INCIDENT INVESTIGATION ASSIGNMENT INSTRUCTIONS

Fire - Riding Lawn Mowers and Garden Tractors with SAMPLE COLLECTION

DOCUMENT NUMBER:				
DATE OF INCIDENT: FOLLOW-UP REQUESTED:		(CATID: BUNN01 2020 HAZARD ANALYSIS ⊠ COMPLIANCE □	
PRIMARY CONTACT: Han Lim, ESMC, 301-987-2327, hlim@cpsc.gov BACK-UP CONTACT: David Miller, EPHA, 301-504-7323, dmiller@cpsc.gov				
	NMENT MESSAGE:	parator massangar o	or bystandar	
1. 2.	Identify the victim(s) – operator, passenger, or bystander. Obtain the brand name (manufacturer), model name/number, and horsepower of the mower.			
3.	How old is the mower?			
4.	6			
5.				
6.				
7	carburetor, cracks/holes/split seams in the fuel tank, fuel hoses, fuel filter, vent grommets, etc.? 7. What type of surface was the mower placed on during the fire, e.g., concrete floor, asphalt, dirt floor,			
7. What type of surface was the mower placed on during the fire, e.g., concrete floor, asphalt, dirt grassy field, laminate floor, etc.?			on during the fire, e.g., concrete floor, asphalt, dirt floor,	
8.	At the time of the inciden		unning or not running?	
9.				
			ment or anything else that may have contributed to the incident.	
			ver - was it backwards, sideways, or forwards.	
11.			s the mower facing –uphill, downhill, across the hill, diagonal	
12	downhill, or diagonal uph		a hill or clans just before the insident?	
			a hill or slope just before the incident? wer at the time of the incident?	
			ne mower? If yes, list them.	
	Was the mower involved		10 mo mor 11 ges, 1100 mom	
			er, on items such as oil changes?	
			at this fire incident or for any other product related matter?	
18.	Are there are markings or ASTM, UL, etc.?	the mower indicati	ing certification to any industry standards such as ANSI,	
Along with answering the questions from the assignment message, please collect the gasoline powered equipment sample if possible. If shipping the entire unit is not feasible, carefully disassemble and ship the empty fuel tank and hoses, as it was the alleged source of fuel leak.				
Ship th	ne samples to CPSC F	Rockville, 5 Rese	earch Place, Rockville, MD 20850, attn: Han Lim.	
Please	include all primary and	d all backup cont	tacts in the distribution of the completed IDI.	
		Area below will !	be completed in Data Systems	
Person(s	s) to Contact:			
Guidelin	nes:			
Task Nu	mber:	Date:		

Processed by: lew

Assigned to: