



Saint Paul Fire Department
645 Randolph Avenue
Saint Paul, MN 55102
(651) 224-7811

NFIRS-1 Basic

A

62210	MN	08	11	2024	Station #18 (18)	SPFD240811039322	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B **Location Type**

Census tract:
0325.00

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

799		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 08 11 2024 23:12

Arrival 08 11 2024 23:13

Controlled

Last Unit Cleared 08 12 2024 10:27

E2 **Shifts and Alarms**

A 2 D2

Shift Alarms District
or
Platoon

E3 **Special Studies**

9244 4 - Unknown

ID# Value

F Actions Taken 11-Extinguishment by fire service personnel Primary Action Taken 12-Salvage & overhaul Additional Action Taken 84-Refer to proper authority Additional Action Taken	G1 Resources ☒ Apparatus or Personnel Module is used. Apparatus Personnel <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-right: 1px solid black; padding: 2px;">Suppression</td> <td style="border-right: 1px solid black; text-align: center; width: 40px;">0</td> <td style="text-align: center; width: 40px;">0</td> </tr> <tr> <td style="border-right: 1px solid black; padding: 2px;">EMS</td> <td style="border-right: 1px solid black; text-align: center;">2</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="border-right: 1px solid black; padding: 2px;">Other</td> <td style="border-right: 1px solid black; text-align: center;">1</td> <td style="text-align: center;">0</td> </tr> </table> ☐ Resource counts include aid received resources.	Suppression	0	0	EMS	2	0	Other	1	0	G2 Estimated Dollar Losses and Values Losses: Required for all fires if known. Optional for all non-fires. None Property: \$ 160,000.00 ☐ Contents: \$ 120,000.00 ☐ Pre-Incident Values: Optional None Property: \$ 160,000.00 ☐ Contents: \$ 120,000.00 ☐
Suppression	0	0									
EMS	2	0									
Other	1	0									

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 <table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">Deaths</td> <td style="text-align: center;">Injuries</td> </tr> <tr> <td style="border-right: 1px solid black; padding: 2px;">Fire Service</td> <td style="border: 1px solid black; text-align: center; width: 40px;">0</td> <td style="border: 1px solid black; text-align: center; width: 40px;">0</td> </tr> <tr> <td style="border-right: 1px solid black; padding: 2px;">Civilian</td> <td style="border: 1px solid black; text-align: center;">0</td> <td style="border: 1px solid black; text-align: center;">0</td> </tr> </table>		Deaths	Injuries	Fire Service	0	0	Civilian	0	0	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 ☒ 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
	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											

J Property Use ☐ None Structures 131 ☐ Church, Place of Worship 161 ☒ Restaurant or Cafeteria 162 ☐ Bar/Tavern or Nightclub 213 ☐ Elementary School, Kindergarten 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 ☐ 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
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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.
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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:

Saint Paul fire crews were called for a report of a building fire. Crews arrived to find heavy smoke and fire on the first and second floors of a 2-story multi-occupancy structure. A restaurant occupied the first floor, and storage occupied the basement and second floor.

Fire crews performed forcible entry, made entry, and attempted to extinguish the fire. Squad 2 encountered high heat, fire, and heavy smoke in the stairwell leading to the second floor. Squad 2's hose line malfunctioned, and the crew backed out. Additional crews attempted to locate basement access.

Water supplies were established. Ladder 22 and Ladder 18 deployed their aerials for use and secured water supplies as well. Heavy smoke became visible from the entire Bravo side at the roofline, as well as just above ground level on the Delta side.

The decision was made to transition to a defensive strategy. All fire companies exited the structure and prepared for defensive operations. PAR was conducted and all crews were accounted for.

Ladder 22 employed their aerial master stream from the B side, into the second floor. A sizeable percentage of the fire was knocked down with the master stream use, and that was shut down.

After conferring with senior command staff, the decision was made to once again make entry with hand lines and conduct final extinguishment of the remaining fire. Ladder 6's crew and Ladder 18's crew made vent/inspection holes in the roof, and determined the roof was not involved in fire....

Full primary narrative can be found in NFIRS 1S - Supplemental

M Authorization

4804

Wolfsberger, John

DC

C2

08/12/2024

Officer In Charge ID

Signature

Position or Rank

Assignment

Date

4804

Wolfsberger, John

DC

C2

08/12/2024

Member Making Report ID

Signature

Position or Rank

Assignment

Date

NFIRS-2 Fire

A

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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 ☐ Buildings Not Involved

Number of buildings involved

B3 ☒ None ☐ Less than 1 acre

Acres burned (outside fires)

C

On-Site Materials
Or Products

On-Site Materials
Storage Use

D

Ignition

D1 05-Entranceway, lobby

Area of Fire Origin

D2 13-Electrical arcing

Heat Source

D3 81-Electrical wire, cable insulation

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

30-Electrical failure, malfunction, other

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

None

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

H2

Mobile Property Type and Make

Mobile Property Type

Mobile Property Make

Local Use

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

Mobile Property Model

State

License Plate Number

Year

VIN

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 2 Number of Stories At/Above Grade 1 Number of Stories Below Grade	I4 Main Floor Size 1900 Total Square Feet OR BY Length (ft) X Width (ft)
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J1 Fire Origin 1 ☐ Below Grade Story of Fire 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
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		

L1 Presence of Detectors ☐ N - None Present ☐ 1 - Present ☒ 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	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
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	L4 Detector Operation ☐ 1 - Fire Too Small To Activate ☐ 2 - Operated ☐ 3 - Failed To Operate ☐ 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	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	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
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	M4 Number of Sprinkler Heads Operating Required if system operated	

NFIRS-1S Supplemental

A

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Searches were completed, and negative on all floors. The fire was controlled, overhaul completed, and a final washdown was conducted. Car 20-Fire Investigator Blank completed their investigation. DSI, Board-up, Department of Health, and gas/electric were all notified to respond. Crews were placed back in service and command was terminated.