FLORIDA TRAFFIC CRASH REPORT

LONG FORM X SHORT FORM UPDATE

HIGHWAY SAFETY & MOTOR VEHICLES TRAFFIC CRASH RECORDS NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

Crash E 11/16/2		Time of Cra 5:55 PM		of Report 5/2011	Repo FLO	rting Agenc RIDA HIGHV	y VAY PA	TROL					Report FHPD1	ng Agency Ca 1OFF095212	se Number	HSMV Crash 82008616-01	Repor	t Number
CRAS	H IDENTIF	ERS																
County Code City Code County of Crash 17 38 SEMINOLE						Place or City of Crash					Within City Limits Reported Date/Time YES 11/16/2011 5:59 PM					Dispatched Date/Time 11/16/2011 6:04 PM		
On Scer 11/16/20	ne Date/Time 011 7:01 PM	Ç	leared Sce 11/16/2011	ne Date/Time 9:65 PM	ln	vestigation (NO	Complet	ed Reason (if Ir PENDING T	rvestiga HI	tion No	t Comp	lete)				Notified By LAW ENFORC	EMEN	T AGENCY
	WAY INFO								14	I Circal	Adden		Atl	atitude	٨	nd Longitude		
INTERS At Feet	TATE 4 (STAT	et, Road, Alg E ROAD 400 Miles)	1550	a latorno	Con With C	root Br	and Diabutou	^^	t Street	Addres	SS#		48.0773		W 81 21.5 Or From Milepo		bor
	0.7	VIIIOS	Direction	LA	E MARY	ntersection With Street, Road, Highway MARY BOULEVARD Type of Shoulder				Type of Intersection					ľ	Of Atom wifebo	5(1(01)	.061
INTERS	TATE						PAVED					NTERS						
Light Co	H INFORM.	ATION	Weather 0	ctures Taken Condition		Roadwa	y Surfac	ce Condition		School	Bus Re	ated				Collision		
DÜSK			CLEAR			DRY				NO					FRONT T	O REAR		
COLLIS	rmful Event Typ ION WITH PER E, OR NON-FI	SON, MOTO	R MOTO	Harmful Event D OR VEHICLE IN		PORT		First Harmful ON ROADWA		ocation			Within In NO	lerchange	First Harmi NON-JUN	ful Event's Rela CTION	tion to	Junction
Contribu NONE	ting Circumsta	nces: Road	t		Con	tributing Cir	cumstar	nces: Road					Contributi	ng Circumstan	ces: Road			
Contribu NONE	ting Circumsta	nces: Environ	ment		Con	tributing Cir	cumstar	nces: Environma	ent				Contributi	ng Circumstan	ces; Enviro	nment		
Work Zo	ne Related	Crash in Wo	rk Zone			Type of	Work Zo	one	····		Worke	rs in Wo	rk Zone	Law Enforcem	ent in Wor	k Zone		
VEHIC		Commerc	ial Motor Ve	hicle					·····						b 445 b			
V01	Motor Vehicle MOTOR VEHI	<u>CLE IN TRAN</u>	ISPORT	Tou to	NO			e)License Numi 2806ID		State	1/	eg. Exol: 30/2012		Permanent R	4M2ZL	J66E22ZJ3206		tio o
Year 2002	Make MERC	Model MOUN	TAINEER	Style UT	W	olor HI		t of Damage BLING	ESL	Damag 6,00		Ş	nce Policy	CORTES TO				ATION
GEICO	ce Company			Ostana de de	lacas					City		20021	05043		ana Mumb	0.(0)		
CHEMV	Vehicle Owne APUWA AKIL	AH JACKSÕI		Current Ad 345 WYMO	RE RD U		N	2161		City ALTA	MONT	E SPRIN	IGSFL :	32714	one Numb	er(s)		u ration
Trailer One	License Num		State		1	Sermanent F NO	<u> </u>	/IN /IN				Yea		lake lake			Leng	th Axles th Axles
Trailer Two Vehicle	Directio		State	Reg. Expires treet, Road, Hig	1	Permanent F NO	(eg. v	114				Yea	31 .1Y	At Est. 5	Speed.	Posted Speed		otal Lanes
Travelin	g WEST	<i>n</i> 1		RSTATE 4 (ST.	ATE ROA	D 400)								65	peed	65	8	
CMV CO	nfiguration			Cargo Body	Aha				ĺ	Area		al Impaci		Undercamia		Most Dam	aged /	Area
Comm G	WR/GCWR		Tra	lter Type (Traile	r One)	Trailer	Гуре (Та	aller Two	┤		<u> </u>		リツ :	Overturn		9 /	ᆜ	긐닏
									Ø][[[_ [ø ((□((c	וונ]
Haz. Ma	i. Release Ha	z Mat Placard		Haz.	Vat Num	ber Ha	ez. Mat.	Class	1 /	仁				Trailer			崩	<u></u>
Motor Ca	arrier Name					US DOT	Numbe	ot .	1 -	, III			<u>'</u> ' -				<u> </u>	
	arrier Address				Addre	ss Other				City			S	tate Zip Co		Phone Nun		
Comm/N	on-Commercia	l	(SPORT)	ody Type UTILITY VEHIC	LE	Vehicle NONE	Defects	(one)		Vehicle	Defect	s (two)		Emergen NO	cy Vehicle	Use Special Fu NO SPECI		
	Maneuver Action	ı	rafficway WO-WAY, MEDIAN BA	DIVIDED, POSI RRIER	rive L	oadway Gra EVEL	ide	Roadway A STRAIGHT		ļc	Most He COLLIS OBJEC		rent N-FIXED		larmful Eve R VEHICL	ent Detail E IN TRANSPO	PRT	
Traffic C		or this Vehicle		equence of Eve			ond (2)	Sequence of Ev	ents		Third (3	3) Seque	ence of Ev	ents	Fourth (4	4) Sequence of	Events	S
						_												
			MOTOR	EHICLE IN TR	MSPOR	'												
VEHIC		Commerci	ial Motor Ve	hicle												***************************************		
Vehicle V02	Motor Vehicle MOTOR VEHI	Γγρε CLE IN TRAN	SPORT		Hit &	Run (by this	vehicle	License Numb 866KDN	ЭӨГ	State FL		g. Expir 11/2012	es	Permanent Re		68SXVC691466	;	
1997	Make JEEP	Model GRANI	CHEROK	Style VN	Co WI		Extent DISAE	of Damage BLING	Est.	Damag 4,50		3		Vehicle Remo			Rota ROT	tion ATION
UNKNO						···						Insuran UNKNO						
MICAEL.	Vehicle Owner A GUTIERREZ		siness 🔲	Current Add 3741 DART	FORD OF		***			City DAVE	NPOR		FL 3	3837	one Numbe	er(s)		
Trailer One	License Numi		State	Reg. Expires	N	'ermanent R IO		iN .				Yea		ake				ih Axles
Trailer Two	License Numi		State	Reg. Expires	N	ermanent R IO	eg. V	IN				Yea	ı M	ake			Lengi	
Vehicle Traveling	Direction WEST	n		reet, Road, Hig RSTATE 4 (ST/		D 400}								At Est. S 0		Posted Speed 65	T- 8	otal Lanes

Page 1 of 6

Crash Date Time of 11/16/2011 5:55 PM		Reporting Agency FLORIDA HIGHWAY PATROL		eporting Agency Case Number HSMV Crash Report Number HPD110FF095212 82008616-01
CMV Configuration	Cargo Body Ty	ре	Area of Initial Impact	Most Damaged Area
Comm GVWR/GCWR	Trailer Type (Trailer	One) Trailer Type (Trailer Two		Overturn O O O O O
Haz. Mat. Release Haz Mat Plac	card Haz. N	lat. Number Haz. Mat. Class		Trailer C Trailer
Motor Carrier Name		US DOT Number		
Motor Carrier Address		Address Other	City	State Zip Code Phone Number
Comm/Non-Commercial	Vehicle Body Type (SPORT) UTILITY VEHIC	Vehicle Defects (one) LE NONE	Vehide Defects (two)	Emergency Vehicle UselSpecial Function of MV NO SPECIAL FUNCTION
Vehicle Maneuver Action STOPPED IN TRAFFIC	Trafficway TWO-WAY, DIVIDED, POSIT MEDIAN BARRIER		OBJECT	
Traffic Control Device for this Veh NO CONTROLS	ricle First (1) Sequence of Even COLLISION NON-FIXED (ds Second (2) Sequence of COLLISION NON-FIXED		of Events Fourth (4) Sequence of Events
	MOTOR VEHICLE IN TRA	NSPORT MOTOR VEHICLE IN TR	ANSPORT	
	ercial Motor Vehicle	Hit & Run (by this vehicle) License Nu	mber State Reg. Expires	Permanent Reg. IVIN
Vehicle Motor Vehicle Type V03 MOTOR VEHICLE IN TE Year Make Moo		NO C8561X Cofor Extent of Damage	TN 9/30/2012	NO 1GNKVGED5CJ146737 amage Vehicle Removed By Rotation
2012 CHEV TRA	AVERSE 4Ď	SIL DISABLING	12,500 YES	CORTES TOWING ROTATION olicy Number
SELF INSURED Name of Vehicle Owner	Business Current Addr		City S	state Zip Code Phone Number(s)
Trailer License Number	2187 ALCOA State Reg. Expires	Permanent Reg. VIN	ALCOA T	Make Length Axtes
Trailer License Number	State Reg. Expires	Permanent Reg. VIN NO	, Year	Make Length Axles
Vehicle Direction Traveling WEST	On Street, Road, High INTERSTATE 4 (STA	wav	l .	At Est. Speed Posted Speed Total Lanes
CMV Configuration	Cargo Body Ty		Area of Initial Impact	Most Damaged Area
				Undercarriage
Comm GVWR/GCWR	Traiter Type (Trailer	One) Trailer Type (Trailer Two)		Overturn O O O O O
Haz, Mat. Release THaz Mat Plac	ard (Haz. M	at, Number Haz, Mat, Class		Windshield Li - (-1)
Motor Carrier Name		US DOT Number		Traiter U 1010101010
Motor Carrier Address		Address Other	City	State Zip Code Phone Number
Comm/Non-Commercial	Vehicle Body Type (SPORT) UTILITY VEHICI	Vehicle Defects (one) NONE	Vehicle Defects (two)	Emergency Vehicle Use Special Function of MV NO SPECIAL FUNCTION
Vehicle Maneuver Action STOPPED IN TRAFFIC	Trafficway TWO-WAY, DIVIDED, POSIT MEDIAN BARRIER		r Alignment Most Harmful Event HT COLLISION NON-FIX OBJECT	
Traffic Control Device for this Veh NO CONTROLS	icle First (1) Sequence of Even COLLISION NON-FIXED C	IS Second (2) Sequence of I COLLISION NON-FIXED	Events Third (3) Sequence of OBJECT	of Events Fourth (4) Sequence of Events
	MOTOR VEHICLE IN TRA	NSPORT MOTOR VEHICLE IN TR	ANSPORT	
	ercial Motor Vehicle			
Vehicle Motor Vehicle Type V04 MOTOR VEHICLE IN TR	ANSPORT	Hit & Run (by this vehicle) License Nur NO 116KMC	FL 12/28/2011	Permanent Reg. IVIN NO 1N4BA41E44C916939
	et Style KIMA 4D	Color Extent of Damage DISABLING	7,500 YES	mage Vehicle Removed By Rotation ROTATION
Insurance Company GEICO Name of Vehicle Owner	S. S		Insurance Po 4197499629	
VALERIE CARMEN DOMINIQUE	Business Current Address 854 KAZARO		City S OCOEE F	
One	State Reg. Expires	NO Permanent Reg. VIN	Year	Make Length Axles
Trailer License Number Two Vehicle Direction	On Street, Road, High	NO	100;	At Est. Speed Posted Speed Total Lanes
Traveling WEST CMV Configuration	INTERSTATE 4 (STATE	E ROAD 400)		0 65 8
CWA Coundarance	Cargo body ry	vo	Area of Initial Impact	─────────────────────────────────────
Comm GVWR/GCWR	Trailer Type (Trailer	One) Traiter Type (Traiter Two)		Overturn O O O O O
Haz, Mat. Release Haz Mat Plac	ard Haz. M	at Number Haz. Mat. Class		Trailer D D D D D
Motor Carrier Name		US DOT Number		
Motor Carrier Address		Address Other	City	State Zip Code Phone Number
Comm/Non-Commercial	Vehicle Body Type PASSENGER CAR	Vehicle Defects (one) NONE	Vehicle Defects (two)	Emergency Vehicle Use Special Function of MV NO SPECIAL FUNCTION

Crash Date 11/16/2011	Time of Cras 5:55 PM	sh Date o 11/16/2		Reporting A LORIDA H		PATROL					porting Age PD110FF0			MV Crash Report 008616-01	Number
Vehicle Maneuver Actio STOPPED IN TRAFFIC	: T	rafficway WO-WAY, t EDIAN BAF	DIVIDED, POSITIVE RRIER	Roadwa LEVEL		STR	way Alignme NGHT	ľ	Most Harm COLLISIO OBJECT	ful Event N NON-FIX	ED		rmful Event I VEH(CLE IN	Detail N TRANSPORT	
Traffic Control Device for NO CONTROLS	or this Vehicle	First (1) Se COLLISIO	equence of Events N NON-FIXED OB.	ECT	Second (:	2) Sequence ON NON-FIX	of Events ED OBJECT		Third (3) S	Sequence o	f Events		Fourth (4) S	equence of Even	S
		MOTOR V	EHICLE IN TRANS	PORT	MOTOR	VEHICLE IN	TRANSPOR	T							
VEHICLE	Commerci	al Motor Vel	hide		J	Armin.									
Vehicle Motor Vehicle V05 MOTOR VEHIC				lit & Run (i	by this vehi	cle) License AMHZ7:		State FL	Reg. 1/27/	Expires 2012	Perma NO	inent Reg.	VIN 1GYFK63	BX7R228130	
Year Make 2007 CADI	Model ESCAL		Style UT	Color RED	Exte MIN	ent of Damag		Damag 80	e Towed	Due to Dan	nageVehic	le Remove		Rote	ition
Insurance Company ALLSTATE	1-4-11-1		1+-	1					ln	surance Pol 7162723203		r			
Name of Vehicle Owner JOHN FRANK GILBER	Bu:	siness 🗌	Current Address 3837 MURPHY					City			ate Zip Cod	le Phon	e Number(s))	
Trailer License Numb		State ME	Reg. Expires 10/31/2012		nent Reg.	VIN 1DGCS081	X6M062046			Year 2005	Make DOOL			Leng 8	th Axles
Trailer License Numb	er	State	Reg. Expires		nent Reg.	VIN				Year	Make			Leng	th Axles
Vehicle Direction Traveling WEST	n,	On Str	reet, Road, Highway ISTATE 4 (STATE	,	1						<u> </u>	\t Est. Spe	eed Pos	sted Speed	otal Lanes
CMV Configuration			Cargo Body Type					Area	of Initial In	npact				Most Damaged	
											☐ Und	ercarriage	• 🗆 п		
Comm GVWR/GCWR		Trail Utili	er Type (Trailer On ty Trailer	e) Tra	ailer Type (Trailer Two		17	7_11			verturn		(<u>-17 -</u> 11	7/
Den Het Deleger His	ttet Disease		files Net		Diam 14	-1 ()	ᆜᆸ	川			□ w	indshield			╝
Haz. Mat. Release Haz	Mat Placaro		Haz, Mat.		1	at. Class	_ 1				· 🗹	Trailer			
Molor Carrier Name					DOT Num	per	ŧ		• •	· ·		7:- 0			<u> </u>
Motor Carrier Address		Byahiata Ma		ddress Oth				City	Balada II		State	Zip Code		Phone Number	-CM/
Comm/Non-Commercial		(SPORT) L	TILITY VEHICLE	n,	hicle Defec IKNOWN	as (611 6)	ľ	veniue	Defects (to	woj	N.		Vehicle Ose	Special Function NO SPECIAL FU	
Vehicle Maneuver Action STOPPED IN TRAFFIC	ļτ\	<u> </u> afficway VO-WAY, D EDIAN BAR	VIVIDED, POSITIVE	Roadwa LEVEL	y Grade	Road	vay Alignmer IGHT	K	Most Harmi COLLISION DBJECT	ful Event N NON-FIXE	L		mful Event C VEHICLE IN	L Detail TRANSPORT	
Traffic Control Device fo	of this Vehicle	First (1) Se	quence of Events N NON-FIXED OBJ	ECT	Second (2) Sequence	of Events		Third (3) S	sequence of	Events		Fourth (4) Se	equence of Event	S .
			EHICLE IN TRANS												
PERSON RECOR															
# Person Type 1 DRIVER	V01		MWAPUWA AKILA	H JACKSO		NÓN	/ Severity -INCAPACIT	ATING			ection OT EJECTI	D		NO	er ReExam
Date of Birth Sex 01/30/1980 F	Condition at ASLEEP OF	RFATIGUE	D		Add: 345		D UNIT 101,	ALTA	AONTE SF					one Number	
Driver License Number J250101806300		State FL	Expires 01/30/2014		/ OPERAT	ror					rcial Motor	Vehicle E.	ndorsements		
Restraint Systems SHOULDER AND LAP I			DE	Bag Deploy	T UNKNOV					elmet Use	~~~~		Eye F NOT	Protection APPLICABLE	
Motor Vehicle Seating P FRONT	osition: Row		Motor Vehic LEFT	te Seating	Position: S	eat				Position: Oth	her				
Driver Distracted By NOT DISTRACTED							Driver Vision VISION NOT	OBSC	CURED				····		
Driver Actions at Time of OPERATED MOTOR VE	HICLE IN CA	RELESS OF	R NEGLIGENT MA	NNER			Driver Action			,					
Oriver Actions at Time of	•	, ,		,			Driver Action			,					
Suspected Alcohol Use NO	TEST GIVEN	BLG	ohol Test Type	PENDIN			NO.		rug Use	Drug Test TEST GIV	/EN	Drug Te BLOOD		Drug Test Re PENDING	sun
Source of Transport to M EMS	ledical Facility		EMS Agency Name SEMINOLE COUN			EMS Run N 2011-11-22				acility Trans L FLORIDA		L		44.00000000000000000000000000000000000	
PERSON RECORI		11. 2 lite				Ltatus	Canada			le:-	atia a			Inc.	- Da Evan
# Person Type DRIVER	V02		AEL JAIMES		المقاما	INCA	Seventy PACITATING	3			ection OT EJECTE	D	55-	NO	r ReExam
Date of Birth Sex 12/31/1981 M	Condition at UNKNOWN			17	Addr 3741		D DRIVE, DA	VENPO	ORT FL 33			Mahiata P.		one Number	
Driver License Number NONE		State	Expires	Type NONE	4				li te-		rcia: Motor	venicia Ei	ndorsements		
Restraint Systems SHOULDER AND LAP E			DEI	Bag Deploy	UNKNOV		100.00	Makfala		Imet Use			NOT	Protection APPLICABLE	
Motor Vehicle Seating Po FRONT	osiliori; Row	<u> </u>	Motor Vehic LEFT	ie Seaung	Position: 5	eat .				Position: Oth	161				
Driver Distracted By NOT DISTRACTED	Ceach t the	nd no inde-	most of investigation	n officer)			Driver Vision VISION NOT Driver Action	OBSC	URED	h 2 /hasad	on kidaan	ant of in-	eliantina ne	inar)	
Driver Actions at Time of NO CONTRIBUTING AC	TION		-							•					
Driver Actions at Time of Suspected Alcohol Use	·		oho! Test Type		act Doon!	BAC	Driver Action						_	•	eidi
UNKNOWN	TEST NOT G	IVEN			est Result		UNKN	NWO	rug Use	Drug Teste TEST NO acility Trans	T GIVEN	Drug Tes	~ 1)Ps	Drug Test Re	e di i
Source of Transport to M EMS	ledical racility		EMS Agency Name LAKE MARY FIRE	O ID		EMS Run No 2011-11-226				O REGIONA		AL.			
PERSON RECORE # Person Type) [Vehic	cie # [Name	9				I leine	Sevent	v		ΙF	jection			
3 PASSENGER Date of Birth Sex	V02		UEL BRINGAS-ME	JIA					IN 30 DAY	YS)		OT EJEC		one Number	
07/26/1987 M		ERIDGE CO	HIRT, ORI ANDO P	1 32839									. 110		

