 6194

YOU MAY RECEIVE A MANUFACTURES SURVEY FOR ANY  
 WARRANTY VISIT TO OUR SERVICE DEPARTMENT. WE  
 HOPE YOU ARE TOTALLY SATISFIED WITH YOUR  
 EXPERIENCE, IF NOT PLEASE LET US KNOW.

Thursday, August 14th, 2008 2:32 pm

CARLE R SMITH  
5316 EDINBURGH CT  
LAFAYETTE

IN 47905-7587

MODEL	YXR70FSPX
SERIAL NUMBER	AM21Y 0000112
WARRANTY START DATE	02/23/2008
Y.E.S. EXPIRATION DATE	08/23/2012
Y.E.S. PLAN PURCHASED	48
CONTRACT SALE PRICE	

SELLING DEALER:

GREENFIELD MOTOR SPORTS, LLC  
4606 S 100 E  
GREENFIELD  
(317) 462-2262

IN 46140-9269

**YAMAHA EXTENDED SERVICE PLAN CONTRACT**  
YAMAHA MOTORCYCLE, ATV, SCOOTER, SNOWMOBILE, AND WATERCRAFT

**PLEASE READ THIS CONTRACT CAREFULLY. IT CONTAINS THE ENTIRE AGREEMENT BETWEEN YAMAHA MOTOR CORPORATION, U.S.A. AND YOU. THIS CONTRACT TAKES THE PLACE OF ANY OTHER WRITTEN OR ORAL STATEMENTS MADE TO YOU ABOUT YOUR COVERAGE UNDER THIS CONTRACT. THIS CONTRACT IS NOT AN INSURANCE POLICY. YAMAHA MOTOR CORPORATION, U.S.A. DOES NOT AUTHORIZE ANYONE TO CREATE FOR IT ANY OBLIGATION THAT IS NOT CONTAINED IN THIS CONTRACT.**

*Read the above information carefully. If there are any errors, please contact the YAMAHA dealer who sold you this contract or call Yamaha Service Marketing at (714) 761-7632. Administered by Yamaha Motor Corporation, U.S.A., 6555 Katella Ave., Cypress, California 90630. (714) 761-7632.*

**DEFINITIONS**

Definitions of Key Words used in this Contract (Key words appear in bold type):

**YAMAHA and Genuine YAMAHA:** YAMAHA MOTOR CORPORATION, U.S.A.

**Y.E.S. Contract:** this YAMAHA EXTENDED SERVICE PLAN CONTRACT which includes your name and the information about your YAMAHA vehicle.

**Declarations:** that portion of the Y.E.S. Contract with information about the Customer and the **identified vehicle**.

**Customer, you, or your:** the owner of record of the **vehicle** shown in the Declarations registered with YAMAHA.

**Covered vehicle or the vehicle or your vehicle:** the Motorcycle, ATV, Scooter, Snowmobile, or Watercraft shown in the Declarations.

**YAMAHA Dealer:** the authorized YAMAHA Dealer who sold you this **Y.E.S. Contract**, or another franchised YAMAHA Dealer who is authorized to repair the **covered vehicle**.

**"Breakdown" or "Mechanical Breakdown"** means the breakage or failure of a covered part caused by a defect or faulty workmanship from the manufacturer, making that covered part incapable of performing the function for which it was designed. The identified vehicle will be covered only for **Mechanical Breakdown(s)** which occur(s) in the Continental United States including Alaska, and for Watercraft, Hawaii.

**Breakdown or Mechanical Breakdown** does not include the gradual reduction in operating performance caused by wear and tear where a failure has not occurred.

**New vehicle(s):** a vehicle with a **YAMAHA Limited Warranty** in effect at the time of **Y.E.S. Contract** sale. Refer to the Warranty Statement that came with **your purchase**.

**Used vehicle(s):** a Motorcycle, ATV, Scooter, Snowmobile or Watercraft sold by the **YAMAHA Dealer** for which the **YAMAHA Limited Warranty** has expired, and which meets specific eligibility requirements.

**Limited Warranty:** is the warranty which comes with the vehicle from Yamaha at no charge to the customer.

**Storage:** following the procedures outlined in the Owner's Manual for the **Covered Vehicle** under the section entitled "STORAGE."

**SIDE BY SIDE**  
Y10900 Effective 8/2002

**INTERRUPTION PROTECTION (TRIP):** In the event a **Mechanical Breakdown** occurs, reimbursement of up to one hundred and fifty dollars (\$150.00) per occurrence will be provided for reasonable, legitimate expenses incurred because of the **Mechanical Breakdown**, such as food, lodging, phone calls, replacement vehicle rental, or other transportation. **THIS BENEFIT DOES NOT APPLY TO EXPENSES COVERED BY INSURANCE OR OTHER BENEFITS.** This benefit applies during the **Limited Warranty** period as well as the **Y.E.S. Contract** period. To receive TRIP Reimbursement the **Customer** must submit valid receipts for eligible expenses to the **YAMAHA Dealer** doing the repair of the **Mechanical Breakdown**.

### GENERAL EXCLUSIONS

GENERAL EXCLUSIONS from this **Y.E.S. Contract** shall include ANY **MECHANICAL BREAKDOWNS** caused by: competition or racing use; installation of parts or accessories that are not of like kind and quality to **Genuine YAMAHA** parts; abnormal strain, neglect, or abuse; lack of proper maintenance, including **Storage**; accident or collision damage; contact with foreign materials or submersion; damage due to growth of marine organisms on surfaces; damage due to improper transportation; damage due to rust or corrosion; modification to original parts.

### SPECIFIC EXCLUSIONS THIS Y.E.S. CONTRACT DOES NOT COVER:

1. **NORMAL WEAR AND TEAR ITEMS.** SOME EXAMPLES ARE: Tires, brake pads, or shoes, brake rotors or drums, cables, clutch plates, hoses, fuses, spark plugs, final drive chains/belts, final drive sprockets, batteries, replacement filters, light bulbs, fluids not required in conjunction with repairing a **Mechanical Breakdown**.

Additional examples for Watercraft include the impeller, impeller liner and intake grille, mats, humpers, body seals or gaskets and anodes, control cables and spark plugs. Additional examples for Snowmobiles include skis, track, wheels under track, hylax/slide rail, clutch weights, rollers, pins and bushings.

2. **Mechanical Breakdown** caused by improper **storage**. The **Customer** must have proof that proper **storage** procedures have been completed if requested by **YAMAHA** in relation to a specific **Mechanical Breakdown**.
3. If a particular **Mechanical Breakdown** is caused by operation or maintenance other than as shown in the applicable owner's manual, that **Mechanical Breakdown** will not be covered by this **Y.E.S. Contract**.
4. **APPEARANCE-RELATED DAMAGE SUCH AS** scratches; nicks; dents; fading paint and trim, tears, corrosion, gel coat stress cracks, and growth of marine organisms on surfaces.
5. **AUDIO COMPONENTS**
6. **Mechanical Breakdown** while the **vehicle** is under the **YAMAHA Limited Warranty** or the **YAMAHA Sport Boat Components Limited Warranty** or when the component is covered by a manufacturer's modification or recall program.
7. For Sport Boats: the hull and deck on **your vehicle** are covered by the **Limited Warranty** for a period of five (5) years. The **Y.E.S. Contract** does not provide coverage for the hull and deck.
8. **For Snowmobiles: Mechanical Breakdown** caused by operation of **vehicle** when there is not adequate snow.
9. Damage from theft, fire, freezing, vandalism, riot, explosion, flood, hail,

lightning, earthquake, windstorm, water, or collision.

10. **Mechanical Breakdown** or damage to ANY COMPONENTS caused by water, sand and/or corrosion, or impact with underwater object.
11. Loss which occurs due to failure to maintain proper fluid and/or lubricant levels as specified by **YAMAHA** or due to improper oil/gas mixture ratios.
12. **FAILURE OF FINAL DRIVE CHAINS/BELTS OR SPROCKETS, DAMAGE DUE TO FINAL DRIVE CHAIN/BELT BREAKAGE.**
13. Damage due to alteration, modification or use of the **covered vehicle** not recommended by **YAMAHA**.
14. Damage due to failure of "non-stock" or modified parts.
15. **Vehicles** use for *commercial* purposes. Examples of commercial use are: rental, delivery, hauling for hire, police, harbor patrol or emergency services. In general, if a **vehicle** will be used to make a profit, it is considered commercial usage.
16. **NORMAL MAINTENANCE, ADJUSTMENTS, TUNE-UPS, PARTS OR LABOR NOT REQUIRED TO REPAIR A MECHANICAL BREAKDOWN, OR FLUIDS NOT REQUIRED IN CONJUNCTION WITH REPAIRING A MECHANICAL BREAKDOWN.**
17. **INCIDENTAL, CONSEQUENTIAL, OR PUNITIVE DAMAGES OF ANY KIND INCLUDING LOSS OF USE.** SOME STATES DO NOT ALLOW THE EXCLUSION OR LIMITATION OF INCIDENTAL, CONSEQUENTIAL, OR PUNITIVE DAMAGES, SO THE ABOVE EXCLUSION MAY NOT APPLY TO YOU.
18. The **Customer** must either (a) use the Maintenance Log provided with the **Y.E.S. Contract** and have it verified



# 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 concerns.

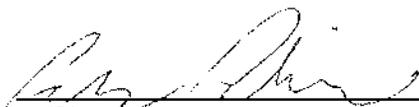
We routinely forward this information to manufacturers and private labelers to inform them of the involvement of their product in an accident situation. We also give the information to others requesting information about specific products. Manufacturers need the individual's name so that they can obtain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

I request that you do not release my name. My identity is to remain confidential.

You may release my name to the manufacturer but I request that you do not release it to the general public.

You may release my name to the manufacturer and to the public.

  
(Signature)

8-14-09  
(Date)

06/25/2009 12:36:31

Name = Laurie Gleisinger  
Address = 855 Shelby Ontario Road  
City = Mansfield  
State = Ohio  
Zip = 44906  
Email = kustom1955@aol.com  
Telephone = 419-522-9259  
Name of Victim = Greg Gleisinger  
Victim's Address = 855 Shelby Ontario Road  
Victim's City = Mansfield  
Victim's State = Ohio  
Victim's Zip = 44906  
Victim's Telephone = 419-522-9259

Incident Description = Riding around in the yard on flat ground and the Rhino tipped over causeing Greg a concussion, blacking out and two large wounds on his head.  
Do we need to get a lawyer?

Victim's age at time of incident = 38  
Victim's sex = male  
Date of incident = 6/21/2009  
Product involved = Rhino 700  
Product brand name/manufacturer = Yamaha  
Manufacturer street address =  
Place where manufactured (City and State or Country) =  
Product model and serial number, manufacture date = 2008 700  
Product damaged, repaired or modified = no  
If yes, before or after the incident =  
Description of damage, repair or modification =  
Date product purchased = November 2008  
Product involved still available = yes  
Have you contacted the manufacturer = no  
If not, do you plan to contact them =  
Name Release = Release name to manufacturer only



**SUMMARY OF FINDINGS:**

On June 25, 2009 at approximately 8:16 p.m. officials were dispatched to a crash involving a utility vehicle. Police officials arrived and were escorted approximately ¼ mile behind a home in an apple orchard. When officials arrived at the location they observed a two-seat utility vehicle which was crashed into a tree in a ravine. In the ravine officials observed a male and female victim lying on the ground being assisted by fire officials. The female victim was unconscious but breathing and had an injury to her head. Officials smelled intoxicants coming from the female and near the utility vehicle. The female was transported to a hospital. Officials were advised by hospital personnel that she had sustained head injuries.

The male victim informed officials that he and the female victim went for a ride on the utility vehicle with the female victim driving the vehicle. The female victim had been drinking, but it is unknown how much. The male victim had not been drinking. They were heading north when she turned to try and go southbound, however she went too wide on the turn and went down a ravine. He attempted to pull the wheel so they would not go down the ravine but his attempt failed. He went off the side and then they hit a tree and the female victim was thrown from the vehicle at which time she hit her head on a rock.

1. Provide the terrain type for the incident (grass, pavement, gravel, etc.) and also indicate if the terrain is flat, sloped, etc. **The terrain type is "HA". The victims were heading down a ravine.**
2. Determine if the driver and/or passengers were wearing seatbelts. If they were wearing seat belts, please note if the driver and/or passengers were ejected (either partially or fully) during the incident. **Neither of the victims were wearing seatbelts. The passenger threw himself from the side of the vehicle. The driver was ejected from the vehicle.**
3. Determine if the driver and/or passengers were wearing helmets. **Neither driver nor passenger were wearing a helmet.**
4. Determine ages of the driver and all passengers, and list each person by age and location.  
**Driver – 19 yof**  
**Passenger – 47 yom**
5. Determine the vehicle's speed at the time of the incident. If the exact speed is not available, please provide a range if possible. **"Unknown"**
6. Determine if the driver was making a turn at the time of the incident and, if so, in what direction the turn was being made. Also, please note any other reported driver actions at

7. the time of the incident (e.g, braking, etc.) **The driver did attempt to make a turn but went too wide when she lost control and went down the ravine. The direction of the turn is "Unknown." Any other driver actions are "NA", however, the passenger did attempt to pull the vehicle in order to avoid going down the ravine.**
8. Determine if the vehicle had aftermarket alterations. **"NA"**.
9. Determine the make, model, and model year of the vehicle. If possible, please provide complete product identification information, **including, brand date manufactured, date of purchase, place of purchase, model/serial number, cost, etc. Yamaha Rhino 700PI. The year, brand date manufactured, date of purchase, place of purchase, cost are "NA". The serial number is "NA". The VIN number is 5Y4AM10Y48A002360.**
10. On the cover sheet (Form 182), please list the **vehicle manufacturer** (e.g., "Yamaha") in Block 10b or Block 11b, and the **vehicle model** (e.g. "Rhino") in Block 10c or Block 11c. **See Form 182**
11. Determine if the vehicle rolled or tipped over. **"NA"**
12. Determine the number of riders on the vehicle at the time of incident. **2**
13. Please determine if anyone was killed or injured in the incident. For each victim, please note the following:
  - Whether the victim was the driver or a passenger. If the victim was a passenger, please note the victim's position in the vehicle (e.g. right front seat). **The driver sustained serious injuries while the passenger sustained minor injuries.**
  - Whether the vehicle landed on or crushed the victim. **No**
  - Whether the victim was killed or injured. **Injured**
  - If the victim was injured, please note the nature of the injury. **The driver sustained head injuries. The passenger sustained cuts and scrapes to his body.**

**PRODUCT:** Utility Vehicle

The product involved in this incident is a red two-seat Yamaha Rhino 700PI. The year of the vehicle is unknown. Attempts to obtain that information have been unsuccessful. The VIN number is 5Y4AM10Y48A002360.

**ATTACHMENTS:**

Exhibit "A" – Contact List

Exhibit "B" – Incident report obtained from the Ottawa County Sheriff's Department

Exhibit "C" – Incident report obtained from the Wright-Tallmade Fire Department

**090630CCC2728**

**Exhibit "A" – Contact List**

This in-depth investigation was assigned and initiated on 7/6/09. The information contained in this report was obtained from the following sources:

Ottawa County Sheriff's Department

12220 Fillmore Street

West Olive, MI 49460

Telephone: 616-738-4000

Fax: 616-738-4062

Wright-Tallmadge Fire Department

O-1451 Leonard St. NW

Grand Rapids, MI 49534

Telephone: 616-677-1610

Fax: 616-677-6133

Attempts to contact the victims via letter and telephone have been unsuccessful.



090630 CCC 2728 Exhibit B

Authority: 1949 PA 300, Sec. 257.622 Compliance Required: MSA UD-10 Penalty: \$100 and/or 90 days (Rev 1/04)	Do Not Use <b>PRIVATE PROPERTY</b>	Page: 01 Incident #: 0906250170 File Class: 93002 Incident Disposition: <input checked="" type="radio"/> Open <input type="radio"/> Closed Reviewer: SA
--	---------------------------------------	---

State of Michigan Traffic Crash Report

ORI: MI-7017000 Department Name: Ottawa Co Sheriff's Office

Crash Date: 06/25/08	Crash Time: 2:05	No. of Units: 01	Crash Type: <input checked="" type="radio"/> Single Motor Vehicle	Special Circumstances: <input type="radio"/> None	Special Checks: <input type="radio"/> Fatal (Report All)
County: 70	Traffic Control: <input type="radio"/> None of These	Relation to Roadway: <input type="radio"/> Shoulder	<input type="radio"/> Head On	<input type="radio"/> School Bus	<input type="radio"/> Corrected Copy
City/Twp: 16	<input type="radio"/> Signal	<input type="radio"/> Outside of Shoulder/Curb	<input type="radio"/> Head On-Left Turn	<input type="radio"/> Local	<input type="radio"/> Replace Entire Report
Construction Zone: <input type="radio"/> None	<input type="radio"/> Stop Sign	<input type="radio"/> Core	<input type="radio"/> Angle	<input type="radio"/> Severe Wind	<input type="radio"/> Delete (Entire Report)
Type: <input type="radio"/> Carc./Maint.	<input type="radio"/> Yield Sign	<input type="radio"/> Cured/Unknown	<input type="radio"/> Rear End	<input type="radio"/> Slow/Blowing Snow	<input type="radio"/> Non-Traffic Area
Lane Closed: <input type="radio"/> Yes	Activity: <input type="radio"/> On Road	Weather: <input checked="" type="radio"/> Clear	<input type="radio"/> Rear End-Left Turn	<input type="radio"/> Fog/Smoke	<input checked="" type="radio"/> DR/Snowmobile
Utility: <input type="radio"/> No	Off Road: <input type="radio"/> None	Light: <input type="radio"/> Daylight	<input type="radio"/> Rear End-Right Turn	<input type="radio"/> Rain	Area: 19
		Road Condition: <input type="radio"/> Dry	<input type="radio"/> Sideswipe-Opposite	<input type="radio"/> Other/Unknown	Total Lanes: 4
		<input type="radio"/> Snowy	<input type="radio"/> Dither/Unknown	Speed Limit: 00	Posted: <input type="radio"/> Yes
		<input type="radio"/> Debris			<input checked="" type="radio"/> No
		<input type="radio"/> Muddy			
		<input type="radio"/> Wet			
		<input type="radio"/> Icy			
		<input type="radio"/> Slushy			
		<input type="radio"/> Other/Unknown			

Prefix: 18705 Road Name: 14TH AVE

Distance: 75 FT

Prefix: Intersecting Road

Unit Number: 1	State: MI	Driver License Number: V511599497562	Date of Birth: 08/06/1979	License Type: <input checked="" type="radio"/> D	Sex: <input type="radio"/> M	Total Occup: 02	Hazard Action: 15	
Unit Type: <input checked="" type="radio"/> MV	[Redacted]			<input type="radio"/> C	<input type="radio"/> F	Hospital: SPECTRUM		
<input type="radio"/> B	[Redacted]			<input type="radio"/> M	<input type="radio"/> R	Ambulance: AEROMED		
<input type="radio"/> P	[Redacted]			Injury: <input type="radio"/> K	Position: 01	Restrict: 05		
<input type="radio"/> E (train) CI	[Redacted]			<input type="radio"/> A	Ejected/Trapped: <input type="radio"/> Yes <input type="radio"/> No		Hospital: SPECTRUM	

Driver Condition:  1  2  3  4  5  6  7  8  9  10

Interlock:  Yes  No

Alcohol:  Yes  No

Drugs:  Yes  No

Vehicle Registration: [Redacted]

Insurance: NIA

Towed To/By: NIA

VIN: [Redacted]

Make: YAMAHA Model: R150-700 Color: RED Year: UNK

Location of Greatest Damage: 01

Extent of Damage: 3

Vehicle Type:  PA  VA  PU  ST

Vehicle Orientation:  North  South  East  West

First Name: [Redacted] Date of Birth: 08/06/1979

Middle: [Redacted] Street Address: 882 HARDING

Last: [Redacted] City: COAKLEN

Injury:  K  A  B  C  D

State: MI Zip: 49403 Phone Number: 616.893.6460

First Name: [Redacted] Date of Birth: [Redacted]

Middle: [Redacted] Street Address: [Redacted]

Last: [Redacted] City: [Redacted]

Injury:  K  A  B  C  D

Grade:  Unemp. Retiree  Other

Name: [Redacted] Phone Number: [Redacted] Age: [Redacted] Sex: [Redacted] Post: [Redacted]

Person Advised of Damaged Traffic Control: [Redacted]

Damaged Property: [Redacted]

Owner & Police: [Redacted]

Do Not Write or Mark in This Area

0-10 SERIAL NUMBER: 0089773

Do Not Write or Mark Below This Line

1 of 8

090630002728 Exhibit B

OTTAWA COUNTY SHERIFF'S OFFICE INCIDENT REPORT																																						
<input checked="" type="checkbox"/> Original <input type="checkbox"/> Supp.																																						
VENUE <b>16</b>	OFFICER <b>M. BROWN</b>	SERIAL # <b>964</b>	JOB # <b>49235</b>	COMPLAINT # <b>0906250170</b>																																		
INCIDENT TYPE <b>ACCIDENT NON TRAFFIC</b>		CLASS <b>93002</b>	DATE OF INCIDENT <b>6/25/09</b>	TIME OF INCIDENT <b>2015</b>	RELATED INCIDENT(S)																																	
LOCATION OF INCIDENT <b>18705 14TH AVE</b>			DATE REPORTED <b>6/25/09</b>	TIME REPORTED <b>2016</b>	ASSISTING AGENCY SERIAL #																																	
OFFENSE(S) COMMITTED: <b>93002</b>																																						
Offense: Attempted / Completed A/C (circle one for each offense) Offense #1 A <input checked="" type="checkbox"/> Offense #2 A <input type="checkbox"/> C Offense #3 A <input type="checkbox"/> C			OFFENDER SUSPECTED OF USING <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Computer Equip. <input type="checkbox"/> None/NA <input type="checkbox"/> Drugs/Narcotics		BURGLARY ONLY # of Premises Entered: _____ Method of Entry F/N: _____																																	
Location of Offense 1. <u>10</u> 2. _____ 3. _____			Type of Criminal Activity (circle up to three) B Buying/Receiving C Cultivating/Manuf/Publishing D Distributing/Selling E Exploiting Children G Other Gang J Juvenile Gang N None/Unknown Gang <input checked="" type="checkbox"/> Operating/Promoting/Assisting P Possessing/Concealing T Transport/Transmit/Importing U Using/Consuming Y Domestic Related		Weapon Type (circle up to three) <input checked="" type="checkbox"/> None 40 Personal Weapon 12 Handgun 50 Poison 13 Rifle 60 Explosive 14 Shotgun 65 Fire/Incendiary 15 Other Firearm 70 Drugs/Narcotics 20 Knife 85 Asphyxiation 30 Blunt Object 88 Other 35 Motor Vehicle 95 Unknown																																	
<table border="0"> <tr> <td>01 Air/Bus/Train Terminal</td> <td>17 Liquor Store</td> </tr> <tr> <td>02 Bank/Savings &amp; Loan</td> <td>18 Parking Lot/Garage</td> </tr> <tr> <td>03 Bar/Nightclub</td> <td>19 Rental Storage</td> </tr> <tr> <td>04 Church/Synagogue/Temple</td> <td>20 Residence Home</td> </tr> <tr> <td>05 Commercial/Office Buildings</td> <td>21 Restaurant</td> </tr> <tr> <td>06 Construction Site</td> <td>23 Service/Gas Station</td> </tr> <tr> <td>07 Convenience Store</td> <td>24 Specialty Store</td> </tr> <tr> <td>08 Department/Discount Store</td> <td>31 School</td> </tr> <tr> <td>09 Drug Store/Drugs Office/Hospital</td> <td>@ w/in 1000 ft.</td> </tr> <tr> <td>10 Field/Woods</td> <td>32 College/University</td> </tr> <tr> <td>11 Government/Public Building</td> <td>33 Rest Area/Roadside Park</td> </tr> <tr> <td>12 Grocery/Supermarket</td> <td>34 Scale Site</td> </tr> <tr> <td>13 Highway/Road/Alley</td> <td>35 Campground/Cabin</td> </tr> <tr> <td>14 Hotel/Motel/Etc.</td> <td>36 Casino</td> </tr> <tr> <td>15 Jail/Prison</td> <td>88 Other</td> </tr> <tr> <td>16 Lake/Waterway</td> <td>89 Unknown</td> </tr> </table>							01 Air/Bus/Train Terminal	17 Liquor Store	02 Bank/Savings & Loan	18 Parking Lot/Garage	03 Bar/Nightclub	19 Rental Storage	04 Church/Synagogue/Temple	20 Residence Home	05 Commercial/Office Buildings	21 Restaurant	06 Construction Site	23 Service/Gas Station	07 Convenience Store	24 Specialty Store	08 Department/Discount Store	31 School	09 Drug Store/Drugs Office/Hospital	@ w/in 1000 ft.	10 Field/Woods	32 College/University	11 Government/Public Building	33 Rest Area/Roadside Park	12 Grocery/Supermarket	34 Scale Site	13 Highway/Road/Alley	35 Campground/Cabin	14 Hotel/Motel/Etc.	36 Casino	15 Jail/Prison	88 Other	16 Lake/Waterway	89 Unknown
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<input checked="" type="checkbox"/> Suspect <input type="checkbox"/> Arrest <input type="checkbox"/> Owner <input type="checkbox"/> CCW License # _____ Connected to Offense # <u>1</u> County of Issuance _____																																						
NAME (LAST, FIRST, MIDDLE): _____ ADDRESS (STREET, CITY, STATE, ZIP) <b>ME 49424</b> <b>(b)(3):CPSA Section 25(c)</b>																																						
RACE <b>W</b>	SEX <b>F</b>	DOB <b>7/16/79</b>	HEIGHT <b>508</b>	WEIGHT <b>150</b>	HAIR <b>BLN</b>	EYES <b>GRN</b>																																
Subject was armed with (circle one) <input checked="" type="checkbox"/> Unarmed 11 Firearm 12 Handgun 13 Rifle 14 Shotgun 15 Other Firearm 20 Lethal Cutting Instrument 30 Club/Blackjack/Etc.		Type of Arrest (circle one if arrested) O On View Arrest At Scene S Ord. Violation Appearance Citation T Taken into Custody All Other	Suspect Residence (circle one) R Resident Of City <input checked="" type="checkbox"/> Resides In County S Resides In State O Out Of State U Unknown	HOME / CELL PHONE <b>( ) N/A</b>	WORK PHONE <b>( ) N/A</b>	EMPLOYMENT / SCHOOL (S/E) <b>N/A</b>	ETHNICITY <b>HOVA</b>																															
			DRIVER'S LICENSE / OTHER ID <b>(b)(6)</b>	SOCIAL SECURITY NO. <b>N/A</b>																																		
			ARREST CHARGE / CHARGE CODE <b>OWI - OFF ROAD VEH</b>	<b>/5424</b>																																		
			ARREST CHARGE / CHARGE CODE																																			
<input type="checkbox"/> Suspect <input type="checkbox"/> Arrest <input type="checkbox"/> Owner <input type="checkbox"/> CCW License # _____ Connected to Offense # _____ County of Issuance _____																																						
NAME (LAST, FIRST, MIDDLE): _____ ADDRESS (STREET, CITY, STATE, ZIP) _____																																						
RACE	SEX	DOB	HEIGHT	WEIGHT	HAIR	EYES																																
Subject was armed with (circle one)		Type of Arrest (circle one if arrested)	Suspect Residence (circle one)	HOME / CELL PHONE	WORK PHONE	EMPLOYMENT / SCHOOL (S/E)																																
01 Unarmed 11 Firearm 12 Handgun 13 Rifle 14 Shotgun 15 Other Firearm 20 Lethal Cutting Instrument 30 Club/Blackjack/Etc.		O On View Arrest At Scene S Ord. Violation Appearance Citation T Taken into Custody All Other	R Resident Of City C Resides In County S Resides In State O Out Of State U Unknown	( )	( )																																	
			DRIVER'S LICENSE / OTHER ID	SOCIAL SECURITY NO.																																		
			ARREST CHARGE / CHARGE CODE																																			
			ARREST CHARGE / CHARGE CODE																																			
			ARREST CHARGE / CHARGE CODE																																			

Incident Type: ACCIDENT - NON TRAFFIC  
 Date & Time: 6/25/09  
 File Class: 93002  
 Complaint #: 0906250170

MW 6/11

REVIEWED BY 194

OFFICER ASSIGNED 964

DATE 62609

COPIED TO

2 of 8

090630000-2728 Exhibit B

LAST (b)(6)			FIRST (b)(6)			MIDDLE (b)(6)			SEX M (F)	DOB 10/20/86	
STATE MI						ZIP 49403					
PLACE OF EMPLOYMENT / SCHOOL BUTERWORTH HOSPITAL											
STREET N/A				CITY				STATE		ZIP	
RELATIONSHIP TO VICTIM N/A						RELATIONSHIP TO SUSPECT UNK			PE		
LAST (b)(6)			FIRST (b)(6)			MIDDLE (b)(6)			SEX M (F)	DOB 2/1/62	
STATE MI						ZIP 49403					
PLACE OF EMPLOYMENT / SCHOOL											
STREET N/A				CITY				STATE		ZIP	
RELATIONSHIP TO VICTIM N/A						RELATIONSHIP TO SUSPECT VEH PASSENGER			PE		
LAST BROOKHOUSE			FIRST LT. MEKE			MIDDLE			SEX M (F)	DOB	
STREET ADDRESS				CITY				STATE		ZIP	
HOME PHONE: ( )			WORK PHONE: ( )			CELL PHONE: ( )			ETHNICITY HOUA		
PLACE OF EMPLOYMENT / SCHOOL OCSB											
STREET				CITY				STATE		ZIP	
RELATIONSHIP TO VICTIM						RELATIONSHIP TO SUSPECT			PE		
LAST (b)(6)			FIRST (b)(6)			MIDDLE (b)(6)			SEX M (F)	DOB 12/27/59	
STATE MI						ZIP 49403					
PLACE OF EMPLOYMENT / SCHOOL											
STREET				CITY				STATE		ZIP	
RELATIONSHIP TO VICTIM						RELATIONSHIP TO SUSPECT			PE		
LAST (b)(6)			FIRST (b)(6)			MIDDLE (b)(6)			SEX M (F)	DOB	
STREET ADDRESS				CITY				STATE		ZIP	
HOME PHONE: ( )			WORK PHONE: ( )			CELL PHONE: ( )			ETHNICITY HOUA		
PLACE OF EMPLOYMENT / SCHOOL LIFE EMS											
STREET				CITY				STATE		ZIP	
RELATIONSHIP TO VICTIM						RELATIONSHIP TO SUSPECT			PE		

WITNESSES

303022428 EVID 1 B

PERSON REPORTING (LAST, FIRST, MIDDLE): <b>UMCOR, MARK WALTER</b>				ADDRESS (STREET, CITY, STATE, ZIP): <b>2178 WILSON AVE, GAYLORD MI, 497403</b>			
HOME / CELL PHONE: <b>( )</b>	WORK PHONE: <b>( )</b>	RACE: <b>W</b>	SEX: <b>M</b>	DOB: <b>5/23/74</b>	CITY: <b>HQUA</b>	STATE: <b>MI</b>	ZIP: <b>497403</b>

VICTIM # (LAST, FIRST, MIDDLE):				ADDRESS (STREET, CITY, STATE, ZIP):			
HOME / CELL PHONE:	WORK PHONE:	RACE:	SEX:	DOB:	CITY:	STATE:	ZIP:
PLACE OF EMPLOYMENT / SCHOOL / DISTRICT (STUDENT OR WORKING):				HAIR:	WEIGHT:	HAIR:	EYES:

Approved Assault/Homicide Circumstances (circle one)				DRIVER'S LICENSE NO.		SOCIAL SECURITY NO.	
01. Argument	37. Child Playing w/ Weapon			Type of Victim (circle one)			
02. Assault on Law Officer	38. Gun Clearing Accident			I. Individual		S. Security Job	
03. Drug Dealing	39. Hunting Accident			K. Kidnaper		G. Government	
04. Gangland	40. Other Negligent Weapon Handling			P. Perpetrator		R. Runaway	
05. Juvenile Gang	41. Other Negligent Killing					U. Unknown	
06. Lover's Quarrel							

Relationship of Victim to Suspect (Victim code)				Suspect #1		Suspect #2		Suspect #3		Victim Residence (circle one)	
01. Spouse	07. Grandchild	13. Child in Common	05. Laid off Boyfriend or Girlfriend							D. Resident of City	
02. Children Care	08. In-Law	14. Acquaintance	06. Boyfriend/ Girlfriend							C. Resident of County	
03. Friend	09. Stepparent	15. Friend	07. Ex-Spouse							B. Resident in County	
04. Sibling	10. Stepchild	16. Neighbor	08. Employer							A. Out of State	
05. Cousin	11. Step Sibling	17. Acquaintance (Recent)	09. Employer							U. Unknown	
06. Acquaintance	12. Other Family	18. Dating (Boyfriend/Girlfriend)	10. Unknown/None								

Justifiable Homicide Circumstances (circle one)				Victim Code or Offense Number		Injury Type (circle one)		
01. Lethal of Abductor - Police Officer and Non-Police Officer on Crime	03. Criminal - Lethal in Commission or Crime				N. None		M. Other Injury	
02. Criminal Abductor - Police Officer and Non-Police Officer - Not Picked Up by Another Police Officer	04. Criminal (Lethal or Not)		05. Unable to Determine		I. Possible Internal Injury		O. Loss of Teeth	
03. Lethal of Abductor - Victim					L. Severe Laceration		U. Unknown Injury	
04. Criminal Abductor - Right from Crime					P. Fatal			

JUVENILE REFERRAL: The Respondent is <input type="checkbox"/> is not subject to the prior continuing jurisdiction of another court.
MOTHER: TX ADDRESS: TX
FATHER: TX ADDRESS: TX

PARENTAL MARITAL STATUS: <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED
JUVENILE REFERRAL: The Respondent is <input type="checkbox"/> is not subject to the prior continuing jurisdiction of another court.
MOTHER: TX ADDRESS: TX
FATHER: TX ADDRESS: TX
PARENTAL MARITAL STATUS: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED

VEHICLE	OWNER ONLY	YEAR	MAKE	MODEL	COLOR	ENGINE	YEAR	STATE
	VICTIM	UNK	YAMAHA	RHINO TOUR	RED	N/A	N/A	N/A
	OWNER	VIN					TOWED TO	
	SUSPECT		UNK		YAMAHA	108.5 HRS	TOR OLIVER	
	(CIRCLE ONE)	YEAR	MAKE	MODEL	COLOR	ENGINE	YEAR	STATE
	VICTIM							
	OWNER						TOWED TO	
	SUSPECT							

RACE / ETHNIC CODES				RACE (circle one)		ETHNICITY (circle one)	
01. Asian	23. Protestant	41. Gay	54. Female	I. Indian	H. Hispanic		
02. Black	24. Islamic	42. Lesbian	52. Male	A. Asian	O. Other		
03. Amer. Indian	25. Other Religion	43. Homosexual	88. Other Bias	B. Black	U. Unknown Bias		
04. Asian	26. Multi-Religion	44. Heterosexual	99. Other Bias	C. Unknown	A. Arab		
05. Multi-Race	27. Atheist	45. Bisexual	00. No Bias	D. Unknown			
06. Jewish	37. Hispanic	51. Anti-Physical Disability		W. White			
07. Catholic	38. Other Ethn.	52. Anti-Mental Disability					

Handwritten signature or initials at the bottom of the page.

20030002775 Exhibit B

VICTIM #	SUBJECT #	TYPE / CODE	QTY	DRUG CODE	PROPERTY DESCRIPTION - Include Make, Model, Size, Type, Serial, Etc. DRUGS - Include Type, Quantity and Measurement	VALUE	DATE RECOVERED - Month/Day/Year
		/					
		/					
		/					
		/					
		/					

PROPERTY	Property Loss Type	Property Description Code Table (Enter Number in Code Column Above)	Seizure/Drug Type
	0 Other	01 Aircraft	01 Crack Cocaine
	1 State & Government	02 Alcohol	02 Cocaine
	2 Stolen	03 Automobiles	03 Hashish
	3 Contaminated / Tarnished	04 Bicycles	04 Heroin
	4 Damaged / Destroyed	05 Boats	05 Marijuana
	5 Recovered	06 Clothing / Fur	06 Narcotics
	6 Seized	07 Computer Hardware / Software	07 Opium
	7 Stolen	08 Consumable Goods	08 Other Narcotics
	9 Unknown	09 Credit / Debt Cards	09 LSD
	10 Found	10 Drugs / Narcotics	10 PCP
		11 Drug Narcotic Equipment	11 Other Hallucinogens
		12 Farm Equipment	12 Amphetamines
		13 Firearms	13 Other Stimulants
		14 Gambling Equipment	14 Barbiturates
		15 Heavy Construction / Industrial Equipment	15 Other Depressants
		16 Household Goods	16 Other Drugs
		17 Jewelry - Precious Metals	17 Methamphetamine
		18 Livestock	18 OPI
		19 Machinery	77 Other Drug Tests
		20 Money	99 Unknown
		21 Negotiable Instruments	
		22 Non-Negotiable Instruments	
		23 Office Type Equipment	
		24 Other Motor Vehicle	
		25 Purses / Handbags / Wallets	
		26 Radio / TV / VCR	
		27 Recordings - Audio, Visual	
		28 Recreational Vehicle	
		29 Structures - Single Family	
		30 Structures - Other Dwelling	
		31 Structures - Other Commercial Building	
		32 Structures - Industrial / Manufacturing	
		33 Structures - Public / Community	
		34 Structures - Storage	
		35 Structures - Other	
		36 Tools - Power / Hand	
		37 Trucks	
		38 Vehicle Parts / Accessories	
		39 Watercraft	
		77 Fencing Inventory	
		88 Other	
		99 Special	

Free Form

Crime Victim Assistance Pamphlet Provided

Crime Victim Notification Form Provided

OFFICER SIGNATURE: *Math. Bern* #964

SUPERVISOR APPROVAL:

FOLLOWUP REQUIRED: Yes  No

RECORDS FORWARDED:  FIA  Other

Note: If interpreter services were provided to either the victim or suspect in this complaint, list the interpreter as a witness and state "interpreter" in the relationship box along with the language type (i.e. interpreter/Spanish)

548

P.C. BY DEP. M. BROWN #0906250170.

090630ccc-728  
Exhibit B

INFO: ACCIDENT - NON TRAFFIC AREA, OWI ORV.

DISPATCH: ADVISED OF AN ORV CRASHED INTO A TREE. ADVISED FEMALE WAS UNCONCIOUS BUT BREATHING.

CONTACT: ARRIVED AT 18705 14TH AVE. FOLLOWED AN ORV APPROX 3/4 MILE BEHIND RESD INTO THE APPLE ORCHARD. OBSERVED A YAMAHA RHINO 2 SEAT ORV CRASHED INTO A TREE DOWN A RAVINE. OBSERVED TRISHA DIETRICH AND AL DIETRICH AND A WRIGHT TWP FIREMAN ASSISTING A WHITE FEMALE LAYING ON THE GROUND. THEY ADVISED SHE WAS NOT CONSIIOUS BUT WAS BREATHING AND HAD A WOUND TO HER HEAD. DID SMELL AN ODOR OF INTOX COMING FROM THE FEMALE ON THE GROUND LATER ID'D AS (b)(3):CPSA Section 25(c) ALSO SMELLED AN ODOR OF INTOX COMING FROM THE ORV. ADDITIONAL MEDICS RESPONDED AS WELL AS AEROMED. (b)(6) WAS TRANSPORTED BY AEROMED TO SPECTRUM HOSPITAL WHERE SHE IS CURRENTLY LISTED IN GUARDED CONDITION.

CONTACT W/ AL DIETRICH: ADVISED HE AND (b)(6) WENT FOR A RIDE IN THE ORV. HE ADVISED (b)(6) HAD BEEN DRINKING BUT DID NOT KNOW HOW MUCH. STATED THEY WERE GOING NORTH THEN SHE TURNED TO TRY TO GO SOUTH BUT WENT TO WIDE ON THE TURN AND WENT DOWN THE RAVINE. HE STATED HE TRIED TO PULL THE WHEEL SO THEY WOULD NOT GO DOWN BUT COULD NOT. HE WENT OFF THE SIDE, THEN THEY HIT THE TREE AND (b)(6) WAS THROWN FROM THE VEH. HE ADVISED SHE HIT HER HEAD ON A ROCK. (b)(6) DID HAVE MANY CUTS AND SCRAPES ON HIS BODY. DID TAKE VOLUNTARY PBT WITH RESULT .000.

SCENE: DID LOCATE A BOTTLE OF LABATT BEER IN THE WOODS NEAR THE ORV.

DISP: TOT PROSECUTOR FOR CHARGES.

I'll attempt to  
have 7511 locate  
the vin for the  
veh.

190630002728 Exhibit B

OTTAWA COUNTY SHERIFF'S OFFICE  
06/26/09

09-06250170

Original Dictation by Dep Matthew Brown #964  
Job #49235**NATURE:**

Accident – non-traffic area, possible OWI ORV.

**LOCATION:**18705 14<sup>th</sup> Avenue  
Wright Township  
Ottawa County  
State of Michigan**DATE AND TIME:**

6-25-09 at 2016 hours

**DISPATCH:**

I was advised of an off road vehicle crash into a tree in an apple orchard off 14<sup>th</sup> Avenue. I was advised a female was unconscious but breathing.

**CONTACT:**

I arrived at 18705 14<sup>th</sup> Avenue and followed a male subject on an ORV approximately ¼ mile behind the residence into the apple orchard. At that location I observed a Yamaha Rhino, two seat ORV, which was crashed into a tree down in a ravine. In the ravine I observed (b)(6) and a Wright Township fireman assisting a white female laying on the ground. They advised the female was not conscious but breathing and had a wound to her head. While next to the female I did smell an odor of intoxicants coming from her and from the ORV as I passed it. The female on the ground was later identified as (b)(6)

Additional medics arrived on scene as well along with Aeromed. (b)(7)(A) was transported by Aeromed to Spectrum Hospital where she is currently listed in guarded condition. I was advised by the hospital that she did have bleeding inside her head.

**CONTACT WITH (b)(6)**

(b)(6) advised he and (b)(6) went for a ride on the ORV. He advised he had gotten off work and then went over to his friend's residence. He advised (b)(6) had been drinking however he did not know how much she had drank. He stated she and him went for a ride and she was the driver of the ORV. He stated they were going north through the apple orchard and she made a right hand turn and tried to go south but instead went wide on the turn and went down the ravine. He stated he tried to pull



7 of 8



OTTAWA COUNTY SHERIFF'S OFFICE  
06/26/09

0966300002758. Exhibit B

09-06250170

Original Dictation by Dep Matthew Brown #964  
Job #49235

the wheel so they would not go down the ravine but he could not pull it out. He advised as they went down the ravine he went off the side of the ORV, they then hit the tree, and Vanbeveren was thrown from the vehicle.

(b)(6) advised (b)(6) hit her head on a large rock which was the rock she was laying on at the scene. (b)(6) had cuts and scrapes on his body and did take a voluntary PBT with result of .000. He advised he had not been drinking today.

**SCENE:**

At the scene I did locate a bottle of Labatts beer on the woods near the ORV. Lt Mike Brookhouse was also on scene.

**CHARGES:**

Possible charge of OWI for off road vehicle.

**DISPOSITION:**

Open, tot PA for charges.



8 of 8

07010 FDID	MI State	06 Incident Date	25 2009	6 Station	09-0000303 Incident Number	000 Exposure	<input type="checkbox"/> Change <input type="checkbox"/> No Activity	Basic
---------------	-------------	---------------------	------------	--------------	-------------------------------	-----------------	---	-------

**B Location\***  Check this box to indicate that the address for this incident is provided on the Wildland Fire Mobile in Section 4 "Alternative Location Specifications" Use only for Wildland Fires.

Street address  
 Intersection  
 In front of  
 Rear of  
 Adjacent to  
 Directions

18705 14th AVE  
 Conklin MI 49403

These street or directions, as applicable

**C Incident Type \*** 322 Motor vehicle accident with

**E1 Date & Times** Midnight is 0000  
 Check boxes if dates are the same as Alarm Info  
 Alarm \* 06 25 2009 20:16:00  
 Arrival \* 06 25 2009 20:32:00  
 Controlled   
 Last Unit Cleared 06 25 2009 21:25:00

**E2 Shift & Alarm** Local Option  
 Shift or Alarm District Plateau 02

**E3 Special Studies** Local Option  
 Special Study Use Special Study Value

**D Aid Given or Received\***  
 1  Mutual aid received  
 2  Automatic aid received  
 3  Mutual aid given  
 4  Automatic aid given  
 5  Other aid given  
 N  None

**F Actions Taken \*** 32 Provide basic life  
 Additional action taken (1)  
 Additional action taken (2)

**G1 Resources \***  Check this box and skip this section if an Apparatus or Personnel form is used.  
 Apparatus Personnel  
 Suppression 0005 0011  
 Other

**G2 Estimated Dollar Losses & Values**  
 LOSSES: Required for all fires if known. Optional for non fires.  
 Property \$ 000 000  
 Contents \$ 000 000  
 PRE-INCIDENT VALUE: optional  
 Property \$ 000 000  
 Contents \$ 000 000

**Completed Modules**  
 Fire-2  
 Structure-3  
 Civil Fire Cas.-4  
 Fire Serv. Cas.-5  
 EMS-6  
 Hazmat-7  
 Wildland Fire-8  
 Apparatus-9  
 Personnel-10  
 Arson-11

**H1 \* Casualties**  None  
 Deaths Injuries  
 Fire Service  
 Civilian  
**H2 Detector** Required for Confined Fires.  
 Detector alerted occupants  
 Detector did not alert them  
 Unknown

**H3 Hazardous Materials Release**  
 None  
 1  Natural Gas: slow leak, no evacuation or knock notices  
 2  Propane gas: out the tank (as to how see 300 grid)  
 3  Gasoline: vehicle fuel tank or portable container  
 4  Kerosene: fuel burning equipment or portable storage  
 5  Diesel fuel/fuel oil: vehicle fuel tank or portable  
 6  Household solvents: auto/office equip., cleanup only  
 7  Motor oil: from engine or portable container  
 8  Paint: from paint cans totaling < 55 gallons  
 9  Other: Special hazard notices required on spill > 5gals.  
 Please complete the Hazmat form.

**I Mixed Use Property**  
 NN  Not Mixed  
 10  Assembly use  
 20  Education use  
 33  Medical use  
 40  Residential use  
 51  Row of stores  
 53  Enclosed mall  
 58  Bus. & Residential  
 59  Office use  
 60  Industrial use  
 63  Military use  
 65  Farm use  
 00  Other mixed use

**J Property Use\* Structures**

131 <input type="checkbox"/> Church, place of worship	341 <input type="checkbox"/> Clinic, clinic type infirmary	539 <input type="checkbox"/> Household goods, sales, repairs
161 <input type="checkbox"/> Restaurant or cafeteria	342 <input type="checkbox"/> Doctor/dentist office	579 <input type="checkbox"/> Motor vehicle/boat sales/repair
162 <input type="checkbox"/> Bar/Tavern or nightclub	361 <input type="checkbox"/> Prison or jail, not juvenile	571 <input type="checkbox"/> Gas or service station
213 <input type="checkbox"/> Elementary school or kindergarten	419 <input type="checkbox"/> 1- or 2-family dwelling	599 <input type="checkbox"/> Business office
215 <input type="checkbox"/> High school or junior high	429 <input type="checkbox"/> Multi-family dwelling	615 <input type="checkbox"/> Electric generating plant
241 <input type="checkbox"/> College, adult education	439 <input type="checkbox"/> Rooming/boarding house	629 <input type="checkbox"/> Laboratory/science lab
311 <input type="checkbox"/> Care facility for the aged	449 <input type="checkbox"/> Commercial hotel or motel	700 <input type="checkbox"/> Manufacturing plant
331 <input type="checkbox"/> Hospital	459 <input type="checkbox"/> Residential, board and care	819 <input type="checkbox"/> Livestock/poultry storage (barn)
	464 <input type="checkbox"/> Dormitory/barracks	882 <input type="checkbox"/> Non-residential parking garage
	519 <input type="checkbox"/> Food and beverage sales	891 <input type="checkbox"/> Warehouse
<b>Outside</b>	936 <input type="checkbox"/> Vacant lot	981 <input type="checkbox"/> Construction site
124 <input type="checkbox"/> Playground or park	938 <input type="checkbox"/> Graded/care for plot of land	984 <input type="checkbox"/> Industrial plant yard
655 <input checked="" type="checkbox"/> Crops or orchard	946 <input type="checkbox"/> Lake, river, stream	
669 <input type="checkbox"/> Forest (timberland)	951 <input type="checkbox"/> Railroad right of way	Look up and enter a Property Use code only if you have NOT checked a Property Use box.
807 <input type="checkbox"/> Outdoor storage area	960 <input type="checkbox"/> Other street	Property Use 655
919 <input type="checkbox"/> Dump or sanitary landfill	961 <input type="checkbox"/> Highway/divided highway	Crops or orchard
931 <input type="checkbox"/> Open land or field	962 <input type="checkbox"/> Residential street/driveway	

1 of 2

**1 PERSON/ENTITY INVOLVED**

Local Option  Business name (if applicable)  Area Code  Phone Number

Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr./Ms./Mrs. First Name  MI  Last Name  Suffix

Number  Prefix  Street or Highway  Street Type  Suffix

Post Office Box  Apt./Suite/Room  City

State  Zip Code

More people involved? Check this box and attach Supplemental Forms (NFIRS-18) as necessary

**2 Owner**

Same as person involved? Then check this box and skip the rest of this section.

Local Option  Business name (if applicable)  Area Code  Phone Number

Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr./Ms./Mrs. First Name  MI  Last Name  Suffix

Number  Prefix  Street or Highway  Street Type  Suffix

Post Office Box  Apt./Suite/Room  City

State  Zip Code

**Remarks**

Local Option

ATV crash, in orchard, down ravine, diff. to locate, Aeromed called, female, severe head injuries, ribs.

Investigated by OCSD

**Authorization**

18108 Officer in charge ID	Eppink, Kenneth S Signature	FF Position or rank	 Assignment	06 Month	25 Day	2009 Year
18108 Member making report ID in charge	Eppink, Kenneth S Signature	FF Position or rank	 Assignment	06 Month	25 Day	2009 Year

*Handwritten signature*

# ORV driver loses control, runs into tree

M1  
6/25/2009

Fri, Jun 26, 2009

X0960273

JUN 29 2009

ISSUE 40

WRIGHT TOWNSHIP — The driver of an off-road vehicle was hospitalized and her passenger was injured Thursday evening after she lost control and struck a tree.

According to Lt. Mike Brookhouse of the Ottawa County Sheriff's Department, 29-year-old (b)(6) of Holland was driving the ORV on the property located at 18705 14th Avenue in Wright Township when she lost control, went into a ravine and struck a large tree.

Upon impact (b)(6) was thrown from the two-seat Yamaha Rhino, Brookhouse said. The passenger on the ORV, (b)(6), 47, of Conklin, was able to jump away before the vehicle hit the tree. Neither (b)(6) were wearing seatbelts even though they were available on the ORV, Brookhouse said.

(b)(6) was able to place a cell phone call to others at a residence approximately a half mile from the crash, Brookhouse said, who responded to the scene and then contacted 911. Responders initially had a hard time locating the crash site because it was located about three-quarters of a mile off 14th Avenue in an apple orchard, Brookhouse said.

After removing (b)(6) from the crash site, she was taken to a landing zone and transported to Spectrum Butterworth Hospital by Aeromed with multiple injuries, Brookhouse said. She was listed in serious condition this morning. (b)(6) suffered minor scrapes and bruises, Brookhouse said, and was not transported to the hospital.

The Ottawa County Sheriff's Department is still investigating the crash, Brookhouse said.

**Michigan Home Foreclosure**  
Find Foreclosure Listing Providers. The  
Online Business Directory.  
Ads by Google



This In-Depth Investigation (IDI) was initiated based upon an article found online which concerned a fatality involving an **Utility Terrain Vehicle (UTV)**. The following information was obtained from the local investigating officials.

Victim #1 was a 96 year old male. He was the driver of the UTV. His date of birth is 4/26/1913. He weighed 145 pounds and was 5'5" tall. Victim #1 suffered from dementia. The victim was not wearing a seatbelt at the time of the incident and it is unknown if he was wearing a helmet.

Victim #2 was a 72 year old female. Her date of birth was 12/25/1936. She weighed 205 pounds and was 64 inches tall. It is unknown if the victim was in the passenger seat or if she was walking along side of the UTV, but it was suspected she was walking along the side of the UTV at the time of the incident.

The incident occurred on private property on a dirt roadway leading to the victim's ranch. The surface of the roadway was dry. To the south of the roadway it is bordered by a descending dirt embankment and to the north it is an ascending dirt embankment ending at a pond.

According to family members, the victims would wake up around 0530 hours and start working around the ranch. It appeared that victim #2 was either in the passenger's seat or walking along the right side of the UTV feeding the cattle.

The local officials suspect that on Friday, 15 May 2009, victim #1 was with victim #2 working on their land. Victim#1 was driving on a dirt road while victim #2 was placing hay along the road for the cattle, when victim #1 drove up a steep embankment on the left side of the road causing the UTV to flip over onto its right side pinning victim #2 underneath.

A caretaker that comes over on Monday to help with victim #1 found the UTV on the roadway and saw that victim #1 was in the overturned UTV. The caretaker continued to the house to get victim #2. When he arrived at the house and saw that victim #2 was not there, he headed back to the scene. The caretaker then located victim #2 under the UTV which he did not notice the first time. Victim #2 seemed to appear dead and victim # 1 was somewhat conscious saying he wasn't comfortable, and was trying to sit on victim #2. The caretaker then went back to the house and called 911 and went back to the scene to wait until the emergency crew arrived.

When the emergency crew arrived, they pulled victim #1 from the UTV and flew him to the hospital. Victim #2 was pronounced dead at the scene.

When the police arrived they observed the UTV laying on its right side facing east. The UTV sustained minor damage to the hood and both seatbelts were fully retracted, and did not appear to be used. Victim #2 was located under the right side of the UTV. She was pinned underneath the UTV.

Per the officer at the scene, it appeared that victim #1 was driving the UTV at an unknown speed and victim #2 was walking on the right side of the UTV. Due to fresh piles of hay on the ground which matched the hay in the bed of the UTV, it appeared that victim #2 was feeding the cattle. Victim #1 veered the UTV to the left and struck the embankment. Victim #1 continued up the embankment and was pulled off balance and overturned landing on victim #2. Victim #2 suffered fatal injuries from the incident. Victim #1 remained inside the UTV until assisted out by the emergency crew. Due to victim #1's mental state, he was unable to say if he had any specific injuries, only stated he had pain all over his entire body.

Per the coroner's report, cause of death for victim #2 was due to multiple blunt injuries.

**Product Identification:**

The product involved in this In-Depth Investigation was a Utility Terrain Vehicle (UTV). The ATV is identified as a **green 2002 Polaris Ranger 4X4 quad side by side.**  
**VIN# 4XARD50A02D825217**

No further information was obtained.

**Exhibits:**

1. Police Photographs (9 Pictures)
2. Police Report
3. Coroner's Report

090710HCC3729

**Contacts :**

Alameda County Coroner  
480 4<sup>th</sup> St  
Oakland, CA 94607

Contact was initiated to obtain a copy of the autopsy report

California Highway Patrol  
4999 Gleason Rd  
Dublin, CA 94568

Contact was initiated to obtain a copy of the police report

**Exhibit #1 – Police Photographs**  
**IDI# 090710HCC3729**



Photo #1 – This is the location where the UTV went up on the embankment.

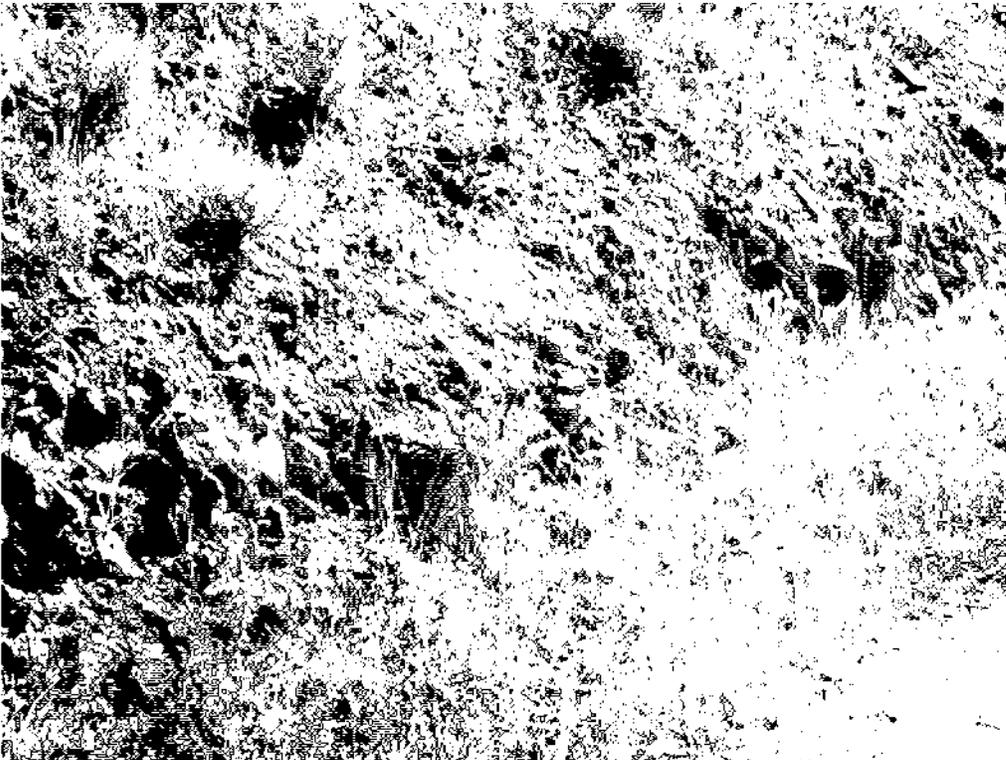


Photo #2 – This is another view of the location where the UTV went up the side of the embankment.

**Exhibit #1 – Police Photographs**  
**IDI# 090710HCC3729**

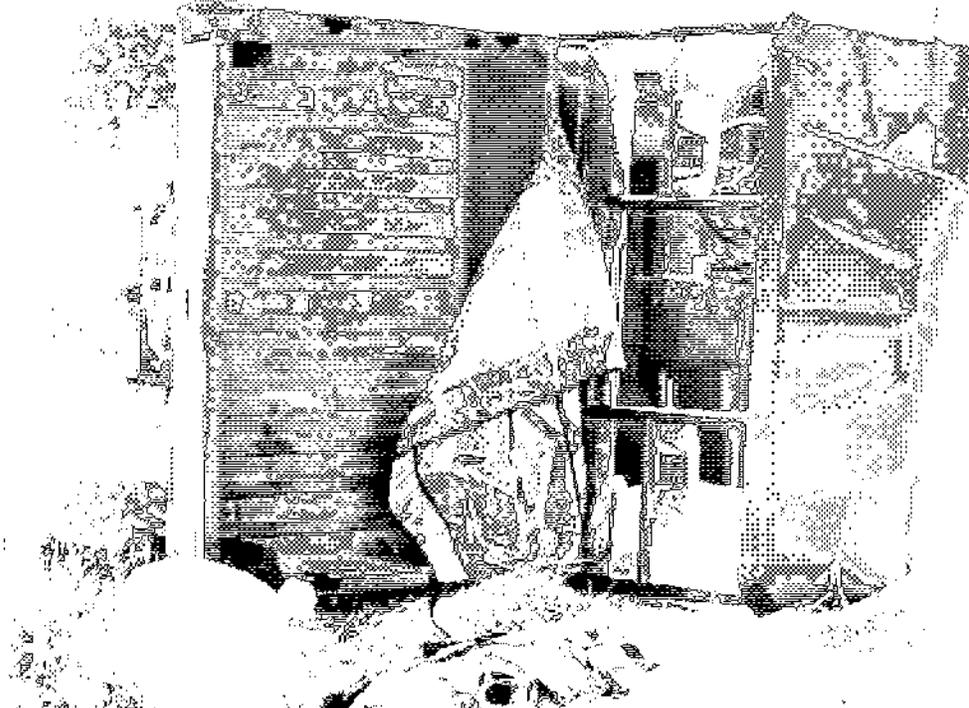


Photo #3 – This view is facing the back side of the UTV.

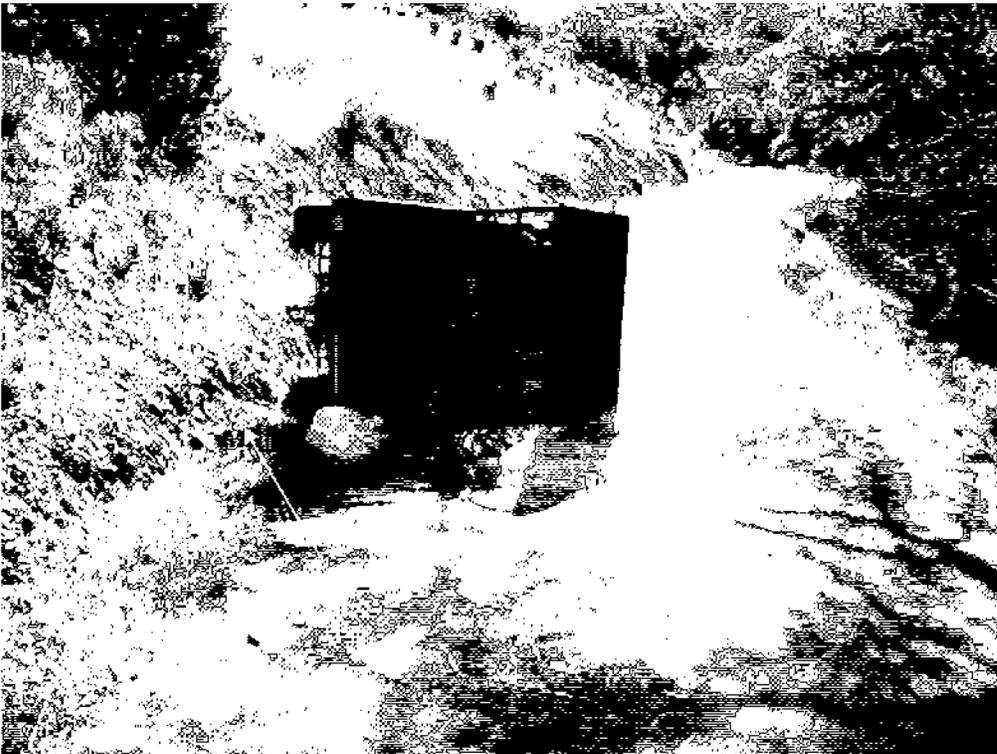


Photo #4 – This is another view of the UTV. The red line indicates where the UTV started going up the incline.

**Exhibit #1 – Police Photographs**  
**IDI# 090710HCC3729**

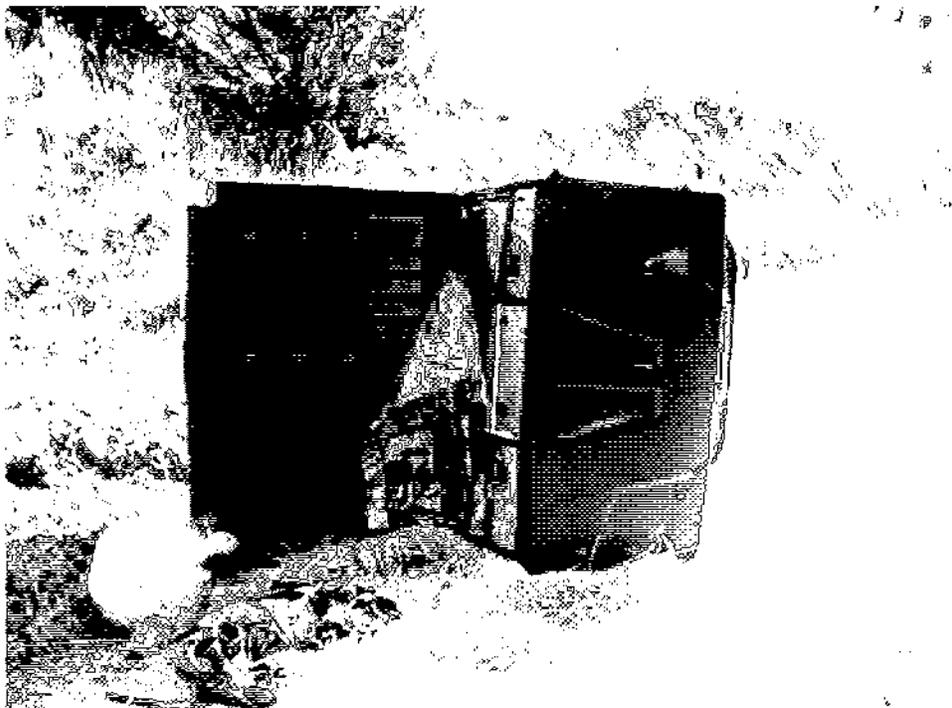


Photo #5 – This is another view facing the top side of the UTV. There is a large amount of hay fell out of the cargo area of the UTV.



Photo #6 – This view is facing the front end of the UTV. The hood fell off during the incident. Victim #2 is still pinned under UTV.

**Exhibit #1 – Police Photographs**  
**IDI# 090710HCC3729**

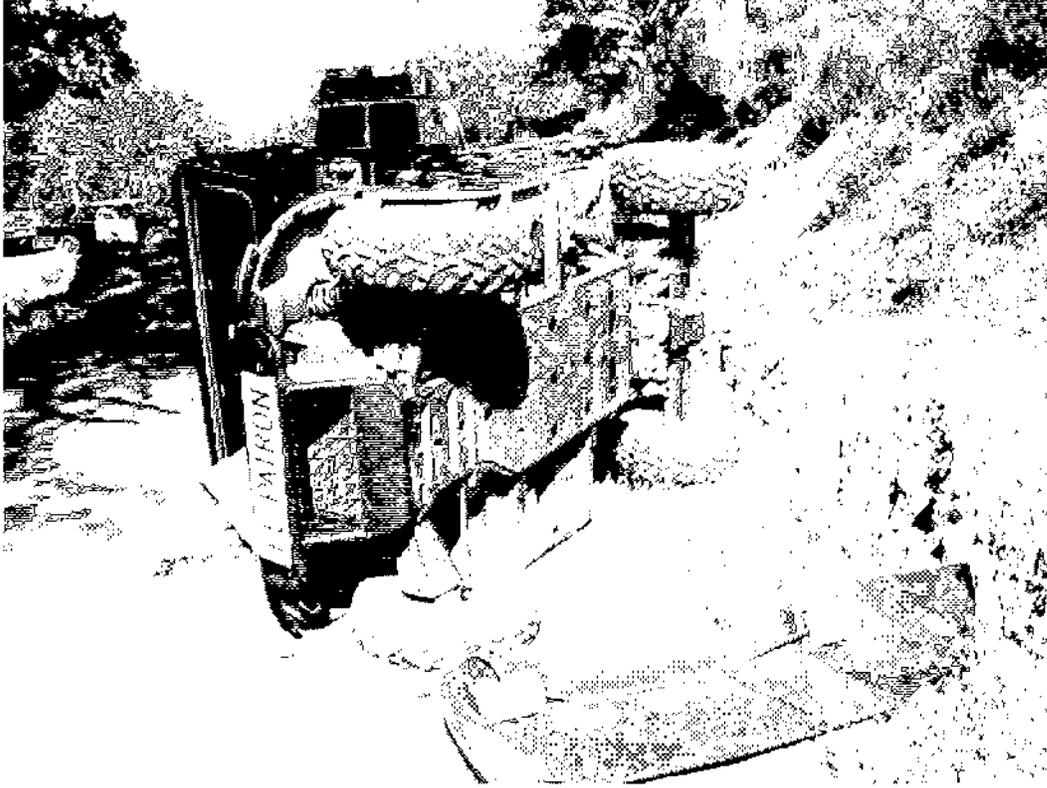


Photo #7 – This is a view of the lower side of the UTV. The hood of the UTV was detached during the incident.

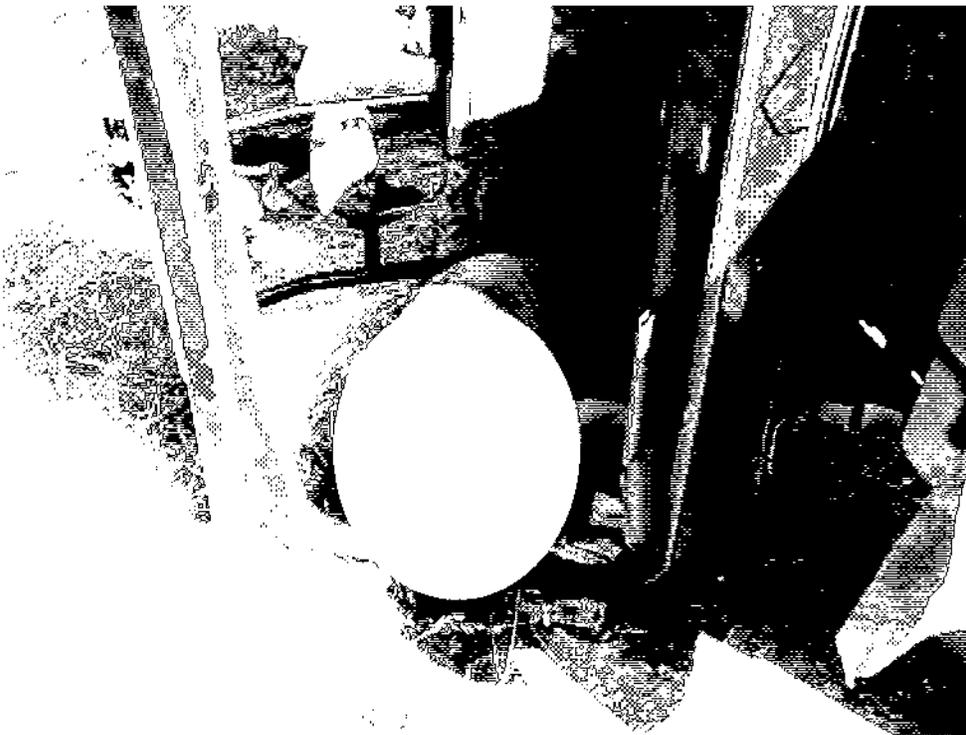


Photo #8 – This view shows how the victim was pinned under the UTV.

**Exhibit #1 – Police Photographs**  
**IDI# 090710HCC3729**

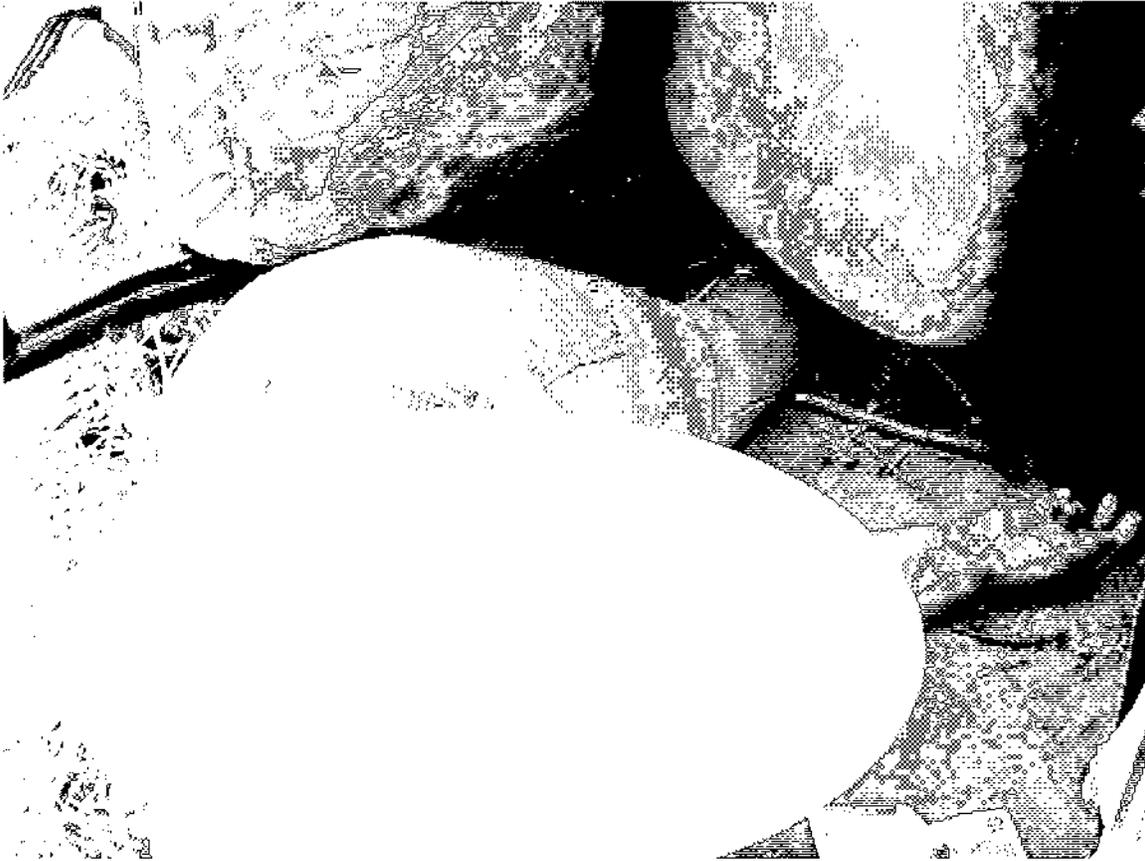


Photo #9 – This is another view of the victim's legs pinned under the UTV.

FATAL

TRAFFIC COLLISION REPORT

SPECIAL CONDITIONS FATAL PRIVATE PROPERTY		NUMBER INJURED 1	1ST & MUM VEHICLY <input type="checkbox"/>	CITY UNINCORPORATED	JUDICIAL DISTRICT PLEASANTON			LOCAL REPORT NUMBER 5-98
MILEPOST INFORMATION: 2.5 MILE(S) WEST OF MINES ROAD NPM 17.00		GPS COORDINATES LATITUDE	LONGITUDE		MO DAY YEAR 05/15/2009	TIME (2400) 2500	NCIC # 9390	OFFICER ID 015676
AT INTERSECTION WITH <input checked="" type="checkbox"/> OR: 2.5 MILE(S) WEST OF MINES ROAD		STATE HWY REL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		PHOTOGRAPHS BY: 10 DIGITAL OFFICER S. Deschenes # 15676		DAY OF WEEK FRIDAY		TOW AWAY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
COLLISION OCCURRED ON: 21530 MINES ROAD		MILEPOST INFORMATION: 2.5 MILE(S) WEST OF MINES ROAD NPM 17.00		GPS COORDINATES LATITUDE		LONGITUDE		PHOTOGRAPHS BY: 10 DIGITAL OFFICER S. Deschenes # 15676
PARTY 1 DRIVER'S LICENSE NUMBER (b)(3):CPSA Section 25(c)		STATE CA	CLASS U	AIR BAG P	SAFETY EQUIP B	VEH. YEAR 2002	MAKE / MODEL / COLOR POLA RANGER GRN	LICENSE NUMBER
OWNER'S NAME (b)(6)		SAME AS DRIVER <input type="checkbox"/>		OWNER'S ADDRESS <input checked="" type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: OFFICER / DRIVER / <input checked="" type="checkbox"/> OTHER		
SEX M		HAIR GRY	EYES BRN	HEIGHT 5-05	WEIGHT 145	BIRTHDATE MO DAY YEAR 04/26/1913	RACE W	VEHICLE IDENTIFICATION NUMBER JXARD50A02D825217
HOME PHONE (b)(6)		BUSINESS PHONE		VEHICLE TYPE 60		DESCRIBE VEHICLE DAMAGE UNK NONE MINOR MOD MAJOR <input checked="" type="checkbox"/> ROLL OVER		SHADE IN DAMAGED AREA DRAWN
INSURANCE CARRIER N/A		POLICY NUMBER		DIR OF TRAVEL ON STREET OR HIGHWAY E 21530 MINES ROAD		SPEED LIMIT		VEHICLE TYPE 60
PARTY 2 DRIVER'S LICENSE NUMBER (b)(6)		STATE CA	CLASS C	AIR BAG P	SAFETY EQUIP F	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER
OWNER'S NAME (b)(6)		SAME AS DRIVER <input type="checkbox"/>		OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER		
SEX F		HAIR BRN	EYES BRN	HEIGHT 5-04	WEIGHT 110	BIRTHDATE MO DAY YEAR 12/25/1936	RACE W	VEHICLE IDENTIFICATION NUMBER:
HOME PHONE (408)897-3170		BUSINESS PHONE		VEHICLE TYPE 60		DESCRIBE VEHICLE DAMAGE UNK NONE MINOR MOD MAJOR <input type="checkbox"/> ROLL OVER		SHADE IN DAMAGED AREA
INSURANCE CARRIER N/A		POLICY NUMBER		DIR OF TRAVEL ON STREET OR HIGHWAY E 21530 MINES ROAD		SPEED LIMIT		VEHICLE TYPE 60
PARTY 3 DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER
NAME (FIRST, MIDDLE, LAST)		SAME AS DRIVER <input type="checkbox"/>		OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER		
STREET ADDRESS		SAME AS DRIVER <input type="checkbox"/>		OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER		
CITY / STATE / ZIP		SAME AS DRIVER <input type="checkbox"/>		OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER		
SEX		HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE MO DAY YEAR	RACE	VEHICLE IDENTIFICATION NUMBER:
HOME PHONE		BUSINESS PHONE		VEHICLE TYPE 60		DESCRIBE VEHICLE DAMAGE UNK NONE MINOR MOD MAJOR <input type="checkbox"/> ROLL OVER		SHADE IN DAMAGED AREA
INSURANCE CARRIER		POLICY NUMBER		DIR OF TRAVEL ON STREET OR HIGHWAY		SPEED LIMIT		VEHICLE TYPE 60
PREPARER'S NAME S. Y. DESCHENES 015676		DISPATCH NOTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		REVIEWER'S NAME M. J. ...		DATE REVIEWED 6/15/09		

DATE OF COLLISION (MO, DAY, YEAR)  
 05/15/2009

TIME(2400)  
 2500

NOTICE

OFFICER

NUMBER  
 5-98

OWNER

OWNER ADDRESS

NOTIFIED

PROPERTY DAMAGE

REPAIRS/REPLACEMENT

YES  NO

**SEATING POSITION**



- 1 - DRIVER
- 2 TO 9 - PASSENGERS
- 7 - STA. WGN REAR
- 8 - RR, QCC TRK OR VAN
- 9 - POSITION UNKNOWN
- 0 - OTHER

**SAFETY EQUIPMENT**

- L - AIR BAG DEPLOYED
- M - AIR BAG NOT DEPLOYED
- N - OTHER
- P - NOT REQUIRED

**W/ BICYCLE - HELMET**

- |         |           |
|---------|-----------|
| DRIVER  | PASSENGER |
| V - NO  | Y - NO    |
| W - YES | Y - YES   |

**CHILD RESTRAINT**

- Q - IN VEHICLE USED
- R - IN VEHICLE NOT USED
- S - IN VEHICLE USE UNKNOWN
- T - IN VEHICLE IMPROPER USE
- U - NONE IN VEHICLE

**EJECTED FROM VEHICLE**

- 0 - NOT EJECTED
- 1 - FULLY EJECTED
- 2 - PARTIALLY EJECTED
- 3 - UNKNOWN

**INATTENTION CODES**

- A - CELL PHONE HANDHELD
- B - CELL PHONE HANDSFREE
- C - ELECTRONIC EQUIPMENT
- D - RADIO / CD
- E - SMOKING
- F - EATING
- G - CHILDREN
- H - ANIMALS
- I - PERSONAL HYGIENE
- J - READING
- K - OTHER

ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (\*) SHOULD BE EXPLAINED IN THE NARRATIVE.

**PRIMARY COLLISION FACTOR**

LIST NUMBER (1) OF PARTY AT FAULT

- A VC SECTION VIOLATED: CITED  YES  NO
- B OTHER IMPROPER DRIVING - UNSAFE TURN
- C OTHER THAN DRIVER\*
- D UNKNOWN\*

**TRAFFIC CONTROL DEVICES**

- A CONTROLS FUNCTIONING
- B CONTROLS NOT FUNCTIONING\*
- C CONTROLS OBSCURED
- D NO CONTROLS PRESENT (FACTOR\* (EXPLAIN COLLISION))
- A HEADLON
- B SIDE SWYFE
- C REAR END
- G BROADSIDE
- E HIT OBJECT
- F OVERTURNED
- G WHEELS/PEDESTRIAN
- H OTHER\*

1 2 3

**SPECIAL INFORMATION**

- A HAZARDOUS MATERIAL
- B CELL PHONE HANDHELD IN USE
- C CELL PHONE HANDS-FREE IN USE
- D CELL PHONE NOT IN USE
- E SCHOOL BUS RELATED
- F TRFFY MOTORTRUCK COMBO
- G TRFFY TRAILER COMBO
- H
- I
- K
- L
- M
- N
- O
- P
- Q

1 2 3

**MOVEMENT PRECEDING COLLISION**

- A STOPPED
- B PROCEEDING STRAIGHT
- C RAN OFF ROAD
- D MAKING RIGHT TURN
- E MAKING LEFT TURN
- F MAKING U TURN
- G BACKING
- H SLOWING / STOPPING
- I PASSING OTHER VEHICLE
- J CHANGING LANES
- K PARKING MANUEVER
- L STOPPED TO WORK
- M OTHER UNSAFE TURNING
- N KING INTO OPPOSING LANE
- O PARKED
- P MERGING
- Q TRAVELING WRONG WAY
- R OTHER\*

**WEATHER (MARK 1 TO 2 ITEMS)**

- A CLEAR
- B CLOUDY
- C RAINING
- D SNOWING
- E FOG / VISIBILITY FT.
- F OTHER\*
- G WIND

**MOTOR VEHICLE INVOLVED WITH**

- A NON - COLLISION
- B PEDESTRIAN
- C OTHER MOTOR VEHICLE
- D MOTOR VEHICLE ON OTHER ROADWAY
- E PARALLEL COLLISION
- F TRAIN
- G BICYCLE
- H ANIMAL\*

1 2 3

**OTHER ASSOCIATED FACTORS (MARK 1 TO 7 ITEMS)**

- A VEHICLE VIOLATED - OTHER
- B VEHICLE VIOLATED - THIS
- C VEHICLE VIOLATED - ALL
- D
- E VISION OBSCUREMENT:
- F UNATTENTION
- G STOP & GO TRAFFIC
- H ENTERING / LEAVING RAMP
- I PREVIOUS COLLISION
- J UNFAMILIAR WITH ROAD
- K DEFECTIVE VEH EQUIP CITED
- L UNINVOLVED VEHICLE
- M OTHER\*
- N NONE APPARENT
- O RUNAWAY VEHICLE

1 2 3

**SOBRIETY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)**

- A HAD NOT BEEN DRINKING
- B HBD - UNDER INFLUENCE
- C HBD - NOT UNDER INFLUENCE\*
- D HBD - IMPAIRMENT UNKNOWN\*
- E UNDER DRUG INFLUENCE\*
- F IMPAIRMENT - PHYSICAL\*
- G IMPAIRMENT NOT KNOWN
- H NOT APPLICABLE
- I SLEEPY / FATIGUED

**LIGHTING**

- A DAYLIGHT
- B DUSK - DAWN
- C DARK - STREET LIGHTS
- D DARK - NO STREET LIGHTS
- E DARK - STREET LIGHTS NOT FUNCTIONING\*

**ROADWAY SURFACE**

- A DRY
- B WET
- C SNOWY / ICY
- D SLIPPERY (MUDDY, OILY, ETC)
- E ROADWAY CONDITION(S) (MARK 1 TO 2 ITEMS)
- A HOLES, DEEP RUT\*
- B LOOSE MATERIAL ON ROADWAY\*
- C OBSTRUCTION ON ROADWAY\*
- D CONSTRUCTION - REPAIR ZONE
- E REDUCED ROADWAY WIDTH
- F FLOODED\*
- G OTHER\*
- H NO UNUSUAL CONDITIONS

**PEDESTRIAN'S ACTIONS**

- A NO PEDESTRIANS INVOLVED
- B CROSSING IN CROSSWALK
- A1 INTERSECTION
- C CROSSING IN CROSSWALK - NOT AT INTERSECTION
- D CROSSING - NOT IN CROSSWALK
- E IN ROAD - INCLUDES SHOULDER
- F NOT IN ROAD
- G APPROACHING / LEAVING SCHOOL BUS

X X

SKETCH FOR SKETCH DIAGRAM, SEE PAGE 4

MISCELLANEOUS



Hdqtrs. \_\_\_\_\_ Dist. Attorney  
 County \_\_\_\_\_ Juvenile  
 Caltrans \_\_\_\_\_ Coroner  
 Oak P.D. \_\_\_\_\_ Other



STATE OF CALIFORNIA  
**SKETCH DIAGRAM**

SS Page 4 (Rev. 8-97) (0.1)

PAGE 4 OF 9

DATE OF INCIDENT  
05/15/2009

TIME  
2500

NCIC NUMBER  
9390

OFFICER I.D.  
015676

NUMBER  
5-98

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE-

# 21530 MINES ROAD



MINES  
ROAD

DRIVEWAY  
ROAD EDGE



POND

VI  
P.2  
PROCEEDINGS



12 FT



DIRT /  
GRAVEL  
DRIVEWAY

PREPARED BY  
S. T. DESCHENES

I.D. NUMBER  
015676

DATE  
05/15/2009

REVIEWER'S NAME

DATE

STATE OF CALIFORNIA  
**FACTUAL DIAGRAM**

DATE OF INCIDENT 05/15/2009	TIME 1500	REPORT NUMBER 9391	OFFICER I.D. NUMBER 015676	PAGE 1
--------------------------------	--------------	-----------------------	-------------------------------	-----------

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE=

# 21530 MINES ROAD



**MINES ROAD**



DRIVEWAY  
ROAD EDGE



POND

V-1



(A)



DIRT  
GRAVEL  
DRIVEWAY

**PHYSICAL EVIDENCE LEGEND**

X = NORTH EDGE OF DRIVEWAY  
 21530 MINES ROAD  
 Y = EAST ROADWAY EDGE OF  
 MINES ROAD.

**VEHICLE POINT OF REST:**  
 RIGHT, FRONT WHEEL OF V-1 - 5' S/  
 OF X AND 2.5 MILES PLUS 6' E/OF Y,  
 RIGHT, REAR WHEEL OF V-1 - 1' S/  
 OF X AND 2.5 MILES E/OF Y.

**PHYSICAL EVIDENCE:**  
 A - 10' SCUFF MARK ON ROCK  
 B - BODY OF PEDESTRIAN (1P 2)  
 C - CENTER SPILLED HAY  
 D - CENTER OF BODY FLUID

**PHYSICAL EVIDENCE**

**LOCATION:**

- A - BEGIN ON X AND 2.5 MILES  
 MINUS 18' E/OF Y, CONT. 1 FOOT N/  
 OF X AND 2.5 MILES MINUS 12' E/OF  
 Y, END 8" N/OF X AND 2.5 MILES  
 MINUS 4' E/OF Y.
- B - HEAD 5' S/OF X AND 2.5 MILES  
 PLUS 5' 6" E/OF Y.  
 BODY 4' S/OF X AND 2.5 MILES  
 PLUS 3' E/OF Y.
- C - BEGIN 4' S/OF Y AND 2.5 MILES  
 MINUS 20' E/OF Y, END 4' S/OF Y  
 AND 2.5 MILES PLUS 3' E/OF Y.
- D - BEGIN 7' S/OF X AND 2.5 MILES  
 PLUS 4' E/OF Y.

PREPARED BY S. T. DESCHENES	I.D. NUMBER 015676	DATE 05/15/2009	REVIEWER'S NAME	DATE
--------------------------------	-----------------------	--------------------	-----------------	------

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
05/15/2009	2500	9390	015676	5-98

1 **FACTS:**

2

3 **NOTIFICATION:**

4

5 I was dispatched to a call of a possible fatal traffic collision with an ambulance responding at  
6 approximately 0745 hours on 05-15-2009. I responded from I-580 E/B west of El Charro Road  
7 after completing a traffic stop at approximately 0805 hours. I arrived on scene at approximately  
8 0845 hours. All times, speeds and measurements in this investigation are approximate.  
9 Measurements were made by roll meter, or odometer unless otherwise stated within this report

10

11 **SCENE DESCRIPTION:**

12

13 This collision occurred on private property at an address of 21530 Mines Road. The collision  
14 occurred on a dirt roadway leading to the home. The south roadway edge is bordered by a  
15 descending dirt embankment. The north roadway edge is bordered by an ascending dirt  
16 embankment ending at a pond. The lighting conditions at the exact time of the collision are not  
17 known. The roadway at the scene was curved slightly to the left when traveling east. The  
18 roadway was ascending to the east.

19

20 **PARTIES:**

21

22 **Party #1 (P-1)** (b)(3):CPSA Sec was located at the scene of the collision at 21530 Mines Road  
23 laying on the dirt roadway being treated by AMR Paramedic Cromen. P-1 was identified verbally  
24 by family on scene, and was determined to be the driver of vehicle #1 (V-1)(Polaris) based on the  
25 statement of Witness Patterson.

26

27 **Vehicle #1 (V-1)(Polaris)** was located on its right side facing east at its point of rest. V-1  
28 sustained minor damage to the hood as a result of this collision. Both seatbelts in V-1 were fully  
29 retracted, and did not appear to be used.

30

31 **Party #2 (P-2)** (b)(3):CPSA Sec was located at the scene of the collision under the right side of V-1  
32 at 21530 Mines Road. P-2 was trapped under V-1. She was identified verbally by family at the  
33 scene.

34

35 **24 hour profile:**

36

37 P-1 and P-2 live alone on a very rural ranch. According to Witness (b)(6), P-1 and P-2's  
38 daughter, she spoke with P-1 and P-2 on 05-14-2009 between 1400 and 1500 hours. I spoke with  
39 (b)(6) on 05-27-2009. She informed me P-1 was under the care of Dr. Jain from Kaiser  
40 Livermore. She also informed me he takes two 25 mg tablets of Seroquel at dinner time for his  
41 dementia.

42

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
S. T. DESCHENES	015676	05/15/2009		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I D	NUMBER
05/15/2009	2500	9390	015676	5-98

1 **PHYSICAL EVIDENCE:**

2

3 Fresh piles of hay on ground matching that which was ejected from V-1. See factual diagram.

4

5 **AGENCIES INVOLVED:**

6

7 ***California Highway Patrol***

8 Sergeant J. Libby, ID 12821, Scene Supervisor

9 Officer S. Deschenes, ID 15676, Investigating Officer

10 Officer J. Doull, ID 15293, Assisting Officer

11 Officer J. Rasmussen, ID 16427, Assisting Officer

12

13 ***Alameda County Fire Department***

14 Engine #8

15 Engine #20

16 Engine #3

17

18 CHP Dispatch called the Alameda County Dispatch. They did not have rosters for the day, and  
19 were unable to obtain the names of the personnel at the scene.

20

21 ***American Medical Response***

22 S. Cremen, Paramedic

23 S. Stoden, EMT

24

25 ***Calstar***

26 Pilot R. Swarner

27 E. Acebo, RN

28 E. Gibson, RN

29

30 **STATEMENTS:**

31

32 P-1 was contacted at John Muir Hospital by CHP Officer Lisa Eide from the Contra Costa CHP  
33 Office. P-1 suffers from dementia and had no recollection of the events that occurred during the  
34 collision.

35

36 P-2 suffered fatal injuries at the scene of the collision and no statement was obtained.

37

38 Witness (b)(6) was contacted at the scene of the collision. He stated he responded to the  
39 Lesico residence at approximately 0730 hours. He stated he took care of P-1 on Mondays and  
40 Fridays so P-2 could go into town and take care of any errands. He stated he saw V-1

41

42

PREPARED BY	ID NUMBER	DATE	REVIEWER'S NAME	DATE
S. T. DESCHENES	015676	05/15/2009		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I D	NUMBER
05/15/2009	2500	9390	015676	5-98

1 **STATEMENTS CONTINUED:**

2

3 overturned. He then saw P-1 inside V-1, and continued up to the house to get P-2. When he  
4 arrived at the house, he saw she was not there. He responded back to the scene and located P-2  
5 under V-1 which he did not notice the first time. He stated it appeared she was deceased. He  
6 stated P-1 kept saying he wasn't comfortable, and was trying to sit on P-2. (b)(6) again  
7 responded to the house and called 911 for emergency personnel to respond. He then waited with  
8 P-1 and P-2 until emergency crews arrived on scene. Witness (b)(6)  
9 stated P-1 did not know what happened in the collision, and did not seem to know P-2 was under  
10 V-1

11

12 **OPINIONS AND CONCLUSIONS:**

13

14 **SUMMARY:**

15

16 P-1 was driving V-1 E/B 21530 Mines Road at an unknown rate of speed. P-2 was walking on the  
17 right side of V-1. Due to fresh piles of hay on the ground which match the hay in the bed of V-1, it  
18 appeared P-2 was feeding cattle. P-1 veered V-1 to the left and struck the embankment. V-1  
19 continued up the embankment and was pulled off balance and overturned landing on P-2. P-2  
20 suffered fatal injuries from the collision. P-1 remained inside the vehicle until assisted out by  
21 Alameda County Fire Department Personnel. Due to P-1's mental state, he was unable to say he  
22 had any specific injuries, only stated he had pain all over his entire body. He was transported by  
23 Calstar to the John Muir Medical Center Trauma Unit to be checked for injuries.

24

25 **AREA OF IMPACT:**

26

27 **AOI #1 (V-1 vs. Embankment)** was located approximately 2.5 miles west of Mines Road, and  
28 approximately 1 foot south of the north roadway edge of 21530 Mines Road.

29

30 **AOI #2 (V-1 vs. Rollover)** was located approximately 2.5 miles west of Mines Road, and  
31 approximately 4 feet south of the north roadway edge of 21530 Mines Road.

32

33 These areas of impact were determined based on the at rest location of V-1 and P-2.

34

35 **CAUSE:**

36

37 P-1 caused this collision by making an unsafe turning movement.

38

39 This cause was determined based on the at rest location of V-1 and P-1.

40

41

42

PREPARED BY	I D NUMBER	DATE	REVIEWER'S NAME	DATE
S. T. DESCHENES	015676	05/15/2009		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
05/15/2009	2500	9390	015676	5-98

**1 RECOMMENDATIONS:**

2

3 None.



### Coroner Investigator's Report

<b>CALL INFO</b>	NAME OF DECEASED (LAST, FIRST MIDDLE) <b>LESICO, Joann W</b>		TENTATIVE # IDENTIFIED <input type="checkbox"/> <input type="checkbox"/>		CASE NUMBER <b>2009-01347</b>		
	REPORTED BY <b>Dispatcher #12535</b>	REPORTED BY PHONE NO. <b>(925) 828-5486</b>	REPORTING AGENCY <b>CHP - Dublin</b>		REFERENCE NUMBER <b>051509-521</b>		
	INVESTIGATOR <b>Mandy Monaghan</b>	CALL DATE AND TIME <b>5/15/2009 9:11</b>	CASE TYPE <b>Removal Case</b>				
<b>DECEDENT</b>	DATE AND TIME OF DEATH <b>FND 5/15/2009 8:30</b>		DATE OF BIRTH <b>12/25/1936</b>	AGE <b>72 Years</b>	GENDER <b>Female</b>	RACE <b>Caucasian/White</b>	
	MARITAL STATUS <b>Married</b>		VET <input type="checkbox"/>				
	HGT <b>64</b>	WEIGHT <b>205</b>	EYE COLOR <b>Blue</b>	HAIR COLOR <b>Brown</b>	OCCUPATION <b>homemaker</b>	EMPLOYER	
	<b>Preliminary Summary</b> 72 y/o female reported by CHP-Dublin. The decedent was a passenger or walking along the right side of a Polaris Ranger 4X4 quad (ATV) driven by her 97 y/o husband. The decedent was crushed after the quad rolled over and on top of her. LESICO's husband was flown to John Muir Medical Center in Walnut Creek and is expected to recover.						
<b>DEATH</b>	LOCATION OF DEATH <b>Broken Arrow Ranch</b>					COD TYPE <b>Other</b>	
	ADDRESS (STREET CITY STATE, ZIP) <b>21530 Mines Road Livermore CA 94550</b>					COUNTY <b>Alameda</b>	
	Manner <b>Accident</b>	Death Certificate Signed By:					
	Cause A <b>Multiple Blunt Injuries</b>					Interval Minutes	
	Cause B					Interval	
	Cause C					Interval	
Cause D					Interval		
Other Significant Conditions							
<b>NOTIFICATION</b>	LEGAL NEXT OF KIN <b>(b)(6)</b>		RELATIONSHIP <b>Husband</b>		TELEPHONE NO. <b>(b)(6)</b>		
	NOTIFIED BY		METHOD <b>Present at Death</b>		DATE AND TIME		
	IDENTIFICATION METHOD <b>Personal Identification</b>		DATE AND TIME <b>5/16/2009 0:00</b>				
<b>INCIDENT</b>	LOCATION OF INCIDENT <b>Broken Arrow Ranch</b>					AT WORK <input type="checkbox"/>	
	ADDRESS (STREET, CITY STATE, ZIP) <b>21530 Mines Rd Livermore CA 94550</b>					COUNTY <b>Alameda</b>	
						DATE AND TIME OF INCIDENT	
INVESTIGATING AGENCY <b>CHP - Dublin</b>			INV AGENCY PHONE NUMBER <b>(925) 828-0466</b>		OFFICER <b>S. DESCHENES</b>		
<b>DISP</b>	FUNERAL HOME <b>Neptune Society</b>			BODY RELEASED TO FUNERAL HOME ON <b>5/21/2009 13:22</b>			
	Full Autopsy <input checked="" type="checkbox"/> Partial Autopsy <input type="checkbox"/> Inspection <input type="checkbox"/> Record Review <input type="checkbox"/> Inspection w/Specimen <input type="checkbox"/>			EXAM BY <b>David Levin</b>			



Alameda County Sheriff's Office  
Gregory J. Ahern, Sheriff / Coroner  
Coroner's Bureau, 480 4th Street, Oakland, CA  
94607-3829  
(510) 268-7300 / (510) 268-7333 (fax)

### Investigator Narrative

**Decedent:** (b)(3):CPSA Section  
**Case Number:** 2009-01347  
**Investigator:** Mandy Monaghan

#### First Call Information:

On Friday, May 15, 2009, about 0911 hours, I (MONAGHAN) was notified of an ATV accident at 21530 Mines Rd, Livermore. Dublin CHIP Dispatch had little information due to poor radio and cell phone reception with the officer at the scene, but was able to confirm one fatality. No other information was available at that time. (MLM2794)

#### Medical Summary:

Decedent was involved in an ATV accident. (MLM2794)

#### Description of the Death/ Injury Scene:

On Friday, May 15, 2009, about 1120 hours, Deputy R. GONZALEZ and I (MONAGHAN) arrived at the entrance to 21530 Mines Rd, Livermore. The property entrance was a dirt road for several homes and ranches. 21530 Mines Rd, also known as Broken Arrow Ranch, was approximately 2.5 miles up the dirt road.

Upon our arrival at the scene I noticed an overturned Polaris Ranger 4X4 quad (CA #84E24P) in the roadway. We were met by CHP Officer S. DESCHENES, who told me the following.

(b)(6), who discovered the crash, drives to Broken Arrow Ranch Monday through Friday to care for the decedent's husband, (b)(6). On Friday, May 15, 2009, about 0730 hours, (b)(6) was driving to the decedent's home, when he discovered Joann and (b)(6) (b)(6)'s quad overturned in the roadway with (b)(3):CPSA pinned underneath it. (b)(6) went to a nearby phone and called 911. ALCO fire responded and determined (b)(3):CPSA deceased at 0830 hours. (b)(6) was life lifted to John Muir Medical Center in Walnut Creek and is expected to recover.

According to family, the (b)(6) would wake up around 0530 hours and start working around the ranch. It appeared that (b)(3):CPSA was either in the passenger's seat or walking along the right side of the quad when the crash occurred. Officer DESCHENES suspects that while (b)(3):CPSA was placing hay along the road for the cattle, when (b)(6) drove up a steep embankment on the left side of the road causing the quad to flip over onto its right side. (b)(3):CPSA S was subsequently pinned under the quad and sustained head trauma.

GONZALEZ took several photos of the decedent and scene before the quad was moved. Several CHP officers and family members assisted in lifting the quad off (b)(3):CPSA S allowing GONZALEZ and I to pull her out. We placed (b)(6) onto a gurney and put her in the Coroner van for transportation back to the bureau. (MLM2794)



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**Body Identification:**

The decedent was identified as Joann LESICO by family. (MLM2794)

**Next of Kin Investigation:**

Jessie LESICO is the decedent's husband and legal next of kin. Jessie LESICO was involved in the crash and flown to John Muir Medical Center. According to LESICO's family Jessie LESICO is 97 y/o and has dementia. Due to the circumstances of this case the decedent's daughter, Karen CHAULET, has authorization to make funeral arrangements. (MLM2794)

**Other Agency Reports:**

CHP-Dublin report # 051509-521 (MLM2794)

**Property and Evidence:**

Coroner receipt #28868 was issued for the decedent's body and clothing (MLM2794)

**Coroners Fees:**

On Friday, May 15, 2009, about 1130 hours, I (MONAGHAN) spoke with the family regarding the Coroner Fee's associated with this case. (MLM2794)

**Other Investigative Details/ Supplemental Information:**

**Findings:**

On Saturday, June 13, 2009, about 1300 hours, I (MONAGHAN) reviewed this case to determine a manner of death. Upon reviewing the autopsy protocol, case file, and other documents associated with this case, I find this death to be an accident. The autopsy protocol established the cause of death as multiple blunt injuries. The decedent was crushed by an ATV after it rolled over on top of her. (MLM2794)

**Supervisor Review:**

On July 11, 2009, I (GENTLE) reviewed this report and concur with the findings and content. I placed this case to Awaiting Closure. (FJG#10)



Case Name:

(b)(3):CPSA Section 25(c)

TOXICOLOGY NUMBER: CVT-09-6274

W.

3 ml leg blood & 7.5 ml urine each labeled "Lesico, Joann; 5-18-2009; 2009-01347"

Specimen Description:

NOTE: Heart blood indicated, none rec'd.

Delivered by Tricor

Date 19-May-09

Received by Bill Posey

Date 19-May-09

Request: Ethyl Alcohol

Agency Case # 2009-1347

Requesting Agency

Alameda Co. Coroner's Office  
Attn: Records  
480 4th Street  
Oakland CA 94607

Report To

Alameda Co. Coroner's Office  
Attn: Dr. Levin  
480 4th Street  
Oakland CA 94607

RESULTS

Specimen: Peripheral Blood Sample

Blood Alcohol Content:

Blood Ethyl Alcohol = Negative

Ethyl Alcohol analysis performed and recorded on: 05/19/09

05-26-09 15:32 FILE

VM

MAY 26 09 15:31

Analyst

B. L. Posey

May 21, 2009

B.L. POSEY  
S.N. KIMBLE  
Directors

1580 Tollhouse Road  
Clovis, California 93611  
Phone (559) 323-9940  
Fax (559) 323-7502

# Alameda County Sheriff's Office

Coroner's Bureau  
480 4<sup>th</sup> Street, Oakland, CA 94607-3829



Gregory J. Ahern, Sheriff

Coroner - Public Administrator - Marshal  
Director of Emergency Services

## M E M O R A N D U M

DATE: May 18, 2009  
FROM: David E. Levin, M.D.  
TO: Case File 2009-01347  
SUBJECT: AUTOPSY PROTOCOL

Autopsy performed upon the body of (b)(3):CPSA Section 25 at the Coroner's Bureau, 480 4th Street, Oakland, California, on May 18, 2009, at 9:20 a.m.

### AUTOPSY FINDINGS

- 1) MULTIPLE EXTERNAL CONTUSIONS, ABRASIONS, AND LACERATIONS.
- 2) FRACTURES OF THE FOLLOWING BONES: SKULL AND RIBS.
- 3) CEREBRAL CORTICAL CONTUSIONS.
- 4) SUBDURAL AND SUBARACHNOID HEMORRHAGE.
- 5) BLOOD ASPIRATION.
- 6) LIVER CONTUSION.
- 7) MILD NEPHROSCLEROSIS.
- 8) LEIOMYOMAS, UTERUS.
- 9) LEG BLOOD: NEGATIVE FOR ETHYL ALCOHOL.

CAUSE OF DEATH: MULTIPLE BLUNT INJURIES.

cc: EMS



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Alameda County

Body of (b)(3):CPSA Section 25(c)

23 fingernails are of intermediate length and contain a small to  
24 moderate amount of dirt as well as adherent blood.

25 The back is unremarkable except for an approximately 24-cm  
26 area of multiple tan parchmentlike changes, 2-17 cm, present at  
27 the lateral left side of the back and extending up to the mid  
28 left axillary line. These areas are hard, tan, parchmentlike  
29 changes compatible with postmortem drying, but the possibility  
30 of these being due to blunt injuries cannot be excluded.

31 The lower extremities are unremarkable except for blunt  
32 injuries.

33 **EVIDENCE OF MEDICAL THERAPY:**

34 1) Cardiac monitoring pads on the abdomen and upper  
35 extremities.

36 **MATERIALS PRESENT WITH THE BODY:**

37 There are dirt and tan-brown plant-type material present on  
38 the head, upper extremities and torso.

39 **BLOOD PRESENT ON THE BODY:**

40 There is blood present on the head/face, upper extremities,  
41 and torso.

42 **BLUNT INJURIES PRESENT ON THE BODY:**

43 **HEAD AND NECK:**

44 1) Purple abrasions-contusions involving the right upper

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Body of (b)(3):CPSA Section 25  
(c)

45 eyelid, 4 cm, and the right lower eyelid, 2.5 cm.

46 2) A purple contusion, ill-defined, 1 cm, present at the  
47 mid-forehead between the eyebrows.

48 3) A purple abrasion-contusion, 2 cm, on the left side of  
49 the forehead.

50 4) Multiple purple abrasions-contusions on the nose,  
51 involving the bridge of the nose, 2.5 cm, the inferior mid nose,  
52 1 cm, and the alae, approximately 1 cm each. There are also a  
53 few smaller foci scattered throughout the nasal skin.

54 5) A purple contusion-abrasion involving the left side of  
55 the face, 13 x 9 cm, including the left upper and lower eyelids,  
56 the left zygoma, the left maxillary area, and the left zygomatic  
57 arch area. This is adjacent to the left ear laceration  
58 described below.

59 6) A 5-cm laceration of the left ear. This involves the  
60 inferior attachment of the ear, passing through the earlobe as  
61 well as the tragus and creating undermining of scalp for  
62 approximately 3 cm superiorly. There is tissue-bridging at the  
63 depths of this wound. There is no foreign material identified  
64 within this wound. There is abrasion-contusion present adjacent  
65 to the edges of this laceration, and this laceration is in  
66 continuity with the contusion-abrasion described at the left

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Body of (b)(3):CPSA Section 25(c)

67 side of the face.

68 7) A purple contusion, 1 cm, present at the end of the  
69 upper lip just to the right of the midline.

70 8) A purple-tan abrasion, 3 x 1.5 cm, present at the end  
71 of the lower lip and extending onto the chin.

72 9) A purple-tan, focally dried, parchmentlike abrasion,  
73 0.5 x 1.5 cm, present at the inferior chin and extending toward  
74 the right side.

75 10) An extensive area of purple abrasion-contusion,  
76 16 x 13 cm, involving the right parietal, occipital, and  
77 temporal scalp. Within this area of abrasion-contusion is a  
78 transversely oriented 3.5-cm linear laceration at the superior  
79 right parietal scalp, extending for up to 8 mm in depth, with  
80 tissue-bridging at the depth of this wound, and there is no  
81 foreign material identified. There is extensive inferior  
82 undermining of this laceration for approximately 6 cm. In  
83 addition, 2 cm inferior to this transversely oriented laceration  
84 are two additional lacerations, 1.0 cm and 0.5 cm.

85 11) A purple contusion-abrasion, 6 x 2.5 cm, involving the  
86 helix of the right ear, including the outer and inner portions.

87 CHEST AND ABDOMEN:

88 None.

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Body of (b)(3):CPSA Section 25  
(c)

89           RIGHT UPPER EXTREMITY:

90           1) A purple abrasion-contusion, 8 X 4 cm, at the top of  
91 the right shoulder.

92           2) An irregular area of superficial epidermal skin  
93 slippage—gray, pink and purple, and 27 x 10 cm—present over  
94 the posterior right forearm and extending over the lateral right  
95 elbow, consistent with an abrasion-contusion.

96           3) A purple contusion-abrasion, 5 x 4 cm, on the posterior  
97 right elbow.

98           4) A purple-tan abrasion, 9 x 3 cm, present at the distal  
99 anterior-lateral right forearm.

100           5) Multiple abrasions, approximately five, 0.5 x 1.5 cm,  
101 present at the back of the right hand.

102           6) An ill-defined purple contusion involving the distal  
103 posterior right hand and overlying the proximal second through  
104 fourth phalanges, approximately 8 cm.

105           7) Three purple abrasions, 0.5 to 1.0 cm, present over the  
106 posterior right second finger, overlying the first phalanx and  
107 the MC joint.

108           8) A purple abrasion, 3 x 1 cm, involving the medial and  
109 posterior right third finger, overlying the PIP joint and  
110 proximal phalanx.

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Body of (b)(3):CPSA Section 25  
(c)

111 LEFT UPPER EXTREMITY:

112 1) A purple contusion, 10 x 4 cm, at the anterior left  
113 shoulder.

114 2) A contusion, 8 x 5 cm, present at the lateral left  
115 shoulder.

116 BACK:

117 1) An area of tan parchmentlike drying and hardening of  
118 the skin at the lateral left side of the back, as described  
119 under "GENERAL FINDINGS." The possibility of this being related  
120 to a blunt injury cannot be excluded.

121 2) A 1.5-cm gray abrasion at the lower left side of the  
122 back.

123 LOWER EXTREMITIES:

124 1) A purple abrasion-contusion, 16 x 8 cm, present at the  
125 anterior-medial proximal left thigh.

126 2) A 45 x 20-cm area of superficial epidermal skin  
127 slippage with associated epidermal blister formation containing  
128 slightly cloudy pink fluid. This is located over the anterior  
129 and medial aspects of the left thigh, knee, and left lower leg.  
130 The possible etiologies include superficial friction-type  
131 abrasion. Although this has somewhat the appearance of a  
132 thermal injury, evaluation of the pants present with the body

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Body of (b)(3):CPSA Section 25

133 shows no thermal damage.

134 3) A 2-cm tan-purple abrasion-contusion on the anterior  
135 right knee.

136 INTERNAL EXAMINATION

137 The body is opened through the usual Y-SHAPED THORACO-  
138 ABDOMINAL INCISION under water, and no pneumothoraces are  
139 identified. The head is opened through the usual INTERMASTOIDAL  
140 INCISIONS.

141 BODY CAVITIES: The organs of the chest and abdomen are in  
142 the usual anatomic positions. The pleural, pericardial and  
143 peritoneal surfaces are smooth and shiny, although there is  
144 extensive subpleural hemorrhage at the site of hemorrhagic rib  
145 fractures. There are multiple hemorrhagic lateral right rib  
146 fractures involving the second through seventh lateral ribs, and  
147 three of these are fractured in multiple places. There are two  
148 minimally hemorrhagic fractures involving the posterior left  
149 tenth and eleventh ribs. There are no other rib fractures, and  
150 there are no other areas of trauma to the chest wall. The lungs  
151 fill the pleural spaces. There are contusions of the anterior  
152 right hemidiaphragm, and adjacent to these are focal thin  
153 subcapsular contusions of the liver. These contusions number  
154 approximately five in the hemidiaphragm, up to 10 cm, and

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Body of (b)(3):CPSA Section 25

155 approximately three in the right lobe of liver, up to 8 cm. The  
156 liver contusions average 1-2 mm in thickness, and the hemi-  
157 diaphragm contusions involve the full thickness of the  
158 diaphragm.

159 CENTRAL NERVOUS SYSTEM AND HEAD: Reflection of the scalp  
160 reveals bilateral parietal, temporal and occipital soft-tissue  
161 contusions. There is a hinge-type fracture extending across the  
162 floor of the right and left middle fossae and through the sella  
163 turcica. In addition, there are comminuted fractures of the  
164 left side of the posterior fossa and the left side of the  
165 frontal fossa. There is a diffuse thin layer of subdural  
166 hemorrhage throughout the cranial vault, 1-3 mm in thickness,  
167 aggregating to approximately 50 mL. There are multiple areas of  
168 subarachnoid hemorrhage involving the right frontal-parietal-  
169 temporal lobes, left parietal-occipital lobes, as well as the  
170 cerebellum. All of these average 1-3 mm in thickness. The  
171 brain, 1200 grams, shows flattening of the gyri and filling of  
172 the sulci, characteristic of cerebral swelling. There are  
173 cerebral cortical contusions at the inferior left frontal lobe.  
174 Multiple additional sections reveal no further contusions, no  
175 hemorrhages, no tumors, and no areas of obvious old infarction.

176 NECK: The strap muscles are negative for hemorrhage. The

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Body of (b)(3):CPSA Section 25  
(c)

177 hyoid bone and thyroid and cricoid cartilages are negative for  
178 fracture. The larynx is free of obstructing material. The  
179 cervical vertebral column is intact.

180       CARDIOVASCULAR SYSTEM: The heart, 360 grams, has smooth  
181 epicardial and endocardial surfaces. The valves and chambers  
182 are normally formed. The myocardium is firm and brown. The  
183 interventricular septum and lateral wall of the left ventricle  
184 average 1.3 cm in thickness in the outflow tract, and the right  
185 ventricle averages 0.4 cm. The coronary arteries arise from the  
186 aorta in the usual fashion, with predominance of the left  
187 circumflex coronary artery. There is focal mild coronary artery  
188 atherosclerosis with calcifications focally making dissection  
189 difficult. The left anterior descending artery has several foci  
190 of calcific atherosclerotic stenosis, causing up to 30%  
191 occlusion at the proximal aspect. The left circumflex and right  
192 coronary arteries are unremarkable. The aorta shows moderate  
193 calcific atherosclerosis.

