

10 OCT 1995

B4

1. CASE NUMBER 9 5 0 8 0 1 H C C 4 0 9 6		2. INVESTIGATOR'S ID 8 0 9 0		EPIDEMIOLOGIC INVESTIGATION REPORT
3. OFFICE CODE 8 6 0	4. DATE OF INCIDENT 9 5 0 5 1 6	5. DATE INXTIATED 9 5 0 8 0 7		
6. SYNOPSIS OF INCIDENT OR COMPLAINT 'A 3 year old boy found a flare gun in a pile of items that had recently been removed from the family's newly purchased boat, while a 15 year old girl (the baby-sitter) was in the bathroom for a few minutes. The 3 year old boy then discharged this flare gun, and the flare ignited a couch (Hide-A-Bed). The baby-sitter and 3 year old boy escaped the fire without serious injury, and the fire damage is estimated by the Fire Department at about \$3,500.--.				
7. LOCATION (Home, School, etc.) Mobile home (Living room) 1 0.		8. CITY Rancho Tehama		9. STATE California C A
10A. FIRST PRODUCT Flare / Flare Gun 1 7 1 8		10B. TRADE/BRAND NAME [REDACTED]		10C. MODEL NUMBER Unknown
10D. MANUFACTURER NAME AND ADDRESS [REDACTED]				
11A. SECOND PRODUCT Couch (Hide-A-Bed) 0 6 8 0		11B. TRADE/BRAND NAME Unknown		11C. MODEL NUMBER Unknown
11D. MANUFACTURER NAME AND ADDRESS Unknown				
12. AGE OF VICTIM 15 Years 0 1 5	13. SEX -Female 2	14. DISPOSITION Treated & Released 1		15. INJURY DIAGNOSIS Minor Smoke Inhalation 8 5
16. BODY PART(S) INVOLVED All Parts of the Body 8 5	17. RESPONDENT Newspaper; Fire Dept. 's Report; Consumer 1	18. TYPE OF INVESTIGATION Telephone 2		19 TIME SPENT (Operational hours) 1 2.0 Hours
20. CATEGORY ID E U N N 2 5	21. CASE SOURCE - Newspaper [Doc. No. F560093A0] 0 5		22. SAMPLE COLLECTION NUMBER None	
23. PERMISSION TO DISCLOSE (Only) YES: ss Cases Only) : NO: XXXX				
24. REVIEW DATE 8 1 0 1 5 1 0 0 2	25. REVI	26. REGIONAL		OFFICE DIRECTOR
27. DISTRIBUTION 0: EPDS cc: SF20				

PRE-INCIDENT:

The Fire Department's PRELIMINARY FIRE INVESTIGATION REPORT indicates that the 3 year old boy's father had just purchased a new boat. It also states that a pile of items (including a flare gun) had been removed from the boat. This PRELIMINARY FIRE INVESTIGATION REPORT also indicates that the 3 year old boy's family lives in a mobile home, which measures roughly 20 feet by 52 feet long. On the day of this fire incident, the 3 year old boy was being supervised by a 15 year old girl (the baby-sitter).

INCIDENT:

This fire incident occurred on May 16, 1995, at about 12:50 PM. The 15 year old baby-sitter heard a loud bang, according to the Fire Department's Report. It also indicates that she tried to extinguish this couch fire, but was not able to do so. The baby-sitter then took the 3 year old boy outside, and she then called to the neighbors for help. The Fire Department's Report states that the neighbors came over and sprayed water on the couch to keep the fire from spreading. It also indicates that the neighbors used a garden house to knock the fire down.

POST INCIDENT:-

The Fire Department's Report indicates that the baby-sitter received minor smoke inhalation and that she was driven to a hospital by a privately owned vehicle. It also states that the fire damage was to an interior wall and also to the couch (or the Hide-A-Bed). It estimated the total fire damage at about \$3,500.--. It also estimated that the value of the structure and contents saved is about \$30,000.--.

STANDARDS INFORMATION:

No information is available.

EXHIBIT I

Indepth No. 950801 HCC4096

-----CDF & TEHAMA CO FIRE DEPARTMENT FIRE INFORMATION RECAP FORM -----					
INC #:	1082	DATE:	5/16/95	STIME:	13:00
ASGN#:		TYPE:	STR	BATTALION:	4
				BI:	10
				WRA #:	F16
LOCATION OF INCIDENT:			[REDACTED]		
OTHER AGCY?					
WHOSE REPORT? BATT. 4		FIRE#:		26	
OWNER'S NAME: [REDACTED]		CASE#:			
STA. DISP: E113 E213 E109		DESCRIPTION:		STRUCTURE FIRE .	
WHAT BURNED? STRUCTURE FIRE		MEDIA CAUSE:		FLARE PISTOL	
DAMAGES: \$3500		SAVED: \$30000		ACRES BURNED:	
LAND USE:		STR/THREAT :		FC-16 CAUSE: PLAY W/FIRE	
BILLBL?	COLCTBL?	LE ACTN?	FC-40 RQD?	LE66 RQD?	FC175RQD?:
FC-18 IN?:		FC-40 IN? :		FC-175 IN?:	

REMARKS: FLARE PISTOL SHOT BY 3 YR. OLD					
DATE DYE?			HARD COPY:		



STATE OF CALIFORNIA
Department of Forestry and Fire Protection
LE-66 (Rev. 6/93)

PRELIMINARY FIRE INVESTIGATION

CONFIDENTIAL

1. Estimated Start Date: 5/16/95 Time: 12:50 <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		Reported Date: 5/16/95 Time: 1300 <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		Address: [REDACTED]		2. Location: [REDACTED]		3. Fire ID: Batt.: Incident #: 1082 Fire #: 26	
4. What burned? Hide-A-Bed and interior wall				ACRES BURNED: 0		Fire name: Wick, J			
5. Reporting Party: [REDACTED]				Telephone: [REDACTED]					
5. Codes: 1. Victim 2. Witness 3. Subject/suspect 4. Tenant/Owner									
Code: U-1	Name: [REDACTED]	Driver's Lic. #/ID: [REDACTED]	Sex: F	Hair: BRN	Eyes: BRN	Hgt: 5'4"	Wt: 130	DOB/Age: 2-4-79	
Address: [REDACTED]		City: Rancho Tehama				Telephone: [REDACTED]			
Code: U-1	Name: [REDACTED]	Driver's Lic. #/ID: [REDACTED]	Sex: M	Hair: BRN	Eyes: BLU	Hgt: 6'2"	Wt: 215	DOB/Age: 11-19-43	
Address: [REDACTED]		City: Rancho Tehama				Telephone: [REDACTED]			
Code: S-1	Name: [REDACTED]	Driver's Lic. #/ID: [REDACTED]	Sex: M	Hair: [REDACTED]	Eyes: [REDACTED]	Hgt: [REDACTED]	Wt: [REDACTED]	DOB/Age: 8-9-92	
Address: [REDACTED]		City: Rancho Tehama				Telephone: [REDACTED]			
Code: [REDACTED]	Name: [REDACTED]	Driver's Lic. #/ID: [REDACTED]	Sex: [REDACTED]	Hair: [REDACTED]	Eyes: [REDACTED]	Hgt: [REDACTED]	Wt: [REDACTED]	DOB/Age: [REDACTED]	
Address: [REDACTED]		City: [REDACTED]				Telephone: [REDACTED]			
7. General Remarks (such as statements, observations, license numbers, equipment ID, evidence, etc.):									
<p>[REDACTED] is a 16 yr old female who was babysitting S-1 (3 yr old Bibby) at the [REDACTED] home in Rtn. w-1 went to the bathroom and left S-1 alone for just a few minutes when she heard a loud bang. S-1 had gotten into a pile of items that U-1 ([REDACTED]) had taken out of a new boat he had just purchased. S-1 had found a flame pistol in the pile of items from the boat and pulled the trigger. The flame was discharged into a couch/wide A bed. By the time that w-1 got back into the room. The couch was well involved with fire. She tried to put the fire out but was unable to do so. She took the baby outside and called to the neighbors for help. The neighbors came over and sprayed water on the couch to keep the fire from spreading. The fire burned the couch and walls behind the couch. w-1 received minor smoke inhalation and was treated by ST. E3 and transported POU to ST. E3.</p> <p>While descending code 3 (lights + siren) E-113 struck and killed a dog. The dog was in the roadway running free. The owner was talked to and was still there when we left.</p> <p>Structure & contents loss = 3500.⁰⁰ SAVED \$30,000.⁰⁰</p>									
8. Wind Speed/Direction: [REDACTED]		Temp.: [REDACTED]	Humidity: [REDACTED]	9. Photos? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Taken by whom? N/A			
10. Insured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Company/Agent: N/A									

11. Before fire fighters arrived, what suppression efforts were taken?

A GARDEN hose was used to knock the fire down.

By whom? Neighbor - NAME unknown
What tools? GARDEN HOSE

12. What caused the fire? (State opinions and conclusions)

3 yr old boy fired a flare pistol into a SOFA / HIDE A BED

Old Flare Pistol

13. Debris Burning.

Did fire escape control? Burning permit? Yes #: No Permit required? Yes No
 Piled debris Clearance: Length: Width: Height:
 Incinerator Clearance: Screen: Yes No Screen mesh size:

14. Railroad

Train #: Time passed: Direction of travel: Mile post #:

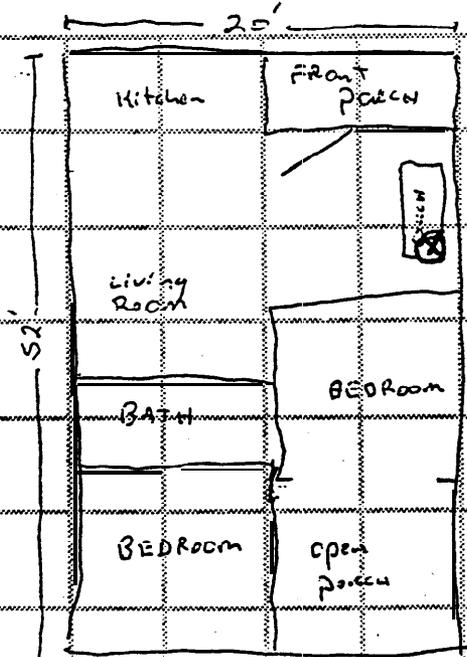
15. Power Line

ID Pole: +750 volts -750 volts Tree involved: Yes No Remarks: Distance of limb(s) to conductor:

Utility Representative: Conductor/Pole Clearance:
Tel.:

16. Sketch of the area where the fire originated

Distance measured by: Tap 8 Pace Estimate



20 x 52 mobile Home with added on porch

18. Action

None	Investigation Continued
Criminal	Civil Litigation
Judicial	Administrative

17. Did the fire burn the property of others? Yes No

19. See Supplement? Yes No

20. Signature: Dan Burns Printed Name: DAN BURNS Title: SFA-1 Badge #: 1521 Date: 5 '16 '95

21. Reviewed by: [Signature] Title: BC Date: 6 '15 '95

QA 6/15

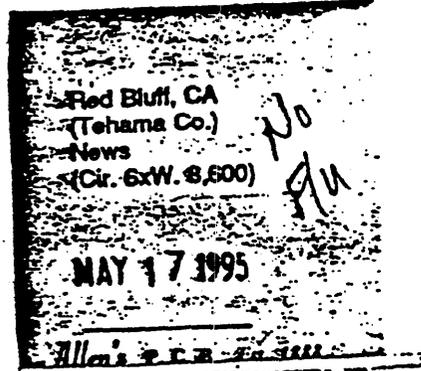
20

EXHIBIT II

JUN 23 1995

Indepth No.

950801 HCC 4096



F560093A

Flare gun, child lead to trouble

By MARSHA DORGAN
DN Staff Writer

3569

A 3-year-old and a flare gun proved a dangerous combination Tuesday for a Rancho Tehama resident.

The quick thinking of an unidentified 16-year-old babysitter prevented any injury and probably saved the residence from being destroyed, according to California Department of Forestry Capt. Mike Chuchel.

Larame Point residence received \$3,500 damage when his son discharged a flare gun inside the home, setting the couch on fire and causing smoke damage to the living room, Chuchel said.

"The babysitter grabbed the child and got him to safety," he said. "Then she ran back and attempted to extinguish the couch fire. She did everything a person should do in an emergency situation."

had purchased a boat and was getting all the equipment together, Chuchel said. He put everything, including the flare gun, inside the house while he cleaned the boat outside.

"When the babysitter went to the other room, the child found the pistol and pulled the trigger," Chuchel said. "The flare shot into the couch."



U. S. CONSUMER PRODUCT SAFETY COMMISSION
WESTERN REGIONAL OFFICE

950 801 HCC 4096

600 HARRISON STREET, ROOM 245, SAN FRANCISCO, CA 94107-1370
(415) 744-2966 FAX (415) 744-2962

- ALASKA
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- ARKANSAS
- CALIFORNIA
- COLORADO
- HAWAII
- IDAHO
- LOUISIANA
- MONTANA
- NEW MEXICO
- NEVADA
- OKLAHOMA
- OREGON
- TEXAS
- UTAH
- WASHINGTON
- WYOMING
- PACIFIC ISLANDS

August 8, 1995

California Department of Forestry
ATTN: Records Supervisor
604 Antelope Blvd.
Red Bluff, CA 96080

RE: Fire of 5-16-95
Residence of [REDACTED]
Laramie Point

Dear Records Supervisor:

The U.S. Consumer Product Safety Commission (CPSC) is a Federal agency which studies product-related deaths, injuries, and close-calls. CPSC is presently conducting a study of upholstered furniture fires (a nationwide study). We learned-through a newspaper article about the fire of May 16, 1995 at the [REDACTED] Laramie Point residence, which allegedly involved a couch.

Please send me a copy of the Fire Incident and Fire Investigation Reports for this fire incident of May 16, 1995. I understand that the payment for the reports is \$10.00. Enclosed is payment for the reports. You can use the enclosed postage paid envelope to send me a copy of the reports. If any photographs of this fire incident were taken please let me know the cost of reproduction of these photographs. I will let you know later, if I need reproductions of any of the photographs. Thank you for your help in our special study of the upholstered furniture fires.

Sincerely,

Kenneth G. Felton
Product Safety Investigator
Western Regional Office

Enclosures



U. S. CONSUMER PRODUCT SAFETY COMMISSION
WESTERN REGIONAL OFFICE

950 801 HCC 4096

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OREGON
TEXAS
UTAH
WASHINGTON
WYOMING
PACIFIC ISLANDS

August 16, 1995

[REDACTED]
Tehama, CA 96090

Dear Mr. [REDACTED]

The U.S. Consumer Product Safety Commission (CPSC) is an independent Federal agency which studies injuries involving consumer products and works with the importers and manufacturers of these consumer products, in an effort to reduce the frequency and severity of injuries to others. CPSC is presently studying fires involving upholstered furniture (a copy of the UPHOLSTERED FURNITURE FIRES - GUIDELINE is enclosed for your information). I was sorry to learn about the recent couch fire at your Rancho Tehama residence (fire of May 16, 1995). CPSC learned about this fire through a newspaper article.

It would be helpful if you could provide some information regarding this couch fire incident. Sorry that I missed you when I called a couple of times yesterday. I have enclosed the, following forms:

- 1) DATA RECORDING SHEET [Upholstered furniture fires]
- 2) Additional QUESTIONNAIRE, regarding the couch/flare
- 3) AUTHORIZATION FOR RELEASE OF NAME (optional)

It would be helpful if you could complete the two page DATA RECORDING SHEET and the one page QUESTIONNAIRE, and return these in the enclosed postage paid envelope. I understand that the remains of the couch have been discarded, so please provide the information to the best of your memory (if you don't know or cannot remember, then just answer: UNKNOWN). Any information that you can provide is appreciated. Thank you for your cooperation.

Sincerely,

Kenneth G. Felton

Kenneth G. Felton
Product Safety Investigator
Western Regional Office

Enclosures



INVESTIGATION GUIDELINE

Attachment A

DATA RECORDING SHEET FOR UPHOLSTERED FURNITURE FIRES (To be attached to CPSC Form 182, Epidemiologic Investigation Report along with a copy of the Fire Incident Report)

Task Number 950801 HCC 4096 incident Date 9/5/16

A. PRODUCT DESCRIPTION: Sofa/Couch Chair Sofa bed Other _____

1. Was upholstered furniture slipcovered? Yes No Unknown

2. Had it been reupholstered? Yes No Unknown

3. Manufacturer/Distributor/Brand not known

4. Purchased: New Used Unknown

If used, specify how obtained (e.g., garage sale, etc.) _____

5. Date Furniture Purchased: _____ Furniture Age _____

6. Standard Certification Labeling; e.g., UFAC or California standard: (Copy)

B. POINT OF FIRE IGNITION ON FURNITURE: Describe where fire started on upholstered furniture.

skirt Seat cushion Inside back Inside arm

Back Side Underside Crevice

Weft Cord Tuft Other _____

C. AGE (IN YEARS) OF PERSON INVOLVED IN IGNITION (if appropriate): _____

LT 5 yrs. old 5 - 14 15 - 64 65 +

D. PRODUCT INVOLVED AS HEAT SOURCE AND TYPE (Check):

___ Lighter ___ Candle ___ Heater ___ Fireplace

+ Other (specify) flare gun

___ Unknown



INVESTIGATION GUIDELINE

If lighter, specify type: Child-resistant Not child-resistant unknown.

If match, specify type: Book Box Unknown

If heater, specify fuel source and distance from furniture:

_____ Fuel source _____ Distance from furniture

E. DETECTION OF FIRE

7. Detector (smoke, heat, c.o., sprinkler) present?

Yes No Unknown

If yes, specify type: _____

8. Detector went off (alarmed)?

Yes No Unknown

9. If no, do you know any reason why not; e.g., unpowered, fire too small, etc.?

10. About how soon was the fire discovered after it started? few minutes

F. VICTIM(S)

0 Number of Deaths 0 Number of Injuries

G. Socio-Economic Data: not known

11. Education level of head of household:

Less than high school High school Some College

12. Total household income:

LT 515,000 \$15,000 - \$34,999 \$35,000 +

13. Approximate home market value: _____

Rent Own

General Description: Provide general description, including all other relevant factors and information on the investigation form.

QUESTIONNAIRE

1. Identification of the flare gun (pistol):

Brand: _____ Age: _____

Model: _____

Distributor/Mfg.: _____
(Name & address)

2. Identification of the type of flare (discharged):

Brand: _____

Type: _____ (Check)
1) 12-Gauge flare _____
2) 25mm flare _____
3) Other type _____
(specify)

3. Distance that the flare traveled: _____
(from where it was fired to the couch)

4. When and where was the flare gun and flares purchased:

5. Description of the couch: (if known)

Upholstery fabric: _____
(Outermost layer)

Upholstery filling: _____

(such as: foam, polyester fiberfill, cotton batting,
bonded cellulose, down, . . . etc.)

CA

SFD

ACCIDENT INVESTIGATION REQUEST FORM

Document Number F560093A0

Date of Incident 5/17/95 Category I.D BUNN251995

Follow-Up Requested Hazard Analysis X Section 15

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

Headquarters Contact Kimberly Long (301) 504-0470 Ext 1269

Assignment Message

Conduct on-site investigation, if couch is still available

Contact victim's parents to find out what part of the furniture ignited (if possible). If second hand furniture, find out how long in possession. If furniture still available, collect sample, following page 9 of guideline for sample collection.

Describe incident scenario; photograph and identify manufacturer, model number and brand name of all products involved. Please obtain fire incident report, medical insurance, and any other report of incident. Complete Data Record Sheet in guideline.

Person(s) to Contact _____

Guideline Number 19 Upholstered Furniture Fires

Requested By Kimberly Long

Task Number 950801HCC4096

Assigned to SFOO

Date 8/1

JUN 23 1995

V.C.
20

Red Bluff, CA
(Tehama Co.)
News
(Cir. 6xW. \$,600)
MAY 17 1995
Allen's P.R.A. 1995

NO
FNU

F560093A

Flare gun, child lead to trouble

By MARSHA DORGAN
DN Staff Writer

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"When the babysitter went to the other room, the child found the pistol and pulled the trigger," Chuchel said. "The flare shot into the couch."

1. CASE NO. 950915HCC4121		2. INVESTIGATOR'S ID [8198]		3. OFFICE CODE [860]		EPIDEMIOLOGIC INVESTIGATION REPORT 33			
4. DATE OF INCIDENT 950201		5. DATE INVESTIGATION INITIATED		YR MO DAY 951016				- 5 DEC 1995	
6. SYNOPSIS OF INCIDENT OR COMPLAINT On February 01, 1995, an apartment complex fire destroyed several apartments. The fire was caused by a five year old male who was on a couch playing with matches in his first floor apartment. The fire extended to the unit where the seven month old victim and his mother resided. He died on site as a result of smoke inhalation and thermal burns. The mother sustained 95% second and third degree burns. She was admitted to a local hospital for treatment. She died a few days later.									
7. LOCATION (Home, school, etc.) Home 10			8. CITY Dallas			9. STATE Texas TX			
10A. FIRST PRODUCT Matches 1731			11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Unknown						
10B. SECOND PRODUCT Couch/sofa 0679			11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Unknown						
12. AGE OF VICTIM 207 ***		13. SEX (USE NUMERICAL CODE) MALE - 1 FEMALE - 2 1 UNKNOWN - 3		14. DISPOSITION DOA 8		15. INJURY DIAGNOSIS Anoxia (smoke inhalation) 65			
16. BODY PART All parts 85		17. RESPONDENT(S) (Mother, Friend) Medical Examiner, Fire Department 3			18. TYPE INVESTIGATION ON SITE - 1 TELEPHONE - 2 3 OTHER - 3		19. TIME SPENT 08.0		
20. ATTACHMENTS Multi 9		21. CASE SOURCE Medical Examiner 12		22. REVIEWED BY 8257					
						YR MO DAY 95 11 29			
23. PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME () CPSC MAY NOT DISCLOSE MY NAME [XX]									
24. NARRATIVE (See Instructions on Page 2) Narrative report and attachment are attached. Victim #2 Age unknown Sex 2 Disposition 8 Injury 51 Body part 84				25. REGIONAL OFFICE DIRECTOR REVIEW				DATE	

950915HCC4121

MATCHES

The limited information within this report was obtained by mail and phone from the Medical Examiner reports and **the Fire** Department. Attempts have also been made to contact the insurance company involved. Additional information may be forthcoming later. The medical examiner office was contact for permission to contact the victim's family. Permission was granted. Attempts were made to locate the family. They have moved. Their current home is unknown.

PRE-EWCIDENT:

This investigation involves a fire at an apartment complex. The fire claimed the life of one individual and serious burns' injury to another person. The deceased **is** a seven-month old male. He measured **68-1/2** cm (27 in) and weighed 22 pounds (10.0 kg). The victim's physical and mental conditions are unknown.

INCIDENT:

On February **1,1995**, at approximately 0829 hours the local fire department received an emergency call of an apartment fire in progress. The fire department responded. The weather conditions were reported to be clear with a temperature of 60 degrees and humidity at 20%.

POST-INCIDENT:

When the police department personnel arrived on the scene, they found that the fire department had already arrived. The fire department had begun to remove the occupants from their apartment unit. The victim's mother was taken to Parkland Memorial Hospital Burn Unit with 95% 2nd and 3rd degree burns. The victim was found by fire fighters. He was lying on the floor. His body was removed and placed inside their ambulance. After the **arrival** of the medical examiner personnel the victim was removed from the fire department ambulance and placed in the DFW mortuary van. The victim's body was taken to the medical examiner office. An autopsy was conducted to decide the official cause of death. The autopsy says the victim died as the result of smoke inhalation and thermal burns.

The fire and police department personnel examined the scene to decide the cause of the fire. Subsequent investigation by them revealed that the fire was started by a three-year-old male. It was reported that he was on the couch playing with matches. It was also said that he went outside and informed his mother. She was talking on a pay phone. The investigation also revealed that

950915HCC4121

MATCHES

the fire started in the apartment unit on the first floor not underneath the victim's apartment but catty-cornered. The fire traveled through the outside hallway up onto the hallway breezeway outside the victim's front door.

PRODUCT IDENTIFICATION:

According to the fire **department** report the fire was caused by a child with a heat source. The medical examiner report says the **child was** playing with matches. The child's parents were not located to decide the exact heat source involved. The sofa involved was not available. It is unknown **if it** was second hand or new. The agency Spanish speaking public affairs' specialist contacted the apartment's manager to decide disposition of the couch. The couch was **placed** in the trash. It was picked up by the apartment trash contractor and taken to the city dump.

STANDARD INFORMATION:

None

ATTACHMENTS:

1. A copy of the assignment request (medical examiners' form)
2. CPSC correspondence
3. A copy of the medical examiner investigation report
4. **A** copy of the **autopsy** report
5. A copy of the fire department report
6. Data recording sheet for upholstered furniture fires

CONTACT	REASONS	RESULT
1. Medical examiner	autopsy and investigation report	obtained
2. Fire department	incident data and product data	obtained
3. Mother and father	product and incident scenario	unable to locate

DALLAS, TX

CET

X

ACCIDENT INVESTIGATION REQUEST FORM

Document Number X583591 A

Date of Incident 2/1/95 Category I, D BUNN251995

Follow-Up Requested Hazard Analysis X Section 15

Type Follow-Up Requested Telephone Call X On-Site

Headquarters Contact Kimberly Long (301) 504 -0470 Ext 1269

Assignment Message

Conduct a investigation of this case where a 7 month old male died in an apartment fire caused by a child playing with matches on the sofa. If medical examiner agrees, contact the parents or guardians of the child to obtain information about what part of the furniture ignited (if possible). If **second** hand furniture, find out how long in possession. If furniture still available, collect sample, following page 9 of guideline for sample collection.

