1. TASK NUMBER	2. INVESTIGATOR'S ID	
970304CNE5090 970304 CNE5090	8057	EPIDEMIOLOGIC INVESTIGATION REPORT

3. OFFICE CODE	4. DATE OF ACCIDENT YR MO DAY	5. DATE INITIATED YR MO DAY
800	97 03 01	97 03 03

6. SYNOPSIS OF ACCIDENT OR COMPLAINT An 8 year old male and his 10 year old brother riding an amusement ride at a local fairground, were thrown from their seats to the boardwalk of the ride when the lap bar separated from the ride car at the junction of the lap bar/from pivot attachment. One victim sustained a broken ankle. The other a broken leg.

7. LOCATION (Home, School, etc.)	8. CITY	9. STATE
Fairground 59	Plant City	FL

10A. FIRST PRODUCT	10B. TRADE/BRAND NAME	10C. MODEL NUMBER
Amusement Ride 1293	Super Himalalaya	Serial No. 1884

10D. MANUFACTURER NAME AND ADDRESS
Treverchon

Paris France

11A. SECOND PRODUCT	11B. TRADE/BRAND NAME	11C. MODEL NUMBER

11D. MANUFACTURER NAME AND ADDRESS

12. AGE OF VICTIM	13. SEX	14. DISPOSITION	15. INJURY DIAGNOSIS
10	1	Treated & Released 01	Fracture 57

16. BODY PART (S) INVOLVED	17. RESPONDENT	18. TYPE OF INVESTIGATION	19. TIME SPENT (OPERATIONAL HOURS)
Ankle 37	Inspectors Ride Mgr & pair Mgr. 3	On-site 1	20

20. ATTACHMENT(S)	21. CASE SOURCE	22. SAMPLE COLLECTION NUMBER
Multiple 9	State Inspectors 12	

MFR/PRVLBR NOTIFIED 6/8/98
No Comments made
Comments attached
Excisions/Revisions
Firm has not requested further notice

23. PERMISSION TO DISCLOSE NAMES (NON NEISS CASES ONLY)
no

24. REVIEW DATE	25. REVIEWED BY	26. REGIONAL OFFICE DIRECTOR
970313	8342	3-12-97

27. DISTRIBUTION
O:EHDS CC:

CPSC FORM 182 (REVISED 12/96) OMB NO. 3041-0029

NOTE: Information for this report was obtained from the State of Florida Ride Inspectors, and interviews with the Fairgrounds management , the ride operators and the owner/operator of the ride being operated on the fairgrounds.

PRE-INCIDENT: Three individuals were within the ride at the time of the accident. All three , the father and his 8 year old and 10 year old son were in the same car(tub). There is some discrepancy into the placement of the three within the tub. The placement varies from the father being in the outboard position with his 10 year old (200 lb) son in the middle and the 8 year old (80 lb) son in the innermost position - to the father being in the middle seat.

There is no indication that anything unusual was involved in the activities of the 3 passengers prior to the start-up of the ride.

The ride is on the Fairgrounds of the Plant City Strawberry Festival Fairgrounds, a once a year event, and the only event at this fairgrounds. As usual, the ride concession was awarded to The Mighty Blue Grass Shows, Tampa ,Florida. The rides are mobile, bring transported to the fairgrounds and set up by the Blue Grass Shows. After set-up, the rides are inspected by the Florida State Inspectors, prior to being operated for the public. There are approx 70 rides on the fairgrounds.

The ride operates on a circular platform, with undulations along the track. The ride is controlled by the operator who maintains a position at the 9 o'clock position on the ride platform. This main operator controls the ride from start-up, rotation change and stopping. The controls can be seen in the attached photo 3 of exhibit 1. Note that this control panel includes an emergency stop button that is designed to stop the rotation within 1 1/2 to 2 revolutions. As the main operator cannot see behind the facade, from approximately the 2 o'clock position to the 11 o'clock position, there is a secondary operator at the 3 o'clock position who is able to observe behind the facade from approximately the 3 o'clock position to the 12 o'clock position. This secondary operator has an emergency stop button, but no other controls.

INCIDENT: After the 3 riders were seated in the tubs,and the riders enclosed with the lap bar and the outboard seat /lap bar clamping devise, the ride was put in motion in the forward rotation mode. In this rotation, the ride moves clockwise with a maximum of 10 RPM. In this forward motion, force is exerted to the seat back, in effect pushing the riders into the seat back. The ride is then stopped and put into the reverse (counter-clockwise) rotation in which case the force is transferred to the front area of the tub, where the riders get some support from the lap bar as the reverse rotation tends to force the riders against the lap bar .

While in the reverse rotation, and at about the 3 o'clock position (facing the ride from the street) the secondary operator noted a foot outside of the tub, and he immediately

I/O 304 CNE 5090

pressed the emergency stop button. The main operator noticed the tub coming at him at about the 10 o'clock position and he also pressed his emergency stop button. At this point, the main operator stated the lap bar appeared to be in place. The ride continued in the emergency stop position for approximately 1 1/2 to 2 rotations, finally stopping at the approximate 3 o'clock location, in front of the secondary operator. During the emergency stop operation, the lap bar came loose and was ejected from the tub, along with the 2 males who ended up on the boardwalk of the ride directly in front of the secondary operator. One male sustained a broken leg, the other a broken ankle. The father apparently was able to remain within the tub. Reports are that the father attempted to hold the two males within the tub, but he was unable to keep them within the tub.

The main operator called in the emergency to the on-grounds emergency team who were also assisted by the local EMT.

POST INCIDENT::
The victims were removed from the ride and transported to a local hospital where they were treated for the above broken leg and ankle and released.

The Florida State Inspectors were called and closed down the ride pending the results of their inspection. They observed that the lap bar had failed at the junction of the lap bar and the floor board. They observed that open, deformed "diaper" pins (please see photo 9 attached as exhibit 1) were found in the rear of the tub. As there were no pins in the lap bar/floor pivot position, it is assumed these distorted pins were the pins used to hold the lap bar to the floor pivot position. Continuing their inspection they observed that the diaper pins are located on the extreme forward corners of the tub a the floor board where it is exposed to the shoes of the riders. Conjecture is that the diaper pins in the exposed position, when contacted by a rider's shoe, either during entry or exit of the tub ,as well as the potential for shoe contact during the ride, could cause the diaper pin to deform and open, and consequently the vibration of the ride could lead to complete dislodgement of the pin with ultimate separation of the lap bar from the tub.

The inspectors also found that the lap bar is held at the entrance of the tub with a spring operated latch that appears to pass inspection in the direct upward pull position, however could fail if the latch bar is pulled to the outward position as it would be in the reverse rotation mode.

The inspectors required the ride owner to change out the diaper pins for "R" pins at the lap bar/floor pivot point. They also required the "R" pins to be "Tied" at the open end. After these requirements were met, the ride was placed back in operation, but only in the forward rotation .

The State inspection personnel then telephoned the manufacturer, in Paris ,France and the manufacturer agreed with the inspector's recommendation and the manufacturer stated he would issue notification to all known Himilaya owners to change out any diaper pins to tied off "R" pins at the lap bar/floor pivot joint.

970304CNES090

The State inspectors also recommended that an addition device, perhaps a strap, be installed at the entrance of the tub.

PRODUCT IDENTIFICATION:

The ride is known as the Super Himalaya,, serial 1884, manufactured by Reverchon, Paris France. This ride is being operated, on concession by the Mightly Blue Grass Shows, 2032 51st Street, Tampa, FL 33619 (813) 247-4431. The ride is approximately 5 years old and is a mobile ride on a semi-tractor truck with chassis #"008ORIGIN8021293A", see photo 10.

I do not have access to the ride manual, consequently I am unaware of the specified type of connector specified for use to connect the lap bar with the floor pivot joint.

The owner/operator of this ride stated that ,prior to this incident, he has had no problems with this ride, and no accidents on this ride.

Inspection of the ride disclosed it appears to be in very good condition, consistent with it's age.

SAMPLES COLLECTED: none

STANDARDS: I did not notice any certification on the equipment.

EXHIBITS:
1- Photographs of the ride
2- Draft of the State Inspection report

NOTE: additional information provided by Fairground management and ride owner/operator under separate cover.

970304CNE5090
EXHIBIT 1

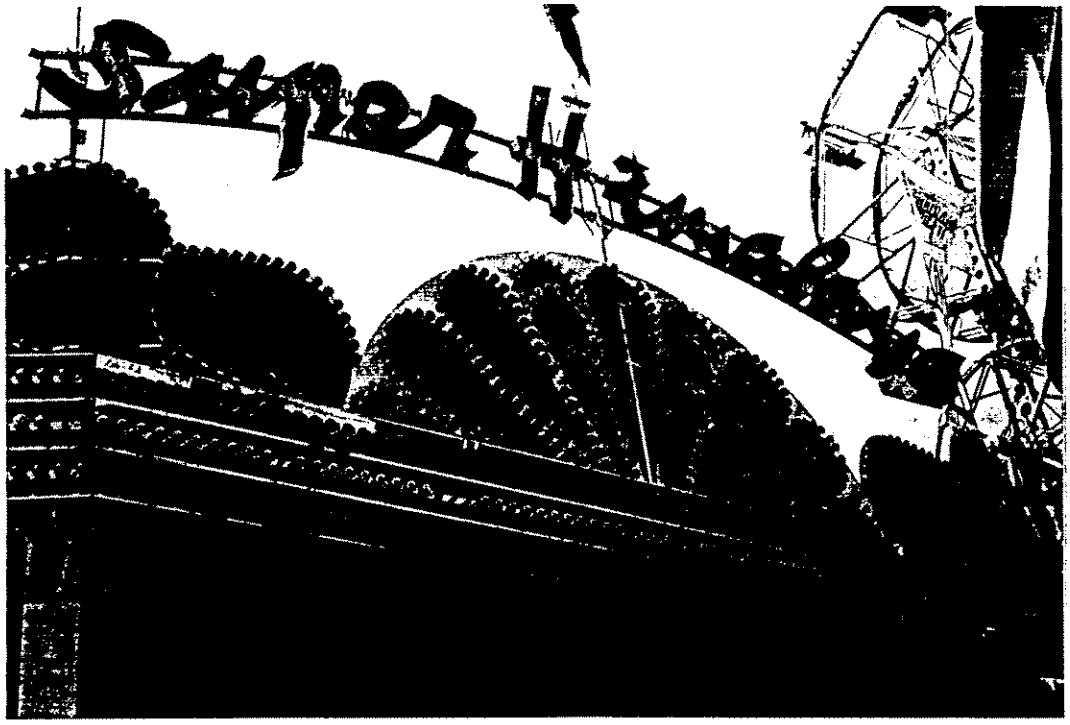
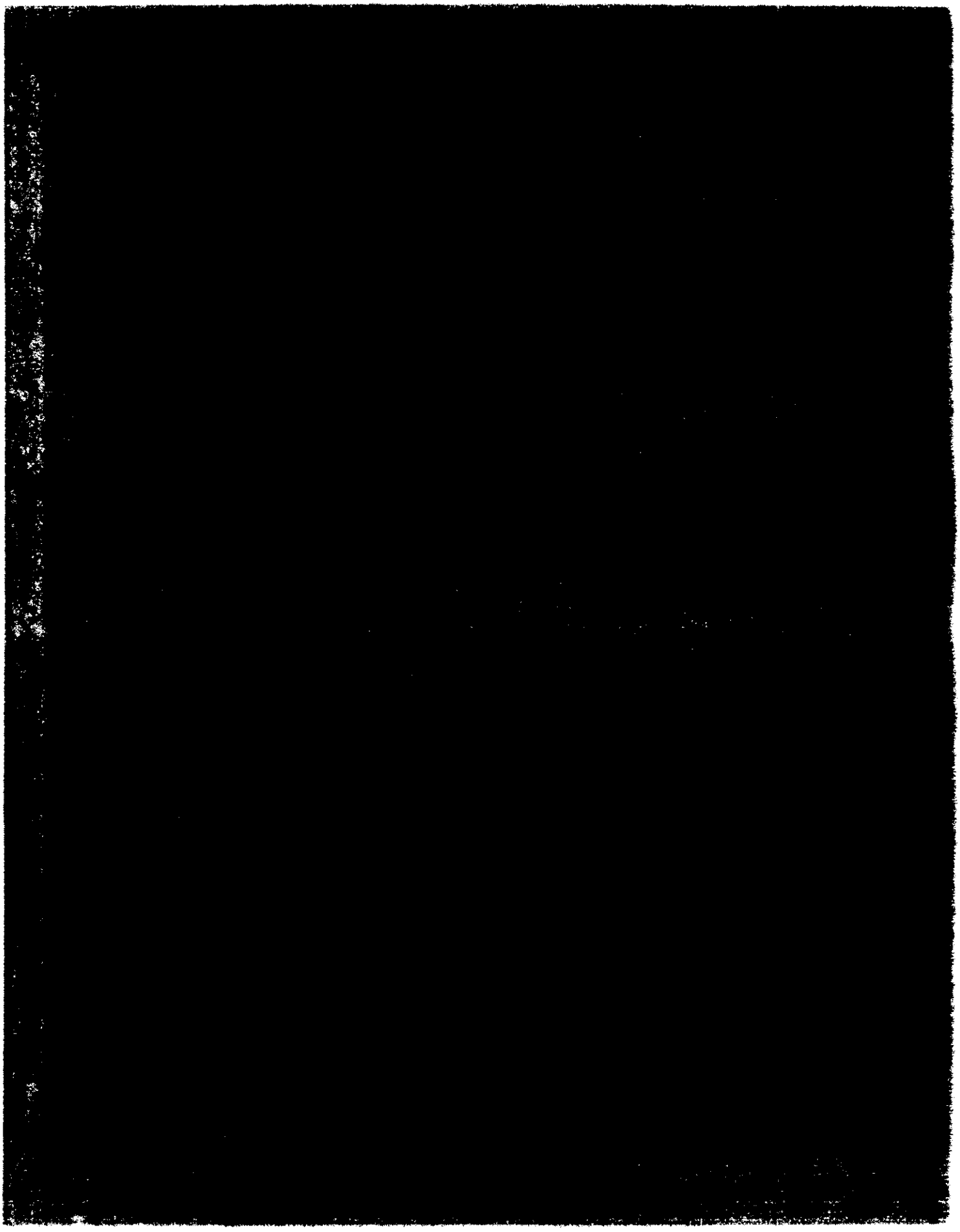


Photo 1 Overview of the super Himalaya on location 970304CNE5090
PHOTO 2 as above. The main operation station is to the left of this ride, approx half way up the ride boardwalk. The secondary station is to the right, half way up. Both stations are equipped with emergency stop switches. The ride was in reverse (counter clockwise) rotation. The secondary operator was the first to apply the emergency stop switch, followed by the main operator using his emergency stop switch. The secondary operator noted a foot coming out of the tub and activated the switch.