194       RESPIRATORY SYSTEM: The trachea and bronchi are lined by a  
195 smooth purple-gray mucosa and contain a small to moderate amount  
196 of purple hemorrhagic and mucoid fluid. The pulmonary arteries  
197 are negative for thromboemboli. The left lung, 340 grams, and  
198 the right lung, 350 grams, show mild dorsal dependent congestion

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Body of (b)(3):CPSA Section 25  
(c)

199 and edema as well as multiple foci consistent with blood  
200 aspiration in the left lower lobe of lung and the right upper  
201 and lower lobes of lung. Multiple sections reveal no areas of  
202 consolidation or tumor.

203       **GASTROINTESTINAL SYSTEM:** The tongue is removed and shows  
204 no contusions, abrasions, or lacerations.

205       The esophagus is unremarkable and lined by a smooth gray  
206 mucosa. The stomach contains approximately 50 mL of purple  
207 hemorrhagic and viscous tan-purple fluid. The stomach is lined  
208 by a smooth tan mucosa without ulcers or tumors. The small and  
209 large intestines are unremarkable. The pancreas is of normal  
210 size and shape, and cross sections reveal an unremarkable  
211 lobulated purple-tan parenchyma.

212       **HEPATOBIILIARY SYSTEM:** The liver, 1600 grams, has a few  
213 subcapsular contusions at the anterior right lobe, as described  
214 above in the "BODY CAVITIES" section. The remainder of the  
215 capsule is smooth and unremarkable. The liver parenchyma is  
216 soft and tan-brown. There is no fibrosis, no steatosis, and no  
217 tumor. The gallbladder is an unremarkable saccular structure  
218 containing 2 mL of tan bile and is lined by a smooth tan mucosa  
219 with a few 1- to 2-mm tan-yellow spots, characteristic of  
220 cholesterolosis.

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Body of (b)(3):CPSA Section 25(c)

221           ENDOCRINE SYSTEM: The pituitary, thyroid, and adrenal  
222 glands are unremarkable.

223           HEMATOLYMPHOID SYSTEM: The spleen, 130 grams, has a smooth  
224 gray capsule and soft purple parenchyma. There is no enlarged  
225 lymphadenopathy. The bone marrow is firm, red-purple and  
226 gritty.

227           GENITOURINARY SYSTEM: The left kidney, 120 grams, and the  
228 right kidney, 120 grams, have capsules that strip with ease to  
229 reveal mildly granular cortical surfaces, consistent with mild  
230 nephrosclerosis. The corticomedullary junctions are well  
231 delineated, and the cortices average 6 mm. The renal parenchyma  
232 is tan-brown. The renal pelves and calyces are unremarkable.  
233 The ureters are unremarkable. The bladder contains approxi-  
234 mately 10 mL of cloudy, light yellow urine and is lined by a  
235 smooth gray-white unremarkable mucosa.

236           The uterus, tubes, and ovaries (120 grams, combined) are  
237 normally situated in the pelvis. The bilateral ovaries, 2.5 cm  
238 each, are unremarkable--atrophic. The bilateral fallopian tubes  
239 are unremarkable. The uterus, 8 cm, has the usual pear shape  
240 but is moderately distorted by multiple intramural and  
241 submucosal whorled white-gray leiomyomas, 0.5 to 2.5 cm. The  
242 endocervical and endometrial mucosa average 1 mm, and the

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Body of (b)(3):CPSA Section 25(c)

243 endometrial cavity is empty.

244 MUSCULOSKELETAL SYSTEM: No further abnormalities.

245 SPECIMENS:

246 1) Heart blood

247 2) Leg blood

248 3) Liver

249 4) Tissue

250 5) Urine.

251

252

253

254

255 DEL/cah

  
David E. Levin, M.D.

ISSUE 37

Pleasanton, CA  
(Alameda Co.)  
Tri-Valley Herald  
(Cir. 5xW. 34,100)  
(Cir. S. 35,600)

12

MAY 16 2009

Allen's P. C. B. Est. 1888

7564 Livermore

**WOMAN KILLED IN ATV**

**ROLLOVER:** A 72-year-old woman was killed when an ATV rolled on top of her while she was working with her husband at their rural Livermore home, the California Highway Patrol reported.

The woman was identified as (b)(3):CPS by the Alameda County Coroner's Office.

The CHP is still investigating when the accident, which happened at 21530 Mines Road, happened, said Officer John Bautista.

The CHP was called at 7:45 a.m. Friday.

Bautista said (b)(6) 96-year-old husband was driving the vehicle while she stood nearby throwing hay for cattle. It is believed he drove up an embankment, and the vehicle tipped and rolled over on top of her. A caretaker found them and called emergency crews. The man, whose identity was not available, was flown by helicopter to a hospital as a precaution, but he was not injured. His wife was pronounced dead at the scene. Bautista said the incident is under investigation, but there were no initial signs drugs or alcohol were involved.

— Eric Louie



This In-Depth Investigation (IDI) was initiated based upon a death certificate concerning a fatality involving a Utility Terrain Vehicle (UTV). The following information was obtained from the local investigating officials.

The victim was a 65 year old male. His date of birth was 6/24/1942. However, according to the police report, the victim's date of birth was 6/23/1943 and he was 64 years old. The victim weighed 193 pounds and was 69 inches tall. The victim was wearing neither a seat belt nor a helmet while operating the UTV.

The victim's son stated that the victim has been riding ATVs for over 40 year without an incident and he also stated that the victim never used the seat belts.

The incident took place in a recreational area referred to by the locals as the sand dunes. The area where the incident took place is a hilly terrain, approximately 60 to 100 feet high, adjacent to a riverbed. The incident occurred on a steep incline of about 60 feet high, and the width of the roadway was reduced. The terrain consisted of hard packed, rocky earth covered with loose rocks, dirt, holes, deep rut and vegetation.

The weather at the time of the incident was clear, sunny, cool and dry. There was little or no wind and the surface of the ground was dry.

On Monday, 2/11/2008, the victim and his family went camping in the sand dunes area. During the day they set up camp and the victim would get in the UTV and go on short rides around the area for the rest of the day. On Tuesday, 2/12/2008, the victim woke up around 0745 hours and spent the day playing with his grandchildren. Later that day the victim and his friends all got on separate UTVs and went for a ride through the off-road area of the sand dunes. One of the victim's friends told the victim that the left rear drive axle on his UTV had broken at the CV joint, so they started to head back to camp. At some point during the return, the parties became separated.

The parties that left with the victim had returned to the camp and the victim was no were to be found. The victim's son went out looking for him and found him 30 minutes later at the bottom of a steep hill next to the UTV, the victim was bleeding.

The victim's son went back to the camp site to call 911.

The local officials suspect that on the day of the incident the victim was having problems with one of the axles on his UTV and he was driving it back to the camp site. The victim was to follow the river bed back, but for some unknown reason he traveled over a ridge where he lost control of the UTV and it rolled over several times ejecting the victim.

The local officials described the scene as follows, the UTV was laying on its right side. The front of the UTV was positioned toward the northwest. The driver seat was located outside of the UTV and positioned approximately one foot south of the victim's head. The right passenger seat and two rear seats were still attached and intact inside the UTV. No seat belts were attached to the victim's seats in the UTV.

Per the officer at the scene, the UTV was found in the "on" position. The UTV appeared to be in "drive" gear and the parking brake engaged. There was no noticeable electrical power to the UTV.

The officials suspect the victim was traversing a trail above a steep incline when he lost control on of the UTV and it rolled down the incline, ejecting him and causing the trauma to the body. There was blood splatter on several rocks on the hill side where the victim was ejected.

Lying next to the right arm and across the upper back of the victim was a gray seat belt. The seat belt did not appear to be damaged to the areas where the seat belt attached or passed through the seat.

In examining the UTV, the local officials confirmed that there was damage or a malfunction with a part on the left axle area. The seatbelt/harness inspection showed that there was a 5-point harness system for either the driver or a front passenger in the UTV, but did not appear to have been properly installed.

Cause of death was due to multiple blunt force injuries. The victim sustained a lacerated anterior neck and fractured cervix.

#### **Product Identification:**

The product involved in this In-Depth Investigation was an Utility Terrain Vehicle (UTV). The product is identified as a **black 2006 Yamaha Rhino side-by-side, 4 wheel drive. VIN# 5Y4AM08Y16A007665.**

No further information was obtained.

#### **Exhibits:**

- (1) Police Photographs (28 pictures)
- (2) Police Report
- (3) Coroner's Report

090714HCC3750

**Contacts :**

San Bernardino County Sheriff/Coroner  
175 South Lena Rd  
San Bernardino, CA 92415

Contact was initiated to obtain a copy of the coroner's report

California Highway Patrol  
300 E. Mountain View  
Barstow, CA 93611

Contact was initiated to obtain a copy of the police report

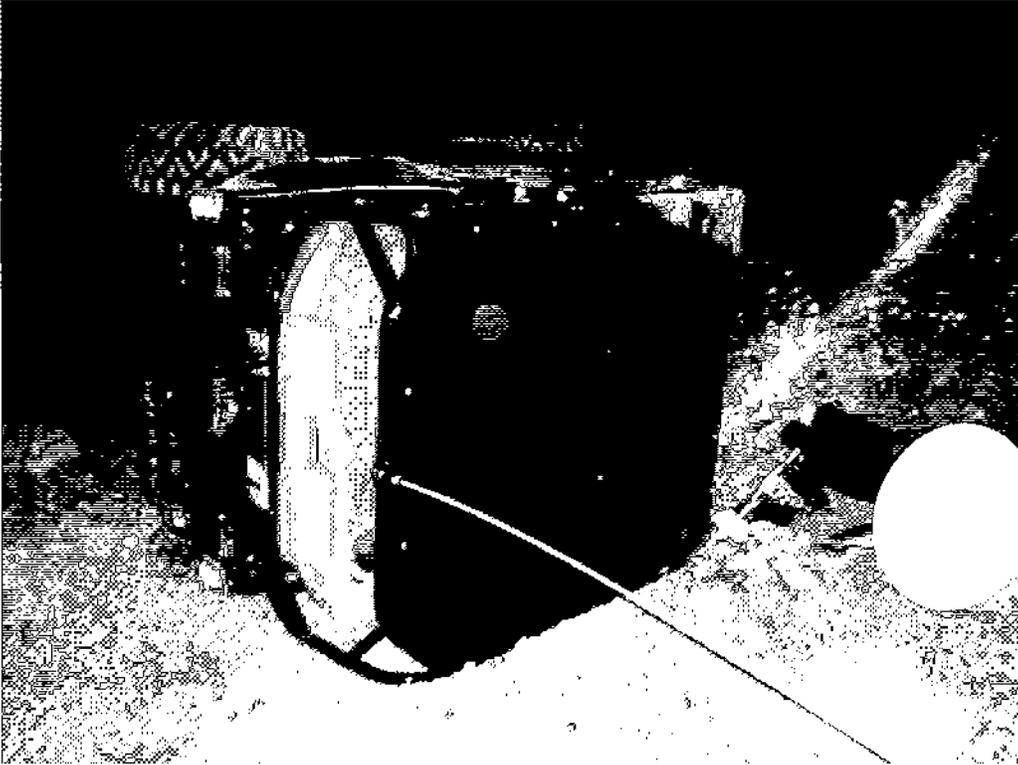


Photo #1 – This is a view of the UTV on laying on its right side. The victim landed a few feet away from where the UTV came to rest.

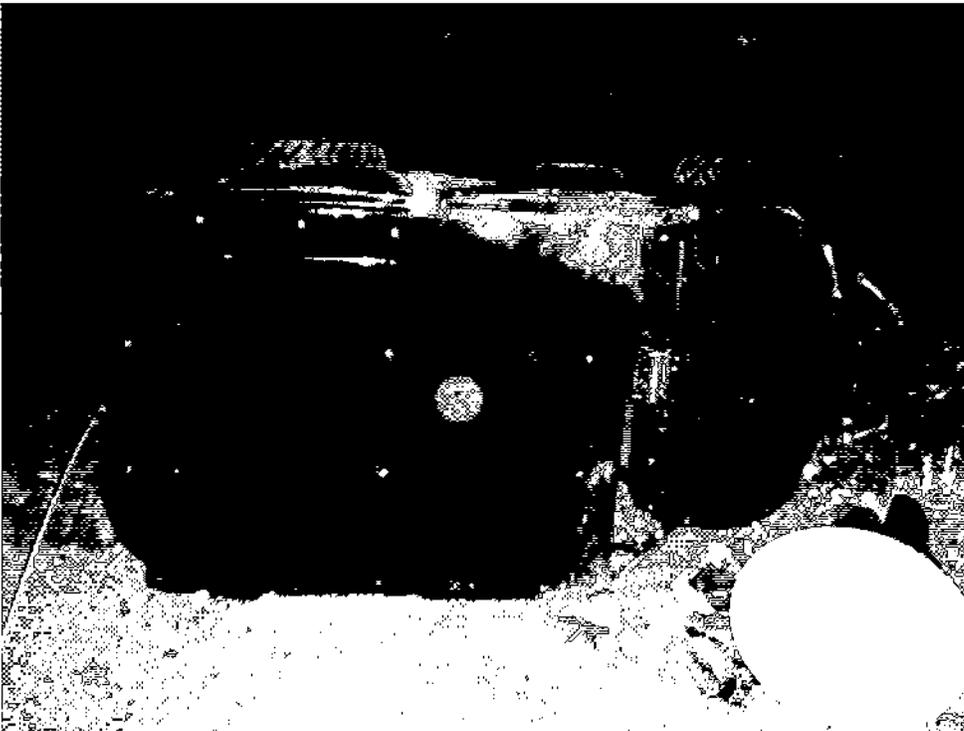
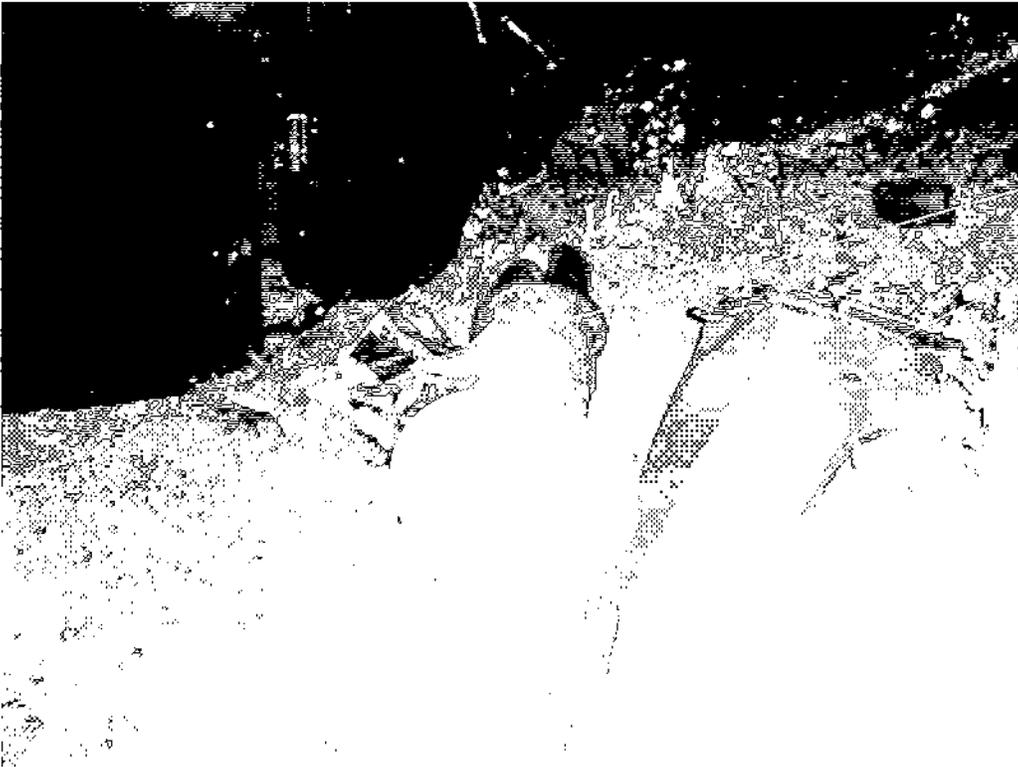
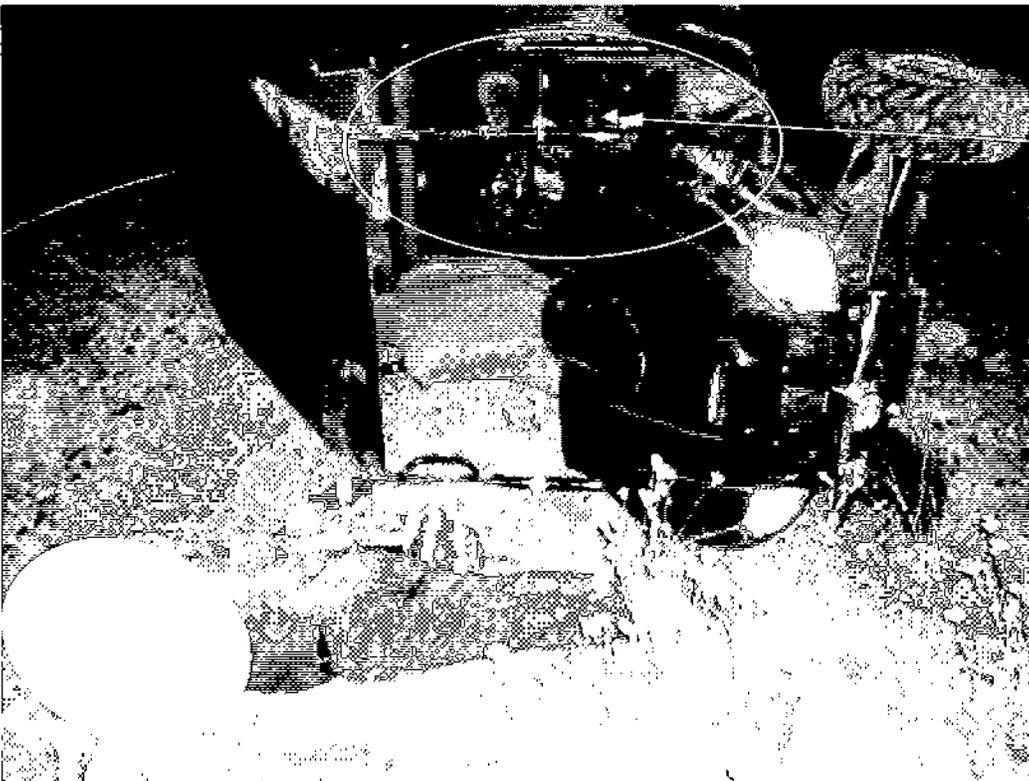


Photo #2 – This is another view of where the UTV and the victim came to rest after the incident occurred.



Seat Belts  
Driver's  
Seat

Photo #3 – This is a view of the location of the driver's seat and the seatbelts that were ejected off of the UTV.



Missing  
driver seat

Photo #4 – This view is facing the front end of the UTV. The driver seat was ejected from the UTV.

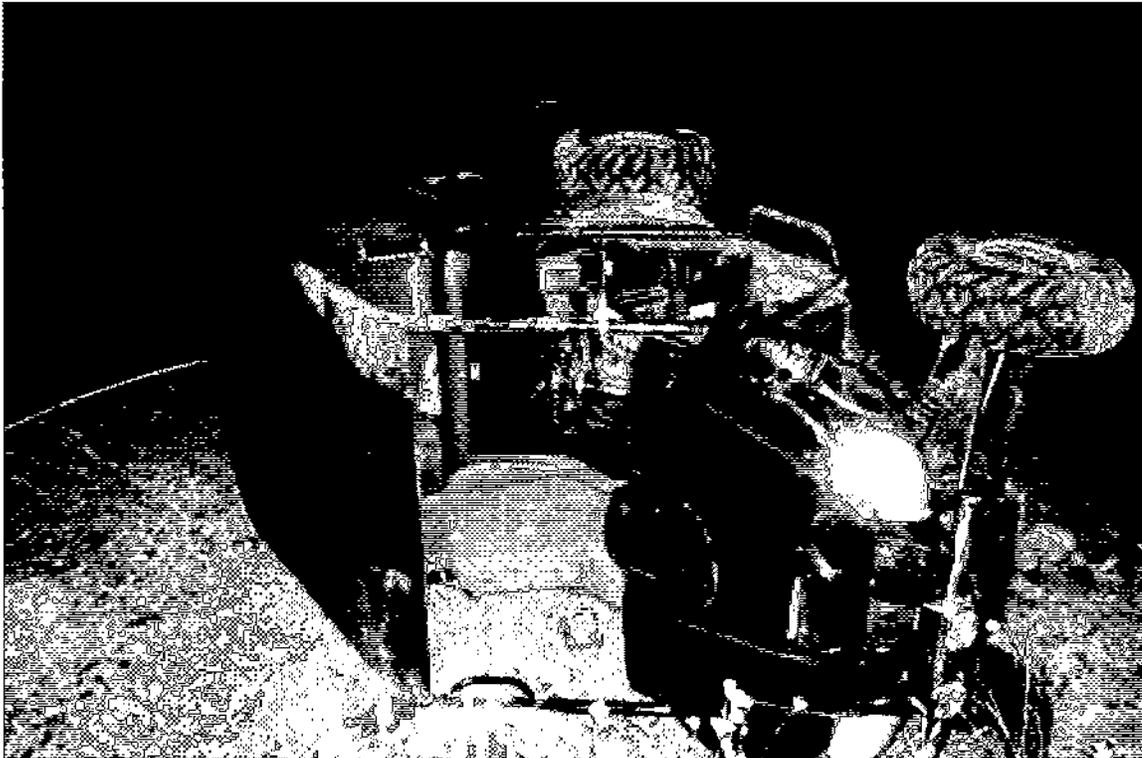


Photo #5 – This is a closer view of the looking into the UTV.

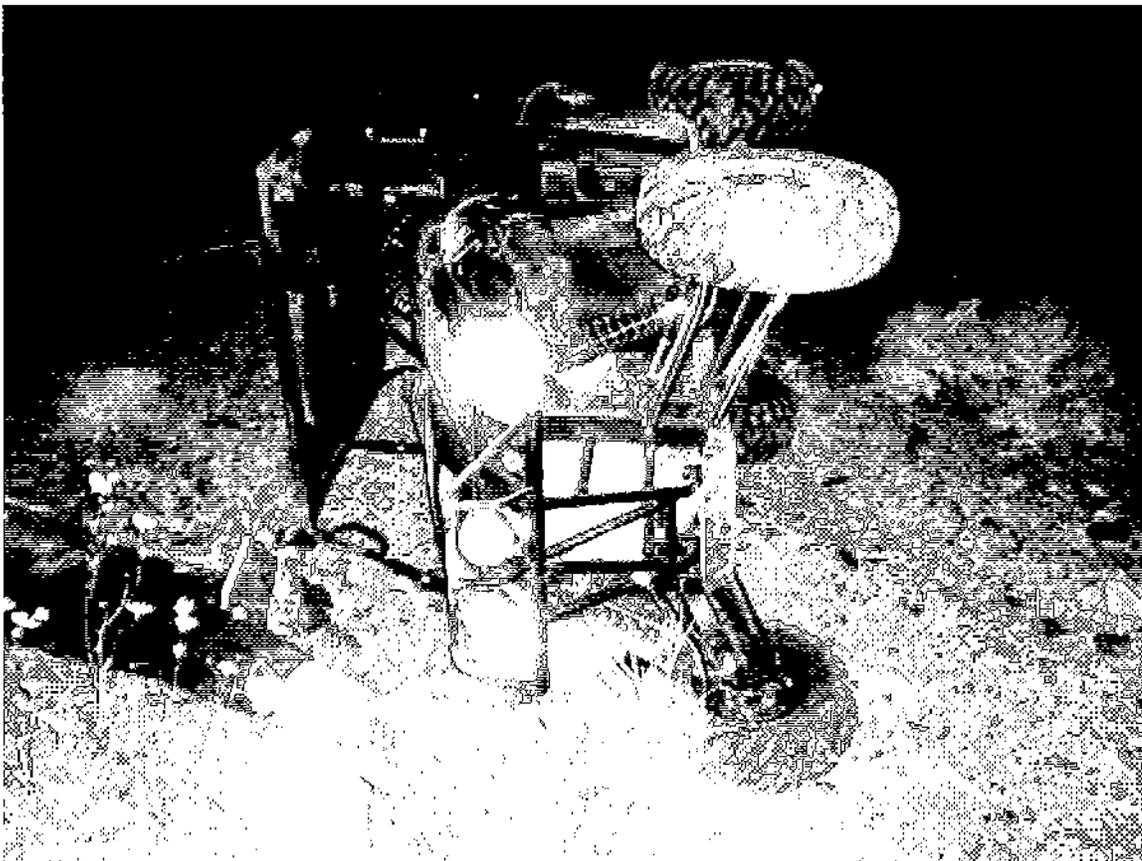


Photo #5 – This is a view looking at the front end of the UTV.

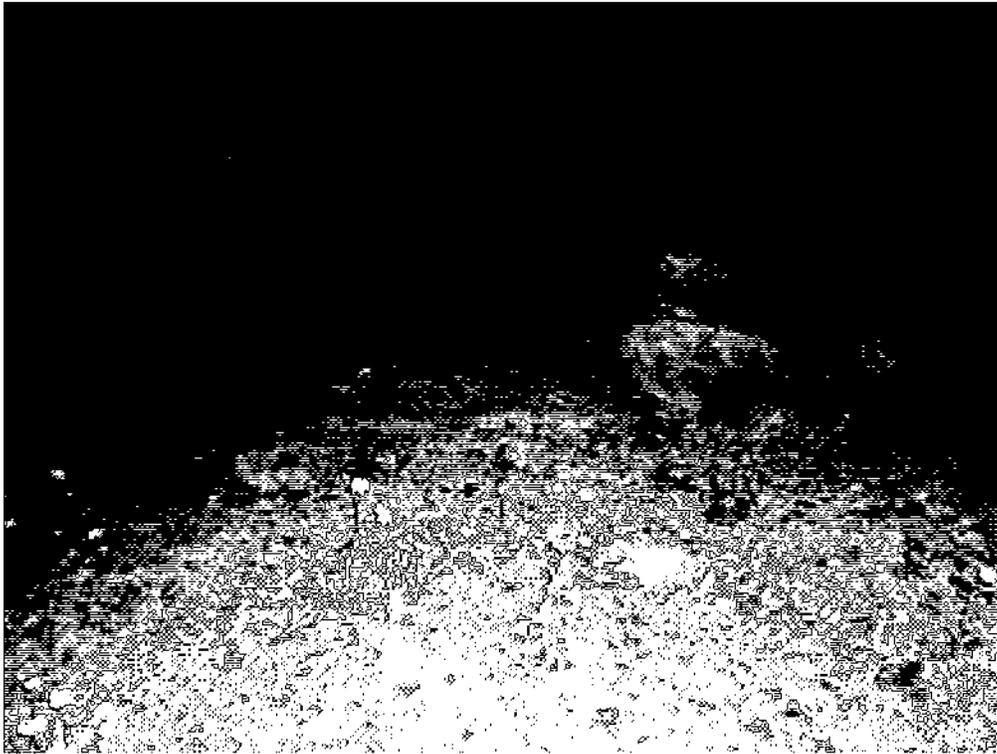


Photo #6 – This is a view looking up the incline that is about 60 feet high.

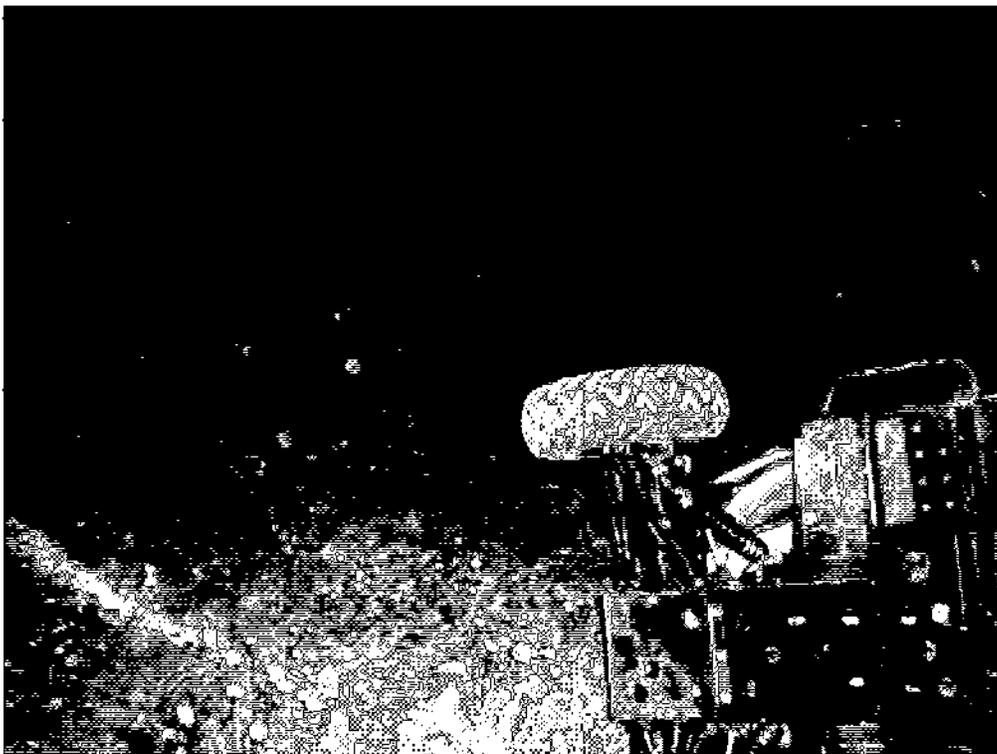


Photo #7 – This is a view a view of the UTV at the base of the incline.

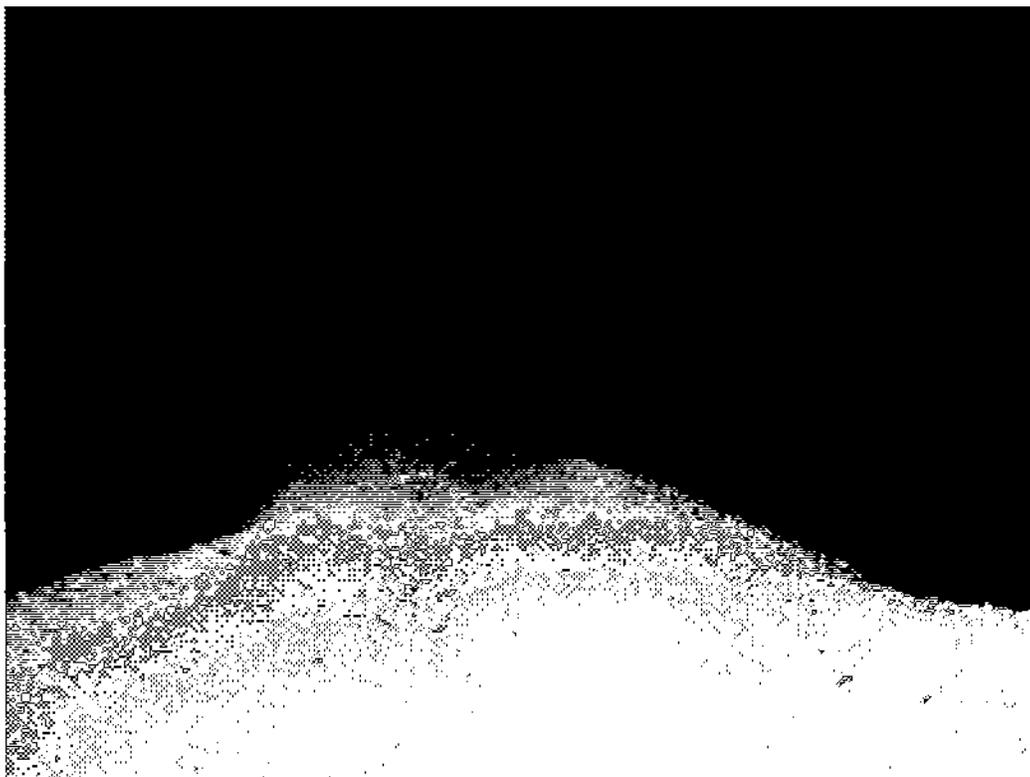


Photo #8 – This is a view of the area where the victim was traveling on.

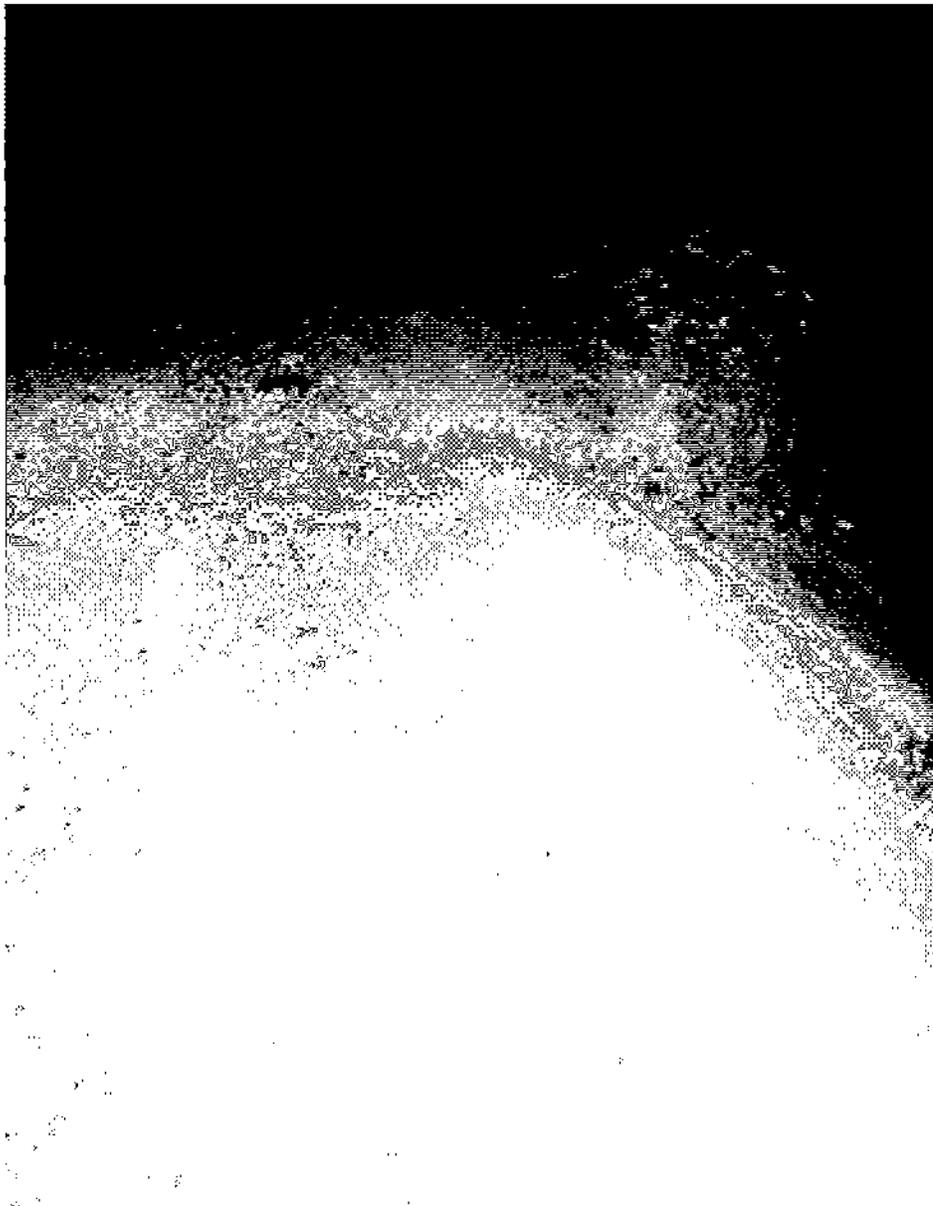


Photo #9 – This is another view of the incline looking up. According to police there was blood splatter on several rocks on the hill side where the victim was ejected.

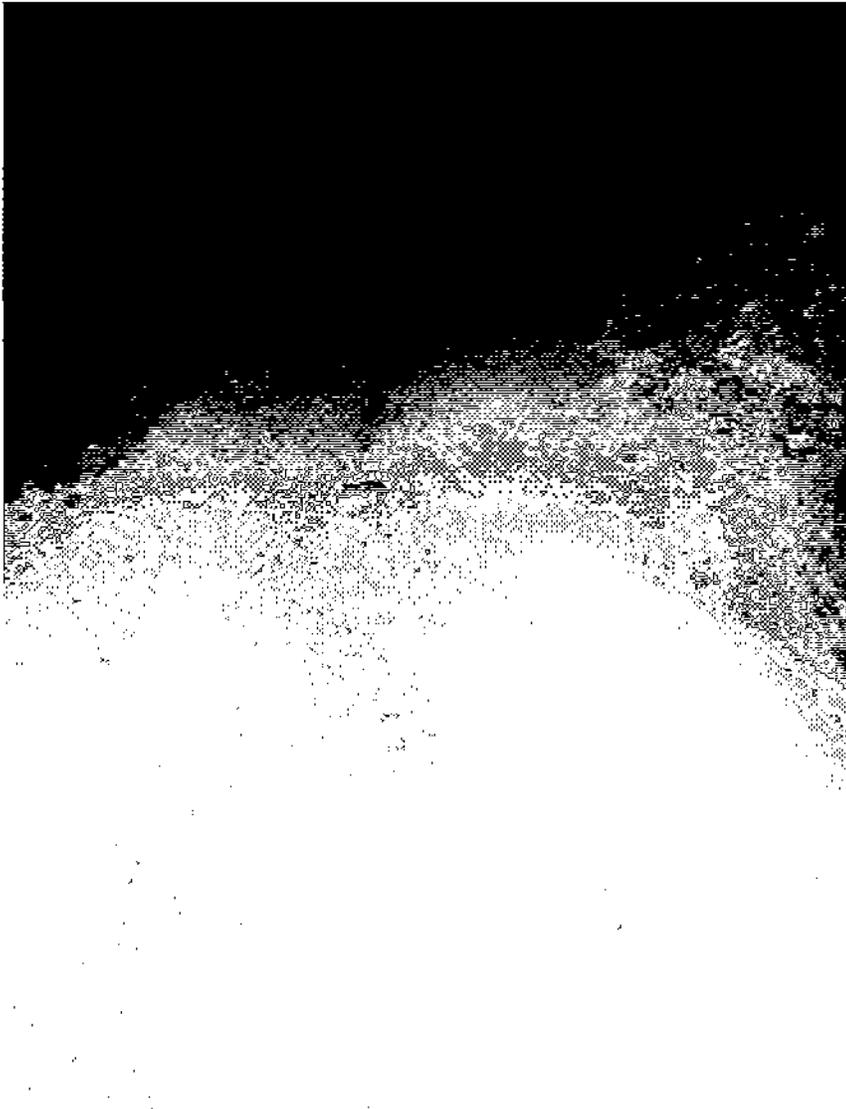


Photo #10 – This is a nother view of the incline looking up to the top.

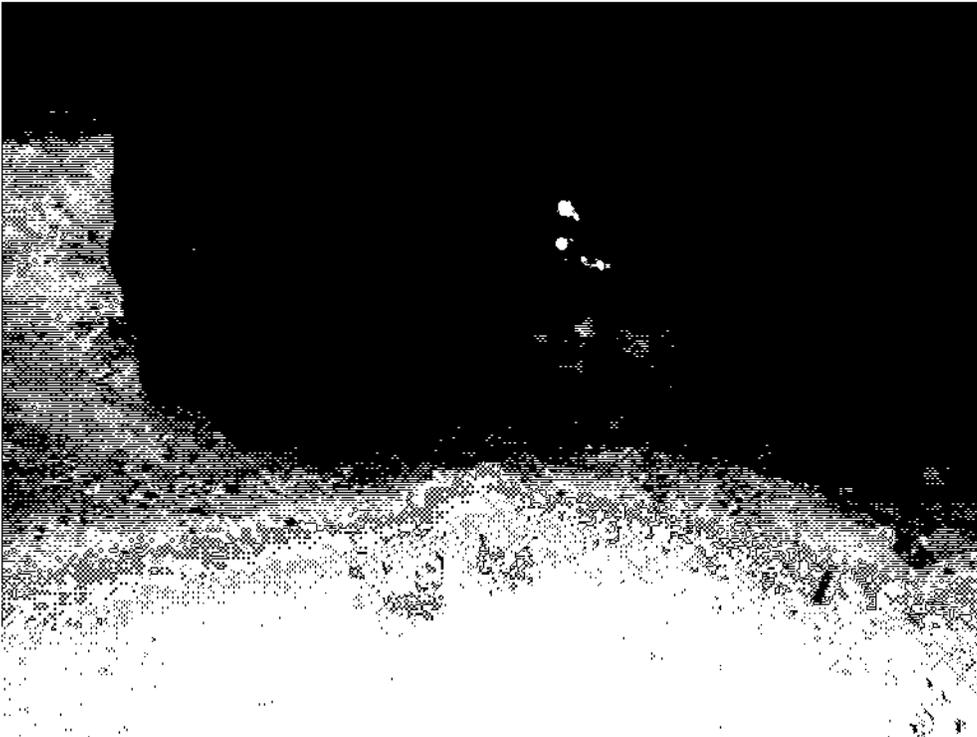


Photo #11 – This is a view looking down from where the UTV began to roll down. The UTV came to rest at the base of the incline.

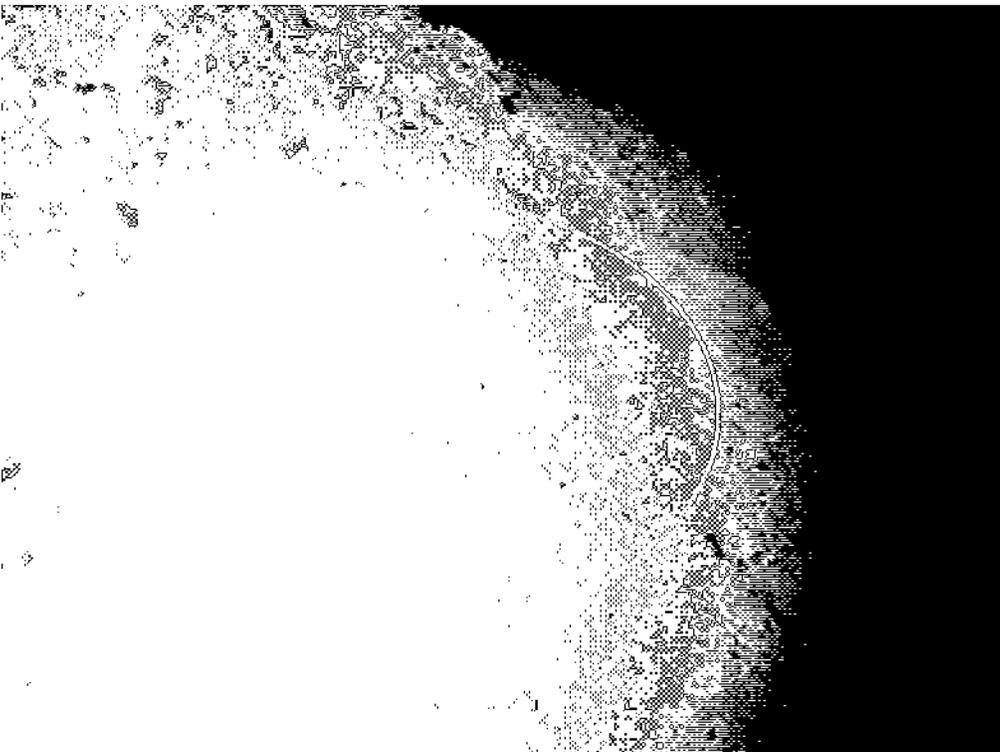


Photo #12 – These are UTV tire marks.



Photo #13 – This is a view of where the driver's seat is suppose to be located.



Photo #14 – This is the victim's blood splatter on the inside hood and roll bars of the UTV.

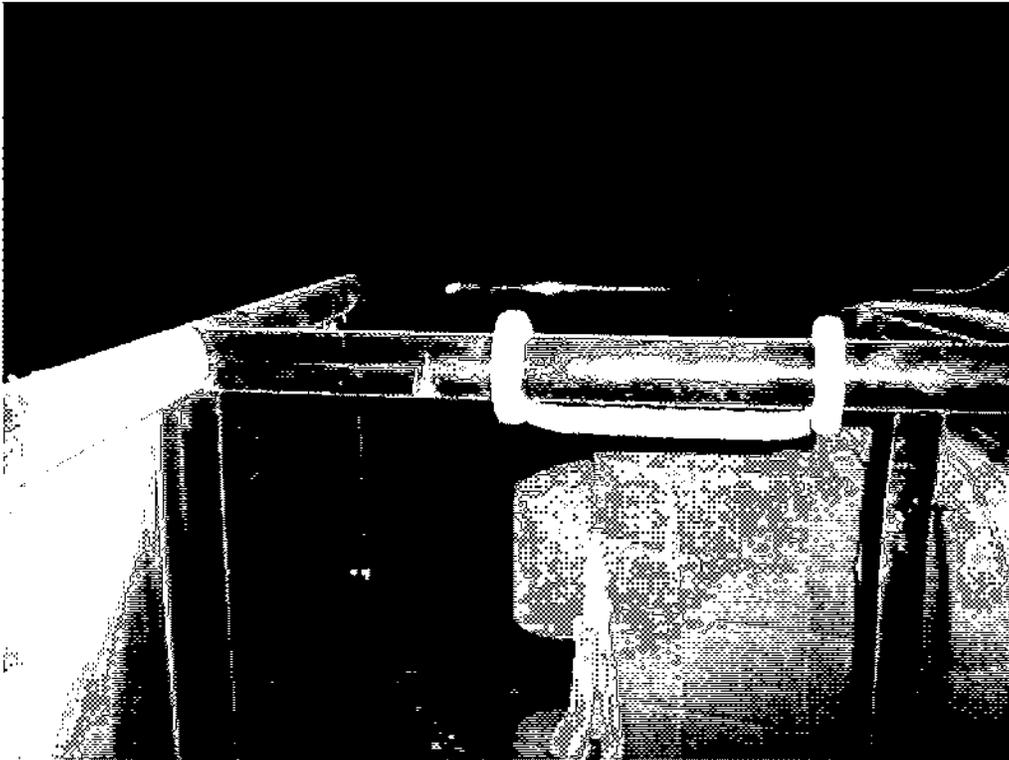


Photo #15 – This is a view of the blood splatter located on the back roll bar behind the driver's position.



Photo #16 – This is a view of the passenger front roll bar. Seat belts were located outside of the UTV.



Photo #17 – This is a view of the VIN number of the UTV.

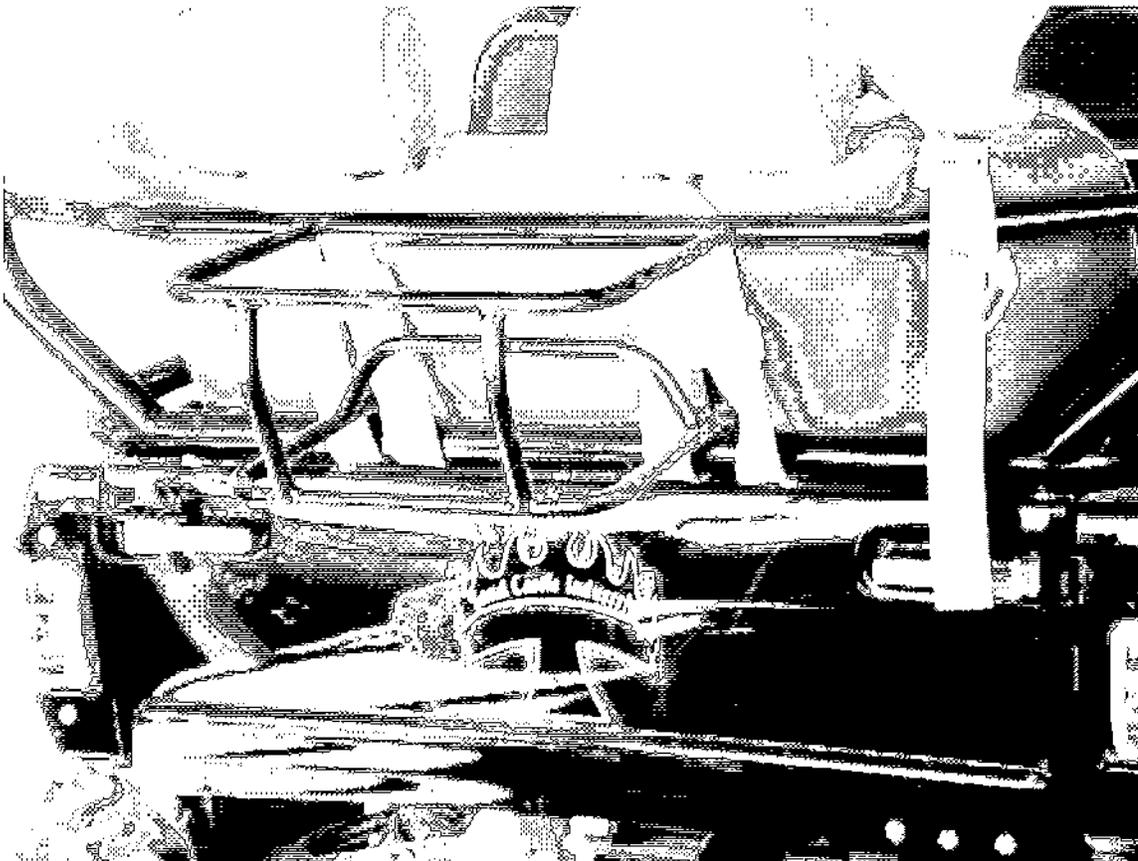


Photo #18 – This is a view of the back side of the UTV. Seat belts to the rear passenger seats were in place.



Photo #19 – This is another view of the full back side of the UTV.

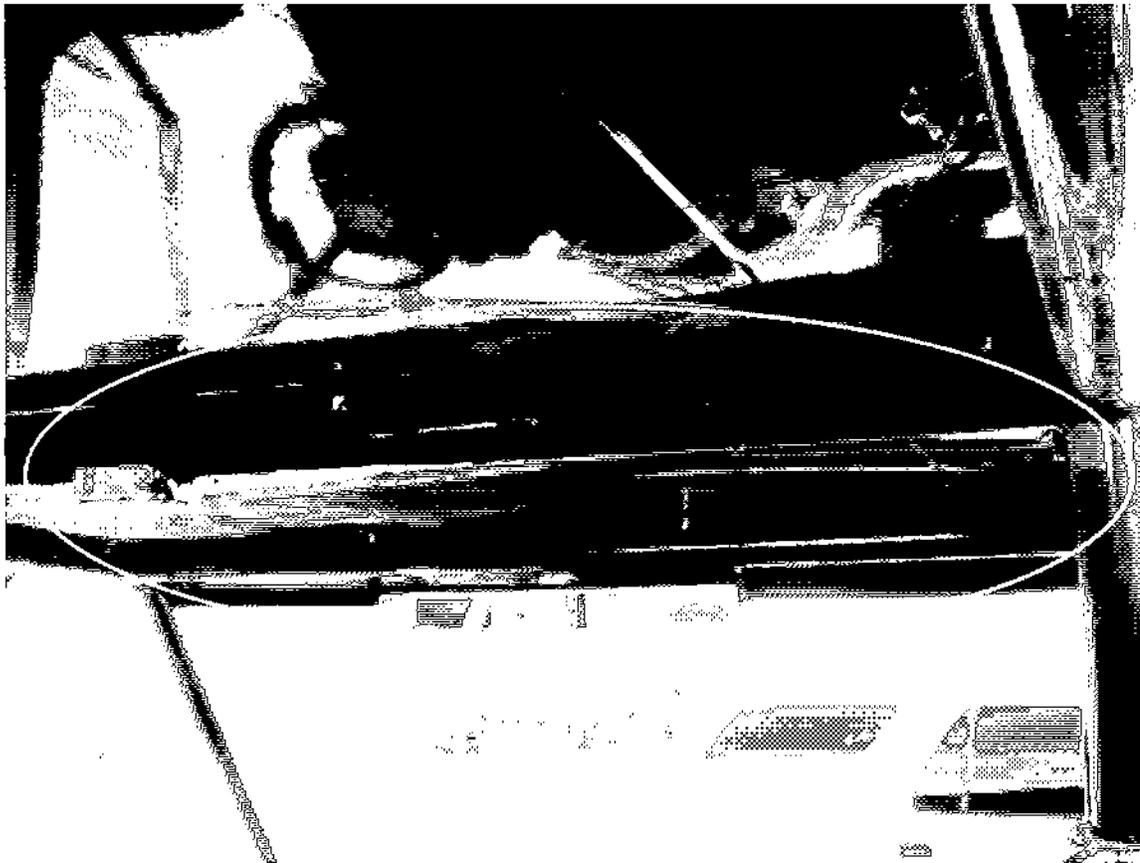


Photo # 20 – This is another view looking in from the back side of the UTV. Blood splatter was located on the roll bar.



Photo #21 – Blood splatter was on the rear passenger seat.



Photo #22 – This is a view looking into the UTV from the front passenger side.



Photo #23 – This is a view looking at the front passenger side of the UTV.

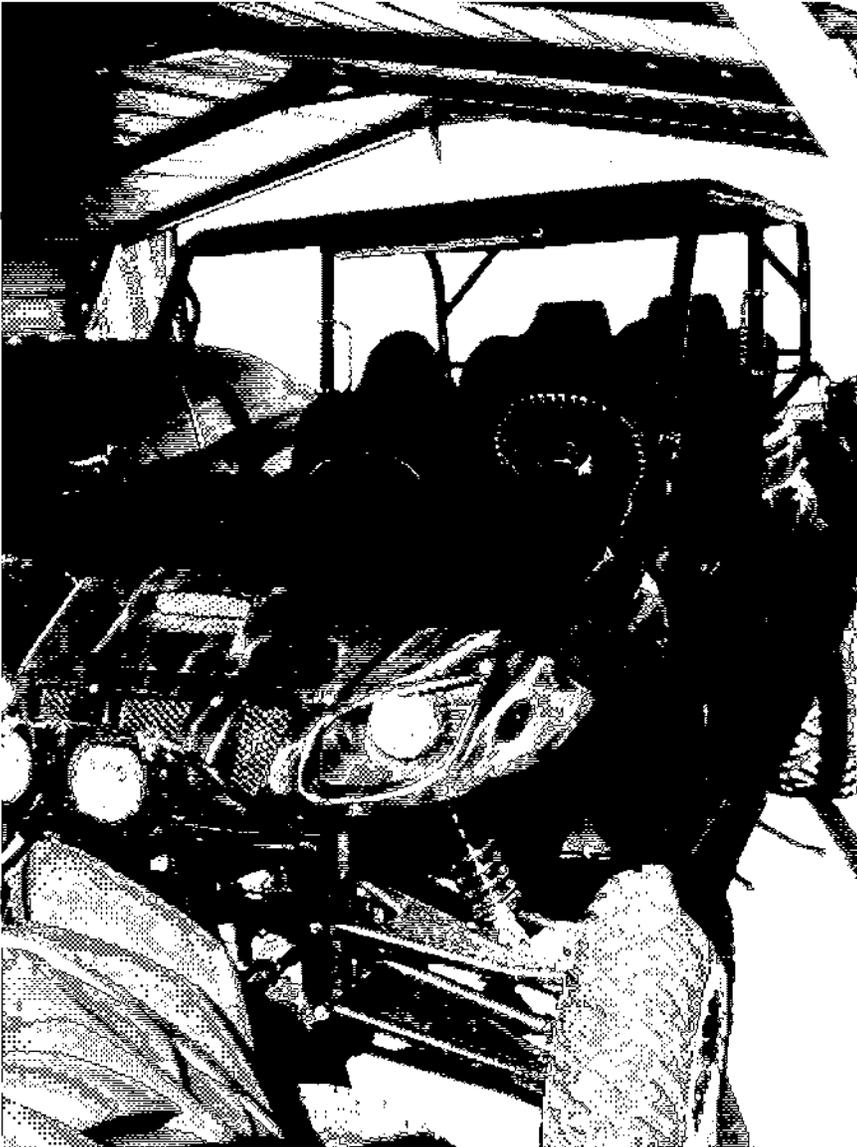


Photo #24 – This is a view facing the front drivers side of the UTV.

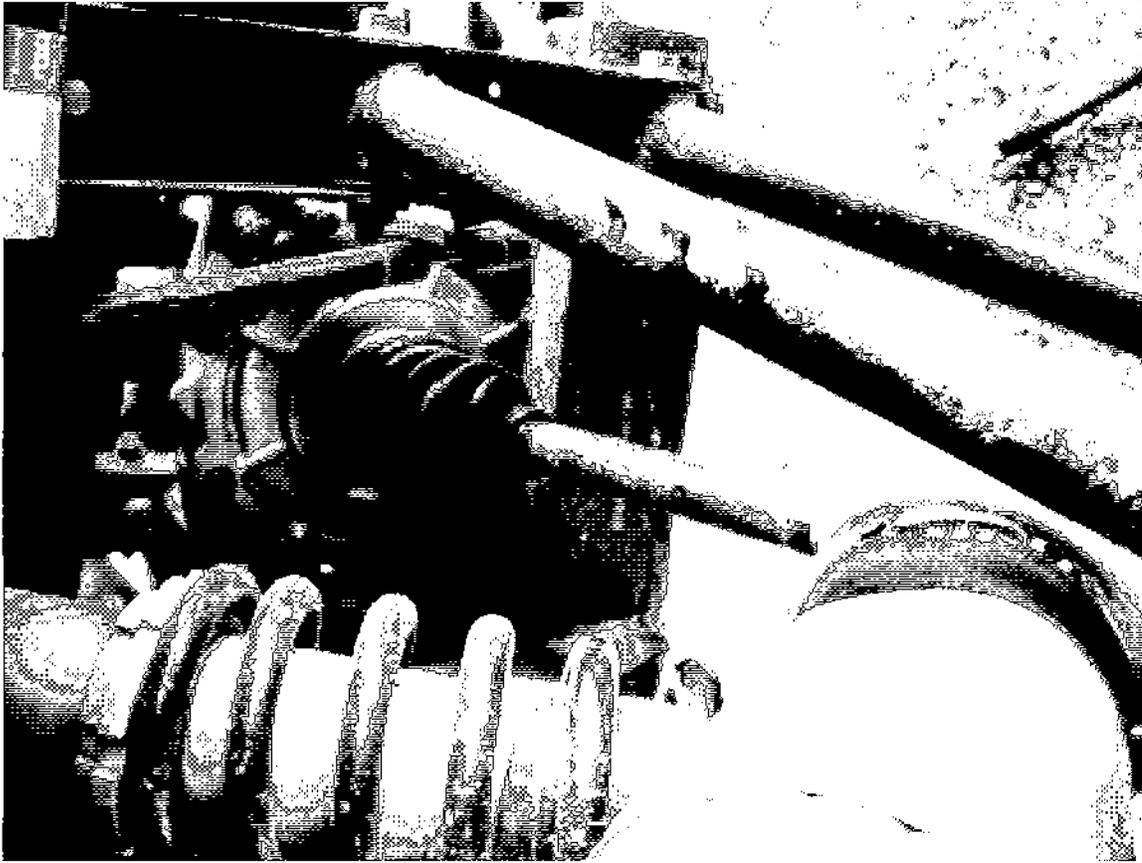


Photo #25 – This is a view of the area where the wheel is attached to the UTV frame.

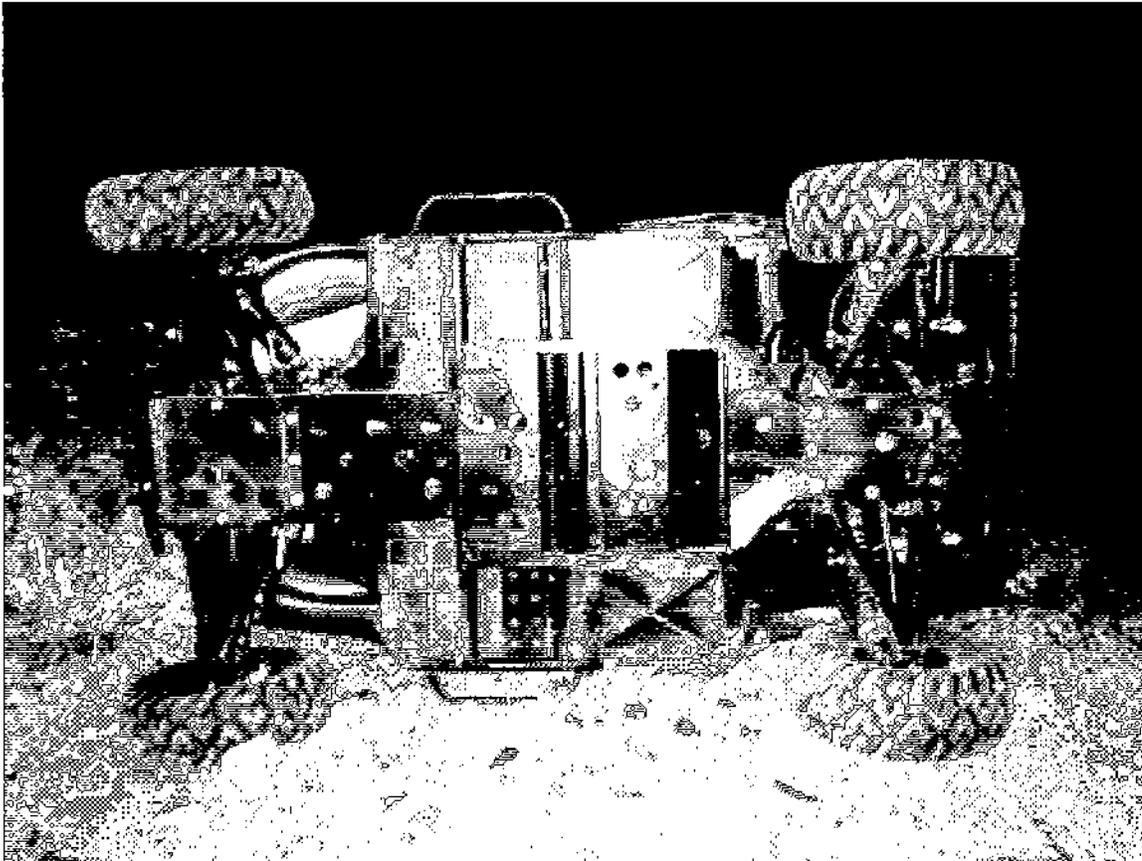


Photo # 26 – This is a view of the lower part of the UTV. The front end is to the left of the picture.

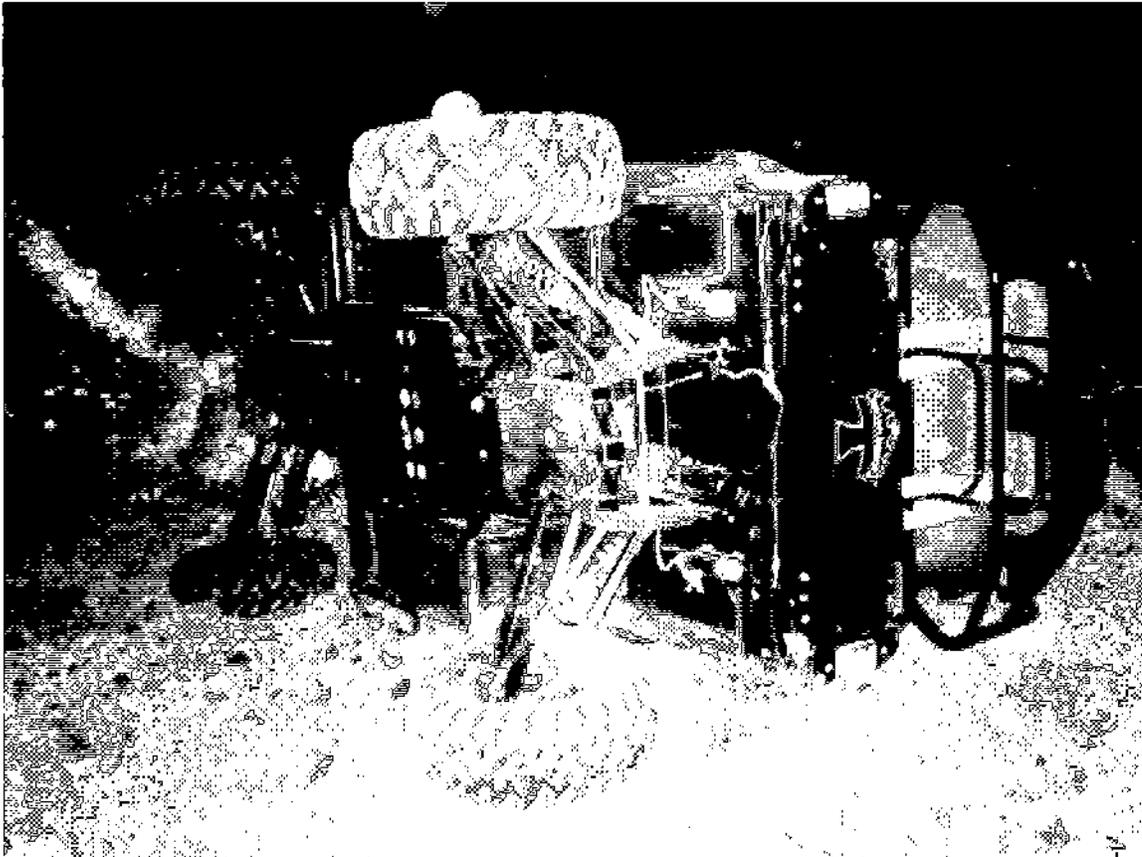


Photo #27 – This is a view of the rear end, under side of the UTV, at the scene.

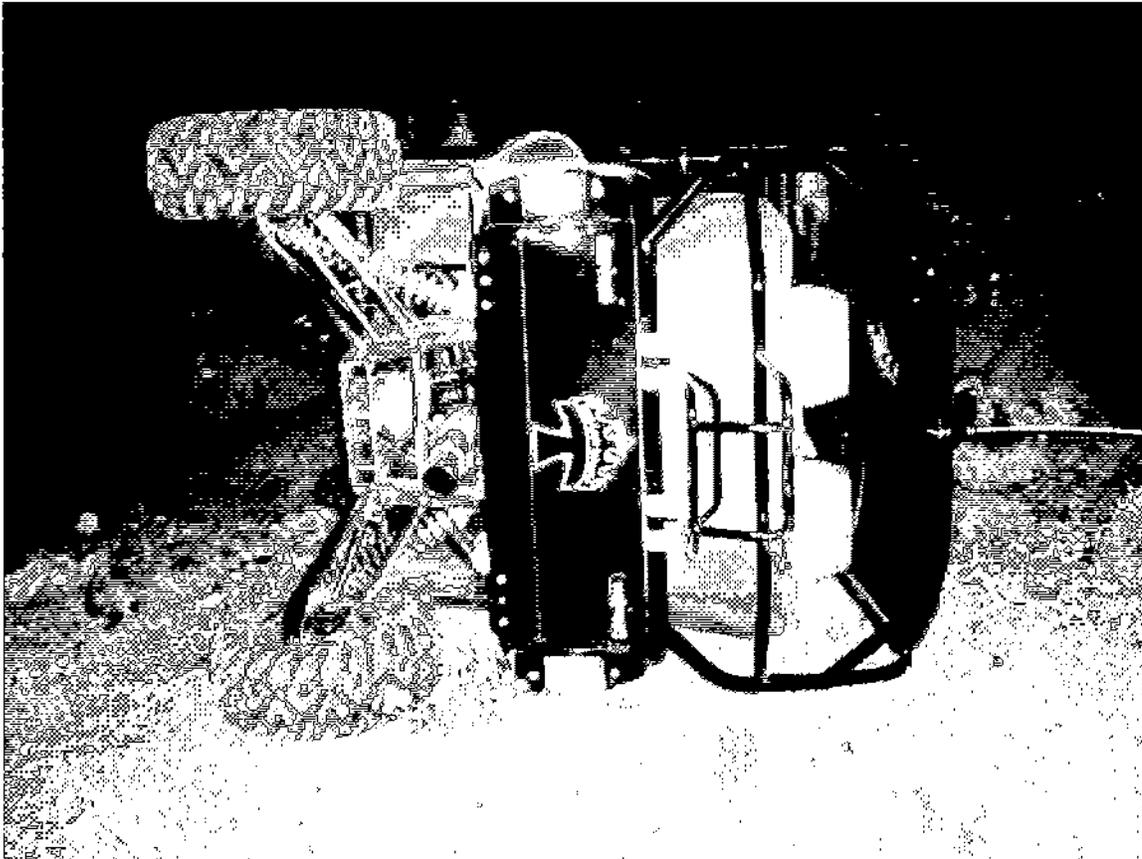


Photo #28 – This is a view of the rear end of the UTV. It was still on its right side at the scene.

SPECIAL CONDITIONS FATAL OFF HIGHWAY		NUMBER INJURED 0	HIT & RUN FELONY <input type="checkbox"/>	CITY UNINCORPORATED	JUDICIAL DISTRICT BARSTOW SUPERIOR			LOCAL REPORT NUMBER 2008-02-0045		
NUMBER KILLED 1		HIT & RUN MISDEMEANOR <input type="checkbox"/>	COUNTY SAN BERNARDINO	REPORTING DISTRICT 906		BEAT 906	DAY OF WEEK TUESDAY	TOW AWAY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
LOCATION	COLLISION OCCURRED ON DUMONT DUNES OFF ROAD AREA				MO 02	DAY 12	YEAR 2008	TIME (2400) 1715	NCIC # 9835	OFFICER I D 017101
	MILEPOST INFORMATION			GPS COORDINATES LATITUDE 35.42865°			LONGITUDE - 116.13810°			PHOTOGRAPHS BY: MURPHY 17101 <input type="checkbox"/> NONE
	AT INTERSECTION WITH <input checked="" type="checkbox"/> OR: 3.5 MILE(S) EAST OF SR-127				STATE HWY REL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
PARTY 1	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP	VEH YEAR	MAKE / MODEL / COLOR		LICENSE NUMBER	STATE
				P	F	2006	YAM RHINO BLK		X95152	CA
DRIVER	NAME(FIRST, MIDDLE, LAST) <b>(b)(3):CPSA Section 25(c)</b>					OWNER'S NAME <input checked="" type="checkbox"/> SAME AS DRIVER				
PEDES TRIAN						OWNER'S ADDRESS <input checked="" type="checkbox"/> SAME AS DRIVER				
PARKED VEHICL I	CA 95326					DISPOSITION OF VEHICLE ON ORDERS OF: <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER				
BICY- CLIST	WEIGHT	BIRTHDATE	YEAR	RACE	CITY TOW - (760)256-9454					
	190	06/23/1943		W	PRIOR MECH DEFECTS <input type="checkbox"/> NONE APP <input checked="" type="checkbox"/> REFER TO NARRATIVE					
OTHER	BUSINESS PHONE NONE					VEHICLE IDENTIFICATION NUMBER: 5Y4AM08Y16A007665				
INSURANCE CARRIER NONE		POLICY NUMBER								
DIR OF TRAVEL: ON STREET OR HIGHWAY W UN-NAMED ROAD		SPEED LIMIT N/A								
PARTY 2	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP	VEH YEAR	MAKE / MODEL / COLOR		LICENSE NUMBER	STATE
DRIVER	NAME(FIRST, MIDDLE, LAST)					OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER				
PEDES TRIAN	STREET ADDRESS					OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER				
PARKED VEHICL I	CITY / STATE / ZIP					DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER				
BICY- CLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE	YEAR	RACE	PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP <input type="checkbox"/> REFER TO NARRATIVE
OTHER	HOME PHONE		BUSINESS PHONE							
INSURANCE CARRIER		POLICY NUMBER								
DIR OF TRAVEL: ON STREET OR HIGHWAY		SPEED LIMIT								
PARTY 3	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP	VEH YEAR	MAKE / MODEL / COLOR		LICENSE NUMBER	STATE
DRIVER	NAME(FIRST, MIDDLE, LAST)					OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER				
PEDES TRIAN	STREET ADDRESS					OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER				
PARKED VEHICL I	CITY / STATE / ZIP					DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER				
BICY- CLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE	YEAR	RACE	PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP <input type="checkbox"/> REFER TO NARRATIVE
OTHER	HOME PHONE		BUSINESS PHONE							
INSURANCE CARRIER		POLICY NUMBER								
DIR OF TRAVEL: ON STREET OR HIGHWAY		SPEED LIMIT								
VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE			SHADE IN DAMAGED AREA					
06		UNK MOD MAJOR X ROLL-OVER								
CA		DOT			CAL-T TCP/PS MC/MX					
VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE			SHADE IN DAMAGED AREA					
A		UNK MOD MAJOR ROLL-OVER								
CA		DOT			CAL-T TCP/PS MC/MX					
DISPATCH NOTIFIED		DATE REVIEWED								
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		SGT. [Signature] LT [Signature] CAPT. [Signature] MS 3-10-08								

DATE OF COLLISION (MO - DAY - YEAR)  
 02/12/2005

TIME (MM)

NO. #

OFFICER ID  
 017101

NUMBER  
 2008-02-0045

OWNER

OWNER ADDRESS

NOTIFIED

PROPERTY DAMAGE

DESCRIPTION OF DAMAGE

YES  NO

**SEATING POSITION**



- 1 - DRIVER
- 2 TO 6 - PASSENGERS
- 7 - STA. W/IN REAR
- 8 - RR. OCC. TRK. OR VAN
- 9 - POSITION UNKNOWN
- 0 - OTHER

**SAFETY EQUIPMENT**

- 1 - AIR BAG DEPLOYED
  - M - AIR BAG NOT DEPLOYED
  - N - OTHER
  - P - NOT REQUIRED
- CHILD RESTRAINT**
- 0 - IN VEHICLE USED
  - 1 - IN VEHICLE NOT USED
  - 2 - IN VEHICLE USE UNKNOWN
  - 3 - IN VEHICLE IMPROPER USE
  - 4 - NONE IN VEHICLE
- M/C BICYCLE HELMET**
- |         |           |
|---------|-----------|
| DRIVER  | PASSENGER |
| V - NO  | X - NO    |
| W - YES | Y - YES   |
- EJECTED FROM VEHICLE**
- 0 - NOT EJECTED
  - 1 - FULLY EJECTED
  - 2 - PARTIALLY EJECTED
  - 3 - UNKNOWN

**INATTENTION CODES**

- A - CELL PHONE HANDHELD
- B - CELL PHONE HANDSFREE
- C - ELECTRONIC EQUIPMENT
- D - RADIO / CD
- E - SMOKING
- F - EATING
- G - CHILDREN
- H - ANIMALS
- I - PERSONAL HYGIENE
- J - READING
- K - OTHER

ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (\*) SHOULD BE EXPLAINED IN THE NARRATIVE.

PRIMARY COLLISION FACTOR  
 (FOR NUMBER OF COLLISION FACTORS)

TRAFFIC CONTROL DEVICES

1 2 3

SPECIAL INFORMATION

1 2 3

MOVEMENT PRECEDING COLLISION

- 1 A VC SECTION VIOLATED - CIVIL  YES  NO
- B 38896 VC
- C OTHER IMPROPER DRIVING\*

- A CONTROLS FUNCTIONING
- B CONTROLS NOT FUNCTIONING\*
- C CONTROLS OBSOLETE
- D NO CONTROLS PRESENT / FACTOR\*

- A HAZARDOUS MATERIAL
- B CELL PHONE HANDHELD IN USE
- C CELL PHONE HANDSFREE IN USE
- D CELL PHONE NOT IN USE
- E SCHOOL BUS RELATED
- F 75 FT MOTORTRUCK COMBO
- G 10 TON TRUCK COMBO

- A STOPPED
- B PROCEEDING STRAIGHT
- C RAN OFF ROAD
- D MAKING RIGHT TURN
- E MAKING LEFT TURN
- F MAKING U TURN
- G BACKING
- H SLOWING / STOPPING
- I PASSING OTHER VEHICLE
- J CHANGING LANES
- K PARKING MANEUVER
- L ENTERING TRAFFIC
- M OTHER UNSAFE TURNING
- N XING INTO OPPOSING LANE
- O PARKED
- P MERGING
- Q TRAVELING STRONG WIND
- R OTHER

- C OTHER THAN DRIVER\*
- D UNKNOWN\*

- A HEAD-ON
- B SIDE SWIPT
- D REAR END
- D BROADSIDE
- E HIT OBJECT
- F OVERTURNED
- G VEHICLE / PEDESTRIAN
- H OTHER\*

- H
- I
- J
- K
- L
- M
- N
- O

- WEATHER (MARK 1 TO 2 ITEMS)
- X A CLEAR
  - B CLOUDY
  - C RAINING
  - D SNOWING
  - E FOG / VISIBILITY FT
  - F OTHER\*
  - G WIND

MOTOR VEHICLE INVOLVED WITH

- X A NON-COLLISION
- B PEDESTRIAN
- C OTHER MOTOR VEHICLE
- D MOTOR VEHICLE ON OTHER ROADWAY
- E PARKED MOTOR VEHICLE
- F TRAIN
- G BICYCLE
- H ANIMAL\*

OTHER ASSOCIATED FACTORS (MARK 1 TO 5 ITEMS)

- A HAZARDOUS MATERIAL
- B CELL PHONE VIOLATED - CIVIL  YES  NO
- C CELL PHONE VIOLATED - TRAF  YES  NO
- D
- E VISION IMPAIRMENT
- F INATTENTION\*
- G STOP & NO TRAFFIC
- H EXIT RAMP / LEAVING RAMP
- I PREVIOUS COLLISION
- J UNFAMILIAR WITH ROAD
- K DEFECTIVE VEH EQUIP - CITED

1 2 3

SOBRIETY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)

- ROADWAY SURFACE
- X A DRY
  - B WET
  - C SLIPPERY
  - D SLIPPERY (MUDDY, OILY, ETC)

- I FIXED OBJECT
- J OTHER

- L UNINVOLVED VEHICLE
- M OTHER\*
- N NON-APPARENT
- O RUNAWAY VEHICLE

- A HAD NOT BEEN DRINKING
- B HBD - UNDER INFLUENCE
- C HBD - NOT UNDER INFLUENCE
- D HBD - IMPAIRMENT UNKNOWN\*
- E UNDER DRUG INFLUENCE
- F IMPAIRMENT - PHYSICAL\*
- G IMPAIRMENT NOT KNOWN
- H NOT APPLICABLE
- I OVERFATIGUED

- ROADWAY CONDITION(S) (MARK 1 TO 2 ITEMS)
- X A HOLES, DEEP RUTS
  - B LOOSE MATERIAL ON ROADWAY\*
  - C OBSTRUCTION - OVERHEAD
  - D CONSTRUCTION - REPAIR ZONE
  - X E REDUCED ROADWAY WIDTH
  - F FLOODED\*
  - G OTHER\*
  - H NO UNUSUAL CONDITIONS

- ROADWAY CROSSINGS
- X A NO PEDESTRIANS W/OUT VEH
  - B CROSSING - IN CROSSWALK AT INTERSECTION
  - C CROSSING - IN CROSSWALK - NHT AT INTERSECTION
  - D CROSSING - NOT IN CROSSWALK
  - E IN ROAD - INCLUDING PROCEEDING
  - F NOT IN ROAD
  - G APPROACHING / LEAVING SCHOOL BUS

- L UNINVOLVED VEHICLE
- M OTHER\*
- N NON-APPARENT
- O RUNAWAY VEHICLE

EXPLANATION

SEE PAGE 1

MISCELLANEOUS

INDICATE NORTH

DATE OF COLLISION (MO DAY YEAR) 02/12/2008		TIME(2400) 1715	NCIC # 9835	OFFICER I.D. 017101	NUMBER 2008-02-0045												
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY('X' ONE)				INJURED WAS ('X' ONE)					PARTY NUMBER	SEAT POS	AIR BAG	SAFETY EQUIP	EJECTOR
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS	PED	BIKICLIST	OTHER					
<input type="checkbox"/> #	<input type="checkbox"/>	64	M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	P	F	1

NAME / D.O.B. / ADDRESS TELEPHONE  
 (b)(3):CPSA Section 25(c)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:  
 SAN BERNARDINO COUNTY CORONER SAN BERNARDINO COUNTY MORGUE

DESCRIBE INJURIES: LACERATION TO NECK. POSSIBLE BROKEN NECK RESULTING IN FATAL INJURY  
 PRONOUNCED DEAD AT THE SCENE BY PARAMEDIC C. LAMPLEY #P1993 AT 1835 HOURS.

CORONER CASE #700801323  VICTIM OF VIOLENT CRIME NOTIFIED

<input checked="" type="checkbox"/> # 1	<input type="checkbox"/>	34	M	<input type="checkbox"/>													
---	--------------------------	----	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

NAME / D.O.B. / ADDRESS TELEPHONE  
 (b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/> #	<input type="checkbox"/>			<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS TELEPHONE

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/> #	<input type="checkbox"/>			<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS TELEPHONE

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/> #	<input type="checkbox"/>			<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS TELEPHONE

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/> #	<input type="checkbox"/>			<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS TELEPHONE

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES

VICTIM OF VIOLENT CRIME NOTIFIED

PREPARER'S NAME R.J. MURPHY	I.D. NUMBER 017101	MO DAY YEAR 02/12/2008	REVIEWER'S NAME	MO DAY YEAR
--------------------------------	-----------------------	---------------------------	-----------------	-------------

**NARRATIVE/SUPPLEMENTAL**

DATE OF INCIDENT  
02/12/2008

TIME  
1715

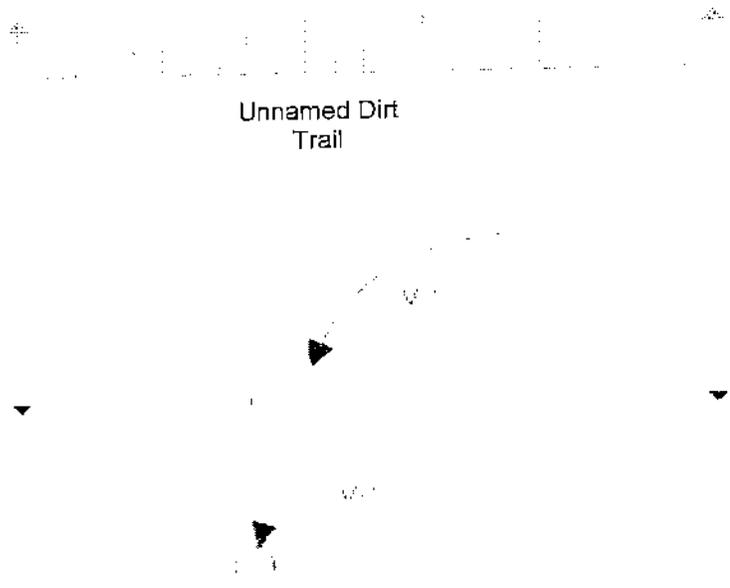
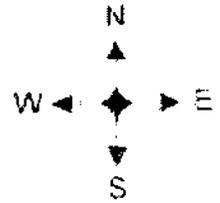
NCIC NUMBER  
9835

OFFICER I.D.  
017101

NUMBER  
2008-02-0045

# Dumont Dunes

← SR-127



Sketch

1  
2

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
R J MURPHY	017101	02/12/2008		

STATE OF CALIFORNIA  
NARRATIVE/SUPPLEMENTAL

PAGE 5 OF 10

DATE OF INCIDENT  
02/12/2008

TIME  
1715

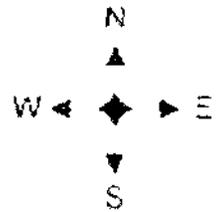
NCIC NUMBER  
9885

OFFICER I.D.  
017101

NUMBER  
2008-02-0045

# Dumont Dunes

◀ SR-127



Unnamed Dirt  
Trail

 Party #1



Sketch

PREPARED BY  
R.J. MURPHY

I.D. NUMBER  
017101

DATE  
02/12/2008

REVIEWER'S NAME

DATE

**NARRATIVE/SUPPLEMENTAL**

DATE OF COLL.	TIME	REPORT NUMBER	REPORTER ID	ACCIDENT
02/12/2008	17:30	017101		2008-02-0045

1 PHYSICAL EVIDENCE LEGEND:

2  
3 Measurements were taken by a Garmin 430 GPS Receiver.

4  
5 PHYSICAL EVIDENCE DESCRIPTION:

6  
7 The point of rest for V-1 and P-1 was not obtained due to the remote location of this collision.

8  
9  
10  
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DATE OF INCIDENT  
02/12/2008

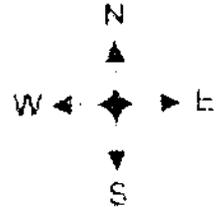
TIME  
1715

NCIC NUMBER  
9835

OFFICER ID  
61101

NUMBER  
2008-02-0045

# Dumont Dunes



A

02-12-08

Unnamed Dirt Trail

 Party #1



Sketch

REPORTING OFFICER  
R. J. MURPHY

ID NUMBER  
017101

DATE  
02/12/2008

OFFICER ID NUMBER

REPORTING OFFICER

**NARRATIVE/SUPPLEMENTAL**

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/12/2008	1715	9835	017101	2008-02-0045

1 FACTS

2

3 NOTIFICATION

4

5 At approximately 1730 hours, I was informed by the Barstow Communications Center of a solo-vehicle,  
6 major injury traffic collision located in the Dumont Dunes off-road recreation area. I responded to the  
7 collision scene from Interstate 15 and Cima Road and arrived on scene at approximately 1823 hours at  
8 bathroom # 10. Upon my arrival, I observed that there was one Baker Ambulance unit and one San  
9 Bernardino County Fire Department rescue unit already on scene.

10

11 All measurements were obtained by the onboard GPS receiver that was installed in a San Bernardino  
12 County Sheriff's helicopter (40 King)

13

14 All measurements are approximate and not to scale unless indicated.

15

16 SCENE:

17

18 The scene of this collision is located in an unincorporated area of San Bernardino County in an open area of  
19 desert on an unnamed hill in the out of bounds portion of the Dumont Dunes off-road recreation area. The  
20 terrain at this location consists of a hard packed, rocky earth. The area in which P-1 was driving was a  
21 narrow, gentle sloping terrain feature that is known as a finger. The finger extends from the top of a  
22 ridge line into a valley floor with an unnamed trail that traverses the top. This piece of terrain is bordered on  
23 the north and south by steep slopes that extend approximately 65 to 70 feet to the desert floor. The top of the  
24 finger is wide enough for all-terrain vehicles (ATV's) to drive on from the top of the ridge line to the valley  
25 floor.

26

27 The weather was clear, dry, and cool. This collision occurred during daylight hours.

28

29

30 TRAFFIC CONTROLS:

31

32 None.

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DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/12/2008	1715	9835	017101	2008-02-0045

1 **PARTIES:**

2

3 Party #1 (b)(6) suffered fatal injuries at the collision scene. He was identified verbally by his son (b)(6)  
4 (b)(6) and later by the San Bernardino County Coroners office. P-1 was ejected from V-1 and was located  
5 near the front of V-1.

6

7 **24 Hour Profile:**

8

9 A 24-hour profile of Party #1 was obtained from Party #1's son, (b)(6), who is listed as Witness #1  
10 (b)(6) did not actually witness the collision and is listed as a witness only for the purposes of providing  
11 this profile and the fact that he was the last person to have contacted P-1 prior to this collision.

12 W-1 was contacted at the Dumont Dunes recreational area near bathroom #10 on the evening of the  
13 collision. W-1 related, in essence the following: (P-1) arrived at the Dumont Dunes recreational area on the  
14 11<sup>th</sup> of February at approximately 1100 hours from a vendors show in San Diego. P-1 set up camp and then  
15 would go on short rides around the area for the rest of the day. After a day of riding, P-1 stayed in camp for  
16 the night and woke up the next morning around 0745 hours. P-1 spent the day playing with his  
17 grandchildren and taking short rides around the area. P-1 had not consumed any alcohol that day and that he  
18 was in good spirits. W-1, his father (P-1) and one of his friends all took out separate "Rhinos" for a ride  
19 through the off-road area of Dumont Dunes. W-1 related the left rear drive axle on his father's Rhino (V-1)  
20 had broken at the CV joint and they started to head back to camp. At some point during the return, the  
21 parties became separated.

22

23 **Vehicle #1 (Yamaha)** was located on its right side facing in a northerly direction in an open area of remote  
24 desert. Vehicle #1 sustained moderate damage to the right and left sides, the hood and roof consisting of  
25 scrapes and minor dents. According to Witness #1 (b)(6), the left rear axle was broken at the CV joint  
26 prior to the collision. A seatbelt/harness inspection showed that there was a 5-point harness system for either  
27 the driver or a front passenger in the vehicle, but did not appear to have been properly installed in the  
28 vehicle.

29

30 **PHYSICAL EVIDENCE:**

31

- 32 • Damage to Vehicle #1
- 33 • Displaced Dirt
- 34 • Vehicle Debris
- 35 • Injuries to Party #1

36

37

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PREPARED BY	I.D NUMBER	DATE	REVIEWER'S NAME	DATE
R.J MURPHY	017101	02/12/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/12/2008	1715	9835	017101

NUMBER
2008-02-0045

**1 OTHER FACTUAL INFORMATION:**

2

3 The following Barstow Area CHP personnel were present at the scene:

4 • Officer R.J. Murphy, #17101, Investigating Officer

5 • Sergeants Nevcu #11728 and Torres #11774

6 The following additional units and support personnel were at the scene:

7

8 • San Bernardino County Fire Department

9 • Baker Ambulance Personnel

10 Approximately 72 color digital photos and one video clip were taken at the scene and the City-Tow tow  
11 yard to document vehicle damage.

12

**13 STATEMENTS:**

14

15 **Party #1 (Castro)** No statement was obtained due to Party #1 receiving fatal injuries as a result of this  
16 collision.

17

18 **Witness #1 ((b)(6))** was contacted at the scene and related the following: P-1 arrived at the Dumont  
19 Dunes recreational area on the 11<sup>th</sup> of February at approximately 1100 hours from a vendors show in San  
20 Diego. P-1 set up camp and then would go on short rides around the area for the rest of the day. After a day  
21 of riding, P-1 stayed in camp for the night and woke up the next morning around 0745 hours. P-1 spent the  
22 day playing with his grandchildren and taking short rides around the area. P-1 had not consumed any  
23 alcohol that day and that he was in good spirits. W-1, his father (P-1) and one of his friends all took out  
24 separate "Rhinos" for a ride through the off-road area of Dumont Dunes. W-1 said the left rear drive axle on  
25 his father's Rhino (V-1) had broken at the CV joint and they started to head back to camp. W-1 said that  
26 when he returned to camp, P-1 wasn't with them. W-1 went back out to look for his father and had found  
27 him approximately 30 minutes later next to his overturned Rhino. W-1 said that P-1 was lying face down  
28 and the bottom of a steep hill next his vehicle bleeding. W-1 said that he checked P-1 for signs of life and  
29 was unable to detect any. W-1 said that he returned to his campsite to call for help. W-1 later related to me  
30 that P-1 was not wearing a helmet or a seatbelt the last time he saw him.

31

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PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
R.J. MURPHY	017101	02/12/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/12/2008	1715	9835	017101 2008-02-0045

1 **OPINIONS AND CONCLUSIONS**

2

3 **SUMMARY**

4

5 **Party #1** (b)(3):C was driving **Vehicle #1 (Yamaha)** in a westerly direction down an unnamed dirt trail  
6 that traversed the top of a ridgeline finger towards the bottom of a valley floor at an unknown speed. P-1  
7 was driving V-1 in an area that is considered to be out of bounds to off-road vehicles by the Bureau of Land  
8 Management.

9

10 P-1 was attempting to traverse the top of the finger while traveling downhill towards the valley floor. P-1  
11 failed to keep V-1 centered on the unnamed dirt trail and allowed V-1 to turn to the left leaving the trail. V-1  
12 slid off the trail and started to roll from side to side, down a steep hillside that bordered the south side of the  
13 dirt trail. V-1 rolled multiple times, causing P-1 to be ejected from the vehicle and onto the ground.

14

15 After the collision, V-1 came to rest facing in a northerly direction on its right side. P-1 came to rest, in a  
16 prone position facing in an easterly direction on the desert floor, approximately 4 to 5 feet from V-1

17

18 The San Bernardino County Fire Department was notified and dispatched an ambulance to the scene from  
19 Baker ambulance. Upon their arrival, the ambulance crew rendered medical aid to P-1. P-1 was  
20 pronounced dead at approximately 1835 hours by Baker Ambulance Paramedic C. Lampley ID# P1993.

21

22 The summary was determined by statements, physical evidence, injuries sustained by P-1 and vehicle  
23 damage

24

25 **AREA OF IMPACT (AOI):**

26

27 The AOI where Vehicle #1 overturned down a steep embankment was located at GPS coordinates latitude  
28 35 degrees 42.428 north and longitude 116 degrees 13.810 west; or approximately 3.5 miles east of SR-127  
29 and 34 miles north of Baker Blvd.

30

31 The AOI was established by statements, physical evidence, vehicle points of rest, and vehicle damage

32 **CAUSE:**

33

34 **Party #1** (b) caused this collision and was in violation of California Vehicle Code section 38305 CVC  
35 which states, "No person shall drive an off-highway motor vehicle at a speed greater than is reasonable or  
36 prudent and in no event at a speed which endangers the safety of other persons or property"

37

38 **RECOMMENDATIONS:**

39

40 None

41

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
R.J. MURPHY	017101	02/12/2008		

**San Bernardino County Sheriff - Coroner Division**  
**Coroner Investigation**

**COPY**

1	MODE <b>Traffic</b>	CASE # <b>700801323</b>
	STATUS <b>Cert</b>	DEPUTY <b>Robert Hunter</b>

<b>CASE INFO</b>		AGENCY California Highway Patrol (CHP)	DATE 02-12-08	TIME 1849
REPORTED BY CHP Dispatch	NAME RELEASABLE ****	PULL-OUT? <b>Yes</b>	# OF PHOTOS ****	SPECIAL CIRCUMSTANCES None

<b>DECEDENT INFO</b>		1 NAME (FIRST) <b>(b)(3):CPSA Section 25(c)</b>		2 (MIDDLE)		3 (LAST)	
4 AKA		DOE TYPE NUMBER		PHONE		****	
5 ADDRESS ****				6 CITY Highland		7 STATE CA	
8 ZIP 95320		9 SEX Male		10 RACE White		11 DOB 06-24-1942	
12 AGE 65 YRS		13 HGT 69.0 IN		14 WGT 192.0 LBS		15 HAIR Brown	
16 EYES Brown		17 DRIVER'S LIC # 1656507		18 POLY TAGS 25686		19 TESSA ****	
20 STATE CA		21 HOW IDENTIFIED Family on scene		22 RELATED CASE NUMBERS			

<b>LEGAL NEXT OF KIN</b>		NAME <b>(b)(6)</b>		RELATIONSHIP Wife		MOTHER'S DOB 02-13-69		DATE/TIME NOTIFIED 0600		NOTIFIED BY Promis	
ADDRESS ****				CITY Highland				STATE CA		ZIP 95320	
PHONE ****				OTHER NEXT OF KIN INFO							
ALTERNATE PHONE #											

<b>PLACE/DEATH OCCURRED</b>		7 DATE 02-12-08		8 TIME 1835		DAY OF DEATH Tuesday		PRONOUNCED BY Medic Lampley, C Baker Ambulance P1993			
9 PLACE OF DEATH Open Desert						10 ICP-ENCLOSURE		11 FACILITY OTHER THAN HOSPITAL			
12 FACILITY ADDRESS OR LOCATION WHERE FOUND 4 miles N/O Hwy 127 Dumont Dunes								13 CITY Rural Baker			

<b>MEDICAL</b>		TRANSPORTED FROM N/A		ADMITTED TO? <b>N/A</b>		DATE		TIME		MED REC OBTAINED		MED REC #		BLOOD ORDERED	
----------------	--	-------------------------	--	-------------------------	--	------	--	------	--	------------------	--	-----------	--	---------------	--

**INVESTIGATIVE SUMMARY** ADDITIONAL NARRATIVE ATTACHED  YES  NO

64 year-old male, **(b)(3):CPSA** was ejected from his 2006 Yamaha All Terrain Vehicle (ATV) and sustained a lacerated anterior neck and fractured cervix. It was undetermined if **(b)(6)** was utilizing the seat restraint device while operating the vehicle. **(b)(6)** appeared to be traversing a trail above a steep incline when he lost control on the vehicle and it rolled down the incline, ejecting **(b)(6)** and causing the trauma to the body.

<input checked="" type="checkbox"/> REVIEWED BY		NOTE TO PATHOLOGY	
Krocker: 02-13-08 2320			
RETURNED <input type="checkbox"/> CORRECTIONS REQ			
<input type="checkbox"/> FOLLOW UP REQ			

# San Bernardino County Sheriff - Coroner Division

## Coroner Investigation



<b>2</b>	MODE <b>Traffic</b>	CASE # <b>700801323</b>
	STATUS <b>Cert</b>	DEPUTY <b>Robert Hunter</b>

### CAUSE OF DEATH

107 CAUSE (A) <b>Multiple blunt force injuries</b>	TIME INTERVAL <b>Minutes</b>	109 BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
(B)		110 AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
(C)		ALTOBY # <b>E0137-08 AN</b>
(D)		ACCIDENT #

111 CITY & COUNTY OF DEATH: SAN BERNARDINO COUNTY, CALIFORNIA; COUNTY OF DEATH: SAN BERNARDINO COUNTY, CALIFORNIA

112 WAS OPERATION PERFORMED FOR ANY CONDITION WITHIN 107 OR 111(A) YES LIST TYPE OF OPERATION(S) DATE:  
 YES  NO DUBOIS JL

ATTENDING PHYSICIAN <b>N/A</b>	PHONE	DATE LAST ATTENDED	CAUSE GIVEN BY <b>Frank Shandon</b>
113 PHYSICIAN ID SIGN D/C <b>Calcedni</b>	ADDRESS	CITY	DATE <b>02-14-08</b> TIME <b>1609</b>

### INJURY

114 SPECIFY MODE <b>Accident</b>	115 PLACE OF INJURY <b>Highway</b>	116 ATYPICAL <b>No</b>	117 DATE <b>02-10-08</b>	118 HOUR <b>1100</b>
119 LOCATION (include Zip Code) <b>4 miles N/O Hwy 127, Dumont Dunes Baker, 92309</b>				
120 DESCRIBE HOW INJURY OCCURRED <b>Unrestrained driver ejected from ATV</b>				

### PROPERTY

PROPERTY?  YES  NO ;  YES  NO

### LAW ENFORCEMENT

AGENCY <b>California Highway Patrol (CHP)</b>	AGENT <b>Officer Murphy</b>	OFFICER ID # <b>02-001430204</b>
--	--------------------------------	-------------------------------------

### AUTOPSY

PROCEDED BY <b>RM</b>	DATE <b>02-13-08</b>	BY (NAME OF)	FOR (RELATIVE)	NOISE (DATE)
		<b>02-14-08</b>	<b>03-04-08</b>	<b>02-13-08</b>

### DISPO OF REMAINS

PRESENT LOCATION <b>xxxx</b>	MORQUE STATUS	VEHICLE # <b>xxxx</b>
TRANSPORTED BY <b>xxxx</b>	NOTIFIED BY <b>xxxx</b>	DATE <b>xxxx</b>
RR MORTUARY <b>SALAS BROTHER FC</b>	PHONE OF MORTUARY <b>708-823-5546</b>	TIME <b>xxxx</b>
		ARRIVED <b>xxxx</b>

# San Bernardino County Sheriff - Coroner Division

## Coroner Investigation

COPY

3

MODE Traffic

CASE # 700801323

STATUS Cert

DEPUTY Robert Hunter

### Coroner Investigation

02/13/2008

#### Notification to Coroner:

On Wednesday, February 13, 2008 at 1849 hours, San Bernardino County Sheriff Department (SBSD) Dispatch received a call from, California Highway Patrol Dispatch, reporting a dead body. I received the call via the Computer Aided Dispatch (CAD) system. I responded from the San Bernardino County Coroner's Division at 1935 hours, arriving on scene at 2215 hours.

#### Scene Description:

The scene is open desert in the Dumont Dunes area of the United States Department of Interior, Bureau of Land Management, Off-Highway Vehicle (OHV) area. The area of the incident is a hilly terrain, approximately 60 to 100 feet high, adjacent to a riverbed. The deceased was located approximately 2 miles north of State Highway 127 on Dumont Dunes Road, 2 miles west on Sperry Wash Road and approximately 150 yards northwest on Sperry Wash Road in open desert. The location was also located utilizing a Germin etrex, Global Tracking System (GPS) device using World Geodetic System (1984) at N35 42 866 W116 13 803. The area north of the deceased was a steep incline/decline approximately 60 feet high, covered with loose rocks, dirt and vegetation. When I arrived at the scene the ignition to the vehicle was in the on position and there was no noticeable electrical power to the vehicle. The vehicle appeared to be in drive gear and the parking brake engaged.

The deceased was located approximately one foot northwest of a 2006, Yamaha Rhino, All Terrain Vehicle, VIN # 5Y4AM08Y1GA007665, License (not on vehicle) X95152, which was laying on its right side. The Yamaha Rhino was a side-by-side, 4 wheel drive, automatic transmission, All Terrain Vehicle (ATV). The front of the vehicle was positioned toward the northwest. The driver seat was outside of the vehicle and positioned approximately one foot south of the deceased head. The right passenger seat and two rear seats were still attached and intact inside the vehicle. I did not observe any seat belts attached to the passengers seats in the vehicle. Lying next to the right arm and across the upper back of the deceased was what appeared to be a gray seat belt. An inspection of the seat belt did not reveal any damage, tears or stretching. The bolt holes and lockdown portions of the seat belts did not appear to be damaged. An inspection of the driver seat revealed what appeared to be damage to the front lock down device on the base of the seat. There did not appear to be any damage to the areas where the seat belt attached or passed through the seat. An inspection of the surrounding area and terrain revealed a small silver in color bolt on the ground approximately 10 yards north of the deceased. There was what appeared to be blood splatter on several rocks on the hill side where the deceased was ejected.

The weather at the scene at the time of our arrival was dark, clear, cool and dry. The ground was dry. At the estimated time of the incident the weather was clear, sunny, cool and dry. There was little or no wind.

#### Interview of Officer Murphy, California Highway Patrol:

At approximately 2220 hours, I met with Officer Murphy at the BLM Volunteer Host residence where we were staging for the recovery. He indicated he received a radio call of a possible dead body in the Dumont Dunes area at 1730 hours. Officer Murphy said when he arrived he spoke with (b)(7)(C), son of the deceased. (b)(7)(C) told Officer Murphy his father, (b)(7)(C) CPA, brother and he had been out most of the day driving around the area in their ATV's. (b)(7)(C) told Officer Murphy his dad's ATV had a problem with one of the axles and his dad said he was going back to their camp site. (b)(7)(C) indicated his father was going to follow the river bed back to camp but for some reason he traveled over a ridge where he lost control and the ATV rolled over several times ejecting his father.

Officer Murphy indicated the deceased was in an area that required four wheel drive equipment. Officer Murphy stated Baker Ambulance responded to the location and Paramedic C. Lampley, P1993, pronounced Castro dead at 1835 hours. Officer Murphy said (b)(7)(C) had obvious signs of death including rigor mortis, a lacerated anterior neck and fractured neck.

Officer Murphy said he and the three civilians from the area were assisting him in traveling to the scene by utilizing their ATV's. Officer Murphy stated he had made several trips to the scene to assess the situation and review the circumstances of the incident.

Officer Murphy indicated it was not clear if (b)(7)(C) was attempting to cross the top of the ridge or attempting to transverse the decline from the top of the ridge to the base of the hill when the ATV rolled ejecting Castro. Officer Murphy indicated it did not appear Castro was utilizing the seatbelt restraints nor wearing a helmet.

#### Body Description:

At 2250 hours, I began the body examination. The body is that of a White male adult identified as Lawrence Castro, a 64 year-old resident of Hughson, California, by means of family.

The body was prone on the ground with the face turned to the right. The head was positioned to the southeast. The left arm was under the body and extending to the right side of the body. The right arm was straight and at a slight angle away from the body. The legs were straight and in line with the torso and the feet positioned to the northwest.

Clothing consisted of a red pull over shirt, blue denim pants, black belt, white briefs and white socks. Next to the body was a pair of brown loafer type shoes. There were no additional clothing noted on the body.

There were no therapeutic devices noted on the body.

# San Bernardino County Sheriff - Coroner Division

## Coroner Investigation

COPY

4

MODE Traffic

CASE # 700801323

STATUS Cert

DEPUTY Robert Hunter

Trauma to the body consisted of a deep laceration, approximately six inches in length, on the anterior of the neck. There appeared to be a pronounced fracture to the cervical spine. There were numerous abrasions to the face. There were missing teeth in the mouth. There was a possible broken nose. There was no additional trauma noted on the body.

There were no petechial hemorrhages noted on the body or in the eyes. Tache noire was beginning in both eyes. There was no vomit on or around the body. Rigor mortis was in the initial stage and easily broken. Lividity was present anterior and consistent with the prone position of the body. There was a large pool of blood from the head travelling the length of the right arm.

There was a possible surgical scar on the lower back. There were no additional scars or tattoos noted on the body.

There were no visible and/or palpable deformities to the skull consistent with possible fractures. There were possible palpable fractures to the ribs. The lower abdomen was extended on the right side, possible due to the prone position of the body. There did not appear to be any fractures to the extremities.

I took 39 digital photographs of the body and scene and completed two sets of inked fingerprint cards. I did not remove and property from the decedent's person at the scene. A cell phone and set of keys were later removed at the morgue facility by Deputy Mc Elroy. These items were itemized on a Sheriff Department CR-3 property form and later booked into the Coroner Division Property Room. I affixed toe tag number 25686 to the great right toe. The body was placed in a yellow Coroner body pouch. The pouch was secured with lock number 4654760.

The examination was completed at 2330 hours. After the examination, the body was placed on a backboard and moved via one of the ATV's to our four wheel drive county unit where it was placed in the rear cargo area and transported back to the staging area. The body was transferred from our county vehicle and placed in the Med-Cab transportation vehicle. The body was then transported to the San Bernardino County Morgue Facility by Med-Cab transportation at my request.

### Investigation:

After the body examination was completed and the body placed into the county vehicle, I assisted Officer Murphy and the volunteers in uprighting the deceased's vehicle, which was started and driven back to the staging area by Officer Murphy. Once the vehicle was uprighted it was confirmed that (b)(6) vehicle was in one of the drive gears and the parking brake was engaged. At the staging area the vehicle was inspected by Officer Murphy. According to one of the individuals assisting with the recovery and Officer Murphy, it appeared there was damage or a malfunction with a part on the left axle area. Officer Murphy indicated the vehicle would be transported to their storage facility and held for evidence pending an inspection of the vehicle.

Interview of (b)(6) son of the deceased:

At approximately 2345 hours, I met with (b)(6) provided the same information relayed by Officer Murphy. (b)(6) said his father was in a good mood during the day and they were having a good time. (b)(6) confirmed that his father's ATV had a problem with a part on one of the axles. (b)(6) said his father was going to return to their camp site via a route that would take him along the riverbed and stay away from any steep terrain. (b)(6) said he did not know why his father took the route where he lost control of the vehicle. (b)(6) indicated they became concerned when they did not see his father in the riverbed or general area went looking for him. (b)(6) said they found his father at the bottom of the hill side next to his ATV.

I asked (b)(6) about his father's medical history. He stated that his father had back surgery about 18 years ago and currently has a thyroid problem. (b)(6) said his father did not have any other medical history. (b)(6) said his father has always been in good health. (b)(6) indicated that his father has never smoked, only drinks a beer periodically and has not used illegal drugs. (b)(6) said his father was a retired diesel mechanic. Aaron stated his father has been riding ATV for over 40 years without an incident.

I asked (b)(6) if his father utilized the seat belts in the ATV. (b)(6) stated his father never used the seat belts.

### Volunteer Assistance:

We were assisted by Don Denny, BLM Host Volunteer and Jim Hansen, park visitor, in the recovery of the deceased. Both subjects assisted by utilizing their ATV's to escort us into the scene along with assisting with transportation of the body and the deceased vehicle.

I cleared the scene at 0015 hours.

### Follow-up:

A records search revealed that (b)(6) did not have any convictions or arrests on file. (b)(6) had a current class A drivers license authorizing him to drive tractor/trailers and multiple axle vehicles, including tanker trucks and triple trailers.

### Medications:

None

### Disposition:

Submitted to pathology for Medical Examiner's Certification



COPY

# County of San Diego

GLENN N. WAGNER, D.O.  
CHIEF MEDICAL EXAMINER

CHRISTINA STANLEY, M.D.  
CHIEF DEPUTY MEDICAL EXAMINER

OFFICE OF THE MEDICAL EXAMINER  
5655 OVERLAND AVE., Ste 1411, SAN DIEGO, CALIFORNIA 92123-1245  
TEL: (619) 684-2895 FAX: (619) 495-5956

## TOXICOLOGY REPORT

Name: (b)(3):CPSA Section 25(c)

SBCCO Number: 700801323

Date of Death: 02/12/2008

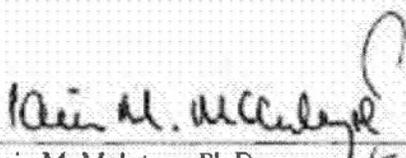
Pathologist: Frank Sheridan, M.D.

Specimens Received: Right Femoral Blood, Vitreous

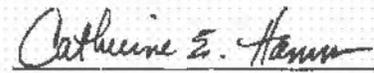
<u>Test Name (Method of Analysis)</u>	<u>Specimen Tested</u>	<u>Result</u>
<u>Alcohol Analysis (GC)</u>	Right Femoral Blood	
Alcohol (Ethanol)		Not Detected
Acetone, Methanol, Isopropanol		Not Detected
<u>Drugs of Abuse Screen (ELISA)</u>	Right Femoral Blood	
Cocaine metabolites		Not Detected
Opiates		Not Detected
Amphetamines		Not Detected
Benzodiazepines		Not Detected
Fentanyl		Not Detected
Cannabinoids		Not Detected

End Results

Approved and Signed:  
02/27/2008

  
Iain M. McIntyre, Ph.D.  
Forensic Toxicology Laboratory Manager  
(All Inquiries/Correspondence)

Reviewed:

  
Catherine E. Hamm  
Toxicologist III

1. Task Number 090714HCC3753		2. Investigator's ID 8187		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
3. Office Code 840	4. Date of Accident YR MO DAY 2007 02 18	5. Date Initiated YR MO DAY 2009 07 21		
6. Synopsis of Accident or Complaint UPC A three year old died from internal injuries sustained when the 4 wheeled ATV (an UTV) flipped over. He was a passenger in the vehicle being driven by his 8 year old brother. The victim was not wearing a helmet or a seat belt.				
MFR/PRVLBR NOTIFIED COMMENTS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> OVERRULED; <input type="checkbox"/> ATTACHED <input checked="" type="checkbox"/> EXCISIONS/FOIA EXS. 3, 25c, 6 <input checked="" type="checkbox"/> DO NOT RE-NOTIFY <input type="checkbox"/> RE-NOTIFY				<i>3/24/10</i>
7. Location (Home, School, etc) 2 - FARM		8. City WOODWORTH		9. State LA
10A. First Product 5044 - Utility Vehicles		10B. Trade/Brand Name KAWASAKI MULE		10C. Model Number 2005
10D. Manufacturer Name and Address KAWASAKI MOTOR CORPORATION 9950 Jeronimo Road Irvine, CA 92716-2016				
11A. Second Product 0		11B. Trade/Brand Name NONE		11C. Model Number NONE
11D. Manufacturer Name and Address NONE				
12. Age of Victim 3	13. Sex 1 - Male	14. Disposition 8 - Death	15. Injury Diagnosis 62 - Intern. Org. Inj.	
16. Body Part(s) Involved 75 - HEAD	17. Respondent 3 - 2nd Hand Info Only	18. Type of Investigation 2 - Telephone	19. Time Spent (Operational / Travel) 9 / 0	
20. Attachment(s) 2 - Documents		21. Case Source 14 - Death Certificate		22. Sample Collection Number
23. Permission to Disclose Name (Non NEISS Cases Only) <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
24. Review Date 08/31/2009	25. Reviewed By 8631		26. Regional Office Director Frank J. Nava	
27. Distribution Streeter, Robin			28. Source Document Number 0722003414	

**INJURY SCENARIO:**

According to the Police Detective who investigated this fatal incident of a three year old passenger, the UTV was being driven by the victim's 8 year old brother. The two were riding in the pasture of the family's farm when, according to the 8 year old driver, and reported to the Detective, a deer ran out in front of the vehicle. The detective stated he did not question the driver "too much" because of the emotional duress the young man was under. However, he had difficulty believing that a deer would run in front of the vehicle and occupants in an open field during the day. He believes the driver may have been operating the UTV at or near its maximum speed of 25 miles per hour and lost control of the vehicle. The driver told the detective when the deer ran in front of the vehicle, he turned the vehicle sharply to the left. The driver then reportedly turned quickly back to the right causing the UTV ("mule") to flip over on its right side. The passenger and victim, a three year old boy, were trapped underneath the UTV. After the incident, the 8 year old male ran back to his house and told his father. The father of the victim drove to the area where the incident in his truck. When he arrived he flipped the UTV off the victim and took his son back to their house. The detective believes the victim's father called the Emergency Medical Services (911) while he was driving back to his house. The paramedics and ambulance arrived at approximately the same time as the Police Detective. The victim was provided medical attention by the paramedics and taken to a nearby hospital where he died a few hours after the incident from internal injuries. The driver and the passenger were not wearing helmets or seat belts at the time of the incident. The terrain type was described by the Detective as being pasture land-not overly rugged but "bumpy" to ride on. The ground was grass covered. He stated he noticed no measurable slope of the terrain.

**PRODUCT DESCRIPTION:**

The vehicle involved is "Mule" UTV, 2005 model, manufactured by Kawasaki. The Detective did know the VIN identification. He stated there were photographs taken of the vehicle. Photographs of the product have been requested; however, since they have not been received, a missing document sheet has been attached. Follow up requests of the photographs were also made to the Police Chief who also went to the scene of the injury.

