NFIRS -1 Basic

A

FDID *	State *	Incident Date * (MM / DD / YYYY)	Station	Incident Number *	Exposure *
62210	MN	01 / 31 / 2014	07	14-0003208	000

☐ Delete ☐ Change ☐ No Activity

B Location *

☐ Check this box to Indicate that the address for this incident is provided on the Wildland Fire Module In Section B "Alternative Location Specification". Use only for Wildland fires.

Census Tract: 0315 - 00

☒ Street address
☐ Intersection
☐ In front of
☐ Rear of
☐ Adjacent to
☐ Directions

Number/Milepost	Prefix	Street or Highway	Street Type	Suffix
750		JESSIE	ST	

Apt./Suite/Room	City	State	Zip Code
1	SAINT PAUL	MN	55130 -

Cross street or directions, as applicable

C Incident Type *

111 Building fire

Incident Type

D Aid Given or Received *

1 ☐ Mutual aid received
2 ☐ Automatic aid recv.
3 ☐ Mutual aid given
4 ☐ Automatic aid given
5 ☐ Other aid given
N ☒ None

Their FDID | Their State

Their Incident Number

E1 Date & Times

Midnight is 0000

Check boxes if dates are the same as Alarm Date.

	Month	Day	Year	Hr Min Sec
ALARM always required — Alarm *	01	31	2014	05:24:47
ARRIVAL required, unless canceled or did not arrive — ☒ Arrival *	01	31	2014	05:28:03
CONTROLLED Optional, Except for wildland fires — ☐ Controlled				
LAST UNIT CLEARED, required except for wildland fires — ☒ Last Unit Cleared	01	31	2014	08:54:24

E2 Shift & Alarms

Local Option

Shift or Platoon	Alarms	District
A	01	D3

E3 Special Studies

Local Option

Special Study ID# | Special Study Value

F Actions Taken *

11 Extinguishment by fire

Primary Action Taken (1)

Additional Action Taken (2)

Additional Action Taken (3)

G1 Resources *

☒ Check this box and skip this section if an Apparatus or Personnel form is used.

	Apparatus	Personnel
Suppression	0013	
EMS		
Other		

☐ Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses & Values

LOSSES: Required for all fires if known. Optional for non fires.

		None
Property $	050,000	☐
Contents $	010,000	☐

PRE-INCIDENT VALUE: Optional

Property $	000,000	☐
Contents $	000,000	☐

Completed Modules

☒ Fire-2
☒ Structure-3
☐ Civil Fire Cas.-4
☐ Fire Serv. Cas.-5
☐ EMS-6
☐ HazMat-7
☐ Wildland Fire-8
☒ Apparatus-9
☐ Personnel-10
☐ Arson-11

H1 * Casualties ☒ None

	Deaths	Injuries
Fire Service		
Civilian		

H2 Detector

Required for Confined Fires.

1 ☐ Detector alerted occupants
2 ☐ Detector did not alert them
U ☐ Unknown

H3 Hazardous Materials Release

N ☐ None
1 ☐ Natural Gas: slow leak, no evaluation or HazMat actions
2 ☐ Propane gas: <21 lb. tank (as in home BBQ grill)
3 ☐ Gasoline: vehicle fuel tank or portable container
4 ☐ Kerosene: fuel burning equipment or portable storage
5 ☐ Diesel fuel/fuel oil: vehicle fuel tank or portable
6 ☐ Household solvents: home/office spill, cleanup only
7 ☐ Motor oil: from engine or portable container
8 ☐ Paint: from paint cans totaling < 55 gallons
0 ☐ Other: Special HazMat actions required or spill > 55gal., Please complete the HazMat form

I Mixed Use Property

NN ☐ Not Mixed
10 ☐ Assembly use
20 ☐ Education use
33 ☐ Medical use
40 ☐ Residential use
51 ☐ Row of stores
53 ☐ Enclosed mall
58 ☐ Bus. & Residential
59 ☐ Office use
60 ☐ Industrial use
63 ☐ Military use
65 ☐ Farm use
00 ☐ Other mixed use

