## BOATING ACCIDENT INVESTIGATION INSTRUCTIONS FOR PRINTING/PICTURE INSERTS FWCDLE-146

VERY IMPORTANT: TO "PRINT WITHOUT COMMENTS" SIMPLY CLICK ON "FILE" SCROLL DOWN TO "PRINT" A NEW MENU WILL APPEAR. IN THE BOTTOM LEFT HAND CORNER OF THAT MENU YOU WILL SEE THE WORDS "PRINT WHAT" SELECT "DOCUMENT" THEN CLICK "OK" OR "PRINT". ALSO, TO "PRINT WITHOUT INSTRUCTION" ON THAT SAME MENU WHERE IT SAYS "PAGES" PUT "WHAT PAGE(S) YOU WANT TO PRINT". TO "INSERT PICTURES" YOU MUST "UNPROTECT" DOCUMENT THEN INSERT THE PICTURES.

The text box(es) will **not** expand when you exceed the space provide. The document must be unprotected in order to insert a picture/spell check. To unprotect the document:

- a. If there is a button on your toolbar that looks like a padlock, you must depress it (click on it) and then cut and paste the picture/spell check into the box.
- b. If there is not a button on your toolbar like that, you must:
  - i. Click "view" on the toolbar.
  - ii. Select toolbars on the menu that drops down.
  - iii. Select "forms" on the next menu that drops down.
  - iv. Now the forms toolbar with the padlock will show up. Depress the padlock and cut and paste your picture/spell check



# FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION DIVISION OF LAW ENFORCEMENT



# FLORIDA BOATING ACCIDENT INVESTIGATION REPORT

Beb South Meridian Street       Tailalassace, P. 2339-1600       REPORTING AGENCY:       PVC       Police       Shoriff         OUESTIONS CALL:       (950) 486-5600       Injury Beyond First Ad       Missing Persons       Estimated total property       \$          Total Number:       Fatalles       Injury Beyond First Ad       Missing Persons       County:	FORWA	RD CO	OPY TO:	FWC B	bating Safe	ty			Agency C	ase Number:						
Construct				Tallaha	ssee, FL 3			REPORTIN	G AGENCY:	10 CT 200		D Pol	lice		Sheriff	
Fatallities         Injury Beyond First Aid         Missing Persons         damage \$2000 or more         *           General and Geographic Information:         Time of Accident (mi);	QUESTI	ONS (	CALL:	(850) 48	38-5600					FPP		Oth Oth	ner			
Date Accident:       Time of Accident (mi):       Date LEO Arrived:       Time LEO Arrived (mi):         Nearest City:       Body of Water:       Date LEO Arrived:       Time LEO Arrived (mi):         Nearest City:       Body of Water:       Difter of State Waters:       Difter of State Waters:         Accident Site:       BaysSond       HearDace       Date LEO Arrived:       Date LEO Arrived (mi):         Accident Site:       BaysSond       HearDace       Date LEO Arrived:       Date LEO Arrived (mi):         Accident Site:       BaysSond       Manates Glos Speed       Swinning       Latitude/Longitude (decimal minutes)         Area:       MPH Limit       Other       Clain (vaves less than 6')       Upit (0-6 mph)       Air       * F         Body of Water Conditions:       Water Conditions:       Wind:       Very May estate aprimary, secondary and tertiagra acodant type for each vessel/swimmer by placing a 1, 2, or 3 in the appropriate box) (Use board parcident continuoton their datidical vessel(swimmer by placing a 1, 2, or 3 in the appropriate box) (Use board parcident continuoton their datidical vessel(swimmer by placing a 1, 2, or 3 in the appropriate box) (Use Capscilling       V-1       V-2       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer       Vessel/Swimmer         Collision wiFixed Object       FrierExplosion (Non-Fuel) <t< td=""><td>т</td><td>otal N</td><td>lumber: –</td><td>Fata</td><td>lities</td><td>lr</td><td>njury Beyor</td><td>nd First Aid</td><td>Missir</td><td>g Persons</td><td></td><td>Estimate damage</td><td>ed total p \$2000 or</td><td>property r more</td><td>s</td><td></td></t<>	т	otal N	lumber: –	Fata	lities	lr	njury Beyor	nd First Aid	Missir	g Persons		Estimate damage	ed total p \$2000 or	property r more	s	
Date of Accident:       Time of Accident (mi):       Date LEO Arrived:       Time LEO Arrived (mi):         Bearess City:       BaySound       IntelPass       Otshore         Exact Location:       Covendati       LakePool       Mantes Waters       Otshore         Accident: Ster:       BaySound       IntelPass       OceanGati       LakePool       Mantes Waters       Covendation:         Accident: Ster:       BaySound       Mantee Ide Speed       Swimming       Latitude/Longitude (decimal minutes)         Area:       MPH Limit       Other       Chain (vaves liss than 6')       Light (J-6 mph)       Air       ' F         Gear       Cloudy       Good       Daw       Calm (vaves liss than 6')       Moderate (/14 mph)       Water       ' F         Check all that Apply       Poor:       Dow Marke a primary, secondary and terlary accident type for each vessel/swimmer by placing a 1, 2, or 3 in the appropriate box) (Use boaing accident continuator their additional vessel)       V-1       V-2       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer       Other:         Collision w/Fixed Object       Fire/Explosion (Non-Fuel)       Person Struck by SkegProp       Storing Group       Other:       Vessel/Swimmer         V-1       V-2       V							To	tal Vessels/Swi	mmers:		Cour	nty:				
Nearest Udry	Date of A	Accide	nt:			Time of Ac	cident (mil):	l	Date LE	O Arrived:			Time LE	O Arrive	d (mil):	
Accident Site:       BaySound       IntelPass       OceanGut       LatePord       MarshSwamp       Provertex       PortMarsh       CanalCut         Restricted       Idle Speed       Manatee Idle Speed       Swimming       Latitude/Longitude (decimal minutes)         Accident Site:       MPH Limit       Other       Latitude/Longitude (decimal minutes)         Weather:       Wish       MPH Limit       Other       Air       * F         Image:       Rain       Fair       Day       Chopy (waves 5' to 2)       Moderate (714 mph)       Water       * F         Hazy       Rain       Fair       Day       Noopy (waves 2' to 5)       Strong Gurrent       Tidal Current         Accident Type:       Monate primary, scordary and terina accident pot for and vessels/wimmer by placing a 1.2, or 3 in the appropriate box) (Use       Storng Gurrent       V.1       V.2       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer       V.1       V.2       Vessel/Swimmer       V.1       V.2       Vessel/Swimmer         Collision wifked Object       Fire/Explosion (Non-Fuel)       Person Struck by Sba1       Other:       Dessel/Swimmer         Collision wifked Object       Collision wifked Object       Fire/Explosion (Non-Fuel)       Person Struck by Sba2       Other:       Dessel/Swimmer	Nearest	City:					Boo	ly of Water:				State W	laters		Offs	hore
Metricited       Indextoder       Indextoder <td>was suble in</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>_</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>est Mar</td> <td>ker:</td> <td></td>	was suble in							_						est Mar	ker:	
Mestricted       Slow Speed       Manatee Slow Speed       Permit Code:	Accident	Site:			_	1.201 N/ 101 1				Marsh/Swamp		River/Creel	k [	Port/Ha	rbor	Canal/Cut
Clear       Cloudy       Good       Dawn       Clear (waves less than 6')       Light (0-5 mph)       Xir       * F         Hazy       Rain       Fair       Dawn       Choine (waves set to 2)       Moderate (714 mph)       Xir       * F         Fog       Thunderstorm       Poor       Dusk       Rough (waves 5' to 2)       Moderate (714 mph)       Strong Current       Total Current         Accident Type:       (You may enter a primary, secondary and trafay acodent type for each vessel/swimmer by placing a 1, 2, or 3 in the appropriate box) (Use basing acodent continuation sheet for additional vessels)       Strong Current       Total Current         Accident Type:       (You may enter a primary, secondary and trafay acodent type for each vessel/swimmer by placing a 1, 2, or 3 in the appropriate box) (Use basing acodent continuation sheet for additional vessels)       Strong Current       Total Current         Collision w/ixed Object       Fire(Explosion (Non-Fuel)       Person Struck by Boat       Person Struck by Skee Prop         Collision w/ixed Object       Fire(Explosion (Non-Fuel)       Person Struck by Skee Prop       Person Struck by Skee Prop         Collision w/ixed Object       Sikier Hit Object       Other:       Sikier Hit Object       Other:         Fail on PWC       Skier Hit Object       Other:       Vessel/Swimmer       V1       V2       Vessel/Swimmer       V1 </td <td></td> <td></td> <td>Slov</td> <td>w Speed</td> <td></td> <td>Manatee S</td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td>Latitud</td> <td>le/Longit</td> <td>ude (de</td> <td>cimal m</td> <td>inutes)</td>			Slov	w Speed		Manatee S			-			Latitud	le/Longit	ude (de	cimal m	inutes)
Clear       Cloudy       Good       Dawn       Calm (waves less than 6')       Light (0-6 mph)       Air       * F         Hazy       Rain       Fair       Day       Choppy (waves 5' to 2')       Moderate (714 mph)       Matr       * F         (Check all that Apply)       I busk       Poorp (waves 5' to 2')       Storm (over 258 mph)       Storm (over 258 mph					Visibility	:	Wat	ter Condition	s:	Wind:		one ·	Temperat	ture:		
<pre></pre>	Company and the second se					🗌 Dav	vn 🗆	Calm (waves	less than 6")				•			۴F
□ Flor       □ Thunderstorm       □ Poor       □ Dusk       □ Pough (waves 2'to 6')       □ Strong (15-25 mph)       □ River Current       □ Tidal Current         Accident Type:       (You may enter a primary, secondary and terilary accident type for each vessel/swimmer by placing a 1, 2, or 3 in the appropriate box) (Use boating accident continuation sheet for additional vessels)       V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         Capsizing       Capsizing       Capsizing       Fire/Explosion (Fuel)       Starting Engine         Collision wifvised Object       Fire/Explosion (Non-Fuel)       Person Struck by Boat         Collision wifvised Object/Person       Fire/Explosion (Non-Fuel)       Person Struck by Boat         Collision wifvised Object       Sinking       Vessel/Wake Damage         Fall on PWC       Skier Hil Object       Other:       Other:         Fall on PWC       Skier Mishap/Fall       Other:       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer       V-1		100						Choppy (wave	es 6" to 2')			oh)	Water	-		