**ATTACHMENTS/EXHIBITS:**

The following numbered exhibits are attached:

1. List of attachments;
2. Contact sheet;
3. Copy of police report;
4. Missing document sheet.

EXHIBIT 1  
IDI 090714HCC 3753

LIST OF ATTACHMENTS:

1. LIST OF ATTACHMENTS FOR REPORT;
2. CONTACT SHEET;
3. CITY POLICE REPORT;
4. MISSING DOCUMENT (AWAITING PHOTOGRAPHS).

EXHIBIT 2  
IDI 090714HCC 3753  
CONTACT SHEET

NAME AND ADDRESS

DATE AND RESULT OF CONTACT

TOWN OF WOODWORTH  
PO. BOX 228,  
WOODWORTH, LA 71485  
318-442-8930

7/21/09 AND F/UP REQUEST AND  
MONEY ORDER ON 7/24/09

OBTAINED REPORT

DETECTIVE DAVID SIKES  
WOODWORTH POLICE DEPT.  
WOODWORTH, LA. 71485  
318-442-8980

7/28/09; 8/10/09 PHONE CALLS  
REQUEST FOR ADDITIONAL  
PRODUCT DATA

EXHIBIT # 3  
page # 1

Chief's Int. \_\_\_\_\_  
Mayor's Int.

# WOODWORTH POLICE DEPARTMENT

P.O. Box 228 Woodworth, La 71485

318-442-8980/Fax 318-487-6110

WP2  
WP3  
WP4  
WP5

090714 HCC 3753

## COMPLAINT/INCIDENT REPORT

#07-036

CO (b)(6)		SERIAL NUMBER	
CO (b)(6)		ON BRIDGE RD	
SARAH BUTLER		563 ROBINSON BRIDGE RD	
REPORTED BY		ADDRESS	
3:13 PM		February 18, 2007	
RECEIVED BY		OFFICERS ASSIGNED	
TIME		DATE	
PHONE NUMBER		PHONE	
N/A		HOW REPORTED	

DETAILS OF COMPLAINT, OR INCIDENT: (LIST PROPERTY, SUSPECTS, WANTED ON REVERSE SIDE).

ON 2-18-07 AT APPROX. 3:13 PM, I, PTL. D. SIKES, ALONG WITH THE WOODWORTH FIRE AND RESCUE WAS DISPATCHED TO 563 ROBINSON BRIDGE RD IN REFERENCE TO A VEHICLE ACCIDENT INVOLVING A 3 YEAR OLD CHILD. THE CALL LED TO THE ACCIDENTAL DEATH OF MATTHEW BUTLER.

AT THIS TIME I ARRIVED AT THE SAME TIME AS CHIEF GONZALES. MIKE DOIRON DID TO FIND (b)(6) HOLDING HIS 3 YEAR OLD SON, (b)(6), IN HIS ARMS / LAP ON THE SIDE OF THE DRIVEWAY. DOIRON AND CHIEF IMMEDIATELY BEGAN TO RENDER AID AND I CALLED FOR AIR MED. IT WAS AT THIS TIME THAT FIRE CHIEF BUTCH DOIRON AND ACADIAN AMBULANCE ARRIVED. THE PARAMEDICS BEGAN TO TEND TO THE CHILD AND SHORTLY AFTER LEFT THE SCENE WITH THE CHILD IN ROUTE TO RAPIDES GENERAL HOSPITAL. CHIEF GONZALES TRANSPORTED (b)(6) BEHIND THE AMBULANCE TO THE HOSPITAL.

IT WAS AT THIS TIME THAT I LEARNED THAT (b)(6) AND HIS OLDER BROTHER (b)(6) (8 YEARS OLD) WAS BOTH RIDING THE KAWASAKI MULE UTV AND (b)(6) WAS DRIVING. (b)(6) SAID THAT A DEER JUMPED OUT IN FRONT OF HIM AND HE TURNED THE WHEEL AND THE MULE TIPPED OVER. AFTER THE WRECK CHARLES SAW THAT HIS BROTHER WAS TRAPPED AND RAN HOME AND GOT (b)(6) THEN DROVE HIS TRUCK IN THE PASTURE TO THE SCENE. HE FLIPPED THE MULE OVER AND GRABBED (b)(6) AND RAN BACK TO THE EDGE OF THE DRIVEWAY, WHERE HE WAS WHEN WE ARRIVED.

I THEN WENT TO THE SCENE WHERE THE MULE WAS STILL AT AND TOOK PHOTOS. THE TIRES MADE IMPRESSIONS IN THE SOFT GROUND. I COULD SEE WHERE THE MULE WAS GOING STRAIGHT

PERSONS ARRESTED \_\_\_\_\_ NO. \_\_\_\_\_ NO. \_\_\_\_\_

CASE CLOSED \_\_\_\_\_ UNFOUNDED \_\_\_\_\_ CLEARED BY ARREST \_\_\_\_\_ OTHER \_\_\_\_\_

APPROVED \_\_\_\_\_ SIGNED *[Signature]* DATE February 18, 2007

Page Number ( Only If Additional Pages Follow ) \_\_\_\_\_

"HOME OF INDIAN CREEK RECREATIONAL AREA"

WOODWORTH POLICE DEPARTMENT

P.O. Box 228 Woodworth, La 71485

318-442-8980/Fax318-487-6110

Subject's Name: N/A

Date February 18, 2007

Page: 2

# COMPLAINT/INCIDENT REPORT

THEN TURNED SHARPLY TO THE LEFT FOR ABOUT 10 FEET THEN TURNED BACK TO THE RIGHT  
VERY SHARP. THIS QUICK TURN BACK TO THE RIGHT CAUSED THE MULE TO FLIP OVER. THE KAWASAKI MULE  
HAS A MAX SPEED OF 25 MPH. A COMPLETE BREAKDOWN OF THE MULE'S SPEC.'S ARE INCLUDED IN THIS CASE.

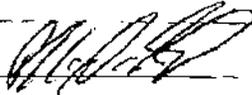
FINAL NOTE: LATER THAT EVENING I RECEIVED A CALL SAYING THE CHILD HAD PASSED AWAY  
FROM HIS INJURIES. CASE CLOSED WITH ACCIDENTAL DEATH.

090714 HCC 3753

EXHIBIT # 3  
PAGE # 2

BRB

SIGNED



DATE February 18, 2007

Exhibit # 4

Print Form

**Task No.** 090714HCC3753

**Date:** 8/26/2009

**STATUS OF MISSING DOCUMENT (S)**

**The official records were requested for this investigation report but could not be obtained.**

- 1. Photographs of the product;
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

**Date:** 8/26/2009

**Investigator No:** 8187 (BRB)

**Regional office:** CF-IW

**Supervisor No:** \_\_\_\_\_

<b>1. Task Number</b> 090715CCC3759		<b>2. Investigator's ID</b> 8554		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
<b>3. Office Code</b> 840	<b>4. Date of Accident</b> YR MO DAY 2009 07 12	<b>5. Date Initiated</b> YR MO DAY 2009 07 20		
<b>6. Synopsis of Accident or Complaint</b> <b>UPC</b> <p>A 32-year-old male victim drove his four-wheeled utility vehicle, with his wife as a passenger, to a convenience store a few miles from their home. The victim stopped at the flat dirt parking lot of the store, and he and his wife noticed an electric burning smell. They exited the vehicle and found the source of the smell to be a fire burning inside the vehicle's plastic tail light. The victim's wife ran to a nearby friend's house to get water to put out the fire. In the meantime, the victim noticed that the tail light was melting and loose, and he tried to pull it off of the vehicle. He removed his shirt, placed it into his right hand, and grabbed the corner of the tail light, using the hand with the shirt. The tail light area experienced some electrical sparking and some melted bits of plastic shot into the air. Two of these bits struck the victim below his right eye and caused minor burns, about the size of the head of a pin. The victim's wife returned with water, which helped put out the fire. Additional damage to the melting tail light was damage to the rear and side panel of the vehicle. The victim and his wife then drove the vehicle back to their home. The vehicle was recalled in August 2009.</p> <p style="text-align: right;"><b>MFR/PRVLBR NOTIFIED</b>  COMMENTS: <u>YES</u> / <input checked="" type="checkbox"/> <u>NO</u>  <u>OVERRULED</u>; <u>ATTACHED</u>  <input checked="" type="checkbox"/> <u>EXCISIONS/FOIA EXS</u> 3, 25c, 6  <i>11/23/09</i></p>				
<b>7. Location (Home, School, etc)</b> 5 - OTHER PUBLIC PROPERTY		<b>8. City</b> MORENCI	<b>9. State</b> AZ	
<b>10A. First Product</b> 5044 - Utility Vehicles	<b>10B. Trade/Brand Name</b> POLARIS		<b>10C. Model Number</b> RANGER CREW	
<b>10D. Manufacturer Name and Address</b> POLARIS INDUSTRIES, INC. 2100 Highway 55 Medina, MN 55340				
<b>11A. Second Product</b> 0	<b>11B. Trade/Brand Name</b> NONE		<b>11C. Model Number</b> NONE	
<b>11D. Manufacturer Name and Address</b> NONE				
<b>12. Age of Victim</b> 32	<b>13. Sex</b> 1 - Male	<b>14. Disposition</b> 1 - Injured, not Hosp.	<b>15. Injury Diagnosis</b> 51 - Burn-Thermal	
<b>16. Body Part(s) Involved</b> 76 - FACE	<b>17. Respondent</b> 1 - Victim/Complainant	<b>18. Type of Investigation</b> 2 - Telephone	<b>19. Time Spent (Operational / Travel)</b> 8 / 0	
<b>20. Attachment(s)</b> 9 - Multiple Attachments		<b>21. Case Source</b> 07 - Consumer Complaint	<b>22. Sample Collection Number</b>	
<b>23. Permission to Disclose Name (Non NEISS Cases Only)</b> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
<b>24. Review Date</b> 08/26/2009	<b>25. Reviewed By</b> 8554		<b>26. Regional Office Director</b> Frank J. Nava	
<b>27. Distribution</b> Altman, Melvyn			<b>28. Source Document Number</b> I0970521A	

This burn injury involved a 32 year old man and a faulty tail light on the back of his utility vehicle. The information in this report was received from the victim's wife during telephone conversations on August 20 and August 22, 2009.

The victim, his wife and their 6 children live in a rural area of Arizona. The wife said that they visited a local ATV dealer during June 2009 and ordered a recreational utility vehicle for \$17,000.

They ordered a modified 4-wheeled utility vehicle with a steering wheel, a rollover cage/protection bar system. 6 seats with safety harnesses, 40 HP, 683 cc engine displacement, a 9 gallon fuel capacity and with a top speed of about 44 miles per hour.

Modifications to the vehicle were handled by a third party through their dealer. The main modification consisted of extending the length of the vehicle to accommodate an extra row of 3 seats for a total of 9 seats. The rollover protection bar system was extended to cover the extra row of seats.

She mentioned that they had also paid the dealer to provide them with a hard plastic overhead cover which was to be installed above the seats; however, the dealer still had not performed this modification by August 22, 2009.

The family used their utility vehicle for only a few times before they experienced a fire in the taillight. The wife indicated that the vehicle may have been used 5 times between the time they received it in late June and the fire which took place during July 12, 2009.

She said that the vehicle was driven over a combination of rough terrain and paved roads during that time period. Each trip lasted about 30 minutes. I was told that the vehicle only had about 150 miles on the odometer when the fire took place.

It happened during the afternoon of Sunday, July 12, 2009. The victim and his wife decided to visit a convenience store which was located a few miles from their home.

It was a bright and sunny day. They went outside and got into their utility vehicle. The victim drove the 4-wheeled vehicle while his wife rode in the front passenger seat.

He drove the vehicle uphill along a one lane dirt road at about 5 to 10 miles per hour. They reached the convenience store in about 10 minutes.

He brought the vehicle to a stop on flat dirt parking lot located at the convenience store. As they sat in the parked vehicle the victim and his wife noticed an electric burning smell.

They got out of the utility vehicle and started looking for the source of the burning smell. They found a fire burning inside the plastic taillight section of their vehicle. This fire was located inside the tail light or brake light on the rear passenger side.

They could see flames inside the tail light. The wife told me that she decided to get some water and put out the fire. She ran to the home of a friend who lived nearby. She went into the house and borrowed a bucket which she filled with water from a faucet at the house.

The plastic tail light was melting and appeared to be loose. The victim decided to pull the melting plastic tail light off of the rear of the vehicle. He took off his shirt and placed the shirt in his right hand. He reached down with his hand and grabbed onto the corner of the tail light using his shirt.

As he was attempting to pull the plastic tail light cover off of the vehicle the tail light area experienced some electrical sparking. Suddenly some melted bits of plastic shot up into the air.

Two small pieces of melted plastic struck the victim on his face. They caused two minor burns down below his right eye. The wife said that each of these burns were about the size of the head of a pin.

When she arrived back at the vehicle she took her bucket of water and poured it onto the burning tail light. This water helped to put out the fire. She said that in addition to melting the tail light this fire also damaged the rear and side panel of their vehicle.

The victim and his wife got back into their utility vehicle and drove it back home.

They decided that the injury suffered by her husband did not require treatment at a medical facility. Some burn ointment was applied to the burns.

She identified her husband as being 32 years old, 190 pounds and 5 feet 6 inches tall.

The wife said that she contacted the owner of the ATV dealer who had sold them their vehicle. She gave him a verbal report on the fire caused by the faulty tail light. He indicated to her that he would come out to their home, retrieve the vehicle and have the tail light fixed.

The ATV dealer still had not fixed their utility vehicle one month later so the wife decided to call the manufacturer of the vehicle and file a report by telephone. She said that she spoke with a customer service representative and told him about their tail light fire.

She learned from him that this model utility vehicle was being recall. An electrical short could lead to overheating in the rear tail light wiring harnesses, posing a fire hazard to consumers. The firm had received 46 reports of overheating in the vehicle's tail light area, resulting in the melting of plastic. In 22 of these reports, consumers reported small flames.

A copy of the CPSC News Release covering this recall is attached as exhibit # 2.

During her conversation with the company representative she learned that the dealer who sold them their vehicle had failed to give them the rebate which was given to consumers who had purchased this product.

A short time after the victim's wife had spoken with the manufacturing representative they were contacted by the local ATV dealer. The local ATV dealer came out to their home, picked up their vehicle and replaced the fire damaged parts at no charge.

I asked if they received any written documentation from the manufacturer or the ATV dealer covering this damage and the repair work that was performed on their vehicle. She said that they never received any documentation.

Information on the name and address of the ATV dealer who sold them the vehicle and who handled the repairs was requested. She provided this information based on the assurance that I would not contact the firm until she and her husband had received satisfaction from the company.

She indicated that they are trying to get their rebate money from the dealer plus the company still has not added the overhead cover to their vehicle.

I asked about photographs of the vehicle. She indicated that at one point they took some digital images with a cell phone of the fire damaged vehicle but she does not know if they still have the images. I requested and she agreed to look for these digital images and to send copies to me if she found them.

PRODUCT IDENTIFICATION

This fire involved a modified 2009 model Polaris Ranger Crew 4-wheeled utility vehicle. These vehicles were manufactured by Polaris Industries Inc., Medina, MN.

The victim's wife does not know the serial/VIN number of their utility vehicle.

CONTACTS:

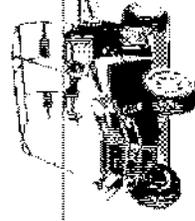
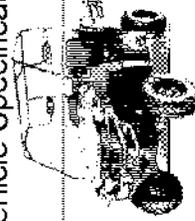
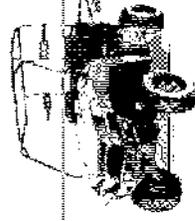
PURPOSE & RESULTS:

Victim's Wife

Incident scenario & product info

EXHIBITS:

- 1. VEHICLE SPECIFICATIONS (1 page)
- 2. CPSC NEWS RELEASE COVERING THIS VEHICLE (2 pages)
- 3. MISSING DOCUMENT FORM (1 page)
- 4. CONTACT SHEET (1 page)
- .
- .
- .



**RANGER™ 4x4**

**RANGER XP™**

**RANGER HD™**

**RANGER CREW™**

<b>Engine</b>				
Displacement/HP	499cc/32 hp	635cc/43 hp	683cc/49 hp	683cc/49 hp
Cooling	Liquid-cooled	Liquid-cooled	Liquid-cooled	Liquid-cooled
Engine Type	4-valve, 4-stroke single cyl.	4-valve, 4-stroke twin cyl.	4-valve, 4-stroke twin cyl.	4-valve, 4-stroke twin cyl.
Top Speed	41 mph	50 mph	50 mph	44 mph
Lubrication	Dry sump	Wet sump	Wet sump	Wet sump
Oil Capacity	2 qts./1.9 ltr.	2 qts./1.9 ltr.	2 qts./1.9 ltr.	2 qts./1.9 ltr.
<b>Combustion</b>	Electronic Fuel Injection	Electronic Fuel Injection	Electronic Fuel Injection	Electronic Fuel Injection
Fuel Capacity	9.0 gal./34 ltr.	9.0 gal./34 ltr.	9.0 gal./34 ltr.	9.0 gal./34 ltr.
Coolant Capacity	2.3 qts./2 ltr.	3.25 qts./3 ltr.	3.25 qts./3 ltr.	3.3 qts./3 ltr.
Alternator	250 watts	500 watts	500 watts	500 watts
Starting/Battery	Electric/12V-50 AH	Electric/12V-30 AH	Electric/12V-30 AH	Electric/12V-30 AH
<b>Drivetrain</b>				
Transmission	Automatic	Automatic	Automatic	Automatic
Gear Range	In-line	In-line	In-line	In-line
Drive	4-wheel shaft drive	4-wheel shaft drive	4-wheel shaft drive	4-wheel shaft drive
<b>Suspension</b>				
Front Details	Adjustable Dual A-Arms	Adjustable Dual A-Arms	Adjustable Dual A-Arms	MacPherson Strut
Rear Details	Independent Rear Suspension	Independent Rear Suspension	Self-Leveling Suspension™ with Vibrator Shocks	Independent Rear Suspension
Front Suspension	9.63 in. Dual A-Arms/24.5 cm	9.63 in. Dual A-Arms/24.5 cm	9.63 in. Dual A-Arms/24.5 cm	8.0 in./20.32 cm
Rear Suspension	9.0 in. Dual A-Arms/22.9 cm	9.0 in. Dual A-Arms/22.9 cm	7.5 in. Dual A-Arms/19 cm with load-leveling shocks	9.0 in./22.9 cm
Center Suspension	N/A	N/A	N/A	N/A
Tires (front/rear)	25 x 10-12/25 x 11-12	25 x 10-12/25 x 11-12	26 x 9-12/26 x 11-12	26 x 9-12/26 x 11-12
<b>Dimensions</b>				
Wheelbase	76 in./193 cm	76 in./193 cm	76 in./193 cm	108 in./274 cm
Turning Radius	158 in./401 cm	158 in./401 cm	166 in./422 cm with Power Steering	224 in./567 cm
Dry Weight	1,214 lbs./550 kg	1,237 lbs./561 kg	1,262 lbs./572 kg	1,460 lbs./662 kg
Ground Clearance	12 in./30 cm	12 in./30 cm	12 in./30 cm	11 in./28 cm
Length/Width/Height	113 in./60 in./75 in. (287 cm/152 cm/190 cm)	113 in./60 in./75 in. (287 cm/152 cm/190 cm)	113 in./60 in./75 in. (287 cm/152 cm/190 cm)	145 in./60 in./75 in. (368 cm/152 cm/190 cm)
Brakes	4-wheel hydraulic disk	4-wheel hydraulic disk	4-wheel hydraulic disk	4-wheel hydraulic disk
Parking Brake	Hand-actuated	Hand-actuated	Hand-actuated	Hand-actuated
<b>Load Capacity</b>				
Box Dimension/Capacity	54 in. x 36.5 in. x 11.5 in. (143 cm x 93 cm x 31.5 cm)/1,000 lbs. (454 kg)	54 in. x 36.5 in. x 11.5 in. (143 cm x 93 cm x 31.5 cm)/1,000 lbs. (454 kg)	54 in. x 36.5 in. x 11.5 in. (143 cm x 93 cm x 31.5 cm)/1,000 lbs. (454 kg)	54 in. x 36.5 in. x 11.5 in. (143 cm x 93 cm x 31.5 cm)/1,000 lbs. (454 kg)
Payload Capacity	1,500 lbs./681 kg	1,500 lbs./681 kg	1,500 lbs./681 kg	1,750 lbs./794 kg
Hitch Tow Capacity	1,500 lbs./681 kg	2,000 lbs./907 kg	2,000 lbs./907 kg	2,000 lbs./907 kg
Cargo System	Lock & Ride®	Lock & Ride	Lock & Ride	Lock & Ride
Seating	3	3	3	6
Std. Photo	Full	Full	Full	Full

# Recall Alert

## U.S. Consumer Product Safety Commission

Office of Information and Public Affairs

Washington, DC 20207

August 4, 2009

Alert #09-762

### Polaris Recalls Ranger Side-by-Side Vehicles Due to Fire Hazard

The following product safety recall was voluntarily conducted by the firm in cooperation with the CPSC. Consumers should stop using the product immediately unless otherwise instructed.

**Name of Product:** 2009 Polaris Ranger "Crew" and "6x6" Side-by-Side Recreational Vehicles

**Units:** About 3,800

**Importer:** Polaris Industries Inc., of Medina, Minn.

**Hazard:** An electrical short can lead to overheating in the rear tail light wiring harnesses, posing a fire hazard to consumers.

**Incidents/Injuries:** The firm has received 46 reports of overheating in the vehicle's tail light area, resulting in melting of plastic. In 22 of these reports, consumers reported small flames. No injuries have been reported.

**Description:** The recall involves certain 2009 Polaris Ranger side-by-side, off-road vehicles. The model and serial number identification decal is located under the front seat, on the right-side seat support. The recall includes the models listed below:

Model Numbers	Model Name
R09RF68AF	Ranger 700 EFI 6x6
R09RF68AR	Ranger 700 EFI 6x6
R09WH68AC	Ranger 700 EFI Crew
R09WH68AG	Ranger 700 EFI Crew
R09WH68AL	Ranger 700 EFI Crew
R09WH68AR	Ranger 700 EFI Crew
R09WH68AZ	Ranger 700 EFI Crew

**Sold at:** Polaris dealers nationwide from December 2008 through July 2009 for about \$11,500.

**Manufactured in:** United States

**Remedy:** Consumers should stop using the recalled vehicles immediately and contact any Polaris Ranger dealer

to schedule a free repair. Polaris has notified registered consumers directly about this recall.

**Consumer Contact:** For further information, contact Polaris toll-free at (888) 704-5290 between 8 a.m. and 5 p.m. CT Monday through Friday or visit the company's Web site at [www.polarisindustries.com](http://www.polarisindustries.com)



CPSC is still interested in receiving incident or injury reports that are either directly related to this product recall or involve a different hazard with the same product. Please tell us about it by visiting <https://www.cpsc.gov/cgibin/incident.aspx>

---

Send the link for this page to a friend! The U.S. Consumer Product Safety Commission is charged with protecting the public from unreasonable risks of serious injury or death from thousands of types of consumer products under the agency's jurisdiction. The CPSC is committed to protecting consumers and families from products that pose a fire, electrical, chemical, or mechanical hazard. The CPSC's work to ensure the safety of consumer products - such as toys, cribs, power tools, cigarette lighters, and household chemicals - contributed significantly to the decline in the rate of deaths and injuries associated with consumer products over the past 30 years.

To report a dangerous product or a product-related injury, call CPSC's Hotline at (800) 638-2772 or CPSC's teletypewriter at (800) 638-8270. To join a CPSC e-mail subscription list, please go to <https://www.cpsc.gov/cpsclist.aspx>. Consumers can obtain recall and general safety information by logging on to CPSC's Web site at [www.cpsc.gov](http://www.cpsc.gov).

Task No. 090715CCC3759

Date: 08/25/2009

### Status of Missing Document(s)

The records were requested for this investigation report but could not be obtained.

1. CPSC form 322 - Received verbal request on status of confidentiality during phone interview.
2. Images of vehicle from victim's wife
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

DATE: 8-25-2009 INVESTIGATOR NO: 9554

REGIONAL OFFICE CFIW SUPERVISOR NO: 9030

CONTACT & IDENTIFICATION SHEET

Spoke by telephone with (b)(6) during 8/20/2009 and during 8/22/2009. Information received from (b)(6) was with the understanding that I would not contact the dealership while she and her husband continue to obtain satisfaction (dealer owes family a rebate on the vehicle and family is still waiting for dealership to install an overhead cover on the vehicle which was previously paid for).

Husband/Wife

(b)(6)

Owner of Retail Vehicle Dealer – Lonnie  
Gila Valley ATVs  
Safford, AZ

Polaris customer rep – name unknown

07/12/2009 18:52:29

Name = (b)(6)  
 Address  
 City = Mo  
 State = A  
 Zip = 855  
 Email = r  
 Telephon  
 Name of  
 Victim's A  
 Victim's C  
 Victim's S  
 Victim's 2  
 Victim's 1

Incident Description = The tail light of our 2009 Polaris Ranger Crew UTV started on fire melting the tail light cover and the side of the Ranger. Marlou's eye was burned in the process of pulling of the tail light electrical wire, due to the popping of electrical sparks which contained hot melted plastic.

Victim's age at time of incident = 32  
 Victim's sex = male  
 Date of incident = 07-12-2009  
 Product involved = 2009 Polaris Ranger Crew  
 Product brand name/manufacturer = Polaris  
 Manufacturer street address =  
 Place where manufactured (City and State or Country) =  
 Product model and serial number, manufacture date = 2009 Ranger Crew  
 Product damaged, repaired or modified = no  
 If yes, before or after the incident =  
 Description of damage, repair or modification =  
 Date product purchased = 6-19-2009  
 Product involved still available = yes  
 Have you contacted the manufacturer = no  
 If not, do you plan to contact them = yes  
 Name Release = Release name to manufacturer only

1. Task Number 090722HNE4626		2. Investigator's ID 8925		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
3. Office Code 810	4. Date of Accident YR MO DAY 2009 07 17	5. Date Initiated YR MO DAY 2009 07 30		
6. Synopsis of Accident or Complaint UPC none  The victim, a 15-year-old male, was operating a 4-wheeled utility vehicle in a field and he was carrying a 15-year-old male passenger. They were not wearing helmets. They were tasked with cutting grass, but instead they decided to haul tree stumps up a hill. The UTV was moving too fast and the driver lost control. The vehicle flipped over and landed on the driver causing fatal injuries at the scene. The passenger was taken to a hospital where he was treated for minor injuries and released.  MFR/PRVLBR NOTIFIED COMMENTS: YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/> OVERRULED; ATTACHED EXCISIONS/FOIA EXS. 6; DO NOT RE-NOTIFY <input checked="" type="checkbox"/> RE-NOTIFY <input type="checkbox"/>				
7. Location (Home, School, etc) 1 - HOME		8. City SPOTSYLVANIA		9. State VA
10A. First Product 5044 - Utility Vehicles	10B. Trade/Brand Name YAMAHA/RHINO		10C. Model Number UNKNOWN	
10D. Manufacturer Name and Address YAMAHA CORP. OF AMERICA INTL/VIN: UNKNOWN 660 Orangethorpe Ave. Buena Park, CA 90622				
11A. Second Product 0	11B. Trade/Brand Name NONE		11C. Model Number NONE	
11D. Manufacturer Name and Address NONE				
12. Age of Victim 15	13. Sex 1 - Male	14. Disposition 8 - Death	15. Injury Diagnosis 62 - Intern. Org. Inj.	
16. Body Part(s) Involved 75 - HEAD	17. Respondent 3 - 2nd Hand Info Only	18. Type of Investigation 2 - Telephone	19. Time Spent (Operational / Travel) 5 / 0	
20. Attachment(s) 9 - Multiple Attachments	21. Case Source 05 - Newspaper		22. Sample Collection Number	
23. Permission to Disclose Name (Non NEISS Cases Only) <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
24. Review Date 10/21/2009	25. Reviewed By 9093		26. Regional Office Director Dennis R. Blasius	
27. Distribution Moon, Clarice; Garland, Sarah; Kessler, Charles			28. Source Document Number N0970332A	

The information in this report was based on information received from the sheriff's department. The medical examiner's report was requested but has as of yet been received. Contact with the victim's next-of-kin was not successful.

On Friday, July 17, 2009, at 2:25 p.m., in Spotsylvania, VA, the victim, a 15-year-old male driver was riding a 4-wheeled utility vehicle in a field located on private property. He was accompanied by a passenger, another 15-year-old male and they were not wearing helmets. The weather condition was scattered clouds and the temperature was 82 degrees.

The victim and the passenger were tasked with cutting grass on the property, but instead they attempted to haul stumps with the utility vehicle. The vehicle was traveling too fast for the driver to handle and he lost control on a hill where the vehicle flipped over on him. He sustained head and upper torso injuries. He was fatally injured at the scene.

The utility vehicle's travel rate of speed prior to the incident was estimated to be 15 miles per hour. The victim was 5 feet, 9 inches tall and he weighed 140 pounds. His knowledge regarding the operation and/or handling of utility vehicle's was unknown.

The passenger was able to jump off the vehicle prior it flipping over and he rolled onto the ground. He was 5 feet, 9 inches tall and he weighed 150 pounds. He sustained cuts, scrapes and a sprained ankle. He was taken via ambulance to a hospital where he was treated and released.

Product: 4-wheeled utility vehicle

Brand/Year: Yamaha/unknown

Manufacturer: **Yamaha Corp. of America Intl**  
660 Orangethorpe Ave, Buena Park, CA 90622

Model: Rhino

VIN: unknown

Description: unknown

Condition: maintenance history, bought new or used, and prior problems is unknown.

Modification: unknown

ATTACHMENTS:

1. Supplementary Incident Report.
2. Missing Document, Medical Examiner's Report.
3. Contact Information.

Attachment 1 - 090722HNE4626

Page 1 of 6

**Spotsylvania Sheriff's Office**

9101 Courthouse Rd. P.O. Box 124  
 Spotsylvania VA 22553  
 Phone #: (540)507-7200 Fax: (540)582-9448

**Supplementary Incident Field Report - [001]**

Incident #: 090101923

Report Prepared By : SHORT JR, LEONARD,V, On : 7/17/2009 @ 10:36:32PM

**SECTION I : INCIDENT INFORMATION**

RMS Case # :	CAD Event # :	Reported Date/Time :	Reporting Officer Name:	Officer PID :
090101923	09198L256	07/17/2009 14:25:33	SHORT JR, LEONARD,V,	L3858
CAD CFS Code :	CAD CFS Description :	RMS CFS Code :	RMS CFS Description :	
DOASUS	Suspicious Death	DEASUS	Death/Suspicious	
Occurred From :	Occurred To :	Location Of Incident (Street, City, State, Zip) :		Common Place :
07/17/2009 14:00:00	07/17/2009 14:10:00	(b)(6)		
CAD Disposition Code :	CAD Disposition Description :	RMS Disposition :	RMS Disposition Date :	
SUP	Supplement Report	CLEARED WITH REPORT	07/17/2009 16:25:00	
Primary Officer :	Zone :	Police Force Used ? :	Type Of Police Force Used :	
LUNSFORD,ED, K	P5			

**SECTION II : OFFENSE INFORMATION (M.O. / SOLVABILITY FACTORS )**

Offense # 1	CFS Description :	CFS Code :	NIBRS	Offense Status :
	Death/Suspicious	DEASUS	90Z - All Other Offenses	Completed
# of Premise(s) Entered :	Primary Premise Type :	Secondary Premise Type :	Arson Amount :	Offender Left Via :
	Field/Woods		\$0	

**SECTION III : NAME DETAILS**

Name # 1	Name Type :	Business Type :	Reason Code :		
	Person		Victim		
SSN :	Last Name :	First Name :	Middle Name :	Suffix :	
	(b)(3):CPSA Section 25(c)				
Premise # :	Street Address :		City :	State :	Zip Code :
(b)(6)			Fredericksburg	VA	22408
Age (YRS) :	DOB :	Sex :	Race :	Ethnicity :	Resident Status :
15		Male	White	Not Of Hispanic Origin	Resident
Home Phone :	Work Phone :	Cellular :	ID Source :	Warrant Obtained :	
		(b)(6)			
Weight (LB) :	Height (FT) :	Eye Color :	Hair Color :	Driver License # :	DL State :
140	5'09"	Brown	Sandy		
US Citizen :	Business Owner :			Business Phone :	
Yes					

**OTHER INFORMATION**

Attachment 1 - 090722HNE4626

Page 2 of 6

**Supplementary Incident Field Report - [001] - Continued**

**Incident # : 090101923**

**Report Prepared By : SHORT JR, LEONARD,V, On : 7/17/2009 @ 10:36:32PM**

Victim Was : <b>Individual</b>				Assault Type :			
Injury Type : <b>OTHER MAJOR INJURY</b>				Justifiable Homicide :			
Name # : <b>2</b>		Name Type : <b>Person</b>		Business Type :		Reason Code : <b>Field Interview</b>	
SSN :		Last Name : <b>(b)(6)</b>		First Name :		Middle Name :	
Premise # : <b>(b)(6)</b>		Street Address : <b>(b)(6)</b>		City : <b>Fredericksburg</b>		State : <b>VA</b>	
Age (YRS) : <b>15</b>		DOB : <b>05/23/1994</b>		Sex : <b>Male</b>		Race : <b>White</b>	
				Ethnicity : <b>Not Of Hispanic Origin</b>		Resident Status : <b>Resident</b>	
Home Phone : <b>(b)(6)</b>		Work Phone :		Cellular : <b>(b)(6)</b>		ID Source :	
Warrant Obtained :							
Weight (LB) : <b>150</b>		Height (FT) : <b>5'09"</b>		Eye Color : <b>Brown</b>		Hair Color : <b>Brown</b>	
Driver License # :		DL State :					
US Citizen : <b>Yes</b>		Business Owner :		Business Phone :			
Name # : <b>3</b>		Name Type : <b>Person</b>		Business Type :		Reason Code : <b>Family</b>	
SSN :		Last Name : <b>Madison</b>		First Name : <b>Les</b>		Middle Name :	
Suffix : <b>JR</b>							
Premise # : <b>10708</b>		Street Address : <b>SUNRISE LANE</b>		City : <b>Fredericksburg</b>		State : <b>VA</b>	
Zip Code : <b>22408</b>							
Age (YRS) : <b>51</b>		DOB : <b>07/01/1958</b>		Sex :		Race :	
				Ethnicity :		Resident Status :	
Home Phone : <b>(540)898-8017</b>		Work Phone :		Cellular :		ID Source :	
Warrant Obtained :							
Name # : <b>4</b>		Name Type : <b>Person</b>		Business Type :		Reason Code : <b>Field Interview</b>	
SSN :		Last Name : <b>(b)(6)</b>		First Name :		Middle Name :	
Suffix :							
Premise # : <b>(b)(6)</b>		Street Address : <b>(b)(6)</b>		City : <b>Fredericksburg</b>		State : <b>VA</b>	
Zip Code : <b>22407</b>							
Age (YRS) :		DOB :		Sex :		Race :	
				Ethnicity : <b>Not Of Hispanic Origin</b>		Resident Status : <b>Resident</b>	
Home Phone : <b>(b)(6)</b>		Work Phone :		Cellular : <b>(b)(6)</b>		ID Source :	
Warrant Obtained :							
US Citizen : <b>Yes</b>		Business Owner :		Business Phone :			

Attachment 1 - 090722HNE4626

Page 3 of 6

**Supplementary Incident Field Report - [001] - Continued**

Incident # : 090101923

Report Prepared By : SHORT JR, LEONARD, V, On : 7/17/2009 @ 10:36:32PM

Name # : 5	Name Type : Person	Business Type :	Reason Code : Field Interview
SSN : [REDACTED]	Last Name : (b)(6)	First Name :	Middle Name : Suffix :
Premise # : (b)(6)	Street Address :	City : Partlow	State : VA Zip Code : 22634
Age (YRS) : 58	DOB : 09/03/1950	Sex : Male	Race : White Ethnicity : Not Of Hispanic Origin Resident Status : Resident
Weight (LB) : 190	Height (FT) : 5'09"	Eye Color : Brown	Hair Color : Bald Driver License # : DL State :
US Citizen : Yes	Business Owner :	Business Phone :	

**SECTION V : RELATIONSHIP DETAILS**

Relationship Type	Entity1	Entity2	Relationship
Crime-Victim	DEATH/SUSPICIOUS	MADISON, BRANDON	

**SECTION VI : NARRATIVE**

On 07/17/09, I responded to (b)(6) for a report of an ATV that had overturned on a fifteen year old male. (b)(3):CPSA Sec was pronounced deceased at the scene.

Upon my arrival, at the residence, I had to take a dirt road into a field, which was adjacent to the property. EMS was already on scene assessing the victim. The ATV had been uprighted and taken off the subject. The ATV was a RHINO model.

The male subject was not breathing and EMS had applied the AED pads for assessment purposes. The subject was lying on his back and there was blood around his nose and mouth. There was an extreme amount of blood on the ground below the subject from his head to his feet.

EMS stated that the ATV was lying on the subject's head and upper torso. They stated that they did not move him once the ATV was taken off him.

Dawn Szabor, medic MS-1 called the time of death at 1402.

I notified Sgt. Bryner of the situation and CID was monitoring and informed me that they would be enroute.

The area was secured. The victim was identified as (b)(3):CPSA Sec. I could only obtain his age which was fifteen years old.

Supplementary Incident Field Report - [001] - Continued

Incident # : 090101923

Report Prepared By : SHORT JR, LEONARD,V, On : 7/17/2009 @ 10:36:32PM

There was another juvenile on scene, (b)(3):CPSA Section 2 fifteen year of age. I asked him what had happened and he stated, "We were hauling stumps and the ATV was going to fast and (b)(3): lost it' on the hill and it started to flip. I jumped off and when I looked back and it was on top of (b)(6). I couldn't move it so I ran for help to the next door neighbor."

(b)(3):CPS had received an injury to his right leg. I informed him since he was underage and was injured that EMS was going to check him. His mother (b)(3):CPSA Se was contacted by EMS and informed of the situation. EMS stated that (b)(6) wanted him transported to the hospital. I obtained what information I could and notified Detective Lunsford that EMS would be transporting the Christopher to the hospital.

Detective Lunsford arrived on scene and all the information I had gathered was turned over to him as well as the scene.

The property owner, (b)(6) arrived on scene. He stated that the two boys were only supposed to be cutting grass and were not supposed to be on the ATV. He was visibly distraught. He was watching (b)(6) for his father, (b)(6) was in Mexico and (b)(6) had already called him and notified him of the situation.

I remained on scene with Detective Lunsford. (b)(6) brothers arrived and they were notified by (b)(6) of what had happened. I offered rides to the two brothers and (b)(6), due to the fact that another family member had not been notified, (b)(6) grandmother. I offered to go with them for notification purposes, however, (b)(6) stated that he would take care of the boys and thanked me for the offer.

I cleared the scene when Covenant Funeral Home arrived and transported (b)(6) from the scene.

Evidence: none

Witness information: none

No paperwork attached.

NFI

SECTION VII : OFFICER

Reporting Officer's Name : SHORT JR, LEONARD,V	Approving Supervisor's Name : BUNAVANT CHRISTOPHER BRADY	Approval Status : APPROVED
Reporting Officer's Signature :	Approving Supervisor's Signature :	Date/Time : 07/17/2009 22:47:09

Attachment 1 - 090722HNE4626

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**Spotsylvania Sheriff's Office**

9101 Courthouse Rd. P.O. Box 124

Spotsylvania VA 22553

Phone # : (540)507-7200 Fax : (540)582-9448

**Master Incident Field Report****Incident # : 090101923****Report Prepared By : LUNSFORD,ED, K, On : 7/23/2009 @ 12:40:36PM****SECTION I : INCIDENT INFORMATION**

RMS Case # : <b>090101923</b>	CAD Event # : <b>09198L256</b>	Reported Date/Time : <b>07/17/2009 14:25:33</b>	Reporting Officer Name: <b>LUNSFORD,ED, K,</b>	Officer PID : <b>E0925</b>
CAD CFS Code : <b>DOASUS</b>	CAD CFS Description : <b>Suspicious Death</b>	RMS CFS Code :	RMS CFS Description :	
Occurred From : <b>07/17/2009 00:00:00</b>	Occurred To : <b>07/17/2009 00:00:00</b>	Location Of Incident (Street, City, State, Zip) : <b>(b)(6)</b>		Common Place :
CAD Disposition Code : <b>SUP</b>	CAD Disposition Description : <b>Supplement Report</b>	RMS Disposition :		RMS Disposition Date :
Primary Officer : <b>LUNSFORD,ED, K</b>	Zone : <b>P5</b>	Police Force Used ? :	Type Of Police Force Used :	

Attachment 1 - 090722HNE40 Master Incident Field Report - Continued

Page 6 of 6

Incident # : 090101923

Report Prepared By : LUNSFORD,ED, K, On : 7/23/2009 @ 12:40:36PM

**SECTION VI : NARRATIVE**

CFS-09-101923

CIC - 09-1623

Victim - (b)(3):CPSA Secti

Offense -D.O.A.

Reporting Officer - Detective E. Lunsford

Date -July 23, 2009

On July 17, 2009 I responded to (b)(6) for the report of a fifteen year old male that had died from the result of an ATV accident.

I arrived and met with Deputy Short who advised me of the circumstances and said that the landowner, (b)(6) had been notified and was en-route to the scene. I contacted the Medical Examiner and Investigator Walter Snellings arrived to conduct his investigation. It was during the course of the investigation that we noticed striations in the dirt where it looked like the ATV was sliding prior to rolling over and it looked as if speed may have been a factor. It also appeared from the examination of (b)(6) that he may have broken his neck, causing death. I spoke with (b)(6)

(b)(6) who was visibly upset and shaken by the tragic accident that had occurred and Edward said that they were supposed to be cutting grass and picking up tree stumps, not playing on the ATV.

(b)(6) stated that (b)(6) father Les was in Mexico and that he would call him and explain what had happened. (b)(6) made contact with Les and I then spoke with him and answered his questions regarding the accident. Les told me that he was trying to get a flight back to the U.S. and he thanked me for speaking with him.

After leaving Whelan Way I went to Mary Washington hospital to speak with (b)(6) (b)(3):CPS said that he and (b)(6) were on the ATV and that Brandon was driving. He said that they weren't going that fast, maybe fifteen miles per hour and the ATV started to slide and then roll over. He said that he jumped from and rolled on the ground and when he looked up at the ATV had rolled on top of (b)(3):CPSA Section said that he could not get the ATV off of (b)(6) so he went to get help from a neighbor who called for EMS. (b)(3):CPS received cuts, scrapes and a sprained ankle from the accident; he was treated and released from Mary Washington Hospital. (b)(6) died at the scene of the accident; he was transported by Covenant Funeral Service.

There were no signs of alcohol or drug use or any other intoxicants that could have impaired (b)(3):C ability to operate the ATV. The ATV was equipped with lap and shoulder restraints, these safety devices were not utilized.

This case is closed, accidental death.

**SECTION VII : OFFICER**

Reporting Officer's Name : <b>LUNSFORD,ED, K</b>	Approving Supervisor's Name : <b>KONICKI,JAMES</b>	Approval Status : <b>APPROVED</b>
Reporting Officer's Signature :	Approving Supervisor's Signature :	Date/Time : <b>07/23/2009 13:26:50</b>

Task Number: 090722HNE4626  
Date: 10/21/09

### Status of Missing Document(s)

The official records below were requested for this investigation report, but could not be obtained.

1. medical examiner's report
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Date: 10/21/09 Investigator No. 8925

Regional Office: \_\_\_\_\_ Supervisor No. \_\_\_\_\_

CONTACT INFORMATION:

Contacted on 7/30/09

Spotsylvania County Sheriff  
PO Box 124  
Spotsylvania, VA 22553  
(540) 507-7200

Medical Examiner  
400 E. Jackson Street  
Richmond, VA 23219  
(804) 447-1708

090722HNE4626

PAGE 1 OF 1

The attached report by the medical examiner was received following submission of the report and is attached as an addendum.

ATTACHMENT:

Attachment 4 - Report of Investigation by Medical Examiner

Decedent is  
RESIDENT  
of City/ County of Death

Commonwealth of Virginia  
Department of Health  
Office of the Chief Medical Examiner  
CENTRAL DISTRICT  
400 EAST JACKSON STREET RICHMOND, VA 23219

Case Number  
C2009-48947

REPORT OF INVESTIGATION BY MEDICAL EXAMINER/INVESTIGATOR

Decedent (b)(3):CPSA Section 25(c)  
First Name Middle Name Last Name Suffix Sr, Jr, III, etc

SSN [REDACTED]

Home Address (b)(6) 22407  
Number and Street City, State, Zip

Age 15 Yrs DOB 1/28/1994 Sex MALE Occupation STUDENT

Race WHITE Hispanic? NO Middle Eastern NO On the Job? NO

Marital Status NEVER MARRIED

REASON FOR REFERRAL TO MEDICAL EXAMINER  
Medical Examiner Authority VIOLENT OR UNNATURAL  
Final Medical Examiner Authority VIOLENT OR UNNATURAL  
If custody indicate jurisdiction

Scene Visit Y  
By SNELLINGS, WALTER

Retrospective Review N

Notification by PHILLIPS, FREDERIC Official Title ME

Address Phone

Police Notified (Y/N/NA) NO Investigator Phone

Address Jurisdiction

	DATE (MM/DD/YY)	TIME (24h)	LOCATION	CITY/ COUNTY	BY WHOM
LAST SEEN ALIVE	7/17/2009	14:24	5214 DICKERSON ROAD	FREDERICKSBURG CITY, VA	FRIEND,
EVENT/ INJURY ACUTE ILLNESS	7/17/2009	14:24	5214 DICKERSON ROAD	FREDERICKSBURG CITY, VA	FRIEND
FOUND	7/17/2009	14:25	5214 DICKERSON ROAD	FREDERICKSBURG CITY, VA	FRIEND,
DEATH/ PRONOUNCED	7/17/2009	14:52	5214 DICKERSON ROAD	FREDERICKSBURG CITY, VA	DR. PHILLIPS
VIEW OF BODY	7/17/2009	16:00	5214 DICKERSON ROAD	SPOTSYLVANIA, VA	DR. FRED PHILLIPS

Cause of Death: HEAD NECK BLUNT TRAUAMA  
Manner of Death: ACCIDENT

Autopsy (Y/N): N  
Authorized by  
Pathologist  
Autopsy No  
Location

I hereby declare that after receiving notice of the death described herein I took charge of the body and made inquiries regarding the cause and manner of death in accordance with § 32.1-283, Code of Virginia, and that the information contained herein regarding such death is correct to the best of my knowledge and belief.

Date FREDERICKSBURG CITY  
City or County of Appointment

Signature of Medical Examiner/ Investigator (circle one)  
PHILLIPS, FREDERIC

Name of Investigator (Type or Print)

Name of Medical Examiner (Type or Print)

MEANS OF DEATH

CATEGORY VEHICULAR

DETAIL ALL TERRAIN VEHICLE

Vehicle Status DRIVER Decedent vehicle type:

Airbag equipped/ deployed: N/Y

How injury occurred (e.g. auto/truck collision): AIR BAGGED WHILE ON HILL

Skid marks? N Speeding a factor?        Weather related? N Resulted in drowning of decedent?         
 Resulted in fire?       

Firearm type:        Firearm serial number:       

Instrument type:        Instrument description:       

Flotation device type?        Boating activity/ description?       

Swimmer?        Result of MVA?       

Result of MVA?        Fire suspected cause:        Smoke detector/ operational?       

Lamp from        To        Approximate distance: ft       

**SURVEILLANCE CIRCUMSTANCES FOR DEATH (check all that apply)**

- Adult Care/Nursing Home
- Child Abuser/Neglect
- Child Care Facility
- Domestic Violence
- Pregnancy within 1 year
- Drug Related Scene
- Elder Abuser/Neglect
- Feticide
- Gang related
- Sports/ Recreation
- Hunting Incident
- Homicide followed by Suicide (or attempted homicide/ suicide with survivor)
- Police Encounter
- Suspected Terrorism/ Bioterrorism

**DESCRIPTION OF PREMISES**

INJURY/ACUTE ILLNESS	DEATH	FOUND															
<table border="1"> <tr> <td>INSIDE</td> <td>OUTSIDE</td> <td>CATEGORY</td> <td>DETAIL</td> <td>ROOM (if applicable)</td> </tr> </table>	INSIDE	OUTSIDE	CATEGORY	DETAIL	ROOM (if applicable)	<table border="1"> <tr> <td>INSIDE</td> <td>OUTSIDE</td> <td>CATEGORY</td> <td>DETAIL</td> <td>ROOM (if applicable)</td> </tr> </table>	INSIDE	OUTSIDE	CATEGORY	DETAIL	ROOM (if applicable)	<table border="1"> <tr> <td>INSIDE</td> <td>OUTSIDE</td> <td>CATEGORY</td> <td>DETAIL</td> <td>ROOM (if applicable)</td> </tr> </table>	INSIDE	OUTSIDE	CATEGORY	DETAIL	ROOM (if applicable)
INSIDE	OUTSIDE	CATEGORY	DETAIL	ROOM (if applicable)													
INSIDE	OUTSIDE	CATEGORY	DETAIL	ROOM (if applicable)													
INSIDE	OUTSIDE	CATEGORY	DETAIL	ROOM (if applicable)													

**MEDICAL HISTORY**

- none known
- unknown
- alcoholism
- asthma
- cancer
- cirrhosis
- CVA
- COPD
- diabetes
- leukemia
- depression
- drug abuse
- hepatitis
- hip fracture
- hypotension
- ischemic heart disease
- mental illness
- seizure disorder
- smoking
- recent trauma (specify       )
- organ/ tissue donor
- other:

Suspected SIDS - Position when laid down:        Position when found:       

Med X Criteria (Bioterrorism)  acute flaccid paralysis  arrhythmia  encephalopathy/ seizures  fever  jaundice  rash

Unexplained death < 50 years old  Other:       

Treating MD:        Phone#:       

Hospitalizations (when/where):       

Medications:       

Tox requested: YES

Decedent: BRANDON ALLEN MALONEY

Narrative Description of Circumstances Surrounding Death:

(Describe the who, what, where, when and how the death occurred.)

(b)(3):CPSA Sect1 THE DRIVER OF A "RHINO" ATV, IT APPEARS THAT SPEED WAS INVOLVED IN LOSS OF CONTROL OF THE VEHICLE RESULTING IN EJECTION WITH THE ATV LANDING ON (b)(6)

PER INTERVIEW WITH THE PASSENGER THE ATV STARTED TO BECOME UNSTABLE AND HE JUMPED OUT LEAVING (b)(3):CPS IN THE ATV ALONE  
COVENANT FUNERAL HOME TRANSPORTED FROM SCENE.

TOT DR. F.A.PHILLIPS FOR VIEWAND TO DRAW BLOOD.

View of Body by Medical Examiner

(b)(3):CPSA Section 25(c)

Date of Exam 07/17/09

Time of Exam 1600

Name of Decedent:

Description of Body:  Clothed  Unclothed  Partly Clothed

List Clothing: Short sleeve und. shorts socks

List Personal Effects: 0

Height 73 in.  estimated Weight 150 lb.  estimated

Hair color Brown Eye color Blue Pupils: R Black Beard Mustache

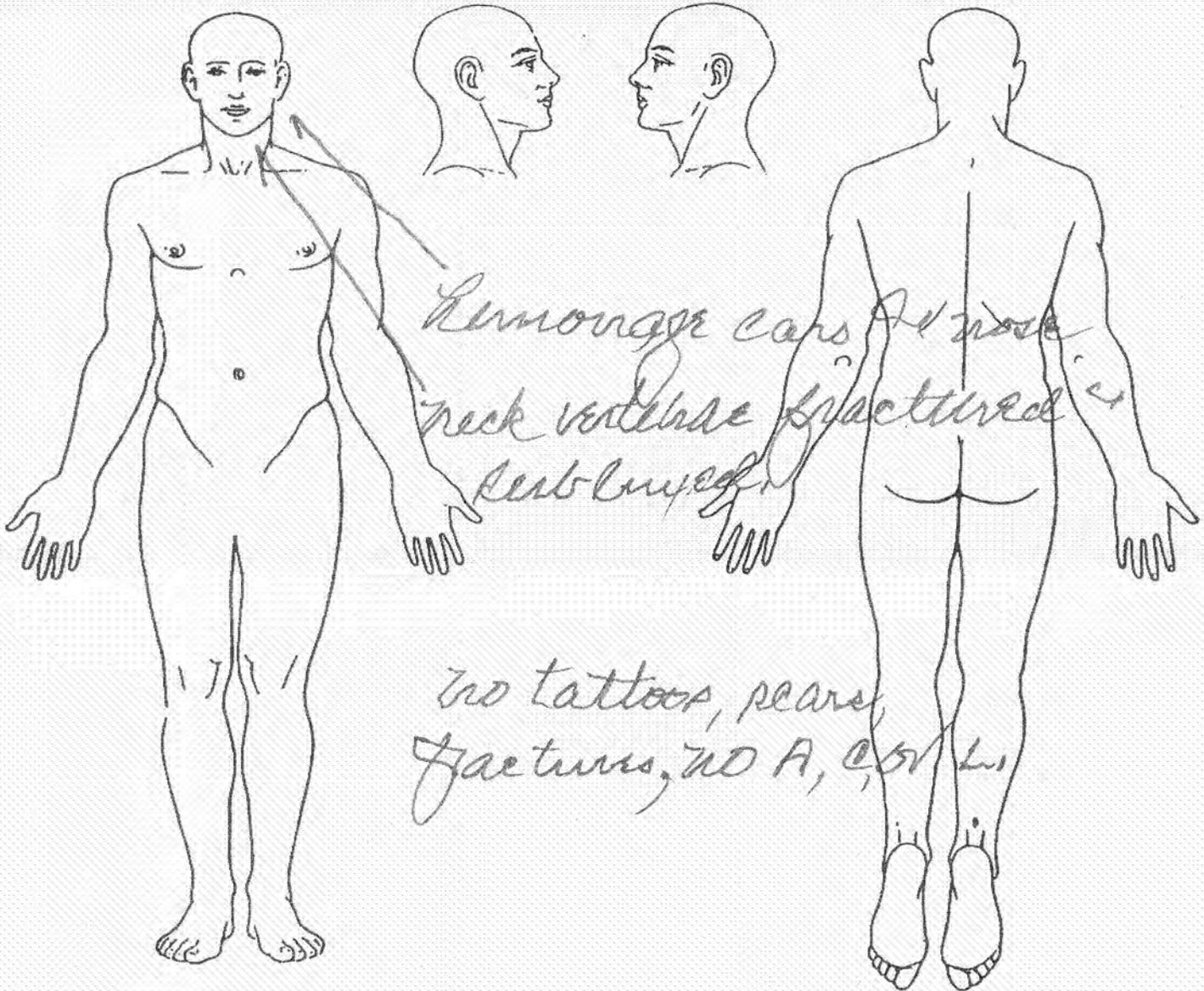
Body Heat:  Warm  Cold  Ambient  Refrigerated  Other

Rigor:  Complete  Jaw  Neck  Arms  Legs  Passing  Absent  Embalmed  Other

Livor:  Blanches  Fixed Color  Purple  Pink/Red  Indeterminant  Other

Livor Location:  Anterior  Posterior  Left  Right  Regional (specify)

Exam: Mark wounds and medical therapy on body diagram if autopsy not performed at OCME.  
A=Abrasion, B=Burn, C=Contusion, F=Fracture, G=Gunshot, I=Incised, L=Laceration,  
M=Mark of therapy specify, S=Stab, SC=Scar, T=Tattoo



When no autopsy send toxicology:  Blood  Urine  Vitreous  Other

ME (Print) FREDERIC A. PHILLIPS, M.D., P.C.

ME Signature



Commonwealth of Virginia

DEPARTMENT OF FORENSIC SCIENCE

ORIGINAL

CERTIFICATE OF ANALYSIS

Central Laboratory  
700 North 5th Street  
Richmond, VA 23219

November 20, 2009

Tel. No.: (804) 786-4707  
Fax: (804) 786-6907

TO: F. A. PHILLIPS, M.D.  
OFFICE OF THE CHIEF MEDICAL EXAMINER  
400 EAST JACKSON STREET  
RICHMOND, VA 23219

FS Lab # C09-10716

Your Case #: ---

Victim(s): (b)(3):CPSA Section 2

Suspect(s): ---

Evidence Submitted By: Nicole Athey

Date Received: 07/23/2009

Item TX1 One (1) vial of blood

RESULTS:

- Blood:
- Ethanol 0.01% by weight by volume
  - Methanol, acetone, isopropanol none detected
  - Cocaine/Benzoylcegonine none detected
  - Opiates none detected
  - Methamphetamine/MDMA none detected
  - Phencyclidine none detected
  - Barbiturates none detected
  - Carisoprodol/Meprobamate none detected
  - Fentanyl none detected
  - Methadone none detected
  - Cannabinoids none detected
  - Benzodiazepines none detected



Attest:

I certify that I performed the above analysis or examination as an employee of the Department of Forensic Science and that the above is an accurate record of the results and interpretations of that analysis or examination.

*Carlin Delaney*  
Carlin Delaney  
Forensic Scientist

CLD/pth  
JB

INY

090722HNE4626

Page 1 of 1

The attached photos by the sheriff department were received following submission of the report and is attached as an addendum.

ATTACHMENT:

Attachment 5 - Photographs of the scene and 4-wheeled utility vehicle.

Photo 1: shows view of the dirt trail where the ATV traveled



Photo 2: shows view of the 4-wheeled utility vehicle



Photo 3: shows right side view of the utility vehicle





VA

Weather: 68.0°F • Forecast |

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### Spotsylvania teen killed riding ATV

Spotsylvania teenager dies in four-wheeler accident

Date published: 7/19/2009

BY CATHY DYSON

A 15-year-old Spotsylvania County student died Friday in a four-wheeler accident near Snell.

(b)(3) CPSA Se a rising sophomore at Fredericksburg Christian School, was riding with a friend when his four-wheeler flipped over on him, said his father, (b)(6)

The teenager was killed instantly. (b)(6) said the Spotsylvania Sheriff's Office told him his son was traveling at a high rate of speed.

(b)(6) had been riding all-terrain vehicles since he was about 6, his father said. He also liked riding motorcycles.

(b)(6) was active with his school's football program. He had earned the Presidential Physical Fitness Award for nine years in school and had volunteered to feed the homeless and visit senior citizens, his father said.

He is survived by his parents, (b)(6) and (b)(6) two brothers, (b)(6); and a stepbrother, (b)(6)

Fredericksburg Christian School held a memorial service last night for Brandon and had counselors available.

Arrangements were incomplete at press time, but Madison said the funeral would be held at Spotswood Baptist Church, which Brandon attended.

Cathy Dyson: 540/374-5425  
Email: cdyson@freelancestar.com

Date published: 7/19/2009

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Viewing 5 out of 9 comments. (Sorted in reverse order, with most recent post at the top.)  
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**dear mr, insensitive (a.k.a. testexam)** (posted by megandanielle , July 20, 2009 12:04 am)  
should not tolerate that and no more-on should be so self righteous to think its okay to mix politics with death.and really! is that happy face necessary!?! whoever " testexam" the pompous jerk face news paper online commenter is should take a look at his own life and realize it must be pretty screwed up if your shallow

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As seen in Thursday's Business Section in The Free Lance-Star

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get it together.

<b>1. Task Number</b> 090728HCC2795		<b>2. Investigator's ID</b> 9044		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
<b>3. Office Code</b> 840	<b>4. Date of Accident</b> YR MO DAY 2009 06 09	<b>5. Date Initiated</b> YR MO DAY 2009 07 28		
<b>6. Synopsis of Accident or Complaint</b> UPC None  At about 9:00 am, a 77 year old driver of an ATV was westbound on the shoulder of a state public road when he was struck from behind by an automobile traveling in the same direction. The driver of the automobile reported that he could not avoid the ATV due to an on-coming vehicle. The driver of ATV was not wearing a helmet and he was ejected upon impact, landing in the ditch a few feet away from the ATV which had over \$2,500 in property damage. The ATV driver died from blunt force trauma injury to the head and neck.  MFR/PRVLBR NOTIFIED COMMENTS: ___ YES <input checked="" type="checkbox"/> NO ___ OVERRULED; ___ ATTACHED <input checked="" type="checkbox"/> EXCISIONS/FOIA EXS. § 225c, 6 <input checked="" type="checkbox"/> DO NOT RE-NOTIFY ___ RE-NOTIFY  3/24/10				
<b>7. Location (Home, School, etc)</b> 5 - OTHER PUBLIC PROPERTY		<b>8. City</b> OSKALOOSA		<b>9. State</b> IA
<b>10A. First Product</b> 5044 - Utility Vehicles		<b>10B. Trade/Brand Name</b> POLARIS		<b>10C. Model Number</b> RANGER 4X4
<b>10D. Manufacturer Name and Address</b> POLARIS INDUSTRIES INC. VIN# 4XAHH50A392717602 1225 Highway 169 North Minneapolis, MN 55441				
<b>11A. Second Product</b> 1901 - Motor Vehicles Or Parts (lic		<b>11B. Trade/Brand Name</b> NONE		<b>11C. Model Number</b> NONE
<b>11D. Manufacturer Name and Address</b> NONE				
<b>12. Age of Victim</b> 77	<b>13. Sex</b> 1 - Male	<b>14. Disposition</b> 8 - Death	<b>15. Injury Diagnosis</b> 62 - Intern. Org. Inj.	
<b>16. Body Part(s) Involved</b> 75 - HEAD	<b>17. Respondent</b> 3 - 2nd Hand Info Only	<b>18. Type of Investigation</b> 2 - Telephone	<b>19. Time Spent (Operational / Travel)</b> 10 / 0	
<b>20. Attachment(s)</b> 2 - Documents		<b>21. Case Source</b> 05 - Newspaper		<b>22. Sample Collection Number</b>
<b>23. Permission to Disclose Name (Non NEISS Cases Only)</b> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
<b>24. Review Date</b> 09/03/2009	<b>25. Reviewed By</b> 8929		<b>26. Regional Office Director</b> Frank J. Nava	
<b>27. Distribution</b> Streeter, Robin			<b>28. Source Document Number</b> N0960339A	

All information contained in this report, was obtained through telephone contact with the State Police and State Medical Examiner's office, and they both provided their reports (exhibits 1 and 2). The incident was reported by a news clip (source document).

**PRODUCT IDENTIFICATION:**

ATV (Product Code 3286)

Type: 4 Wheels

Model: Ranger

VIN: 4XAHH50A392717802

Year: 2008

Brand: Polaris

Manufacturer: Polaris Industries, Inc., Minneapolis, MN  
55441

**SAMPLES COLLECTED:** None

**ATTACHMENTS:**

Exhibit 1 - Police Report

Exhibit 2 - Medical Examiner Report

Exhibit 3 - Description of Respondents

MARS 5/03

MAIL REPORTS TO:  
Iowa Department of Transportation  
Office of Driver Services  
P.O. Box 9204  
Des Moines, Iowa 50306-9204



# Iowa Department of Transportation INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Law Enforcement Case Number:

2009034905

Legal Intervention?  Private Property?

Location/Literal Description  
G029 MEASURING 445 FEET  
WEST FROM YALE AVE

X-Coordinate: 00546977

Y-Coordinate: 04584253

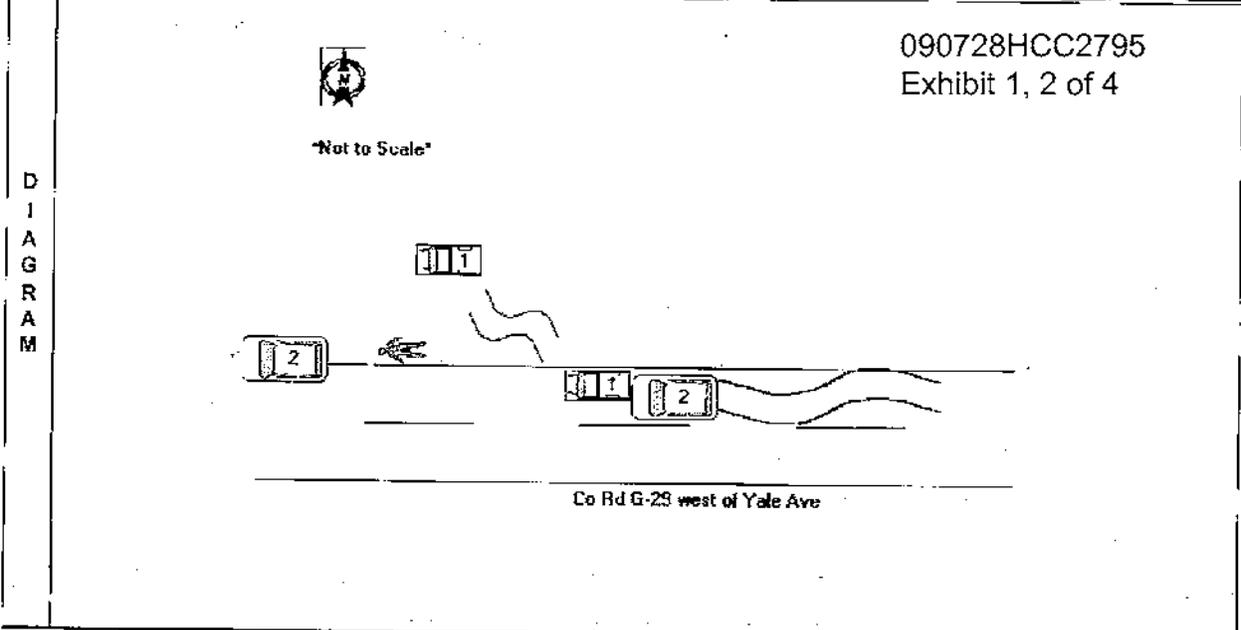
If Divided Highway, Provide Route (Cardinal) Travel Direction  
"N/A"

LOCATION	Date of Accident: 06/09/2009	Time of Accident: 09:00 Hrs.	County: Mahaska - 62	Accident occurred within corporate limits of (city):	
	If accident occurred outside of city limits show general vicinity: "N/A"		of nearest city: "N/A"	090728HCC2795	
	On Road, Street, or Highway: "N/A"	At Intersection with: "N/A" Exhibit 1, 1 of 4			
	Note: Unless accident occurred at an intersection which is completely described above, use the space below to give the exact location from a milepost or definable intersection, bridge, or railroad crossing, using two distances and directions if necessary.				
UNITS	Distance "N/A"	Direction "N/A"	Distance "N/A"	Direction "N/A"	of
	Milepost Number "N/A"	Or Definable intersection, bridge, or railroad crossing "N/A"			

UNITS	Driver's Name - Last: (b)(3):CPSA Section 25(c)														Suffix:	Phone:	
	Address: (b)(3):CPSA Section 25(c)														City:	State: IA	Zip: 50268
	Date of Birth: 11/18/1931	Driver's License Number: [REDACTED]				Citation Charge Code 1:		Citation Charge 1:		Citation Charge Code 2:		Citation Charge 2:		Citation Charge Code 3:		Citation Charge 3:	
	Gender: Male	State: IA	Class: C	Endorsements: NONE	Restrictions: B	Citation Charge Code 3:		Citation Charge 3:		Citation Charge Code 4:		Citation Charge 4:					
	Alcohol Test Given? 1 - None	Test Results:	Drug Test Given? 1 - None	Test Results:	Citation Charge Code 4:		Citation Charge 4:										
	Seating Position: 01	Injury Status: 1	Occupant Protection: 1	Airbag Deployment: 6	Airbag Switch Status: 3	Ejection: 3	Ejection Path: 3	Trapped: 1									
	Transported to: FUNERAL HOME							Transported by: MAHASKA AMBULANCE									
	Owner's Name - Last: (b)(3):CPSA Section 25(c)														Suffix:	Owner Company Name:	
	Address: (b)(3):CPSA Section 25(c)														City:	State: IA	Zip: 50268
	Insurance Co. Name:				Insurance Policy #:				License Plate #:	State: IA	Year: 2009						
	VIN No: (b)(6)	Year: 2008	Make: Polar - POLA	Model: RANGER 4X4	Style: ATV	Tow #: 1956437	Approximate Cost to Repair or Replace: \$2,500.00										
	Initial Travel Direction: 4	Vehicle Action: 01	Speed Limit: 55	Point of Initial Impact: 05	Most Damaged Area: 05	Extent of Damage: 4	Underride/Override: 5	Private?: <input type="checkbox"/>									
	Total Occupants: 01	Traffic Controls: 01	Vehicle Config: 15	Cargo Body Type: 01	Vehicle Defect: 01	Driver Condition: 1	Vision Obscured: 01	Contributing Circumstances, Driver (up to two): 28									
	SEQUENCE OF EVENTS: First Event: 21, Second Event: 01, Third Event: , Fourth Event: , Most Harmful Event (by vehicle): 21																
	Commercial Trailer License Plate #:				Attached to Power Unit:				State: Year:		Attached to Trailer Unit:		State: Year:		Emergency Vehicle Type: 1	Emergency Status: 3	
Carrier Name:				Address:				City:		State:		Zip:					
US DOT #:		or MC #:		Number of Axles:		Gross Vehicle Weight Rating:		Placard #:		Hazardous Materials Released?:							

UNITS	Driver's Name - Last: (b)(6)														Suffix:	Phone:	
	Address: (b)(6)														City:	State: IA	Zip: 52550-0000
	Date of Birth: 01/06/1987	Driver's License Number: [REDACTED]				Citation Charge Code 1:		Citation Charge 1:		Citation Charge Code 2:		Citation Charge 2:		Citation Charge Code 3:		Citation Charge 3:	
	Gender: Male	State: IA	Class: C	Endorsements: NONE	Restrictions: S	Citation Charge Code 3:		Citation Charge 3:		Citation Charge Code 4:		Citation Charge 4:					
	Alcohol Test Given? 1 - None	Test Results:	Drug Test Given? 1 - None	Test Results:	Citation Charge Code 4:		Citation Charge 4:										
	Seating Position: 01	Injury Status: 5	Occupant Protection: 2	Airbag Deployment: 1	Airbag Switch Status: 3	Ejection: 1	Ejection Path: 1	Trapped: 1									
	Transported to: REFUSED							Transported by:									
	Owner's Name - Last: (b)(6)														Suffix:	Owner Company Name:	
	Address: (b)(6)														City:	State: IA	Zip: 52550-0000
	Insurance Co. Name: VIKING INS				Insurance Policy #: 155572485				License Plate #:	State: IA	Year: 2010						
	VIN No: (b)(6)	Year: 1998	Make: Mitsubishi - MITS	Model: 3GT	Style: 2D	Tow #: 1956435	Approximate Cost to Repair or Replace: \$3,500.00										
	Initial Travel Direction: 4	Vehicle Action: 01	Speed Limit: 55	Point of Initial Impact: 01	Most Damaged Area: 01	Extent of Damage: 4	Underride/Override: 3	Private?: <input type="checkbox"/>									
	Total Occupants: 01	Traffic Controls: 01	Vehicle Config: 01	Cargo Body Type: 01	Vehicle Defect: 01	Driver Condition: 1	Vision Obscured: 06	Contributing Circumstances, Driver (up to two): 03,04									
	SEQUENCE OF EVENTS: First Event: 06, Second Event: 21, Third Event: , Fourth Event: , Most Harmful Event (by vehicle): 21																
	Commercial Trailer License Plate #:				Attached to Power Unit:				State: Year:		Attached to Trailer Unit:		State: Year:		Emergency Vehicle Type: 1	Emergency Status: 3	
Carrier Name:				Address:				City:		State:		Zip:					
US DOT #:		or MC #:		Number of Axles:		Gross Vehicle Weight Rating:		Placard #:		Hazardous Materials Released?:							

ACCIDENT ENVIRONMENT		ROADWAY CHARACTERISTICS		WORKZONE RELATED?	SEQUENCE OF EVENTS
Location of First Harmful Event	1	Major Contributing Circumstances:		No	First Harmful Event or Crash (use codes 1-42 only) 21
Manner of Crash/Collision	3	Environment	1	Location	
Light Conditions	1	Roadway	01	Type	
		Surface Conditions	1	Workers Present?	
		Type of Roadway Junction/Feature		01	



**NARRATIVE**

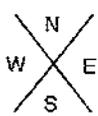
Describe what happened (refer to vehicles by number)

UNIT 1 WAS WESTBOUND ON AN ATV WHEN UNIT 2, ALSO WESTBOUND, CAME OVER HILLCREST. UNIT 2 DRIVER STATED THERE WAS A NON CONTACT VEHICLE EASTBOUND AND UNIT 2 DRIVER WAS UNABLE TO SLOW HIS VEHICLE IN TIME TO AVOID STRIKING UNIT 1. AFTER CONTACT, UNIT 1 DRIVER WAS EJECTED. UNIT 1 CAME TO A REST IN THE NORTH DITCH, UNIT 2 CAME TO A REST ON THE NORTH SHOULDER.

Officer <b>EHLER JOEL</b>	Range No. <b>212</b>	Time Officer Notified of Accident <b>08:02</b> Hrs	Time Officer Arrived At Scene <b>09:22</b> Hrs.
Name of Agency <b>Iowa State Patrol - Dist 14</b>	Date of Report <b>06/09/2009</b>	Investigation made at scene? Yes	T.I.#
Report Reviewed By: <b>EHLER, JOEL</b>	Date Reviewed <b>06/12/2009</b>	Agency Specific <b>181, 184</b>	Other Technical Investigation Agency

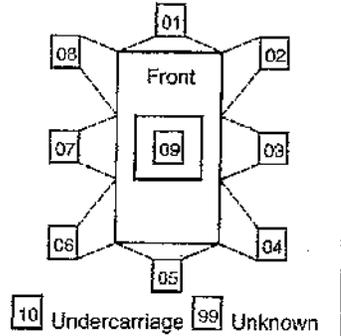
**Driver/Vehicle Characteristics**

**Initial Travel Direction**  
(prior to coded Vehicle Action)  
1 - North  
2 - East  
3 - South  
4 - West  
9 - Unknown



**Vehicle Action**  
01 - Movement essentially straight  
02 - Turning left  
03 - Turning right  
04 - Making U-turn  
05 - Overtaking/passing  
06 - Changing lanes  
07 - Entering traffic lane (merging)  
08 - Leaving traffic lane  
09 - Backing  
10 - Slowing/stopping  
11 - Stopped for stop sign/signal  
12 - Legally parked  
13 - Illegally parked/Unattended  
88 - Other (explain in narrative)  
99 - Unknown

**Point of Initial Impact  
Most Damaged Area**



**Extent of Damage**  
1 - None  
2 - Minor damage  
3 - Functional damage  
4 - Disabling damage  
5 - Severe, vehicle totalled  
9 - Unknown

**Underride/Override**  
1 - None  
2 - Underride, compartment intrusion  
3 - Underride, no compartment intrusion  
4 - Underride, compartment intrusion unknown  
5 - Override, moving vehicle  
6 - Override, parked/stationary vehicle  
9 - Unknown

**Traffic Controls**  
01 - No controls present  
02 - Traffic signals  
03 - Flashing traffic control signal  
04 - Stop signs  
05 - Yield signs  
06 - No Passing Zone (marked)  
07 - Warning sign  
08 - School zone signs  
09 - Railway crossing device  
10 - Traffic director  
11 - Work Zone signs  
88 - Other control (explain in narrative)  
99 - Unknown

**Vehicle Configuration**  
01 - Passenger car  
02 - Four-tire light truck (pick-up, panel)  
03 - Van or mini-van  
04 - Sport utility vehicle  
05 - Single-unit truck (2-axle, 6-tire)  
06 - Single-unit truck (> = 3 axles)  
07 - Truck/trailer  
08 - Truck tractor (bobtail)  
09 - Tractor/semi-trailer  
10 - Tractor/doubles  
11 - Tractor/triples  
12 - Other heavy truck (cannot classify)  
13 - Motor home/recreational vehicle  
14 - Motorcycle  
15 - Moped/ All-Terrain Vehicle  
16 - School bus (seats > 15)  
17 - Small school bus (seats 9-15)  
18 - Other bus (seats > 15)  
19 - Other small bus (seats 9-15)  
20 - Farm vehicle/equipment  
21 - Maintenance/construction vehicle  
22 - Train  
88 - Other (explain in narrative)  
99 - Unknown

**Cargo Body Type**  
01 - Not applicable

**Truck Cargo Type:**  
02 - Van/enclosed box  
03 - Dump truck (grain, gravel)  
04 - Cargo tank  
05 - Flatbed  
06 - Concrete mixer  
07 - Auto transporter  
08 - Garbage/refuse  
09 - Other truck cargo type (explain in narrative)

**Trailer Type:**  
10 - Small utility (one axle)  
11 - Large utility (2+ axles)  
12 - Boat  
13 - Camper  
14 - Large mobile home  
15 - Oversize load  
16 - Towed vehicle  
17 - Pole  
18 - Other trailer type (explain in narrative)  
99 - Unknown

**Vehicle Defect**  
01 - None  
02 - Brakes  
03 - Steering  
04 - Blowout  
05 - Other tire defect (explain in narrative)  
06 - Wipers  
07 - Trailer hitch  
08 - Exhaust  
09 - Headlights  
10 - Tail lights  
11 - Turn signal  
12 - Suspension  
88 - Other (explain in narrative)  
99 - Unknown

**Driver Condition**  
1 - Apparently normal  
2 - Physical impairment  
3 - Emotional (e.g. depressed, angry, disturbed)  
4 - Illness  
5 - Asleep, fainted, fatigued, etc.  
6 - Under the influence of alcohol/drugs/medications  
8 - Other (explain in narrative)  
9 - Unknown

**Vision Obscured**  
01 - Not obscured  
02 - Trees/crops  
03 - Buildings  
04 - Embankment  
05 - Sign/billboard  
06 - Hillcrest  
07 - Parked vehicles  
08 - Moving vehicles  
09 - Person/object in or on vehicle  
10 - Blinded by sun or headlights  
11 - Frosted windows/windshield  
12 - Blowing snow  
13 - Fog/smoke/dust  
88 - Other (explain in narrative)  
99 - Unknown

**Contributing Circumstances, Driver (up to two)**  
01 - Ran traffic signal  
02 - Ran stop sign  
03 - Exceeded authorized speed  
04 - Driving too fast for conditions  
05 - Made improper turn  
06 - Travelling wrong way or on wrong side of road  
07 - Crossed centerline  
08 - Lost control  
09 - Followed too close  
10 - Swerved to avoid: vehicle, object, non-motorist, or animal in roadway  
11 - Over correcting/over steering  
12 - Operating vehicle in an erratic, reckless, careless, negligent, or aggressive manner

**Failed to yield right-of-way:**  
13 - From stop sign  
14 - From yield sign  
15 - Making left turn  
16 - Making right turn on red signal  
17 - From driveway  
18 - From parked position  
19 - To pedestrian  
20 - At uncontrolled intersection  
21 - Other (explain in narrative)

**Inattentive/distracted by:**  
22 - Passenger  
23 - Use of phone or other device  
24 - Fallen object  
25 - Fatigued/asleep

**Other (explain in narrative):**  
26 - Vision obstructed  
27 - Other improper action  
28 - No improper action  
99 - Unknown

**Emergency Vehicles**

**Emergency Vehicle Type**  
1 - Not applicable  
2 - Police  
3 - Fire  
4 - Ambulance  
5 - Towing  
6 - Military  
7 - Maintenance  
9 - Unknown

**Emergency Status**  
1 - Yes, in emergency  
2 - No, not in emergency  
3 - Not applicable  
9 - Unknown

**Hazardous Materials Released? (Cargo Only)**

1 - Yes  
2 - No  
3 - Not applicable  
9 - Unknown

090728HCC2795  
Exhibit 1, 3 of 4



**INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT CODE SHEET**

Form 483014  
01-01

**Work Zone Related?**

**Location**  
1 - Before work zone warning sign  
2 - Between advance warning sign and work area  
3 - Within transition area for lane shift  
4 - Within or adjacent to work activity  
5 - Between end of work area and "End Work Zone" sign  
8 - Other work zone area (explain in narrative)  
9 - Unknown

**Type**  
1 - Lane closure  
2 - Lane shift/crossover/head-to-head traffic  
3 - Work on shoulder or median  
4 - Intermittent or moving work  
8 - Other type of work zone (explain in narrative)  
9 - Unknown

**Workers Present?**  
1 - Yes  
2 - No  
9 - Unknown

Accident Environment	Roadway Characteristics	Harmful Events	Injury/Protective Device
<b>Location of First Harmful Event</b> 1 - On Roadway 2 - Shoulder 3 - Median 4 - Roadside 5 - Gore 6 - Outside trafficway 9 - Unknown	<b>Contributing Circumstances, Environment</b> 1 - None apparent 2 - Weather conditions 3 - Physical obstruction 4 - Pedestrian action 5 - Glare 6 - Animal in roadway 7 - Previous accident 8 - Other (explain in narrative) 9 - Unknown	<b>Sequence of Events Most Harmful Event First Harmful Event</b>  <u>Pre-crash events:</u> 01 - Ran off road, right 02 - Ran off road, straight 03 - Ran off road, left 04 - Crossed centerline/median 05 - Animal or object in roadway 06 - Evasive action (swerve, panic braking, etc.) 07 - Downhill runaway 08 - Cargo/equipment loss or shift 09 - Equipment failure (tires, brakes, etc.) 10 - Separation of units  <u>Non-collision events:</u> 11 - Overturn/rollover 12 - Jackknife 13 - Other non-collision (explain in narrative)  <u>Collision with:</u> 20 - Non-motorist (see non-motorist type) 21 - Vehicle in traffic 22 - Vehicle in/from other roadway 23 - Parked motor vehicle 24 - Railway vehicle/train 25 - Animal 26 - Other non-fixed object (explain in narrative)  <u>Collision with fixed object:</u> 30 - Bridge/bridge rail/overpass 31 - Underpass/structure support 32 - Culvert 33 - Ditch/embankment 34 - Curb/island/raised median 35 - Guardrail 36 - Concrete barrier (median or right side) 37 - Tree 38 - Poles (utility, light, etc.) 39 - Sign post 40 - Mailbox 41 - Impact attenuator 42 - Other fixed object (explain in narrative)  <u>Misc. events:</u> 50 - Fire/explosion 51 - Immersion 52 - Hit and run 99 - Unknown	<b>Injury Status</b> 1 - Fatal 2 - Incapacitating 3 - Non-incapacitating 4 - Possible 5 - Uninjured 9 - Unknown  <b>Occupant Protection</b> 1 - None used 2 - Shoulder and lap belt used 3 - Lap belt only used 4 - Shoulder belt only used 5 - Child safety seat used 6 - Helmet used 8 - Other (explain in narrative) 9 - Unknown  <b>Airbag Deployment</b> 1 - Deployed front of person 2 - Deployed side of person 3 - Deployed both front/side 4 - Other deployment (explain in narrative) 5 - Not deployed 6 - Not applicable 9 - Unknown  <b>Airbag Switch Status</b> 1 - Switch in ON position 2 - Switch in OFF position 3 - No ON/OFF switch present 9 - Unknown  <b>Ejection</b> 1 - Not ejected 2 - Partially ejected 3 - Totally ejected 4 - Not applicable (motorcycle, bicycle, etc.) 9 - Unknown  <b>Ejection Path</b> 1 - Not ejected/not applicable 2 - Through front windshield 3 - Through side window/door 4 - Through roof 5 - Through back window/tailgate 9 - Unknown  <b>Trapped</b> 1 - Not trapped 2 - Freed by non-mechanical means 3 - Extricated by mechanical means 9 - Unknown
<b>Manner of Crash/Collision</b> 1 - Non-collision 2 - Head-on 3 - Rear-end 4 - Angle, oncoming left turn 5 - Broadside 6 - Sideswipe, same direction 7 - Sideswipe, opposite direction 9 - Unknown	<b>Contributing Circumstances, Roadway</b> 01 - None apparent 02 - Road surface condition 03 - Debris 04 - Ruts, holes, bumps 05 - Work Zone (construction, maintenance, utility) 06 - Worn, travel-polished surface 07 - Obstruction in roadway 08 - Traffic control device inoperative, missing, obscured 09 - Shoulders (none, low, soft, high) 10 - Non-highway work 11 - Non-contact vehicle 99 - Unknown		
<b>Light Conditions</b> 1 - Daylight 2 - Dusk 3 - Dawn 4 - Dark, roadway lighted 5 - Dark, roadway not lighted 6 - Dark, unknown roadway lighting 9 - Unknown	<b>Contributing Circumstances, Type of Roadway Junction/Feature</b> <u>Non-intersection:</u> 01 - No special feature 02 - Bridge/overpass/underpass 03 - Railroad crossing 04 - Business drive 05 - Farm/residential drive 06 - Alley intersection 07 - Crossover in median 08 - Other non-intersection (explain in narrative)  <u>Intersection:</u> 11 - Four-way intersection 12 - T - intersection 13 - Y - intersection 14 - Five-leg or more 15 - Offset four-way intersection 16 - Intersection with ramp 17 - On-ramp merge area 18 - Off-ramp diverge area 19 - On-ramp 20 - Off-ramp 21 - With bike/pedestrian path 22 - Other intersection (explain in narrative) 99 - Unknown		
<b>Weather Conditions (up to two)</b> 01 - Clear 02 - Partly cloudy 03 - Cloudy 04 - Fog, smoke 05 - Mist 06 - Rain 07 - Sleet, hail, freezing rain 08 - Snow 09 - Severe winds 10 - Blowing sand, soil, dirt, snow 88 - Other (explain in narrative) 99 - Unknown			
<b>Surface Conditions</b> 1 - Dry 2 - Wet 3 - Ice 4 - Snow 5 - Slush 6 - Sand, mud, dirt, oil, gravel 7 - Water (standing, moving) 8 - Other (explain in narrative) 9 - Unknown			

Non-Motorist			
<b>Type</b> 1 - Pedestrian 2 - Pedalcyclist (bicycle, tricycle, unicycle, pedal car) 3 - Skater 8 - Other (explain in narrative) 9 - Unknown	<b>Action</b> 1 - Entering or crossing roadway 2 - Walking, running, jogging, playing, cycling 3 - Working 4 - Pushing vehicle 5 - Approaching or leaving vehicle 6 - Playing or working on vehicle 7 - Standing 8 - Other (explain in narrative) 9 - Unknown	<b>Condition</b> 1 - Apparently normal 2 - Physical impairment 3 - Emotional (e.g. depressed, angry, disturbed) 4 - Illness 5 - Asleep, fainted, fatigued, etc. 6 - Under the influence of alcohol/drugs/medications 8 - Other (explain in narrative) 9 - Unknown	<b>Contributing Circumstances</b> 01 - Improper crossing 02 - Daring 03 - Lying or sitting in roadway 04 - Failure to yield right of way 05 - Not visible (dark clothing) 06 - Inattentive (talking, eating, etc.) 07 - Failure to obey traffic signs, signals, or officer 08 - Wrong side of road 88 - Other (explain in narrative) 99 - Unknown
<b>Location (prior to impact)</b> 1 - Marked crosswalk at intersection 2 - At intersection, no crosswalk 3 - Non-intersection crosswalk 4 - Driveway access crosswalk 8 - Other non-intersection (explain in narrative) 9 - Unknown	<b>Safety Equipment</b> 1 - Helmet 2 - Reflective clothing 3 - Lighting	4 - None 8 - Other (explain in narrative) 9 - Unknown	090728HCC2795 Exhibit 1, 4 of 4



**Iowa Department of Public Health**  
Promoting and Protecting the Health of Iowans

Thomas Newton, MPP, REHS  
Director

Chester J. Culver  
Governor

Patty Judge  
Lt. Governor

July 22, 2009

Re: Case # 09SME297 / County Case # 09-62-0013

(b)(3):CPSA  
Section 25(c) Subject

To Whom It May Concern:

The attached memoranda constitute our report on the above mentioned case.

If there are any questions concerning this case, please do not hesitate to contact me.

Sincerely yours,

Michele J. Catellier, MD  
Associate State Medical Examiner

Enclosure

cc: Matthew Whitis, MD, Mahaska Co. ME  
Rose Anne Mefford, Mahaska Co. Att'y  
Michael Mothershed, EMT-PS, Mahaska Co. ME-I  
*Bridgette Cottrai, US Consumer Product Safety Commission*

MJC/wr

IOWA OFFICE OF THE STATE MEDICAL EXAMINER  
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**Iowa Department of Public Health**  
Promoting and Protecting the Health of Iowans

Thomas Newton, MPP, REHS  
Director

Chester J. Culver  
Governor

Patty Judge  
Lt. Governor

REPORT OF AUTOPSY

**CASE NO.:** 09SME297

**DATE/TIME:** June 10, 2009  
12:00 p.m.

**COUNTY:** Mahaska

**PLACE:** Iowa Office of the State Medical Examiner  
Ankeny, Iowa

**DECEDENT:** (b)(3):CPSA  
Section 25(c)

**SME INVESTIGATOR:** Steve Tvrdik

**PATHOLOGIC DIAGNOSES**

- I. Reported history.
  - A. Ejected driver of all-terrain vehicle, involved in two-vehicle collision (rear collision).
  - B. Dead at the scene.
- II. Evidence of blunt force injury – head and neck.
  - A. Multiple superficial abrasions, face and scalp.
  - B. Scattered lacerations of scalp with occipital open skull fracture.
  - C. Subdural hematoma, anterior, base of brain, and posterior fossae.
  - D. Subarachnoid hemorrhage, right lateral and inferior.
  - E. Cerebral edema with herniation.
  - F. Displaced cervical vertebral fractures, levels 2-3 and 6-7.
- III. Evidence of blunt force injury – torso and extremities.
  - A. Imprint abrasion, left shoulder, with closed fracture of left clavicle.
  - B. Scattered abrasions and contusions, left elbow and bilateral hands.
  - C. Abrasions, bilateral knees.
  - D. Rib fractures, left chest.
- IV. Cardiovascular.
  - A. Atherosclerotic cardiovascular disease.
  - B. Status post-coronary artery bypass grafts (grafts and native vessels distal to grafts patent).
  - C. Changes consistent with rheumatic heart disease, mild, mitral valve.
- V. Respiratory system.
  - A. Scattered granulomas, bilateral lungs and hilar lymph nodes, incidental (remote).



Page 2 of 7  
Case No. 09SME297

- VI. Genitourinary.
- A. Changes consistent with well differentiated carcinoma, prostate gland, incidental.
  - B. Glomerulosclerosis, nonspecific.

**CAUSE OF DEATH:** Blunt force injuries of head and neck.

**MANNER OF DEATH:** Accident.

**AUTHORIZATION:** Mahaska County Medical Examiner.

**BODY IDENTIFIED BY:** Visual identification.

**AUTOPSY TECHNICIANS:** Steve Rech, Sonya Fox, Jamie Seidl, Rachel Prueitt.

**EVIDENCE:** Digital photographs, femoral and heart blood, urine, and vitreous for toxicology, bloodstain card, thumb and index fingerprints, wet tissue and histology.

#### EXTERNAL EXAMINATION

The body is received in an unlocked body bag and is that of a well developed, well nourished, adult Caucasian male who weighs 185 pounds, is 68 inches in length, and appears younger than the stated age of 77 years.

The body is received clad in a tan shirt, a pair of tan pants, a black belt, a gray long-sleeve shirt, white socks under black athletic shoes, a white t-shirt, and white boxer shorts. Pertinent valuables include bilateral copper-colored bracelets, left on the body, gum, and a pocketknife. The body is covered with a sheet, and there are scattered grass and vegetation particles on the body.

The body is identified by means of a left wrist tag ("104328/536522, 06/09/09, Ambulance, Holub, Joseph, 11/18/1931, M, Medicare, CAH, Whitis, Matthew G./Whitis, Matthew G.")

The body is cool to touch. Rigor mortis is generalized and present to an equal degree in all extremities. Fixed violaceous livor mortis extends over the posterior surfaces of the body, except in areas exposed to pressure.

The scalp hair is gray and brown, straight, and measures approximately 1/2 inch in length peripherally with prominent superior and anterior male pattern alopecia. The irides are hazel. There is arcus senilis. The pupils are bilaterally equal at 0.5 cm. There are fine petechial hemorrhages of the conjunctivae. The cornea are translucent. The nose is not

Page 3 of 7  
Case No. 09SM13297

unusual. The earlobes are creased. The beard is shaved. The teeth are natural and in adequate repair with an anterior upper partial plate. The neck is unremarkable.

The thorax is well developed and symmetric with abundant hair on the torso. The abdomen is minimally protuberant. The anus and back are unremarkable. The external genitalia are those of a short foreskin normal adult male. The testes are bilaterally descended within the scrotum.

The upper and lower extremities are well developed and symmetric without absence of digits. Needle tracks are not identified. The nails of the hands are short and trim.

Identifying marks and scars readily apparent on the body include an 8 inch sternotomy scar, largely obscured by hair on the torso, and a 2 inch scar of the medial left knee.

There is no evidence of emergency medical intervention.

## **EVIDENCE OF INJURY**

### **DESCRIPTION OF BLUNT FORCE INJURIES**

**HEAD AND NECK:** There are multiple geographic areas of imprint-type abrasions on the head and face. These appear consistent with dicing and/or gravel-type imprints and are largely contiguous with each other, and involves much of the superior face and scalp, with sparing of the left cheek and jaw and posterior right and central scalp. The major areas include a 7 x 5 inch area of the right brow and scalp, a 7 x 5 inch area on the left brow and scalp, a 3 x 5 inch area surrounding the superolateral and inferior aspect of the left eye, a 2 x 1.5 inch area on the right side of the face and bridge of the nose, and a 1 x 3/4 inch area adjacent to the left ala of the nose. In addition, there are scattered abrasions and contusions of the superior and inferior right perioral region in an area 2 x 1 1/2 inches. There is diffuse ecchymosis of the left eye involving the superior and inferior lids. There is a vertically oriented 1/2 inch laceration above the left eyebrow. There is a 1 1/4 inch horizontal laceration with a posterior marginal imprint at the superior aspect of the mid forehead. There is a stellate, approximately "T"-shaped laceration of the left parietooccipital scalp, 4 x 3 inches, with an underlying skull fracture. The latter is "Y"-shaped, commencing on the left posterior parietal skull, with extension into the left occipital skull that crosses the midline and extends into the right posterior fossa, with termination adjacent to the foramen magnum on the right. There are also small delicate fractures, curvilinear on the left and "Y"-shaped on the right, involving the orbital plates of the frontal bones bilaterally. There are subgaleal hematomas, 11 x 6 cm in the left frontal region and 12 x 15 cm involving the occipital regions bilaterally. Within the calvarium, there is extensive subdural hematoma involving the posterior fossae bilaterally, as well as the anterior aspect of the brain stem region. There is subarachnoid hemorrhage of the right lateral cerebrum and the base of the brain circumferentially. There is cerebral edema with mild flattening of gyri and

Page 4 of 7  
Case No. 09SME297

narrowing of sulci. The basilar cistern is decreased to 0.7 cm. On section, there is effacement of the lateral ventricle due to edema, more on the right than the left, and there is cerebellar tonsillar herniation. There are displaced fractures of the cervical vertebrae with wide separation between the vertebral bodies at level C2-3 and C6-7. There is hemorrhage of the anterior vertebral column, as well of the posterior constrictor muscle of the larynx.

**TORSO AND EXTREMITIES:** There is an imprint gravel-type abrasion of the left shoulder over an area 3 x 3 inches with an underlying fracture of the left clavicle. In addition, there are internal rib fractures of the left lateral aspect of ribs 4-7.

There is an irregular 2 x 1 1/2 inch area of superficial abrasion of the left elbow. There is a 3 x 3 inch area of scattered senile contusions, up to 1/2 inch in greatest dimension, of the left dorsal hand with two 1/8 inch superficial lacerations involving the epithelium only. Two similar abrasions with very superficial skin laceration are present on the dorsum of the right hand, on the radial aspect, 1/4 inch, and on the lateral aspect, 1/2 inch in greatest dimension. The right knee has a 1 3/4 x 2 1/2 inch area of imprint abrasions, including several rectangular patterned components and a 1/4 inch overlying superficial abrasion. The left knee has a diffuse geographic imprint-type abrasion in an area 3 x 2 inches.

### INTERNAL EXAMINATION

**BODY CAVITIES:** The body cavities are opened by means of the standard "Y"-shaped incision of the thorax and abdomen and coronal incision of the posterior scalp. All body organs are present in normal and anatomic position with the exception of the gallbladder, which is surgically absent, and the pericardial sac, which was previously surgically interrupted and associated with coronary artery bypass grafts. There are surgical wires and sutures in place within the mid sternum. The subcutaneous fat layer of the abdominal wall is 3 cm thick.

**HEAD (CENTRAL NERVOUS SYSTEM):** The scalp is incised in the usual fashion, and there are subgaleal ecchymoses as described. The calvarium is fractured as described. The brain weighs 1520 grams. The dura mater and falx cerebri are intact. The leptomeninges are thin and delicate. The cerebral hemispheres are slightly asymmetric due to edema. The structures at the base of the brain, including cranial nerves and blood vessels, are intact and free of abnormality. Sections through the cerebral hemispheres reveal no nontraumatic lesions within the cortex, subcortical white matter, or deep parenchyma of either hemisphere. The cerebral ventricles are of normal caliber, angled on the right due to edema. Sections through the brain stem and cerebellum are unremarkable. The spinal cord is presumed to be injured due to the displaced fractures in the cervical region, but is not examined.

Page 5 of 7  
Case No. 09SME297

**NECK:** Examination of the soft tissues of the neck, including strap muscles and large vessels, reveals no abnormalities. There is contusion hemorrhage of the posterior constrictor muscle. The hyoid bone and larynx are intact. The tongue is normal.

**CARDIOVASCULAR SYSTEM:** The heart weighs 430 grams. The pericardial surfaces are interrupted, and there are circumferential dense fibrous adhesions surrounding the heart. The intrinsic coronary arteries arise normally and follow the usual distribution of a right dominant pattern. There is severe atherosclerosis with calcific deposits associated with the native vessels. The right coronary artery has 50% to 75% cross-sectional luminal narrowing, and the left anterior descending has approximately 100% cross-sectional luminal narrowing by atherosclerotic plaque, the latter with abundant grumous debris. The circumflex and marginal branches have 50% to 75% cross-sectional luminal narrowing with calcific deposits. There are three grafts identified, one that appears arterial and without an anastomosis to the aorta is presumed to represent an internal mammary branch, and is grafted to the left anterior descending vessel. There is an anterior graft from the aorta to the lateral anterior left ventricular region, and there is a graft from the aorta to the right coronary artery posteriorly. All grafts are patent and the vessels distal to the grafts are patent. The heart is serially sectioned from apex to base, and the base of the heart is opened according to the flow of blood. There is a 4 cm in horizontal dimension by 4 cm in height area of attenuation and scar associated with the posterior aspect (i.e., "inferior") of the left ventricular free wall at the base of the heart. The myocardium is otherwise symmetric, red-brown, and firm, without other areas of necrosis or fibrosis. The chambers and valves bear the usual size/position relationship and are unremarkable. The cardiac valve leaflets are appropriate in circumference. The mitral valve has thickened chordae tendineae and is associated with multiple friction-type lesions of the adjacent endocardium. There is mild commissural fusion focally. There is no definite evidence of prolapse. The foramen ovale is probe patent. The ventricular septum is intact. The aorta and its major branches arise normally and follow the usual course with moderate to severe atherosclerosis. The vena cava and its major tributaries return to the heart in the usual distribution and are unremarkable.

**RESPIRATORY SYSTEM:** The right and left lungs weigh 450 and 410 grams, respectively. The upper and lower airways are patent, and the mucosal surfaces are smooth and pink-tan. The pleural surfaces are smooth and glistening with scattered subpleural nodules measuring up to 8 mm in diameter that are tan and smooth. On section, the pulmonary parenchyma is medium pink-tan to light purple and exudes no significant amounts of blood or frothy fluid. There is no evidence of hemoaspiration. Scattered firm nodules, up to 8 mm in diameter, are present throughout the parenchyma and are difficult to section due to fibrosis and/or calcific deposition. The pulmonary arteries are normally developed and patent.

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Case No. 09SMF297

**LIVER AND BILIARY SYSTEM:** The liver weighs 1570 grams. The hepatic capsule is smooth, glistening, and intact covering a red-brown parenchyma. The gallbladder is surgically absent. The extrahepatic biliary tree is patent.

**ALIMENTARY TRACT:** The esophagus is lined by gray-white smooth mucosa throughout its length. The gastric mucosa is arranged in the usual rugal folds, and the lumen contains 700 mL of watery fluid with white particles suggestive of rice and yellow particles suggestive of fruit. The small and large bowel are unremarkable. The vermiform appendix is present. The pancreas has a normal pink-tan lobulated appearance, and the ducts are clear.

**GENITOURINARY TRACT:** The right and left kidneys weigh 140 and 150 grams, respectively. The renal capsules are smooth, thin, semitransparent, and strip with ease from the underlying finely granular, red-brown, firm cortical surfaces. The left kidney is more granular than the right. The cortices are sharply delineated from the medullary pyramids. The calyces, pelves, and ureters are unremarkable. The urinary bladder contains 160 mL of clear yellow urine; the mucosa is gray-tan and smooth. The prostate is enlarged and nodular. There is a single 0.5 x 0.7 x 0.7 cm area of yellow discoloration consistent with neoplasm.

**RETICULOENDOTHELIAL SYSTEM:** The spleen weighs 180 grams and has a smooth, intact, dark red-purple capsule covering a red-purple, moderately firm parenchyma. The regional lymph nodes are associated with apparent firm "ancient" granulomata within the hilar region of the mediastinum, but are otherwise indistinct.

**ENDOCRINE SYSTEM:** The pituitary, thyroid, and adrenal glands are unremarkable.

**MUSCULOSKELETAL SYSTEM:** There is degenerative change of the vertebral column with osteophytes. Otherwise, the bony framework, supporting musculature, and soft tissues are not unusual, except for the injuries as described.

### OPINION

This 77-year-old Caucasian male, Joseph Holub, died of blunt force injuries of the head and neck.

According to investigative reports, the decedent was riding an all-terrain vehicle on a roadway, when his vehicle was rear-ended. The decedent was ejected and died at the scene.

Page 7 of 7  
Case No. 09SM1297

Autopsy revealed extensive abrasions and scattered lacerations of the head with an underlying occipital skull fracture, as well as fractures of the cervical spine in two locations.

Toxicological analysis of femoral blood revealed no ethanol or drugs of abuse.

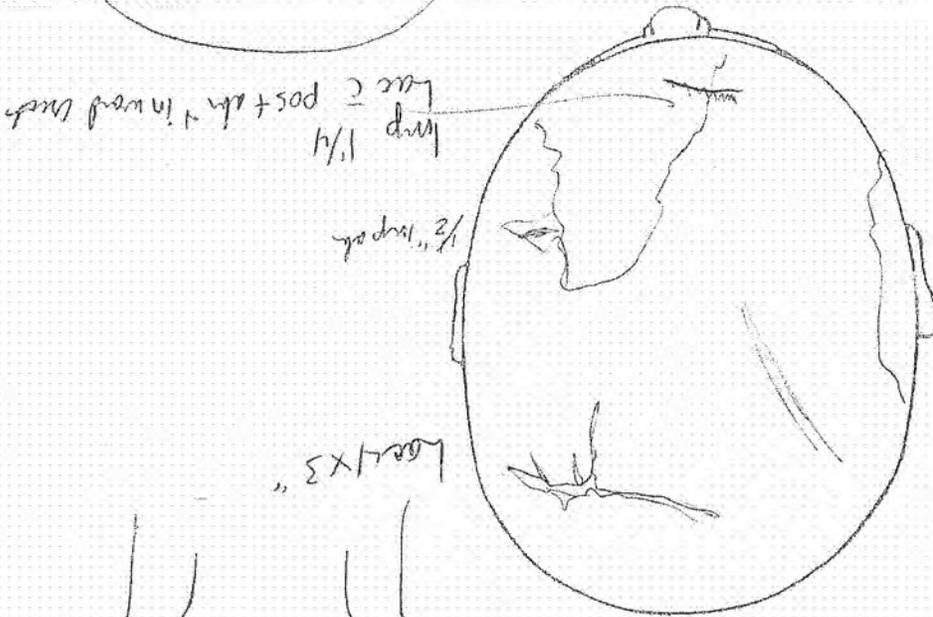
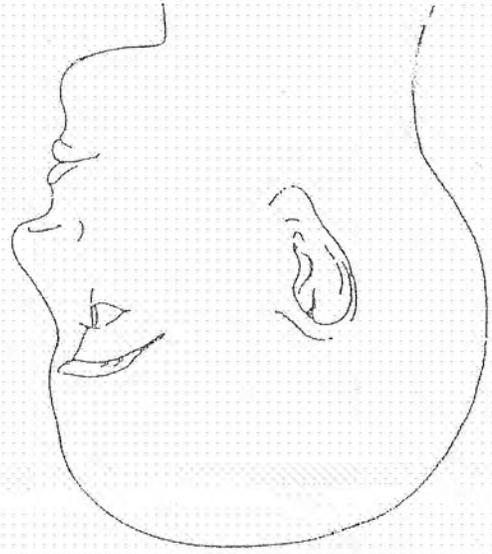
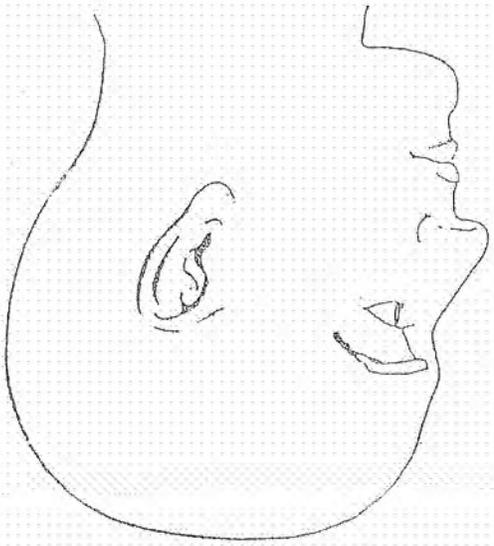
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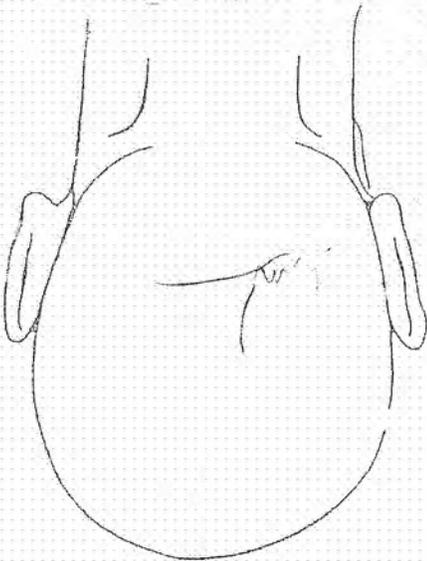
Michele J. Catellier, M.D.  
Associate State Medical Examiner

MJC/ch





Dist. cont  
2/25/14



Lac 1x3"



L brow 7x5"  
L eye 3x5"  
nose 2x1.5"  
Sup ear 1/2"  
/// security  
diffuse  
imp abs  
c grand finger  
pattern

R 7x5"

Case # 095ME 297

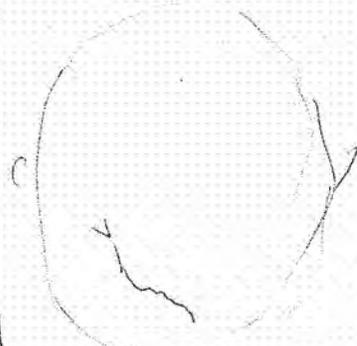
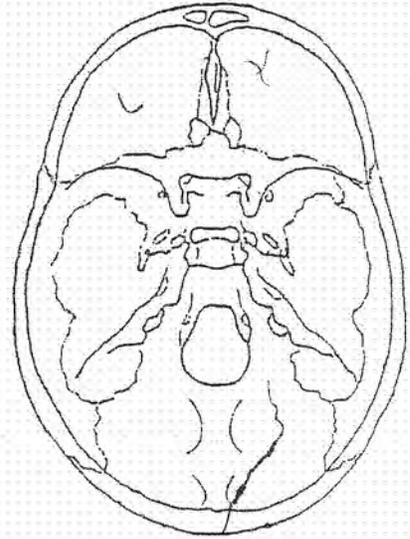
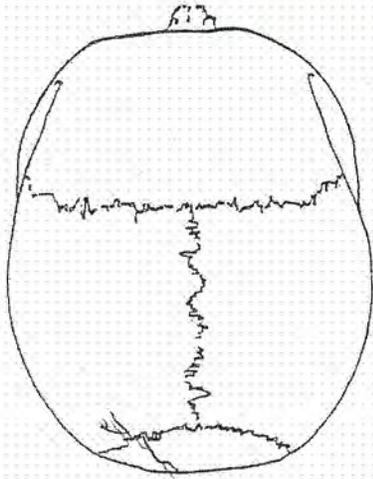
(b)(3):CPSA  
Section 25(c)

Name

(b)(3):CPSA Section  
25(c)

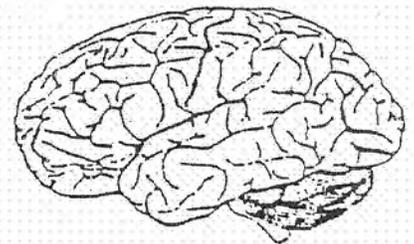
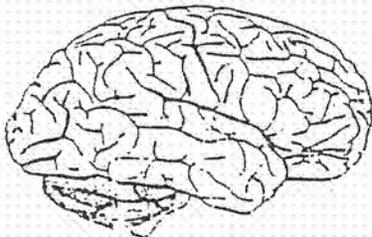
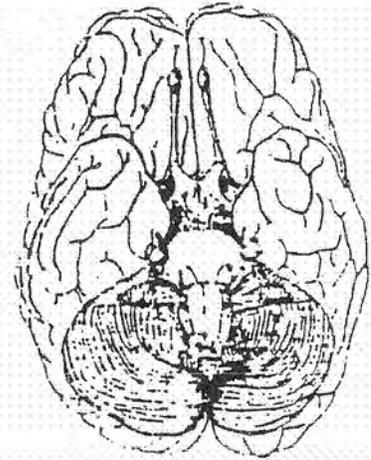
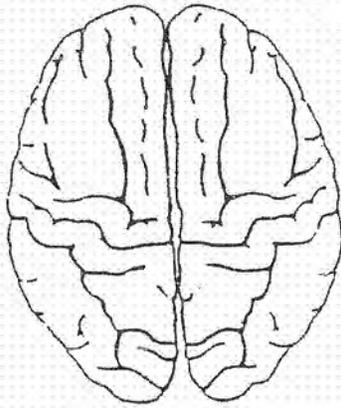
Name \_\_\_\_\_

Case # D9SME 297



9cm

post  
L occip bx



09SME297

DECEDENT: (b)(3):CPSA Sect

DATE: 16 July 2009

PATHOLOGIST: Michele Catellier, M.D.

MICROSCOPIC EXAMINATION



**SLIDE BLOCK LIST:**

A=Lungs

B=Posterior left ventricular free wall

C=Anterior left ventricular free wall, right ventricle

D=Spleen, liver, kidneys, pancreas

E=Prostate

F=Hippocampus, cerebellum

These sections have been examined.

**LUNGS:** There is vascular congestion. Alveolar septae are broken and clubbed with enlarged airspaces of emphysema. There is mild and focal peribronchial inflammation, mononuclear. The nodules noted grossly are confirmed to be fibrous "ancient" granulomata with minimal mononuclear cells peripherally and rare multinucleated giant cells. There is basophilic granular material centrally, consistent with calcific deposits.

**HEART:** Myocytes are enlarged but well-ordered. The posterior left ventricle has interrupted fibrous scar. There is no significant acute inflammation.

**SPLEEN:** Unremarkable.

**LIVER:** There is a single fat granuloma, incidental. There is no significant fatty change.

**PANCREAS:** Autolyzed.

**KIDNEYS:** There is glomerulosclerosis with minimal and focal mononuclear inflammation.

**PROSTATE:** There is benign hyperplasia. In addition there is an infiltrate of atypical glands with back-to-back architecture and enlarged hyperchromatic nuclei and macronucleoli. Scattered crystalloids are present. There is attenuation of cytologic detail due to mild autolysis. The changes are consistent with well differentiated carcinoma. Perineural neoplasm is suggested on the routine stain.

**BRAIN:** There is contusion hemorrhage. Some neurons have increased cytoplasmic eosinophilia and nuclear hyperchromasia.

There are no other significant findings except as listed under Pathologic Diagnoses.

090728HCC2795  
Exhibit 2, 13 of 14



2265 Executive Drive, Indianapolis, IN 46241  
Telephone: (317) 243-3894 / Fax: (317) 243-2789

LABORATORY CASE NUMBER: 928082	Subject's Name: (b)(3):CPSA Secti
Client Account: 11852 / IOWA02 Physician: CATELLIER Report To: IOWA OFF. OF THE STATE MED. ATTN: Julia Goodin, MD 2250 South Ankeny Blvd. Ankeny, IA 50023-9093 Fx: 1-515-725-1414-503	Agency Case#: 09SME297 Date of Death: Test Reason: Other Investigator: Date Received: 06/12/2009 Date Reported: 06/17/2009, 19:05:34

Laboratory Specimen No: 40129460	Date Collected: 06/10/2009
Container(s) :01: Red Top Bottle Blood, FEMORAL	Test(s) : 70530 Drugs of Abuse Panel, Blood (900B)

Analyte Name	Result	Concentration	Units	Therapeutic Range	Loc
AMPHETAMINES	Negative				
BARBITURATES	Negative				
BENZODIAZEPINES	Negative				
CANNABINOIDS	Negative				
COCAINE/METABOLITES	Negative				
FENTANYL	Negative				
METHADONE/METABOLITE	Negative				
OPIATES	Negative				
PHENCYCLIDINE	Negative				
PROPOXYPHENE/METABOLITE	Negative				
SALICYLATES	Negative				
ALCOHOLS	Negative				
Methanol	Negative				
Ethanol	Negative				
Acetone	Negative				
Isopropanol	Negative				

Specimens will be kept for one year from the date received.

The Specimen identified by this Laboratory Specimen Number has been handled and analyzed in accordance with all applicable requirements.