J Property Use * Structures

131 ☐ Church, place of worship
161 ☐ Restaurant or cafeteria
162 ☐ Bar/Tavern or nightclub
213 ☐ Elementary school or kindergarten
215 ☐ High school or junior high
241 ☐ College, adult education
311 ☐ Care facility for the aged
331 ☐ Hospital
341 ☐ Clinic,clinic type infirmary
342 ☐ Doctor/dentist office
361 ☐ Prison or jail, not juvenile
419 ☒ 1-or 2-family dwelling
429 ☐ Multi-family dwelling
439 ☐ Rooming/boarding house
449 ☐ Commercial hotel or motel
459 ☐ Residential, board and care
464 ☐ Dormitory/barracks
519 ☐ Food and beverage sales
539 ☐ Household goods,sales,repairs
579 ☐ Motor vehicle/boat sales/repair
571 ☐ Gas or service station
599 ☐ Business office
615 ☐ Electric generating plant
629 ☐ Laboratory/science lab
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/care 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

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:

Property Use: 419

1 or 2 family dwelling

NFIRS-1 Revision 03/11/99

A | 62210 (FDID *) | MN (State *) | MM 01 / DD 31 / YYYY 2014 (Incident Date *) | 07 (Station) | 14-0003208 (Incident Number *) | 000 (Exposure *) | ☐ Delete ☐ Change ☐ No Activity | NFIRS -2 Fire

B Property Details

B1 0002 ☐ Not Residential
Estimated Number of residential living units in building of origin whether or not all units became involved

B2 001 ☐ Buildings not involved
Number of buildings involved

B3 ☒ None
Acres burned (outside fires) ☐ Less than one acre

C On-Site Materials or Products ☒ None

Complete if there were any significant amounts of commercial, industrial, energy or agricultural products or materials on the Property, whether or not they became involved

Enter up to three codes. Check one or more boxes for each code entered.

NNN | None — On-site material (1)
1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service

On-site material (2)
1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service

On-site material (3)
1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service

D Ignition

D1 24 | Cooking area, kitchen — Area of fire origin *

D2 13 | Electrical arcing — Heat source *

D3 81 | Electrical wire, cable — Item first ignited *
1 ☐ Check Box if fire spread was confined to object of origin

D4 Type of material first ignited — Required only if item first ignited code is 00 or <70

E1 Cause of Ignition

☐ Check box if this is an exposure report. Skip to section G

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 ☐ None

33 | Short-circuit arc — Factor Contributing To Ignition (1)

Factor Contributing To Ignition (2)

E3 Human Factors Contributing To Ignition

Check all applicable boxes

1 ☐ Asleep ☒ None
2 ☐ Possibly impaired by alcohol or drugs
3 ☐ Unattended person
4 ☐ Possibly mental disabled
5 ☐ Physically Disabled
6 ☐ Multiple persons involved
7 ☐ Age was a factor

Estimated age of person envolved

1 ☐ Male 2 ☐ Female

F1 Equipment Involved In Ignition

☐ None If Equipment was not involved, Skip to Section G

217 | Outlet, receptacle — Equipment Involved

Brand
Model
Serial #
Year

F2 Equipment Power

11 | Electrical — Equipment Power Source

F3 Equipment Portability

1 ☐ Portable
2 ☒ Stationary

Portable equipment normally can be moved by one person, is designed to be use in multiple locations, and requires no tools to install.

G Fire Suppression Factors

Enter up to three codes. ☐ None

Fire suppression factor (1)
Fire suppression factor (2)
Fire suppression factor (3)

H1 Mobile Property Involved

☐ None

1 ☐ Not involved in ignition, but burned
2 ☐ Involved in ignition, but did not burn
3 ☐ Involved in ignition and burned

H2 Mobile Property Type & Make

Mobile property type
Mobile property make
Moblie property model — Year
License Plate Number — State — VIN Number

Local Use

☐ Pre-Fire Plan Available
Some of the information presented in this report may be based upon reports from other Agencies

☐ Arson report attached
☐ Police report attached
☐ Coroner report attached
☐ Other reports attached

NFIRS-2 Revision 01/19/99

I1 Structure Type *

If Fire was In enclosed building or a portable/mobile structure complete the rest of this form

1 [X] Enclosed Building
2 [ ] Portable/mobile structure
3 [ ] Open structure
4 [ ] Air supported structure
5 [ ] Tent
6 [ ] Open platform (e.g. piers)
7 [ ] Underground structure (work areas)
8 [ ] Connective structure (e.g. fences)
0 [ ] Other type of structure

I2 Building Status *

1 [ ] Under construction
2 [X] Occupied & operating
3 [ ] Idle, not routinely used
4 [ ] Under major renovation
5 [ ] Vacant and secured
6 [ ] Vacant and unsecured
7 [ ] Being demolished
O [ ] Other
U [ ] Undetermined

I3 Building * Height

Count the ROOF as part of the highest story

002 Total number of stories at or above grade

001 Total number of stories below grade

I4 Main Floor Size*

NFIRS-3 Structure Fire

, 001 , 800 Total square feet

OR

, 060 BY , 030

Lenght in feet — Width in feet

J1 Fire Origin *

[ ] Below Grade

002 Story of fire origin

J2 Fire Spread *

1 [ ] Confined to object of origin
2 [ ] Confined to room of origin
3 [X] Confined to floor of origin
4 [ ] Confined to building of origin
5 [ ] Beyond building of origin

J3 Number of Stories Damaged By Flame

Count the ROOF as part of the highest story

[ ] Number of stories w/ minor damage (1 to 24% flame damage)

[ ] Number of stories w/ significant damage (25 to 49% flame damage)

[ ] Number of stories w/ heavy damage (50 to 74% flame damage)

[ ] Number of stories w/ extreme damage (75 to 100% flame damage)

K Material Contributing Most To Flame Spread

[ ] Check if no flame spread OR same as material first ignited OR unable to determine — Skip To Section L

K1 [ ] Item contributing most to flame spread

K2 [ ] Type of material contributing most of flame spread — Required only if item contributing code is 00 or<70

L1 Presence of Detectors *

(In area of the fire)

N [ ] None Present — Skip to section M

1 [X] Present

U [ ] Undetermined

L2 Detector Type

1 [ ] Smoke
2 [ ] Heat
3 [X] Combination smoke - heat
4 [ ] Sprinkler, water flow detection
5 [ ] More than 1 type present
O [ ] Other _____
U [ ] Undetermined

L3 Detector Power Supply

1 [ ] Battery only
2 [ ] Hardwire only
3 [ ] Plug in
4 [X] Hardwire with battery
5 [ ] Plug in with battery
6 [ ] Mechanical
7 [ ] Multple detectors & power supplies
0 [ ] Other _____
U [ ] Undetermined

L4 Detector Operation

1 [ ] Fire too small to activate
2 [X] Operated (Complete Section L5)
3 [ ] Failed to Operate (Complete Section L6)
U [ ] Undetermined

L5 Detector Effectiveness

Required if detector operated

1 [X] Alerted Occupants, occupants responded
2 [ ] Occupants failed to respond
3 [ ] There were no occupants
4 [ ] Failed to alert occupants
U [ ] Undetermined

L6 Detector Failure Reason

Required if detector failed to operate

1 [ ] Power failure, shutoff or disconnect
2 [ ] Improper installation or placement
3 [ ] Defective
4 [ ] Lack of maintenance, includes cleaning
5 [ ] Battery missing or disconnected
6 [ ] Battery discharged or dead
0 [ ] Other _____
U [ ] Undetermined

M1 Presence of Automatic Extinguishment System *

N [X] None Present

1 [ ] Present — Complete rest of Section M

M2 Type of Automatic Extinguishment System *

Required if fire was within designed range of AES

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 (CO_2) system
0 [ ] Other special hazard system
U [ ] Undetermined