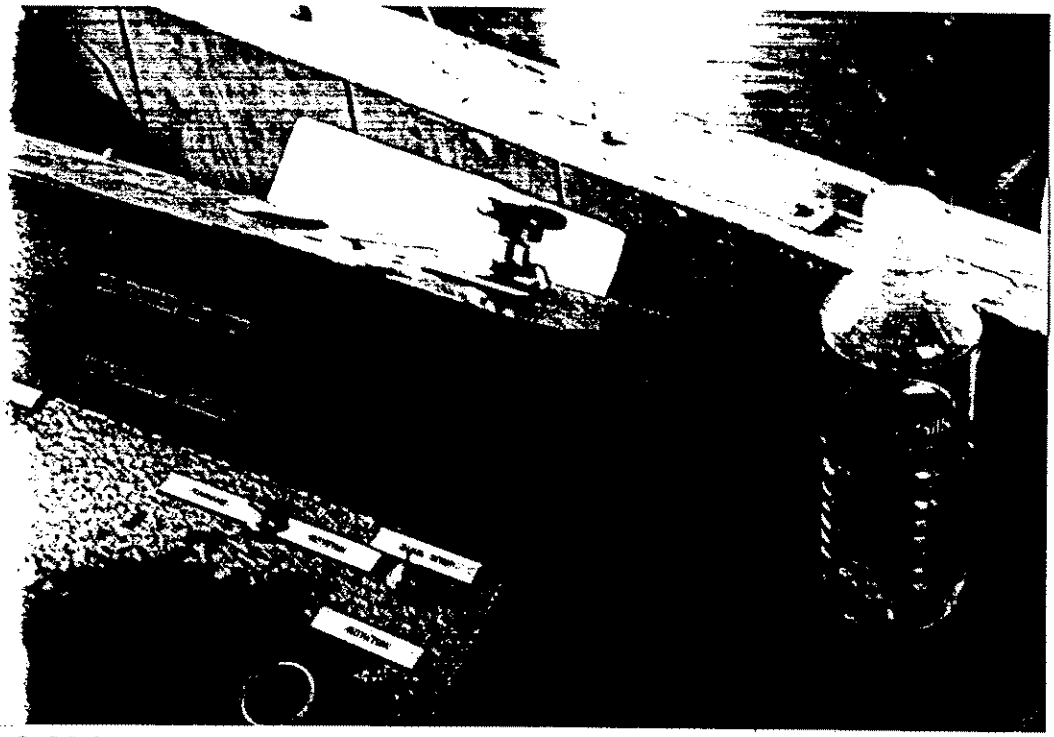
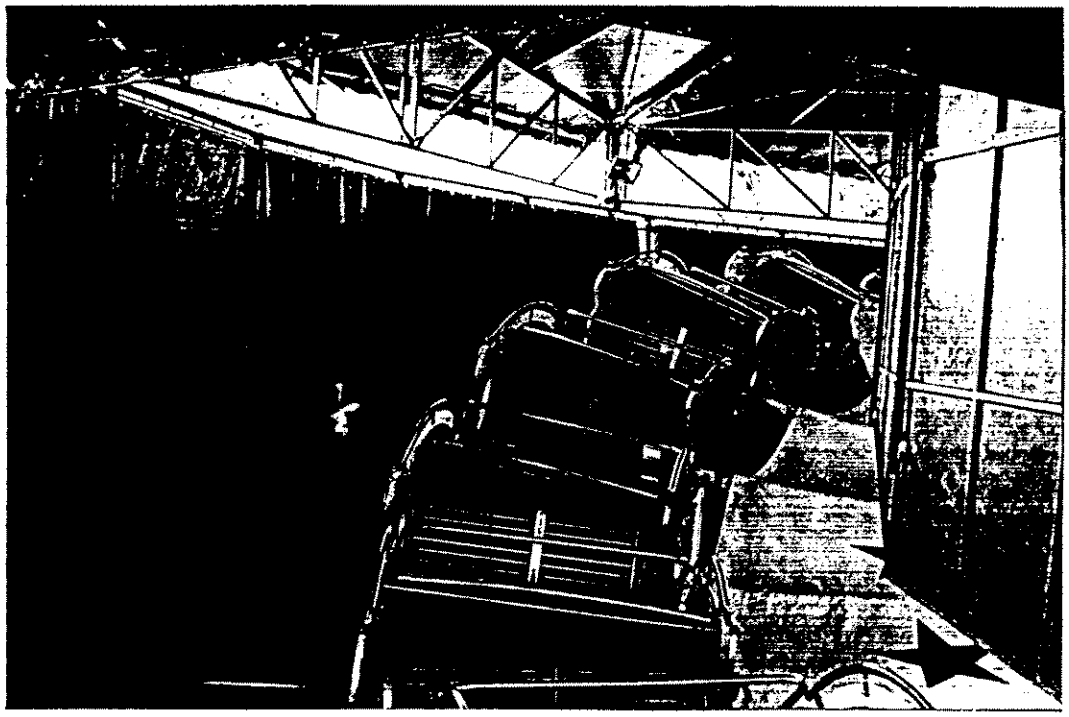


Photo 3 Main operator station with ride identification,"Reverchon/ 1880*". Note red emergency button above the identification plate. 970304CNE5090**

PHOTO 4 View from the operator's station. the tubs were coming down towards the operator when ne noticed a foot outside of the tub. He applied the emergency stop switch, however the secondary operator had already applied the emergency stop switch from the opposite side of the ride. At this point ,the operator stated the lap bar was still in place. The subject tub and ride stopped at a bout 180 degrees from the operation station just in front of the secondary operator.



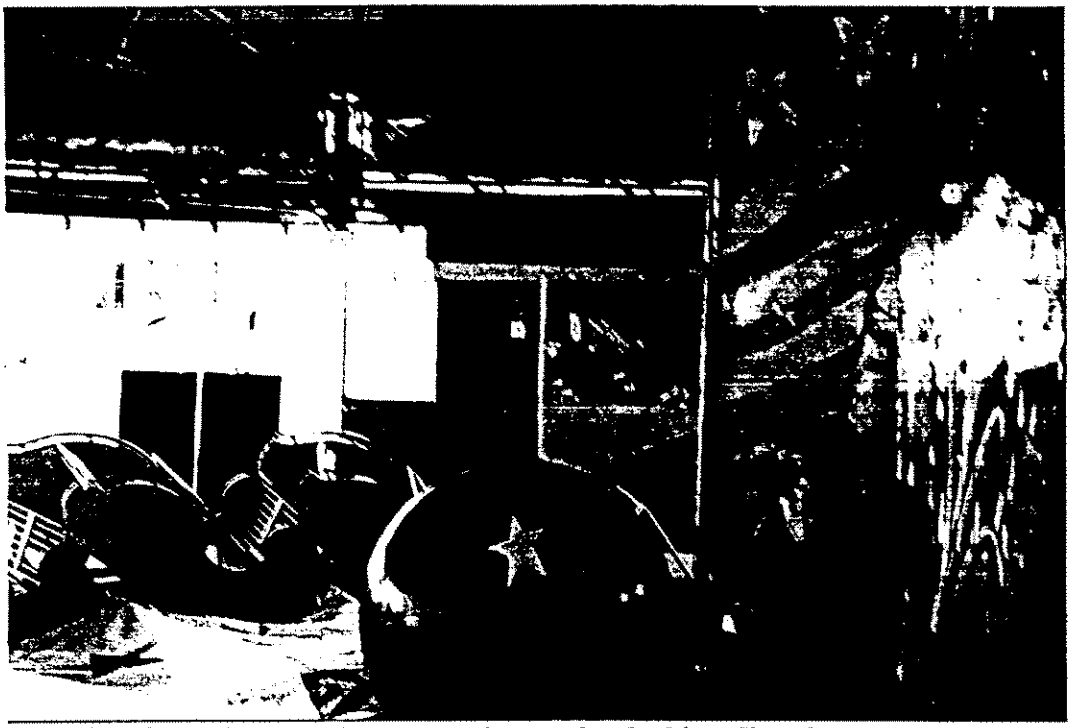


Photo 5 View from the secondary operation station looking directly across to the main operation station. The secondary operator at this location observed a problem as the tubs went in reverse rotation from his left to right, and as the tub passed behind the facade. He applied the emergency stop button at this stage. 970304CNE5090

Photo 6 Looking into the tub from the entrance end looking in towards the inner part of the ride and tub. Note the lap bar/pivot point connection in the center of this photo and its proximity to the metal front foot guard/rest. This connection had been secured with a "diaper" pin prior to t he incident.

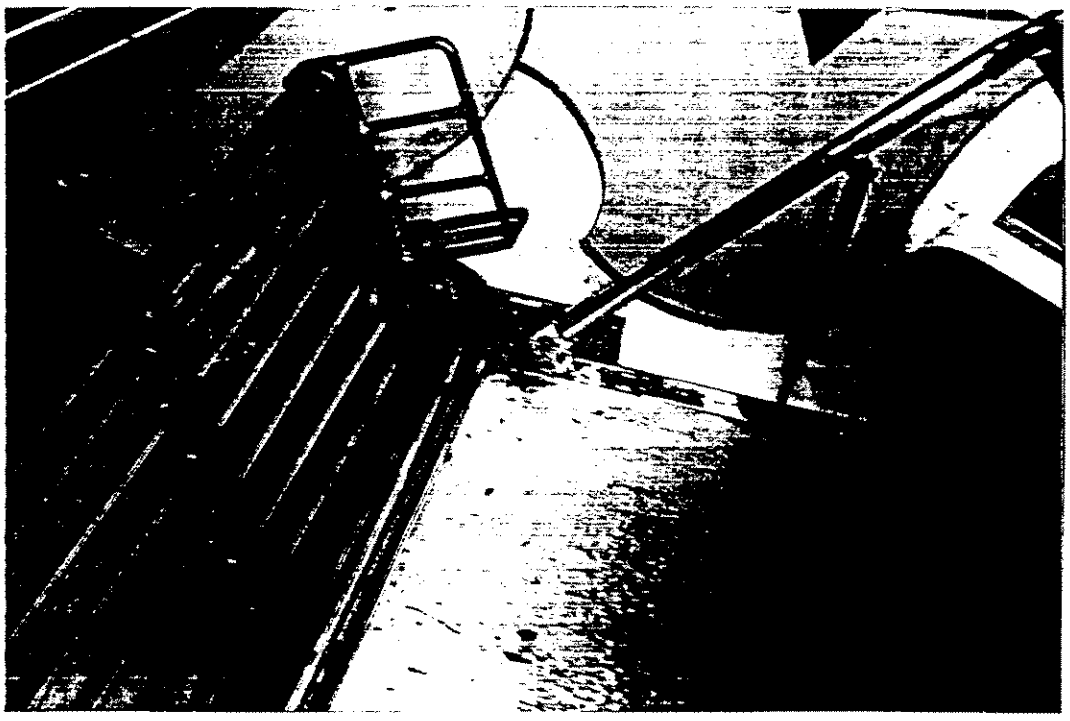
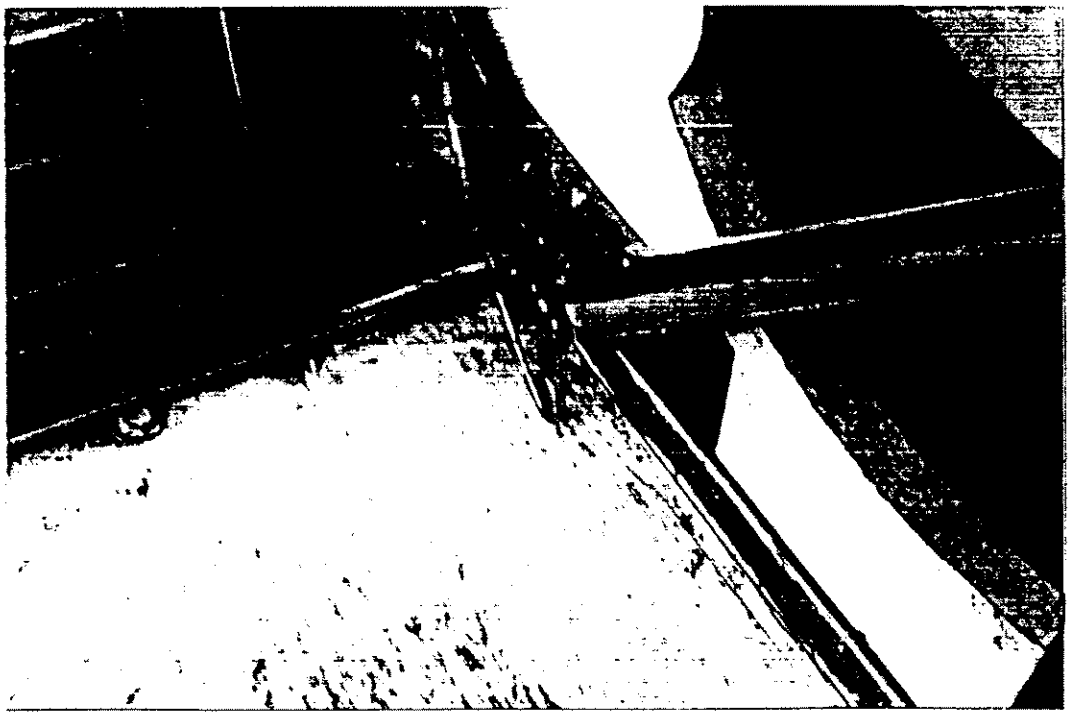


Photo 7 As in the prior photo. Note the ease at which the diaper pin can be contacted by the rider in entering, exiting or during the movement of the ride. 970304CNE5090
Photo 8 As above, note the bent diaper bin as a result of stepping on the pin. The pin is unhooked at this point. During subsequent movement of the ride, it appears that dislodgement of the diaper pin and subsequent detachment of the lap bar pivot could be a possibility.



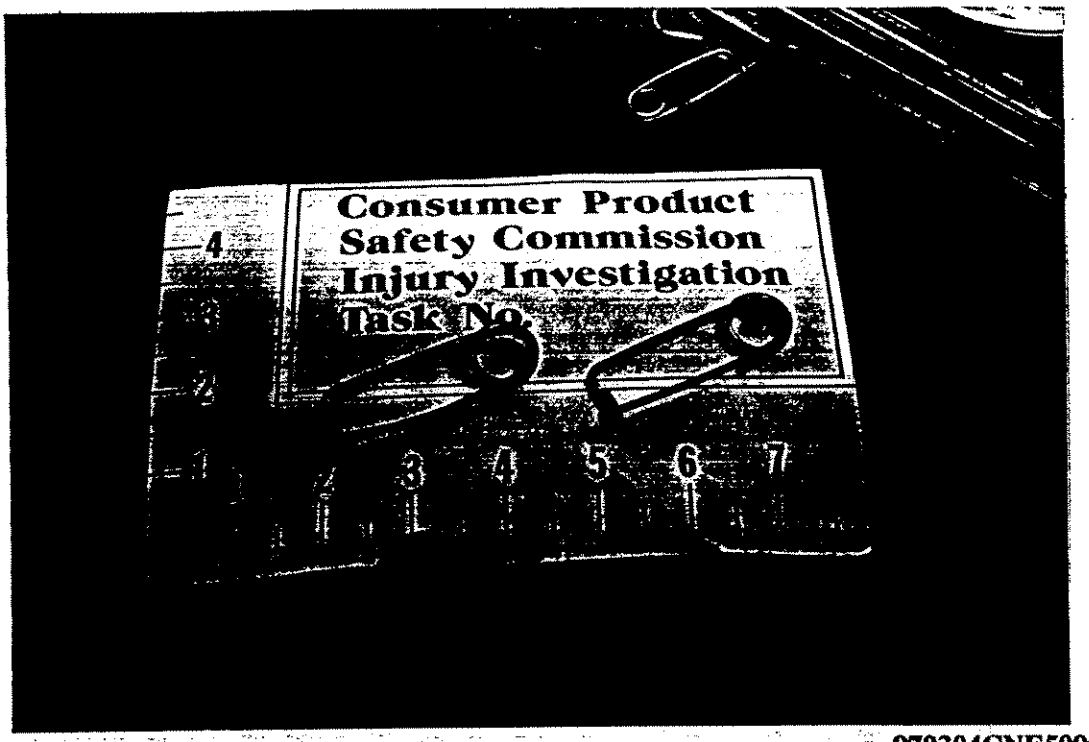


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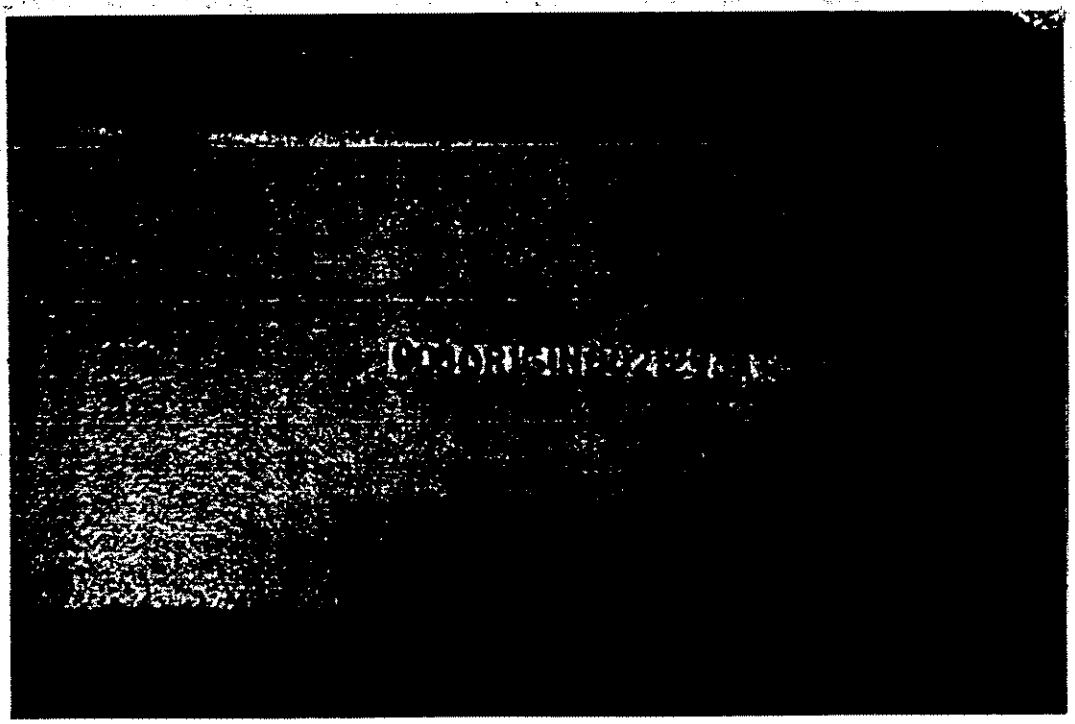
Photo 9 "diaper" pins of the type previously used to secure the lap bar to the floor pivot point. These pins have now been replaced with "R" pins "tied "at the open end to preclude accidental opening of the pin.

