

Saint Paul Fire Department FIRE INCIDENT DISPOSITION



INCIDENT NUMBER:	15-37976	DATE OF INCIDENT: 11/23/2015																					
TIME OF INCIDENT:	2214 hrs.	POLICE CASE #: Not applicable																					
INVESTIGATOR(s):	Brian Kroeger																						
INCIDENT ADDRESS:	435 Thomas Ave.																						
OCCUPANT NAME:	Tamara York-Tallman DOB 04/06/1985	PHONE: 612-432-4940																					
OWNER NAME:	Drb #24 Llc	PHONE: 612-720-1451																					
ADDRESS OF OWNER:	1020 Davern St, St Paul MN 55116																						
PROPERTY DAMAGED:	SFD	AREA OF ORIGIN: Ceiling above entryway																					
DAMAGE ESTIMATE:	Building \$20,000	Vehicle \$	Other(Describe) \$																				
VALUE:	Building \$129,800	Vehicle \$	Other(Describe) \$																				
Damage Estimate CONTENTS ONLY:	\$5,000																						
INJURY/DEATH (if yes, explain)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																						
SMOKE DETECTOR, SPRINKLER, and CARBON MONOXIDE INFORMATION:	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Smoke Detector Present:</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> Unknown</td> </tr> <tr> <td>Detector Functioning:</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> Unknown</td> </tr> <tr> <td>Sprinkler System Present:</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> <td><input type="checkbox"/> Unknown</td> </tr> <tr> <td>Sprinkler Heads activated:</td> <td><input type="checkbox"/> Yes #</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> Unknown</td> </tr> <tr> <td>C.O Detector Present:</td> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input checked="" type="checkbox"/> Unknown</td> </tr> </table>			Smoke Detector Present:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown	Detector Functioning:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown	Sprinkler System Present:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Unknown	Sprinkler Heads activated:	<input type="checkbox"/> Yes #	<input type="checkbox"/> No	<input type="checkbox"/> Unknown	C.O Detector Present:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Unknown
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SYNOPSIS:	<p>The fire department was called to a reported dwelling fire. On arrival, Engine #18 and other responding crews found and extinguished a fire in the ceiling joists above the entryway to a rear kitchen. The tenant reports being home and further that there was nothing unusual tonight until she heard noises and then saw fire above the entryway. There was a very small fire in a different part of the property that was caused by an electrical defect approximately one month ago. No breakers were tripped. There were no competent ignition sources in the area of origin apart from electrical. The first material ignited was wood or insulation. The ignition source was heat from a faulty electrical system. Accidental factors brought these together. The classification of fire cause is accidental.</p>																						
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