M3 Automatic Extinguishment System Operation

Required if fire was within designed range

1 [ ] Operated & effective (Go to M4)
2 [ ] Operated & not effective (M4)
3 [ ] Fire too small to activate
4 [ ] Failed to operate (Go to M5)
0 [ ] Other
U [ ] Undetermined

M4 Number of Sprinkler Heads Operating

Required if system operated

[ ] Number of sprinkler heads operating

M5 Automatic Extinguishment System Failure Reason

Required if system failed

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

NFIRS-3 Revision 01/19/99

K1 Person/Entity Involved

Local Option

Business name (if applicable):

Area Code: 612 Phone Number: 810-1318

☐ Check This Box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs.: | First Name: CLAIRE | MI: A | Last Name: COENEN | Suffix:

Number: 750 | Prefix: | Street or Highway: JESSIE | Street Type: ST | Suffix:

Post Office Box: | Apt./Suite/Room: 2 | City: SAINT PAUL

State: MN | Zip Code: 55130-

☐ More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary

K2 Owner

Local Option

☐ Same as person involved? Then check this box and skip The rest of this section.

Business name (if Applicable):

Area Code: 612 Phone Number: 354-0807

☒ Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs.: | First Name: RICKY | MI: | Last Name: BAKER | Suffix:

Number: 750 | Prefix: | Street or Highway: JESSIE | Street Type: ST | Suffix:

Post Office Box: | Apt./Suite/Room: 1 | City: SAINT PAUL

State: MN | Zip Code: 55130-

L Remarks

Local Option

REPORT OF A SECOND FLOOR KITCHEN FIRE. THE OCCUPANT WOKE UP WHEN HER TV WENT OFF AND SHE NOTICED HER LIGHTS IN HER KITCHEN HAD STOPPED WORKING. THE OCCUPANT ALSO HEARD NOISES COMING FROM INSIDE THE KITCHEN WALL, SO SHE STRUCK THE WALL. THAT IS WHEN SHE NOTICED SMOKE AND FLAMES EMITTING FROM THE WALL AND CEILING.

ENGINE #4 ARRIVED ON SCENE, COMPLETED A WALK AROUND, AND DIRECTED IN COMING COMPANIES. THEY USED A HOSE LINE TO ATTACK THE FIRE IN THE KITCHEN AND ON THE SECOND FLOOR IN THE REAR. I ASSUMED COMMAND FROM ENGINE #4 AND REQUESTED XCEL GAS AND ELECTRIC.

SQUAD #1 PARKED IN THE REAR, USED A HOSE LINE TO BACK UP ENGINE #4, AND COMPLETED THE SEARCH OF THE SECOND FLOOR BUT DID NOT FIND ANY VICTIMS. ENGINE #17 CONNECTED A WATER SUPPLY TO ENGINE #4 AND USED A SECOND HOSE LINE TO PUT THE FIRE OUT IN THE ATTIC ABOVE THE KITCHEN. LADDER #7 RAISED GROUND LADDERS AND PROVIDED LIGHTS AND FANS FOR SMOKE. THEY ALSO RAISED THE LADDER TO THE ROOF TO CUT SMOKE VENTILATION HOLES IN THE ROOF.

STAND BY SAFETY CREWS WERE DISTRICT CHIEF #2, ENGINE #8, LADDER #8, SQUAD #3, MEDIC #8, AND MEDIC #22. DISTRICT CHIEF #2 WAS ASSIGNED DIVISION C IN THE REAR. MEDIC #22'S CREW ASSISTED COMMANDER. SQUAD #1 REPORTED THE FIRE OUT IN THE ATTIC AT 0548 HOURS. SAFETY CHECKS WERE COMPLETED EVERY 15 MINUTES. PRIMARY SEARCH OF THE BUILDING COMPLETED AT 0550 HOURS.

I REQUESTED BOARD UP FOR FOUR WINDOWS AND VENTILATION HOLES. THE OWNER CALLED RED CROSS. SALVAGE AND OVERHAUL OPERATIONS WERE COMPLETED. A FIRE REVIEW WILL BE HELD LATER.