Photo 10 Identification on the trailer bed used to carry this ride.



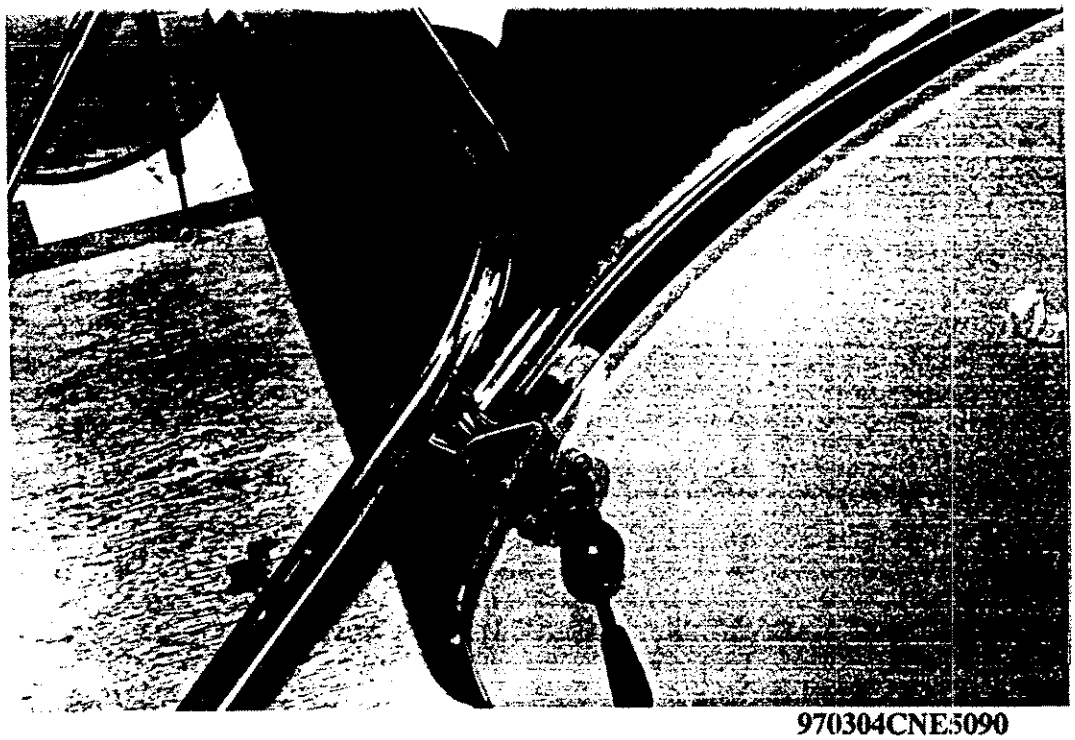


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Photo 11 Lap bar latch at the outside of the tub where the rider would enter the tub. the State inspectors determined the latch would be within specifications if the lap bar is pulled directly up, however, they also discovered that the lap bar when pulled to the outside edge (as it would be in rotation), the lap bar could be easily dislodged. The State inspectors proposed and addition strap at this latch to preclude the lap bar from opening while in rotation.

Photo 12 Possible wear point where the latch fits into the socket. The latch may hold in the direct up-pull motion, but may release as the lap bar is subjected to outside rotation pull to the right of this photo. The retaining protuberance within the socket is to the right in this photo, where the outside force would be to the left in rotation .

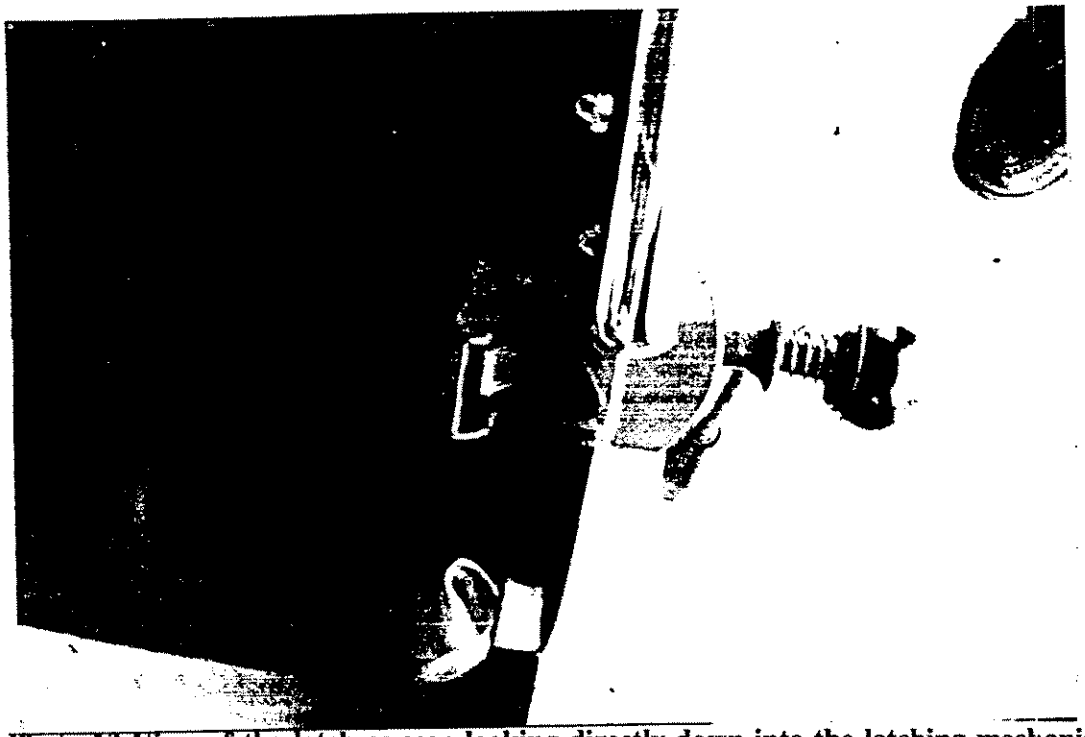

Photo 13 View of the latch as seen looking directly down into the latching mechanism. Note the spring operated protuberance is on the inside edge of this device, and is subject to wear, over time. 970304CNE5090

Photo 14 Close up view of the warning sign posted in front of the ride as seen in photo 2.

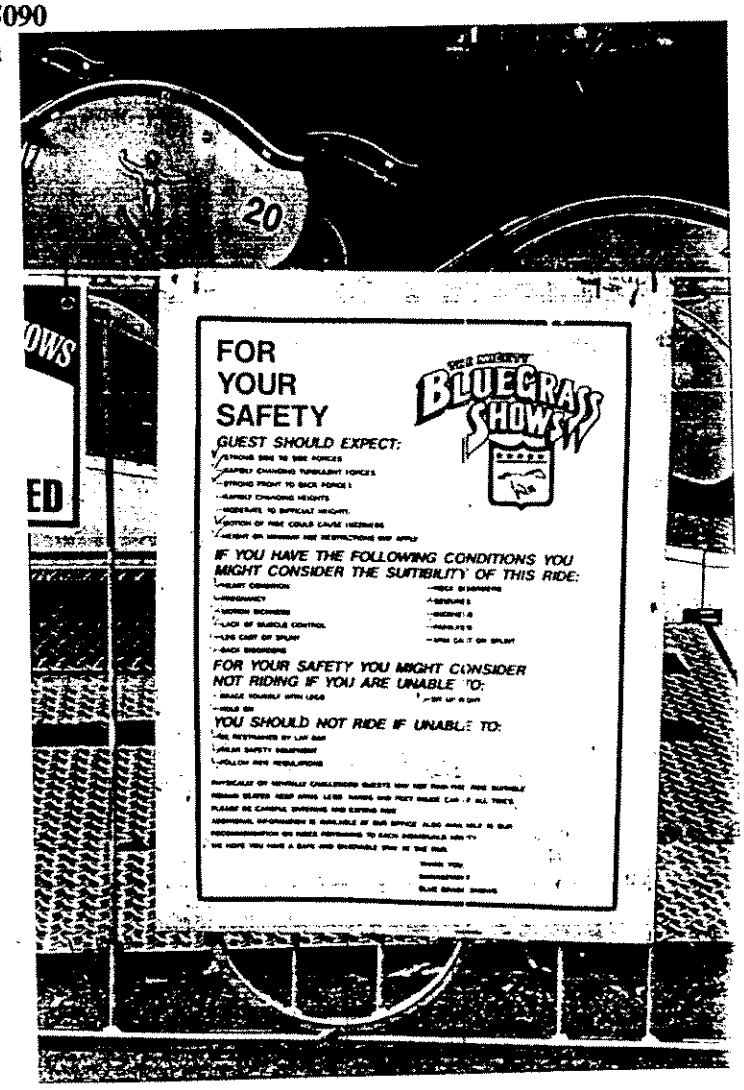

EXHIBIT #1 970804CNE-5090
EXHIBIT 2

ACCIDENT REPORT

1/5

ACCIDENT DATE/TIME: March 1, 1997 2:00 pm

LOCATION: Strawberry Festival
Plant City, FL

DEVICE: Super Hymalaya

OWNER: Mighty Blue Grass Shows

MFG: Reverchon

USA ID: #03537

SN: 1884

INJURED: #1, #2, #3 see supplementary report by Supervisor Greenman

ACCIDENT INVESTIGATOR: Cliff Groscurth, Inspector #18

WITNESS: See Attachment #4 Police Report - Case #97-018191

RESPONSE TIME FRAME:
3:29 pm - Alpha Page from Bureau Chief
3:40 pm - Arrived at Strawberry Festival
9:30 pm - Left Strawberry Festival
10:15 pm - Off duty (HQ) Zephyrhills

ACTION TAKEN AFTER ARRIVAL:

Went to Blue Grass Shows office. Determined which amusement device was involved and where it is located on Festival grounds. Carnival Manager Mr. Bill Dixon accompanied me to the accident site.

When I arrived at the ride it was closed, fenced off, and being guarded by two Hillsborough County Sheriffs Deputies. I identified myself as the State of Florida inspector assigned to investigate this accident and asked for their assistance. They called their investigator Sheriff Deputy R.H. Keeter. Deputy Keeter provided me with his report (Attachment #4), notes (Attachment #6), two rolls of 35 mm film and 6 Polaroid photographs (Attachment #11), and two deformed "diaper pins" (Attachment #12).

These two retaining pins were recovered from under the seat of carrier #21 during the next (approximate) 6 hours (3:40 pm - 9:30 pm). This investigator performed the following tasks, not in chronological order:

970304 CWES098

1. Reviewed/examined accident area.
2. Examined carrier #21.
3. Found and examined lap bar from carrier #21.
4. Interviewed police officers and police investigator.
5. Interviewed ride foreman - Jerry Johnson.
6. Interviewed ride 2nd man - Roderick Dixon.
7. Interviewed show manager - Bill Doss.
8. Interviewed show ride supervisor - Lawrence ?
9. Interviewed show owner - Jim Murphy.
10. Re-interviewed ride foreman.
11. Re-interviewed ride 2nd man.
12. Photographed ride, carriers and parts.
13. Inspected carrier #21 and lap bar for defects.
14. Inspected all carriers and lap bars.
15. Did complete primary inspection of entire device.
16. Completed amusement device/attraction inspection report.
17. Timed RPM of this Super Hymalaya.
18. Reassembled lap bar to carrier #21, looking for defects.
19. Collected documents (see Attachments).
20. Consulted with Supervisor Greenman.
21. Locked-out carrier #21 (until I can inspect it in better light and less confusion)
22. Put out of service carriers #20 and #22 (same reason as #21).
23. Informed Bill Doss of actions to be taken as relayed to me by Supervisor Greenman.
24. Confirmed compliance with #23.
25. Spoke with Strawberry Festival Director.
26. Found ride to be in compliance / reopened to public 6:55 pm.

DESCRIPTION OF ACCIDENT:

1. 3 passengers seated in carrier #21. Father seated on outside position, two children seated next to him. Lap bar in place and locked. (NOTE: this is the correct seating pattern)

2. Ride sequence begins, clockwise rotation (passengers moving forward).

3. Ride accelerates to maximum RPM (10).

4. Ride decelerates to complete stop.

5. Ride begins, counter clockwise rotation (passengers moving backward).

6. Before ride reaches maximum RPM operator in control booth (Jerry Johnson) sees something is wrong (passenger has one foot outside seat area and is raising up in the seat) as carrier #21 passes him.

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7. Ride operator Jerry Johnson activates the emergency stop switch on ~~the~~ HIS console.

8. Ride 2nd man Roderick Dixon sees something is wrong and activates his emergency stop switch. This switch and 2nd man's station is located 180 degrees across ride from operators booth.

9. Ride goes into emergency shut down.

10. As carrier #21 approaches the 2nd man's location the two children are thrown from the ride and land at the feet of the 2nd man with the lap bar on top of them.

11. The ride continues to rotate another 1-1½ revolutions in emergency shut down. (NOTE: Ride is designed to go from maximum RPM to a complete stop in 1½ -2 revolutions when put into emergency shut down).

FINDINGS: FACTS AS FOUND BY THIS INVESTIGATOR

A. Both "diaper pins" missing from left and right lap bar pivot ~~points~~ PINS. These pivot ~~points~~ PINS are located in the right and left foot area of carrier.

B. Lap bar missing from carrier #21.

C. Lap bar found leaning against the rear outside of ride.

D. Received two bent-distorted "diaper pins" from police investigator. He recovered them from carrier #21. They were under the seat in the rear outside corner.

E. Lap bar has no apparent defects.

F. Lap bar pivot ~~points~~ PINS have no apparent defects.

G. Lap bar lock has no apparent defects - it works.

H. Both emergency stop switches work properly.

I. Ride stops properly in emergency shut down.

J. Ride at maximum speed ~~moves~~ ROTATES at manufacturers stated speed. 10 RPM

K. All other carriers appear to be satisfactory.

L. Operator was trained (see Attachment #7).

M. Ride received its daily inspection (Attachment #10).

N. This investigator was unable to inspect carrier #21 and lap bar when reassembled to my satisfaction to determine suitability to be reopened. Getting dark, confusion of news crews at site. Locked out tub #21 until I can properly inspect it.

CONCLUSION:

This investigator can find no mechanical defect in carrier #21, lap bar connection areas or in the pivot pins. The lap bar lock has no apparent defects. Nothing that would mechanically explain the missing "diaper pins". "Diaper pins" are the recognized method of securing these lap bars.

While recreating the passenger seating arrangement I discovered that it was easy to place my foot on the lap bar retaining pins. In fact it was very natural to put my foot on top of the retaining pin to brace myself against the rides centrifical force.

When I examined the pins after bracing myself on them they were bent and distorted exactly like the two pins recovered from carrier #21 by Officer R.H. Keeter. With Officer Keeter's assistance we discovered it took very little force to bend the retaining pins. Any passenger seated in a carrier could easily bend these retaining pins making it possible for them to fall out immediately or at a later time.

Once these pins fell out, the lap bar and lap bar lock would continue to function properly until the unique combination of passenger numbers, body weight, body size and body motion reacting to the forces created by the ride forced the lap bar off its pivot points and out of its lock.

It is my opinion that the above is the most probable cause of this accident. I see no human design in this accident.

CORRECTIVE ACTION:

After consulting with supervisor Greenman, he ordered that all "diaper pin" type retaining pins be replaced with arc keys, fully seated and wire tied in place. In addition, this ride is to operate in a forward (clockwise direction) only. These measures apply until further notice.

970304 CAE 5090

LIST OF ATTACHMENTS

1. Blue Grass Shows accident report
2. Blue Grass Shows accident report
3. Primary inspection - Blue Grass Shows Hymalaya
4. Police Report Case #97-018191
5. Adjusters statement
6. Police notes
7. Operator training
   a. Aaron Thompson
   b. Roderick Dixon
   c. Reginald Dixon
   d. Joseph Wokick
   e. Jerry Johnson
8. Maintenance log
9. Ride specifications (copied from Owners Manual)
10. Daily inspection report
11. Photos - 1 roll by Inspector #18
    2 rolls by Hillsborough County Sheriff Department
    6 Polaroids by Hillsborough County Sheriff Department
12. Two deformed "diaper pins"
13. Press release

970304CNE5090

CONSUMER PRODUCT INCIDENT REPORT

1. NAME OF RESPONDENT
Inspector Ron Safford
~~UNKNOWN~~ XXXXXXX Reported by State of Florida

2. TELEPHONE NO. (Home) (Work)
Dept of Agriculture (904) 488-9790

3. STREET ADDRESS
Mayo Building

4. CITY STATE ZIP CODE
Tallahassee, FL 32399

5. DESCRIBE ACCIDENT SITUATION OR HAZARD, INCLUDING DATA ON INJURIES. (Use second page if necessary.)
The State of Agriculture/Amusement ride Division reported to CPSC that there had been a lap bar failure of the Himilaya ride being operated in Plant City, FL at the Fairgrounds.The report indicates that the occupants received broken legs and a broken arm in the mishap. The report indicates the occupants were able to dislodge the lap bar hold down by stepping on the "R" pins designed to secure the lap belts. The State officials are aware of other similar failures on the Himalaya rides.

6. DATE OF INCIDENT(S)
03/01/97

7. IF INJURY OR NEAR MISS, OBTAIN AGE ____ SEX ____ AND DESCRIBE INJURY
broken legs and arm

8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME
unknown at present
RELATIONSHIP

9. DESCRIPTION OF PRODUCT
Himalaya amusement ride (Portable)

10. BRAND NAME
Himalaya

3 3/3/97

11. MANUFACTURER/DISTRIBUTOR NAME, ADDRESS & PHONE
Unknown at present

12. MODEL, SERIAL NO.'S
unknown

13. DEALER'S NAME, ADDRESS & PHONE
FAIR SITE- Plant City Fairgrounds
Plant City, FL

14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES ____ NO ____ IF YES, BEFORE OR AFTER THE INCIDENT? unknown
Describe

15. PRODUCT PURCHASED NEW ____ USED ____
DATE PURCHASED unknown AGE

16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: unknown

17. HAVE YOU CONTACTED THE MANUFACTURER? YES ____ NO ____ IF NOT, DO YOU PLAN TO CONTACT THEM? unknown YES ____ NO ____
OTHER

18. IS THE PRODUCT STILL AVAILABLE? YES YYY NO ____
IF NOT, ITS DISPOSITION

19. MAY WE USE YOUR NAME WITH THIS REPORT? YES ____ NO NNN

FOR ADMINISTRATION USE

20. DATE RECEIVED
3/3/97 via phone & e mail

21. RECEIVED BY (Name & Office)
Edward J. Morganto

22. DOCUMENT NO.

23. FOLLOW-UP ACTION

24. PRODUCT CODE(S)
1293

25. DISTRIBUTION

26. ENDORSER'S NAME & TITLE

CPSC FORM 175 (9/89)

CPNJ
p/c attach

970304CNE5090
SUPPLEMENTAL
3/27/97

Florida Department of Agriculture & Consumer Services
BOB CRAWFORD, Commissioner

7 APR 1997

Please Respond To:
BUREAU OF FAIR RIDES INSPECTION
3125 Conner Boulevard, Building 4
Tallahassee, Florida 32399-1650

March 20, 1997

1293

Mr. Edward Morganto
US-CPSC
Post Office Box 1758
Windermere, Florida 34786-1758

RE: Accident on Himalaya Amusement Device
Strawberry Festival, Plant City, Florida

Dear Mr. Morganto:

Enclosed are copies of reports and miscellaneous information, concerning the referenced accident, compiled to date. The documents include the following:

1. Florida Strawberry Festival, Update (Festival Committee)
2. Incident Report (Diana T. DeVercelly)
3. Bureau Accident Report (Mr. Cliff Groscurth; Inspection Specialist, Bureau of Fair Rides Inspection)
4. Photograph Report (Mr. Cliff Groscurth; Inspection Specialist, Bureau of Fair Rides Inspection)
5. Bureau Supplemental Report (Mr. Ronnie Greenman, Inspection Supervisor, Bureau of Fair Rides Inspection)
6. Accident Report (Mighty Blue Grass Shows; Owner of the device)
7. Incident Report w/Supplements (2) (Hillsborough County Sheriff's Office)

We are awaiting one more report on the State Fair Accident before we forward copies of those documents. Should you have any questions or need additional information, please do not hesitate to contact me at 904-488-9790 or at the Bureau's Conner Boulevard address.

Sincerely,

BOB CRAWFORD
COMMISSIONER OF AGRICULTURE

A. C. Littleton, Jr., PE
Field Administrator

Enclosures (7)

cc: Ron Safford, Chief
Ronnie Greenman, Inspection Supervisor

Florida Strawberry Festival®

UPDATE

UPDATE TO YESTERDAY'S ACCIDENT ON STRAWBERRY FESTIVAL MIDWAY

March 2, 1997

FOR IMMEDIATE RELEASE

For More Information Contact:
Patsy Brooks, General Manager
(813)752-9194

Yesterday, at approximately 2:00 p.m., two males were injured on the Florida Strawberry Festival midway while riding the "Himalaya." The youngsters were treated at South Florida Baptist Hospital and released today.

Response to the accident from the Emergency Medical Service's Advanced Life Support was immediate. Three EMS stations are located on festival grounds, one of which is located on the midway.

The ride was immediately closed according to proper procedure required by the Florida Department of Agriculture and Consumer Service's Ride and Inspection Department. Ronnie Greenman, Supervisor of Ride Inspection, dispatched a ride inspector to the site.

After re-inspecting the ride, the state inspector found the ride was in compliance with the manufacturer's specifications and was re-opened.

The Himalaya was inspected on 2-24-97 by the Florida Department of Agriculture and Consumer Services, before the festival opened on the 2-27. All rides are inspected on a daily basis by The Mighty Bluegrass Shows.

This is the extent of the information that has been made available to the Florida Strawberry Festival.

All further questions should be directed to Inspector Ronnie Greenman at the Florida Department of Agriculture and Consumer Services. He may be reached Monday at (904) 488-9790.

-30-

P. O. Drawer 1869 • Plant City, Florida 33564-1869 • Phone (813) 752-9194
FAX (813) 754-4297
Location: 2202 West Reynolds Street • Plant City, Florida 33563

RE: INJURY INCIDENT ON SUPER HIMALAYA RIDE IN MIDWAY ON 3/1/97 @ APPROX. 2:00 p.m

CAUSE: Undetermined at this time, although evidence of possible mechanical defect present: cotter pins holding bar in place while ride in motion came loose restraining bar disengaged from seat #21.

OCCURENCE: Ride was in motion in reverse in its normal cycle when ride operator noticed restraining bar in upward position on car #21; immediately threw cut-off switch; ride continued in reverse for approx. 1½ revolutions before stopping. After the cut-off switch was thrown but before the ride came to a complete stop, riders in #21 was ejected from the seat; struck a steel beam of the ride frame construction which was approx. 4 feet to the outside of the revolving cars/seats, landing on the metal flooring of the ride.

RIDERS/INJURIES:
1) Joshua Spencer, 2909 Dodge Dr. Polk City, FL 33868 DOB: 5/7/89 (941) 984-3242; head laceration, possibly requiring stitches; swollen ankle-fx not ruled out at this ti
2) Donald Spencer, 2909 Dodge Dr. Polk City, FL 33868 DOB: 10/20/86 (941) 984-3242; lip laceration; rt. tibia/fibu fx

Both taken by EMS to So. Fla. Baptist Hospital for treatment - mother Deborah Spencer accompanying them.

RIDE OWNERS/ OPERATORS: The Mighty Blue Grass Shows; Operators: Jerry Johnson, 2032 S51St., Tampa, FL DOB 2/6/52; office # 247-4431; Joseph Wokich, DOB 7/10/75, 754-3460; Ride Certification was observed properly displayed - No 609938; USA ID # 2537; date of inspection on 1/31/97 by the Dept. of Agriculture inspector #20.

WITNESSES:
1) Shelley Renee Bixler;2828 Stone Land Lane, Sarasota, FL 34231; DL# B246-796-75-878-0; DOB 10/18/75; (941) 925-3427 - work #; (941) 927-1070; Rider
2) Richard Troy Bixler (husband) address as above; DL# B246-758-75-094- DOB: 3/18/75;Work# (941) 493-5204; Rider
3) Sara Hall w/f; DOB 12/23/84; 2918 Clubhouse Dr, Plant City; (813) 754-2059; walking through Midway
4) Christina Genualdi W/F; DOB 5/30/85; 2606 Lakeview Way, Plant City, (813) 754-6357;walking through Midway
5)Michelle Sherrill, w/f DOB 2/23/59; 3506 North Tindle Rd., Plant City 33565 (813) 754-2160; standing between rides.

ON SITE: EMS responded for injured parties; Hillsborough Sheriff Deputies respon and evacuated ride and closed off for investigation; Deputy R. Keeter investigating deputy, badge #373; Hills Sheriff rept. # 97-018191. personnel from The Mighty Blue Grass Shows on site; on site Festival adjuster, Diana T. DeVercelly from Affiliated Adjusters & Appraisers. Ride Inspectors from Dept. of Agriculture & Consumer Services were call to Midway - Cliff Groscurth #18 and Lewis J. Merz (904) 488-9790-Their report of findings not available at the time of this briefing. Ride Owner has notified their primary ins. carrier for further handling.

Diana T. DeVercelly "Bo Peep"
Affiliated Adjusters & Appraisers

ACCIDENT REPORT

ACCIDENT DATE/TIME: March 1, 1997 2:00 pm

LOCATION: Strawberry Festival
Plant City, FL

DEVICE: Himalaya

OWNER: Mighty Blue Grass Shows

MFG: Reverchon

USA ID: #03537

SN: 1884

INJURED: #1, #2, #3 see supplementary report by Supervisor Greenman

ACCIDENT INVESTIGATOR: Cliff Groscurth, Inspector #18

WITNESS: See Attachment #4 Police Report - Case #97-018191

RESPONSE TIME FRAME:
3:29 pm - Alpha Page from Bureau Chief
3:40 pm - Arrived at Strawberry Festival
9:30 pm - Left Strawberry Festival
10:15 pm - Off duty (HQ) Zephyrhills

ACTION TAKEN AFTER ARRIVAL:

Went to Blue Grass Shows office. Determined which amusement device was involved and where it was located on Festival grounds. Carnival Manager Mr. Bill Doss accompanied me to the accident site.

When I arrived at the ride it was closed, fenced off, and being guarded by two Hillsborough County Sheriffs Deputies. I identified myself as the State of Florida inspector assigned to investigate this accident and asked for their assistance. They called their investigator Sheriff Deputy R.H. Keeter. Deputy Keeter provided me with his report (Attachment #4), notes (Attachment #6), two rolls of 35 mm film and 6 Polaroid photographs (Attachment #11), and two deformed "diaper pins" (Attachment #12). These two retaining pins were recovered from under the seat of carrier #21 by Deputy Keeter.

During the next (approximate) 6 hours (3:40 pm - 9:30 pm). This investigator performed the following tasks, not in chronological order:

1. Reviewed/examined accident area.
2. Examined carrier #21.
3. Found and examined lap bar from carrier #21.
4. Interviewed police officers and police investigator.
5. Interviewed ride foreman - Jerry Johnson.
6. Interviewed ride 2nd man - Roderick Dixon.
7. Interviewed show manager - Bill Doss.
8. Interviewed show ride supervisor - Lawrence Wilkens.
9. Interviewed show owner - Jim Murphy.
10. Re-interviewed ride foreman.
11. Re-interviewed ride 2nd man.
12. Photographed ride, carriers and parts.
13. Inspected carrier #21 and lap bar for defects.
14. Inspected all carriers and lap bars.
15. Did complete primary inspection of entire device.
16. Completed amusement device/attraction inspection report.
17. Timed RPM of this Himalaya.
18. Reassembled lap bar to carrier #21 looking for defects.
19. Collected documents (see Attachments).
20. Consulted with Supervisor Greenman.
21. Locked-out carrier #21 (until I can inspect it in better light and less confusion)
22. Put out of service carriers #20 and #22 (same reason as #21).
23. Informed Bill Doss of actions to be taken as relayed to me by Supervisor Greenman.
24. Confirmed compliance with #23.
25. Spoke with Strawberry Festival Director.
26. Found ride to be in compliance / reopened to public 6:55 pm.

DESCRIPTION OF ACCIDENT:

1. Three passengers seated in carrier #21. Father seated in outside position, two children seated next to him. Lap bar in place. This is the correct seating pattern. (See supplementary report by Supervisor Greenman)

2. Ride sequence began with clockwise rotation (passengers moving forward).

3. Ride accelerated to maximum RPM (10).

4. Ride decelerated to complete stop.

5. Ride began counter clockwise rotation (passengers moving backward).

6. Before ride reached maximum RPM in reverse, operator in control booth (Jerry Johnson) saw something was wrong (passenger had one foot outside seat area and was raising up in the seat) when carrier #21 passed him.

7. Ride operator Jerry Johnson activated the emergency stop switch on his console.

8. Ride 2nd man Roderick Dixon saw something was wrong and activated his emergency stop switch. This switch and 2nd man's station is located 180 degrees across ride from operators booth.

9. Ride went into emergency shut down.

10. As carrier #21 approached the 2nd man's location the two children were thrown from the ride and landed at the feet of the 2nd man with the lap bar on top of them.

11. The ride continued to rotate another 1-1½ revolutions in emergency shut down. Ride is designed to go from maximum RPM to a complete stop in 1½ -2 revolutions when put into emergency shut down.

FINDINGS: FACTS AS FOUND BY THIS INVESTIGATOR

A. Both "diaper pins" missing from left and right lap bar pivot shafts. These pivot shafts are located in the right and left foot area of carrier.

B. Lap bar missing from carrier #21.

C. Lap bar found leaning against the rear outside of ride.

D. Received two bent-distorted "diaper pins" from Sheriff's investigator. He recovered them from carrier #21. They were under the seat in the rear outside corner.

E. Lap bar had no apparent defects.

F. Lap bar pivot shafts had no apparent defects.

G. Lap bar lock had no apparent defects. It worked properly.

H. Both emergency stop switches worked properly.

I. Ride stopped properly in emergency shut down.

J. Ride at maximum speed rotated at manufacturers stated speed. 10 RPM

K. All other carriers appeared to be satisfactory.

L. Operator was trained - see Attachment #7.

M. Ride received its daily inspection - Attachment #10.

N. This investigator was unable to inspect carrier #21 and lap bar when reassembled to my satisfaction to determine suitability to be reopened. Because it was getting dark and the confusion of news crews at site. Locked out tub #21 until I could properly inspect it.

DISCUSSION:

This investigator found no mechanical defect in carrier #21, lap bar connection areas or in the pivot shafts. The lap bar lock had no apparent defects. Nothing that would mechanically explain the missing "diaper pins". "Diaper pins" are a recognized method of securing these lap bars.

While recreating the passenger seating arrangement I discovered that it was easy to place my foot on the lap bar retaining pins. In fact it was very natural to put my foot on top of the retaining pin to brace myself against the rides centrifical force.

When I examined the pins after bracing myself on them they were bent and distorted exactly like the two pins recovered from carrier #21 by Officer R.H. Keeter. With Officer Keeter's assistance we discovered it took very little force to bend the diaper pins. Any passenger seated in a carrier could easily bend these diaper pins making it possible for them to fall out either immediately or at a later time.

CONCLUSION:

Once the retaining pins fell out, the lap bar and lap bar lock would continue to function properly until the unique combination of passenger numbers, body weight, body size and body motion reacting to the forces created by the ride forced the lap bar off its pivot shafts and out of its lock.

It is my opinion this is the most probable cause of this accident.

CORRECTIVE ACTION: Temporary

After consulting with supervisor Greenman, he ordered that all "diaper pin" type retaining pins be replaced with "R" keys, fully seated and wire tied in place. In addition this ride is to operate in a forward, clockwise direction, only. These measures apply until further notice.

CORRECTIVE ACTION: Suggested design change

The retaining pins, of any type, used to hold the lap bar on it's pivot shafts need to be shielded from passenger access. This will prevent intentional tampering or accidental dislodgement.

LIST OF ATTACHMENTS

1. Blue Grass Shows accident report
2. Blue Grass Shows accident report
3. Primary inspection - Blue Grass Shows Himalaya
4. Police Report Case #97-018191
5. Adjusters statement
6. Police notes
7. Operator training
    a. Aaron Thompson
    b. Roderick Dixon
    c. Reginald Dixon
    d. Joseph Wokick
    e. Jerry Johnson
8. Maintenance log
9. Ride specifications (copied from Owners Manual)
10. Daily inspection report
11. Photos - 1 roll by Inspector #18
    2 rolls by Hillsborough County Sheriff Department
    6 Polaroids by Hillsborough County Sheriff Department
12. Two deformed "diaper pins"
13. Press release

BOB CRAWFORD
COMMISSIONER

STATE OF FLORIDA
DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
904/488-9790 904/488-9023 FAX

FAIR RIDES INSPECTION
PHOTOGRAPH REPORT

Section 616.242 (5)(g) F.S.

SITE: (CIRCLE ONE) (TEMPORARY) PERMANENT

INSPECTION: (CIRCLE ONE) SCHEDULED RETURN UNANNOUNCED (OTHER)

DATE 3-1-97 INSPECTOR # 18 CONFIRMATION # 030197-01
DEVICE OWNER BLUE GRASS SHOWS USAID # 03537
DEVICE NAME HIMALAYA PERMIT DECAL #
MFG REVERCHON CERTIFICATE TO OPERATE # 601616
WHEN FACING DEVICE/ATTRACTION: LEFT KAMAKAZE RIGHT SKY WHEEL

PRIMARY COMPANY
EVENT NAME
ADDRESS
CITY
COUNTY

Photo #1 SHOWS FRONTAL VIEW OF THIS HIMALAYA. #21 CARRIER IS UPHILL TO THE LEFT

Photo #2 CARRIER #21. SHOWS MISSING LAP BAR. CARRIER TO THE LIGHT #22 SHOWS PROPER LAP BAR CONFIGURATION.

Photo #3 CARRIER #21. SHOWING LAP BAR PIVOT PINS & BROKEN STUB OF AIR SHOCK AND IT'S RETAINING CLIP.

Photo #4 CARRIER #21 - SAME AS NUMBER 3 BUT CLOSE UP

Photo #5 CARRIER #21 LAP BAR PIVOT PIN LOOKING DOWN UNIT.

3-3-97
Date

Inspector's Signature
Division of Standards

DACS 03401 White/Bureau Canary/Inspector

STATE OF FLORIDA
DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
904/488-9790 904/488-9023 FAX

BOB CRAWFORD
COMMISSIONER

FAIR RIDES INSPECTION
PHOTOGRAPH REPORT

Section 616.242 (5)(g) F.S.

SITE: (CIRCLE ONE) (TEMPORARY) PERMANENT

INSPECTION: (CIRCLE ONE) (SCHEDULED) RETURN UNANNOUNCED OTHER

DATE 3-1-97 INSPECTOR # _____ CONFIRMATION # _____
DEVICE OWNER BLUE GRASS SHOWS USAID # _____
DEVICE NAME _____ PERMIT DECAL # _____
MFG _____ CERTIFICATE TO OPERATE # _____
WHEN FACING DEVICE/ATTRACTION: LEFT _____ RIGHT _____

PRIMARY COMPANY _____
EVENT NAME _____
ADDRESS _____
CITY _____
COUNTY _____

Photo #6 SHOWS TWO SMALLER PINS DEFORMED BY INSPECTOR WHILE HE WAS SEATED IN CARRIER. LARGER PIN WAS DEFORMED EVEN EASIER THAN THE SMALLER ONES ~~DUE TO INCREASED~~ LEVERAGE

Photo #7 CARRIER #22 SHOWING HOW LAP BARS ARE CONNECTED TO PIVIOT PINS IN ALL OTHER CARRIERS

Photo #8

Photo #4

Photo #5

3-3-97
Date

Inspector's Signature
Division of Standards

Supplemental Report
By: Supervisor Ronnie Greenman
March 1, 1997

Accident: March 1, 1997
Date/Time: Approx. 1:50 pm

Place of Accident: Strawberry Festival
Plant City, FL

Action Taken: At approximately 3:50 pm on March 1, 1997, I checked my Bureau of Fair Rides Pager system. Bureau Chief Ron Safford had left a message, reporting an amusement ride accident at the Strawberry Festival.

I contacted James Murphy - owner of the ride, Blue Grass Shows (813) 754-3460. I contacted the Strawberry Fair manager "Patsy" (813) 752-4779. I contacted the South Florida Baptist Hospital, ER Room (813) 757-1200.

Victim #1: Donald Spencer, age 35, DOB 12-06-62, father of the other two victims. Injury to left arm. Extent not know at the time.

Victim #2: Donald Spencer II, age 10, DOB 08-20-86, multiple cuts to the head/face; injury to left knee; broken right leg.

Victim #3: Joshua James Spencer, age 7, DOB 05-07-89, broken left leg, cut on head.

Victims
Home Address: 2909 Dodge Drive, Polk City, FL 33868 [PH: (941) 984-3242]

I spoke with Mr. Spencer and his wife Deborah Spencer (time 5:30 pm). Mr. Spencer stated he was seated on the left side of the carrier, Donald was seated in the center of the carrier and Joshua was seated on the right side of the carrier, facing forward.

NOTE: Mr. Spencer's weight is approximately 220 lbs.
Donald II's weight is approximately 230 lbs.
Joshua's weight is approximately 80 lbs.

Mr. Spencer stated he tried to hold the boys in the carrier when the lap bar had broke away. He yelled at the operator to stop, "but they continued to run the ride". Ride was turning in reverse.

NOTE: This ride takes approximately 1 ½ to 2 turns to stop after the stop control is placed into its mode.

NOTE: State Inspector was at the site 10 minutes after being notified. See accident report for more details. Additional information: 03-02-97 the two boys were held in the hospital over night and are receiving therapy.

Ronnie M Greenman

Page ___ of ___

STATE OF FLORIDA
DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
904/488-9790 904/488-9023 FAX

OB CRAWFORD
COMMISSIONER

FAIR RIDES INSPECTION

AMUSEMENT DEVICE/ATTRACTION INSPECTION REPORT

Section 616.242 (5)(g) and (5)(h) F.S.

SITE: (CIRCLE ONE) TEMPORARY PERMANENT

INSPECTION: (CIRCLE ONE) SCHEDULED RETURN UNANNOUNCED OTHER

DATE 3-1-97 INSPECTOR # 18 CONFIRMATION # 030197-01
DEVICE OWNER BLUE GRASS USAID # 03537
DEVICE NAME SUPER HYMALAYA PERMIT DECAL # 500834
MFG REVERCHON CERTIFICATE TO OPERATE # 601616
WHEN FACING DEVICE/ATTRACTION: LEFT KAMIKAZE RIGHT SKY WHEEL

PRIMARY COMPANY ___
EVENT NAME ___
ADDRESS ___
CITY ___
COUNTY ___

6:55 Inspection Complete

INSPECTION REQUIREMENT CHECKLIST:
P = Passed N = Not Applicable

1. REQUIRED
   a. Daily Inspec. Reports [P] ___
   b. Insurance Certificate [P] ___
   c. Annual/NDT Inspections [P] ___
   d. Check Manuals [P] ___
   e. Mfg. I.D. Plate [ ] 1884

2. INSTALLATION
   a. Blocking [ ] BELOW
   b. Stairs/Ramps/Walkways [P] ___
   c. Fencing/Guarding [P] ___
   d. Braces/Guys/Anchors [ ] BELOW
   e. Signs [P] ___
   f. Electrical [P] ___

3. STRUCTURAL
   a. Hydraulics/Pneumatics [P] REPLACE HAIRPING WITH ARCH KEYS
   b. Pins/Bolts/Keys [P] ___
   c. Condition [P] NO REVERSE RUNNING
   d. Tires/Wheels/Coasters [P] ___
   e. Bearings/Spindles/Axles [P] ___
   f. Track [P] ___

4. CARRIERS
   a. Attachments [P] ___
   b. Sweeps/Carriers [ ] BELOW
   c. Restraints [ ] BELOW
   d. Seats/Padding [P] ___
   e. Conditions [P] ___

5. OPERATION [P] ___
   a. RPM Check [P] 10 RPM
   b. Controls [P] ___
   c. Brakes [P] ___
   d. Limit Controls [P] ___
   e. Communications [N] ___

MR BILL DOSS HAS COMPLYED WITH BUREAU DIRECTIVE REGARDING TEMPORY SAFTY CHANGES

6. OTHER
   a. ___ [ ] ___
   b. ___ [ ] ___
   c. ___ [ ] ___
   d. ___ [ ] ___
   e. ___ [ ] ___
   f. ___ [ ] ___

INSPECTION RESULTS: (2A) TIGHTEN BLOCKING ON UNDERPINNING REAR OF SCINER (6 CE) (2D) ONE LOOSE FITTING ON SCIENTIFY SUPPORT 85 (2B) LOCK-OUT TUB #21 LOCK-OUT # 500910 CANNT INSPECTED LAP BAR SATISFACTORY AT THIS TIME, PRESERVE INTERERITY OF NO PASSENGERS IN THIS TUB CARRIER FOR FURTHER INSPECTION YOR STATES OPERATOR IS TRAINED IN LOADING + OPERATION OF THIS DEVICE

IMMINENT DANGER ORDER HEREBY ISSUED, when box is checked. The above identified amusement device or amusement attraction is not in compliance with Section 616.242 (5)(h) F.S., manufacturer's specifications or ASTM Standards. The amusement device or amusement attraction failed to pass inspection for the above reasons and must be reinspected by the department prior to opening to the public. Stop Operation Order # ___.

[signature] #18
Inspector's Signature
DIVISION OF STANDARDS

I acknowledge receipt of this inspection report and associated orders as listed above. NOTICE OF RIGHTS (SEE OTHER SIDE)

[signature]
Owner/Manager/Designee Signature

DACS 03407 White/Bureau Canary/Inspector Pink/Owner/Manager

COPY

STATE OF FLORIDA

DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

904/488-9790 904/488-9023 FAX

BOB CRAWFORD
COMMISSIONER

FAIR RIDES INSPECTION

AMUSEMENT DEVICE/ATTRACTION INSPECTION REPORT

Section 616.242 (5)(g) and (5)(h) F.S.

Blue Grass

SITE: (CIRCLE ONE) (TEMPORARY) PERMANENT

INSPECTION: (CIRCLE ONE) (SCHEDULED) RETURN UNANNOUNCED OTHER

DATE 2-24-97 INSPECTOR # J. CONFIRMATION # 022697-1

DEVICE OWNER Blue Grass USAID # 2537

DEVICE NAME Super Himalaya PERMIT DECAL # 500834

MFG Reverchon CERTIFICATE TO OPERATE # 6918 14

WHEN FACING DEVICE/ATTRACTION: LEFT KAMAKAZE RIGHT SKYWHEEL

PRIMARY COMPANY

EVENT NAME

ADDRESS

CITY

COUNTY

INSPECTION REQUIREMENT CHECKLIST:

P = Passed N = Not Applicable

1. REQUIRED
   - a. Daily Inspec. Reports [P]
   - b. Insurance Certificate [P]
   - c. Annual/NDT Inspections [P]
   - d. Check Manuals [P]
   - e. Mfg. I.D. Plate [ ] S/N 1824

2. INSTALLATION
   - a. Blocking [P]
   - b. Stairs/Ramps/Walkways [P]
   - c. Fencing/Guarding [P]
   - d. Braces/Guys/Anchors [ ]
   - e. Signs [ ] See Below
   - f. Electrical [P]

3. STRUCTURAL
   - a. Hydraulics/Pneumatics [P]
   - b. Pins/Bolts/Keys [ ] See Below
   - c. Condition [P]
   - d. Tires/Wheels/Coasters [P]
   - e. Bearings/Spindles/Axles [P]
   - f. Track [P]

4. CARRIERS
   - a. Attachments [P]
   - b. Sweeps/Carriers [P]
   - c. Restraints [ ] See Below
   - d. Seats/Padding [P]
   - e. Conditions [P]

5. OPERATION
   - a. RPM Check [P]
   - b. Controls [P]
   - c. Brakes [P]
   - d. Limit Controls [P]
   - e. Communications [ ]

6. OTHER
   - a. [ ]
   - b. [ ]
   - c. [ ]
   - d. [ ]
   - e. [ ]
   - f. [ ]

JC

INSPECTION RESULTS: Carriers #6, #14 Latch will Not Hold. #11 #4 Latches not Adjusted. OK's #2 Retain Key w/out Rec. Missing Key w/out Rec. #4 Bolts Missing; w/out #10 Cir Clip w/ Missing. Fasteners Loose in Top Frame. Inside Seccury not properly Aligned. Missing OWC Items JC OK

Management Stated Intentions have been Made in The past and Lack of Time Notice

IMMINENT DANGER ORDER HEREBY ISSUED, when box is checked. The above identified amusement device or amusement attraction is not in compliance with Section 616.242 (5)(h) F.S., manufacturer's specifications or ASTM Standards. The amusement device or amusement attraction failed to pass inspection for the above reasons and must be reinspected by the department prior to opening to the public. Stop Operation Order #

Inspector's Signature
DIVISION OF STANDARDS

I acknowledge receipt of this inspection report and associated orders as listed above. NOTICE OF RIGHTS (SEE OTHER SIDE)

Owner/Manager/Designee Signature

ACS 03407 White/Buff

BOB CRAWFORD
COMMISSIONER

STATE OF FLORIDA
DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
FAIR RIDES INSPECTION
ACCIDENT REPORT

(All Accidents Must Be Reported)
(All accidents with serious injury - overnight hospitalization - shall be investigated by the Bureau)
Section 616.242(23), F.S.

904/488-9790
904/488-9023 FAX
Emergency Only:
1/800/544-3862

Date of Accident 3-1-97 Time of Accident 2:00 a.m. (p.m.)