Crash Date 11/16/2011	Time of Crash 5:55 PM	Date of Report 11/16/2011	Reporting Agency FLORIDA HIGHWAY	Y PATROL		Reporting FHPD110		HSMV Crash Report Number 82008616-01
Restraint Systems SHOULDER AND LAN	BELT USED		Air Bag Deployed DEPLOYMENT UNKN	OWN		Helmet Use		Eye Protection
Motor Vehicle Seating FRONT		Moto RIGH	r Vehicle Seating Position		Motor Vehic	de Seating Position: Other		
Source of Transport to NOT TRANSPORTED	Medical Facility		Name or ID	EMS Run Ni	umber	Medical Facility Transported	То	
PERSON RECOF		l l				1		
# Person Type 4 DRIVER	Vehicle V03	# Name BRIAN REDMON	D	Injury NON	Severity E	Ejection NOT EJE	CTED	Driver ReExam NO
Date of Birth Sex 03/19/1984 M	Condition at T	ime of Crash	A	ddress OAKTREE HEI	GHT, WEXFORD I	•		Phone Number
Driver License Number B8581248		State Expires FF 03/19/202					otor Vehicle Endorser	ments
Restraint Systems SHOULDER AND LAF	BELT USED	1	Air Bag Deployed NOT DEPLOYED	-	*** *	Helmet Use		Eye Protection
Motor Vehicle Seating		Moto LEF1	Vehicle Seating Position	: Seat	Motor Vehic	le Seating Position: Other		
Driver Distracted By NOT DISTRACTED					Driver Vision Obst			
Driver Actions at Time NO CONTRIBUTING	of Crash 1 (based	on judgement of Inve	stigation officer)			Time of Crash 2 (based on jud	gement of investigation	u otlicet)
Driver Actions at Time		on judgement of inve	tigation officer)		Driver Actions at T	lime of Crash 4 (based on jud	gement of investigatio	n officer)
Suspected Alcohol Use	Alcohol Tested		Alcohol Test Res	UII BAC	Suspected E	Drug Use Drug Tested TEST NOT GIVE	Drug Test Type	Drug Test Result
Source of Transport to NOT TRANSPORTED		EMS Agency	Name or ID	EMS Run Ne		Medical Facility Transported		
PERSON RECOR	RD	<u> </u>	,					
# Person Type 5 PASSENGER	Vehicle V03	# Name GILLIAM EUSTA	SE		Injury Sever	ity	Ejection NOT EJECTED	
Date of Birth Sex 06/15/1983 F	Address 8 DAVITT RO	AD SOUTH, WEXFOR	D FF 00000		· ·		•	Phone Number
Restraint Systems SHOULDER AND LAP	BELT USED		Air Bag Deployed NOT APPLICABLE			Helmet Use		ye Protection NOT APPLICABLE
Motor Vehicle Seating FRONT	Position: Row	Moto: RIGH	Vehicle Seating Position: T	: Seat	Motor Vehic	le Seating Position: Other		
Source of Transport to NOT TRANSPORTED	Medical Facility	EMS Agency	Name or ID	EMS Run No	imper	Medical Facility Transported	То	
PERSON RECOR		•		•		•		
# Person Type 6 DRIVER	Vehicle V04	VALERIE CARME	N DOMINIQUE	Injury NON-	Severity INCAPACITATING	Ejection NOT EJE	CTED	Driver ReExam NO
Date of Birth Sex 12/28/1980 F	Condition at Ti APPARENTLY	/ NORMAL		ddress 34 KAZAROS C	IR, OCOEE FL 34			Phone Number
Driver License Number D552863809680	•	State Expires FL 12/28/201		ATOR			otor Vehicle Endorsen	1