Describe incident scenario; photograph and identify manufacturer, model number and brand name of all products involved. Please obtain fire incident report, medical insurance, and any other report of incident. Complete Data Record Sheet in guideline.

Person(s) to Contact Fire Department, Dallas, TX and Medical Examiner, Dallas, TX (Dr. Jeffery Barnard) (if cooperative)
officers only

Guideline Number 19 Upholstered Furniture Fires

Requested By Kimberly Long

Task Number 950915 HCC 4/21

Assigned to SFOG

Date 2/15/95

TASK # 950915HCC4/21
ATTACHMENT # 1
PRODUCT: Matches

To 32

AUG 25 1995

NS 0203176

MEDICAL EXAMINER'S/CORONER'S REPORTING FORM

To report a case by telephone, call (toll free) 1-800-638-8095. Say "THIS IS A MECAP REPORT." You will then be placed in contact with the MECAP Project Manager, who will ask for the information noted below.

Date of accident 2-1-95 Date of death 2/1-95

Type of consumer product involved Matches/Safe

Manufacturer, Model, Brand name, and Serial No. of product _____

Is product available for examination? yes no. If yes, where? _____

Location of Accident: City _____ State _____

Brief description of accident sequence: (PLEASE INCLUDE THE AGE AND SEX OF THE VICTIM(S))

A 7 month old male, victim of a fire in an apartment fire believed to have been caused by a 5 yr old playing with matches in the safe of mother's apartment

Cause of Death Accident

Smoke inhalation & thermal burns

Contact Information: Please include the name, address and telephone number of any state/local personnel who investigated the accident.

Dallas Fire Dept. Report # 7119

Medical Examiner's/Coroner's Case No. 0324-95 Telephone No. 930-5700

Reporter's Name Mary Coffman Date Reported 8-21-95

Reporter's Off. (incl. city, county, and state) Dallas County Medical

Medical Examiner's/Coroner's Name Dr. Jeffrey Barriger Examiner

For processing at CPSC: Report recd. by: _____

Chief Med. Exam. Rpt. () Copy for MECAP News ()
Regular MECAP () Document No. _____

950915 HCC 4121

950915 HCC 4121

Matches



U.S. CONSUMER PRODUCT SAFETY COMMISSION
DALLAS SATEWTE OFFICE

1114 COMMERCE STREET, ROOM 216 . DALLAS, TEXAS 75242 • 214-767-0842 . FAX 214-767-0851

October 16, 1995

- ALASKA
- ARIZONA
- ARKANSAS
- CALIFORNIA
- COLORADO
- HAWAII
- IDAHO
- LOUISIANA
- MONTANA
- NEW MEXICO
- NEVADA
- OKLAHOMA
- OREGON
- TEXAS
- U T A H
- WASHINGTON
- WYOMING
- PACIFIC ISLANDS

Ms. Mary Coffman
Records Department
Dallas County Medical Examiner
P. O. Box 35728
Dallas, Texas 75235

TASK # 950915HCC4121
ATTACHMENT # 2
PRODUCT: Matches

Dear Ms. Coffman:

The U. S. Consumer Product Safety Commission conducts studies and investigations of deaths, **injuries**, disease and economic losses resulting from accidents involving consumer products.

This is a follow-up request concerning investigation report Number **0324-95**. The case involved the death of a seven month old male on February **1**, 1995:

At this time, I am requesting copies of any and **all** photographs, autopsy, and other reports available. Any charges incurred will be reimbursed by this agency. I look forward to your reply. Please call this office at **214/767-8809** if questions arise. Thank you.

Sincerely,

(Ms.) Jerusha J. Walker
Investigator

Enclosure-Self addressed envelope

DISPOSITION

ORDERED TO MORGUE YES ● 00910

POST PERMIT ASKED PRIOR TO DCME NOTIFICATION

TRANSPORTED BY DFW

SCENE CONDITIONS :

RIGOR MORTIS :

LIVIDITY LOCATIONS

TEMPERATURE 60
HUMIDITY 20%
OUTSIDE WEATHER Clear

JAW burn
ARMS burn
LEGS burn

burned

C.A.P. Chf Olney
P.E.S.

BADGE #
BADGE #

OF DFD
OF

INVESTIGATION NARRATIVE

File No: 0324-95

Name [REDACTED]
 Per Chief Olney of DFD, Off. Tate of DPD and interpreter [REDACTED] who is a friend of the family-- The decd, his mother, [REDACTED] the father of the decd [REDACTED] and [REDACTED] live in apartment # 204 on the second floor of the [REDACTED] Apartments. [REDACTED] is the father of the decd, but is not married to the decd mother, per Chap. Jolly at PMH. The decd father and [REDACTED] apparently left for work this morning. It is hypothesized that the decd mother awoke to the sounding of the smoke alarm in the apartment and grabbed the decd up from the crib which was in her bedroom. It is felt that the decd mother went to the front door and upon opening the front door to the apartment was engulfed in flames. The mother apparently layed the decd onto the floor and broke out of a window in the livingroom exiting onto the wooden walkway type balcony and ran to a neighbors apartment.

The fire appeared to have originated in an apartment unit on the first floor not underneath the decd apartment but catty-cornered. The fire is believed (at this time) is believed to have been caused by a 5 year old in this first floor apartment' who was on the couch playing with matches. The fire then traveled through the outside hallway up onto the hallway breezway outside of the decd front door. A rollover effect. The mother of the 5 year old also broke out of her apartment and was injured.

The decd mother was taken to PMH with 95% 2nd and 3rd degree burns. She is not expected to survive. FA contacted the Chaplain over the PMH burn unit, Chap. Jolly, who has stated at this time of vriting the decd mother has not expired.

Upon DFD arrival at the scene, the decd mother was noted to be running on the wooden walkway in flames with her clothing burned off. The decd was found by firefighters to be lying on the floor just inside the front doorway of the apartment. Paramedics removed the decd and placed the decd inside their ambulance.

PER SCENE- The decd was noted to be lying face up on a stretcher inside a DFD MICU. The decd appears to have burns about his body. There were remnants of the decd clothing, black waist band and a red overall type strap. The decd was noted to have a yellow metal ring on his left hand and a yellow metal bracelet on his left wrist. The interpreter spoke with the decd father at the scene in this FA's presence and confirmed that his son did wear a bracelet and a ring. FA had the decd transferred from the MICU into the DFW Mortuary van

181577A 1110 PM
 Matches

The fire damage included two apartments. The majority of the damage was noted to be in the **decd** apartment and the apartment in which the fire is believed to have originated.

The damage was notable where the couch in the first floor apartment had been.

The **decd** apartment was noted to contain the melted, remnants of a smoke alarm on the wall with the body of the alarm noted on the floor **below**. The back bedroom which contained a bed and a crib was noted to have only smoke damage. The front livingroom of this apartment was noted to have several mattresses and **per DFD a bed** had been there.

DFD brought in their dog, "Cinder badged **K9-83**", who sniffs for accelerants--negative results.

DPD's Service# to this incident is: **84879D**

950910 AKCC/DAI
3
Matches

SOUTHWESTERN
INSTITUTE OF FORENSIC SCIENCES
5230 Medical Center Drive
Dallas, Texas 75235

Case No. 0324-95-0240KR

Name: [REDACTED]

Age: 7 months

Race: Latin

Sex: Male

Date of Death: 01 Feb 1995

Date of Examination: 01 FEB 1995

Time of Death: Approx. 8:29 am

Time of Examination: 12:20 pm

Pronounced at: [REDACTED]
Dallas, Dallas County, Texas

TRACK #

9509151824121

ATTACHMENT #

4

PRODUCT:

Match

AUTOPSY REPORT:

ORGAN WEIGHT &

Brain	1090 g	R. Lung	87 g	R. Kidney	20 g
Heart	50 g	L. Lung	70 g	L. Kidney	22 g
Liver	300 g	Spleen	31 g	Thymus	15 g

EXTERNAL EXAMINATION:

The body is photographed and tagged.

When first viewed, the body is clad in the remnants of a disposable diaper with the remnants of a red shirt, red and multicolored trousers with only the waistband remaining, and the remnants of socks with only the leg bands remaining. There is a yellow metal ring which says "baby" on the left third finger (middle finger), a yellow metal chain with a "Madonna" pendant about the neck, and yellow metal bracelets on each wrist. The jewelry is left on the body.

The body is that of a normally developed Latin male appearing consistent with the recorded age of seven months, measuring 68-1/2 cm (27 in) from crown to heel and 49-1/2 cm (19-1/2 in) from crown to rump and weighing 22 pounds (10.0 kg). The chest circumference is 48 cm (19 in) and the head circumference is 48 cm (19 in). There is good preservation in the absence of embalming. Lividity is not obvious. Rigor mortis is fully developed. The body is cool to touch.

The head hair is involved by the injury as are the scalp, ears, eyes, nose, mouth, face, neck, chest and breasts, abdomen, limbs, genitalia, and back and buttocks. The anterior fontanelle is palpably open and protrudes slightly to palpation. The ears are not pierced. The eyes are closed and though involved by the subsequently described injury, the left cornea can be visualized and is opaque. The injury precludes identification of the color of the irides. The

Name: [REDACTED]

mouth is edentulous and the frenula are intact. The chest and breasts are symmetrically developed. The abdomen is slightly protuberant. The limbs are equally and symmetrically developed. The genitalia are those of an uncircumcised male.

IDENTIFYING MARKS AND SCARS:

The injury precludes accurate evaluation for scars though none are recognizable.

EVIDENCE OF TREATMENT:

None.

950915 HLL 4121
 ATTACHED: 4
 PRODUCT: Matches

EVIDENCE OF INJURY:

There are partial and full thickness burns involving at least 90% of the body surface area with searing of the head hair and desquamation of the scalp and skin over the head and face, anterior and posterior trunk, and extremities including the feet. There is skin splitting present involving the medial aspect of both feet, left greater than right. There are linear areas of erythema on the left upper chest anteriorly and there is extensive desquamation of the skin of the posterior trunk and buttocks. There are focal leathery areas on the right abdomen as well as over the lower extremities. There is relative sparing of the dorsal aspect of the arms as well as the dorsal aspect of the calves.

Abundant soot is present in the larynx, tracheobronchial tree, and distal bronchi. The viscera all have a cherry-red discoloration consistent with effects of carbon monoxide. Marked cerebral edema is present with flattening of the normal gyral-sulcal pattern.

These injuries, having once been described, will not be repeated.

INTERNAL EXAMINATION:

BODY CAVITIES: The thoracic and abdominal organs are in their normal anatomic positions. The body cavities contain no adhesions or abnormal collections of fluid.

HEAD: See previous description. The subscalpular area and skull are unremarkable. The dura and dural sinuses are unremarkable. There are no epidural, subdural, or subarachnoid hemorrhages. The leptomeninges are thin and delicate. The cerebral hemispheres are symmetrical. The cranial nerves and blood vessels are unremarkable. Sections through the cerebral hemispheres, brainstem, and cerebellum are unremarkable. There are no hemorrhages in the deep white matter or the basal ganglia. The cerebral ventricles contain no blood.

NECK: The soft tissues and prevertebral fascia are unremarkable. The hyoid bone and larynx are intact.

CARDIOVASCULAR SYSTEM The aorta and its major branches and the great veins are normally distributed. The pericardium, epicardium, and endocardium are smooth, glistening, and unremarkable. There are no thrombi in the atria or ventricles.

Name: [REDACTED]

The foramen ovale is probe-patent. The coronary arterial system is right predominant and is unremarkable. The atrial and ventricular septa are intact. The cardiac valves are unremarkable. The myocardium is dark red-brown and firm and there are no focal abnormalities.

RESPIRATORY SYSTEM See previous description. The laryngeal mucosa is smooth and unremarkable without petechiae. The pleural surfaces are smooth and shiny. The pulmonary arteries contain no emboli. Sectioning of the lungs discloses a dark red-blue, moderately congested parenchyma.

HEPATOBIILIARY SYSTEM The liver is covered by a smooth, glistening capsule. The parenchyma is dark red-brown and moderately congested. The gallbladder contains 5 ml of bile but no calculi. The extrahepatic biliary ducts are unremarkable.

DIGESTIVE SYSTEM The esophageal mucosa is gray, smooth, and unremarkable. The stomach contains approximately, 30 ml of semisolid, white, partially digested material. There are no tablets or capsules. The gastric mucosa has normal rugal folds and there are no ulcers. The small and large bowel are unremarkable externally and upon opening at multiple random sites, contain no abnormal contents. The appendix is present. The pancreas is unremarkable externally and upon sectioning.

GENITOURINARY SYSTEM The subcapsular surfaces of the kidneys are smooth and slightly lobulated. The cortex is of normal thickness. The calyces, pelves, and ureters are unremarkable. The urinary bladder contains approximately 20 ml of clear yellow urine. The mucosa is gray, smooth, and unremarkable. The prostate gland is unremarkable.

ENDOCRINE SYSTEM The thyroid and adrenal glands are unremarkable externally and upon sectioning.

RETICULOENDOTHELIAL SYSTEM The spleen is covered by a smooth, blue-gray, intact capsule. The parenchyma is dark red. The lymph nodes are unremarkable. The thymus is unremarkable.

MUSCULOSKELETAL SYSTEM The clavicles, ribs, sternum, pelvis, and vertebral column have no fractures. The diaphragm is intact.

TICKET: 950915 HCC 4121
ATTACHMENTS: 4
PRODUCT: not this

Name: [REDACTED]

FINDINGS:

1. Smoke inhalation and thermal burns.

- a. Partial and full thickness burns involving at least 90% of the body surface area.
- b. Soot present in the larynx, tracheobronchial tree, and distal bronchi.
- c. Carboxyhemoglobin level 44% on postmortem blood sample.
- d. Cherry-red discoloration of the vi.scera.
- e. Cerebral edema.

2. History that the decedent was the victim of a house fire.

CONCLUSION: .

It is my opinion that [REDACTED] a seven-month-old Latin male, died as the result of smoke inhalation and thermal burns.

MANNER OF DEATH: Accident.

Karen F. Ross
 Karen F. Ross, M.D.
 Medical Examiner

TOXICOLOGY: .

Blood: Carboxyhemoglobin - 44%.
 Alcohols and Acetone - negative.
 Drug Screen - negative.

Urine: Alcohols and Acetone - negative.
 Cannabinoids - negative.

Vitreous: Electrolytes/Glucose/VUN -
 Na+ - 132 mEq/L Glu - 27 mg/dL.
 Kt - 11.9 mEq/L VUN - 11 mg/dL.
 Cl - 118 mEq/L.

TAB: 950915HLL4121
 ATTACHMENT: 4
 PRODUCT: matches

Protocol typed by Ellen R. Christopher

DALLAS FIRE DEPARTMENT ARSON AND FIRE INVESTIGATION FIRE INVESTIGATION REPORT

2014 MAIN STREET, ROOM 404
DALLAS, TEXAS 75201

PHONE NUMBER (214) 670-4312
FAX NUMBER (214) 670-4650

DATE: 2/1/95 TIME OF ALARM: 8:29 DISTRICT/SHIFT 3/A MAPSCO 36U

INCIDENT NUMBER: 7119 INVESTIGATOR / EMP. NO. DOLLAR 18918

ADDRESS: [REDACTED] EXPOSURE: SAME BLDG:

APARTMENT / SUITE NUMBER: 106

BUSINESS NAME: [REDACTED] APTS

PROPERTY OWNER: [REDACTED] Ltd Partnership REP: [REDACTED]

OCCUPANT: [REDACTED] REP: SAME

TYPE OF INCIDENT: Check appropriate type.

STRUCTURE FIRE <input checked="" type="checkbox"/>	VEHICLE FIRE	NON-STRUCTURE	INJURY	DEATH
FALSE ALARM	MULTIPLE ALARM	THREAT	ATTEMPT	OTHER

DESCRIPTION: 2-0-BR-APT

IF VEHICULAR: YEAR _____ MAKE _____ MODEL _____

LICENSE # / STATE _____ VIN. _____

CAUSE: CHILD WITH HEAT SOURCE

FIRE LOSS INFORMATION

	BUILDING	CONTENT
LOSS ESTIMATE	100,000	10,000
ESTIMATED VALUE	300,000	20,000
INSURANCE COVERAGE	200,000	NO COVERAGE
INSURANCE COMPANY	Lexington	
POLICY NUMBER / DATE	8693879	<u>950915004121</u>
ADJUSTER'S LOSS ESTIMATE	100,000	<u>Miss</u>
COMPANY ADJUSTER	Chuck Anderson ⁶⁴¹⁻⁴⁴³⁰	
PUBLIC ADJUSTER		
INSURANCE AGENT		

DFD 300 REVIEWED ASSIGNED COMPLETED ENTERED SUP. REVIEW CDL

FIRE INVESTIGATION REPORT

PAGE 2

HOMELESS YES/NO	SUPPLEMENT YES/NO	PHOTOS YES/NO	EVIDENCE YES/NO
DRUGS INVOLVED YES/NO	PREVIOUS FIRES YES/NO		

FIRES INFORMATION

LEVEL OF ORIGIN 11	AREA OF ORIGIN 14	EQUIPMENT INVOLVED IN IGNITION 98
MAKE	MODEL	SERIAL #
FORM OF HEAT IGNITION 65	TYPE MATERIAL IGNITED 71	IGNITION FACTOR 36
TERMINATION STAGE 2	FORM MATERIAL IGNITED 21	CODE VIOLATION YES/NO

NARRATIVE THE FIRE STARTED IN THE LIVING ROOM OF APPT. [REDACTED] THE 3-YEAR-OLD SON OF THE OCCUPANT STARTED A FIRE ON THE COUCH UNDER THE LIVING ROOM WINDOW. HE WENT INTO THE COURTYARD AND TOLD HIS MOTHER WHO WAS ON A PAY PHONE. SHE RESCUED HER OTHER TWO SLEEPING CHILDREN BUT LEFT OPEN THE FRONT DOOR TO HER APARTMENT. BEFORE THE FIRE WAS REPORTED IT HAD EXTENDED INTO A DEAD-END CORRIDOR IN THE FLOOR ABOVE. THE INFANT SON OF THE OCCUPANT OF [REDACTED] WAS DEAD AT THE SCENE. HIS MOTHER SUBSEQUENTLY DIED AT PARKLAND. THE OCCUPANT OF [REDACTED] INJURED HER LEG WHEN SHE JUMPED TO SAFETY.

95091510001121
 matches



INVESTIGATION GUIDELINE

Attachment A

DATA RECORDING SHEET FOR UPHOLSTERED FURNITURE FIRES

(To be attached to CPSC Form 182, Epidemiologic Investigation Report along with a copy of the Fire Incident Report)

Task Number 950915 ACC 4121 Incident Date Feb. 01, 1995

A. **PRODUCT DESCRIPTION:** Sofa/Couch Chair Sofa bed Other _____

1. Was upholstered furniture slipcovered? Yes No @ Unknown

2. Had it been reupholstered? Yes No Unknown

3. Manufacturer/Distributor/Brand Unknown

4. Purchased: New Used Unknown

If used, specify how obtained (e.g., garage sale, etc.) _____

5. Date Furniture Purchased: Unc Furniture Age Unc

6. Standard Certification Labeling; e.g., UFAC or California standard: (Copy)
Unc

B. **POINT OF FIRE IGNITION ON FURNITURE:** Describe where fire started on upholstered furniture.

Skirt Seat cushion Inside, back Inside arm

Back Side Underside Crevice

Welt Cord Tuft Other Unknown

C. **AGE (IN YEARS) OF PERSON INVOLVED IN IGNITION** (if appropriate): _____

LT 5 yrs. old 0 - 4 5 - 14 15 - 64 65 +

D. **PRODUCT INVOLVED AS HEAT SOURCE AND TYPE** (Check):

Lighter Match Candle Heater Fireplace

____ Other (specify) _____

____ Unknown



INVESTIGATION GUIDELINE

950915 HCL 4/12/1

If lighter, specify type: Child-resistant Not child-resistant Unknown

If match, specify type: Book Box Unknown

If heater, specify fuel source and distance from furniture:

unk Fuel source: c unk furniture

E. DETECTION OF FIRE

7. Detector (smoke, heat, c.o., sprinkler) present?

Yes No Unknown

If yes, specify type: unk

8. Detector went off (alarmed)?

Yes No Unknown

9. If no, do you know any reason why not: e.g., unpowered, fire too small, etc.?

10. About how soon was the fire discovered after it started? unk

F. VICTIM(S)

2 Number of Deaths 1 Number of Injuries

G. Socio-Economic Data:

11. Education level of head of household:

Less than high school unk High school Some College

12. Total household income:

LT \$15,000 unk \$75,000 - \$34,999. \$35,000 +

13. Approximate home market value: unk

Rent Own

General Description: Provide general description, including all other relevant factors and information on the investigation form.

1. CASE NO. 950921HCC2194		2. INVESTIGATOR'S ID [9][0][0][3]		3. OFFICE CODE [8][3][0]		EPIDEMIOLOGIC INVESTIGATION REPORT	
4. DATE OF INCIDENT YR MO DAY [9][5][0][9][0][7]		5. DATE INVESTIGATION INITIATED		YR MO DAY [9][5][0][9][12][8]			
6. SYNOPSIS OF INCIDENT OR COMPLAINT: This investigation was initiated in response to a newspaper account of a fatal house fire occurring on 9-07-95 in which two children, a 2 year old boy and a five year old girl died. The fire was started by a third sibling, a three year old boy, who was playing with a cigarette lighter; he ignited one of the upholstered seat cushions of these family's living room couch. The fire quickly spread to the structure, causing the family to be trapped in their second floor apartment. The children's mother was able to rescue the 3 year old child and an infant.							
7. LOCATION (Home, school, etc.) apartment/home . . .		8. CITY [1][0] North Chicago		9. STATE IL			
10A. FIRST PRODUCT couch [0][6][7][9] 1			11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS unk. manufacturer; believed to be very old. Upholstered with foam-filled sent cushions.				
10B. SECOND PRODUCT * cigarette lighter [1][6][0][4]			11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS unknown manufacturer; butane, non-child resistant.				
12. AGE OF VICTIM * [2][0][6]		13. SEX (USE NUMERICAL CODE) MALE - 1 FEMALE - 2 [2] UNKNOWN - 3		14. DISPOSITION deceased at hospital [8]		15. INJURY DIAGNOSIS anoxia/ smoke inhalation [6][5]	
16. BODY PART All parts [8][5]		17. RESPONDENT(S) (Mother, Friend) fire, police investigators [1]		18. TYPE INVESTIGATION ON SITE - 1 TELEPHONE - 2 [1] OTHER - 3		19. TIME SPENT Tr: 3.0 [0][6].[0]	
20. ATTACHMENTS multiple [2]		21. CASE SOURCE [0][5]		22. REVIEWED BY [8][1][3][0] YR MO DAY [9][5][1][0][1][9]			
23. PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME [] CPSC MAY NOT DISCLOSE MY NAME [X]							
24. NARRATIVE (See Instructions on Page 2) See attached narrative.				25. REGIONAL OFFICE DIRECTOR REVIEW DATE			

(USE ADDITIONAL SHEETS IF NECESSARY)

SUMMARY:

This investigation was initiated in response to a newspaper account of a fatal house fire occurring on **9-07-95** in which two children, a 2 year old boy and a five year old girl, died of smoke inhalation. The fire was started by a third sibling, a three year old boy, who **was** playing with a cigarette lighter; he ignited one of the upholstered seat cushions of these family's living room couch. The fire quickly spread to the structure, causing the family **to be** trapped in their second floor apartment. The **children's** mother **was** able to rescue the **3** year old child and an infant.

PRE-INCIDENT:

This fire occurred in a two story four bedroom apartment building located in the city of North Chicago, IL.. The building is of wood and masonry construction. The apartment where the fire occurred is located on the second floor, and it is accessed by a separate stairway leading to a street side doorway.

The apartment is occupied by a 27 year old female and her four children, ages 5, 3, 2, and 6 months.

This CPSC investigator was unable to gain access to the apartment where the fire occurred during a visit to the premises on **9-28-95**, despite the fact that a North Chicago police officer accompanied this officer to the scene. The apartment has reportedly been cleaned out and was boarded up; attempts to locate the building owner by the police department were not successful.

According to police and fire investigators interviewed on **9-28-95**, the apartment consisted of a living room area overlooking the street, two bedrooms, a kitchen and a bath. The building is located in an economically depressed area of the city.

There was a couch in the living room, placed in a standard position with the back of the couch against one of the **room's** walls. In questioning the fire and police investigators, they recalled that the couch appeared to be very old and dirty. It was approximately 6 feet long, with three equal sized detachable seat cushions. The couch was upholstered with a wool-like fabric in a gold plaid material. The couch cushions were filled with a foam material. The couch did not have a slipcover, and there were not believed to have been any other items lying on the couch at the time of the fire. The arm rests were of the "rolled" or rounded **type**, and both the arm rests and back support cushions were not removable. Investigators did not observe any manufacturer identification tags on the couch, however they indicated that the

couch was almost entirely consumed by the fire, and little was left to examine except the frame, lower springs, and portions of a seat cushion.

The children's 44 year old father, who did not reside with the family, had been at the apartment earlier in the evening, 9-06-95. The police were called to the apartment at that time after the mother and father had become involved in a violent domestic disturbance. At one point in that incident the father had chased the mother out of the apartment into the street, this occurring subsequent to his cutting the telephone cord to the apartment's telephone with a kitchen knife after she had threatened to call the police.

INCIDENTS:

On 9-07-95 at 1:38AM the North Chicago Fire Department received a 911 call of a structure fire at 816 14th Street, in their city. The first responders to the fire scene were police officers, who arrived at the scene almost immediately and were met at the front of the building by the mother. She reported that two of her children were still trapped in the apartment. The police officers attempted to climb the steps leading to the second floor apartment, but were unable to continue due to the heavy smoke and heat. Firefighters arrived approximately two minutes later, and with the aid of the special equipment were able to enter the living room of the apartment and locate the two victims, ages 3 and 5, lying on the living room floor. The children were brought down to the ground, and resuscitation efforts were begun while they were transported to local St. Therese Hospital, and were later airlifted to Lutheran General Hospital in Park Ridge, IL. Despite these efforts, both victims died of smoke inhalation injuries the following day.

The mother was also treated at a local hospital for smoke inhalation the morning of the fire. Her 3 year old son and 6 month old infant were not injured, as she had been able to rescue them before the fire blocked her attempts to reenter the apartment to reach the other children.

POST INCIDENT:

Investigators interviewed on 9-28-95 explained that the circumstances leading up to this fire were complicated by the domestic argument that had occurred earlier the same evening. After the mother's telephone cord had been cut and she had been chased from the apartment, she was accompanied back to the apartment by police officers. The father had left the apartment by this time. The police officers assisted the mother in changing the front door lock, as the mother feared that the father would return. The police also suggested to the mother that she could

use a baby stroller to block the rear door (apparently this door opened up onto a second story porch).

After the police officers had departed, the mother was checking the security of the back door. She was approached by her 3 year old son, who told her "the thing is on fire." The mother then went into the living room and saw that the couch was on fire. She first tried to put the fire out on her own by smothering the flames with a blanket/When that failed she gathered the two closet children (the 3 year old male and the 6 month old infant) and took them outside. By this time another-of the apartment tenants-realized what was occurring, and called the fire department. The mother could not reenter the apartment to rescue her other two children, **and** instead met the arriving police officers and told them **what** had happened.

Investigators questioned the 3 year old boy, who admitted that he had playing with a non-child resistant cigarette lighter (later found in the living room by investigators) and had started the flat top portion of one of the couch seat cushions on fire with the lighter.

When questioned by investigators, the mother reported that the cigarette lighter and cigarettes had been left behind by the **childrens'** father during the earlier domestic disturbance. She further stated that the father had at some point in the past (not that same evening) shown the 3 year old how to light a cigarette lighter. It is not clear why he did this, as an effort to teach the child about using the lighter safely, or what.

This fire occurred on a clear, 65 degree night, winds from the SW at 5 miles per hour. The flames from the couch ignited the apartment's walls, believed to be plaster and paneling. Investigators could not recall any materials nearby, such as piled newspapers, etc., that might have caused the fire to burn quicker.

A letter was sent to the mother of the victims on 9-28-95 asking her to contact this CPSC Investigator, however no response has been received as of 10-09-95.

A copy of the fire department's report regarding this incident is attached as Exhibit "A." The police department's report is attached as Exhibit "B." Both of these departments were visited in person by this Investigator on 9-28-95. The only photographs either department could locate were facial views of the deceased victims; copies of these photos were not requested.

PRODUCT IDENTIFICATION:

couch: manufacturer of actual age unknown. Described by

police officers and fire fighters who viewed the item as they were attempting to rescue the children and extinguish the fire as being very old and dirty. It was approximately 6 feet long, with three equal sized detachable seat cushions. The couch was upholstered with a **wool-like** fabric in a gold plaid material. The couch cushions were filled with a foam material. The couch did not have a slipcover, and there were not believed to have been any other items lying on the couch at the time of the fire. The arm rests were of the "rolled" or rounded type, and both the arm rests and back support cushions were not removable. Investigators did not observe any manufacturer identification tags on the **couch, however** they indicated that the couch was almost entirely consumed by the fire, and little was left to examine except the frame, lower springs, and portions of a seat cushion.

cigarette lighter: butane, red in color, not child resistant. Manufacturer unknown.

smoke detector: battery-powered, manufacturer identification information not available. The detector was sounding when the initial police officers arrived.

APPLICABLE STANDARDS:

It is not known if the couch was in compliance with any applicable voluntary flammability standards.

ATTACHMENTS :

Exhibit "A" - City of North Chicago Fire Department report.

Exhibit "B" - City of North Chicago Police Department report.

Exhibit "C" - Data recording sheet for upholstered furniture fires.

Exhibit "D" - Original investigation request.

ALARM AND FIRE RECORD
NORTH CHICAGO FIRE DEPARTMENT
NORTH CHICAGO, ILLINOIS

Exhibit "A"
JOI#95092/HCC219V

9/28/95

022

ALARM NO. F-98**

Date 9-7-95

Time of Alarm 0132

Recorded By Henderson

Dismissal Time 0510

Type Of Alarm Fire Ambulance Other _____

Alarm Transmission 7447 911

Name and/or Location [REDACTED]
North Chicago, Il.

Out on arrival Yes No

If not out on arrival, state equipment used 200' 3" supply line, PPV fan, Both 1 3/4
200' preconnects, SCBA's, 35' ladder, Axes, pike poles, lights

If other than building, so state _____

Bldg. Owner _____ - Address _____ Tel. _____

Tenant _____ Address _____ Tel. _____

Type of building Massonary No. of stories F Two 1 o o r Two

Did fire extend to adjoining property Yes No WEATHER: Temp. 65 Wind SW 5

Cause of ignition Three year old started fire with red butane lighter

Material ignited Cloth couch

Injuries Two children that were occupants of the

Estimated Loss	<u>8000</u>	<u>5,000</u>	Response Men	<u>18</u>
	<u>Building</u>	<u>Contents</u>	Apparatus	<u>1517-1514-1548</u>
Value	<u>90,000</u>	<u>20,000</u>	Shift	<u>Black</u>
	<u>Building</u>	<u>Contents</u>		
Insurance	<u>Building</u>	<u>Contents</u>		

REMARKS: STRUCTURE FIRE:see supplemental

980921 HRC 2194

NORTH CHICAGO FIRE DEPARTMENT
NORTH CHICAGO, ILLINOIS

SUPPLEMENTAL REPORT

REFERENCE:

DATE OF REPORT: 9/7/95

PAGE NO: 1474

TYPE OF ALARM: Structure Fire

ALARM NO: F-98*

NAME and/or LOCATION:

TIME OF ALARM: 0132

816-B 14th St.

DATE OF ALARM: 9/7/95

REMARKS: At 0132 we recieved a 911 hangup call stating there was a fire on the second floor apartment at 816 14th St. Upon arrival it was noted that there was a fire on the second floor of the apartment in the front. A female stated that two of her children were trapped in the bedroom. An attack team was assembled and advanced up the stairway with a 1-3/4 handline. As the team made the top of the stairs F/F Miller went twords the living room and found the two children lying on the floor of the living room. These victims were rescued from the fire room and taken outside, where mouth to mouth ventilations were done. These two victims were transported to St. Therese in 1548. Officer Lonnie Brown, and Officer Brian Carder assisted Urban, Umek, and Heinhardt in 1548. The fire was quickley extinguished after the rescues were made. This fire did not do much damage to the structure itself, but did heavy damage to the contents. 1500 assumed command and boxed this incident to the second alarm for BOX 15-01. The fire started on the couch in the front room. The fire was started by a three year old boy that lived in the apartment. The boy admitted setting the fire with a lighter that was in the apartment. Building department was on location. Boardup was called. American Red Cross was called to assist with the tennants that were displaced.

Occupants of fire apartment are:

- ~~██████████~~ -Mother 4/3-4353
- ~~██████████~~ F-5 Transported to St. Therese, fire victim
- ~~██████████~~ M-3 Fire Starter, uninjured
- ~~██████████~~ M-2 Transported to St. Therese, fire victim
- ~~██████████~~ F-6mo. Uninjured.

An investigators' report will follow.

P.S. Firefighters, Henderson, Urban, Umek, and Harris were all exposed to the victims with mouth contact. These firefighters had blood drawn drawn at St. Therese as a precaution.


(INVESTIGATOR)

Exhibit "0"

9/28/95

(22)

IOJ #9509211+cc2194

CASE REPORT: CALLS FOR SERVICE DATE PRINTED: 09/28/95

50.CID#: _____

00. Agency : 1 NORTH CHICAGO POLICE..... 01. Inc #: 95018247 02. Rec By : STELL

03. Date Reported: 09/07/95 04. Time Reported: 0 1 3 8 05. Shift: 1 2400-0800A

06. Activity: 09054 FIRE S..... 07. Priority: 2 ASAP.....w

08. City NORTH CHICAGO-- 09. Loc: [REDACTED]-----mm... 10. B/R 00010

11. Apt# _____ Name [REDACTED]----- Tel 4734353... How Rec 1 Type

16. Add: [REDACTED]----- 17. City NORTH CHICAGO__ 18. St: I L

19. Rem: LINCOLN AV _____

20. Units: 0332 0337 0339 0311 0312 0319 0341 0340 0344 ---- 30. Off: -----

32. Disp 0138 Enrt 0138 Arr 0140 Comp 0304 *Transp* Enrt ---- Arr ---- Comp ...

39. Other Agency: __ 41. Ad: _ 42. Dsp By : S T E L L 43. Case#: _____ 44. Dispo:

45. Line-1: PTLM CARDER RESPONDED TO A STRUCTURE FIRE AT 816 14TH STREET,...

46. Line-2: NC IL. _____

47. Line-3: _____

48. Line-4: SEE SUPPLEMENTAL REPORT.....

49. Line-5: -----

09/07 0137 STELL Verified- [REDACTED] NORTH CHICAGO
09/07 0137 STELL (1) Pol:000101 (F) Fir: 0101 (E) EMS: A 2 1 (M) Zone: 0001 *
09/07 0138 STELL ** Initial Call Posted **
09/07 0138 STELL <UNITS>. :0332 0340 0344
09/07 0140 STELL ** Call Updated **
09/07 0200 WILKI ** Call Updated **
09/07 0201 WILKI <UNITS>: 0332 0340 0344 0 3 3 7 0339
09/07 0204 STELL ** Call Updated **
09/07 0204 STELL <UNITS>: 0332 0340 0344 0337 0339 0311 0 3 1 2 0319
09/07 0218 WILKI ** Call Updated **
09/07 0218 WILKI <UNITS>: 0332 0344 0337 0339 0311 0312 0319
09/07 6218 WILKI ** Call Updated **
09/07 6218 WILKI <UNITS>: 0332 0337 0339 0311 0312 0319
09/07 0228 STELL ** Call Updated **
09/07 0236 STELL ** Call Updated **
09/07 0236 STELL <UNITS>. 0332 0337 0339 0311 0312 0319 0341 0340 0344

950921 HCC2194

09/07 0304 STELL
09/07 1015 LEWIS
09/07 1135 LEWIS

** Call Updated **
** Call Updated **
** Call Updated **

Supplemental Report: CALLS FOR SERVICE Incident: 1950 18247

Rpt	Date	Time	Offcr	Subject
01	09/07/95	0138	00332	ASSIST FIRE DEPT - F'TLM CARDER

F'TLM CARDER RESPONDED TO A STRUCTURE FIRE AT [REDACTED] NC.

UPON ARRIVAL PTLM CARDER MET WITH F'TLM L. BROWN, WHO ADVISED TWO CHILDREN WERE STILL IN THE UPSTAIRS APT (APT#B) POSSIBLE IN THE BACK BEDROOM. F'TLM L. BROWN AND CARDER ENTERED THE STAIRWAY TO APT#B.

F'TLM L. BROWN IN THE LEAD WAS ABLE TO REACH THE TOP OF THE STAIRS AND WAS FORCED BACK DUE TO THE EXTREME SMOKE AND HEAT. PTLM CARDER AND PTLM L. BROWN THEN WENT TO THE REAR OF 816 14TH STREET SEEKING TO FIND A REAR ENTRANCE TO APT #B TO NO AVAILABLE.

F'TLM CARDER AND F'TLM BROWN RETURNED TO THE FRONT OF [REDACTED] STREET WHEN PTLM T. CLARK WAS ADVISING ARRIVING NORTH CHICAGO FIRE FIGHTERS OF THE SITUATION. PTLM CARDER, PTLM BROWN, AND PTLM CLARK THEN ASSISTED THE FIRE FIGHTERS. THE NORTH CHICAGO FIRE FIGHTERS THEN BROUGHT OUT TWO CHILDREN LATER IDED AS BLACK FEMALE, [REDACTED] DOB: 6-8-90, AND B/M, [REDACTED] DOB: 4-2-93.

F'TLM BROWN ASSISTED NORTH CHICAGO PARAMEDICS WITH CPR AND CHARLE WHILE PTLM CARDER ASSISTED WITH CARLISE. FURTHER RESPONDING NORTH CHICAGO UNITS ALONG WITH F'TLM CLARK ASSISTED THE FIREDEPARTMENT AND PROVIDED CROWD AND TRAFFIC CONTROL.

F'TLM CARDER AND L. BROWN ASSISTED THE NORTH CHICAGO PARAMEDICS WITH CHARLES AND CARLISE THRU - TRANSF'ORT TO ST THERESE HOSPITAL.

AT ST THERESE HOSPITAL CARDER MET WITH THE COMP WHO ADVISED SHE WAS ABLE TO REMOVE TWO OF HER CHILDREN IDED AS WILLIAM [REDACTED] DOE: 2-27-92, AND [REDACTED] N, DOB: 3-7-95, FROM APT#B, EUT WAS UNABLE TO RETURN TO HELP [REDACTED] AND [REDACTED]. PTLM CARDER FIND F'TLM BROWN CLEARED FROM ST THERESE AND RETURNED TO [REDACTED] STREET TO PROVIDE FURTHER ASSISTANCE TO THE FIRE SCENE. ALL NORTH CHICAGO POLICE UNITS THEN CLEARED WHEN THE NORTH CHICAGO FIRE DEPT SECOND THE FIRE SCENE.

Supplemental Report: CALLS FOR SERVICE Incident: 1 95018247

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Rpt	Date	Time	Offcr	Subject
02	09/07/95	0138	00340	ASSIST FIRE DEPT - L. BROWN

=====

THE R/O L. FROWN, PTLM 0' BRYANT RESPONDED TO [REDACTED] NC IL IN REFERENCE TO A STRUCTURE FIRE. UPON ARRIVAL THE R/O WERE ADVISED BY AN UNIDENTIFIED B/F THAT THE TOP APT WAS ON FIRE AND THERE WERE TWO SMALL CHILDREN IN THE APT. THE R/O EROWNE #06 THEN ENTERED THE STAIRWELL INCREASING SMOKE AND UPON REACHING THE TOP STAIR WAS UNABLE TO BREATHE OR SEE WITH THE USE OF ARTIFICIAL LIGHTING. THE R/O THEN DESCENDED THE STAIRWELL AND ATTEMPTED A REAR ENTRY OF THE NORTH CHICAGO FIRE DEPT, THE R/O ASSISTED AN UNIDENTIFIED FIREMAN TO THE BOTTOM OF THE STAIRCASE AND TOOK AN INFANT B/M IDENTIFIED AS [REDACTED] B/M, DOB: 9-2-93 OF [REDACTED] NC IL, TO THE ROADWAY AND ASSISTED IN RESUSCITATING CHARLES. UPON THE ARRIVAL OF A MICU NCFD UNIT AND ESCUASE OF LIMITED FIRE DEPT PERSONELL THE R/O OPERATED THE MICU TO ST THERESE HOSPITAL. SEE ACCIDENT #95-18249. THE R/O THEN CLEARED.

95092117cc 2194

Supplemental Report: CALLS FOR SERVICE Incident: 195018247

=====
Rpt Date Time Offcr Subject
03 09/07/95 0138 00311 ASSISTING FIRE DEFT - SGT WILLIAMS
=====

THE R/O SGT EUGENE WILLIAMS UPON RETURNING TO POST #1 FROM A DOMESTIC DISTURBANCE CALL AT 816 14TH STREET RECEIVED NOTIFICATED FROM COMMUNICATION THAT THERE WAS A STRUCTURE FIRE AT THAT LOCATION AND THE FIRE DEFT WAS ON LOCATION. THE R/O WAS THEN CONTACTED VIA "POLICE RADIO" BY OFFICER HERB BROWN WHO REQUESTED THAT THE OFFICER COME TO THE SCENE. THE R/O RESPONDED AND UPON ARRIVAL THE R/O OBSERVED THAT THE FIRE DEPT MEMBERS WERE STRIKING A FIRE AT THE SAME APARTMENT THAT THE R/O AND OFFICER CLARK HAD CLEARED FROM EARLIER. THE R/O ALSO OBSERVED- THAT FIRE DEPT MEMBERS WITH ASSITANCE FROM OFFICERS L. BROWN AND BCARDER WERE ADMINISTERING CPR TO TWO YOUNG JUVENILES LATER IDENTIFIED AS [REDACTED] B/F, DOB: 6-8-90, AND [REDACTED] B/M, DOB: 4-2-93, OF [REDACTED] 2ND FLOOR, APT. UPON ARRIVAL OF THE RESCUE UNIT, BOTH JUVENILES WERE RUSHED TO SAINT THERESE HOSPITAL EMERGENCY ROOM FOR FURTHER MEDICAL ASSISTANCE. SHORTLY GFTER THE RESCUE CLEARED LOCATION, THE R/O INSTRUCTED OFFICERS MCCLARY AND BELL WHO WERE ON LOCATION -TO TRANSPORTED THE MOTHER A B/F, IDENTIFIED AS [REDACTED] DOB: 4-18-68, [REDACTED] TO THE HOSPITAL EMERGENCY ROOM. THE R/O THEN STOOD BY IN TE AREA TO ASSIST WITH TRAFFIC AND CROWD CONTROL. THE R/O ALSO OBSERVED THAT THE CONDITION OF THE TWO JUVENILES APPEARED TO BE A SERIOUS NATURE DUE TO SMOKE INHALATION. BOTH JUVENILES WERE LATER AIRLIFTED TO LUTHERAN GENERAL HOSPITAL IN PARK RIDGE, IL OR DES FLAINE, IL.

Supplemental Report : CALLS FOR SERVICE Incident: 195018247

Rpt	Date	Time	Offcr	Subject	
04	09/07/95	0752	00308	ADD-ON/SGT JABLONSKI	TRW

ON 9/7/95 AT 7:52AM [REDACTED] II - BLACK MALE - DOE
 11/14/51 OF [REDACTED] (X: NONE) HAD COME INTO THE
 STAT1 ON TO ASK WHERE HIS CHILDREN WERE SINCE HE HEARD THAT
 THERE WAS A FIRE AT [REDACTED]. UPON ARRIVAL TO [REDACTED]
 [REDACTED] STREET HE NOTICED THAT THE HOME WAS BOARDED UP AND NO ONE
 WAS FOUND. MR. [REDACTED] STATED THAT HIS CHILDREN ARE NAMED:
 [REDACTED] III, [REDACTED] JOHNSON, AND
 [REDACTED] MR. [REDACTED] WAS ADVISED THAT HE COULD CALL
 LUTHERN GENERAL HOSPITAL IN PARK RIDGE AT 686-2210 AS THE
 CHILDREN WAS AIR LIFTED THERE FROM ST. THERESA HOSPITAL.

980 925 Hcc 2194

Supplemental Report: CALLS FOR SERVICE Incident: 1 950 18247

=====
Rpt Date Time Offcr Subject
05 09/07/95 1328 00318 ARSON INTERVIEW CAROLYN BRICE/DET. WADE SRJ
=====

FOLLOW UP INVESTIGATION

ARSON

INTERVIEW: [REDACTED]

[REDACTED] B/F DOB 04-18-68

[REDACTED] NORTH CHICAGO, I L 60064
[REDACTED]

THE I/O WENT TO THE LUTHERN GENERAL HOSPITAL IN PARE RIDGE, ILL, IN REFERENCE TO INTERVIEWING THE PARENTS OF THE CHILD VICTIMS.

THE I/O SPOKE TO [REDACTED] WHO STATED PRIOR TO THE FIRE SHE AND HER CHILDREN'S FATHER SHE IDENTIFIED AS [REDACTED] B/M DOB 11-14-51 HAD GOT INTO AN ARGUMENT AND HE HAD CHASED HER OUT OF THE APARTMENT AFTER HE HAD GRABBED A KITCHEN KNIFE AND CUT THE TELEPHONE CORD.

[REDACTED] STATED SHE RAN OUT OF THE APARTMENT AND TO JOHN'S LIQUOR STORE TO CALL THE POLICE, WHILE SHE WAS ON THE PHONE SHE SAW THAT HE DROVE UP IN HIS CAR SHE STATED SHE THEN RAN TO A CAR AT [REDACTED] SHE STATED THAT SHE WAS ABLE TO SPEAK TO THE POLICE AND ADVISED THEM OF WHAT HAD OCCURRED AND THAT SHE NEEDED THEM TO GO WITH HER BACK TO HER APARTMENT. SHE STATED THE OFFICER RETURNED TO HER APARTMENT CHECKED IT AND NOTICED THAT [REDACTED] HAD NOT RETURNED.

THE OFFICERS ASSISTED HER IN CHANGING A LOCK ON ONE OF THE DOORS TO THE APARTMENT. SHE STATED THE OFFICER ALSO TOLD HER TO SECURE THE OTHER DOOR WITH A BABY STROLLER PRIOR TO HIS LEAVING. ONCE THE OFFICER LEFT SHE WENT TO SECURE THE OTHER DOOR. SHE STATED THAT SHE WAS THEN MET BY HER SON, [REDACTED] DOB 02-27-92, WHO TOLD HER THAT "THE THING IS ON FIRE". SHE STATED SHE THEN WENT INTO THE LIVING ROOM AND NOTICED THAT THE COUCH WAS ON FIRE. SHE STATED THAT SHE ATTEMPTED TO PUT OUT THE FIRE WITH A BLANKET.

AFTER SHE COULD NOT PUT OUT THE FIRE SHE GATHERED UP HER TWO CHILDREN THAT WERE IN THAT ROOM AND TOOK THEM OUTSIDE SHE ALSO STATED THAT SHE HAD TROUBLE GETTING THE STROLLER BARRICADE OFF THE DOOR. AND BY THE TIME, SHE WENT BACK TO GET HER OTHER SMALL CHILDREN [REDACTED] AND [REDACTED] THE ELECTRICITY HAD GONE OFF AND SMOKE HAD FILLED UP IN THE HALLWAY.

SHE STATED A NEIGHBOR CALLED THE FIRE DEPARTMENT AND SHE WAITED UNTIL THEY ARRIVED TO GET THE CHILDREN OUT OF THE APARTMENT.

THE I/O ASKED [REDACTED] IF SHE KNEW HOW THE FIRE STARTED. SHE STATED HER SON, [REDACTED], HAD FLICKED A CIGARETTE LIGHTER NEAR THE COUCH AND STARTED IT.

THE I/O ASKED IF SHE KNEW WHERE HER SON GOT THE LIGHTER FROM. SHE STATED THAT SHE REMEMBERED SEEING THE LIGHTER AND CIGARETTES IN THE APARTMENT AFTER SHE RETURNED AFTER

Supplemental Report: CALLS FOR SERVICE Incident: 1 950 18247

SHE WAS CHASED OUT OF THE APARTMENT BUT SHE COULD NOT REMEMBER WHERE. SHE FURTHER STATED THAT THE CHILDREN'S FATHER SMOKED CIGARETTES AND HAD LEFT THE LIGHTER THERE.

THE I/O ASKED HER IF SHE KNEW OF A STATEMENT HER SON, [REDACTED] HAD MADE TO A NORTH CHICAGO PARAMEDIC STATING THAT HIS FATHER, [REDACTED] HAD TAUGHT HIM HOW TO FLICK THE CIGARETTE LIGHTER. SHE STATED THAT SHE WAS AWARE OF THE STATEMENT HE MADE AND THAT IT WAS TRUE. SHE FURTHER STATED THAT SHE AND THE CHILDREN'S FATHER HAD SPOKE TO HER SON IN THE PAST ABOUT FLAYING WITH CIGARETTE LIGHTERS.