FIRE INVESTIGATOR BLANK ON SCENE FOR FURTHER INVESTIGATION.

L Authorization

Officer in charge ID	Signature	Position or rank	Assignment	Month	Day	Year
1892	JADWINSKI, STANLEY J	150	C3	02	01	2014

Check Box if same as Officer in charge.	Member making report ID	Signature	Position or rank	Assignment	Month	Day	Year
☒	1892	JADWINSKI, STANLEY J	150	C3	02	01	2014

Saint Paul Fire Department
FIRE INCIDENT DISPOSITION

INCIDENT NUMBER:	14-03208	DATE OF INCIDENT: 01-31-2014	
TIME OF INCIDENT:	0524 Hours	POLICE CASE #: N/A	
INVESTIGATOR(s):	Blank, J		
INCIDENT ADDRESS:	750 Jessie Street, Apartment #2, 55130		
OCCUPANT NAME:	Claire E Coenen	PHONE:612-810-1318	
OWNER NAME:	Ricky L Baker	PHONE:612-354-0807	
ADDRESS OF OWNER:	750 Jessie Street, Apartment #1,55130		
PROPERTY DAMAGED:	Up/Down Duplex	AREA OF ORIGIN:East Kitchen Wall	
DAMAGE ESTIMATE:	Building $50,000	Vehicle $n/a	Other(Describe) $n/a
VALUE:	Building $151,000	Vehicle $n/a	Other(Describe) $n/a
Damage Estimate CONTENTS ONLY:	$10,000		
INJURY/DEATH (if yes, explain)	☒ No ☐ Yes		

SMOKE DETECTOR, SPRINKLER, and CARBON MONOXIDE INFORMATION:			
Smoke Detector Present:	☒ Yes	☐ No	☐ Unknown
Detector Functioning:	☐ Yes	☐ No	☒ Unknown
Sprinkler System Present:	☐ Yes	☒ No	☐ Unknown
Sprinkler Heads activated:	☐ Yes #	☒ No	☐ Unknown
C.O Detector Present:	☐ Yes	☒ No	☐ Unknown

FIRE CAUSE CLASSIFICATION:	
☒ Accidental	☐ Juvenile/Incendiary
☐ Incendiary	☐ Child (under 10 years old)
☐ Natural	☐ Undetermined
☐ Under Investigation	

SYNOPSIS:

The Fire Department was called to a report of a kitchen fire. Upon arrival the fire was venting out of the second floor door on the south side of the house. Crews stretched hoselines and extinguished the fire. The occupant in the upstairs Unit #2 reports waking up when she noticed her TV was off as well as the lights in the kitchen. She then noticed sounds coming from inside the kitchen wall. After banging on the wall, smoke and then fire emitted from the wall at the ceiling level. The occupant denies any electrical problems or burning candles. Examination revealed a mostly destroyed electrical outlet attached to the wiring in the kitchen wall (area of origin). No other ignition sources in the area were present. The ignition source is a high resistance electrical connection. The first fuel ignited is the insulation on the wiring. The action that brought these items together was a loose wire connection. The classification of cause is accidental.

DISPOSITION:	
☐ E-mail only	☐ Hold Scene until approved
☐ DO NOT DEMOLISH until approved	☒ Scene Released
☐ Analysis of Evidence Pending	☒ Report to Follow

FIRE INVESTIGATION REPORT

INCIDENT NO: 14-03208 DATE: 01/31/2014 TIME: 0524 HOURS

ADDRESS: 750 JESSIE STREET INSURANCE CO: AMERICAN FAMILY

DAMAGE ESTIMATE: $60,000

SYNOPSIS: On Friday, January 31, 2014, at approximately 0524 hours, the Saint Paul Fire Department responded to a report of a kitchen fire. The location of the incident was 750 Jessie Street, Apartment #2. Upon the fire department's arrival, fire suppression personnel stretched hose lines and quickly extinguished a fire in the kitchen of the upstairs unit. The source of ignition was a high resistance electrical connection. The first fuel ignited was the insulation on the wiring. The action that brought these items together was a loose wire connection. The classification of fire cause is accidental.

