



FLORIDA HIGHWAY PATROL  
 MEDIA RELEASE  
 TALLAHASSEE REGIONAL COMMUNICATIONS CENTER



12-15-09  
DATE

9:35 AM  
TIME  AM  PM

U S 98 and East of Navarre Sound Circle Westbound  
LOCATION OF INCIDENT

SANTA ROSA  
COUNTY

VEHICLE #	<b>1</b>	2000 YEAR	Dodge MAKE	Pick up MODEL	\$ 8000.00 DAMAGE	ALCOHOL RELATED? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Pend <input type="checkbox"/>	SEATBELT / HELMET IN USE? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
DRIVER:	Walter A Behrens NAME				21 AGE	Gulf Breeze, Florida CITY / STATE OF RESIDENCE	
INJURIES:	NONE <input type="checkbox"/>	MINOR <input checked="" type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>	Baptist Hospital - Gulf Breeze HOSPITAL	
PASSENGER:	None NAME				AGE	CITY / STATE OF RESIDENCE	
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>	SEATBELT / HELMET IN USE? Yes <input type="checkbox"/> No <input type="checkbox"/>	RELATIVE NOTIFIED? Yes <input type="checkbox"/> No <input type="checkbox"/>

VEHICLE #	<b>2</b>	1998 YEAR	Saturn MAKE	4 door MODEL	\$ 8000 DAMAGE	ALCOHOL RELATED? Yes <input type="checkbox"/> No <input type="checkbox"/> Pend <input checked="" type="checkbox"/>	SEATBELT / HELMET IN USE? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
DRIVER:	Thomas R. Portolan NAME				60 AGE	Navarre, Florida CITY / STATE OF RESIDENCE	
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input checked="" type="checkbox"/>	Sacred Heart Morgue HOSPITAL	
PASSENGER:	None NAME				AGE	CITY / STATE OF RESIDENCE	
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>	SEATBELT / HELMET IN USE? Yes <input type="checkbox"/> No <input type="checkbox"/>	RELATIVE NOTIFIED? Yes <input type="checkbox"/> No <input type="checkbox"/>

PEDESTRIAN:	NAME	AGE	CITY / STATE OF RESIDENCE
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/> CRITICAL <input type="checkbox"/> FATAL <input type="checkbox"/>
HOSPITAL	ALCOHOL RELATED? Yes <input type="checkbox"/> No <input type="checkbox"/> Pend <input type="checkbox"/> RELATIVE NOTIFIED? Yes <input type="checkbox"/> No <input type="checkbox"/>		

CHARGES: Pending on Driver 1

**NARRATIVE:**  
 Vehicle 2 was westbound on the outside lane of State Road 30 (U S 98). Vehicle 1 was eastbound on the inside lane of State Road 30 exceeding the posted speed limit of 45 miles per hour. Witnesses stated that V-1 was driving really fast coming up behind them and then passed them on the inside eastbound lane. The witnesses then stated Driver 1 lost control of Vehicle 1 as he attempted to change from the outside eastbound lane to the inside eastbound lane after passing them and before striking another vehicle that was traveling east on the outside lane. Vehicle 1 struck the center raise concrete median and became airborne in a northeasterly direction. Vehicle 1 entered the westbound lanes while airborne and struck the front left of Vehicle 2 on the outside westbound lane with the front left. Impact forced vehicle 1 to rotate clockwise, striking the rear left of vehicle 1 a second time with the rear right side of vehicle 2.. Vehicle 2 came to final rest south of vehicle 1 on the north paved five foot apron and grass shoulder facing west. Vehicle 1 came to final rest north of vehicle 2 on the grassy shoulder facing west. Driver 2 was pronounced deceased on scene by Lifeguard Paramedic Catherine Godbout at 9:41 P.M., on December 15,2009. Driver 1 was transported by Med Unit 2 to Baptist Hospital in Gulf Breeze, Florida, for minor injuries.

Cpl. Brian O. Davis  
 CRASH INVESTIGATOR  
 SGT DALLAS BASS  
 REVIEWED BY

Send completed Press Release to:  
[TallPR@fhp.hsmv.state.fl.us](mailto:TallPR@fhp.hsmv.state.fl.us)

Cpl. Michael J. Tucker  
 HOMICIDE INVESTIGATOR  
 FHPA09OFF051446  
 CASE NUMBER



FLORIDA HIGHWAY PATROL  
 MEDIA RELEASE  
 TALLAHASSEE REGIONAL COMMUNICATIONS CENTER



DATE \_\_\_\_\_ TIME  AM  PM LOCATION OF INCIDENT \_\_\_\_\_ ESCAMBIA COUNTY

VEHICLE # <input type="checkbox"/>	YEAR _____	MAKE _____	MODEL _____	\$ _____	DAMAGE _____	ALCOHOL RELATED Yes <input type="checkbox"/> No <input type="checkbox"/> Pend <input type="checkbox"/>	SEATBELT / HELMET IN USE? Yes <input type="checkbox"/> No <input type="checkbox"/>
DRIVER: _____						RELATIVE NOTIFIED Yes <input type="checkbox"/> No <input type="checkbox"/>	
NAME _____						CITY / STATE OF RESIDENCE _____	
INJURIES: NONE <input type="checkbox"/> MINOR <input type="checkbox"/> SERIOUS <input type="checkbox"/> CRITICAL <input type="checkbox"/> FATAL <input type="checkbox"/>						HOSPITAL _____	
PASSENGER: _____						SEATBELT / HELMET IN USE? Yes <input type="checkbox"/> No <input type="checkbox"/>	
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						RELATIVE NOTIFIED? Yes <input type="checkbox"/> No <input type="checkbox"/>	

CRASH INVESTIGATOR \_\_\_\_\_ Send completed Press Release to: \_\_\_\_\_ HOMICIDE INVESTIGATOR \_\_\_\_\_  
 REVIEWED BY \_\_\_\_\_ [TallPR@fhp.hsmv.state.fl.us](mailto:TallPR@fhp.hsmv.state.fl.us) \_\_\_\_\_ CASE NUMBER \_\_\_\_\_



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ADDITIONAL PASSENGER SECTION

VEH# _____	PASS# _____	NAME _____	AGE _____	CITY / STATE OF RESIDENCE _____	
INJURIES: NONE <input type="checkbox"/>		MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>
HOSPITAL _____				SEATBELT / HELMET IN USE? Yes <input type="checkbox"/> No <input type="checkbox"/>	
				RELATIVE NOTIFIED? Yes <input type="checkbox"/> No <input type="checkbox"/>	

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HOSPITAL _____				SEATBELT / HELMET IN USE? Yes <input type="checkbox"/> No <input type="checkbox"/>	
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