Name of Amusement Company	Address	City/State/Zip
Blue Grass Shows	2032 S. 51st Street	Tampa, Fl 33619
Name of Fair/Event	**Address**	**City/State/Zip**
Strawberry Festival	2708 Reynolds Street	Plant City, Fl 33566

Name of Injured Person	Age of Injured Person(Years)	Male/Female	Address	City/State/Zip	Telephone
Donald Spencer	10	Male	2909 Dodge Dr.	Polk City, Fl	33868

Did accident occur on a device/attraction? Yes X No ___ Name of device/attraction Super Himalaya USAID #
Name of the device/attraction operator
If accident did not occur on a device/attraction, where did it occur?

Describe injury(s): Cut to lip, right leg possibly broken

Give a brief statement how accident occurred: (Write continued or additional information on back)
Lap bar came off of the car while the ride was running in reverse. The children ejected from the seat hitting a metal pole on the platform.

Description of actions taken following the accident: Paramedics arrived on the scene, the children were taken to S. Fla Baptist hospital. The ride was closed for inspection.
Accident classification (circle as appropriate): 1. Mechanical; 2.Operational; 3. Patron;
Other

WITNESSES TO ACCIDENT: (Please provide current mailing address and telephone numbers.)

Name of Ride Operator Jerry Johnson	Address 2032 S. 51st St.	City/State/Zip Tampa, Fl 33619	Telephone	
Name of Witness same as brother	Address	City/State/Zip	Telephone	
Name of Witness	Address	City/State/Zip	Telephone	
Name of Witness	Address	City/State/Zip	Telephone	

(Use additional witness information on the back)

NOTE: Any statements taken from ride operator, company personnel and/or witnesses must be attached to this report. Any statements or reports filed by a Sheriff's Department, Police Department, Fair/Event Security or Emergency Vehicle Attendants at the scene of the accident shall also be attached to this report.

All accidents shall have an Accident Report completed within 24 hours and mailed to: Bureau of Fair Rides Inspection, 3125 Conner Boulevard, Building 4, Tallahassee, FL 32399-1650. THE BUREAU REQUESTS THAT ANY ACCIDENT REQUIRING EMERGENCY ROOM ATTENTION OR HOSPITAL TREATMENT, OBSERVATION OR CONFINEMENT BE REPORTED TO THE FLORIDA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES/DIVISION OF STANDARDS, BUREAU OF FAIR RIDES INSPECTION IMMEDIATELY (1-800-544-3862).

NAME OF PERSON COMPLETING REPORT Dawn Murphy Dawn Murphy 3.1.97
Please Print Name Signature

)B CRAWFORD
:OMM.SSIONER

STATE OF FLORIDA
DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
FAIR RIDES INSPECTION
ACCIDENT REPORT

904/488-9790
904/488-9023 FAX
Emergency Only:
1/800/544-3862

(All Accidents Must Be Reported)
(All accidents with serious injury - overnight hospitalization - shall be investigated by the Bureau)
Section 616.242(23), F.S.

Date of Accident 3·1·97 Time of Accident 2:00 a.m./(p.m.)

Name of Amusement Company	Address	City/State/Zip
Blue Grass Shows	2032. S. 51st. Street	Tampa, Fl 33619
Name of Fair/Event	**Address**	**City/State/Zip**
Strawberry Festival	2708 Reynolds Street	Plant City, Fl 33566

Name of Injured Person	Age of Injured Person(Years)	Male/Female	Address	City/State/Zip	Telephone
Joshua Spencer	7	Male	2909 Dodge Dr.	Polk City, Fl 33868	941 984-32

Did accident occur on a device/attraction? Yes X No ___ Name of device/attraction Super Himalaya USAID # ___
Name of the device/attraction operator ___
If accident did not occur on a device/attraction, where did it occur?

Describe injury(s): head laceration, ankle fracture

Give a brief statement how accident occurred: (Write continued or additional information on back)
ride was in motion, reverse when the bar on the car came off, the children were thrown from the car and hit a metal pole on the side platform

Description of actions taken following the accident: ride was immediately shut down, awaiting state ride inspectors. Children were transported to South FL Baptist Hospital.
Accident classification (circle as appropriate): (1.)Mechanical; 2.Operational; 3. Patron;
Other ___

WITNESSES TO ACCIDENT: (Please provide current mailing address and telephone numbers.)

Name of Ride Operator	Jerry Johnson	Address 2032 S. 51st St.	City/State/Zip Tampa, FL 33619	Telephone	
Name of Witness	Shelly + Richard Bixler	Address	City/State/Zip	Telephone 941-925-3427	
Name of Witness	Sara Hall	Address 2918 Clubhouse Dr.	City/State/Zip Plant City, FL 33565	Telephone 813-754-2059	
Name of Witness		Address	City/State/Zip	Telephone	

(Write additional witness information on the back)

NOTE: Any statements taken from ride operator, company personnel and/or witnesses must be attached to this report. Any statements or reports filed by a Sheriff's Department, Police Department, Fair/Event Security or Emergency Vehicle Attendants at the scene of the accident shall also be attached to this report.

All accidents shall have an Accident Report completed within 24 hours and mailed to: Bureau of Fair Rides Inspection, 3125 Conner Boulevard, Building 4, Tallahassee, FL 32399-1650. **THE BUREAU REQUESTS THAT ANY ACCIDENT REQUIRING EMERGENCY ROOM ATTENTION OR HOSPITAL TREATMENT, OBSERVATION OR CONFINEMENT BE REPORTED TO THE FLORIDA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES/DIVISION OF STANDARDS, BUREAU OF FAIR RIDES INSPECTION IMMEDIATELY (1-800-544-3862).**

NAME OF PERSON COMPLETING REPORT Dawn Murphy Dawn Murphy 3.1.97
Please Print Name / Signature / Date

CS03403
/09/93

White/Bureau Canary/Fair/Event Pink/Amusement Company

BLUE GRASS SHOWS
DAILY INSPECTION REPORTS

Name of Ride Spec Hamaliya Location PLANT CITY STRAWBERRY FESTIVAL

Date 2/27/97 – 3/9/97

Codes: (S) Satisfactory (X) Unsatisfactory (N) Does not apply

	T	F	(S)	S	M	T	W	T	F	S	S	M	T	W
STRUCTURAL														
Welds	S	S	S											
Cable / Clamps	S	S	S											
Pins / Bolts / Nuts	S	S	S											
Fencing	S	S	S											
Blocking	S	S	S											
Platforms / Steps / Walkways	S	S	S											
Belts / Guards	S	S	S											
Hoses (Air / Hydraulic)	S	S	S											
VEHICLES														
Padding	S	S	S											
Safety Bars / Belts	S	S	S											
Anchors or Spindles	S	S	S											
DRIVE														
Motors	S	S	S											
Controls	S	S	S											
Cables	N	N	N											
Wheels	S	S	S											
Electric														
Ground	S	S	S											
Electric Boxes	S	S	S											
Lights	S	S	S											
Cables	S	S	S											
OPERATION														
Brakes	S	S	S											
Correct	S	S	S											
Anti-rollback Devices	N	N	N											
Instructional Signs	S	S	S											
INITIALS	R	DR	D											

INSPECTOR'S SIGNATURE _____

PRINT NAME Rodrick Dixon

Characteristics

① Generalities

- Number of cars - Nombre de voit. : 24
- Number of seats - Nombre de places : 72
- Rotation p. minute - Nombre tours/min : 10
- Speed - - Vitesse d. voit. : ca. 22 Km/h.

② Base of calculation 'TEST'

- Weight p. person - poids p. pers. : 270 pds. is 122 kg
- Weight of 3 persons (one car) p. voit. : 810 pds. is 367 kg
- Weight of 72 persons (full load) (pleine charge) : 19440 pds is 8806 kg
- Starting time - temps d'acceleration : 33 sec.
- Max. speed - vitesse maximum : 10 Rpm
- Braking time - temps de décélération : 33 sec.
- Time of fatigue of the metal (temps de fatigue de la matiere) : minimum
- Rate of work of the material A37 for the testing period following the norms. (Taux de travail de la matiere A.37 pour période d'essais suivant normes) : 18 kg/mm² ≃ 49%
- Hydraulic pressure corresponding by test with full load, uniformly distributed. (pression du circuit hydraulique correspondant aux essai pleine charge uniformément répartie) : <190. b
- Highest authorized pressure (pression de poiute admissible) : 360 b
- Authorized pressure by continual working. (Pression continue admissible) : 315 b

MAINTENANCE AND OPERATIONS PERSONNEL TRAINING RECORD

Amusment company: BLUE GRASS SHOWS Owner: JAMES MURPHY

t employee: Aaron Thompson Social Security #: 261-91-1792

ersons listed below have successfully completed the training, as indicated by the date of completion and trainers intials in the appropriat columnas reqired for compliance with ASTM.F24 committee standards.The trainers who conduct the training also meet quirments of ASTM.F24 committee standards and or certified by this company to conduct training,supervise,and observe the ctions and operations

Signature of Owner/Operator: [signature] Date: 1-23-97

F DEVICE	Personal have been instructed and trained in the duties and procedures listed below			Personnel have been supervised and observed successfuly performing the duties below		Name of trainer
/Attraction cturer	Inspection & preventive maintenance	Specific duties for assigned position(s)	General safety & energency procedures	Demostration of performance of assigned duties and inspections	Demostrations of performance inspect & maintenance duties of assigned position	
		All events	All			
/Attractions super limalaya cturer	Date/Trainer	1/23/97 Date/Trainer	1/23/97 Date/Trainer	Date/Trainer	Date/Trainer	[signature]
		[signature]	[signature]			
/Attractions :turer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
Attractions turer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
Attractions turer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	

MAINTENANCE AND OPERATIONS PERSONNEL TRAINING RECORD

Amusement company: BLUE GRASS SHOWS Owner: JAMES MURPHY

of employee: Patrick Dixon Social Security #: 556-31-0168

persons listed below have successfully completed the training, as indicated by the date of completion and trainers intials in the e appropriat columnas reqired for compliance with ASTM.F24 committee standards.The trainers who conduct the training also meet equirments of ASTM.F24 committee standards and or certified by this company to conduct training,supervise,and observe the ections and operations

Signature of Owner/Operator: [signature] Date: 1-3-97

OF DEVICE	Personal have been instructed and trained in the duties and procedures listed below			Personnel have been supervised and observed successfuly performing the duties below		Name of trainer
Ferris Wheel						
/Attraction cturer	Inspection & preventive maintenance	Specific duties for assigned position(s)	General safety & emergency procedures	Demostration of performance of assigned duties and inspections	Demostrations of performance inspect & maintenance duties of assigned position	
Reverso	All	Events	All	GOOD	GOOD	1-3-97
/Attractions cturer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
/Attractions cturer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
/Attractions cturer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
/Attractions cturer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	

MAINTENANCE AND OPERATIONS PERSONNEL TRAINING RECORD

Amusment company:_ BLUE GRASS SHOWS Owner:_ JAMES MURPHY

of employee: Reginald Dion Social Security #:_ _____

persons listed below have successfully completed the training, as indicated by the date of completion and trainers intials in the e appropriat columnas reqired for compliance with ASTM.F24 committee standards.The trainers who conduct the training also meet equirments of ASTM.F24 committee standards and or certified by this company to conduct training,supervise,and observe the ections and operations

Signature of Owner/Operator: Will R[illegible] Date: 2-26-97

F DEVICE	Personal have been instructed and trained in the duties and procedures listed below			Personnel have been supervised and observed successfuly performing the duties below		Name of trainer
/Attraction cturer	Inspection & preventive maintenance	Specific duties for assigned position(s)	General safety & emergency procedures	Demostration of performance of assigned duties and inspections	Demostrations of performance inspect & maintenance duties of assigned position	
Attractions - Himalaya		2-26-97				John Tiller
turer rchon	Date/Trainer	Date/Trainer JT	Date/Trainer	Date/Trainer	Date/Trainer	John Telley
Attractions						
urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
ttractions						
urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
ttractions						
urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	

MAINTENANCE AND OPERATIONS PERSONNEL TRAINING RECORD

Amusement company: BLUE GRASS SHOWS Owner: JAMES MURPHY

of employee: Joseph Winkel Social Security #: _____

persons listed below have successfully completed the training, as indicated by the date of completion and trainers initials in the e appropriat columnas reqired for compliance with ASTM.F24 committee standards.The trainers who conduct the training also meet equirments of ASTM.F24 committee standards and or certified by this company to conduct training,supervise,and observe the ections and operations

Signature of Owner/Operator: Will R [illegible] Date: 2-26-97

F DEVICE	Personal have been instructed and trained in the duties and procedures listed below			Personnel have been supervised and observed successfuly performing the duties below		Name of trainer
/Attraction cturer	Inspection & preventive maintenance	Specific duties for assigned position(s)	General safety & emergency procedures	Demostration of performance of assigned duties and Inspections	Demostrations of performance inspect & maintenance duties of assigned position	
Attractions						
turer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
Attractions						
urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
ttractions						
urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
ttractions						
rer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	

MAINTENANCE AND OPERATIONS PERSONNEL TRAINING RECORD

Amusment company:_ BLUE GRASS SHOWS Owner:_ JAMES MURPHY

of employee: Jerry Johnson Social Security #:_ _____

persons listed below have successfully completed the training, as indicated by the date of completion and trainers intials in the appropriat columnas reqired for compliance with ASTM.F24 committee standards.The trainers who conduct the training also meet quirments of ASTM.F24 committee standards and or certified by this company to conduct training,supervise,and observe the ctions and operations

Signature of Owner/Operator: Will R Dan Date: 1-3-97

DEVICE	Personal have been instructed and trained In the duties and procedures listed below All events with him			Personnel have been supervised and observed successfully performing the duties below Safety - Building safety Loading-unloading-operation		Name of trainer Will R Dan
Attraction turer Everson	Inspection & preventive maintenance All	Specific duties for assigned position(s) Events	General safety & emergency procedures All	Demostration of performance of assigned duties and inspections Excelent	Demostrations of performance inspect & maintenance duties of assigned position Good	1-3-97 Wilson
Attractions turer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
ttractions urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
ttractions urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	
ttractions urer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	Date/Trainer	

DAILY MAINTENANCE LOG

27-Feb Thursday - I inspected the Ride, Ride is ready
Tego Change spotlight.

