



HUMAN PERFORMANCE FACTORS ATTACHMENT

Florida Crash Report

Delray Beach, FL

HWY23MH006

(6 pages)

FLORIDA TRAFFIC CRASH REPORT

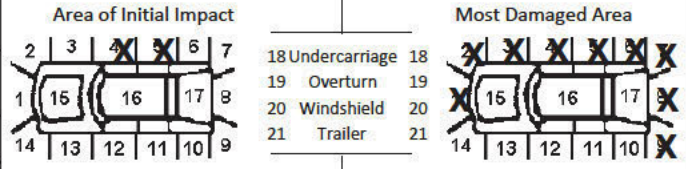
HIGHWAY SAFETY & MOTOR VEHICLES TRAFFIC CRASH RECORDS

NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

LONG FORM SHORT FORM UPDATE

(Electronic Version)

Crash Date FEBRUARY 8, 2023		Time of Crash 08:06 PM		Date of Report February 14, 2023		Reporting Agency Case Number 23001924		HSMV Crash Report Number 25495245		
CRASH IDENTIFIERS										
County Code 06	City Code 40	County of Crash PALM BEACH			Place or City of Crash DELRAY BEACH			Within City Limits YES	Time Reported 08:06 PM	Time Dispatched 08:07 PM
Time on Scene 08:15 PM	Time Cleared Scene 12:57 AM	Completed NO	Reason (if Investigation NOT Complete) THI (TABARES)						Notified By LAW ENFORCEMENT	
ROADWAY INFORMATION (CHOOSE ONLY 1 OF 4 OPTIONS)										
Crash Occurred On Street, Road, Highway LINDELL BLVD					1 At Street Address #	2 At Latitude	And	Longitude		
At Feet	Miles	Direction	3 At / From Intersection With Street, Road, Highway SE FEC RAILROAD				4 Or From Milepost #			
Road System Identifier 5 LOCAL			Type of Shoulder 3 CURB			Type of Intersection 1 NOT AT INTERSECTION				
CRASH INFORMATION (CHECK IF PICTURES TAKEN) <input type="checkbox"/>										
Light Condition 4 DARK - LIGHTED		Weather Condition 1 CLEAR		Roadway Surface Condition 1 DRY		School Bus Related 1 NO		Manner of Collision 77 OTHER (EXPLAIN IN NARRATIVE)		
First Harmful Event Type 2 COLLISION WITH NON-FIXED OBJECT		First Harmful Event 12 COLLISION WITH RAILWAY VEHICLE		First Harmful Event Location 1 ON ROADWAY		Within Interchange 1 NO	First Harmful Event Relation to Junction 5 RAILWAY GRADE CROSSING			
Contributing Circumstances: Road 1 NONE			Contributing Circumstances: Road			Contributing Circumstances: Road				
Contributing Circumstances: Environment 1 NONE			Contributing Circumstances: Environment			Contributing Circumstances: Environment				
Work Zone Related 1 NO	Crash in Work Zone			Type of Work Zone		Workers in Work Zone	Law Enforcement in Work Zone			
VEHICLE Check if Commercial <input type="checkbox"/>										
Vehicle 01	Motor Vehicle Type 1 VEH IN TRANSPORT		Hit and Run 1 NO	Veh License Number [REDACTED]	State CT	Reg. Expires NOVEMBER 15, 2024	Permanent Reg 1 NO	VIN 5N1AT2MV7F [REDACTED]		
Year 2015	Make NISS	Model ROGUE	Style SUV	Color WHI	Extent of Damage 1 DISABLING	Est. Damage \$25000	Towed Due To Damage 2 YES	Vehicle Removed By WESTWAY TOWING	Rotation 1 TOW ROTATION LIST	
Insurance Company (Driver) AMICA MUTUAL INSURANCE COMPANY						Insurance Policy Number UNKNOWN				
Name of Vehicle Owner (Business) <input type="checkbox"/>			Current Address			City & State		Zip Code		
BETTE A. JACOBSON			[REDACTED]			DELRAY BEACH, FL		33484		
Trailer One:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles	
Trailer Two:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles	
Vehicle Traveling W	Direction LINDELL BLVD	On Street, Road, Highway					At Est. Speed	Posted Speed 25	Total Lanes 03	
CMV Configuration			Cargo Body Type							
Comm GVWR/GCWR			Trailer Type (Trailer One)		Trailer Type (Trailer Two)					
Haz. Mat. Release	Haz. Mat. Placard	Number		Class						
Motor Carrier Name				US DOT Number						
Motor Carrier Address						City & State		Zip Code		Phone Number
Comm/Non-Commercial		Vehicle Body Type 16 (SPORT) UTILITY VEHICLE		Vehicle Defects (one) 1 NONE		Vehicle Defects (two)		Emergency Vehicle Use	Special Function of MV 1 NO SPECIAL FUNCTION	
Vehicle Maneuver Action 13 STOPPED IN TRAFFIC	Trafficway 4 TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER		Roadway Grade 1 LEVEL	Roadway Alignment 1 STRAIGHT	Most Harmful Event 2 COLLISION WITH NON-FIXED OBJECT		Most Harmful Event Detail 12 COLLISION WITH RAILWAY VEHICLE			
Traffic Control Device For This Vehicle 9 RAILWAY CROSSING DEVICE		First (1) Sequence of Events 12 COLLISION WITH RAILWAY VEHICLE		Second (2) Sequence of Events 35 TRAFFIC SIGNAL SUPPORT		Third (3) Sequence of Events 1 OVERTURN/ROLLOVER		Fourth (4) Sequence of Events		