(You may enter a primary, secondary and teritary accident type for each vessel/swimmer by placing a 1, 2, or 3 in the appropriate box) (Use boating accident continuation sheet for additional vessels)         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer					Poor											
V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer				y)	0/								River	Current		Tidal Current
V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer	Accident	туре			boat	i may enter a ing accident	continuation	sheet for additi	tiary accident type onal vessels)	for each vessel	swimmer by	placing	a 1, 2, or 3	in the ap	ppropriate	e box) (Use
Collision w/Fixed Object       Fire/Explosion (Non-Fuel)       Person Struck by Boat         Col. w/Floating Object/Person       Flooding (Swamping)       Person Struck by Skeg/Prop         Collision w/Vessel       Grounding       Struck Underwater Object         Fall in Boat       Sinking       Vessel Wake Damage         Falls Overboard       Skier Hit Object       Other:         Fall on PWC       Skier Mishap/Fall         What Contributed to the Accident:       (You may enter up to three (3) contributing causes for each Vessel)       V+1         V-1       V-2       Vessel/Swimmer       V-1       V-2         Alcohol Use       Ignition of Fuel Vapor       Other :       Other :         Careless/Reckless       Improper Anchoring       Overloading       Sharp Turn         Dam or Lock       Lack of Proper Lights       Skier or Occ. Behavior       Standing/Sitting on Gunwale, Bow or Transom         Equipment Failure (Below)       Machinery Failure (Below)       Vision Obstructed       Vision Obstructed         Hazardous Water       Operator Inattention       Standing/Sitting on Gunwale, Bow or Transom       Hazardous Water         Hazardous Water       Operator Inattention       Stail Demasting       Vision Obstructed         Hazardous Water       Operator Inattention       Sail Demasting <t< td=""><td>V-1</td><td></td><td></td><td></td><td>ssel/Swim</td><td>mer</td><td></td><td></td><td></td><td>vimmer</td><td>V-1</td><td>V-2</td><td></td><td>Ves</td><td>sel/Swi</td><td>mmer</td></t<>	V-1				ssel/Swim	mer				vimmer	V-1	V-2		Ves	sel/Swi	mmer
Col. w/Floating Object/Person       Floading (Swamping)       Person Struck by Skeg/Prop         Collision w/Vessel       Grounding       Struck Underwater Object         Fall in Boat       Sinking       Vessel Wake Damage         Fall or PWC       Skier Hit Object       Other:         Fall on PWC       Skier Hit Object       Other:         What Contributed to the Accident:       (You may enter up to three (3) contributing causes for each Vessel)         V-1       V-2       Vessel/Swimmer       V-1         Q       Alcohol Use       Ignition of Fuel Vapor       Other :         Q       Careless/Reckless       Improper Anchoring       Overloading         Dam or Lock       Lack of Proper Lights       Skier or Occ. Behavior         Dam or Lock       Lack of Proper Lights       Standing/Sitting on Gunwale, Bow or Transom         Equipment Failure (Below)       Machinery Failure (Below)       Vision Obstructed         Hatarow       Off Throttle Steering – Jet       Weather         Hull Failure       Operator Intexpreter       Sail Demasting         V1 V-2       Vessel       V-1       V-2         V2       Vessel       Vessel/Swimmer       V-1         V1 V-2       Vessel       V-1       V-2         V1 V2		_							Fire/Explosion (	Fuel)			Start	ing Eng	ine	
Collision w/Vessel       Grounding       Struck Underwater Opject         Fall in Boat       Sinking       Vessel Wake Damage         Falls Overboard       Skier Hit Object       Other:         Falls Overboard       Skier Hit Object       Other:         Falls Overboard       Skier Hit Object       Other:         Falls Overboard       Skier Mishap/Fall         What Contributed to the Accident:       (You may enter up to three (3) contributing causes for each Vessel)         V-1       V-2       Vessel/Swimmer         V-1       V-2       Vessel/Swimmer         Alcohol Use       Ignition of Fuel Vapor       Other :         Careless/Reckless       Improper Anchoring       Overloading         Dam or Lock       Lack of Proper Loading       Skiar or Occ. Behavior         Drug Use       Lack of Vessel Flotation       Standing/Sitting on Gunwale, Bow or Transom         Equipment Failure (Below)       Machinery Failure (Below)       Violation of Navigation Rule         Hazardous Water       Operator Inattention       Vision Obstructed         Hazardous Water       Operator Inattention       Weather         Hazardous Water       Operator Inattention       Sail Demasting         Hazardous Water       Steering System       Auxiliary Equipment       Sai		_							Fire/Explosion (	Non-Fuel)			Pers	on Struc	k by Bo	at
	-					ct/Person			Flooding (Swan	nping)			Pers	on Struc	k by Sk	eg/Prop
Falls Overboard       Skier Hit Object       Other:         Fall on PWC       Skier Mishap/Fall         What Contributed to the Accident:       (You may enter up to three (3) contributing causes for each Vessel)         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         Alcohol Use       Ignition of Fuel Vapor       Other :       Other :         Careless/Reckless       Improper Anchoring       Overloading         Dam or Lock       Lack of Proper Lights       Skier or Occ. Behavior         Drug Use       Lack of Vessel Flotation       Standing/Sitting on Gunwale, Bow or Transom         Equipment Failure (Below)       Machinery Failure (Below)       Violation of Navigation Rule         Failure to Vent Fumes       Off Throttle Steering – Jet       Vision Obstructed         Hul Failure       Operator Inattention       Vision Obstructed         Hul Failure       Operator Insperience       Vin V-2       Vessel         Machinery Failure:       (Indicate the equipment that failed)       V-1       V-2         Hul Failure       Operator Insperience       Vin V-2       Vessel       V-1         Machinery Failure:       Indicate the equipment that failed)       V-1       V-2       Vessel         V-1       V-2       Vessel <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td>Struc</td> <td>k Unde</td> <td>rwater C</td> <td>bject</td>		-								-			Struc	k Unde	rwater C	bject
Fall on PWC       Skier Mishap/Fall         What Contributed to the Accident:       (You may enter up to three (3) contributing causes for each Vessel)         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         Alcohol Use       Ignition of Fuel Vapor       Other :       Other :       Vessel/Swimmer         Careless/Reckless       Improper Anchoring       Overloading       Overloading         Dam or Lock       Lack of Proper Loading       Skier or Occ. Behavior         Drug Use       Lack of Vessel Floation       Standing/Sitting on Gunwale, Bow or Transom         Equipment Failure (Below)       Machinery Failure (Below)       Violation of Navigation Rule         Excessive Speed       No Proper Lock-Out       Vision Obstructed         Failure to Vent Fumes       Off Throttle Steering – Jet       Weather         Hazardous Water       Operator Intexperience       Weather         Machinery Failure:       (Indicate every system that failed for each vessel)       V-1       V-2       Vessel         V-1       V-2       Vessel       V-1       V-2       Vessel       Sail Demasting         Bilterinery Failure       Steering System       Auxiliary Equipment       Sail Demasting       Sail Demasting         Bignie Failure       Trottle Failu		_							•	-			Vess	el Wake	Damag	je
What Contributed to the Accident:       (You may enter up to three (3) contributing causes for each Vessel)         V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         Alcohol Use               Ignition of Fuel Vapor               Other :         Careless/Reckless               Improper Anchoring               Overloading         Dam or Lock               Lack of Proper Lights               Skier or Occ. Behavior         Drug Use               Lack of Vessel Flotation               Starf or Occ. Behavior         Equipment Failure (Below)               Machinery Failure (Below)               Violation of Navigation Rule         Excessive Speed               No Proper Look-Out               Vision Obstructed         Hazardous Water               Operator Inattention               Weather         Haltardous Water               Operator Inexperience               Auxiliary Equipment               Sail Demasting         V-1       V-2       Vessel       V-1       V-2       Vessel       V-1       V-2       Vessel                 Electrical System               Steering System               Auxiliary Equipment               Sail Demasting                 En	and the second second	-							· · · · · · · · · · · · · · · · · · ·	-			Othe	r:		