THE I/O ASKED HER IF SHE THOUGHT [REDACTED] SR. MIGHT HAVE TOLD THEIR SON ABOUT THE WORKING OF THE CIGARETTE LIGHTER IN AN ATTEMPT TO EDUCATE THE CHILD ABOUT ABOUT SAFETY WITH IT. SHE STATED THAT SHE DID NOT KNOW AND THAT HE HAD NOT SHOWN HIM THE LIGHTER RECENTLY.

THE I/O ADVISED [REDACTED] THAT THE CIRCUMSTANCES CONCERNING THE FIRE WERE BEING INVESTIGATED AND THAT SHE WOULD PROBABLY BE CONTGCTED AT A LATER DATE.

THE I/O ALSO ASKED [REDACTED] IF IT WAS OK TO TAKE 1 PHOTO OF EACH CHILD FOR IDENTIFICATION PURPOSE. SHE STATED THAT HE COULD AND SIGNED A HOSPITAL CONSENT FORM. THE I/O THEN TOOK TWO FOLORIOD PHOTOS OF THE CHILDREN.

ASSIGNED TO: _____ DATE : a _____ TIME: _____

REVIEWING SUFERVISBR: _____ DATE : _____



INVESTIGATION GUIDELINE

Attachment A

DATA RECORDING SHEET FOR UPHOLSTERED FURNITURE FIRES

(To be attached to CPSC Form 182, Epidemiologic Investigation Report along with a copy of the Fire Incident Report)

Task Number 950921HCC2194 Incident Date 9/07/95

A. **PRODUCT DESCRIPTION:** Sofa/Couch Chair Sofa'bed Other _____

1. Was upholstered furniture slipcovered? Yes No Unknown

2. Had it been reupholstered? Yes No Unknown

3. Manufacturer/Distributor/Brand unknown

4. Purchased: New Used Unknown

If used, specify how obtained (e.g., garage sale, etc.) unknown

5. Date Furniture Purchased: unknown Furniture Age Determined by fire/police as very old and dirty

6. Standard Certification Labeling; e.g., UFAC or California standard: (Copy)

NONE OBSERVED

B. **POINT OF FIRE IGNITION ON FURNITURE:** Describe where fire started on upholstered furniture.

Skirt Seat cushion Inside back Inside arm

Back Side Underside Crevice

Welt Cord Tuft Other _____

C. **AGE (IN YEARS) OF PERSON INVOLVED IN IGNITION** (if appropriate): _____

LT 5 yrs. old 5 - 14 15 - 64 (7 65 +)

D. **PRODUCT INVOLVED AS HEAT SOURCE AND TYPE** (Check):

Lighter Match Candle Heater Fireplace

Other (specify) _____

Unknown



INVESTIGATION GUIDELINE

If lighter, specify type: Child-resistant Not child-resistant Unknown

If match, specify type: Book Box Unknown

If heater, specify fuel source and distance from furniture:

_____ Fuel source _____ Distance from furniture

E. DETECTION OF FIRE

7. Detector (smoke, heat, c.o., sprinkler) present?

Yes No Unknown

If yes, specify type: smoke, battery powered

8. Detector went off (alarmed)?

Yes No Unknown

9. If no, do you know any reason why not; e.g., unpowered, fire too small, etc.?

10. About how soon was the fire discovered after it started? within 3-5 minutes

F. VICTIM(S)

2 Number of Deaths 1 Number of Injuries

G. Socio-Economic Data:

11. Education level of head of household:

unknown
 Less than high school High school Some College

12. Total household income:

LT \$15,000 \$15,000 - \$34,999 \$35,000 +

13. Approximate home market value: _____

Rent Own

General Description: Provide general description, including all other relevant factors and information on the investigation form.

Exhibit "D"

9/25/95

DOI #4509211CC 2194

623

ACCIDENT INVESTIGATION REQUEST FORM

Document Number X 5 9 2 8 2 2

Date of Incident 9/7/95 Category I.D.BUNN251995

Follow-Up Requested _____ Hazard Analysis Section 15

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

Headquarters Contact Kimberly Lona (301) 504 -0470 Ext 1269

Assignment Message

Conduct a investigation of this case where a 5 year old female died in an apartment fire caused by a child playing with a cigarette lighter on the couch. Find out what part of the furniture ignited (if possible). If second hand furniture, find out how long in possession. If furniture still available, collect sample, following page 9 of guideline for sample collection.

Describe incident scenario; photograph and identify manufacturer; model number and brand name of all products involved. Please obtain fire incident report, medical insurance, and any other report of incident. Complete Data Record Sheet in guideline.

Person(s) to Contact Fire Department North Chicago, IL and Local Officials

Guideline Number 19 Upholstered Furniture Fires

Requested By Kimberly Long

Task Number 9509211CC 2194

Assigned to CH10

Date 9/21/95

1. CASE NO. 951006HCC1003			2. INVESTIGATOR'S ID 8 1 7 0			2 OFFICE CODE 8 0 0			EPIDEMIOLOGIC INVESTIGATION REPORT		
4. DATE OF ACCIDENT YR MO DAY 9 5 0 7 3 1			5. DATE INVESTIGATION INITIATED YR MO DAY 9 5 1 0 2 6								
6. SYNOPSIS OF ACCIDENT OR COMPLAINT A nine year old female set fire to a sofa in the living room of her apartment when she was playing with book matches. The matches had reportedly been left on a table by the child's grandmother. The resulting fire consumed the sofa and damaged most of the furniture in the living room. The sofa was discarded and no identification is known. There were no injuries.											
7. LOCATION (Home, school, etc.) Apartment(living room) 11 0				8. CITY Asbury Park				9. STATE N J			
10A. FIRST PRODUCT Book matches 1 7 2 8				11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS UNKNOWN							
10B. SECOND PRODUCT Sofa/couch 0 6 7 9				11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS UNKNOWN							
12. AGE OF VICTIM 9 9 9			13. SEX (Use numerical code) MALE .1 FEMALE .2 UNKNOWN .3 9			14. DISPOSITION No Injury 0			15. INJURY DIAGNOSIS No Injury 7 0		
16. BODY PART No Injury 9 9			17. RESPONDENT(S) (Mother, Friend) Deputy fire chief 3			18. TYPE INVESTIGATION ON SITE 1 TELEPHONE 2 2 OTHER 3			19. TIME SPENT 0 6 0		
20. ATTACHMENTS Fire Report 1			21. CASE SOURCE Newspaper 0 5			22. REVIEWED BY 8 3 4 2 YR MO DAY 9 5 1 2 1 1					
23. PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME <input type="checkbox"/> CPSC MAY NOT DISCLOSE MY NAME <input checked="" type="checkbox"/>											
24. NARRATIVE (See Instructions on Other Side)						25. REGIONAL OFFICE DIRECTOR REVIEW DATE 12-12-96					
<p><i>Need date record sheet.</i></p>											
(USE OTHER SIDE AND ADDITIONAL SHEETS IF NECESSARY)											

951006HCC1003

NOTE : The respondent is the deputy fire chief. The sofa involved was reportedly consumed by the fire as was most of the living room furniture in this apartment. There is no telephone listing for the tenants and no response was received to a letter mailed to the address. The deputy fire chief stated that the tenants were forced to stay with relatives or placed into other city owned housing as a result of the incident and no longer reside at this apartment.

PRE INCIDENT

Per deputy fire chief the third floor apartment was occupied by a female child, age 9 years, and her grandmother. The circumstances of this living relationship is not known but they resided in a third floor two bedroom apartment in an apartment complex operated by the city housing authority for welfare* and low income families.

The apartment was located in building #2, a three story brick apartment building of about 15 units. The complex has 6 buildings per deputy fire chief. Per deputy fire chief there have been other fire calls to the complex in the past but none to this particular apartment to his knowledge.

At approximately 5:30 P.M. on the day of the incident the 9 year old female obtained a book of matches her grandmother had apparently left out on a table and began playing with the matches next to the sofa in the living room. While playing with the matches the female set fire to the sofa.

INCIDENT

A 9 year old female was playing with book matches in the living room of her apartment when she ignited the sofa.

POST INCIDENT

The 9 year old and her grandmother attempted to extinguish the flames but to no avail. A thick black acrid smoke was generated which activated the smoke detector in the apartment. The grandmother and tenants dialed 911 for the fire department.

Per deputy fire chief the fire was extinguished in about 15 minutes after arrival but not before it had consumed most of the sofa and other pieces of furniture in the living room. The 9 year old child admitted playing with matches and igniting the sofa.

No injuries resulted from the incident and the grandmother and child were forced to seek shelter with relatives or placed in a temporary shelter by a relief organization. Per deputy fire chief he does not know the whereabouts of the child or grandmother at this time. The sofa and the other fire and smoke' damaged furniture in the apartment living room was discarded per deputy fire chief.

PRODUCT IDENTIFICATION

Per deputy fire chief the sofa was consumed by the fire except for pieces of wood frame. No identification is known. He related that the furniture appeared to be an older style and was not an expensive brand. He stated that it may have been second hand or purchased at a salvage dealer. He related that the tenants in the city housing authority complex do not usually have expensive furniture and most of it is second hand or purchased at salvage dealers and discounters.

STANDARDS

It is not known whether the sofa complied with any standards.

EXHIBITS

Exhibits A1/A3: Fire Reports

ASBURY PARK FIRE DEPARTMENT
BUREAU OF FIRE PREVENTION

800 MAIN STREET
ASBURY PARK, NEW JERSEY
077124987

INVESTIGATION REPORT

DATE OF: ALARM 7/31/95 TIME/ALARM 17.54 DATE/INVEST 7/31/95

LOCATION OF FIRE [REDACTED] # 15

TYPE OF FIRE Structure

OWNER [REDACTED] PHONE [REDACTED]

OWNER ADDRESS [REDACTED]

TENANT (IF APPLICABLE) [REDACTED] PHONE [REDACTED]

ALARM REPORTED BY 911

TOUR ON DUTY #3 & #4 FIRE OFFICER IN CHARGE Weldon

WEATHER Sunny/Clear 90 WIND DIR / SPEED

CAUSE OF FIRE Child Ignited sofa

POINT OR POINTS OF ORIGIN Level 3 Apt. # 15 Living room north side (sofa)

WERE PHOTOS TAKEN BY NO W H O M

TYPE OF CONSTRUCTION Ordinary Construction

ELECTRIC STATUS ok GAS STATUS ok HEAT SYSTEM n/a

SMOKE DET. INSTALLED yes SMOKE DET. ACTIVATED yes

SPRINKLER INSTALLED SPRINKLER ACTIVATED ED

DID FIRE DEPT. FORCE ENTRY no WHERE RE

WAS BUILDING FOUND OPEN yes WHERE front door

DESCRIPTION OF EVIDENCE , -

CUSTODY OF EVIDENCE n/a

PERSONS INJURED 1 PERSONS KILLED 0

INV. RESP Smith, Hurden P.O. RESP. Moore

REPORT COMPLETED BY James Y. Bane DATE 8-1-95

951006HCC1003

EXHIBIT A1

951006 HCC 1003

Alarm No. 2 Dispatcher K. ROBINSON Date 7-31-95

Location of Alarm BOSTON WAY BLDG 2 Apt. No. _____

Time of Alarm 17:54 10 - 9 17:57 Return 19:09

Received by: Telephone α Central Station _____ Police _____ Other _____

Type of Alarm: Still ✓ Single _____ Truck _____ Investigation _____

Apparatus Responding: Eng. α Truck 2 E.M.S. 2 #802 _____

Recall: _____ Time of Recall _____

Mutual _____ Aid _____ Time Summoned _____

Outside Departments _____

Tenant _____ Apt. # 15

Owner _____

Address _____

Classification of Alarms: (check one)

1. Fire in building ✓ Fire/brush or grass _____
Fire in dumpster _____ Other/outdoor _____

2. Vehicle: Auto _____ Truck _____ Bus _____ Other _____

Owner of vehicle _____

Address _____

License No. _____ Make _____ Year _____

Area of origin LIVING ROOM

Ignition source Matches

Suspicious: Yes _____ No ✓

Extent of fire Living Room

3. Alarm/no fire: Accidental Alarm, _____ False Alarm _____

Remarks _____

4. Emergency Rescue: Elevator _____ Water _____

Auto _____ Other _____

Remarks _____

5. Public Assistance:

Nature of service rendered _____

EXHIBIT A2

A. Usage: Single family Multiple dwelling High Rise
Shelter care Rooming & Boarding Commercial
Professional Warehouse Other

Equipment/Extinguishment:

Lines used: Booster 1 1/2 2 1/2 Other

Placement/fireground: 3 floors into through front door up apt. # 15

Foam/type: --- Amount used:

Ladders: Type used ladder to rear of apt - ventilation
Placement/fireground:

Air-Paks: No. used 4 Spare cylinders

Exhaust fans: No. 1 Where apt 14 next to involved apt.

Generator: Floodlights: Water Vacuum:

Salvage covers: No. 4 Where

Other:

Injuries:

Department members None

"Civilian" None

Notification/Outside Agencies:

Electric Co. Gas Co. Water Co. Other

Incident Scene/Officials:

Police: Yes No Name/Badge No.

Chief of Dept. Combustible Inspector

Others

Remarks

SIGNED: Capt. Nelson

EXHIBIT A3

95 1006 HCC 1003

Good Category *Bill Robinson gm*
N/A

ACCIDENT INVESTIGATION REQUEST FORM

10/12/95

Document Number N580523B
Date of Incident 7/31/95 Category I.D BUNN251995
Follow-Up Requested Hazard Analysis & Action 15
Type Follow-Up Requested Telephone Call On-Site
Headquarters Contact Kimberly Lona (301) 504 -0470 Ext 1269
Backup - Linda Smith (301) 504-0470 Ext. 1275

Assignment Message

Conduct a investigation of this case caused by a child playing with matches that ignited a couch. Find out what part of the furniture ignited (if possible). If second hand furniture, find out how long in possession.

If furniture still available, conduct an on-site investigation and collect sample, following page 9 of guideline for sample collection.

Describe incident scenario; photograph and identify manufacturer, model number and brand name of all products involved. **Please obtain fire incident report, medical insurance, and any other report of incident. Complete Data Record Sheet in guideline.**

Person(s) to Contact Fire Department, Ocean Grove, NJ and Local Officials

Guideline Number 19 Upholstered Furniture Fires

Requested By Kimberly Long

Task Number 951006 HCC-1003

Assigned to NYCC

Date 9/6/95 gm

AUG 31 1995

N58-0523A/B/C

TIMES
OCEAN GROVE, NJ
UEEJCLY 7.200

7/31/95

AUG 3 1335

NEW JERSEY CLIPPING SERVICE

Fires Cause Two Deaths

Asbury Park - Three fires occurred in the city over the last week. The most recent incident was the most damaging and tragic taking place on Monday at 511 Fourth Avenue, where two young boys were found dead of smoke inhalation. Firefighters reported that Monday's fire was probably due to careless smoking with evidence of a lighted cigarette on a mattress on the third floor where the fire started. The fire was reported just before 8 a.m. The mother of the two boys, Cynthia Wright, heard the screams from her children but was unable to reach them because of the intense flames. Two other children were unharmed. Other residents of the building escaped injury. Another fire took place on Monday at Boston Way Village. The fire department reported that a child admitted to playing with matches and setting fire to a couch in Apartment 15 of Building Two. The girl and her grandmother tried to put out the flames, but the fire department had to respond, extinguishing the blaze within fifteen minutes. No physical injuries were reported.

On Wednesday last week, a two-story house at 1117 Summerfield Avenue was engulfed by flames. It was suspected that a short circuit in an extension cord being used for a refrigerator caused the fire. The fire was reported about noon and all persons were removed from the premises. Two families were living at the location and had to be relocated.

B

X

X

951006 HCC 100 3

24 JAN 1996

1 Case Number 951006HCC1005		2 Investigator ID 8 9 9 5		3 Office Code 8 0 0		EPIDEMIOLOGIC INVESTIGATION REPORT	
4 Accident date 9 5 0 5 1 0		5 ID1 initiated 9 5 1 0 3 8					
6 Synopsis of Accident or complaint A three year old female died in a house fire that was caused by her playing with a disposable cigarette lighter. Victim's parents were home at the time but the father's attempts to rescue victim were unsuccessful.							
7 Location Home (bedroom) 10				8 city Buffalo		9 State NY	
10a First Product Disposable Lighter 16 0 4				11a Trade/Brand name/Model Unknown			
10b Second Product Curtains 0 617				11b Trade/Brand name/Model Unknown			
12 Age of Victim 0 0'3		13 Sex F 2		14 Disposition Died in Hospital 8		15 Injury diagnosis Burns 5 1	
16 Body part All Parts 8 5		17 Respondents Fire Investigator 3		18 Investigation type Other 3		19 Time spent 1 0 . 0	
20 Attachments Documents 2		21 Case Source MECAP 12		22 Reviewed by/Date 8 9 6 9 01/18/96			
23 Permission to disclose names (Non-NEISS cases only) <input type="checkbox"/> CPSC may disclose my name <input checked="" type="checkbox"/> CPSC may not disclose my name							
24 Narrative See attached narrative.				25 Regional Director review date 1-19-96			

need data
need
Sheet.

PRE-INCIDENT

This investigation was initiated as a result of a **MECAP** report that was submitted to CPSC. This incident involved the death of a three **year old female** in a house fire that decedent **started** with a cigarette lighter. All information contained in this report was obtained through a review of the Erie County Medical Examiner, Buffalo, NY records, the Fire Department, Buffalo, NY records and-an interview of the local fire investigator. Next of kin was not contacted per the local medical examiner's advise. The following documents are appended as attachments: Autopsy Report, 'Attachment 1; Death Report, Attachment 2; Fire Record, Attachment 3; and the Fire **Investigation** Report, Attachment 4.

The autopsy **report reflects** victim was a **well** nourished, well developed three year old Hispanic female measuring 38 **inches** and having a scale weight of 39 pounds.

This incident occurred in a 2 **1/2** story wood constructed building. The building contained both residential and commercial space. The incident occurred on the first floor. The **fire** investigation report reflects victim had a history of playing with cigarette lighters. Both parents were smokers.

On the day of incident, 10 May 95, victim and her six and seven year old sisters were playing in the front bedroom. Other persons present in the residence at the time of incident were **victim's** 44 year old father, 32 year old mother and a male family friend. The three adults were in the kitchen getting ready to play a game of dominos. The kitchen **was located** approximately 24 feet from the bedroom in which the fire originated.

INCIDENT

At approximately **6:50PM**, the seven year old alerted her father that the bedroom was on fire. The **fire** investigation report reflects alarm time as **6:54PM**. All three girls had gone to an inner bedroom that was located off the room of origin. The family friend ran from the kitchen, through the living room, to the doorway of the room of origin. By this time, two of the girls had **ran** past the fire and the family friend grabbed them and removed them to the exterior of the residence. Victim remained in the inner bedroom.

POST-INCIDENT

The father, in an attempt to rescue victim, ran up on the porch and broke the two windows of the inner bedroom in which victim was located. The net result of that action allowed air to enter the inner bedroom and the room flashed into flames. After the fire was extinguished by the fire department victim was found across a bed in the inner bedroom. Victim sustained second and

third degree burns over 80% of her body. Victim was transported to a local children's hospital. The Death Report Sheet reflects victim expired on 11 May 95 at **9:20PM**. The Autopsy Report reflects cause of death as smoke inhalation due to thermal injuries.

The Fire Investigation Report reflects two fires were started in the building's lower front bedroom; first curtains that were hung at the window on the east wall, north corner, and second was a sofa that was located on the north wall, east corner by victim (see diagram in Attachment 4). Victim was playing with a cigarette lighter. The Fire Record reflects total damage as \$60,000, \$40,000 damage to the building and \$20,000 damage to its contents.

PRODUCT IDENTIFICATION

During an interview of the local fire investigator, it was determined that the involved cigarette lighter was destroyed in the fire. The local cause and origin investigation by the fire department was unable to determine if **the** involved-cigarette lighter was child proof or not.

SAFETY STANDARDS

Effective 12 July 94, pursuant to 16 CFR, part 1210, all disposable and novelty lighters manufactured or imported are subject to the standard's provisions resistant to successful operation by children younger than 5 years of age.

ATTACHMENTS

1. Erie County Medical Examiners Office, Buffalo, NY, Autopsy Report, Case #ME 412-95 (4 pages).
2. Erie County Medical Examiners Office, Buffalo, NY, Death Report Sheet, Case **#412-95**.
3. Fire Department, Buffalo, NY, Fire Record, Incident **#05-0895**.
4. City of Buffalo, NY-Bureau of Fire Prevention-Investigator's Fire Report, Incident **#895** (2 pages).

G.P.H. Cahen

*Pinheiro
10/12 N*

gm

ACCIDENT INVESTIGATION REQUEST FORM

Document Number X582693

Date of incident 5/10/95 Category I.D BUNN251995

Follow-Up Requested _____ Hazard Analysis Section 15

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

Headquarters Contact Kimberly Long (301) 504 -0470 Ext 1269
Backup - Linda Smith (301) 504-0470 Ext. 1275

Assignment Message

Conduct a investigation of this case where a 3 year old female died in a house fire caused by a child playing with a cigarette lighter on the couch. Find out what part of the furniture ignited (if possible). If second hand furniture, find out how long in possession. If furniture still available, collect sample, following page 9 of guideline for sample collection'

Describe incident scenario; photograph and identify manufacturer, model number and brand name of all products involved. **Please obtain fire incident report, medical insurance, and any other report of incident. Complete Data Record Sheet in guideline.**

Person(s) to Contact Fire Department, Erie County in Buffalo, NY and Local
Officials **DO NOT CONTACT NEXT OF KIN UNLESS OK BY CME**

Guideline Number 19 Upholstered Furniture Fires

Requested By Kimberly Lona

Task Number 951006 HCC 1005

Assigned to NYCO

Date 10/12/95 *Ch*

TC-32 S:49 X582693
AUG 30 1995

MEDICAL EXAMINER'S/CORONER'S REPORTING FORM

To report a case by telephone, call (toll free) 1-800-638-8095. Say "THIS IS A MECAP REPORT." You will then be placed in-contact with the MECAP Project Manager, who will ask for the information noted below.

Date of accident 5/10/95 Date of Death 5/11/95

Type of consumer product involved lighter, cou ch

Manufacturer, Model, Brand name, and Serial No. of product _____

Is product available for examination? Yes No. If Yes, where? _____

Cause of Death: Smoke inhalation due to thermal injuries

Location of Accident: City Buffalo State _____

Brief description of accident sequence: (Please include the AGE and SEX of VICTIM (S))

3 yof died in a house fire at her home
Playing with a lighter in her room caught
a ~~so~~ couch on fire.

Contact Information: Please include the name, address and telephone number of any state/local personnel who investigated the accident.

Medical Examiner's/Coroner's Case No. 412-95 Telephone No. 716-898-314

Reporter's Name Nicholas Salenardo Date Reported 8/22/95

Reporter's Off- (incl. city, county, & state) Erie Co., Buffalo, NY

Medical Examiner's/Coroner's Name Justin Akw, MD, CME

For processing at CPSC: Report received by: SU2

Chief Med. Exam. Rpt () Copy for MECAP News ()
Regular MECAP () Document No. _____

95/106 HCC/105

ATTACHMENT 1
951006 HCC 1005
DRP 2-10-95
PAGE 1 OF 4 PAGES

ERIE COUNTY MEDICAL EXAMINERS OFFICE

PATHOLOGICAL EXAMINATION

████████████████████
Case #ME 412-95

Female - Hispanic. - 3 years

Autopsy performed .by Dr. **Fazlollah** Loghmanee, Associate Chief Medical Examiner at the Erie County Medical Examiners Office on May 12, 1995.

The autopsy is requested by Dr. Sung - ook Baik, Associate Chief Medical Examiner.

EXTERNAL EXAMINATION:

The body is that of a 3 year old Hispanic female measuring 38 inches and having a scale weight of 3'9 lbs. This is a well developed, well nourished, generally edematous and about 80% second and third degree burn with' & pigmentation. The scalp **is covered by black** straight medium length hair. The face shows total second degree burn. The **irides** are brown and **corneae is** cloudy. The desidual teeth are intact in the oral **cavity**. The lips are markedly swollen. The chest is symmetrical. The IV's are attached to the left and right adrenal **area**. The fingertips **are** showing brownish parchment and mummification **changes**. The external genitalia is that of female and the back of the body shows some intact skin. The rigor mortis is full.

INTERNAL EXAMINATION:

The body is opened by the usual Y shaped **incision**. The panniculus adiposus measures 2.0 cm with marked subcutaneous edema. The abdominal cavity shows an estimated 500 cc of acidic fluid. The cerosal lining is markedly **swollen and** pale. The pleural cavities also shows some excess fluid, estimated 200 cc on each side.

HEAD AND NECK:

The scalp is carefully reflected and the skull bones are intact. The dura leptomeninges shows no hemorrhages. The brain weighs 1150 grams. Multiple cross sections **shows** minimal edema and prominence of white matter. Vasculature is

[REDACTED]
Case #ME 412-95

PAGE TWO

CARDIOVASCULAR SYSTEM:

The heart weighs 100 grams and multiple cross sections of the myocardium **shows** no abnormality. The coronaries are intact. The cardiac chambers are rather dilated and congested. The major vessels are showing formed blood.