VEHICLE <input type="checkbox"/> Check if Commercial										
Vehicle 02	Motor Vehicle Type 1 VEH IN TRANSPORT			Hit and Run 1 NO	Veh License Number [REDACTED]	State FL	Reg. Expires JULY 22, 2023	Permanent Reg 1 NO	VIN 19UUB5F56M	
Year 2021	Make ACUR	Model TLX	Style 4DR	Color BLK	Extent of Damage 4 MINOR	Est. Damage \$500	Towed Due To Damage 1 NO	Vehicle Removed By FAMILY		
Insurance Company (Driver) ALLSTATE FIRE AND CASUALTY INSURANC							Insurance Policy Number [REDACTED]			
Name of Vehicle Owner (Business) <input type="checkbox"/>				Current Address NORMA M. BODNICK			City & State DELRAY BEACH, FL		Zip Code 33483	
Trailer One:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles	
Trailer Two:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles	
Vehicle Traveling	Direction N	On Street, Road, Highway OLD DIXIE HWY					At Est. Speed 25	Posted Speed 45	Total Lanes 02	
CMV Configuration			Cargo Body Type			Area of Initial Impact		Most Damaged Area		
Comm GVWR/GCWR			Trailer Type (Trailer One)		Trailer Type (Trailer Two)					
Haz. Mat. Release	Haz. Mat. Placard	Number		Class						
Motor Carrier Name				US DOT Number						
Motor Carrier Address				City & State				Zip Code		Phone Number
Comm/Non-Commercial		Vehicle Body Type 1 PASSENGER CAR		Vehicle Defects (one) 1 NONE		Vehicle Defects (two)		Emergency Vehicle Use	Special Function of MV 1 NO SPECIAL FUNCTION	
Vehicle Maneuver Action 1 STRAIGHT AHEAD		Trafficway 3 TWO-WAY, DIVIDED, UNPROTECTED MEDIAN		Roadway Grade 1 LEVEL	Roadway Alignment 1 STRAIGHT	Most Harmful Event 2 COLLISION WITH NON-FIXED OBJECT		Most Harmful Event Detail 18 COLLISION WITH OTHER NON-FIXED OBJECT		
Traffic Control Device For This Vehicle 1 NO CONTROLS		First (1) Sequence of Events 18 COLLISION WITH OTHER NON-FIXED OBJECT			Second (2) Sequence of Events		Third (3) Sequence of Events		Fourth (4) Sequence of Events	

