NFIRS-1 Basic

A

62210	MN	05	28	2020	Station #7 (07)	SPFD200528019298	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Location Type

Census tract: 0334.00

- ☑ Street Address
- ☐ Intersection
- ☐ In Front Of
- ☐ Rear Of
- ☐ Adjacent To
- ☐ Directions
- ☐ US National Grid

1544		UNIVERSITY	AVE-Avenue	W-West
Number	Prefix	Street or Highway	Street Type	Suffix

	Saint Paul	MN	55104
Apt./Suite/Room	City	State	Zip Code

Cross Street

C Incident Type

111- Building fire

D Aid Given Or Received

- ☐ 1 Mutual Aid Received
- ☐ 2 Auto. Aid Received
- ☐ 3 Mutual Aid Given
- ☐ 4 Auto. Aid Given
- ☐ 5 Other Aid Given
- ☑ None

Their FDID	Their State
Their Incident Number	

E1 Dates and Times

Alarm	05	28	2020	23:29
Arrival	05	28	2020	23:31
Controlled				
Last Unit Cleared	05	28	2020	23:45

E2 Shifts and Alarms

A	1	D1
Shift or Platoon	Alarms	District

E3 Special Studies

9244	4 - Unknown
ID#	Value

F Actions Taken

11- Extinguishment by fire service personnel

Primary Action Taken

G1 Resources

☑ Apparatus or Personnel Module is used.

	Apparatus	Personnel
Suppression	6	0
EMS	0	0
Other	0	0

☐ Resource counts include aid received resources.

G2 Estimated Dollar Losses and Values

Losses: Required for all fires if known. Optional for all non-fires.   None

		None
Property: $	300,000.00	☐
Contents: $	30,000.00	☐

Pre-Incident Values: Optional   None

		None
Property: $	1,372,100.00	☐
Contents: $	1,000,000.00	☐

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

H1 Casualties ☑ None

	Deaths	Injuries
Fire Service	0	0
Civilian	0	0

H2 Detector
Required for Confined Fires
- [ ] 1 - Detector Alerted Occupants
- [ ] 2 - Detector Did Not Alert Them
- [ ] 3 - Unknown

H3 Hazardous Materials Release
- [ ] 1 - Natural Gas
- [ ] 2 - Propane Gas
- [ ] 3 - Gasoline
- [ ] 4 - Kerosene
- [ ] 5 - Diesel Fuel / Fuel Oil
- [ ] 6 - Household Solvents
- [ ] 7 - Motor Oil
- [ ] 8 - Paint
- [ ] 0 - Other
- [x] None

I 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 and Residential
- [ ] 59 - Office Use
- [ ] 60 - Industrial Use
- [ ] 63 - Military Use
- [ ] 65 - Farm Use
- [ ] 00 - Other Mixed Use

J Property Use [ ] None

Structures
- 131 [ ] Church, Place of Worship
- 161 [ ] Restaurant or Cafeteria
- 162 [ ] Bar/Tavern or Nightclub
- 213 [ ] Elementary School, Kindegarten
- 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 [ ] Commerical Hotel or Motel
- 459 [ ] Residential, Board and Care
- 464 [ ] Dormitory/Barracks
- 519 [x] 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

Property Use: _____

Description

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

K2

Owner

Local Option	Person/Entity Type	Business Name (if applicable)	Phone Number

Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix

Number	Prefix	Street or Highway	Street Type	Suffix

Post Office Box	Apt./Suite/Room	City

State	Zip Code

L Remarks:

REPORT OF SMOKE COMING FROM THE BUILDING.

TASK FORCE #6 ARRIVED AND FOUND ACTIVE LOOTING AND SMOKE COMING FROM THE BUILDING. ENGINE #4'S CREW ATTEMPTED TO MAKE ENTRY BUT WERE MET BY PEOPLE THROWING THINGS AT THEM. CHIEF 3 PULLED THEM OUT AND WAITED FOR THE BUILDING TO EMPTY.

CREWS MADE ENTRY AGAIN AND FOUND A SMALL FIRE INSIDE AND QUICKLY PUT OUT THE BURNING CONTENTS.

IT APPEARED THAT THERE WAS ACTIVE FIRE IN THE ATTIC SPACE OF THE BUILDING. WHICH WAS DEEP SEATED.

M Authorization

Officer In Charge ID	Signature	Position or Rank	Assignment	Date
7611	Galle, John	DC	TASK FORCE 6	06/03/2020

Member Making Report ID	Signature	Position or Rank	Assignment	Date
7611	Galle, John	DC	TASK FORCE 6	06/03/2020

NFIRS-2 Fire

A

62210	MN	05	28	2020	Station #7 (07)	SPFD200528019298	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B

Property Details

B1 [_____] ☑ Not Residential

Estimated number of residential living units in the building of origin whether or not all units became involved

B2 [1] ☐ Buildings Not Involved

Number of buildings involved

B3 [_____] ☑ None ☐ Less than 1 acre

Acres burned (outside fires)

C

On-Site Materials Or Products

[121- Alcoholic beverage]

On-site material (1)

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 [10- Assembly or sales area, other]

Area of Fire Origin

D2 [60- Heat from other open flame or smoking materials, other]

Heat Source

D3 [99- Multiple items first ignited]

Item First Ignited

D4 [_____]

Type of Material First Ignited

E1

Cause of Ignition

☑ 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

[Undetermined]

Factor Contributing to Ignition

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 [_____]

☐ Male ☐ 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.