Restraint Systems SHOULDER AND LAP			Air Bag Deployed NOT DEPLOYED			Helmet Use	E	ye Protection IOT APPLICABLE
Motor Vehicle Seating FRONT	Position: Row	Motor LEFT	Vehicle Seating Position:			le Seating Position: Other		
Oriver Distracted By NOT DISTRACTED	40 114				Driver Vision Obstr VISION NOT OBS	CURED		1 0
Driver Actions at Time NO CONTRIBUTING A	CTION	· •				ime of Crash 2 (based on judg	, ,	
Driver Actions at Time	,		<u> </u>		Suspected D	ime of Crash 4 (based on judg	•	
Suspected Alcohol Use NO Source of Transport to	TEST NOT GIV			uli BAC EMS Run Nu	NO'	TEST NOT GIVE		Drug Test Resulf
EMS	wieulcas Facility	EMS Agency SEMINOLE	OUNTY FIRE	2011-11-226		Medical Facility Transported SOUTH SEMINOLE HOSPIT	rAL	
PERSON RECOR # Person Type		# Name		Linitury	Severity	Ejection		Driver ReExam
10 DRIVER Date of Birth Sex	V05 Condition at Ti	JOHN FRANK GII		NONE		NOT EJE	CTED	NO Phone Number
01/27/1929 M Driver License Number	UNKNOWN	State Expires			D, BARTOW FL 33		lor Vehicle Endorsen	
G416466290270 Restraint Systems		FL 01/27/201	CLASS E / OPER. Air Bag Deployed	ATOR		Helmet Use		ve Protection
SHOULDER AND LAP Motor Vehicle Seating I		Motor	NOT DEPLOYED Vehicle Seating Position:	Seat	Motor Vehicl	e Seating Position: Other		OT APPLICABLE
FRONT Driver Distracted By		RIGH			Driver Vision Obstr			
NOT DISTRACTED Driver Actions at Time of	of Crash 1 (based	on judgement of inves	ligation officer)		VISION NOT OBS		ement of investigation	officer)
NO CONTRIBUTING A Driver Actions at Time of	CTION		,			ime of Crash 4 (based on judg	•	,
Suspected Alcohol Use	•	Alcohol Test Typ		ŀ	Suspected D		Drug Test Type	Drug Test Result
UNKNOWN Source of Transport to	TEST NOT GIV Medical Facility	EN EMS Agency		EMS Run Nu	UNKNOWN	TEST NOT GIVE Medical Facility Transported	N	
NOT TRANSPORTED								1,0071
PERSON RECOR # Person Type	Vehicle	# Name			Injury Severi	ity	Ejection	
11 PASSENGER Date of Birth Sex	Address	ELBRIDGE GERR			NONE		NOT EJECTED	Phone Number
07/05/1933 M Restraint Systems	•	' RD, BARTOW FL 33	Air Bag Deployed			Helmet Use	ļĘ.	ye Protection
Motor Vehicle Seating I			NOT DEPLOYED Vehicle Seating Position:	Seat	Motor Vehicle	e Seating Position: Other		OT APPLICABLE
FRONT Source of Transport to I	Medical Facility	RIGH EMS Agency		EMS Run Nu	mber	Medical Facility Transported	То	
NOT TRANSPORTED WITNESS RECOF				1				
# Name 7 MICHAEL JOSE				ddress 190 OAK I AND	ING DRIVE OPA	NGE CITY FŁ 32763		Phone Number
WITNESS RECOR			1	IN ONE THIS	MIS DRIVE, ORAL	10L OH 1 L 32/03		·
# Name 8 MARILYN BLOM				ddress 818 MEADOWO	SLEN DRIVE, ORL	ANDO FL 32810		Phone Number