HOLUB, JOSEPH

Laboratory Case #: 928082

Print Date/Time: 06/17/2009, 19:05:34

*M. Scott Kriger, Ph.D.*

Kruger, Scott

Signature of Certifying Scientist

Iowa Office of the State Medical Examiner  
2250 S. Ankeny Blvd.  
Ankeny, IA 50023-9093

### EVIDENCE DISPOSITION

Date : 6/10/2009

Case Number : 09SME297

Decedent : (b)(3):CPSA

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- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Histology (in paraffin) | <input type="checkbox"/> Polaroid                                  |
| <input checked="" type="checkbox"/> Microscopic Slides      | <input checked="" type="checkbox"/> Bloodstain Card                |
| <input checked="" type="checkbox"/> Digital Photographs     | <input checked="" type="checkbox"/> Thumbprints/Index Fingerprints |
| <input type="checkbox"/> 35 mm Photographs/Film             | <input type="checkbox"/> Major Case Prints                         |
| <input type="checkbox"/> 35 mm Photographic Slides          | <input type="checkbox"/> Footprints                                |

The following listed evidentiary item/s will be destroyed after **three full calendar years** following the date the autopsy was performed unless the Iowa Office of the State Medical Examiner is requested to do otherwise either by certified mail and/or by court order:

- Tissue Sections, Formalin Fixed

The following listed evidentiary item/s will be destroyed after **one full calendar year** following the date the autopsy was performed unless the Iowa Office of the State Medical Examiner is requested to do otherwise either by certified mail and/or by court order:

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Femoral Blood | <input checked="" type="checkbox"/> Vitreous | <input type="checkbox"/> Kidney          |
| <input checked="" type="checkbox"/> Heart Blood   | <input type="checkbox"/> Brain               | <input type="checkbox"/> Bile            |
| <input checked="" type="checkbox"/> Urine         | <input type="checkbox"/> Liver               | <input type="checkbox"/> Skeletal Muscle |
| <input type="checkbox"/>                          |  |  |

Signed,



Michele J. Catellier, MD  
Associate State Medical Examiner



090728HCC2795

Exhibit 3

DESCRIPTION OF RESPONDENTS:

1. Iowa Office of the State Medical Examiner, 2250 S. Ankeny Blvd., Ankeny, IA 50023-9093, 515-725-1400, Fax 515-725-1414

Initial contact on 8/14/2009

2. Iowa State Patrol, 2332 Roemer Ave., Ottumwa, IA 52501, 641-682-3742, Fax 641-682-3742

Initial contact on 8/14/2009

Task Number 090728HCC2795

INTERVIEWER: When the response to a particular question is unknown, please leave blank.

Type of respondent: Police Department

Other, specify:

1. What type of vehicle was involved in the incident? (If vehicle is not an ATV, or if ATV has more than 4 wheels, politely thank respondent for her/his cooperation and terminate interview).

- |                                       |                     |
|---------------------------------------|---------------------|
| 1 - 3 wheeled ATV                     | 7 - Utility Vehicle |
| 2 - 4 wheeled ATV                     | 8 - Other Vehicle   |
| 3 - ATV with unknown number of wheels | 0 - Unknown         |
| 4 - 2 wheeled motorcycle              |                     |
| 5 - Dune Buggy                        |                     |
| 6 - ATV with more than 4 wheels       |                     |

2. What is the manufacturer/brand name of the ATV(s) involved in the incident? If more than two ATVs, use an additional sheet.

ATV #1	ATV #2
Manufacturer: 05 - Polaris	Manufacturer:

3. What is the model name or number and/or vehicle identification number (VIN) of the ATV?

Model: Ranger / VIN: 4XAHH50A392717802

4. What is the model year of the ATV? (Record last two digits of model year. For example 89,90).

Model Year: 2008

5. What is the engine size (in CCs) of the ATV?

Engine Size: Unknown

6. Was there more than one death involved in this incident? If more than two individuals were killed use an additional sheet.

Death #1	Death #2
Date of Death: 06/09/2009	
Age/Sex: 77/Male	/
State of Death: IA	
City of Death: Oskaloosa	
County of Death: Mahaska	

7. Describe how the incident occurred. (Use additional sheets if necessary).

At about 9:00 am, a driver of an ATV was westbound on the shoulder of a state public road when he was struck from behind by an automobile traveling in the same direction. The driver of the automobile reported that he could not avoid the ATV due to an on-coming vehicle. The driver of ATV was not wearing a helmet and he was ejected upon impact, landing in the ditch a few feet away from the ATV which had over \$2,500 in property damage. The ATV Driver died from blunt force trauma injury to the head and neck

8. Did the ATV overturn/tipover/rollover? Yes

9. If ATV overturned/tipped over/rolled over, did it land on the victim?

Victim 1:	Victim 2:
Yes <input checked="" type="radio"/> No Unknown	Yes No Unknown

10. Who was killed in the incident? Check all that apply.

<input checked="" type="radio"/> - Driver	3 - Bystander	8 - Other/Unknown
2 - Passenger	4 - Driver/Other Vehicle	

11. Was the victim wearing a helmet at the time the incident occurred?

Victim 1:	Victim 2:
Yes <input checked="" type="radio"/> No Unknown	Yes No Unknown

12. How many riders (including the driver) were on the ATV at the time the incident occurred?

0 - Unknown	2 - Two riders	4 - Four or more riders
<input checked="" type="radio"/> - One rider	3 - Three riders	9 - No riders

13. List the following physical characteristics of the DRIVER of the ATV:

Age: 77	Height: (inches)
Weight:	Sex: Male

14. How did the driver learn to operate an ATV (READ LIST)

- 1 - Organized Program                      Sponsor's Name:
- 2 - Dealer/Salesperson    Arranged through dealer:
- 3 - Friend/Relative              Friend/Relative Age:
- 4 - Self
- 5 - Other (Specify)
- ⑨ - Don't Know

15. What was the type of terrain (ground surface) being travelled at the time the incident occurred?

08 - Paved road

16. Type of road being travelled by ATV when incident occurred?

01 - Public road

17. Identify any other motor vehicle(s) involved in this incident.

01 - Car

18. Had the driver of the ATV used alcohol just prior to the incident?

2 - No

19. Had the driver taken any drugs or medication just prior to the incident?

2 - No, Drugs

Additional Comments:

N0960339A 6/22/09

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Published June 10, 2009 10:57 pm -

## What Cheer man dies in ATV accident IA

— Pat Shaver, staff writer

OSKALOOSA — A What Cheer man was killed Tuesday morning after he was rear-ended by a car and ejected from the ATV he was driving.

**77**, of What Cheer, was driving an ATV-Ranger west on G-29 north of Oskaloosa. He was partially on the travel portion of the road and partially on the shoulder, according to the Iowa State Patrol.

**22**, of Delta, was also driving west on G-29. He was traveling over a hill and saw **77** vehicle and began to brake hard but was unable to stop soon enough.

**77**'s car hit the back of **77**'s ATV, according to police. **77** died in the accident.

— Pat Shaver, staff writer



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### Iowan dies in ATV accident near Oskaloosa

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Associated Press - June 11, 2009 7:44 AM ET

OSKALOOSA, Iowa (AP) - Authorities say an eastern Iowa man died after his all-terrain vehicle was hit from behind by a car that came over a hill and couldn't stop in time.

Seventy-7-year-old **[REDACTED]** of What Cheer, was killed on Tuesday near Oskaloosa.

The Iowa State Patrol says Holub was driving west on a road and the ATV was partially on the highway and partially on the shoulder.

The patrol says a westbound car came over a hill and the driver saw **[REDACTED]** but couldn't stop in time and the car hit the back of the ATV.

Information from: The Ottumwa Courier, <http://www.ottumwacourier.com>

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This incident occurred on 2/23/08, and involved a 28 year old male victim and a four-wheeled, off-road, utility-type vehicle being used recreationally on some trails and off-highway roads near the victim's home in the Valley View Truck Trail area of El Cajon, CA (San Diego County). All of the information in this report comes from the medical examiner's office. The Medical Examiner's report is appended as Exhibit 1.

This report is written in an abbreviated report style in accord with established investigation instructions for these types of vehicles.

On the evening of 2/22/08, the victim and several friends attended a party at a local night club and then returned to the victim's home at about 1:00 am (on 2/23/08). Sometime later, in the early morning hours of 2/23/08, the decedent and five friends departed on the vehicle and rode around some trails and off-highway roads in the area. At some point, the victim attempted to climb a hill which with an incline of approximately 70 degrees. The vehicle tipped rearward and to the right and then rolled over. During the rollover the victim was ejected and the vehicle came to rest on him. The roll cage support had landed across the victim's face. The passengers were able to roll the vehicle off the victim and they started CPR. Another passenger drove the vehicle to the nearest place where 911 could be called. Paramedics arrived at 3:11 am and pronounced the victim dead at the scene.

It was not known if the victim was wearing a seat belt. No helmets were observed at the incident scene.

The Medical Examiner's toxicology report concerning the victim revealed Alcohol (Ethanol) results of 0.21% (w/v) for peripheral blood and 0.24% (w/v) for vitreous blood. Under the Drugs of Abuse Screen the report also revealed Presumptive Positive results for Benzodiazepines.

The Medical Examiner's Office reported the cause of death to be, "Blunt force head injuries."

No information was available concerning possible injuries to the passengers who were riding with the victim at the time of the incident. No other fatalities were noted.

#### PRODUCT

The product is a Yamaha Rhino (not further identified).

#### EXHIBITS

1. Medical Examiner's Records. (12 pages)
2. Source Identification Sheet. (1 page)



# County of San Diego

GLENN N. WAGNER, D.O.  
CHIEF MEDICAL EXAMINER

OFFICE OF THE MEDICAL EXAMINER  
5555 OVERLAND AVE., SUITE 1411, SAN DIEGO, CALIFORNIA 92123-1245  
TEL: (858) 694-2895 FAX: (858) 495-5956

CHRISTINA STANLEY, M.D.  
CHIEF DEPUTY MEDICAL EXAMINER

## INVESTIGATIVE REPORT

9/2/2009

CALL INFO	NAME OF DECEASED (LAST, FIRST MIDDLE) <b>(b)(3):CPSA Section 25(c)</b>		AKA		HIO <input type="checkbox"/>	CASE NUMBER <b>08-00466</b>	
	INVESTIGATOR Jerry A. Simmons		REPORTED BY Dep Kluge		REPORTING AGENCY San Diego Sheriff		PREVIOUS WAIVE #
	CALL DATE AND TIME 02/23/2008 0335		ARRIVAL DATE AND TIME 02/23/2008 0404		RETURN DATE AND TIME 02/23/2008 0610		
DECEDENT	DATE AND TIME OF DEATH 02/23/2008 0331		DATE OF BIRTH 06/20/1979	AGE 28 Years	GENDER Male	RACE White	
	RESIDENCE (STREET, CITY, STATE, ZIP) <b>(b)(6)</b>				COUNTY San Diego	LAST SEEN ALIVE	
	SOCIAL SECURITY NO.	CITIZENSHIP USA	OCCUPATION Iron worker			PAID AUTOPSY <input type="checkbox"/>	
DEATH	LOCATION OF DEATH Dirt road				TYPE OF PLACE Other		
	ADDRESS (STREET, CITY, STATE, ZIP) Valley View Truck Trail El Cajon, CA 92019						
	SUMMARY <b>(b)(3):CPS</b> was a single 28-year-old White male who lived with his fiancée in a home in unincorporated El Cajon. During the early morning hours of 02/23/08 he was the driver of an off-road-vehicle on an off-road trail. He attempted to climb a hill when he lost control and the vehicle rolled over. Johnston was ejected and during the rollover the vehicle came to rest on him. Passengers the vehicle lifted the vehicle off him and he was obviously dead. SDS and Lakeside Fire Department responded and confirmed the death. CHP responded and investigated the incident. There are no criminal charges pending.  Medical Examiner's jurisdiction invoked according to the California Government Code 27491: Deaths due to known or suspected as resulting in whole or in part from or related to accident or injury, either old or recent.						
INCIDENT	LOCATION OF INCIDENT Dirt road				INCIDENT PLACE TYPE Other		
	ADDRESS (STREET, CITY, STATE, ZIP) Valley View Truck Trail El Cajon, CA 92019				COUNTY San Diego		
	DATE AND TIME OF INCIDENT 02/23/2008 0250		INVESTIGATING AGENCY CHP - El Cajon		OFFICER Ofc Collins	BADGE # 16535	REPORT # Inc #0205
	DECEDENT WAS Driver		BELTED No	HELMETED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	POSITION Driver		ON PRIVATE PROPERTY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	VEHICLE Yamaha Rhino				LICENSE NUMBER		STATE
NOTIFICATION	IDENTIFIED BY Kristi Casey			METHOD Visual		DATE AND TIME 02/23/2008 0311	
	FUNERAL HOME Leneda, Inc.			PROPERTY <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		PUBLIC ADMINISTRATOR <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TYPE OF EXAM Autopsy
	NAME OF NOK OR OTHER Kristi Casey		RELATIONSHIP Friend		DATE NOTIFIED 2/23/2008 3:10:00 AM		NOTIFIED BY Paramedics
	NAME OF NOK OR OTHER Wesley Ordaway		RELATIONSHIP Friend		DATE NOTIFIED 2/23/2008 3:10:00 AM		NOTIFIED BY Paramedics

San Diego Medical Examiner  
5555 Overland Avenue, Ste 1411  
San Diego, CA 92123  
(858) 694-2895

Case Number : 08-00466  
Investigator : Jerry A. Simmons  
Date of Death : 02/23/2008  
Date Today : 03/18/2008

## INVESTIGATIVE NARRATIVE

Decedent: (b)(3):CPSA Section 25

### Antemortem Events:

In a personal interview with CHP Officer Collins at the scene at about 0510 hours 02/23/08 the following was learned. The decedent and several friends had attended a party at a local night club and then had returned to the decedent's home at about 0100 hours 02/23/08. Sometime later they, the decedent and 5-friends departed on a Yamaha Rhino (a two-passenger off-highway-vehicle) and rode around on some trails and off-highway-roads in the area. At some point, the decedent attempted to climb a hill which was approximately 70-degrees incline. The OHV tipped rearward and to the right then rolled over. During the rollover the decedent was ejected and the OHV came to rest on the decedent. A roll-cage support had landed across the decedent's face. The passengers were able to roll the OHV off the decedent and they initiated CPR. Another passenger drove the OHV to the nearest commercial business and called 9-1-1. At 0311 hours 02/23/08, SDSD Communications center received the 9-1-1 call (SDSD Event #6476459) and multiple SDSD Deputies and Lakeside firefighters, Medic Unit #3 and Paramedic/Engine Company #3-S, were dispatched to the scene. On arrival at 0311 hours paramedics assessed (b)(3):CP and death was pronounced at the scene via radio from Sharp-Memorial hospital by Dr. Venieris at 0331 hours 02/23/08.

### Past Medical, Surgical, and Social History:

In a telephonic interview with (b)(3):CPSA Sec the decedent's mother, at 2145 hours 02/23/08 it was learned the decedent had suffered a gunshot wound to an arm several years prior and would take Vicodin to control pain. There no other known medical problems.

### Scene Description:

The scene was viewed by me in the presence of CHP Officers and SDSD Deputies at 0500 hours 02/23/08. The scene was a rural dirt trail cut into the side of a hill and was barely wide enough to accommodate a full size vehicle. There was a greater then 70-degree rising embankment on the west side and a greater then 70-degree drop on the east side of the trail. The road surface was wet and there was no ambient lighting in the area. There was a worn down area of vegetation which witnesses described as an area where the decedent would commonly drive his OHV off the established trail. The direction of travel was uphill with a rise of about 70-degrees. There were several large rocks and loose wet dirt in the path. Due to poor lighting conditions and traffic from numerous rescue vehicles, OHV tracks, ground disturbances and crushed vegetation from the roll over were not easily observed.

The vehicle was a Yamaha Rhino. The Rhino was a two-passenger vehicle with a small truck-type bed area behind the seats. There was no obvious damage to the vehicle, although there was dirt and paint scrapes consistent with a roll-over. A small amount of blood was noted to the left front roll bar support. The seat-belt was not locked down, although the Rhino was used as part of the initial rescue effort and may have been released during operation. It did not appear stressed. There was no helmet observed at the scene.

### Body Description:

The decedent was viewed by me at 0500 hours 02/23/08 in the presence of SDSD Deputies and CHP Officers. The decedent was supine on the wet dirt ground and clothed in pajamas. There was obvious deformity to the head. The flaccid body was cool to the touch with forming dorsal lividity. There were no obvious deformities to the torso or limbs, but examination was limited to due presence of friends and family and the poor lighting conditions.

(b)(6) of H, S & B Transportation, placed the decedent into a new white vinyl body pouch. The decedent was transported to the Medical Examiner's Department by me. The pouch was sealed with blue tamper-evident seal #0210578 at 0610 hours 02/23/08.

**Special Requests:**

No known special requests at the time of this investigation.

**Identification:**

The decedent visually identified at the scene by his fiancée, Kristi Casey.

**Tissue Donation:**

Not approached.

**Public Administrator:**

A copy of this report was forwarded to the Public Administrator. The decedent has two minor children who live with their mother. Further details were not available at the time of this investigation.

**Other Important Factors:**

Not applicable.

**Signed:** \_\_\_\_\_

**Jerry A. Simmons**  
**Medical Examiner Investigator**

**Date Signed:** \_\_\_\_\_

**Approved by:** \_\_\_\_\_



# County of San Diego

GLENN N. WAGNER, D.O.  
CHIEF MEDICAL EXAMINER

CHRISTINA STANLEY, M.D.  
CHIEF DEPUTY MEDICAL EXAMINER

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TEL: (858) 694-2895 FAX: (858) 495-5956

## AUTOPSY REPORT

**Name:** (b)(3):CPSA Section 25(c) **ME#:** 08-0466  
**Place of death:** Dirt road, Valley View Truck Trail, El Cajon, CA 92019 **Age:** 28 Years  
**Date of death:** February 23, 2008; 0331 Hours **Sex:** Male  
**Date of autopsy:** February 24, 2008; 1030 Hours - 1250 Hours

CAUSE OF DEATH: BLUNT FORCE HEAD INJURIES

MANNER OF DEATH: ACCIDENT

### AUTOPSY SUMMARY:

1. Blunt force injuries of head.
  - a. Nearly connecting lacerations extending across the right forehead, nasal bridge, nose and medial left cheek.
  - b. Contusions of the posterior and right posterior scalp.
  - c. Depressed comminuted skull fractures of the inferior frontal bones, anterior inferior left sphenoid bone, nose, left orbit, and left maxilla.
  - d. Rupture of globe of left eye.
  - e. Diffuse subarachnoid hemorrhage over brain especially brainstem and around spinal cord.
  - f. Lacerations of the inferior frontal lobes of brain (left greater than right).
  - g. Associated subgaleal and intraventricular hemorrhage.
2. No significant blunt force injuries below the level of the head.
3. Evidence of medical therapy including cutting away of shirts and EKG pad.

AUTOPSY REPORT

-2-

(b)(3):CPSA Secti 08-0466

OPINION: According to the investigator's report, this 28 year old man was operating a two passenger ATV (Rhino) reportedly with five occupants. He attempted to drive up a steep embankment, and the vehicle flipped over backwards, landing and coming to rest on top of him. The vehicle was removed, and death was pronounced at the scene by arriving medics. No helmet was identified at the scene.

Autopsy revealed severe blunt force injuries to the head appearing to result from an impact involving an area extending diagonally across the right forehead, nose, left eye and cheek resulting in multiple anterior basilar skull and facial fractures with large amounts of subarachnoid hemorrhage around the brain resulting in the rapid death. There were no significant injuries below the level of the head. No significant natural disease was identified. Toxicological studies detected a large amount of alcohol (ethanol) in the peripheral blood and vitreous humor, and this acute intoxication may have contributed to the circumstances surrounding the motor vehicle crash. Screening for benzodiazepines was presumptive positive, but no confirmatory testing was performed. No common illicit drugs of abuse were detected. In consideration of the reported scene investigation, autopsy findings, and circumstances surrounding the motor vehicle crash, as currently understood, the manner of death is classified as accident.

CHRISTINA STANLEY, M.D.  
Chief Deputy Medical Examiner

Date signed:

AUTOPSY REPORT

-3-

(b)(3):CPSA  
Section 25(c) 08-0466

WITNESSES: No outside witnesses.

IDENTIFICATION: The body is identified by a Medical Examiner's name band around the both ankles. The band around the left ankle has only the case number on it.

CLOTHING: The following are received separate from the body:

1. A pair of black sneaker type shoes with large amounts of sandy tan dirt on and around the edges of the soles.
2. A pair of black socks.
3. A pair of black, stretch knit pants with "Tap Out" emblems in multiple locations and a band of black and white patterned material with "Tap Out" written on it down the left side. The pants are slightly damp and soiled with sandy dirt.
4. A pair of black "Joe Boxer" underpants, which are soiled with sandy dirt.
5. A cut away, hooded, pullover, gray sweatshirt with "TG" on the left front. The entire jacket is damp especially posteriorly where there is adherent sand dirt as well as blood.
6. A cut away, short sleeve, white T-shirt with focal blood staining on the back.
7. A black knit cap with a gray lining.

EVIDENCE OF MEDICAL THERAPY: A single EKG pad is on the left chest.

### EXTERNAL EXAMINATION

GENERAL: The body is that of a well developed, well nourished, Caucasian man appearing consistent with the stated age of 28 years. The length is 71 inches, and the weight is 190 pounds as received. The unembalmed body is well preserved and cold. It has been refrigerated. Rigidity is fully developed in the jaw and extremities. Lividity is posterior, pink and blanches minimally with pressure. The head is covered with mostly dried blood mixed with small amounts of dirt posteriorly. Smaller amounts of blood are smeared on the posterior aspects of the torso, which is also soiled with sandy tan dirt.

BODY MARKINGS:

1. Completely encircling the mid right upper arm is a black tattoo consisting of multiple skull-like figures. There is a bright red Trident at its superolateral edge.
2. Encircling the right wrist is a black tattoo of a large link chain with a skull and cross bones on it. Circumferential red and yellow flames outlined in black extend from the wrist all the way up all the way to the antecubital fossa.
3. Covering the entire lateral left upper arm is a multicolored tattoo including multiple patterns and possibly including a snake.
4. On the upper back is a tattoo of two separated wings with two names on of which is "Seth" located lateral to them.
5. On the posterior right upper back near the axillary fold/shoulder is a 2 inch long vertical scar with a 1/2 inch scar located just inferior to it.

AUTOPSY REPORT

-4-

(b)(3):CPSA  
Section 25(a) 08-0466

6. On the posteromedial aspect of the left arm is a depressed, irregular, 5 x 2-1/2 inch scar with what appears to have skin grafting over it and considerable loss of underlying soft tissue. Extending from the superior medial portion of this scar is a transverse, curvilinear, 3-1/2 inch scar extending around onto the anterior aspect of the left upper arm.
7. No needle tracks or nontherapeutic punctures are identified.

HEAD: The scalp is covered by less than 1/8 inch long black hair. The scalp hair extends down into sideburns in front of both ears down to over the right jawline. The mouth is outlined by a 1/4 inch long moustache and goatee. There is dense stubble on the rest of the beard area. The ears are covered with dried blood, but no blood appears to be emanating from them. The right irid is hazel, and its sclera and conjunctiva are pale and free of hemorrhages or petechiae. The globe of the left eye is ruptured with hemorrhage in the torn sclera but no hemorrhages or petechiae in the conjunctiva. The nose is fractured and lacerated as described below. There is blood in the nares. The lips are intact. The teeth show large amounts of dental work with caps/veneers on all of the upper teeth and a silver tooth in the right posterior lower gumline. There is no significant quantity of blood in the mouth.

NECK: The neck is straight and symmetric without apparent injury.

CHEST: The chest is symmetric and free of deformities.

ABDOMEN: The abdomen is flat, soft and free of palpable masses. The genitalia are those of a normal, circumcised adult male with both testes palpable in the scrotum.

ARMS: The arms are straight and symmetric without fractures, deformities or transverse ventral wrist scars. The fingernails are very short with small amounts of dirt around the edges.

LEGS: The legs are straight and symmetric without fractures, deformities or edema.

BACK: The back is straight and symmetric without evidence of injury. The anus is clean and free of trauma.

### **EXTERNAL EVIDENCE OF INJURY**

1. Comminuted, depressed fractures of the frontal bone and midface can be visualized through an L-shaped, 2-1/2 x 1 inch laceration extending obliquely across the right forehead, medial right eyebrow and superior portions of the nasal bridge. The edges are slightly irregular along the right and inferior aspects where there is a 1/4 inch long laceration extending inferiorly and to the left, but there are no abrasions or contusions of the margins.

AUTOPSY REPORT

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2. In continuity with the severely depressed skull fracture beneath the laceration described above is a comminuted fracture involving the medial portions of the left orbit and left maxilla. There is rupture of the globe of the left eye with a 3/8 inch long laceration of the inferolateral sclera. The upper eyelid has a faint, 1-3/4 x 3/4 inch, maroon contusion, and there is mottled, faint contusion/ecchymosis of the lower lid.
3. The fractured cartilage of the inferior left portions of the nose can be viewed through an irregular 1-1/2 x 5/8 inch laceration, which creates a skin flap attached on the left side. This laceration curves at the very tip of the nose where there is an up to 3/16 inch wide marginal abrasion. It is otherwise unabraded.
4. Extending from the lateral left naris onto the left cheek parallel and in series with the lacerations on the right forehead and midface is a 1-1/4 inch long up to 1 inch deep oblique laceration with undermining extending up over the comminuted fractures of the medial left mandible and inferior left orbital ridge. There is skin breakdown versus abrasion extending up to 3/8 inch along its inferior edge.
5. On the inferior left cheek is an irregular, 1/4 x 1/4 inch, red abrasion, and the entire left cheek has a poorly defined, slightly distended, maroon contusion associated with extension of the comminuted fractures of the left maxilla back nearly to the ear.
6. On the back of the head is a very faint, poorly defined, approximately 1 inch diameter, maroon contusion. Four slightly better defined red-maroon contusions are located on the right posterior head. Two are coalescing and involve an area measuring 1-3/4 x 1 inch. The most inferior measures 3/4 x 3/4 inch, and the most anterior appears to include associated abrasion and measures 1/2 x 1/4 inch.
7. On the anterior right knee is a 3/8 x 3/16 inch, faint, pink-tan abrasion.
8. On the anterior mid right shin is a 1/2 x 1/2 inch, faint, purple contusion connected to a 1/4 x 1/4 inch similar contusion.
9. On the lower back at the right posterior waistline is a very faint, 3/8 x 3/8 inch, pink contusion.

### **INTERNAL EXAMINATION**

**BODY CAVITIES:** The abdominal fat layer measures up to 3.5 cm in thickness. The body cavities contain no abnormal fluids. The pleural, pericardial and peritoneal surfaces are intact, smooth and glistening. The organs are normally positioned and free of evidence of trauma. The heart and vasculature contain an adequate quantity of blood with multiple postmortem clots.

**CARDIOVASCULAR SYSTEM:** The empty heart weighs 380 grams and has an unremarkable shape. The epicardium is intact, smooth and glistening with a moderate amount of fat. The coronary arteries follow their usual distribution and show no appreciable atherosclerosis. The ostia are normally positioned and widely patent. The endocardium is intact, smooth and glistening. The valves are of normal number, intact and

AUTOPSY REPORT

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free of vegetations. The leaflets are thin and pliable. The myocardium is uniform, firm, dark maroon without focal fibrosis, softening or hemorrhage. The right ventricular wall measures 0.4 cm in thickness; the left ventricular wall measures 1.8 cm in thickness, and the interventricular septum measures 1.7 cm in thickness.

The aorta follows its usual course. It shows no evidence of injury and minimal atherosclerosis.

RESPIRATORY SYSTEM: The right and left lungs weigh 660 and 600 grams, respectively. They are well expanded and crepitant. The pleural surfaces are intact, smooth and glistening with minimal amount of anthracotic pigmentation and no evidence of blood aspiration. The parenchyma is uniform, dark maroon and exudes minimal fluids. There is no focal consolidation or gross enlargement of airspaces. There is no evidence of peripheral blood aspiration. The proximal pulmonary arteries and bronchi are unobstructed.

HEPATOBIILIARY SYSTEM: The intact liver weighs 2050 grams and has an unremarkable shape and a smooth, glistening capsule. The parenchyma is uniform, red-tan and without focal lesions or changes in consistency.

The gallbladder contains an estimated 6 cc of liquid golden-yellow bile without stones. The wall and mucosa are unremarkable.

The pancreas has its expected size and shape. The parenchyma is lobulated, maroon-tan and without focal fibrosis, calcification or hemorrhage.

SPLEEN AND LYMPH NODES: The intact spleen weighs 220 grams and is covered by a thin, smooth, glistening capsule. The parenchyma is firm, dark maroon and without focal lesions.

The lymph nodes of the neck, chest and abdomen are not appreciably enlarged.

ENDOCRINE SYSTEM: The thyroid gland is not enlarged, and the lobes are roughly symmetric. The parenchyma is uniform, firm, red-brown and without nodularity.

The adrenal glands have their expected size and shape. The uniform, thin, bright yellow cortices surround unremarkable, brown medullas.

GASTROINTESTINAL SYSTEM: The esophagus is intact. The stomach contains 15 cc of creamy tan fluid containing streaks of viscous lighter tan material, but no fragments of food or medication. The gastric mucosa is intact and unremarkable. The duodenum is intact. The remainder of the small and large intestines are unremarkable to external inspection and palpation. The appendix is present.

**GENITOURINARY SYSTEM:** The kidneys each weigh 140 grams. They have their usual shape and position. The capsules strip with ease, and the cortical surfaces are smooth and glistening. The congested parenchyma has poor corticomedullary differentiation, but no focal lesions. The urinary pelves are not dilated. The ureters are of normal caliber and follow the usual course to the urinary bladder, which contains 225 cc of clear, near colorless tan urine. The bladder mucosa is intact and unremarkable. The wall is not hypertrophied.

The prostate gland is not enlarged and is unremarkable on cut section. The testes are grossly unremarkable, and there is no hemorrhage in the testes or scrotal sac.

**NECK:** There are no hemorrhages of the tongue, strap muscles, thyroid or pharyngeal constrictors. The cartilaginous and bony structures of the larynx and the fully ossified hyoid bone are intact and free of hemorrhage. The airway is unobstructed and lined by intact, smooth, glistening mucosa. There is no palpable crepitus or displacement of the cervical vertebrae and no hemorrhage in the prevertebral fascia.

**MUSCULOSKELETAL SYSTEM:** The musculoskeletal system is normally developed. Except for the anterior basilar skull fractures and facial fractures described elsewhere no deformities are identified. The ribs are not brittle.

**HEAD:** The scalp has a small amount of hemorrhage located at the superior end of the laceration across the right forehead and a larger amount subgaleal hemorrhage covering a 12 x 12 inch area of the posterior scalp centered right of the midline without any fractures of the underlying calvarium, posterior or middle cranial fossae. The entire left inferior frontal bone, cribriform plate, lesser wing of the left sphenoid bone and medial and anterior portions of the right orbital roof are fractured and displaced up to 2 cm into the inferior frontal lobes of the brain. The jugum and right side of the sphenoid bone, but on the left the fractures extend posteriorly all the way to, but not completely across the left sphenoid ridge. The jugum and dorsum sella are intact, but there is abundant hemorrhage surrounding the pituitary gland. There is only scant epidural hemorrhage associated with the anterior skull fractures, but no other appreciable epidural and no subdural hemorrhage.

**CENTRAL NERVOUS SYSTEM:** The unfixed brain weighs 1590 grams. A very thick layer of subarachnoid hemorrhage covers the ventral brainstem, surrounds the cervical spinal cord and extends over the anterior portions of the cerebellar hemispheres as well as thickly covering the inferior and posterior cerebellar vermis. Thinner layers of subarachnoid hemorrhage extend to cover both cerebral hemispheres in a diffuse fashion. There are large amounts of subarachnoid blood around the circle of Willis with moderate amounts extending into the Sylvian fissures. After removal of the blood from over the ventral brainstem around the circle of Willis, no large cerebral arteries appear to have been injured. Small lacerations and injuries to the smaller branches would be difficult to

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appreciate due to the large quantity of subarachnoid hemorrhage, and potentially small size of the injuries. The inferior frontal cortices are multiply lacerated especially on the left. There is associated hemorrhage but no separate contusions. Both olfactory bulbs and tracts are also lacerated. The cerebral convexities are full with mild flattening of the gyri and subarachnoid blood filling the sulci. No cortical contusions are identified, and there is no evidence of intraparenchymal hemorrhage other than associated with the lacerations of the inferior frontal lobes. There is no evidence of uncal or cerebellar tonsillar herniation. All the basal cisterns are full of subarachnoid hemorrhage.

On cut section the lacerations of the inferior left frontal lobe extend up to 2.5 cm from the cortical surfaces and are associated with small amounts of intraparenchymal hemorrhage. The large amounts of subarachnoid hemorrhage are visible, but there are no cortical contusions. The ventricles contain very bloody fluid if not frank blood, but are not distended. The basal ganglia, thalami and hippocampi are symmetric and grossly unremarkable. Serial sections through the brainstem and sagittal sections through the cerebellum are remarkable only for the subarachnoid and intraventricular hemorrhage without any parenchymal hemorrhages in the somewhat pale tissue.

### **SPECIMENS RETAINED**

**TOXICOLOGY:** Samples of central blood, peripheral blood, vitreous, and urine are retained.

**HISTOLOGY:** Sections of heart and liver are submitted for histology. Additional small sections of all major organs are retained in formalin.

**PHOTOGRAPHS:** Identification digital photographs are taken. Overall digital photographs are taken of the external appearance of the body. Additional digital photographs are taken of the internal head injuries.

**X-RAYS:** No x-rays are taken.

### **MICROSCOPIC EXAMINATION**

**HEART:** A section of left ventricle shows no significant histopathology.

**LIVER:** A section shows no significant histopathology. There is very mild macrovesicular steatosis.

CS:clb  
D: 2/24/08 T: 2/27/08  
Rev. 5/23/08



# County of San Diego

GLENN N. WAGNER, D.O.  
CHIEF MEDICAL EXAMINER

CHRISTINA STANLEY, M.D.  
CHIEF DEPUTY MEDICAL EXAMINER

OFFICE OF THE MEDICAL EXAMINER  
5555 OVERLAND AVE., Ste 1411, SAN DIEGO, CALIFORNIA 92123-1245  
TEL: (858) 694-2895 FAX: (858) 495-5956

## TOXICOLOGY REPORT

Name: (b)(3):CPSA Section 25(c)

Medical Examiner Number: 08-00466

Date of Death: 02/23/2008

Pathologist: Christina Stanley, M.D. JAS

Specimens Received: Central Blood, Peripheral Blood, Urine, Vitreous

<u>Test Name (Method of Analysis)</u>	<u>Specimen Tested</u>	<u>Result</u>
<u>Alcohol Analysis (GC)</u>		
Alcohol (Ethanol)	Peripheral Blood	0.21 % (w/v)
Acetone, Methanol, Isopropanol		Not Detected
Alcohol (Ethanol)	Vitreous	0.24 % (w/v)
Acetone, Methanol, Isopropanol		Not Detected
<u>Drugs of Abuse Screen (ELISA)</u>		
Cocaine metabolites	Central Blood	Not Detected
Opiates		Not Detected
Amphetamines		Not Detected
<b>Benzodiazepines</b>		<b>Presumptive Positive</b>
Fentanyl		Not Detected
Cannabinoids		Not Detected

End Results

**Comment:**

**A confirmation test for the presumptive positive benzodiazepine result (ELISA) was not performed.**

Approved and Signed: \_\_\_\_\_  
03/03/2008  
Iain M. McIntyre, Ph.D.  
Forensic Toxicology Laboratory Manager  
(All Inquiries/Correspondence)

Reviewed: \_\_\_\_\_  
Catherine E. Hamm  
Toxicologist III

# Source Identification Sheet

The Victim: (b)(3):CPSA Section 25 DOB: 6/20/79, (b)(3):CPSA Section 25(c)  
92019. The victim was not interviewed as part of this investigation.

The medical examiner's office: County of San Diego, Office of the Medical Examiner,  
5555 Overland Ave., Suite 1411, San Diego, CA 92123.

<b>1. Task Number</b> 090805HCC3840		<b>2. Investigator's ID</b> 9080		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
<b>3. Office Code</b> 840	<b>4. Date of Accident</b> YR MO DAY 2009 06 22	<b>5. Date Initiated</b> YR MO DAY 2009 08 17		
<b>6. Synopsis of Accident or Complaint</b> UPC A 56 year old male was riding a 750 cc, four wheeled, gas powered UTV when he lost control and it turned over. He died as a result of injuries sustained during the incident. A second passenger was also on board but survived. Neither victim was wearing a helmet.  MFR/PRVLBR NOTIFIED COMMENTS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> OVERRULED; <input type="checkbox"/> ATTACHED <input checked="" type="checkbox"/> EXCISIONS/FOIA EXS. <i>? 250, 6</i> <input checked="" type="checkbox"/> DO NOT RE-NOTIFY <input type="checkbox"/> RE-NOTIFY <i>3/24/10</i>				
<b>7. Location (Home, School, etc)</b> 1 - HOME		<b>8. City</b> IRVING		<b>9. State</b> TX
<b>10A. First Product</b> 5044 - Utility Vehicles		<b>10B. Trade/Brand Name</b> KAWASAKI		<b>10C. Model Number</b> TERYX
<b>10D. Manufacturer Name and Address</b> KAWASAKI MOTOR CORPORATION 9950 Jeronimo Road Irvine, CA 92716-2016				
<b>11A. Second Product</b> 0		<b>11B. Trade/Brand Name</b> NONE		<b>11C. Model Number</b> NONE
<b>11D. Manufacturer Name and Address</b> NONE				
<b>12. Age of Victim</b> 56	<b>13. Sex</b> 1 - Male	<b>14. Disposition</b> 8 - Death	<b>15. Injury Diagnosis</b> 54 - Crushing	
<b>16. Body Part(s) Involved</b> 31 - UPPER TRUNK	<b>17. Respondent</b> 3 - 2nd Hand Info Only	<b>18. Type of Investigation</b> 2 - Telephone	<b>19. Time Spent (Operational / Travel)</b> 10 / 0	
<b>20. Attachment(s)</b> 2 - Documents		<b>21. Case Source</b> 12 - MECAP		<b>22. Sample Collection Number</b>
<b>23. Permission to Disclose Name (Non NEISS Cases Only)</b> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
<b>24. Review Date</b> 10/06/2009	<b>25. Reviewed By</b> 8631		<b>26. Regional Office Director</b> Frank J. Nava	
<b>27. Distribution</b> Garland, Sarah; EPDS-IDI			<b>28. Source Document Number</b> X0970058A	

Information contained in this report originated from a MECAP report. Additional information came from the related police report. The primary victim is a 56-year-old male. The secondary victim was a 44-year-old male. The product involved in this incident is a four-wheeled, gas powered, UTV.

The incident occurred on June 22, 2009 at approximately 8:05 p.m. The victim was riding a UTV in a ditch and had a passenger riding with him. On the day of the incident, they had been riding on private property driving through a creek bed. They came out of the creek bed and the terrain they were on was very grassy and rutted. Approximately 100 feet from the creek bed, the driver/victim made a hard left turn causing the vehicle to roll over onto the passenger side. After the vehicle rolled over, the passenger saw that the driver was pinned by the vehicle's roll bar. The roll bar was resting on the victim's neck and he was turning blue. The passenger attempted to lift the UTV off of the victim but it was too heavy for him to lift. There were some other people in the area riding ATV's who helped move the UTV off of the victim. The victim was partially conscious and breathing. Rescue personnel were summoned and the victim was care-flighted to the hospital where he later died as a result of his injuries.

It should be noted that both the driver and passenger had consumed alcohol prior to the incident. Additionally, a cooler with ice and beer were found approximately three feet from the vehicle. Neither the driver nor passenger was wearing a helmet. After receiving permission to contact individuals from the Medical Examiner's office to contact individuals related to this incident, I attempted to contact the passenger of the vehicle involved in this incident. He could not be reached. Photographs of the incident have been requested and will be sent in as an addendum. (See missing form report in the attachments section of this report.)

According to the police report, the cause of death was blunt force injuries to the chest of the victim. The manner of death was ruled accidental.

The UTV is manufactured by:

Kawasaki Motor Corporation  
9950 Jeronimo Rd.  
Irvine, CA. 92618

Phone:  
(949) 770-0400

Website:  
[www.kawasaki.com](http://www.kawasaki.com)

Continued...

The UTV is a 2009 Kawasaki brand 4wd UTV. The model name is "Teryx" and the engine size is 749 cc. It is unknown if the UTV had been modified or repaired.

The following information about the primary UTV involved in this incident was obtained from the manufacturer's website:

### **Kawasaki Teryx Specifications**

- Engine: Liquid-cooled, 90-degree, four-stroke V-twin
- Valve System: SOHC, four valves per cylinder
- Displacement 749cc
- Bore x stroke: 85 x 66mm
- Compression Ratio: 8.8:1
- Carburetion: Dual Keihin CVKR-D34
- Ignition: Digital DC-CDI
- Transmission Continuously variable belt-drive transmission with high and low range, plus reverse, and Kawasaki Engine Brake Control
- Final drive: Selectable four-wheel drive with Variable Front Differential Control, shaft
- Frame type: Large diameter, thin-walled, high-tensile tubular steel
- Front suspension / wheel travel Adjustable dual A-arm with gas charged shocks / 7.5 in.
- Rear suspension / wheel travel Adjustable Independent Rear Suspension (IRS) with gas charged, reservoir shocks / 7.5 in.
- Front tires: Maxxis 26x8-12
- Rear tires: Maxxis 26x10-12
- Front brakes: Dual hydraulic discs with 2-piston calipers
- Rear brake: Sealed, oil-bathed, multi-disc
- Overall length: 115.4 in.
- Overall width: 58.7 in.
- Overall height: 75.0 in.
- Wheelbase: 76.0 in.

Continued...

- Ground clearance: 11.3 in.
- Lighting: (2) 40W headlights, (2) TK W taillight, TKW stoplight
- Cargo Bed Capacity: 500 lbs, 44.1 W x 32.7 L x 11.2 in. H
- Towing Capacity: 1300 lbs.
- Dry weight: 1276.1 lbs.
- Fuel capacity: 7.9 gal.
- Instruments: R/N/P/4WD indicators, water temp and oil pressure lamps, digital meter
- Standard Colors: Sunbeam Red, Woodsman Green

## **Attachments**

**Attachment 1**  
**Respondents**  
**One (1) Page**

**Attachment 2**  
**Photo of UTV taken from Manufacturer's Website**  
**One (1) Page**

**Attachment 3**  
**Police Report**  
**Eight (8) Pages**

**Attachment 4**  
**Missing Report Form**  
**One (1) Page**

## **Respondents**

**Detective Joe Hennig  
Irving Texas Police Department  
305 North O'Connor Rd.  
Irving, TX. 75061**

**Phone:  
(972) 721-2437**



**Photo of UTV obtained from Manufacturer's Website**  
**Photo 1 of 1**

090805HCC3840

# Incident Report Irving Police Department

**09-17056**

Supplement No  
**ORIG**



305 N O'Connor Rd

Irving TX 75061

(972) 721-2437

Reported Date  
**06/22/2009**  
Report Type  
**INFO ONLY**  
Officer  
**PACOS, LAWRENCE**

## Administrative Information

Agency <b>Irving Police Department</b>	Report No <b>09-17056</b>	Supplement No <b>ORIG</b>	Reported Date <b>06/22/2009</b>	Reported Time <b>20:12</b>	CAD Seq No <b>090614256</b>
Status <b>REPORT PENDING/INVESTIGATE</b>	Report Type <b>INFORMATION ONLY</b>				
Location <b>2030 S NURSERY RD , IR</b>			City <b>Irving</b>	ZIP Code <b>75060</b>	Rep Dist <b>2408</b>
Area <b>PD1</b>	Beat <b>24</b>	From Date <b>06/22/2009</b>	From Time <b>20:05</b>	Officer <b>967/PACOS, LAWRENCE</b>	
Assignment <b>PATROL DIVISION</b>	Entered by <b>967</b>	Assignment <b>PATROL DIVISION</b>	RMS Transfer <b>Successful</b>	Approving Officer <b>263</b>	
Approval Date <b>06/22/2009</b>	Approval Time <b>23:25:00</b>				

# Offenses	Statute Code	Description	Complaint Type
1	IC0060	<b>INFORMATION REPORT</b>	

Link	Involvement	Invl No	Race	Sex	DOB
VIC	VIC	1	W	M	02/03/1953
VIC	VIC	2	W	M	09/28/1964
WIT	WIT	1	W	M	11/19/1980
WIT	WIT	2	W	M	05/13/1970
OP	OP	1	W	M	08/28/1970

(b)(3);CPSA Section 25(c),(b)(6)

## Person Summary

Invl	Invl No	Type	MNI	Race	Sex	DOB
OP	1	I	5681118	W	M	08/28/1970
VIC	1	I	5046295	W	M	02/03/1953
VIC	2	I	5809630	W	M	09/28/1964
WIT	1	I	5809632	W	M	11/19/1980
WIT	2	I	5277822	W	M	05/13/1970
WIT	3	I	5346813	W	M	12/09/1972

## Property Summary

Involvement	Description
DIG	ARTICLE: EVIDENCE YEVD digital photos of Accident scene

## Summary Narrative

Victims were injured from rolling over in an ATV on private property.

090805HCC3840

09-17056

Supplement No  
ORIG

# Incident Report

## Irving Police Department

### OTHER PERSON 1: (b)(6)

Involvement	Invi No	Type	Name	MNI	Race
OTHER PERSON	1	Individual	(b)(6)	5681118	WHITE
Sex	DOB	Age	Juvenile?	Height	Weight
MALE	08/28/1970	38	No	5'09"	190#
				Hair Color	Eye Color
				BLACK	BROWN
Type	(DL or State ID Card) Operator License			ID No	OLS
				(b)(6)	TEXAS
Phone Type	Phone No				
Cell	(b)(6)				

### COMPLAINANT/VICTIM 1: (b)(3):CPSA Section 25(c)

Involvement	Invi No	Type	Name	MNI	
COMPLAINANT/VICTIM	1	Individual	(b)(6)	5046295	
Race	Sex	DOB	Age	Juvenile?	
WHITE	MALE	02/03/1953	56	No	
			Height	Weight	
			5'11"	210#	
			Hair Color	Eye Color	
			BROWN	BLUE	
Type	Address			City	State
HOME	(b)(6)				TEXAS
Type	(DL or State ID Card) Operator License			ID No	OLS
				(b)(6)	TEXAS
Phone Type	Phone No		Phone Type	Phone No	
Cell	(b)(6)		Cell	(b)(6)	

### COMPLAINANT/VICTIM 2: (b)(6)

Involvement	Invi No	Type	Name	MNI	
COMPLAINANT/VICTIM	2	Individual	(b)(6)	5809630	
Race	Sex	DOB	Age	Ethnicity	
WHITE	MALE	09/28/1964	44	Hispanic	
			Height	Weight	
			5'06"	200#	
			Hair Color	Eye Color	
			BLACK	BROWN	
Type	Address			City	State
HOME	(b)(6)			FT HOOD	TEXAS
Type	(DL or State ID Card) Operator License			ID No	OLS
				(b)(6)	TEXAS
Phone Type	Phone No				
Cell	(b)(6)				

### WITNESS 1: (b)(6)

Involvement	Invi No	Type	Name	MNI	Race	Sex
WITNESS	1	Individual	(b)(6)	5809632	WHITE	MALE
DOB	Age	Juvenile?				
11/19/1980	28	No				
Type	Address			City	State	
HOME	(b)(6)			Irving	TEXAS	
Type	Social Security Number			ID No		
				(b)(6)		
Phone Type	Phone No					
Cell	(b)(6)					
Employer/School	Location					
(b)(6)	(b)(6)					
City	State					
Irving	TEXAS					

### WITNESS 2: (b)(6)

Involvement	Invi No	Type	Name	MNI	Race	Sex
WITNESS	2	Individual	(b)(6)	5277822	WHITE	MALE
DOB	Age	Juvenile?	Height	Weight	Hair Color	Eye Color
05/13/1970	39	No	6'01"	205#	BLONDE/STRAWBERRY	BLUE
Type	Address			City	State	
HOME	(b)(6)			CARROLLTON	TEXAS	
ZIP Code	75007					
Type	(DL or State ID Card) Operator License			ID No	OLS	
				(b)(6)	TEXAS	
Phone Type	Phone No					
Cell	(b)(6)					
Employer/School	Location					
(b)(6)	(b)(6)					
City	State					
Irving	TEXAS					

### WITNESS 3: (b)(6)

Involvement	Invi No	Type	Name	MNI	Race	Sex
WITNESS	3	Individual	(b)(6)			
DOB	Age	Juvenile?	Height	Weight	Hair Color	Eye Color
Type	Address			City	State	
HOME	(b)(6)					
ZIP Code						
Type	(DL or State ID Card) Operator License			ID No	OLS	
				(b)(6)	TEXAS	
Phone Type	Phone No					
Cell	(b)(6)					
Employer/School	Location					
(b)(6)	(b)(6)					
City	State					
Irving	TEXAS					

Report Officer  
967/PACOS, LAWRENCE

Printed At  
09/23/2009 15:29

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Attachment 3

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090805HCC3840

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ORIG

# Incident Report

## Irving Police Department

### WITNESS 3: (b)(6)

Involved	Invt No	Type	Name	MNI	Race	Sex
WITNESS	3	Individual	(b)(6)	5346813	WHITE	MALE
DOB	Age	Juvenile?	Height	Weight	Hair Color	Eye Color
12/09/1972	36	No	5'07"	200#	BLACK	BROWN
Type	Address			City	State	
HOME	(b)(6)			Irving	TEXAS	
ZIP Code						
75060						
Type	ID No			DLS		
(DL or State ID Card) Operator License	(b)(6)			TEXAS		
Type	ID No					
Social Security Number	(b)(6)					
Phone Type	Phone No					
Cell	(214) 876-8058					
Employer/School				Location		
(b)(6)				Irving TEXAS		

Property		Item	Involvement	Description	In Custody?	Type	Class
		1	DIGITAL PHOTOS/CRIME SCENE PHOTOS	digital photos of Accident scene	No	A	EVIDENCE
		Article EVIDENCE (PHOTOS/MOBILE VIDEO/ALL OTHER)					

### Narrative

6/22/09 at approx 2005 hrs., Victim 1 ((b)(3):CPSA Section 25) and victim 2 ((b)(6)) were riding around in a 2009 Kawasaki Teryx 4wd ATV in the pasture behind Lindamood Demolition located at 2030 S. Nursery. ((b)(6)) was driving the vehicle and ((b)(6)) was the passenger. It is a two seater ATV.

((b)(6)) said they were driving around crossing through the creeks just having fun. They came up out of the creek bed and approx. 100 ft from the creek ((b)(3):CPSA Section 25) made a hard lefthand turn causing the vehicle to roll over onto the passenger side. The terrain was very grassy and rutted. ((b)(6)) said when got up he noticed Lindamood was stuck under the ATV. The rollbar was on top of Lindamood's neck and ((b)(6)) said he was turning blue. ((b)(6)) tried to lift the ATV off of him but could not due to the weight of the ATV and his own injuries. There were others in the area riding 4 wheelers who saw the ATV rolled over and came over to help lift it.

Witness 1 ((b)(6)) was riding a 4 wheeler and saw the ATV rolled over. He did not witness the accident. Lynch helped lift the ATV off of Lindamood.

Witness 2 ((b)(6)) was also riding a 4 wheeler and helped lift the rolled over ATV. He did not witness the accident.

Witness 3 ((b)(6)) was in another 4wd ATV similar to the one that Rolled over. He did not witness the Accident and helped push it off.

There was a Cooler that was spilled over approx 3 feet from the rolled over ATV that contained ice and 12oz bottles of Coorslight beer. Both ((b)(3):CPSA Section 25) smelled of alcohol.

Op1 (Mark Luna) came to the scene after he heard what happened. He did not witness anything. Officers administered the HGN test on him to be sure he was not intoxicated. He Drove firefighters and Victim 2 out from the field in A black Ford F250 4x4 back to the yard where IFD medic 3 was waiting.

Lindamood was Airlifted by Careflight to Baylor Dallas Due to the severity of his injuries and lack of access to the area by IFD.

As of this time there was no Update of Lindamood's Injuries. He was partially conscious and breathing when he left the scene.

Digital photos were taken of the accident scene and saved on the J Drive.

Report Officer	Printed At	Page
967/PACOS, LAWRENCE	09/23/2009 15:29	3 of 4
Attachment 3		9

090805HCC3840

09-17056

Supplement No  
ORIG

# Incident Report Irving Police Department

## Narrative

Report Officer  
967/PACOS, LAWRENCE

Printed At  
09/23/2009 15:29

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Attachment 3

10

09/24/2009 6:06PM (GMT-04:00)

090805HCC3840

**09-17056**

Supplement No  
0001

**Incident Report  
Irving Police Department**



305 N O'Connor Rd  
Irving TX 75061

(972) 721-2437

Reported Date  
**06/23/2009**  
Report Type  
**INFO ONLY**  
Officer  
**PACOS, LAWRENCE**

**Administrative Information**

Agency <b>Irving Police Department</b>		Report No <b>09-17056</b>	Supplement No <b>0001</b>	Reported Date <b>06/23/2009</b>	Reported Time <b>01:41</b>	CAD Seq No <b>090614256</b>
Status <b>REPORT PENDING/INVESTIGATE</b>			Report Type <b>INFORMATION ONLY</b>			
Location <b>2030 S NURSERY RD , IR</b>				City <b>Irving</b>	Zip Code <b>75060</b>	Rep Dist <b>2408</b>
Area <b>PD1</b>	Beat <b>24</b>	From Date <b>06/22/2009</b>	From Time <b>20:05</b>	Officer <b>967/PACOS, LAWRENCE</b>		
Assignment <b>PATROL DIVISION</b>		Entered by <b>967</b>	Assignment <b>PATROL DIVISION</b>		RMS Transfer <b>Successful</b>	Approving Officer <b>263</b>
Approval Date <b>06/23/2009</b>		Approval Time <b>04:06:30</b>				

**Narrative**

6/23/09 at approx. 0136 hrs. I was contacted by Jennifer from the Dallas County M. E. She informed me that Victim 1 (**(b)(3):CPSA Section**) had passed away from his injuries. Her Office had not had a chance to examine the body but the Baylor ER where (**(b)(3):CPS**) was Careflighted to told her they he had Chest Injuries and some kind of rupture in his heart.

Sgt. Coleman was notified.

No Further

Report Officer  
**967/PACOS, LAWRENCE**  
Attachment 3

Printed At  
**09/23/2009 15:29**

Page 1 of 1

# Incident Report

## Irving Police Department

09-17056

Supplement No  
0002

305 N O'Connor Rd  
Irving TX 75061

(972) 721-2437

Recorded Date  
07/08/2009  
Report Type  
INFO ONLY  
Officer  
HENNIG, JOE

### Administrative Information

Agency	Report No	Supplement No	Recorded Date	Reported Time	CAD Seq No
Irving Police Department	09-17056	0002	07/08/2009	08:38	090614256
Status	Report Type				
REPORT PENDING/INVESTIGATE	INFORMATION ONLY				
Location	City	Zip Code	Rep Clai		
2030 S NURSERY RD , IR	Irving	75060	2408		
Area	Beat	From Date	From Time	Officer	
PD1	24	06/22/2009	20:05	611/HENNIG, JOE	
Assignment	Entered by	Assignment			
CRIMINAL INVESTIGATIONS/PERSONS	611	CRIMINAL INVESTIGATIONS/PERSONS			
RMS Transfer	Approving Officer	Approval Date	Approval Time		
Successful	526	07/08/2009	12:53:01		

### Narrative

ON 7-7-09 I RECEIVED A LETTER FROM DOCTOR GWIN AT THE DALLAS COUNTY MEDICAL EXAMINERS OFFICE. THE LETTER STATED THAT THE CO'S CAUSE OF DEATH WAS: BLUNT FORCE INJURIES. THE CO'S MANNER OF DEATH WAS: ACCIDENT.

THERE IS NO OFFENSE.

NO FURTHER INVESTIGATION REQUIRED.

CASE CLOSED, RECORDS ONLY.

Report Officer  
611/HENNIG, JOE

Printed At  
09/23/2009 15:29

Page 1 of 1

# Incident Report

## Irving Police Department

### Narrative

married to his wife, (b)(6), for the past 30 years. The victim was supposed to be going to talk to the boys. It was my understanding that they believed the victim was about to talk to them about what was going on with his wife and about his will. It is their understanding at the time that I met with them that the will said his property was to be distributed fifty percent to his wife and ten percent to each of the kids. The victim has five kids, (b)(6)

(b)(6) daughter from her first marriage. (b)(6) said that now they have heard that the victim's will gave 100 percent to his wife. They tried to meet with (b)(6) one day to look at the will and had their probate attorney with them but (b)(6) left and will not let them see the will. They also said that after this happened that they never saw the victim's wife, (b)(6), grieve.

It is (b)(6) contention that it is possible that (b)(6) intentionally killed the victim for the victim's wife. I told them that I would try to talk with (b)(6) but that there was no guarantee that he would talk to me.

On 8-5-09 I obtained a copy of the victim's autopsy report and it did not state anything about any injuries to the victim's legs. The report described head trauma, neck trauma, blunt torso trauma, left chest abrasions, rib fracture but did not show any damage below the ribs.

On 8-5-09 I called and talked to doctor Qwin who is the doctor who performed the victim's autopsy. He confirmed what the autopsy report stated about no injuries to the victim's legs. He said that he did not do x-rays but that he had about 15 pages of paperwork from Baylor hospital where the victim was treated. He said that there was nothing in the paperwork about any injuries to the victim's legs. He said that he would re-order the paperwork from Baylor to see if there was anything else that he didn't get the first time. Dr Qwin said that it would probably be the next week before he got the paperwork and that he would call me when he got it.

On 8-5-09 I called the number in the original report for (b)(6), and found that this number was disconnected.

On 8-5-09 I called the number for (b)(6) that I had received from (b)(6). I left a message for him to call me back.

On 8-6-09 (b)(6) called me back and left me a message. I called him back the same day and talked to him. He said that he was now living in Killeen and that he may be coming back to Irving soon. He said that he would call me back as soon as he knew when he was coming back. He called me back later that day and I set an appointment to meet him here at the station on 8-7-09 around 9:30am.

On 8-7-09 (b)(6) called and left me a voice mail stating that he was not going to make the appointment. I called him back and he said that he didn't have a car. He said that he may or may not be coming to Irving to pick up some doors. He wanted me to come to Killeen to talk to him. I told him that I would call him back.

On 8-10-09 Doctor Qwin called and left me a voice mail stating that he had the medical records he was waiting for from Baylor. I called him back and left a message for him.

On 8-13-09 I received a voice mail from (b)(6) asking me about the status of the case. I called him back and told him that I was talking with the doctor that did the autopsy. I also told him that I had talked with Michael on the phone but had not met with him.

On 8-13-09 I talked to doctor Qwin who said that he received the records from Baylor and that they did not show any injury to the victim's legs. Doctor Qwin said that he also did not see any injury to the victim's legs.

On 8-13-09 I called (b)(6) back and told him that the victim had no injury to his legs. (b)(6) said that he was going to call the funeral home and talk to them again about the victim's leg injuries. We talked about what had happened with the victim and that if there was no damage to the legs that this would take away from their theory that Michael hit the victim while he was standing outside the ATV.

On 8-13-09 I talked with (b)(6) who said that he might be coming to Irving this weekend. He said that he would call me back to schedule the appointment. I talked to him again later that day and gave him my cell phone number so he could call me when he arrived. I told him that I was off but that if he called me I would come in and talk to him. (b)(6) was to call and meet with me on Saturday. Michael did not call me.

090805HCC3840

09-17056

Supplement No  
0003

# Incident Report

## Irving Police Department

### Narrative

On 8-24-09 I received a voice mail from Doctor Qwin stating that the family consented to tissue harvesting. He said that the damage to the victim's legs may have been the harvesting of the leg bones. I called the doctor back and left him a message asked him if the harvesting would have taken place after the autopsy.

On 8-25-09 Doctor Qwin I talked to Doctor Qwin who said that RTI (transplant/tissue) people would have taken the skin and tissue and possibly bone after the autopsy was completed.

On 8-25-09 I called and left a voice mail for (b)(6) to call me. (b)(6) has been cooperative and friendly during each of my conversations with me. He has stated that he does not have a car to drive back to Irving. He's also made the comment that he doesn't want to miss any work because he needed the money.

On 8-25-09 I called and talked to (b)(6) I told him about the harvesting of the tissue and bone. I told him that I was still trying to meet with (b)(6)

On 8-8-09 I received a copy of the victim's autopsy report which showed the cause of death as: Blunt force injuries. The manner of death was: Accident. The autopsy report showed that the victim's postmortem blood, alcohol and acetone was 0.12 percent ethanol. The vitreous alcohol and acetone level was 0.14 percent ethanol.

On 9-10-09 (b)(6) called me asking about the status of the investigation. I told him that I still had not been able to meet with (b)(6) and did not have any new information.

On 9-11-09 I discussed this case with Sergeant Rowan. I had previously talked with him and made him aware of the details in this case. I told him that (b)(6) was not going to come to Irving and that if I wanted to talk to him I was going to have to go to Killeen. Due to the victim's injuries there is nothing to indicate that the victim was outside of the vehicle or that there was any other foul play. The only thing in dispute, according to the victim's sons, is whether or not the victim was the driver or the passenger in the ATV. There is nothing at this time to dispute the witness, (b)(6), account that the victim was the driver. Regardless if the victim was the driver or the passenger there is nothing to indicate that this incident was anything other than an accident. There is no known criminal offense. Sergeant Rowan and I agreed that there was no need for any further investigation.

On 9-15-09 I called and talked to (b)(6) about the case. He agreed based on what I had found out about the victim's injuries that the victim was not hit by the ATV as they originally thought. He agreed that it was an accident with the only thing in dispute being whether or not he was the driver. I told him that either way (if he was the driver or passenger) there was no criminal offense and that nothing further was going to be done on the case. He stated that he thought the Irving Police department should have done more at the time of the incident.

This case is closed, Records only.

No further investigation is required.

**Task No: IDI 090805HCC3840**

**Date: 10-06-2009**

**STATUS OF MISSING DOCUMENT(S)**

**The official records below were requested for this investigation report, but could not be obtained.**

Police Accident Scene Photographs

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Date: 10-06-2009

Investigator No: 9080

**Regional Office: CFIW**

**Supervisor No:** \_\_\_\_\_

--

TC 32

X097 0058 #79

Kaur, Amritpal

JUL 06 2009

From: mecap@cpsc.gov  
 Sent: Friday, June 26, 2009 8:30 AM  
 To: Hazard; Wierdak, Dennis; Nash, Yolanda  
 Cc: Margolies, Philip; Cohn, Murray  
 Subject: MECAP Report

ISSUE 41

06/26/2009 08:30:03

Medical Examiner's/Coroner's Case No. = 2040-09  
 Medical Examiner's/Coroner's Name = Dr. Jeffrey Barnard  
 Date of accident = 06/22/09  
 Date of death = 06/22/09  
 Accident location - city = Irving  
 Accident location - state = Texas

Your name = Mary Brownlee  
 Office = Dallas County Medical Examiner's Office  
 City = Dallas  
 State = Texas  
 County = Dallas  
 Telephone = 214-920-5900  
 Email address = [mbrownlee@dallascounty.org](mailto:mbrownlee@dallascounty.org)

Brief description of accident sequence = A 56 year old male was driving an ATV in a flat field with very tall grass when he made a sharp left turn causing the ATV to fall over to the left on top of him.

Name, address and telephone number of any state/local personnel who investigated the accident = Irving Police Department Report # 09-17056 972-721-2369

Type of consumer product involved = 2009 Kawasaki Tery X  
 Manufacturer and brand name of product =  
 Product model and serial numbers =  
 Cause of death = Accident due to Blunt force injuries  
 Is product available for examination? =  
 if yes, where? =

For processing at CPSC:  
 Report received by: \_\_\_\_\_  
 Chief Med. Exam. Rpt ( )  
 Copy for MECAP News ( )  
 Regular MECAP ( )  
 Document No. \_\_\_\_\_



**090810HNE4665**

Information contained in this report was obtained from a police report, coroner's report and a death certificate.

On 08/08/09, the victim's father, accompanied by his three children ages 10-year-old daughter, 8-year-old son and 3-year-old daughter, was house sitting for his vacationing employer. The father borrowed the employer's "Mule" Utility Vehicle and drove his children to visit a friend. Helmets were not worn by any of the occupants riding in the "Mule" Utility Vehicle.

Upon their arrival, his friend was mowing his lawn, but had stopped and parked the lawn mower. The father removed himself from the vehicle to talk with his friend, while his children remained in the vehicle.

The victim's 10-year-old sister and 8-year-old brother asked their father if they could drive the "Mule" and he replied back with a yes. The victim's 10-year-old sister who was the first one to drive the "Mule" did not have any problems. When the 8-year-old son began to drive, he lost control and collided into a tree at the end of the driveway, causing the "Mule" to overturn and eject all passengers. The roll bar of the "Mule" landed directly on the victim's (3-year-old-sister) chest/neck area, pinning her underneath it. The "Mule" was immediately lifted off the victim by her father and his friend. Emergency services was summoned to the scene and CPR was administered to the victim.

The victim was transported to the hospital for further examination. She was pronounced by the coroner with the cause of death determined to be mechanical asphyxia due to compression under vehicle. The 8-year-old-male was transported to a hospital where he was treated for minor injuries. The 10-year-old-female did not sustain any injuries and did not require any medical assistance.

**NOTE:** The father stated that his 8-year-old son had driven the "Mule" 30 or 40 times prior to the incident.

**PRODUCT INFORMATION:**

Kawasaki 2002 Utility Vehicle  
Model: Mule  
VIN: JKIAFCE102B512185

**ATTACHMENTS:**

1. Police Report
2. Photos
3. Coroner's Report
4. Death Certificate
5. Contact Sheet

1. Agency COLUMBIA COUNTY SHERIFFS OFF	2. Div/Precinct New York State	3. ORI NY 0100000		5. Case No.	6. Incident No. 14116
7,8,9. Date Reported (Day, Date, Time) SATURDAY 08/08/2009 18:44		10,11,12. Occurred On/From (Day, Date, Time) SATURDAY 08/08/2009 18:44		13,14,15. Occurred To (Day, Date, Time)	
16. Incident Type ACCIDENT ATV ACC EX WMV			17. Business Name		
19. Incident Address (Street Name, Bldg. No., Apt. No.) 100 HARRINGTON DRIVE					
20. City/State/Zip AUSTERLITZ NEW YORK					
21. Location Code (FSL ED) AUSTERLITZ TOWN 1151		23. No. of Victims 0	24. No. of Suspects 0	26. Victim also Complainant? NO	
Location Type YARD					

## ASSOCIATED PERSONS

25. TYPE	Name (Last, First, Middle, Title)	DOB	Street Name Bldg., Apt.No., City, State, Zip	Res Phone Bus Phone
PERSON INTERVIEWED	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
PERSON INTERVIEWED	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
PERSON INTERVIEWED	MOORE, JEREMY, M	12/22/1978	62 BENICH LANE HOLLSDALE NY	518699-0181
PERSON INTERVIEWED	WALDORF, MELISSA	12/21/1980	1406 CTY RT 7A COPAKE NY 12516	518329-0335 518310-0910
PERSON INTERVIEWED	ROWEN, CHRISTOPHER, J	11/27/1970	100 HARRINGTON DRIVE AUSTERLITZ NY	518392-2044
PERSON NOT (YET) INTERVIEWED	PINK, JED		267 HARRINGTON DR AUSTERLITZ NY	518753-8500
PERSON REPORTING	CASEY, ROWEN		100 HARRINGTON DRIVE AUSTERLITZ NY	518392-2044
VICTIM	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

## VICTIM

Name	27. DOB	28. Age	29. Gender	30. Race	31. Ethnicity	32. Handicap	33. Residence
[REDACTED]	[REDACTED]	6	[REDACTED]	[REDACTED]	[REDACTED]		

## VEHICLE

59. Vehicle Status IMPOUNDED	60. License Plate No.	61. State NY	62. Exp. Yr.	64. Value
63. Plate Type	65. Year 2002	66. Make KAWASAKI (JAPAN)	67. Model MOTORCYCLE	
68. Style ENCLOSED BODY, NONREMOVABLE ENCLOSURE		69. VIN 1K1AFCE102B512185	70. Color(s)	
71a. Towed By CHATHAM TIRE		71b. Towed To CCSO		
72. Vehicle Notes ATV "Mule" involved in Fatal Accident				

## NARRATIVE

Date of Action	Date Written	Officer Name & Rank
08/08/2009	08/08/2009	GROLL, PETER (CMO)
Narrative		

Officer assigned for an ATV accident involving a 7 y/o child.

Date of Action	Date Written	Officer Name & Rank
08/09/2009	08/09/2009	BRAY, LOUIS (DEPUTY)
<b>Narrative</b>		
<p>ER48. Deputy Bray was dispatched to an ATV accident at 100 Harrington Dr in the Town of Austerlitz. Deputy Bray arrived on the scene at the same time as Chatham Rescue Squad. Upon arrival, a Green Kawasaki Mule was observed next to a tree, just into the driveway at 100 Harrington Dr. Laying on the ground next to the "Mule" was an unresponsive female toddler, who was later identified as [REDACTED]. EMS personnel immediately began efforts to revive the child, and transported her from the scene ASAP to Columbia Memorial hospital, where she was pronounced dead at 8:16pm. While on scene, Deputy Bray interviewed the two adults that were present at the time of the accident, and they were PI Jeremy M. Moore, and PI Christopher J. Rowen. Through the interview, it was learned that the resident at this address is PI Rowen. It was also learned that there were 3 children on the "Mule" at the time of the accident. The "Mule" came from a residence at 367 Harrington Dr, which is where PI Moore is caretaking. PI Moore was there with all 3 children, and they rode the "Mule" together to PI Rowen's house to visit. Once they were on scene at PI Rowen's house, the children wanted to ride the "Mule" and PI Moore allowed them to do so. The driveway at this residence is u-shaped, with two entrances off of Harrington Dr. The "Mule" was being operated by [REDACTED] PI [REDACTED], and the deceased victim was the middle passenger. Their [REDACTED], PI [REDACTED] was the right side passenger. They took the "Mule" out of the driveway, drove on Harrington Dr to the other entrance to the driveway, and reentered it. Once back in the driveway, the "Mule" struck a tree with the left front, and this caused it to overturn. Once it overturned, the passengers were ejected, and the roll bar of the "Mule" landed directly on the chest/neck area of the victim, pinning her underneath it. PI Moore, and PI Rowen did not actually see the accident, because their view was obstructed, but they could hear it. They both ran to the scene, and found the victim pinned underneath. They lifted the "Mule" off of her, and called for help.</p> <p>As patrol interviewed PI Moore, it was noticed that he had an odor of an alcoholic beverage coming from his breath as he spoke. Because he was not the driver of the ATV, no further testing was performed on him regarding his level of impairment or intoxication.</p> <p>Also responding to the scene were C1, Sheriff Harrison, C3 Captain Bartlett, 3C35 Inv Dunsbaugh, Deputies Bauhoff, Dunsbaugh, Filli, and Grzeskow. Deputy Bauhoff obtained a statement from PI Rowen. Inv Dunsbaugh secured photographs at the scene, and Deputies Dunsbaugh and Filli plotted the accident scene with the Total Station.</p> <p>The "Mule" was towed from the scene by Chatham Tire, and was brought to CCSO to be impounded. The owner of the "Mule" is away on vacation, and his name was provided to Deputy Bray by PI Rowen as "Ted Fink" with a cell phone of 518-755-8500.</p> <p>Deputy Bray also contacted the NYS Child Abuse Hotline to make a report for Inadequate Guardianship, for PI Moore allowing the children to drive/ride the "Mule" without any protective equipment. The report was called in, and accepted by Colleen Altard-Smith, and the Call ID is 26340918.</p> <p>An MV104A (TraCS) was completed, along with the MV104D (report of Fatal), and the MV104 EN (Early Notification of Fatal). Deputy Bray faxed the MV104 EN on 08/09/09, as required.</p>		

### ADMINISTRATIVE

74. Inquiries	75. NYSPIN Message No.	76. Complainant Signature	
77. Reporting Officer Signature (Include Rank) DEPT. TY LOUIS BRAY	78. ID No. 53	79. Supervisor Signature (Include Rank) SERGEANT MICHAEL FRANKIE	80. ID No. 41
81. Status PENDING INVESTIGATION	82. Status Date 08/09/2009	83. Notified/LOT	
			Solvability Total 0

Columbia County Sheriff's Office  
85 Industrial Tract  
Hudson, NY 12534

Deposition of Witness to Accompany Complaint or Information (C.P.L. 100.20)

State of New York : County of Columbia

Case #2009-144116

Name Christopher J Rowen

Date of Birth: 11/27/1970

Address 100 Harrington Dr Town of Austerlitz, NY

Statement Date: August 8<sup>th</sup>, 2009

Phone Number: 518-392-2044 Time Began: 8:03 PM

STATES AS FOLLOWS

*ch* I, Christopher Rowen, am a resident of the Town of Austerlitz at 100 Harrington Drive. Today at about 6:30pm I was mowing my lawn when Jerney Moore and his 3 children came to the lower driveway of my residence in an ATV "MULE". I stopped mowing the lawn and Jerney and I talked for a moment. One of Jerney's children asked if they could ride the "MULE" and he told them they could. They made a loop in the driveway onto the road, came back into the driveway and hit a tree with left front tire causing the "MULE" to roll over, pinning [redacted], Jerney's 4 y/o daughter. Jerney and I rushed over and lifted the vehicle off of her. The bar was across her neck and chest. I called 911 from my house phone and advised them of the incident and was told to call back if she stopped breathing. I went outside with my cel-phone and Jerney told me she wasn't breathing. I re-called 911 from my cel-phone and received CPR instructions. I was being helped with CPR by [redacted] Uncle Matt, who came from the house Jerney is watching. I was relieved from performing CPR by volunteer firefighters. The ambulance arrived and took over care for [redacted]. Jerney's [redacted] was also injured in the accident and had a bloody nose and mouth. [redacted] daughter [redacted] was also on the "MULE" during the roll over, but was uninjured. *ch*

**NOTE:** False statement made herein are punishable as a class A Misdemeanor pursuant to section (210.45) of the New York State Penal Law.

*ch*  
Time Statement Ended: 8:26 PM

*ch*  
[Signature]  
DEPONENT

[Signature]  
WITNESS #126

Columbia County Sheriff's Office  
85 Industrial Tract  
Hudson, NY 12534

Deposition of Witness to Accompany Complaint or Information (C.P.L. 100.20)

State of New York : County of Columbia

Case # 144116

Name: Jeremy M. Moore

Date of Birth: 12/22/78

Address: 62 HENICH LANE, HILLSTADT NY 12529

Statement Date: 8/08/09

Phone Number: 649-0181

Time Began: 9:42 am

JM

STATES AS FOLLOWS

I LIVE AT 62 HENICH LANE APT. B3  
IN HILLSTADT. I LIVE THERE BY MYSELF.

I HAVE THREE CHILDREN. [REDACTED]  
[REDACTED] AND [REDACTED]

THEY ARE MY CHILDREN WITH MELISSA WARDON.  
MELISSA AND I HAVE BEEN MARRIED SEVEN YEARS.  
WE HAVE BEEN SEPARATED FOR ABOUT FIVE  
YEARS.

MELISSA LIVES IN CORAON WITH HER  
BOYFRIEND BRIAN CROSBY.

MELISSA AND I HAVE JOINT CUSTODY OF  
THE CHILDREN THROUGH FAMILY COURT. JM

NOTE: False statement made herein are punishable as a class A Misdemeanor pursuant to section (210:45) of the New York State Penal Law. JM

Time Statement Ended: 10:20 am

[Signature]  
DEPONENT

[Signature] #82  
WITNESS

Columbia County Sheriff's Office  
85 Industrial Tract  
Hudson, NY 12534

Deposition of Witness to Accompany Complaint or Information (C.P.L. 100.20)

State of New York : County of Columbia

Case # 144116

Name JEREMY MOORE

Date of Birth: 12/22/78

Address: 62 HENICH LANE, HILLSDALE NY 12529

Statement Date: 8/08/09

Phone Number: 649-0181

Time Began: 9:42 pm

JM

STATES AS FOLLOWS

I HAVE THE KIDS EVERY OTHER WEEKEND. THIS IS MY WEEKEND WITH THE KIDS.

I HAVE BEEN HOUSE SITTING FOR A FRIEND SINCE FRIDAY. HIS NAME IS JED FINK AND HE LIVES AT 367 HARRINGTON DRIVE IN HILLSDALE. JED AND HIS FAMILY ARE OUT IN CAPE COD RIGHT NOW.

THE KIDS WERE STAYING WITH ME AT JED'S HOUSE.

TODAY WE ALL (THE KIDS AND I) JUST HUNG OUT AT JED'S HOUSE.

AROUND 6:30PM TONIGHT I DECIDED TO TAKE THE KIDS FOR A RIDE IN JED'S CAR.

NOTE: False statement made herein are punishable as a class A Misdemeanor pursuant to section (210.45) of the New York State Penal Law. JM

Time Statement Ended: 10:20 pm

[Signature]  
DEPONENT

[Signature]  
WITNESS

Columbia County Sheriff's Office  
85 Industrial Tract  
Hudson, NY 12534

Deposition of Witness to Accompany Complaint or Information (C.P.L. 100.20)

State of New York : County of Columbia i Case # 144116  
Name: Jeremy Moore Date of Birth: 12/22/78  
Address: 62 Henrich Lane, Housdale NY 12529  
Statement Date: 08/08/09 Phone Number: 649-0181 Time Began: 9:42 pm

STATES AS FOLLOWS

JM  
MULE. THE MULE IS A KAWASAKI  
(4) FOUR WHEEL DRIVE MULTI PURPOSE PLYMOUTH  
VEHICLE. I DROVE THE MULE TO CHRIS  
ROWEN'S HOUSE. CHRIS LIVES AT 100  
HARRINGTON DRIVE. ALL THREE KIDS WERE  
SITTING ON THE FRONT SEAT WITH ME.  
THE FRONT SEAT IS A LONG BENCH SEAT.  
NOBODY HAD SEAT BELTS ON. THERE ARE  
SEAT BELTS ON THE MULE BUT THEY ARE  
TUCKED UNDER THE SEAT.  
WHEN WE GOT TO CHRIS'S HOUSE HE  
WAS MOWING THE LAWN. HE STOPPED HIS  
MOWER AND PARKED IT IN FRONT OF HIS GARAGE. JM

NOTE: False statement made herein are punishable as a class A Misdemeanor pursuant to section (210.45) of the New York State Penal Law JM

Time Statement Ended: 10:20pm

JM  
DEPONENT

Inv. [Signature] #82  
WITNESS

Columbia County Sheriff's Office  
85 Industrial Tract  
Hudson, NY 12534

Deposition of Witness to Accompany Complaint or Information (C.P.L. 100.20)

State of New York : County of Columbia

Case # 144116

Name: Jeremy Moore

Date of Birth: 12/22/78

Address: 62 Hemlock Lane, Hurdware NY 12579

Statement Date: 8/08/09 Phone Number: 649-0181 Time Began: 9:42 pm

STATES AS FOLLOWS

JM  
I PARKED THE MULE RIGHT BEHIND HIS MOWER AND GOT OFF. THE KIDS STAYED ON THE MULE. [REDACTED] ASKED IF SHE COULD DRIVE THE MULE AND I SAID YEA. I TOLD HER TO DRIVE AROUND THE LITTLE CUL-DE-SAC INSIDE CHRIS'S DRIVEWAY. [REDACTED] DROVE, [REDACTED] SAT IN THE MIDDLE AND [REDACTED] SAT ON THE OUTSIDE ON THE BENCH SEAT. AFTER [REDACTED] DROVE AROUND THE CUL-DE-SAC [REDACTED] ASKED IF HE COULD DRIVE. I TOLD HIM YES. I KNEW [REDACTED] KNEW HOW TO DRIVE THE MULE BECAUSE HE HAS DRIVEN IT 30 OR 40 TIMES BEFORE. [REDACTED] DROVE THE MULE WITH JM

NOTE: False statement made herein are punishable as a class A Misdemeanor pursuant to section (210.45) of the New York State Penal Law. JM

Time Statement Ended: 10:20 pm

[Signature]  
DEPONENT

[Signature]  
WITNESS

Columbia County Sheriff's Office  
85 Industrial Tract  
Hudson, NY 12534

Deposition of Witness to Accompany Complaint or Information (C.P.L. 100.20)

State of New York : County of Columbia : Case # 144116  
Name Jeremy Moore Date of Birth: 12/22/78  
Address: 62 HENICH LANE, HUDSON NY 12529  
Statement Date: 8/08/09 Phone Number: 649-0181 Time Began: 9:42pm

STATES AS FOLLOWS

JM ~~REDACTED~~ NEXT TO HIM ON THE SEAT AND  
~~REDACTED~~ WAS ON THE OUTSIDE. THEY STILL  
DIDN'T HAVE SEAT BELTS ON. CHRIS'S DRIVEWAY  
IS LIKE A HORSE SHOE THAT HAS TWO ENTRANCES  
OUT TO HARRINGTON DRIVE. ~~REDACTED~~ DROVE OUT TO  
HARRINGTON DRIVE AND THEN DOWN HARRINGTON  
DRIVE TO THE OTHER ENTRANCE TO CHRIS'S  
DRIVEWAY. I WAS WATCHING THEM THE WHOLE TIME,  
BUT I LOST SIGHT OF THEM AT ABOUT WHERE  
THE ACCIDENT HAPPENED. I DIDN'T THINK  
~~REDACTED~~ WAS DRIVING TO FAST. I WAS STANDING  
BY THE GARAGE TALKING TO CHRIS. THE MULE IS  
A VERY QUIET MACHINE. NEXT THING I KNEW JM

NOTE: False statement made herein are punishable as a class A Misdemeanor pursuant to section (210.45) of the New York State Penal Law JM

Time Statement Ended: 10:20pm

Jeremy Moore  
DEPONENT

Inv. [Signature] #62  
WITNESS

Columbia County Sheriff's Office  
85 Industrial Tract  
Hudson, NY 12534

Deposition of Witness to Accompany Complaint or Information (C.P.L. 100.20)

State of New York : County of Columbia

Case # 144116

Name: Jeremy M. Moore

Date of Birth: 12/22/78

Address: 62 HENICH LANE, HUDSDALE NY 12529

Statement Date: 8/08/09

Phone Number: 649-0181

Time Began: 9:42 pm

STATES AS FOLLOWS

<sup>JM</sup> I HEARD [REDACTED] AND [REDACTED] SCREAMING.  
CHRIS AND I RAN OVER TO WHERE THEY  
WERE SCREAMING. WE FOUND THE MULE FLIPPED  
OVER ON ITS SIDE. THE ROLL CAGE  
WAS ACROSS [REDACTED] NECK PINNING HER  
UNDER IT. [REDACTED] AND [REDACTED] WENT OFF THE  
MULE AT THAT POINT. CHRIS AND I LIFTED  
THE MULE OFF OF [REDACTED] AND PUT IT BACK  
ON ITS WHEELS.

[REDACTED] WASNT BREATHING, I TRIED TO  
HELP HER AND CHRIS WENT TO CALL 911.

I DID HAVE TWO OR THREE BEERS ABOUT  
A HOUR BEFORE THIS HAPPENED BUT I WASNT DRUNK.

NOTE: False statement made herein are punishable as a class A Misdemeanor pursuant to section (210:45) of the  
New York State Penal Law <sup>JM</sup>

Time Statement Ended: 10:20pm

[Signature]  
DEPONENT

[Signature] #52  
WITNESS

Local Codes 144116 W.90D200110

POLICE ACCIDENT REPORT MV-104A (3/04)

AMENDED REPORT

Header section with fields for Date, Day of Week, Military Time, No. of Vehicles, No. Injured, No. Killed, Not Investigated at Scene, Left Scene, Police Photos.

Vehicle type selection: VEHICLE, BICYCLIST, PEDESTRIAN, OTHER PEDESTRIAN

Vehicle 1 - Driver License ID Number and Vehicle 2 - Driver License ID Number

Driver Name (as printed on license) for both vehicles

Address (Include Number and Street) for both vehicles

City or Town, State, Zip Code for both vehicles

Date of Birth, Sex, Unlicensed, No. of Occupants, Driver's License Class for both vehicles

Name (as printed on license) for both vehicles

Address (Include Number and Street) for both vehicles

City or Town, State, Zip Code for both vehicles

Plate Number, State of Issue, Vehicle Year & Make, Vehicle Type, Ins. Code

Ticket/Arrest Number(s)

Violation Section

Check if involved vehicle is: more than 35 inches wide, more than 34 feet long, overloaded with an overweight permit, overloaded with an over-dimension permit

Check if involved vehicle is: more than 35 inches wide, more than 34 feet long, operated with an overweight permit, operated with an over-dimension permit

Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles



ACIDENT DIAGRAM

Draw the rest part of the diagram in the accident diagram.

Cost of repairs to any one vehicle will be more than \$1000

Unknown/Unable to determine, Yes, No

Vehicle Damage Coding: 1-13 SEE DIAGRAM ON RIGHT

14 UNDERCARRIAGE, 15 TRAILER, 16 OVERTURNED, 17 DEMOLISHED, 18 NO DAMAGE, 19 OTHER

Reference: Name, God/Godess, and Address

Place Where Accident Occurred: County COLUMBIA, Town of ARNSWALD

Road on which accident occurred: 50

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

at 1) intersecting street, or 2) 50 feet miles

ALL INVOLVED

Table with columns: 8, 9, 10, 11, 12, 13, 14, 15, 16, 17 BY, TO 18, Names of all involved, Date of Death Only

Officer's Rank and Signature: Deputy Louis C. Bray III, Badge/ID No. 53, NCIC No. 01300

Station/Beat Sector, Reviewing Officer: James, Date/Time Reviewed: 8/11/2009 09:37

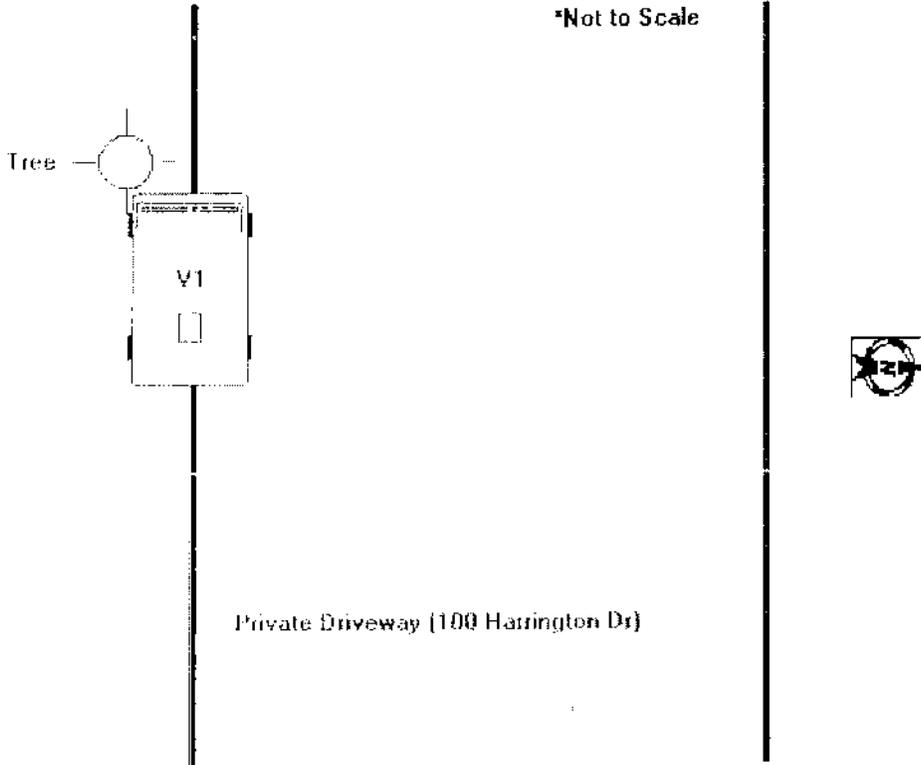
New York State Department of Motor Vehicles  
**POLICE ACCIDENT REPORT**  
MV-104A (3/04)

# DRAFT

Local Codes
144116
M1SQD2000108

**AMENDED REPORT**

Accident Date			Day of Week	Military Time	No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene <input type="checkbox"/>	Left Scene <input type="checkbox"/>	Police Photos <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Month	Day	Year						Accident Reconstructed <input checked="" type="checkbox"/>		
8	8	2009	Saturday	18:44	1	1	1			





# POLICE REPORT FOR FATAL MOTOR VEHICLE ACCIDENTS



# DRAFT

MV-104D (3/02)

Page 1 of 1 Pages

Local Code 109116 MUNICIPALITY OF ...	Accident Date Month: 8 Day: 19 Year: 2009	Military Time 18:44	County COLUMBIA	City/Town/Village ARSTEN, ILL. 7 401 0	No. Killed .	No. Vehicles .	Work Related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Name and Address of Deceased [REDACTED]							

### ACCIDENT DATA

Speed Limit (MPH) 55	Location (Route or Street Name) PRIVATE DRIVEWAY						
Estimated Speed: Vehicle 1 _____ MPH <input checked="" type="checkbox"/> Unknown Vehicle _____ MPH <input type="checkbox"/> Unknown Vehicle _____ MPH <input type="checkbox"/> Unknown							
Vehicle Model (for example, Mustang or Corvette): Vehicle 1 <u>BUICK 3010</u> Vehicle _____ Vehicle _____							
Roadway Surface: <input type="checkbox"/> Concrete <input type="checkbox"/> Blacktop <input type="checkbox"/> Brick or Block <input type="checkbox"/> Dirt <input type="checkbox"/> Slag <input checked="" type="checkbox"/> Gravel <input type="checkbox"/> Stone <input type="checkbox"/> Other							
No. of Lanes 0	Roadway Flow: <input type="checkbox"/> One Way Traffic <input type="checkbox"/> Divided highway, other barrier or barrier type unknown	<input type="checkbox"/> Divided highway, median strip			<input type="checkbox"/> Divided highway, guard rail <input type="checkbox"/> Not physically divided		
EMERGENCY MEDICAL SERVICES *		HOSPITAL INFORMATION					
Time (Military): Notified: _____ 18:44		If the victim was taken to a hospital outside of NYS, give name, county and state of that hospital: 1: COLUMBIA - COLUMBIA-GREENE MEDICAL CENTER, COLUMBIA DIVISION					
Arrived at Scene: _____ 18:57		If the victim was transferred to another hospital (after initial transportation), give the name, county and state of that hospital:					
Arrived at Hospital: _____ 19:40							

### OCCUPANT DATA

Name	Deceased Yes/No	Time of Death	Extricated Yes/No**	Type of Extrication Equip. Used	Air Bags Deployed Yes/No	Not in Vehicle	Initial Point of Impact to Vehicle**
V E H I C L E 1 Driver [REDACTED]	NO		NO		NO	YES	FRONT PASSENGER SIDE
Passenger [REDACTED]	NO		NO		NO	YES	FRONT PASSENGER SIDE
Passenger [REDACTED]	YES	18:44	NO		NO	YES	FRONT PASSENGER SIDE
V E H I C L E 2 Passenger							
V E H I C L E 3 Passenger							

\* This includes any type of EMS service (for example, fire, police, private) If you are unable to furnish the EMS data, please give the name, address and plate number of the ambulances so we can contact them.

\*\* To be "extricated", the victim must be pried from the wreckage Unfastening the seat belt is not considered "extricated"

\*\*\* Indicate the first area of the vehicle that was impacted, for example, right front, undercarriage

### Additional Information

SIGN HERE	Officer's Rank and Signature <i>James C. Barry III</i>	Badge/ID No.	Department	Precinct/Post Troop/Zone	Station/Beat/ Sector	Reviewing Officer	Date/Time Reviewed
	Print Name, Rank and Title [REDACTED]	53	01000				



New York State Department of Motor Vehicles



# EARLY NOTIFICATION OF A FATAL ACCIDENT

### INSTRUCTIONS:

It is for it must be completed and filed in (518) 473-7302 within 24 hours from the date of every fatal accident that occurs in NYS. DMV is responsible for implementing this new Early Notification Program as part of our recent accident reporting requirements. Please remember to submit separately to DMV a completed accident report (the "Police Accident Report," form MV-100AN or form MV-104X) along with the "Police Report for Fatal Motor Vehicle Accidents," form MV-104D and, if applicable, the "Truck & Bus Supplemental Report," form MV-105A.

### ACCIDENT INFORMATION:

Date of Accident <b>8/8/09</b>	Time of Accident <b>18:44</b>	Number of Fatalities <b>1</b>	County of Accident <b>COLUMBIA</b>
Number of Vehicles Involved <b>1</b>	Number of Pedestrians or Bicyclist Involved <b>0</b>	Was a Commercial Vehicle Involved? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Alcohol Involvement Suspected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### DECEASED INFORMATION:

Name of Deceased <b>[REDACTED], [REDACTED]</b>	Date of Death <b>08/08/09</b>
---	----------------------------------

### LAW ENFORCEMENT INFORMATION:

NCIC CODE: <b>NY0100000</b>	LOCAL CODE: <b>144116</b>
PRECINCT: <b>[REDACTED]</b>	ACCIDENT NUMBER: (NYC Only)
REPORTING OFFICER'S NAME <b>DEPUTY LOUIS C. BRAY III</b>	CONTACT TELEPHONE NUMBER: <b>518-828-3344</b>

**COLUMBIA COUNTY SHERIFF'S DEPARTMENT**  
**CRIMINAL INVESTIGATIVE BRANCH**  
**SUPPLEMENTAL REPORT**

Date	Supplement To:	Complainant Name	CIB No
08-09-09	144116	Skylar Waldorf	2009-170

08-08-09

I (Inv Dunsbaugh) was re-called to duty at 18:58 by commo and directed to respond to 100 Harrington Drive in the town of Austerlitz to assist Deputy Bray with a reported serious accident involving a 7y/o and an ATV.

Upon my arrival I met with Deputy Bray and was advised that the victim of the serious injury was ██████████ ██████████ had been taken to CMH by Chatham Rescue prior to my arrival. Deputy Bray further advised that ██████████ brother ██████████ was operating a Kawasaki Mule on the property of Christopher Rowen at 100 Harrington Drive in the driveway with his sister ██████████ sitting next to him on the bench seat of the machine and his other sister ██████████ sitting farthest from him on the seat on the passenger side. Per Deputy Bray, while ██████████ was operating the Mule he struck a tree. The Mule struck the tree in the front of the machine on the drivers side. The impact broke the metal brush guard in the front of the Mule and pushed a part of it back into the body of the machine. The tree was located near the edge of the driveway. The impact caused the Mule to roll onto the passenger side of the machine. ██████████ had apparently fell out of the Mule and was pinned under it by a piece of the roll bar of the machine. The children's father, Jeremy Moore, and Christopher Rowen, a friend of Moore's who is also the property owner at 100 Harrington Drive, ran over to the Mule and lifted it off of ██████████. They contacted 911 and attempted CPR until rescue personnel arrived.

I was advised by Deputy Bray that the Mule belongs to Jed Fink who lives at 367 Harrington Drive. Fink is in Cape Cod at this time vacationing with his family. Jeremy Moore works for Fink and was house sitting for him while he is away. Jeremy Moore borrowed Fink's Mule and rode it to Rowen's house with his children on the seat next to him. When Moore arrived at Rowen's house Rowen was cutting the grass with his lawn mower. Rowen pulled the mower in front of the garage and Moore pulled the Mule in behind him and stopped. Moore got off the Mule to talk with Rowen and Hannah asked if she could drive the Mule. Moore told her that she could and ██████████ drove the Mule around a circular part of Rowen's driveway with ██████████ sitting in between her and ██████████. The driveway at 100 Harrington Drive is a "horseshoe" type driveway that has two entrances to Harrington Drive. Off of that driveway is the circular part of the driveway that leads to the front door of the residence. After ██████████ drove around the circular part of the driveway ██████████ asked if he could drive the Mule. Moore told him that he could. ██████████ drove the Mule with ██████████ sitting in between him and ██████████ on the driveway and out onto Harrington Drive. Then he drove up Harrington Drive and turned into the other entrance to the driveway. The Mule hit the tree at that end of the driveway. ██████████ was transported by the rescue squad to CMH for treatment of minor facial injuries.

Captain Bartlett and Deputy Bauhoff also arrived on scene.

I traveled to CMH and met with Coroner Nero who advised that ██████████ had been pronounced dead at 2016hrs. An autopsy was scheduled at St. Peter's Hospital with Dr. Hubbard on 08-09-09 at 0900hrs.

I interviewed and took a written statement from Moore. Moore gave the same account of the events as stated above from Deputy Bray. While interviewing Moore I detected an order of an alcoholic beverage. I asked Moore if he had been drinking alcohol and Moore replied that he had two or three beers an hour or two before the accident. For further refer to the written statement of Jeremy Moore.

Peck and Peck Funeral Home of Copake was contacted by Coroner Nero to take the body to St. Peter's Hospital.

08-09-09

At 0900hrs I attended the autopsy of ██████████ at St. Peter's Hospital. Present at the autopsy was Dr. Hubbard, Asst. Dana Brown, and Coroner Nero. At the conclusion of the autopsy the cause of death was determined by Dr. Hubbard to be "Mechanical Asphyxia" due to "Compression under vehicle".

Inv to continue.

Investigator Mark Dunsbaugh

110 = 82

INV. 

**COLUMBIA COUNTY SHERIFF'S DEPARTMENT**  
**CRIMINAL INVESTIGATIVE BRANCH**  
**SUPPLEMENTAL REPORT**

---

Date	Supplement To	Complainant Name	C I B. No
08-14-09	144116	Skylar Waldor	2009-170

---

08-13-09

I spoke with NYS Conservation Officer Neil Watt – 914-438-9380, to inquire if he could conduct a vehicle inspection on the "Mule". Off. Watt explained that the "Mule" is not classified as an ATV under NYS Laws. Off. Watt further advised that the "Mule" is classified as a "Utility Vehicle" due to its size and weight. A Utility Vehicle has no classification in NYS VTL. Being that the "Mule" is a Utility Vehicle the only requirement of it is that an orange triangle to be placed on the rear of the vehicle if it is operated on the highway. Off. Watt also advised that ENCO does not inspect Utility Vehicle and suggested that if this office requires an inspection that the inspection should be conducted by a certified dealer of Kawasaki Mules.

08-14-09

I spoke with Melissa Waldorf and Jeremy Moore over the phone and asked if I could speak with [REDACTED] and [REDACTED] in reference to the accident. Both agreed to bring [REDACTED] and [REDACTED] into the CCSO on 08-17-09 at 1pm for an interview.

---

Investigator Mark Dunspaugh

ID # 82



**COLUMBIA COUNTY SHERIFF'S DEPARTMENT**  
**CRIMINAL INVESTIGATIVE BRANCH**  
**SUPPLEMENTAL REPORT**

---

Date	Supplement To:	Complainant Name:	CIB No
08-25-09	144116	Skyilar Waldorf	2009-170

---

Arrangements were made with Cliff Weiglet who is the Service Manager at Columbia Tractor to have a Technician come to the CCSO and inspect the MULE.

Service Technician Terry Eilers came to the CCSO to conduct the inspection. The inspection was done inside the CCSO garage within the CCSO compound.

Eilers reported to have found that a fibrous material was wrapped around the throttle stop which would not allow the machine's engine to come to an idle. Eilers also found that the CV Joint Boot on the passenger side front of the MULE had been torn. This allowed dirt and other debris to enter the CV Joint. Eilers also checked the tires and brakes of all four wheels. Eilers found the brake on the passenger side rear had been damaged. Two bolts were found loose inside the brake drum. The loose bolts rattled around the brake drum during operation and caused damage to the brake pads. The three remaining wheels were found to be in working condition. Eilers reported that the steering appeared in fine working condition. Eilers further stated that the defects that he had found with the MULE could not have been caused by the accident and could not have occurred since the accident. Eilers will complete the inspection report and forward it to me.

I secured photos of the inspection and collected the fibrous material and the bolts from inside the brake drum as evidence.

Inv to continue.

---

Investigator Mark Dunspaugh

ID # 82

INV. 

**COLUMBIA COUNTY SHERIFF'S DEPARTMENT**  
CRIMINAL INVESTIGATIVE BRANCH  
SUPPLEMENTAL REPORT

---

Date	Supplement To	Complainant Name	CIB No
09-10-09	144116	Skylar Moore	2009-170

---

Jed Fink came into the CCSO today with his attorney Salvatore Ferlazzo for an interview.

Fink stated that he and his wife are the owners of the MULE. The MULE was a gift from his mother-in-law and was used as a utility vehicle on Fink's farm. Per Fink the MULE was a 2002 and never had any mechanical problems. Fink stated that he removed the tires in the spring and inspected the brakes. At that time the brakes were operating fine.

Fink stated that he left for a vacation with his family on August 7, 2009. Fink made arrangements with his friend and employee Jeremy Moore to house sit and to take care of the animals on Fink's farm. Fink stated that although they never had a conversation about the MULE, Moore had Fink's permission to operate any vehicles on Fink's property.

Fink stated that he never observed any of Moore's children operate the MULE and never gave permission for any of Moore's children to operate the MULE.

Fink did not wish to give a written statement.

Inv to continue.

---

Investigator Mark Dunspaugh

ID # 82

INV. 

**COLUMBIA COUNTY SHERIFF'S DEPARTMENT**  
CRIMINAL INVESTIGATIVE BRANCH  
SUPPLEMENTAL REPORT

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Date 09-11-09	Supplement To: 144116	Complainant Name: Skylar Waldorf	CIB No 2009-170
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---

Rec'd the report from Columbia Tractor on the inspection.

The report was added to the case file.

S/A Skype authorized the release of the MULE.

I left a message with Fink's Attorney Ferlozzo stating that the MULE can be released.

---

Investigator Mark Dunspaugh

ID # 82

1 NV. 

**COLUMBIA COUNTY SHERIFF'S DEPARTMENT**  
**CRIMINAL INVESTIGATIVE BRANCH**  
**SUPPLEMENTAL REPORT**

---

Date	Suppiement To	Complainant Name:	C.I.B. No.
10-05-09	144116	Skylar Waldorf	2009-170

---

09-11-09  
 The MULL was released to Jed Fink.

10-05-09  
 I reviewed the case with S/Inv Skype and DA Cozzolino. No charges to be filed in this case.

CBI

---

Investigator Mark Dunspaugh

110 - 82



# COLUMBIA COUNTY SHERIFF'S DEPARTMENT

PUBLIC SAFETY BUILDING  
85 INDUSTRIAL TRACT  
HUDSON, NEW YORK 12534

DATE: 09/25/09 BLOTTER/INCIDENT # 144116

RECEIVED FROM: JED FINK

ADDRESS: PO BOX 222 AUSTELL NY 12017

### THE FOLLOWING ITEMS WERE RECEIVED

ITEM (LIST: TYPE-MAKE-MODEL-SERIAL NUMBER, ETC.)

1. KAWASAKI "MULE" UTILITY VEHICLE  
VIN# JKIAFCE102B512185

REASON RECEIVED: ACCIDENT INVESTIGATION

PAGE 1 OF 1 PAGES

PERSON RECEIVED FROM: [Signature]  
SIGNATURE

RECEIVED BY: Jed Fink  
PRINT NAME SIGNATURE

ATTACHMENT #1  
COLUMBIA TRACTOR INC  
PO BOX 660  
841 ROUTE 9H  
CLAVERACK, NY 12513  
518-828-1781  
FAX 518-828-2173

SOLD TO  
COLU28 COLUMBIA COUNTY SHERIFFS OF  
85 INDUSTRIAL TRACT  
HUDSON, NY 12534

SHIP TO

KAWASAKI KAP620E2 SN:JK1AFCE102B512185 HR 832.0 W:00 C:00  
Sold By: WEIGOS PO #: MULE/INSPECTION Date 9/11/09 CUST WORK ORDER WO31444  
Ship By: Tax #:

Tax	D	Qty	Description	Price	Amount
			CHECK THE UNIT OVER FOR ALL PROBLEMS INCLUDING ALL SAFETY ITEMS CHECK ALL SUSPENSION COMPONENTS, STEERING JOINTS AND LINKAGES, TIRES, ENGINE, FRONT AND REAR TRANSMISSION AND ANY THING OTHER PROBLEMS THAT CAN BE FOUND.		
			08/25 LOADED THE TRUCK AND DROVE TO THE LOCATION. LOOKED OVER THE UNIT. FOUND THE FRONT RIGHT CV JOINT BOOT RIPPED. THE JOINT WAS DRY. THE LEFT REAR HALF SHAFT BOOT WAS RIPPED AND WAS ALSO DRY. FOUND ENGINE OIL IN THE AIR FILTER HOUSING. THE ENGINE HAS BLOW BY, IT NEEDS TO BE HONED AND RERINGED. FOUND CLOTH WRAPPED AROUND THE THROTTLE STOP SCREW. THE UNIT WOULD NOT IDLE DOWN RIGHT. FOUND LIGHT BLUE OIL IN PLACE OF THE HYDRAULIC OIL FOR THE TILT BED. THE BED GOES UP SLOW. REMOVED ALL FOUR BRAKE DRUMS. FOUND THE RIGHT REAR BRAKE CAME LOOSE FROM THE AXLE TUBE. THE OTHER THREE BRAKES WERE IN GOOD SHAPE. THE BRAKES DO WORK AND THE PARK BRAKE DOES WORK. IT WAS HARD TO STEER WITH THE BUMPER AGAINST THE TIRE BUT IT DOES STEER STRAIGHT. THE UNIT SHIFTS WELL AND THE BATTERY WAS DEAD. *****DONE*****		
			STOP CHARGE		
			ROAD CALL STOP CHARGE		30.00
			ROAD LABOR		
			** TOTAL ROAD LABOR		196.00

\*\* SUBTOTAL 226.00

Cash Sale

Phone: (518) 828-3344

PAY THIS  
AMOUNT



\$226.00

Unit Information

090810HNE4665

Model: KAF620E2

Vin: JK1AFCE102B512185

Engine: FD620DE291529

Model Year: 2002

Owner: GEORGE HAYNER

ATTACHMENT #1

Retail Purchase Date 05/21/2002

Warranty Expire: 05/21/2003

GTPP NO

GTPP Expire:

Address: PO BOX 1171  
MEXICO, NY 13114-1171

Key Code: No Keycode on File

\*\*\* NO MESSAGES FOR THIS UNIT \*\*\*

\*\*\* NO REPAIR CAMPAIGN FOR THIS UNIT \*\*\*

\*\*\* NO WARRANTY CLAIMS FOR THIS UNIT \*\*\*

Columbia County Sheriff's Office

ATV Fatal accident

Drawn By

Deputy W. Dunsbaugh

Date Drawn

08/08/2009

Incident Date:

08/08/2009

Location:

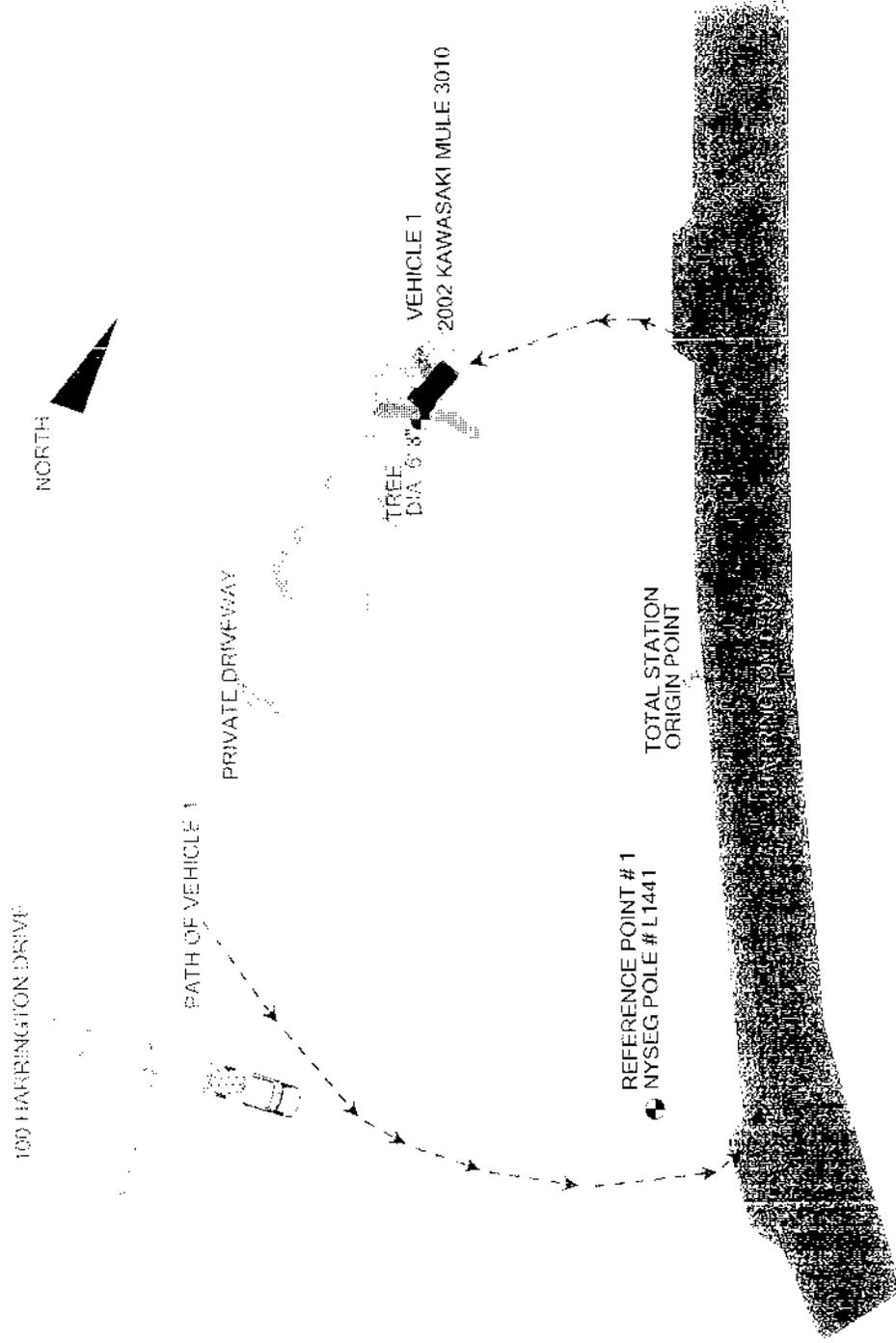
100 Harrington Drive Austerlitz

Case Number

2009-144116

Scale

1" = 35'



REFERENCE POINT # 2  
NYSEG POLE # L110

Columbia County Sheriff's Office

ATV Fatal accident

Case Number  
2009-144116

Drawn By

Date Drawn  
08/08/2009

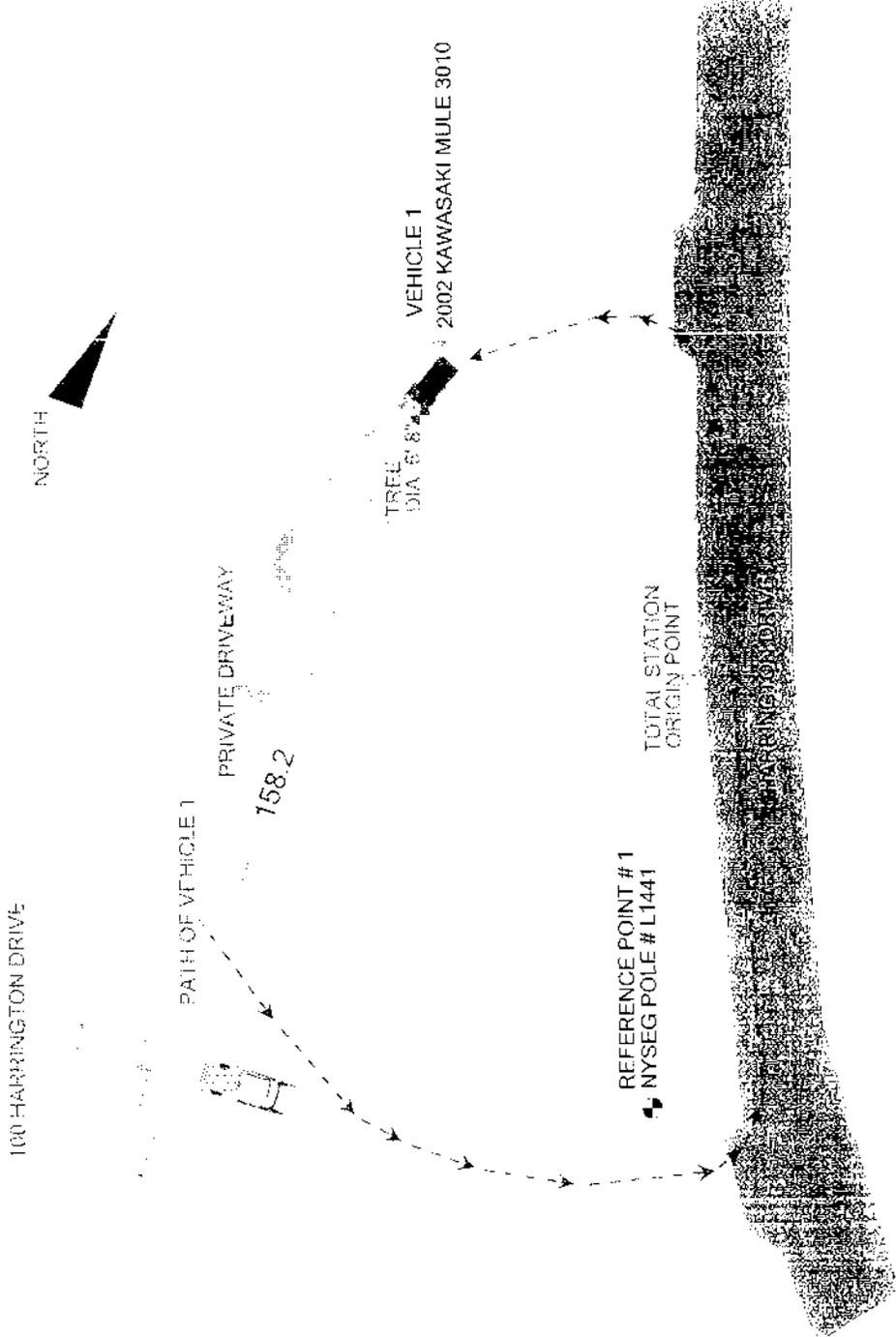
Incident Date:

08-08-2009  
100 Harrington Drive Austerlitz

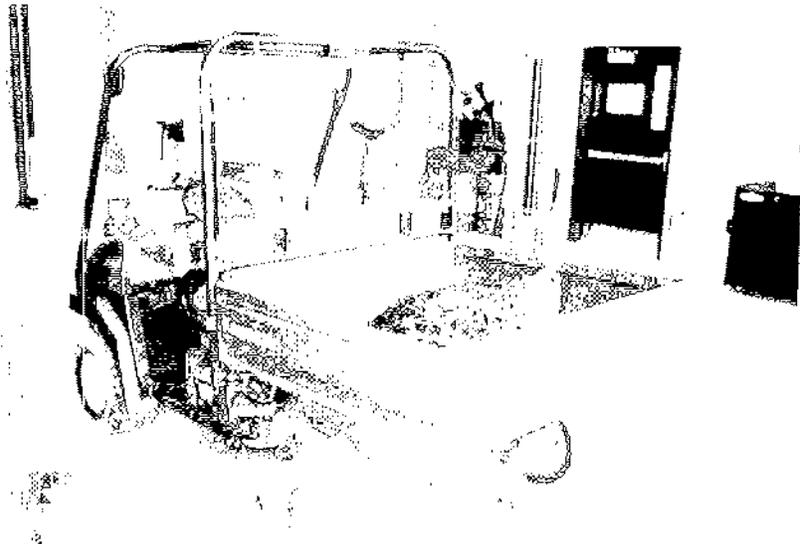
Scale

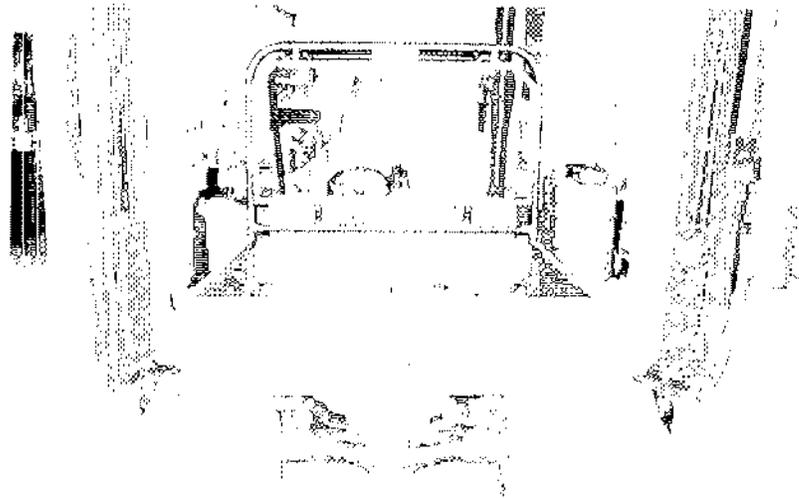
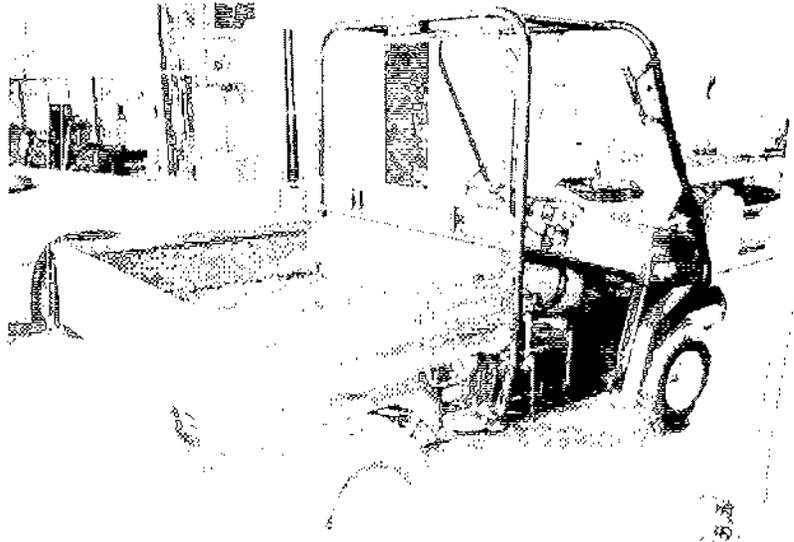
1" = 35'

Deputy W. Dunsbaugh



REFERENCE POINT # 2  
NYSEG POLE # L110







OFFICE OF CORONER  
COUNTY OF COLUMBIA  
STATE OF NEW YORK

CORONER REPORT

An inquisition taken in the death of **Skylar R. Waldorf** in said county for the people of the state of New York and for the said county and upon inspecting the body of the above named deceased then and there lying dead and after inquiring into the circumstances regarding the death, do hereby certify and find the body was that of the above named decedent with a last known address to be **1406 County Route 7A Copake, NY** and the deceased came to her death on **August 8, 2009**.