G

Fire Suppression Factors

[253- Riot or civil disturbance, including hostile acts]

Fire Suppression Factor

H1

Mobile Property Involved

☐ 1 - Not involved in ignition, but burned
☐ 2 - Involved in ignition, but did not burn
☐ 3 - Involved in ignition and burned
☑ None

[_____]

Mobile Property Model

State License Plate Number

H2

Mobile Property Type and Make

[_____]

Mobile Property Type

[_____]

Mobile Property Make

Year

VIN

Local Use

☐ Pre-Fire Plan Available
☐ Arson Report Attached
☐ Police Report Attached
☐ Coroner Report Attached
☐ Other Reports Attached

_____
_____
_____
_____
_____
_____

NFIRS-3 Structure Fire

I1
Structure Type
- ☑ 1 - Enclosed Building
- ☐ 2 - Portable/Mobile Structure
- ☐ 3 - Open Structure
- ☐ 4 - Air-Supported Structure
- ☐ 5 - Tent
- ☐ 6 - Open Platform
- ☐ 7 - Underground Structure
- ☐ 8 - Connective Structure
- ☐ 0 - Other

I2
Building Status
- ☐ 1 - Under Construction
- ☑ 2 - In Normal Use
- ☐ 3 - Idle, Not Routinely Used
- ☐ 4 - Under Major Renovation
- ☐ 5 - Vacant and Secured
- ☐ 6 - Vacant and Unsecured
- ☐ 7 - Being Demolished
- ☐ 0 - Other
- ☐ U - Undetermined

I3
Building Height

`1`

Number of Stories At/Above Grade

`0`

Number of Stories Below Grade

I4
Main Floor Size

`8000`

Total Square Feet

OR

`___` BY `___`

Length (ft) X Width (ft)

J1
Fire Origin

`1`   ☐ Below Grade

Story of Fire Origin

J2
Fire Spread
- ☐ Confined to Object of Origin
- ☐ 2 - Confined to Room of Origin
- ☐ 3 - Confined to Floor of Origin
- ☑ 4 - Confined to Building of Origin
- ☐ 5 - Beyond Building of Origin

J3
Number of Stories Damaged By Flame

`___` Number of Stories w/Minor Damage (1-24%)
`___` Number of Stories w/Significant Damage (25-49%)
`___` Number of Stories w/Heavy Damage (50-74%)
`___` Number of Stories w/Extreme Damage (75-100%)

*Count the roof as part of the highest story

K
Type of Material Contributing Most to Flame Spread

K1 `___`

Item Contributing Most to Flame Spread

K2 `___`

Type of Material Contributing Most To Flame Spread

L1
Presence of Detectors
- ☐ N - None Present
- ☑ 1 - Present
- ☐ U - Undetermined

L2
Detector Type
- ☐ 1 - Smoke
- ☐ 2 - Heat
- ☑ 3 - Combination of Smoke and Heat
- ☐ 4 - Sprinkler, Water Flow Detection
- ☐ 5 - More Than One Type Present
- ☐ 0 - Other
- ☐ U - Undetermined

L3
Detector Power Supply
- ☐ 1 - Battery Only
- ☐ 2 - Hardwire Only
- ☐ 3 - Plug-In
- ☐ 4 - Hardwire With Battery
- ☐ 5 - Plug-In With Battery
- ☐ 6 - Mechanical
- ☐ 7 - Multiple Detectors & Power Supplies
- ☐ 0 - Other
- ☑ U - Undetermined

L4
Detector Operation
- ☐ 1 - Fire Too Small To Activate
- ☑ 2 - Operated
- ☐ 3 - Failed To Operate
- ☐ U - Undetermined

L5
Detector Effectiveness
- ☐ 1 - Alerted Occupants, Occupants Responded
- ☐ 2 - Alerted Occupants, Occupants Failed to Respond
- ☐ 3 - There Were No Occupants
- ☐ 4 - Failed to Alert Occupants
- ☑ U - Undetermined

L6
Detector Failure Reason
- ☐ 1 - Power Failure, Shutoff, or Disconnect
- ☐ 2 - Improper Installation or Placement
- ☐ 3 - Defective
- ☐ 4 - Lack of Maintenance, Dirty
- ☐ 5 - Battery Missing or Disconnected
- ☐ 6 - Battery Discharged or Dead
- ☐ 0 - Other
- ☐ U - Undetermined

M1
Presence of Automatic Extinguishing System
- ☐ N - None Present
- ☐ 1 - Present
- ☐ 2 - Partial System Present
- ☑ U - Undetermined

M2
Type of Automatic Extinguishing System
- ☐ 1 - Wet-Pipe Sprinkler
- ☐ 2 - Dry-Pipe Sprinkler
- ☐ 3 - Other Sprinkler System
- ☐ 4 - Dry Chemical System
- ☐ 5 - Foam System
- ☐ 6 - Halogen-Type System
- ☐ 7 - Carbon Dioxide System
- ☐ 0 - Other
- ☐ U - Undetermined

Required if fire was within designed range of AES

M3
Operation of Automatic Extinguishing System
- ☐ 1 - Operated/Effective
- ☐ 2 - Operated/Not Effective
- ☐ 3 - Fire Too Small To Activate
- ☐ 4 - Failed To Operate
- ☐ 0 - Other
- ☐ U - Undetermined

Required if fire was within designed range

M4
Number of Sprinkler Heads Operating

`___`

Required if system operated

M5
Reason for Automatic Extinguishing System Failure
- ☐ 1 - System Shut Off
- ☐ 2 - Not Enough Agent Discharged
- ☐ 3 - Agent Discharged But Did Not Reach Fire
- ☐ 4 - Wrong Type of System
- ☐ 5 - Fire Not In Area Protected
- ☐ 6 - System Components Damaged
- ☐ 7 - Lack of Maintenance
- ☐ 8 - Manual Intervention
- ☐ 0 - Other
- ☐ U - Undetermined

Required if system failed or not effective