28-Feb Got a short ing fulse Blocks, Change lock 3/2 Bar

1-Mar Ride inspected, short in box, fix lap bar

2-Mar

3-Mar

4-Mar

5-Mar

6-Mar

7-Mar

8-Mar

9-Mar

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
INCIDENT REPORT

PAGE 1 OF 3

1. Case No. 97-018191 | Event No. 1078

2. Type of Incident: Accidental Injury ☐ Comm ☐ Att ☒ N/A ☐ DV | SIG CODE: N/A | 3. Statute No.: N/A

4. Incident Date Time: 03 01 97 1355 | To: Date Time | 5. Report Date Time: 03 01 97 1402 | 6. Other Case No. Agency: N/A

7. Location of Incident Scene: Strawberry Festival 2202 W. Reynolds St. Plant City Fl. 33564 | 8. Grid: 2301 | 9. # Off: N/A ☐ Gang ☐ Juvenile

10. Location Type
01-Residence-Single
02-Apartment/Condo
03-Residence-Other
04-Hotel/Motel
05-Convenience Store
06-Gas Station
07-Liquor Sales
08-Bar/Nightclub
09-Supermarket
10-Dept/Discount Store
11-Specialty Store
12-Drug Store/Hospital
13-Bank/Financial Inst.
14-Commercial/Office Bldg.
15-Industrial/Mfg.
16-Storage
17-Govt/Public Bldg
18-School/University
19-Jail/Prison
20-Religious Bldg
21-Airport
22-Bus/Rail Terminal
23-Construction Site
24-Other Structure
25-Parking Lot/Garage
26-Highway/Roadway
27-Park/Woodlands/Field
28-Lake/Waterway
29-Motor Vehicle
30-Other Mobile
99-Other
99

11. Type of Weapon
00-N/A
01-Handgun
02-Rifle
03-Shotgun
04-Firearm
05-Knife/Cutting Instrument
06-Blunt Object
07-Hands/Fists/Feet
08-Poison
09-Explosives
10-Fire/Incendiary
11-Threat/Intimidation
12-Simulated Weapon
13-Drugs
88-Unknown
99-Other
00

12. Drug Type
A-Amphetamine
B-Barbiturate
C-Cocaine
E-Heroin
H-Hallucinogen
M-Marijuana
O-Opium/Derivative
P-Paraphernalia
S-Synthetic
U-Unknown
Z-Other
U

V/W Code
VI-Victim
CP-Complainant
SB-Sexual Battery Victim
MA-Missing Adult
MC-Missing Child
DC-Dependent Child
WI-Witness
NS-Neighborhood Survey
FI-Further Information
SP-Suspect
AR-Arrested
JV-Juvenile
OW-Owner
OT-Other
AS-Associate

VICTIM'S RELATIONSHIP TO OFFENDER: (VRTO)
0-N/A
1-Undetermined
2-Stranger
3-Spouse
4-Ex-Spouse
5-Co-habitant
6-Parent
7-Brother/Sister
8-Child
9-Step-parent
10-Step-child
11-In-law
12-Other Family
13-Student
14-Teacher
15-Child of Boyfriend/Girlfriend
16-Boyfriend/Girlfriend
17-Friend
18-Neighbor
19-Sitter/Daycare Center
20-Employee
21-Employer
22-Landlord/Tenant
23-Acquaintance
99-Other Known

☒ VI ☐ CP

13. Name: See Confidential | VRTO | Race | Sex | Age | DOB
Residence | INJ ☐ | Res. Phone
Business | Bus. Phone
FL RES ☐ Full ☐ Part ☐ Non ☐ N/A

VI

14. Name: See Confidential | VRTO | Race | Sex | Age | DOB
Residence | INJ ☐ | Res. Phone
Business | Bus. Phone
FL RES ☐ Full ☐ Part ☐ Non ☐ N/A

N/A

15. Name | VRTO | Race | Sex | Age | DOB
Residence | INJ ☐ | Res. Phone
Business | Bus. Phone
FL RES ☐ Full ☐ Part ☐ Non ☐ N/A
Arrest Date-Time | Location of Arrest | Charges

N/A

16. Name | VRTO | Race | Sex | Age | DOB
Residence | INJ ☐ | Res. Phone
Business | Bus. Phone
FL RES ☐ Full ☐ Part ☐ Non ☐ N/A
Arrest Date-Time | Location of Arrest | Charges

Reporting Officer: Dep. R. H. Keeter RK | PID 373 | SQ 204 | Dist II
Editing Supervisor: Sgt. L. K. [illegible] | PID 169 | SQ 380 | Dist 111

20. ☐ D1 ☐ D3 ☒ Persons ☐ Vice ☐ Auto Theft ☐ Crime Analysis ☐ HRS 57 [illegible] Fest. Jan 97
☐ D2 ☐ D4 ☐ Property ☐ Juvenile ☐ White Collar ☐ Reporting Officer ☐ Other FLA Dept of Agr. [illegible] | Date 3/1/97

21. ☐ Active ☒ Exceptionally Cleared ☐ Death of Offender ☐ Juvenile/No Custody ☐ Direct File
☐ Inactive ☐ Cleared by Arrest ☐ Extradition Declined ☐ Victim/Witness Refused to Cooperate
☐ Unfounded ☐ Request for Prosecution ☐ Prosecution Declined ☐ Offender Charged with other Crimes

SO(ENF) 224 (6/94)

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
WITNESS-PROPERTY

PAGE 2 OF 3

1. Case No. 97-019191

	22. Name	Race	Sex	Age	DOB
FI	Johnson Jerry	B	M	45	02/06/52
	Residence: 2032 S. 51st St Tampa FL. 33619				Res. Phone: 247-4431
	Business: SAME				Bus. Phone: SAME
☐ Not at Home ☐ No Further Information ☒ See Narrative ☐ Vacant	Additional Information: Ride Operator				

	23. Name	Race	Sex	Age	DOB
FI	Wokich, Joseph	W	M		
	Residence: 2032 S. 51st St. Tampa. FL. 33619				Res. Phone: 247-4431
	Business: SAME				Bus. Phone: SAME
☐ Not at Home ☐ No Further Information ☒ See Narrative ☐ Vacant	Additional Information: Ride Operator				

	24. Name	Race	Sex	Age	DOB
FI	Groscurth, Cliff	W	M		
	Residence: N/A				Res. Phone: N/A
	Business: Dept of Agriculture Tallahassee FL				Bus. Phone: 904-488-9790
☐ Not at Home ☐ No Further Information ☒ See Narrative ☐ Vacant	Additional Information:				

25. PROPERTY DESCRIPTION LIST: FCIC/NCIC: ☐ Checked ☐ Entered OP No:

Item #	Quantity	Description (Make, Model, Type, etc..)	Serial #	Value

☐ See Attached Property Receipt, Page ____.
☐ See Attached Property Continuation, Page ____.

TOTAL VALUE:

~~Reconstruction~~/Synopsis Fingerprints: ☐ Dusted ☐ Lifted ☐ Unable (Explain)

At Approx 1355 hrs this date the Listed victims were ejected from the Super Himalaya Ride which belongs To Blue Grass Shows, And was being operated on the midway at the Florida Strawberry Festival in Plant City Florida. During the course of this investigation writer Secured Two Sent Locking pins from CAR #21 of The Ride And Turned same Along with photographs Taken of the scene over To GROSCURTH (ITEM #24) State Ride Inspector #18 writer interviewed Johnson (ITEM 22) And WOKICH (ITEM 23), Ride operators on the

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
☒ Continuation ☐ Supplement

☒ Confidential
Page 3 of 3

1. Case No. 97-0181191

2. Type of Incident

8. Grid | 5. Report Date | Time

7. Location of Incident Scene | Victim Name

VI	#	Name	VRTO	Race	Sex	Age	DOB
	13	Spencer Joshua	0	W	M	7	05/07/89

FL RES: ☒ Full ☐ Part ☐ Non ☐ N/A
Residence: 2509 Dodge Rd Polk City FL. | INJ ☒ | Res. Phone: 941-984-3242
Business: unemployed | Bus. Phone:
Arrest Date - Time | Location of Arrest | Charges

VI	#	Name	VRTO	Race	Sex	Age	DOB
	14	Spencer, Donald	0	W	M	10	10/20/86

FL RES: ☒ Full ☐ Part ☐ Non ☐ N/A
Residence: 2509 Dodge Rd Polk City FL. | INJ ☒ | Res. Phone: 941-984-3242
Business: | Bus. Phone:
Arrest Date - Time | Location of Arrest | Charges

Crime Scene / Narrative: Super Himacaya, who said that the Ride was going Counter-Clockwise (Rider going BACKWARDS) when they saw the Cap Bar coming up And they hit the emergency shut off. Both said that before the Ride could stop both victims along with the Cap-Bar were Ejected from the Ride. Writer TALKED To Groscurth (Item 24) who said that the Ride was inspected by persons from his office on 25-Feb-97. And All was OK. Groscurth said That he would be inspecting the Ride Thoroughly before it could be placed back into Service.

Reporting Officer | PID | SQ | Dist | Editing Supervisor | PID | SQ | Dist

20. ☐ D1 ☐ D2 ☐ D3 ☐ D4 ☐ Persons ☐ Property ☐ Vice ☐ Juvenile ☐ Auto Theft ☐ White Collar ☐ Crime Analysis ☐ Reporting Officer ☐ HRS ☐ Other _____ | Date

21. ☐ Active ☐ Inactive ☐ Unfounded ☐ Exceptionally Cleared ☐ Cleared by Arrest ☐ Request for Prosecution ☐ Death of Offendor ☐ Extradition Declined ☐ Prosecution Declined ☐ Juvenile/No Custody ☐ Victim/Witness Refused to Cooperate ☐ Offendor Charged with other Crimes ☐ Direct File

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
☐ Continuation ☒ Supplement

☐ Confidential

Page 1 of 2

1. Case No. 97-018191

2. Type of Incident: Accidental Injury

8. Grid: 2301

5. Report Date / Time: 03 / 01 / 97 / 1355

7. Location of Incident Scene: Strawberry Festival 2202 W. Reynolds St Plant City Fla 33564

Victim Name

#	Name	VRTO	Race	Sex	Age	DOB

FL RES ☐Full ☐Part ☐Non ☐N/A

Residence — INJ ☐ — Res. Phone

Business — Bus. Phone

Arrest Date - Time | Location of Arrest | Charges

#	Name	VRTO	Race	Sex	Age	DOB

FL RES ☐Full ☐Part ☐Non ☐N/A

Residence — INJ ☐ — Res. Phone

Business — Bus. Phone

Arrest Date - Time | Location of Arrest | Charges

Crime Scene / Narrative:

On the above Date & Time writer Responded to the Super Himalaya Ride on the Midway of the Mighty Bluegrass Shows, at the Florida Strawberry Festival.

Writer met with the Below listed witness and interviewed same.

(1) Sara Hall w/f 12/23/84
2918 Clubhouse Drive
Plant City Fla 33564 754-7059

(2) Christina Genualdi w/f 5/30/85
2606 Lakeview Way
Plant City Fla 33564 754-6359

Reporting Officer	PID	SQ	Dist	Editing Supervisor	PID	SQ	Dist
Sgt. L.K. James	169	380	III	Lt. J.D. Hill	284	284	D-1

20. ☐D1 ☐D2 ☐D3 ☐D4 ☒Persons ☐Property ☐Vice ☐Juvenile ☐Auto Theft ☐White Collar ☐Crime Analysis ☐Reporting Officer ☐HRS ☐Other — Date: 3-01-97

21. ☐Active ☐Inactive ☐Unfounded ☒Exceptionally Cleared ☐Cleared by Arrest ☐Request for Prosecution ☐Death of Offendor ☐Extradition Declined ☐Prosecution Declined ☐Juvenile/No Custody ☐Victim/Witness Refused to Cooperate ☐Offendor Charged with other Crimes ☐Direct File

HCSO(ENF) 238 Rev. 9/96

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
Narrative

☐ **Confidential**

1. Case No.
97-018191

☐ Property Continuation

Item #	Quantity	Description (Make, Model, Type, etc.)	Serial #	Value

(3)

Michelle Shirrill w/f 2/23/59

3506 North Tindle Road

Plant City, Fla 33564 754-2160

All statements made advised that the ride was going backwards when the safety bar flew off. The ride went around at least one more time and the victims were ejected.

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
☐ Continuation ☒ Supplement

☐ Confidential
Page 1 of 2

1. Case No. 97-018191

2. Type of Incident: Accidental Injury

8. Grid: 2301
5. Report Date: 03/01/97 Time: 1355

7. Location of Incident Scene: Strawberry Festival 2202 West Reynolds Plant City 33564

Victim Name

#	Name	VRTO	Race	Sex	Age	DOB

FL RES ☐Full ☐Part ☐Non ☐N/A
Residence
Business
INJ ☐
Res. Phone
Bus. Phone
Arrest Date - Time
Location of Arrest
Charges

#	Name	VRTO	Race	Sex	Age	DOB

FL RES ☐Full ☐Part ☐Non ☐N/A
Residence
Business
INJ ☐
Res. Phone
Bus. Phone
Arrest Date - Time
Location of Arrest
Charges

Crime Scene / Narrative:

On the Above Date And time Writer Responded The Super Himalaya Ride on the Midway of The Mighty Bluegrass Shows, At The Florida Strawberry Festival.

Writer Met With the Below Listed Witnesses And Interviewed Same.

(1) Richard T. Bixler W/M 03/18/75
2828 Stoneland Lane.
Sarasota Fla. 34231 (941) 927-1070

Reporting Officer	PID	SQ	Dist	Editing Supervisor	PID	SQ	Dist
Res II Dep Donald Mitchell	9277	Admn		Sgt. L.K. [illegible]	169	380	III

20. ☐D1 ☐D2 ☐D3 ☐D4 ☒Persons ☐Property ☐Vice ☐Juvenile ☐Auto Theft ☐White Collar ☐Crime Analysis ☐Reporting Officer ☐HRS ☐Other _____
Date 3/1/97

21. ☐Active ☐Inactive ☐Unfounded ☒Exceptionally Cleared ☐Cleared by Arrest ☐Request for Prosecution ☐Death of Offendor ☐Extradition Declined ☐Prosecution Declined ☐Juvenile/No Custody ☐Victim/Witness Refused to Cooperate ☐Offendor Charged with other Crimes ☐Direct File

HCSO(ENF) 238 Rev. 9/96

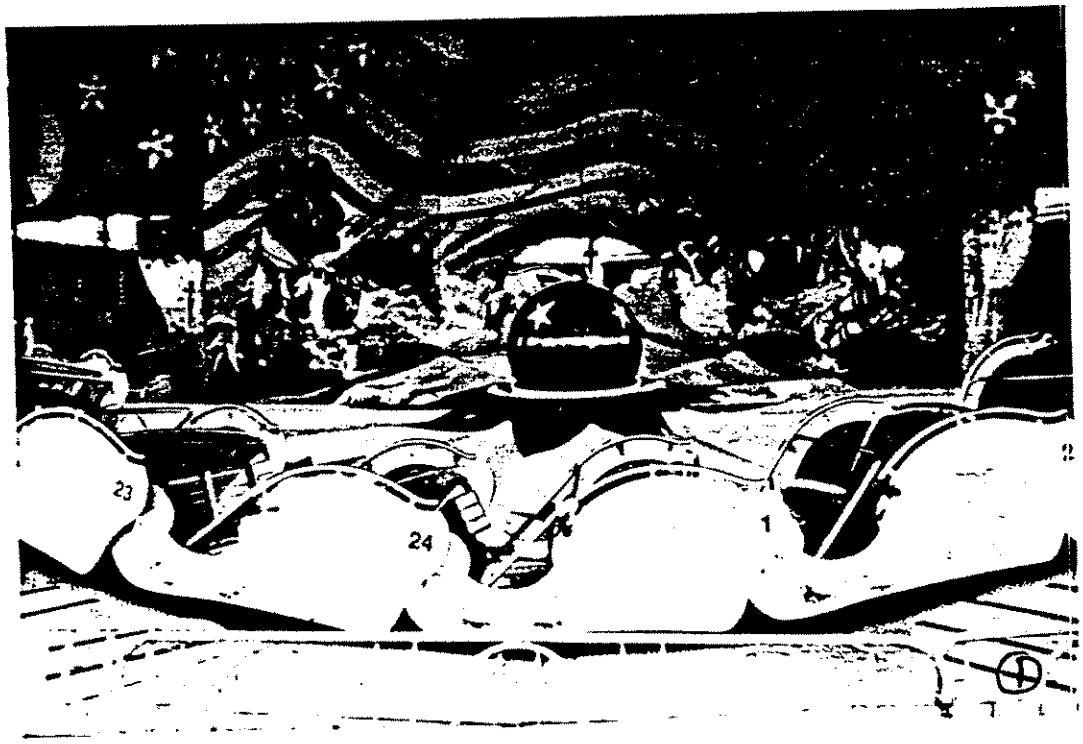
HILLSBOROUGH COUNTY SHERIFF'S OFFICE
Narrative