REPORT

The call was received while this office was in the emergency room in regard to another case. The child was brought in by the rescue squad in full arrest after a down time of about an hour. Resuscitation efforts were continued in the emergency room and the child was pronounced by the emergency room physician.

I am told that the child was a passenger on an all terrain vehicle that was being driven by her 8-year-old brother and she and her 10-year-old sister were also sitting in the seat. There were seat belts available but not in use and no helmets were worn.

The brother apparently lost control of the vehicle and hit a tree causing the vehicle to overturn. The deceased was thrown from the vehicle and it rolled over onto her. The father was in the area and responded to the incident. They were able to remove the vehicle from the child. They found the child in distress and with difficulty breathing. She then went into full arrest. 911 were called and they attempted CPR until the arrival of medical help.

The father Jeremy Moore was house sitting for a friend and brought the children with him. He had weekend visitations with them and although he had all three children with him he was not the biological father of the deceased.

The child is removed to the St. Peter's Hospital in Albany where an autopsy is performed. It finds the deceased to have died due to the weight of the vehicle on her chest causing her breathing to be compromised.

This office is closing out the case with the medical cause of death determined. The sheriff department is still investigating the circumstances as to the cause of the accident.

Cause of Death: Mechanical Asphyxia

Coroner Verdict: Accidental Death

  
Angelo M. Nero, Coroner

Date: August 19, 2009

**St. Peter's Bender Laboratory**

Department of Pathology

315 S. Manning Blvd.

Albany, NY 12208

Tel: 518-525-1474 Fax: 518-525-6750

**AUTOPSY REPORT**

---

Patient Name:	Skylar Waldorf	Case #: F09-92
Age/Sex:	3 years F	
Race:	White	
Date/Time of Death:	8/8/09	
Date/Time of Autopsy:	8/9/09 at 9:00 AM	
Authority:	Coroner Angelo M. Nero	Columbia County
Pathologist:	Jeffrey D. Hubbard, M.D.	
Autopsy At:	St. Peter's Hospital Mortuary	
Present:	Dana Brown, B.S. Coroner Nero Inv. M. Dunsbaugh, CCSO	

---

**Pathologic Diagnoses:**

History of having been ejected from and pinned under a rolled all-terrain vehicle being operated by a child

Mechanical asphyxia

Fractured ribs on left

Small epicardial hemorrhages

Extensive pulmonary contusions

Small hemoperitoneum

Extraperitoneal ecchymoses around the junction of the diaphragm and spine

Small lacerations of occipital scalp

**Summary:**

Skylar was a passenger on an all-terrain vehicle operated by another child, when the vehicle rolled. She was ejected and pinned beneath the vehicle. Extrication was prolonged, due to the weight of the vehicle. Resuscitation was unsuccessful. Autopsy revealed several injuries of the chest and abdomen, all of them manifestations of mechanical asphyxia due to the weight of the vehicle which landed on her.



Jeffrey D. Hubbard, M.D.

Document reviewed and electronically signed by JDH

Reported: 8/17/2009 14:21

**CIRCUMSTANCES:**

According to Coroner Nero and Inv. Dunspaugh, this little girl was a passenger on an all-terrain vehicle driven by her eight year old brother. The vehicle rolled and she was ejected and pinned underneath it. The operator and another child escaped serious injury. Skylar was eventually extricated and taken to Columbia Memorial Hospital with resuscitative efforts in progress, but was pronounced dead at 8:16 PM, 8/8/09.

Transport and autopsy are authorized by the Coroner.

**EXTERNAL:**

The body is that of a well developed little girl 39½ inches long. It is identified by a tag on the right great toe. There is an orotracheal tube in place in a holder and there is blood around the nose and mouth. There is an intraosseous needle in the upper left tibia. There is an identifying bracelet on the left wrist. The fingernails are normal color but there are some traces of red nail polish.

An orotracheal tube is in place and there is a small caliber nasogastric tube.

There are several ecchymoses over the anterior chest and there is a chest tube in the left midaxillary line. There is a good deal of partially dried blood on the face but no break in the skin. There is a small ecchymosis below the angle of the left mandible. There are ecchymoses on both anterior shoulders and over the sternum on the left side of the chest as well as some parallel scratches slightly concave upward and horizontal. The pupils are large and equal. There is some dried blood around the mouth and nose.

There are a number of parallel scratches and large ecchymoses on the upper back with the scratches running from below right to above left at about a 45 degree angle. There is an irregular laceration at the base of the neck and the head is freely moveable.

The perineum is unremarkable and the anus is closed.

The laceration at the base of the neck posteriorly extends down almost to the spinous processes.

There are some ecchymoses around the right elbow and some faint ecchymosis over the left lateral arm.

**INTERNAL:**

The tissues are well hydrated. There is no unusual odor. The sternum is intact. Anterolaterally the second through 5th ribs on the left are fractured and there is slight local hemorrhage. The pleural cavities are dry. The lungs are large and dense, weighing together 460 g. The surfaces are smooth and shiny and the lungs are dark red and dense. The pulmonary arteries are empty. The bronchi contain some slightly frothy red fluid and the parenchyma is fairly well aerated, but a good deal of frothy fluid runs from the cut surface. There are no focal lesions.

The connections of heart and lungs are normal. The arterial duct is closed, as is the oval fossa. The heart weighs 90 g. The right ventricle is up to 0.3 cm thick, the left up to 1 cm, and the myocardium is a homogeneous pale red. There are several blood spots beneath the epicardium up to about 0.5 cm. The valves are normal and the coronary ostia are widely patent.

The spine is intact. The diaphragm is intact but there is a good deal of blood around the spine at the junction with the diaphragm and extending behind the porta hepatis. The pelvis is intact. There is about 50 mL of fluid blood present in the peritoneal cavity. The liver capsule appears to be intact. The esophagus is unremarkable. The stomach contains about 100 mL of partially digested, pasty food, and the intestines, including the appendix, are normal. The liver is slightly dark and weighs 770 g. The cut surface is dark red and bloody, without focal lesions. The gallbladder contains several mL of pale green bile and the extrahepatic biliary tree and pancreas are normal. The spleen weighs 51 g and the capsular and cut surfaces are normal.

The adrenals are normal. The right kidney weighs 44 g, the left 45 g and they are slightly dark. The cut surface is unremarkable and the ureters are not dilated. The bladder is not enlarged. The uterus, tubes and ovaries are infantile.

The skeleton of the neck is intact anteriorly and the atlanto-occipital articulation is normal from below. The larynx and thyroid are normal.

The head has two irregular scalp lacerations totaling about 1.5 cm in length at the occiput. They extend to the skull but the bone is apparently not compromised. The scalp is otherwise normal and the vault of the skull is intact. The meninges are clear and the spinal fluid is pink. The brain is normal adult size and weighs 1470 g. The hemispheres are symmetrical and there is no herniation. Serial slices through brain in the coronal plane reveal no focal lesions.

The floor of the skull and the atlanto-occipital articulation are intact. On flexion, there is no compromise of the spinal canal. Incision of the dura posteriorly reveals an intact atlas with no bleeding or abnormal atlanto-occipital motion.

CERTIFICATE OF DEATH

221 SKYLAR RENEE WALDORF MA X 08 08 2009 E 16 P

COLUMBIA MEMORIAL HUDSON COLUMBIA

387413 X 090810HNE4665 ATTACHMENT #3 PG 1 OF 1

11 30 2005 3 MA CT BARRINGTON

8 SERVED IN U.S. ARMED FORCES? NO YES X
9 DEGREE OF HISpanic ORIGIN? A X
10 OCCIDENTAL RACE A X White-Caucasian
11 DEGREE OF EDUCATION 1 X 8th grade
12 USUAL OCCUPATION NONE
13 TYPE OF BUSINESS OR INDUSTRY NONE

14A STATE OF DEATH NEW YORK 14B COUNTY OF DEATH COLUMBIA
15C LOCALITY CITY VILLAGE TOWN COPAKE
16E ZIP CODE 12516

16D STREET AND NUMBER OF RESIDENCE 1406 COUNTY ROUTE 7A

17A NAME OF FATHER MELISSA M WALDORF 17B NAME OF MOTHER RICHARD B LAMERE JR.

18A NAME OF INFORMANT MELISSA WALDORF 18B MAILING ADDRESS 235 COUNTY RT 7A COPAKE NY 12516

19A DATE AND ADDRESS OF FUNERAL HOME DECK PECK F.H., RT 27 COPAKE NY 12516
208 PLACE OF BURIAL WEST COPAKE CEM. COPAKE, NY

21A NAME OF FUNERAL DIRECTOR SCOTT LYNALAK 21B REGISTRATION NUMBER 01360

22A NAME OF REGISTRAR Tracy Janey 22B DATE OF REGISTRATION 8/11/09

MS 25 THRU 33 COMPLETED BY CERTIFYING PHYSICIAN -- OR -- CORONER/CORONER'S PHYSICIAN OR MEDICAL EXAMINER

25A CERTIFICATION: To the best of my knowledge, death occurred at the time, date and place and due to the cause stated

Certifier's Name: Angelo M. NERO License No. 157692

25B If certifier is not attending physician enter name of certifier and license number: JEFFREY D. HUBBARD 157692

26A APPROVAL BY COUNTY CLERK: 8/8/09 8:16 P

27 MANNER OF DEATH: ACCIDENT X
28 WAS CASE REFERRED TO CORONER OR MEDICAL EXAMINER? YES X
29A AUTOPSY? YES X
29B IF YES, WERE FINDINGS USED TO DETERMINE CAUSE OF DEATH? YES X

30 DEATH WAS CAUSED BY: MECHANICAL ASPHYXIA

31A DUE TO OR AS A CONSEQUENCE OF: COMPRESSION UNDER VEHICLE

31B DUE TO OR AS A CONSEQUENCE OF: ROLLED ALL-TERRAIN VEHICLE

32 PART OF DEATH SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE OF DEATH: ROLLED VEHICLE LANDED ON HER DRIVEWAY

33 DATE AND TIME OF DEATH: 8/8/2009 6:40 P

34 WAS DEPENDENT? YES X

Handwritten note: Skylar Waldorf Moore 8/8/09 8:16 P

**090810HNE4665**

**ATTACHMENT #5**

**Contact Sheet**

Contacted on 08/11/09  
Columbia County Sheriff  
Public Safety Facility  
85 Industrial Tract  
Hudson, NY. 12534  
518-828-0601

Contacted on 08/11/09  
Columbia County Coroner  
85 Industrial Tract  
Hudson, NY. 12534  
518-755-3063

Posted at: 08/09/2009 3:51 PM  
By: Aaron Keller

ISSUE 46

 [Print Story](#)  [Email to a Friend](#)

### **Columbia Co. child dies in ATV accident**

Deputies say the accident happened around 6:45 p.m. on Harrington Drive.

A father and his three children were house-sitting when the children took the homeowner's ATV for a ride.

The 8-year-old then hit a tree with his 10-year-old and 3-year-old sisters on board.

The 3-year-old was thrown from the ATV, which rolled on top of her, pinning her underneath. The boy who was driving was also hurt.

Their father called for help along with a friend. Emergency responders took the 3-year-old girl to Columbia Memorial Hospital, where she later was pronounced dead.

Doctors there treated the 8-year-old driver of the ATV for facial injuries.

The oldest sister did not appear to be injured, the sheriff's department said in a news release.

The victim was from the Copake-Hillsdale area, according to the release.

<http://wnyt.com/article/stories/S1075091.shtml?cat=300>



090821HCC2847

**ATTACHMENTS:**

1. Police Report
2. Medical Examiner's Report
3. Contact Sheet
4. Status of Missing Document(s)
5. Questionnaire

PAULDING CO SHERIFF/DETEN  
247 INDUSTRIAL WAY N  
DALLAS, GA 30132

CASE REPORT

Offense:	DEATH INVESTIGATION	Report #:	020090524770 - 000
Statute/Charge:		Stat #:	
UCR Code:		Status:	COMMITTED
Location:	BILLY BULLOCK ROAD	Apt/Zip:	/ 30157
Grid:		City:	DALLAS
Patrol:	UNION	County:	PAULDING COUNTY
Reporting Off:	WHITLEY, MICHAEL	Misc No:	
Division:	PATROL	Shift:	17:30-05:30 KILGORE
Date Reported:	05/14/2009	Time Reported:	2304
Date Occurred:	05/14/2009	Time Occurred:	1954
Latest Poss Date:	05/14/2009	Latest Poss Time:	2024
Veh Recovered:		Stolen Veh Amt:	\$ 0
Stolen Prop Amt:	\$ 0	Damaged Prop Amt:	\$ 0
Inv Off:		Adult/Juvenile:	A
Disposition:	EXCEPTIONAL CLEARANCE - ADULT	Disposition Date:	05/14/2009
Weapon:		Domestic Violence:	N
Hate/Bias:		Alcohol/Drug Rel:	N / N

Report No: 020090524770 INC NAMES

Name:	(b)(6)	SSN:	*****	Sfx:	000
Name Type:	COMPLAINANT	Sex:	F	Race:	W
Height:	000	Weight:	000	Hair:	Eyes:
DOB:	**/**/****	Age:	***	Phone:	(b)(6)
Address:	(b)(6)				
	DALLAS, GA 30157				
Employer:		Phone:	( ) -		
Address:					

Report No: 020090524770 VICTIMS

Name:	(b)(3):CPSA Se	SSN:	*****	Sfx:	001
Name Type:	VICTIM	Sex:	M	Race:	W
Height:	000	Weight:	000	Hair:	Eyes:
DOB:	**/**/****	Age:	***	Phone:	( ) -
Address:	(b)(6)				
	DALLAS, GA 30157				
Employer:		Phone:	( ) -		
Address:					

DATE: - Fri Aug 20 08:28:07

Agency: 50

INCIDENT REPORT

OFF Number: 13-0208352474-000 Date Recv: 8/20/09 Reported: WHITLEY, MICHAEL  
Date: 8/20/09 Time: 11:15

I was dispatched to the above location in reference to a four wheeler accident.

Deputy Whitley

NR001 - Recd By: NEWBORN, TESSA

Agency: 00 NARRATIVE REPORT

OFF Number: 09-180090124700 001 Name Sfx: 0001 Reporter: WHITNEY, MCKINLEY  
Date: 05/15/2009 Time: 01:34:16

I WAS DISPATCHED TO AN ACCIDENT OFF OF BILLY BULLOCK ROAD. WHILE ENROUTE I WAS ADVISED THAT THE SUBJECT WAS TRAPPED UNDER AN ATV BEHIND SAFE HARBOR SUBDIVISION.

AFTER ARRIVING ON SCENE, I TRIED TO MAKE CONTACT WITH THE COMPLAINANT IN THE SUBDIVISION. I WAS THEN ADVISED THAT THE COMPLAINANT AND VICTIM WERE AT LEAST A MILE OR MORE INSIDE THE WOODS ON WMA LAND.

ONCE I MADE MY WAY TO THE WOOD LINE ON A DIRT ROAD, I MADE CONTACT WITH THE COMPLAINANT WHO ADVISED ME THAT THE VICTIM WAS AT LEAST A MILE BACK IN THE WOODS ON A TRAIL.

CAPT. ELSBERRY, DEP. LEHOLM AND I THEN MADE OUR WAY THROUGH THE WOODS. I HAD TO ASK DISPATCH SEVERAL TIMES FOR DIRECTIONS FROM THE COMPLAINANT DUE NOT TO FINDING THE SUBJECT IN THE WOODS AFTER A MILE. AFTER FOLLOWING THE COMPLAINANTS DIRECTIONS, CAPT. ELSBERRY ADVISED ME THAT HE HAD MADE CONTACT.

WHEN I ARRIVED ON SCENE I SAW THE BULLDOG ATV ON THE PASSENGER SIDE. AFTER WALKING AROUND THE ATV I SAW THE VICTIM UNDERNEATH THE ATV AND THE ROLL CAGE ON TOP OF HIM. CAPT. ELSBERRY AND I THEN LIFTED THE ATV OFF THE VICTIM AND ROLLED THE VICTIM TO HIS BACK. AT THIS POINT CAPT. ELSBERRY STARTED CPR AND ADVISED ME THAT WE NEEDED TO GET THE VICTIM OUT OF THE AREA AND BACK TO EMERGENCY PERSONAL AND EQUIPMENT FOR TREATMENT.

ONCE WE ARRIVED ON SCENE WITH EMS THEY ADVISED THE SUBJECT WAS PRONOUNCED DEAD AND THAT THEY WOULD BE TRANSPORTING HIM.

AFTER TURNING THE SCENE OVER TO CLARKS, I WAS ADVISED BY CORNOR PUCKETT THAT THE SUBJECT WOULD BE SENT TO GBI FOR AN AUTOPSY.

CASE: 2009-1009795

AUTHORIZED COPY  
GBI - Open Records

STATE OF GEORGIA

GEORGIA BUREAU OF INVESTIGATION

RECORD OF MEDICAL EXAMINER

CITY DALLAS		COUNTY PAULDING			
NAME OF DECEASED (b)(3):CPSA Sectio					
RESIDENCE OF DECEASED (b)(6)					
AGE/DOB 40 YEARS - #1969	SEX M	RACE W			
MANNER OF DEATH	NATURAL	HOMICIDE	SUICIDE	ACCIDENTAL	UNDETERMINED
				X	
CAUSE OF DEATH	POSITIONAL ASPHYXIA due to MOTOR VEHICLE CRASH			SIGNOUT 5/15/2009	

PRONOUNCED DATE: 5/14/2009	HOUR: 20:50	PLACE: SCENE
NOTIFIED BY KEITH PUCKETT	DATE 5/14/2009	HOUR 21:24
BODY IDENTIFIED BY FAMILY	PHOTOGRAPHS BY	
INVEST. OFFICER GREG KILGORE		
EMPLOYED BY PAULDING CO. SHERIFF'S OFFICE - (#)		

<b>CASE AGENCIES:</b>	Paulding Co. Coroner	
	GBI-Medical Examiner-HQ DOFS	#(EASON)
	Paulding Co. District Attorney	
	Paulding Co. Sheriff's Office	#(20090524770)
	Paulding Judicial Circuit	

<b>OTHER AGENCY</b>			
DATE IN 5/14/2009	TIME IN 23:25		
ME INV.: ELIZABETH ANDREWS	FUNERAL HOME JEFF EBERHART F.H		
PROC: AUTOPSY	DATE: 5/15/2009	TIME: 14:10	BY: ERIC EASON, MD

DATE \_\_\_\_\_

SIGNED \_\_\_\_\_

MEDICAL EXAMINER

ON 5/14/2009 AT 2124, KEITH PUCKETT OF PAULDING COUNTY CORONER'S OFFICE NOTIFIED THIS INVESTIGATOR OF THE DEATH OF A 40 YO WM.

REPORTEDLY, THE DECEDENT AND HIS WIFE WERE RIDING A " BULLDOG 4 WHEELER" AT THE PROPERTY BEHIND THEIR RESIDENCE WHEN THE FOUR WHEELER "FLIPPED OVER" AND LANDED ON THE DECEDENT'S NECK. BECAUSE THE DECEDENT WAS IN THE LATER STAGES OF LOU GEHRIG'S DISEASE, HE DID NOT HAVE ANY STRENGTH TO FREE HIMSELF FROM UNDER THE 4 WHEELER. THE WIFE REPORTEDLY PHONED 911 AND HELD THE 4 WHEELER UP FOR 20-30 MINUTES UNTIL EMS ARRIVED ON SCENE. RESUSCITATIVE EFFORTS WERE NOT PERFORMED. THE DECEDENT WAS PRONOUNCED AT 2050 ON 5/14/2009 BY KEITH PUCKETT AT THE SCENE.

NO TRAUMA WAS NOTED TO THE DECEDENT (MR. PUCKETT ADVISED THAT IT WAS DARK OUTSIDE AND IT WAS HARD TO VISUALIZE ANY TRAUMA). MR. PUCKETT ADVISED THAT THE ROLL BARS TO THE 4 WHEELER WERE LYING ACROSS THE RIGHT SIDE OF THE DECEDENT'S NECK.

REPORTEDLY, THE DECEDENT HAD PURCHASED THE 4 WHEELER APPROXIMATELY 2 WEEKS PRIOR TO HIS DEMISE. HE WAS KNOWN TO RIDE ON THE 4 WHEELER WITH HIS WIFE DAILY AROUND THEIR RESIDENCE .

MR. PUCKETT ADVISED THAT THE TERRAIN WHERE THE ACCIDENT OCCURRED WAS "ROUGH." BECAUSE THE DECEDENT HAD BEEN MOVED IN ORDER TO BE FREED FROM THE 4 WHEELER, SCENE PHOTOS WERE NOT TAKEN.

ELIZABETH ANDREWS

05/15/2009 @ 1614

MR. PUCKETT WAS INFORMED OF THE CAUSE AND MANNER OF DEATH FOR THIS CASE. HE WAS ASKED TO PROVIDE THE SERIAL NUMBER, MAKE, AND MODEL NUMBE OF THE 4-WHEELER. A MECAP REPORT WILL BE FILLED OUT ONCE THIS INFORMATION HAS BEEN OBTAINED.

DAWN STROHMEYER

5/28/2009 @ 1155

THIS INVESTIGATOR CONTACTED KEITH PUCKETT AND REQUESTED THE MECAP INFORMATION FROM THE ATV INVOLVED IN THE ACCIDENT. MR. PUCKETT ADVISED THAT HE WOULD OBTAIN THE INFORMATION AND CONTACT THIS OFFICE.

ELIZABETH ANDREWS

6/22/2009

A MECAP REPORT WAS SUMBITTED ONLINE.

ELIZABETH ANDREWS

**The factual correctness of this investigative report may change contingent upon the receipt of additional investigative information or the findings of the medical examiner.**

AUTHORIZED COPY  
Official Report  
GBI - Open Records



Division of Forensic Sciences  
Georgia Bureau of Investigation  
State of Georgia

Headquarters  
DOFS Case #: 2009-1009795  
Report Date: 05/22/2009

George Herrin \* NAME Accredited \*  
Deputy Director

**Requested Service:** Autopsy

Agency: Paulding Co. Coroner  
Agency Ref#:  
Requested by: K. Puckett

**Case Individuals:**

Victim: (b)(3):CPSA Sec

**Evidence:**

001 DECEDENT

**Results and Conclusions:****REASON FOR PERFORMING EXAMINATION:**

Reportedly, this 40-year-old white male was involved in a motor vehicle crash. Further information is contained in the investigative reports.

**DATE, TIME AND PLACE OF EXAMINATION:**

Under the provisions of the Georgia Death Investigation Act, an autopsy is performed in the morgue of the Georgia Bureau of Investigation, Division of Forensic Sciences on May 15, 2009, commencing at 1410 hrs.

**PRESENTATION, CLOTHING AND PERSONAL EFFECTS:**

The body is received in the supine position in a gray plastic body bag with an attached label bearing: "Steven Fuerst, Paulding County."

The body is clad in the following:

1. A gray t-shirt is worn on the chest.
2. Blue shorts are worn up to the waist.
3. A black sandal is on the left foot.
4. The left earlobe is pierced with two white metal earrings. The right earlobe is pierced with one white metal earring.
5. An orange rubber band is on the right wrist.
6. A white metal necklace with two white metal pendants encircles the neck.

A black sandal is recovered in the body bag.

**DIAGNOSTIC AND THERAPEUTIC DEVICES AND MARKINGS:**

EKG patches are identified on the torso.

**POSTMORTEM CHANGES:**

The body has been refrigerated and is cool to the touch. Rigor mortis is generalized, fully developed and difficult to break. Violet postmortem lividity involves the posterior surfaces of the body except in regions of pressure and blanches with pressure. The lips and mucous membranes are moist. The body is well preserved.

**FEATURES OF IDENTIFICATION:**

The body is unembalmed and that of a white male appearing consistent with the reported age of 40 years, measuring 73.5 inches in length and weighing 247 pounds. The body appears well developed and well nourished. Head hair is dark brown and straight, measuring up to 1.5 inches in length. The irides are blue-gray. The teeth are in a good state of repair. The deceased has black and gray stubble on the face and a black and gray goatee. Ornate tattoos are identified on both upper extremities and the back.

**EXTERNAL EXAMINATION:**

The head appears normally formed and displays injury to be described below. The eyes are free of petechiae. The lips, gums and tongue are free of injuries. The ears are normally formed and set and free of injuries. The nasal vestibules are clear. The facial bones are free of palpable fractures.

The neck is normally formed and free of injuries. No thyromegaly or other masses are appreciated. The trachea is palpable in the midline.

The chest, abdomen and back are normally formed and free of injuries. No thyromegaly or other masses are appreciated. The trachea is palpable in the midline.

The upper and lower extremities are well developed and normally formed. No fractures, deformities or superficial injuries are identified.

The penis is circumcised and the testes are descended bilaterally into the scrotum. There is no evidence of injury to the inguinal regions, buttocks, perineum or genitalia.

**EVIDENCE OF INJURY:**

1. Irregular abrasions, measuring up to 2.5 inches in greatest dimensions, are on the right side of the face.
2. Hemorrhages involve the fascia of the anterior neck, the thyroid gland, and external surface of the esophagus.

**OTHER PROCEDURES:**

1. Peripheral blood is stored in the toxicology department of this facility for 2 years.
2. An air-dried bloodspot card is retained in this facility.
3. Documentary and identification photographs are obtained.
4. Items of clothing and personal belongings are released with the body.

**COMMENT/OPINION:**

This 40 year-old white male died from positional asphyxia due to a motor vehicle crash, in which his neck was pinned underneath a 4-wheeler. The manner of death is accidental.

**CAUSE OF DEATH:**

Positional asphyxia due to motor vehicle crash

**MANNER OF DEATH:**

Accident

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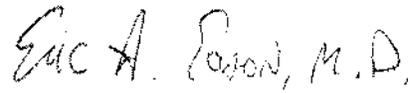
Only those items discussed in the results above were analyzed for this report. The above represents the interpretations/opinions of the undersigned analyst. Evidence analyzed in this report will be returned to the submitting agency. Biological evidence (body fluids and tissues) and fire debris extracts will be destroyed after one year. This report may not be reproduced except in full without written permission of the laboratory.

Division of Forensic Sciences  
Georgia Bureau of Investigation

Continued  
2009-1009795: Autopsy

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This case may contain evidence that must be preserved in accordance with O.C.G.A. § 17-5-56.



Eric Eason  
Associate Medical Examiner

CC:

**Related Agencies:**

GBI-Medical Examiner-HQ DOFS  
Paulding Co. District Attorney  
Paulding Co. Sheriff's Office  
Paulding Judicial Circuit

ACN: EASON

ACN: 20090524770

**End of Official Report**

090821HCC2847

**ATTACHMENT #3**

**Contact Sheet**

Contacted on 08/28/09  
Paulding County Sheriff  
247 Industrial Way North  
Dallas, GA. 30132  
770-443-3010

Contacted on 08/28/09  
Paulding County M.E.  
3121 Panthersville Rd.  
Decatur, GA. 30034  
404-270-8527

Task Number 090821HCC2847

INTERVIEWER: When the response to a particular question is unknown, please leave blank.

Type of respondent: Police Department

Other, specify:

1. What type of vehicle was involved in the incident? (If vehicle is not an ATV, or if ATV has more than 4 wheels, politely thank respondent for her/his cooperation and terminate interview).

- |                                       |                     |
|---------------------------------------|---------------------|
| 1 - 3 wheeled ATV                     | 7 - Utility Vehicle |
| 2 - 4 wheeled ATV                     | 8 - Other Vehicle   |
| 3 - ATV with unknown number of wheels | 0 - Unknown         |
| 4 - 2 wheeled motorcycle              |                     |
| 5 - Dune Buggy                        |                     |
| 6 - ATV with more than 4 wheels       |                     |

2. What is the manufacturer/brand name of the ATV(s) involved in the incident? If more than two ATVs, use an additional sheet.

ATV #1	ATV #2
Manufacturer: 00 - Unknown	Manufacturer:

3. What is the model name or number and/or vehicle identification number (VIN) of the ATV?

Model: Bulldog	VIN: UNKNOWN
----------------	--------------

4. What is the model year of the ATV? (Record last two digits of model year. For example 89,90).

Model Year: UNK

5. What is the engine size (in CCs) of the ATV?

Engine Size: Unknown

6. Was there more than one death involved in this incident? If more than two individuals were killed use an additional sheet.

Death #1	Death #2
Date of Death: 05/14/2009	
Age/Sex: 40/Male	/
State of Death: GA	
City of Death: Dallas	
County of Death: Paulding	

7. Describe how the incident occurred. (Use additional sheets if necessary).

The victim, a 40-year-old-male, was driving a 4-wheeled ATV on a trail in the woods with his wife (age unknown) as a passenger, when the ATV overturned and landed on the his neck causing fatal injuries. He was pronounced on the scene and transported to the medical examiner's office where the cause of death was determined to be positional asphyxia. It could not be determined if the victim's wife required any medical assistance.

8. Did the ATV overturn/tipover/rollover? Yes

9. If ATV overturned/tipped over/rolled over, did it land on the victim?

Victim 1:                      Victim 2:

Yes    No    Unknown      Yes    No    Unknown

10. Who was killed in the incident? Check all that apply.

1 - Driver              3 - Bystander              8 - Other  
2 - Passenger            4 - Driver/Other Vehicle

11. Was the victim wearing a helmet at the time the incident occurred?

Victim 1:                      Victim 2:

Yes    No     Unknown      Yes    No    Unknown

12. How many riders (including the driver) were on the ATV at the time the incident occurred?

0 - Unknown     2 - Two riders      4 - Four or more riders  
1 - One rider    3 - Three riders

13. List the following physical characteristics of the DRIVER of the ATV:

Age: 40                      Height:              (inches)  
Weight:                      Sex: Male

14. How did the driver learn to operate an ATV (READ LIST)

- 1 - Organized Program                      Sponsor's Name:
- 2 - Dealer/Salesperson    Arranged through dealer:
- 3 - Friend/Relative              Friend/Relative Age:
- ④ - Self
- 5 - Other (Specify)
- 9 - Don't Know

15. What was the type of terrain (ground surface) being travelled at the time the incident occurred?

- 01 - Forest, Woods

16. Type of road being travelled by ATV when incident occurred?

- 09 - NA (Not a road)

17. Identify any other motor vehicle(s) involved in this incident.

- 09 - NA (Not a traffic incident)

18. Had the driver of the ATV used alcohol just prior to the incident?

- 0 - Unknown

19. Had the driver taken any drugs or medication just prior to the incident?

- 0 - Unknown

Additional Comments:

X097 0378

JUL 16 2009

TC32 SS 166

Kaur, Amritpal

From: mecap@cpsc.gov  
Sent: Monday, June 22, 2009 11:45 AM  
To: Hazard; Wierdak, Dennis; Nash, Yolanda  
Cc: Margolies, Philip; Cohn, Murray  
Subject: MECAP Report

JUL 16 2009

06/22/2009 11:44:42  
Medical Examiner's/Coroner's Case No. = 2009-1009795  
Medical Examiner's/Coroner's Name = DR. EASON  
Date of accident = 5/14/2009  
Date of death = 5/14/2009  
Accident location - city = DALLAS  
Accident location - state = Georgia

Your name = ELIZABETH ANDREWS  
Office = GBI DOFS MEO  
City = DECATUR  
State = Georgia  
County = DEKALB  
Telephone = 404-270-8210  
Email address = ELIZABETH.ANDREWS@GBI.GA.GOV

Brief description of accident sequence = THE DECEDENT WAS THE DRIVER OF AN ATV THAT FLIPPED OVER.

Name, address and telephone number of any state/local personnel who investigated the accident = PAULDING COUNTY SHERIFF'S OFFICE 770-443-3010

Type of consumer product involved = ATV  
Manufacturer and brand name of product = UNKNOWN  
Product model and serial numbers = UNKNOWN  
Cause of death = POSITIONAL ASPHYXIA DUE TO MOTOR VEHICLE CRASH  
Is product available for examination? = no  
If yes, where? =

For processing at CPSC:  
Report received by: \_\_\_\_\_  
Chief Med. Exam. Rpt ( )  
Copy for MECAP News ( )  
Regular MECAP ( )  
Document No. \_\_\_\_\_

## INCIDENT INVESTIGATION TERMINATION REPORT

1. TASK NO. 090827CCC3927		2. TIME EXPENDED 3.0/0.0		3. DATE INITIATED 9/3/09	
4. HOSPITAL NO.			5. RECORD NO.		6. AGE 28
7. SEX male					
8. DATE OF TREATMENT		9. INJURY crushed		10. BODY PART leg/ankle	
11. DISPOSITION Treated					
12. PRODUCT UTV-Rhino		13. PRODUCT CODE 5044		14. ORGANIZATION CODE CFIW	
15. INVESTIGATOR ID 8554					
16. CATID NO.			17. SPECIAL STUDY NO.		18. TERMINATION CODE
<b>19. RECORD OF ATTEMPTS TO CONTACT</b>					
<b>DATE</b>		<b>TIME</b>		<b>METHOD</b>	
<b>RESPONSE</b>					
9/3/09				Sent letter	
No response.					
9/24/09		8:40 am		Phone call	
No answer. Left message.					
9/28/09		4:50 pm		Phone call	
Left message with parent.					
9/29/09		5:15 pm		Phone call	
Victim was busy. He could not					
come & talk on the telephone about his injury					
Was told to call back on 10-1					
10/1/09		9:00 am		Phone call	
Victim was not available.					
10/3/09		10:00 am		Phone Call Sat.	
No one was available. Left					
message asking for info.					
<b>20. REASON FOR TERMINATION:</b>					
<p>This case involved a Rhino tip over &amp; a 28 year old man. His father filed a report. Victim will not return calls &amp; is never available even when time/date for call is arranged in advance with parent. This case is terminated. No additional info was available. Assignment docs./contact letter are attached.</p>					
<b>21 REVIEWED BY:</b>		<b>ID NO.</b>		<b>MO DAY YR</b>	
		8554		10/8/09	



08/13/2009 14:15:31

Name = John Bennett  
Address = 9601 N. 17th Ave #101  
City = Phoenix  
State = Arizona  
Zip = 85021  
Email = johnnyb@arizona.usa.com  
Telephone = 602-790-9085  
Name of Victim = Paul Bennett  
Victim's Address = 9601 N. 17th Ave. #101  
Victim's City = Phoenix  
Victim's State = Arizona  
Victim's Zip = 85021  
Victim's Telephone = 602-790-9085

Incident Description = He was backing up and turning the Rhino to the left. The ground was flat, dry, & hard, he felt the Rhino tipping stuck out his leg it rolled over on its side and he was pinned two guys rolled the Rhino up on its wheels again to get it off. His leg and ankle crushed with severe wounds.

Victim's age at time of incident = 28  
Victim's sex = male  
Date of incident = 4/14/07  
Product involved = Yamaha Rhino  
Product brand name/manufacture = Yamaha  
Manufacturer street address =  
Place where manufactured (City and State or Country) =  
Product model and serial number, manufacture date =  
Product damaged, repaired or modified = yes  
If yes, before or after the incident = after  
Description of damage, repair or modification = Left rear tail light lens  
Date product purchased =  
Product involved still available = no  
Have you contacted the manufacturer = no  
If not, do you plan to contact them = no  
Name Release = Release name to manufacturer only

U.S. Consumer Product Safety Commission  
**ASSIGNMENT REPORT - ID#**

<b>Assign No</b>	<b>MIS Code</b>	<b>Status</b>	<b>Assign Type</b>	<b>Region</b>
090827CCC3927	32402	Open	In-Depth Investigation	CFIW
<b>Investigator</b>	<b>Supervisor</b>	<b>Epi Status</b>	<b>Program ID</b>	
Zannie E. Weaver	Keven J. Barton			

**VICTIM INFORMATION**

<b>Assign Date</b>	08/27/09	<b>City</b>	PHOENIX
<b>Target Date</b>	10/10/09	<b>State/Zip</b>	AZ
<b>Revised Target Date</b>		<b>Product Description</b>	UTILITY VEHICLES
<b>Complete Date</b>		<b>Document Number</b>	I0980710A
<b>Incident Date</b>	04/17/07	<b>HIA No.</b>	SECTTT2009
		<b>Death N</b>	

**Remarks**  
MIDI - utility vehicle

**Assignment**

**Doc No: I0980710A**

**Issue: 47**

**08/17/2009**

08/13/2009 14:15:31

Name = John Bennett  
Address = 9601 N. 17th Ave #101  
City = Phoenix  
State = Arizona  
Zip = 85021  
Email = johnnyb@arizona.usa.com  
Telephone = 602-790-9085  
Name of Victim = Paul Bennett  
Victim's Address = 9601 N. 17th Ave. #101  
Victim's City = Phoenix  
Victim's State = Arizona  
Victim's Zip = 85021  
Victim's Telephone = 602-790-9085

Incident Description = He was backing up and turning the Rhino to the left. The ground was flat, dry, & hard, he felt the Rhino tipping stuck out his leg it rolled over on its side and he was pinned two guys rolled the Rhino up on its wheels again to get it off. His leg and ankle crushed with severe wounds.

Victim's age at time of incident = 28  
Victim's sex = male  
Date of incident = 4/14/07  
Product involved = Yamaha Rhino  
Product brand name/manufacturer = Yamaha  
Manufacturer street address =  
Place where manufactured (City and State or Country) =  
Product model and serial number, manufacture date =  
Product damaged, repaired or modified = yes  
If yes, before or after the incident = after  
Description of damage, repair or modification = Left rear tail light lens  
Date product purchased =  
Product involved still available = no  
Have you contacted the manufacturer = no  
If not, do you plan to contact them = no  
Name Release = Release name to manufacturer only



090827CCC3928

**REASON FOR TERMINATION**

08/31/2009- Victim/Complainant was contacted telephonically. She related that because of on-going litigation against the owner of the vehicle involved in this accident this investigator would have to contact her attorney before she would provide any information.

08/31/2009- A telephone call to the attorney's office disclosed the lead attorney for Victims case would have to be consulted before permission would be granted to talk to Victim. The name, address, and telephone number for the owner of the All-Terrain Utility Vehicle (ATUV) was provided by the law firm of Shook & Stone, 710 South 4<sup>th</sup> Street, Las Vegas, NV. This investigator was advised he would be contacted by the attorney at a later date.

09/09/2009- An on-site visit was conducted at approx. 11:30 am at the home address for the owner of the ATUV, a Dale Pabst, 257 Quail Ranch Drive, Henderson, NV 89015. No one answered the door and a letter was left at the front door. No response was received for this letter.

9/23/2009- A telephonic attempt was made at 3:45 pm to contact the owner of the ATUV. No one answered and a message was left on the answering machine. The male voice on the machine identified himself as Dale Pabst. There was no response to the message left to contact this investigator.

10/13/2009- A telephone call to the Attorney's office resulted in this investigator being told the lead attorney was in hearings and would try to respond by 10/16/2009. By close of business at 5:30 pm local time on 10/16/2009 there had been no response from the attorney's office.

This investigation was terminated 10/19/2009.



This In-Depth Investigation (IDI) was initiated based on a death certificate concerning a fatality involving an **Utility Terrain Vehicle (UTV)**. The following information was obtained from the local investigating officials.

The driver of the UTV was a 50 year old male. His date of birth was 2/23/1958. He was 5'8" tall and weighed 180 pounds.

The victim was a 51 year old female. Her date of birth was 1/14/1957. She was a passenger sitting in the right front passenger seat.

There were also two more passengers on the UTV. A 52 year old male, his date of birth is 9/10/1956. He was sitting in the right rear seat of the UTV. The other occupant was a 28 year old male, whose date of birth is 11/25/1979 who was sitting in the left rear seat of the UTV.

The incident took place on private property. The local officials indicated the UTV was being driven on a undeveloped road that was very poorly marked. The roadway looked like an open dirt field. There was a creek bed to one side of the road. At the time of the incident the ground was muddy. The weather was cloudy and raining.

On 11/9/2008, the owner of the UTV was at home waiting for a long time family friend to arrive. After they finally arrived, they sat around the house playing a game for a couple of hours and drinking alcoholic beverages.

When they were finished, he offered to take his guest for a ride on the UTV. His guest had never gotten on one. The guest wanted to see the property because they were interested in buying in the near future.

They all boarded the UTV. Victim #1 sat in the right front side of the UTV. The UTV only had seat belts equipped on the front driver and passenger seats. While in the UTV, neither of the front seat occupants wore their seat belts. They set off riding on the property. The UTV traveled in a grassy/dirt field at about 5-10 miles per hour. The UTV approached a slight dirt embankment and in slow motion, the UTV rolled onto its right side. The driver appeared to have turned into the direction of the roll. The UTV rolled on its right side and the victim was ejected on to the ground and the UTV landed on top of her.

The three other UTV occupants quickly lifted the UTV up-right off of the victim. The driver of the UTV noticed that the victim was bleeding from her head and grabbed a towel and wrapped it around her head.

The driver told one of the other passengers to call 911 and to go direct the fire department when it arrived.

One of the passengers, that was not injured, attempted to perform CPR on the victim, but was not sure if he was doing it correctly. The paramedics soon came and took over.

The law enforcement officer who arrived on the scene observed that the UTV had four seats with only two seatbelts located in the front driver and right front passenger position, which did not appear to have been used during the collision.

Per the coroner's report the cause of death was due to basilar skull fracture with cerebral contusion; massive cranial trauma.

**Product Identification:**

The product involved in this In-Depth Investigation was an Utility Terrain Vehicle (UTV). The product is identified as a **blue/black 2007 Yamaha Rhino 450 Utility Vehicle**.  
**VIN# 5Y4A824Y67A001873**

The UTV had four seats with only two seatbelts located in the front two seats, which did not appear to have been used during the collision.

No further information was obtained.

**Exhibits:**

- (1) Sheriff/Coroner Report
- (2) Highway Patrol Report

**Contacts :**

El Dorado County Coroner  
300 Fair Lane  
Placerville, CA

Contact was initiated to obtain a copy of the autopsy report

California Highway Patrol  
3031 Lo Hi Way  
Placerville, Ca

Contact was initiated to obtain a copy of the investigation report

Placerville Police Department  
730 Main St  
Placerville, CA

Contact was initiated to obtain a copy of the investigation report

Placerville County Coroner  
4120 Douglas Blvd  
Granite Bay, CA

Contact was initiated to obtain a copy of the autopsy report

El Dorado Sheriff  
300 Fair Ln  
Placerville, CA

Contact was initiated to obtain a copy of the investigation report

**Task Number:** 090827HCC3922

**Date:** 12/28/2009

### **Status of Missing Document(s)**

The official records below were requested for this investigation report, but could not be obtained.

1. Police Photographs
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

# EL DORADO COUNTY SHERIFF

300 FAIR LANE  
PLACERVILLE, CA 95667  
(530) 621-5655  
(530) 626-8163

CONTROLLED DOCUMENT  
U.S. Consumer Safety  
Commission  
12/11/09

EM0811516  
Case Number

CORONER CASE		ACCIDENT		VEHICLE		MISC CODE	
CORONERS INVESTIGATI		SGT GROTH P		11/10/08		955G	
1st Code Section 27491 GC		2nd Code Section		3rd Code Section		4th Code Section	
Date / Time / Day (To)		Date / Time / Day (To)		Date / Time Reported		Halt	
11/09/08 00:30 SUN		11/09/08 00:30 SUN		11/09/08 02:00 NIGHT		AARC DV Killed/Inj	
Street Address 1100 MARSHALL		Way WAY		City PLACERVILLE		Cross Street CEDAR RAVINE RD	
Reporting Officer TODD J		Reporting Officer HUBERT J		Reporting Officer		Area 109	

VICTIM(S)		ADULT
01	(b)(3):CPSA Section 25(c),(b)	ADULT
NON SUSPECT(S)		
01	(b)(6)	ADULT
02	(b)(6)	ADULT
03	(b)(6)	ADULT
04	(b)(6)	ADULT
05	(b)(6)	ADULT

PROPERTY / EVIDENCE		Value Taken	APPROVED
01	EVIDENCE Quantity: 7 Name: ACIS PHOTOS Value: \$ 0 00 Taken: YES Make: DIGITAL Model: // Lic. Owner Applied No: // Officer: TODD J Entered: 11/09/2008 MISC \$ 0 00	\$ 0 00	APPROVED
02	EVIDENCE Quantity: 1 Name: ACIS IMAGE Value: \$ 0 00 Taken: YES Make: // Model: // Lic. Owner Applied No: // Officer: HARNAGE E Entered: 11/11/2008 MISC \$ 0 00	\$ 0 00	APPROVED

Attachments: Scanned and saved as PDF files

Item	Date	Description
001	03/05/2009	MISC DOCUMENTS

Attachments: Image (JPG) files

Image Type	Date	Description	Type	#	Count	Image
0	11/09/2008	D1388-1 DECEDENT LOWER BODY	CASE	01	001	08E17947
0	11/09/2008	D1388-2 DECEDENT UPPER BODY	CASE	01	002	08E17948
0	11/09/2008	D1388-3 DECEDENT UPPER BODY	CASE	01	003	08E17949
0	11/09/2008	D1388-4 DECEDENT HEAD/NECK	CASE	01	004	08E17950
0	11/09/2008	D1388-5 DECEDENT HEAD	CASE	01	005	08E17951
0	11/09/2008	D1388-6 DECEDENT HEAD	CASE	01	006	08E17952
0	11/09/2008	D1388-7 DECEDENT HEAD	CASE	01	007	08E17953
0	11/11/2008	K136	CASE	01	008	08E18131

**EL DORADO COUNTY SHERIFF**

300 FAIR LANE  
PLACERVILLE, CA 95667  
(530) 621-5655  
(530) 626-8163

**EM0811516**

Case Number

Copies To

Signature Verifying Original Copy of Case: \_\_\_\_\_ Date: \_\_\_\_\_  
Released By: \_\_\_\_\_ Received By: \_\_\_\_\_ Date: \_\_\_\_\_

12/13/2009 6:23:03PM  
Print Date/Time

controlled document, duplication or re-issuance controlled by law.

# EL DORADO COUNTY SHERIFF

300 FAIR LANE  
PLACERVILLE, CA 95687  
(530) 621-5655  
(530) 626-8163

EM0811516

Case Number

## Victim's Confidential Personal Information

The following is considered confidential personal information as per California Penal code 964(b) and is provided below to be disseminated in accordance with an agreeable procedure between local law enforcement, the district attorney and the courts to protect the victims and witnesses of crimes.

VICTIM(s)	
NO 01	<p>(b)(3):CPSA Section 25(c),(b)(6)</p> <p>Name (Last, First, Middle) Primary Address CASTRO VALLEY, CA 94546 Secondary Address Other DECEDENT</p> <p>Phone (b)(6)</p> <p>DOB 01/14/1957 Race W Sex F</p> <p>APPROVED</p>

## Witness Confidential Personal Information

The following is considered confidential personal information as per California Penal code 964(b) and is provided below to be disseminated in accordance with an agreeable procedure between local law enforcement, the district attorney and the courts to protect the victims and witnesses of crimes.

NON SUSPECT(s)	
NO 01	<p>(b)(6)</p> <p>Name (Last, First, Middle) Primary Address DRIVE , CASTRO VALLEY, CA 94552 Secondary Address Other HUSBAND OF DECEDENT</p> <p>Phone (b)(6)</p> <p>DOB 01/14/1957 Race W Sex F</p> <p>Involvement N.O.K.</p> <p>APPROVED</p>
NO 02	<p>(b)(6)</p> <p>Name (Last, First, Middle) Primary Address WAY , SHINGLE SPRINGS, CA 95682 Secondary Address Other OPERATOR OF VEHICLE</p> <p>Phone (b)(6)</p> <p>DOB 02/11/1958 Race W Sex M</p> <p>Involvement WITNESS</p> <p>APPROVED</p>
NO 03	<p>(b)(6)</p> <p>Name (Last, First, Middle) Primary Address WAY , SHINGLE SPRINGS, CA 95682 Secondary Address Other PASSENGER IN VEHICLE</p> <p>Phone (b)(6)</p> <p>DOB 11/11/1979 Race W Sex M</p> <p>Involvement WITNESS</p> <p>APPROVED</p>
NO 04	<p>(b)(6)</p> <p>Name (Last, First, Middle) Primary Address ROAD , SHINGLE SPRINGS, CA 95682 Secondary Address Other EDC FIRE MEDIC 28</p> <p>Phone (b)(6)</p> <p>DOB // Race W Sex M</p> <p>Involvement CONTACTED</p> <p>APPROVED</p>
NO 05	<p>(b)(6)</p> <p>Name (Last, First, Middle) Primary Address WAY , PLACERVILLE, CA 95667 Secondary Address Other EMERGENCY ROOM DOCTOR</p> <p>Phone (b)(6)</p> <p>DOB // Race W Sex M</p> <p>Involvement CONTACTED</p> <p>APPROVED</p>

Case Number  
EM0811516

Date  
11/09/08

Deputy  
TODD J

**CORONER'S INVESTIGATION NARRATIVE**

**Synopsis:**

ON 11/09/08 AT APPROXIMATELY 0150 HOURS DEPUTIES RESPONDED TO MARSHALL HOSPITAL FOR A DECEASED ADULT FEMALE RESULTING FROM AN ALL TERRAIN VEHICLE ACCIDENT AT (b)(6)

**Scene Examination/Where Death Confirmed:** (Inside/Outside, Weather Condition, Temperature, Evidence/Property Collection): The scene was located at bed number seven of the Marshall Hospital Emergency Room. The temperature was approximately seventy degrees Fahrenheit. The only personal property on the decedent was a grey metal watch which was released to the decedent's husband. Digital photographs of the decedent and her injuries were taken and attached to this report.

**Decedent Position/Condition:** (Supine, Prone, etc / Lividity, Rigor Mortis, Wounds, IV's, Catheters, etc.): The decedent was lying in the supine position on the hospital bed. Lividity was present at the lower points of the body consistent with the body position. Rigor Mortis was not present. There were tubes protruding from the decedent's mouth and an emergency neck immobilization device around her neck. Additionally, there were medical patches on the decedent's left shoulder, right shoulder, chest above the right breast, chest above the left breast, and two patches on the decedent's left side below her left breast. Furthermore, there was a tube sticking out of the decedent's left leg below her knee.

**Special Conditions:** (CPR, Life Saving Attempts): Rescue breathing was performed on the decedent at the scene and Cardio Pulmonary Resuscitation (CPR) was performed for approximately fifteen minutes by EMS personnel during the duration of the ambulance transport to the hospital.

**Method of Decedent Identification:** (Photo, Relative/Acquaintance, other): The decedent was identified by her husband, (b)(6)

**Decedent Personal Info:** (Physical Description, DDL, SSN, Clothing, Marks, etc.): The decedent is a White female adult approximately 5' 5", 135 lbs, with blond hair and green eyes. The decedent's California Driver's License (CDL) number is (b)(6)

**Death Certificate Information:**

1. **Date/Time Last Seen Alive:** 11-09-08 / 0030 hours
  - a.) By Whom: (b)(6)
2. **Date/Time Discovered:** 11-09-08 / 0030 hours
  - a.) By Whom: (b)(6)
3. **Date/Time Pronounced Dead:** 11-09-08 / 0124 hours
  - a.) By Whom: Doctor John Velikoff
4. **Date/Time of Death Confirmation:** 11-09-08 / 0200
  - a.) By Whom: Deputy J. Todd #D1388

# El Dorado County Sheriff's Office

300 Fair Lane  
Placerville, CA 95667

CA00900  
Phone 530-621-5655  
Fax 530-626-8163

## Terminal Event Information:

2. **Estimated Date/Time of Event:** 11-09-08 / 0030 hours
3. **Location of Event Causing Death:** (Number, Street, City, Zip): (b)(6)  
CA 95682
4. **Describe How Event Occurred:** (Auto Collision, Hanging, etc.): All Terrain Vehicle roll over accident.
5. **Event Occurred at Work** (Yes/No): No  
If Yes, contact CAL/OCHA at (916)263-2800 within 8 hours of initial report.

## Details: (Witness Statement(s), Terminal Event, Medical History):

On 11-09-08, approximately 0133 hours, I was dispatched to a Coroner's Case at Marshall Hospital in Placerville regarding an adult female who suffered grave injuries resulting from an All Terrain Vehicle (ATV) accident. I responded and arrived at Marshall Hospital at approximately 0145 hours.

I contacted El Dorado County Fire Medic Unit 28 Paramedic Ben Anderson #P116. Ben told me on 11/09/08 at 0045 hours he was dispatched to an ATV accident at 3550 Resler Way in Shingle Springs. Ben said he arrived on scene at 0050 hours to find a White Female Adult, later identified by her husband as (b)(3):CPSA Section 25(c) who was unresponsive and had major head trauma. Ben stated the decedent was lying in the supine position and there were several frantic subjects standing around her. Ben did not observe anyone administering medical aid when he arrived.

Ben said the decedent was put on a backboard and he began CPR. Additionally, Ben connected the decedent to a heart monitor which displayed no heart activity. Ben performed CPR during the fifteen minute drive from the scene to the hospital where hospital staff assumed care of the decedent and pronounced her death. Ben did not observe anything suspicious at the scene of the ATV accident.  
End of statement.

I contacted the decedent's husband, (b)(6) at the hospital. (b)(6) told me his wife and he were visiting their friend, (b)(6) on the same day at (b)(6). (b)(6) said before leaving, he and his wife took a ride on (b)(6) ATV with (b)(6) son-in-law. (b)(6) said his wife was seated in the front passenger seat with (b)(6) in the driver seat. (b)(6) advised he was sitting behind his wife in the right rear passenger seat while (b)(6) was seated behind (b)(6) in the left rear passenger seat. (b)(6) said they were cruising along at approximately 10 MPH when the ATV rolled onto its right side. (b)(6) did not know what caused the ATV to roll.

(b)(6) said (b)(6) and himself righted the machine at which time he noticed his wife had been laying under the machine before it was righted. (b)(6) said his wife was bleeding from the head and was unresponsive. (b)(6) could not remember who called 911 but he said it was either (b)(6). (b)(6) stated (b)(6) went to meet the ambulance at the end of the driveway while (b)(6) and himself checked his wife for a pulse. (b)(6) was unable to locate a pulse.

# El Dorado County Sheriff's Office

300 Fair Lane  
Placerville, CA 95667

CA00900  
Phone 530-621-5655  
Fax 530-626-8163

Paramedics arrived a short time later and loaded the decedent into the ambulance before transporting her to Marshall Hospital. Lawrence said a friend drove him to the Marshall Hospital behind the ambulance. (b)(6) stated shortly after arriving at the hospital he was advised his wife was deceased. (b)(6) described the ATV as a multi passenger 4 wheeled ATV further defined as a Yamaha Rhino. End of statement.

I contacted (b)(6) via telephone who stated he was riding the ATV with (b)(6) and the decedent. (b)(6) said they were traveling approximately 5 – 10 MPH when the ATV tipped over on the right side. (b)(6) was not sure what caused the ATV to tip over. (b)(6) and (b)(6) righted the machine at which time (b)(6) noticed the decedent was lying on her back underneath where the ATV had tipped over. (b)(6) stated the decedent was unresponsive and covered in blood.

(b)(6) used his cell phone to dial 911 while (b)(6) went to meet the ambulance at the end of the driveway. (b)(6) said he and Lawrence checked for a pulse on the decedent. (b)(6) found a weak pulse. (b)(6) conducted rescue breathing measures until paramedics arrived. (b)(6) said the paramedics put the decedent on a backboard and loaded her in the ambulance. As the ambulance drove away (b)(6) saw paramedics performing CPR on the decedent through the rear door windows. End of statement.

I examined the decedent and found she was lying in a supine position on a backboard located on bed 7 inside the Marshall Hospital Emergency Room. The decedent was pale and cold to the touch. The decedent had no pulse and there was no sign of respiratory function. The decedent's eyes were closed. I checked and found there was no sign of petechia or pupil reaction. Lividity was present in the lower portions of the body consistent with the decedent's body position. Rigor Mortis was not present.

I observed a ¾" long by 1/16" deep laceration on the decedent's forehead just below her hair line. Also, there was a blood and clear fluid in and around the decedent's left ear. I saw blood coming out of the decedent's mouth and nose. The decedent was wearing an emergency neck immobilization device which covered the back of the head and neck. Additionally, I observed bruising at the base of the decedent's neck on both the left and right side. There did not appear to be any obvious signs of foul play.

I located tubes protruding from the decedent's mouth and a tube protruding from the decedent's left leg below her knee. Additionally, there was a medical patch on the front of each shoulder and a medical patch above each breast. There were two medical patches on the decedent's left side below her breast.

I contacted Emergency Room Medical Doctor John Velikoff who advised the decedent was brought in via ambulance. Upon arrival Dr. Velikoff examined the decedent and said based on the prolonged down time with no signs of life in conjunction with the decedent's severe head trauma he determined the decedent's condition was incompatible with life. Dr. Velikoff pronounced the decedent's death at 0124 hours.

**El Dorado County Sheriff's Office**

300 Fair Lane  
Placerville, CA 95667

CA00900  
Phone 530-621-5655  
Fax 530-626-8163

I requested Green Valley Mortuary respond to our location at 0252 hours. Green Valley Mortuary attendant, Randy Lund, arrived at 0330 hours and took possession of the decedent.

**Transportation/Mortuary Info:** (Date/Time, By Whom, Location): 11/09/08-0355 hours, Randy Lund from Green Valley Mortuary.

**Notification of Next of Kin:** (Name, Address, Phone, Date/Time of Notification, By Whom/Agency): Husband of decedent (b)(6), was notified in person at the hospital. His contact information is as follows

(b)(6)

Notification made on 11/09/08 at approximately 0200 hours at Marshal Hospital Emergency Room by Deputy J. Todd #D1388/EDSO.

**Property Sealed by Coroner:** (Residence/Vehicle, Date/Time): No property sealed by Coroner.

**Property Released By:** (Description, Date/Time): Grey metal watch removed from decedent's left wrist was released to her husband on 11/09/08 at approximately 0315 hours. No other property was on the decedent's person.

**Follow-up:** Forward to Coroner Detectives

Approved by : SGT GROTH P Date : 11/10/2008 09:46 AM

**El Dorado County Sheriff's Office**

300 Fair Lane  
Placerville, CA 95667

CA00900  
Phone 530-621-5655  
Fax 530-626-8163

Approved by : LOREYR Date : 11/11/2008 02:46 PM

**El Dorado County Sheriff's Office**

300 Fair Lane  
Placerville, CA 95667

CA00900  
Phone 530-621-5655  
Fax 530-626-8163

Supplement

Case Number  
**EM0811516**

Date  
**02/24/09**

Deputy  
**LEWALLEN J**

**SUPPLEMENTAL NARRATIVE**

**Victim Name:** (b)(3):CPSA Section 25(c)

**Details:** On February 24, 2009, I received the final autopsy report from the El Dorado Pathology medical Group regarding Decedent (b)(3):CPS. Decedent (b)(3):CPSA had been involved in an all-terrain vehicle accident and had sustained injuries that resulted in her death. Doctor Berry performed the autopsy on November 10, 2008 at Green Valley Mortuary.

Doctor Berry Determined that Decedent (b)(3):CPSA died from the following:

1. Basilar Skull Fracture With Cerebral Contusion (Immediate)
2. Massive Cranial Trauma (Immediate)

The above causes of death were listed in the preliminary autopsy report that was completed on November 10, 2008. The final autopsy report did not change in the area of the cause of death. The family was contacted and advised of the final autopsy report being completed. The family was advised of the availability of the report to be released.

Case Status – Closed - Accident

**Attachments**

Final Autopsy Report

Victim, or Victim's Parent/Guardian advised of confidentiality, per PC 293

Approved by : DET LEWALLEN J Date : 02/24/2009 08:04 AM

**El Dorado County Sheriff's Office**300 Fair Lane  
Placerville, CA 95667

CA00900

Phone 530-621-5655

Fax 530-626-8163

SupplementCase Number  
**EM0811516**Date  
**11/11/08**Deputy  
**LOREY R****SUPPLEMENTAL NARRATIVE****Victim Name:** (b)(3):CPSA Section 25(c)

**Details:** On 11-10-08 I reviewed this case involving the death of (b)(3):CPSA Section 25(c). The original investigation was completed by Deputy Todd. According to the report, (b)(3):CPSA was involved in an all-terrain vehicle accident. Following the accident, she was found to be unresponsive. Medics were summoned and life-saving attempts were made. (b)(3):CPSA was transported to Marshall Hospital, where death was pronounced.

Due to the circumstances of the incident, I decided an autopsy was necessary to determine the cause of death. An autopsy request was sent to El Dorado Pathology Medical Group. Dr. Berry completed the autopsy on 11-11-08 with Detective Harnage present. Detective Harnage took an identification photo of (b)(3):CPSA which was digitally attached to this report. Dr. Berry determined the following preliminary cause of death:

**Cause of Death:**

1. Basilar Skull Fracture With Cerebral Contusion (Immediate)
2. Massive Cranial Trauma (Immediate)

No other significant conditions were listed. Dr. Berry provided me with a Case Advisory form. I provided Green Valley Mortuary with a Coroner's Authorization to Release Remains. A Certificate of Death was completed. Copies of the above forms will be attached to this report. The family was notified of the above information.

**Case Status** – Active

Pending: Final Autopsy Report

 **Attachments**

Autopsy Request

Case Advisory

Coroner's Authorization to Release Remains

Working Copy of Certificate of Death

 **Victim, or Victim's Parent/Guardian advised of confidentiality, per PC 293**

EL DORADO PATHOLOGY MEDICAL GROUP

08-1516

1000 FOWLER WAY, SUITE 4  
PLACERVILLE, CA 95667-5738  
(530) 626-2608

JOHN R. CLAICHE, M.D.  
WILLIAM J. GILLES, M.D.  
MICHAEL C. BERRY, M.D.

**AUTOPSY REPORT**

<b>PATIENT:</b>	(b)(3):CPSA Section 25(c)	<b>ACCESSION#:</b>	A08-0163
<b>AGE:</b> 51	<b>DOB:</b> 01/14/1957	<b>CASE #:</b>	EM08-11516
<b>PHYSICIAN:</b>		<b>DATE COLLECTED:</b>	11/10/2008
<b>LOCATION:</b> GREEN VALLEY		<b>DATE RECEIVED:</b>	11/10/2008
		<b>DATE REPORTED:</b>	02/19/2009

**EXTERNAL APPEARANCE:**

The body is that of a well-developed, well-nourished, white female whose external appearance is consistent with the stated age. The body is identified by a name band on the left ankle and a hospital name band on the right wrist. The body is cool to touch and unembalmed. A neck brace is present. An endotracheal tube is present in the left corner of the mouth. Multiple EKG pads are present on the trunk. An intramedullary intravenous device is present proximally on the left leg, just medial and distal to the patella. The head is covered by slightly wavy reddish hair, measuring 6 inches in length. A laceration is present in the frontal scalp near the midline, measuring 1 cm in diameter. The bones of the face are palpably intact. There is some blood around the eyes, nose and mouth. There is some ecchymosis below the left orbit. The natural teeth are present and in good condition. The tongue is midline and free of trauma. There is some liquid blood in both external auditory canals. The neck has a palpable midline trachea. The chest is of normal diameter without crepitus. The breasts show evidence of augmentation with periareolar scarring. The abdomen is mildly protuberant without palpable organomegaly or mass lesions. The upper extremities are normally muscled. There is some dried blood on the upper extremities bilaterally. The hands are free of trauma. The nails are neatly trimmed. The lower extremities are normally muscled. There is some pinkish nail polish on all toenails. The back is free of significant trauma. The external genitalia are those of an adult female.

**PRIMARY INCISION AND BODY CAVITIES:**

The body is opened with the usual Y-shaped incision, revealing organs that are normally situated without evidence of surgical removal. Some rib fractures are present, consistent with resuscitative efforts. No effusions are noted. There is no blood within the thoracic cavity.

**NECK:**

The organs of the neck are normally situated. The trachea is midline and free of obstruction. The hyoid bone and thyroid cartilage are palpably intact. The thyroid gland is grossly unremarkable.

**EL DORADO PATHOLOGY MEDICAL GROUP**

68-11516

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**AUTOPSY REPORT**

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**HEART:**

The heart is normally positioned, weighing an estimated 400 gm. The coronary arteries are normally disposed and there is mild three-vessel coronary artery atherosclerosis with up to 25% occlusion of the left anterior descending coronary artery. The cut surface of the myocardium reveals the usual beefy red-brown coloration without fibrosis. The left ventricular thickness is 1.2 cm. There is mild thickening and shortening of the mitral and aortic valve leaflets. The aorta shows mild atherosclerosis.

**LUNGS:**

The lungs are normally positioned, the left lung weighing an estimated 300 gm, the right lung an estimated 400 gm. Dependent congestion is present in both lungs. The major airways are free of obstruction. No pulmonary emboli are seen. Sections through the lungs reveal marked congestion without consolidation or mass lesion.

**GASTROINTESTINAL TRACT:**

The GI tract is intact throughout its length. The esophagus is lined by the usual gray-tan mucosa without ulceration or nodularity. The stomach contains a small amount of liquid material. The mucosa has the usual rugal pattern. The small and large bowel are grossly unremarkable.

**HEPATOBIILIARY:**

The liver is normally positioned, weighing an estimated 1600 gm. The capsule is intact. The cut surface of the liver is tan-brown in color without fibrosis or mass lesions. The gallbladder is thin walled without calculi.

**PANCREAS:**

The peripancreatic fat is unremarkable. The cut surface of the pancreas has the usual lobulated gray-tan parenchyma without cystic change or mass lesions.

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**GENITOURINARY:**

The kidneys are normally position, each weighing an estimated 200 gm. The capsules strip with mild difficulty, revealing an underlying cortical surface that is finely granular without coarse scarring. The cut surface of both kidneys reveals a sharp distinction between cortical and medullary areas without thinning of the cortex. The collecting system is patent, nondilated and empties into a bladder containing approximately 50 cc of clear yellow urine. The bladder mucosa has the usual trabeculated pattern. The uterus, fallopian tubes and ovaries are appropriate to age.

**LYMPHORETICULAR:**

The spleen is normally positioned, weighing an estimated 100 gm. The capsule is intact. The cut surface of the spleen is purple with distinct red and white pulp areas. No infarcts or mass lesions are sent. There is no significant lymphadenopathy.

**ENDOCRINE:**

The thyroid gland is unremarkable. The adrenal glands are normal in position, shape, color and size.

**HEAD AND CENTRAL NERVOUS SYSTEM:**

The scalp is reflected, revealing some areas of frontal subgaleal hemorrhage. The skull cap is removed, revealing contusional hemorrhage over the lateral parietal lobes bilaterally. There is also some contusional hemorrhage of the cerebellum. The brain weighs an estimated 1200 gm. The meninges are translucent. Sectioning through the brain reveals some superficial contusional hemorrhage in the parietal lobes bilaterally. Similar hemorrhage is presenting the cerebellum. A large basilar skull fracture is present that extends across the entire width of the skull, with the fracture line at approximately the interface between the anterior and middle cranial fossa. The anterior bones of the basal skull are completely mobile and there is hemorrhage at the site of skull fracture.

**SPECIMENS FOR TOXICOLOGY:**

No liquid blood is available. Subsequently, no toxicologic specimen is submitted.

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**AUTOPSY REPORT**

PATIENT:	(b)(3):CPSA Section 25(c)	ACCESSION#:	A08-0163
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PHYSICIAN:		DATE COLLECTED:	11/10/2008
LOCATION: GREEN VALLEY		DATE RECEIVED:	11/10/2008
		DATE REPORTED:	02/19/2009

**SPECIMENS FOR PATHOLOGY:**

Representative portions of all major organs are retained for pathologic analysis.

**AUTOPSY FINDINGS:**

- I. BASILAR SKULL FRACTURE WITH CEREBRAL CONTUSIONS, SECONDARY TO #II.
- II. MASSIVE CRANIAL TRAUMA.
- III. CONGESTION, LUNGS.
- IV. MILD CORONARY ARTERY ATHEROSCLEROSIS.
- V. ARTERIOLONEPHROSCLEROSIS, BILATERAL KIDNEYS.
- VI. MILD ATHEROSCLEROSIS, AORTA.
- VII. RIB FRACTURES, ATTRIBUTABLE TO RESUSCITATIVE EFFORTS.
- VIII. STATUS POST BREAST AUGMENTATION WITH INTACT SILICONE IMPLANTS.

MCB:sb

**MICROSCOPIC:**

**HEART:**

Sections through the heart reveal mild hypertrophic change.

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**LUNGS:**

Sections through the lungs reveal apparent emphysematous change, congestion and interalveolar hemorrhage.

**LIVER:**

Sections through the liver reveal no significant abnormalities.

**PANCREAS:**

Sections through the pancreas reveal autolytic changes.

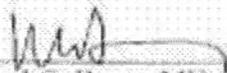
**BRAIN:**

Sections through the cerebrum reveal areas of contusional hemorrhage. The cerebellum is fairly unremarkable.

**CAUSE OF DEATH:**

- I. BASILAR SKULL FRACTURE WITH CEREBRAL CONTUSIONS (SECONDS), SECONDARY TO #II.
- II. MASSIVE CRANIAL TRAUMA (SECONDS).

MCB:sb

  
Michael C. Berry, MD

1. Task Number 090828CCC3933		2. Investigator's ID 2259		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
3. Office Code 840	4. Date of Accident YR MO DAY 2009 06 06	5. Date Initiated YR MO DAY 2009 09 11		
6. Synopsis of Accident or Complaint UPC A 37-year-old male victim was driving in a side by side utility vehicle with his four-year-old son strapped into a car seat in the passenger seat. As they came around a blind corner, he saw a rock in the road and applied hard braking to try to avoid the rock. The tire of the vehicle hit the rock while under full braking and the rock and vehicle slid to edge of 125 yard drop off. The victim pushed his son from the vehicle. The victim's foot slipped off the brake and the vehicle rolled down the embankment into a creek. The victim was hospitalized with a fractured skull and other injuries. His son only sustained a bruise from the incident. The victim was wearing a seatbelt, but neither him nor his son were wearing helmets.				
MFR/PRVLR NOTIFIED COMMENTS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> OVERRULED; <input type="checkbox"/> ATTACHED <input checked="" type="checkbox"/> EXCISIONS/FOIA EXS. 3, 25c, 6 <input checked="" type="checkbox"/> DO NOT RE-NOTIFY <input type="checkbox"/> RE-NOTIFY				
7. Location (Home, School, etc) 9 - SPORTS OR RECREATION PLACE		8. City MAYFIELD		9. State UT
10A. First Product 5044 - Utility Vehicles		10B. Trade/Brand Name POLARIS/ VIN 4XAVH76A39D643107		10C. Model Number RANGER RZR
10D. Manufacturer Name and Address POLARIS INDUSTRIES INC. 2100 Highway 55 Medina, MN 55340				
11A. Second Product 0		11B. Trade/Brand Name NONE		11C. Model Number NONE
11D. Manufacturer Name and Address NONE				
12. Age of Victim 37	13. Sex 1 - Male	14. Disposition 4 - Hospitalized	15. Injury Diagnosis 57 - Fracture	
16. Body Part(s) Involved 75 - HEAD	17. Respondent 1 - Victim/Complainant	18. Type of Investigation 2 - Telephone	19. Time Spent (Operational / Travel) 9 / 0	
20. Attachment(s) 9 - Multiple Attachments		21. Case Source 05 - Newspaper		22. Sample Collection Number
23. Permission to Disclose Name (Non NEISS Cases Only) <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Verbal <input checked="" type="radio"/> Yes for Manuf. Only				
24. Review Date 10/13/2009	25. Reviewed By 8232		26. Regional Office Director Frank J. Nava	
27. Distribution Topka, Tanya			28. Source Document Number X0980651A	

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This case was initiated through a newspaper article which indicated the victim was hospitalized after rolling down a hill into a river on an ATV. Information for this report was obtained from the victim, a deputy sheriff involved in the investigation and rescue, and an insurance agent. This was a telephone investigation. No samples were collected.

The first victim in this incident is a 37-year-old male approximately 5'10" 180 pounds. The second victim is his five-year-old son who is approximately 3 foot tall and 35 pounds. The adult victim in this incident has been riding off-road ATV vehicles most of his life. He appeared very knowledgeable in ATV operation and maintenance and indicated he has always done his own mechanical work and modifications on his machines.

The particular side-by-side utility vehicle involved in this incident was in good repair, was less than one year old, and had received multiple modifications by the victim. These modifications included the addition of a half size windshield, 14 inch radial tires placed on 14" x 7" wheels, a utility rack installed on the back of the vehicle, off-road lights, and a 1/8 inch thick single skid plate on the bottom of the vehicle, and a rack designed to hold his son's car seat in place in the passenger seat of the vehicle. The victim indicated the modified wheels and tires made the vehicle's wheelbase slightly wider.

This incident occurred on a remote dirt and gravel trail on U.S. Forest Service land. The victim and his family had been camping in the forest. The victim and his son had spent the day fishing a high mountain lake. When this incident occurred they were driving back to the camp in the involved vehicle. The victim stated the trail they were driving back to the camp was approximately 52 inches wide making the vehicle approximately as wide as the trail itself. The trail sat atop a very steep drop-off embankment. The deputy sheriff interviewed about this incident made a comment to the effect that this trail was perhaps the most treacherous ATV trail in his jurisdiction. The section where the incident occurred was on a steep decline though nobody interviewed could give an estimate of the actual grade. The victim stated he was driving and his son was in his car seat in the passenger seat. They were both seatbelted in. Neither was wearing a helmet.

The victim stated he was driving approximately 15 to 20 mph and was making a turn through a left-hand blind curve. As he was completing the curve he suddenly saw a large rock in the trail. He applied the brakes in an attempt to stop before striking the rock. His tire did strike the rock with the brakes applied and the vehicle and the rock slid to the edge of the steep drop-off. The vehicle came to a stop while he had his foot applying pressure to the brake pedal. While still applying the brake the victim reached over and unbuckled his son from the car seat and pushed him out of the vehicle. His son fell to the ground on the embankment side. He stated his son received no injuries from this incident. The Sheriff's office report states the child received a bruise to his eye but no other injuries.

The victim stated his foot slipped off of the brake pedal and when it did the vehicle rolled to the right down the embankment with him still inside. The vehicle rolled approximately 125 yards to the bottom of the embankment into a creek. The victim remained there until his wife contacted Sheriff's office search and rescue personnel when the victim did not return the camp and she could not find them. The victim was located by his wife before emergency personnel arrived. They did have to complete a rescue operation to get the victim back to the trail. He was then transported on an ATV to a waiting air ambulance. The victim was hospitalized and underwent surgery for his injuries. Injuries included a skull fracture with his skull being separated into five pieces, fractures to his C6 and C7 vertebrae, and multiple sprains in his legs. The victim remained seat belted in the vehicle throughout the rollover. The victim stated the factory roll cage did stay intact. Cab nets, which are fabric nets that hook to the vehicle in place of doors, were not in place on the vehicle. (Exhibit #3 Page 29)

The victim and the deputy sheriff both indicated they had photographs of the accident scene and the involved product. They both indicated in phone interviews that they would e-mail photographs to me. Follow-up e-mails were sent to both subjects after the phone interviews reminding them of their offer to forward photographs. I did not receive photographs from either party. I obtained a stock photograph of the involved vehicle type form the internet for reference only. (Exhibit#1) The VIN number was obtained from the insurance company. The sheriff's report (Exhibit#2) indicated the involved vehicle was a 2008 model. The insurance company indicated it was a 2009. The 10th digit reference number in the VIN number indicates this is a 2009 model. The sheriff's report and the victim himself indicate the victim suffered memory loss related to the accident. The victim stated that immediately after the accident, he told his wife what had happened, but he had since forgotten. He stated the details he was providing me, were the details she told him he relayed immediately after the accident.

The victim stated that he wanted to add to the report that the only details related to the vehicle he feels could have made a difference in this accident would have been the existence of a manually operated emergency brake. He stated that there are aftermarket emergency brakes available to be added to the vehicle but that he not done so with this machine yet. The victim felt that had he had a manual emergency brake that he could have applied he might not have rolled down the hill. He also stated that though he was not sure of it, perhaps some type of grip surface on the brake pedal may have also made a difference.

The victim did not Contact the manufacturer after this incident. The vehicle was insured and the insurance company did provide reimbursement to him. The owner's manual was obtained from the manufacturer website. (Exhibit#3)

**PRODUCT IDENTIFICATION:**

The product involved in this incident was a 2009 **POLARIS** Ranger RZR side by side utility vehicle. The VIN number was 4XAVH76A39D643107. It was black in color. It was purchased new in 2008 and cost approximately \$11,000.

**Manufacturer:**

Polaris Industries, Inc.  
2100 Highway 55  
Medina, MN 55340  
1-800-765-2747

**Retailer:**

Plaza Cycle  
1379 West 3300 South  
Salt Lake City, UT 84119  
801-972-8725

This is a two seat side by side utility vehicle with a rear mounted engine, automatic transmission and all wheel drive. Steering is through a steering wheel. The cab is open with a roll cage and side shoulder and hip bars are mounted along the exterior edge of each seat. Cabs nets are provided which hook into place over the door openings in the absence of doors. The vehicle is equipped with driver and passenger side seat belts.

**Specification from Owner's Manual:**

- Gross Vehicle Weight 1727 lbs. (783 kg) (RZR) 1782 lbs. (808 kg) (RZR S)
- Dry Weight 945 lbs. (429 kg) (RZR) 1000 lbs. (454 kg) (RZR S)
- Rear Cargo Box Capacity 300 lbs. (136 kg)
- Maximum Weight Capacity (Payload) 740 lbs. (336.4 kg) (riders/cargo/accessories/trailer tongue weight)
- Receiver Hitch Tongue Capacity 150 lbs. (68 kg)
- Receiver Hitch Towing Capacity 1500 lbs. (680 kg)
- Fuel Capacity 7 gal. (26.5 l)
- Engine Oil Capacity 2 qts. (1.9 l)
- Coolant Capacity 4.8 qts. (4.5 l)
- Rear Gearcase Oil Capacity 26 oz. (769 ml)

- Demand Drive Fluid Capacity 6.75 oz. (200 ml)
- Transmission Oil Capacity 24 oz. (710 ml)
- Transfer Case Oil Capacity 14 oz. (414 ml)
- Overall Length/Width/Height 102/50/68.5 in. (259/127/174 cm) (RZR)  
106/60.5/70.5 in. (269/154/179 cm) (RZR S)
- Wheelbase 77 in. (196 cm)
- Ground Clearance 10 in. (25.4 cm) (RZR) 12 in. (30.5 cm) (RZR S)
- Engine 4 valve 4 stroke twin cylinder with counterbalance
- Displacement 760 cc
- Bore x Stroke 80mm x 76mm
- Alternator Output 500 W @ 3000 RPM
- Compression Ratio 10:1
- Starting System Electric
- Fuel System Electronic fuel injection
- Ignition System ECU
- Spark Plug / Gap RC7YC / .035 in. (0.9 mm)
- Front Suspension Independent double a-arm with travel:
  - 9 in. (23 cm) (RZR)
  - 12 in. (30.5 cm) (RZR S)
- Rear Suspension Independent double a-arm with travel:
  - 9.5 in. (24 cm) (RZR)
  - 12 in. (30.5 cm) (RZR S)
- Lubrication System Wet Sump
- Engine Oil 0W/40
- Driving System Type Automatic Polaris Variable Transmission
- Shift Type Dual Range P/R/N/L/H
- Gear Reduction - Low 8.71:1
- Gear Reduction - Reverse 5.94:1
- Gear Reduction - High 3.14:1
- Drive Ratio - Front 3.82:1
- Drive Ratio - Final 3.70:1
- Tire Size - Front 25x8-12 (RZR), 26x9-12 (RZR S)
- Tire Size - Rear 25x10-12 (RZR), 26x12-12 (RZR S)
- Tire Pressure - Front 8 psi (55 KPa)
- Tire Pressure - Rear 8 psi (55 KPa)
- Brakes, Front/Rear Foot Activated, 4-wheel hydraulic disc
- Headlights 2 single beam, 55W, quartz/halogen
- Taillights 2 single beam, 5W
- Brake Lights 2 single beam, 5W

- Instrument Cluster LCD
- Auxiliary DC Outlet 12V

**EXHIBITS:**

- Exhibit #1: Photographs (1 photo A)  
Exhibit #2: Sheriff's Report  
Exhibit #3: Owner's Manual



Photo A: Stock Photo taken from: <http://www.motorcycle-usa.com/photogallerys/2009-Ranger-RZR-LE-Stealth-Black.jpg>

**Incident Report #09060160****Sanpete County Sheriff**

P.O. Box 130  
Manti, Utah 84642  
(435) 835-2191

**Event Info**

Date Reported	Time Reported	Time Dispatched	Time Arrived	Time Completed
06/06/2009	17:19	17:28	19:09	21:29
Addr. Of Occ.	City	District	Grid	How Reported
MAYFIELD CANYON	SANPETE COUNTY	S	4000	911

**Dispatch Disposition**

RPT

**Synopsis**

1Q207 GIVES OUT A BIG THANKS TO THE S AND R GUYS THEY REALLY SAVED HIS LIFE 6/6/2009 9:29:37 PM  
ACCIDENT OCCURRED UP PIN SHOT TRAIL 6/6/2009 8:09:55 PM AIR MED IS AIR BORN 6/6/2009 8:08:30 PM AIR MED  
HAS LANDED IN LANDING ZONE 6/6/2009 7:57:23 PM AIR MED COOR ARE N 306.675 AND W 11135.795 6/6/2009 7:57:12  
PM PATIENT HAS A BROKEN LEG, HEAD INJURY, HYPOTHERMIC, 6/6/2009 7:56:30 PM AIR MED IS ON IT WAY 6/6/2009  
7:55:56 PM S AND R 6/6/2009 7:55:47 PM CALLED OUT CERT TEAM 6/6/2009 7:55:38 PM ATV ACCIDENT 6/6/2009 7:55:24  
PM MISSING FATHER UP TRAIL HEAD NUMBER 2 6/6/2009 5:27:18 PM

Agency 1	Event Status/Dispo	Event Status/Disp	Initial Investigator
SANPETE SO	CLEARED	06/08/2009	BARNES, ZACH

**Classification****Classification Info****COMPLETED**

Class	Subclass
TRAFFIC ACCIDENT	TRAFFIC ACCIDENT, INJURY

**Event MO**

No Premise Entered	No Companions	Auto Weapon Indicator
0	0	N

**Other Involved****RPTG PARTY Information**

Name Type	Name	City	State	Zip	Res Phone
RPTG PARTY	(b)(6)	BLUFFDALE	UT	84065	(b)(6)
Address	(b)(6)				

**RPTG PARTY Information**

Name Type	Name	City	State	Zip	Res Phone
RPTG PARTY	(b)(6)	BLUFFDALE	UT	84065	(b)(6)
Address	(b)(6)				

**DRIVER Information**

Name Type	Name				
DRIVER	(b)(3):CPSA Section 25(a)				
Address	City	State	Zip	DOB	
(b)(6)	BLUFFDALE	UT	84065	11/29/1971	
SEX	RACE	Res Phone			
M	WHITE	(b)(6)			

**PASSENGER Information**

Name Type	Name				
PASSENGER	(b)(6)				
Address	City	State	Zip	DOB	
(b)(6)	BLUFFDALE	UT	84065	08/01/2004	
SEX	RACE	Res Phone			
M	WHITE	(b)(6)			

**OTHER INV Information**

Name Type	Name				
OTHER INV	(b)(6)				
Address	City	State	Zip	DOB	
(b)(6)	BLUFFDALE	UT	84065	01/14/1997	
SEX	RACE	Res Phone			
F	WHITE	(b)(6)			

**Narrative**

Written By:  
BARNES, ZACH

Barnes 1Q18 Initial Case #0906-0160 06/08/09 1109 hours

Narrative:

On 06/06/09 at approximately 1800 hours I was dispatched with Deputy Nunley to Mayfield Canyon on a lost person. Dispatch indicated that the complainant, Andria Gonda (11/24/72), could not locate her husband up the canyon. Deputy Nunley and I drove up Mayfield Canyon in the direction we were given.

Dispatch informed us that we were to follow trail #2 up the lower canyon road. We arrived at the trail head of the Pinchot trail. At that time Sanpete County Search and Rescue arrived and began up the Pinchot trail on four wheelers and ATV's. Deputy Nunley and I rode with them to the scene. Approximately one mile up the Pinchot trail Search and Rescue located (b)(6) (01/14/97) and her brother (b)(6) (08/01/04). They informed Search and Rescue that their father, (b)(6) (11/29/71) and their mother (b)(6) were at the bottom of the canyon in the river.

Search and Rescue then located (b)(6) in the river approximately one hundred twenty five yards from the trail at the bottom of a small canyon. Andria was holding Robert as he had been injured in an ATV accident.

(b)(6) had been driving his black in color 2008 Polaris RAZR down the trail and had gone over the edge. At one point the ATV was teetering when (b)(6) pushed his son (b)(6) from the ATV prior to going down the mountain. (b)(6) had only a small bruise under his eye from the incident. The ATV came to a stop at the bottom and ended in the river.

Search and Rescue and the ambulance crew from Gunnison were already attending to Robert's injuries when Deputy Nunley and I arrived at the scene of the accident. We assisted in crossing the river and getting Robert onto the stretcher. We then carried him across the river. After crossing the river we attached the stretcher to a winch up the mountain. We then lifted the stretcher while the winch pulled it up the mountain. On the way up the mountain we spoke with Robert. He had a difficult time remembering what had taken place. He had suffered a head injury. Robert heard Andria's voice and began asking to speak with his wife. He then immediately asked about his children. We ensured him that both of them were safe.

We lifted Robert onto an ATV where he rode to the landing zone for AIR MED. They landed on the mountain approximately one quarter mile from where the accident occurred. Gunnison ambulance crew informed AIR MED that Robert had suffered a head injury and lost a lot of blood from that wound. He also suffered a broken leg and complained of pain in his neck. Robert was transported by AIR MED to the University of Utah hospital.

Andria, Robert JR., and Bailey were taken back to their camp where Andria then left in their truck to the hospital. On 06/08/09 at approximately 0830 I spoke with Andria who stated Robert was doing well. He had surgery on the previous day and had already gone for a walk. She stated he is in good condition at this time.

### Case Management

<b>Initial Investigator</b> BARNES, ZACH	<b>Event Status/Dispo</b> CLEARED	<b>Event Status/Dispo Date</b> 06/08/2009	<b>Report Status</b> APPROVED
<b>Approved By</b> LARSEN, GARY	<b>Solvability Percentage</b> %		

**POLARIS**<sup>®</sup>  
**The Way Out.**



**RANGER**  
**RZR**<sup>™</sup>

**2009**  
**Owner's Manual**  
*for Maintenance and Safety*

# **WARNING**

Improper vehicle use can result in SEVERE INJURY or DEATH

**NEVER Operate:**

- without first viewing safety video and quick start guide.
- with more than one passenger.
- on hills steeper than 15 degrees.
- on public roads.
- on paved surfaces - pavement may seriously affect handling and control.
- with non-Polaris approved accessories - they may seriously affect stability.

**ALWAYS:**

- keep hands and feet inside vehicle.
- reduce speed and use extra caution when carrying a passenger.
- operate slowly in reverse - avoid sharp turns or sudden braking.
- make sure passenger reads and understands all safety labels.
- watch for branches or other hazards that could enter vehicle.



**ALWAYS USE AN APPROVED HELMET AND PROTECTIVE GEAR FOR OPERATOR AND PASSENGER**

**NEVER USE ON PUBLIC ROADS - NEVER USE WITH DRUGS OR ALCOHOL  
LOCATE AND READ OWNER'S MANUAL. FOLLOW ALL INSTRUCTIONS AND WARNINGS. IF OWNER'S MANUAL IS MISSING, CONTACT A POLARIS DEALER FOR A REPLACEMENT.**



For your nearest Polaris dealer,  
call 1-800-POLARIS  
or visit [www.polarisindustries.com](http://www.polarisindustries.com)

Polaris Sales Inc.,  
2100 Hwy. 55, Medina, MN 55340  
Phone 1-888-704-5290

Part No. 9921878 Rev 02  
Printed in USA

**⚠ WARNING**

Read, understand, and follow all of the instructions and safety precautions in this manual and on all product labels.

Failure to follow the safety precautions could result in serious injury or death.

**⚠ WARNING**

The engine exhaust from this product contains chemicals known to the State of California to cause cancer, birth defects or other reproductive harm.

**WELCOME**

Thank you for purchasing a Polaris vehicle, and welcome to our world-wide family of Polaris owners. We proudly produce an exciting line of utility and recreational products.

- Snowmobiles
- All-terrain vehicles (ATVs)
- *RANGER* utility vehicles
- Victory motorcycles

We believe Polaris sets a standard of excellence for all utility and recreational vehicles manufactured in the world today. Many years of experience have gone into the engineering, design, and development of your Polaris vehicle, making it the finest machine we've ever produced.

For safe and enjoyable operation of your vehicle, be sure to follow the instructions and recommendations in this owner's manual. Your manual contains instructions for minor maintenance, but information about major repairs is outlined in the Polaris Service Manual and should be performed only by a Factory Certified Master Service Dealer (MSD) Technician.

Your Polaris dealer knows your vehicle best and is interested in your total satisfaction. Be sure to return to your dealership for all of your service needs during, and after, the warranty period.

We also take great pride in our complete line of apparel, parts and accessories, available through our online store at [www.purepolaris.com](http://www.purepolaris.com). Have your accessories and clothing delivered right to your door!



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Printed in U.S.A.

2009 *RANGER* RZR Owner's Manual

P N 9921878

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## INTRODUCTION

The following signal words and symbols appear throughout this manual and on your vehicle. Your safety is involved when these words and symbols are used. Become familiar with their meanings before reading the manual.



The safety alert symbol indicates a potential personal injury hazard.

### **WARNING**

A **WARNING** indicates a hazardous situation which, if not avoided, may result in death or serious injury.

### **CAUTION**

A **CAUTION** indicates a hazardous situation which, if not avoided, may result in minor or moderate injury.

### **NOTICE**

A **NOTICE** indicates a situation that may result in property damage.



The Prohibition Safety Sign indicates an action **NOT** to take in order to avoid a hazard.



The Mandatory Action Sign indicates an action that **NEEDS** to be taken to avoid a hazard.

## INTRODUCTION

### **⚠ WARNING**

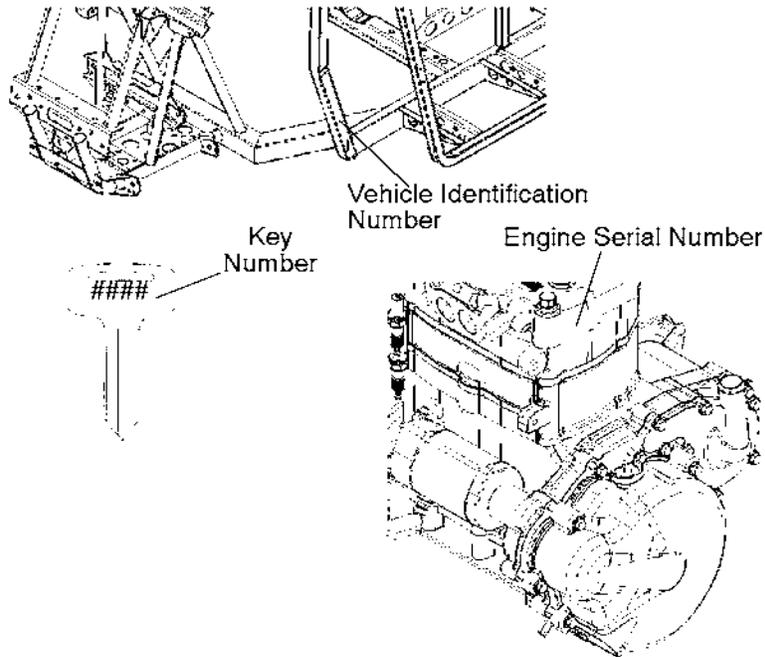
Failure to heed the warnings and safety precautions contained in this manual can result in severe injury or death. Your Polaris vehicle is not a toy and can be hazardous to operate. This vehicle handles differently than cars, trucks or other off-road vehicles. A collision or rollover can occur quickly, even during routine maneuvers like turning, or driving on hills or over obstacles, if you fail to take proper precautions.

- Read this owner's manual. Understand all safety warnings, precautions and operating procedures before operating the vehicle. Keep this manual with the vehicle.
- Complete the New Operator Driving Procedures outlined on pages 54-55. Never allow a guest to operate this vehicle until the guest has completed the New Operator Driving Procedures.
- This vehicle is an **ADULT VEHICLE ONLY**. Operation is prohibited for anyone under 16 years of age or anyone without a valid driver's license.

# INTRODUCTION

## Vehicle Identification Numbers

Record your vehicle's identification numbers and key number in the spaces provided. Remove the spare key and store it in a safe place. An ignition key can be duplicated only by ordering a Polaris key blank (using your key number) and mating it with one of your existing keys. The ignition switch must be replaced if all keys are lost.



Vehicle Model Number: \_\_\_\_\_

Vehicle Identification Number: \_\_\_\_\_

Engine Serial Number: \_\_\_\_\_

Key Number \_\_\_\_\_

**SAFETY****Equipment Modifications**

Your Polaris vehicle is designed to provide safe operation when used as directed. Modifications to your vehicle may negatively impact vehicle stability. Failure of critical machine components may result from operation with any modifications, especially those that increase speed or power. This vehicle may become less stable at speeds higher than those for which it is designed. Loss of control may occur at higher speeds.

Do not install on a Polaris vehicle any equipment that may increase the speed or power of the vehicle, or make any other modifications to the vehicle for these purposes. Any modifications to the original equipment of the vehicle create a substantial safety hazard and increase the risk of bodily injury.

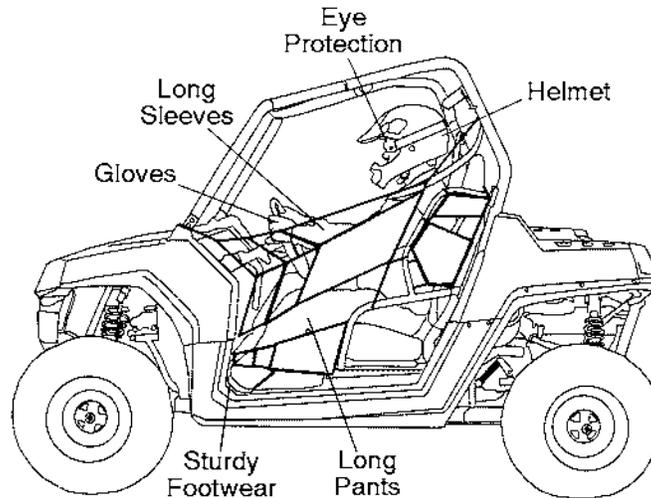
The warranty on your Polaris vehicle is terminated if any equipment has been added to the vehicle, or if any modifications have been made to the vehicle, that increase its speed or power.

The addition of certain accessories, including (but not limited to) mowers, blades, tires, sprayers, or large racks, may change the handling characteristics of the vehicle. Use only Polaris-approved accessories, and familiarize yourself with their function and effect on the vehicle.

## SAFETY

### Safe Riding Gear

Always wear appropriate clothing when riding a Polaris vehicle. Wear protective clothing for comfort and to reduce the chance of injury.

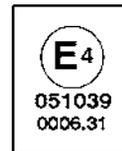


### Helmet

Wearing a helmet can prevent a severe head injury. Whenever riding this Polaris vehicle, always wear a helmet that meets or exceeds established safety standards.

Approved helmets in the USA and Canada bear a U.S. Department of Transportation (DOT) label.

Approved helmets in Europe, Asia and Oceania bear the ECE 22.05 label. The ECE mark consists of a circle surrounding the letter E, followed by the distinguishing number of the country which has granted approval. The approval number and serial number will also be displayed on the label.



## **SAFETY**

### **Safe Riding Gear**

#### **Eye Protection**

Do not depend on eyeglasses or sunglasses for eye protection. Whenever riding a Polaris vehicle, always wear shatterproof goggles or use a shatterproof helmet face shield. Polaris recommends wearing approved Personal Protective Equipment (PPE) bearing markings such as VESC 8, V-8, Z87.1, or CE. Make sure protective eye wear is kept clean.

#### **Gloves**

Wear gloves for comfort and for protection from sun, cold weather and other elements.

#### **Boots**

Wear sturdy footwear. Do not ride a Polaris vehicle with bare feet.

#### **Clothing**

Wear long sleeves and long pants to protect arms and legs.

## SAFETY

### Safety Warnings

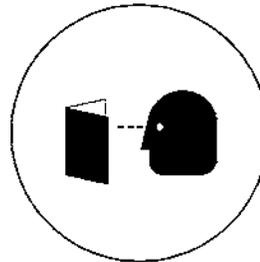
#### **▲ WARNING**

Failure to operate this vehicle properly can result in a collision, loss of control, accident or overturn, which may result in serious injury or death. Heed all safety warnings outlined in this section of the owner's manual. See the OPERATION section of the owner's manual for proper operating procedures.

#### **Operating Without Instruction**

Operating this vehicle without proper instruction increases the risk of an accident. The operator must understand how to operate the vehicle properly in different situations and on different types of terrain. Complete the New Operator Driving Procedures outlined on pages 54-55.

All operators must read and understand the owner's manual and all warning and instruction labels before operating the vehicle. Never allow a guest to operate this vehicle until the guest has completed the New Operator Driving Procedures outlined on pages 54-55.



#### **Age Restrictions**

This vehicle is an ADULT VEHICLE ONLY. Operation is prohibited for anyone under 16 years of age or anyone without a valid driver's license. Never operate with a passenger under the age of 12. Make sure any passenger is tall enough to comfortably and safely reach the hand holds and place both feet on the floor.

#### **Accessories**

Non-approved accessories may seriously affect vehicle stability. Using accessories not approved by Polaris for use on this vehicle could cause loss of control or an accident. Never operate with accessories not approved by Polaris for use on this vehicle.

#### **Using Alcohol or Drugs**

Riding in this vehicle after consuming alcohol or drugs could adversely affect operator judgment, reaction time, balance and perception.

Never consume alcohol or drugs before or while operating or riding in this vehicle.



## **SAFETY**

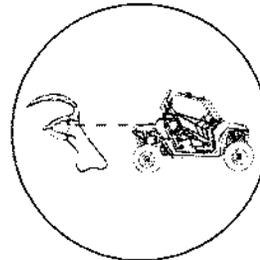
### **Safety Warnings**

#### **Failure to Inspect Before Operating**

Failure to inspect and verify that the vehicle is in safe operating condition before operating increases the risk of an accident.

Always inspect the vehicle before each use to make sure it's in safe operating condition.

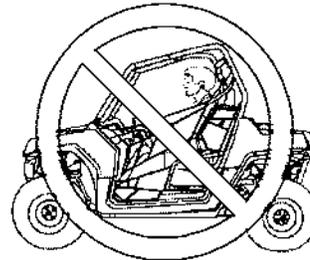
Always follow the inspection and maintenance procedures and schedules described in the owner's manual.



#### **Protective Apparel**

Riding in this vehicle without wearing an approved helmet and protective eyewear increases the risk of a serious injuries in the event of an accident.

Operator and passenger must always wear an approved helmet that fits properly and eye protection (goggles or face shield).



#### **Seat Belts**

Riding in this vehicle without wearing the seat belt increases the risk of serious injury in the event of an accident or sudden stop. Riders *must* wear seat belts at all times. Seat belts reduce the severity of injury in the event of a sudden stop or accident. Always make sure the seat belts are secured for both the operator and passenger before riding.

#### **Cab Nets/Side Guards**

Riding in this vehicle without using the cab nets and side guards increases the risk of serious injury or death in the event of an accident or overturn. Always use the cab nets and side guards while riding in this vehicle.

*Always keep hands and feet inside the vehicle at all times.*

# SAFETY

## Safety Warnings

### Carrying a Passenger

Never carry a passenger until you have operated this vehicle for at least two hours and have completed the New Operator Driving Procedures outlined on pages 54-55.

### Carrying Multiple Passengers

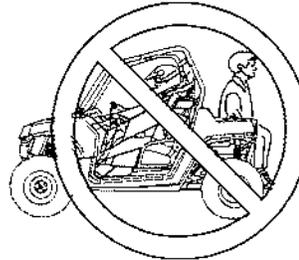
Carrying more than one passenger in this vehicle can affect the operator's ability to steer and operate the controls, which increases the risk of loss of control and accident or overturn.

Never carry more than one passenger in this vehicle.



### Passengers in the Cargo Box

Carrying a passenger in the cargo box could result in a fall from the vehicle or contact with moving components. Never allow a passenger to ride in the cargo box. A passenger must always be seated in the passenger seat with seat belt secured.



### Operating on Pavement

Operating this vehicle on paved surfaces (including sidewalks, paths, parking lots, and driveways) may seriously affect handling and control of the vehicle, and may cause the vehicle to go out of control. This vehicle's tires are designed for off-road use only, not for use on pavement.

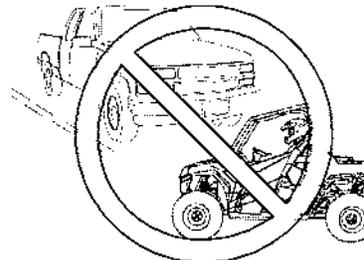
Avoid operating the vehicle on pavement. If you must operate on a paved surface, travel slowly and do not make sudden turns or stops.

### Operating on Public Roads

Operating this vehicle on public streets, roads or highways could result in a collision with another vehicle.

Never operate this vehicle on any public street, road or highway, including dirt and gravel roads.

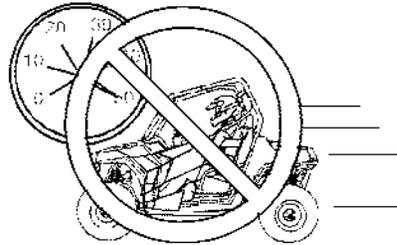
In many areas it's illegal to operate vehicles of this type on public streets, roads and highways.



**SAFETY****Safety Warnings****Operating at Excessive Speeds**

Operating this vehicle at excessive speeds increases the operator's risk of losing control.

Always operate at a speed that's appropriate for the terrain, the visibility and operating conditions, your skills and your passenger's skills.

**Turning Improperly**

Turning improperly could cause loss of traction, loss of control, accident or overturn. Always follow proper procedures for turning as described in the owner's manual.

Avoid sharp turns. Never turn while applying heavy throttle. Never make abrupt steering maneuvers. Practice turning at slow speeds before attempting to turn at faster speeds.

**Physical Control of the Vehicle**

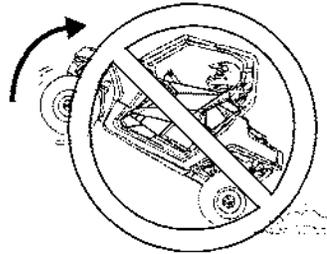
Removing hands from the steering wheel or hand holds or removing feet from the floor while riding increases the risk of loss of control and accident or overturn.

The operator should always keep both hands on the steering wheel during operation. A passenger should always be seated in the passenger seat with both feet on the floor and with both hands securely grasping the hand holds.

*Always keep hands and feet inside the vehicle at all times.*

**Jumps and Stunts**

Exhibition driving increases the risk of an accident or overturn. DO NOT do power slides, "donuts", jumps or other driving stunts. Avoid exhibition driving.



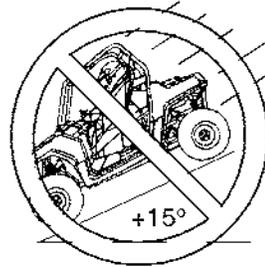
## **SAFETY**

### **Safety Warnings**

#### **Descending Hills Improperly**

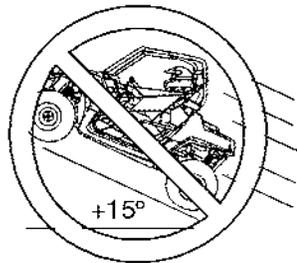
Improperly descending a hill could cause loss of control or overturn. Always follow proper procedures for traveling down hills as described in the owner's manual.

- Always descend a hill with the transmission in forward gear. Never descend a hill with the transmission in neutral.
- Always check the terrain carefully before descending a hill.
- Never travel down a hill at high speed.
- Avoid traveling down a hill at an angle, which would cause the vehicle to lean sharply to one side. Travel straight downhill.



#### **Improper Hill Climbing**

Improper hill climbing could cause loss of control or overturn. Use extreme caution when operating on hills. Always follow proper procedures for hill climbing as described in the owner's manual. See page 58.



## SAFETY

### Safety Warnings

#### Crossing Hillside

Driving on a sidehill is not recommended. Improper procedure could cause loss of control or overturn. Avoid crossing the side of any hill unless absolutely necessary.

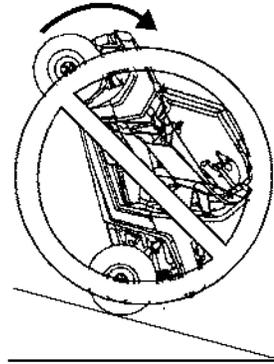
If crossing a hillside is unavoidable, always follow proper procedures as described in the owner's manual. See page 59.

#### Stalling While Climbing a Hill

Stalling or rolling backwards while climbing a hill could cause an overturn. Maintain a steady speed when climbing a hill.

*If you lose all forward speed:*

Apply the brakes gradually until the vehicle is fully stopped. Place the transmission in reverse and slowly allow the vehicle to roll straight downhill while applying light brake pressure to control speed.

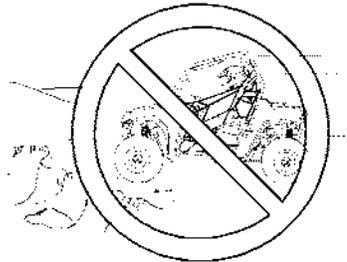


#### Operating in Unfamiliar Terrain

Failure to use extra caution when operating on unfamiliar terrain could result in an accident or overturn.

Unfamiliar terrain may contain hidden rocks, bumps, or holes that could cause loss of control or overturn.

Travel slowly and use extra caution when operating on unfamiliar terrain. Always be alert to changing terrain conditions.



## **SAFETY**

### **Safety Warnings**

#### **Operating on Slippery Terrain**

Operating on excessively rough, slippery or loose terrain could cause loss of traction, loss of control, accident or overturn.

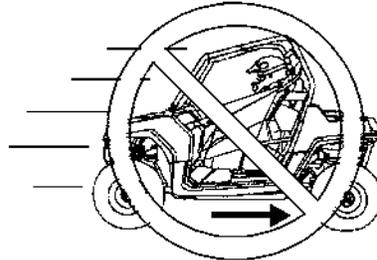
Do not operate on excessively rough, slippery or loose terrain. Always use extra caution on rough, slippery or loose terrain.



#### **Operating Improperly in Reverse**

Improperly operating in reverse could result in a collision with an obstacle or person. Always follow proper operating procedures as outlined in this manual. See page 62.

Before shifting into reverse gear, always check for obstacles or people behind the vehicle. When it's safe to proceed, back slowly.



#### **Improper Tire Maintenance**

Operating this vehicle with improper tires or with improper or uneven tire pressure could cause loss of control, accident or overturn.

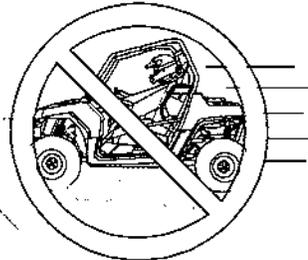
Always use the size and type of tires specified for your vehicle. Always maintain proper tire pressure as described in the owner's manual and on safety labels.



**SAFETY****Safety Warnings****Operating Over Obstacles**

Improperly operating over obstacles could cause loss of control or overturn.

Before operating in a new area, check for obstacles. Never attempt to operate over large obstacles such as rocks or fallen trees. Always follow the proper procedures outlined in this manual when operating over obstacles.

**Skidding or Sliding**

Skidding or sliding can cause loss of control or overturn (if tires regain traction unexpectedly). Always follow proper procedures for operating on slippery surfaces as described in the owner's manual.

When operating on slippery surfaces such as ice or loose gravel, reduce speed and use extra caution to reduce the chance of skidding or sliding.

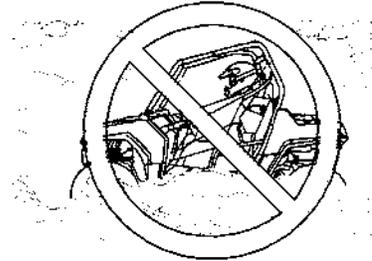
Do not operate on excessively slippery surfaces.

**Operating Through Water**

Operating through deep or fast-flowing water can cause loss of traction, loss of control, overturn or accident. Never operate in fast-flowing water or in water that exceeds the recommended maximum depth.

Always follow proper procedures for operating in water as described in the owner's manual.

Wet brakes may have reduced stopping ability. After leaving water, test the brakes. Apply them lightly several times while driving slowly. The friction will help dry out the pads.



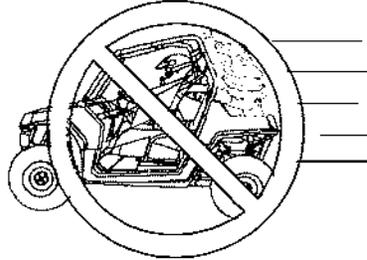
## **SAFETY**

### **Safety Warnings**

#### **Improper Cargo Loading**

Overloading the vehicle or carrying/towing cargo improperly may cause changes in stability and handling, which could cause loss of control or an accident.

- Always follow the instructions in the owner's manual for carrying cargo or pulling a trailer.
- Never exceed the stated load capacity for this vehicle.
- Cargo should be properly distributed and securely attached.
- Reduce speed when carrying cargo or pulling a trailer. Allow a greater distance for braking.

