



**SURVIVAL AND VEHICLE FACTUAL REPORT
ATTACHMENT**

CGFD NFIRS Basic Incident #21006233

Coral Gables, FL

HWY21FH011

(7 pages)

A FDID State Incident Date Station Incident Number Exposure Delete Change No Activity **NFIRS-1 Basic**

B Location Type Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B. *Alternative Location Specification* Use only for wildland fires. Census Tract

Street address Intersection In front of Rear of Adjacent to Directions U.S. National Grid

Number/Milepost Prefix Street or Highway Street Type Suffix

Apt./Suite/Room City State ZIP Code

Cross Street, Directions or National Grid, as applicable

C Incident Type Incident Type

E1 Dates and Times Midnight is 0000

Month Day Year Hour Min

Alarm Arrival Controlled Last Unit Cleared

E2 Shifts and Alarms Local Option Alarms District

E3 Special Studies Local Option Special Study ID# Special Study Value

D Aid Given or Received None

1 Mutual aid received Their FDID Their State

2 Auto. aid received Their Incident Number

3 Mutual aid given

4 Auto. aid given

5 Other aid given

F Actions Taken Extinguishment by Primary Action Taken (1)

Additional Action Taken (2)

Additional Action Taken (3)

G1 Resources Check this box and skip this block if an Apparatus or Personnel Module is used

Apparatus Personnel

Suppression EMS Other

Check box if resource counts include aid received resources

G2 Estimated Dollar Losses and Values Required for all fires if known. Optional for non-fires. None

LOSSES: Property \$, , Contents \$, ,

PRE-INCIDENT VALUE: Optional Property \$, , Contents \$, ,

Completed Modules Fire-2 Structure Fire-3 Civilian Fire Cas.-4 Fire Service Cas.-5 EMS-6 HazMat-7 Wildland Fire-8 Apparatus-9 Personnel-10 Arson-11

H1 Casualties None

Deaths Injuries

Fire Service Civilian

H2 Detector Required for confined fires. 1 Detector alerted occupants 2 Detector did not alert them U Unknown

H3 Hazardous Materials Release None

1 Natural gas: slow leak, no evacuation or HazMat actions
2 Propane gas: <21-lb tank (as in home BBQ grill)
3 Gasoline: vehicle fuel tank or portable container
4 Kerosene: fuel burning equipment or portable storage
5 Diesel fuel/fuel oil: vehicle fuel tank or portable storage
6 Household solvents: home/office spill, cleanup only
7 Motor oil: from engine or portable container
8 Paint: from paint cans totaling <55 gallons
0 Other: special HazMat actions required or spill > 55 gal (Please complete the HazMat form.)

Mixed Use Property Not mixed

10 Assembly use
20 Education use
33 Medical use
40 Residential use
51 Row of stores
53 Enclosed mall
58 Business & residential
59 Office use
60 Industrial use
63 Military use
65 Farm use
00 Other mixed use

J Property Use Structures None

131 Church, place of worship
161 Restaurant or cafeteria
162 Bar/Tavern or nightclub
213 Elementary school, kindergarten
215 High school, junior high
241 College, adult education
311 Nursing home
331 Hospital

341 Clinic, clinic-type infirmary
342 Doctor/Dentist office
361 Prison or jail, not juvenile
419 1- or 2-family dwelling
429 Multifamily dwelling
439 Rooming/Boarding house
449 Commercial hotel or motel
459 Residential, board and care
464 Dormitory/Barracks
519 Food and beverage sales

539 Household goods, sales, repairs
571 Gas or service station
579 Motor vehicle/boat sales/repairs
599 Business office
615 Electric-generating plant
629 Laboratory/Science laboratory
700 Manufacturing plant
819 Livestock/Poultry storage (barn)
882 Non-residential parking garage
891 Warehouse

Outside

124 Playground or park
655 Crops or orchard
669 Forest (timberland)
807 Outdoor storage area
919 Dump or sanitary landfill
931 Open land or field

936 Vacant lot
938 Graded/Cared for plot of land
946 Lake, river, stream
951 Railroad right-of-way
960 Other street
961 Highway/Divided highway
962 Residential street/driveway

981 Construction site
984 Industrial plant yard

Look up and enter a Property Use code and description only if you have NOT checked a Property Use box

Property Use Code

Property Use Description

NFIRS-1 Revision 01/05

K1 Person/Entity Involved

Local Option Business Name (if applicable) [Redacted] Area Code [Redacted] Phone Number [Redacted]

Check this box if same address as incident location (Section B). Then skip the three duplicate address lines

Mr. Ms. Mrs. First Name [Redacted] MI [Redacted] Last Name [Redacted] Suffix [Redacted]

Number [Redacted] Prefix [Redacted] Street or Highway [Redacted] Street Type [Redacted] Suffix [Redacted]

Post Office Box [Redacted] Apt./Suite/Room [Redacted] City [Redacted]

State [Redacted] ZIP Code [Redacted]

More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary.