RESPIRATORY SYSTEM:

The tracheobronchial tree shows soot staining and some edema and some inflammation. The secondary and tertiary branches are plugged by **mucinous** material and some yellowish discoloration. The left lung and right lungs each weigh 100 grams. The cross sections show atelectasis as well as swelling and congestion.

DIGESTIVE SYSTEM:

The esophagus is intact and the stomach contains a **minimal** amount of brownish fluid. The rest of the intestinal tract shows serosal swelling and some mucosal swelling. The mucosal lining of the stomach shows parallel linear round hemorrhagic spots, naso gastric tube impression).

HEPATOBIILIARY SYSTEM:

The liver weighs 475 grams and congested. The gallbladder contains fluid bile and biliary system patent.

PANCREAS:

This organ is swollen on the **peri-pancreatic** soft tissue.

HEMOLYMPHATIC SYSTEM:

The spleen weighs 75 grams and is congested. White pulps are present.

URINARY SYSTEM:

The left and right kidneys are equal-in size. Each weighs 50 grams. **Peri-renal** fat is markedly edematous. The **kidneys** show swelling. The ureter is patent into the bladder which has a Foley catheter.

3 years

951006HCL 1005

PAGE 3 OF 4 PAGES

ERIE COUNTY MEDICAL EXAMINER'S OFFICE
FORENSIC TOXICOLOGY LABORATORY
462 Grider Street
Buffalo, New York 14215
Telephone: (716) 898-3821

PATIENTS NAME: ~~XXXXXXXXXXXXXXXXXXXX~~ SERIAL# T 95-333
ME 412-95

REQUESTED BY: Drs. Loghmanee/Baik DATE: . 5-12-95

INSTITUTION: Medical Examiner's Office

MATERIAL FOR EXAMINATION: Blood

ANALYSIS REQUESTED: Toxicological Examination

RESULTS:

Blood:

Carbon monoxide - none detected.

DR Robert J Osiewicz
Robert J. Osiewicz, Ph.D.
Chief County Toxicologist

DATE COMPLETED: May 16, 1995

~~XXXXXXXXXXXXXXXXXXXX~~
Case #ME 412-95

PAGE THREE

ENDOCRINE SYSTEM:

The pituitary, left and right lobes of thyroid and left and right adrenal glands shows no gross abnormality.

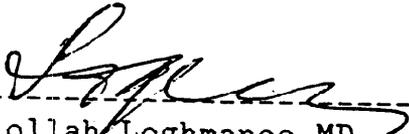
LABORATORY DATA:

One sample of blood is submitted for carbon monoxide.

ANATOMICAL FINDINGS:

1. Presence of soot in the tracheobronchial tree.
2. Bronchopneumonia.
3. Aspiration of some material.
4. Mucous plugging of the secondary branches of the bronchial tree.
5. Congestion of organs.
6. More than 80% second and third degree burn.
7. Generalized swelling and edema.

CAUSE OF DEATH: Smoke inhalation due to thermal injuries.


-----MD
Fazlollah Loghmanee MD
Associate Chief Medical Examiner

FL:lb

Case # 412 - 95

951006HCL1005 ATTACHMENT 2
DRP 1-10-96

Reported by: CHILDRENS ICU Phone: _____

Name: KURT VONFRICKEN

Date: 5/11/95

Time call received: 9:35 am/pm

Medical Examiner: Dr. BAIK

Time referred to ME: am/pm

Viewed at scene: yes/no

Time wagon called: _____ am / pm

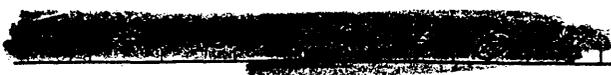
Time wagon arrived at morgue: _____ am/pm

Name of Deceased:



First

MI



Last

Date of birth: 7/3/91 or app. age: ? Date & Time of death / found: 5/11 @ 9:20 am/pm

Sex: Male Female Race: White Black Hispanic Other

Address: _____ City/Town: BUFFALO State NY Zip: 14

Place of Death: CHILDRENS HOSPITAL

Private residence: Hospital: DOA Nursing Home: Street/Road: Other: _____

Apartment: ER Date / time admitted: 5/10/95 at 8:00 am/pm

Up Down
Front Rear

Inpatient Medical Record # 002006035

City Town Village BUFFALO County: (Erie) Niagara Cattaraugus Chautaugua Other

Case History: VICTIM OF HOUSE FIRE ON 5/10/95 - 90%

BODY BURN + INHALATION INJURY - (6:53pm)

FIRE DISPATCH NOTIFIED

BPD HOMICIDE NOTIFIED

Medication / other: _____

Position of body: Face up Face Down Unknown

Condition of body: Fresh Decomposed Embalmed Burnt

Motor Vehicle Info. Driver Passenger Pedestrian Belted: yes / no

Type of vehicle: Car Truck Motorcycle Semi-truck Boat Farm equip: Other

Injury information: Date injured: 5/10/95 Time: _____ am / pm

Place: HOUSE - HOUSE FIRE at Work? yes (no)

Case refused

By whom: Med. Examiner Morgue Keeper

Reason for refusal: _____

Physician who will issue Death Certificate: _____

Place of issue or phone number: _____

Cause of Death: _____

Report taken by Brunner

Case # 412 - 95

Deceased's last name: SANTIAGO

BUFFALO, NEW YORK
FIRE DEPARTMENT

INCIDENT # 05-0895

ATTACHMENT 3

951006HCC 1005

F33

Rev. 4/94

BUREAU OF FIRE PREVENTION - FIRE RECORD

DRP
1-10-96

Batt. Dist.	Time	Day of Week	Month	Day	Year
B44	1854	Wednesday	May	10	1995
Address			Occupants Unknown		
Owner			Address of Owner		
					14213
Property Classification	Construction	No. of Stories	Area of Origin		
Dwlg.	Frame	2½	Living room (1st fl)		
Mobile	Yr.	Make	Model	License No.	
Damage: Property	Building:	Contents:	Smoke Detectors: (Y) (N) Activate (Y) (N)		
\$60,000	\$40,000	\$20,000	Yes Yes		
Officer in Charge	Member Making Report	Eng. Co. Platoon			
B44 Mehlretter	BA/JM	37 ?nd			
Name of Injured	Name and Address of Killed				

STATEMENT OF INJURY

[REDACTED] (3 YRS) DIED 6-11-95

CAUSE: CHILDREN WITH MATCHES!!

ATTACHMENT 4
951006 HCC 1005

FATAL

207

F7A DRP 1-10-96
(Revised 3/90) PAGE 1 OF 2 PAGES

CITY OF BUFFALO - BUREAU OF FIRE INVESTIGATION
INVESTIGATOR'S FIRE REPORT

RAINY

1. Location 342 NORMAL		2. Inc.# 895	3. Box # 296	4. File # 9	5. CD 699-276	6. Date 5-10-95	7. Time 1854
8. Companies Responded 37, 2, A, 16 F.F.C			9. 1st Company at Scene E-37		10. 1st Officer at Scene LT. ANGRISANO		
11. Other Units Responded R-1 F-10, 11, 1C			12. B-56 BUNKERS	13. B-4-4 MENTRETTED	14. Building Type COTM / RESID	15. Const. Type WOOD	
16. Stories 2 1/2	17. Building Use STORE / RESID.	18. How Extinguished 4 134	19. Damage Bldg. 40, 000 ^{EE}	20. Damage Conts. 20, 000 ^{EE}	21. Detectors YES	22. Operable NO	
23. Other Alarm		24. Operable	25. Other Exposure F 1,000.00 - BLDG 21,000.00 CONTS		26. Other Exposure		
27. Fire Discovered By [REDACTED]			28. Address # 1 (LOWER)		29. Telephone [REDACTED]		
30. Fire Reported By # 27			31. Address # 1		32. Telephone [REDACTED]		
33. Occupant [REDACTED] + 27			34. Address # 1		35. Telephone [REDACTED]		
36. Contact Person			37. Address		38. Telephone		
39. Owner [REDACTED]			40. Address [REDACTED]		41. Telephone [REDACTED]		
42. Insurance Company N.Y. MUTUAL			43. Address		44. Telephone		
45. Bldg. Ins. 900,000	46. Cont. Ins. 35,000	47. Other Ins.	48. Mortgage (Bank)	49. Mort. Bal.	50. Mort. Arrears	51. Tax Arrears	
52. Cause CAUSE W/ LIGHTER	53. Point of Origin BED ROOM #1 EAST (NORTH) WINDOW (2) NORTH EAST WALL		54. Extension CONFINE		55. Status	56. B.P.D. Assigned	
57. Evidence Samples Taken 100 SS		58. By Whom		59. Location			
60. Control Samples Taken		61. By Whom		62. Location			
63. Other Evidence Taken		64. By Whom		65. Location			
66. Photographer BPD		67. Interior Photos		68. Exterior Photos		69. Building Security THLMO TIPR ZENDEBT	
70. Heating Unit Type ELECTRIC BASE BOARD		71. Condition OK		72. Electrical Type CIRCUITS		73. Condition OK	
74. Appliance Type		75. Condition		76. Other Utilities		77. Condition	
78. Vehicle Make		79. Year	80. Lic. No.	81. Condition	82. Evidence of Stripping		
83. Witness			84. Address			85. Telephone	
86. Narrative 2 Fires were started in lower front bedroom-1st-curtains that were hung at window on east wall-north corner-2nd was a sofa that was located on the north wall-east corner by [REDACTED] who was playing with a cigarette lighter. Two other children in the room of origin, escaped unharmed. [REDACTED] of [REDACTED] St. reports that he and [REDACTED] were about to play dominos when [REDACTED] came in from work. All three were in kitchen area. The children were playing in the front bedroom area. [REDACTED]							
87. Investigator's Name(s)				88. Date	89. Reviewed By (over)		

89

DEC 1995

1. CASE NO. 951020HCC2010		2. INVESTIGATOR'S ID 8 9 1 9		3. OFFICE CODE 8 3 0		EPIDEMIOLOGIC INVESTIGATION REPORT
4. DATE OF ACCIDENT YR MO DAY 0 8 2 8 9 5		5. DATE INVESTIGATION INITIATED YR MO DAY 9 5 1 1 0 1				

6. SYNOPSIS OF ACCIDENT OR COMPLAINT On August 28, 1995 an-8 year old boy intentionally set fire to a sleeper couch in the living room of his home with a cigarette lighter after being prompted to do so by another sibling. Five fan units in operation in the home at the time aided the spread of fire to other parts of the home. A 5 year old child was accidentally left behind in the rush to exit the home. The official cause of death was asphyxiation due to fire inhalation.

7. LOCATION (Home, school, etc.) Home	8. CITY Peoria	9. STATE Illinois
--	-------------------	----------------------

10A. FIRST PRODUCT Upholstered- Sofa	11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Unknown
---	--

10B. SECOND PRODUCT Cigarette Lighter	11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Unknown
--	--

12. AGE OF VICTIM 0 0 5	13. SEX (Use numerical code) MALE -1 FEMALE -2 UNKNOWN -3 2	14. DISPOSITION Fatality	15. INJURY DIAGNOSIS Anoxia
----------------------------	---	-----------------------------	--------------------------------

16. BODY PART All	17. RESPONDENT(S) (Mother, Friend) Fire Captain	18. TYPE INVESTIGATION ON SITE 1 TELEPHONE 2 OTHER 3 2	19. TIME SPENT 4 0
----------------------	--	--	-----------------------

20. ATTACHMENTS Multi	21. CASE SOURCE Newsclip	22. REVIEWED BY 8 1 3 0	YR MO DAY 9 5 1 1 2 8
--------------------------	-----------------------------	----------------------------	--------------------------

23. PERMISSION TO DISCLOSE NAMES (NON-WEISS CASES ONLY)	CPSC MAY DISCLOSE MY NAME <input type="checkbox"/>	CPSC MAY NOT DISCLOSE MY NAME <input checked="" type="checkbox"/>
--	--	---

24. NARRATIVE (See instructions on Other Side)	25. REGIONAL OFFICE DIRECTOR REVIEW DATE
--	---

(USE OTHER SIDE AND ADDITIONAL SHEETS IF NECESSARY)

951020HCC2010

SYNOPSIS:

On August 28, 1995 an 8 year old boy intentionally set a sleeper couch located in the living room of his home on fire with a cigarette lighter after being prompted to do so by another sibling. Five fan units were in operation in the living room at the time which blew burning particles from the couch into other areas of the home; rapidly spreading the fire.

Two adults and four children fled the fire safely, however a 5 year old girl was accidentally left behind in the rush to exit the burning house. She died of asphyxiation due to fire inhalation.

SUMMARY:

This **IDI** was initiated by a **newsclip** (Attachment 1). Information contained in this report was obtained from the Peoria County Coroner's Inquest Report (Attachment 2), and from interviews with a Captain of the Peoria, IL Fire Department, and the Peoria Police Department.

'According to the captain of the Peoria Fire Department, the home involved in this incident was an old, bi-level wood frame home that was in poor repair. He said the first level consisted of four rooms, including the living room and that the second level was a partially finished attic.

The fire captain stated that seven people occupied the home including an **"older"** female and male along with five children. He said the children ranged from **2-10** in age and that they were the grandchildren of the female homeowner. He said the **grandmother had** taken custody of the children due to family problems in an attempt to keep the family together.

'The fire captain stated that the first level of the home contained three couches, one in the living room, and two in other adjoining rooms. He stated that after the fire it was discovered that the couch where the fire originated was an **"old, large couch"** with hideaway bed inside. He said that the couch was totally consumed by fire and that the only thing left was the couch's metal frame. The fire chief stated that another couch was located in a room just off the side of the living room. He said that at the time of this fire, the homeowner (grandmother of children) and her 5 year old granddaughter were asleep on this couch when the fire started. He stated that the doorway leading to this room was extra wide (approximately 7 feet) and had **"double doors"** leading into the room. He said the doors were opened and that this **couch** was placed in front of the doorway, blocking the entrance, and leaving an approximately **14"** space for people to enter and exit the room: (No photos or internal diagrams of the edifice involved in this fire were on file at the fire department.)

ACCIDENT INVESTIGATION REQUEST FORM

Document Number G5A0035 A
Date of Incident 9/28/95 Category I.D BUNN251995
Follow-Up Requested Hazard Analysis X Section 15
Type Follow-Up Requested Telephone Call _____ On-Site _____
Headquarters Contact Kimberly Lona (301) 504 -0470 Ext 1269.
Backup - Linda Smith (301) 504-0470 Ext. 1275

Assignment Message

Conduct a investigation of this case caused by a child playing with a cigarette lighter that ignited a couch. Find out what part of the furniture ignited (if possible). If second hand furniture, find out how long in possession. If furniture still available, collect sample, following page 9 of guideline for sample collection.

Describe incident scenario; photograph and identify manufacturer, model number and brand name of all products involved. Please obtain fire incident report, medical insurance, and any other report of incident. Complete Data Record Sheet in guideline.

Person(s) to Contact Peoria, IL Fire Officials and Local Officials

Guideline Number 19 Upholstered Furniture Fires

Requested By Kimberly Lona

Task Number 951020HCC2010

Assigned to CH10

Date 10/20/95

951020 HEC 2010

TC 20

OCT 12 1995

G5 A0035

AUG 30 1995

Peoria
Journal Star
93,638

□ Family apparently tied to extinguish couch, waited 5 minutes before calling for help

By CHRISTOPHER R. WILLIAMS
of the Journal Star

PEORIA — Poor judgment and chaos may have caused relatives to overlook 5-year-old

Monday night as she perished behind a sofa in her home at a fire investigator said.

was pronounced dead at 10:10 p.m. inside the home by Peoria County Deputy Coroner Dan Heinz. A preliminary cause of death was smoke inhalation, Heinz said.

An 8-year-old child playing with a cigarette lighter accidentally set the living room on

fire, Fire Investigator Capt. Ray Russell said.

The home, owned by [redacted], [redacted]'s grandmother, suffered \$30,000 damages and was ruled a total loss, Russell said.

[redacted]'s body was found behind a sofa near a melted toy fire truck, Russell said.

"Five window fans were going full speed inside the how and may have spread

the fire to a foam-rubber sofa (and) throughout the home," Russell said.

Russell reported his investigation revealed two adults inside the home tried to douse the sofa with water and remove it from the home before calling the fire department.

It appears the sparks were blown by the fans and caught the living room on fire, Russell said "It was so much confusion inside the home, they did

not get a chance to check to see if everyone made it out safely," Russell said.

[redacted]'s mother [redacted] and three other children escaped without injury, fire officials said.

Twenty city firefighters arrived within three minutes and found flames coming from the front windows. The firefighters were able to bring the blaze under control in 20 minutes, Russell said.

"They waited about five minutes between the child starting the fire and trying to call the fire department for help," Russell said. "The fire had a good jump on us." Investigators could not find any smoke detectors inside the home, Russell said.

The family lost everything in the fire, Russell said. The American Red Cross was assisting the family in getting temporary food, clothing and shelter, a spokeswoman said.

951020 HEC 2010

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AUG 29 1995

Peoria
Journal Star *ILL*

POLICE, FIRE & COURTS

159c
Girl, 4 killed guttled
in house fire

PEORIA — A 4-year-old girl died when a fire believed to have been started by children playing with matches swept through a house at 1910 S. Stanley about 9:30 p.m. Monday.

Identification of the victim had not been released by the Peoria County coroner's office late Monday. There were no other injuries.

Peoria Fire Chief Ernie Russell said preliminary investigation revealed there were six or seven people, including two adults, in the home when the fire started. He said authorities believed the fire was caused by children playing with matches.

Firefighters found the 4-year-old behind a couch on the first floor of the house. All others in the house were accounted for, Russell said. Peoria Police Capt. John Stenson said there were no smoke detectors in the house.

Russell said a fire house was nearby and he did not believe it took firefighters more than three minutes to reach the scene. The call was believed to have come from a neighbor across the street.

Witnesses at the scene said the home was nearly engulfed when firefighters arrived. While the walls of the house were still standing, the interior was

SENDING ID: FPEJW
WALTON.JOANN

FIRE INCIDENT REPORTING SYSTEM
FIRE INCIDENT INFORMATION

TERMINAL:
DATE: 11/20/95 15:13:27

INCIDENT NO.: 95 005884 EXP NO: 00 DATE: 082995 DAY #: 2 ALARM TIME: 213027
MAP NUMBER...: 0000408 SHIFT.: 1 ARRIVE/IN-SERVICE TIME....: 213510 011007
DISPATCH ADDR: ██████████ ST PA
ACTUAL ADDR...: ██████████ ST PA 61605
TOT EXPOSURES: 0 TOT CIV-CAS THIS EXP: 0 TOT FIR-SERV-CAS THIS EXP: 0

SITUATION FOUND: 11 STRUCTURE FIRE ACTION TAKEN ...: 1 EXTINGUISHMENT
MUTUAL AID R/G :
FIXED PROPERTY : 411 ONE FAMILY DWELLING Y IGN FACTOR: 36 CHILDREN WITH...
CENSUS TRACT...: 100
OCCUPANT: ██████████ PHONE.: RMZART:
OWNER: ██████████
OWNER ADDRESS...: ██████████ ST
OWNER CITY/ST...: PEORIA, IL ZIP : 61605 PHONE:
METHOD ALARM ...: 7 TELEPHONE TIE LINE ER11
DISTRICT/SHIFT.: 010 1 NUM ALARMS: 2
NUM PERSONNEL ..: 20 NUM ENGINES.....: 4
NUM AERIALS ...: 1 MISC VEHICLES...: 2
INJ, FIRE SERV.: INJ OTHER:
FATAL FIRE SERV: FATAL OTHER: 1
COMPLEX: 41 DWELLING COMPLEX
MOBILE PROPERTY ...:
AREA FIRE ORIGIN ..: 21 SLEEPING ROOM UNDER 5 PEOPLE
EQUIP INVOLVED ...: 98 NO EQUIPMENT INVOLVED
FORM OF HEAT IGN ..: 45 MATCH
TYPE MATERIAL IGN : 71 MAN MADE FABRIC,FIBER
FORM MATERIAL IGN : 97 MULTIPLE FORM OF MATERIAL IGN
METHOD OF EXT: 6 EST VAL (\$):
LEVEL FIRE ORIGIN : 1 GRADE LEVEL TO 9 FT ABOVE GR EST LOSS (\$): 30000

STRUCTURE FIRE

NUMBER STORIES ...: 2 2 STORIES CONST TYPE ...: 6 UNPROTECTED ORDINARY
FLAME/SMOKE DAMAGE: 6 CONFINED TO STRUCTURE OF 6 CONFINED TO STRUCTURE
DETCR/SPRNK PER ..: 8 NO DETECTORS 8 NO EQUIPMENT PRESENT
TYPE MATERIAL GEN : 71 71
AVE SMOKE TRAVEL ..: 5 OPENING IN CONSTRUCTION
FORM MATL GEN SMC : 97 MULTIPLE FORMS OF MATERIAL IGN
MOBILE PROPERTY ...:
MODEL YEAR: MAKE: MODEL:
SERIAL NUMBER: LICENSE NO:
EQUIP INVOLVED ...: 98 NO EQUIPMENT INVOLVED
MODEL YEAR: MAKE: MODEL:
SERIAL NUMBER: VOLTAGE:
OFFICER IN CHARGE : FP0140 MONROE,CLARENCE L
MEMBER MAKING RPT : FP0140 MONROE,CLARENCE L DATE : 082995

951020 HCC 9010

FIRE INCIDENT REPORTING SYSTEM
FIRE INCIDENT INFORMATION

INCIDENT NO.: 95 005824 EXP NO: 00 DATE: 092895 DAY #: 2 ALARM TIME: 213027
----- CIVILIAN CASUALTY INFORMATION -----

CASUALTY NUMBER : 1

CASUALTY NAME : ██████████ DOB/AGE: 999991 4 TIME: 2130
ADDRESS.....: ██████████ S1
PHONE NUMBER ...: ██████████ SEX.....: F
SEVERITY.....: 2 DEATH CAS TYPE : 1 FIRE CASUALTY
AFFILIATION....: 3 CIVILIAN FAMILIAR : 7 OVER 1 YEAR
LOC OF IGNITION: 2 IN SAME ROOM COND BEF : 5 TOO YOUNG TO ACT
COND PREVENT...: 2 FIRE BETWEEN CASUALTY. ACTIVITY : 7 UNABLE TO ACT
CAUSE OF INJ ...: 2 EXPOSED TO FIRE PRODUCT NATURE ...: 1 BURNS AND ASPHYXIA/SMO
BODY PART INJ ..: 8 MULTIPLE PARTS DISPO: 6 DIES
OFFICER IN CHARGE : FP0140 MONROE, CLARENCE L DATE :
MEMBER MAKING RPT : FP0140 MONROE, CLARENCE L DATE : 092995

----- COMMENTS -----

- 1. B E E MAIN FIRE TICKET FOR NARRATIVE
- 2.
- 3.

9510204CC 2010

FIRE INCIDENT REPORTING SYSTEM
FIRE: INCIDENT INFORMATIONINCIDENT NO. 195 005884 EXP NO: 00 DATE: 082895 DAY #: 2 ALARM TIME: 213027
----- NARRATIVE -----

FD RECEIVED SEVERAL CALLS ON THIS FIRE SAYING THAT THE FIRE WAS AT THE BACK OF THIS HOUSE AND THAT THERE WAS BELIEVED TO BE A CHILD TRAPPED INSIDE. IN ROUTE B-1 CALLED FOR AN EXTRA ENGINE COMPANY (E-1). UPON E-4 ARRIVAL ACTING CAPTAIN WOLFMEYER CALLED FOR ANOTHER ENGINE (E-3). E-4 STARTED A DEFENSIVE ATTACK. WHILE ENGINE 2 LAID FROM KRAUSE TO E-4, B-1 ASSUMED COMMAND AND GAVE THE INITIAL REPORT OF A TWO STORY HOUSE FULLY INVOLVED, AND ASKED FOR A 2-1-1 ALARM. E-3 WAS ASSIGNED TO THE REAR ALLEY ALONG WITH T-1. E-1 WAS ASSIGNED THE SECOND FLOOR FOR A HASTY SEARCH. WHILE E-4/E-2 ATTACKED THE MAIN BODY OF FIRE. T-4 SET UP FAN AND ASSISTED IN THE SEARCH. CILCO WAS CALLED TO CUT SERVICE AT THE POLE. GMT WAS ASSIGNED TO THE TASK OF REHAB IN THE PARKING LOT JUST WEST OF THE FIRE OFF OF KRAUSE. F/F NOLAN WHILE SEARCHING FIRST FLOOR FOUND THE CHILD, FOUR YEAR OLD FEMALE, ~~REDACTED~~ ON THE FLOOR P E H I N D A COUCH IN THE

951020HCC 2010

FIRE INCIDENT REPORTING SYSTEM
FIRE INCIDENT INFORMATION

INCIDENT NO.: 95 005884 EXP NO: 00 DATE: 082895 DAY #: 2 ALARM TIME: 213021

NARRATIVE

FRONT LIVING ROOM/BEDROOM OF THE HOUSE. ALL VITAL PERSONNEL WERE NOTIFIED C-1, C-3, POLICE AND CORONERS OFFICE. INVESTIGATION STARTED AS SOON AS THE FIRE WAS KNOCKED DOWN ENOUGH TO CLEAR THE SMOKE FROM THE BUILDING. FAMILY WAS TAKEN TO THE INTERVIEW ROOM AT PPD AND INVESTIGATOR RUSSELL FOUND THAT AN EIGHT YEAR OLD BOY USED A LIGHTER TO SET THE FIRE. THIS EIGHT YEAR OLD BOY HAS A HISTORY OF FIRE SETTING WHICH HE CAUGHT THE SAME HOUSE ON FIRE IN 1992, PER CAPT. RUSSELL.