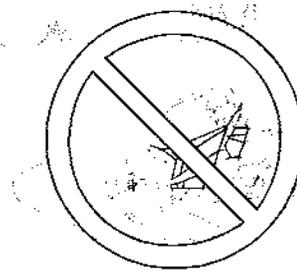


#### **Operating on Frozen Bodies of Water**

Operating on frozen bodies of water can result in the vehicle and/or riders falling through the ice. Never operate this vehicle on a frozen body of water.

#### **Operating a Damaged Vehicle**

Operating a damaged vehicle can result in an accident with serious injury or death. After any overturn or accident, have a qualified service dealer inspect the entire vehicle for possible damage, including (but not limited to) brakes, throttle and steering systems.



**SAFETY****Safety Warnings****Handling Gasoline**

Gasoline is highly flammable and is explosive under certain conditions. Always exercise extreme caution whenever handling gasoline.

- Always stop the engine when refueling.
- Always refuel outdoors or in a well ventilated area.
- Remove flammable material containers from the box before filling.
- Do not smoke or allow open flames or sparks in or near the refueling area or where gasoline is stored.
- Never refuel while a person is in the vehicle.
- Do not over fill the tank. Do not fill the tank neck.
- If gasoline spills on your skin or clothing, immediately wash it off with soap and water and change clothing.

**Refueling**

Always turn off the engine before refueling. Make sure the refueling area is well ventilated and free of any source of flame or sparks. Gasoline is extremely flammable.

Remove flammable material containers from the box before filling.

**Exposure to Exhaust**

Engine exhaust fumes are poisonous and can cause loss of consciousness or death in a short time. Never start the engine or let it run in an enclosed area.

Operate this vehicle only outdoors or in well-ventilated areas.

**Hot Exhaust Systems**

Exhaust system components are very hot during and after use of the vehicle. Hot components can cause burns and fire. Do not touch hot exhaust system components. Always keep combustible materials away from the exhaust system. Use caution when traveling through tall grass, especially dry grass.

**Unauthorized Use of the Vehicle**

Leaving the keys in the ignition can lead to unauthorized use of the vehicle, which could result in an accident or overturn. Always remove the ignition key when the vehicle is not in use.

**FOR MORE INFORMATION ABOUT SAFETY  
call Polaris at 1-800-342-3764.**

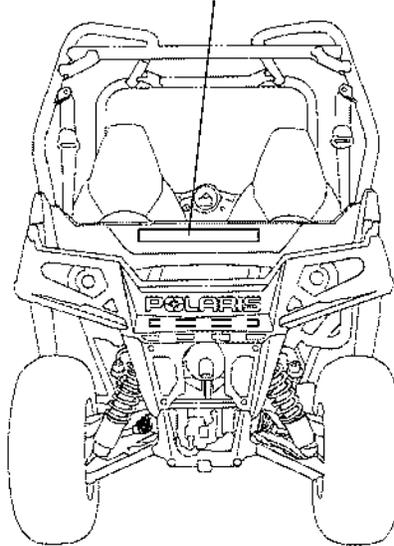
## SAFETY

### Safety Labels and Locations

Warning labels have been placed on the vehicle for your protection. Read and follow the instructions of the labels on the vehicle carefully. If any of the labels depicted in this manual differ from the labels on your vehicle, always read and follow the instructions of the *labels on the vehicle*.

If an informational or graphic label becomes illegible or comes off, contact your Polaris dealer to purchase a replacement. Replacement *safety* labels are provided by Polaris at no charge. The part number is printed on the label.

Cargo Box Warning  
Tire Pressure/Cargo Overload  
Warning



## **SAFETY**

### **Safety Labels and Locations**

#### **Cargo Box Warning**

**WARNING**

- Passengers can be thrown off. This can cause serious injury or death.
- Never carry passengers in cargo box.
- Maximum 4X4 Box Load is 300 lbs. (136.4 kg)

#### **Tire Pressure/Cargo Overload Warning**

**WARNING**

**IMPROPER TIRES, TIRE PRESSURE OR OVERLOADING can cause loss of control resulting in SEVERE INJURY OR DEATH.**

**TIRE PRESSURE IN PSI (KPa):**

**4X4 - FRONT 8 (55.2) REAR 8 (55.2)**

**MAXIMUM WEIGHT CAPACITY INCLUDING DRIVER, PASSENGER, CARGO AND ACCESSORIES: 4X4 is 740 LBS. (336.4 kg)**

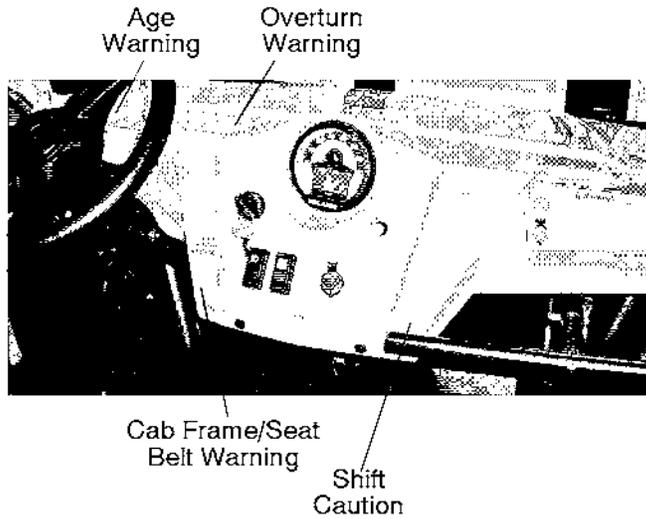
Reduce speed and allow greater distance for braking when carrying cargo. Overloading or carrying tall, off-center, or unsecured loads will increase your risk of losing control. Loads should be centered and carried as low as possible in box. For stability on rough or hilly terrain, reduce speed and cargo. Be careful if load extends over the side of the box.

Read Owner's Manual for more detailed loading information.

7175103

## **SAFETY**

### **Safety Labels and Locations**



#### **Cab Frame/Seat Belt Warning**

##### **WARNING**

- ALWAYS WEAR YOUR SEAT BELT and make sure passenger wears seat belt.
- ALWAYS SECURE CAB NETS.
- VEHICLE OVERTURN could cause severe injury or death. The cab frame is not designed or intended to provide rollover protection.

7175100

## **SAFETY**

### **Safety Labels and Locations**

#### **Shift Caution**

##### **CAUTION**

To avoid transmission damage, shift only when vehicle is stationary and at idle. When vehicle is stopped, place shift in the parked position.

APPLY BRAKE TO START

7174843

#### **Age Warning**

##### **WARNING**

Operating this vehicle if you are under the age of 16 increases your chance of severe injury or death.

NEVER operate this vehicle if you are under age 16 or without a valid driver's license.

7175101



#### **Overturn Warning**

##### **WARNING**

Improper operation can cause this vehicle to overturn and lead to serious injury or death.

This vehicle handles differently than cars, trucks or other off-road vehicles. In order to avoid overturns:

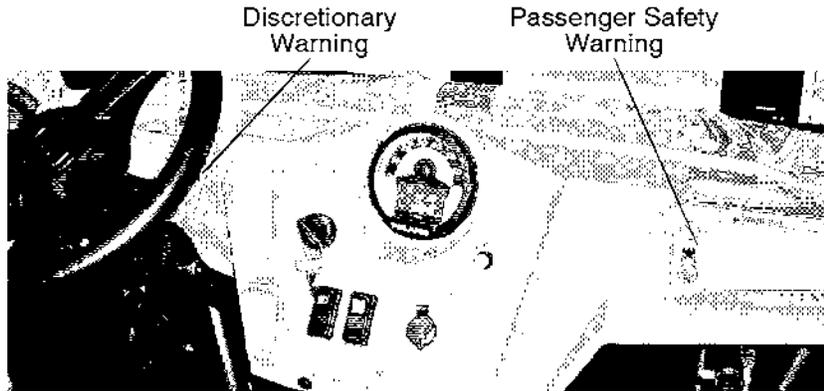
- avoid sharp turns.
- never turn while applying heavy throttle.
- never make abrupt steering maneuvers.
- operate at speeds appropriate for your skills, the conditions and the terrain.
- DO NOT do power slides, "donuts", jumps or other driving stunts.

7175105



# SAFETY

## Safety Labels and Locations



### Passenger Safety Warning

**WARNING**

- NEVER CARRY A PASSENGER UNDER AGE 12
- NEVER CARRY MORE THAN ONE PASSENGER
- NEVER RIDE AFTER USING DRUGS OR ALCOHOL

To reduce the risk of SEVERE INJURY or DEATH, NEVER carry a passenger under age 12 or too small to firmly plant feet on the floor and securely grasp hand holds.

**THE PASSENGER MUST ALWAYS:**

- wear seat belt.
- use an approved helmet and protective gear.
- securely grasp hand holds and plant feet firmly on the floor.
- tell operator to slow down or stop if uncomfortable - get off and walk if conditions require.
- keep hands and feet inside vehicle at all times.
- watch for branches, brush, and other hazards that could enter vehicle.



7175102

## **SAFETY**

### **Safety Labels and Locations Discretionary Warning**

#### **WARNING**

Improper vehicle use can result in SEVERE INJURY or DEATH

NEVER operate:

- without first viewing safety video and quick start guide.
- with more than one passenger.
- on hills steeper than 15 degrees.
- on public roads.
- on paved surfaces - pavement may seriously affect handling and control.
- with non-Polaris approved accessories - they may seriously affect stability.

ALWAYS:

- keep hands and feet inside vehicle.
- reduce speed and use extra caution when carrying a passenger.
- operate slowly in reverse - avoid sharp turns or sudden braking.
- make sure passenger reads and understands all safety labels.
- watch for branches or other hazards that could enter vehicle.

ALWAYS USE AN APPROVED HELMET AND PROTECTIVE GEAR FOR OPERATOR AND PASSENGER

NEVER USE ON PUBLIC ROADS

NEVER USE WITH DRUGS OR ALCOHOL

LOCATE AND READ OWNER'S MANUAL. FOLLOW ALL INSTRUCTIONS AND WARNINGS. IF OWNER'S MANUAL IS MISSING, CONTACT A POLARIS DEALER FOR A REPLACEMENT.

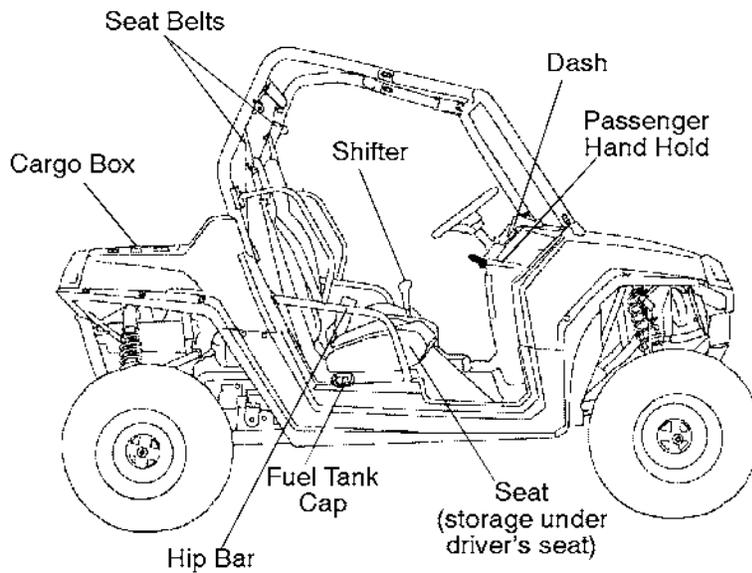
7175104



## FEATURES AND CONTROLS

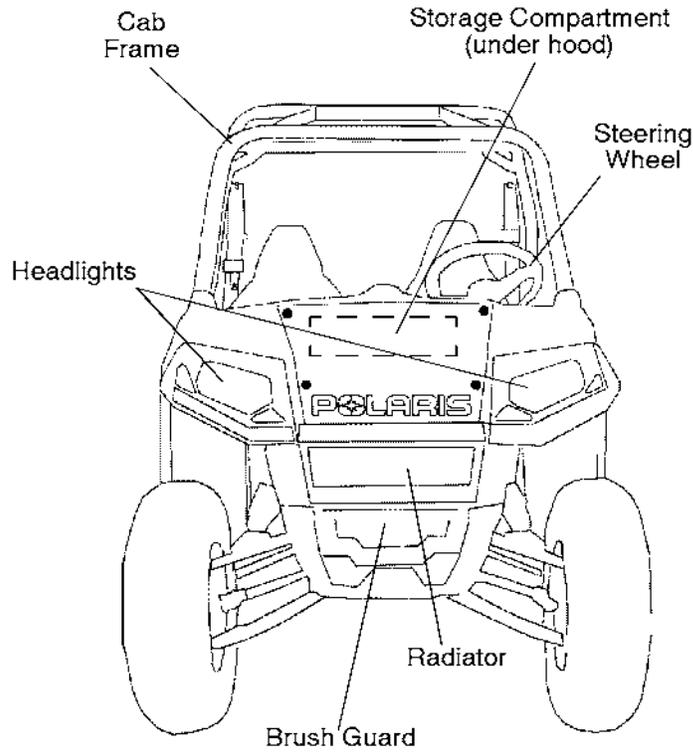
### Component Locations

Your vehicle is equipped with upper and lower cab nets and side guards on both sides of the vehicle. Cab nets and side guards must be used by both operator and passenger at all times. Promptly replace worn or damaged cab nets with new cab nets, available from your authorized Polaris dealer. The vehicle illustrated below is shown without cab nets only to allow component identification. Always use the cab nets and side guards.



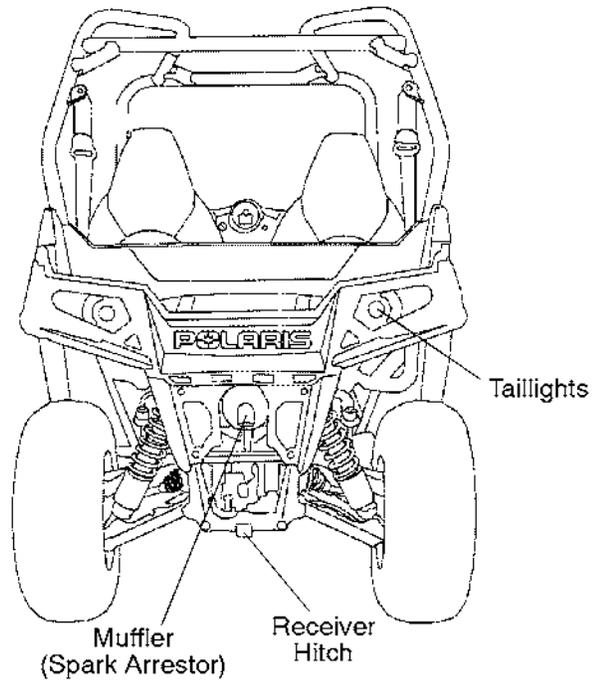
## FEATURES AND CONTROLS

### Component Locations



## FEATURES AND CONTROLS

### Component Locations



### Trailer Receiver Hitch Bracket

This vehicle is equipped with a receiver hitch bracket for a trailer hitch. Trailer towing equipment is not supplied with this vehicle.

To avoid injury and property damage, always heed the warnings and towing capacities outlined on pages 64-65.

## FEATURES AND CONTROLS

### Rear Service Panel

The rear service panel is located behind the seats on the frame of the vehicle. Remove the seats to access the service panel. Remove the service panel to access serviceable engine components and clutches.

### Seats

Before operating the vehicle, always push down on both seat backs to ensure the latches are secure.

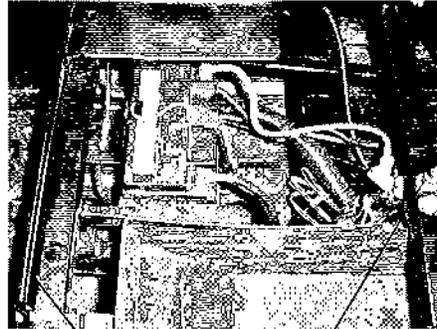
### Seat Adjustments

Loosen (do not remove) the four screws located on the seat bottom. Slide the seat forward or rearward to the desired position. Tighten the screws to 4 ft. lbs. (5.4 Nm). Do not overtighten.

### Seat Removal

1. Pull up on the seat latch lever located under the rear edge of the seat.
2. Tilt the seat forward.
3. Lift the seat upward to remove it from the vehicle.

Reverse this procedure to reinstall the seat. Make sure the front edge of the seat is properly installed to the seat retainer bar. Press down firmly at the rear of the seat to engage the rear latch.



Front Seat Retainer

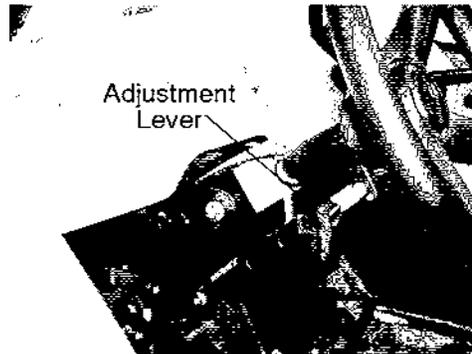
Seat Latch

## FEATURES AND CONTROLS

### Steering Wheel

The steering wheel can be tilted upward or downward for rider preference.

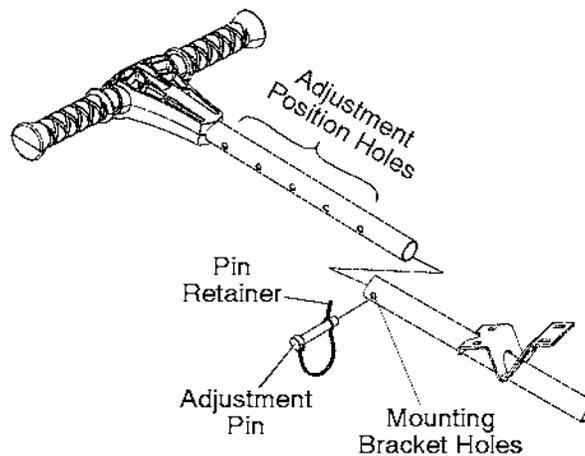
Lift and hold the steering wheel adjustment lever while moving the steering wheel upward or downward. Release the lever when the steering wheel is at the desired position.



### Passenger Hand Hold

Always adjust the hand hold to a comfortable position for your passenger before operating. Make sure the adjustment pin and retainer are securely installed after making adjustments.

1. Remove the retainer from the end of the adjustment pin.
2. Remove the pin from the post.
3. Slide the post inward or outward to the desired position.
4. Reinstall the pin through the mounting bracket hole, through both post adjustment holes, and through the remaining bracket hole.
5. Reinstall the retainer to the pin.

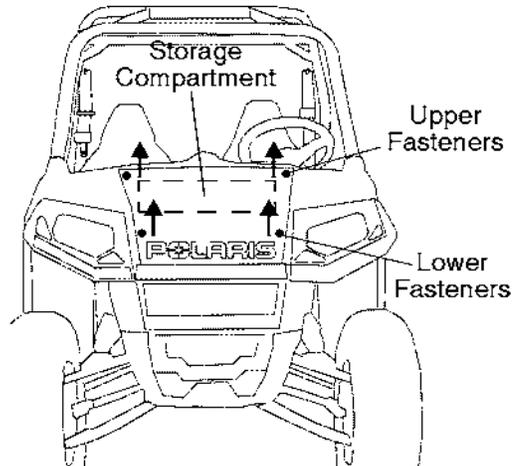


## FEATURES AND CONTROLS

### Hood

Remove the hood to access the front storage compartment, the radiator and the coolant overflow bottle.

1. If your model is equipped with removable fasteners at the upper hood edge, remove the fasteners.
2. Grasp the upper hood edge and pull upward to disengage the hood from the vehicle.
3. Continue pulling the hood upward to disengage the lower hood fasteners.
4. Lift the hood away from the vehicle.



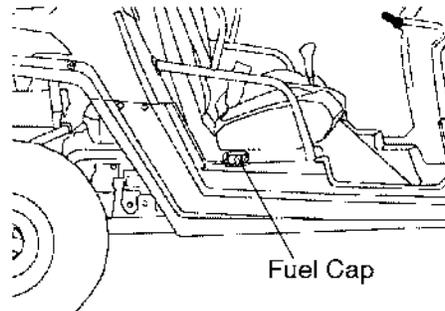
### Storage Compartments

Remove the hood to access the front storage compartment. Remove the driver's seat to access the under-seat storage compartment. See page 29.

### Fuel Cap

The fuel tank filler cap is located on the right-hand side of the vehicle near the passenger seat. When refueling, always use either leaded or unleaded gasoline with a minimum pump octane number of 87 R+M/2 octane. *Do not use E-85 fuel.*

Remove flammable material containers from the box before filling.



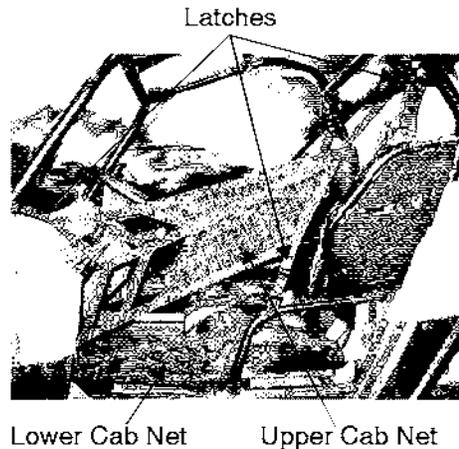
## FEATURES AND CONTROLS

### Cab Nets/Side Guards

Riding in this vehicle without using the cab nets and side guards increases the risk of serious injury or death in the event of an accident or overturn. Cab nets and side guards must be used by both operator and passenger at all times. Make sure all latches are secure before operating the vehicle.

Always inspect cab nets for tightness, wear and damage before each use of the vehicle. Use the strap adjusters to tighten any loose straps.

Promptly replace worn or damaged cab nets with new cab nets, available from your authorized Polaris dealer.



### Upper Cab Net Interference (Driver)

The upper cab net on the driver's side may interfere with vehicle operation for some operators due to operator body type, driving style or riding apparel. Each operator must check for upper cab net interference before operating the vehicle.

1. Complete the New Operator Driving Procedures outlined on pages 54-55.
2. Test for upper cab net interference by making slow speed turns to the left and right. If the net interferes with operation, it should be removed from the vehicle *for this operator only*. All other cab nets must remain on the vehicle during operation. See page 33.

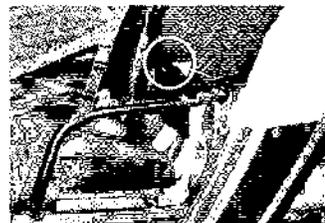
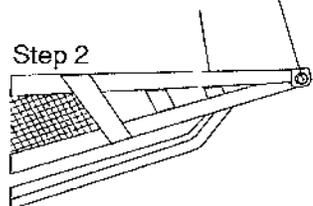
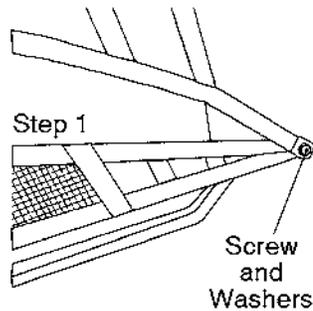
## FEATURES AND CONTROLS

### Cab Nets/Side Guards

#### Upper Cab Net Removal (Driver)

The upper cab net on the driver's side may be removed *only if it interferes with operation of the vehicle*. All other cab nets and side guards must remain installed.

1. Using a T-25 torx bit and 7/16" open end wrench, remove the mounting screw and washers securing the upper and lower cab nets to the floor of the vehicle on the driver's side.
2. Reinstall the lower net with the screw and all washers. Tighten the screw securely.
3. Unclip the latches that secure the upper net to the chassis and lower net. See the photo on the previous page.
4. Loop the free upper latch of the lower cab net through the gap at the front of the side guard and secure the latch, adjusting strap length as needed. Tighten the strap.
5. Reverse all steps to reinstall the upper cab net. *Always reinstall the upper cab net for any other operator of the vehicle.*



Loop strap through gap

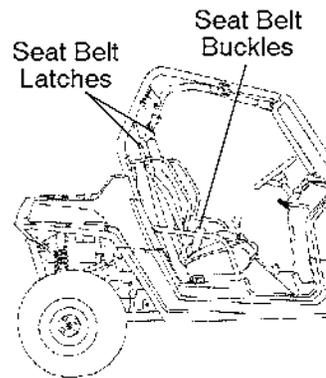
## FEATURES AND CONTROLS

### Seat Belts

This Polaris vehicle is equipped with three-point lap and diagonal seat belts for the operator and passenger. Always make sure the seat belts are secured for both the operator and passenger before riding.

To wear the seat belt properly, follow this procedure:

1. Pull the seat belt latch downward and across your chest toward the buckle at the inner edge of the seat. The belt should fit snugly across your hips and diagonally across your chest. Make sure the belt is not twisted.
2. Push the latch plate into the buckle until it clicks.
3. Release the strap, it will self-tighten.
4. Press the red release latch on the buckle to release the seat belt.



## **FEATURES AND CONTROLS**

### **Seat Belts**

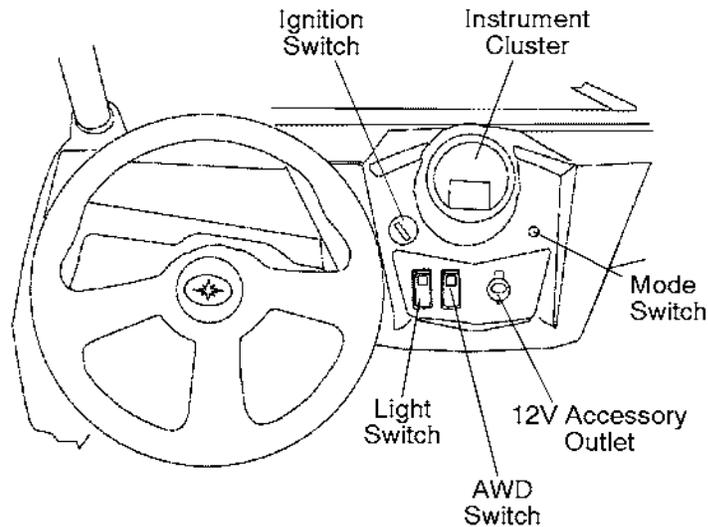
#### **Seat Belt Inspection**

Inspect all seat belts for proper operation before each use of the vehicle.

1. Push the latch plate into the buckle until it clicks. The latch plate must slide smoothly into the buckle. A click indicates that it's securely latched.
2. Push the red release latch in the middle of the buckle to make sure it releases freely.
3. Pull each seat belt completely out and inspect the full length for any damage, including cuts, wear, fraying or stiffness. If any damage is found, or if the seat belt does not operate properly, have the seat belt system checked and/or replaced by an authorized Polaris dealer.
4. To clean dirt or debris from the seat belts, sponge the straps with mild soap and water. Do not use bleach, dye or household detergents.

## FEATURES AND CONTROLS

### Switches



#### Mode Switch

The yellow switch located near the instrument gauge is used to toggle through mode options available such as odometer, trip meter, hour meter, tachometer and clock. See page 43 for operation of the modes.

#### Auxiliary Outlet

The 12-volt accessory plug receptacle has spade connections on the back that may be used to power an auxiliary light or other optional accessories or lights. The connections are under the dash.

## FEATURES AND CONTROLS

### Switches

#### Ignition Switch

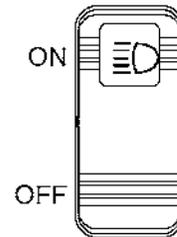
The ignition switch is a three-position, key-operated switch. Use the ignition switch to start the engine. See page 52 for starting procedures.

The key can be removed from the switch when it is in the OFF position.

OFF	The engine is off. Electrical circuits are off, except accessory 12V.
ON	Electrical circuits are on. Electrical equipment can be used.
START	Turn the key to the START position to engage the electric starter. The key returns to the ON position when released.

#### Light Switch

Use the headlight switch to turn the lights on and off. The ignition switch must be in the ON position to operate the headlights.



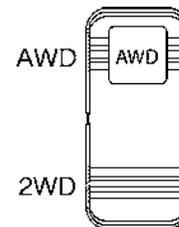
#### All Wheel Drive (AWD) Switch

The AWD Switch has two positions:

- All Wheel Drive (AWD)
- Two Wheel Drive (2WD).

Press the top of the rocker switch to engage All Wheel Drive. Press the bottom of the switch to operate in two wheel drive.

See page 40 for AWD operating instructions.

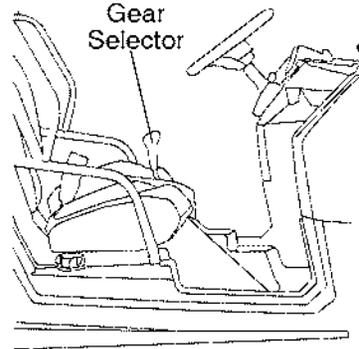


## FEATURES AND CONTROLS

### Gear Selector

- P: Park
- R: Reverse
- N: Neutral
- L: Low Gear
- H: High Gear

To change gears, stop the vehicle, and with the engine idling, move the lever to the desired gear. Do not attempt to shift gears with engine speed above idle or while the vehicle is moving.



Tip: Maintaining shift linkage adjustment is important to assure proper transmission function. See your dealer if you experience any shifting problems.

NOTICE: Do not attempt to shift the transmission while the vehicle is moving or damage to the transmission could result. Always shift when the vehicle is stationary and the engine is at idle.

### Using Low Range and High Range

Condition	Range to Use
Operating at speeds less than 7 MPH (11 km/h)	Low
Operating in rough terrain or over obstacles	Low
Loading the vehicle onto a trailer	Low
Towing heavy loads	Low
Operating at speeds greater than 7 MPH (11 km/h)	High

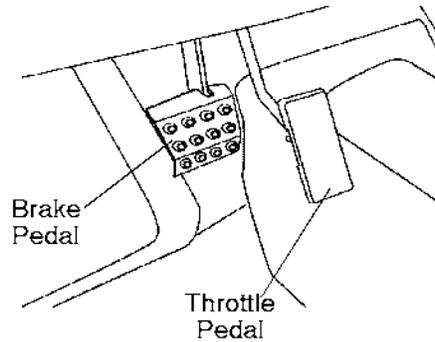
## FEATURES AND CONTROLS

### Brake Pedal

Depress the brake pedal to slow or stop the vehicle. Apply the brakes while starting the engine.

### Throttle Pedal

Push the pedal down to increase engine speed. Spring pressure returns the pedal to the rest position when released. Always check that the throttle pedal returns normally before starting the engine. Make sure there's adequate throttle pedal freeplay. See page 96 for throttle pedal adjustment procedures.



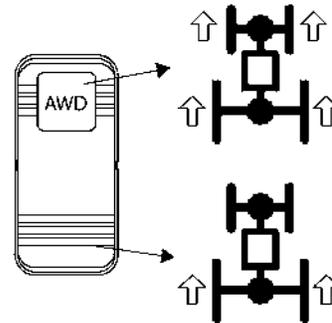
## FEATURES AND CONTROLS

### All Wheel Drive (AWD) System

The All Wheel Drive system is controlled by the AWD switch. When the switch is on 2X4, the vehicle is in two-wheel drive at all times. When the switch is on AWD, the vehicle is in all wheel drive and the AWD indicator light will be on.

When in AWD, the demand drive unit will automatically engage any time the rear wheels lose traction. When the rear wheels regain traction, the demand drive unit will automatically disengage.

There is no limit to the length of time the vehicle may remain in AWD.



#### Engaging AWD

The AWD switch may be turned on or off while the vehicle is moving. Initially, the vehicle's electronic system will not enable the AWD until the engine RPM is below 3100. Once enabled, the AWD remains enabled until the AWD switch is turned off. If the switch is turned off while the demand drive unit is moving, it will not disengage until the rear wheels regain traction.

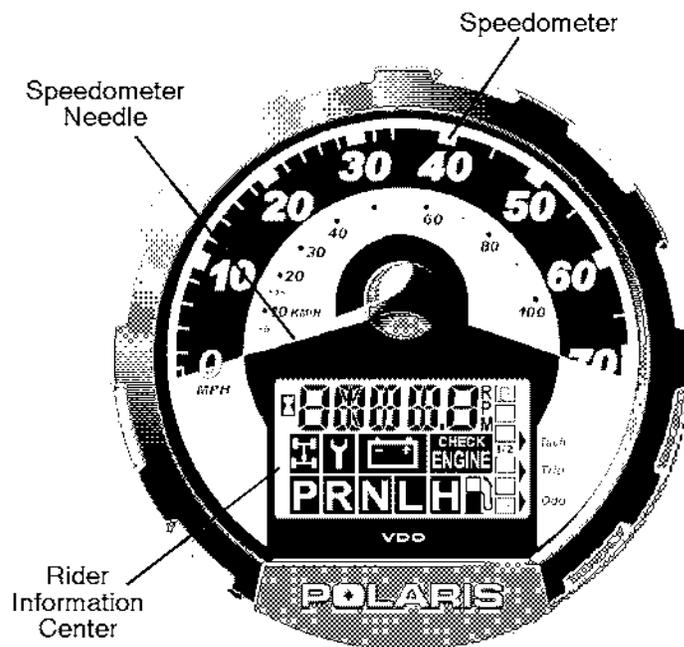
Engage the AWD switch before getting into conditions where front wheel drive may be needed. If the rear wheels are spinning, release the throttle before switching to AWD.

**NOTICE:** Switching to AWD while the rear wheels are spinning or slipping may cause severe drive shaft and gearcase damage. Always switch to AWD while the rear wheels have traction or are at rest.

## FEATURES AND CONTROLS

### Instrument Cluster

Your vehicle is equipped with an instrument cluster that senses vehicle speed from the transmission. The instrument cluster measures distance in miles as well as time, hours of operation and engine RPM. In addition to showing vehicle speed, the speedometer needle flashes when the fuel level is low.



## FEATURES AND CONTROLS

### Instrument Cluster

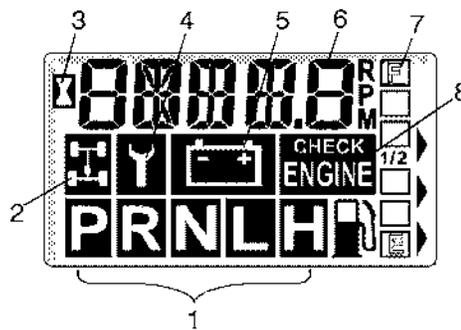
#### Rider Information Center

The rider information center is located in the instrument cluster. All segments will light up for 2.5 seconds at start-up.

Tip: If the instrument cluster fails to illuminate, a battery over-voltage may have occurred and the instrument cluster may have shut off to protect the electronic speedometer. If this occurs, take the vehicle to your Polaris dealer for proper diagnosis.

1. **Gear Indicator** - This indicator displays gear shifter position.

P = Park  
R = Reverse  
N = Neutral  
L = Low Gear  
H = High Gear



2. **AWD Indicator** - This indicator illuminates when the AWD switch is in the AWD position.

3. **Engine Hour Display Indicator**

4. **Service Interval/Diagnostic Mode Indicator**

5. **Low Battery and Over Voltage** - This warning usually indicates that the vehicle is operating at an RPM too low to keep the battery charged. It may also occur when the engine is at idle and high electrical load (lights, cooling fan, accessories) is applied. Drive at a higher RPM or recharge the battery to clear the warning.

6. **Odometer/Tachometer/Tripmeter/ Hour Meter/Clock**

7. **Fuel Gauge** - The segments of the fuel gauge show the level of fuel in the fuel tank. When the last segment clears, a low fuel warning is activated. All segments will flash, FUEL will display in the LCD, and the speedometer needle will blink. Refuel immediately.

8. **Check Engine Warning Indicator** - This indicator serves two purposes. The word HOT displays if the engine overheats. It also appears if an EFI-related fault occurs. Do not operate the vehicle if this warning appears. Serious engine damage could result.

## FEATURES AND CONTROLS

### Instrument Cluster

#### Rider Information Center

##### Standard Modes

Use the yellow mode switch located near the instrument gauge to toggle through the mode options. See page 36.

##### Odometer Mode

The odometer records the miles traveled by the vehicle.

##### Trip Meter Mode

The trip meter records the miles traveled by the vehicle on each trip if it's reset before each trip. To reset the trip meter, select the trip meter mode. Press and hold the mode switch until the total changes to 0.

Tip: In the Rider Information Center, the trip meter display contains a decimal point, but the odometer displays without a decimal point.

##### Hour Meter Mode

This mode logs the total hours the engine has been in operation.

##### Tachometer Mode

The engine RPM is displayed digitally.

Tip: Small fluctuations in the RPM from day to day may be normal because of changes in humidity, temperature and elevation.

##### Clock Mode

The clock displays time in a 12-hour format. To reset the clock, see page 44.

## FEATURES AND CONTROLS

### Instrument Cluster

#### Rider Information Center

##### Diagnostic Mode

The wrench icon will display when the gauge is in the diagnostic mode. To exit the diagnostic mode, turn the key switch off and on. Any movement of the tires will also cause the gauge to exit the diagnostic mode.

To enter the diagnostics mode:

1. Turn the key switch off and wait 10 seconds.
2. Place the transmission in neutral.
3. Hold the mode switch and turn the key switch on. Release the switch as soon as the display is activated.
4. Use the mode switch to toggle through the diagnostic screens.

##### Clock Screen

To reset the clock:

1. Enter the diagnostic mode. Toggle to the clock screen.
2. Press and hold the mode switch until the hour display flashes. Release the switch.
3. Press and release the mode switch once to advance the setting by one hour. Press and *hold* the mode switch to advance the hours quickly.
4. When the desired hour is displayed, wait approximately four seconds, until the minute display flashes.
5. Use the same procedure to reset the minutes.
6. When the display stops flashing, the mode has been set.

Tip: Do not turn the key switch off until the display stops flashing or the new setting will not be locked into the memory.

##### Battery Voltage Screen

View this screen to check battery voltage level.

##### Tachometer Screen

View the tachometer to check engine speed.

## FEATURES AND CONTROLS

### Instrument Cluster

#### Rider Information Center

##### Diagnostic Mode

##### AWD Diagnostic Screen

The gauge indicates whether or not current is flowing through the AWD coil (only on models with switchable AWD). This screen is for informational purposes only. Please see your dealer for all major repairs.

##### Gear Circuit Diagnostic Screen

This screen displays the resistance value (in ohms) being read at the gear switch input of the gauge. This screen is for informational purposes only. Please see your dealer for all major repairs.

##### Programmable Service Interval

When the hours of engine operation equal the programmed service interval setting, the wrench icon will flash for 5 seconds each time the engine is started. When this feature is enabled, it provides a convenient reminder to perform routine maintenance.

The service interval is programmed at 50 hours at the factory. To enable or disable the service interval:

1. Enter the diagnostic mode. Toggle to the service interval screen.
2. Press and hold the mode switch for about seven (7) seconds, until either ON or OFF appears in the Rider Information Center, depending on your preference.

To reset the service interval:

1. Enter the diagnostic mode. Toggle to the service interval screen.
2. Press and hold the mode switch for 2-3 seconds, until the wrench icon flashes. Release the switch.
3. Press and release the mode switch once to advance the setting by one hour. Press and *hold* the mode switch to advance the hours quickly.

Tip: If you scroll past the intended number, press and hold the switch until the hours cycle back to zero.

4. When the desired setting is displayed, wait until the wrench icon stops flashing. The new service interval is now programmed.

## **FEATURES AND CONTROLS**

### **Instrument Cluster**

#### **Rider Information Center**

##### **Diagnostic Mode**

##### **Miles/Kilometers Toggle**

The display in the tripmeter and odometer can be changed to display either standard or metric units of measurement.

1. Enter the diagnostic mode.
2. Toggle to the screen that displays either kilometers (KM) or miles (MP).
3. Press and hold the mode switch until the letters flash, then press and release the switch once. When the display stops flashing, the mode has been set.

##### **Downloading Codes**

The EFI diagnostic mode is for informational purposes only. Please see your Polaris dealer for all major repairs.

See page 47 for Blink Codes and Failure Descriptions. Use the following procedure to download blink codes (failure codes) from the EFI module.

1. Place the transmission in PARK.
2. Stop the engine.
3. Turn the key switch to the ON position.
4. Turn the key switch off and on three times in less than five seconds, then leave the switch on. Any blink code numbers stored in the EFI module will display, one at a time, on the screen. The number "61" and the word "END" displays after all codes have been transmitted.

**FEATURES AND CONTROLS**
**Instrument Cluster**  
**Rider Information Center**  
**Downloading Codes**

Blink Code	Failure Description
--	No RPM Signal
21	Loss of Synchronization
45	Barometric Pressure Sensor: Circuit Low Input
46	Barometric Pressure Sensor: Circuit High Input
22	TPS: Open or Short Circuit to Ground
22	TPS: Short Circuit to Battery
23	RAM Error: Defective ECU
42	Engine Temp Sensor Circuit: Short to Ground
42	Engine Temp Sensor Circuit: Open or Short to Battery
51	Injector 1: Open Load
51	Injector 1: Short Circuit to Ground
51	Injector 1: Short Circuit to Battery
52	Injector 2: Open Load
52	Injector 2: Short Circuit to Ground
52	Injector 2: Short Circuit to Battery
54	Engine Temp Lamp: Open Load
54	Engine Temp Lamp: Short Circuit to Ground
54	Engine Temp Lamp: Short Circuit to Battery
55	Diag Lamp: Open Load
55	Diag Lamp: Short Circuit to Ground
55	Diag Lamp: Short Circuit to Battery
56	Pump Relay: Open Load
56	Pump Relay: Short Circuit to Ground
56	Pump Relay: Short Circuit to Battery
58	Cooling Fan: Open Load
58	Cooling Fan: Short Circuit to Ground
58	Cooling Fan: Short Circuit to Battery
41	Intake Air Temp Sensor: Open or Short Circuit to +Sensor Voltage
41	Intake Air Temp Sensor: Short Circuit to Ground
61	END

## OPERATION

### **⚠ WARNING**

Failure to operate the vehicle properly can result in a collision, loss of control, accident or overturn, which may result in serious injury or death. Read and understand all safety warnings outlined in the safety section of this owner's manual.

### **Vehicle Break-in Period**

The break-in period for your new Polaris vehicle is the first 25 hours of operation, or the time it takes to use the first two tanks full of gasoline. No single action on your part is as important as a proper break-in period. Careful treatment of a new engine and drive components will result in more efficient performance and longer life for these components. Perform the following procedures carefully.

**NOTICE:** Excessive heat build-up during the first three hours of operation will damage close-fitted engine parts and drive components. Do not operate at full throttle or high speeds during the first three hours of use.

Use of any oils other than those recommended by Polaris may cause serious engine damage. We recommend the use of Polaris Premium 4 Synthetic Oil for your 4-cycle engine.

**OPERATION****Vehicle Break-in Period****Engine and Drivetrain Break-in**

1. Fill the fuel tank with gasoline. See page 31. Always exercise extreme caution whenever handling gasoline.
2. Check the oil level. See page 75. Add the recommended oil as needed to maintain the oil level in the safe operating range.
3. Complete the New Operator Driving Procedures outlined on pages 54-55.
4. Avoid aggressive use of the brakes. See Brake System Break-in on page 49.
5. Vary throttle positions. Do not operate at sustained idle.
6. Perform regular checks on fluid levels, controls and areas outlined on the daily pre-ride inspection checklist. See page 50.
7. Pull only light loads.
8. During the break-in period, change both the oil and the filter at 25 hours or one month.

**Brake System Break-in**

Apply only moderate braking force for the first 50 stops. Aggressive or overly forceful braking when the brake system is new could damage brake pads and rotors.

**PVT Break-in (Clutches/Belt)**

A proper break-in of the clutches and drive belt will ensure a longer life and better performance. Break in the clutches and belt by operating at slower speeds during the break-in period as recommended. Pull only light loads. Avoid aggressive acceleration and high speed operation during the break-in period.

## OPERATION

### Pre-Ride Inspection

Failure to inspect and verify that the vehicle is in safe operating condition before operating increases the risk of an accident. Always inspect the vehicle before each use to make sure it's in safe operating condition.

Item	Remarks	Page
Brake system/pedal travel	Ensure proper operation	39 97
Brake fluid	Ensure proper level	98
Front suspension	Inspect, lubricate if necessary	72
Rear suspension	Inspect, lubricate if necessary	72
Steering	Ensure free operation	99
Tires	Inspect condition and pressure	21 103
Wheels/fasteners	Inspect, ensure fastener tightness	103
Frame nuts, bolts, fasteners	Inspect, ensure tightness	-
Fuel and oil	Ensure proper levels	42 75
Coolant level	Ensure proper level	89 90
Coolant hoses	Inspect for leaks	-
Throttle	Ensure proper operation	95
Indicator lights/switches	Ensure proper operation	37
Air filter, pre-filter	Inspect, clean	93
Headlamp	Check operation, apply Polaris dielectric grease when lamp is replaced	105
Brake light/tail lamp	Check operation, apply Polaris dielectric grease when lamp is replaced	107
Seat Latches	Push down on both seat backs to ensure the latches are secure	29
Seat Belts	Check length of belt for damage, check latches for proper operation	34
Cab Nets	Check for wear or damage, ensure proper installation	32

**OPERATION****Safe Operation Practices**

1. Complete the recommended safety training before operating this vehicle.
2. Do not allow anyone under 16 years of age or without a valid driver's license to operate this vehicle.
3. Never operate with a passenger under the age of 12. Never carry more than one passenger in this vehicle. Never allow a passenger to ride in the cargo box.
4. Engine exhaust fumes are poisonous. Never start the engine or let it run in an enclosed area.
5. Never operate with accessories not approved by Polaris for use on this vehicle.
6. Operate this vehicle off-road only. Never operate the vehicle on pavement or on any public street, road or highway, including dirt and gravel roads.
7. Drive in a manner appropriate for your skills and operating conditions. Never operate at excessive speeds. Never attempt wheelies, jumps, or other stunts. Keep both hands on the steering wheel during operation.
8. Never consume alcohol or drugs before or while operating this vehicle.
9. Always use the size and type of tires specified for your vehicle. Always maintain proper tire pressure.
10. Never operate a damaged vehicle. After any overturn or accident, have a qualified service dealer inspect the entire machine for possible damage.
11. Never operate the vehicle on a frozen body of water.
12. Do not touch hot exhaust system components. Always keep combustible materials away from the exhaust system.
13. Always remove the ignition key when the vehicle is not in use to prevent unauthorized use.

## **OPERATION**

### **Starting the Engine**

1. Position the vehicle on a level surface outdoors or in a well-ventilated area.
2. Sit in the driver's seat and fasten the seat belt. Secure the cab nets.
3. Place the transmission in PARK.
4. Apply the brakes. Do not press the throttle pedal while starting the engine.
5. Turn the ignition key past the ON/RUN position to START. Engage the starter for a maximum of five seconds. Release the key when the engine starts.
6. If the engine does not start within five seconds, return the ignition switch to the OFF position and wait five seconds. Repeat steps 5 and 6 until the engine starts.
7. Vary the engine RPM slightly with the throttle to aid in warm up until the engine idles smoothly.

**NOTICE:** Operating the vehicle immediately after starting could cause engine damage. Allow the engine to warm up for several minutes before operating the vehicle.

### **Stopping the Engine**

1. Release the throttle pedal completely and brake to a complete stop.
2. Place the transmission in PARK.
3. Turn the engine off.

### **Braking**

1. Release the throttle pedal completely. (When the throttle pedal is released completely and engine speed slows to near idle, the vehicle has no engine braking.)
2. Press on the brake pedal evenly and firmly. Practice starting and stopping (using the brakes) until you're familiar with the controls.

**OPERATION****Parking the Vehicle**

1. Stop the vehicle on a level surface. When parking inside a garage or other structure, be sure that the structure is well ventilated and that the vehicle is not close to any source of flame or sparks, including any appliance with pilot lights.
2. Place the transmission in PARK.
3. Turn the engine off.
4. Remove the ignition key to prevent unauthorized use.

**Know Your Riding Area/Tread Lightly**

Familiarize yourself with all laws and regulations concerning the operation of this vehicle in your area. Respect the environment in which you ride your vehicle. Find out where the designated riding areas are by contacting your Polaris dealer, a local riding club, or local officials.

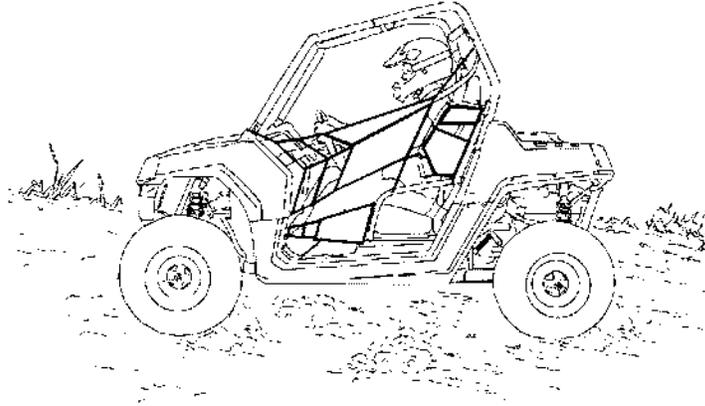
Help keep our trails open for recreational vehicle use. As an off-road enthusiast, you represent the sport and can set a good example (or a poor example) for others to follow. Tread lightly. Operate with respect for the terrain, avoid littering, and always stay on the designated trails.

**Trail Etiquette**

Always practice good etiquette when riding. Allow a safe distance between your vehicle and other vehicles operating in the same area. Communicate to oncoming operators by signaling the number of vehicles in your group. When stopping, move your vehicle to the edge of the trail as far as possible to allow others to pass safely.

## **OPERATION**

### **New Operator Driving Procedures**



1. Read and understand the owner's manual and all warning and instruction labels before operating this vehicle.
2. Perform the pre-ride inspection. See page 50.
3. Wear an approved helmet that fits properly and eye protection (goggles or face shield).
4. Do not carry a passenger until you have at least two hours of driving experience with this vehicle.
5. Do not tow or carry cargo during this period.
6. Select an open area that allows room to familiarize yourself with vehicle operation and handling.
7. Sit in the driver's seat and fasten the seat belt.
8. Always use the cab nets and side guards while riding in this vehicle.
9. Place the transmission in PARK.
10. Start the engine.

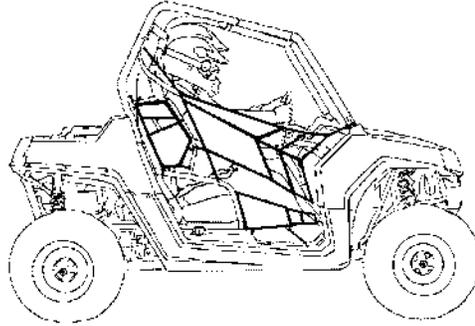
**OPERATION****New Operator Driving Procedures**

11. Apply the brakes and shift into low gear.
12. Check your surroundings and determine your path of travel.
13. Keeping both hands on the steering wheel, slowly release the brakes and depress the throttle with your right foot to begin driving.
14. Drive slowly at first. On level surfaces, practice starting, stopping, turning, maneuvering, using the throttle and brakes and driving in reverse. Learn how the vehicle handles when making both left and right turns at a slow speed.
15. Check for upper cab net interference. See page 33.
16. Increase speed only after mastering all maneuvers at a slow speed.
17. After you become skilled at making turns and begin to operate at faster speeds, follow these precautions:
  - Avoid sharp turns.
  - Never turn while applying heavy throttle.
  - Never make abrupt steering maneuvers.
  - Operate at speeds appropriate for your skills, the conditions and the terrain.
  - **DO NOT** do power slides, "donuts", jumps or other driving stunts.

## OPERATION

### Driving with a Passenger

1. Complete the New Operator Driving Procedures outlined on pages 54-55.
2. Perform the pre-ride inspection. See page 50.
3. Make sure the passenger is at least 12 years of age and is tall enough to comfortably and safely sit in the passenger seat with the seat belt secured, put both feet on the floor and grasp the hand holds.
4. Make sure the passenger is wearing appropriate riding gear, including an approved helmet and eye protection. See page 8.
5. Make sure the passenger secures the seat belt.
6. Make sure all cab nets and side guards are properly secured.
7. Allow a passenger to ride only in the passenger seat.
8. Do not carry more than one passenger. Additional passengers can affect the operator's ability to steer and operate the controls.
9. Slow down. Always travel at a speed appropriate for your skills, your passenger's skills, and operating conditions. Avoid unexpected or aggressive maneuvers that could cause discomfort or injury to a passenger.
10. Vehicle handling may change with a passenger and/or cargo on board. Allow more time and distance for braking.
11. Always follow all operating guidelines as outlined on safety labels and in this manual.



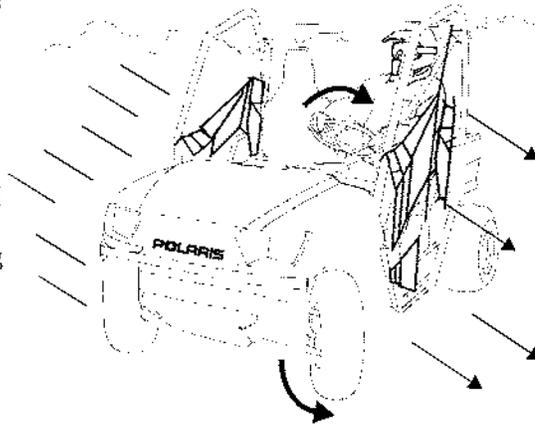
**OPERATION****Driving on Slippery Surfaces****⚠ WARNING**

Skidding or sliding can cause loss of control or overturn (if tires regain traction unexpectedly). When operating on slippery surfaces such as ice or loose gravel, reduce speed and use extra caution to reduce the chance of skidding or sliding out of control. Do not operate on excessively slippery surfaces.

When driving on slippery surfaces such as wet trails, loose gravel, or ice, be alert for the possibility of skidding and sliding.

Follow these precautions when encountering slippery conditions:

1. Slow down before entering slippery areas.
2. Maintain a high level of alertness, reading the trail and avoiding quick, sharp turns, which can cause skids.
3. Engage all-wheel drive before wheels begin to lose traction.



**NOTICE:** Severe damage to the drive train may occur if the AWD is engaged while the wheels are spinning. Always allow the wheels to stop spinning before engaging AWD.

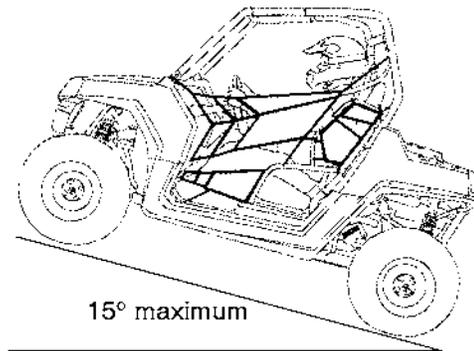
4. Correct a skid by turning the steering wheel in the direction of the skid. *Never apply the brakes during a skid.*

## OPERATION

### Driving Uphill

Whenever traveling uphill, follow these precautions:

1. Always check the terrain carefully before ascending a hill.
2. Avoid steep hills ( $15^{\circ}$  maximum). If ascending a steeper grade is unavoidable, engage all-wheel drive before ascending.
3. Drive straight uphill.
4. Never climb hills with excessively slippery or loose surfaces.
5. Proceed at a steady rate of speed and throttle opening. Never open the throttle suddenly.
6. Avoid unnecessary changes in speed or direction.
7. Never go over the crest of a hill at high speed. An obstacle, a sharp drop, or another vehicle or person could be on the other side of the hill.
8. If the vehicle stalls while climbing a hill, apply the brakes. Place the transmission in reverse and slowly allow the vehicle to roll straight downhill while applying light brake pressure to control speed.



**OPERATION****Driving on a Sidehill (Sidehilling)**

Driving on a sidehill is not recommended. Improper procedure could cause loss of control or overturn. Avoid crossing the side of any hill unless absolutely necessary.

If crossing a hill is *unavoidable*, follow these precautions:

1. Engage all-wheel drive.
2. Drive slowly and use extreme caution.
3. If the vehicle begins to overturn, or if it feels as if it may overturn, *immediately* turn downhill.
4. Avoid obstacles and changes in terrain that may lower or raise one side of the vehicle or cause the vehicle to slide.
5. If the vehicle begins to slide downhill, immediately turn downhill to stop the slide, or stop the vehicle and maneuver slowly and carefully until the vehicle can be driven straight downhill.

**Driving Downhill**

Whenever descending a hill, follow these precautions:

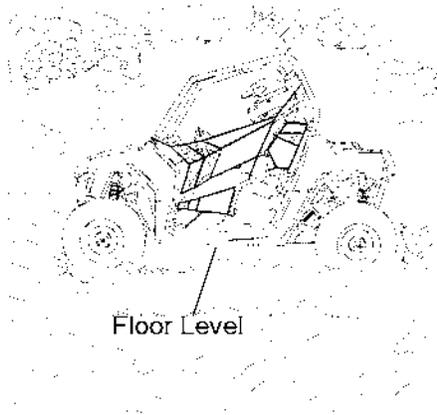
1. Avoid steep hills (15° maximum).
2. Slow down. Never travel down a hill at high speed.
3. Always check the terrain carefully before descending a hill.
4. Always descend a hill with the transmission in forward gear. *Never descend a hill with the transmission in neutral.*
5. Avoid traveling down a hill at an angle, which would cause the vehicle to lean sharply to one side. Travel straight downhill.
6. Apply the brakes *lightly* to aid in slowing.

## OPERATION

### Driving Through Water

Your vehicle can operate through water with a maximum recommended depth equal to floor level. Follow these precautions when operating through water:

1. Determine water depth and current before entering water.
2. Choose a crossing where the water level is lowest and where both banks have gradual inclines. Never operate in water that exceeds the maximum recommended depth.

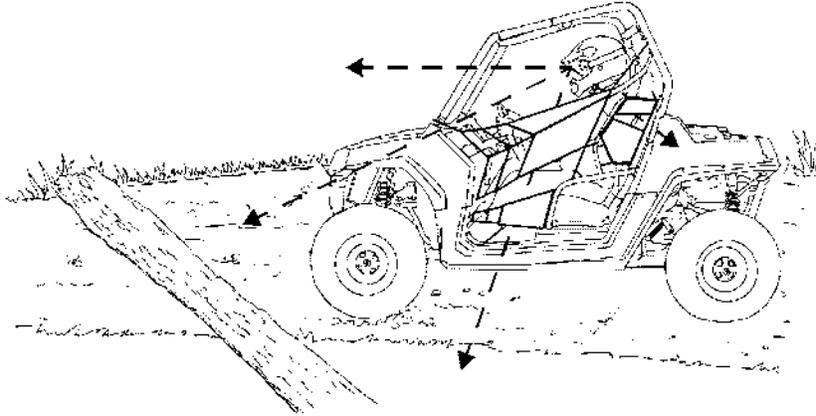


**WARNING!** The large tires on your vehicle may cause the vehicle to float in deep or fast-flowing water, which could result in loss of traction, loss of control, overturn or accident.

3. Wet brakes may have reduced stopping ability. After leaving water, test the brakes. Apply them lightly several times while driving slowly. The friction will help dry out the pads.

**NOTICE:** Major engine damage can result if the vehicle is not thoroughly inspected after operation in water. Perform the services outlined in the maintenance chart. See page 67. Give special attention to engine oil, transmission oil, demand drive fluid, rear gearcase oil, and all grease fittings.

If your vehicle becomes immersed or is operated in water that exceeds the floor level, take it to your dealer for service *before starting the engine*. If it's impossible to bring the vehicle to your dealer before starting the engine, perform the service outlined on page 107, and take the vehicle to your dealer at the first opportunity.

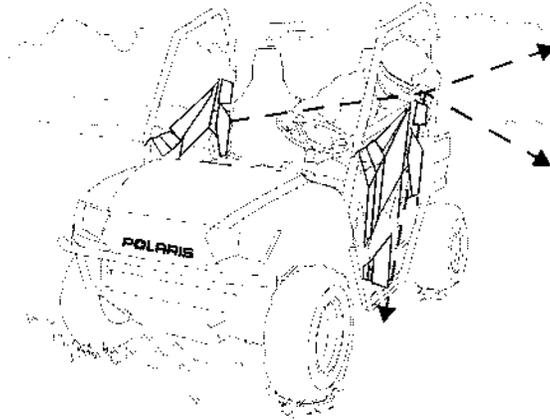
**OPERATION****Driving Over Obstacles**

Follow these precautions when operating over obstacles:

1. Always check for obstacles before operating in a new area.
2. Look ahead and learn to read the terrain. Be constantly alert for hazards such as logs, rocks and low hanging branches.
3. Travel slowly and use extra caution when operating on unfamiliar terrain. Not all obstacles are immediately visible.
4. Avoid operating over large obstacles such as rocks and fallen trees. If unavoidable, use extreme caution and operate slowly.
5. Always have a passenger dismount and move away from the vehicle before operating over an obstacle that could cause an overturn.

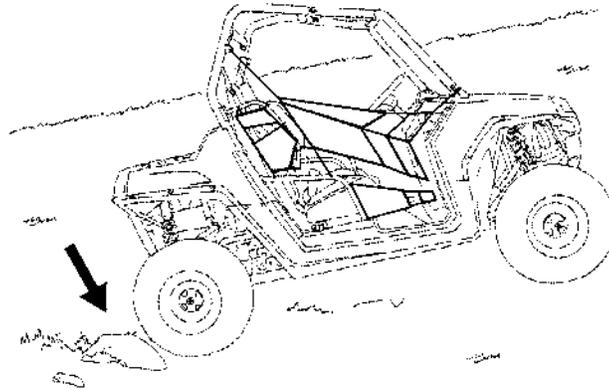
## OPERATION

### Driving in Reverse.



Follow these precautions when operating in reverse:

1. Always check for obstacles or people behind the vehicle.
2. Apply the throttle *lightly*. Never open the throttle suddenly.
3. Back slowly.
4. Apply the brakes *lightly* for stopping.
5. Avoid making sharp turns.

**OPERATION****Parking on an Incline**

A rolling vehicle can result in serious injury. Avoid parking on an incline. If parking on an incline is *unavoidable*, follow these precautions:

1. Place the transmission in PARK.
2. Turn the engine off.
3. Block the rear wheels on the downhill side, or park the vehicle in a sidehill position instead.

## OPERATION

### Hauling Cargo

#### **▲ WARNING**

Overloading the vehicle or carrying or towing cargo improperly can alter vehicle handling and may cause loss of control or brake instability. Always follow these precautions when hauling cargo:

Never exceed the stated load capacity for this vehicle.

**REDUCE SPEED AND ALLOW GREATER DISTANCES FOR BRAKING WHEN HAULING CARGO.**

**NEVER EXCEED THE MAXIMUM WEIGHT CAPACITY** of the vehicle. When determining the weight you are adding to the vehicle, include the weight of the operator, passenger, accessories, loads in the rack or box and the load on the trailer tongue. The combined weight of these items must not exceed the maximum weight capacity.

Always load the cargo box with the load as far forward and as low as possible. When operating over rough or hilly terrain, reduce speed and cargo to maintain stable driving conditions.

Always operate the vehicle with extreme care when hauling or towing loads. Slow down and drive in the lowest gear available.

**SECURE ALL LOADS BEFORE OPERATING.** Unsecured loads can create unstable operating conditions, which could result in loss of control of the vehicle.

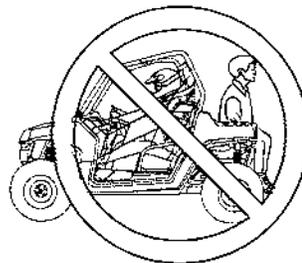
**OPERATE ONLY WITH STABLE AND SAFELY ARRANGED LOADS.** When handling off-centered loads that cannot be centered, securely fasten the load and operate with extra caution. Always attach the tow load to the hitch point designated for your vehicle.

**HEAVY LOADS CAN CAUSE BRAKING AND CONTROL PROBLEMS.** Use extreme caution when applying brakes with a loaded vehicle. Avoid terrain or situations that may require backing downhill.

**USE EXTREME CAUTION** when operating with loads that extend over the rack sides. Stability and maneuverability may be adversely affected, causing the vehicle to overturn.

**DO NOT TRAVEL FASTER THAN THE RECOMMENDED SPEEDS.** Vehicle should never exceed 10 mph (16 kph) while towing a load on a level grass surface. Vehicle speed should never exceed 5 mph (8 kph) when towing loads in rough terrain, while cornering, or while ascending or descending a hill.

Carrying a passenger in the cargo box could result in a fall from the vehicle or contact with moving components. Never allow a passenger to ride in the cargo box. A passenger must always be seated in the passenger seat with seat belt secured.



**OPERATION****Hauling Cargo**

Your Polaris vehicle has been designed to carry or tow specific capacities. Reduce speed and allow a greater distance for braking when carrying cargo.

Loads should be centered and carried as low as possible in the box. For stability on rough or hilly terrain, reduce both speed and cargo. Exercise caution if the cargo load extends over the side of the box.

Always read and understand the load distribution warnings listed on warning labels and in this manual. Never exceed the maximum capacities specified for your vehicle. See page 120.

**Belt Life**

To extend belt life, use low gear when hauling or towing heavy cargo.

**Towing Loads****⚠ WARNING**

Towing improperly can alter vehicle handling and may cause loss of control or brake instability.

Always follow these precautions when towing:

1. Never load more than 150 lbs. (68.1 kg) tongue weight on the towing bracket.
2. Do not operate the vehicle faster than 10 mph (16 km/h) when towing. Towing a trailer increases braking distance.
3. Do not tow more than the recommended weight for the vehicle.
4. Attach a trailer to the trailer hitch bracket only. Do not attach a trailer to any other location, which could result in loss of control of the vehicle.
5. The total load (operator, passenger, accessories, cargo and weight on hitch) must not exceed the maximum weight capacity of the vehicle.

Total Towed Load Weight (Level Ground)	Total Towed Load Weight (15° grade)	Total Hitch Vertical Weight	Maximum Towing Speed
1500 lbs. (681 kg)	850 lbs. (386 kg)	150 lbs. (68.1 kg)	10 mph (16 kph)

## **EMISSION CONTROL SYSTEMS**

### **Noise Emission Control System**

Do not modify the engine, intake or exhaust components, as doing so may affect compliance with U.S.A. EPA noise control requirements (40 CFR 205) and local noise level requirements.

### **Operation on Public Lands in the U.S.A.**

Your Polaris vehicle has a spark arrestor that was tested and qualified to be in accordance with the USDA Forest Service Standard 5100-1C. Federal law requires that this spark arrestor be installed and functional when the vehicle is operated on public lands.

Operation of off-road vehicles on public lands in the U.S.A. is regulated by 43 CFR 8343. Violations are subject to monetary penalties. Federal regulations can be viewed online at [www.gpoaccess.gov/ccfr/](http://www.gpoaccess.gov/ccfr/).

### **Crankcase Emission Control System**

This engine is equipped with a closed crankcase system. Blow-by gases are forced back to the combustion chamber by the intake system. All exhaust gases exit through the exhaust system.

### **Exhaust Emission Control System**

Exhaust emissions are controlled by engine design. An electronic fuel injection (EFI) system controls fuel delivery. The engine and EFI components are set at the factory for optimal performance and are not adjustable.

The emissions label is located on the lower frame behind the driver's seat.

### **Electromagnetic Interference**

This spark ignition system complies with Canadian ICES-002.

This vehicle complies with the EMC requirements of European directives 97/24/EC and 2004/108/EC.

**MAINTENANCE****Periodic Maintenance Chart**

Careful periodic maintenance will help keep your vehicle in the safest, most reliable condition. Inspection, adjustment and lubrication of important components are explained in the periodic maintenance chart.

Inspect, clean, lubricate, adjust and replace parts as necessary. When inspection reveals the need for replacement parts, use genuine Polaris parts available from your Polaris dealer.

Record maintenance and service in the Maintenance Log beginning on page 131.

Service and adjustments are important for proper vehicle operation. If you're not familiar with safe service and adjustment procedures, have a qualified dealer perform these operations.

Maintenance intervals in the following chart are based upon average riding conditions and an average vehicle speed of approximately ten (10) miles per hour. Vehicles subjected to severe use must be inspected and serviced more frequently.

**Severe Use Definition**

- Frequent immersion in mud, water or sand
- Racing or race-style high RPM use
- Prolonged low speed, heavy load operation
- Extended idle
- Short trip cold weather operation

Pay special attention to the oil level. A rise in oil level during cold weather can indicate contaminants collecting in the oil sump or crankcase. Change oil immediately if the oil level begins to rise. Monitor the oil level, and if it continues to rise, discontinue use and determine the cause or see your dealer.

## **MAINTENANCE**

### **Periodic Maintenance Chart**

#### **Maintenance Chart Key**

- ▶ Perform these operations more often for vehicles subjected to severe use.
- E Emission-related service (Failure to conduct this maintenance will not void the emissions warranty but may affect emissions.)
- Have an authorized Polaris dealer perform these services.

<b>▲ WARNING</b>
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Improperly performing the procedures marked with a ■ could result in component failure and lead to serious injury or death. Have an authorized Polaris dealer perform these services.
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**MAINTENANCE****Periodic Maintenance Chart**

Perform all services at whichever maintenance interval is reached first.

Item	Maintenance Interval (whichever comes first)			Remarks	
	Hours	Calendar	Miles (Km)		
■ Steering	-	Pre-Ride	-	Make adjustments as needed. See Pre-Ride Checklist on page 50.	
▶ Front suspension	-	Pre-Ride	-		
▶ Rear suspension	-	Pre-Ride	-		
Tires	-	Pre-Ride	-		
▶ Brake fluid level	-	Pre-Ride	-		
▶ Brake pedal travel					
Brake system	-	Pre-Ride	-		
Wheels/fasteners	-	Pre-Ride	-		
Frame fasteners	-	Pre-Ride	-		
▶ Engine oil level	-	Pre-Ride	-		
▶ Air filter, pre-filter	-	Daily	-		Inspect; clean often; replace as needed
E Coolant (if applicable)	-	Daily	-		
Headlamp/tail lamp	-	Daily	-	Check operation; apply dielectric grease if replacing	
▶ Air filter, main element	-	Weekly	-	Inspect; replace as needed	
▶ Brake pad wear	10 H	Monthly	100 (160)	Inspect periodically	
■ Battery	25 H	Monthly	250 (400)	Check terminals; clean; test	
▶ Demand drive fluid	25 H	Monthly	250 (400)	Inspect level; change yearly	
▶ Rear gearcase oil	25 H	Monthly	250 (400)	Inspect level; change yearly	
▶ Main gearcase oil	25 H	Monthly	250 (400)	Inspect level; change yearly	
▶ Transfer case oil	25 H	Monthly	250 (400)	Inspect level; change yearly	

▶ Perform these procedures more often for vehicles subjected to severe use.

E Emission-Related Service

■ Have an authorized Polaris dealer perform these services.

## MAINTENANCE

### Periodic Maintenance Chart

Item	Maintenance Interval (whichever comes first)			Remarks
	Hours	Calendar	Miles (Km)	
▶ E Engine breather filter (if equipped)	25 H	Monthly	150 (250)	Inspect; replace if necessary
▶ Engine oil change (break-in)	25 H	1 M	-	Perform a break-in oil and filter change at one month
■ E Throttle cable/ETC switch	50 H	6 M	300 (500)	Inspect; adjust; lubricate; replace if necessary
E Throttle body air intake ducts/flange	50 H	6 M	300 (500)	Inspect duct for proper sealing/air leaks
▶ General lubrication	50 H	3 M	500 (800)	Lubricate all fittings, pivots, cables, etc.
Shift Linkage	50 H	6 M	500 (800)	Inspect, lubricate, adjust
■ Steering	50 H	6 M	500 (800)	Lubricate
▶ Front Suspension	50 H	6 M	500 (800)	Lubricate
▶ Rear Suspension	50 H	6 M	500 (800)	Lubricate
Cooling system (if applicable)	50 H	6 M	500 (800)	Inspect coolant strength seasonally; pressure test system yearly
■ E Fuel system	100 H	12 M	600 (1000)	Check for leaks at tank cap, lines, filter, pump, throttle body; replace lines every two years
▶ E Spark plug	100 H	12M	600 (1000)	Inspect; replace as needed
▶ Engine oil change	100 H	6 M	1000 (1600)	Perform a break-in oil change at one month
▶ Oil filter change	100 H	6 M	1000 (1600)	Replace with oil change

▶ Perform these procedures more often for vehicles subjected to severe use.

E Emission-Related Service

■ Have an authorized Polaris dealer perform these services.

**MAINTENANCE****Periodic Maintenance Chart**

Item	Maintenance Interval (whichever comes first)			Remarks
	Hours	Calendar	Miles (Km)	
▶ Radiator (if equipped)	100 H	12 M	1000 (1600)	Inspect; clean external surfaces
▶ Cooling Hoses	100 H	12 M	1000 (1600)	Inspect for leaks
▶ Engine mounts	100 H	12 M	1000 (1600)	Inspect
Exhaust muffler/ pipe	100 H	12 M	1000 (1600)	Inspect
■ Ignition timing	100 H	12 M	1000 (1600)	Inspect
▶ Wiring	100 H	12 M	1000 (1600)	Inspect for wear, routing, security; apply dielectric grease to connectors subjected to water, mud, etc.
■ Clutches (drive and driven)	100 H	12 M	1000 (1600)	Inspect; clean; replace worn parts
Drive belt	100 H	12 M	1000 (1600)	Inspect; replace as needed
■ Front wheel bearings	100 H	12 M	1000 (1600)	Inspect; replace as needed
■ Brake fluid	200 H	24 M	2000 (3200)	Change every two years
Spark arrestor	300 H	36 M	3000 (4800)	Clean out
Idle speed		-		Adjust as needed
■ Toe adjustment		-		Inspect periodically; adjust when parts are replaced
Headlight aim		-		Adjust as needed

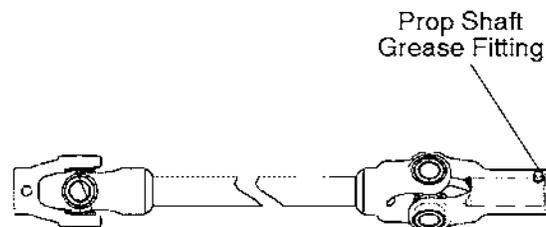
- ▶ Perform these procedures more often for vehicles subjected to severe use.  
 E Emission-Related Service  
 ■ Have an authorized Polaris dealer perform these services

## MAINTENANCE

### Lubrication Recommendations

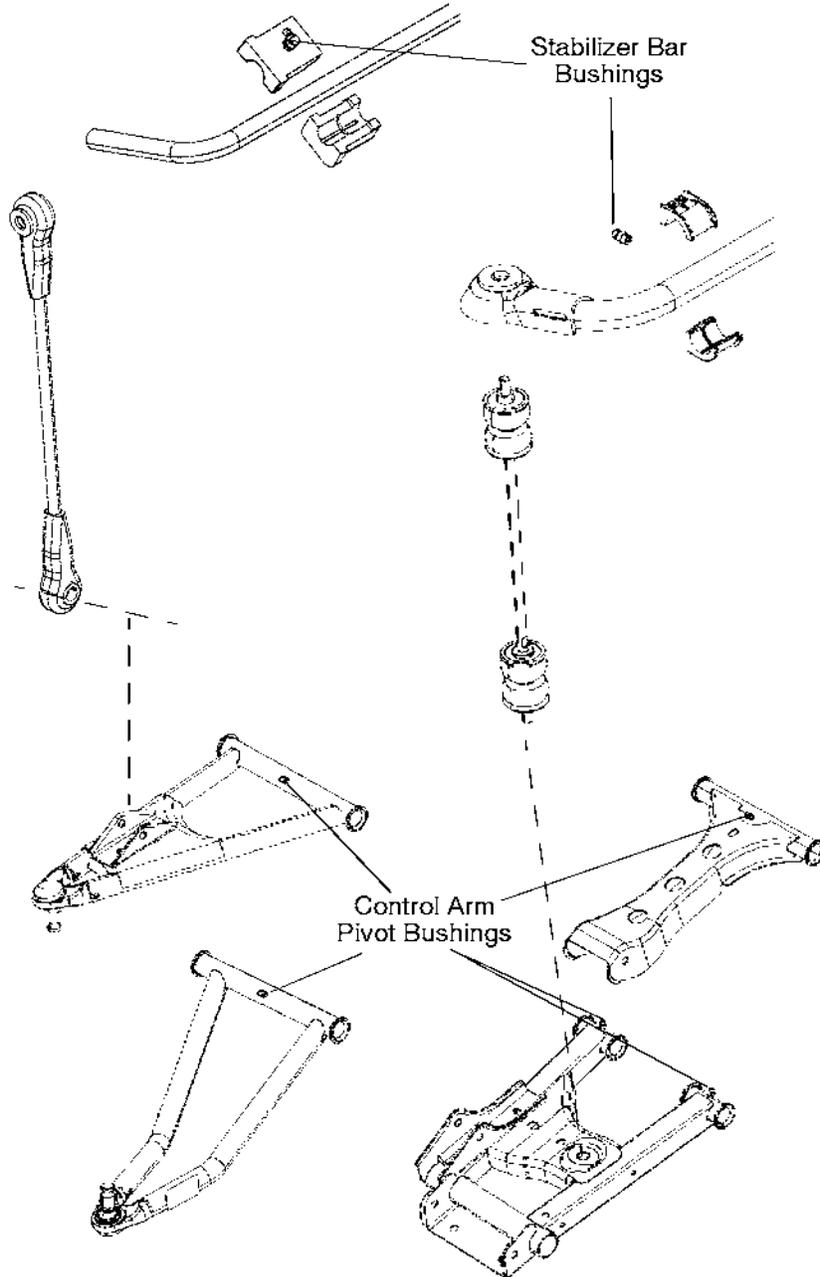
Check and lubricate all components at the intervals outlined in the Periodic Maintenance Chart beginning on page 67, or more often under severe use, such as wet or dusty conditions. Items not listed in the chart should be lubricated at the general lubrication interval.

Item	Lube	Method
Engine Oil	Polaris Premium 4 Synthetic 0W40	Add to proper level on dipstick. See page 75.
Brake Fluid	DOT 4	Maintain level between fill lines. See page 98.
Transmission Oil (Main Gearcase)	Premium AGL Synthetic Gearcase Lube	See page 80.
Transmission Oil (Transfer Case)	Premium AGL Synthetic Gearcase Lube	See page 78.
Demand Drive Fluid (Front Gearcase)	Demand Drive LT Premium Fluid	See page 82.
Rear Gearcase Oil	Premium ATV Angle Drive Fluid	See page 83.
Prop Shaft	Polaris Premium U-Joint Lube	Locate fittings and grease.
Control Arm Pivot Bushings, Front/Rear	Polaris Premium all Season Grease or grease conforming to NLGI No. 2	Locate fittings and grease.
Stabilizer Bar Bushings, Front/Rear	Polaris Premium all Season Grease or grease conforming to NLGI No. 2	Locate fittings and grease.



# MAINTENANCE

## Lubrication Recommendations



## MAINTENANCE

### Engine Oil

Always check and change the engine oil at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Always change the oil filter whenever changing oil.

#### Premium 4 Synthetic Oil

Polaris Premium 4 All Season Synthetic engine oil has been specially formulated for use in Polaris 4-cycle engines. It's a fully synthetic, high performance, multi-viscosity oil designed to provide the ultimate in lubrication performance and protection. See page 122 for the part numbers of Polaris products.

Premium 4 possesses unsurpassed film strength over the widest possible temperature range. It resists viscosity and frictional breakdown in ambient temperatures from -40° to +120° F. (-40° to +49° C.). Its exceptional frictional properties result in more efficient operation, more power output and lower fuel consumption.

Although Polaris Premium 4 is the only oil recommended for use in this engine, use of any API certified "SH" oil is allowable as long as it's 0W-40. Oil may need to be changed more frequently if Polaris Premium 4 is not used. Follow the manufacturer's recommendations for ambient temperature operation.

**NOTICE:** Mixing brands or using a non-recommended oil may cause serious engine damage. We recommend the use of Polaris Premium 4 All Season synthetic oil or API certified "SH" oil, 0W-40. Never substitute or mix oil brands. Use only 0W-40.

#### **▲ WARNING**

Vehicle operation with insufficient, deteriorated, or contaminated engine oil will cause accelerated wear and may result in engine seizure, accident, and injury. Always perform the maintenance procedures as outlined in the Periodic Maintenance Chart.

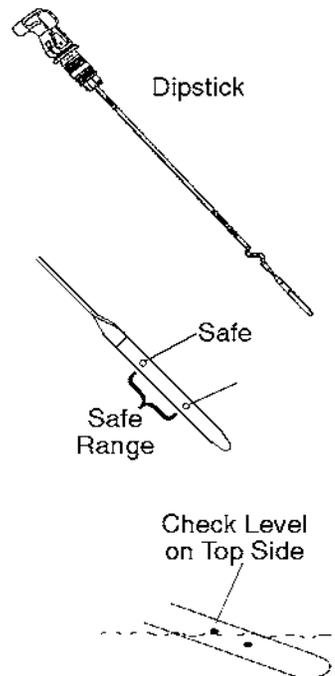
**MAINTENANCE****Engine Oil**

Always check and change the oil at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Always use the recommended engine oil.

**Oil Check**

The oil dipstick and fill tube is located on the engine, behind the passenger seat.

1. Position the vehicle on a level surface.
  2. Place the transmission in PARK. Apply the brakes.
  3. Remove both seats. Remove the rear service panel. See page 29.
  4. Lift the lever lock to remove the dipstick. Wipe it dry with a clean cloth.
  5. Reinstall the dipstick completely, but do not lock it. The dipstick must be inserted completely in to keep the angle and depth of the stick consistent.
  6. Remove the dipstick and check the oil level. Maintain the oil level in the safe range. Do not overfill.
- Tip: Due to the dipstick entry angle into the crankcase, the oil level will read higher on the bottom side of the dipstick. Always read the level on the upper surface of the dipstick.
7. Reinstall the dipstick. Seat the lever lock.



## MAINTENANCE

### Engine Oil

#### Oil and Filter Change

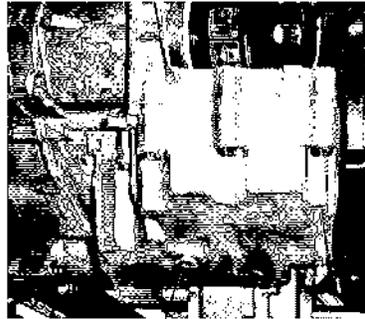
#### **⚠ CAUTION**

Hot oil can cause burns to skin. Do not allow hot oil to come into contact with skin.

Always change the oil and filter at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Always change the oil filter whenever changing oil.

The engine drain plug is located on the bottom of the crankcase.

1. Position the vehicle on a level surface. Place the transmission in PARK. Apply the brakes.
  2. Start the engine. Allow it to idle for two to three minutes. Stop the engine.
  3. Clean the area around the drain plug.
  4. Place a drain pan beneath engine crankcase and remove the drain plug.
  5. Allow the oil to drain completely.
  6. Reinstall the sealing washer on the drain plug.
- Tip: The sealing surfaces on drain plug and crankcase should be clean and free of burrs, nicks or scratches.
7. Reinstall the drain plug. Torque to 16 ft. lbs. (22 Nm).



Drain Plug

**MAINTENANCE****Engine Oil****Oil and Filter Change**

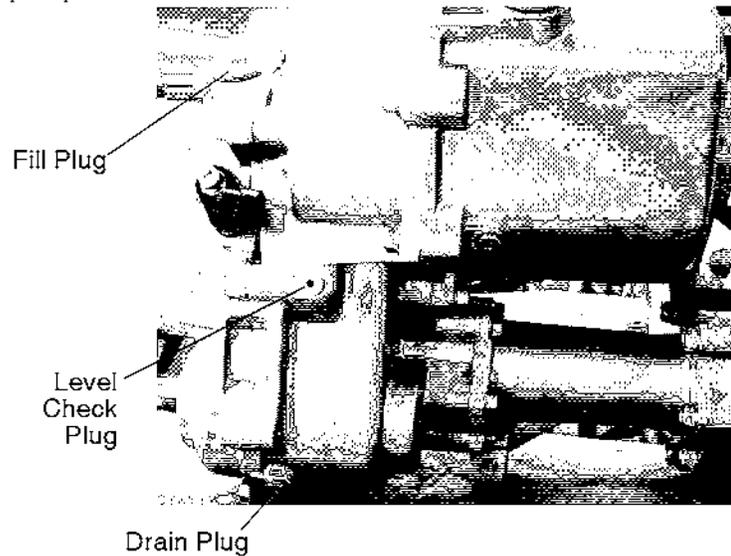
8. Using a cap-style oil filter wrench, turn the filter counter-clockwise to remove it.
9. Using a clean dry cloth, clean the filter sealing surface on the crankcase.
10. Lubricate the o-ring on the new filter with a film of fresh engine oil. Check to make sure the o-ring is in good condition.
11. Install the new filter and turn by hand until the filter gasket contacts the sealing surface, then turn an additional 1/2 turn.
12. Remove the dipstick and fill the sump with two quarts (1.9 l) of recommended oil.
13. Place the transmission in PARK. Apply the brakes.
14. Start the engine. Allow it to idle for one to two minutes.
15. Stop the engine. Inspect for leaks.
16. Re-check the oil level on the dipstick and add oil as necessary to bring the level to the upper mark on the dipstick.
17. Dispose of used filter and oil properly.

## MAINTENANCE

### Gearcases

#### Transfer Case

Always check and change the fluid at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Refer to the Gearcase Specifications Chart on page 84 for recommended lubricants, capacities and torque specifications.



#### Fluid Check

The fill plug and level check plug are located on the left side of the transfer case. The fluid level is sufficient when fluid flows out of the check plug hole at step 4.

1. Position the vehicle on a level surface.
2. Remove the fill plug.
3. Remove the level check plug.
4. Add the recommended fluid to the fill plug hole until it begins to flow out of the check plug hole.
5. Reinstall the level check plug. Torque to specification.
6. Reinstall the fill plug. Torque to specification.

**MAINTENANCE****Gearcases****Transfer Case****Fluid Change**

The drain plug is located on the bottom of the transfer case. Access the drain plug through the drain hole in the skid plate.

1. Remove the fill plug.
2. Place a drain pan under the drain plug.
3. Remove the drain plug. Allow the fluid to drain completely.
4. Clean the drain plug.
5. Reinstall the drain plug with a new o-ring. Torque to specification.
6. Remove the level check plug.
7. Add the recommended fluid to the fill plug hole until it begins to flow out of the check plug hole.
8. Reinstall the level check plug. Torque to specification.
9. Reinstall the fill plug. Torque to specification.
10. Check for leaks. Discard used fluid properly.

## MAINTENANCE

### Gearcases

#### Transmission (Main Gearcase)

Always check and change the fluid at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Refer to the Gearcase Specifications Chart on page 84 for recommended lubricants, capacities and torque specifications.

#### Fluid Check

The fill plug is located on the left side of the gearcase. Maintain the fluid level at the bottom of the fill plug hole.

1. Position the vehicle on a level surface.
2. Remove the fill plug.
3. Check the fluid level.
4. Add the recommended fluid as needed.
5. Reinstall the fill plug. Torque to specification.

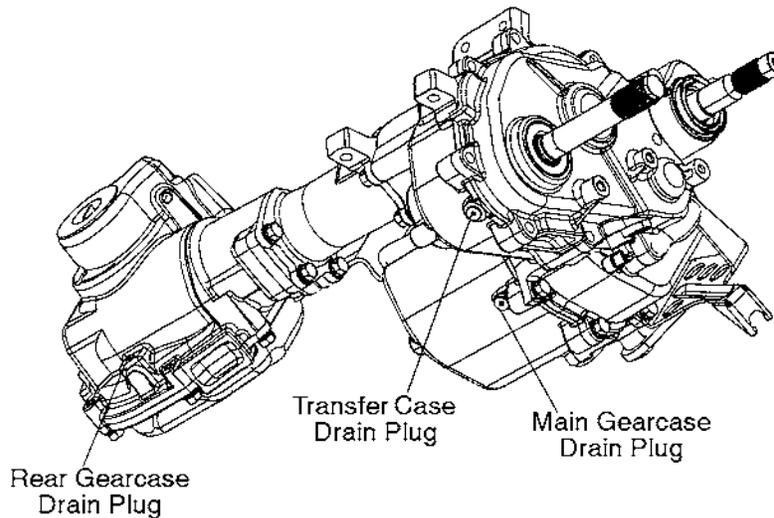


Fill Plug

**MAINTENANCE****Gearcases****Transmission (Main Gearcase)****Fluid Change**

The drain plug is located on the bottom of the gearcase. Access the drain plug through the drain hole in the skid plate.

1. Remove the fill plug.
2. Place a drain pan under the drain plug.
3. Remove the drain plug. Allow the fluid to drain completely.
4. Clean the drain plug.
5. Reinstall the drain plug with a new o-ring. Torque to specification.
6. Add the recommended fluid to the fill hole. Maintain the fluid level at the bottom of the fill plug hole. Do not overfill.
7. Reinstall the fill plug. Torque to specification.
8. Check for leaks. Discard used fluid properly.



## MAINTENANCE

### Gearcases

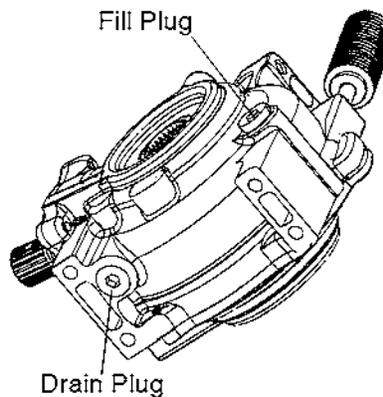
#### Demand Drive Unit (Front Gearcase)

Always check and change the fluid at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Refer to the Gearcase Specifications Chart on page 84 for recommended lubricants, capacities and torque specifications.

#### Fluid Check

The fill plug is located on the bottom right side of the demand drive unit. Maintain the fluid level even with the bottom thread of the fill plug hole.

1. Position the vehicle on a level surface.
2. Remove the fill plug. Check the fluid level.
3. Add the recommended fluid as needed.
4. Reinstall the fill plug. Torque to specification.



#### Fluid Change

The drain plug is located on the bottom of the gearcase.

1. Remove the fill plug.
2. Place a drain pan under the drain plug.
3. Remove the drain plug. Allow the fluid to drain completely.
4. Clean the drain plug. If the o-ring is damaged, install a new o-ring.
5. Reinstall the drain plug. Torque to specification.
6. Add the recommended fluid. Maintain the fluid level even with the bottom thread of the fill plug hole.
7. Reinstall the fill plug. Torque to specification.
8. Check for leaks. Discard used fluid properly.

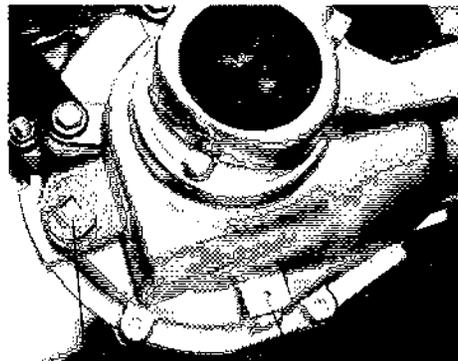
**MAINTENANCE****Gearcases****Rear Gearcase**

Always check and change the fluid at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Refer to the Gearcase Specifications Chart on page 84 for recommended lubricants, capacities and torque specifications.

**Fluid Check**

The fill plug is located on the right side of the rear gearcase. Maintain the fluid level even with the bottom thread of the fill plug hole.

1. Position the vehicle on a level surface.
2. Remove the fill plug. Check the fluid level.
3. Add the recommended fluid as needed.
4. Reinstall the fill plug. Torque to specification.



Fill Plug

Drain Plug

**Fluid Change**

The drain plug is located on the bottom right side of the rear gearcase.

1. Remove the fill plug.
2. Place a drain pan under the drain plug. Remove the drain plug.
3. Allow the fluid to drain completely.
4. Clean the drain plug. Reinstall the drain plug with a new o-ring. Torque to specification.
5. Add the recommended fluid. Maintain the fluid level even with the bottom thread of the fill plug hole.
6. Reinstall the fill plug. Torque to specification.
7. Check for leaks. Discard used fluid properly.

**MAINTENANCE****Gearcases****Gearcase Specification Chart**

Use of other fluids may result in improper operation of components. See page 122 for the part numbers of Polaris products.

<b>Gearcase</b>	<b>Lubricant</b>	<b>Capacity</b>	<b>Fill Plug Torque</b>	<b>Drain Plug/ Level Check Plug Torque</b>
Transmission (Main Gearcase)	Premium AGL Synthetic Gearcase Fluid	24 oz. (710 ml)	40-50 ft. lbs. (54-68 Nm)	30-45 in. lbs. (3-5 Nm)
Transmission (Transfer Case)	Premium AGL Synthetic Gearcase Fluid	14 oz. (414 ml)	40-50 ft. lbs. (54-68 Nm)	30-45 in. lbs. (3-5 Nm)
Demand Drive Unit (Front Gearcase)	Demand Drive LT Premium Fluid	6.75 oz. (200 ml)	8-10 ft. lbs. (11-13.6 Nm)	11 ft. lbs. (15 Nm)
Rear Gearcase	Premium ATV Angle Drive Fluid	26 oz. (769 ml)	40-50 ft. lbs. (54-68 Nm)	30-45 in. lbs. (3-5 Nm)

**MAINTENANCE****Spark Plugs**  
**Spark Plug Gap/Torque**

Electrode Gap	New Plug Torque	Used Plug Torque
.035" (.9 mm)	18 ft. lbs. (24 Nm)	18 ft. lbs. (24 Nm)

NOTICE: Using non-recommended spark plugs can result in serious engine damage. Always use Polaris-recommended spark plugs. Refer to the specifications section beginning on page 120.

Spark plug condition is indicative of engine operation. The spark plug firing end condition should be read after the engine is warmed up and the vehicle is driven at higher speeds. Immediately check the spark plug for correct color. See page 86.

**⚠ CAUTION**

A hot exhaust system and engine can cause burns. Wear protective gloves when removing a spark plug for inspection.

## **MAINTENANCE**

### **Spark Plugs**

#### **Spark Plug Condition**

##### **Normal Plug**

The normal insulator tip is gray, tan or light brown. There will be few combustion deposits. The electrodes are not burned or eroded. This indicates the proper type and heat range for the engine and the service.

Tip: The tip should not be white. A white insulator tip indicates overheating, caused by use of an improper spark plug or incorrect throttle body adjustments.

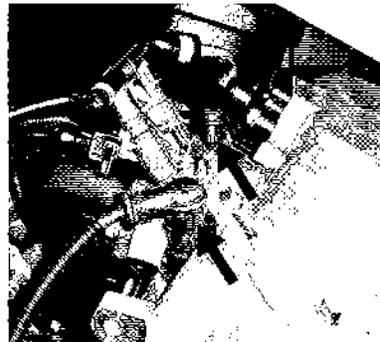
##### **Wet Fouled Plug**

The wet fouled insulator tip is black. A damp oil film covers the firing end. There may be a carbon layer over the entire nose. Generally, the electrodes are not worn. General causes of fouling are excessive oil, use of non-recommended injection oil or incorrect throttle body adjustments.

#### **Spark Plug Removal and Replacement**

1. Remove both seats.
2. Remove the rear service panel. See page 29.
3. Remove the spark plug cap.
4. Using the spark plug wrench provided in the tool kit, remove the plug by rotating it counterclockwise.
5. Reverse the procedure for spark plug installation. Torque to specification. See page 85.

Spark Plugs



**MAINTENANCE****Cooling System  
Operation**

The engine coolant level is controlled or maintained by the recovery system. The recovery system components are the overflow bottle, radiator filler neck, radiator pressure cap and connecting hose.

As coolant operating temperature increases, the expanding (heated) excess coolant is forced out of the radiator, past the pressure cap, and into the overflow bottle. As engine coolant temperature decreases, the contracting (cooled) coolant is drawn back up from the tank, past the pressure cap, and into the radiator.

Tip: Some coolant level drop on new vehicles is normal as the system is purging itself of trapped air. Observe coolant levels and maintain as recommended by adding coolant to the overflow bottle.

**Adding or Changing Coolant**

To ensure that the coolant maintains its ability to protect the engine, we recommend that the system be completely drained every two years and a fresh mixture of antifreeze and water added. Polaris recommends the use of Polaris Premium 60/40 anti-freeze/coolant or a 50/50 mixture of high quality aluminum compatible anti-freeze/coolant and distilled water. Polaris Premium 60/40 is already premixed and ready to use. Do not dilute with water. See page 122 for the part numbers of Polaris products.

Tip: Always follow the manufacturer's mixing recommendations for the freeze protection required in your area.

Any time the cooling system has been drained for maintenance or repair, replace the coolant. If the recovery bottle has run dry, the level in the radiator should be inspected. Add coolant as needed.

## **MAINTENANCE**

### **Cooling System**

#### **Radiator and Cooling Fan**

Always check and clean the screen and radiator fins at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Do not obstruct or deflect air flow through the radiator by installing unauthorized accessories in front of the radiator or behind the cooling fan. Interference with the radiator air flow can lead to overheating and consequent engine damage.

**NOTICE:** Washing the vehicle with a high-pressure hose could damage the radiator fins and impair the radiator's effectiveness. Using a high-pressure system is not recommended.

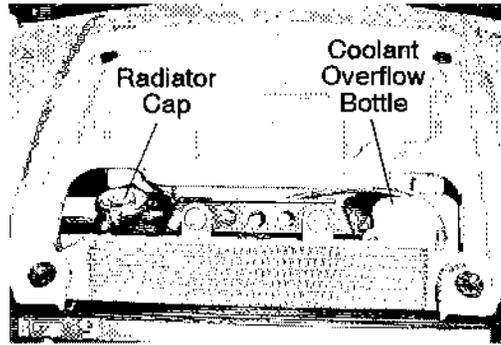
## MAINTENANCE

### Cooling System Coolant Level

Always check and change the coolant at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Maintain the coolant level between the minimum and maximum marks on the bottle (when the fluid is cool).

1. Position the vehicle on a level surface.
2. Remove the hood. See page 31.
3. View the coolant level in the overflow bottle.
4. If the coolant level is below the safe operating range, remove the cap and use a funnel to add coolant through the opening. Reinstall the cap.

**Tip:** If coolant must be added often, or if the overflow bottle runs completely dry, there may be a leak in the system. Have the cooling system inspected by your Polaris dealer.



## MAINTENANCE

### Cooling System

#### Radiator Coolant Level

Always check and clean the screen and radiator fins at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Do not obstruct or deflect air flow through the radiator by installing unauthorized accessories in front of the radiator or behind the cooling fan. Interference with the radiator air flow can lead to overheating and consequentially, engine damage.

#### **▲ CAUTION**

Escaping steam can cause burns. Never remove the pressure cap while the engine is warm or hot. Always allow the engine to cool before removing the pressure cap.

This procedure is required only if the cooling system has been drained for maintenance and/or repair. But if the overflow bottle has run dry, the level in the radiator should also be inspected.

1. Remove the hood. See page 31.
2. Slowly remove the radiator cap.
3. View the coolant level through the opening.
4. Use a funnel and slowly add coolant as needed.

Tip: Use of a non-standard pressure cap will not allow the recovery system to function properly. See your dealer for the correct replacement part.

**MAINTENANCE****Polaris Variable Transmission (PVT) System**

Belt slip is responsible for creating excessive heat that destroys belts, wears clutch components and causes outer clutch covers to fail. Switch to low range while operating at slower speeds to extend the life of the PVT components (belt, cover, etc.).

**▲ WARNING**

Failure to comply with the instructions in this warning can result in severe injury or death.

Do not modify any component of the PVT system. Doing so may reduce its strength so that a failure may occur at a high speed. The PVT system has been precision balanced. Any modification will cause the system to be out of balance, creating vibration and additional loads on components.

The PVT system rotates at high speeds, creating large amounts of force on clutch components. Extensive engineering and testing has been conducted to ensure the safety of this product. However, as the owner, you have the following responsibilities to make sure this system remains safe:

- Always follow all recommended maintenance procedures. See your dealer as outlined in the owner's manual.
- This PVT system is intended for use on Polaris products only. Do not install it in any other product.
- Always make sure the PVT housing is securely in place during operation.

## **MAINTENANCE**

### **Polaris Variable Transmission (PVT) System**

#### **PVT Drying**

Before washing the vehicle, locate the PVT outlet duct under the right rear wheel well. Avoid spraying water directly toward the duct when washing the vehicle from the rear. See page 114.

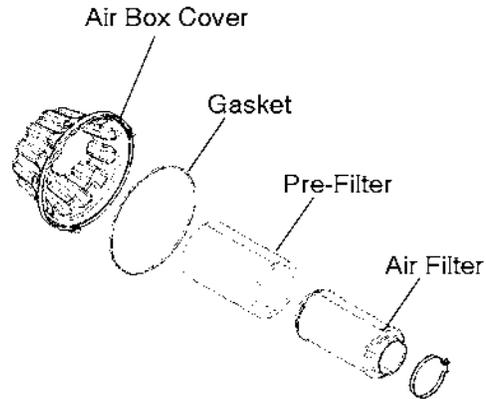
There may be some instances when water is accidentally ingested into the PVT system. Use the following instructions to dry it out before operating.

1. Remove the seats. See page 29.
2. Loosen the lower screws that secure the clutch cover.
3. Allow the water to drain.
4. Tighten the screws.
5. Place the transmission in PARK. Apply the brakes.
6. Start the engine.
7. Apply varying throttle for 10-15 seconds to expel the moisture and air-dry the belt and clutches. Do not hold the throttle wide open for more than 10 seconds.
8. Allow the engine RPM to settle to idle speed. Apply the brakes. Shift the transmission to the lowest available range.
9. Test for belt slippage. If the belt slips, repeat the process.
10. Take the vehicle to your dealer for service as soon as possible.

**MAINTENANCE****Filter Systems****Air Filter**

Always change the air filter at the intervals outlined in the Periodic Maintenance Chart beginning on page 67.

1. Access the air box from behind the left rear wheel.
2. Remove the air box cover and inspect the gasket. It should adhere tightly to the cover around the entire edge.
3. Remove the air filter.
4. Remove the pre-filter from the main air filter.
5. Wash the pre-filter in soapy water, then rinse and let dry. Install a new main filter if needed. Do not attempt to clean the main air filter.
6. Reinstall the pre-filter over the main filter. Apply a small amount of general purpose grease to the sealing edges of the filter before installing.
7. Inspect the air box for oil or water deposits. If present, drain them into a suitable container.



## MAINTENANCE

### Spark Arrestor

#### ▲ WARNING

Failure to heed the following warnings while servicing the spark arrestor could result in serious injury or death.

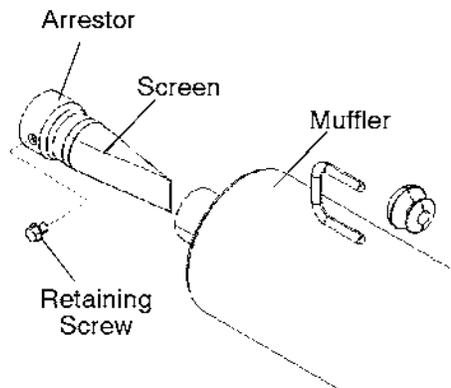
Do not perform clean-out immediately after the engine has been run, as the exhaust system becomes very hot. Serious burns could result from contact with the exhaust components. Allow components to cool sufficiently before proceeding.

Wear eye protection and gloves.

Never run the engine in an enclosed area. Exhaust contains poisonous carbon monoxide gas that can cause loss of consciousness or death in a very short time.

Periodically clean the spark arrestor to remove accumulated carbon.

1. Remove the retaining screw and remove the arrestor from the end of the muffler.
2. Use a non-synthetic brush to clean the arrestor screen. A synthetic brush may melt if components are warm. If necessary, blow debris from the screen with compressed air.
3. Inspect the screen for wear and damage. Replace a worn or damaged screen.
4. Reinstall the arrestor. Torque screws to 5-7 ft. lbs. (7-9 Nm).



**MAINTENANCE****Throttle System****▲ WARNING**

Failure to check or maintain proper operation of the throttle system can result in an accident and lead to serious injury or death if the throttle pedal sticks during operation.

Never start or operate this vehicle if it has a sticking or improperly operating throttle pedal.

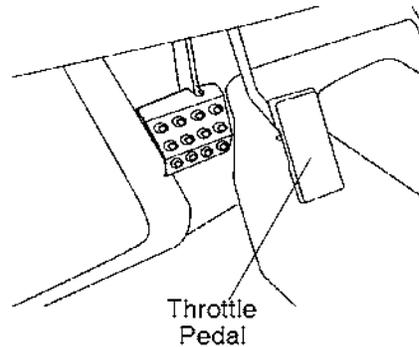
Immediately contact your dealer for service if throttle problems arise.

Always check the pedal for free movement and return before starting the engine and occasionally during operation.

**Throttle Freeplay**

If the throttle pedal has excessive play due to cable stretch or mis-adjustment, it will cause a delay in throttle response, especially at low engine speed. The throttle may also not open fully. If the throttle pedal has no freeplay, the throttle may be hard to control, and the idle speed may be erratic.

Check the throttle pedal freeplay at the intervals outlined in the Periodic Maintenance Chart beginning on page 67. Adjust the freeplay if necessary.

**Throttle Freeplay Inspection**

1. Place the transmission in PARK.
2. Apply the brakes. Start the engine. Allow it to warm up thoroughly.
3. Measure the distance the throttle pedal moves before the engine begins to pick up speed. Freeplay should be 1/16 to 1/8 inches (1.5-3 mm).

## MAINTENANCE

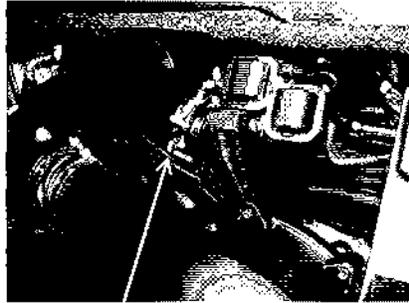
### Throttle System

#### Throttle Body/Idle RPM

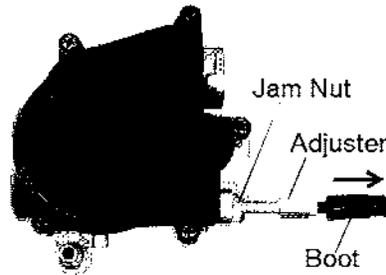
Idle RPM is preset by the manufacturer. If the engine idle speed is not satisfactory, please see your Polaris dealer for adjustment.

#### Throttle Freeplay Adjustment

1. Remove both seats. Remove the rear service panel. See page 29.
2. Locate the throttle cable adjuster at the throttle body.
3. Slide the cable adjuster boot off the cable adjuster.
4. Using a 10 mm open-end wrench, loosen the adjustment jam nut.
5. Using an 8 mm open-end wrench, move the cable adjuster until 1/16" to 1/8" (1.5-3 mm) of freeplay is achieved at the throttle pedal. See page 95. While adjusting, lightly flip the throttle pedal up and down.
6. Tighten the jam nut.
7. Apply a small amount of grease to the inside of the boot and slide it over the cable adjuster to its original position.



Adjuster



**MAINTENANCE****Brakes**

The front and rear brakes are hydraulic disc type brakes activated by the brake pedal. See page 39.

Always check brake pedal travel and the brake fluid reservoir level before each use of the vehicle. When applied, the brake pedal should feel firm. Any sponginess would indicate a possible fluid leak or low brake fluid level, which must be corrected before riding. See page 98 for brake fluid information.

If you discover any irregularities in brake system operation, including excessive pedal travel, contact your dealer for proper diagnosis and repairs.

**▲ WARNING**

Operating the vehicle with a spongy brake pedal can result in loss of braking, which could cause an accident resulting in severe injury or death. Never operate the vehicle with a spongy-feeling brake pedal.

## MAINTENANCE

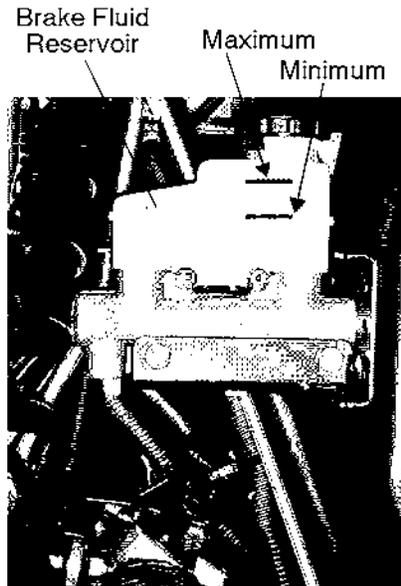
### Brakes

#### Brake Fluid

Inspect the level of the brake fluid before each operation. If the fluid level is low add DOT 4 brake fluid only. See page 122 for the part numbers of Polaris products.

Change the brake fluid every two years and any time the fluid becomes contaminated, the fluid level is below the minimum, or if the type and brand of the fluid in the reservoir are unknown. Access the brake fluid reservoir through the left front wheel well.

1. Position the vehicle on a level surface.
2. Place the transmission in PARK.
3. View the brake fluid level in the reservoir. The level should be between the maximum and minimum level lines.
4. If the fluid level is lower than the lower level line, add brake fluid to the upper line.
5. Apply the brake forcefully for a few seconds and check for fluid leakage around the fittings.

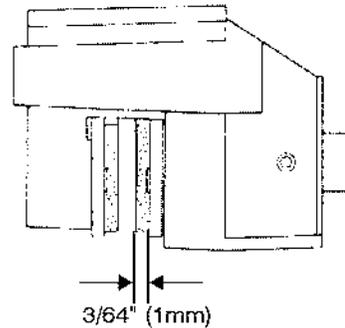


#### **▲ WARNING**

After opening a bottle of brake fluid, always discard any unused portion. Never store or use a partial bottle. Brake fluid is hygroscopic, meaning it rapidly absorbs moisture from the air. The moisture causes the boiling temperature of the brake fluid to drop, which can lead to early brake fade and the possibility of accident or severe injury.

**MAINTENANCE****Brakes****Brake Inspection**

1. Check the brake system for fluid leaks.
2. Check the brake pedal for excessive travel or a spongy feel.
3. Check the friction pads for wear, damage and looseness.
4. Inspect the brake pad wear surface for excessive wear.
5. Change pads when worn to  $3/64"$  (1 mm).

**Steering Wheel Inspection**

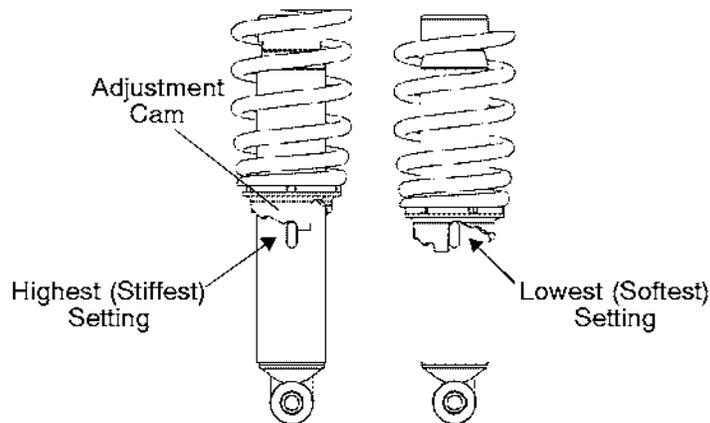
Check the steering wheel for specified freeplay and smooth operation at the intervals outlined in the Periodic Maintenance Chart beginning on page 67.

1. Position the vehicle on level ground.
2. Lightly turn the steering wheel left and right.
3. There should be 0.8"-1.0" (20-25 mm) of freeplay.
4. If there is excessive freeplay or strange noises, or the steering feels rough or "catchy," have the steering system inspected by an authorized Polaris dealer.

## MAINTENANCE

### Suspension Settings (RZR only)

The front and rear suspensions are preload adjustable, with five settings on each axle.



The suspensions are set on the lowest (softest) setting at the factory. This setting is appropriate for nearly all riding conditions. Since the vehicle is equipped with full skid plates, suspension adjustment is not necessary.

If desired, the suspension may be adjusted to maintain vehicle clearance height when carrying loads. Please see your Polaris dealer for the tool required to make suspension adjustments. Elevate the vehicle slightly for easier adjustment.

*Always heed the following rules if you make adjustments to this suspension.*

- Always return the suspension to the lowest (softest) setting after the load is removed from the vehicle. The increased suspension height will negatively impact vehicle stability when operating without a load.
- Always apply the same adjustment setting to *all four wheels*.
- Never operate the vehicle on the highest (stiffest) or second highest preload settings without a total combined payload in the vehicle of 450 lbs. (204 kg) or more. Payload includes the driver, passenger, Polaris-approved accessories and cargo. Never exceed the stated load capacity for this vehicle. See page 120.

## MAINTENANCE

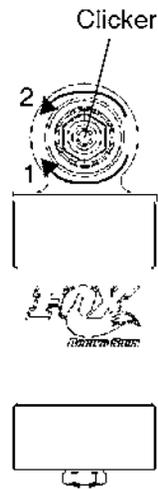
### Suspension Settings (RZR S)

#### Front/Rear Shock Compression

Use a flat-blade screwdriver to make damping adjustments. The compression damping clicker is located on top of the shock reservoir, under the rear fender. When the adjuster screw is turned clockwise until it stops, the damping is in the fully closed position.

1. Turn the clicker clockwise (1) to increase compression damping.
2. Turn the clicker counter-clockwise (2) to decrease compression damping.

Setting	Compression Damping
Softest	20 clicks from closed
Factory	10 clicks from closed
Firmer	2 clicks from closed



## MAINTENANCE

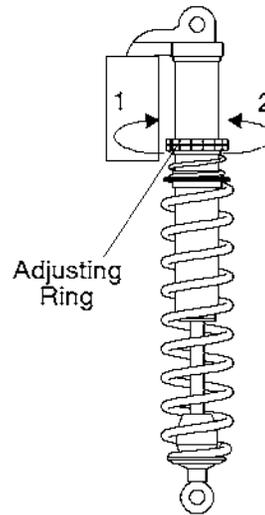
### Suspension Settings (RZR S)

#### Front/Rear Spring Preload

1. Raise and safely support the front or rear of the vehicle off the ground to allow the suspension that will be adjusted to fully extend.
2. Loosen the jam nut and back it away from the adjusting ring.
3. Turn the adjusting ring to the left (1) to increase preload for a stiffer ride. Turn the adjusting ring to the right (2) to decrease preload for a softer ride.

**WARNING!** Uneven adjustment may cause poor handling of the vehicle, which could result in an accident. Always adjust both the left and right spring preloads equally or have your Polaris dealer perform the adjustments.