K2 Owner

Local Option Same as person involved? Then check this box and skip the rest of this block.

Business Name (if applicable) [Redacted] Area Code [Redacted] Phone Number [Redacted]

Check this box if same address as incident location (Section B). Then skip the three duplicate address lines

Mr. Ms. Mrs. First Name [Redacted] MI [Redacted] Last Name [Redacted] Suffix [Redacted]

Number [Redacted] Prefix [Redacted] Street or Highway [Redacted] Street Type [Redacted] Suffix [Redacted]

Post Office Box [Redacted] Apt./Suite/Room [Redacted] City [Redacted]

State [Redacted] ZIP Code [Redacted]

L Remarks:

JONATHAN RALPH
 September 13, 2021 22:55:40

ENG 1 ARRIVED TO A FULLY ENVOLED TELSA CAR ON FIRE NEXT TO A TREE IN THE MEDIAN. ENG 1 EXTINGUISHED THE FIRE AND NOTIFIED P.D. ON SCENE OF 2 BODIES THAT WERE IN THE CAR. BOTH BODIES WERE NOTED TO BE IN THE FRONT SEATS OF THE CAR. (DRIVER AND PASSENGER SEAT). AFTER EXTINGUISHING THE FIRE ENG 1 ASSISTED P.D. IN PUTTING UP SCENE TAPE AND COVERING THE BODIES WITH YELLOW TARPS. ENG 1 REMAINED ON SCENE UNTIL P.D TOOK OVER THE SCENE.

GILBERTO HERNANDEZ - BAT1
 September 13, 2021 23:11:43

Bat-1 arrived and assumed Command with a CP established at Coral Way and Alhamabra. Tesla crashed into a tree and was fully involved upon CGFD arrival. E1 extinguished fire quickly using their front bumper line. E4 supplied E4 incase additional water was needed or if the Tesla reignited. Scene was turned over to CGPD Traffic Homicide.

More remarks? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary.

M Authorization

Check box if same as Officer in charge

Officer in charge ID [Redacted] Signature [Redacted] Position or rank [Redacted] Assignment [Redacted] Month [Redacted] Day [Redacted] Year [Redacted]

Member making report ID [Redacted] Signature [Redacted] Position or rank [Redacted] Assignment [Redacted] Month [Redacted] Day [Redacted] Year [Redacted]

A FDID State Incident Date MM DD YYYY Station Incident Number Exposure Delete Change **NFIRS-2 Fire**

B Property Details

B1 Not Residential
Estimated number of residential living units in building of origin whether or not all units became involved

B2 Buildings not involved
Number of buildings involved

B3 Acres burned (outside fires) None Less than one acre

C On-Site Materials or Products None
Complete if there were any significant amounts of commercial, industrial, energy, or agricultural products or materials on the property, whether or not they became involved.

Enter up to three codes. Check one box for each code entered.

On site material (1)

On-site material (2)

On site material (3)

On-Site Materials Storage Use

1 Bulk storage or warehousing
2 Processing or manufacturing
3 Packaged goods for sale
4 Repair or service
U Undetermined

D Ignition

D1 Other area of fire origin
Area of fire origin

D2 Heat from powered equipment, other
Heat source

D3 Item first ignited, other
Item first ignited

D4 Multiple types of material
Type of material first ignited

Check box if fire spread was confined to object of origin. Required only if item first ignited code is 00 or < 70.

E1 Cause of Ignition Check box if this is an exposure report.

1 Intentional
2 Unintentional
3 Failure of equipment or heat source
4 Act of nature
5 Cause under investigation
U Cause undetermined after investigation

E2 Factors Contributing to Ignition None

Collision, knock down, run over, turn over
Factor contributing to ignition (1)

Factor contributing to ignition (2)

E3 Human Factors Contributing to Ignition

Check all applicable boxes None

1 Asleep
2 Possibly impaired by alcohol or drugs
3 Unattended person
4 Possibly mentally disabled
5 Physically disabled
6 Multiple persons involved
7 Age was a factor

Estimated age of person involved

1 Male 2 Female

F1 Equipment Involved in Ignition None

Equipment Involved

Brand

Model

Serial #

Year

F2 Equipment Power Source

Equipment Power Source

F3 Equipment Portability

1 Portable
2 Stationary

Portable equipment normally can be moved by one or two persons, is designed to be used in multiple locations, and requires no tools to install

G Fire Suppression Factors None

Enter up to three codes.