V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer       V-1       V-2       Vessel/Swimmer         Alcohol Use       Ignition of Fuel Vapor       Other :       Other :       Overloading         Careless/Reckless       Improper Anchoring       Overloading       Sharp Turn         Dam or Lock       Improper Loading       Sharp Turn         Dam or Lock       Lack of Proper Lights       Skier or Occ. Behavior         Equipment Failure (Below)       Machinery Failure (Below)       Standing/Sitting on Gunwale, Bow or Transom         Equipment Failure (Below)       Machinery Failure (Below)       Violation of Navigation Rule         Excessive Speed       Operator Intertion       Vision Obstructed         Hazardous Water       Operator Intertion       Vessel         Hull Failure       Operator Interprience       V-1       V-2         Vessel       V-1       V-2       Vessel       V-1         V-1       V-2       Vessel       V-1       V-2       Vessel         V-1       V-2       Vessel       V-1       V-2       Vessel       V-1       V-2       Vessel         V-1       V-2       Vessel       V-1       V-2       Vessel       V-1       V-2       Vesse	What Ca			1010 500 8												
Alcohol Use       Ignition of Fuel Vapor       Other :									<ul> <li>A second s</li></ul>		loop in t					
Careless/Reckless       Improper Anchoring       Other:         Congested Waters       Improper Anchoring       Overloading         Dam or Lock       Improper Loading       Sharp Turn         Dam or Lock       Lack of Proper Lights       Skier or Occ. Behavior         Equipment Failure (Below)       Lack of Vessel Flotation       Standing/Sitting on Gunwale, Bow or Transom         Equipment Failure (Below)       Machinery Failure (Below)       Violation of Navigation Rule         Excessive Speed       No Proper Look-Out       Vision Obstructed         Failure to Vent Fumes       Off Throttle Steering – Jet       Weather         Hazardous Water       Operator Inattention       Weather         Hull Failure       Operator Inexperience       V1       V-2         Vessel       V-1       V-2       Vessel         Electrical System       Steering System       Auxiliary Equipment       Sail Demasting         Engine Failure       Throttle Failure       Communications       Seat Broke Loose         Fuel System       Ventilation System       Fire Extinguishers       Sound Producing         Shift Failure       Starting Eng. In Gear       PFD's       Visual Distress					ammer								Ve	essel/Sv	vimmer	
Image: Congested Waters       Improper Nationing       Improper Loading         Improper Loading       Sharp Turn         Dam or Lock       Lack of Proper Lights       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       Skier or Occ. Behavior       Skier or Occ. Behavior         Improper Loading       No Proper Look-Out       Violation of Navigation Rule         Improper Loading       Machinery Failure       Vision Obstructed       Vision Obstructed         Improper Loading       Improper Loading       Improper Loading       Vision Obstructed       Vision Obstructed         Improper Loading       Improper Loading       Improper Look-Out       Vision Obstructed       Vision Obstructed         Improper Loading       Imp					c		Sec. 12.									
Image: Dam or Lock       Image: Lack of Proper Lights       Image: Charge Full         Image: Drug Use       Image: Lack of Proper Lights       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Lack of Vessel Flotation       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Lack of Vessel Flotation       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Lack of Vessel Flotation       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Lack of Vessel Flotation       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Lack of Vessel Flotation       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Lack of Vessel Flotation       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Lack of Vessel Flotation       Image: Skier or Occ. Behavior         Image: Drug Use       Image: Drug Use       Violation of Navigation Rule         Image: Drug Use       Image: Drug Use       Violation of Navigation Rule         Image: Drug Use       Image: Drug Use       Violation of Navigation Rule         Image: Drug Use       Image: Drug Use       Image: Drug Use       Vision Obstructed         Image: Drug Use       Image: Drug Use       Image: Drug Use       Vision Obstructed       Vision Obstructed         Image: Drug Use       Image: Drug Use										님						
Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State of Octor Definition         Image: State of Octor Definition       Image: State			10		•					H	_	10000		ovier		
Image: Construction of the construc			Drug Us	е											ala Rou	or Transom
Excessive Speed       No Proper Look-Out       Vision Obstructed         Failure to Vent Fumes       Off Throttle Steering – Jet       Weather         Hazardous Water       Operator Inattention       Weather         Hull Failure       Operator Instention       Vision Obstructed         Hull Failure       Operator Interprince       Weather         Machinery Failure:       (Indicate every system that failed for each vessel)       Equipment Failure:       (Indicate the equipment that failed)         V-1       V-2       Vessel       V-1       V-2       Vessel         Electrical System       Steering System       Auxiliary Equipment       Sail Demasting         Engine Failure       Throttle Failure       Communications       Seat Broke Loose         Fuel System       Ventilation System       Fire Extinguishers       Sound Producing         Shift Failure       Starting Eng. In Gear       PFD's       Visual Distress			Equipme	ent Failure	e (Below)		120 million (1997)						20 E C			voi mansom
Image: Specific state of the state of t		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Excessiv	ve Speed					12.52				-			
Hull Failure       Operator Inexperience         Machinery Failure:       (Indicate every system that failed for each vessel)       Equipment Failure:       (Indicate the equipment that failed)         V-1       V-2       Vessel       V-1       V-2       Vessel       V-1       V-2       Vessel         Electrical System       Steering System       Auxiliary Equipment       Sail Demasting         Engine Failure       Throttle Failure       Communications       Sail Demasting         Fuel System       Ventilation System       Fire Extinguishers       Sound Producing         Shift Failure       Starting Eng. In Gear       PFD's       Visual Distress						107		Off Throttle	Steering - Jet		1000 C					
Machinery Failure:       (Indicate every system that failed for each vessel)       Equipment Failure:       (Indicate the equipment that failed)         V-1       V-2       Vessel       Vessel <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>																
V-1       V-2       Vessel       V-1       V-2       Vessel       V-1       V-2       Vessel         Image: Ima																
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Shift Failure     Starting Eng. In Gear     PFD's     Visual Distress																
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FL	LORIDA BOATING ACCIDENT INVESTIGATION REPORT	Agency Case	Number:
	I       V-2       Vessel       V-1       V-2       Vessel         I       Airboat       I       Personal Watercraft       Ves         I       Cabin Motorboat       I       Pontoon Boat       I         I       Canoe/Kayak       I       Rowboat (Jon)       Ves         I       Houseboat       I       Sail-Aux. Power       Tot         I       Mini Jet Boat       I       Sail(Only)       I         I       Open Motorboat       I       Seaplane       Ves         I       Other:       Ves       Ves       I         I       Hull Material:       Fuel:       Ves	ssel 1 ssel 2 al HP ssel 1 ssel 2	Propulsion:       Safety Equipment:         V-1       V-2       Vessel         Air Thrust       Req. PFD's on board         Manual       PFD's accessible         Propeller       Fire Ext. on Board         Sail       Fire Ext. Used         Water Jet       Nav. Lights Operational         Engine:       Nav. Lights Turned On         V-1       V-2       Vessel         Airboat       Was Vessel:         Inboard       V-1       V-2
	Aluminum       Rigid Hull Infl.       Diese         Fiberglass       Rubber/Vinyl       Elect         Steel       Wood       Gasc         Other:       Prop.         peration at Time of Accident:       (Enter up to 3 for each Vessel)	ric Jine ane	Outboard       Rented         I/O       Borrowed (Not in Household)         V-1       V-2         Sailing       Other:         Other:       Make/Surf Jumping         Rowing/Paddling         Towing a Boat         Docked (Moored)
		" V-1	V-2     Vessel     V-1     V-2     Vessel       Recreational Cruising     Image: Source Starting Engine     Starting Engine       Scuba Diving     Image: Starting Engine     Swimming       Skiing (Surfing, etc.)     Image: Swimming       Other:     Image: Starting Engine
VESSEL	OPERATOR/SWIMMER INFO:	# of POB ] Less than 10 ] Over 40 mph	A Recreational Commercial Government  Commercial Government  Status  State Issued Injured  Nissing Fatality
	Last Name First Name Street City State	Zip Code	MI Date of Birth Fill out injury/fatal data sheet as () required Home Phone Estimated Damage: () \$ Work Phone
OR S		State Red Cros	BUI Info     BAC:     Gender     M       Refused     Arrest     PFD Used     PFD Used
WIMME	Last Name  First Name    Street	Insurance:	MI Drivers License State Issued () – Date of Birth Phone # Yes No Insurance Company Policy #
ת	NON-FATAL OR UNINJURED OCCUPANT INFO:       (ATTACH INJURD FOR EACH IN	JRY/FATAL DAT, JURY OR FATAL DOB: DOB: DOB: DOB:	A SHEETS Gender Person DED Lload Person