PEOPLE: Property Owner/Occupant RICKY L BAKER, 750 Jessie Street, Apartment #1, 55130, 612-354-0807, DOB 09/11/1959.

Occupant, CLAIRE A COENEN, 750 Jessie Street, Apartment #2, 55130, 612-810-1318, DOB 07/14/1958.

BACKGROUND: I received notification of the fire via the Communications Center at approximately 0524 hours. I responded to the incident scene and arrived at approximately 0541 hours. Engine #4 was the first arriving fire department vehicle. At the time of my arrival, fire extinguishment and checking for extension were underway. At the time of the fire, the visibility outside was clear, the temperature was approximately -17 degrees Fahrenheit, and the winds were calm.

PROPERTY DESCRIPTION: The fire-damaged structure is a two and a half-story up and down duplex. The foundation is made of fieldstone. The exterior walls are covered with vinyl siding. The structure has a pitched roof with asphalt shingles. The interior walls are covered with wood paneling. The structure measures approximately 30 feet wide by 60 feet deep. The front of the structure faces west and the structure runs west to east.

EXTERIOR EXAMINATION: Visual inspection of the building's west side revealed the front door. Examination of the west and north sides of the structure found there were no signs of smoke or fire damage.

The east side of the building showed signs of soot staining that ran down the vinyl siding from the side closest to the south wall. There was no fire damage visible. The roof over the southeast corner of the structure showed signs of freshly melted snow.

The electric meters were located on the east side of the building and did not appear to have suffered any damage due to the fire. The electric weatherhead and service drop appeared in good condition with no visible damage sustained.

The south side of the structure showed signs of soot damage that ran down from the outside porch stairs that led to the upstairs unit. The roof that covered the exterior staircase on the south side of the structure suffered heavy fire and smoke damage to its underside with a small amount of fire damage to the vinyl siding to the west of the porch roof. The window to the west of the second floor south side entry was broken by fire suppression personnel during suppression efforts. Two gas meters were located on the south side of the structure and were turned off by firefighters.

INTERIOR EXAMINATION: Observation of the first floor revealed no signs of smoke or fire damage. There was a small amount of water damage in the area of the kitchen as a result of firefighting operations. Both the front door on the west side of the unit and the side door on the south side of the structure did not appear damaged.

Inspection of the stairs leading to the basement showed no signs of smoke or fire damage. Examination of the water heater, washer, dryer, and furnace appeared in good condition and indicated no signs of smoke or fire damage. Examination of the fuse box for the lower unit revealed no burnt fuses. The fuse box for the upstairs unit showed a 20 AMP and 30 AMP burnt fuses. There was no labeling for the fuse panel for the upper unit. Both fuse boxes had their main fuse pulled by firefighters during suppression efforts. Neither fuse box showed signs of smoke or fire damage.

Observation of the stairs leading to the attic space showed light smoke damage and no signs of fire damage. There was a smoke detector visible lying on the staircase leading to the attic that had not sounded during the fire. The attic space showed signs of smoke and fire damage in the southeast corner. Fire suppression personnel performed overhaul in this area to remove charred blown-in insulation. The fire damage in this area appeared to come from below due to charring on the underside of the blown-in insulation and no damage to the topside of the blown-in insulation. The interior of the attic roof suffered charring in the southeast corner.

Examination of the front interior stairs leading to the second floor unit revealed no smoke or fire damage. The locks on the door at the top of the staircase appeared intact and undamaged. Investigation of the second floor front bedroom located on the west side of the unit had the door shut during the fire. There was a smoke detector located in the front bedroom that did not sound during the fire. The room suffered no smoke or fire damage. The bedroom on the north side of the unit suffered light smoke damage and no fire damage.

In the living room area, which was located to the west of the kitchen, there was moderate smoke damage and no fire damage. On the east side of the second floor unit there was a bathroom that contained a large whirlpool tub. Inspection of this room revealed moderate smoke damage and no fire damage.