Fire suppression factor (1)

Fire suppression factor (2)

Fire suppression factor (3)

H1 Mobile Property Involved None

1 Not involved in ignition, but burned
2 Involved in ignition, but did not burn
3 Involved in ignition and burned

Mobile property model

Year

License Plate Number State VIN

H2 Mobile Property Type and Make

Passenger or road vehicles, other
Mobile property type

Toro
Mobile property make

Local Use

Pre-Fire Plan Available
Some of the information presented in this report may be based upon reports from other agencies.

Arson report attached
 Police report attached
 Coroner report attached
 Other reports attached

NFIRS-2 Revision 01/01/05

Structure fire? Please be sure to complete the Structure Fire form (NFIRS-3).

A FDID State Incident Date Station Incident Number Exposure
 Delete Change **NFIRS-10 Personnel**

B Apparatus or Resources ID Type

Dates and Times Midnight is 0000
 Check if same date as Alarm date on the Basic Module (Block E1).
 Month Day Year Hour/Min

Dispatch 2056
 Arrival 2103
 Clear 2147

Sent Number of People

Apparatus Use Suppression EMS Other

Actions Taken

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
78262	GILBERTO HERNANDEZ		<input checked="" type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

2 ID Type

Dispatch 2056
 Arrival 2103
 Clear 2152

Sent Number of People

Apparatus Use Suppression EMS Other

Actions Taken

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
			<input checked="" type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

3 ID Type

Dispatch 2055
 Arrival 2101
 Clear 2117

Sent Number of People

Apparatus Use Suppression EMS Other

Actions Taken

Personnel ID	Name	Rank or Grade	Attend	Action Taken	Action Taken	Action Taken	Action Taken
			<input checked="" type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

A	FDID <input type="text" value="01052"/> ★	State <input type="text" value="FL"/> ★	Incident Date <input type="text" value="09"/> <input type="text" value="13"/> <input type="text" value="2021"/> ★	Station <input type="text" value="ST1"/>	Incident Number <input type="text" value="0005722"/> ★	Exposure <input type="text" value="000"/> ★	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> No Activity	ESO-1 Non-NFIRS Fields
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E1 Additional Incident Times											
	Month	Day	Year	Hour	Min		Month	Day	Year	Hour	Min
PSAP Recieved	<input type="text" value="09"/>	<input type="text" value="13"/>	<input type="text" value="2021"/>	<input type="text" value="2055"/>		Dispatch Notified	<input type="text"/>	<input type="text"/>	<input type="text" value="2021"/>	<input type="text"/>	<input type="text"/>

B Apparatus or Resources	Dates and Times <small>Midnight is 0000</small>					ID <input type="text"/>	Type <input type="text"/>	En Route <input type="text"/>	District <input type="text"/>
	Month	Day	Year	Hour	Min				
<input type="text" value="1"/> ID <input type="text" value="BAT1"/> Type <input type="text"/>	En Route	<input type="text" value="09"/>	<input type="text" value="13"/>	<input type="text" value="2021"/>	<input type="text" value="2056"/>	<input type="text" value="5"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="2"/> ID <input type="text" value="ENG4"/> Type <input type="text"/>	En Route	<input type="text" value="09"/>	<input type="text" value="13"/>	<input type="text" value="2021"/>	<input type="text" value="2058"/>	<input type="text" value="6"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="3"/> ID <input type="text" value="RES1"/> Type <input type="text"/>	En Route	<input type="text" value="09"/>	<input type="text" value="13"/>	<input type="text" value="2021"/>	<input type="text" value="2057"/>	<input type="text" value="7"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="4"/> ID <input type="text" value="ENG1"/> Type <input type="text"/>	En Route	<input type="text" value="09"/>	<input type="text" value="13"/>	<input type="text" value="2021"/>	<input type="text" value="2057"/>	<input type="text" value="8"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	District	<input type="text" value="09"/>	<input type="text" value="13"/>	<input type="text" value="2021"/>	<input type="text"/>	<input type="text" value="9"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>