STANDBY COMPANIES E-15 FROM 0100 HRS TO 0330 HRS
E-3 FROM 0330 HRS TO 0600 HRS
MOVES TO COVER E-1 1 TO STATION 4

***** END OF REPORT *****

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the Coroner's Inquest on the body of



, deceased;

_____, after being duly sworn, testifies as follows:

I - N - D - E - X

DANIEL S. HEINZ 1

DAVID ZACHMAN 3

RAY RUSSELL 7

PHILLIP A. IMMESOETE, M.D AUTOPSY REPORT

TOXICOLOGICAL REPORT

VERDICT

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the **Coroner's** Inquest on the body of

[REDACTED], deceased;

[REDACTED], after being duly sworn, testifies as follows:

CHIEF DEPUTY CORONER DANIEL S. HEINZ:

Okay, Ladies and Gentlemen, this is an Inquest into the death of [REDACTED] age 5, [REDACTED], who was pronounced dead at 10:10 p.m., on August 28th, 1995. The circumstances of her death, we'll learn from the officer and the fireman present to testify. Members of her family are present and I will verify the family history. The purpose of the Coroner's Inquest is to determine only the time, date, place, and manner of death. This is not a criminal nor a civil action. It is the duty of the Coroner's **Jury** to listen to the evidence presented, bring in a Coroner's Verdict just according to the facts that I have mentioned. However, the Jury has a right, if they wish, to make some type of recommendation based on whatever the evidence might show. [REDACTED]'s date of birth is June 4th, 1990, born in Peoria. Her father's name is [REDACTED], mother's name is [REDACTED], --maiden name is [REDACTED]. It was the wish of the family that Simon's Mortuary have charge of the arrangements and burial took place on **September** 1st, 1995, in Lutheran Cemetery, located in Peoria, County and State of Illinois. The -cause----f death by autopsy is suffocation due to inhalation of fire.

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the Coroner's Inquest on the body of

[REDACTED] deceased;
DAVID ZACHMAN, after being duly sworn, testifies as follows:

CORONER continues:

Q. Would you please state your name, occupation and city of residence?

A. David Zachman, I'm a police officer for the City of Peoria and I live in the City of Peoria.

Q. Okay, Officer Zachman, did you receive a call, ah, involving [REDACTED]

A. Yes.

Q. Can you tell the Jury the date, time and place of this call?

A. A call was received at the station at 9:30 p.m. on August 28th that it was, ah, to respond to a fire call at [REDACTED]

Q. Upon your arrival, what did you find at [REDACTED]

A. The front of the house was already engulfed in flames. There was one engine present and there were a number of children that had been in the house that were across the street at another house.

Q. Ah, did or had at this time anybody told you that there might be another person inside the house?

A. Yes, as a matter of fact, when the call was dispatched they said there might be somebody inside and in talking to the kids, we-we-led to believe that there was another child still inside the house.

Q. Did anybody indicate what may have started this fire to you?

A. Ah, not at that time, not 'til later down at the station.

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the Coroner's Inquest on the body of

[REDACTED], deceased;

DAVID ZACHMAN

, after being duly sworn, testifies as follows:

- Q. Was the fire-department actively trying to suppress the fire when you arrived?
- A. Yes, like I said, the first engine was there prior to us 'cause we were on another call and, ah, they were, they were getting water on the front of the building at that time.
- Q. How involved was the fire when you arrived?
- A. Ah, very involved with **the** front of the building. As a matter of fact, when I, when I first pulled up, not knowing the circumstances of the fire, ah, my initial opinion was that it had burned, been burning for some time, which in **fact**, we later found out not to be the 'fact.
- Q. Upon interviewing the people that were in the house, **ah**, was there any indication of alcohol use **or**,--to you that you would have noticed?
- A. Well, I, I didn't interview [REDACTED] I--
- Q. Okay.
- A. **or** [REDACTED] Ah, I talked to both of them outside the house. [REDACTED] was pretty much just sitting around, he had some minor injuries and-was, [REDACTED], I'd dealt with for years. I,--
- Q. Okay. Richard was a friend of [REDACTED], is that right? --- - -
- A. Yes, they lived together.

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the Coroner's Inquest on the body of

[REDACTED] deceased;
DAVID ZACHMAN
[REDACTED], after being duly sworn, testifies as follows:

Q. And he tried to rescue, ah, [REDACTED].

A. Yes, he **was**,--my understanding from the investigators is he was trying to, ah, get the, the initial burning object out of the house. He got stuck in the front door. Due to some house fans that were operating inside, it caused the fire to escalate and he apparently did try to, ah, make sure everybody got out of the house but wasn't successful.

Q. Any questions from the Jury from this witness?

JUROR REED: Whose house was this?

A. [REDACTED]

JUROR REED: [REDACTED] and she's,--

A. She's the grandmother of the little girl. She was in the house but laying down.

JUROR LUETKEMEYER: So that's why she,--they didn't know exactly where she was, as a group or,--

A. Something,--the, the kids, . **once** outside the house and once the emergency people were there, they pretty much said, yeah, she's still in there and we know where she was and where she was laying down, but it's, it's just the way the whole thing got started **and because** of the fans, Mr. Russell can explain that much further and because of the

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the Coroner's Inquest on the body of

[REDACTED], deceased;
RAY RUSSELL, after being duly sworn, testifies as follows:

CORONER continues:

- Q. Would you state your name, occupation and **City of** residence?
- A. My name is Ray Russell, I'm a Captain for the Peoria Fire Department and I am a Fire Investigator and I live in the City of **Peoria**.
- Q. Okay, Ray, ah, did you respond to the scene of this fire?
- A. Yes, I did. Ah, ah, shortly, ah, shortly after the fire was called in, they, ah, they **called** for me and I responded, ah, immediately.
- Q. Upon your investigation, where, where was [REDACTED] actually found in the house?
- A. [REDACTED] was found, ah, in a little room, ah, adjacent to the room that where the fire eventually started, ah, lying down. Ah, it looked, it appeared to me as though she were trying to get to a closet and a closet close by, ah, and that is normal for kids her age to try and find a place to hide for safety; under beds, **in closets** and **things** like that. You know, it appeared that she'd tried to get that, ah, closet.
- Q. Okay. In your investigation, do we know or were you able to determine what was the initial cause of the fire?
- A. Right, we were. Ah, the fire, the initial cause of the fire was her eight year old brother **had** intentionally set a couch on fire in the, ah, living room.
- Q. Okay. With a lighter or **matches**,--

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995 .

EVIDENCE given at the Coroner's Inquest on the body of

NICKOLE JAMARISE' HOPSON

deceased;

RAY RUSSELL

after being duly sworn, testifies as follows:

A. It was a ~~██████~~ type lighter apparently.

Q. Has he been known to play with fire or in the past or,--

A. Yes, he, he, ah, set, in 1992, ah, it was kind of ironic, he set the, ah, that very house on fire at an area about two feet away from where ~~██████~~ was found and burned a large hole clear through the floor into the basement in 1992 and that was an intentional set fire also.

Q. Okay. Will you explain to the Jury the testimony that Officer **Zachman** had given, the action of the fire and the fans?

A. Right. When I first appeared, ah, ah, come on the scene and went inside the house to investigate, I was, ah, a little skeptical about some of the stories that, ah, that the fire had started on a, on a bed, ah, in this one particular room because the fire had spread so, ah, quickly throughout the two rooms, they were pretty much even burned and I was under the opinion that, at that time, that maybe, ah, that there was foul play but we got into it farther and found out that, ah, Mr. ~~██████~~ had tried to take a couch out the door but it was a hide-a-bed type couch and is a fairly heavy steel framed couch and it got wedged in the door and the mattress and some of the stuffing that was out of foam rubber and that is a petroleum base product and when three big fans circulating the air in these two rooms because of

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the Coroner's Inquest on the body of

~~_____~~, deceased;

RAY RUSSELL

after being duly sworn, testifies as follows:

JUROR CARR: He did?

A. Yes, ma'am, he certainly did and so did the other children. And he told us that he said that one, ah, one of his brothers got a, ah, got the lighter, and he described the lighter in detail, out of a bowl where they kept them and he gave it to, ah, to ~~_____~~ and told him to set the couch on fire and he did. And to think of it, ~~_____~~'s other brother was laying on the couch sleeping, it was the one he set on fire.

JUROR HOGAN: Did the couch being pulled out, ah, block the doorway and,--

A. Yes ma'am.

JUROR HOGAN: --and it did block an avenue of escape?

A. Right. Then ~~_____~~ got the kids, after they got the doorway blocked and couldn't get out, then ~~_____~~ got the kids and all went outside and' out the back way. And after they got out there and found out that ~~_____~~ wasn't with them and apparently, ah, Mr. ~~_____~~ tried to get back in to get the little one but the heat, I mean, the smoke was so intense by that time, that he couldn't get back in, I mean this fire burnt very hot, very fast.

JUROR REED: And who has custody of her children now?

OFFICE OF
CORONER
OF PEORIA COUNTY

Peoria, Illinois, September 14, 1995

EVIDENCE given at the Coroner's Inquest on the body of

[REDACTED], deceased;

RAY RUSSELL

, after being duly sworn, testifies as follows:

A. Ah, of **that** I have no idea. There was a report turned into D.C.F.S. and after that, I have no idea.

JUROR LUETKEMEYER: So you don't- know what happened to the boy that set the fire?

A. No **ma'am**, I have no idea. And, ah, it's been, --unfortunately for him, there's probably not a thing we can do about it.

Q. Any other questions? Okay, thank you. This concludes the testimony for the Inquest on [REDACTED] the Jury may retire to reach a Verdict.

There is a blackened **oral** mucosa with a protruding tongue. The face and facial features are burned. The oral mucosa is burned. There soot in the trachea and major bronchi.

There is soot in the esophagus and the cardiac portion of the stomach.

There are no cuts, lacerations or abrasions seen.

WITNESSES AT THE AUTOPSY: Detective William J.. **Calbow**, Officer Dave Roger of the Peoria Police Department and Lynn Wahls, Diener.

PHYSICAL EVIDENCE PRESERVED: None.

UNUSUAL PROCEDURES: Portions of the scalp are removed for dissection because of the severe burning of the scalp.

TOXICOLOGY: Blood is **taken** for carbon dioxide determination.

X-RAYS : X-rays are reviewed. No fractures are seen.

SUMMARY OF SIGNIFICANT AUTOPSY FINDINGS: This is a severely burned body with only portions of the right lateral thorax, the right flank and the underside of the right arm remained **uncharred**. The fingertips are burned and the toes tips are burned. There are large areas of skin missing over the entire body. Some of the skin is preserved on the back. All areas of skin are burned.

The brain has large areas of scalp missing. This is particularly true on the left side of the scalp. Only a portion of the right side of the scalp measuring approximately 10 centimeters by 6 centimeters remains. The underlying bone is whitened due to the intense heat. On cut section of the brain, the tissue has an increased firmness secondary to intense heat.

There is a blackened oral mucosa with a protruding tongue. The face and facial- features are 'burned. The oral mucosa is burned. There soot in the trachea and major bronchi.

There is soot in the esophagus and the cardiac portion of the stomach.

There are no cuts, lacerations or abrasions seen-

MEDICAL OPINION ON THE CAUSE OF DEATH: The deceased died of suffocation due to inhalation of fire.

OTHER SIGNIFICANT CONDITIONS: None.


Phillip A. Immesoete, M.D.
Coroner's Physician
Date Signed: 10/5/95

2010 20 HCC 2010



THE METHODIST MEDICAL CENTER OF ILLINOIS

221 Glen Oak Ave. Peoria Il. 61636 (309) 671-2518

FORENSIC TOXICOLOGY LABORATORY

Thomas Webb M.D. Director of Laboratories

Eric Frow Ph.D. Scientific Director

TOXICOLOGY REPORT

Case Name: [REDACTED]
Age: 5
Accession #: 95-241-1314
Pathologist: I m m e s o e t e
Coroner: Peoria county
Date of Report: 8-29-95
Specimen Received Date: 8-29-95
Date of specimen collection: 8-29-95
Specimen Type: Blood

Carboxyhemoglobin = 51%

Signed Judith Wetzel

JUDITH WETZEL
MT (ASCP)

State of Illinois, } ss.
County of Peoria

AN INQUISITION

was taken for the People of the State of Illinois, at _____ the Coroner's Office _____, in
the _____ City of Peoria _____, in said County Of Peoria, on the _____ 14th
day of _____ September _____ A. D. 19 95 _____, before me, HERBERT H. BUZBEE, Coroner in
and for said County, upon view of the body of _____
then and there lying dead, upon the oaths of six good and lawful men of the said County, who being duly sworn to in-
quire on the part of the People of the State of Illinois into all circumstances attending the death of the said _____
_____ and by whom the same was procured, and in
what manner and when and where the said _____ came to

her _____ death, do say upon their oaths, as aforesaid, that the said _____
now lying dead at _____ Central Illinois Mrtuary Services, Ltd. _____ in said
_____ City of Peoria _____, County of Peoria, State of Illinois, came to _____ her _____ death,
and was found and pronounced dead about the hour of 10:10 P. M , DST, August 28th, 1995,
. A.D., at her residence, _____ County and State aforesaid, from
suffocation due to inhalation of fire, sustained about the hour of 9:30 P.M., DST,
August 28th, 1995, A.D., at her residence, _____, City, County and State
aforesaid, when the said deceased was the victim of a house fire, causing said injuries.

We, the Jury, find from the evidence presented, that this death is a reckless homi-
cide, and recommend that the Peoria Police Department and the Peoria County State's
Attorney continue their investigation and take whatever action is deemed necessary.

IN TESTIMONY WHEREOF the said Coroner and the Jury of this Inquest have hereunto set their hands the day
and year aforesaid.

Rita Liepkemper Foreman
Sherry Reed
Ruby M. Hogan

Bette Lou Bugg
James F. Phillips
Betty L. Carr
Herbert H. Buzbee Coroner
Per: Daniel Klein Deputy



INVESTIGATION GUIDELINE

Attachment A

DATA RECORDING SHEET FOR UPHOLSTERED FURNITURE FIRES

(To be attached to CPSC Form 182, Epidemiologic Investigation Report along with a copy of the Fire Incident Report)

Task Number.. 951020HCC2010 incident Date 8/28/95

A. **PRODUCT DESCRIPTION:** Sofa/Couch Chair Sofa bed Other _____

1. Was upholstered furniture slipcovered? Yes No Unknown

2. Had it been reupholstered? Yes No Unknown

3. Manufacturer/Distributor/Brand unknown

4. Purchased: New Used Unknown

If used, specify how obtained (e.g., garage sale, etc.) _____

5. Date Furniture Purchased: unknown Furniture Age unknown

6. Standard Certification Labeling; e.g., UFAC or California standard: (Copy)

unknown

B. **POINT OF FIRE IGNITION ON FURNITURE:** Describe where fire started on upholstered furniture.

Skirt Seat cushion Inside back Inside arm

Back Side Underside Crevice

Welt Cord Tuft Other _____

C. **AGE (IN YEARS) OF PERSON INVOLVED IN IGNITION** (if appropriate): _____

LT 5 yrs. old 5 - 14 15 - 64 65 +

D. **PRODUCT INVOLVED AS HEAT SOURCE AND TYPE** (Check):

Lighter Match Candle Heater Fireplace

Other (specify) _____

Unknown



INVESTIGATION GUIDELINE

If lighter, specify type: Child-resistant Not child-resistant Unknown.

If match, specify type: Book Box Unknown

If heater, specify fuel source and distance from furniture:

_____ Fuel source _____ Distance from furniture

E. DETECTION OF FIRE

7. Detector (smoke, heat, c.o., sprinkler) present?

Yes No Unknown

If yes, specify type: _____

8. Detector went off (alarmed)?

Yes No Unknown

9. If no, do you know any reason why not; e.g., unpowered, fire too small, etc.?

10. About how soon was the fire discovered after it started? _____

F. VICTIM(S)

1 Number of Deaths 0 Number of Injuries

G. Socio-Economic Data:

11. Education level of head of household:

Less than high school High school Some College

12. Total household income:

LT \$15,000 \$15,000 - \$34,999 \$35,000 +

13. Approximate home market value: unknown

Rent Own

General Description: Provide general description, including all other relevant factors and information on the investigation form.

40

1. CASE NO. 951024CCC2126	2. INVESTIGATOR'S ID [8][1][4][0]	3. OFFICE CODE [8][3][0]	EPIDEMIOLOGIC INVESTIGATION REPORT
4. DATE OF INCIDENT YR MO DAY [9][5][0][9][2][2]	5. DATE INVESTIGATION INITIATED	YR MO M Y [9][5][1][1][0][1]	

6. SYNOPSIS OF INCIDENT OR COMPLAINT:
A 3 year old boy playing with a cigarette lighter caused a home fire. He took his mother's lighter from her desk, and played with it in a living room. He set an upholstered chair on fire with the lighter. He screamed to his mother. They got out of the house without injury. The living room was severely damaged by the fire. The boy admitted to the firemen that he used a lighter to start the fire.

7. LOCATION (Home, school, etc.) home [1][0]	8. CITY Burbank	9. STATE IL
---	--------------------	----------------

10A. FIRST PRODUCT cigarette lighter [1][6][0][4]	11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Unknown
--	--

10B. SECOND PRODUCT upholstered chair [4][0][5][3]	11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS unknown
---	--

12. AGE OF VICTIM [0][3][0]	13. SEX (USE NUMERICAL CODE) MALE - 1 FEMALE - 2 [2] UNKNOWN - 3	14. DISPOSITION not treated [0]	15. INJURY DIAGNOSIS thermal burn [5][1]
--------------------------------	---	------------------------------------	---

16. BODY PART arm [3][3]	17. RESPONDENT(S) (Mother, Friend) Firemen, [2]	18. TYPE INVESTIGATION ON SITE - 1 TELEPHONE - 2 [2] OTHER - 3	19. TIME-ON-SITE Trv. 2.0 hrs [0][5][0]
-----------------------------	--	---	---

20. ATTACHMENTS fire report [2]	21. CASE SOURCE newspaper [0][5]	22. REVIEWED BY YR MO DAY [][][] [][][] 8311 951204
------------------------------------	-------------------------------------	---

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

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

(USE ADDITIONAL SHEETS IF NECESSARY)

IDI 951024CCC2126

PRE-ACCIDENT:

A three year old boy lived at home with his mother and grandmother. This was a modified Cape Cod style, wood frame house. The mother was in one corner of the first floor, working in her computer room. Her three year old son was in the diagonally opposite living room on the same floor. While the mother was busy, the boy entered the computer room and took the cigarette, lighter from his mother's desk, without being seen. The boy then went back to the living room.

ACCIDENT:

The mother heard her son scream. She came into the living room and saw an upholstered chair on fire, and her son standing in the middle of the room. The mother put the boy outside and tried to put out the fire. This was unsuccessful. The smoke was too thick. The phone did not work. She went next door to call 911 for the fire department. The firemen put out the fire.

The fire was contained to the living room. The living room front window was blown out due to the heat. The kitchen and stairwell to the second floor suffered some fire damage.

POST-ACCIDENT:

The boy admitted to the fireman, **policeman** and his mother that he used the cigarette lighter to start the fire.

The cigarette lighter was not recovered. The furniture was completely burned, and thrown away.

PRODUCT IDENTIFICATION:

Neither product was identified. The firemen did not recover the lighter. They never saw it. The family did not respond to my letter or phone calls, so no data was obtained from them.

STANDARDS:

There are **CPSC** standards for cigarette lighters and for upholstered furniture. It is not known if the products involved met these standards.

ATTACHMENTS:

A Fire report.

BURBANK FIRE DEPARTMENT

CAUSE & ORIGIN BUREAU

REPORT OF FIRE INVESTIGATION
(PRIVILEGED AND CONFIDENTIAL)

INVESTIGATORS LT. HARPER CAPT. KREIL

FIRE # 952062 SEPTEMBER DATE 22, 1995

TIME OF ALARM 13:26HRS. TYPE OF ALARM STRUCTURE # 3 HOUSE FIRE

WIND DIRECTION WEST 9mph WEATHER CONDITIONS PARTLY CLOUDY

OWNER OF BUILDING:

NAME [REDACTED] PLACE OF EMPLOYMENT UNKNOWN

ADDRESS [REDACTED] JOB TITLE UNK

TELEPHONE No. [REDACTED] ADDRESS [REDACTED] (HOME)

DRIVER'S LICENSE ***** SOCIAL SECURITY No. *****

CAR LICENSE ***** TELEPHONE No. *****

DESCRIPTION OF OWNER OF BUILDING --

RACE W/F AGE 48 HEIGHT WEIGHT HAIR EYES

OCCUPANTS OF BUILDING:

NAME [REDACTED] (DAUGHTER) P U C E OF EMPLOYMENT *****

ADDRESS [REDACTED] JOB TITLE

TELEPHONE No. ADDRESS

DRIVER'S LICENSE SOCIAL SECURITY No.

CAR LICENSE TELEPHONE No.

DESCRIPTION OF OCCUPANT OF BUILDING --

RACE W/F AGE 30 HEIGHT WEIGHT HAIR EYES

INSURANCE:

961024CCC 2126

COMPANY PRUDENTIAL INSURANCE CO. ADDRESS 7000 W. 111th ST TEL. 708/361-5510

AGENT ROBERT SETLIK ADDRESS _____ TEL. _____

ASSURED _____ ADDRESS _____ TEL. _____

ADJUSTOR _____ ADDRESS _____ TEL. _____

AMOUNT _____ POLICY # _____ TYPE _____ EFFECTIVE DATE' _____

DAMAGE: 120,000.00 STRUCTURE 60,000.00 PERSONAL PROPERTY

EVIDENCE:

WHAT WAS FOUND DISCUSSED CAUSE OF FIRE W/ [REDACTED] (OWNER), [REDACTED] (DAUGHTER) AND [REDACTED] ([REDACTED]'S SON) IN THE PRESENTS OF POLICE OFFICER GUERRA & SGT OSULLIVAN, AND F.D. CAPT. KREIL. [REDACTED] EXPLAINED HE STARTED FIRE W/MOTHER'S LIGHT LOCATION WHERE FOUND _____

DISPOSITION OF EVIDENCE _____

MODE OF OPERATION: AGGRESSIVE OFFENSIVE OPERATION.

WITNESS-ES:

NAME _____

ADDRESS _____ CITY _____ STATE _____

PHONE _____ SOCIAL SECURITY No. _____

EMPLOYMENT _____ JOB TITLE _____

SCHEDULE _____ TIME ON JOB _____

ADDRESS _____ PHONE _____

DESCRIPTION: AGE _____ HEIGHT _____ WEIGHT _____ HAIR _____ EYES _____

FINANCIAL STATUS:

95-1024 C.C. 2126

COURT ACTION:

DEFENDANT _____ ADDRESS _____ TEL. _____

AGE _____ SEX _____ OCCUPATION _____

DATE TAKEN TO COURT _____

CONTINUANCES _____

CHARGES (SECTIONS) _____

COMPLAINANT _____ ADDRESS _____ TEL. _____

NAME AND ADDRESS OF COURT _____

PRESIDING JUDGE _____

PROSECUTING ATTORNEY _____

DEFENSE ATTORNEY _____

GRAND JURY _____

CORONER'S INQUEST _____

DISPOSITION OF CASE _____

AMOUNT OF BOND _____

CASE # _____ DOCKET # _____ PAGE # _____

RESPECTFULLY SUBMITTED,
[Signature]



STATE OF ILLINOIS OFFICE OF THE STATE FIRE MARSHAL

1035 STEVENSON DRIVE, SPRINGFIELD, ILLINOIS 627034259

USE 'X' IN APPROPRIATE BOX.
ONLY ONE CODE PER FIELD OR SECTION

FIRE INCIDENT REPORT

Forward by the 15th of the following month.
The OSFM is requesting disclosure of fire information that is necessary to accomplish the statutory purpose as outlined in Ill. Rev. Stat., Chap. 127 1/2, Par. 6. Disclosure of this information is required. Any officer who neglects to comply with this act shall be guilty of a petty offense. This form has been approved by the Forms Management Center.

