NFIRS-1 Basic

A

62210	MN	11	27	2025	Station #4 (04)	SPFD251127060289	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Location Type

Census tract: 0344.00

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

703		4TH		ST-Street	E-East
Number	Prefix	Street or Highway		Street Type	Suffix

	Saint Paul		MN	55106
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

	Month	Day	Year	Time
Alarm	11	27	2025	16:59
Arrival	11	27	2025	17:02
Controlled				
Last Unit Cleared	11	27	2025	17:54

E2 Shifts and Alarms

C	1	D3
Shift or Platoon	Alarms	District

E3 Special Studies

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	12	0
EMS	1	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

Property: $ 6,000.00   ☐

Contents: $ [ ]   ☑

Pre-Incident Values: Optional   None

Property: $ 223,000.00   ☐

Contents: $ 1,000.00   ☐

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
☑ 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 ☐ 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:**

Saint Paul fire crews were dispatched to reports of smoke and fire inside a residence.

Crews arrived to find people outside of an up and down duplex with smoke showing from the 2nd floor side Delta.

Further investigation found smoke and fire emanating from a window on the stairwell going to the second floor, side D. Pre-connects were stretched, however light water extinguishers were utilized to extinguish the small fire coming from an approximate 3' x 6' window. Window was removed and overhaul removed siding both internal and external for full inspection and further extinguishment.

Board up was called and arrived to secure a window. A smoke detector was installed a top of stairwell for additional notification of residents. Fire cause remains under investigation by Car20-Back-up Fire Investigator Gregor.

M **Authorization**

Officer In Charge ID	Signature	Position or Rank	Assignment	Date
3321	Sampson, Steven	DC	C2	11/27/2025

Member Making Report ID	Signature	Position or Rank	Assignment	Date
3321	Sampson, Steven	DC	C2	11/27/2025

NFIRS-2 Fire

A

62210	MN	11	27	2025	Station #4 (04)	SPFD251127060289	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B

Property Details

B1 `1` ☐ 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

On-Site Materials Storage Use

D

Ignition

D1 `03-Interior stairway or ramp`

Area of Fire Origin

D2 `00-Heat source: other`

Heat Source

D3 `10-Structural component or finish, other`

Item First Ignited

D4 `63-Sawn wood, including all finished lumber`

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

`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

Mobile Property Model

Year

State   License Plate Number

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

`2`

Number of Stories
At/Above Grade

`1`

Number of Stories
Below Grade

I4
Main Floor Size

`900`

Total Square Feet

OR

_____ BY _____

Length (ft) X Width (ft)

J1
Fire Origin

`2`   ☐ 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