Agency Case Number:

	Registration o	r Documentation #		Hull ID Number			Name of Ve	essel Y	'ear
<	Length		Make	Model	# of POB	# of Fatal	# of Injured	# of Skiers Being To	wed
ES	Estimated Speed		known 20 mph	None 21-40 mph	Less than 10 m		Definition of Vess	sel:	
S			•					Status	vernment
	OF LINATON/		Drivers Licer	nse or Boater ID #		Stat	e Issued	Uninjured	Injured
ľ	Last Name		First Na	me		Date	E	] Missing [] ill out injury/fatal data si	Fatality
							re	equired	neelas
	Street					Hom		stimated Damage:	
	City			State	Zip Code	() Wor	- k Phone	\$	_
	Operator	Experience		Operator Educatio	n	BUI Info	BAC:	Gender	
	Under 10 Hrs	10-100 Hrs				Refused	Arrest		
N O	Over 100 Hrs Total Hours In Th	nis Type Vessel:	USPS Under	None     None	Red Cross     10-100 Hrs	Been Drink Over 100 H		Person Can Swim Person Was Ejected	
	Owner Info: Fi	ill in owner's name and a	ddress. Check if also	o operator or	occupant if occupa	ant, use occupant s	section injury/fatal data		
N S	Last Name		 First Name				rivers License	State Issue	
<u>W I M M E</u>				· .	_			() -	iu .
N N	Street					e of Birth		Phone #	
ΠĒ	City			tate Zip Code		Yes No Insu	Irance Company	Policy #	
R	NON-EATAL	DR UNINJURED			JURY/FATAL DATA SHE	ETS FOR GE	ender Persor	PED Used	Person
	<u> </u>			) –	RY OR FATALITY) DOB:	М	F Ejected		an Swim
				) –	DOB:	_			
				) –	DOB:				
	Oc4 Name:		_ Phone:(		DOB:				
Brie	of Synopsis of Acc	ident: (Attach o	offense incident narra	tive sheets for more detaile	ed description) Synopsis fo	r USCG database	use. A	Accident Descriptors:	
								(Check all that apply)	
								Boat Found Capsized	
								Boat Found Upright Dr	rifting
								Boat Struck by Lightnin	ng
								Carbon Monoxide Invo	olved
								Commercial Vessel	
								Hit and Run (left scene	e)
								Parasailing Accident	
								Runaway Boat	
								Victim Entangled in Lir	ne
								Other:	
							-		
Nor	Veccel Dreneuty F					·			
	-Vessel Property [ cribe damages prop		ge excluding the ves	ssels involved or their con	itents 🔲 Yes	🔲 No	If yes, the e	estimated amount: \$	
		Last:		Firs	t:		M	l:	
Pror		Street:					/ "	··· .	
	perty Owner								
	mation	City			State Zip C	ode	(	) – Phone #	-

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Rule 68D-21.004, F.A.C

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Agency Case Number:

	lf ann	olicable, diagram exactly		A OF ACCIDENT he direction of boats involved	l before, during and aft	er accident.	
				I NOT TO SCALE	····· <b>V</b>		e North with an Arrow
						(	
Violations:		Ve	essel Priority: Ve	essel # Stand or	n Vessel # _	Give Way	N/A
Vessel #	Violator's Name (Jus Operator	st check box if operator)	Statute #	Violation		arning 🔲 Pending	UBC/Warning #
	Operator Operator					itation INO action (arning Pending itation No action (arning Pending	
	Operator Operator Operator					itation I No action (arning Pending itation No action (arning Pending	
Officer Com	Operator operator					itation I No action /arning I Pending	
Agency				District/F	legion	Officer's Sign	ature
Street				Phon		Print Officer Name	ID #
City	pervisor/Reviewer Signature		State Zip Coo	le ORI Nu Print Supervisor/Reviewer N		Date Comple	eted
Investigativ		clude total hours for resp		k investigation for officer com			
Boat Hr							craft Engine Hrs.
F-4 14		DO NOT COMPLETE B	elow this line – FW	C HQ BOATING SAFETY R	EVIEWING AUTHORIT	TY ONLY	
(Fo	ccident Classification: r Statistical use)	Recreational	Commercial	Government	Off-Shore	Non-Reportable	Reportable
Primary Ty	ype Secondary Type	Tertiary Type	Primary Cause	Secondary Cause	Tertiary Cause	Reviewed By	ID #

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Agency Case Number:

		and the state of the	OPERATOR DATA	and an and a second	
<	OPERATOR INFORMATION	Last Name		First Name	Ml
IES	Street	( )	City	Sta	ate Zip Code
S E	( ) - Home Phone	Work Phone	Date of Birth	Race	Sex: Female
Г	Drivers License	State Issued	Violations	Experience	Status: ☐ Injured     Injured     Yes ☐ Yes
	Instruction: No /Drugs:	□ Yes Field □ Yes □ No Sobriety: □ No	BAC Ves <u>%</u> Test: No Result	- Drugs: Drugs: PFD:	□ No Swim: □ No
	Location:		VESSEL DATA		cted: 🗌 Yes 🗌 No
	OWNER'S INFORMATION:	Check if also	on board		
		Last Name		First Name	MI
	Street		City		ate Zip Code
OR	Registration or Documentation #	Hull ID Number	Beam	Name of Vesse	el Year 
S		# of Engine		Maker Hp Capacity	Person Capacity
١N		I # of Persons on Board		'entilation	Other Equipment
<u> </u>	Safety Exam: Current: PFDs	Ves No FIRE EXTINGUISHERS	By: FWC SPD	Police Sheriff	FPP Other VDS
ER	Yes         No           Proper Type         □         □         A	Yes   No     pproved <ul> <li> <li> </li> <li> </li></li></ul>	Yes No Proper Type	Yes No Displayed:	YesNoApproved
~		erviceable	Used	Proper Type	Type  Serviceable
	Serviceable T	ype:	OCCUPANTS		Used
	OCCUPANTS INFORMATION #	#1: Last Name	CACACIONALIAN RO	First Name	
	Street		City		tate Zip Code
	Date of Birth	Status: Uninjured Sex:	<b>FT 1 1 1</b>	Witness: V	es Instruction: Yes
		□ Yes BAC □ Yes _ □ No Test:: □ No	%_ Drugs: ☐ Yes Result ☐ No	PED: Elected:	□ Yes □ No Swim: □ Yes □ No
		10			
	OCCUPANTS INFORMATION	#2: Last Name		First Name	MI
N N	Street	Status: Uninjured Sex:	City	Mitagoni Y	State Zip Code es Instruction: Ves
UMB		∐ Injured □ Yes BAC □ Yes _	% 🛛 Yes	ce LIN BED: Yes Finatodi	O Yes Vies
BER	Drugs:  No Sobriety: Location:	No Test:: No	Result Drugs: No		
	OCCUPANTS INFORMATION	#3: Last Name		First Name	MI
	Street	Status: Uninjured Sov	City Male		State Zip Code
	Date of Birth Alcohol/	Status: Doninjured Sex: Injured Sex: Yes BAC Yes _	Female Ra	ce Witness:	
		No Test:: No	% Drugs: ☐ Yes Result Drugs: ☐ No	PFD: Ves Ejected:	No Swim: No

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Agency Case Number: \_\_\_\_\_

	and the second	and the second second	OPERA	FOR DATA		A STATE OF A		
<	OPERATOR INFORM	ATION: Last Name	)	First Name MI				
m	Street		Cit	У	St	ate Zip Code		
I S S	Home Phone	(	) – prk Phone	Date of Birth	Race	── Sex: ☐ Male ☐ Female		
	Drivers License	_	State Issued	Violations	Experience	─ Status: □ Uninjured □ Injured		
	Instalction.	lcohol 🗌 Yes 🛛 F Drugs: 🔲 No Sobri		☐ Yes <u>%</u> Dri ☐ No Result Dri	TIOS' PED	□ Yes Swim: □ Yes □ No		
	Location:	- All States	VECC	ELDATA	Eje	cted: 🔲 Yes . 🗌 No		
	OWNER'S INFORMAT	Check if also	operator or on board					
	OWNER S INFORMATI	Last Name		Fi	irst Name	MI		
	Street		Cit	у	St	ate Zip Code		
о	Registration or Documentation #	ŧ	Hull ID Number		Name of Vesse	el Year		
R	Length	Make	Model	Beam Dept	h Hull Type	Hull Material		
N S	Propulsion		of Engine Total HI		Hp Capacity	Person Capacity		
SWIMM			No By: [	FWC Police	Sheriff	Other Equipment		
ME	PFDs Yes N	FIRE EXTING	JISHERS es No	SPD Yes No	LIGHTS Yes No	VDS Yes No		
R		Approved C Serviceable				Approved		
		Used [ Type:			ceable	Serviceable		
			OCCI	IPANTS				
	OCCUPANTS INFORMA	TION #1: Last Name		Fi	rst Name	MI		
	Street		City		D Ye	ate Zip Code		
	Date of Birth Alcohol/ D Yes	Field ☐ Yes BA	jured Fema	ale Race	Witness:			
			No Result	Drugs: Drugs: No	). Floctod.	□ Yes Swim: □ Yes □ No Swim: □ No		
	OCCUPANTS INFORM	ATION #2: Last Nam	0		First Name			
z	Street			ity		MI tate Zip Code		
	Date of Birth	Status: ☐ Ui □ In	ninjured <sub>Sex</sub> . 🛛 Male		Witness: D No	es lastruction 🗌 Yes		
NUMBER		Field ☐ Yes BAC riety: ☐ No Test:	; □ Yes%	Drugs: Ves No	. Yes	☐ Yes ☐ Yes ☐ Yes ☐ No ☐ No		
E R	Location:							
	OCCUPANTS INFORM	ATION #3: Last Nam	le	F	First Name	MI		
	Street	Status: 🔲 U	ninjured Sex: Male	ity		tate Zip Code		
		Field Yes BAC	ured Dex. D Fema	Ne Race	Witness: No			
	Drugs: 🔲 No Sob	riety: 🗋 No Test:	: 🗋 No Result	Drugs: I No PFD		I No Swim: I No		
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#### ACCIDENT DESCRIPTION NARRATIVE

DESCRIBE WHAT HAPPENED (Sequence of events. Include failure of equipment. Continue on additional sheets if necessary. Include any information regarding the involvement of alcohol and/or drugs in causing or contributing to the accident. Include any descriptive information about the use of PFDs or fire extinguishers.)

#### ACCIDENT DESCRIPTION NARRATIVE

DESCRIBE WHAT HAPPENED (Sequence of events. Include failure of equipment. Continue on additional sheets if necessary. Include any information regarding the involvement of alcohol and/or drugs in causing or contributing to the accident. Include any descriptive information about the use of PFDs or fire extinguishers.)

Agency Case Number:

	_ Injured	Missina	(Body not	located) Vietim	Can Swim		cupant [	] Operator		immer
	Type: Fatality	-	Was Ejecte	<i>,</i>	Can Not Swim		Shore/Dock	· · ·	3w	
2			Was Ejecit				Shore/Dock L	Skier	Gender:	Male
	Last Name		First	lamo			Date of Birth	<u> </u>	<b>T</b>	E Female
S	Last Name		111511	vanie	MI		Date of Birth		Treatment:	
S	Street						( ) – Home Phone		Treatn	
	Jueer						Home Phone	)		ed to Hospital ed Treatment
ľ	City			State	Zip Code		( ) – Work Phone			eu meatment
	Injury Caused By:	P	Primary &	Secondary Injury	PFD Types Used:			4		$\sim$
	Impact with Boat		P S	becondary injury		ר ר		>	4	
		-		A		V		15	0	The
		-		Amputation				XX	12-	KAL
	Impact with Fixed 0	•		Back Injury	Non-Inflatable		1 bit	FTA	- M.	INA
	Impact with Floatin			Broken Bone(s)	Inflatable		AN )	KIV	AF	ATT
0	Struck by Boat	[		Burn(s)	Physical Condition:		EV V	500 1	Test -	
Л	Propeller or Skeg	[		Contusion(s)	Handicapped		INK	-4	<u>}</u>	4-1
ko	Other:	Γ		Dislocation(s)	inf. Alc./Drug		1 105	4	<u>}</u>	-{}i
Ž				Head Injury	Normal		$I = \Lambda \Lambda$	/	۱.	(M)
≤	Victim Activity:	ſ		Hypothermia				3	F	R A
SWIMME		ſ		Internal Injury(ies)	Other:			Injury/Eat	al Synopsis	/ `
2		ſ		Laceration(s)				injury/r au	ai Synopsis	
	Hunting	ſ	Π Π	Neck Injury	Unknown					
Я	PWC Cruising	Ī	5 6	Shock	Death Caused By:					
~	Scuba Diving	Ī	$\overline{\Box}$	Spinal Injury	Drowning					
	Snorkeling	[		Sprain/Strain	Hypothermia					
	Swimming	[		Teeth/Jaw	Trauma					
	Water-skiing				Other:					
	Other:									,
	_ Injured	Missing	(Body not	located) Victim	Can Swim		cupant F	] Operator	□ Swi	immer
	Type:	-	(Body not Was Ejecte		Can Swim Can Not Swim			] Operator		immer
<ul> <li></li> </ul>		-	(Body not Was Ejecte		Can Swim Can Not Swim		cupant [ Shore/Dock [	Operator	Gender:	Male
VES		-		ed Info.:			•	Skier		
Ш	Last Name	-	Was Ejecte	ed Info.:	Can Not Swim		Shore/Dock [ Date of Birth	Skier	Gender:	☐ Male ☐ Female
ES	Type: Fatality	-	Was Ejecte	ed Info.:	Can Not Swim		Shore/Dock	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESS	Last Name	-	Was Ejecte	vame	Can Not Swim		Date of Birth ( ) – Home Phone ( ) –	Skier	Gender: Treatment:	Male Female
ESS	Last Name Street	Person V	Was Ejecte First N	Name	Can Not Swim MI Zip Code		Shore/Dock [ Date of Birth	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESS	Iype:       Fatality         Last Name	Person V	Was Ejecte First N	vame	Can Not Swim MI Zip Code PFD Types Used:	<u> </u>	Date of Birth ( ) – Home Phone ( ) –	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESS	Iype:       Fatality         Last Name	Person V	Was Ejecte First N Primary & S P S	Name State Secondary Injury	Can Not Swim	<u> </u>	Date of Birth ( ) – Home Phone ( ) –	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESS	Iype:       Fatality         Last Name	Person V	Was Ejecte         First N         Primary & S         P         S	Amputation	Can Not Swim Can Not Swim MI Zip Code PFD Types Used: III III III	<u> </u>	Date of Birth ( ) – Home Phone ( ) –	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESS	Iype:       Fatality         Last Name	Person V P Dbject	Was Ejecte         First N         Primary & S         P         S         I         I	Name State Secondary Injury Amputation Back Injury		<u> </u>	Date of Birth ( ) – Home Phone ( ) –	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESSEL	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Was Ejecte         First N         Primary & S         P         S         I         I	Amputation Back Injury Broken Bone(s)		<u> </u>	Date of Birth Date of Birth Home Phone	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESSEL	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Vas Ejecte First N Primary & S P S D D D D D D	Amputation Back Injury Broken Bone(s) Burn(s)	Can Not Swim Can Not Swim MI Zip Code PFD Types Used: IIIIII IIIIII IV Non-Inflatable Inflatable Physical Condition:	<u> </u>	Date of Birth Date of Birth Home Phone	Skier	Gender: Treatment:	Male Female nent ed to Hospital
ESSEL	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Was Ejecte         First N         Primary & S         P         S         I         I	Amputation Back Injury Broken Bone(s)		<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt Refuse	Male Female nent ed to Hospital
ESSEL OR	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Vas Ejecte First N Primary & S P S D D D D D D	Amputation Back Injury Broken Bone(s) Burn(s)	Can Not Swim Can Not Swim MI Zip Code PFD Types Used: IIIIII IIIIII IV Non-Inflatable Inflatable Physical Condition:	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt Refuse	Male Female nent ed to Hospital
ESSEL OR	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Primary & S P S C C C C C C C C C C C C C C C C C C C	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s)	Can Not Swim  Can Not Swim  MI  Zip Code  PFD Types Used:  IIIIII IV  Non-Inflatable Inflatable Inflatable Physical Condition: Handicapped	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt Refuse	Male Female nent ed to Hospital
ESSEL OR	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Primary & S Primary & S P S C C C C C C C C C C C C C C C C C C C	Ame State Secondary Injury Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s)	Can Not Swim Can Not Swim MI Zip Code PFD Types Used: IIIIII IIIIII IV Non-Inflatable Inflatable Physical Condition: Handicapped Inf. Alc./Drug	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt Refuse	Male Female nent ed to Hospital
ESSEL OR	Iype:       Fatality         Last Name         Street         City         Injury Caused By:         Impact with Boat         Impact with Water         Impact with Fixed C         Impact with Floating         Struck by Boat         Propeller or Skeg         Other:         Victim Activity:         Cruising	Person V P Dbject [ g Object ]	Primary & S	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury	Can Not Swim  Can Not Swim  MI  Zip Code  PFD Types Used:  IIIIII IV  Non-Inflatable Inflatable Physical Condition: IHandicapped Inf. Alc./Drug Normal	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt. Refuse	Male Female nent ed to Hospital
ESSEL OR	Iype:       Fatality         Last Name         Street         City         Injury Caused By:         Impact with Boat         Impact with Water         Impact with Fixed O         Impact with Floating         Struck by Boat         Propeller or Skeg         Other:         Victim Activity:         Fishing	Person V P Dbject [ g Object ]	Was Ejecte           First N           P           S           I	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury Hypothermia Internal Injury(ies) Laceration(s)	Can Not Swim  Can Not Swim  I Can Not Swim  MI  Zip Code  PFD Types Used:  I I I I I I I I I I I I I I I I I I	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt Refuse	Male Female nent ed to Hospital
ESSEL OR SWIMME	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Was Ejecte           First N           Primary & S           P           S      <	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury Hypothermia Internal Injury(ies) Laceration(s) Neck Injury	Can Not Swim  Zip Code  PFD Types Used: I IIII III IIV Non-Inflatable Physical Condition: Handicapped Inf. Alc./Drug Normal Sick/ill Other: Unknown	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt. Refuse	Male Female nent ed to Hospital
ESSEL OR SWIMME	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Was Ejecte           First N           Primary & S           P           S      <	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury Hypothermia Internal Injury(ies) Laceration(s) Neck Injury Shock	Can Not Swim  Zip Code  PFD Types Used:  I I III II IV Non-Inflatable Inflatable Physical Condition: I Handicapped Inf. Alc./Drug Normal Sick/ill Other: Unknown Death Caused By:	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt. Refuse	Male Female nent ed to Hospital
ESSEL OR SWIMME	Iype:       Fatality         Last Name	Person V P Dbject [ g Object ]	Was Ejecte           First N           Primary & S           P           S      <	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury Hypothermia Internal Injury(ies) Laceration(s) Neck Injury Shock Spinal Injury	Can Not Swim  Can Not Swim  MI  Zip Code  PFD Types Used:  I I III IV Non-Inflatable Inflatable Physical Condition: Handicapped Inf. Alc./Drug Normal Sick/ill Other: Unknown Death Caused By: Drowning	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt. Refuse	Male Female nent ed to Hospital
ESSEL OR	Iype:       Fatality         Last Name	Person M P Dbject [ g Object [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [	Was Ejecte           First N           P           S           I	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury Hypothermia Internal Injury(ies) Laceration(s) Neck Injury Shock Spinal Injury Sprain/Strain	Can Not Swim  Zip Code  PFD Types Used:  I I III IV Non-Inflatable Inflatable Physical Condition: Handicapped Inf. Alc./Drug Normal Sick/ill Other: Unknown Death Caused By: Drowning Hypothermia	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt. Refuse	Male Female nent ed to Hospital
ESSEL OR SWIMME	Iype:       Fatality         Last Name	Person M P Dbject [ g Object [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [	Was Ejecte           First N           Primary & S           P           S      <	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury Hypothermia Internal Injury(ies) Laceration(s) Neck Injury Shock Spinal Injury	Can Not Swim  Zip Code  PFD Types Used:  I I III IV Non-Inflatable Inflatable Inflatabl	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt. Refuse	Male Female nent ed to Hospital
ESSEL OR SWIMME	Iype:       Fatality         Last Name	Person M P Dbject [ g Object [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [	Was Ejecte           First N           P           S           I	Amputation Back Injury Broken Bone(s) Burn(s) Contusion(s) Dislocation(s) Head Injury Hypothermia Internal Injury(ies) Laceration(s) Neck Injury Shock Spinal Injury Sprain/Strain	Can Not Swim  Zip Code  PFD Types Used:  I I III IV Non-Inflatable Inflatable Physical Condition: Handicapped Inf. Alc./Drug Normal Sick/ill Other: Unknown Death Caused By: Drowning Hypothermia	<u> </u>	Shore/Dock	Skier	Gender: Treatment: Treatm Admitt. Refuse	Male Female nent ed to Hospital