Crash Date Time of Crash Date of Report Reporting Agency Case Number HSMV Crash Report Number 5:55 PM 11/16/2011 Reporting Agency Case Number FLORIDA HIGHWAY PATROL REPORT Number 5:55 PM 11/16/2011 Reporting Agency Case Number FLORIDA HIGHWAY PATROL REPORT Number FLORIDA HIGHWAY PATROL

WITNESS RECORD

Name Address Phone Number
9 DAVID MICHAEL HEDENGREN 129 VALOR BOULEVARD, DAYTONA BEACH FL 32114

NARRATIVE

| ID Number | Rank | Name | Troop / Post | Officer Agency | Phone Number | 2609 | CORPORAL | A. W. MEYER | D | FLORIDA HIGHWAY PATROL | 386-736-5350

Vehicles One(V01), Two (V02), Three (V03), Four (V04) and Five (V05) were westbound on Interstate 4 (State Road 400) in the left lane approaching the Lake Mary Boulevard overpass. V02, V03, V04 and V05 had come to a stop for traffic congestion. V01 failed to stop. The front of V01 struck the rear of V02, pushing V02 forward. The front of V02 struck the rear of V03, pushing V03 forward. The front of V03 struck the rear of V04, pushing V04 forward. The front of V04 struck the rear of V05.

The impact between V01 and V02 caused V02 to catch fire. Subsequently, V01 and V02 were completely engulfed in fire. The passenger of V02 was entrapped in the vehicle and located deceased within the front passenger area of V02 when the fire was extinguished.

V05 and the driver of V05 failed to remain at the scene. D-5 made contact with the responding Trooper on scene via telephone, leaving a message in reference to his involvement in this crash. D-5 was contacted by Corporal Kibler. D-5 stated he was told by emergency personnel on scene to leave due to the immediate hazard of the incident.

The front right passenger of V02, Manuel Bringas-Mejia D.O.B. 07/25/1987, was pronounced deceased on scene on 11/16/2011 at 6:07PM by Battalion Chief Scott Verneer of the Lake Mary Fire Department.

Traffic Homicide Investigator: Corporal Jennifer B. Kibler Traffic Homicide Case Number: FHP 711-17-024 Photos taken by: Corporal Jennifer B. Kibler

REPORTING OFFICER

IVEL OIL BING	OFFICER				
ID Number	Rank	Name	Troop / Post	Officer Agency	Phone Number
2609	CORPORAL	A. W. MEYER	D	FLORIDĂ HIĞHWAY PATROL	386-736-5350

Crash Date Time of Crash Date of Report Reporting Agency Case Number HSMV Crash Report Number 11/16/2011 FLORIDA HIGHWAY PATROL REPORT REPORT Number 61/16/2011 FLORIDA HIGHWAY PATROL REPORT Number 61/16/2011 FLORIDA HIGHWAY PATROL

DIAGRAM OF CRASH