4. Tighten the jam nut firmly against the adjuster ring.



## MAINTENANCE

### Tires

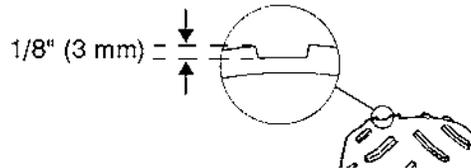
#### ▲ WARNING

Operating your vehicle with worn tires will increase the possibility of skidding, loss of control and an accident, which could result in serious injury or death. Always replace tires when the tread depth measures 1/8" (3 mm) or less.

Improper tire inflation or the use of non-standard size or type of tires may adversely affect vehicle handling, which could result in vehicle damage or personal injury. Always maintain proper tire pressure. When replacing tires, always use original equipment size and type.

#### Tire Tread Depth

Always replace tires when tread depth is worn to 1/8" (3 mm) or less.



#### Axle and Wheel Nut Torque Specifications

Inspect the following items occasionally for tightness, and if they've been loosened for maintenance service. *Do not lubricate the stud or the lug nut.*



Cast Aluminum



90 ft. lbs.  
(122 Nm)



Steel



27 ft. lbs.  
(37 Nm)

Wheel Type	Nut Type	Location	Nut Torque
Cast Aluminum	Lug Nut	Front and Rear	90 ft. lbs. (122 Nm)
Steel	2-Piece Flange Nut	Front and Rear	27 ft. lbs. (37 Nm)
Any	Hub Retaining Nut	Front and Rear	80 ft. lbs. (108 Nm)

## MAINTENANCE

### Tires

#### **▲ WARNING**

Improperly installed wheels can adversely affect tire wear and vehicle handling, which can result in serious injury or death. Always ensure that all nuts are torqued to specification. Do not service axle nuts that have a cotter pin installed. See your Polaris dealer.

#### **Wheel Removal**

1. Position the vehicle on a level surface.
2. Place the transmission in PARK. Stop the engine.
3. Loosen the wheel nuts slightly.
4. Elevate the side of the vehicle by placing a suitable stand under the frame.
5. Remove the wheel nuts and washers. Remove the wheel.

#### **Wheel Installation**

1. Place the transmission in PARK.
2. Place the wheel in the correct position on the wheel hub. Be sure the valve stem is toward the outside and rotation arrows on the tire point toward forward rotation.
3. Attach the wheel nuts and washers and finger tighten.
4. Carefully lower the vehicle to the ground.
5. Torque the wheel nuts to specification. See page 103.



**MAINTENANCE****Lights**

When servicing a halogen lamp, don't touch the lamp with bare fingers. Oil from your skin leaves a residue, causing a hot spot that will shorten the life of the lamp.

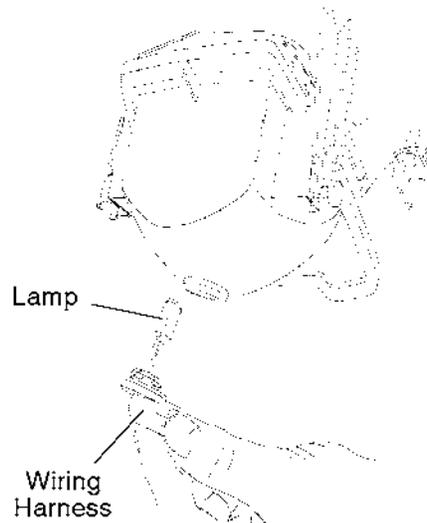
**▲ WARNING**

Poor lighting while driving can result in severe injury or death. Headlight and taillight lenses become dirty during normal operation. Wash the headlights frequently to maintain lighting quality.

**Headlight Lamp Replacement**

Do not service the headlamps until they've cooled sufficiently.

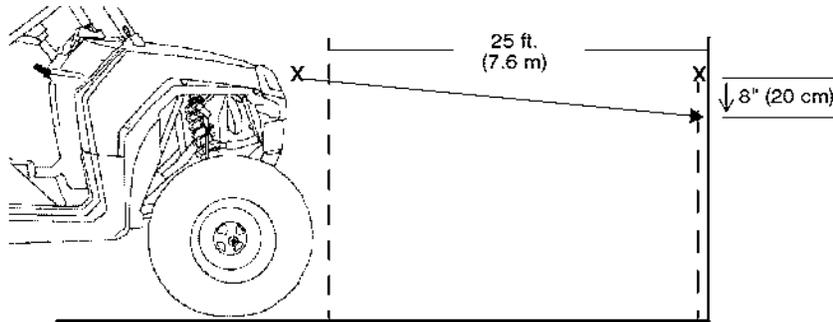
1. Unplug the headlamp from the wiring harness. Be sure to pull on the connector, not on the wiring.
2. Turn the lamp counter-clockwise to remove it.
3. Install the new lamp. Make sure the tab on the lamp locates properly in the housing.
4. Reinstall the harness assembly into the headlight assembly.



## MAINTENANCE

### Lights

#### Headlight Beam Adjustment



1. Place the vehicle on a level surface with the headlight approximately 25 ft. (7.6 m) from a wall. Place the transmission in PARK.
2. Measure the distance from the floor to the center of the headlight and make a mark on the wall at the same height.
3. Apply the brakes. Start the engine. Turn on the headlights.
4. Observe the headlight aim. The most intense part of the headlight beam should be aimed 8" (20 cm) below the mark placed on the wall in step 2. Include the weight of a rider on the seat while performing this step.
5. If adjustment is necessary, turn the headlight adjustment screw to adjust the beam.
6. Repeat steps 4-5 until the beam is properly adjusted.

**MAINTENANCE****Lights****Brake Lights**

When the brake pedal is depressed, the brake light comes on. Check the brake light before each ride.

1. Turn the ignition switch to the ON position.
2. Apply the brakes. The brake light should come on after about 10 mm (0.4 in.) of pedal travel. If the light doesn't come on, check the bulb.

**Vehicle Immersion**

**NOTICE:** If your vehicle becomes immersed, major engine damage can result if the machine is not thoroughly inspected. Take the vehicle to your dealer before starting the engine.

If it's impossible to take your vehicle to a dealer before starting it, follow the steps outlined below:

1. Move the vehicle to dry land.
2. Check the air box. If water is present, dry the air box and replace the filter with a new filter. Thoroughly dry the air pre-filter. See page 93.
3. Remove the spark plugs.
4. Turn the engine over several times.
5. Dry the spark plugs and reinstall them, or install new plugs.
6. Attempt to start the engine. If necessary, repeat the drying procedure.
7. Take the vehicle to your dealer for service as soon as possible, whether you succeed in starting it or not.
8. If water has been ingested into the PVT follow the procedure on page 92 for drying.

## MAINTENANCE

### Battery

Your vehicle may have either a sealed battery, which requires little maintenance, or a conventional battery. A sealed battery can be identified by its flat covers on the top of the battery. A conventional battery has six filler caps on the top of the battery.

Always keep battery terminals and connections free of corrosion. If cleaning is necessary, remove the corrosion with a stiff wire brush. Wash with a solution of one tablespoon baking soda and one cup water. Rinse well with tap water and dry off with clean shop towels. Coat the terminals with dielectric grease or petroleum jelly. Be careful not to allow cleaning solution or tap water into a conventional battery.

#### **▲ WARNING**

Battery electrolyte is poisonous. It contains sulfuric acid. Serious burns can result from contact with skin, eyes or clothing.

Antidote:

**External:** Flush with water.

**Internal:** Drink large quantities of water or milk. Follow with milk of magnesia, beaten egg, or vegetable oil. Call physician immediately.

**Eyes:** Flush with water for 15 minutes and get prompt medical attention.

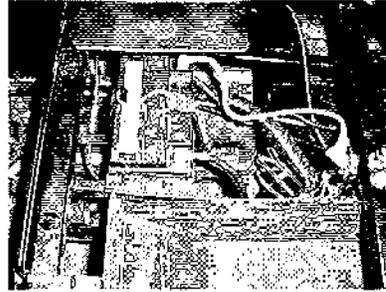
Batteries produce explosive gases. Keep sparks, flame, cigarettes, etc. away. Ventilate when charging or using in an enclosed space. Always shield eyes when working near batteries. KEEP OUT OF REACH OF CHILDREN.

**MAINTENANCE****Battery****▲ WARNING**

Improperly connecting or disconnecting battery cables can result in an explosion and cause serious injury or death. When removing the battery, always disconnect the negative (black) cable first. When reinstalling the battery, always connect the negative (black) cable last.

**Battery Removal**

1. Remove the driver's seat. See page 29.
2. On conventional batteries, remove the battery vent tube.
3. Disconnect the black (negative) battery cable first.
4. Disconnect the red (positive) battery cable last.
5. Lift the battery out of the vehicle. Be careful not to tip a conventional battery sideways, which could spill electrolyte.



**NOTICE:** If electrolyte spills, immediately wash it off with a solution of one tablespoon baking soda and one cup water to prevent damage to the vehicle.

## MAINTENANCE

### Battery

#### Battery Installation

Using a new battery that has not been fully charged can damage the battery and result in a shorter life. It can also hinder vehicle performance. Follow the battery charging instructions on page 112 before installing the battery.

1. Ensure that the battery is fully charged.
2. Place the battery in the battery holder.
3. On conventional batteries, install the battery vent tube (sealed batteries do not have a vent tube). The vent tube must be free of obstructions and securely installed. Route the tube away from the frame and vehicle body to prevent contact with electrolyte.

#### **▲ WARNING**

Battery gases could accumulate in an improperly installed vent tube and cause an explosion, resulting in serious injury or death. Always ensure that the vent tube is free of obstructions and is securely installed as recommended.

4. Coat the terminals with dielectric grease or petroleum jelly.
5. Connect and tighten the red (positive) cable first.
6. Connect and tighten the black (negative) cable last.
7. Verify that cables are properly routed.
8. Reinstall the driver's seat.

## MAINTENANCE

### Battery

#### Battery Storage

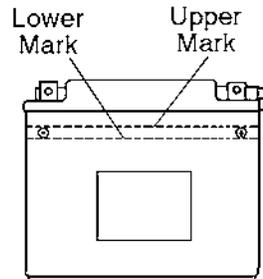
Whenever the vehicle is not used for a period of three months or more, remove the battery from the vehicle, ensure that it's fully charged, and store it out of the sun in a cool, dry place. Check battery voltage each month during storage and recharge as needed to maintain a full charge. See page 112.

Tip: Battery charge can be maintained by using a Polaris Battery Tender charger or by charging about once a month to make up for normal self-discharge. Battery Tender can be left connected during the storage period, and will automatically charge the battery if the voltage drops below a pre-determined point. See page 122 for the part numbers of Polaris products.

#### Battery Fluid (Conventional Battery)

A poorly maintained battery will deteriorate rapidly. Check the battery fluid level often. Maintain the fluid level between the upper and lower level marks.

Add only distilled water. Tap water contains minerals that are harmful to a battery.



## MAINTENANCE

### Battery

#### Battery Charging (Conventional Battery)

1. Remove the battery from the vehicle to prevent damage from leaking or spilled electrolyte during charging. See page 109.
2. Charge the battery with a charging output no larger than 1/10 of the battery's amp/hr rating. Charge as needed to raise the specific gravity to 1.270 or greater.
3. Reinstall the battery. See page 110. Make sure the positive terminal is toward the front of the vehicle.

#### Battery Charging (Sealed Battery)

The following battery charging instructions apply only to the installation of a sealed battery. Read all instructions before proceeding with the installation of this battery.

The sealed battery is already filled with electrolyte and has been sealed and *fully charged* at the factory. *Never* pry the sealing strip off or add any other fluid to this battery.

The single most important thing about maintaining a sealed battery is to keep it fully charged. Since the battery is sealed and the sealing strip cannot be removed, you must use a voltmeter or multimeter to measure DC voltage.

#### **⚠ WARNING**

An overheated battery may explode, causing severe injury or death. Always watch charging times carefully. Stop charging if the battery becomes very warm to the touch. Allow it to cool before resuming charging.

For a refresh charge, follow all instructions carefully.

1. Check the battery voltage with a voltmeter or multimeter. A fully charged battery will register 12.8 V or higher.
  2. If the voltage is less than 12.8 volts, recharge the battery at 1.2 amps or less until battery voltage is 12.8 or greater.
- Tip: When using an automatic charger, refer to the charger manufacturer's instructions for recharging. When using a constant current charger, use the guidelines on the next page for recharging.

**MAINTENANCE****Battery****Battery Charging (Sealed Battery)**

Always verify battery condition before and 1-2 hours after the end of charging.

<b>State of Charge</b>	<b>Voltage</b>	<b>Action</b>	<b>Charge Time</b> (Using constant current charger @ standard amps specified on top of battery)
100%	12.8-13.0 volts	None, check at 3 mos. from date of manufacture	None required
75%-100%	12.5-12.8 volts	May need slight charge, if no charge given, check in 3 months	3-6 hours
50%-75%	12.0-12.5 volts	Needs charge	5-11 hours
25%-50%	11.5-12.0 volts	Needs charge	At least 13 hours, verify state of charge
0%-25%	11.5 volts or less	Needs charge with desulfating charger	At least 20 hours

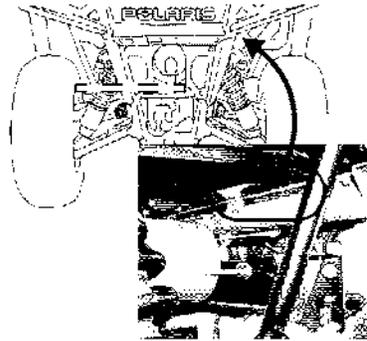
## MAINTENANCE

### Cleaning and Storage

#### Washing the Vehicle

Keeping your Polaris vehicle clean will not only improve its appearance but it can also extend the life of various components.

Before washing the vehicle, locate the PVT outlet duct under the right rear wheel well. Avoid spraying water directly toward the duct when washing the vehicle from the rear.



**NOTICE:** Water in the PVT system could cause the drive belt to become wet and slip in the clutches. Always avoid spraying water directly toward the PVT outlet duct when washing the vehicle from the rear.

High water pressure may damage components. Polaris recommends washing the vehicle by hand or with a garden hose, using mild soap.

Certain products, including insect repellents and chemicals, will damage plastic surfaces. Do not allow these types of products to contact the vehicle.

The best and safest way to clean your Polaris vehicle is with a garden hose and a pail of mild soap and water.

1. Use a professional-type washing cloth, cleaning the upper body first and the lower parts last.
2. Rinse with clean water frequently.
3. Dry surfaces with a chamois to prevent water spots.

#### Washing Tips

- Avoid the use of harsh cleaners, which can scratch the finish.
- Do not use a power washer to clean the vehicle.
- Do not use medium to heavy duty compounds on the finish.
- Always use clean cloths and pads for cleaning and polishing. Old or reused cloths and pads may contain dirt particles that will scratch the finish.

## **MAINTENANCE**

### **Cleaning and Storage**

#### **Washing the Vehicle**

If a high pressure water system is used for cleaning (not recommended), exercise extreme caution. The water may damage components and could remove paint and labels. Avoid directing the water stream at the following items:

- Wheel bearings
- Radiator
- Transmission seals
- Brakes
- Cab and body panels
- Labels and decals
- Electrical components and wiring

If warning and safety labels are damaged, contact your Polaris dealer for free replacement.

Grease all zerk fittings immediately after washing. Allow the engine to run for a while to evaporate any water that may have entered the engine or exhaust system.

#### **Polishing the Vehicle**

Polaris recommends the use of common household aerosol furniture polish for polishing the finish on your Polaris vehicle. Follow the instructions on the container.

#### **Polishing Tips**

- Avoid the use of automotive products, some of which can scratch the finish of your vehicle.
- Always use clean cloths and pads for cleaning and polishing. Old or reused cloths and pads may contain dirt particles that will scratch the finish.

## **MAINTENANCE**

### **Cleaning and Storage**

#### **Chrome Wheel Care (if equipped)**

Proper maintenance will protect chrome wheels from corrosion, preserve wheel life and ensure a "like new" appearance for many years.

Tip: Chrome wheels exposed to road salt (or salt in the air in coastal areas) are more susceptible to corrosion if not properly cleaned. Clean chrome wheels more often if they're exposed to salt or other corrosive elements.

1. Wash chrome wheels frequently. Use a mild detergent. Never use abrasive cleaners on plated or painted surfaces.
2. Rinse well with clear water. Soap, detergents, salt, dirt, mud and other elements can cause corrosion.
3. Polish the clean chrome wheels periodically. Use an automotive grade chrome polish.
4. Routinely and liberally apply a weather resistant wax to each polished chrome wheel. Choose a product suitable for chrome finishes. Read and follow the product labels and instructions.

#### **Removing Corrosion**

If light rust is found on the chrome finish, use steel wool (#0000-OTT grade) to remove it. Gently rub the affected areas with the steel wool until the corrosion has been removed. Clean and polish the wheel as outlined above.

## MAINTENANCE

### Cleaning and Storage

#### Storage Tips

NOTICE: Starting the engine during the storage period will disturb the protective film created by fogging and damage could occur. Never start the engine during the storage period.

#### Clean the Exterior

Make any necessary repairs and clean the vehicle as recommended. See page 114.

#### Stabilize the Fuel

1. Fill the fuel tank.
2. Add Polaris Carbon Clean Fuel Treatment or Polaris Fuel Stabilizer. Follow the instructions on the container for the recommended amount. Carbon Clean removes water from fuel systems, stabilizes fuel and removes carbon deposits from pistons, rings, valves and exhaust systems.
3. Allow the engine to run for 15-20 minutes to allow the stabilizer to disperse through the entire fuel delivery system.

#### Oil and Filter

Change the oil and filter. See page 76.

#### Air Filter / Air Box

Inspect and clean or replace the pre-filter and air filter. See page 93. Clean the air box. Drain the sediment tube.

#### Fluid Levels

Inspect the fluid levels. Add or change fluids as recommended in the Periodic Maintenance Chart beginning on page 67.

- Demand drive fluid (front gearcase)
- Rear gearcase fluid
- Transmission fluid
- Brake fluid (change every two years and any time the fluid looks dark or contaminated)
- Coolant (test strength/fill)

## **MAINTENANCE**

### **Cleaning and Storage**

#### **Storage Tips**

##### **Inspect and Lubricate**

Inspect all cables and lubricate all areas of the vehicle as recommended in the Periodic Maintenance Chart beginning on page 67.

##### **Fog the Engine**

1. Treat the fuel system with Polaris Carbon Clean. Follow the instructions on the container. Start the engine. Allow it to idle for several minutes so the Carbon Clean reaches the injectors. Stop the engine.
2. Remove the spark plugs and add 2-3 tablespoons of Premium 4 Synthetic 0W40 engine oil. To access the plug holes, use a section of clear 1/4" hose and a small plastic squeeze bottle filled with the pre-measured amount of oil. *Do this carefully! If you miss the plug holes, oil will drain from the spark plug cavities into the hole at the front of the cylinder head, and appear to be an oil leak.*
3. Reinstall the spark plugs. Torque to specification. See page 86.
4. Apply dielectric grease to the inside of each spark plug cap. *Do not reinstall the caps onto the plugs at this step.*
5. Turn the engine over several times. Oil will be forced in and around the piston rings and ring lands, coating the cylinder with a protective film of fresh oil.
6. If Polaris fuel system additive is not used, fuel tank, fuel lines, and injectors should be completely drained of gasoline.
7. Reinstall the spark plug caps to the spark plugs.

##### **Battery Maintenance**

See pages 111-113 for storage and charging procedures.

##### **Storage Area/Covers**

Be sure the storage area is well ventilated. Cover the vehicle with a genuine Polaris cover. Do not use plastic or coated materials. They do not allow enough ventilation to prevent condensation, and may promote corrosion and oxidation.

**MAINTENANCE****Cleaning and Storage****Removal from Storage**

1. Check the battery electrolyte level and charge the battery if necessary. Install it in the vehicle. Make sure the battery vent hose is routed properly and that it's not pinched or restricted in any way.
2. Make sure the spark plug is tight.
3. Fill the fuel tank with fuel.
4. Check all the points listed in the Daily Pre-Ride Inspection section on page 50. Tightness of the bolts, nuts and other fasteners should be checked by an authorized Polaris dealer.
5. Lubricate at the intervals outlined in the Periodic Maintenance Chart beginning on page 67.

**▲ WARNING**

Engine exhaust contains poisonous carbon monoxide and can cause loss of consciousness or death. Never run an engine in an enclosed area.

**Transporting the Vehicle**

Follow these procedures when transporting the vehicle.

1. Place the transmission in PARK. Stop the engine.
2. Remove the key to prevent loss during transporting.
3. Secure the fuel cap and seats.
4. Always tie the frame of the Polaris vehicle to the transporting unit securely with suitable straps or rope. Do not attach tie straps to the front control arm bolt pockets.

**SPECIFICATIONS**

<b>RANGER RZR / RZR S</b>	
Gross Vehicle Weight	1727 lbs. (783 kg) (RZR) 1782 lbs. (808 kg) (RZR S)
Dry Weight	945 lbs. (429 kg) (RZR) 1000 lbs. (454 kg) (RZR S)
Rear Cargo Box Capacity	300 lbs. (136 kg)
Maximum Weight Capacity (Payload)	740 lbs. (336.4 kg) (riders cargo accessories trailer tongue weight)
Receiver Hitch Tongue Capacity	150 lbs. (68 kg)
Receiver Hitch Towing Capacity	1500 lbs. (680 kg)
Fuel Capacity	7 gal. (26.5 l)
Engine Oil Capacity	2 qts. (1.9 l)
Coolant Capacity	4.8 qts. (4.5 l)
Rear Gearcase Oil Capacity	26 oz. (769 ml)
Demand Drive Fluid Capacity	6.75 oz. (200 ml)
Transmission Oil Capacity	24 oz. (710 ml)
Transfer Case Oil Capacity	14 oz. (414 ml)
Overall Length Width Height	102 50 68.5 in. (259 127 174 cm) (RZR) 106 60.5 70.5 in. (269 154 179 cm) (RZR S)
Wheelbase	77 in. (196 cm)
Ground Clearance	10 in. (25.4 cm) (RZR) 12 in. (30.5 cm) (RZR S)
Engine	4 valve 4 stroke twin cylinder with counterbalance
Displacement	760 cc
Bore x Stroke	80mm x 76mm
Alternator Output	500 W @ 3000 RPM
Compression Ratio	10:1
Starting System	Electric
Fuel System	Electronic fuel injection
Ignition System	ECU
Spark Plug Gap	RC7YC .035 in. (0.9 mm)
Front Suspension	Independent double a-arm with travel: 9 in. (23 cm) (RZR) 12 in. (30.5 cm) (RZR S)
Rear Suspension	Independent double a-arm with travel: 9.5 in. (24 cm) (RZR) 12 in. (30.5 cm) (RZR S)

**SPECIFICATIONS**

<b>RANGER RZR / RZR S</b>	
Lubrication System	Wet Sump
Engine Oil	0W 40
Driving System Type	Automatic Polaris Variable Transmission
Shift Type	Dual Range P R N L H
Gear Reduction - Low	8.71:1
Gear Reduction - Reverse	5.94:1
Gear Reduction - High	3.14:1
Drive Ratio - Front	3.82:1
Drive Ratio - Final	3.70:1
Tire Size - Front	25x8-12 (RZR) 26x9-12 (RZR S)
Tire Size - Rear	25x10-12 (RZR) 26x12-12 (RZR S)
Tire Pressure - Front	8 psi (55 KPa)
Tire Pressure - Rear	8 psi (55 KPa)
Brakes, Front Rear	Foot Activated, 4-wheel hydraulic disc
Headlights	2 single beam, 55W, quartz halogen
Taillights	2 single beam, 5W
Brake Lights	2 single beam, 5W
Instrument Cluster	LCD
Auxiliary DC Outlet	12V

**Clutching**

See your Polaris dealer for clutching specifications.

**POLARIS PRODUCTS**

<b>Part Number</b>	<b>Description</b>
<b>Engine Lubricant</b>	
2870791	Fogging Oil (12 oz. Aerosol)
2871281	Premium 4 Synthetic 0W-40 (4-Cycle) Engine Oil (qt.)
2871844	Premium 4 Synthetic 0W-40 (4-Cycle) Engine Oil (gal.)
<b>Gearcase / Transmission Lubricants</b>	
2873602	Premium AGL Synthetic Gearcase Lubricant (qt.)
2873603	Premium AGL Synthetic Gearcase Lube (gal.)
2871653	Premium ATV Angle Drive Fluid (8 oz.)
2872276	Premium ATV Angle Drive Fluid (2.5 gal.)
2870465	Pump for Gallon Jug
2876251	Demand Drive LT Premium Fluid (8 oz./237 ml)
<b>Coolant</b>	
2871323	60/40 Coolant (gal.)
2871534	60/40 Coolant (qt.)
<b>Grease / Specialized Lubricants</b>	
2871312	Grease Gun Kit, Premium All Season (3 oz.)
2871322	Premium All Season Grease (3 oz. cartridge)
2871423	Premium All Season Grease (14 oz. cartridge)
2871460	Starter Drive Grease (2 oz.)
2871515	Premium U-Joint Lube (3 oz.)
2871551	Premium U-Joint Lube (14 oz.)
2871329	Dielectric Grease (Nyogel™)
<b>Additives / Miscellaneous</b>	
2871326	Carbon Clean Plus (12 oz.)
2870652	Fuel Stabilizer (16 oz.)
2872189	DOT 4 Brake Fluid
2871956	Loctite™ 565 Thread Sealant
2859044	Polaris Battery Tender™ Charger

**TROUBLESHOOTING****Drive Belt Wear/Burn**

<b>Possible Cause</b>	<b>Solution</b>
Driving onto a pickup or tall trailer in high range	Use low range during loading.
Starting out going up a steep incline	Use low range. See warnings on page 58.
Driving at low RPM or ground speed (3-7 MPH)	Drive at a higher speed or use low range more frequently. See page 38.
Insufficient warm-up at low ambient temperatures	Warm the engine at least 5 minutes. With the transmission in neutral, advance the throttle to about 1/8 throttle in short bursts, 5 to 7 times. The belt will become more flexible and prevent belt burning.
Slow easy clutch engagement	Use the throttle quickly and effectively.
Towing pushing at low RPM low ground speed	Use low range only.
Utility use plowing	Use low range only.
Stuck in mud or snow	Shift the transmission to low range and carefully use fast, aggressive throttle application to engage clutch. <b>WARNING:</b> Excessive throttle may cause loss of control and vehicle overturn.
Climbing over large objects from a stopped position	Shift the transmission to low range and carefully use fast, brief, aggressive throttle application to engage clutch. <b>WARNING:</b> Excessive throttle may cause loss of control and vehicle overturn.
Belt slippage from water or snow ingestion into the PVT system	Dry out the PVT (see page 92). Prevent water from entering the PVT outlet duct (see page 114). Inspect clutch seals for damage if repeated leaking occurs.
Clutch malfunction	See your Polaris dealer.
Poor engine performance	Check for fouled plugs or foreign material in gas tank or fuel lines. See your dealer.
Slippage from failure to warm up belt	Always warm up the belt by operating below 30 mph for one mile (5 miles or more when temperature is below freezing).
Wrong or missing belt	Install the recommended belt.
Improper break-in	Always break in a new belt and or clutch. See pages 48 and 38.

**TROUBLESHOOTING****Engine Doesn't Turn Over**

Possible Cause	Solution
Low battery voltage	Recharge the battery to 12.8 VDC
Loose battery connections	Check all connections and tighten
Loose solenoid connections	Check all connections and tighten
Loose electronic control box connections	Inspect, clean, reinstall connectors

**Engine Turns Over, Fails to Start**

Possible Cause	Solution
Out of fuel	Refuel
Clogged fuel filter	See your Polaris dealer
Water is present in fuel	Drain the fuel system and refuel
Old or non-recommended fuel	Replace with fresh recommended fuel
Fouled or defective spark plugs	Inspect plugs and replace if necessary
No spark to spark plug	Inspect plugs and replace if necessary
Water or fuel in crankcase	Immediately see your Polaris dealer
Low battery voltage	Recharge the battery to 12.8 VDC
Mechanical failure	See your dealer

**Engine Backfires**

Possible Cause	Solution
Weak spark from spark plug	Inspect, clean and or replace spark plugs
Incorrect spark plug gap or heat range	Set gap to specs or replace plugs
Old or non-recommended fuel	Replace with fresh recommended fuel
Incorrectly installed spark plug wires	See your dealer
Incorrect ignition timing	See your dealer
Mechanical failure	See your dealer
Loose ignition connections	Check all connections and tighten
Water present in fuel	Replace with fresh recommended fuel

**TROUBLESHOOTING****Engine Pings or Knocks**

Possible Cause	Solution
Poor quality or low octane fuel	Replace with recommended fuel
Incorrect ignition timing	See your dealer
Incorrect spark plug gap or heat range	Set gap to specs or replace plugs

**Engine Runs Irregularly, Stalls or Misfires**

Possible Cause	Solution
Fouled or defective spark plugs	Inspect, clean and or replace spark plugs
Worn or defective spark plug wires	See your dealer
Incorrect spark plug gap or heat range	Set gap to specs or replace plugs
Loose ignition connections	Check all connections and tighten
Water present in fuel	Replace with new fuel
Low battery voltage	Recharge battery to 12.8 VDC
Kinked or plugged fuel tank vent line	Inspect and replace
Incorrect fuel	Replace with recommended fuel
Clogged air filter	Inspect and clean or replace
Other mechanical failure	See your dealer
Possible Lean Fuel Cause	Solution
Low or contaminated fuel	Add or change fuel, clean the fuel system
Low octane fuel	Replace with recommended fuel
Clogged fuel filter	See your Polaris dealer
Possible Rich Fuel Cause	Solution
Fuel is very high octane	Replace with lower octane fuel

## TROUBLESHOOTING

### Engine Stops or Loses Power

Possible Cause	Solution
Out of fuel	Refuel
Kinked or plugged fuel vent line	Inspect and replace
Water is present in fuel	Replace with new fuel
Fouled or defective spark plugs	Inspect, clean and or replace spark plug
Worn or defective spark plug wires	See your dealer
Incorrect spark plug gap or heat range	Set gap to specs or replace plug
Loose ignition connections	Check all connections and tighten
Low battery voltage	Recharge the battery to 12.8 VDC
Incorrect fuel	Replace with fresh recommended fuel
Clogged air filter	Inspect and clean or replace
Other mechanical failure	See your dealer
Overheated engine	Clean radiator screen and core, clean engine exterior, see your dealer

## **WARRANTY**

### **LIMITED WARRANTY**

Polaris Sales Inc., 2100 Highway 55, Medina, MN 55340, gives a SIX MONTH LIMITED WARRANTY on all components of your Polaris vehicle against defects in material or workmanship. This warranty covers the parts and labor charges for repair or replacement of defective parts which are covered by this warranty. This warranty begins on the date of purchase. This warranty is transferable to another consumer during the warranty period through a Polaris dealer.

### **REGISTRATION**

At the time of sale, the Warranty Registration Form must be completed by your dealer and submitted to Polaris within ten days. Upon receipt of this registration, Polaris will record the registration for warranty. No verification of registration will be sent to the purchaser as the copy of the Warranty Registration Form will be the warranty entitlement. If you have not signed the original registration and received the customer copy, please contact your dealer immediately. **NO WARRANTY COVERAGE WILL BE ALLOWED UNLESS YOUR VEHICLE IS REGISTERED WITH POLARIS.**

Initial dealer preparation and set-up of your vehicle is very important in ensuring trouble-free operation. Purchasing a machine in the crate or without proper dealer set-up will void your warranty coverage.

### **WARRANTY COVERAGE AND EXCLUSIONS: LIMITATIONS OF WARRANTIES AND REMEDIES**

The Polaris limited warranty excludes any failures that are not caused by a defect in material or workmanship. This warranty does not cover accidental damage, normal wear and tear, abuse or improper handling. This warranty also does not cover any vehicle that has been altered structurally, modified, neglected, improperly maintained, used for racing, or used for purposes other than for which it was manufactured, or for any damages which occur during trailer transit or as a result of unauthorized service or the use of unauthorized parts. In addition, this warranty does not cover physical damage to paint or finish, stress cracks, tearing or puncturing of upholstery material, corrosion, or defects in parts, components or the vehicle due to fire, explosions or any other cause beyond Polaris' control.

This warranty does not cover the use of unauthorized lubricants, chemicals, or fuels that are not compatible with the vehicle. The exclusive remedy for breach of this warranty shall be, at Polaris' exclusive option, repair or replacement of any defective materials, or components or products. **THE REMEDIES SET FORTH IN THIS WARRANTY ARE THE ONLY REMEDIES AVAILABLE TO ANY PERSON FOR BREACH OF THIS WARRANTY. POLARIS SHALL HAVE NO LIABILITY TO ANY PERSON FOR INCIDENTAL, CONSEQUENTIAL, OR SPECIAL DAMAGES OF ANY DESCRIPTION, WHETHER ARISING OUT OF EXPRESS OR IMPLIED WARRANTY OR ANY OTHER CONTRACT, NEGLIGENCE, OR OTHER TORT OR OTHERWISE.** Some states do not permit the exclusion or limitation of incidental or consequential damages or implied warranties, so the above limitations or exclusions may not apply to you if inconsistent with controlling state law.

## **WARRANTY**

### **LIMITATIONS OF WARRANTIES AND REMEDIES**

ALL IMPLIED WARRANTIES (INCLUDING BUT NOT LIMITED TO THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE) ARE LIMITED IN DURATION TO THE ABOVE SIX MONTH WARRANTY PERIOD. POLARIS FURTHER DISCLAIMS ALL EXPRESS WARRANTIES NOT STATED IN THIS WARRANTY. Some states do not allow limitations on how long an implied warranty lasts, so the above limitation may not apply to you if inconsistent with controlling state law.

### **HOW TO OBTAIN WARRANTY SERVICE**

If your vehicle requires warranty service, you must take it to a Polaris Servicing Dealer. When requesting warranty service you must present your copy of the Warranty Registration form to the dealer. (THE COST OF TRANSPORTATION TO AND FROM THE DEALER IS YOUR RESPONSIBILITY). Polaris suggests that you use your original selling dealer; however, you may use any Polaris Servicing Dealer to perform warranty service.

Please work with your dealer to resolve any warranty issues. Should your dealer require any additional assistance they will contact the appropriate person at Polaris.

This warranty gives you specific legal rights, and you may also have other rights which vary from state to state.

If any of the above terms are void because of state or federal law, all other warranty terms will remain in effect.

### **Lubricants**

1. Mixing oil brands or using non-recommended oil may cause engine damage. We recommend the use of Polaris engine oil.
2. Damage resulting from the use of non-recommended lubricants may not be covered by warranty.

### **SPARK ARRESTOR**

Polaris warrants that the spark arrestor in this vehicle will meet the efficiency requirements of 43 CFR 8343.1(c) for at least 1000 hours when subjected to normal use and when maintenance and installation are in accordance with Polaris recommendations.

## WARRANTY

### Exported Vehicles

EXCEPT WHERE SPECIFICALLY REQUIRED BY LAW, THERE IS NO WARRANTY OR SERVICE BULLETIN COVERAGE ON THIS VEHICLE IF IT IS SOLD OUTSIDE THE COUNTRY OF THE SELLING DEALER'S AUTHORIZED LOCATION.

This policy does not apply to vehicles that have received authorization for export from Polaris Industries. Dealers may not give authorization for export. You should consult an authorized dealer to determine this vehicle's warranty or service bulletin coverage if you have any questions.

This policy does not apply to vehicles registered to government officials or military personnel on assignment outside the country of the selling dealer's authorized location.

This policy does not apply to Safety Recalls.

### How to Get Service

*In the Country where your vehicle was purchased:*

Warranty or Service Bulletin repairs must be done by an authorized Polaris dealer. If you move or are traveling within the country where your vehicle was purchased, Warranty or Service Bulletin repairs may be requested from any authorized Polaris dealer who sells the same line as your vehicle.

*Outside the Country where your vehicle was purchased:*

If you are traveling temporarily outside the country where your vehicle was purchased, you should take your vehicle to an authorized Polaris dealer. You must show the dealer photo identification from the country of the selling dealer's authorized location as proof of residence. Upon residence verification, the servicing dealer will be authorized to perform the warranty repair.

*If You Move:*

If you move to another country, be sure to contact Polaris Customer Assistance and the customs department of the destination country before you move. Vehicles importation rules vary considerably from country to country. You may be required to present documentation of your move to Polaris Industries in order to continue your warranty coverage. You may also be required to obtain documentation from Polaris Industries in order to register your vehicle in your new country.

*If Purchased From A Private Party:*

If you purchase a Polaris product from a private citizen outside of the country in which the vehicle was originally purchased, all warranty coverage will be denied.

### Notice

If your vehicle is registered outside of the country where it was purchased, and you have not followed the procedure set out above, your vehicle will no longer be eligible for warranty or service bulletin coverage of any kind. (Vehicles registered to Government officials or military personnel on assignment outside of the country where the vehicle was purchased will continue to be covered by the basic warranty.)

*For questions call Polaris Customer Assistance:*

United States: 1-888-704-5290

Canada: 1-204-925-7100

## **WARRANTY**

### **U.S.A. EPA Emissions Limited Warranty**

This All Terrain Vehicle (ATV) or Off Road Utility Vehicle (ORUV) emissions limited warranty is in addition to the Polaris standard limited warranty for this vehicle.

Polaris warrants that this vehicle is: (1) designed, built, and equipped to conform at the time of initial sale with the requirements of 40 CFR 1051 and, (2) free from defects in materials and workmanship that may keep it from meeting these requirements.

The emissions warranty period for this vehicle begins on the date the vehicle is delivered to the original retail purchaser and ends 30 months (2.5 years) after that date, or after 5000 km (3100 miles), or after 500 hours of operation, whichever comes first.

This emission-related warranty covers components whose failure would increase an engine's emissions, including electronic controls, fuel injection, exhaust-gas recirculation, aftertreatment, or any other system utilized in this vehicle to control emissions. Replacing or repairing other components not covered by this emissions warranty or the standard warranty is the responsibility of the owner, including the parts, labor and other costs associated with recommended maintenance.

The exclusive remedy for breach of this limited warranty shall be, at the exclusive option of Polaris, repair or replacement of any defective materials, components or products. THE REMEDIES SET FORTH IN THIS LIMITED WARRANTY ARE THE ONLY REMEDIES AVAILABLE TO ANY PERSON FOR BREACH OF THIS WARRANTY. POLARIS SHALL HAVE NO LIABILITY TO ANY PERSON FOR INCIDENTAL, CONSEQUENTIAL OR SPECIAL DAMAGES OF ANY DESCRIPTION, WHETHER ARISING OUT OF EXPRESS OR IMPLIED WARRANTY OR ANY OTHER CONTRACT, NEGLIGENCE OR OTHER TORT OR OTHERWISE.

ALL IMPLIED WARRANTIES (INCLUDING BUT NOT LIMITED TO ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE) ARE LIMITED IN DURATION TO THE WARRANTY PERIOD DESCRIBED HEREIN. POLARIS DISCLAIMS ALL EXPRESS WARRANTIES NOT STATED IN THIS WARRANTY. Some states do not allow limitations on how long an implied warranty lasts, so the above limitation may not apply if it is inconsistent with the controlling state law.

This limited warranty excludes failures not caused by a defect in material or workmanship. This limited warranty does not cover damage due to accidents, abuse or improper handling, maintenance or use. This limited warranty also does not cover any engine that has been structurally altered, or any engine that has been used in racing competition. This limited warranty also does not cover physical damage, corrosion or defects caused by fire, explosions or other similar causes beyond the control of Polaris.

If you have any questions regarding your warranty rights and responsibilities, you should contact the Polaris Warranty Department at 1-888-704-5290.







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Contacts:

- 1: (b)(6) Victim (Contacted 09-11-09)  
South  
55
- 2: Zach Barnes – Deputy Sheriff (Contacted 09-29-09)  
Sanpete County Sheriff's Office Utah  
PO Box 130  
Manti, UT 84642  
(435) 835-2191
- 3: (b)(6) Agent (Contacted 09-09-09)

**Task No.** 090828CCC3933 \_\_\_\_\_

**Date:** 10-12-09 \_\_\_\_\_

### STATUS OF MISSING DOCUMENT (S)

**The official records were requested for this investigation report but could not be obtained.**

- 1. Accident scene photos \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

**Date:** 10-12-09 \_\_\_\_\_

**Investigator No:** 2259 \_\_\_\_\_

**Regional office:** CFIE \_\_\_\_\_

**Supervisor No:** 8978 \_\_\_\_\_

## Blackman, Bruce

---

**From:** Blackman, Bruce  
**Sent:** Tuesday, October 06, 2009 1:58 PM  
**To:** 'barnesz@sanpeteso.org'  
**Subject:** photos for ATV crash 09060160

Hi Zach:

Just a follow up reminder on photos for that side by side crash. Your case number 09060160. Just need anything that identifies the machine and a broad overview of crash scene if you get a chance.

Thank you,

Bruce Blackman  
Investigator  
US Consumer Product Safety Commission  
Salt Lake City Field Office  
PO Box 1421  
Orem, UT 84059  
(801) 607-2036

48

48

AUG 27 2009

X098 0651 A

# Deseret News

## Dad saves son from ATV accident, police say

Published: Tuesday, June 9, 2009 11:56 a.m. MDT

MAYFIELD, Sanpete County — A Sanpete County man remained hospitalized Tuesday with injuries he suffered in a weekend ATV accident.

(b)(3):CPSA S and his 4-year-old son were riding a Polaris Razor Saturday down the Pinchoit trail, located up Twelve Mile Canyon, according to a press release. (b)(6) said somehow the machine went over the edge of the trail. While it was teetering on the edge, (b)(6) unbuckled his 4-year-old son and pushed him out of the machine. It then rolled 125 yards down the hill into a river with (b)(6) on it.

The boy suffered no major injuries.

Search and Rescue workers were able to rescue (b)(6) and take him to the hospital by helicopter. Police said (b)(6) suffered from hypothermia and head, neck and leg injuries, but his wife said he is doing well and walking in the hospital.

— Cimaron Neugebauer

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UTAH

PRODUCT = 5044

POLARIS RAZOR

6/6/2009

1. Task Number 090828CCC3934		2. Investigator's ID 9069		<b>EPIDEMIOLOGIC INVESTIGATION REPORT</b>
3. Office Code 840	4. Date of Accident YR MO DAY 2009 04 26	5. Date Initiated YR MO DAY 2009 09 10		
6. Synopsis of Accident or Complaint UPC A 22-year-old male driving a four-wheeled, Polaris 799 Recreational Utility Vehicle with two passengers, overturned while driving up a steep dirt hill. The driver and the passenger next to him remained secured in the vehicle and were not injured. The victim, a 10-year-old male, was not wearing a lap/shoulder harness and was ejected. He was taken to a hospital where he died from head injuries. None of the occupants wore helmets.				
MFR/PRVLBR NOTIFIED COMMENTS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> OVERRULED; <input type="checkbox"/> ATTACHED <input checked="" type="checkbox"/> EXCISIONS/FOIA EXS. 3, 296, 6 <input checked="" type="checkbox"/> DO NOT RE-NOTIFY <input type="checkbox"/> RE-NOTIFY <i>JF 3/24/10</i>				
7. Location (Home, School, etc) 1 - HOME		8. City UNINCORP. RIVERSIDE CO		9. State CA
10A. First Product 5044 - Utility Vehicles		10B. Trade/Brand Name POLARIS		10C. Model Number 799
10D. Manufacturer Name and Address POLARIS INDUSTRIES INC. 2100 Highway 55 Medina, MN 55340-9770				
11A. Second Product 0		11B. Trade/Brand Name NONE		11C. Model Number NONE
11D. Manufacturer Name and Address NONE				
12. Age of Victim 10	13. Sex 1 - Male	14. Disposition 8 - Death	15. Injury Diagnosis 62 - Intern. Org. Inj.	
16. Body Part(s) Involved 75 - HEAD	17. Respondent 3 - 2nd Hand Info Only	18. Type of Investigation 2 - Telephone	19. Time Spent (Operational / Travel) 12 / 0	
20. Attachment(s) 9 - Multiple Attachments		21. Case Source 05 - Newspaper		22. Sample Collection Number
23. Permission to Disclose Name (Non NEISS Cases Only) <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Verbal <input type="radio"/> Yes for Manuf. Only				
24. Review Date 10/06/2009	25. Reviewed By 9035		26. Regional Office Director Frank J. Nava	
27. Distribution Garland, Sarah; Topka, Tanya			28. Source Document Number X0980653A	

## 090828CCC3934

This activity was follow-up to a New Clip Search (Source Document #X0980653A). Local coroner and law enforcement agencies with jurisdiction of the incident provided all of the information contained in this report.

This incident involved a driver, and two passengers riding in a four-wheeled Recreational Utility Vehicle (UTV). The UTV was being used recreationally on private property in an unincorporated area of Riverside County within the jurisdiction of Riverside, CA. The incident occurred on a 10 acre property, which was very rugged and consisted of numerous hills and valleys with shrubbery. The weather conditions were clear and dry. None of the riders were wearing helmets prior to the incident.

According to the official records, the following parties were identified as being riders on the incident vehicle at the time of the incident.

Victim 1 (passenger, deceased), a 10-year-old male, (height and weight not reported), was not restrained in the right front seat with a lap/shoulder harness. Victim 1 was ejected from the vehicle during the incident.

Victim 2 (driver, not injured), a 22-year-old male, 5' 10" in height and 208 pounds, was restrained in the vehicle by a lap/shoulder harness. Victim 2 was very familiar with the terrain on the property and had driven on the property many times during the day and night. While the hill he was ascending was steep, he had driven up it numerous times and had never crashed on it. The driver had been driving the vehicle about 10-15 minutes before the incident.

Victim 3 (passenger, not injured), a 21-year-old female, (height and weight unknown), was restrained in the middle front seat with a lap/shoulder harness. Victim 3 was not at the scene when law enforcement arrived and was never contacted.

On April 26, 2009, at about 9:00 p.m., Victim 2 was operating a four-wheeled UTV along with two passengers sitting in the front seat. Victim 2 was driving the vehicle at about 5 miles per hour climbing up a steep dirt hill, when he failed to maintain control of the vehicle. Near the crest of the hill, the vehicle lost traction in the dirt, causing the front end of the vehicle to rise up and tip backwards to the right. At that time, Victim 1 was ejected onto the dirt ground, whereupon the vehicle may have rolled back onto him. The vehicle continued rolling backwards down the hill, about two to three times, before coming to rest on its wheels at the bottom of the hill.

Victim 2 and Victim 3 remained secured in the vehicle, by the lap/shoulder harness, when it came to rest at the bottom of the hill. Victim 2 saw Victim 3 was still sitting next to him, but he did not observe Victim 1 anymore. Victim 2 then saw Victim 1 lying face down on the ground at the top of the hill.

Family members transported Victim 1 down the hill and called 9-1-1.

**090828CCC3934**

Emergency personnel arrived and transported Victim 1, who was in full arrest, to a local emergency room where he was pronounced dead.

Victim 1's cause of death was listed as blunt force head trauma as a result of the incident.

According to the official records, the UTV sustained a flat left rear tire from the incident. The condition of the brakes and suspension system were not addressed. No prior damage or defects were noted. It is unknown if the UTV had any aftermarket modifications.

The law enforcement investigation determined that Victim 2 caused the incident by improper driving. They also found no signs of alcohol or drug use by any of the parties involved.

No further information was available.

### **PRODUCT IDENTIFICATION**

The incident product is a Recreational Utility Vehicle - 2007 Polaris 799, Camouflaged. The vehicle identification number is 4XARH68A57D044098. The vehicle was not further identified.

Manufacturer: Polaris Industries Inc.  
2100 Highway 55  
Medina, MN 55340-9770  
763-542-0500

### **EXHIBITS:**

1. California Highway Patrol Traffic Collision Report, pages 8
2. Coroner's Investigation Report, pages 4
3. Status of Missing Documents, pages 1
4. Report Identifiers, pages 2

09/11/2009 09:15 9516378003

R CHP

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STATE OF CALIFORNIA  
TRAFFIC COLLISION REPORT  
CHP 555 CARS PAGE 1 (REV 11-05) OPI 085

**FILE**

PAGE 1 OF 8

SPECIAL CONDITIONS FATAL PRIVATE PROPERTY		NUMBER INJURED 0	HTA AIR DELIVERY <input type="checkbox"/>	CITY UNINCORPORATED	JUDICIAL DISTRICT RIVERSIDE SUPERIOR COURT		LOCAL REPORT NUMBER 2009040487				
COLLISION OCCURRED ON: 27050 VISTA SUELTO ROAD		REPORTING DISTRICT 9840	BEAT 002	DAY OF WEEK SUNDAY	TOW AWAY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
MILEPOST INFORMATION		GPS COORDINATES LATITUDE 33.5758°		LONGITUDE -117.1130°		PHOTOGRAPHS BY: <input checked="" type="checkbox"/> NONE					
AT INTERSECTION WITH: <input checked="" type="checkbox"/> OR: 300 FEET NORTH OF RECHE CANYON ROAD		STATE HWY REL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		MO DAY YEAR TIME (2400) 04/26/2009 2100		NCIC # 9840	OFFICER I.D. 016285				
LOCATION	DRIVER'S LICENSE NUMBER I (b)(6)		STATE CA	CLASS C	AIR BAG P	SAFETY EQUIP. G	VEH. YEAR 2007	MAKE / MODEL / COLOR POLARIS 799 CAM	LICENSE NUMBER	STATE	
DRIVER	NAME (FIRST, MIDDLE, LAST) (b)(6)		OWNER'S NAME (b)(6)		SAME AS DRIVER <input type="checkbox"/>						
PEDESTRIAN	<input type="checkbox"/>		CITY / STATE / ZIP RIALTO CA 92377		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			DRIVEN AWAY			
PARKED VEHICLE	SEX M	HAIR BRN	EYES BRN	HEIGHT 5-10	WEIGHT 208	MO BIRTHDATE DAY YEAR RACE 07/21/1986 H	PRIOR MECH. DEFECTS <input checked="" type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER: (b)(6)		
OTHER	HOME PHONE (909)644-2653		BUSINESS PHONE (909)820-2419		VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE LINK NONE MINOR MAJOR ROLL-OVER		SHADE IN DAMAGED AREA SEX (REV - RGT)		
INSURANCE CARRIER	POLICY NUMBER		DIR OF TRAVEL ON STREET OR HIGHWAY N 27050 VISTA SUELTO		SPEED LIMIT N/A		CA DOT		CAL-T TOP/PSC MCMX		
PARTY 2	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
DRIVER	NAME (FIRST, MIDDLE, LAST)		OWNER'S NAME		SAME AS DRIVER <input type="checkbox"/>						
PEDESTRIAN	<input type="checkbox"/>		STREET ADDRESS		OWNER'S ADDRESS		SAME AS DRIVER <input type="checkbox"/>				
PARKED VEHICLE	CITY / STATE / ZIP		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER								
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO BIRTHDATE DAY YEAR RACE	PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER:		
OTHER	HOME PHONE		BUSINESS PHONE		VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE LINK NONE MINOR MAJOR ROLL-OVER		SHADE IN DAMAGED AREA		
INSURANCE CARRIER	POLICY NUMBER		DIR OF TRAVEL ON STREET OR HIGHWAY		SPEED LIMIT		CA DOT		CAL-T TOP/PSC MCMX		
PARTY 3	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
DRIVER	NAME (FIRST, MIDDLE, LAST)		OWNER'S NAME		SAME AS DRIVER <input type="checkbox"/>						
PEDESTRIAN	<input type="checkbox"/>		STREET ADDRESS		OWNER'S ADDRESS		SAME AS DRIVER <input type="checkbox"/>				
PARKED VEHICLE	CITY / STATE / ZIP		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER								
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO BIRTHDATE DAY YEAR RACE	PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER:		
OTHER	HOME PHONE		BUSINESS PHONE		VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE LINK NONE MINOR MAJOR ROLL-OVER		SHADE IN DAMAGED AREA		
INSURANCE CARRIER	POLICY NUMBER		DIR OF TRAVEL ON STREET OR HIGHWAY		SPEED LIMIT		CA DOT		CAL-T TOP/PSC MCMX		
PREPARER'S NAME CIAID A YAGER 016285	DISPATCH NOTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		REVIEWER'S NAME C. MARTINEZ 13394		DATE REVISIED 8-28-09						

09/11/2009 1:22PM (GMT-04:00)

09/11/2009 09:15 9516378003

R CHP

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STATE OF CALIFORNIA TRAFFIC COLLISION CODING

PAGE 2 OF 8

DATE OF COLLISION (MO. DAY YEAR) 04/26/2009 TIME 2100 NCIC # 9840 OFFICER I.D. 016285 NUMBER 2002040487

PROPERTY DAMAGE OWNER DESCRIPTION OF DAMAGE OWNER ADDRESS NOTIFIED YES NO

SEATING POSITION OCCUPANTS SAFETY EQUIPMENT INATTENTION CODES

ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (\*) SHOULD BE EXPLAINED IN THE NARRATIVE.

PRIMARY COLLISION FACTOR LIST NUMBER (S) OF PARTY AT FAULT TRAFFIC CONTROL DEVICES SPECIAL INFORMATION MOVEMENT PRECEDING COLLISION

SKETCH SEE PAGE 3 INDICATE NORTH MISCELLANEOUS

09/11/2009 09:15 9516378003

R CHP

PAGE 08/13

STATE OF CALIFORNIA  
INJURED / WITNESSES / PASSENGERS  
CHP 555 CARS PAGE 3 (REV 11-06) OPI 005

PAGE 3 OF 8

DATE OF COLLISION (MO. DAY YEAR) 04/26/2009				TIME(2400) 2100		NCIC # 9840		OFFICER I.D. 016285				NUMBER 2009040487						
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY('X' ONE)				INJURED WAS ('X' ONE)					PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED	
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER						
<input type="checkbox"/>	<input type="checkbox"/>	10	M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	3	P	H	I								
NAME / D.O.B. / ADDRESS (b)(3):CPSA Section 25(c) _____ TELEPHONE (b)(6)																		
(INJURED ONLY) TRANSPORTED BY: AMR TAKEN TO: RIVERSIDE COUNTY REGIONAL MEDICAL CENTER																		
DESCRIBE INJURIES: MAJOR HEAD TRAUMA. PRONOUNCED DECEASED BY DR. SUSAN MUNDEN AT 2141 HOURS. CORONER D. OARE: CASE 2009-03145.																		
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	21	F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	P	G	0
NAME / D.O.B. / ADDRESS (b)(6) _____ TELEPHONE (b)(6)																		
(INJURED ONLY) TRANSPORTED BY: TAKEN TO:																		
DESCRIBE INJURIES:																		
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	32	M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
NAME / D.O.B. / ADDRESS (b)(6) _____ TELEPHONE (b)(6)																		
(INJURED ONLY) TRANSPORTED BY: TAKEN TO:																		
DESCRIBE INJURIES:																		
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																		
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
NAME / D.O.B. / ADDRESS (b)(6) _____ TELEPHONE (b)(6)																		
(INJURED ONLY) TRANSPORTED BY: TAKEN TO:																		
DESCRIBE INJURIES:																		
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																		
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
NAME / D.O.B. / ADDRESS (b)(6) _____ TELEPHONE (b)(6)																		
(INJURED ONLY) TRANSPORTED BY: TAKEN TO:																		
DESCRIBE INJURIES:																		
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																		
PREPARER'S NAME: CHAD A YAGER I.D. NUMBER: 016285 MO. DAY YEAR: 04/26/2009 REVIEWER'S NAME: MO. DAY YEAR:																		

09/11/2009 09:15 9516378003

R CHP

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STATE OF CALIFORNIA  
CHP 555 Page 4 (Rev. 11-06) OPI 085

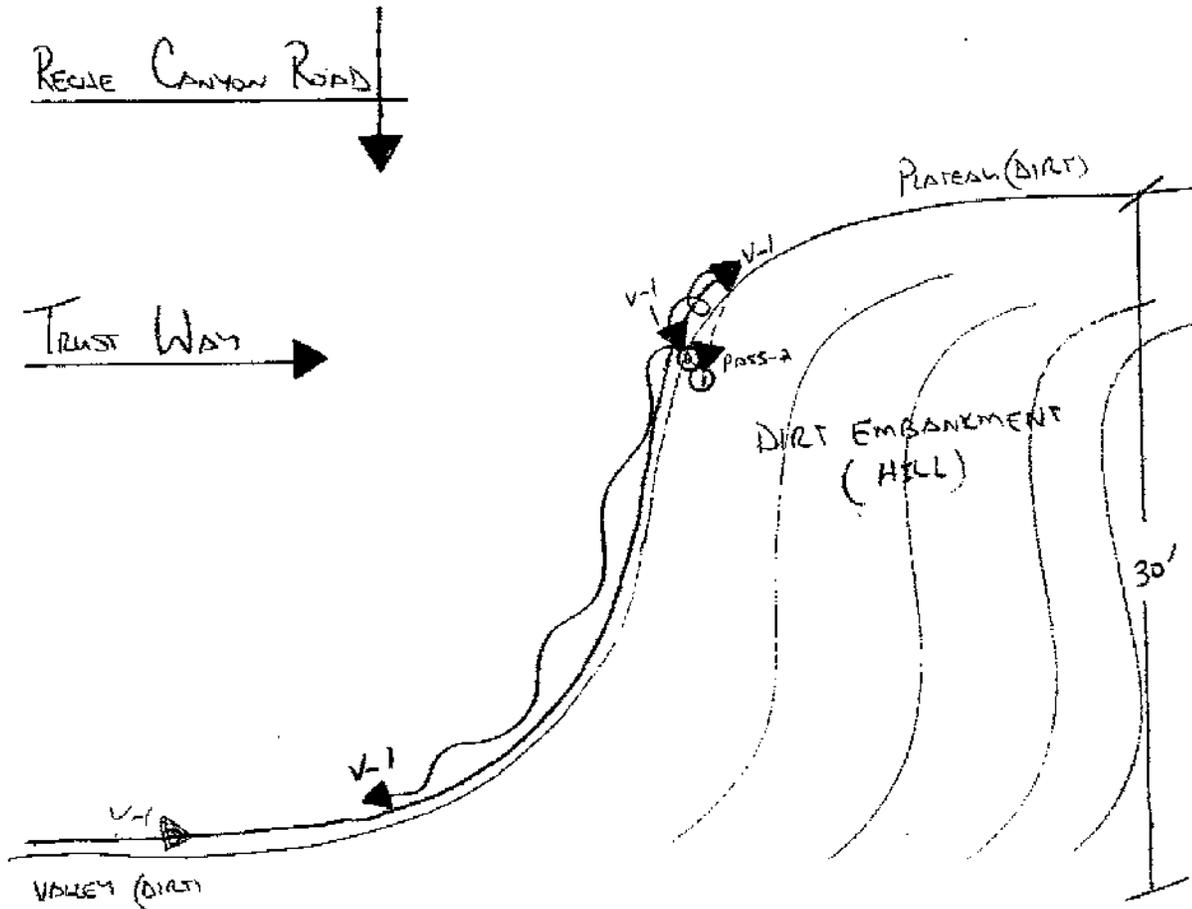
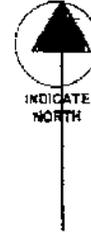
(SKETCH)

Page 4 of 8

DATE OF COLLISION (MO DAY YEAR)	TIME (2430)	NCIC #	OFFICER I.D.	NUMBER
04-26-09	2100	9840	16285	

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE = 1)

27050 VISTA SUELTO ROAD



\* V-1 WAS MOVED PRIOR TO CHP ARRIVAL - NO MEASUREMENTS

PREPARED BY	O. NUMBER	MO DAY YEAR	REVIEWER'S NAME	MO DAY YEAR
AGER	16285	04-26-09		

09/11/2009 1:22PM (GMT-04:00)

09/11/2009 09:15 9516378003

R CHP

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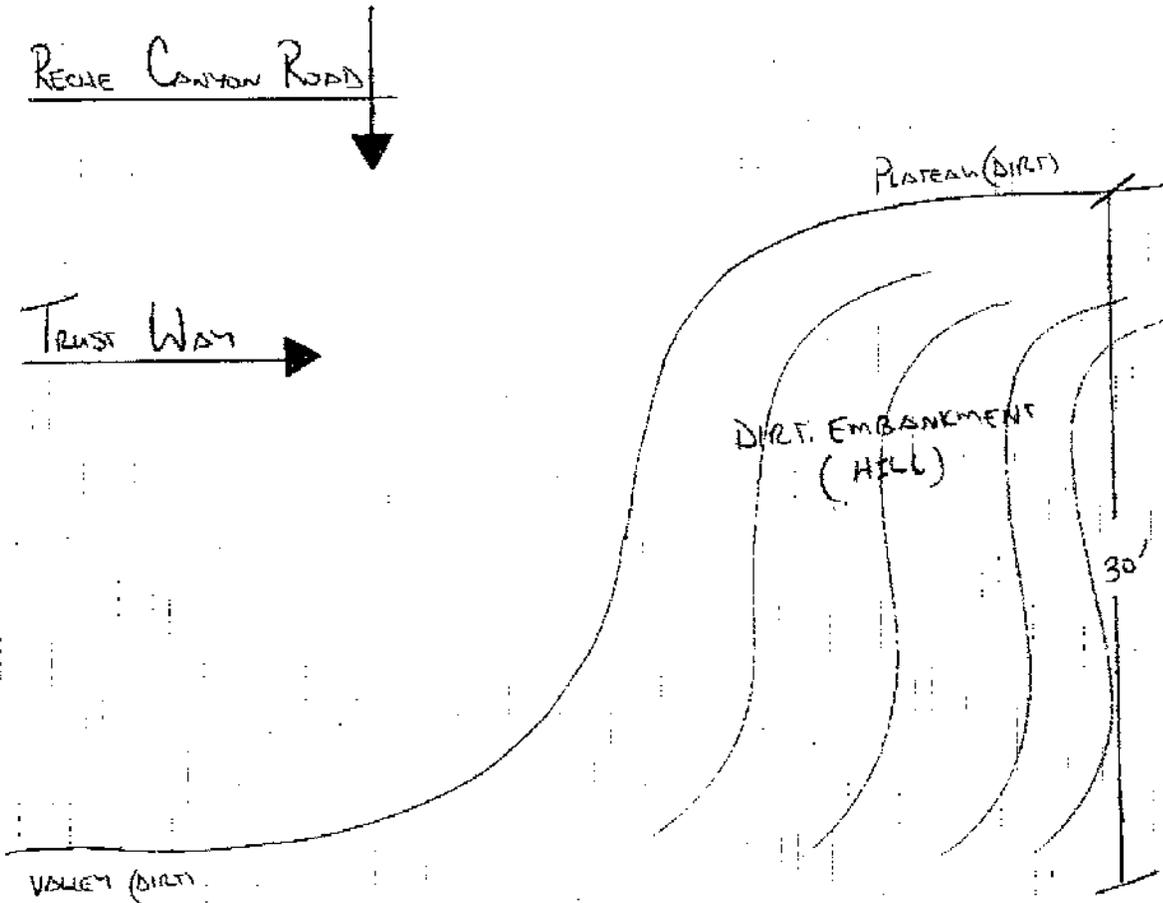
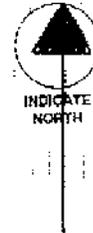
STATE OF CALIFORNIA  
FACTUAL DIAGRAM  
CHP 555 Page 4 (Rev. 11-06) OPI 065

Page 5 of 8

DATE OF COLLISION (MO. DAY YEAR)	TIME (2400)	NOIC #	OFFICER ID	NUMBER
04-26-09	2100	9840	16285	

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE =

27050 VISTA SUELO ROAD



\*V-1 WAS MOVED PRIOR TO CHP ARRIVAL - NO MEASUREMENTS

PREPARED BY	ID NUMBER	MO DAY YEAR	REVIEWER'S NAME	MO DAY YEAR
YAGER	16285	04-26-09		

STATE OF CALIFORNIA

**CHP 555/NARRATIVE**

PAGE 6

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
04-26-2009	2100	9840	16285

**FACTS:**

**NOTIFICATION**

At 2105 hours I was advised by CHP dispatch of a traffic collision with the fire department and an ambulance responding. While en route I was advised that the traffic collision occurred within a rugged area on private property and the injured party was now being brought down to Reche Canyon Road and Locust Avenue by one of the involved parties on a Polaris. I arrived at Reche Canyon Road and Locust Avenue at 2130 hours and learned that this was a fatal traffic collision involving a 10 year old boy riding as a passenger on a Polaris.

All times, speeds and measurements are approximations. All measurements were obtained by rollmeter.

**SCENE DESCRIPTION**

This traffic collision occurred within an address of 27050 Vista Suelto Road in an unincorporated area of Riverside County. There is a house located on the 10 acre property and the terrain is very rugged and consists of numerous hills and valleys with shrubbery.

For further details refer to the factual diagram.

**PARTIES**

Party #1 (b)(6) was located at Reche Canyon Road at Locust Avenue standing by V-1. P-1 was positively identified by a California driver's license. P-1 was identified as the driver of V-1 by his statement.

Vehicle #1 (Polaris) was located on Reche Canyon Road at Locust Avenue facing in an easterly direction. V-1 sustained a flat left rear tire during the collision.

No mechanical defects were noted or claimed to V-1.

Passenger #1 (b)(6) was not located on scene and was never contacted.

Passenger #2 (b)(3):CPS was located at the Riverside County Regional Medical Center's Trauma room in Moreno Valley already deceased.

PREPARER'S NAME	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
C. YAGER	16285	04/26/2009		

STATE OF CALIFORNIA

CHP 555/NARRATIVE

PAGE 7

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
04-26-2009	2100	9840	16285

PHYSICAL EVIDENCE

None

STATEMENTS:

Party #1 (b)(6) related he was driving V-1 with his two passengers, along a trail with two other off road vehicles. P-1 stated that he is very familiar with this property and has driven on the property many times during the day and night. At the time, P-1 had been driving V-1 for 10-15 minutes. While the hill they were ascending was steep, he has driven up it numerous times and it has never been a problem and he has never crashed on it. V-1 was the second of three off road vehicles and was ascending this steep hill at 5 miles per hour when V-1 possibly lost traction. V-1 started to tip backwards and to the right. V-1 overturned possibly two or three times before landing back on its wheels at the bottom of the hill. P-1 observed Pass-1 still seated next to him but did not observe Pass-2 anymore. P-1 then observed Pass-2 lying on the ground face down at the top of the hill. P-1 related that Pass-2 always wears his seat belt and prior to leaving the residence to ride, P-1 believed that Pass-2 had put on his seat belt. Following the collision, the seatbelt was to the right side of V-1 and was not attached.

Passenger #1 (b)(6) No statement was obtained from her. I was never able to locate her whereabouts the night of the collision and the telephone number that was given for her is not in service. Pass-1 left the scene of the collision and went to the hospital immediately following, per P-1.

Passenger #2 (b)(3):CPS No statement was obtained due to fatal injuries.

Witness #1 (b)(6) related at Riverside County Regional Medical Center that he was riding his quad and was the first of the three off road vehicles. Wit-1 had ascended the steep hill and after arriving on the top he stopped and looked back to see that the other off-road vehicles were following. Wit-1 then observed all of the dust flying in the air. Wit-1 exited his quad and then located Pass-2 lying on the ground with blood coming from his mouth. Wit-1 could not understand why Pass-2 was not wearing his seat belt at the time of the collision. Wit-1 showed me pictures on his camera phone.

Statements were summarized.

PREPARER'S NAME	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
C. YAGER	16285	04/26/2009		

3STATE OF CALIFORNIA

CHP 555/NARRATIVE

PAGE 8

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
04-26-2009	2100	9840	16285	

**OPINIONS AND CONCLUSIONS:**

**SUMMARY**

Party #1 was traveling northbound within the property of 27050 Vista Suelto Road at 5 miles per hour climbing a steep dirt hill when P-1, for an unknown reason failed to maintain control of V-1. V-1 lost traction in the dirt at the crest of the hill with the front end of V-1 rising up. At this time V-1 started to tip backwards and to the right. Passenger #2 was ejected onto the dirt, whereupon V-1 rolled back upon him. V-1 continued rolling backwards down the hill where it came to a rest on its wheels.

Summary is based on statements.

**AREA'S OF IMPACT (A.O.I.'S)**

A.O.I. #1 (Passenger #2 versus the dirt ground) was located 300' north of the north edge of Reche Canyon Road and 3960' west of the west prolongation edge of Trust Way.

A.O.I. #2 (Vehicle #1 versus the dirt and Passenger #2) was located 296' north of the north edge of Reche Canyon Road and 3958' west of the west prolongation edge of Trust Way.

Area of impact is based on statements.

**CAUSE**

The cause of this traffic collision is other improper driving by P-1.

The cause is based on statements.

**RECOMMENDATIONS**

None

PREPARER'S NAME	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
C. YAGER	16285	04/26/2009		



**RIVERSIDE COUNTY SHERIFF-CORONER  
DEATH INVESTIGATION NARRATIVE****INITIAL REPORT****DECEDENT NAME: BARRON IV, Baltazar Bradley****Case # 2009-03145****Initial Information Obtained:**

On April 26, 2009, at 2216 hours, Deputy Coroner Celia Dominguez requested I respond to the emergency room at Riverside County Regional Medical Center in reference to the death of a 10-year-old from a motor vehicle accident.

**Scene Description/Details:**

Riverside County Regional Medical Center is located at 26520 Cactus Avenue in the city of Moreno Valley.

I arrived on scene at 2300 hours and met with Officer Yager with the California Highway Patrol, Riverside office who provided the following. The victim, identified by his family as 10-year-old (b)(3):CPSA S IV, had been a front passenger of an off-road utility vehicle. The utility vehicle was described as a four wheel, off-road golf cart type vehicle with a long bench seat capable of carrying three people. The vehicle was equipped with seatbelts and a roll-cage. At the time of the accident, (b)(6) s 23-year-old cousin was driving, a female adult was sitting in the middle, and (b)(6) was in the right side. They had been one of multiple off-road cart type vehicles riding on a 22-acre private property area owned by the family. The area was described as rolling hills in a rural area of Moreno Valley. The driver started up a steep grade, but lost control of the vehicle part way up. The vehicle rolled multiple times. During this, (b)(6) was ejected from the vehicle and may have been crushed as the vehicle rolled. Family transported (b)(6) down the hill to a dirt road and 9-1-1 was called. Medics arrived, began medical aid and transported him in full arrest to the emergency room where he was pronounced dead. Family reported that (b)(6) had been wearing a seat belt at the time of the accident. Officer Yager reported he was still investigating the incident. He gave the time of the incident as 2100 hours. I was given a location of the accident as 1-mile west of Moreno Beach

**RIVERSIDE COUNTY SHERIFF-CORONER  
DEATH INVESTIGATION NARRATIVE****INITIAL REPORT**

1 Drive, 300 feet north of Reche Canyon Road in a rural area of Moreno Valley. Officer Yagar said his  
2 initial investigation had found no signs of alcohol or drug use by any of the participants. Helmets  
3 had not been in use at the time.

4  
5 Medical records obtained stated (b)(6) had arrived to the emergency room in full arrest at 2120  
6 hours. All efforts to revive him failed, Dr. Tran pronounced death at 2144 hours.

**Deputy Coroner's External Examination of Remains:****a) Body position**

9  
10 Lying supine, on a backboard, on top of a gurney. An intubation tube and neck collar was  
11 secured in place. Cardiac monitor patches were affixed to his torso. Intravenous lines had  
12 been established to his upper and lower right leg.

**b) Clothing description**

13  
14 Boots, socks, jeans and shirt. All clothing had been cut away during medical aid.

15 **c) Post Mortem Changes, time observed** – N/A for hospital deaths

16 **d) Ambient temperatures and method used, time taken** – N/A for hospital deaths

**e) Identifying marks, scars, tattoos**

17  
18 None noted on scene.

**f) Trauma**

19  
20 Blood was noted around the mouth, nose and both ears. Vomit was present to his face. Both  
21 eyes appeared swollen, with contusions present to the left eye. Closed head fractures could be  
22 felt through the skin in the top, left side of his head. His abdomen felt hard and appeared  
23 distended. Due to the amount of dirt and blood it was difficult on scene to fully identify  
24 injuries.

**RIVERSIDE COUNTY SHERIFF-CORONER  
DEATH INVESTIGATION NARRATIVE****INITIAL REPORT****Transportation:**

I notified coroner's transportation to respond and transport (b)(6) to the Riverside County Sheriff-Coroner's Forensic Facility in Perris.

**Documentation (copies of medical records, photos, etc.):**

Sixteen color digital photographs were taken. No property handled by this office. Copies of medical records for this incident were obtained. Upon Baltazar's arrival to the Forensic Center, head and chest digital x-rays were taken.

**Cause of Death Statement:**

On April 27, 2009, Dr. Aaron Gleckman performed an examination of (b)(6). The result of the examination was used to establish the medical cause of death as listed on the face sheet of this report. For further information regarding the examination, refer to Dr. Gleckman's report.

No toxicological studies were performed in this investigation.

Based on information ascertained during this investigation, this death is classified as an accident.

The remains of the decedent were released to the next of kin for final disposition.

Report prepared by: Michael D. Oare  
Deputy Coroner, #N3099

Report Identifiers

Victim 1:  
(Decedent)

(b)(3);CPSA Section 25(c)

Passenger (right front seat) in the incident vehicle, not restrained by a lap/shoulder harness, and was not wearing a helmet.

Victim 2:  
(Not Injured)

(b)(6)

(Negative contact)

Driver of the incident vehicle, restrained by a lap/shoulder harness, and was not wearing a helmet.

Victim 3:  
(Not Injured)

(b)(6)

(Negative contact)

Passenger (middle front seat) in the incident vehicle, restrained by a lap/shoulder harness, and was not wearing a helmet.

Other:

California Highway Patrol  
8118 Lincoln Avenue  
Riverside, CA. 92504  
(951) 637-8000  
(Contacted on 09-10-09; 09-11-09)

\*Advised no further vehicle identification information was available.

Other:

Riverside County Sheriff's Department  
Coroner Bureau  
800 S. Redlands Avenue  
Perris, CA 92579  
(951) 443-2390  
(Contacted on 09-11-09; 10-01-09)

\*Advised the Autopsy Report was not ready for release and that a release date was unknown.

Other: Riverside County Fire Department  
210 W. San Jacinto Avenue  
Perris, CA 92570  
(951) 940-6960  
(Contacted on 09-10-09)

\*Advised no reports were available.

ISSUE

48

AUG 27 2009

X098

0653A

Slideshows



Amelia's Photos From The Sky

- Freed U.S. Journalists Return Home
- Michael Jackson Memorial
- SoCal's Most Wanted Fugitives
- 2009 Celebrity Deaths

E-mail Print Share +

Apr 27, 2009 1:24 pm US/Pacific

# Boy, 10, Killed In Moreno Valley ATV Accident

MORENO VALLEY (CBS) — A 10-year-old boy was killed in an off-road vehicle crash near Moreno Valley, authorities said Monday.

(b)(3)-CPSA Se of Moreno Valley died when the all-terrain vehicle he was riding in overturned and rolled over him, according to the Riverside County Coroner's Office.

The deadly accident took place at 9 p.m. Sunday on residential property near Reche Canyon Road, about a mile west of Moreno Beach Drive, authorities said.

(b)(7) was in the right seat of the Arctic Cat ATV, which was being driven by 22-year-old (b)(6). 21, was seated in the middle of the vehicle, according to the California Highway Patrol.

CHP Officer Sylvia Mosley said (b)(6) was trying to power the ATV up a steep hill when its "front tires lifted off of the terrain and flipped over backwards."

Mosley said (b)(7) unlike (b)(6) was not wearing a safety harness and fell out of the vehicle, which rolled over him and continued to roll until coming to rest on its tires at the bottom of the hill.

Barron was transported to Riverside County Regional Medical Center in Moreno Valley, where he was pronounced dead, the coroner's office said.

Contreras and Miguera were not injured, and Mosley said there were no arrests pending in connection with the accident.

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1 of 1

Click to enlarge

A 10-year-old boy was killed in an ATV accident in Moreno Valley. AP

Moreno Valley, CA

4/26/2009

10 yom

Prova = 5044

Arctic Cat



This In-Depth Investigation (IDI) was initiated based upon an article found on the Internet concerning a fatality involving an **Utility Terrain Vehicle (UTV)**. The following information was obtained from the local investigating officials.

During this IDI a photocopy of the police report and the coroner's report were obtained. A request has been submitted to the coroner for a copy of their photographs.

The victim is an 84 year old male. His date of birth was 1/29/1925. The victim weighed 183 pounds and was 5'4" tall. The victim was wearing blue pants supported by suspenders, blue T-shirt, white tennis shoes and white socks. The victim was not wearing a seatbelt or a helmet at the time of the incident.

According to the police report, a family member informed them the victim had a problem with his legs which did not work well and that the victim had placed a block of wood under this left foot in the UTV so that he would not have to lift it to high. The victim has also had several "blackout spells" in the past several years. It was stated that prior to the incident, the victim, one time in the past, had a blackout while he was driving the UTV.

The incident took place on ranch land. The location was on a hilly portion of the ranch with a dirt roadway cut into the side of the hill running north and south. The hill slopes downwards in an easterly direction and ends at a vineyard. The weather was reported as cloudy, but dry, until just after the accident. It then rained lightly for three to four minutes after the incident.

The night before the incident (6/2/2009), the victim and his wife ate dinner between 5-6 pm and went to bed between 10pm and 1am. The victim woke up about 6 am on 6/3/2009 and ate breakfast about 7 am.

Per the local officia reports, the morning of 6/3/2009, after breakfast, the victim left to do gardening around the house, and then left on the UTV and went to check on the vineyard. He was traveling down a small hill on the UTV. The victim was unable to negotiate a right turn and in doing so the right-front and right-rear wheels went over an embankment causing the UTV to overturn and eject the victim out the left side of the UTV. The UTV then rolled on its left side, landing on top of the victim.

At about 1338 hours a neighbor told a ranch hand that the victim had been involved in an accident on the ranch and to call 911.

When the local law enforcement officer arrived he observed the victim pinned underneath the UTV. The officer and two other people managed to lift the UTV off of the victim and pull him free. After the victim was free from underneath the UTV, the officer did not notice any signs of life and started CPR, but his efforts met with negative results and he called the time of death at 1410 hours.

The officer noticed that the victim had abrasions on his face, left lower forearm and left elbow, which had dried blood. The victim also had dirt and dried grass in his mouth, nose and on his face. The victim's right upper corner of the lip appeared to be cut.

Per the coroner's report, the cause of death was due to exsanguination due to traumatic transection of inferior vena cava with compression asphyxia.

The officer examined the UTV and in doing so he noticed that the UTV's seat had been modified to accommodate the victim's diminutive stature. The UTV's seat had a new set of holes, allowing the seat to be mounted closer to the steering wheel. The victim was unable to reach the floorboard; so he carried a block of wood that he would rest his feet on. The local officials inspected the brake pedal and noted "movement revealed the pedal travel is only about one inch, leaving 3-4 inches from the fire wall."

According to a witness, she had a conversation with the victim about him not wearing his seatbelt and the victim had scoffed at her concern. She also stated that he stated he was starting to get use to driving the UTV, but was still uncomfortable with it.

Another person told the local officials that he was sitting in his pickup truck in the driveway entering the ranch facing a northerly direction, which faces the collision scene. This person saw the victim driving the UTV at an unusually high rate of speed. According to the person, the victim was always seen driving slow and cautiously around the neighborhood. After seeing the victim's rapid descent down the hill, he went to check on him after two to three minutes. The witness found the UTV lying on its side with the victim trapped underneath it. This person tried to lift the UTV off of the victim, but couldn't. Three other people arrived and helped to free the victim from underneath the UTV. This person also told the local officials that the victim was still uncomfortable with the UTV. He thought that the victim had only been driving the UTV for about two to three weeks.

In summary to the officer's report, the victim was driving the UTV which was new to him, traveling down a mowed grass hill at an unknown speed. The victim attempted to make a right turn onto a dirt road, but failed to negotiate the right turn. The UTV overshot the road and went over the east roadway edge. The UTV began traversing a downhill embankment in a southerly direction. The UTV rolled onto its left side as the victim was being partially ejected. The UTV came to rest on its left side on top of the victim.

**Product Identification:**

The product involved in this In-Depth Investigation was a **Utility Terrain Vehicle (UTV)**. The product is identified as a **green 2008 Arctic Cat 650 Prowler Side-by-Side**. **VIN#: 4CFO8MPV58T3O8429**.

The UTVs driver seat was modified to accommodate the victim's height, who was unable to reach the floorboard. The UTV also had a homemade roof attached. The UTV sustained damage to its left side. Minor scrapes were observed, the left side mirror was broken, and damage to the left side of its homemade roof.

No further information was obtained.

**Exhibits:**

- (1) Police Report
- (2) Coroner's Report

090828CCC3935

**Contacts :**

Mendocino County Sheriff/Coroner  
10521 Main St  
Potter Valley, CA

Contact was initiated to obtain a copy of the autopsy report

California Highway Patrol  
540 S. Orchard Ave  
Ukiah, CA 95482

Contact was initiated to obtain a copy of the police report.

Arctic Cat Inc.  
601 Brooks Ave South  
Thief River Falls, MN 56701  
Tel: 218-681-8558  
[www.arcticat.com](http://www.arcticat.com)

Researched to see if the vehicle was a UTV or an ATV since no photographs have been received.

**Task Number:** 090828CCC3935

**Date:** 11/2/2009

### **Status of Missing Document(s)**

The official records below were requested for this investigation report, but could not be obtained.

1. Coroner's Photographs
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

2009060007

SPECIAL CONDITIONS FATAL PRIVATE PROPERTY		NUMBER INJURED 0	HIT & RUN FELONY <input type="checkbox"/>	CITY UNINCORPORATED		JUDICIAL DISTRICT UKIAH SUPERIOR		LOCAL REPORT NUMBER 2009060007			
		NUMBER KILLED 1	HIT & RUN MISDEMEANOR <input type="checkbox"/>	COUNTY MENDOCINO		REPORTING DISTRICT 902		DAY OF WEEK WEDNESDAY	TOW AWAY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
LOCATION	COLLISION OCCURRED ON: 9600 GIBSON LN					MO 06	DAY 03	YEAR 2009	TIME (2400) 1345	NDIC # 9150	OFFICER I.D. 019524
	MILEPOST INFORMATION:				GPS COORDINATES LATITUDE 39.33778°		LONGITUDE -123.13389°		PHOTOGRAPHS BY: <input type="checkbox"/> NONE REFER TO PHYSICAL EVIDENCE		
	AT INTERSECTION WITH: <input checked="" type="checkbox"/> OR: 5 MILE(S) NORTH OF GIBSON LN					STATE HWY REL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
PARTY 1	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR		LICENSE NUMBER	STATE	
				P	D	2008	ARTC CAT 650 PROWLER GRN		382299	MT	
DRIVER <input checked="" type="checkbox"/>	NAME (FIRST, MIDDLE, LAST) (b)(3):CPSA Section 25(c)					OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER (b)(6)					
PEDESTRIAN <input type="checkbox"/>											
PARKED VEHICLE <input type="checkbox"/>						DISPOSITION OF VEHICLE ON ORDERS OF: <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER					
BICYCLIST <input type="checkbox"/>	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE	YEAR	RACE	PARKED AT SCENE	
	M	WHI	HZL	5-04	150	01	29/1925		W	<input checked="" type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE	
OTHER <input type="checkbox"/>	HOME PHONE (b)(6)		BUSINESS PHONE			VEHICLE IDENTIFICATION NUMBER: 4UFO8MPV58T308429					
INSURANCE CARRIER N/A					POLICY NUMBER		VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		
							06		LINK <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MOD <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> ROLL-OVER		
DIR OF TRAVEL ON STREET OR HIGHWAY E AT 9600 GIBSON LN					SPEED LIMIT		CA _____ DOT _____		SHADE IN DAMAGED AREA 		
							CAL-T _____ TCP/PSC _____ MC/MX _____				
PARTY 2	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR		LICENSE NUMBER	STATE	
DRIVER <input type="checkbox"/>	NAME (FIRST, MIDDLE, LAST)					OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER					
PEDESTRIAN <input type="checkbox"/>	STREET ADDRESS					OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER					
PARKED VEHICLE <input type="checkbox"/>	CITY / STATE / ZIP					DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER					
BICYCLIST <input type="checkbox"/>	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE	YEAR	RACE	PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE	
OTHER <input type="checkbox"/>	HOME PHONE		BUSINESS PHONE			VEHICLE IDENTIFICATION NUMBER:					
INSURANCE CARRIER					POLICY NUMBER		VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		
									LINK <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MOD <input type="checkbox"/> MAJOR <input type="checkbox"/> ROLL-OVER		
DIR OF TRAVEL ON STREET OR HIGHWAY					SPEED LIMIT		CA _____ DOT _____		SHADE IN DAMAGED AREA		
							CAL-T _____ TCP/PSC _____ MC/MX _____				
PARTY 3	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR		LICENSE NUMBER	STATE	
DRIVER <input type="checkbox"/>	NAME (FIRST, MIDDLE, LAST)					OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER					
PEDESTRIAN <input type="checkbox"/>	STREET ADDRESS					OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER					
PARKED VEHICLE <input type="checkbox"/>	CITY / STATE / ZIP					DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER					
BICYCLIST <input type="checkbox"/>	SEX	HAIR	EYES	HEIGHT	WEIGHT	MO	BIRTHDATE	YEAR	RACE	PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE	
OTHER <input type="checkbox"/>	HOME PHONE		BUSINESS PHONE			VEHICLE IDENTIFICATION NUMBER:					
INSURANCE CARRIER					POLICY NUMBER		VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		
									LINK <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MOD <input type="checkbox"/> MAJOR <input type="checkbox"/> ROLL-OVER		
DIR OF TRAVEL ON STREET OR HIGHWAY					SPEED LIMIT		CA _____ DOT _____		SHADE IN DAMAGED AREA		
							CAL-T _____ TCP/PSC _____ MC/MX _____				
PREPARER'S NAME J. A. SLATES 019524					DISPATCH NOTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		REVIEWER'S NAME 			DATE REVIEWED 6.16.09	



DATE OF COLLISION (MO. DAY YEAR) 06/03/2009		TIME(2400) 1345		NCIC # 9150		OFFICER I.D. 019524		NUMBER 2009060007									
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ('X' ONE)				INJURED WAS ('X' ONE)					PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER					
<input type="checkbox"/>	<input type="checkbox"/>	84	M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	P	D	2

NAME / D.O.B. / ADDRESS  
 (b)(3);CPSA Section 25(c)

INJURED ONLY TRANSPORTED BY: EVERSOLE MORTUARY  
 TAKEN TO: EVERSOLE MORTUARY, UKIAH

DESCRIBE INJURIES: P-1 DIED FROM CRUSHING TRAUMA TO THE CHEST AREA.  
 PRONOUNCED DECEASED AT 1402 HRS BY WITNESS 3 (P.V. FIRE CHIEF 6200, BILL PAUL)

CORONERS CASE # 09-141  VICTIM OF VIOLENT CRIME NOTIFIED

<input checked="" type="checkbox"/>	# 1	<input type="checkbox"/>	58	F	<input type="checkbox"/>													
-------------------------------------	-----	--------------------------	----	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

NAME / D.O.B. / ADDRESS  
 (b)(6)

INJURED ONLY TRANSPORTED BY:   
 TAKEN TO:

DESCRIBE INJURIES:

<input checked="" type="checkbox"/>	# 2	<input type="checkbox"/>	39	M	<input type="checkbox"/>													
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NAME / D.O.B. / ADDRESS  
 (b)(6)

INJURED ONLY TRANSPORTED BY:   
 TAKEN TO:

DESCRIBE INJURIES:

<input checked="" type="checkbox"/>	# 3	<input type="checkbox"/>	61	M	<input type="checkbox"/>													
-------------------------------------	-----	--------------------------	----	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

NAME / D.O.B. / ADDRESS  
 (b)(6)

INJURED ONLY TRANSPORTED BY:   
 TAKEN TO:

DESCRIBE INJURIES:

<input checked="" type="checkbox"/>	# 4	<input type="checkbox"/>	84	F	<input type="checkbox"/>													
-------------------------------------	-----	--------------------------	----	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

NAME / D.O.B. / ADDRESS  
 (b)(6)

INJURED ONLY TRANSPORTED BY:   
 TAKEN TO:

DESCRIBE INJURIES:

<input type="checkbox"/>	#	<input type="checkbox"/>			<input type="checkbox"/>													
--------------------------	---	--------------------------	--	--	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

NAME / D.O.B. / ADDRESS

(INJURED ONLY) TRANSPORTED BY:   
 TAKEN TO:

DESCRIBE INJURIES:

PREPARER'S NAME	I.D. NUMBER	MO. DAY YEAR	REVIEWER'S NAME	MO. DAY YEAR
-----------------	-------------	--------------	-----------------	--------------

J. A. SLATES 019524 06/03/2009

PREPARER'S NAME: J. A. SLATES  
 I.D. NUMBER: 019524  
 MO. DAY YEAR: 06/03/2009

REVIEWER'S NAME:   
 MO. DAY YEAR:

PREPARER'S NAME: J. A. SLATES  
 I.D. NUMBER: 019524  
 MO. DAY YEAR: 06/03/2009

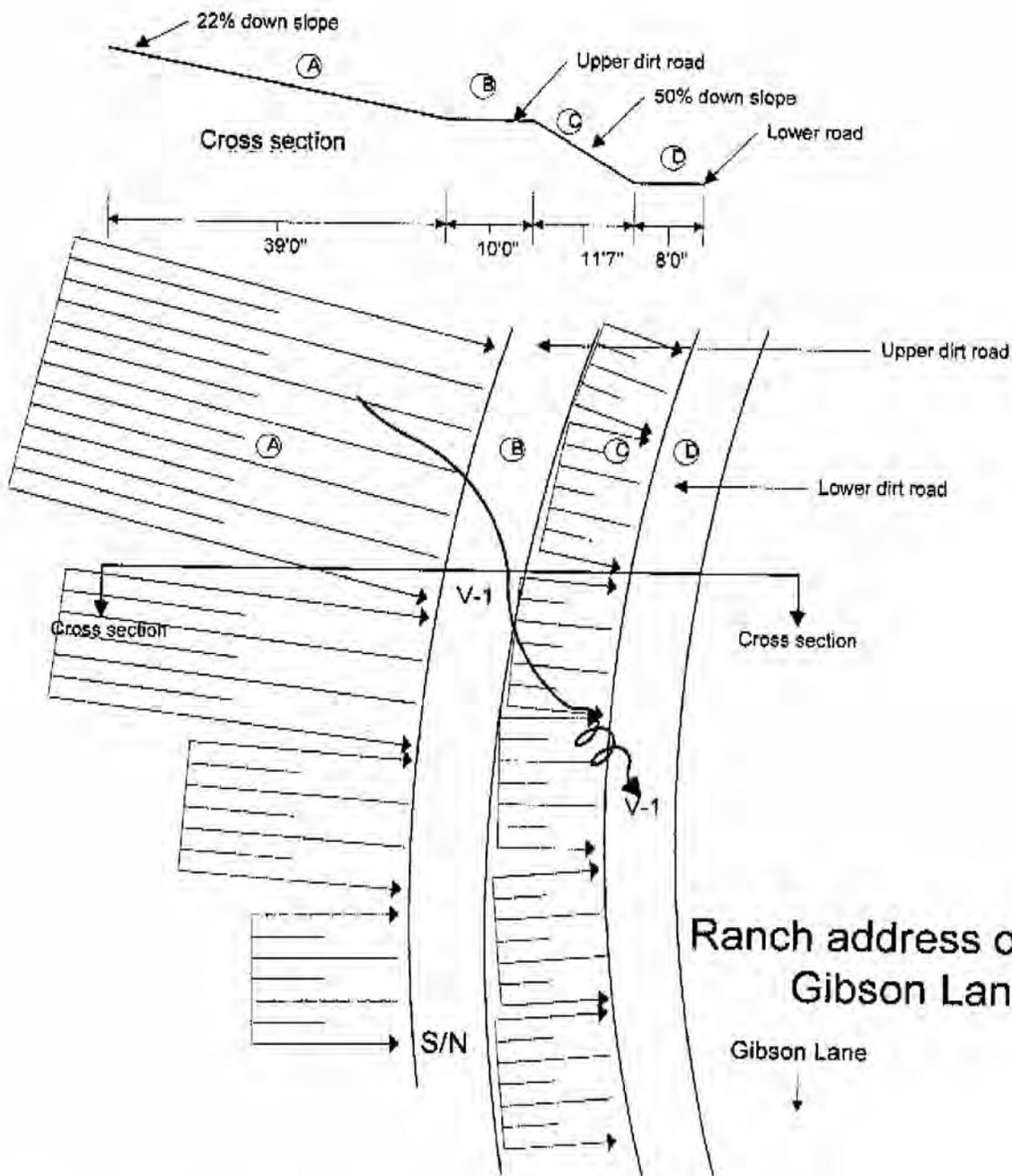
STATE OF CALIFORNIA  
**SKETCH DIAGRAM**

CHP 555 Page 4 (Rev. 8-97) OPI 042

PAGE 4 OF 9

DATE OF INCIDENT 06/03/2009	TIME 1345	NCIC NUMBER 9150	OFFICER I.D. 019524	NUMBER 2009060007
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ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE= )



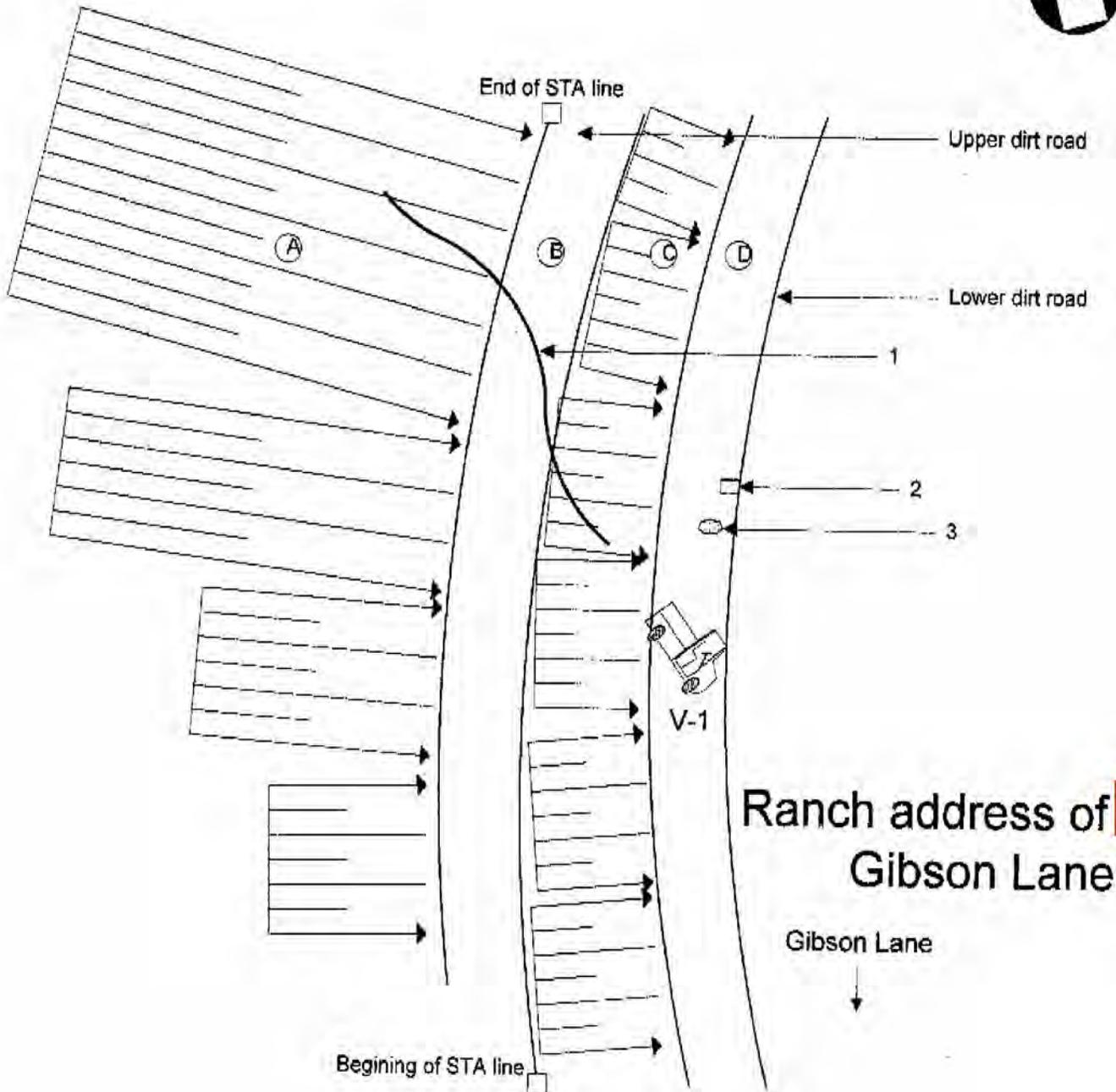
PREPARED BY J. A. SLATES	I.D. NUMBER 019524	DATE 06/03/2009	REVIEWER'S NAME	DATE
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STATE OF CALIFORNIA  
**FACTUAL DIAGRAM**

CHP 555 Page 4 (Rev. 8-97) OPI 042

DATE OF INCIDENT 06/03/2009	TIME 1345	NCIC NUMBER 9150	OFFICER I.D. 019524	NUMBER 2009060007
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ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE= )



PREPARED BY J. A. SLATES	I.D. NUMBER 019524	DATE 06/03/2009	REVIEWER'S NAME	DATE
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STATE OF CALIFORNIA  
**FACTUAL DIAGRAM**

CHP 555 Page 4 (Rev. 8-97) OPT 042

PAGE 6 OF 9

DATE OF INCIDENT 06/03/2009	TIME 1345	NCIC NUMBER 9150	OFFICER I.D. 019524	NUMBER 2009060007
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ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE= )

### STATION LINE

A Station line was established by use of a hand held Garmin Etrix Summit GPS unit. The Station line began at 39.33778 N and ran in a northerly direction 100' to 123.13389 W. Measurements were taken to the right and the left from the station line, using a steel tape measure and fiber glass tape measure. Right being east of the station line.

### VEHICLE LOCATIONS

V-1's left rear tire was located at 0+46' and 13' right of the STA.  
V-2's left front tire was located at 0+40 7" and 16.6' right of the STA.

### PHYSICAL EVIDENCE

1 was a tire mark from the left front tire of V-1 and was approx. 43' long.  
2 was a 1'x2' plastic milk crate.  
3 was a pile of misc. tools and items.

### PHYSICAL EVIDENCE LOCATIONS

1 began at 0+89' 9" and 16.4' L of the STA. Continued 0+85' 2" and 10.2' left of STA. Continued 0+83' 2" and 7.3' left of the STA. Continued 0+80' and 3.7' left of the STA. Continued 0+74' 6" and 0'0" crossing the STA. Continued 0+64' 2" and 4.2' right of the STA. Continued 0+60' 5" and 5.5' right of the STA. Ended at 54' 7" and 7.4' right of the STA.  
2. Centered at 0+63' 0" and 19.8' right of the STA.  
3. Centered at 0+57' 0" and 14.8' right of the STA.

PREPARED BY J. A. SLATES	I.D. NUMBER 019524	DATE 06/03/2009	REVIEWER'S NAME	DATE
-----------------------------	-----------------------	--------------------	-----------------	------

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
06/03/2009	1345	9150	019524	2009060007

1 **FACTS**

2

3 **NOTIFICATION**

4

5 On 6-3-09, at 1350 hrs, I was notified by dispatch of a possible fatal collision, involving an ATV in Potter Valley. I  
6 responded from the Ukiah CHP office. I arrived at scene at 1420 hrs.

7

8 All times, speeds and measurements are approximate. All Measurements were obtained by fiber glass, and steel  
9 tape.

10

11

12 **SCENE DESCRIPTION**

13

14 The collision occurred on the property of (b)(6), just north west of the intersection of Gibson Lane and Hawk  
15 Creek Rd. The area of the collision, is a hilly portion of the ranch with a dirt roadway cut (upper road) into the side of  
16 the hill running north and south. The hill slopes downward in an easterly direction and ends at the vineyard. There is  
17 another dirt roadway (lower road) at the base of the hill running north and south along the west edge of the vineyards  
18 (perimeter road). For further details, refer to factual diagram.

19

20

21 **PARTIES**

22

23 Party # 1 (b) was found deceased at the scene. Prior to my arrival, P-1 had been moved from his point of rest to  
24 a location just north of V-1. P-1 was determined to be the driver of V-1, at the time of collision, by the evidence, his  
25 injuries and the statements. P-1 was identified by his California DL.

26

27 As a result of the postmortem examination conducted by Dr. Trent on 06/08/09 at 0800 hrs, it was determined that  
28 P-1 received the following injuries; fractures in the ribs and back, transected inferior vena cava and some superficial  
29 scratches and bruises.

30

31 Vehicle # 1 (Artic Cat Prowler 650) was located on it's left side at it's point of rest. V-1 received minor damage  
32 consisting of minor scrapes on it's left side, left side mirror broken mirror, and damage to the left side of it's  
33 homemade roof. There were no prior defects or damage noted.

34

35

36 **PHYSICAL EVIDENCE**

37

38 Sergeant Tafel, ID 12222, took digital photos of the scene. Officer Slates, ID 19524, took digital photos of the autopsy  
39 and V-1. See factual diagram for physical evidence.

40

41 **OTHER FACTUAL INFORMATION**

42

43 P-1 was approximately 5'2" tall. He had V-1's seat modified to accommodate his diminutive stature. V-1's seat had a  
44 new set of holes, allowing the seat to be mounted closer to the steering wheel. This alteration did not change the  
45 height of the seat. P-1 could not reach the floorboard; so he carried a block of wood (located at the scene) that he  
46 would rest his feet on. Inspection of the brake pedal movement revealed the pedal travel is only about one inch,  
47 leaving 3-4 inches from the fire wall. This indicated it was unlikely the block of wood could interfere with the brake  
48 pedal movement.

49

50

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
J. A. SLATES	019524	06/03/2009		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
06/03/2009	1345	9150	019524	2009060007

**1 STATEMENTS**

2  
3 P-1 was unable to give a statement due to his fatal injuries.  
4

5 Witness #1 (b)(6) was contacted at the scene and stated to me that she was contacted by her ranch worker,  
6 Witness #2 (b)(6), that there was an accident involving P-1 on the ranch. Witness #1 (b)(6) called her  
7 husband (Witness # 3 B. Pauli P.V. Fire Chief) notifying him of the accident. Witness #1 related that she arrived on  
8 scene and tried to lift V-1. She was unable to lift V-1 and it appeared that P-1 was dead. On 06-02-09, she had a  
9 conversation with P-1 about him not wearing his seatbelt. P-1 scoffed at her concern. She reported that he stated he  
10 was starting to get use to driving V-1, but was still uncomfortable with it.

11  
12 Witness #2 (b)(6) was contacted at the scene and stated to me that he was sitting in his pickup truck in the  
13 driveway entering the ranch facing a northerly direction, which faces the collision scene. He saw P-1 driving V-1  
14 traveling in an easterly direction, west of the scene, at an unusually high rate of speed. (b)(6) stated that P-1 was  
15 always seen driving slow and cautiously around the neighborhood. After seeing P-1's rapid decent down the hill, he  
16 went to check on P-1 after two to three minutes. He found V-1 was laying on its side with P-1 trapped underneath it.  
17 (b)(6) tried to, but was unable to, lift V-1 off of P-1. (b)(6) found P-1 unconscious and was unable to rouse him.  
18 (b)(6) stated that once W-3 (b)(6) and an additional ranch worker arrived on scene, they were able to lift V-1  
19 enough to extricate P-1 from underneath V-1. W-2 (b)(6) was present when W-1 (b)(6) voiced her concerns to  
20 P-1 about not wearing his seatbelt while driving V-1. P-1 stated, during that conversation, that he was still  
21 uncomfortable with V-1. (b)(6) stated he thought that P-1 had only been driving V-1 for about two to three weeks.  
22 (b)(6) also stated that the weather was cloudy, but dry, until just after the accident. It then rained, lightly, for three to  
23 four minutes after the accident.  
24

25 Witness #3 (b)(6) stated to me, via the phone on 06/04/09, that he had received a call from his wife. She informed  
26 him that P-1 was involved in an accident at their ranch. W-3 (b)(6) immediately called in the accident to the  
27 Howard Forest Dispatch Center. Upon his arrival at the scene, it appeared to him that P-1 was deceased. With help,  
28 he was able to pull P-1 from underneath of V-1 and was able to confirm that P-1 was deceased. W-3 (b)(6) stated  
29 that the seat of V-1 had been modified to move forward and that P-1 (AKA (b)(3):CPSA) used a wooden block to  
30 rest his feet on because he could not reach the floorboard.  
31

32 Witness #4 (b)(6) refer to the human factor section for statement.  
33  
34

35 **OPINIONS AND CONCLUSIONS** (The opinions and conclusions were based upon the statements, the injuries  
36 and the physical evidence, the damage to V-1 and its point of rest)  
37  
38

**39 HUMAN FACTOR (Party 1's 24 hour profile)**

40  
41 On 6/7/09 at approx. 1720 hrs, I contacted (b)(6) (W-4), via the phone. She informed me that on 6/2/09 they ate  
42 dinner between 5-6 pm and went to bed between 10pm and 1am. She also stated that P-1 typically woke up about 6  
43 am and ate breakfast about 7 am. P-1 left his house on 6/3/09 to do gardening around the house, and then went to  
44 check on the vineyards, visit with friends/neighbors and then went to (b)(6) Ranch to look for ground  
45 squirrels. W-4 also stated that P-1 did not drink any alcohol, and that he never has had a heart attack, or any life  
46 threatening illnesses. W-4 stated that P-1 was diagnosed with COPD, and that he used an inhaler a night, but did not  
47 carry it with him.  
48  
49  
50

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
J. A. SLATES	019524	06/03/2009		

**NARRATIVE/SUPPLEMENTAL**

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
06/03/2009	1345	9150	019524	2009060007

## 1 SUMMARY

2  
3 P-1 (b)(3) was driving V-1, which was new to him, on the property of (b)(6). P-1 was traveling down a  
4 mowed grass hill in an easterly direction at an unknown speed. P-1 attempted to make a right turn onto a north/south  
5 dirt road (upper road), but failed to negotiate the right turn. V-1 overshot the road and went over the east roadway  
6 edge. V-1 began traversing a down hill embankment in a southerly direction, V-1 rolled onto its left side as P-1 was  
7 being partially ejected. V-1 came to rest on its left side on top of P-1.  
8

## 9 AREA OF IMPACT (AOI)

10  
11 The AOI was located with a hand held Garmin Etrix Summit GPS unit at 39.33778 deg. by 123.13389.  
12

## 13 CAUSE

14  
15 Based on the point of rest compared to the AOI, the scattered items (evidence items 2 and 3) proximity to V-1, and  
16 the minor damage, it was apparent that speed was not a factor in this collision. This contradicts the statement of W-2,  
17 about an unusually high rate of speed, based on the facts and evidence, P-1 was unable to negotiate the turn. This  
18 collision was caused by P-1 making an improper turning movement.  
19  
20

21 **RECOMMENDATIONS**

22  
23 None

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
J. A. SLATES	019524	06/03/2009		

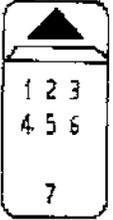
TRAFFIC COLLISION REPORT  
CHP 555 CARS PAGE 1 (REV 11-06) OPT 065

JUN 05 2009

SPECIAL CONDITIONS FATAL PRELIMINARY PRIVATE PROPERTY		NUMBER INJURED 0	HT & WTN FELLOW <input type="checkbox"/>	CITY UNINCORPORATED	JUDICIAL DISTRICT UKIAH SUPERIOR	LOCAL REPORT NUMBER 2009060007				
NUMBER KILLED 1		HT & WTN MOD/MEANOR <input type="checkbox"/>	COUNTY MENDOCINO	REPORTING DISTRICT	BEAT 902	DAY OF WEEK WEDNESDAY	TOW AWAY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
LOCATION	COLLISION OCCURRED ON: (b)(6)		MO 06	DAY 03	YEAR 2009	TIME (2400) 1345	NCIC # 9150	OFFICER I.D. 019524		
	MILEPOST INFORMATION:		GPS COORDINATES		LATITUDE		LONGITUDE			
	AT INTERSECTION WITH:		OR:		STATE HWY REL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		PHOTOGRAPHS BY: SGT D. TAFEL 12772			
	DRIVER'S LICENSE NUMBER VO271329		STATE CA	CLASS C	AIR BAG P	SAFETY EQUIP. D	VEH. YEAR 2008	MAKE / MODEL / COLOR ARTC CAT 650 PROWLER GRN	LICENSE NUMBER 382299	STATE MT
DRIVER <input checked="" type="checkbox"/>	NAME (FIRST, MIDDLE, LAST) (b)(3): CPSA Section 25(c)		OWNER'S NAME <input checked="" type="checkbox"/> SAME AS DRIVER		OWNER'S ADDRESS <input checked="" type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
PEDES-TRIAN <input type="checkbox"/>	SEX M		HAIR WHI	EYES HZL	HEIGHT 5-04	WEIGHT 150	BIRTHDATE MO 01 DAY 29 YEAR 1925	RACE W		
PARKED VEHICLE <input type="checkbox"/>	HOME PHONE		BUSINESS PHONE		VEHICLE IDENTIFICATION NUMBER: 4UF08MPV58T3Q8429		VEHICLE TYPE 06			
BICY-CLIST <input type="checkbox"/>	INSURANCE CARRIER N/A		POLICY NUMBER		DESCRIBE VEHICLE DAMAGE UNK MOD NONE MAJOR MINOR ROLL-OVER		SHADE IN DAMAGED AREA TOP VIEW			
OTHER <input type="checkbox"/>	DIR OF TRAVEL ON STREET OR HIGHWAY E (b)(6)		SPEED LIMIT		CAL-T		TCP/PBC			
PARTY 2	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
DRIVER <input type="checkbox"/>	NAME (FIRST, MIDDLE, LAST)		OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER		OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
PEDES-TRIAN <input type="checkbox"/>	STREET ADDRESS		PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER:		VEHICLE TYPE			
PARKED VEHICLE <input type="checkbox"/>	CITY / STATE / ZIP		INSURANCE CARRIER		POLICY NUMBER		DESCRIBE VEHICLE DAMAGE UNK MOD NONE MAJOR MINOR ROLL-OVER			
BICY-CLIST <input type="checkbox"/>	SEX		HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE MO DAY YEAR	RACE		
OTHER <input type="checkbox"/>	HOME PHONE		BUSINESS PHONE		CAL-T		TCP/PBC			
PARTY 3	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
DRIVER <input type="checkbox"/>	NAME (FIRST, MIDDLE, LAST)		OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER		OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER		DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
PEDES-TRIAN <input type="checkbox"/>	STREET ADDRESS		PRIOR MECHANICAL DEFECTS <input type="checkbox"/> NONE APP. <input type="checkbox"/> REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER:		VEHICLE TYPE			
PARKED VEHICLE <input type="checkbox"/>	CITY / STATE / ZIP		INSURANCE CARRIER		POLICY NUMBER		DESCRIBE VEHICLE DAMAGE UNK MOD NONE MAJOR MINOR ROLL-OVER			
BICY-CLIST <input type="checkbox"/>	SEX		HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE MO DAY YEAR	RACE		
OTHER <input type="checkbox"/>	HOME PHONE		BUSINESS PHONE		CAL-T		TCP/PBC			
PREPARER'S NAME J. A. SLATES 019524		DISPATCH NOTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		REVIEWER'S NAME INCOMPLETE		DATE REVIEWED 6-4-9				

STATE OF CALIFORNIA  
**TRAFFIC COLLISION CODING**  
 CHP 555 CARS PAGE 2 (REV. 11-06) OPI 065

DATE OF COLLISION (MO. DAY YEAR) 06/03/2009	TIME(24HR) 1345	NCRO # 9150	OFFICER I.D. 019524	NUMBER <b>200906000</b>
PROPERTY DAMAGE	OWNER DESCRIPTION OF DAMAGE	OWNER ADDRESS		NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO

<b>SEATING POSITION</b> 	<b>OCCUPANTS</b> A - NONE IN VEHICLE B - UNKNOWN C - LAP BELT USED D - LAP BELT NOT USED E - SHOULDER HARNESS USED F - SHOULDER HARNESS NOT USED G - LAP/SHOULDER HARNESS USED H - LAP/SHOULDER HARNESS NOT USED J - PASSIVE RESTRAINT USED K - PASSIVE RESTRAINT NOT USED	<b>SAFETY EQUIPMENT</b> L - AIR BAG DEPLOYED M - AIR BAG NOT DEPLOYED N - OTHER P - NOT REQUIRED  <b>CHILD RESTRAINT</b> Q - IN VEHICLE USED R - IN VEHICLE NOT USED S - IN VEHICLE USE UNKNOWN T - IN VEHICLE IMPROPER USE U - NONE IN VEHICLE	<b>M/C BICYCLE - HELMET</b> DRIVER PASSENGER V - NO X - NO W - YES Y - YES  <b>EJECTED FROM VEHICLE</b> 0 - NOT EJECTED 1 - FULLY EJECTED 2 - PARTIALLY EJECTED 3 - UNKNOWN	<b>INATTENTION CODES</b> A - CELL PHONE HANDHELD B - CELL PHONE HANDSFREE C - ELECTRONIC EQUIPMENT D - RADIO / CD E - SMOKING F - EATING G - CHILDREN H - ANIMALS I - PERSONAL HYGIENE J - READING K - OTHER
---	--	--	--	---

ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (\*) SHOULD BE EXPLAINED IN THE NARRATIVE.