FL	LORIDA BOATING ACCIDENT IN	VESTIGATION REPORT	Agency Case Number:			
<	I IVpe	ssing (Body not located) Victim erson Was Ejected Info.:	Can Swim       Occupant       Operator       Swimmer         Can Not Swim       On Shore/Dock       Skier       Male         Gender:       Docupant       Docupant       Docupant			
ESSE	Last Name Street	First Name	MI Date of Birth Treatment: () – I Treatment Home Phone Admitted to Hospital			
F	City	State	( ) Refused Treatment			
	Injury Caused By:	Primary & Secondary Injury P S	PFD Types Used:         Image: Control of the second s			
	Impact with Water     Impact with Fixed Object     Impact with Floating Object	Amputation Amputation Back Injury t Broken Bone(s)				
OR	Struck by Boat Propeller or Skeg	Bickeri Bolie(s)	Physical Condition:			
SW	Other: Victim Activity:	Dislocation(s)	□ Inf. Alc./Drug □ Normal □ Sick///			
SWIMME	Cruising Fishing	Hypothermia				
ER	Hunting     PWC Cruising     Scuba Diving     Snorkeling     Swimming	Image: Neck Injury       Image: Shock       Image: Spinal Injury       Image: Sprain/Strain	Unknown Death Caused By: Drowning Hypothermia			
	Swimming           Water-skiing           Other:	Teeth/Jaw	☐ Trauma ☐ Other:			
<		ssing (Body not located) Victim rson Was Ejected Info.:	Can Swim       Occupant       Operator       Swimmer         Can Not Swim       On Shore/Dock       Skier       Male         Gender:       D       D			
ESS	Last Name	First Name	MI Date of Birth Treatment:			
ξEL	Street	State	Home Phone Admitted to Hospital			
	Injury Caused By:	Primary & Secondary Injury	PFD Types Used:			
	Impact with Boat  Impact with Water  Impact with Fixed Object  Impact with Floating Object  Struck by Poot		□ I □ III □ V □ II □ IV □ Non-Inflatable □ Inflatable			
ORSV	Struck by Boat  Propeller or Skeg  Other:	Image: Burn(s)       Image: Contusion(s)       Image: Dislocation(s)       Image: Dislocation(s)       Image: Dislocation(s)       Image: Dislocation(s)	Physical Condition: Handicapped Inf. Alc./Drug Normal			
W I M M	Victim Activity:	Hypothermia	□     Normal       □     Sick/ill       □     Other:   Injury/Fatal Synopsis			
MER	Hunting Hunting PWC Cruising Scuba Diving Snorkeling Swimming	Laceration(s)         Laceration(s)         Shock         Spinal Injury         Sprain/Strain         Teeth/Jaw	Unknown Death Caused By: Drowning Hypothermia Trauma			
	Water-skiing Other:		Other:			

#### Agency Case Number: Injured Missing (Body not located) Swimmer Can Swim Occupant Operator Victim Type: Info.: Fatality Person Was Ejected Can Not Swim On Shore/Dock Skier Male < Gender: Female П Last Name First Name ML Date of Birth S Treatment: S Treatment Street Home Phone Admitted to Hospital П 靣 Refused Treatment City Zip Code State Work Phone Injury Caused By: Primary & Secondary Injury PFD Types Used: . Impact with Boat Ρ S ۷ Impact with Water Amputation П Impact with Fixed Object Π Π Back Injury Non-Inflatable $\Box$ Impact with Floating Object Broken Bone(s) П Inflatable $\Box$ Struck by Boat Burn(s) **Physical Condition:** 0 J Propeller or Skeg Π Contusion(s) Handicapped $\Box$ Other: $\square$ Dislocation(s) Inf. Alc./Drug ഗ Head Injury Normal ٤ Victim Activity: $\square$ Π Hypothermia Sick/ill < Cruisina Internal Injury(ies) Other: Injury/Fatal Synopsis Fishing Laceration(s) Hunting Neck Injury Unknown Π PWC Cruising Shock **Death Caused By:** J $\square$ Scuba Diving Spinal Injury Drowning Snorkeling Sprain/Strain $\Box$ Hypothermia Swimming Π Teeth/Jaw Trauma Water-skiing Other: $\square$ Other: Injured Missing (Body not located) Victim Can Swim Occupant Operator Swimmer Type: Info.: Fatality Person Was Ejected Can Not Swim On Shore/Dock Skier Male < Gender: m Female Last Name ဟ First Name MI Date of Birth Treatment: ഗ ) Treatment Street m Home Phone Admitted to Hospital Refused Treatment City State Zip Code Work Phone Injury Caused By: Primary & Secondary Injury PFD Types Used: Impact with Boat Ρ S v Impact with Water Π Amputation Π Impact with Fixed Object Back Injury Non-Inflatable Impact with Floating Object Broken Bone(s) Inflatable $\Box$ Struck by Boat O Burn(s) Physical Condition: Tr. ת $\Box$ Propeller or Skeg Contusion(s) Handicapped Other: П Dislocation(s) Inf. Alc./Drug ທ $\square$ Head Injury Normal × Victim Activity: Hypothermia Sick/ill Cruising Internal Injury(ies) Other: Injury/Fatal Synopsis Fishing Laceration(s) Hunting Neck Injury Unknown П PWC Cruising Shock Death Caused By: π Scuba Diving Spinal Injury Drowning Snorkeling Π Sprain/Strain Hypothermia $\square$ Swimming Teeth/Jaw Trauma Water-skiing Π Other: П Other:

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FLORIDA BOATING ACCIDENT INVESTIGATION REPORT

of