PERSON										
Person # 01	Description 1 DRIVER	Vehicle # 01	Name ARTHUR S. JACOBSON			Date of Birth [REDACTED]	Sex 1 MALE	Phone Number	Re-Exam 2 NO	
Address [REDACTED]				City & State DELRAY BEACH, FL			Zip Code 33484			
Driver License Number [REDACTED]	State FL	Expires [REDACTED]	DL Type 5 E / OPERATOR		Req. End. 3 NO ENDORSEMENT...	Injury Severity 5 FATAL (WITHIN 30 DAYS)	Ejection 3 EJECTED, PARTIALLY			
Restraint Systems 2 NONE USED - MV OCCUPANT		Air Bag Deployed 6 DEPLOYED - COMBINATION		Helmet Use	Eye Protection	Seating Location Seat 1 LEFT	Seating Location Row 1 FRONT	Seating Location Other		
Drivers Actions at Time of Crash (First) 27 DISREGARDED OTHER TRAFFIC SIGN			Drivers Actions at Time of Crash (Second)			Driver Distracted By 1 NOT DISTRACTED		Vision Obstruction 1 VISION NOT OBSCURED		
Drivers Actions at Time of Crash (Third)			Drivers Actions at Time of Crash (Fourth)			Drivers Condition at Time of Crash 1 APPARENTLY NORMAL				
Suspected Alcohol Use 1 NO	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 NO	Drug Tested	Drug Test Type	Drug Test Result		
Source of Transport to Medical Facility 77 OTHER (EXPLAIN IN NARRATIVE)		EMS Agency Name or ID DELRAY BEACH FIRE RESCUE			EMS Run Number DB23001944	Medical Facility Transported To				

PERSON										
Person # 02	Description 1 DRIVER	Vehicle # 02	Name LAURA M. CHAPMAN			Date of Birth [REDACTED]	Sex 2 FEMALE	Phone Number [REDACTED]	Re-Exam 2 NO	
Address [REDACTED]				City & State DELRAY BEACH, FL			Zip Code 33483			
Driver License Number [REDACTED]	State FL	Expires [REDACTED]	DL Type 5 E / OPERATOR		Req. End. 3 NO ENDORSEMENT...	Injury Severity 1 NONE	Ejection 1 NOT EJECTED			
Restraint Systems 3 SHOULDER AND LAP BELT USED		Air Bag Deployed 2 NOT DEPLOYED		Helmet Use	Eye Protection	Seating Location Seat 1 LEFT	Seating Location Row 1 FRONT	Seating Location Other		
Drivers Actions at Time of Crash (First) 1 NO CONTRIBUTING ACTION			Drivers Actions at Time of Crash (Second)			Driver Distracted By 1 NOT DISTRACTED		Vision Obstruction 1 VISION NOT OBSCURED		
Drivers Actions at Time of Crash (Third)			Drivers Actions at Time of Crash (Fourth)			Drivers Condition at Time of Crash 1 APPARENTLY NORMAL				
Suspected Alcohol Use 1 NO	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 NO	Drug Tested	Drug Test Type	Drug Test Result		
Source of Transport to Medical Facility		EMS Agency Name or ID			EMS Run Number	Medical Facility Transported To				

PERSON

Person # 06	Description 2 NON-MOTORIST	Name JUAN CORZO	Date of Birth [REDACTED]	Sex 1 MALE	Injury Severity 1 NONE	Phone Number [REDACTED]
Address [REDACTED]			City & State WEST PALM BEACH, FL		Zip Code 33401	
Non-Motorist Description Detail 6 OCCUPANT OF A NON-MOTOR VEHICLE			Non-Motorist Action Prior to Crash 77 OTHER (EXPLAIN IN NARRATIVE)		Non-Motorist Location at Time of Crash 77 OTHER (EXPLAIN IN NARRATIVE)	
Non-Motorist Actions/Circumstances (First) 1 NO IMPROPER ACTION		Non-Motorist Actions/Circumstances (Second)		Non-Motorist Safety Equipment (One) 1 NONE		Non-Motorist Safety Equipment (Two)
Suspected Alcohol Use 1 NO	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 NO	Drug Tested
Source of Transport to Medical Facility		EMS Agency Name or ID		EMS Run Number	Medical Facility Transported To	

PERSON

Person # 07	Description 2 NON-MOTORIST	Name CARLOS QUICENO	Date of Birth [REDACTED]	Sex 1 MALE	Injury Severity 1 NONE	Phone Number [REDACTED]
Address [REDACTED]			City & State WEST PALM BEACH, FL		Zip Code 33401	
Non-Motorist Description Detail 6 OCCUPANT OF A NON-MOTOR VEHICLE			Non-Motorist Action Prior to Crash 77 OTHER (EXPLAIN IN NARRATIVE)		Non-Motorist Location at Time of Crash 77 OTHER (EXPLAIN IN NARRATIVE)	
Non-Motorist Actions/Circumstances (First) 1 NO IMPROPER ACTION		Non-Motorist Actions/Circumstances (Second)		Non-Motorist Safety Equipment (One) 1 NONE		Non-Motorist Safety Equipment (Two)
Suspected Alcohol Use 1 NO	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 NO	Drug Tested
Source of Transport to Medical Facility		EMS Agency Name or ID		EMS Run Number	Medical Facility Transported To	

PERSON

Person # 03	Description 3 PASSENGER	Vehicle # 02	Name NORMA M. BODNICK	Date of Birth [REDACTED]	Sex 2 FEMALE	Injury Severity 1 NONE	Ejection 1 NOT EJECTED
Address [REDACTED]			City & State DELRAY BEACH, FL		Zip Code 33483		
Restraint Systems 3 SHOULDER AND LAP BELT USED		Air Bag Deployed 2 NOT DEPLOYED		Helmet Use	Eye Protection	Seating Location Seat 3 RIGHT	Seating Location Row 1 FRONT
Source of Transport to Medical Facility		EMS Agency Name or ID		EMS Run Number	Medical Facility Transported To		

PERSON

Person # 04	Description 3 PASSENGER	Vehicle # 02	Name GABRIELLA L. GROSS	Date of Birth [REDACTED]	Sex 2 FEMALE	Injury Severity 1 NONE	Ejection 1 NOT EJECTED
Address [REDACTED]			City & State LOS ANGELES, CA		Zip Code 90026		
Restraint Systems 3 SHOULDER AND LAP BELT USED		Air Bag Deployed 2 NOT DEPLOYED		Helmet Use	Eye Protection	Seating Location Seat 3 RIGHT	Seating Location Row 2 SECOND
Source of Transport to Medical Facility		EMS Agency Name or ID		EMS Run Number	Medical Facility Transported To		

PERSON

Person # 05	Description 3 PASSENGER	Vehicle # 01	Name BETTE A. JACOBSON	Date of Birth [REDACTED]	Sex 2 FEMALE	Injury Severity 5 FATAL (WITHIN...	Ejection 2 EJECTED,...
Address [REDACTED]			City & State DELRAY BEACH, FL		Zip Code 33484		
Restraint Systems 3 SHOULDER AND LAP BELT USED		Air Bag Deployed 6 DEPLOYED - COMBINATION		Helmet Use	Eye Protection	Seating Location Seat 3 RIGHT	Seating Location Row 1 FRONT
Source of Transport to Medical Facility 77 OTHER (EXPLAIN IN NARRATIVE)		EMS Agency Name or ID DELRAY BEACH FIRE RESCUE		EMS Run Number DB23001944	Medical Facility Transported To		

NON VEHICLE PROPERTY DAMAGE

Vehicle # 01	Person #	Property Damage - Other Than Vehicle BRIGHTLINE TRAIN # BLF 709	Est. Amount \$25000
Business 1 YES	Owner's Name BRIGHTLINE RAILROAD		Address 601 15TH ST
		City & State WEST PALM BEACH, FL	Zip Code 33401

NON VEHICLE PROPERTY DAMAGE

Vehicle # 01	Person #	Property Damage - Other Than Vehicle RAILROAD CROSSING SIGN	Est. Amount \$25000
Business 1 YES	Owner's Name FEC RAILROAD		Address 601 15TH ST
		City & State WEST PALM BEACH, FL	Zip Code 33401

NON VEHICLE PROPERTY DAMAGE

Vehicle # 01	Person #	Property Damage - Other Than Vehicle NO TRESPASSING SIGN	Est. Amount \$500
Business 1 YES	Owner's Name FEC RAILROAD		Address 601 15TH ST
		City & State WEST PALM BEACH, FL	Zip Code 33401

NARRATIVE

I responded to Lindell Blvd and the FEC Railroad tracks in regard to a motor vehicle crash involving a Nissan (V1), the Brightline Train #BLF 709, and an Acura TLX (V2). Prior to my arrival Delray Beach Fire Rescue responded to the scene and treated both parties. D1 and the passenger in V1 were deceased on scene. V2 was traveling northbound on Old Dixie Hwy.

Crash Date FEBRUARY 8, 2023	Time of Crash 08:06 PM	Date of Report February 14, 2023	Reporting Agency Case Number 23001924	HSMV Crash Report Number 25495245
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NARRATIVE

V1 was stopped facing westbound on the eastern railroad tracks. The Brightline train was traveling southbound on the eastern train tracks. D2 and the rear left passenger in V2 stated that they were traveling northbound on Old Dixie Hwy when they heard a loud bang. They looked up and saw V1 get struck by the Brightline train. D2 and the passenger stated an unknown piece of debris came forward and struck V2's windshield. The train conductor (Juan Corzo) and the train engineer (Carlos Quiceno) stated that they were traveling southbound on the eastern railroad tracks when they got a message from a freight train stating that there was a vehicle on the tracks. They then stated that once they noticed the vehicle on the tracks, they attempted to use the emergency brake but were unable to stop before striking the vehicle. The Brightline train struck the front right side of V1. The impact of this crash caused V1 to be pushed in a counterclockwise direction, striking the FEC Railroad Crossing arm/sign as well as a No Trespassing Sign. The impact also caused V1 to overturn on its left side. Crime Scene responded to process the scene and take photos of the scene. V1 was towed by Westway Towing to their tow yard. A hold was also placed on V1. Palm Beach County Medical Examiner and Elite Body Removal arrived on scene and removed the deceased. FEC employees have also responded to the scene. Due to D1 and the passenger of V1 being declared deceased by Delray Beach Fire Rescue, Traffic Homicide Investigators responded to the scene and took over this investigation.

LUGO FERNANDEZ, HENRY 02/09/2023

On this date I was called out to respond to a crash involving a train vs vehicle. The two occupants were pronounced deceased on scene. While on scene I assisted with locating next of kin and marking the scene of the crash. I then stood by while FD and westway towing clear the scene. EOR.

PIMENTEL, LOISE A 02/13/2023

On 02/08/2023, at approximately 2006 hours, I responded to the area of Lindell Blvd and SE FED Railroad regarding an accident. Upon arrival, I observed a vehicle with extensive damage on its side by the railroad tracks. I then approached the vehicle and observed a white female laying on the ground and a white male still inside the vehicle. Ofc. Green felt for a pulse on the white female with negative results. Ofc. Green and I were unable to feel for a pulse on the white male but he had extensive injuries and was not moving. As other officers arrived and started blocking off traffic, I started putting up crime scene tape in order to preserve the scene. I assisted with vehicular traffic rerouting and made contact with a witness, Susanne Petronella. Petronella was visibly shaken due to the accident. Petronella stated that she was sitting in her car at the intersection of Lindell Blvd and Dixie Blvd facing westbound when she observed an unknown blind man was attempting to cross the railroad tracks when the train horns started sounding. She then watched as the blind man walked away from the tracks as the train was passing by. Petronella then stated she heard a loud crash and saw a big cloud of smoke coming from the train tracks. Once the 'smoke' settled, she saw the victim vehicle in its final resting point.

This ends my involvement in this case. For a verbatim account of events - refer to my BWC.

UMBRIAC, FRANK 02/08/2023

Upon my initial arrival, I was broke from the scene in reference to cad# 20230016280. Afterward, I returned to the scene, and assisted with traffic control on southbound Dixie Hwy.

BAKER, STEPHANIE 02/14/2023

In reference to the above case, upon my arrival, I observed a white vehicle that was struck by the Brightline train. The vehicle was positioned on its side and around a railroad crossing pole. Two bodies were located, one subject was inside the vehicle and one subject had been ejected and was located outside the vehicle. DBFD pronounced both individuals deceased. I requested DBPD dispatch contact FEC track dispatch and inform them of our situation. DBPD streets department was also requested since the traffic lights were knocked out from the crash.

Due to the nature of the scene, I requested Ofc. Ferguson/Ofc. Woods start a major crime scene log. I also had an additional crime scene area taped off within the larger crime scene that we had marked off.

I made contact with Brightline Security Manager, B Houlihan who informed me of the rescue train that was being sent out to remove the 66 passengers that were on board the train during the time of the crash. Once Sgt. Saraceni (#898) and the traffic homicide unit arrived and took over the crime scene, I cleared the area.

REPORTING OFFICER

ID/Badge Number 1201	Rank and Name COMMUNITY SERVICE OFFICER KOZAK, JARED	Department DELRAY BEACH POLICE DEPARTMENT	Type of Department 2 PD
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DIAGRAM