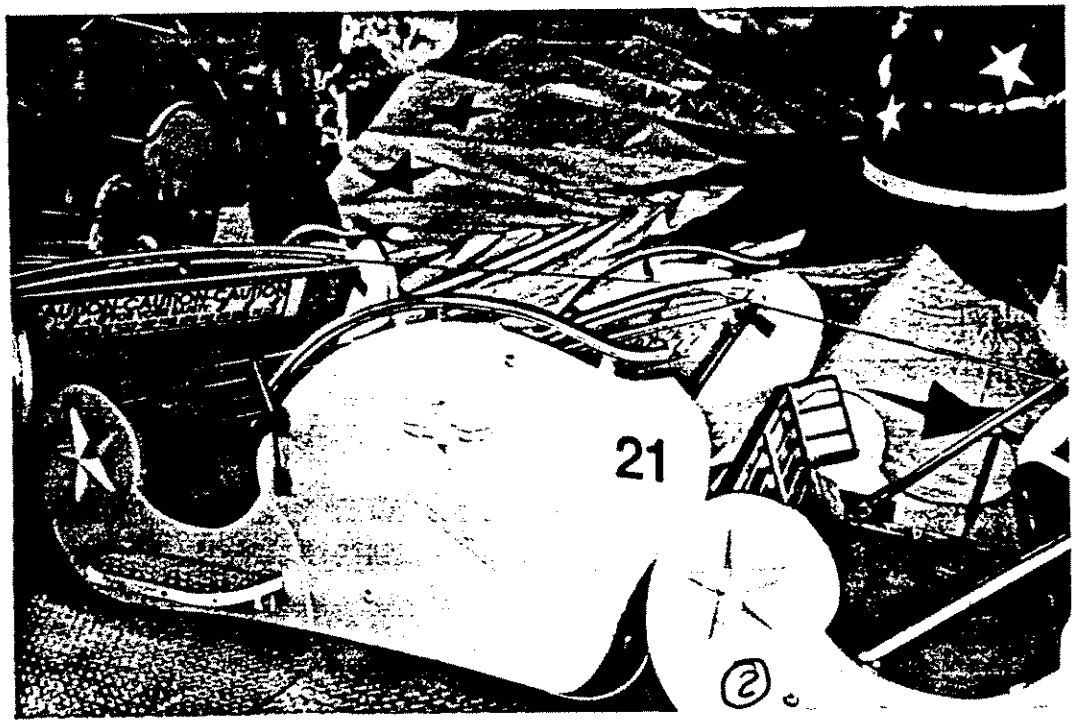
☐ **Confidential**
Page 2 of 2

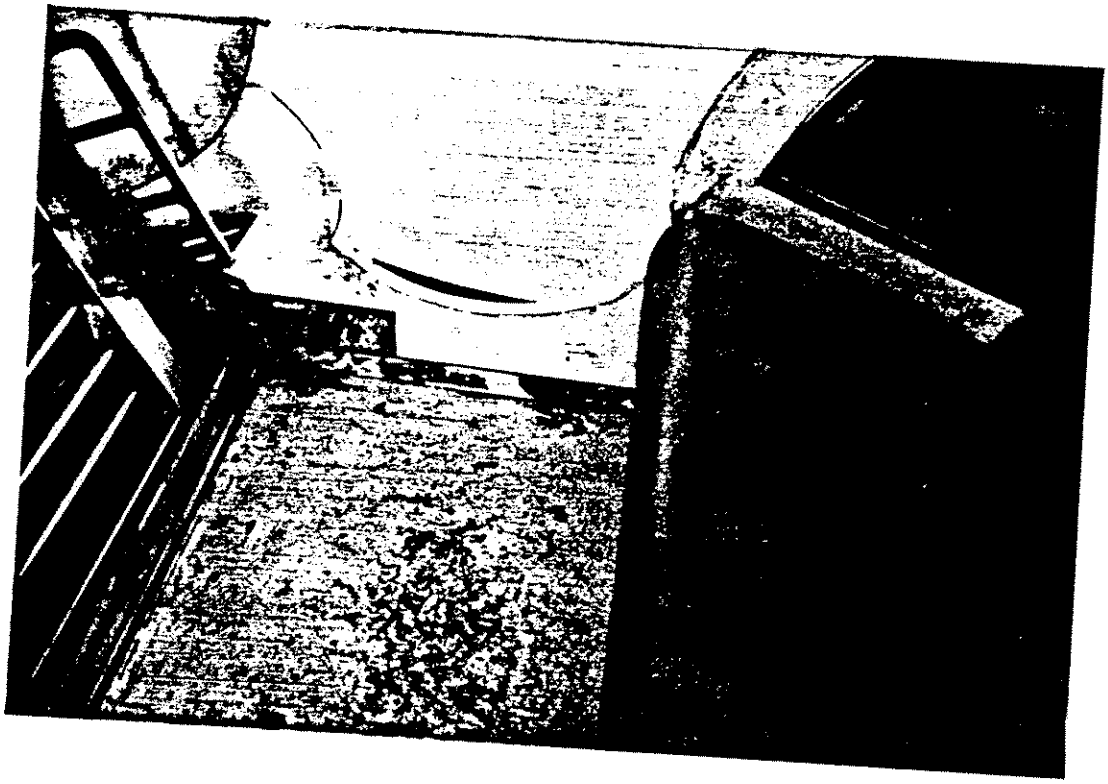
1. Case No.
97- 018191

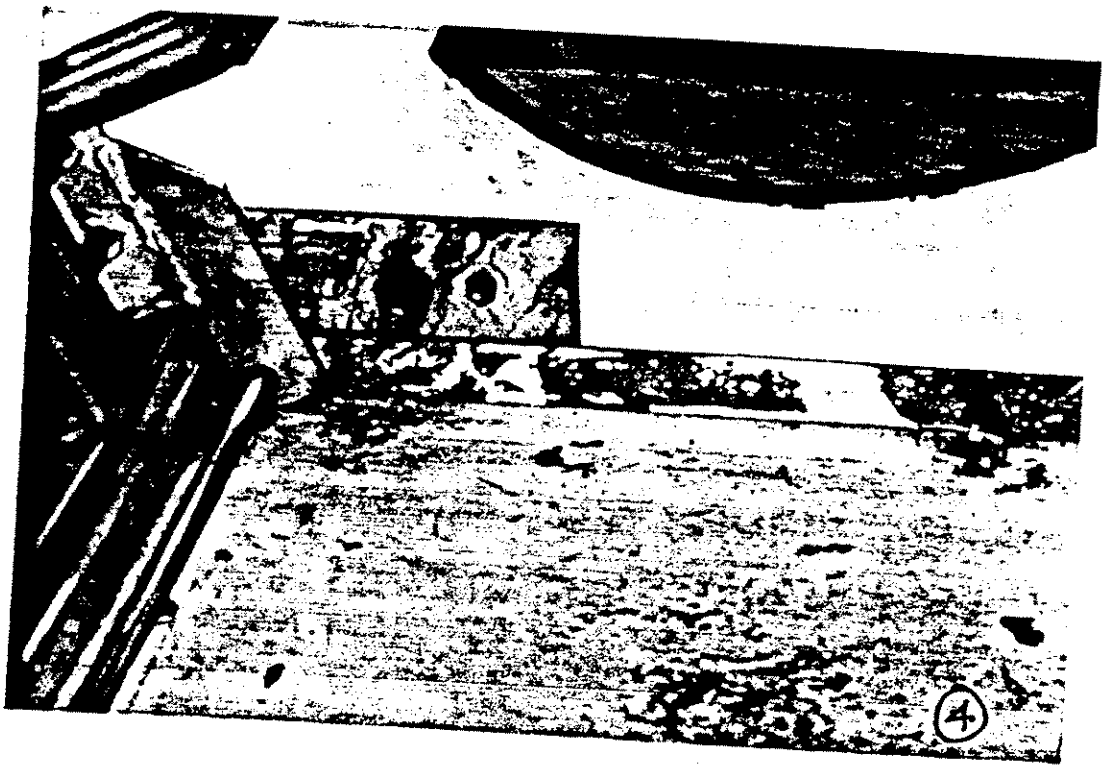
☐ Property Continuation

Item #	Quantity	Description (Make, Model, Type, etc.)	Serial #	Value
(2)		SHELLEY R. BIXLER W/F 10/18/75		
		2328 STONE LAND LANE		
		SARASOTA FLA. 34231 (941) 927-1070		
		BOTH WITNESSES STATES THAT THE RIDE		
		WAS MOVING BACKWARDS WHEN THE CAR LOCK		
		DOWN BAR CAME OFF AND EJECTED BOTH		
		VICTIMS.		


23
24
1


21

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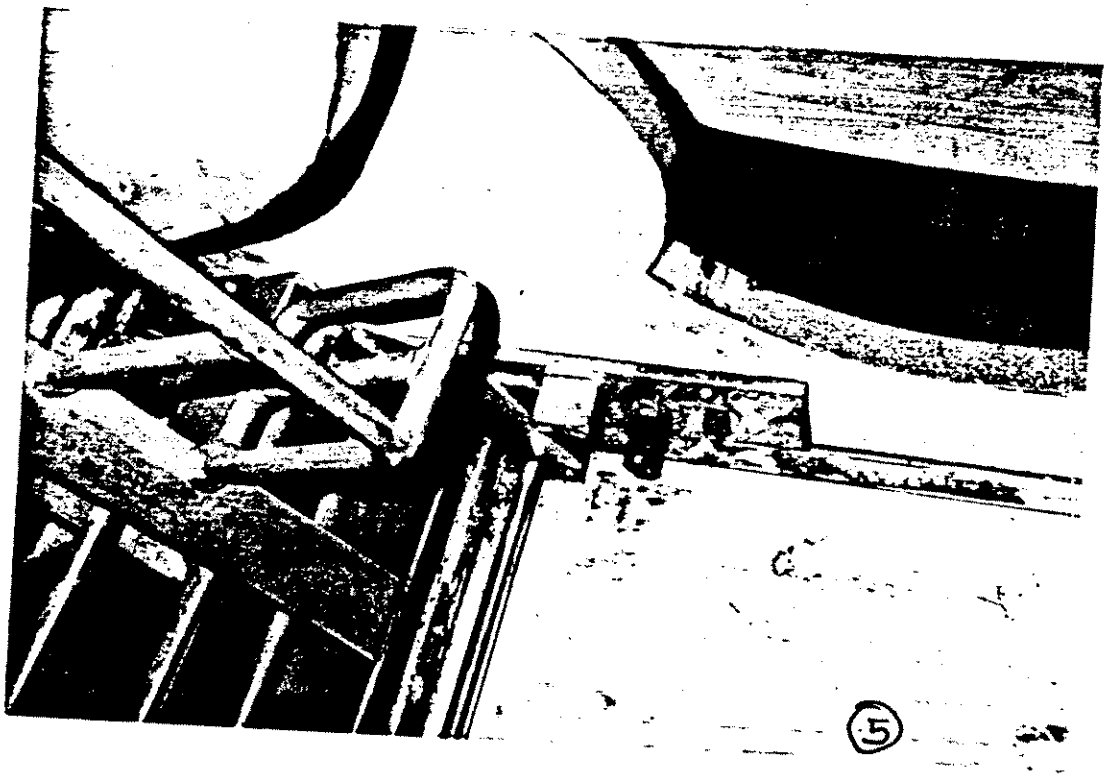
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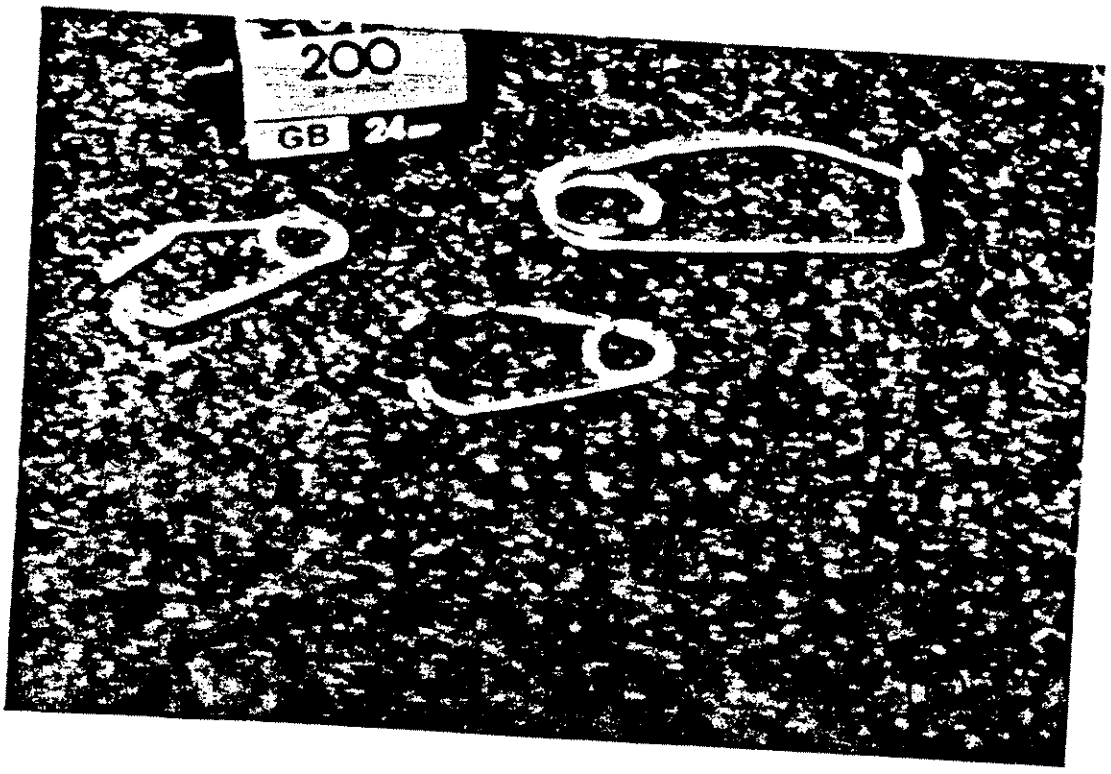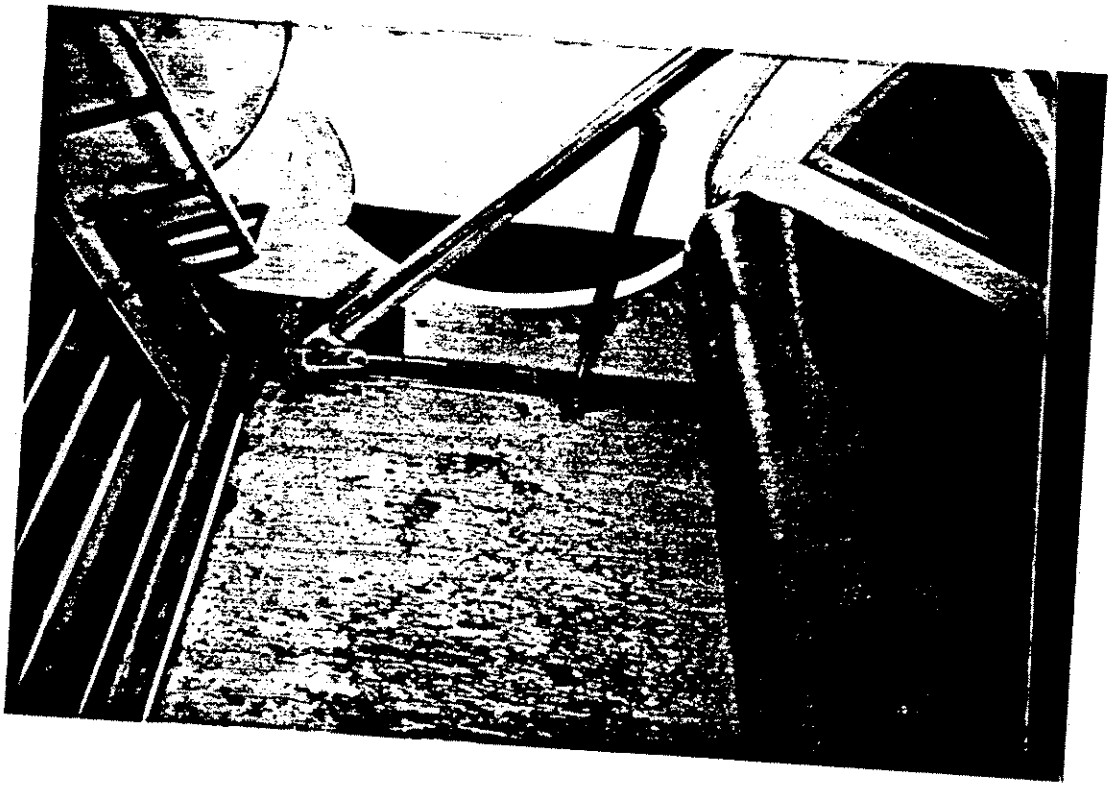
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