Investigation of the kitchen showed the most smoke and fire damage in the building. Along the north wall of the kitchen there was moderate smoke damage down to approximately the four-foot level. The gas stove appeared in good condition with no fire damage. The west wall of the kitchen revealed heavy smoke damage down to approximately the four-foot level. The refrigerator appeared in good condition with no fire damage. The south wall of the kitchen revealed heavy charring on the exit door leading to the exterior staircase from the top of the doorframe to approximately the four-foot level. The window located to the west of the south kitchen door also suffered heavy charring from the ceiling level down to approximately the four-foot level above the floor.

Examination of the east wall of the kitchen showed the heaviest fire damage in the kitchen. The kitchen wall cabinets located along the east wall had lighter fire charring to the north and increasing fire charring moving from north to the south. Located behind the kitchen cabinets, along the east wall, there was charring in a stud channel that went from the ceiling level and extended all the way to approximately six inches above the floor level. Vector patterns to the right and left of this stud channel showed that the fire originated within this wall cavity. This stud channel suffered the heaviest charring compared to the stud channels on either side.

Inspection of the stud channel revealed complete burn through towards the bottom of the stud channel. Visible through the complete burn area was PVC piping that showed burning on the side closest to the stud channel and no burning on the side away from the stud channel. Examination of the space behind the stud channel showed no fire damage to the rest of the interior space located behind the whirlpool tub space.

Investigation within the heavily charred stud space revealed metal covered Romex wiring and knob and tube wiring. Investigation to locate the plug that should have been located at approximately the two-foot level showed that the electrical outlet was missing from the stud channel. Examination of the wiring located in the stud channel revealed that a very small part of the electrical outlet box was still attached to the Romex wiring, but the rest of the electrical box was missing. Inspection of the Romex wiring showed that metal had spattered on the parts of the remaining outlet and Romex wiring.

INTERVIEWS: Property Owner/Occupant, RICKY L BAKER, stated in person on 01/31/2014:

- I haven't had any electrical problems with the house.

- I've owned the house for a long time.
- We had a history of a raccoon in the wall on the west side of the house last year.
- I have American Family Insurance.

Occupant, CLAIRE A COENEN, stated in person on 01/31/2014:

- My granddaughter and I were sleeping in the living room.
- I woke up when I noticed the TV wasn't on anymore.
- I noticed that the lights in the kitchen were off also.
- There was no smoke or fire visible at this time.
- I heard what I thought was a scratching noise coming from inside the east kitchen wall around the area of the countertop.
- I pounded on the wall because I thought it might be a mouse.
- Smoke came out of the wall where it meets the ceiling after I pounded on the wall.
- Then a small amount of fire came out where the smoke had been.
- I filled a pan with water and put the fire out.
- The smoke increased and then more fire came out at the ceiling level.
- I told my granddaughter to go downstairs to the neighbors to call 9-1-1 because my cell phone was out of minutes.
- I then exited the house.
- The smoke alarm in the front bedroom on the west side of the house never sounded.
- I had my front bedroom door shut to conserve heat and that's the only smoke detector up here.
- I don't have any renter's insurance.

- I'm the only one who regularly lives here.
- My granddaughter stays here sometimes while she goes to college.
- The shelving that is located between the kitchen cabinets and the south door of the house had a coffee pot and cell phone sitting on it.
- The coffee pot and cell phone weren't plugged in.

PHOTOGRAPHS/SKETCH: Digital photographs were taken.

EVIDENCE: No evidence was collected.

CONCLUSION: After examination of the fire scene and investigation of fire patterns of both movement and intensity, it is my opinion this fire originated in the east wall of the kitchen in the upstairs unit. All other competent ignition sources have been eliminated. The source of ignition was a high resistance electrical connection. The first fuel ignited was insulation on the wiring. The action that brought these items together was a loose wire connection. The classification of cause is accidental. This investigation is considered closed.

J. Blank, Fire Investigator, A Shift, 2-3-2014

JB/su