PRIMARY COLLISION FACTOR LIST NUMBER (#) OF PARTY AT FAULT	TRAFFIC CONTROL DEVICES	1 2 3			SPECIAL INFORMATION	1 2 3			MOVEMENT PRECEDING COLLISION
		1	2	3		1	2	3	
A VC SECTION VIOLATED: CITED <input type="checkbox"/> YES <input type="checkbox"/> NO	A CONTROLS FUNCTIONING				A HAZARDOUS MATERIAL				A STOPPED
B OTHER IMPROPER DRIVING*	B CONTROLS NOT FUNCTIONING*				B CELL PHONE HANDHELD IN USE				B PROCEEDING STRAIGHT
C OTHER THAN DRIVER*	C CONTROLS OBSCURED				C CELL PHONE HANDSFREE IN USE				C RAN OFF ROAD
D UNKNOWN*	D NO CONTROLS PRESENT / FACTOR*	X			D CELL PHONE NOT IN USE			X	D MAKING RIGHT TURN
	TYPE OF COLLISION				E SCHOOL BUS RELATED				E MAKING LEFT TURN
	A HEAD-ON				F 76 FT MOTORTRUCK COMBO				F MAKING U TURN
	B SIDE SWIPE				G 32 FT TRAILER COMBO				G BACKING
	C REAR END				H				H SLOWING / STOPPING
WEATHER (MARK 1 TO 2 ITEMS)	D BROADSIDE				I				I PASSING OTHER VEHICLE
A CLEAR	E HIT OBJECT				J				J CHANGING LANES
X B CLOUDY	F OVERTURNED	X			K				K PARKING MANEUVER
C RAINING	G VEHICLE / PEDESTRIAN				L				L ENTERING TRAFFIC
D SNOWING	H OTHER*				M				M OTHER UNSAFE TURNING
E FOG / VISIBILITY FT.					N				N XING INTO OPPOSING LANE
F OTHER*	MOTOR VEHICLE INVOLVED WITH				O				O PARKED
G WIND	X A NON-COLLISION				P				P MERGING
LIGHTING	B PEDESTRIAN				Q				Q TRAVELING WRONG WAY
X A DAYLIGHT	C OTHER MOTOR VEHICLE				OTHER ASSOCIATED FACTORS (MARK 1 TO 2 ITEMS)				R OTHER*
B DUSK - DAWN	D MOTOR VEHICLE ON OTHER ROADWAY	1	2	3	A VC SECTION VIOLATED: CITED <input type="checkbox"/> YES <input type="checkbox"/> NO				
C DARK - STREET LIGHTS	E PARKED MOTOR VEHICLE				B VC SECTION VIOLATED: CITED <input type="checkbox"/> YES <input type="checkbox"/> NO				
D DARK - NO STREET LIGHTS	F TRAIN				C VC SECTION VIOLATED: CITED <input type="checkbox"/> YES <input type="checkbox"/> NO				
E DARK - STREET LIGHTS NOT FUNCTIONING*	G BICYCLE				D				SOBRIETY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)
ROADWAY SURFACE	H ANIMAL:				E VISION OBSCUREMENT:				A HAD NOT BEEN DRINKING
X A DRY	I FIXED OBJECT:				F INATTENTION*:				B HBD - UNDER INFLUENCE
B WET	J OTHER OBJECT:				G STOP & GO TRAFFIC				C HBD - NOT UNDER INFLUENCE*
C SNOWY - ICY					H ENTERING / LEAVING RAMP				D HBD - IMPAIRMENT UNKNOWN*
D SLIPPERY (MUDDY, OILY, ETC.)					I PREVIOUS COLLISION			X	E UNDER DRUG INFLUENCE*
ROADWAY CONDITION(S) (MARK 1 TO 2 ITEMS)	PEDESTRIAN'S ACTIONS				J UNFAMILIAR WITH ROAD			X	F IMPAIRMENT - PHYSICAL*
A HOLES, DEEP RUT*	X A NO PEDESTRIANS INVOLVED				K DEFECTIVE VEH. EQUIP.: CITED <input type="checkbox"/> YES <input type="checkbox"/> NO				G IMPAIRMENT NOT KNOWN
B LOOSE MATERIAL ON ROADWAY*	B CROSSING IN CROSSWALK AT INTERSECTION				L UNINVOLVED VEHICLE				H NOT APPLICABLE
C OBSTRUCTION ON ROADWAY*	C CROSSING IN CROSSWALK - NOT AT INTERSECTION				M OTHER* UNFAMIL. W/VEH.				I SLEEPY / FATIGUED
D CONSTRUCTION - REPAIR ZONE	D CROSSING - NOT IN CROSSWALK				N NONE APPARENT				
E REDUCED ROADWAY WIDTH	E IN ROAD - INCLUDES SHOULDER			X	O RUNAWAY VEHICLE				
F FLOODED*	F NOT IN ROAD								
G OTHER*	G APPROACHING / LEAVING SCHOOL BUS								

SKETCH FOR SKETCH DIAGRAM, SEE PAGE 4



MISCELLANEOUS

DATE OF COLLISION (MO, DAY YEAR) 06/03/2009		TIME(2400) 1345		NCIC # 9150		OFFICER I.D. 019524		NUMBER <b>2009060007</b>											
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ('X' ONE)				INJURED WAS ('X' ONE)					PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED		
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER							
<input type="checkbox"/> #	<input type="checkbox"/>		M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	1	P	D	2		
NAME / D.O.B. / ADDRESS (b)(3):CPSA Section 25(c)												TELEPHONE							
(INJURED ONLY) TRANSPORTED BY: EVERSOLE MORTUARY												TAKEN TO: EVERSOLE MORTUARY, UKIAH							
DESCRIBE INJURIES: CHEST AND HEAD TRAUMA																			
CORONERS CASE # 09-141 <input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																			
<input checked="" type="checkbox"/> # 1	<input type="checkbox"/>	58	F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
NAME / D.O.B. / ADDRESS (b)(6)												TELEPHONE							
(INJURED ONLY) TRANSPORTED BY:												TAKEN TO:							
DESCRIBE INJURIES:																			
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																			
<input checked="" type="checkbox"/> # 2	<input type="checkbox"/>	39	M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
NAME / D.O.B. / ADDRESS (b)(6)												TELEPHONE							
(INJURED ONLY) TRANSPORTED BY:												TAKEN TO:							
DESCRIBE INJURIES:																			
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																			
<input type="checkbox"/> #	<input type="checkbox"/>	61		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
NAME / D.O.B. / ADDRESS (b)(6)												TELEPHONE							
(INJURED ONLY) TRANSPORTED BY:												TAKEN TO:							
DESCRIBE INJURIES:																			
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																			
<input type="checkbox"/> #	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
NAME / D.O.B. / ADDRESS												TELEPHONE							
(INJURED ONLY) TRANSPORTED BY:												TAKEN TO:							
DESCRIBE INJURIES:																			
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																			
PREPARER'S NAME J. A. SLATES				I.D. NUMBER 019524				MO. DAY YEAR 06/03/2009				REVIEWER'S NAME				MO. DAY YEAR			

STATE OF CALIFORNIA  
**SKETCH DIAGRAM**

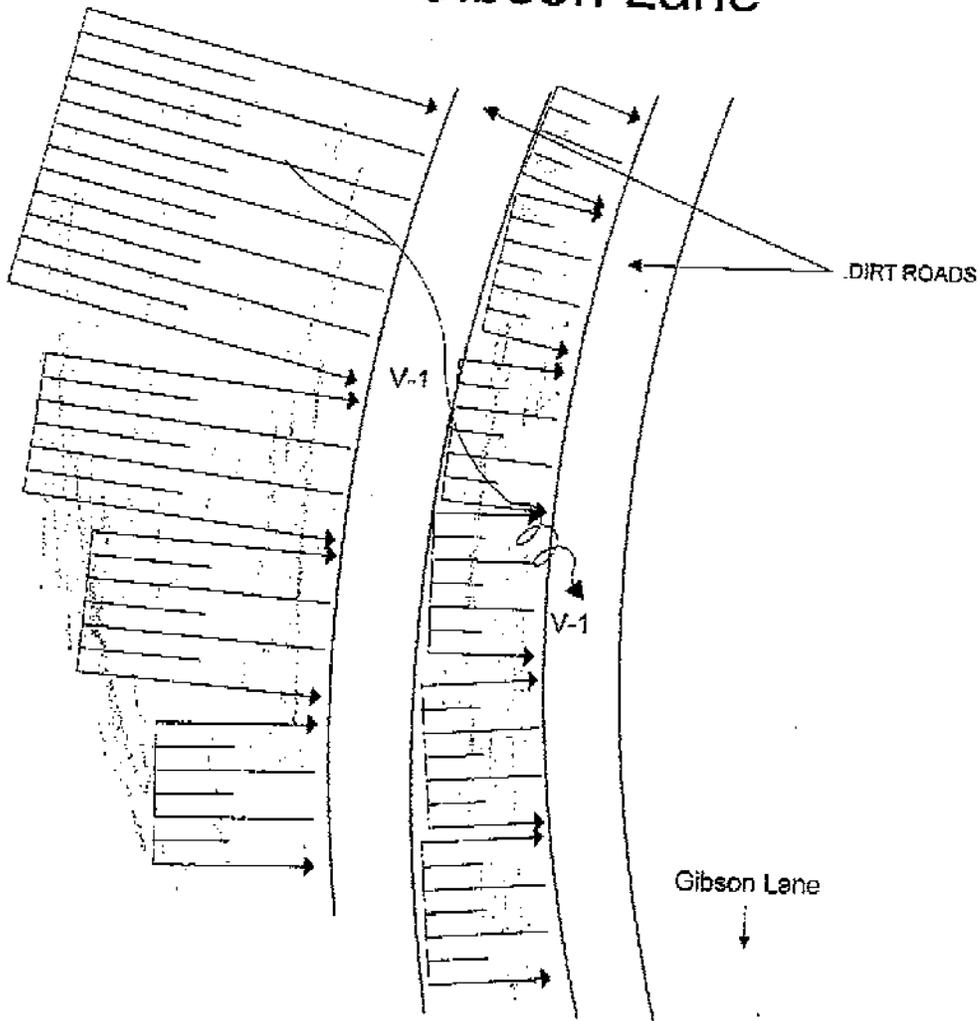
CHP 555 Page 4 (Rev. 8-97) OP1 042

PAGE 4 OF 5

DATE OF INCIDENT 06/03/2009	TIME 1345	NCIC NUMBER 9150	OFFICER I.D. 019524	NUMBER 2009060007
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ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE= )

# Ranch address of 9600 Gibson Lane



PREPARED BY J. A. SLATES	I.D. NUMBER 019524	DATE 06/03/2009	REVIEWER'S NAME	DATE
-----------------------------	-----------------------	--------------------	-----------------	------

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
06/03/2009	1345	9150	019524 <b>2009060007</b>

**1 SUMMARY**

2  
3

4 P-1 (b) was elder and had limited use of his legs. He was driving V-1, which was new to him,  
 5 on the property of 9600 Gibson Lane. P-1 was traveling down a mowed grass hill in an easterly  
 6 direction at an unknown speed. P-1 attempted to make a right turn onto a north/south dirt road,  
 7 but failed to negotiate the right turn. V-1 overshot the road and went over the east roadway edge.  
 8 V-1 began traversing a down hill embankment in a southerly direction. V-1 rolled onto it's left side  
 9 as P-1 was being partially ejected. V-1 came to rest on it's left side on top of P-1.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
J. A. SLATES	019524	06/03/2009		

**OFFICE OF THE CORONER – MENDOCINO COUNTY**  
**THOMAS D. ALLMAN, CORONER**  
**Dep. Lockart, Badge #2134, Investigator**  
**Jason K.T. Trent, MD, Pathologist**

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**Necropsy Report**

**Case No: 158-2009**

**NAME:** (b)(3):CPSA

**DATE & HOUR OF NECROPSY:** 06/08/2009 at 0820 hours

**AGE:** 84

**ETHNICITY:** Caucasian

**SEX:** Male

**HEIGHT:** 5 ft. 4 in.

**WEIGHT:** 183 lbs.

The necropsy is ordered by Lt. James Noe, of the Mendocino County Sheriff's Office, and is performed at Eversole Mortuary in Ukiah, California.

**EXTERNAL EXAMINATION:** The body is presented in the nude state. Rigidity is absent, and lividity is found in dependent places.

The body is that of a normally developed, elderly Caucasian man who appears his recorded age. The head contour is symmetrical, but shows extensive symmetrical acute compression trauma of his anterior face, forehead, and upper central chest. The hair is graying, centrally extremely sparse, and laterally measuring up to approximately half an inch to three-quarters of an inch in place. The forehead is smooth, but there is a poorly irregularly defined reddish-purple area of discoloration of the forehead, extending to the glabella, skipping a small portion and then extending to the tip of his nose. This similar kind of coloring is found over the zygomatic prominences, bilaterally, and significantly over the right temporal region. There is a small amount of similar discoloring on either side of the angles of the mouth. The glabella is intact. The eyelids are closed. Conjunctival sacs and scleral membranes show slight subconjunctival hemorrhage. The irides are grayish in color, with a prominent circus senilis. The pupils are round, equal, and symmetrical, measuring approximately 2 mm in diameter. There is a large amount of dirt found on his face and on his chin. The nose is centrally placed and has a compression of the anterior tip, with the discoloration as described. A stubble of beard of two or three days duration is found on his face. The lips are dark purple in color, and covered by dirt and compression. There is dirt found within the oral cavity. It covers the anterior teeth, with black, muddy, dried dirt. Similar material is found within the oral cavity. The teeth

are present, except for the lower gum, which is edentulous. The upper gum has prosthetic teeth. The ears are laterally placed.

The neck is symmetrical and the trachea is palpable in the midline.

Chest diameter appears to be within normal limits. There are almost vertical compression marks on his central sternal skin and immediately to the left of the midline. The abdomen is markedly protuberant. It appears to be rather tense. No surgical scars are identified. There appears to be a surgical scar on the skin overlying the distal sternum. It is located 22 cm below the suprasternal notch. It measures approximately 3 cm in length.

The upper extremities are bilaterally symmetrical. Prominent sun tanning is evident on the forearms and the lower arms, bilaterally. There are some acute, dry, contusion scrapes, and disruption of the left elbow and the dorsum of the right hand. The hands, fingers, and fingertips are intact. The fingernails overhang by as much as an eighth of an inch, and are markedly dirty.

External genitalia appear to be that of a circumcised male. Two testes are palpable in the scrotum.

Lower extremities are bilaterally symmetrical. Small, acute, scrape contusions are found over the knees, and on the dorsal surface of the right foreleg, centered approximately 21 cm above the right heel. They are reddish-brown in color. No ankle edema is present. Pedal hygiene is good. The back shows no significant abnormalities.

**INTERNAL EXAMINATION:** The panniculus measures 3.2 cm in thickness in the mid abdomen. The pleural cavities contain acute blood, estimated at 1 L on the left, and 1.5 L on the right. This is due to traumatic transection of the inferior vena cava, with rupture of the pericardial sac. The remaining pleurae show multi focal bilateral left and right acute rib fractures. The pericardial sac is torn on the left side. The abdominal cavity has no fluids or adhesions. There is traumatic fracture of the vertebral body at T10, with spearing of the underlying spinal cord. The thoracoabdominal organs are in their usual positions, and the diaphragms appear normally elevated. The subcutaneous breast tissues show focal intercostal hemorrhages, due to superficial fractures of the left and right ribs.

**NECK ORGANS:** The neck organs are dissected after the thoracoabdominal and cranial contents are examined. The superficial and deep muscles of the neck are bilaterally symmetrical. The thyroid gland is brown in color, symmetrical, and shows no abnormalities. The hyoid bone, thyroid and cricoid cartilages are intact. The mucosa of the larynx and trachea is unobstructed, but there is a great amount of dirt and mud in the oral cavity. The prevertebral fascia and underlying cervical vertebrae are intact.

**CARDIOVASCULAR SYSTEM:** The heart weighs 388 grams. The epicardium is

glistening, shiny, and the cardiac contour is moderately enlarged. There is an increased amount of circumferential fat surrounding the entire heart. The coronary arteries follow a symmetrical distribution and show multi focal areas of mural calcification, with stenosis no greater than 10 percent. The myocardium is a uniform tan-brown in color, and shows no lesions. The left and right ventricles measure 1.2 and 0.4 cm, respectively. The chambers are mildly to moderately dilated. The endocardium, chordae and papillary muscles show no anatomic abnormalities. The valves are grossly unremarkable. The aorta and its major branches follow normal pathways and show moderate atherosclerotic change, with diffuse multi focal mural calcification. The vena cava and major veins show traumatic transection of the insertion of the inferior vena cava into the right heart.

**LUNGS:** The right and left lungs weigh 290 and 288 grams, respectively. There is minimal congestion. Prominent pulmonary anthracosis is found, bilaterally. There is a focus of acute pulmonary hemorrhage in the left lower lobe. No areas of consolidation or atelectasis are present. The tracheobronchial tree is gray-white in color, and unobstructed. The pulmonary vessels contain no thromboemboli.

**HEPATOBIILIARY SYSTEM:** The liver weighs 1164 grams. Its capsule is intact and smooth and pale brown in color. On sectioning, no congestion is present. The gallbladder is present and contains 5 mL of orange watery bile. The biliary tract is patent.

**HEMATOPOIETIC SYSTEM:** The spleen weighs 134 grams. Its capsule is intact and smooth and gray in color. On sectioning, it is reddish-pink in color, and exudes virtually no blood. The thoracoabdominal and cervical lymph nodes are enlarged and black.

**ENDOCRINE SYSTEM:** The thyroid gland, adrenal glands and pancreas are grossly unremarkable.

**GASTROINTESTINAL SYSTEM:** The oropharynx and esophagus have an intact mucosa and have a small amount of regurgitated gastric material. The mucosa, wall and serosa of the stomach, duodenum, jejunum, ileum and colon show no abnormalities. The stomach contains approximately 200 grams of food. The appendix is present.

**GENITOURINARY SYSTEM:** The right and left kidneys weigh 142 and 174 grams, respectively. The renal capsules strip with ease revealing a pale tan smooth cortical surface. There are two simple cysts of the cortex of the left kidney. They each measure between 2 and 3 cm in greatest dimension. They are filled with clear colorless fluid and have smooth inner surfaces. On sectioning, the cortices are not decreased in thickness. The corticomedullary junction is well demarcated, and the pyramids and papillae show no changes. The calices and pelves are not dilated, and the ureters are patent to the urinary bladder, which contains less than 5 mL of clear yellow urine. The bladder mucosa and wall are grossly unremarkable.

**MUSCULOSKELETAL SYSTEM:** The muscles are bilaterally symmetrical and show

NAME: (b)(3):CPSA  
Section 25(c)

CASE NO: 158-2009

no abnormalities. The skeleton is normally formed, and the only evidence of fractures are the multi focal fractures of the anterior ribs.

HEAD & CENTRAL NERVOUS SYSTEM: Not further examined.

**DIAGNOSIS:**

1. COMPRESSION OF FACE, WITH DIRT IN NOSE AND MOUTH
2. SUPERFICIAL CONTUSIONS OF FACE
3. TRAUMATIC TRANSECTION OF INFERIOR VENA CAVA
4. HEMOTHORAX, BILATERAL, LEFT - 1 L; RIGHT - 1.5 L
5. TRAUMATIC TEAR OF PERICARDIUM
6. TRAUMATIC TEAR OF VERTEBRAL BODY AT T10
7. PULMONARY HEMORRHAGE, LEFT LUNG, SMALL
8. RENAL CORTICAL CYSTS, (2), LEFT KIDNEY
9. PULMONARY ANTHRACOSIS, BILATERAL, MODERATE
10. DILATED CARDIOMEGALY, 388 GRAMS
11. CALCIFIC CORONARY ARTERY STENOSIS, MULTI FOCAL, UP TO 10 PERCENT

Specimens to Pathology: Heart, lung, liver, spleen, kidney, pancreas

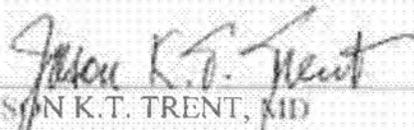
Specimens to Toxicology: Central blood

Deputy Sheriffs present: None

Others: California Highway Patrol Officers Slate, Badge #19524  
and Denham, Badge #12485

X-Rays: None taken

Photographs: Taken and kept by the California Highway Patrol Officers

  
JASON K.T. TRENT, MD  
Forensic Pathologist

JKTT/tt

## CAUSE OF DEATH

NAME: (b)(3):CPSA Section 25  
(c)

CASE NO: 158-2009

COUNTY: MENDOCINO

DATE: 07/07/2009

Based on autopsy and toxicological investigation, the **CAUSE OF DEATH** is determined to be:

EXSANGUINATION

Due to: TRAUMATIC TRANSECTION OF INFERIOR VENA CAVA  
WITH COMPRESSION ASPHYXIA

  
Jason K.T. Trent, MD  
Forensic Pathologist

jk1/11





# Valley Toxicology Service, Inc.

Mail to: P.O. Box 427, West Sacramento, California 95691 (916) 371-5440 (800) 521-0372  
Location: 2401 Port Street, West Sacramento, California 95691 FAX: (916) 371-8660  
Divisions: Quiger Laboratory Valtox Laboratory

Jon W. Knapp  
President

## \*\*\*\* TOXICOLOGY REPORT \*\*\*\*

Acc. No 09-005107 Code A  
Subject (b)(3):CPSA Section  
Offense 23152 Alcohol No. A09-2448  
Agency 38C Agency No. 09127552  
Date Taken 6/8/2009 Date Received 6/11/2009 Via FED EX Samples Submitted Blood  
Comment CONTROL# 10960771

## \*\*\* FORENSIC ALCOHOL ANALYSIS \*\*\*

Blood

.00 %

Analyst

Michelle D Cadorna

Michelle Cadorna

Date Completed

6/22/2009

*Report received from Valley Toxicology Service, Inc.*

*For NMS WO#*

09127552

COR#  
Coroner's Investigation

Classification: Male Adult

Victim: (b)(3):CPSA Section 25(c)

Narrative:

On 06/03/2009 at 1350 hours, I was dispatched to 9200 Gibson Ln, Potter Valley CA. to conduct a Coroner's investigation in the death of Richard Alvin Wood, age eight-five. Dispatch also notified Sgt. Scott of the Coroner's investigation.

I arrived on scene to find Potter Valley (b)(6) (Chief 6300) on scene. Pauli (Chief 6300) provided me with the following statement in summary:

(b)(6) (Chief 6300) advised me that he wife (b)(6), had called him at approximately 1338 hours, and told him a neighbor; (b)(3):CPSA Secti was involved in an accident on the ranch, and to come. (b)(6) (Chief 6300) said that he responded to the scene of the accident at 1343 hours, and saw the decedent lying underneath the Arctic-Cat Side-by-Side (ATV). Pauli (Chief 6300) said he assisted his wife along with ranch hand, (b)(6) lift the Arctic-Cat side-by-side off decedent and pulled him free. (b)(6) (Chief 6300) further stated that he noticed no signs of life and started CPR, but his EFFORTS met with negative results and he called the time of death at 1410 hrs.

(b)(6) (Chief 6300) said California Highway Patrol and Mendocino Sheriffs Office were called to the scene.

I viewed the decedent lying supine on the ground approximately five feet behind the Arctic cat, and death was obvious. The decedent was clothed blue pants supported by suspenders, blue tee shirt, white tennis shoes and white socks. I also observed abrasions on the decedent face, left lower forearm and left elbow, which had dried blood. Decedent also had dirt and dried grass in his mouth, Nose and on his face. The right upper corner of decedent's lip appeared to be cut.

In viewing the scene of the accident it appears that the decedent was driving his Arctic cat eastbound down a small hill and was unable to negotiate a right turn and in doing so the right-front and right-rear wheels went over an embankment causing the Arctic cat to turnover and eject the decedent out the left side of the Arctic cat which then rolling on top of him. The decedent was not wearing a seatbelt or a helmet at the time of the accident. The decedent was pronounced at the scene due to the injuries he sustained in the accident.

I was advised by Sgt. Barney not to order a post as he would handle ordering it.

See forthcoming supplemental report by Deputy Denton for additional information regarding the incident.

Reported by: [Signature]

ID: 7134 Date: 06/04/09

Reviewed by: [Signature]

ID: 1157 Date: 06-04-2009

COR#  
Coroner's Investigation

Classification: Male Adult

Victim: (b)(3):CPSA Section 25(c)

Narrative: SUPPLEMENTAL REPORT

On 6/3/09 at 1350 hours, I responded (Deputy Denton 1209) with Deputy Lockart to assist him with his investigation.

When I arrived I contacted (b)(6) who told me the following. Janet said ranch worker (b)(6) alerted her, that the Decedent had rolled his ATV and was trapped under the machine. (b)(6) said the decedent was retired and his sons had recently purchased the ATV for him. (b)(6) said that the decedent drove on the ranch most days.

(b)(6) said when she responded to the scene of the accident she observed the decedent laying under the ATV. (b)(6) said she attempted to lift the machine from the decedent but was unable. Janet said she called her husband (b)(6) (Chief 6300) to come and help her. (b)(6) told me she was very good friends with the decedent and his family and said she would go to the decedent's residence (b)(6) and inform the next of kin (b)(6) of the accident.

I took multiple photos of the accident as well as the decedent and later placed a CD containing the photos into MCSO Coroner's evidence.

At 1510 hours, (b)(6) of Eversole Mortuary arrived and transported the decedent to Eversole Mortuary (462-2206). Deputy Lockart completed his investigation and we proceeded to the Wood residence to contact Pearl Wood.

When we arrived we contacted (b)(6) and several family members behind the residence under a covered porch. I spoke to (b)(6) granddaughter in-law (b)(6). I asked Wood if she was aware of any medical problems the decedent might have suffered from. (b)(6) told me the decedent's legs didn't work well and explained that he had a block of (b)(6) under his left foot on the ATV so he didn't have to lift it to high. (b)(6) also told me the decedent has had several "blackout spells" in the past several years. (b)(6) said the decedent had maybe one or two spells a year. (b)(6) did say the decedent once had a blackout while driving the ATV.

I then spoke to (b)(6) and inquired as to the decedent's primary care physician and any ailments the decedent might have suffered from. (b)(6) said the decedent took a baby aspirin everyday and that was the only medication he took. (b)(6) said the decedent's physician was (b)(6) M.D and that he last saw Dr. (b)(3):C approximately two months ago. (b)(6) said the decedent had an appointment to see (b)(3):CPSA on 6/4/09. Deputy Lockart provided (b)(6) with a Sheriff's Office sympathy card and we concluded our notification. I provided (b)(6) with my business card and Sgt. Barney's phone number prior to leaving. It should be noted Pearl had five family members with her when we left the residence, three of the family member live within a mile.

Reported by: CS Denton ID 1209 Date: 06/04/09

Reviewed by: Sgt. Barney ID 457 Date: 06-04-2009

When I returned to the Sheriff's Office I contacted Dr. Hanna's office and inquired about the decedent's medical history. Hanna said the decedent suffered from chronic obstructive pulmonary disease (COPD) and hyper cholesterol. Hanna was unable to give cause of death but said he would fax the decedent's medical records to the Sheriff's Office.

Reported by: \_\_\_\_\_

ID 1209 Date: 06/04/09

Reviewed by: Sgt. 

ID 1157 Date 06-04-2009

ISSUE 48 AUG 27 2009 UkiahDailyJournal.com

X098 0652 A

Potter Valley man dies in ATV accident

Ukiah Daily Journal Staff

Updated: 06/05/2009 12:02:51 AM PDT

An 84-year-old Potter Valley man died Wednesday due to injuries he sustained when the all-terrain-vehicle he drove rolled after he missed a turn.

According to the California Highway Patrol, (b)(6) (b)(6) drove down a mowed grass hill and was then not able to make a right-hand turn onto a dirt road.

The accident occurred about 1:45 p.m. at 9600 Gibson Lane, Potter Valley, the CHP stated

The 2008 Arctic Cat Prowler went over the east edge of the road before rolling onto its left side, with Wood underneath the vehicle.

6/3/2009

CA

84 m

Product case = 5044

(ARCTIC CAT Prowler)

Advertisement

Advertisement for Florida Tech University Online featuring a man thinking and text: 'Bring the Classroom to Your Home With a Degree Online From Florida Tech'.

Print Powered By Form Dynamics



This investigation was initiated through the receipt of a newspaper article that reported three victims being injured as a result of a utility vehicle rolling over.

Information for this report was gathered from the official police report (Exhibit 2), photographs provided by the police (Exhibit 3), and the fire rescue report (Exhibit 4).

Victim 1, the driver of the utility vehicle is a 37 year old male. Victim 2, a 24 year old male was seated to the right of the driver. Victim 3, a 39 year old male was seated to the right of Victim 2.

On August 9, 2009, Victim 2 reported that the three victims shared a 12-pack of beer before leaving the residence that morning.

The police report indicates that at approximately 10:24am, the three men were riding on the front seat of the utility vehicle and the driver was purposefully weaving right and left while traveling on a dirt road causing the utility vehicle to "fishtail." This action caused the utility vehicle to roll over onto the passenger side and continue to roll until it settled on the driver's side.

None of the victims were wearing a seat belt or helmets while riding inside the utility vehicle.

Victim 1 reported to police that he was not the driver, although he was identified as the driver by the other victims. Victim 1 reported that all three victims had a turn to drive the utility vehicle the morning of the incident. Victim 1 could not remember being the driver when the utility vehicle rolled over.

Victim 1 was partially ejected from the utility vehicle during the incident and sustained head injuries. Emergency medical services transported Victim 1 to the local hospital where he received staples in the back of his head.

Victim 2 was partially ejected from the utility vehicle during the incident. Victim 2 sustained abrasions on his right arm, but refused medical treatment offered to him at the incident site.

Victim 3 was ejected from the utility vehicle during the incident. He was found unresponsive by emergency medical personnel. Victim 3 was transported by helicopter to the local hospital. He sustained life threatening injuries and was in critical condition upon arrival to the hospital. He remained in the hospital for five days after the incident.

This investigator made several attempts to contact the victims to gather more information. However, none of the victims responded to a letters sent to the addresses provided on the police report or the business card left by this investigator at their homes. A copy of the letter sent to the victims is included as Exhibit 5.

**Per the Compliance Officer's request, the following questions were addressed during the investigation and the answers are noted as follows:**

- 1. Provide the terrain type for the incident (grass, pavement, gravel, etc.) and also indicate if the terrain is flat, sloped, etc.**

The utility vehicle was traveling on a flat dirt road.

- 2. Determine if the driver and/or passengers were wearing seat belts. If they were wearing seat belts, please note if the driver and/or passengers were ejected (either partially or fully) during the incident.**

Neither the driver nor the passengers were wearing seat belts.

- 3. Determine if the driver and/or passengers were wearing helmets.**

None of the victims were wearing helmets.

- 4. Determine ages of the driver and all passengers, and list each person by age and location (ex. Driver 16yom, Right Front Passenger 15yof, etc.)**

Driver- 37yom, Center Front Passenger 24yom, and Right Front Passenger 39yom

- 5. Determine the vehicle's speed at time of incident. If the exact speed is not available, please provide a range if possible (e.g., between 10 – 20 mph)**

The official police report does not indicate the possible speed.

- 6. Determine if the driver was making a turn at the time of incident and, if so, in what direction the turn was being made. Also, please note any other reported driver actions at the time of the incident (e.g., braking, etc.).**

The driver was purposefully weaving right and left while traveling down a dirt road causing the utility vehicle to "fishtail."

- 7. Determine if the vehicle had aftermarket modifications.**

Unknown

- 8. Determine the make, model, and model year of the vehicle. If possible, please provide complete product identification information, including, brand, date manufactured, date of purchase, place of purchase, model/serial numbers, cost, etc.**

The utility vehicle is a 2008 Arctic Cat Prowler XT 650 H1. Serial Number: 4UF06MPV06T3Q

9. **On the cover sheet (Form 182), please list the vehicle manufacturer (e.g., “Yamaha”) in Block 10b or Block 11b, and the vehicle model (e.g., “Rhino”) in Block 10c or Block 11c.**

**10. Determine if the vehicle rolled or tipped over.**

The utility vehicle rolled over and the final resting position was on the driver’s side.

**11. Determine the number of riders on the vehicle at time of incident.**

Three riders at the time of the incident.

**12. Please determine if anyone was killed or injured in the incident. For each victim, please note the following:**

- **Whether the victim was the driver or a passenger. If the victim was a passenger, please note the victim’s position in the vehicle (e.g., right front seat).**
  - **Whether the vehicle landed on or crushed the victim.**
  - **Whether the victim was killed or injured.**
  - **If the victim was injured, please note the nature of the injury.**
- 
- The driver was partially ejected from the utility vehicle during the incident and sustained head injuries.
  - The center front passenger was partially ejected from the utility vehicle during the incident and sustained abrasions on his right arm.
  - The right front passenger was ejected from the utility vehicle during the incident. He was found unresponsive by emergency medical personnel. He was transported by helicopter to the local hospital. He sustained life threatening injuries and was in critical condition upon arrival to the hospital. He remained in the hospital for several days after the incident. This investigator made several attempts to contact him to gather more information regarding the nature of his injuries as a result of the incident. However, he did not respond to a letter sent to the address provided on the police report nor the business card left by this investigator at his home.

### **Product Identification**

The product is a 2008 Arctic Cat Prowler XT 650 H1. Serial Number: 4UF06MPV06T3Q.

Labeling reads in part: "ARCTIC CAT"\*\*\*\*"PROWLER XT"\*\*\*\*"MADE IN USA"\*\*\*\*"650 HI"\*\*\*\*"WARNING"\*\*\*\*"Vehicle rollover could cause severe INJURY or DEATH"\*\*\*\*"This structure is NOT a certified Rollover Protective Structure (ROPS) and will not protect occupants in accidents and rollovers."\*\*\*\*"WARNING"\*\*\*\*"Improper use can result in SEVERE INJURY or DEATH"\*\*\*\*"Vehicle capacity: 1 operator and 1 passenger"\*\*\*\*"Operators must be 16 years or older, have a valid driver's license and minors must be supervised by an adult"\*\*\*\*"NEVER use with drugs or alcohol"\*\*\*\*"Use proper driving techniques to avoid overturns on hills, rough terrain, and in turns"\*\*\*\*"NEVER operate-through water deeper than floorboard or fast flowing water – speeds too fast for your skills or the conditions"\*\*\*\*"ALWAYS use an approved helmet and protective gear"\*\*\*\*"NEVER use on public highways where a collision with cars or trucks can occur"\*\*\*\*"WARNING"\*\*\*\*"SEVERE INJURY or DEATH can result if you ignore the following: -Maximum load in cargo bed 600lbs (272kg) -Be sure cargo is secured, a loose load could shift and change handling unexpectedly -Keep weight in the cargo tied centered, low and forward. Top heavy load increase the risk of overturn. – Never carry passengers in cargo bed."\*\*\*\*

### **Manufacturer**

Arctic Cat Inc.  
601 Brooks Avenue South  
Thief River Falls, MN 56701  
Phone: 218-681-8558  
Fax: 218-681-3162  
www.arcticcat.com

### **Exhibits**

- Exhibit 1      Contact Information
- Exhibit 2      Official Police Report
- Exhibit 3      Photographs provided by Police (30)
- Exhibit 4      Fire Rescue Report
- Exhibit 5      Letter sent to Victims

**Contact Information**

William Byrd, Driver  
2175 CR 13A  
Elkton, FL 32033  
Tel. 904-692-1339  
September 2, 2009

(b)(3):CPSA Section 25(c),(b)(6)

St. Johns County Sheriff Office  
4015 Lewis Speedway  
St. Augustine, FL 32084  
Tel. 904-824-8304  
September 1, 2009

St. Johns County Fire Rescue  
3657 Gaines Rd.  
St. Augustine, FL 32095  
Tel. 904-209-1700  
September 1, 2009

(b)(3):CPSA Section 25(c),(b)(6)

FLORIDA TRAFFIC CRASH REPORT LONG FORM

DO NOT WRITE IN THIS SPACE

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

Time & Location section containing Date of Crash (8/9/2009), Time of Crash (10:24 AM), Time Officer Notified (10:27 AM), Time Officer Arrived (10:41 AM), Invest. Agency Report Number (SJSO09OFF008638), HSMV Crash Report Number (80266016), County/City Code (20/00), City or Town (ST AUGUSTINE), and Intersection (PRIVATE DIRT ROAD, BARTRAM A CR 13A/ CR 214).

Driver Information section containing Driver Action (1 Phantom), Year (03), Make (ARCT), Type (13), Use (77), Vehicle License Number (NONE), State, and Vehicle Identification Number (4UF06MPV06T3Q).

Vehicle Section 1 containing Vehicle Traveling (N, S, E, W), On/At, Est. MPH, Posted Speed, Est. Vehicle Damage (\$2,000), Disabling/Functional/No Damage, and EST. Trailer Damage.

Insurance and Ownership section containing Motor Vehicle Insurance Company (NONE ON FILE), Policy Number (00000000000000), and Vehicle Removed By (OWNER).

Owner Information section containing Name of Vehicle Owner, Current Address, City and State, and Zip Code.

Owner Information section containing Name of Owner (Trailer or Towed Vehicle), Current Address, City and State, and Zip Code.

Owner Information section containing Name of Motor Carrier (Commercial vehicle Only), Current Address, City, State and Zip Code, and US DOT or ICC MC Identification Numbers.

Driver Information section containing Name of Driver (take From Driver License) / PEDESTRIAN, Current Address, City & State / Zip Code, and Date of Birth (05/02/72).

Physical Characteristics section containing Sex (1), Race (1), Height (5), Weight (1), and Eyes (3).

Hazardous Materials section containing HAZARDOUS MATERIALS BEING TRANSPORTED (2), PLACARDED (2), and WAS HAZARDOUS MATERIAL SPILLED? (2).

Driver Information section containing Driver Action, Year, Make, Type, Use, Vehicle License Number, State, and Vehicle Identification Number.

Vehicle Section 2 containing Vehicle Traveling, On/At, Est. MPH, Posted Speed, Est. Vehicle Damage, Disabling/Functional/No Damage, and EST. Trailer Damage.

Insurance and Ownership section containing Motor Vehicle Insurance Company, Policy Number, and Vehicle Removed By.

Owner Information section containing Name of Vehicle Owner, Current Address, City and State, and Zip Code.

Owner Information section containing Name of Owner (Trailer or Towed Vehicle), Current Address, City and State, and Zip Code.

Owner Information section containing Name of Motor Carrier (Commercial vehicle Only), Current Address, City, State and Zip Code, and US DOT or ICC MC Identification Numbers.

Driver Information section containing Name of Driver (take From Driver License) / PEDESTRIAN, Current Address, City & State / Zip Code, and Date of Birth.

Physical Characteristics section containing Driver License Number, State, DL Type, Reg. End., ALC/DRUG TEST TYPE, RESULTS, ALC/DRUG PHYS DEF, RES., RACE, SEX, INJ., S. EQUIP., and EJECT.

Hazardous Materials section containing HAZARDOUS MATERIALS BEING TRANSPORTED, PLACARDED, and WAS HAZARDOUS MATERIAL SPILLED?.

Code Information table with columns: VEHICLE TYPE, VEHICLE USE, TRAILER TYPE, RESIDENCE (Driver Only), PHYSICAL DEFECTS, ALCOHOL / DRUG USE, LOCATION IN VEHICLE, and EJECTED.



**FLORIDA TRAFFIC CRASH REPORT**

**NARRATIVE / DIAGRAM**

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES TRAFFIC CRASH RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

DO NOT WRITE IN THIS SPACE

TIME EMS NOTIFIED (FATALITIES ONLY) <input type="checkbox"/> AM <input type="checkbox"/> PM	TIME EMS ARRIVED (FATALITIES ONLY) <input type="checkbox"/> AM <input type="checkbox"/> PM	DATE OF CRASH 8/9/2009	COUNTY / CITY CODE 20 / 00	INVEST. AGENCY REPORT NUMBER SJSO09OFF008638	HSMV CRASH REPORT NUMBER 80266016
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(NARRATIVE)

V-1, AN ARCTIC CAT ALL TERRAIN TYPE VEHICLE, WAS WESTBOUND ON BARTRAM AIR PARK PROPERTY ON A PRIVATE DIRT ROAD, APPROXIMATELY 1.5 MILES WEST OF COUNTY ROAD 13A. V-1 WAS OCCUPIED BY A DRIVER AND 2 OCCUPANTS. AS V-1 TRAVELED WEST, THE DRIVER LOST CONTROL OF THE VEHICLE AFTER IT TRAVELED BACK AND FORTH ON THE DIRT ROAD. THIS VEHICULAR MOVEMENT THEN CAUSED THE VEHICLE TO ROTATE IN A COUNTER CLOCKWISE MOTION. THE VEHICLE THEN ROLLED ONTO ITS PASSENGERS SIDE. THE PASSENGERS SIDE OF THE VEHICLES OVERHEAD TOP CANOPY MADE CONTACT WITH THE GROUND. THE VEHICLE CONTINUED TO ROLL AND CAME TO FINAL REST ON ITS DRIVERS SIDE, FACING IN A SOUTHERLY DIRECTION, ALONG THE SOUTH SIDE OF THE DIRT ROAD. DEPUTY G. DORAN AND FIRE RESCUE WERE THE FIRST UNITS ON THE SCENE OF THE CRASH. ACCORDING TO DEPUTY G. DORAN WHEN HE ARRIVED ALONG WITH FIRE RESCUE UNIT #8, HE OBSERVED THE VEHICLE RESTING ON ITS LEFT SIDE, WITH THE ROOF TOP (CANOPY) FACING EAST. TWO MALE SUBJECTS WHICH WERE LATER IDENTIFIED AS (b)(3):CPSA Section 25(c) WERE STANDING OVER A MALE SUBJECT WHICH WAS LAYING ON THE GROUND NEAR THE VEHICLE. THIS SUBJECT WHICH WAS LATER IDENTIFIED AS (b)(3):CPSA Secti WAS UNRESPONSIVE WITH HIS HEAD FACING NORTH AND HIS FEET TO THE SOUTH. FIRE RESCUE BEGAN TREATING THE SUBJECTS. A TRAUMA ALERT WAS CALLED DUE TO R. DRAWDYS INJURIES AND AN AIR TRANSPORT UNIT WAS ENROUTE. UPON ARRIVAL OF THE AIR TRANSPORT UNIT, R. DRAWDY WAS AIRLIFTED TO SHANDS JACKSONVILLE IN CRITICAL CONDITION. (b)(6) WAS GROUND TRANSPORTED TO FLAGLER HOSPITAL BY FIRE RESCUE UNIT #5 WITH NON LIFE THREATENING INJURIES AND R. (b)(6) REFUSED FIRE RESCUE TREATMENT. (b)(6) HAD ABRASIONS TO HIS RIGHT ARMS AND SHOULDER AND SEEMED TO HAVE A DIFFICULT TIME MOVING IT. I ASKED (b)(6) WHAT HAPPENED AND HE SAID THAT (b)(6) WAS DRIVING THE VEHICLE AND PRIOR TO THE CRASH WAS PURPOSELY WEAVING BACK AND FORTH ON THE DIRT ROAD, MAKING THE VEHICLE FISHTAIL. HE SAID THAT (b)(6) THEN LOST CONTROL OF THE VEHICLE AND IT OVERTURNED. HE SAID THAT HE WAS SITTING IN THE MIDDLE AND THAT (b)(3):CPS WAS THE OTHER PASSENGER SITTING TO THE RIGHT OF HIM. HE SAID THAT ALL THREE MEN HAD SHARED A 12 PACK OF BEER PRIOR TO LEAVING THEIR RESIDENCE THAT MORNING. DEPUTY G. DORAN COMPLETED A SWORN AFFIDAVIT WHICH (b)(6) SIGNED. (b)(6) SAID THAT HE COULD NOT WRITE DUE TO HIS ARM INJURY. THE VEHICLE WAS OUTLINED IN ORANGE SPRAY PAINT. CRASH SCENE MEASUREMENTS WERE TAKEN USING AN LT1 20- ULTRALYTE LASER, SERIAL # UX005814. THE CRASH OCCURED IN BETWEEN TWO POWERPOLES AS WELL AS TWO WHITE ROAD MARKERS. THE MARKERS WERE NUMBERED 16/17 AND 17/18. POWERPOLE 1 WAS

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP	EJECT
1	01	BRYAN D CANNON	2730 JOE ASHTON RD	ST AUGUSTINE FL	32092	09/04/84	1	1	2	3	1	3
1	02	RONALD E DRAWDY	2730 JOE ASHTON RD	ST AUGUSTINE FL	32092	12/16/69	1	1	3	4	1	2
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP	EJECT

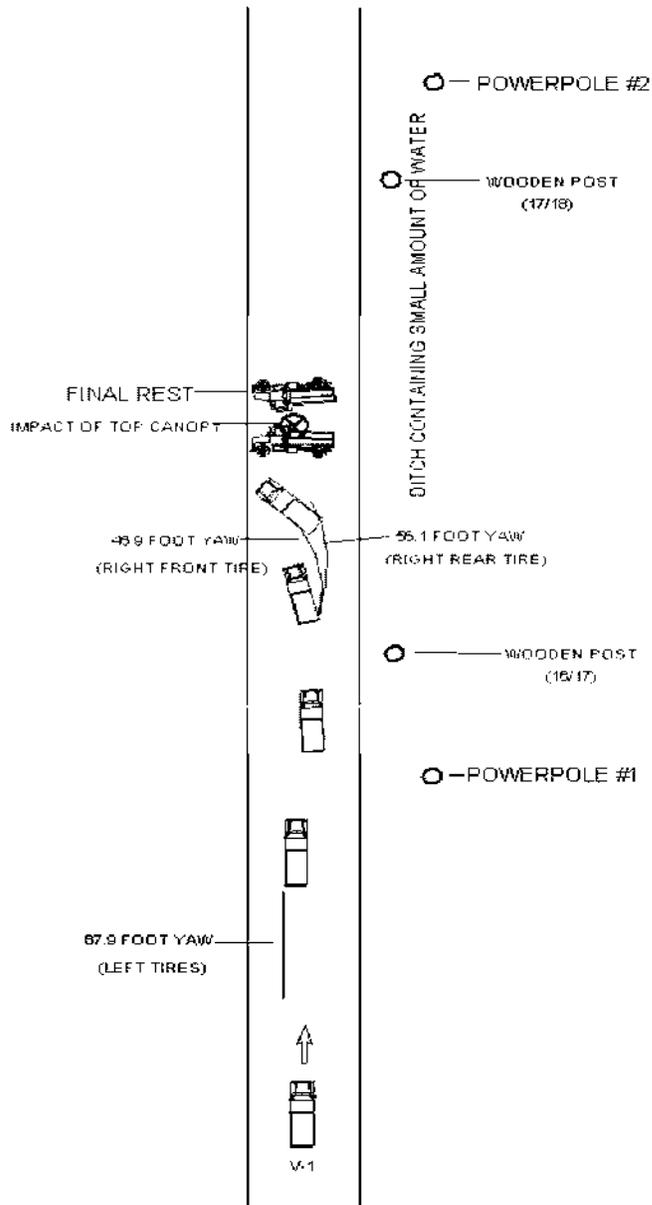
Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

WITNESS NAME (1)	CURRENT ADDRESS	CITY & STATE	ZIP CODE	WITNESS NAME (2)	CURRENT ADDRESS	CITY & STATE	ZIP CODE
FIRST AID GIVEN BY - NAME:	1 Physician or Nurse	2 Paramedic or EMT	3 Police Officer	INJURED TAKEN TO:	BY - NAME		
4 Certified 1st Aider	5 Other						
WAS INVESTIGATION MADE AT SCENE? 1 YES <input checked="" type="checkbox"/> 2 NO <input type="checkbox"/>	IF NO, THEN WHERE?	IS INVESTIGATION COMPLETE? 1 YES <input checked="" type="checkbox"/> 2 NO <input type="checkbox"/>	IF NO, THEN WHY?	DATE OF REPORT 8/12/2009	PHOTOS TAKEN? 1 YES <input checked="" type="checkbox"/> 2 NO <input type="checkbox"/>	IF YES, BY WHOM? 1 INVEST AGENCY <input type="checkbox"/> 2 OTHER <input type="checkbox"/>	
INVESTIGATOR - RANK & SIGNATURE DEPUTY SHERIFF DAVID ROSADO	ID / BADGE NUMBER T3447/T344	DEPARTMENT ST JOHNS COUNTY SHERIFF'S OFFICE	FHP <input type="checkbox"/>	SO <input checked="" type="checkbox"/>	CPD <input type="checkbox"/>	OTHER <input type="checkbox"/>	

DIAGRAM

INDICATE NORTH  
WITH ARROW

LARGE OPEN FIELD



NOT TO SCALE

# FLORIDA TRAFFIC CRASH REPORT

UPDATE  CONTINUATION

DO NOT WRITE IN THIS SPACE

MAIL TO: DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

DATE OF CRASH: 8/9/2009 COUNTY/CITY CODE: 20 / 00 INVEST AGENCY REPORT NUMBER: SJSO09OFF008638

HSMV CRASH REPROT NUMBER: 80266016

Section Vehicle

DRIVER ACTION: 1 Phantom, 2 Hit & Run, 3 N/A  
 TRAILER OR TOWED VEHICLE INFORMATION: TRAILER TYPE: \_\_\_\_\_  
 VEHICLE TRAVELING: N \_\_\_\_\_ S \_\_\_\_\_ E \_\_\_\_\_ W \_\_\_\_\_ ON \_\_\_\_\_ AI \_\_\_\_\_  
 EST. MPH: \_\_\_\_\_ Posted Speed: \_\_\_\_\_ EST. VEHICLE DAMAGE: 1 Disabling, 2 Functional, 3 No Damage  
 MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP): \_\_\_\_\_ POLICY NUMBER: \_\_\_\_\_ VEHICLE REMOVED BY: \_\_\_\_\_  
 NAME OF VEHICLE OWNER (Check if Same As Driver): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF OWNER (Trailer or Towed Vehicle): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF MOTOR CARRIER (Commercial vehicle Only): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY, STATE AND ZIP CODE: \_\_\_\_\_ US DOT or ICC MC IDENTIFICATION NUMBERS: \_\_\_\_\_

EST. TRAILER DAMAGE: 1 Tow Rollabon List, 2 Tow Owner's Request, 3 Driver, 4 Other

Section Pedestrian

NAME OF DRIVER (Take From Driver License) / PEDESTRIAN: \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY, STATE & ZIP CODE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 DRIVER LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_ DL TYPE: \_\_\_\_\_ REG END: \_\_\_\_\_ BAC TEST: 1 Blood, 2 Breath, 3 Urine, 4 Refused, 5 None. RESULTS: \_\_\_\_\_ AL / DRUG: \_\_\_\_\_ PHYS. DEF: \_\_\_\_\_ RES: \_\_\_\_\_ RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ INJ.: \_\_\_\_\_ S EQUIP: \_\_\_\_\_ EJECT: \_\_\_\_\_

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 Yes 2 No. PLACARDED: 1 Yes 2 No. IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOWMAS HAZARDOUS ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND. MATERIAL SPILLED?: 1 Yes 2 No. RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE: 1 Yes 2 No. DRIVER'S PHONE NO: \_\_\_\_\_

Section Vehicle

DRIVER ACTION: 1 Phantom, 2 Hit & Run, 3 N/A  
 TRAILER OR TOWED VEHICLE INFORMATION: TRAILER TYPE: \_\_\_\_\_  
 VEHICLE TRAVELING: N \_\_\_\_\_ S \_\_\_\_\_ E \_\_\_\_\_ W \_\_\_\_\_ ON \_\_\_\_\_ AI \_\_\_\_\_  
 EST. MPH: \_\_\_\_\_ Posted Speed: \_\_\_\_\_ EST. VEHICLE DAMAGE: 1 Disabling, 2 Functional, 3 No Damage  
 MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP): \_\_\_\_\_ POLICY NUMBER: \_\_\_\_\_ VEHICLE REMOVED BY: \_\_\_\_\_  
 NAME OF VEHICLE OWNER (Check if Same As Driver): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF OWNER (Trailer or Towed Vehicle): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF MOTOR CARRIER (Commercial vehicle Only): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY, STATE AND ZIP CODE: \_\_\_\_\_ US DOT or ICC MC IDENTIFICATION NUMBERS: \_\_\_\_\_

EST. TRAILER DAMAGE: 1 Tow Rollabon List, 2 Tow Owner's Request, 3 Driver, 4 Other

Section Pedestrian

DRIVER (Exactly as on Driver License) / Pedestrian: \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY & STATE / ZIP CODE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 DRIVER LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_ DL TYPE: \_\_\_\_\_ REG END: \_\_\_\_\_ BAC TEST: 1 Blood, 2 Breath, 3 Urine, 4 Refused, 5 None. RESULTS: \_\_\_\_\_ AL / DRUG: \_\_\_\_\_ PHYS. DEF: \_\_\_\_\_ RES: \_\_\_\_\_ RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ INJ.: \_\_\_\_\_ S EQUIP: \_\_\_\_\_ EJECT: \_\_\_\_\_

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 Yes 2 No. PLACARDED: 1 Yes 2 No. IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOWMAS HAZARDOUS ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND. MATERIAL SPILLED?: 1 Yes 2 No. RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE: 1 Yes 2 No. DRIVER'S PHONE NO: \_\_\_\_\_

PROPERTY DAMAGED - OTHER THAN VEHICLES: EST AMOUNT: \_\_\_\_\_ OWNER'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PROPERTY DAMAGED - OTHER THAN VEHICLES: EST AMOUNT: \_\_\_\_\_ OWNER'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PROPERTY DAMAGED - OTHER THAN VEHICLES: EST AMOUNT: \_\_\_\_\_ OWNER'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PROPERTY DAMAGED - OTHER THAN VEHICLES: EST AMOUNT: \_\_\_\_\_ OWNER'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

WITNESS NAME (1): \_\_\_\_\_ CURRENT ADDRESS: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ WITNESS NAME (2): \_\_\_\_\_ CURRENT ADDRESS: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

WAS INVESTIGATION MADE AT SCENE? 1 Yes, 2 No. IF NO, THEN WHERE? 1  
 IS INVESTIGATION COMPLETE? 1 Yes, 2 No. IF NO, THEN WHY? 1  
 DATE OF REPORT: 8/12/2009  
 PHOTOS TAKEN? 1 - Yes, 2 - No. 2  
 IF YES, BY WHOM? 1 Investigating Agency, 2 Other. X  
 INVESTIGATOR - RANK AND SIGNATURE: DEPUTY SHERIFF DAVID ROSADO  
 ID / BADGE NUMBER: T3447/T344 DEPARTMENT: ST JOHNS COUNTY SHERIFF'S OFFICE  
 FHP SO CPD OTHER: X

CONTRIBUTING CAUSES - DRIVER/PEDESTRIAN		VEHICLE DEFECT	VEHICLE MOVEMENT	VEHICLE SPECIAL FUNCTIONS	
01 No Improper Driving / Action		01 No Defects	01 Straight Ahead	1 None	
02 Careless Driving (Explain in Narrative)		02 Def Brakes	02 Slowing / Stopped / Stalled	2 Farm	
03 Failed to Yield Right-of-Way		03 Worn / Smooth Tires	03 Making Left Turn	3 Police Pursuit	
04 Improper Backing		04 Defective / Improper Lights	04 Backing	4 Recreational	
05 Improper Lane Change		05 Puncture / Blowout	05 Making Right Turn	5 Emergency Operation	
06 Improper Turn		06 Steering Mech	06 Changing Lanes	6 Construction / Maintenance	
07 Alcohol-Under Influence		07 Windshield Wipers	07 Entering/Leaving Parking Space	SOURCE OF CARRIER INFORMATION	
08 Drugs-Under Influence		08 Equipment / Vehicle Defect	08 Properly Parked	1 Not Applicable	
09 Drugs & Alcohol-Under Influence		77 All Other (Explain in Narrative)	09 Improperly Parked	2 Shipping Papers	
10 Followed Too Closely	19 Improper Load		10 Making U-Turn	3 Vehicle Side	
11 Disregarded Traffic Signal	20 Disregarded Other Traffic Control	POINT OF COLLISION		4 Driver	
12 Exceeded Safe Speed Limit	21 Driving Wrong Side / Way	1 On Road		5 Other	
13 Disregarded Stop Sign	22 Floccing Police	2 Not On Road			
14 Failed to Maintain Equip / Vehicle	23 Vehicle Modified	3 Shoulder			
15 Improper Passing	24 Driver Distraction (Explain in Narrative)	4 Median			
16 Drove Left of Center	77 All Other (Explain)	5 Turn Lane / Safety Zone			
17 Exceeded Stated Speed Limit		WORK AREA			
18 Obstructing Traffic		01 None			
		02 Nearby			
		03 Entered			

FIRST / SUBSEQUENT HARMFUL EVENT(S)

01 Collision With MV in Transport (Rear End)	15 Collision with Animal	29 MV Ran Into Ditch / Culvert
02 Collision With MV in Transport (Head-on)	16 MV Hit Sign / Sign Post	30 Ran Off Road / Into Water
03 Collision With MV in Transport (Angle)	17 MV Hit Utility Pole / Light Pole	31 Overturned
04 Collision With MV in Transport (Left Turn)	18 MV Hit Guardrail	32 Occupant Fell From Vehicle
05 Collision With MV in Transport (Right Turn)	19 MV Hit Fence	33 Tractor / Trailer Jackknifed
06 Collision With MV in Transport (Sideswipe)	20 MV Hit Concrete Barrier Wall	34 Fire
07 Collision With MV in Transport (Backed Into)	21 MV Hit Bridge / Pier / Abutment / Rail	35 Explosion
08 Collision With Parked Car	22 MV Hit Tree / Shrubbery	36 Downhill Runaway
09 Collision with MV on Other Roadway	23 Collision with Construction Barricade Sign	37 Cargo Loss or Shift
10 Collision with Pedestrian	24 Collision with Traffic Gate	38 Separation of Units
11 Collision with Bicycle	25 Collision with Crash Attenuators	39 Median Crossover
12 Collision with Bicycle (Edge Lane)	26 Collision with Fixed Object Above Road	77 All Other (Explain in Narrative)
13 Collision with Moped	27 MV Hit Other Fixed Object	
14 Collision with Train	28 Collision with Moveable Object on Road	

(ADDITIONAL NARRATIVE)

LOCATED TO THE EAST OF THE CRASH AND POWERPOLE 2 WAS TO THE WEST. BOTH POLES AND MARKERS WERE LOCATED TO THE NORTH OF THE DIRT ROAD. MEASUREMENTS WERE TAKEN WHILE THE VEHICLE WAS STILL OVERTURNED ON ITS SIDE. POWERPOLE 1 MEASUREMENT WAS TAKEN FROM THE CENTER OF THE VEHICLE CANOPY, DIRECTLY AGAINST THE VEHICLE AND WAS FOUND TO BE 145.5 FT. POWERPOLE 2 MEASUREMENT WAS TAKEN FROM THE UNDERSIDE OF THE VEHICLE IN BETWEEN THE FRONT AND REAR TIRES DIRECTLY AGAINST THE VEHICLE AND FOUND TO BE 236.3 FT. I INSPECTED THE ROAD AND FOUND TIRE TRACKS WHICH WERE CAUSED BY THE VEHICLE. PRIOR TO THE CRASH AND IN A WESTERLY DIRECTION THERE WAS AN APPROXIMATE 67.9 FOOT YAW THAT APPEARED TO BE FROM THE VEHICLES LEFT TIRES. AT THE END OF THOSE MARKS, IT APPEARED THAT THE VEHICLES WEIGHT THEN TRANSFERRED TO THE RIGHT CAUSING TWO OTHER YAW MARKS. IT APPEARED THAT THE RIGHT REAR TIRE TRACKED OUTSIDE OF THE RIGHT FRONT TIRE AS THE VEHICLE BEGAN TO ROTATE IN A COUNTER CLOCKWISE MOTION. THE RIGHT REAR TIRE YAW MEASURED APPROXIMATELY 56.1 FEET AND LEAD TO JUST EAST THE CRASH LOCATION. THE FRONT RIGHT TIRE TRACK MEASURED APPROXIMATELY 46.9 FEET AND ALSO LEAD TO THE CRASH LOCATION. THERE WAS AN APPROXIMATE 4-5 FOOT MARK THAT TRAVELED IN A NORTH/ SOUTH DIRECTION EAST OF THE CANOPY TOP WHICH APPEARED TO BE FROM THE CANOPY MAKING INITIAL CONTACT WITH THE GROUND PRIOR TO THE VEHICLE ROLLING. EVIDENCE ON THE CANOPY CORRELATED WITH THE MARK. SEVERAL PHOTOGRAPHS OF THE CRASH SCENE AS WELL AS THE PROPERTY WERE TAKEN. THERE WERE EMPTY BEERS CANS FOUND AROUND AND UNDER THE VEHICLE. A TRACTOR WAS USED TO UPRIGHT THE VEHICLE. THE OWNER OF THE, WILLIAM BYRD II, WAS NOTIFIED OF THE INCIDENT AND THAT THE VEHICLE WAS MOVED OFF OF THE MAIN DIRT ROAD AND INTO THE NEARBY FIELD SO THAT THE ROAD WAS UNOBSTRUCTED. I THEN PROCEEDED TO FLAGLER HOSPITAL AND SPOKE TO W. BYRD. HE WAS CONCIIOUS AND BREATHING AND APPEARED TO BE COHERENT AS HE SPOKE. HE SAID THAT HE HAD STAPLES IN THE BACK OF HIS HEAD WHICH WERE CAUSED FROM THE CRASH

ADDITIONAL PASSENGERS

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE SEX	LOC	INJ	S EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE SEX	LOC	INJ	S EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE SEX	LOC	INJ	S EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE SEX	LOC	INJ	S EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE SEX	LOC	INJ	S EQUIP	EJECT
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE SEX	LOC	INJ	S EQUIP	EJECT

Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

# FLORIDA TRAFFIC CRASH REPORT

UPDATE  CONTINUATION

DO NOT WRITE IN THIS SPACE

MAIL TO: DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

DATE OF CRASH: 8/9/2009 COUNTY/CITY CODE: 20 / 00 INVEST AGENCY REPORT NUMBER: SJSO09OFF008638

HSMV CRASH REPROT NUMBER: 80266016

Section Vehicle

DRIVER ACTION: 1 Phantom, 2 Hit & Run, 3 N/A. YEAR, MAKE, TYPE, USE, VEH. LICENSE NUMBER, STATE, VEHICLE IDENTIFICATION NUMBER

TRAILER OR TOWED VEHICLE INFORMATION, TRAILER TYPE



18 Undercarriage, 19 Overtum, 20 Windshield, 21 Trailer

VEHICLE TRAVELING: N, S, E, W. ON, AI. Est. MPH, Posted Speed, EST. VEHICLE DAMAGE: 1 Disabling, 2 Functional, 3 No Damage

EST. TRAILER DAMAGE, SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)

MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP), POLICY NUMBER, VEHICLE REMOVED BY

1 Tow Rotation List, 2 Tow Owner's Request, 3 Driver, 4 Other

NAME OF VEHICLE OWNER (Check if Same As Driver), CURRENT ADDRESS (Number and Street), CITY AND STATE, ZIP CODE

NAME OF OWNER (Trailer or Towed Vehicle), CURRENT ADDRESS (Number and Street), CITY AND STATE, ZIP CODE

NAME OF MOTOR CARRIER (Commercial vehicle Only), CURRENT ADDRESS (Number and Street), CITY, STATE AND ZIP CODE, US DOT or ICC MC IDENTIFICATION NUMBERS

Section Pedestrian

NAME OF DRIVER (Take From Driver License) / PEDESTRIAN, CURRENT ADDRESS (Number and Street), CITY, STATE & ZIP CODE, DATE OF BIRTH

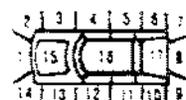
DRIVER LICENSE NUMBER, STATE, DL TYPE, REG END, BAC TEST: 1 Blood, 2 Breath, 3 Urine, 4 Refused, 5 None, RESULTS, AL / DRUG, PHYS. DEF, RES, RACE, SEX, INJ., S EQUIP, EJECT

HAZARDOUS MATERIALS BEING TRANSPORTED, PLACARDED, IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOWAS HAZARDOUS ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND, MATERIAL SPILLED?, RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE, DRIVER'S PHONE NO

Section Vehicle

DRIVER ACTION: 1 Phantom, 2 Hit & Run, 3 N/A. YEAR, MAKE, TYPE, USE, VEH. LICENSE NUMBER, STATE, VEHICLE IDENTIFICATION NUMBER

TRAILER OR TOWED VEHICLE INFORMATION, TRAILER TYPE



18 Undercarriage, 19 Overtum, 20 Windshield, 21 Trailer

VEHICLE TRAVELING: N, S, E, W. ON, AI. Est. MPH, Posted Speed, EST. VEHICLE DAMAGE: 1 Disabling, 2 Functional, 3 No Damage

EST. TRAILER DAMAGE, SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)

MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP), POLICY NUMBER, VEHICLE REMOVED BY

1 Tow Rotation List, 2 Tow Owner's Request, 3 Driver, 4 Other

NAME OF VEHICLE OWNER (Check if Same As Driver), CURRENT ADDRESS (Number and Street), CITY AND STATE, ZIP CODE

NAME OF OWNER (Trailer or Towed Vehicle), CURRENT ADDRESS (Number and Street), CITY AND STATE, ZIP CODE

NAME OF MOTOR CARRIER (Commercial vehicle Only), CURRENT ADDRESS (Number and Street), CITY, STATE AND ZIP CODE, US DOT or ICC MC IDENTIFICATION NUMBERS

Section Pedestrian

DRIVER (Exactly as on Driver License) / Pedestrian, CURRENT ADDRESS (Number and Street), CITY & STATE / ZIP CODE, DATE OF BIRTH

DRIVER LICENSE NUMBER, STATE, DL TYPE, REG END, BAC TEST: 1 Blood, 2 Breath, 3 Urine, 4 Refused, 5 None, RESULTS, AL / DRUG, PHYS. DEF, RES, RACE, SEX, INJ., S EQUIP, EJECT

HAZARDOUS MATERIALS BEING TRANSPORTED, PLACARDED, IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOWAS HAZARDOUS ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND, MATERIAL SPILLED?, RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE, DRIVER'S PHONE NO

PROPERTY DAMAGED - OTHER THAN VEHICLES, EST AMOUNT, OWNER'S NAME, ADDRESS, CITY, STATE, ZIP

PROPERTY DAMAGED - OTHER THAN VEHICLES, EST AMOUNT, OWNER'S NAME, ADDRESS, CITY, STATE, ZIP

PROPERTY DAMAGED - OTHER THAN VEHICLES, EST AMOUNT, OWNER'S NAME, ADDRESS, CITY, STATE, ZIP

PROPERTY DAMAGED - OTHER THAN VEHICLES, EST AMOUNT, OWNER'S NAME, ADDRESS, CITY, STATE, ZIP

WITNESS NAME (1), CURRENT ADDRESS, CITY & STATE, ZIP CODE, WITNESS NAME (2), CURRENT ADDRESS, CITY & STATE, ZIP CODE

WAS INVESTIGATION MADE AT SCENE? 1 Yes, 2 No, 1. IF NO, THEN WHERE? IS INVESTIGATION COMPLETE? 1 Yes, 2 No, 1. DATE OF REPORT: 8/12/2009. PHOTOS TAKEN? 1 - Yes, 2 - No, 2. IF YES, BY WHOM? 1 Investigating Agency, 2 Other, X

INVESTIGATOR - RANK AND SIGNATURE: DEPUTY SHERIFF DAVID ROSADO. ID / BADGE NUMBER: T3447/T344. DEPARTMENT: ST JOHNS COUNTY SHERIFF'S OFFICE. FHP, SO, CPD, OTHER, X

CONTRIBUTING CAUSES - DRIVER/PEDESTRIAN	VEHICLE DEFECT	VEHICLE MOVEMENT	VEHICLE SPECIAL FUNCTIONS
01 No Improper Driving / Action 02 Careless Driving (Explain in Narrative) 03 Failed to Yield Right-of-Way 04 Improper Backing 05 Improper Lane Change 06 Improper Turn 07 Alcohol-Under Influence 08 Drugs-Under Influence 09 Drugs & Alcohol-Under Influence 10 Followed Too Closely 11 Disregarded Traffic Signal 12 Exceeded Safe Speed Limit 13 Disregarded Stop Sign 14 Failed to Maintain Equip. / Vehicle 15 Improper Passing 16 Drove Left of Center 17 Exceeded Stated Speed Limit 18 Obstructing Traffic 19 Improper Load 20 Disregarded Other Traffic Control 21 Driving Wrong Side / Way 22 Fleeing Police 23 Vehicle Modified 24 Driver Distraction (Explain in Narrative) 77 All Other (Explain)	01 No Defects 02 Def. Brakes 03 Worn / Smooth Tires 04 Defective / Improper Lights 05 Puncture / Blowout 06 Steering Mesh 07 Windshield Wipers 08 Equipment / Vehicle Defect 77 All Other (Explain in Narrative) POINT OF COLLISION 1 On Road 2 Not On Road 3 Shoulder 4 Median 5 Turn Lane / Safety Zone WORK AREA 01 None 02 Nearly 03 Entered	01 Straight Ahead 02 Slowing / Stopped / Stalled 03 Making Left Turn 04 Backing 05 Making Right Turn 06 Changing Lanes 07 Entering/Leaving Parking Space 08 Properly Parked 09 Improperly Parked 10 Making U-Turn 11 Passing 12 Drivless or Runaway Veh. 77 All Other (Explain in Narrative) PEDESTRIAN ACTION 01 Crossing Not at Intersection 02 Crossing at Mid-block Crosswalk 03 Crossing at Intersection 04 Walking Along Road With Traffic 05 Walking Along Road Against Traffic 06 Working on Vehicle in Road 07 Working in Road 08 Standing/Playing in Road 09 Standing in Pedestrian Island 77 All Other (Explain) 88 Unknown	1 None 2 Farm 3 Police Pursuit 4 Recreational 5 Emergency Operation 6 Construction / Maintenance SOURCE OF CARRIER INFORMATION 1 Not Applicable 2 Shipping Papers 3 Vehicle Side 4 Driver 5 Other

FIRST / SUBSEQUENT HARMFUL EVENT(S)		
01 Collision With MV in Transport (Rear End)	15 Collision with Animal	29 MV Ran Into Ditch / Culvert
02 Collision With MV in Transport (Head-on)	16 MV Hit Sign / Sign Post	30 Ran Off Road / Into Water
03 Collision With MV in Transport (Angle)	17 MV Hit Utility Pole / Light Pole	31 Overtumed
04 Collision With MV in Transport (Left Turn)	18 MV Hit Guardrail	32 Occupant Fell From Vehicle
05 Collision With MV in Transport (Right Turn)	19 MV Hit Fence	33 Tractor / Trailer Jackknifed
06 Collision With MV in Transport (Sideswipe)	20 MV Hit Concrete Barrier Wall	34 Fire
07 Collision With MV in Transport (Backed into)	21 MV Hit Bridge / Pier / Abutment / Rail	35 Explosion
08 Collision With Parked Car	22 MV Hit Tree / Shrubbery	35 Downhill Runaway
09 Collision with MV on Other Roadway	23 Collision with Construction Barricade Sign	37 Cargo Loss or Shift
10 Collision with Pedestrian	24 Collision with Traffic Gate	38 Separation of Units
11 Collision with Bicycle	25 Collision with Crash Attenuators	39 Median Crossover
12 Collision with Bicycle (Bike Lane)	26 Collision with Fixed Object Above Road	77 All Other (Explain in Narrative)
13 Collision with Moped	27 MV Hit Other Fixed Object	
14 Collision with Train	28 Collision with Moveable Object on Road	

**(ADDITIONAL NARRATIVE)**

AND THAT HE POSSIBLY HAD SOME BROKEN RIBS. I ASKED HIM WHAT HAPPENED AND HE SAID THAT HE, R. (b)(3):CPSA Section 25(c) WERE HEADED TO THE MUD BOGGS WHICH WERE TO THE WEST OF THE CRASH LOCATION. HE SAID THAT HE DIDNT REMEMBER MUCH BUT THAT SOMEONE OTHER THAN HIM WAS DRIVING. HE SAID THAT HE WASNT SURE WHO WAS DRIVING BUT IT WAS NOT HIM. HE SAID THAT ALL HE REMEMBERED WAS TRAVELING DOWN THE DIRT ROAD. HE SAID THAT THE THREE MEN HAD BEEN SWITCHING DRIVERS ALL MORNING. I ASKED HIM IF HE HAD BEEN DRINKING AND HE SAID THAT HE HAD BEEN THE NIGHT BEFORE BUT WASNT GOING TO ANSWER ANYTHING ABOUT DRINKING THAT DAY (8/9/09). I THEN PROCEEDED TO SHANDS JACKSONVILLE WHERE I MET WITH THE FAMILY OF (b)(3):CPSA Section 25(c) WAS IN THE INTENSIVE CARE UNIT. I SPOKE TO THE ICU NURSE AND FOUND THAT (b)(3):CPSA Section 25(c) WAS STILL IN CRITICAL CONDITION. (b)(3):CPSA Section 25(c) SPOUSE WAS GIVEN THE CASE NUMBER OF THE CRASH INVESTIGATION. DEP G. DORAN COMPLETED A SWORN AFFIDAVIT.

**RESPONDING UNITS:**

Lt. B. Lee  
 Sgt. M. Ochkie  
 Sgt. R. Lindsey  
 Dep. S. Stokes  
 Dep. G. Duran  
 Dep. D. Rosado  
 Fire Rescue #5 and #8  
 Shands Jacksonville Air Transport Unit

**ADDITIONAL PASSENGERS**

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP	EJECT

Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

# FLORIDA TRAFFIC CRASH REPORT

X UPDATE CONTINUATION

DO NOT WRITE IN THIS SPACE

MAIL TO: DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

DATE OF CRASH: 8/9/2009 COUNTY/CITY CODE: 20 / 00 INVEST AGENCY REPORT NUMBER: SJSO09OFF008638

HSMV CRASH REPT NUMBER: 80266016

Section Vehicle

DRIVER ACTION: 1 Phantom, 2 Hit & Run, 3 N/A  
 TRAILER OR TOWED VEHICLE INFORMATION: TRAILER TYPE: \_\_\_\_\_  
 VEHICLE TRAVELING: N S E W ON AI  
 EST. MPH: \_\_\_\_\_ Posted Speed: \_\_\_\_\_ EST. VEHICLE DAMAGE: 1 Disabling, 2 Functional, 3 No Damage  
 MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP): \_\_\_\_\_ POLICY NUMBER: \_\_\_\_\_ VEHICLE REMOVED BY: \_\_\_\_\_  
 NAME OF VEHICLE OWNER (Check if Same As Driver): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF OWNER (Trailer or Towed Vehicle): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF MOTOR CARRIER (Commercial vehicle Only): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY, STATE AND ZIP CODE: \_\_\_\_\_ US DOT or ICC MC IDENTIFICATION NUMBERS: \_\_\_\_\_

Section Pedestrian

NAME OF DRIVER (Take From Driver License) / PEDESTRIAN: \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY, STATE & ZIP CODE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 DRIVER LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_ DL TYPE: \_\_\_\_\_ REG END: \_\_\_\_\_ BAC TEST: 1 Blood, 2 Breath, 3 Urine, 4 Refused, 5 None. RESULTS: \_\_\_\_\_ AL / DRUG: \_\_\_\_\_ PHYS. DEF: \_\_\_\_\_ RES: \_\_\_\_\_ RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ INJ.: \_\_\_\_\_ S EQUIP: \_\_\_\_\_ EJECT: \_\_\_\_\_

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 Yes 2 No PLACARDED: 1 Yes 2 No IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOWTAS HAZARDOUS ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND. MATERIAL SPILLED?: 1 Yes 2 No RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE: 1 Yes 2 No DRIVER'S PHONE NO: \_\_\_\_\_

Section Vehicle

DRIVER ACTION: 1 Phantom, 2 Hit & Run, 3 N/A  
 TRAILER OR TOWED VEHICLE INFORMATION: TRAILER TYPE: \_\_\_\_\_  
 VEHICLE TRAVELING: N S E W ON AI  
 EST. MPH: \_\_\_\_\_ Posted Speed: \_\_\_\_\_ EST. VEHICLE DAMAGE: 1 Disabling, 2 Functional, 3 No Damage  
 MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP): \_\_\_\_\_ POLICY NUMBER: \_\_\_\_\_ VEHICLE REMOVED BY: \_\_\_\_\_  
 NAME OF VEHICLE OWNER (Check if Same As Driver): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF OWNER (Trailer or Towed Vehicle): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY AND STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 NAME OF MOTOR CARRIER (Commercial vehicle Only): \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY, STATE AND ZIP CODE: \_\_\_\_\_ US DOT or ICC MC IDENTIFICATION NUMBERS: \_\_\_\_\_

Section Pedestrian

DRIVER (Exactly as on Driver License) / Pedestrian: \_\_\_\_\_ CURRENT ADDRESS (Number and Street): \_\_\_\_\_ CITY & STATE / ZIP CODE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 DRIVER LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_ DL TYPE: \_\_\_\_\_ REG END: \_\_\_\_\_ BAC TEST: 1 Blood, 2 Breath, 3 Urine, 4 Refused, 5 None. RESULTS: \_\_\_\_\_ AL / DRUG: \_\_\_\_\_ PHYS. DEF: \_\_\_\_\_ RES: \_\_\_\_\_ RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ INJ.: \_\_\_\_\_ S EQUIP: \_\_\_\_\_ EJECT: \_\_\_\_\_

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 Yes 2 No PLACARDED: 1 Yes 2 No IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOWTAS HAZARDOUS ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND. MATERIAL SPILLED?: 1 Yes 2 No RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE: 1 Yes 2 No DRIVER'S PHONE NO: \_\_\_\_\_

PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

WITNESS NAME (1): \_\_\_\_\_ CURRENT ADDRESS: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ WITNESS NAME (2): \_\_\_\_\_ CURRENT ADDRESS: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

WAS INVESTIGATION MADE AT SCENE? 1 Yes, 2 No. IF NO, THEN WHERE? 1  
 IS INVESTIGATION COMPLETE? 1 Yes, 2 No. IF NO, THEN WHY? 1  
 DATE OF REPORT: 8/13/2009 PHOTOS TAKEN? 1 - Yes, 2 - No. 2  
 IF YES, BY WHOM? 1 Investigating Agency, 2 Other. X  
 INVESTIGATOR - RANK AND SIGNATURE: DEPUTY SHERIFF DAVID ROSADO ID / BADGE NUMBER: T3447/T344 DEPARTMENT: ST JOHNS COUNTY SHERIFF'S OFFICE FHP SO CPD OTHER: X

CONTRIBUTING CAUSES - DRIVER / PEDESTRIAN	VEHICLE DEFECT	VEHICLE MOVEMENT	VEHICLE SPECIAL FUNCTIONS
01 No Improper Driving / Action 02 Careless Driving (Explain in Narrative) 03 Failed to Yield Right-of-Way 04 Improper Backing 05 Improper Lane Change 06 Improper Turn 07 Alcohol-Under Influence 08 Drugs-Under Influence 09 Drugs & Alcohol-Under Influence 10 Followed Too Closely 11 Disregarded Traffic Signal 12 Exceeded Safe Speed Limit 13 Disregarded Stop Sign 14 Failed to Maintain Equip. / Vehicle 15 Improper Passing 16 Drove Left of Center 17 Exceeded Stated Speed Limit 18 Obstructing Traffic	01 No Defects 02 Def. Brakes 03 Worn / Smooth Tires 04 Defective / Improper Lights 05 Puncture / Blowout 06 Steering Mesh 07 Windshield Wipers 08 Equipment / Vehicle Defect 77 All Other (Explain in Narrative)	01 Straight Ahead 02 Slowing / Stopped / Stalled 03 Making Left Turn 04 Backing 05 Making Right Turn 06 Changing Lanes 07 Entering/Leaving Parking Space 08 Properly Parked 09 Improperly Parked 10 Making U-Turn	1 None 2 Farm 3 Police Pursuit 4 Recreational 5 Emergency Operation 6 Construction / Maintenance SOURCE OF CARRIER INFORMATION 1 Not Applicable 2 Shipping Papers 3 Vehicle Side 4 Driver 5 Other
19 Improper Load 20 Disregarded Other Traffic Control 21 Driving Wrong Side / Way 22 Fleeing Police 23 Vehicle Modified 24 Driver Distraction (Explain in Narrative) 77 All Other (Explain)	POINT OF COLLISION 1 On Road 2 Not On Road 3 Shoulder 4 Median 5 Turn Lane / Safety Zone	PEDESTRIAN ACTION 01 Crossing Not at Intersection 02 Crossing at Mid-block Crosswalk 03 Crossing at Intersection 04 Walking Along Road With Traffic 05 Walking Along Road Against Traffic 06 Working on Vehicle in Road 07 Working in Road 08 Standing/Playing in Road 09 Standing in Pedestrian Island 77 All Other (Explain) 88 Unknown	WORK AREA 01 None 02 Nearby 03 Entered

FIRST / SUBSEQUENT HARMFUL EVENT(S)		
01 Collision With MV in Transport (Rear End) 02 Collision With MV in Transport (Head-on) 03 Collision With MV in Transport (Angle) 04 Collision With MV in Transport (Left Turn) 05 Collision With MV in Transport (Right Turn) 06 Collision With MV in Transport (Sideswipe) 07 Collision With MV in Transport (Backed into) 08 Collision With Parked Car 09 Collision with MV on Other Roadway 10 Collision with Pedestrian 11 Collision with Bicycle 12 Collision with Bicycle (Bike Lane) 13 Collision with Moped 14 Collision with Train	15 Collision with Animal 16 MV Hit Sign / Sign Post 17 MV Hit Utility Pole / Light Pole 18 MV Hit Guardrail 19 MV Hit Fence 20 MV Hit Concrete Barrier Wall 21 MV Hit Bridge / Pier / Abutment / Rail 22 MV Hit Tree / Shrubbery 23 Collision with Construction Barricade Sign 24 Collision with Traffic Gate 25 Collision with Crash Attenuators 26 Collision with Fixed Object Above Road 27 MV Hit Other Fixed Object 28 Collision with Moveable Object on Road	29 MV Ran Into Ditch / Culvert 30 Ran Off Road / Into Water 31 Overtuned 32 Occupant Fell From Vehicle 33 Tractor / Trailer Jackknifed 34 Fire 35 Explosion 36 Downhill Runaway 37 Cargo Loss or Shift 38 Separation of Units 39 Median Crossover 77 All Other (Explain in Narrative)

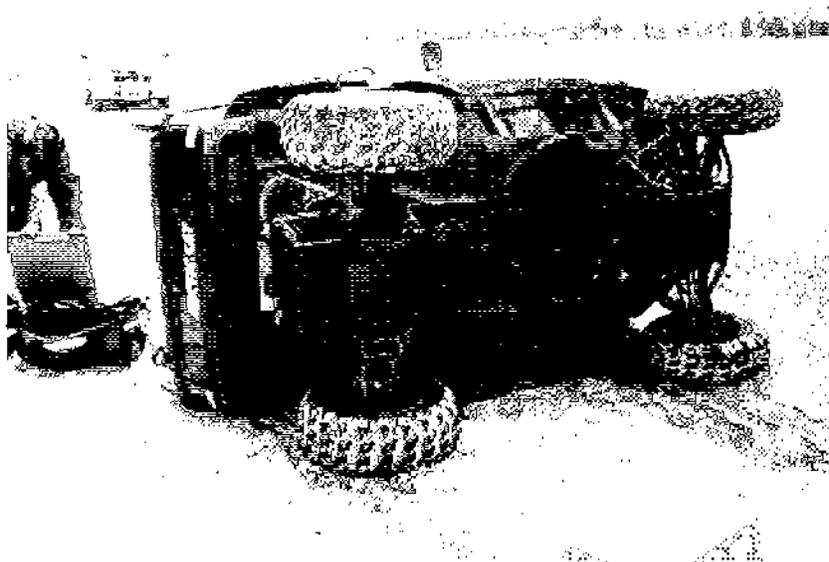
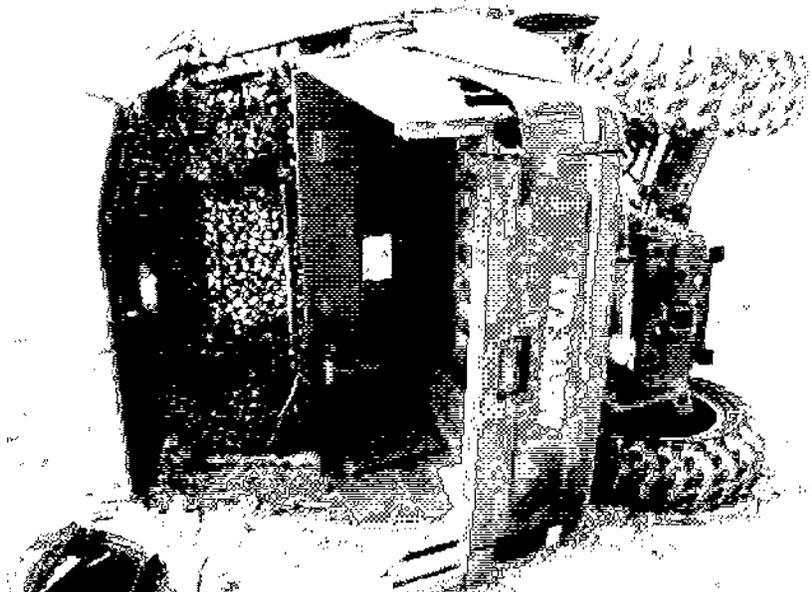
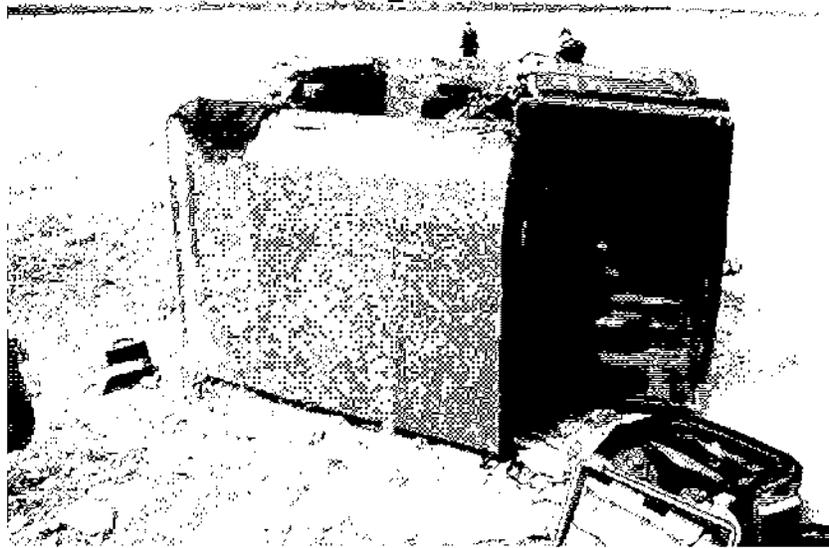
(ADDITIONAL NARRATIVE)

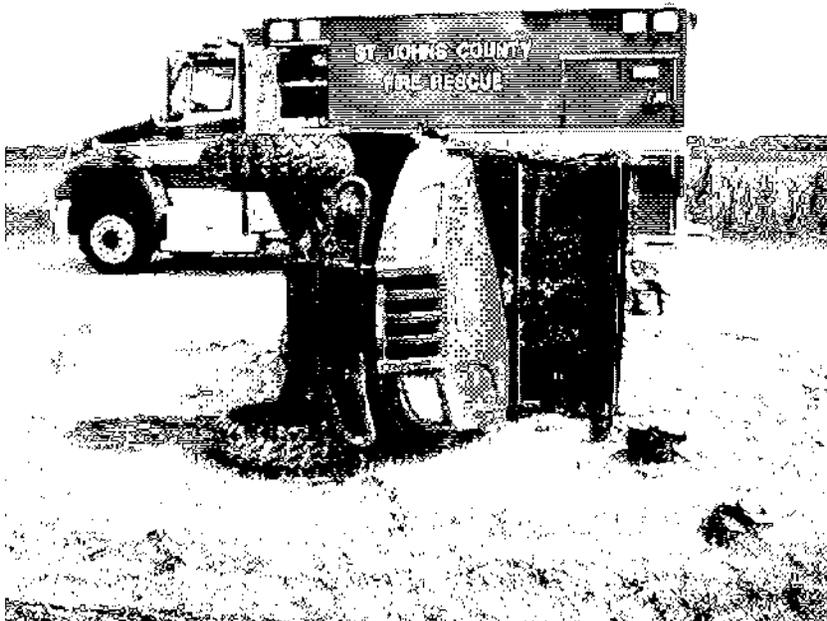
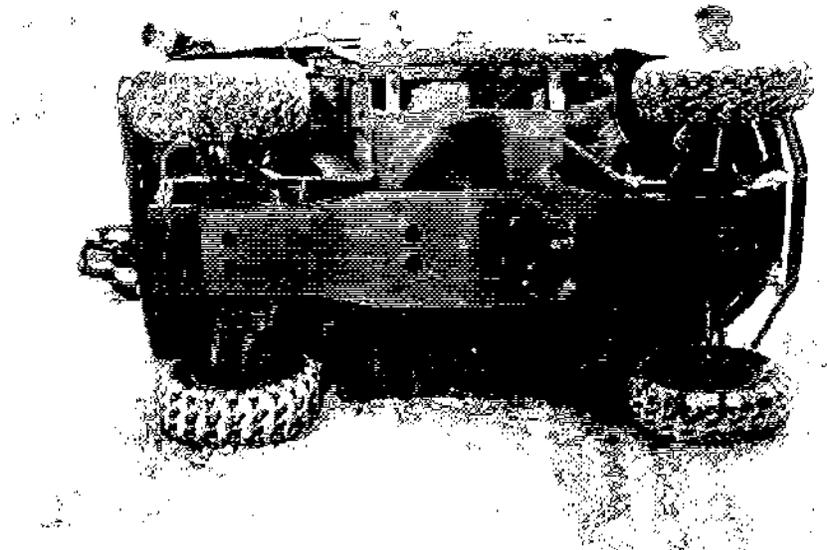
ON 8/13/09, I CONTACTED (b)(3):CPSA Section 25(c) AND FOUND THAT (b)(3):CPSA CONDITION WAS UPGRADED TO FAIR AND THAT HE WAS TO POSSIBLY BE DISCHARGED THE SAME DAY.

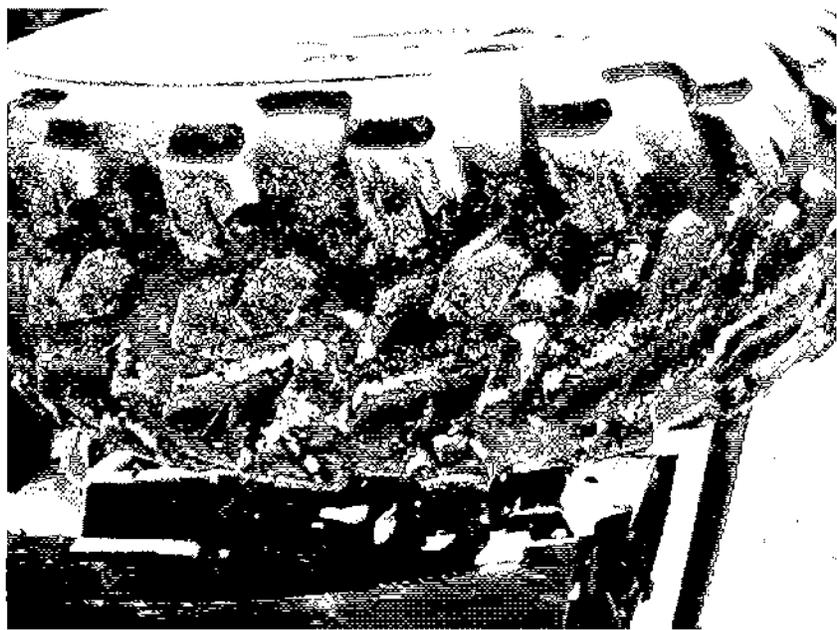
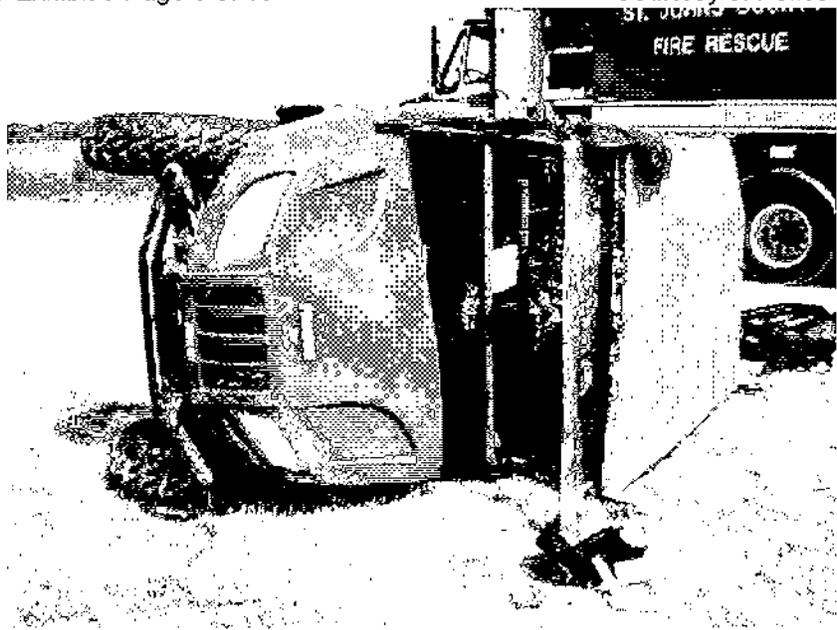
ADDITIONAL PASSENGERS

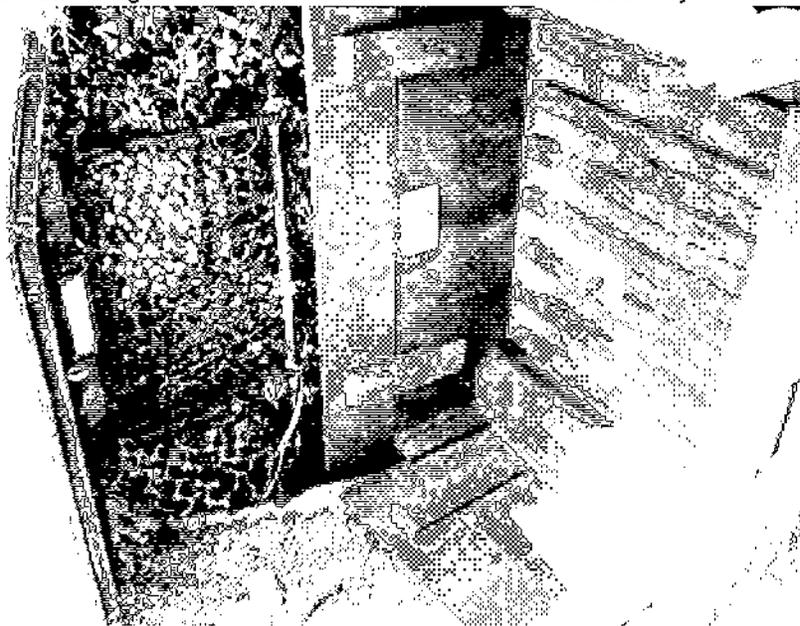
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP	EJECT

Violator(s)	SECTION #	NAME OF VIOLATOR	FL. STATUTE NUMBER	CHARGE	CITATION NUMBER



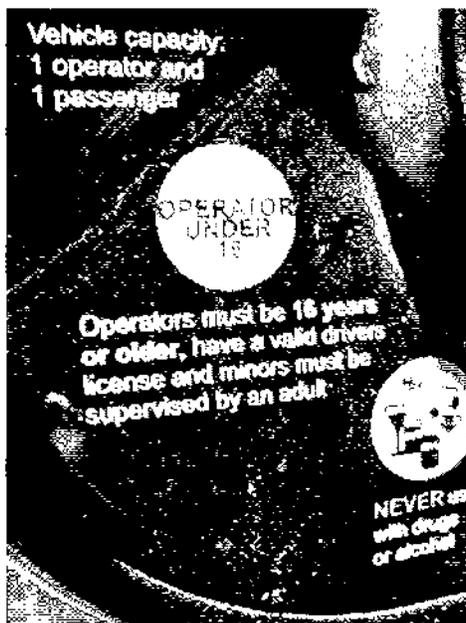
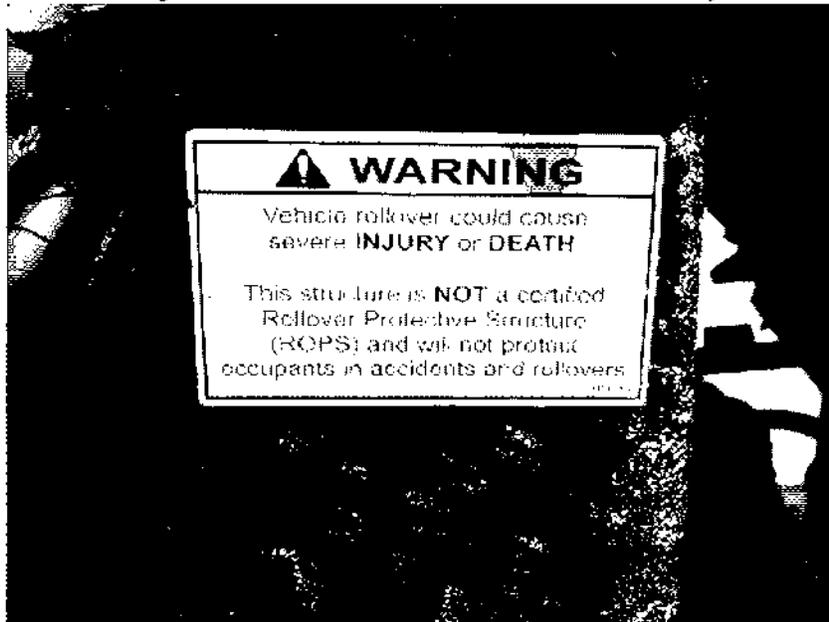


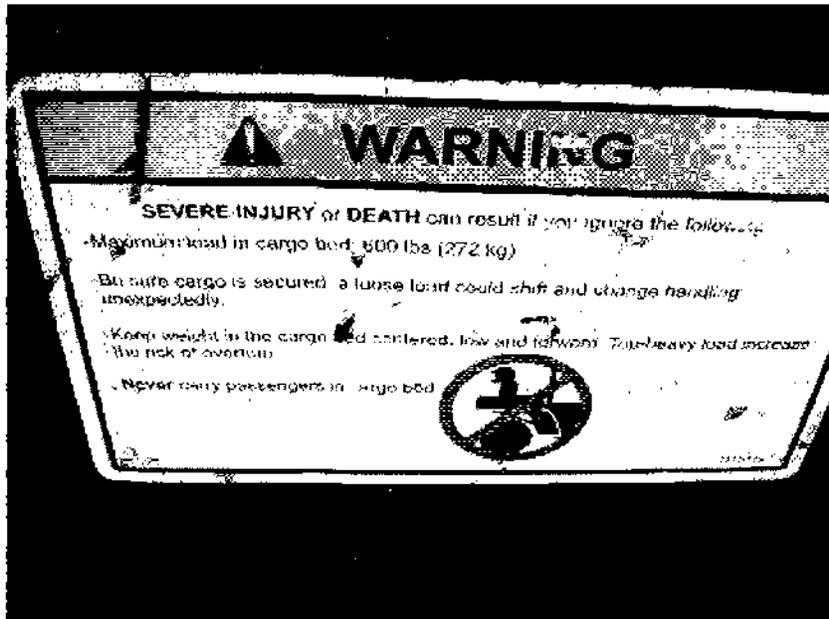


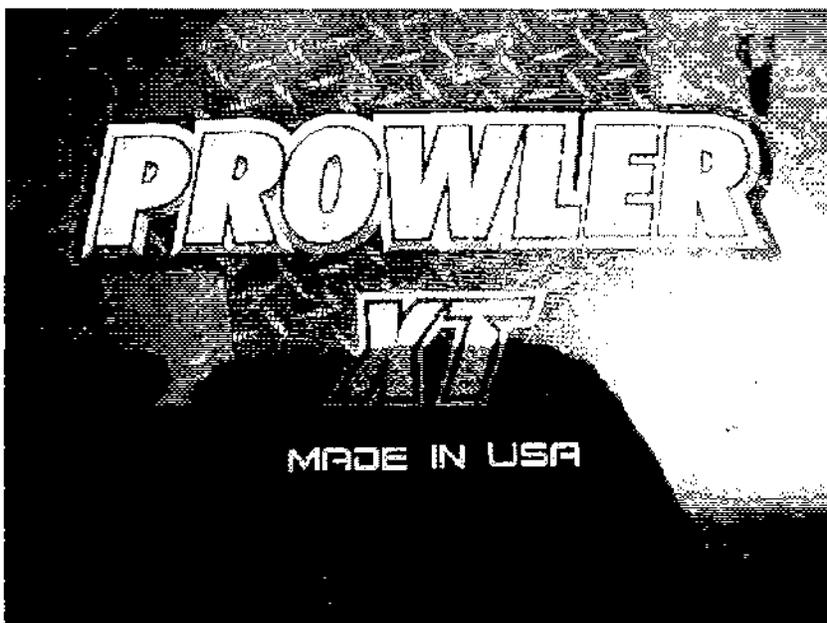


















20151  
City \*

FL  
State \*

MM DD  
8 9  
Injury Date \*

YYYY  
2009

08  
Month \*

09-0015270  
Injury Number \*

000  
Page No. \*

Complete  
Narrative

**Narrative:**

See EMS report.

08/09/2009 13:37:12 Russell Burney



**A**           **NFIRS - 10 Personnel**

**B Apparatus or Resource**  **Date and Times**          **Sent**  **Number of People**  **Use**    **Actions Taken**

**1** ID  Dispatch      Arrival      Clear      **Sent**  **Number of People**     **Actions Taken**

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
21771	Yeoman, Brian	CAP	X				

**2** ID  Dispatch      Arrival      Clear      **Sent**  **Number of People**     **Actions Taken**

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
20625	Jackson, Donald	ENG	X				
32223	Aschenbrenner, Shane	FFEMT	X				
33030	Burney, Russell	FP	X				

**3** ID  Dispatch      Arrival      Clear      **Sent**  **Number of People**     **Actions Taken**

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
31085	Stokes, Rodney	ENG	X				
32943	Kirkland, Andrew	FP	X				



20151

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2009

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09-0015270

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Responding Units/Personnel

Unit	Notify Time	Enroute Time	Arrival Time	Cleared Time
BATT2 Battalion 2	10:29:00	10:29:13	10:43:57	11:40:59

Staff ID\Staff Name	Activity	Rank	Position	Role
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10000	Mcmanis, Brian W	Master Pilot	PILOT/COPI	
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Unit Narrative

A/A <08/09/2009 10:25:56 ,KFinneran> POSS 3 PT <08/09/2009 10:27:55 ,KFinneran> CALLER UN SURE OF LOCATION GAVE BARTRAIM FARMS ELKTON LOCATION <08/09/2009 10:28:30 ,KFinneran> ATU CHECKING WEATHER <08/09/2009 10:28:51 ,JStudivant> POSS LZ SJC-42 <08/09/2009 10:29:03 ,JStudivant> T-1 ON STANDBY <08/09/2009 10:29:46 ,JStudivant> AREA OF RANDY BYRD FARMS <08/09/2009 10:34:12 ,KFinneran> RANDY BYRD FARMS NEXT TO AIRPORT <08/09/2009 10:37:36 ,KFinneran> E8 R8 ON SCENE IN THE AREA ATTEMPTING TO GAIN ACCESS <08/09/2009 10:39:16 ,mcanfield> ATU LAUNCHING <08/09/2009 10:46:35 ,JStudivant> BATT2 REQ 2ND RESCUE <08/09/2009 10:49:05 ,mcanfield> GC 3221 <08/09/2009 10:57:17 ,mcanfield> SJSO TAC 3 3221 GROUND CONTACT <08/09/2009 10:58:58 ,KFinneran> ETA 14 MIN TRAUMA 1 <08/09/2009 10:59:56 ,KFinneran> T-1 ON GROUND <08/09/2009 11:20:39 ,BCreedon> R5 TO FLAG <08/09/2009 11:21:30 ,JStudivant> T-1 LANDED <08/09/2009 11:21:37 ,JStudivant> ATV ROLLOVER <08/09/2009 11:25:16 ,KFinneran> T-1 LIFT OFF ENROUTE TO SHANDS JAX <08/09/2009 11:30:10 ,JStudivant> R5 AT FOAG <08/09/2009 11:47:50 ,JStudivant>

E8 Engine 8	10:25:40	10:28:17	10:39:04	11:44:40
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Staff ID\Staff Name	Activity	Rank	Position	Role
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10000	Mcmanis, Brian W	Master Pilot	PILOT/COPI	
10000	Anderson, Shane L	Master Pilot	PILOT/COPI	
10000	Finney, Maxwell L	Master Pilot	PILOT/COPI	

Unit Narrative

A/A <08/09/2009 10:25:56 ,KFinneran> POSS 3 PT <08/09/2009 10:27:55 ,KFinneran> CALLER UN SURE OF LOCATION GAVE BARTRAIM FARMS ELKTON LOCATION <08/09/2009 10:28:30 ,KFinneran> ATU CHECKING WEATHER <08/09/2009 10:28:51 ,JStudivant> POSS LZ SJC-42 <08/09/2009 10:29:03 ,JStudivant> T-1 ON STANDBY <08/09/2009 10:29:46 ,JStudivant> AREA OF RANDY BYRD FARMS <08/09/2009 10:34:12 ,KFinneran> RANDY BYRD FARMS NEXT TO AIRPORT <08/09/2009 10:37:36 ,KFinneran> E8 R8 ON SCENE IN THE AREA ATTEMPTING TO GAIN ACCESS <08/09/2009 10:39:16 ,mcanfield> ATU LAUNCHING <08/09/2009 10:46:35 ,JStudivant> BATT2 REQ 2ND RESCUE <08/09/2009 10:49:05 ,mcanfield> GC 3221 <08/09/2009 10:57:17 ,mcanfield> SJSO TAC 3 3221 GROUND CONTACT <08/09/2009 10:58:58 ,KFinneran> ETA 14 MIN TRAUMA 1 <08/09/2009 10:59:56 ,KFinneran> T-1 ON GROUND <08/09/2009 11:20:39 ,BCreedon> R5 TO FLAG <08/09/2009 11:21:30 ,JStudivant> T-1 LANDED <08/09/2009 11:21:37 ,JStudivant> ATV ROLLOVER <08/09/2009 11:25:16 ,KFinneran> T-1 LIFT OFF ENROUTE TO SHANDS JAX <08/09/2009 11:30:10 ,JStudivant> R5 AT FOAG <08/09/2009 11:47:50 ,JStudivant>

R5 Rescue 5	10:45:40	10:46:36	11:10:45	11:47:53
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Staff ID\Staff Name	Activity	Rank	Position	Role
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10000	Finney, Maxwell L	Master Pilot	PILOT/COPI	
10000	Finney, Andrew P	Master Pilot	PILOT/COPI	

Unit Narrative

A/A <08/09/2009 10:25:56 ,KFinneran> POSS 3 PT <08/09/2009 10:27:55 ,KFinneran> CALLER UN SURE OF LOCATION GAVE BARTRAIM FARMS ELKTON LOCATION <08/09/2009 10:28:30 ,KFinneran> ATU CHECKING WEATHER <08/09/2009 10:28:51 ,JStudivant> POSS LZ SJC-42 <08/09/2009 10:29:03 ,JStudivant> T-1 ON STANDBY <08/09/2009 10:29:46 ,JStudivant> AREA OF RANDY BYRD FARMS <08/09/2009 10:34:12 ,KFinneran> RANDY BYRD FARMS NEXT TO AIRPORT <08/09/2009 10:37:36 ,KFinneran> E8 R8 ON SCENE IN THE AREA ATTEMPTING TO GAIN ACCESS <08/09/2009 10:39:16 ,mcanfield> ATU LAUNCHING <08/09/2009 10:46:35 ,JStudivant> BATT2 REQ 2ND RESCUE <08/09/2009 10:49:05 ,mcanfield> GC 3221 <08/09/2009 10:57:17 ,mcanfield> SJSO TAC 3 3221 GROUND CONTACT <08/09/2009 10:58:58 ,KFinneran> ETA 14 MIN TRAUMA 1 <08/09/2009 10:59:56 ,KFinneran> T-1 ON GROUND <08/09/2009 11:20:39 ,BCreedon> R5 TO FLAG <08/09/2009 11:21:30 ,JStudivant> T-1 LANDED <08/09/2009 11:21:37 ,JStudivant> ATV ROLLOVER <08/09/2009 11:25:16 ,KFinneran> T-1 LIFT OFF ENROUTE TO SHANDS JAX <08/09/2009 11:30:10 ,JStudivant> R5 AT FOAG <08/09/2009 11:47:50 ,JStudivant>

20151

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2009

08

09-0015270

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Responding  
Units/Personnel

R8 Rescue 8

10:25:40

10:28:17

10:39:04

11:41:03

Staff ID\Staff Name	Activity	Rank	Position	Role
44441	Finneran, Kelly L	10-41-01	PIRACY SITER	
44448	Studivant, James J	10-41-01	PIRACY SITER	

**Unit Narrative**

A/A <08/09/2009 10:25:56 ,KFinneran> POSS 3 PT <08/09/2009 10:27:55 ,KFinneran> CALLER UN SURE OF LOCATION GAVE BARTRAIM FARMS ELKTON LOCATION <08/09/2009 10:28:30 ,KFinneran> ATU CHECKING WEATHER <08/09/2009 10:28:51 ,JStudivant> POSS LZ SJC-42 <08/09/2009 10:29:03 ,JStudivant> T-1 ON STANDBY <08/09/2009 10:29:46 ,JStudivant> AREA OF RANDY BYRD FARMS <08/09/2009 10:34:12 ,KFinneran> RANDY BYRD FARMS NEXT TO AIRPORT <08/09/2009 10:37:36 ,KFinneran> E8 R8 ON SCENE IN THE AREA ATTEMPTING TO GAIN ACCESS <08/09/2009 10:39:16 ,mcanfield> ATU LAUNCHING <08/09/2009 10:46:35 ,JStudivant> BATT2 REQ 2ND RESCUE <08/09/2009 10:49:05 ,mcanfield> GC 3221 <08/09/2009 10:57:17 ,mcanfield> SJSO TAC 3 3221 GROUND CONTACT <08/09/2009 10:58:58 ,KFinneran> ETA 14 MIN TRAUMA 1 <08/09/2009 10:59:56 ,KFinneran> T-1 ON GROUND <08/09/2009 11:20:39 ,BCreedon> R5 TO FLAG <08/09/2009 11:21:30 ,JStudivant> T-1 LANDED <08/09/2009 11:21:37 ,JStudivant> ATV ROLLOVER <08/09/2009 11:25:16 ,KFinneran> T-1 LIFT OFF ENROUTE TO SHANDS JAX <08/09/2009 11:30:10 ,JStudivant> R5 AT FOAG <08/09/2009 11:47:50 ,JStudivant>





**U.S. CONSUMER PRODUCT SAFETY COMMISSION  
EASTERN REGIONAL CENTER**

P.O. Box 56703 • Jacksonville, FL • 32241 • 904-731-2674 • Fax: 866-923-4006 • [ksrivera@cpsc.gov](mailto:ksrivera@cpsc.gov)

October 8, 2009

William Byrd  
2175 County Road 13A  
Elkton, FL 32033

Dear Mr. Byrd:

The U.S. Consumer Product Safety Commission (CPSC) is an agency of the United States federal government charged with regulating the safety of a wide variety of consumer products. We do so through a broad program of investigations and research, education, the establishment of voluntary and mandatory product safety standards, product recalls, and civil and criminal actions.

As part of the investigation process we conduct field investigations when accidents do occur in order to gather as much data as we can about the accident to help us determine what actions to take to prevent similar incidents from occurring to others in the future.

It has come to our attention that you have unfortunately been affected by an incident which falls under the jurisdiction of the commission involving a utility vehicle. While I realize this may be difficult for you to discuss, the information you provide our agency might help prevent an incident like this from happening to someone else in the future.

If you feel you are able to discuss this incident with me, please contact me by phone, at (904) 731-2674, or e-mail at [ksrivera@cpsc.gov](mailto:ksrivera@cpsc.gov).

Sincerely,

Karina Salgado-Rivera  
Product Safety Investigator  
Consumer Product Safety Commission

Ref#090831CCC1009



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### Three People Injured in ATV Crash

Chris Turner Jonathan Feldmann • Created: 8/9/2009 5:21:32 PM • Updated: 8/9/2009 8:18:32 PM

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8:05:09 6 p.m. Crash

**ST. AUGUSTINE, FL** – Three men are recovering after they lost control of their Arctic Cat recreational vehicle Sunday morning.

St. Johns County Fire/Rescue personnel arrived at the Bartram Air Park located off of C.R. 13A and located three injured men.

According to the Sheriff's Office investigation, the men were riding in the ATV on a private dirt road when for unknown reasons the driver lost control, causing the vehicle to roll over onto its passenger side.

It's unclear at this time which of the three men were driving, but all three were injured.

**(b)(3)(C)**, 39, of St. Augustine was transported via air ambulance to Shands Jacksonville with critical injuries, he was the most severely injured.

**(b)(3)(C)(b)(3)(A)**, a 37-year-old from St. Augustine, was taken to Flagler Hospital with unknown injuries and **(b)(3)(C)**, 24-years-old also from St. Augustine, was treated at the scene and refused transport to a hospital.

The St. Johns County Sheriff's Office tells First Coast News that none of the men were wearing available seatbelts and that their preliminary investigation shows alcohol may have been a contributing factor in the crash.

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#### In your voice

#### READ REACTIONS TO THIS STORY

**scottyboy1** wrote:  
if there was seatbelts then it was a side by side..also known as a utv...like a kawasaki mule....they have roll bars and seat belts...so had they not been drinking..and had on their seatbelts, there is a chance they would be ok...  
8/9/2009 11:19 PM EDT on firstcoastnews.com  
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**SuziQ42** wrote:  
Those things are sooooo dangerous. I do not like them. I was also told to ride safe you should only have 1 to 2. Yes, you could probally do 3, but then you are not being safe. Many people are clueless or they say "it will never happen to me". Guess what????? it did  
8/10/2009 12:25 AM EDT on firstcoastnews.com  
Recommend Report Abuse Permalink

**CURRY1234** wrote:  
Ronald is a friend of my husbands and is doing good. He started breathing on his own, opened his eyes and as of 8/11/09 he was up and walking. He should be coming home soon.  
8/12/2009 12:34 PM EDT on firstcoastnews.com  
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FL  
8/9/09  
Product = 5044  
ARCTIC CAT