951024000 2126

1. Delete 2. Change

A. ID#		INCIDENT NO.		EXP. NO.	MO.	DAY	YEAR	DAY OF WEEK	ALARM TIME	TIME ARRIVED	"IN SERVICE"						
CS 29295		2062		009	22	95		FRIDAY	61326	1329	1431						
B. TYPE OF SITUATION FOUND						TYPE OF ACTION TAKEN			MUTUAL AID								
Structure Fire <input checked="" type="checkbox"/> 11 Outside of Structure Fire <input type="checkbox"/> 12 Vehicle Fire <input type="checkbox"/> 13 Trees/Brush/Grass Fire <input type="checkbox"/> 14 Refuse Fire <input type="checkbox"/> 15						Extinguishment <input checked="" type="checkbox"/> 1 Investigation Only <input type="checkbox"/> 3			None <input checked="" type="checkbox"/> Received <input type="checkbox"/> 1								
C. FIXED PROPERTY USE						IGNITION FACTOR											
Not Applicable <input type="checkbox"/> 008 1-Family Dwelling-Year <input checked="" type="checkbox"/> 411 2-Family Dwelling-Year <input type="checkbox"/> 414 3-6 Unit Apt/Tenmt/Flat <input type="checkbox"/> 422 7-20 Unit Apt/Tenmt/Flat <input type="checkbox"/> 423 + 20 Unit Apt/Tenmt/Flat <input type="checkbox"/> 424 Resident Parking/Garage <input type="checkbox"/> 881 Vacant Property <input type="checkbox"/> 915 Open Land/Field <input type="checkbox"/> 931						Vacant Lot <input type="checkbox"/> 936 Railroad Right of Way <input type="checkbox"/> 951 Limit Access/Divid Hwy <input type="checkbox"/> 961 Paved Public Street <input type="checkbox"/> 962 Paved Private St/Way <input type="checkbox"/> 963 Unpaved St/Rd/Path <input type="checkbox"/> 964 Uncovered Parking Area <input type="checkbox"/> 965						Incendary-No Civl Distrb <input type="checkbox"/> 11 Suspicious-No Civl Distrb <input type="checkbox"/> 21 Abandoned Material <input type="checkbox"/> 31 Inadeqt Contr/Open Flame <input type="checkbox"/> 36 Child Playing <input checked="" type="checkbox"/> 46 Combstbl/Too Close Heat <input type="checkbox"/> Part Failure/Leak/Break <input type="checkbox"/> 51 Shrt Crct/Grnd Fault <input type="checkbox"/> 54 Other Elec Failure <input type="checkbox"/> 55 Lack of Maintenance <input type="checkbox"/> 56 Backfire <input type="checkbox"/> 57 Unattended Operation <input type="checkbox"/> 73					
D. CORRECT ADDRESS, CITY																	
BURBANK																	
E. OCCUPANT LAST NAME										ZIP CODE		CENSUS TRACT					
[REDACTED]										60459		8211.00					
F. OWNER LAST NAME, FIRST NAME, M.I.																	
[REDACTED] ST.																	
G. METHOD OF ALARM FROM PUBLIC																	
Telephone Direct <input checked="" type="checkbox"/> 1 Private Fire Alarm <input type="checkbox"/> 3 Radio <input type="checkbox"/> 4 Direct Verbal Report <input type="checkbox"/> 5 Telephone Tie-Line <input type="checkbox"/> 7						CO INSP DIST		SHIFT		ALARMS							
[REDACTED]						1208		12		11							
H. NO. FIRE SERVICE PERSONNEL RESPONDED				NO. ENGINES RESPONDED				NO. AERIAL APPARATUS RESPONDED				NO. OTHER VEHICLES RESPONDED					
013				1002				1000				1004					
I. NUMBER INCIDENT-RELATED INJURIES				NUMBER INCIDENT-RELATED FATALITIES				FIRE SERVICE				OTHER					
001				001				1000				1000					
J. COMPLEX						MOBILE PROPERTY NPE (If any, do line 5)											
Dwelling <input checked="" type="checkbox"/> 41 Apartment <input type="checkbox"/> 42 Shopping <input type="checkbox"/> 58 Farm <input type="checkbox"/> 65 Campsite <input type="checkbox"/> 93 Road <input type="checkbox"/> 96 No Complex <input type="checkbox"/> 98						Not Applicable <input checked="" type="checkbox"/> 08 Automobile <input type="checkbox"/> 11 Mobile Home <input type="checkbox"/> 17 Truck-Gen Under 1 Ton <input type="checkbox"/> 22											
K. AREA OF ORIGIN						EQUIPMENT INVOLVED IN IGNITION (If any, do line 5)											
Lounge Area <input checked="" type="checkbox"/> 14 Sleep Rm Under 5 People <input type="checkbox"/> 21 Kitchen/Cooking Area <input type="checkbox"/> 24 Trash Area/Container <input type="checkbox"/> 46 Garage/Carport/Storage <input type="checkbox"/> 47 Trans Eq/Passagr Area <input type="checkbox"/> 81 Engn Area of Trans Eq <input type="checkbox"/> 83 Railroad Embankment <input type="checkbox"/> 91 Highway/Public Way/St <input type="checkbox"/> 92 Lawn/Field/Open Area <input type="checkbox"/> 94						Fixd, Statry Locl Htg Unit <input type="checkbox"/> 13 Portable Local Htg Unit <input type="checkbox"/> 15 Chimney, Gas Vent Flu <input type="checkbox"/> 16 Fixd/Statry Surf Unit <input type="checkbox"/> 21 Open Fire Grill <input type="checkbox"/> 26 cord, Plug <input type="checkbox"/> 47 Vehicle <input type="checkbox"/> 96 No Equipment Involved <input checked="" type="checkbox"/> 98											
L. FORM OF HEAT OF IGNITION						TYPE OF MATERIAL IGNITED						FORM OF MATERIAL IGNITED					
Spark/Gas Fueled Eq <input type="checkbox"/> 11 Heat/Gas Fueled Eq <input type="checkbox"/> 12 Spark/Liq Fueled Eq <input type="checkbox"/> 13 Heat/Liq Fueled Eq <input type="checkbox"/> 14 Short Circuit-Bad Ins <input type="checkbox"/> 23 Short Circuit-Umpc <input type="checkbox"/> 24 Overloaded Eq <input type="checkbox"/> 27 Cigarette <input type="checkbox"/> 31 Match <input checked="" type="checkbox"/> 45 Open Fire <input type="checkbox"/> 47 Backfire From Engine <input type="checkbox"/> 48 Friction <input type="checkbox"/> 51 Reignition/Rekindle <input type="checkbox"/> 55 Properly Oper Elec Eq <input type="checkbox"/> 56 Fireworks <input type="checkbox"/> 63 Lightning Discharge <input type="checkbox"/> 73 Radiated Heat <input type="checkbox"/> 82						Gasoline <input type="checkbox"/> 23 Fat/Grease (Food) <input type="checkbox"/> 31 Plastic—Unclassified <input type="checkbox"/> 40 Rubber <input type="checkbox"/> 51 Grass/Leaves <input type="checkbox"/> 54 Sawn Wood <input type="checkbox"/> 63 Untreated Paper <input type="checkbox"/> 67 Man-Made Fiber <input checked="" type="checkbox"/> 71 Cotton/Rayon <input type="checkbox"/> 72 Multiple Types <input type="checkbox"/> 97						Structural Member <input type="checkbox"/> 17 Upholstered Sofa/Chair <input checked="" type="checkbox"/> 21 Electrical Wire <input type="checkbox"/> 61 Fuel <input type="checkbox"/> 65 Growing/Living Form <input type="checkbox"/> 74 Rubbish/Trash <input type="checkbox"/> 75 Cooking Material <input type="checkbox"/> 76 Gas/Liquid From Pipe <input type="checkbox"/> 86 Multiple Form <input type="checkbox"/> 97					

COMPLETE ON ALL INCIDENTS

COMPLETE ON ALL FIRE INCIDENTS

951024000 2126



STATE OF ILLINOIS OFFICE OF THE STATE FIRE MARSHAL
3150 EXECUTIVE PARK DRIVE SPRINGFIELD, ILLINOIS 62703

CIVILIAN CASUALTY REPORT

Forward by the 15th of the following month.
The OSFM is requesting disclosure of fire information that is necessary to accomplish the statutory purpose as outlined in Ill. Rev. Stat., Chap. 127 1/2, Par. 6. Disclosure of this information is required. Any officer who neglects to comply with this act shall be guilty of a petty offense. This form has been approved by the Forms Management Center.

APPROPRIATE ONLY ONE CODE PER FIELD OR SECTION

FDID: A 951024000 INCIDENT NO.: 2952062 EXP NO.: 0009 DAY: 22 YEAR: 95 DAY OF WEEK: FRIDAY ALARM TIME: 161326

Casualty # 1001 CASUALTY LAST NAME: [REDACTED] FIRST NAME: [REDACTED] M.I.: J. DATE OF BIRTH: 301326 AGE: 30 TIME OF INJURY: 1326

HOME ADDRESS, CITY, STATE: [REDACTED] TELEPHONE: [REDACTED]

SEX: Male 1 Female 2 SEVERITY: Injury 1 Death 2 CASUALTY TYPE: Fire 1 Action 2 EMS 3 AFFILIATION: Other Emer Personnel 2 Civilian 3

FAMILIARITY WITH STRUCTURE: Undetermined 0 Less Than 1 Day 1 Over 1 Year 7 Not A Structure 8 LOCATION AT IGNITION: Intimately involved 1 In Area Fire Origin 2 Floor Fire Origin 3 Building Fire Origin 4 CONDITION BEFORE INJURY: Undetermined 0 Asleep 1 Awake/Unimpaired 8

CONDITION PREVENTING ESCAPE: No Time/Fire Too Rapid 1 Not A Factor 8 ACTIVITY AT TIME OF INJURY: Undetermined 0 Escaping 1 Fire Control 3 Sleeping 6 CAUSE OF INJURY: Expsd to Fire Prod 2 Fell/Stpd On-Over-Into 4 Rubbed By/Contct With 6 Struck By 7

NATURE OF INJURY: Burns/Asphyxia/Smoke 1 Bums Only 2 Asphyxia/Smoke Only 3 Wound/Cut/Bleeding 4 Strain/Sprain 8 PART OF BODY INJURED: Head/Neck 1 Leg 4 Hand 5 Internal 7 Multiple Parts 8 DISPOSITION: Treated at Scen/Risd 2 To Hosp By Fire Dept 3 To Hsp By Non-Fire Dpt 4

Casualty # CASUALTY LAST NAME FIRST NAME M.I. DATE OF BIRTH AGE TIME OF INJURY

HOME ADDRESS, CITY, STATE TELEPHONE

SEX: Male 1 Female 2 SEVERITY: Injury 1 Death 2 CASUALTY NPE: Fire 1 Action 2 EMS 3 AFFILIATION: Other Emer Personnel 2 Civilian 3

FAMILIARITY WITH STRUCTURE: Undetermined 0 Less Than 1 Day 1 Over 1 Year 7 Not A Structure 8 LOCATION AT IGNITION: Intimately Involved 1 In Area Fire Origin 2 Floor Fire Origin 3 Building Fire Origin 4 CONDITION BEFORE INJURY: Undetermined 0 Asleep 1 Awake/Unimpaired 8

CONDITION PREVENTING ESCAPE: No Time/Fire Too Rapid 1 Not A Factor 8 ACTIVITY AT TIME OF INJURY: Undetermined 0 Escaping 1 Fire Control 3 Sleeping 6 CAUSE OF INJURY: Expsd to Fire Prod 2 Fell/Stpd On-Over-Into 4 Rubbed By/Contct With 6 Struck By 7

NATURE OF INJURY: Burns/Asphyxia/Smoke 1 Bums Only 2 Asphyxia/Smoke Only 3 Wound/Cut/Bleeding 4 Strain/Sprain 8 PART OF BODY INJURED: Head/Neck 1 Leg 4 Hand 5 Internal CI 7 Multiple Parts 8 DISPOSITION: Treated at Scen/Risd 2 To Hosp By Fire Dept 3 To Hsp By Non-Fire Dpt 4

951024CCC2126

CHILDREN PLAYING WITH
CIGARETTE LIGHTERS
-DATA RECORD SHEET-

(For All Incidents Assigned Under BUNN02)

1. Task Number 951024CCC2126
2. Date of Incident 9-22-95
3. Sex of Child male
4. Age of Child 3 years

If the child who lit the lighter is under 6 years old, complete items 5 through 9.

If the child is 6 years or older, terminate at this point and submit an abbreviated SF 182. Include the child's age and sex in the synopsis along with a brief accident scenario. A separate narrative is not necessary.

5. Describe the accident scenario in the narrative portion of the investigation report. The narrative, which should be on a separate page, would include information on how the accident occurred, how severely the child and/or others were injured, and how much property damage was caused by the fire.
6. Kind of Lighter (Check one)
Disposable - Regular Size _____
Mini Size _____
Size Unknown xx

Refillable _____
Unknown xx
7. Lighting Mechanism (Check one)
Roll and Press _____
Press Only _____
Other (specify) _____
Manufacturer/Model _____
8. Obtain copy of fire incident report from fire department attached.

ACCIDENT INVESTIGATION REQUEST FORM

DOCUMENT NUMBER: *GSA 0047A*
DATE OF INCIDENT: *9/22/95* CATID: CARM07 1996
FOLLOW-UP REQUESTED HAZARD ANALYSIS () CRM ()
TYPE FOLLOW-UP TELEPHONE () ON-SITE (X)
HEADQUARTERS CONTACT: Michael Bogumill 504-0400 x1368
Backup: Bob Poth 504-0400 x1375

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

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

Person(s) to Contact: *See Attached*

Guidelines: Appendix 45

Task Number: *951024 CCL 2124* Date: *10/24/95*
Assigned to: *CH10* Requested by: *Bogumill*

G5 A0064

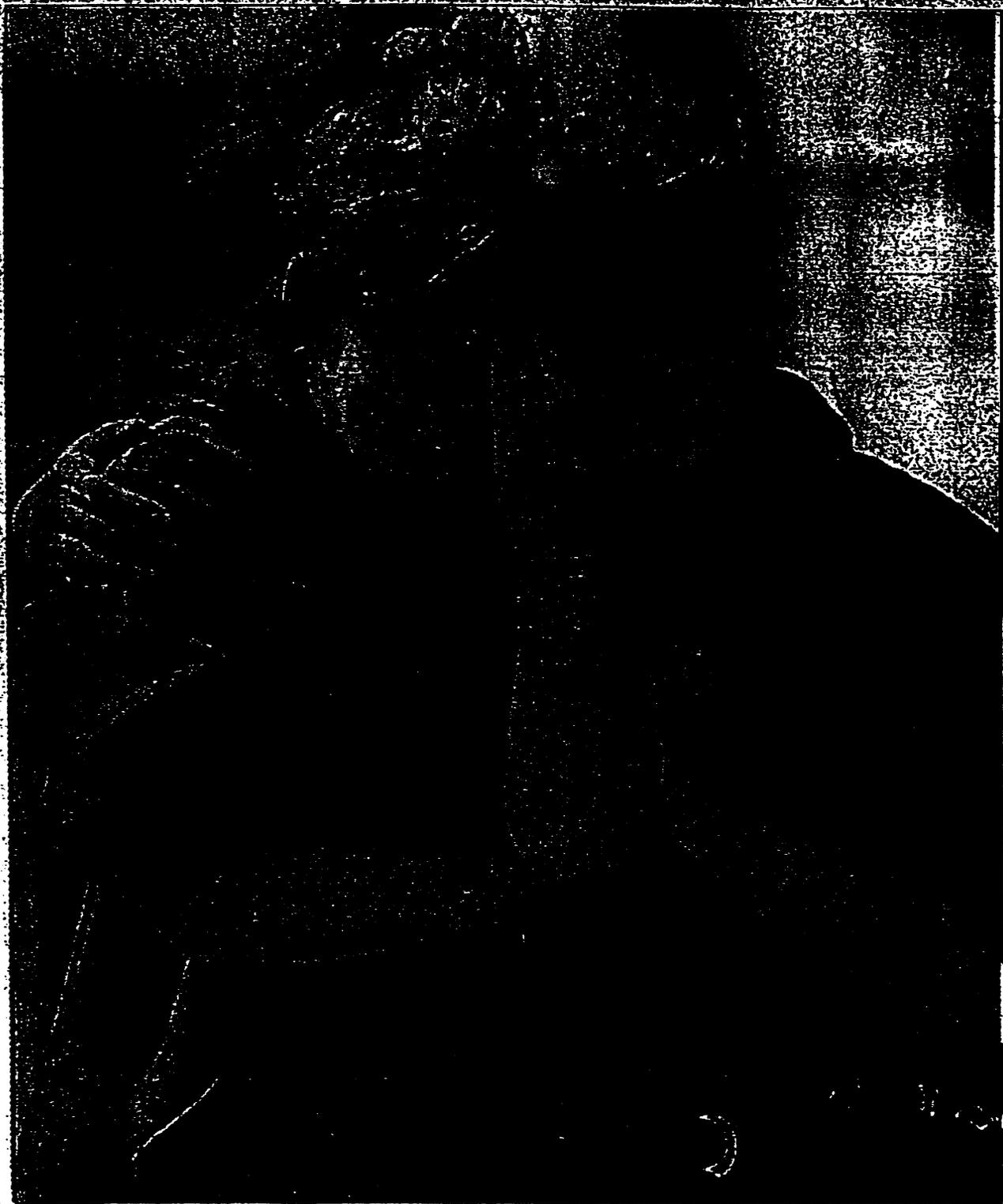
96 1024CC 2/24

SEP 24 1995

OCT 23 1995

Chicago I.L.
Daily Southtown

Fire damages Burbank home



Paul Vigna/Daily Southtown

A friend comforts Angela Layton after a fire severely damaged Layton's home. Fire in Burbank destroyed home.

SUSPECTS:

NAME AND ALIASES _____

A D D R E S S _____

TEL. _____

OCCUPATION _____

PLACES OF EMPLOYMENT _____

HABITS _____

ASSOCIATES _____

FAMILY HISTORY _____

PREVIOUS CRIMINAL RECORD _____

DESCRIPTION _____

MOTIVE:



INVESTIGATION GUIDELINE

Attachment A

DATA RECORDING SHEET FOR UPHOLSTERED FURNITURE FIRES (To be attached to CPSC Form 182, Epidemiologic Investigation Report along with a copy of the Fire Incident Report)

Task Number 951024CCC 2126 Incident Date 9/22/95

A. PRODUCT DESCRIPTION: Sofa/Couch Chair Sofa bed // Other _____

1. Was upholstered furniture slipcovered? Yes No Unknown

2. Had it been reupholstered? Yes No Unknown

3. Manufacturer/Distributor/Brand UNKNOWN

4. Purchased: New Used Unknown

If used, specify how obtained (e.g., garage sale, etc.) _____

5. Date Furniture Purchased: UNKNOWN u r e A g e _____

6. Standard Certification Labeling; e-g., UFAC or California standard: (Copy)

B. POINT OF FIRE IGNITION ON FURNITURE: Describe where fire started on upholstered furniture.

Skirt Seat cushion Inside back Inside arm

// Back Side Underside Crevice

Welt Cord Tuft Other UNKNOWN

C. AGE (IN YEARS) OF PERSON INVOLVED IN IGNITION (if appropriate): _____

LT 5 yrs. old 5 - 14 15 - 64 65 +

D. PRODUCT INVOLVED AS HEAT SOURCE AND TYPE (Check):

Lighter Match Candle Heater Fireplace

(s p e c i f y) _____

Unknown



INVESTIGATION GUIDELINE

If lighter, specify type: Child-resistant / Not child-resistant Unknown.

If match, specify type: Book Box Unknown

If heater, specify fuel source and distance from furniture:

_____ Fuel source _____ Distance from furniture

E. DETECTION OF FIRE .

7. Detector (smoke, heat, c.o., sprinkler) present?

Yes 0 No Unknown

If yes, specify type: _____

8. Detector went off (alarmed)?

Yes 0 No @Unknown

9. If no, do you know any reason why not; e.g., unpowered, fire too small, etc.?

10. About how soon was the fire discovered after it started? UNKNOWN

F. VICTIM(S)

0 Number of Deaths 1 Number of Injuries

G. Socio-Economic Data:

11. Education level of head of household: UNKNOWN

Less than high school High school Some College

12. Total household income: UNKNOWN

LT \$15,000 \$15,000 - \$34,999 \$35,000 +

13. Approximate home market value: UNKNOWN

Rent Own

General Description: Provide general description, including all other relevant factors and information on the investigation form.

Author: Robert C. Okarski at cpssc-cro

Date: 1/26/96 2:44 PM

Priority: Normal

TO: Kimberly E. Long at CPSC-HQ2

CC: Don F. Kendall at CPSC-HQ2

CC: James A. Miersch

Subject: Fires

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

I have personally completed all the information on the data record sheet. This information was available in the ID1 itself. The ID1 stated that both the lighter and the furniture have been removed and disposed of. The ID1 also stated that the Parents did not want to talk with the investigator. All the information available was that which was provided by the fire investigative report which is part of the ID1.

9110240002126

Fire damages Burbank home

By Stephanie Gehring
staff writer

A child playing with a lighter could have started a fire that severely damaged a Burbank home on Friday, leaving the 3-year-old boy, his mother and grandmother temporarily homeless, city fire officials said.

"It's still under investigation," Capt. Martin D. Ceil. "But it's possibly a kid playing with a lighter."

BURBANK

she had just spent \$10,000 to renovate her kitchen, which was destroyed in the fire. The living room and part of a stairwell also were burned and the rest of the house was damaged by smoke and heat.

daughter, who declined to give her last name, and her 3-year-old son were home at the time of the fire.

"I don't know what happened," she said. "I came into the living room and it was on fire. I heard my baby screaming." She and her son live with

The fire started in the living room of the raised ranch-style wood frame house in the of then spread to the kitchen and second floor, officials said.

Thirteen firefighters on the scene doused the fire in 30 minutes, then spent another 30 minutes investigating and checking for hot spots, Kreil said. No one was seriously injured, Kreil said. daughter suffered minor burns on her arm when she tried to bat-

tle the fire, her mother said.

"I threw (my son) outside and tried to call the fire department, but I couldn't get to the kitchen," the daughter said.

house was far enough from neighboring homes that there was no danger of the fire spreading, officials said.

"Everything is gone except for what was in my bedroom," said who has lived in the home since 1980. "I raised five kids here."

said she, her daughter and grandson planned to stay at a hotel for now. said she expected her insurance to cover most of the damage.

Kreil said investigators would question the daughter and her son in several days.

20 Review Date
960202

21 Distribution
O: EHDS

cc: SFRO cc c/s: LDB/LGC

EPIDEMIOLOGIC
INVESTIGATION
REPORT

1. CASE NO. 95 1122HCC3027		2. INVESTIGATOR'S ID [8][2][3][2]		3. OFFICE CODE [8][7][0]	
4. DATE OF INCIDENT YR MO DAY [9][5][1][0][7]		5. DATE INVESTIGATION INITIATED YR MO DAY [9][6][10][11][10]			
6. SYNOPSIS OF INCIDENT OR COMPLAINT A 35 year old male was treated for burns and minor smoke inhalation as a result of a fire in his home. The victim's son apparently started the fire by igniting an upholstered love seat with a disposable cigarette lighter. The victim discovered the fire and extinguished fire with assistance from a neighbor and driver who was passing by. The neighbor and son were also treated for minor smoke inhalation according to a fire official.					
7. LOCATION (Home, school, etc.) home interior [1][0]		8. CIN Longview		9. STATE Washington [WA]	
10A. FIRST PRODUCT love seat [0][6][7][9]		11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS unknown			
10B. SECOND PRODUCT cigarette lighter [1][6][0][4]		11 B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS unknown			
12. AGE OF VICTIM [0][3][5]	13. SEX (USE NUMERICAL CODE) MALE - 1 FEMALE - 2 [1] UNKNOWN- 3		14. DISPOSITION treated & released. [1]		15. INJURY DIAGNOSIS burns. thermal [5][1]
16. BODY PART face [7][6]	17. RESPONDENT(S) (Mother, Friend) wife. fire official [3]		18. TYPE INVESTIGATION ON SITE - 1 TELEPHONE - 2 [2] OTHER - 3	19. TIME SPENT [][6]:[0]	
20. ATTACHMENTS [2] fire report. datasheet		21. CASE SOURCE [0][5] newspaper FB0009A		22. REVIEWED BY [8][1][0][1] YR MO DAY [9][6][10][2][0][2]	
23. PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME [] CPSC MAY NOT DISCLOSE MY NAME [X]					
24. NARRATIVE (See Instructions on Page 2)				25. REGIONAL OFFICE DIRECTOR REVIEW DATE	

FIELD ACTIVITY COVERSHEET

1 Region/State	2 Operation (Check one) <input type="checkbox"/> Inspection. <input type="checkbox"/> Telephone contact <input type="checkbox"/> Other	3 Date 02-01-96	
POWR/PDX	<input checked="" type="checkbox"/> Establishment visit <input checked="" type="checkbox"/> Investigation		4 Number 951122HCC3027

5 Establishment
unknown

Telephone

6 Related firm Parent Headquarters Subsidiary. Other

7 Products covered
upholstered furniture
matches/cigarette lighter

8 Other consumer products

9 Establishment Type <input type="checkbox"/> Manufacturer <input type="checkbox"/> Importer <input type="checkbox"/> Wholesaler <input type="checkbox"/> Own label distributor <input type="checkbox"/> Retailer <input type="checkbox"/> Repackager <input type="checkbox"/> Other	10 Annual production Product covered \$ _____ units _____ Other products, \$ _____ units _____
---	---

11 IS business % received _____ % shipped, _____	12 Samples none	13 MIS code 12165	14 Hours Activity 6 Travel 0
---	---------------------------	-----------------------------	---

15 Reason for activity

Headquarters initiated investigation

16 Announced (Rationale for announced inspection)

Unannounced n/a

17 Employee's Name	Title	Signature	date
Joseph S. Burchyski	Investigator		

18 **Endorsement** **Remarks** **Summary** **Other**

ID1 conducted in response to a newspaper account of a residential fire associated with a cigarette lighter. A three year old boy used a non-child resistant cigarette lighter to ignite a piece of-upholstered furniture. The boy's father suffered minor burns and smoke inhalation. The boy was not injured. We were unable to fully identify the products. No further follow up.

19 Reviewer's Name James P. DiGrazia	Title Supervisor	Signature
--	----------------------------	------------------

The respondents were the victim's wife and a fire official who was on duty at the time of this investigation. The officer in charge of investigating the fire is on medical leave and was not available.

PRE - EVENT

The fire occurred in a single family home located in a suburban neighborhood. The home is a wood framed dwelling with a value of approximately \$85,000. The home is owned and occupied by a married couple with a three year old son.

The wife said that she and her husband purchased a couch and love seat set new approximately 7 years before the fire. She said that the couch and love seat were not reupholstered before the fire. She said that she did not know if the furniture met any flammability safety standards.

The wife said that she did not know anything about the lighter used by her son on the day of the event. She said that her son used a non-child resistant lighter on the day of the event. She said that he must have "**found** the lighter **someplace**".

EVENT

The wife said that she was working on the day of the event, She said that her husband was home with their son. The newspaper **reported** that the husband woke-up and discovered the fire. The wife said that **their son was apparently** playing with the non-child resistant lighter and ignited the love **seat**. She said that he apparently ignited **the back of the love seat** in the area of the corner. She did not describe the specific point of ignition of the couch.

The son apparently hid in his bedroom after the fire started according to the

951122 HCC 3027

newspaper report. The wife said that their smoke detector sounded an alarm. The husband woke and attempted to extinguish the fire with a garden hose according to the **newspaper** report. A Neighbor provided a fire extinguisher and a driver passing **by** assisted the husband according to the report.

POST EVENT

The fire department was dispatched to the scene at **12:57 a.m.** and arrived **at the scene at 1:02 p.m.** according to the fire department report. The fire department found the fire out on arrival according to the report. The fire department vented the smoke and overhauled the scene according to the report.

The fire officials identified the **cause** of the fire as the three year old child playing with matches or a lighter according to the fire report. A fire official said that the officer in charge reported that the burn patterns on the couch and floor were consistent with ignition of the couch by matches but the source of ignition was not found.

The fire official said that the father, neighbor and son were transported to a local hospital for treatment. The fire official said that the victim's **were** treated for minor smoke inhalation. The news report stated that the father was also treated for burns on his hands, arm and nose. The wife said that her husband was the only person injured in the fire.

FIRST PRODUCT IDENTIFICATION

The first material ignited **was a** love seat according to the wife. She said that the love seat was part of a set with a matching couch. She said that the set was purchased new seven years before the event. She said that she did not know the name **of** the brand or manufacturer.

The wife said that she did not know the type of material used in the construction of the couch and could not describe the couch. She said that the cushions were filled with foam. She said that the upholstery material melted as it burned but she did not know the **type of fabric**. She said that the couch and love seat were **discarded** after the fire.

SECOND PRODUCT IDENTIFICATION

The fire report identified the ignition source **as** matches/lighter. The fire official said that the investigating officer did not find the source of ignition.- The fire official said that the burn patterns appeared to be consistent with a fire caused by matches or **a** lighter igniting the couch.

The wife said that the source of ignition probably **was a** cigarette lighter because there were no matches in the home. She said that she did not know the brand of the lighter. She said that she only **buys** child resistant lighters. She said that she accounted- for all of her **lighters** after the fire. She **said that** the lighter used **by her son was a** non-child resistant type because he is unable to operate **a** child resistant lighter. She said that she did not know where her son obtained the lighter used to start the fire.

STANDARDS INFORMATION

Information concerning product compliance with applicable standards was not available.

● t 951122HCC3027

951122 HCC 3027

-- **ATTACHMENTS**

Exhibit # 1: Data Record Sheet

Exhibit # 2: Newspaper Report

Exhibit # 3: Fire Report

FIELD ACTIVITY COVERSHEET

22 FEB 1996

1 Region/State FOWR/2012	2 Operation (Check one) <input type="checkbox"/> Inspection <input type="checkbox"/> Telephone contact <input type="checkbox"/> Other: ADDENDUM	3 Date 2-8-96
		4 Number 951122HCC3027

5 Establishment
 Name :
 Address :
 City :
 State :
 Zip :
 Telephone

6 Related firm
 Parent Headquarters Subsidiary Other
 Name : City: State:

7 Products covered
Upholstered furniture, couch

9 Other consumer products

9 Establishment Type
 Manufacturer Importer
 Wholesaler Own label distributor
 Retailer Repackager
 Other

10 Annual production
 Product covered \$ units:
 Other products \$ units:

11 IS business
 % received []
 % shipped []

12 Samples collected

13 MIS code
12165

14 Hours
 Activity /
 Travel

15 Reason for activity

16 Announced [] (Rationale for announced inspection) Unannounced []

17 Employee's Name Joseph J. Buraburki	Title Senior Investigator	Signature date
---	------------------------------	----------------

18 Endorsement Remarks Summary Other:

Addendum consists of following attachments:
 Exh # 1 - Data Record Sheet
 Exh # 2 - News clippings
 Exh # 3 - Final report

19 Reviewer's Name James P. DiGrazia	Title Supervisory Investigator	Signature <i>[Signature]</i>
---	-----------------------------------	---------------------------------

20 Review Date
2-8-96

21 Distribution
 O: EITDS cc: SFRD

951122HCC3027
EXHIBIT * 1



INVESTIGATION GUIDELINE

Attachment A

DATA RECORDING SHEET FOR UPHOLSTERED FURNITURE FIRES

(To be attached to CPSC Form 182, Epidemiologic Investigation Report along with a copy of the Fire Incident Report)

Task Number _____ Incident Date _____

A. PRODUCT DESCRIPTION: Sofa/Couch Chair Sofa bed Other _____

1. Was upholstered furniture slipcovered? Yes No Unknown

2. Had it been reupholstered? Yes No Unknown

3. Manufacturer/Distributor/Brand UNKNOWN

4. Purchased: New Used Unknown

If used, specify how obtained (e.g., garage sale, etc.) _____

5. Date Furniture Purchased: _____ Furniture Age 7 YRS PRICE: \$1000 (SET)

6. Standard Certification Labeling; e.g., UFAC or California standard: (Copy) _____

B. POINT OF FIRE IGNITION ON FURNITURE: Describe where fire started on upholstered furniture.

Skirt Seat cushion Inside back Inside arm

Back (CORNER) Side Underside Crevice

Welt Cord Tuft Other _____

C. AGE (IN YEARS) OF PERSON INVOLVED IN IGNITION (if appropriate): _____

LT 5 yrs. old 5 - 14 15 - 64 65 +

D. PRODUCT INVOLVED AS HEAT SOURCE AND TYPE (Check):

Lighter Match Candle Heater Fireplace

____ Other (specify) _____

____ Unknown



INVESTIGATION GUIDELINE

951122 HCC3627
EXHIBIT * 1

If lighter, specify type: Child-resistant Not child-resistant Unknown

If match, specify type: Book Box Unknown

If heater, specify fuel source and distance from furniture:

_____ Fuel source _____ Distance from furniture

E. DETECTION OF FIRE

7. Detector (smoke, heat, c.o., sprinkler) present?

Yes No Unknown

If yes, specify type: _____

8. Detector went off (alarmed)?

Yes No Unknown

3. If no, do you know any reason why not; e.g., unpowered, fire too small, etc.?

10. About how soon was the fire discovered after it started? _____

F. VICTIM(S)

_____ Number of Deaths 1 Number of injuries

G. Socio-Economic Data:

11. Education level of head of household:

Less than high school High school Some College

12. Total household income:

LT \$15,000 \$15,000 - \$34,999 \$35,000 +

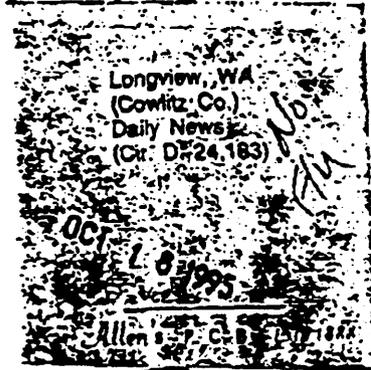
13. Approximate home market value: \$85,000

Rent Own

General Description: Provide general description, including all other relevant factors and information on the investigation form.

PORTLAND P.03
951122HCC3027
EXHIBIT #2

NOV 13 1995



F5B0009A

Boy playing with matches starts fire; he and three adults end up in hospital

PAULINE BAINS THE DAILY NEWS

A boy playing with matches started a fire in his Longview home Tuesday that sent him and the three adults who battled it to the hospital.

Three-year-old [redacted] his father [redacted], their neighbor [redacted] and Longview resident Jerry [redacted] were released after treatment at St. John Medical Center.

Longview Fire Department Lt. Tom McKay said all were suffering from smoke inhalation and [redacted] was burned on his hands, arms and nose.

But McKay said [redacted] injuries might have been worse and the blaze could have caused more extensive damage if [redacted] and [redacted] had not pitched in to help. Operations Chief Bob Leu noted this morning the department plans to present the pair with letters of appreciation for their efforts.

Firefighters were dispatched [redacted] a few minutes before 1 p.m. but found no flames when they arrived, McKay said.

"It was obvious when we went through the front door that there had been a fire in the couch," he said. "The place was full of smoke in the front room and a couple of other rooms." [redacted] told the firefighters he'd just woken up "and found the couch burning and the place full of smoke and didn't know where his son was."

He said he immediately rushed outside to get a hose to douse the flames, but it wouldn't quite reach.

Meanwhile, a woman across the street saw the blaze and alerted [redacted], a tow truck driver who was jump-starting her car. He rushed over to help loosen the hose, while [redacted], a next door neighbor, grabbed a fire extinguisher from the woman, McKay said.

"Between the garden hose and the extinguisher, they controlled the fire," he said.

McKay said [redacted] had started the blaze while playing with matches on or around the living room sofa. After the fire was out, the child was found hiding under a sleeping bag in his room, McKay said.

He estimated the home sustained \$3,000 in damage.

951122HCC3027

951122HCC3027
EXHIBIT #3



Insurance Report

LONGVIEW FIRE DEPARTMENT
740 COMMERCE AVE
LONGVIEW, WA 98632
(206) 577-3340

SECTION A

Response Data

IR. NO.	Exp. No.	DATE	DISPATCHED	ARRIVED	END TIME
2232	00	10-17-95	12:57	13:02	14:01
Incident Location			Room / Apt.	Zip Code	
440 22ND				98632	
First in Co.	District	Automatic or M/A		Method of Alarm	
811	1	0 NON APPLICABLE		1 TELEPHONE DIRECT TO FIRE DEPT	
Situation Found		11-STRUCTURE FIRE			
Action Taken		11 RESCUE, VENTILATION, EXTINGUISHMENT,			

Occupant Data

Code	Occupant Name	
00 OCCUPANT/OWNER	[REDACTED]	
(Area Code) Phone	Occupant Address	DOB
[REDACTED]		1/1/60

Owner Data

Code	Owner Name	
(Area Code) Phone	Owner Address	DOB

Personnel & Apparatus

- Responding Personnel		No. of Responding Apparatus		
<input type="checkbox"/> 9 Paid	<input type="checkbox"/> Engine I	<input type="checkbox"/> I-1 Rescue		
<input type="checkbox"/> Volunteer	<input type="checkbox"/> Truck	<input type="checkbox"/> S	<input type="checkbox"/> Hazmats	
<input type="checkbox"/> Total	<input type="checkbox"/> Aerial	<input type="checkbox"/> Tanker	<input type="checkbox"/> e r s	

Construction Info

General Property Use	41 ONE OR TWO FAMILY RESIDENTIAL USE
Specific Property Use	411-ONE FAMILY DWELLING ALL YEAR
Building Code Occupancy Type	10R3-DWELLINGS & LODGING HOUSES
Structure Status	12 IN USE WITH FURNISHINGS IN PLACE AND BEING USED
Occupancy Status at Time of Incident	1 OCCUPIED AT TIME OF INCIDENT

E
X
T
E
N
T

Flame	smoke
2 PART OF ROOM OF ORIGIN	4 CONFINED TO FIRE COMPARTMENT OF ORIGIN
Material Generating Most Smoke	
Type Mobile Property	Form
72 COTTON, RAYON, POLYESTER BLENDS	21 UPHOLSTERED SOFA
Avenue of Smoke Travel	
2 CORRIDOR	

D
E
T
E
C
T
I
O
N

Type Mobile Property	Power Supply
1 SMOKE DETECTOR, IONIZATION PRINCIPLE	1 BATTERY ONLY
Detector Performance	Reason for Failure
2 DETECTOR NOT IN THE ROOM OF FIRE ORIGIN, AND IT ALERTED THE OCCUPANTS	8 NO DETECTOR FAILURE
Extinguish Type	Extinguisher Performance
98 NO EXTINGUISHING SYSTEM	8 NO EQUIPMENT PRESENT IN ROOM OR SPACE OF FIRE ORIGIN
Reason for Ext. Failure	
8 NO EXTINGUISHING SYSTEM FAILURE	
Sprinkler Heads	Number Activated
Type Mobile Property	

Member Making Report
MCKAY
Officer in charge
LT. MCKAY

Emp. LD.

02

7 (500)

ACCIDENT INVESTIGATION REQUEST FORM

Document Number F5B0009A

Date of Incident 10/18/95 Category I.D.BUNN251995

Follow-Up Requested Hazard Analysis X Section 15

Type Follow-Up Requested Telephone Call O X - S i t e

Headquarters Contact Kimberlv Lona (301) 504 -0470 Ext 1269 Backup - Linda Smith (301) 504-0470 Ext. 1275

Assignment Message

Conduct a investigation of this case where a 3 year old male started a fire with matches on the couch. Find out what part of the furniture ignited (if possible). If second hand furniture, find out how long in possession. if furniture still available, collect sample, following page 9 of guideline for sample collection.

Describe incident scenario; photograph and identify manufacturer: model number and brand name of all products involved. Please obtain fire incident report, medical insurance, and any other report of incident. Complete Data Record Sheet in guideline.

Person(s) to Contact Longview WA Fire Department (Tom McKay) and

Victims ([REDACTED])

Guideline Number 19 Upholstered Furniture Fires

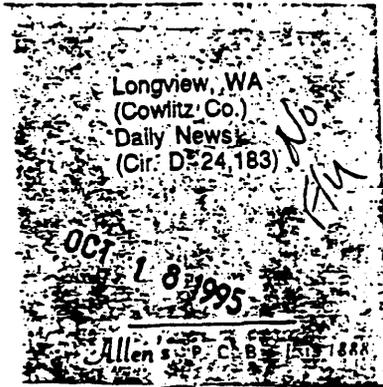
Requested By Kimberlv Long

Task Number 951122 HCC 3027

Assigned to SF00

Date 11/22/95

NOV 13 1995



F5B0009A

Boy playing with matches starts fire; he and three adults end up in hospital

PAULINE BAINS THE DAILY NEWS

A boy playing with matches started a fire in his Longview home Tuesday that sent him and the three adults who battled it to the hospital.

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Firefighters were dispatched [redacted] a few minutes before 1 p.m. but found no flames when they arrived, McKay said.

"It was obvious when we went through the front door that there had been a fire in the couch," he said. The place was full of smoke in the front room and a couple of other rooms. [redacted] told the firefighters he'd just woken up "and found the couch burning and the place full of smoke and didn't know where his son was."

He said he immediately rushed outside to get a hose to douse the flames, but it wouldn't quite reach.

Meanwhile, a woman across the street saw the blaze and alerted [redacted], a tow truck driver who was jump-starting her car. He rushed over to help loosen the hose, while [redacted] a next door neighbor, grabbed a fire extinguisher from the woman, McKay said.

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He estimated the home sustained \$3,000 in damage.

951122Hce3087

RH

42

25 JAN 1996

1. TASK NUMBER 951204HCC1042		2. INVESTIGATOR'S ID 8209		EPIDEMIOLOGIC
INVESTIGATION REPORT 896		4. DATE OF ACCIDENT YR MO DAY 95 11 10	5. DATE INITIATED YR MO DAY 95 12 11	
6. SYNOPSIS OF ACCIDENT OR COMPLAINT Using a cigarette lighter removed from a table, a 2 yr. old male started a fire by igniting a living room chair. The child has a history of playing with matches.				
7. LOCATION (Home, School, etc.) Home 10		8. CITY Palmerton		9. STATE PA
10A. FIRST PRODUCT Cigarette Lighter 1604		10B. TRADE/BRAND NAME Unknown		10C. MODEL NUMBER unknown
10D. MANUFACTURER NAME AND ADDRESS unknown				
11A. SECOND PRODUCT Chair 4053		11B. TRADE/BRAND NAME		11C. MODEL NUMBER TYPE
11D. MANUFACTURER NAME AND ADDRESS				
12. AGE OF VICTIM 999	13. SEX No Injury 9	14. DISPOSITION No Injury 0	15. INJURY DIAGNOSIS No Injury 70	
16. BODY PART (S) INVOLVED No Injury 79	17. RESPONDENT Fire Chief 3	18. TYPE OF INVESTIGATION Telephone 125	19. TIME SPENT (OPERATIONAL HOURS) 06.0	
20. ATTACHMENT(S) Multiple 9	21. CASE SOURCE Newspaper 05		22. SAMPLE COLLECTION NUMBER T - - - - -	
23. PERMISSION TO DISCLOSE NAMES (NON NEISS CASES ONLY) YES NO X				
24. REVIEW DATE 1/26/96	25. REVIEWED BY Feb 2155		26. REGION & OFFICE DIRECTOR	
27. DISTRIBUTION O:EHDS CC:CRM/M. Bogumill CC:MASC/BES cc : MASC/JC				

Need data recordsheet

Pre-Accident:

Information in this report furnished by the Fire Chief. The parents did not respond to a request for an interview.

According to the respondent, the child involved in the incident was a 2 year old male. The Fire Chief was informed by the **family** that the child has a history of playing with matches.

The family, consisting of both parents and two children, resided in a single family, two story twin home. On the day of the fire, all family members were at home. The father was on the second floor with his daughter, age 4. The mother was occupied in the first floor kitchen. The 2 year old male was left unattended in the living room.

Accident ;

-Around 11:00 a.m., the 2 year old male removed the disposable butane cigarette lighter from a living room table. He used the lighter to ignite a chair in the room.

Post-Accident:

The child's father informed the Fire Chief that his son came upstairs and told him that there was a fire in the living room. The father alerted his wife.

Prior to notifying the fire department, the father attempted to extinguish the blaze with a bowl of water. **In** a second unsuccessful attempt, the father used a-garden hose.

The family escaped their home without injury. However, heavy fire damage was sustained on the first and second floors of the house. **Damages incurred totalled \$20,000.00.**

When interviewed by the Fire Chief, the 2 year old male admitted starting the fire. The cigarette lighter was not recovered by the fire department. **No** product information was available on the unit. The Fire Chief listed the cause of the fire as "**child** playing with cigarette lighter". A copy of the Fire Report is attached as Exhibit #1.

Product Identification:

Product: Disposable butane cigarette lighter

Manufacturer: Unknown

Page 2

951204HCC1042

Attachments

Exhibit #1 - Fire Report
Exhibit #2 - Data Record Sheet

ADDENDUM

DATE: 1/22/96

951204HCC1042

I received a telephone call from the mother of the 2 yr. old male involved in this cigarette lighter incident. She identified the brand name of the lighter as [REDACTED]. The lighting mechanism required a press and roll action.

The mother informed me that both she and her husband are smokers. They usually purchase their cigarette lighters from a nearby gas station. She said that though the lighters supposedly are child proof, it was not the first incident with her son.

25 JAN 1996

***** REPORT OF PALMERTON FIRE DEPARTMENT RESPONSES *****

DATE OF RESPONSE : 11-10-95 | TIME OF RESPONSE: 1106 Hrs.

TIME OF CONTROL : 7139 Hrs. | TIME OF RETURN : 1159 Hrs.

TRUCKS RESPONDING: 711 | 713 | 721 | Fire | Dist 1

LOCATION OR ADDRESS: [REDACTED] Palmerton, PA

OCCUPANTS NAME: [REDACTED] Family | PHONE #: [REDACTED]

OWNERS NAME: [REDACTED] | PHONE #: [REDACTED]

OWNERS ADDRESS: [REDACTED]

DESCRIPTION OR TYPE OF RESPONSE:
Dwelling Fire

CAUSE OF INCIDENT: The [REDACTED]'s son (mathew, ago 2) was playing with a child-proof cigarette fighter and started a living room chair on fire.

DAMAGES: The fire spread to the floor and other furniture in the living room area. There was heavy smoke and heat damage on the 1st & 2nd floors of the residence.

REMARKS: Mr. [REDACTED] stated that he was upstairs with their daughter. ([REDACTED] age 4) and Mrs. [REDACTED] was in the kitchen- came upstairs and told his father that there was a fire in the living room
I spoke, to [REDACTED] and said that he was playing with the lighter and that he started the fire.
The insurance co. reported the fire loss is going to be \$20,000.00

: PALMERTON FIRE INSPECTOR: MARVIN L. SNELL JR.

PALMERTON FIRE CHIEF: [Signature] CHRISTOPHER S. REGEL

ADDITIONAL REMARKS OR COMMENTS:

(PROG29)
[Handwritten notes: Ex H 1, 951204 HCC1042]

CHILDREN PLAYING WITH
CIGARETTE LIGHTERS
-DATA RECORD SHEET-

(For All incidents Assigned Under 'BUNN02)

1. Task Number 951204HCC1042
2. Date of Incident 11/10/95
3. Sex of Child MALE
4. Age of Child 2 YEARS

If the child who lit the lighter is under 6 years old, complete items 5 through 8.

If the child is 6 years or older, terminate at this point and submit an abbreviated SF 182. Include the child's age and sex in the synopsis along with a brief accident scenario. A separate narrative is not necessary.

5. Describe the accident scenario in the narrative portion of the investigation report. The narrative, which should be on a separate page, would include information on how the accident occurred, how severely the child and/or others were injured, and how much property damage was caused by the fire.
6. Kind of Lighter (Check one)
Disposable - Regular Size
 Mini Size
 Size Unknown

Refillable
Unknown
7. Lighting Mechanism (Check one)
Roll and Press
Press Only
Other (specify)
Manufacturer/Model
8. Obtain copy of fire incident report from fire department.

Ex 42
951204HCC1042
GTW

6 LORA

ACCIDENT INVESTIGATION REQUEST FORM

DOCUMENT NUMBER: N5B0272A0

DATE OF INCIDENT: 11-10-95 CATID: CARM07 1996

FOLLOW-UP REQUESTED HAZARD ANALYSIS () CRM ()

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

HEADQUARTERS CONTACT: Michael Bogumill 504-0400 x1368
Backup: Bob Poth 504-0400 xx375

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

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

Person (s) to Contact.: ① [Redacted]

② Palmerton, PA
Palmerton Fire Chief

Guidelines: Appendix 45

Task Number: 951204HCC1042 Date: 12/4/95

Assigned to: MAS C Requested by: J. LANSING

MUTUAL
PRESS CLIPPING SERVICE

NOV 11, 1995

MORNING CALL
ALLENTOWN, PA

AM - 133.346
SUN - 147.287

Boy, 2, using lighter sets Palmerton blaze, fire officials say *Joseph*

A 2-year-old Palmerton boy playing with a childproof lighter set a blaze yesterday that caused \$20,000 damage to the family home, fire officials said.

Most of the damage to the [redacted] home [redacted] was in the living room. No one was injured, and the other half of the double house was not involved.

Palmerton Fire Chief Chris Kegel said the boy set fire to a chair with the lighter about 11 a.m. Kegel said the damage estimate was provided by the family's insurance company.

Kegel said [redacted] his wife and their two children were all at home. [redacted] tried to douse the fire by throwing a bowl of water on it. When that didn't work, he called for help, then used a garden hose.

The chair and a large piece of carpeting were destroyed. An adjoining stair rail was heavily charred, the ceiling was damaged and a lampshade melted. The [redacted] living room walls appeared intact.

About 25 firefighters from Palmerton Fire Company 1, West End Fire Company



Fire damage done to living room at [redacted] in Palmerton.

CATHERINE MEREDITH / The Morning Call

8 and Lower Towamensing Township responded.

After the fire was contained, Kegel had firefighters delay opening windows because the family's Rottweiler hadn't been found. Kegel said he wasn't sure

where the dog was and didn't want to risk injury.

[redacted] and went back into the house and found the dog, unharmed, hiding in the attic. The pet was removed without incident.

DEC - 4 1995

NSB-0772A

951204HCC1042